

## Perth and Kinross Integration Joint Board

16 February 2022

## BUILDING MANAGEMENT CAPACITY AND RESILIENCE IN THE HEALTH AND SOCIAL CARE PARTNERSHIP

## Gordon Paterson, Chief Officer/Director- Integrated Health & Social Care (Report No. G/22/13)

# PURPOSE OF REPORT

This report seeks IJB approval of proposals for enhancing management capacity in the Health and Social Care Partnership. These seek to address the shortfalls identified in previous inspection and audit reports and to equip the HSCP with the leadership capacity to deliver on a significant programme of transformation, aligned to Scottish Government policy and incorporated in our Strategic Delivery Plans.

## 1. **RECOMMENDATION**

Perth and Kinross IJB Members are asked to:

- note the extent of new demand and capacity pressures impacting on the HSCP.
- approve the proposed additional management capacity as outlined in the section 4.5 of this report.

## 2. BACKGROUND

- 2.1 The highly critical Joint Inspection of Perth and Kinross HSCP highlighted the need to deliver improvements across a range of service areas, including in performance management, strategic planning, commissioning, community engagement and support to IJB Members.
- 2.2 The common feature of many of the inspection recommendations was a lack of management capacity to deliver on the HSCP's workplan, priorities and ambition. This applied to operational management arrangements in both health and in adult social care/social work and, critically, to capacity within the HSCP's corporate services and key support functions.
- 2.3 Subsequent audit reports, as well as our Strategic Risk Register, reiterate the need to build management capacity to improve the performance, functioning and effectiveness of the HSCP in delivering the actions necessary to achieve the IJB's strategic priorities.

## 3. ASSESSMENT

- 3.1 The Chief Officer's efforts to advance a restructure to seek to deliver a more integrated approach within the HSCP, to reduce duplication, enhance capacity and improve performance have been severely curtailed by the demands of the pandemic. This though hasn't precluded us from putting in place some capacity to deliver an effective response to both the pandemic and the inspection recommendations.
- 3.2 However, as the prospect of a wider restructure was being proposed it has only been possible to appoint to several key posts on an interim basis. Consequently, we have a range of post that have been temporary for many months, with extended backfill arrangements and some vacancies that are more difficult to fill due to their short-term nature.
- 3.3 Given the fragility and risks arising from these arrangements, the Chief Officer determined that he would *not* advance a restructure of the Executive Management Team but would instead allow members of the EMT to bring forward proposals for consolidating the management structures in their service areas, to build resilience and capacity to deliver. This recognised the need to consolidate some of the temporary arrangements at third and then fourth tier levels in the organisation as a priority and without further delay.
- 3.4 The need for this revised approach has been reflected in our updates to the IJB Audit & Performance Committee in relation to implementation of External Audit recommendations and has been presented as mitigation on the IJB's Strategic Risk Register and improvements on our Improvement Plan. This was reported to the Audit and Performance Committee in December 2021, as the necessary action to mitigate risks and build resilience in the HSCP.

- 3.5 In addition to the extant capacity challenges impacting on the HSCP and the precarious nature of some of temporary arrangements we have introduced, the HSCP is facing further significant demands.
  - The pandemic has tested staff resilience, placed new demands and responsibilities onto the HSCP and introduced new ways of working and new reporting requirements.
  - The Scottish Government require HSCPs to; uplift the rate paid to social care workers; enhance the capacity and resilience of Care at Home Services; to introduce interim placements in care homes to alleviate pressures on acute hospitals; to report on activity, performance, and effectiveness; and they have provided significant additional resources to support this and other necessary investments on both a recurring and non-recurring basis.
  - In parallel we are working with partners to undertake a fundamental review and redesign of care pathways, in line with Scottish Government direction, aimed at improving operational performance by preventing admission to hospital, reducing length of stay and supporting early discharge and which will enable people to remain at home, safely and independently for as long as possible. This includes Urgent Care, Discharge Without Delay and Hospital at Home. These programmes of work require an acceleration of planned work within the Older Peoples Strategic Delivery Plan to be consider by the IJB in March.
  - Over and above this challenging programme of improvement work, we have developed our suite of Strategic Delivery Plans which set out an ambitious transformation programme to be delivered over the next three years. This will improve services for Older People, People with Mental Health Problems, our Substance Misuse Services and People with Autism or a Learning Disability. We are also embarking on the developing of a Primary Care Strategic Delivery Plan. Investment of almost £20m is being made across our transformation programme.

