

Bath & North East Somerset Council		
MEETING/ DECISION MAKER:	Children, Adults, Health & Wellbeing Policy Development Scrutiny Panel	
MEETING/ DECISION DATE:	5th February 2024	<small>EXECUTIVE FORWARD PLAN REFERENCE:</small>
TITLE:	Community Services Transformation Programme – Update	
WARD:	All	
AN OPEN PUBLIC ITEM		
List of attachments to this report: There are no attachments to this report.		

1. THE ISSUE

1.1 Bath and North-East Somerset Council (B&NES) and what is now the Bath and North East Somerset, Swindon & Wiltshire Integrated Care Board (BSW ICB) made a decision not to extend the HCRG Care Group contract for the three-year extension term in May 2022 (Non-extension Decision Ref: E3362). The current B&NES Integrated Community Health and Care Contract will cease 31 March 2024. The Council completed a detailed options appraisal, and a decision was taken to transfer Adult Social Care (ASC – Adult Social Work, Direct Payments and Adults with Learning Disabilities and Their Families) to B&NES Council in November 2022 (Transfer Decision Ref: E3393).

1.2 Three programmes were set up to deliver Community Services Transformation across the Council and Integrated Care Board (ICB):

- Programme One: Adult Social Care Redesign and Community Partners (Council led)
- Programme Two: Public Health (Council led)
- Programme Three: Integrated Community Based Care (Integrated Care Board led for Children’s and Adults Health Services)

1.3 A robust governance framework is in place for Community Services Transformation through the establishment of Programme Boards. Programme One

Board is chaired by the Director for Adult Social Services and Programme Two Board by the Director of Public Health. B&NES is represented at the Integrated Community Based Care Programme Three Board by the Director of Adult Social Services.

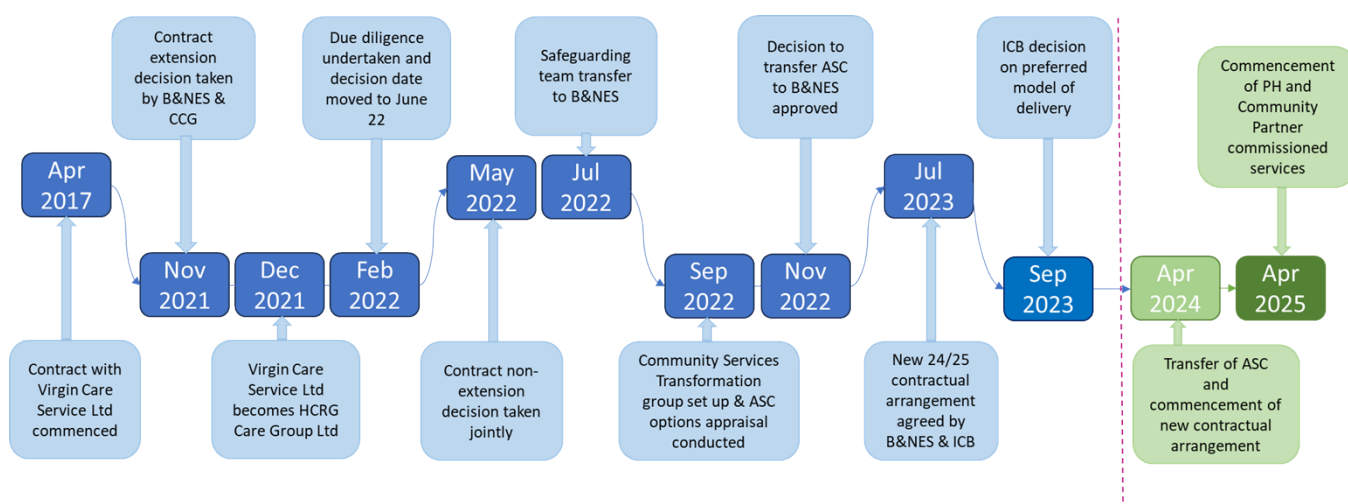
2. RECOMMENDATION

2.1 Panel are asked to:

- Note the progress updates for Community Services Transformation across Programmes One, Two and Three
- Note the progress update for the Community Wellbeing Hub and Direct Award 2024/25

3. THE REPORT

3.1 OVERVIEW OF THE JOURNEY FOR COMMUNITY SERVICES TRANSFORMATION



3.2 PROGRAMME ONE: ADULT SOCIAL CARE REDESIGN UPDATE

3.2.1 Approx 240 staff will transfer from HCRG Care Group to B&NES on 1st April 2024. The transfer will take staffing levels in the ASC Operations portfolio to 552, delivering 12 separate services. This level of staffing equates to ASC Operations being 19% and ASC Directorate 21% of total council workforce.

