

Meeting: Cabinet

Date: 18 June 2009

Subject: Future partnership governance

arrangements for adult health and social

care in Harrow

Key Decision: Yes

Responsible Officer: Paul Najsarek, Corporate Director of

Adults and Housing Services

Portfolio Holder: Cllr Barry Macleod-Cullinane, Portfolio

Holder for Adults and Housing

Exempt: No

Enclosures: Appendix 1a – Consultation Document

Appendix 1b - Proposed structure

Appendix 2 – Analysis of Responses to

Consultation

Appendix 3 – Proposed revised structure

Appendix 4 – Proposed Terms of

Reference – Adult Health and Well-being

Partnership

Appendix 5 – Proposed Terms of

Reference – Joint Commissioning Board

Section 1 – Summary and Recommendations

This report sets out the findings from the recent consultation about the future partnership governance arrangements for adult health and social care in Harrow.

Recommendations:

Cabinet is requested to:

- Agree to the proposal to replace the Adult Health and Social Care Management Group with the Adult Health and Well-being Partnership; and
- 2. Agree to the proposal to establish an Adult Joint Commissioning Board; and

- 3. Agree the proposed terms of reference for both bodies.
- 4. Delegate to the Adult Health and Well-being Partnership responsibility for decisions about the structure of the delivery groups supporting the work of the Partnership.
- 5. Note the intention to strengthen the role of the Local Safeguarding Adults Board and to clarify the reporting lines consistent with the structure at Appendix 3.

Reason: (For recommendation)

To improve the current partnership governance arrangements for adult health and social care in Harrow in order to provide direction for this service taking into account local needs, national direction and the Harrow Strategic Partnership and Local Area Agreement priorities.

Section 2 - Report

Introduction

 The proposed changes to the existing partnership arrangements for adult health and social care contained in this report support the Council and NHS Harrow vision to support vulnerable people and build stronger communities. The proposals also support Harrow Strategic Partnership's vision to make a measurable improvement to the quality of life of the people of Harrow through robust and inclusive partnership working.

Background and Options Considered

- 2. The current Adult Health and Social Care Management Group is one of a number of Management Groups accountable to the Harrow Strategic Partnership for the achievement of priorities.
- 3. The proposals contained in the consultation paper were drawn up following discussions between the Corporate Director of Adults and Housing, NHS Harrow's Chief Executive and the Joint Director of Public Health. The document also builds upon discussion that took place at the October 2008 meeting of the Adult Health and Social Care Management Group.
- 4. The proposals set out in the consultation paper were informed by research into governance models elsewhere in the country; relevant learning drawn from the Audit Commission's recent report entitled 'Are we there yet? Improving governance and resource management in Children's Trusts.' The proposals also reflected the recently revised arrangements for the wider Harrow Strategic Partnership.

Why a change is needed

5. The Service Inspection of Learning Disability undertaken by CSCI in January 2008 and the Learning Disability Joint Review undertaken by a joint review team in October 2008 highlighted the need to strengthen the Learning Disability Partnership Board within the broader context of partnership governance arrangements for adult health and social care.

- A specific recommendation was to strengthen the capacity of members of partnership boards to hold statutory services to account for service delivery and performance.
- 6. The advent of a National Indicator Set and the development of Harrow's Local Area Agreement require a number of the indicators to be delivered in partnership. Similarly the new Performance Assessment Framework for Adult Social Care requires joint working with other areas of the Council and partners to deliver the priorities for health, well-being and social care in Harrow.
- 7. The need to clarify the role of the Local Safeguarding Adults Board, its remit to work across and beyond the Health and Well-being Partnership and its accountability through the executive structures of Harrow Council and NHS Harrow as well as other agencies.
- 8. The development of partnership working is leading to more joint commissioning of services with pooled budgets and formal agreements (Section 75) which need to be managed through the partnership.
- 9. The requirement to separate out the roles of purchaser and provider within the NHS.
- 10. The separation of executive decisions from consultative arrangements and clarifying the roles and responsibilities of the various bodies.
- 11. Ensuring that a strong user and carer voice is developed and supported to participate fully at all levels within the partnership.
- 12. The development of structures that focus on well-being outcomes for all adults with all partners represented.