## 4. PROPOSAL

- 4.1 Given the significant extant and the more recent additional demands facing the HSCP it is proposed that, in addition to the significant investment in frontline delivery, we now put in place the management capacity to provide the necessary infrastructure in both operational and corporate services.
- 4.2 This is necessary to build capacity across three main service areas, to meet growing demands and expectation and ensure we can provide oversight, leadership, and coordination, while engaging with stakeholders, reporting on impact and outcomes, mitigating risks, and supporting the IJB. It seeks to put in place an adequate and more robust infrastructure to effectively deliver on all that is asked of us, consolidate improvements and enhance the effectiveness and functioning of the HSCP.
- 4.3 Members of the Executive Management Team have brought forward the case for additional posts in their service area and these are supported by the EMT and recommended to the IJB. In each service area we are looking to appoint two

Senior/Service Managers, in each case one post is to address temporary arrangements that have been in place for in some cases two years now and one post is new reflecting the further demands being faced and our ambitious work programme.

- 4.4 The proposed posts can be funded on a recurring basis from existing resources, from the additional investment for management capacity that the IJB secured in last year's budget or principally from the significant additional investment provided by the Scottish Government this year and recurringly.
- 4.5 The proposed posts will work in the following areas;

**Health**: to lead strategically on Mental Health and the implementation of the Perth and Kinross Mental Health and Wellbeing Strategy linking to pan-Tayside work in relation to 'Listen, Learn, Change'. Also, to provide additional strategic capacity in respect of Older People Services, to support operational delivery and provide dedicated strategic leadership on new pathways of Urgent Care and Discharge Without Delay. This will also interplay with and support work on the review, resilience, and sustainability of our Community Hospitals.

Adult Social Work and Social Care: to lead on Commissioning, Contracts, Community Engagement and Community Development. Also, to address temporary arrangements and provide dedicated management support to Care at Home and HART and to our In-House Care Home and Day Care/Day Opportunities services.

**Corporate Services:** to consolidate improvements achieved to date, while developing further our approach and effectiveness in; performance reporting; strategic planning; workforce planning; finance; audit, risk and governance; communications and IJB Member support. This does not require new investment but will utilise the previous investment set aside by the IJB for Strategic Planning and Performance as part of the 2021/22 Budget.

## 5. **RECOMMENDATION**

- 5.1 The HSCP proposes to commit the majority of the additional investment we are now receiving from the Scottish Government into frontline services and staff. We have incorporated this investment and aligned the Scottish Government's workstreams with the IJB's strategic priorities through the suite of Strategic Delivery Plans we will be bringing forward over the coming months.
- 5.2 However, this report highlights to IJB Members the longstanding capacity challenges within the HSCP and the potential that these will be compounded by the new demands and challenges being faced. In response, to prevent us from losing the progress and improvements we have advanced over the past two years and to ensure adequate management capacity to lead, direct, support and deliver on a range of initiatives this report seeks approval to enhance management capacity and resilience within the HSCP.
- 5.3 The proposed increased capacity will enhance the effectiveness and functioning of both the HSCP and the IJB and will support the delivery of the IJB's strategic

objectives. It will also allow for some rationalisation of existing management portfolios to reduce duplication and enable further integration and improvement over the next few years and before the advent of a National Care Service. Net investment of £0.580m is proposed after realignment of existing budgets and efficiencies.

5.4 It is recommended that the IJB approve the additional management capacity outlined in the report.

#### Author(s)

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**NOTE:** No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information), were relied on to any material extent in preparing this report.