3.2.2 Since the last project update to Scrutiny on 9 October 2023, the project continues to make good progress and a safe transfer of services and workforce is on track for 1st April 2024. The final Employment Liability Information (ELI), which will provide detailed information about individuals who make up the workforce (such as names, terms & conditions and pay information) is yet to be received. TUPE guidance states that this final information will be received no later than 28 days prior to transfer, which in this case will be early March.

3.2.3 Officers from the project and operations team continue joint working with HCRG Care Group to exchange key information regarding services and the workforce due to transfer. Corporate support functions continue to be fully engaged in the project and these good collaborative arrangements underpin the transfer remaining on track.

3.2.4 The strong approach to project governance continues to work well and this was formally validated following an internal audit where the project governance and project management received a level 4 rating of substantial assurance.

3.2.5 During November, the formal staff consultation commenced and the 'measures' were announced. The consultation sessions were split between provider services (Learning Disabilities) and statutory Adult Social Care (ASC) functions. These formal consultations were jointly led by the Council and HCRG Care Group, with representation from trade unions and HCRG Care Group appointed staff representatives. In addition to the formal element of the consultation, presentations were given on Pensions, IT and Facilities. Questions were collated during the sessions and formal written responses have been provided. The project team continue to respond to any additional questions raised outside of the formal consultation sessions to support the transferring staff. The formal consultation will end on 29th January 2024.

3.2.6 Included in the 'measures' letter was a proposal to move teams currently based at St Martin's and in scope for transfer to B&NES corporate estate and these teams will be relocated to Cleeve Court. Representatives from these teams have been consulted separately and included in the planning and set-up of the space at Cleeve Court. It has now been confirmed where all teams and services will be based and this has been communicated to staff.

3.2.7 The project team continues to work positively with B&NES corporate functions to support the transfer with key project milestones being achieved in Jan 2024:

- HR workstream are working through critical TUPE requirements and other key HR & Organisational Development (OD) information
- Jointly agreed between both organisations that the council's recruitment process will apply for new vacancies from January 2024 onwards and will be jointly supported by representatives from both organisations during this interim period
- Development of a detailed induction and welcome pack for the transferring workforce
- All key elements of the payroll build have been completed and this is now in its testing phase. It is on track to meet the project deadline, with a caveat that this can only be fully completed once we receive the final ELI information (28 days prior to transfer)
- All required laptops and networking equipment have been delivered and in January the final IT procurement will be submitted and ordered
- Two of the services in scope for transfer are CQC registered - Shared Lives and Supported Living and both the Council and HCRG Care Group have submitted applications to CQC to notify of the change in provider
- For Learning Disabilities service the existing suppliers have been reviewed and the supplier list aligned with internal corporate functions where possible
- To ensure there will be no gap in service delivery for Learning Disabilities service users, we have entered into a one-year interim contract to continue to use the same five leased minibuses currently used across the day services

3.2.8 Key priorities for the final phase of the project will be IT set-up, installation and rollout of equipment and completion of the Business Transfer Agreement. Detailed plans are being developed to manage the IT process but much of this work will be completed once the final ELI information has been received. However, this has been planned thoroughly and remains on track for delivery. IT are working on a go-live

date of 2nd April 2024 as 1st April is a bank holiday. However, one of the provider services will work on that date and will therefore be prioritised for set up. The project team have recently received the first draft of the Business Transfer Agreement for review and will continue to work with HCRG Care Group to develop and finalise the agreement prior to transfer.

3.2.9 It is expected that details on Shared Lives carers from HCRG Care Group will be received by the end of January. Once received, all internal steps will be completed to ensure carers are set up for payment from day one as Shared Lives carers are not part of TUPE.

3.2.10 As the project enters the final pre-transfer phase, there remains a vast amount of activity to be completed to support a safe transfer and staff briefing sessions will continue with HCRG Care Group to share key information. Another key focus between January and April will be to work with HCRG Care Group to further develop and finalise a comprehensive communication plan for internal and external stakeholders.

