

Cabinet Meeting Resolution

Executive
Forward Plan
Reference

E3489

**Community Services Transformation Programme -
Preferred Delivery Options for 2024-25 and 2025-26**

Date of Meeting	9-Nov-23
The Issue	<p>B&NES provides advance notice of the following update decisions with regard to the Community Services Transformation.</p> <ul style="list-style-type: none"> a. update on progress of Adult Social Care Services transfer; b. approve funding for interim contract arrangement 2024/25; c. approve proposal for the Council to directly commission Public Health and Community Partner services as of April 2025; d. agree next phase for the Community Wellbeing Hub; and the council's role e. endorse continued engagement of relevant officers in the procurement process for the Integrated Community Based Care programme.
The decision	<p><u>Transfer of Adult Social Care services</u></p> <ul style="list-style-type: none"> 1. To note the update on progress of the transfer of Adult Social Care (ASC) services and the outcome of the internal audit. 2. To endorse continuation of the delegated responsibility for the transfer of ASC services to the Director of Adult Social Services, in consultation with the Lead Cabinet member for Adult Services, noting the November 2022 Cabinet approval for the transfer of ASC to B&NES Council (Transfer Decision Ref: E3393) including the delegated responsibility for the transfer of ASC services to the Director of Adult Social Services, and the commitment held against the social care reserve as a mitigation against any financial risk associated with the transfer following due diligence on current and future operating costs. Members will be aware of the underlying pressure on the Quarter 2 ASC revenue budget due to increasing demand in learning disability and older people services. The service is working hard to deliver in year mitigations to address revenue pressures. This is expected to place a demand on the ASC reserve to support the move to a balanced budget. <p><u>Commissioning of Public Health services</u></p> <ul style="list-style-type: none"> 3. To approve the delegated responsibility for the commissioning of Public Health services to the Director of Public Health and Prevention, in consultation with the Lead Cabinet member for Adult

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Services.

4. To endorse the proposal for the direct commissioning of Public Health services as of 1 April 2025 (through current arrangements via a mix of directly delivered and sub-contracted services by HCRG Care Group through existing contract arrangements until 31 March 2024) and subsequently the interim arrangements until 31 March 2025, as referred to below. Noting delegated authority for the future commissioning of these services sits with the Director of Public Health and Prevention.
5. To approve the revised best estimate of funding liability of £18,116,521 which includes contributions for Community Health, Public Health and Community Partners delivered services and the Council's contribution towards the Better Care Fund (BCF) for 2024/25 in respect of the approved proposal for an interim contractual arrangement. This is in accordance with the decision taken in July 2023 (see Update on Contractual Arrangement Decision 23/24 Ref: E3469) and services will be delivered within the existing budgetary envelopes.
6. To approve the proposals for the Council to commission Community Partner delivered services directly (excluding those in the Health strategic commissioning group, see Section 3.17 of the report) as of 1 April 2025 (currently delivered through the existing arrangement with the HCRG Care Group and proposed interim arrangements until 31 March 2025 as referred to below). Noting delegated authority for the future commissioning of these services sits with the Director of Adult Social Services and the Director of Public Health and Prevention Services.
7. To endorse the continued engagement and involvement of relevant officers in the procurement process for the Integrated Community Based Care programme, including the approach to selection, timelines and public engagement for community services beyond April 2025, as per the request from colleagues on the ICB Board noting any future decisions around commissioning decisions will be in accordance with existing delegations.
8. To agree ongoing support from officers to determine the strategic case for a Community Wellbeing Hub (CWH) and to agree to Phase 2 of the Outline Business Case (OBC) commencing to inform a final OBC. A subsequent paper will be presented to Cabinet at a later date (note existing arrangements from Section 3.26 of the report).

Rationale for decision

The internal audit for Programme One has now been concluded and the Assurance Rating given was Level 4 – Substantial Assurance: The systems of internal control are good, with a number of strengths evident and substantial assurance can be provided. It found that the assessment of the Key Control Objectives were all rated as "Good" and the overall

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governance and programme management arrangements in place for Programme One – ASC Transfer are "robust and comprehensive".

A separate appraisal was conducted for the Complex Health Team, and it was decided it should remain within the one-year contractual arrangement. This option preserves the existing model of clinical governance, prevents a risk of double TUPE for the staff, and ensures the "safe landing" (see Section 4.1 of the report for a definition) of a high-performing service for the interim period. Any future service review will be dependent on the ICB review and decision-making process.

The continuation of the delegated responsibility for the transfer of ASC services to the Director of Adult Social Services, and the commissioning of Public Health services to the Director of Public Health and Prevention ensures that these two programmes can progress effectively and that governance and assurance on both is appropriate.

Both programmes are delivered in consultation with the Lead Cabinet member for Adult Services who has oversight and is kept regularly informed of progress, risks, mitigations, and any potential constraints to overall programme delivery.

Preliminary cost effectiveness work suggests that there is a strong invest to save case for the Community Wellbeing Hub. The Outline Business Case (OBC) is already well developed with completion of the core requirements for a CWH, design principles for the delivery model, cost effectiveness estimations and a draft budget beyond April 2025.

Statutory areas of consideration have been assessed to ensure there is a "safe landing" of services. Safe landing refers to delivery of a regulatory compliant service from day one, with continuity of service provision and no impact on service users, that prevents destabilisation of the workforce and has a change process that is evidenced through audit.

The areas reviewed cover all Statutory duties of the Council, Safeguarding, Equalities, and Crime and Disorder.

The legal advice provided has supported the provision of Community Provider services through the interim contractual arrangement to allow the council time to review the service provision prior to commissioning and while a potential new procurement regime settles in.

Other options considered

All feasible options have been considered as part of the drafting of the business cases. This includes an HMT Green Book compliant long-list to short-list options appraisal process. The options selected to be taken forward represent those that best met the Investment Objectives and Critical Success Factors. These then underwent an economic appraisal, and the preferred option is the one found to deliver the highest cost-benefit ratio (CBR) and net present social value (NPSV).

The Decision is subject to Call-In within 5 working days of publication of the decision