

DUNDEE CITY COUNCIL

REPORT TO: POLICY & RESOURCES COMMITTEE

REPORT ON: INTEGRATION JOINT BOARD STRATEGIC COMMISSIONING

REPORT BY: HEAD OF SERVICE, STRATEGY, INTEGRATION, PERFORMANCE AND SUPPORT SERVICES

REPORT NO: 65-2016

1.0 PURPOSE OF REPORT

This report outlines the range and scale of interventions currently being identified as part of the developing Strategic Planning process being undertaken by Dundee's Integration Joint Board (IJB) and the estimated impact on the efficiency and effectiveness of health and social care services within Dundee.

2.0 RECOMMENDATIONS

It is recommended that the Policy & Resources Committee:

- 2.1 Agrees the proposals to deliver service efficiencies through the Integration Joint Boards' Strategic Planning process.

3.0 FINANCIAL IMPLICATIONS.

- 3.1 The scale of the resources considered by Dundee Integration Joint Board's Strategic Planning process is estimated to be around £222m plus an amount "set aside" within hospital settings. This resource will be drawn from former Dundee City Council Community Care and Supporting People services (around £78m) with the balance being a mixture of former Dundee Community Health Partnership Funding and other NHS Tayside community based resources.
- 3.2 As a result of the financial planning process contained within the developing Strategic Plan, financial efficiency targets will be set against the range of client groups to the value of £1,089k for current Dundee City Council resources in 2016/17. This will be achieved through a range of service interventions as noted in this report and will be reflected in the allocation of budgeted financial resources to the IJB.

4.0 MAIN TEXT

- 4.1 The Public Bodies (Joint Working) Scotland Act 2014 was passed by the Scottish Parliament on the 25th February 2014 and received Royal Assent on 1st April 2014. The legislation established the legal framework for integrating health and social care in Scotland. The stated government objective for integration is *'to create a single system for local joint commissioning of health and social care services which is built around the needs of patients and service users and which supports whole system re-design in favour of prevention and anticipatory care in communities'*.

- 4.2 The legislation also requires each integration Authority to establish a Strategic Planning Group for the purpose of preparing a Strategic Plan. All the functions that are delegated to the integration authority must fall within the scope of the Strategic Plan. The Strategic Plan should focus on delivering improved outcomes for service users and carers against agreed national and local outcomes. The Strategic Plan must set the date on which functions are to be transferred. Integration Authorities are required to be up and running by 1st April 2016.
- 4.3 It is for the IJB to include and adopt what it sees fit in its strategic commissioning plan but it must: set out the arrangement for carrying out the integration functions in the local authority area and set out locality arrangements; and set out the way in which the arrangements for carrying out the functions are intended to achieve or contribute towards achieving national health and well being outcomes.
- 4.4 It is through the delegated function that the IJB operates and it is only in adopting its strategic plan for the discharge of these functions that it becomes fully operational. Since it must be fully operational by the due date of 1st April 2016 the IJB must adopt its plan by that date.
- 4.5 Partnerships are required to set up a Strategic Planning Group for the purpose of preparing, monitoring and reviewing their strategic Plan.
- 4.6 A Strategic Planning Group has been set up which will report to the Dundee IJB. The strategic planning group for Dundee is described as the Dundee Integrated Strategic Planning Group (the Strategic Planning Group) and the plan that is under development as the Dundee Integrated Strategic and Commissioning Plan (the Strategic Plan).
- 4.7 The work of the strategic planning group to date has included the preparation of high level needs, the early expression of locality needs assessment for locality planning, the development of a draft vision and set of strategic priorities to inform the plan, the accompanying financial planning framework and the development of the consultation and engagement framework. The Strategic Planning Group has an agreed timeline for the preparation of the Strategic Plan following a facilitated development event involving over 100 participants with representative interest in the care and support and health needs of the population of Dundee. A document describing the vision, priorities, the national outcomes and a set of feedback questions has been issued for consultation as a first stage with a full consultation carried out between January and February 2016, including an elected members briefing.
- 4.8 Following consultation with a range of stakeholders, eight priorities are reflected in the Strategic Plan. These are:
1. Health Inequalities
 2. Early Intervention/Prevention
 3. Person Centred Care and Support
 4. Carers
 5. Localities and Engaging with Communities
 6. Building Capacity
 7. Models of Support/Pathways of Care
 8. Managing our Resources Effectively

