Manchester City Council Report for Resolution

Report to: Personnel Committee – 24 July 2019

Subject: Manchester Health & Care Commissioning Phase 2

Report of: Chief Executive

Purpose of Report

This report provides an update for the Personnel Committee on the next phase of the development of Manchester Health & Care Commissioning (MHCC) (including the transfer of some functions that are currently undertaken by MHCC to Manchester Local Care Organisation with a resultant change in deployment for a number of MCC employees).

The report identifies senior role changes arising from these system changes that require the approval of the Personnel Committee.

Recommendations

The Committee is requested to:

- Note the key changes arising from the Phase 2 review of Manchester Health & Care Commissioning partnership including the change of deployment for 32 Manchester City Council employees from MHCC to MLCO.
- 2. Agree the re-focusing and re-designation of the existing vacant and funded role of Director of Adult Services SS4 to become Deputy Director of Adult Social Services SS4 and agree that the post should be a non-designated Deputy Chief Officer, and delegate authority to the Executive Director of Adult Social Services authority to appoint the Deputy Director in consultation with a mixed panel of officers and members in line with Annex 1 of the Officer Employment Procedure Rules.
- 3. Note the redesignation of the Strategic Lead Commissioning role (SS2) to Head of Service Strategy SS2 (within MHCC).
- 4. Note the change of deployment of two roles of Strategic Lead (SS2) from MHCC to MLCO, and that the specific portfolios of these roles will be further reviewed by the Executive Director of Adult Social Services as part of a process of co-design within MLCO.

Wards Affected:

Financial implications for the revenue and / or capital budget

There are no financial implications arising from this report as the report is about the re-designation of existing funded posts on the establishment and there are no changes to the grades proposed.

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Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers overleaf.

Personnel Committee Report of 30 May 2018 - Adult Social Care - Senior Management Structure within the Manchester Local Care Organisation

Personnel Committee Report of 12 December 2016 - Market Rate Policy

1. Background

- 1.1 The Our Healthier Manchester Strategy set out the need for organisational change in the City of Manchester in order to achieve its transformation objectives. Within this was the aim to establish a single commissioning function for health, social care and public health. This was alongside development of the Manchester Local Care Organisation and a Single Hospital Service
- 1.2 Following the establishment of Manchester Health and Care Commissioning (MHCC) on 1st April 2017, and subsequently Manchester Local Care Organisation (MLCO) on 1st April 2018, these key partnerships have now begun to change the way health and social care is delivered within the city to work in a way that is both more efficient and effective.
- 1.3 The development of a single commissioning function was not just structural but signalled the start of a move to be a more strategic and streamlined organisation. 'Phase 1' of this was achieved through the establishment of Manchester Health and Care Commissioning in April 2017. This forged a partnership between a merged Manchester CCG and Manchester City Council to oversee a £1.1bn budget for health and care. It brought together staff from four organisations into a single structure led by a single Board and Executive Team. It allowed teams to work to a common plan, way of working and decision making.
- 1.4 This was always intended to be a first step with the shift to the partnership having a more strategic role relating to how health and social care commissioning is planned and delivered to take place at a later date. The aim is to be the most effective and influential commissioner so that the best possible improvement can be made to health outcomes for people in the City. The period since 2017 has seen incremental development of MHCC as well as the establishment of the Manchester LCO.
- 1.5 MHCC Executive has now further reviewed the make-up of the partnership through 'MHCC Phase 2'. The outcome of this review will see MHCC now shift its focus to strategic influencing of markets and HSC delivery, and operational commissioning activity will move across to MLCO.
- 1.6 Alongside the delivery of MHCC Phase 2 further work is being undertaken by the Executive Director of Adult Social Services to consider the broader senior management capacity required to support delivery of adult social care within the current context of MLCO, and to clearly align the current statutory duties of the DASS across MHCC and MLCO. This work includes understanding current capacity against each service area; work on accountability and governance; and an assessment of the contracts register. A further report will set out any proposals emerging from this review that require Personnel Committee approval.

2. MHCC - Phase 2

- 2.1 Following a process of consultation across all deployed partnership employees; MHCC Executive Board has agreed a series of structural changes for the MHCC partnership that support the required change of focus.
- 2.2 At the conclusion of the consultation process it was announced that the Executive Nurse, and Executive Director for Nursing and Safeguarding, had been appointed Managing Director of Wigan CCG. The opportunity was therefore taken to look at the Executive Team's responsibilities and consider how they could be reviewed to be more effective and to streamline the organisation. This resulted in some further realignment of Executive portfolios that were captured in the final proposals.

