

Agenda Item No. 8e

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| Committee: | Scrutiny Committee for Social Services & Health |
| Date: | 27 March 2002 |
| Title of Report: | Review of Social Services Relationship with Other Agencies |
| By: | Director of Social Services |
| Purpose of Report: | Update to Social Services response to the Scrutiny Committee for a Healthy Community report by the Project Board |

RECOMMENDATION:

To note the response and actions to be taken.

1. FINANCIAL APPRAISAL

There are no financial implications.

2. INTRODUCTION

2.1 This update report should be read in conjunction with the previous reports of 20.3.01 and 6.9.01.

2.2 The report comes at a time of change for the department and a number of key partners, particularly for health services, with changing expectations at a local and national level about the development of closer integration of services. Within this context, the creation of increasingly effective partnership working practices will always be 'work in progress'.

3. UPDATE TO RECOMMENDATIONS OF REPORT DATED 20.3.01

The update to the recommendations is attached as Appendix 1

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Update to Recommendations of Report Dated 20 March 2001

(Scrutiny Committee report recommendations given in Italics)

R1 *'Continue to develop the areas of good partnership practice recognised by this review.'*

Since the Social Services Department reorganisation in the spring of 2001, the quality of the relationships with external agencies and voluntary organisations has continued to improve and the relationships between officers have become increasingly important.

It is acknowledged that the autumn of 2001 and spring of 2002 have been testing times for the Department's relationships with the voluntary sector given the budget process and the need to reduce the Social Services budget by £4.2m. The reduction in the 'Promoting Independence Grant', the 'Community Partnership Finance Grant' and the Community Development Team, have all had a substantial impact which has affected the relationship with the voluntary sector in particular. The Department, however remains committed to the principles of transparency and fairness in its partnership work with the voluntary sector, and is actively working to ensure that the future relationship is good.

The Social Services Department's working relationship with the PCTs and PCGs remains strong, and in a number of areas we are working very closely together as detailed below.

R2 *'In developing future relationships with partners and other agencies take note of the lessons that can be learnt from this review in relation to:*

R2.1 *'The process for consulting'*

The Department has continued to work to the standards of the Departmental Consultation Strategy. Examples of active consultation with partner organisations include the review of the Social Services Eligibility Criteria, the Day Care Review and the East Sussex Social Services Joint Review (which took place in the Autumn 01)

In February 02 the Department nominated a member of staff to work on the development of the 'Compact with Voluntary and Community Sector'. This important initiative will provide the standards of practice for work with voluntary organisations.

R2.2 *'Dealing with the perception of being a centralist organisation.'*

The perception that the department is a very centralised organisation, whilst still around, is now out of date. This is increasingly being recognised by our partners as we develop new ways of working and devolve responsibilities to local health economies. It is recognised in a review by Steven Fash – Development Director Surrey and Sussex Strategic Health Authority that the 'organisational turmoil' within

the NHS has limited the potential of collaborative working, but that within this situation there have been good working relationships with the Department. The appointment of two Partnership Managers in the Policy and Performance Review Unit has given the Department the capacity to engage in the agenda for modernising service provision and to work creatively with other service providers, voluntary organisations and community groups.

Within the two operational divisions of the Department, a range of initiatives have been developed to realign services and service priorities to incorporate the health improvement agenda. We are, for example, appointing commissioning managers to develop services at a more local level.

The Department has taken a major role in developing a range of new initiatives for the County including four new Sure Start areas and a countywide Children's Fund Project.

It has been agreed that members of the restructured Community Development Team will be based within the Primary Care Trusts, and will be managed in co-ordination with the PCT development activity.

R2.3 'Empowerment of local managers.'

The department remains committed to the empowerment of local managers. A series of 'Managing Performance' workshops has taken place with Resource Officers, Practice Managers and Operations Managers in all areas of work. This allowed discussion of the role that they can play in helping the Department improve performance in areas of work as identified by the Performance Assessment Framework (PAF) Indicators, set by the Department of Health. Included within this was the development of local performance indicators as identified within internal team plans. We are also in the process of devolving budgets to local managers to align decision-making responsibility for services with budget responsibility.