3.2.11 The next Programme One Board meeting is being held on 15th February 2024 where the recommendation for the approach to quality assurance of the services post April 2024 will be endorsed. The project team will continue to provide assurance through monthly briefings to the Lead Member, regular review of the risk register, updates to Corporate Management Team, briefings to Trade Unions alongside the assurance of Programme One Board.

3.2.12 The three Community Partners who deliver subcontracted services to support the Adults with Learning Disabilities and their Families Service (Swallow, Keyring and Freeways) are included in the ICB Direct Award 2024/25.

3.3 PROGRAMME ONE: COMMUNITY PARTNERS UPDATE

3.3.1 During 2024/25 a full review of future commissioning intentions will be undertaken to inform new service specifications for the commissioning of Community Partner delivered services. This will support future service transformation and will enable a full value for money assessment across the services provided to ensure they best meet the needs of B&NES residents. This process will provide the strategic direction needed to inform the commissioning of these services within budgetary envelopes from April 2025.

3.3.2 Community Partners have been organised into the following strategic commissioning groups:

- Children's
- Adult's
- Public Health
- Housing
- and Health (which will sit with the ICB for commissioning)

3.3.3 Alongside planning this strategic work, engagement and involvement with the organisations currently delivering these services continues. This is delivered through the regular contract monitoring meetings and engagement events where partners come together to consider challenges experienced in the sector and identify opportunities for service improvement.

3.4 PROGRAMME TWO: PUBLIC HEALTH UPDATE

3.4.1 The Health and Social Care Act 2012 sets out a local authority's duty to improve and protect health. From 1st April 2013 the responsibility for commissioning public health services transferred from the NHS to local authorities and below provides details of the specific Public Health services which are included in the Community Services Transformation Programme:

- Public Health Nursing Services
- Substance Misuse Services
- Wellness Service
- NHS Health Checks
- Sexual Health Services (delivered through Primary Care and Community Pharmacies)
- Children's Safety Equipment

3.4.2 Due to the variations of delivery, service offers and interdependencies associated with each of the services, a dedicated workstream and Programme Board for Public Health was required and the first Public Health Programme Board (Programme Two) was held on 23rd September 2022 where an overview of the services, pathways, commissioning arrangements and emerging interdependencies was shared.

3.4.3 Strategic objectives for the Public Health Programme were agreed as follows:

1. To ensure future commissioning of public health services focused on prevention and tackling health inequalities.
2. To review, redesign and optimise public health contract delivery to ensure future models area based on evidence of effectiveness and good practice
3. Ensure public health services are able to meet both national requirements and emerging local priorities and needs in a timely manner
4. To ensure that the commissioning of future public health services and programmes is person-centred and based on identified population needs
5. To ensure statutory public health functions are undertaken
6. To build on learning from successful initiatives and integrated ways of working delivered within existing public health contracts
7. To collaborate and consider ways to achieve positive population health outcomes across the system.
8. Collaboratively encourage innovation for sustainable solutions

3.4.4 A Public Health options appraisal workshop was held in November 2022 and attended by colleagues from Programmes One and Three as well as Procurement, HR, Finance, Business Change and Global City Futures who have provided programme management support. As part of the initial options appraisal process, meetings also took place between Public Health Development and Commissioning

Managers and HCRG Care Group colleagues who oversee the delivery of public health services. These helped to identify interdependencies between services to inform areas to consider for future delivery models.

3.4.5 There has since been continued appraisal of the preferred options and robust outline business cases (OBCs) have been developed for each service, with the exception of the Children's Safety Equipment (CSE) service. The OBCs are based on the 5 Case Business Model and include a strategic, economic, commercial, financial and management case. In September 2023, the Public Health Programme Board endorsed the recommendation for all the services and existing contract arrangements (apart from the CSE service) to continue in the ICB led Direct Award until 31 March 2025. Responsibility for the Children's Safety Equipment (CSE) returns to the Council from April 2024 with the expectation that an alternative delivery option will be explored.

3.4.6 The Programme Board continues to meet every six weeks to consider updates and progress for each of the services and to review interdependencies, challenges and to oversee the Programme Two Risk Register. The top risk identified is associated with the available funding not being enough to cover future service delivery requirements, as all future commissioning needs to be covered by the Public Health grant.

3.4.7 Alongside the development of each of the Outline Business Cases, there has been ongoing consideration of future procurement and assessing the most appropriate procurement framework, particularly since the new Provider Selection Regime was announced as coming into effect from 1st January 2024.

