

## Forming the new Health and Social Care Department: Consultations with Staff

---

The City of Edinburgh Council

27 January 2005

### 1 Purpose of report

- 1.1 The purpose of this report is to advise Council on the two most recent consultations which have taken place. The first, in November and December, has been on the Vision, Mission and Aims of the new Health and Social Care Department, the draft criteria to be used to assess new structures, and the key issues which organisational models must address. The second, due to end on 31 January 2005, is on the shape of the new Department.

### 2 Summary

- 2.1 On 8 November 2004 the Interim Director of Social Work launched Consultation Paper 1 on the Vision, Mission and Aims of the new Health and Social Care Department at a meeting of managers. Managers were asked to ensure that every member of staff had the opportunity to discuss the paper in their workplace and to feed back to the Change Support Team.
- 2.2 A commitment was given that all views would be analysed and a summary published, and that these views would influence a further paper on the shape of the new Department to be produced by the Senior Management Team. This paper, Consultation Paper 2, formed the basis of the second period of consultation which began on 10 January 2005.
- 2.3 In addition to the circulation to staff, the papers were also sent to NHS Lothian, the Council's Education (Children and Families), Housing, and Corporate Services Departments, and the voluntary sector.

### 3 Main report

#### Consultation Paper 1 – Consultation Process

- 3.1 The consultation paper was launched at a Director's briefing for managers on 8 October. All managers were given a briefing pack to assist them in the presentation of the paper to their teams, and they were asked to ensure that

every member of staff was given the opportunity to have a discussion about the issues raised in the paper.

- 3.2 Every member of staff was given their own copy of the consultation paper and invited to respond to the issues raised in the paper by the use of a pro-forma. Responses were welcomed either from staff groups or from individuals.
- 3.3 Two further Director's briefings were held for staff and two open days were arranged for staff to have access to members of the Change Support Team. Approximately 200 managers and other staff took the opportunity to attend the Director's briefings.

### **Consultation Paper 1**

- 3.4 The consultation paper stressed that the most important asset for the new Health and Social Care Department is its staff, and that the Management Team is committed to developing the shape of the new Department through an open process of consultation.
- 3.5 The views of all staff were, therefore, sought on:
  - A draft statement on the Vision, Mission and Aims for the new Department;
  - Draft criteria to be used to assess the new structures;
  - Key issues that organisational models must address.
- 3.6 The paper also provided information on:
  - The context for developing the new Department;
  - City of Edinburgh Council and NHS Lothian proposals for the appointment and responsibilities of the new Director of Health and Social Care;
  - The draft Human Resources protocol under discussion for transferring or assigning posts to the two new departments;
  - The planned timetable for further consultation on the proposed structure of the new Department.

### **Response**

- 3.7 There was a very encouraging response from staff to this consultation paper. It became clear that many staff were giving careful consideration to the issues raised, and the deadline for responses was extended by two weeks.
- 3.8 In all, there were 45 written responses, many from large staff groups, representing the views of more than 300 staff. There is evidence from consultation visits that, in addition to the written responses, there is an increased level of awareness amongst staff as a result of the exercise.

## **Feedback from Staff**

### **Vision, Mission and Aims**

3.9 More than two thirds of the returns agreed that the proposed statements of Vision and Mission were appropriate for the new Department, and that either a strong or an important element of their work was reflected in the Aims. A number of amendments were suggested and these were taken into account by the Senior Management Team when deciding on the final version of the Vision, Mission and Aims. This is attached as an appendix.

### **Criteria**

3.10 Staff were also asked to consider 14 criteria to help assess alternative organisational structures and to suggest their most important four or five criteria. 73% of returns agreed that the criteria are appropriate for helping to develop the structure of the new Department. The feedback indicated that the priorities for staff are:

- Consistency with the overall Mission and Aims;
- Service integration with Health;
- Service integration with other partners;
- Equity and consistency;
- Accountability;
- Neighbourhood management.