R2.4 'Staff moving between posts.'

Within the restructured Department improved clarity of responsibility has been achieved within the Divisions. This has resulted in the development of better and more consistent links with partner agencies and organisations. Staff support, supervision and induction procedures will facilitate staff stability. Since May 2001 there has been little movement of staff between posts.

R2.5 'Representation to partnership boards and groups.'

Within the current departmental structure, there is the capacity for consistent involvement of operational and senior managers in partnership working and initiatives as necessary. These include:

- An initiative to achieve greater integration of children and families services between the Department, Education, Hastings and Rother PCT and voluntary organisations. A possible pilot initiative for children with disabilities may be a tangible result of this;
- A pooled budget for services for older people between the Department, Bexhill and Rother PCT and Hastings and St Leonard's PCT;
- A pilot joint assessment protocol for older people in the Eastbourne area.

The Partnership Managers are the department's main representatives on partnership meetings and provide a link to operational managers as necessary. We have also just agreed that the Assistant Directors should begin to attend the PCT Executive Committees to increase the representation there.

R2.6 *'Establish agreed objectives and commitment to a shared agenda.'*

The main process for the development of joint objectives and a shared agenda for service providers and service users within the are the range of forums for developing more integrated health and social care services. The developing importance and widening membership of the Children and Young Peoples Strategic Partnership, the revised Disability and Older People's Strategy Group; the Learning Disability Partnership Board and the Mental health Steering Group are all examples of the department embedding its planning and decision-making processes within clearer and coherent structures.

In addition the department is actively involved in the emergence of Local Strategic Partnerships (LSP). These have a vital role in the future setting of service priorities and developments at a strategic level, and offer an equal voice to service users, voluntary organisations and statutory agencies.

Among others, departmental officers are represented on:

- the 5 county Health Improvement Partnerships and the Health Improvement and Modernisation Board;
- the 4 PCT executive and other committees (2 already in existence and 2 to commence on 1.4.02);
- the Hastings Regeneration Partnership Board;
- Carers County Planning Group;
- The 2 existing Sure Start projects and the 4 new Sure Start projects.

The development of a Compact in conjunction with local voluntary and partner organisations is underway within the county, and is being led by the Social Services Department. This work will establish agreed principles of partnership work, and will develop a series of 'Codes of Practice' giving detail to the overall principles of the Compact.

R3 *'Work with partners to develop targets and monitoring procedures that inform all senior managers, Members and partners of progress towards the development, implementation and conformance to targets in relation to partnership working.'*

The 'Council Plan' 2002/03 (formerly the Social Services Best Value Performance Plan) sets the priorities for the Local Authority and timescales for the achievement of those priorities. These targets represent the result of consultation with a wide range of internal and external stakeholders.

A series of Best Value Reviews continues to be undertaken to assess the performance of services in meeting agreed priorities. Consultation with service users

and partner organisations is an integral part of the process for all of our best value reviews.

It is envisaged within the development of LSPs that consultation with relevant communities will increasingly inform the development of priorities and targets, and that these will be subject to a process of ongoing monitoring from the beginning of service delivery.

R4 *'Encourage partners to develop their own partnership policies.'*

The Department's Partnership Managers and Community Development Manager have active roles in supporting the development of partnership working practices within partner agencies and voluntary organisations. The development of a county 'Compact' will facilitate the development of common standards of good practice and co-operation.

R5 *'Regularly evaluate the effectiveness of partnerships.'*

The Partnership Managers and the Community Development Manager, along with colleagues in the Policy and Performance Review Unit and the operational divisions continually evaluate the effectiveness of partnerships and the future direction of service development in the partnership context. This is an ongoing process within regular supervision arrangements.

R6 *'It is recommended that the Chief Executives Policy Co-ordination Team which is developing a Corporate Partnership Protocol should take into consideration;*

- *the expectations of all partners;*
- *the involvement of social services in developing the protocol;*
- *Member's role in the local partnership groups.*

The Department is working closely with the Chief Executives Policy Co-ordination Team in the developing agenda of Community Planning and Local Strategic Partnerships at both a county and local level.