3.4.8 On 9th January 2024, the Programme Board approved the commissioning intentions for the Public Health services. The Public Health Development and Commissioning Managers are now reviewing and confirming the available budget envelope, developing draft service specifications, and reviewing procurement plans and timelines with a view for new contracts to be in place from April 2025, with an alternative delivery model for the Children's Safety Equipment service from April 2024.

3.4.9 Programme Two will continue to liaise with Programme One (Adult Social Care Redesign and Community Partners) and Programme Three (Integrated Community Based Care) to ensure identified interdependencies are addressed and to finalise the decision-making gateways required to enable the commencement of activity to secure public health services from April 2025.

3.5 PROGRAMME THREE: INTEGRATED COMMUNITY BASED CARE UPDATE

3.5.1 On 9th November 2023 Cabinet endorsed the continued engagement and involvement of relevant officers in the procurement process for the Integrated Community Based Care Programme. As per the request from colleagues on the ICB Board, this included the approach to selection, timelines and public engagement for community services beyond April 2025, noting that any future decisions around commissioning decisions will be in accordance with existing delegations.

3.5.2 Programme Three continues to progress well, with co-ordination at a BSW level being provided by a dedicated Programme Team.

3.6 DIRECT AWARD UPDATE

3.6.1 On 9th November 2023 B&NES Cabinet approved the best estimate of funding contribution for the 1 year Direct Award, including contributions for Community Health, Public Health and Community Partner delivered services and the Council's contribution towards the Better Care Fund (BCF) for 2024/25. This is in accordance with the decision taken in July 2023 (Update on Contractual Arrangement Decision Ref: E3469).

3.6.2 The ICB as Co-ordinating Commissioner will finalise contract negotiations and issue a contract to HCRG Care Group covering services delivered in Wiltshire and B&NES. Commissioning intentions for services to be included in the new contract continue to be finalised and agreed with HCRG Care Group. The final funding allocation position from B&NES, as a Co-Commissioner, for services included in the Direct Award to be finalised in February 2024 when Cabinet approve the budget for 2024/25. B&NES has been working with ICB contracting colleagues to develop proposals for continued robust contract monitoring and governance arrangements for 2024/25. This was presented at the December 2023 Contract Quality and Performance Meeting to HCRG Care Group.

3.7 COMMUNITY WELLBEING HUB UPDATE

3.7.1 The aim of the Community Wellbeing Hub (CWH) is to be the “front door” for prevention and early help support for residents across B&NES. It does this by providing specialist triage, referral to community services, and enabling organisations (through a shared referral system and operating framework) to work together; seeking to “*sustain, support and improve the wellbeing of BANES residents by working together across partner organisations to be collectively responsive to the changing needs of our communities*” (from the *CWH Business Plan: Beyond 2024*, developed by the CWH Partnership).

3.7.2 In line with Cabinet approval in November 2023, an Outline Business Case (OBC) is being developed for the CWH that will set out a sustainable business model along with the recommended commissioning and partnership arrangements, to inform the securing of long-term funding for the Hub beyond March 2025.

3.7.3 There are a number of interdependencies with the wider Community Services Transformation Programme. Whilst the majority of CWH functions are not commissioned and rely on partnership working between B&NES Council, ICB and third sector partners, the specialist triage function of the CWH is currently provided by HCRG Care Group and commissioned through the Public Health-funded Wellness Service. The specialist triage function is a core requirement of the CWH as it consists of the Advisors that manage the online referrals and telephone calls to the CWH. There is therefore an interdependency with Public Health Programme Two of the Community Services Transformation work. As the existing specialist triage function works closely with the Care Co-ordination Centre (CCC, also provided by HCRG Care Group) commissioned by the ICB, and the favoured direction of travel is to integrate adult social care and health front doors further to maximise joined-up support and care for our residents, there are also interdependencies with Programme Three.

3.7.4 The CWH currently has agreed funding until the end of March 2025. The CWH has to date been funded via the Covid Outbreak Management Fund (COMF), Improved Better Care funding (iBCF), and BSW health inequalities funding. All of

these funding sources have either ceased (COMF) or are not a sustainable income source, so alternative income streams are being explored. Budget options and their implications for what functions the CWH can deliver and its scalability (i.e. referral capacity), are currently being considered to inform the OBC and future 2025/26 budget discussions.

4. STATUTORY CONSIDERATIONS

4.1 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 destabilization of the workforce and has a change process that is evidenced through audit.