4.9 The plan will be implemented across care groups which will focus on delivering services in a way which meets the priorities. These care groups are:

- Learning Disabilities
- Homelessness
- Carers
- Older People
- Physical Disabilities
- Sensory Impairment
- Mental Health & Wellbeing
- Suicide Prevention
- Drugs & Alcohol

In addition, there will be considerable focus on tackling inequalities through a health inequalities workstream.

4.10 A Financial Plan is being developed to underpin the Strategic Plan which reflects the impact of demographic growth and changing needs of the population which would not be sustainable should services continue to be delivered in the same way. Through the development of the Strategic Plan and associated work, strategies and improved ways of working are being identified to meet these challenges within the anticipated financial resource framework.

4.11 As part of this process a number of service interventions are being identified by each of the client based strategic planning groups to close the gap between the availability of resources and demand for these resources. These interventions take account of new and improved ways of working in order to deliver better personal outcomes for individuals on a more cost efficient basis and are being developed under the following themes:

- Policy
- Models of Support
- Maximising Resources
- Early Intervention & Prevention

The types of interventions being explored under the themes are:

- **Policy** – interventions which are as a result of policy changes (e.g. further promotion of Self Directed Support);
- **Models of Support** – reviewing and remodelling the way in which services are currently delivered (e.g. through further development of accommodation with support models of care within Dundee to enable service users to be brought back and cared for within the city, delivering better outcomes at a lower cost);
- **Maximising Resources** – ensuring the most effective use is being made of current available resources (e.g. benchmarking and reviewing cost of current services and care arrangements);
- **Early Intervention & Prevention** – shifting services away from high end, costly, unscheduled care to preventative services (e.g. the development of Enhanced Community Support and the provision of a range of community led services such as the Men's Shed Project).

Each of the client based strategic planning groups will develop these interventions to contribute to meeting an overall cost reduction target of £1,089k, allocated on a proportionate basis to the scale of the anticipated resource gap:

| Client Group | Financial Target | Estimated Resources | Budgeted |
|---------------------|------------------|---------------------|----------|
| Learning Disability | £522k | £23m | |
| Older People * | £235k | £41m | |
| Mental Health | £48k | £2m | |
| Physical Disability | £114k | £5m | |
| Other Care Groups | £170k | £7m | |
| Total | £1,089k | £78m | |

* Further efficiencies for Older People's services are identified in a separate report (Re-modelling of Home Care Services) which is also consistent with the direction of the Strategic Plan.

- 4.12 Within the Integration Scheme, which established the governance arrangements for the partnership between the IJB, Local Authority and Health Board, provisions have been established to deal with any projected overspend or underspend within the functions delegated to the IJB. Within the first two years, should an overspend be projected, the IJB must present a recovery plan to the Local Authority and Health Board to address these. Should this be unsuccessful, any uncommitted reserves held by the IJB will be used to set against the overspend. If following the application of these, an overspend is still projected, revisions to the Strategic Plan should be made to enable the overspend to be managed in future years. The overspend will then be met by the Party with operational responsibility for service delivery, unless agreed otherwise through a tripartite agreement between the IJB, DCC and NHS Tayside. From year three onwards, following the application of these steps, the overspend will be allocated based on each Parties' proportionate contribution to the IJB's budget for that financial year.

Progress towards meeting the priorities and objectives of the Strategic Plan will be reported on a regular basis to the IJB through a performance management framework with an Annual Performance Report and periodic reviews of the Strategic Plan and the performance of the IJB will also to be brought to the Council.