3.11 These priorities informed the work which was subsequently done on the shape of the new Department.

### **Key Issues for Discussion**

3.12 Staff were invited to make comment on key issues likely to have an impact on the future organisational structure. Many staff took the opportunity to comment on a wide range of issues, which can be grouped under the following headings:

#### **Links with partners**

3.13 Frustration was expressed that the move to closer links with NHS Lothian had not progressed as quickly as originally anticipated. It was hoped that there would be co-terminous boundaries between the Department of Health and Social Care, NHS Lothian and the Department for Children and Families. Strong and effective links with Children and Families colleagues were regarded as crucial to the success of the new organisational arrangements.

## **Communication**

- 3.14 A number of responses stressed the desire for good communication and accountable management structures, with open communication between front line staff and management. Front line staff wish to be assured that issues which they raise are taken up and acted upon.

## **Neighbourhood Working**

- 3.15 The comments about neighbourhood working highlighted the benefits of local management and local access. These comments were balanced by reference to the need to have a consistent approach to services across the city and a recognition that some services need both central and local management.

## **Quality Assurance**

- 3.16 Support was expressed for the increasing emphasis on quality assurance, with the development of a Quality Assurance Team. There was a paper submitted which suggested a range of more specific targets to be used to evidence improved standards or outcomes.

## **Resources**

- 3.17 A number of responses made reference to the resource problems which cause operational difficulties and prevent the provision of services to a level which fully meets the needs of service users.

## **Service Comments**

- 3.18 Many responses included comments about particular service areas, analysing the strengths of how these services are currently delivered and making suggestions for service improvements. In particular there were detailed papers received from Domiciliary Care, Planning and Commissioning, and Occupational Therapy staff.

## **Comments from other Departments**

- 3.19 Both of the other City of Edinburgh Council Departmental responses indicated a general satisfaction with statements of Vision, Mission and Aims, although suggesting improvements to wording and layout. Both identified the three most important criteria as consistency with overall Vision, Mission and Aims, service integration with Health, and service integration with other partners.

## **Comments from Voluntary Organisations**

- 3.20 Two responses have been received from voluntary sector organisations to date, both taking the opportunity to raise issues specific to their service area. More generally, there were valid points made about professionals having to be aware of the needs and preferences of service users, good communication, and ease of access to services for service users. The Director has a meeting arranged with representatives of the voluntary sector on 21 January 2005.

## **Consultation Process – Consultation Paper 2**

- 3.21 Consultation Paper 2, on the proposed shape for the organisation and management of social work services, was launched on 10 January 2005. Similar to the previous consultation, managers have been asked to ensure that all staff have an opportunity to discuss the paper and to give feedback.
- 3.22 All staff have been given a copy of Consultation Paper 2 and a copy of a pro-forma on which to give their views. Two Director's briefings have taken place and there have been open meetings for staff with members of the Change Support Team.
- 3.23 The consultation ends on 31 January 2005.

## **Consultation Paper 2**

- 3.24 The model for the proposed shape for the organisation and management of social work services describes functions, not posts. It is proposed that:
- There should be a strategic focus for the strategy and planning function, including the development of strong frameworks for operational service provision;
  - All services that can be managed and delivered on a sector basis, should be managed on that basis;
  - There should be co-ordination of all sector-based activity;
  - There should be city-wide management of some services, for a temporary period, during large change programmes;
  - There should be city-wide management of small/specialist services.

## **Consultation Paper 2 - Key Issues**

- 3.25 Staff have specifically been asked for feedback on a number of key issues:
- Services which have been proposed as requiring city-wide management;
  - Services which have been proposed as relevant to sector management;
  - Key factors to be taken into account in inter-departmental and inter-agency working;
  - How to ensure equity of service across the city and effective management of client-focused programmes of care;
  - How to ensure that professional support is offered across the Department to social workers, occupational therapists and other professional groups;
  - The relationship between the strategy and planning function and the performance management and quality function;

- The relationship between the performance and quality function and the business support function;
- How to develop the relationships between the development of strategic plans, the commissioning of services from external organisations, provision of services and client assessment;
- How to develop the relationships between business support, strategy and planning, sector and city-wide services;
- Whether criminal justice social work services are appropriately located;
- Does the proposed shape ensure city-wide leadership of the Health and Social Care service?