4.2 On 9th November 2023 Cabinet approved the following for Programmes One and Two:

- 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.
- Proposals for the Council to commission Community Partner delivered services directly (excluding those in the Health strategic commissioning group) as of 1 April 2025. 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.
- 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 Services and the proposal for the direct commissioning of services as of 1 April 2025 was endorsed.

5 RESOURCE IMPLICATIONS (FINANCE, PROPERTY, PEOPLE)

5.1 ASC Transfer mobilisation costs of £971k have been incurred up to December 2023. Work is ongoing to monitor future mobilisation costs required up to the end of March 2024 to ensure the safe landing of ASC services.

5.2 It is estimated that the transfer in of the ASC service will create a budgetary pressure of c.£1 million in the first year when it transfers back to the Council. Mitigations have been proposed and the practice framework that will support the management of these cost pressures is already in place. At the point of transfer there is overhead funding for corporate support services of £1.1m to transfer back to the Resources portfolio from Adult Services. This value will be passed to the appropriate corporate resources functions that will be supporting the service on going.

5.3 Public Health – all services to be managed within the Public Health grant envelope.

6 RISK MANAGEMENT

6.1 A risk assessment relating to the issue and recommendations has been undertaken, in compliance with the Council's decision-making risk management guidance.

6.2 Risk registers are in place for ASC Transfer, Community Partners, Public Health, and the 1 year Direct Award. Risk registers are updated frequently and reported at Programme Board and the Lead Member is updated at a monthly briefing.

6.3 Community Services Transformation is also monitored for ASC Transfer and Community Partners through the ASC Risk Register. The Corporate Risk Register is updated for Community Services Transformation and ceasing of current contract with HCRG Care Group as of 31 March 2024. The project team provide updates to the Council's Corporate Risk Group on the ASC Transfer and wider implications of Community Services Transformation.

6.4 B&NES sought independent legal advice on the interim contractual arrangement (Direct Award) to help mitigate against procurement challenge and protect against some of the consequences of a procurement challenge. This advised that the Council will retain the procurement risk relating to the future award and provided advice on potential risk mitigating strategies. Noting such strategies should be coordinated with that of the ICB to agree a joint mitigation strategy.

7 EQUALITIES

7.1 The impact on health inequalities and duties to those with protected characteristics under equalities legislation has also been considered and documented in fulfilment of the legal duties in these areas.

7.2 The Council has completed proportionate EIA reviews for ASC Transfer, Public Health and Community Partner delivered services. The ICB will complete the EIA for Community Health services.

8 CLIMATE CHANGE

8.1 No negative impacts are expected from the proposed new delivery models on climate change. The proposed service delivery arrangements will be comparable to the existing provision for Adult Social Care, Public Health, Community Health and Community Partner delivered services.

9 OTHER OPTIONS CONSIDERED

9.1 All feasible options have been considered as part of the drafting of the business cases for Programmes One and Two. This includes an HMT Green Book compliant long-list to short-list options appraisal process. The options selected to be taken forward represented 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).

10 CONSULTATION

10.1 There has been extensive collaborative consultation between the Council and the ICB throughout the delivery of the programmes to date. Representatives from the ICB have been involved in all applicable workshops and have provided comments and review of all preparatory documentation to inform the options appraisal process and council decision making governance.

10.2 There have been detailed briefings and reviews through the delivery of the programmes carried out by internal council stakeholders including the council's Statutory Officers, Directors, and the Corporate Management Team.

10.3 The council has been informing and consulting Trade Union representatives monthly since November 2022 on the ASC Transfer.

10.4 HCRG Care Group invited Council officers and Trade Union representatives in November 2023, to attend their staff sessions to give information about TUPE, share information about the council service and respond to questions. There have been three staff sessions (22 May 2023, 8 June 2023 and 27 November 2023). The next staff briefing sessions are schedule for February 2024.

10.5 Council officers and the ICB have jointly held engagement events for Community Partners throughout the programme in September 2022, March 2023, June 2023 and a briefing session was also held on 28th November 2023.

Contact person	Suzanne Westhead Director Adult Social Services
Background papers	<ul style="list-style-type: none">• Non-extension Decision Reference E3362• Transfer Decision Reference E3393• Community Services Transformation Programme – Update on Contract Arrangements for 2024/25 Decision Reference E3469• Community Services Transformation Programme – Preferred delivery options for 2024/25 and 2025/26 Decision Reference E3489 <p>These are available for inspection on B&NES Council website</p>
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