5.0 POLICY IMPLICATIONS

- 5.1 This report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There are no major issues.

6.0 CONSULTATIONS

- 6.1 The Strategic Plan is being developed through a wide ranging consultation process with stakeholders.

7.0 BACKGROUND PAPERS

- 7.1 None.



EQUALITY IMPACT ASSESSMENT TOOL

Part 1: Description/Consultation

| | | |
|---|--|--|
| Is this a Rapid Equality Impact Assessment (RIAT)? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Is this a Full Equality Impact Assessment (EQIA)? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Date of Assessment: | 11/02/2016 | |
| Committee Report Number: | 65-2016 | |
| Title of document being assessed: | Integration Joint Board Strategic Commissioning | |
| 1. This is a new policy, procedure, strategy or practice being assessed (If yes please check box) <input checked="" type="checkbox"/> | This is an existing policy, procedure, strategy or practice being assessed? (If yes please check box) <input type="checkbox"/> | |
| 2. Please give a brief description of the policy, procedure, strategy or practice being assessed. | This report outlines the range and scale of interventions currently being identified as part of the development of the Strategic Plan by Dundee's Integration Joint Board (IJB) and the estimated impact on the efficiency and effectiveness of health and social care services within Dundee. | |
| 3. What is the intended outcome of this policy, procedure, strategy or practice? | The outcome sought is that the Policy & Resources Committee agrees the proposals to deliver service efficiencies through the Integration Joint Boards' Strategic Planning process. | |
| 4. Please list any existing documents which have been used to inform this Equality and Diversity Impact Assessment. | The Public Bodies (Joint Working) Scotland Act 2014 The Equality Act 2010 The Draft Strategic and Commissioning Statement January 2016 | |
| 5. Has any consultation, involvement or research with protected characteristic communities informed this assessment? If yes please give details. | Yes, over the last year there has been extensive consultation and co-production activity in order to identify the priority areas in the Strategic Plan and assess the potential impacts of these along with Dundee citizens. In addition to this work which has been targetted at the Dundee public and other stakeholders there has been specific work to involve older people and people with disability and their carers. There has also been consultation and involvement activity within specific client based group areas i.e. Learning Disabilities, Homelessness, Carers, Older People, Physical Disabilities, Sensory Impairment, Mental Health & Wellbeing, Suicide Prevention and Drugs & Alcohol | |
| 6. Please give details of council officer involvement in this assessment. (e.g. names of officers consulted, dates of meetings etc) | Laura Bannerman Head of Strategy, Integration, Performance and Support Services, Social Work, Dundee City Council; David Berry Finance, Integrated Joint Board; Joyce Barclay Senior Officer, Social Work. | |
| 7. Is there a need to collect further evidence or to involve or consult protected | There is not a need to gather further evidence at this stage although the proposals will be closely | |

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| characteristics communities on the impact of the proposed policy? (Example: if the impact on a community is not known what will you do to gather the information needed and when will you do this?) | monitored and the IJB will be advised of any potentially negative implications identified for people from protected characteristic communities that cannot be overcome. Co-production, consultation and involvement will continue as required. to ensure that any potential negative equality impacts are identified promptly are avoided or mitigated. |
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Part 2: Protected Characteristics

Which protected characteristics communities will be positively or negatively affected by this policy, procedure or strategy?

NB Please place an X in the box which best describes the "overall" impact. It is possible for an assessment to identify that a positive policy can have some negative impacts and visa versa. When this is the case please identify both positive and negative impacts in Part 3 of this form.