Consultation

- 13. The consultation document is attached at Appendix 1. The key proposals on which we consulted were:
 - To replace the existing Adult Health and Social Care
 Management Group with an Adult Health and Well-being Board with revised terms of reference and membership.
 - b. To establish a Joint Commissioning Board or Adults' Trust.
- 14. The consultation was conducted over a period of 9 weeks from 19 January to 20 March. The consultation was sent to members of the partnership boards, voluntary organisations, and statutory partners. The documents were published on the web with the option to complete an online survey. The consultation document was an agenda item on meetings of individual partnership boards and in addition two public meetings were held.
- 15. A summary of responses to the consultation is attached at Appendix 2. The key findings from this are:

- a) There is broad support for the proposals about the high level structure set out in the consultation document although a number of specific points were raised:
 - The Adult Health and Well-Being Board should be re-titled Adult Health and Well-Being Partnership with one view expressed that this should be simply the Adult Well-being Partnership.
 - ii. The term 'Adults' Trust' implied a legal status and therefore Joint Commissioning Board was preferred.
 - iii. Terms of reference would be critical to ensure clarity of the role of each of these groups and ensure that the Adult Health and Well-being Partnership was not marginalised or becomes merely a 'talking shop'.
- b) There is a body of support for moving away from the existing structure of partnership boards to one which reflects the way that people lead their lives. However this is not universal and the Learning Disability Partnership Board (as well as some other individuals) felt very strongly that this runs counter to Government policy set out in Valuing People Now. Other views support the principle of moving in this direction but suggest that further development of partnership boards needs to take place to enable this to happen. In the meantime Partnership Boards should focus on life episodes/themes as part of their work programmes.
- c) The Safeguarding Board needs to have right of access to all other parts of the structure as required to deliver objectives. The role of the Local Safeguarding Adults Board should therefore be strengthened and situated appropriately within the Harrow Strategic Partnership. Its role is to challenge partners as well as to report on progress through the Harrow Chief Executives' Board as well as the executive structures of the Council, NHS Harrow and other agencies.
- d) There is strong support for the involvement of service users and carers in the governance structures as well as recruitment and project design and that this should be seen as good practice and the norm. The point is made that such involvement will require investment of time, people and resources to ensure that individuals can be adequately supported to fully participate.
- e) Partnership Boards are seen to be crucial to monitoring performance and holding statutory bodies to account. Again the user and carer experience is central to this and link to the comments made above.
- f) There are mixed views about the model adopted by the Learning Disability Partnership Board of a user being appointed as co-chair. The key point from respondents is that all users and carers need to be supported effectively to participate fully in the process and that investment will be needed to empower users and carers in these roles.
- g) There is mixed support for partnership boards being chaired by senior officers from other organisations or directorates of the Council. It is felt that this would bring a degree of independence and external challenge

- but without detailed knowledge or understanding of the subject area this might limit their effectiveness.
- h) There is strong support for developing and applying a user and carer involvement strategy across the Council and other statutory organisations. It is clear that users and carers will need to play a lead role in this and it is suggested that the Council and NHS Harrow may not be the most appropriate bodies to lead this work.
- i) There are mixed views about how the Local Involvement Network (LINk) should relate to the governance structures for the partnership. As an important independent voice of the experience of users and carers it is critical that there should be some engagement and it may be that the LINk is best placed to comment on the structure of any relationship.
- j) There is acknowledgement of a need to ensure that relationships between the different elements of the Harrow Strategic Partnership and the range of reference groups are effective. The Adult Health and Well-Being Board will need to consider how best this can be achieved in agreeing its membership.

