



Purpose: For Decision

# Committee report

Committee	<b>EXECUTIVE</b>
Date	<b>TUESDAY, 26 JANUARY 2016</b>
Title	<b>STRATEGIC PARTNERSHIP AGREEMENT BETWEEN ISLE OF WIGHT COUNCIL AND ISLE OF WIGHT NHS (TRUST)</b>
Report to	<b>DEPUTY LEADER AND EXECUTIVE MEMBER FOR ADULT SOCIAL CARE, INTEGRATION, HUMAN RESOURCES &amp; CORPORATE GOVERNANCE</b>

---

## 1. EXECUTIVE SUMMARY

Approval is sought for the Isle of Wight Council to enter into a strategic partnership agreement with the Isle of Wight NHS Trust with effect from 15 February 2016 to further develop community based integrated health and social care services.

## 2. PURPOSE

2.1 The purpose of integrated working between the trust and the council is to improve the health and wellbeing of the Island's residents by delivering care at the right time in the right place through an appropriate range of providers, to ensure that people receive co-ordinated care that is appropriate to their needs. This can be furthered through a formal strategic partnership.

2.2 The objectives of the partnership have been stated and agreed within the Five Year Health and Social Care Vision (Appendix 1) which has been signed up to by the council, IW NHS Trust and the Isle of Wight Clinical Commissioning Group (CCG) namely:

- person centred provision;
- improved health and social care outcomes;
- service provision and commissioning is delivered in the most efficient and cost effective way across the whole system, leading to system sustainability;
- the council and the trust staff will be proud of the work they do, the services they provide and the organisations they work for and we will be employers of choice.

2.3 This agreement will enable us to develop independent teams which will integrate identified services from Community Health Services (the trust) and Adult Social Care (the council).

2.4 The aims of the strategic partnership are as follows:

- To work towards better integration and coordination of care across all sectors of health and social care provision within statutory deadlines.
- To ensure that there is good access to information and consistent outcomes for people.
- To reduce bureaucracy, improve efficiency and increase capacity to meet future demands for the services.
- To work towards one Island budget for health and social care which makes the best use of resources.
- To ensure all care will be person centred, evidence based and delivered by the right person in the right place and at the right time.
- To jointly ensure that our resources are focused on prevention, recovery and continuing care in the community.
- To jointly ensure that people are supported to take more responsibility for their care and to be independent at home for as long as possible, reducing the need for hospital admission and long term residential care.
- To ensure those who require advocacy, support in decision making regarding mental capacity, receive this.
- To provide good quality care and improve the experience of people in contact with our services within available resources.
- To support partnership working across all sectors, including the third sector and independent sector.
- To develop the workforce to enable our staff to have the right knowledge, skills and expertise that is appropriate to their role.
- To identify how staff could work beyond existing boundaries and develop the conditions (HR, policy, financial support) to deliver innovative care and support.
- To work towards a fully integrated IT system across primary, secondary and social care with appropriate access for staff.
- To recognise the importance of families, carers and communities and act to ensure we include listen to Island people in the planning of services and responding to their concerns.
- To share information in an open and transparent way to enable decision making between the parties and across our organisations.
- To ensure the person tells their story once and all professionals will work with that person to achieve the best outcomes.
- Annual reviews and scheduled reviews to provide the person with at least an annual review and offer unscheduled review as and when is necessary.
- To use assisted technologies to keep people at home as long as it is possible.
- To ensure we work with the local safeguarding adults board and contribute towards its strategy objectives.

### 3. BACKGROUND

3.1 In December 2014, the council Executive approved a recommendation for the Isle of Wight Council and Isle of Wight NHS Trust to develop a strategic partnership agreement to develop community based integrated health and social care services.

3.2 As the drafting of a strategic partnership agreement has been progressed as envisaged by the council, the parties have incorporated the development of emergency and non-emergency integrated access arrangements, thus enabling the continuing development of a single integrated contact centre. These services range from the taking of 999 ambulance calls to responding to the Wightcare alarm calls and other related trust and council services. Integration provides opportunities for a more person-centred response as well as efficiencies that will result from the integration of call-handling and response. Adding the integration of contact centre services into the proposed agreement is intended to ensure that the proposed integration is fully regarded as part of the wider range of services covered by the agreement. It also ensures that all services within the scope of the agreement can be implemented via unified governance arrangements.