If the impact on a protected characteristic communities are not known please state how you will gather evidence of any potential negative impacts in box Part 1 section 7 above.

| | Positively | Negatively | No Impact | Not Known |
|--|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| Race, Ethnic Minority Communities including Gypsies and Travellers | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Gender | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Gender Reassignment | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Religion or Belief | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| People with a disability | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Age | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lesbian, Gay and Bisexual | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Socio-economic | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Pregnancy & Maternity | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Other (please state) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Part 3: Impacts/Monitoring

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| <p>1. Have any positive impacts been identified?</p> <p>(We must ensure at this stage that we are not achieving equality for one strand of equality at the expense of another)</p> | <p>There are potential positive impacts on older people and people with disabilities. It is expected that the proposals made will ensure that any policy changes maximise choice and control for older people and people with disabilities; that models of care and support are reviewed and remodelled to the advantage of Dundee citizens; that available resources are maximised; and that people receive appropriate early intervention and prevention to avoid becoming more dependent and reaching crisis.</p> <p>All commissioned supports and services will, as part of their contract, pay at least the Living Wage to employees as this is viewed as a potential positive socio-economic impact.</p> |
| <p>2. Have any negative impacts been identified?</p> <p>(Based on direct knowledge, published research, community involvement, customer feedback etc. If unsure seek advice from your departmental Equality Champion.)</p> | <p>The report describes a process of ensuring our current services supports are efficient and utilising resources in an effective manner. As the report proposes an overall cost reduction target it is important that any potential negative impacts to people with one or more equality characteristic are identified. Any policy or service change that is proposed will be subject to an Equality Impact assessment (Rapid or Full as required) to explore potential impacts.</p> |
| <p>3. What action is proposed to overcome any negative impacts?</p> <p>(e.g. involving community groups in the development or delivery of the policy or practice, providing information in community languages etc. See Good Practice on DCC equalities web page)</p> | <p>None are identified at the present time- it is anticipated that there will be close monitoring to explore any potential impacts which arise. The IJB has identified a number of equality outcomes in the Strategic Plan and embraces the public duty to eliminate discrimination, advance equality of opportunity and foster good relations between communities.</p> |
| <p>4. Is there a justification for continuing with this policy even if it cannot be amended or changed to end or reduce inequality without compromising its intended outcome?</p> <p>(If the policy that shows actual or potential unlawful discrimination you must stop and seek legal advice)</p> | <p>N/a</p> |
| <p>5. Has a 'Full' Equality Impact Assessment been recommended?</p> <p>(If the policy is a major one or is likely to have a major impact on protected characteristics communities a Full Equality Impact Assessment may be required. Seek advice from your departmental Equality lead.)</p> | <p>No</p> |
| <p>6. How will the policy be monitored?</p> <p>(How will you know it is doing what it is intended to do? e.g. data collection, customer survey etc.)</p> | <p>Through the client based strategic planning groups and additional equality impact assessment of any proposed changes.</p> |

Part 4: Contact Information

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| Name of Department or Partnership | Dundee Health & Social Care Partnership |
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|-------------------------------|-------------------------------------|
| Type of Document | |
| Human Resource Policy | <input type="checkbox"/> |
| General Policy | <input checked="" type="checkbox"/> |
| Strategy/Service | <input checked="" type="checkbox"/> |
| Change Papers/Local Procedure | <input type="checkbox"/> |
| Guidelines and Protocols | <input type="checkbox"/> |
| Other | <input type="checkbox"/> |

| | |
|--|--|
| Manager Responsible | Author Responsible |
| Name: Laura Bannerman | Name: Dave Berry |
| Designation: Head of Strategy, Integration, Performance, and Support Services | Designation: Chief Finance Officer Dundee Health And Social Care Partnership |
| Base: Floor 2, Dundee House | Base: Floor 2, Dundee House |
| Telephone: 01382 433085 | Telephone: 01382 433608 |
| Email: laura.bannerman@dundeecity.gov.uk | Email: dave.berry@dundeecity.gov.uk |

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|---|---|--------------|---|
| Signature of author of the policy: | Click here to enter text. | Date: | Click here to enter text. |
| Signature of Director/Head of Service: | Laura Bannerman | Date: | 12/02/2015 |
| Name of Director/Head of Service: | Laura Bannerman | | |
| Date of Next Policy Review: | Click here to enter text. | | |