#### **4 Conclusion**

- 4.1 A previous report to Council on 5 October 2004 detailed the initial communication with staff over the establishment of the new Departmental arrangements. This report outlines the next stage of communication and involvement of staff, the response to the consultation paper on the Vision, Mission and Aims of the new Department, and the arrangements for the current consultation on the shape of the new Department.
- 4.2 While most of the responses to Consultation Paper 1 indicated agreement with the proposed wording of the Vision, Mission and Aims statements, some amendments were suggested and these were taken into account in drafting the final version.
- 4.3 The response to the consultation has shown that staff place a priority on service integration with NHS Lothian and other partners, particularly services for Children and Families, accountability, and equity and consistency. The criteria used to assess alternative organisational structures should be consistent with the overall Vision, Mission and Aims.
- 4.4 Consultation Paper 2, on the proposed shape of the new Department, was launched on 10 January 2005, and it took into account the comments made in response to the previous consultation. The consultation ends on 31 January 2005 and it is planned to bring a report on proposals for the structure of the new Department to the Council on 24 February 2005.

#### **5 Financial Implications**

- 5.1 There are no financial implications arising from this report.

## 6. Recommendations

It is recommended that the Council:

- 6.1 notes the level of consultation with staff over the Vision, Mission and Aims of the new Department;
- 6.2 notes the views of staff as summarised in this report;
- 6.3 notes the current consultation taking place on the proposed shape of the new Department;
- 6.4 receives a further report on the shape of the new department at its meeting on 24 February 2005.



**Duncan MacAulay**  
Director of Social Work (Interim)

20.07.05

<b>Appendix</b>	Department of Health and Social Care – Our Vision, Mission and Aims
<b>Contact/tel</b>	Duncan MacAulay 0131 553 8443
<b>Wards affected</b>	All
<b>Background papers</b>	None

**Department of Health and Social Care  
OUR VISION, MISSION AND AIMS**

**OUR VISION**

The people of Edinburgh should enjoy a secure and fulfilling life, supported and protected where necessary by a range of high quality services that enable them to achieve their potential and contribute positively to their own communities.

**OUR MISSION**

Our mission is to plan, commission and deliver excellent health and social care services to the people of Edinburgh, in order to achieve better outcomes for service users and carers.

**OUR AIMS**

With service users, carers and other agencies, using the skills of our staff and the resources of the Council, we will:

- Assess individual need and arrange and provide care and support.
- Protect people from abuse, neglect and self-harm.
- Ensure that services meet equal opportunities requirements. are sensitive to the needs of minority groups and respect human rights.
- Strengthen partnerships with Health, Housing, Children and Families and other statutory, voluntary and private organisations and groups.
- Ensure fair access to services across the City.

Through this we will enable people to:

**Make informed choices**

We will place service users and carers at the centre of decision making, involving people in key decisions about their care and the services they use. We will involve service users and carers in planning future services.

**Be socially included**

We will provide services that enable people to live in their own homes and communities wherever possible, with appropriate support for them and their carers. Where alternative accommodation is needed we will ensure that good quality supported accommodation or care homes are available, as far as possible, locally.

**Live safely**

We will work in partnership with communities and with other organisations to increase levels of public safety in neighbourhoods. We have particular responsibility for the safety and wellbeing of children and vulnerable adults, working closely with colleagues in Children and Families Services, and other organisations.

**We will promote the continuing development of our staff by:**

Providing regular supervision and appraisal  
Offering appropriate training and development opportunities  
Ensuring good communication throughout the department  
Encouraging staff at all levels to contribute to continuous improvements in the quality of services provided.