### 4. STRATEGIC CONTEXT

4.1 The strategic partnership agreement contributes towards the following corporate priorities:

- Protecting the most vulnerable residents with health and social care, investing in support prevention and continuing care.
- Ensuring that all the resources available to the Island are used in the most effective way to achieving the Island priorities.
- My Life a Full Life programme (MLAFL).

### 5. FINANCIAL / BUDGET IMPLICATIONS

5.1 The council faces a significant financial challenge with a projected revenue budget gap of £13.5 million in 2015/16 with a further revenue budget gap of £17.386 million in 2016/17. A major budget pressure relates to the cost of Adult Social Care and having to meet outcomes.

5.2 Vanguard funding has been identified to fund a transformational lead for health and social care post for 18 months to develop the strategic partnership agreement under Primary and Acute Care Systems (PACs).

5.3 Development of efficiency savings strategies that promotes achieving savings through managing demand for services down and in implementing preventative strategies and integrated care models that deliver better outcomes for people at reduced costs.

### 6. LEGAL IMPLICATIONS

6.1 The Care Act 2014 and the statutory guidance issued in relation to it provides that local authorities must carry out their care and support responsibilities with

the aim of joining-up the services provided or other actions taken with those provided by the NHS and other health-related services. This general requirement applies to all the local authority's care and support functions for adults with needs for care and support and for carers. This duty applies where the local authority considers that the integration of services will:

- promote the wellbeing of adults with care and support needs or of carers in its area;
- contribute to the prevention or delay of the development of needs of people;
- improve the quality of care and support in the local authority's area, including the outcomes that are achieved for local people.

6.2 Similar duties are placed on NHS England and clinical commissioning groups to promote integration with care and support.

6.3 The council is able to enter into a strategic partnership with the Isle of Wight NHS Trust as another public body, to enable the integration of identified services.

6.4 The proposed strategic partnership agreement has been drawn up with the Isle of Wight NHS Trust and both parties are now seeking approval to complete the agreement.

## 7. EQUALITY AND DIVERSITY

7.1 The council, as a public body, is required to meet its statutory obligations under the Equality Act 2010 to have due regard to eliminate unlawful discrimination, promote equal opportunities between people from different groups and to foster good relations between people who share a protected characteristic and people who do not share it. The protected characteristics are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. Equality impact assessments have been undertaken in order to ensure compliance with respect to the public and to staff involved in the proposed option to enter into a strategic partnership agreement. The assessments are attached as Appendix 2 and Appendix 3.

7.2 The impact assessment identifies a number of issues for protected groups under the equality duty. Should the council enter into the proposed strategic partnership agreement, there would be a period of change. While not intended to have an immediate impact on the council's equality obligations, this change would if extended to further integration and development of new models for health and social care services, would be most likely to have a positive impact on the services available to residents, visitors and staff with protected characteristics, who would benefit from more sustainable and accessible services.

7.3 Should the council not enter into the proposed agreement, the council and the trust would continue to deliver health and social care services through current joint working or in the future, other alternative approaches. This would lead to delay or the deferment of a strategy for delivering the council's stated priorities for health and social care. This may not be an adequate response to growing demand and pressure on resources which may lead to a reduction in the council's ability to meet local needs and its responsibilities under the Care Act

2014 and other legislation. This may have a negative impact on some people with protected characteristics. This may include a reduction in the effectiveness of services provided to older people, people with disabilities, people affected by pregnancy, and people with caring responsibilities (most often women). It may also not be an adequate response to growing demand and pressure on resources which may lead to changes in the council workforce that may bear on protected characteristics in a potentially negative way. This may include workforce reductions that may have a disproportionate impact on some protected characteristics.

## 8. OPTIONS

8.1 Option 1. To enter into the proposed strategic partnership agreement with the Isle of Wight NHS Trust with effect from 15 February 2016 and to delegate to the director of adult services in consultation with the Executive member for adult social care any final amendments to the form of agreement, subject to such changes not changing the overall intent of the agreement.