2.3 MHCC as a strategic commissioner

A key component of the current system developments was the further refinement of the role of MHCC as a strategic commissioner in terms of:

- Setting clear and ambitious goals for the system
- Securing the right mix of health and social care provision
- Creating the best possible conditions to optimise health outcomes
- Monitoring and evaluating standards and outcomes to ensure the system continuously improves
- Looking beyond health and care to improve people's health and wellbeing
- Things only MHCC can do

2.4 Our Healthier Manchester & Our Manchester

MHCC phase two remains a key part of delivering the Our Healthier Manchester strategy. This change sets a direction towards an ever more integrated health and care system with increasing joint direction, joint working and shared functions. This is part of the wider Our Manchester strategy for the City and incorporates associated ways of working.

2.5 MLCO working arrangements

Alongside integrating direct provision of adult social care, community health, community mental health and some primary care services within neighbourhoods; MLCO will lead a number of functions formerly undertaken by MHCC. These include:

- Management of the full pathway of care which will include sub-contracting some services and securing care packages for individuals.
- Service redesign and service specification. This will work alongside MLCO staff focussed on service change and quality improvement.

These are substantial responsibilities and rely upon numerous support functions. As a further stage of development MHCC proposes that consideration should be made to realign many of these functions as a shared resource for MHCC and MLCO (and the wider system where deemed appropriate). This would form a later phase of partnership development

As a result of the above service changes, 32 MCC employees will move their deployment from MHCC to MLCO. Through a process of co-design, a clear structure

will be developed within MLCO for these staff to be deployed into (together with a clear work programme for them based on shared priorities). This work is already underway, including providing interim leadership arrangements for the deployed individuals pending the outcome of this redesign activity.

3.0 Impact on MCC Senior Roles

3.1 MHCC Executive and Board have been directly responsible for the development and agreement of the MHCC Phase 2 change – however the Personnel Committee is required to agree any impact that these proposals have on senior roles employed by Manchester City Council. This impact is therefore set out below for the committee's consideration.

3.2 Executive Director of Adult Social Services (DASS)

The focus for this role was reviewed as part of the recent recruitment process for the Executive Director role. The previous Executive Director was focused for 90% of time within MHCC. It was concluded that to be most effective the role should be 90% focused within MLCO as this is where the significant proportion of Adults Social Care activity is contained. This ensures the Executive Director is appropriately placed to effectively enact the statutory DASS functions. It also directly supports delivery of the Adults Improvement plan by enabling the DASS to be placed close to the key improvement plan deliverables.

The DASS role is set out in law and covers both commissioning and provider responsibilities. There are specific lines of accountability to the Head of Paid Services i.e. the Chief Executive of Manchester City Council (MCC) and will therefore be an employee of the city council.

MHCC is responsible for commissioning health, adult social care and public health. The DASS is statutorily responsible for adult social care commissioning. It is necessary for the DASS to spend a proportion of her time (c10%) working within MHCC. The DASS will report to the Council's Chief Executive, while also maintaining a (dotted) line of accountability to the Chief Accountable Officer of MHCC. The DASS will perform the following functions;

- Exercise decision making on behalf of Manchester City Council as part of MHCC partnership arrangements.
- Providing social care presence and professional leadership within MHCC.
- Exercise necessary statutory and agreed activities for MCC including in relation to the Health Scrutiny Committee and the Health & Wellbeing Board.

The DASS is a member of the MHCC Executive Team and the MHCC Board.

The DASS also has a key role in MLCO and therefore has a (dotted) line of accountability to the Chief Executive of MLCO, as part of MLCO's executive team. Within MLCO the DASS will continue to have the statutory responsibility for the following key areas.

 Overall leadership of adult social care within through MLCO integrated neighbourhood teams, including connecting social care to community health and wider public services.

- Professional leadership of adult social care
- Operational leadership of the adult social care workforce within MLCO
- Responsibility for securing packages of care
- Securing packages of care (operational commissioning), incorporating provider relationships, market shaping and operational procurement.
- Safeguarding
- To deliver duties within financial resources

The DASS is a member of the MLCO Executive Team.

The DASS is responsible for and supported by the wider adult social care workforce deployed within the MLCO.