Recommended Proposal

- 16. As a result of the feedback received through the consultation Cabinet are being recommended to:
 - Agree to an amended proposal to replace the Adult Health and Social Care Management Group with the Adult Health and Wellbeing Partnership.
 - b. Agree to the proposal to establish an Adult Joint Commissioning Board.
 - c. Agree the proposed terms of reference for both bodies.
 - d. Delegate to the Adult Health and Well-being Partnership responsibility for decisions about the structure of the delivery groups supporting the work of the Partnership.
 - e. Note the need to strengthen the role of the Local Safeguarding Adults Board and to clarify the reporting lines consistent with the structure at Appendix 3.

Equalities Impact

17. An Equality Impact Assessment has been undertaken. Consideration of equalities matters is integral to the work of the partnership and its delivery groups. The proposals, if adopted, will strengthen the voice of users and carers at all levels within the partnership.

Legal Comments

18. The Adult Health and Well-being Partnership and Adult Joint Commissioning Board will be required to comply with the Council's schemes of delegations and accountability arrangements as contained in the Council's Constitution. They will need to report to Cabinet and

the appropriate NHS bodies specifically in relation to allocation of resources or policy commitments.

Financial Implications

- 19. The costs of implementing these proposals will be contained within the existing revenue budgets of Adults and Housing Service and NHS Harrow.
- 20. There will need to be effective financial management arrangements in place for monitoring and reporting purposes. Regular financial reporting including output information will need to be integral to the governance arrangements.

Performance Issues

21. Adult Health and Wellbeing Partnership will be responsible for the delivery of the key partnership targets which are included the current Local Area Agreement, specifically:

Indicator	2008-9 performance	LAA Target 2010/11	Comparator (where available)
NI 39 Alcohol harm related hospital admissions	Not yet available, 2007- 8 baseline is 1100	1463 – represents a reduction in the rate of increase	Definition changed, comparator data not yet available
NI 130 Self directed support	15%	35%	New indicator, no comparator information available.
NI 135 Carers services	43%	62%	New indicator, no comparator information available.
NI 134 Emergency bed days	Not yet available - 2007-8 baseline is 78690	74,061	2% decrease agreed with central government
NI 136 People helped to live independently	3583 per 100,000	2924 per 100,000 LAA target already exceeded – internal stretch of 4000 set for 2009-10	New indicator, no comparator information available.
NI 146 Adults with Learning Disabilities in employment	7.7%	Target being set with GOL	13% top quartile
NI 149 Adults with mental health problems in settled accommodation	83.2%	Target being set with GOL	New indicator, no comparator information available.

22. Effective monitoring and action on these by the partnership will be critical to their delivery.

- 23. The proposed structure will ensure an effective understanding of local need exists, gleaned through mechanisms such as the Joint Strategic Needs Assessment. It will also ensure appropriate objectives and priorities are being set and delivered through key partnership mechanisms such as the Sustainable Community Strategy and Local Area Agreement. This will also facilitate the review of outcomes of external inspections and monitor related improvement activity.
- 24. The proposed bodies will oversee implementation of a rolling program of work, led by delivery groups, around adult health and social care designed to meet key objectives. Users and carers, through their membership of delivery groups and the Health and Well-being Partnership Board will be central to performance management arrangements within the partnership.

Environmental Impact

25. There are no environmental implications arising from this report.

Risk Management Implications

Risk included on Directorate risk register? No

Separate risk register in place? No

26. There are no new risks associated with this proposal.

Section 3 - Statutory Officer Clearance

Name: Jennifer Hydari Date: 22 May 2009	X	on behalf of the* Chief Financial Officer		
Name: Jessica Farmer Date: 21 May 2009	X	on behalf of the* Monitoring Officer		
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Section 4 – Performance Officer Clearance				
Name: David Harrington	X	on behalf of the* Divisional Director		

Section 5 – Environmental Impact Officer Clearance

Name: Andrew Baker

Name: Andrew Baker

X

Divisional Director (Environmental Services)

Section 6 - Contact Details and Background Papers

Contact:

Mark Gillett – Divisional Director Commissioning and Partnerships Mark.gillett@harrow.gov.uk
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Background Papers:

Consultation Document - Future Partnership Governance Arrangements for Adult Health and Social Care in Harrow (Appendix 1)