8.2 Option 2. To decline or defer entering into the proposed strategic partnership with the Isle of Wight NHS Trust.

## 9. RISK MANAGEMENT

<b>Risks</b>	<b>Mitigating factors</b>
Commissioners from CCG/council recommission services and ASC or trust lose services. There is a risk that commissioners from clinical commissioning group and/or Council may purchase services from an alternative provider which may lead to losing agreed partnership agreement.	Develop an integrated performance and budget framework to ensure that the partnership arrangement is delivering on key strategic objectives as mentioned in the partnership agreement. Any failure might give both organisations an opportunity to develop strategies and overcome shortfalls.
Integration does not succeed.	Develop a shared vision among all key organisations which will be part of future integration project.  Working with the identified organisations to achieve agreed outcomes under shared vision.
Care Quality Commission (CQC) annual inspection of the trust outcome moves from requires improvement to inadequate.	Develop an integrated quality framework that the partnership arrangement is delivering on key strategic objectives as mentioned in the partnership agreement. Any failure might give both organisations an opportunity to develop strategies and overcome shortfalls.
The Isle of Wight Council and NHS trust face unprecedented financial and demographic challenges they are to meet people's expectations. Increasing demand, greater numbers of self-funders and personal budget holders,	Develop an integrated performance and budget framework to ensure that the partnership arrangement is delivering on key strategic objectives as mentioned in the partnership agreement. Any failure might give both organisations an

and restrictions in local government expenditure will mean significant changes need to be made.  As a result there is a risk of over spending on allocated budget.	opportunity to develop strategies and overcome shortfalls.
Safeguarding issue with one partner.	Investigation procedures must be robust and transparent where there is a provision to investigate your own staff to achieve better outcomes for alleged victims.
Packages are purchased based on an individual's predominant need. As routine practice we refer health need related cases to continuing health care for the health authority to fund such packages. There is a risk where staff might develop biased approaches towards health or social care needs of an individual. As a result of this there could be transfer of funding responsibility back to the local authority.	Continuous practice development policies must address roles and responsibilities to ensure that strategic objectives will be achieved at an individual organisational level.
Not able to recruit into transformation lead role to take partnership agreement forward.	Advertise both internally and externally to recruit into the post.

## 10. EVALUATION

- 10.1 The financial challenges facing the council and the health sector as a whole are significant and unless radical changes are made there is a significant risk that the health and social care system on the island becomes unaffordable and undeliverable.
- 10.2 Option 2 is not recommended as it would be contrary to the legal duties placed on both organisations to work towards integration. It does not deliver what is required under the My Life a Full Life project deliverables and would prevent the council being able to look to reduce costs through prevention.
- 10.3 Option 1 gives the best option as it enables the council to move at pace but in a managed phased way that should be more deliverable and effective. This also allows time to consider the longer term integration model we should be implementing.
- 10.4 A formal partnership to develop the integration through a focused board would achieve the following:
- a) Effective and efficient early help and prevention function.
  - b) Better engagement among professionals.
  - c) Customers will tell their story once.
  - d) Reduced handoffs.
  - e) Increased utilisation of assistive technology.

- f) Customers will be better supported and monitored.
- g) Working closely with our third sector colleagues.
- h) Increased number of self-management plans.
- i) Reduced number of hospital admission.
- j) More people will remain in the community supported by their community.

11. RECOMMENDATION

Option 1. To enter into the proposed strategic partnership agreement with the Isle of Wight NHS Trust with effect from 15 February 2016 and to delegate to the director of adult services in consultation with the Executive member for adult social care any final amendments to the form of agreement, subject to such changes not changing the overall intent of the agreement.

APPENDICES ATTACHED

[APPENDIX 1](#) – Five year strategic vision for health and social care.

[APPENDIX 2](#) – Equality impact assessment (staff).

[APPENDIX 3](#) – Equality impact assessment (users).

[APPENDIX 4](#) – Proposed strategic partnership agreement.

Contact Point: Martin Elliott, Director Adult Social Services

☎ 01983 821000 e-mail [martin.elliott@iow.gov.uk](mailto:martin.elliott@iow.gov.uk)

MARTIN ELLIOTT  
*Director Adult Social Services*

COUNCILLOR STEVE STUBBINGS  
*Deputy Leader and Executive Member for  
Adult Social Care, Integration, Human  
Resources & Corporate Governance*