3.3 Deputy Director of Adult Social Services

Following the revised focus for the Executive Director as set out above there is a need to ensure there is a strong adult social care commissioning voice with the right experience to inform and influence the work of MHCC. To enable this to happen it is proposed that the existing and now vacant role of Director of Adult Social Services SS4 be re-focused and re-designated as Deputy DASS. The Deputy Director will then have the capacity to work closely with the MHCC directors to ensure ASC considerations are effectively embedded across MHCC services and priorities as part of the integrated commissioning arrangements. This will also allow the Executive DASS to spend the majority of her time working within MLCO, which will reflect the balance of adult social care activity.

The Deputy Director will also provide leadership capacity within MLCO through the management of the operational commissioning activity and resources that are now deploying to MLCO. This will help provide strategic capacity for a more integrated approach to the commissioning and leadership of ASC services across the partnerships.

The role profile has been updated to reflect the proposed revisions to the role portfolio and responsibilities. In essence, the core portfolios and focus of the two former SS5 and SS4 roles have been reversed (with the statutory duties being with the SS5 role).

The post is a Deputy Chief Officer post, reporting to the statutory DASS. The Committee is asked to accept the recommendation that the post is a non-designated Deputy Chief Officer, and to delegate responsibility for the appointment process to the Executive Director of Adult Social Services, in conjunction with a mixed panel of officers and members.

The Committee is asked to note that the Annex 1 procedure of the Officer Employment Procedure Rules applies to the appointment. Before an offer of appointment can be made, the Interim Director of HROD would need to notify each member of the Executive of the intention to appoint the successful candidate, in order that they have the opportunity to object to the appointment.

It should be noted that there was a previous role designated as Deputy DASS. This role holder has been deployed onto other activity supporting system transformation for the last couple of years. This post has now been redesignated as Director of Business Transformation reporting to the Deputy Chief Executive. This was one of the two SS4 roles previously reporting to the Executive Director of Adult Social Services, the other being the Director of Adult Social Services as above. The proposal does not therefore require the establishment of any additional posts or funding.

3.4 Strategic Lead Commissioning (SS2) x 2

These two MCC employed roles are currently deployed to MHCC as part of the ASC commissioning function. Phase 2 outcomes identify these roles as part of the numbers transferring their deployment to MLCO (alongside all other ASC operational commissioning roles). Their future duties and responsibilities will be reviewed as part of the current activity to co-design roles that are deploying to MLCO. Where any changes are proposed that are beyond portfolio realignment and require formal change through Personnel Committee these will be reported to a future meeting. Employment remains with MCC. In the meantime, these individuals will support the Deputy DASS in providing day to day interim line management for MLCO deployed operational commissioning staff and will directly input into the review of services.

3.5 Strategic Commissioning Lead (SS2)

This MCC employed senior role will remain within the MHCC Partnership as part of the newly formed Strategy Directorate. The role will retain the existing role profile and responsibilities (relating to adult social care strategic commissioning) but is proposed to be redesignated to Head of Service Strategy to align with other (MCCG employed) role designations within the MHCC Strategy Development function.

3.6 Appendix 1 and 2 set out the current and proposed structures for Adults Services arising from the above.

3.7 Director for Population Health and Wellbeing

The Director of Population Health and Wellbeing at MHCC has the responsibility for coordinating the delivery of the Manchester Population Health Plan and the statutory public health functions and mandated responsibilities of the City Council.

The strategic commissioning responsibilities of the director will remain with MHCC, and the statutory and mandated responsibilities remain with the Council; this is joint post although the post holder is an employee of the Council.

A review of the Manchester Population Health Plan is currently underway to consider which actions should be MLCO driven and led, which actions should be MHCC driven and led, and which actions relate to other partners.

Population health directorate staff will currently remain deployed to MHCC; however, the intention is that by 1 October 2019 there will be greater clarity on the specific working arrangements relating to staff from this directorate working for the MLCO.

Following the departure of the Executive Director of Nursing and Safeguarding MHCC, MHCC are proposing that the Director of Population Health & Wellbeing take responsibility for MHCC Nursing and Safeguarding services (these services are delivered through MCCG roles).

The impact of any agreed changes to responsibilities for the Director will be further reviewed including consideration of the most appropriate reporting arrangement and which establishment is appropriate Health or MCC, and a further report on this will be brought forward in September.

4. Comments from the Interim Director of HROD

I am satisfied that the appointment process is in accordance with the Officer Employment Procedure Rules.

5. Comments from Trade Unions

To be added once the Trade Unions have received the final report. They have been consulted at early stage.



