



Local Government Association

the future of health and adult social care: a partnership approach for well-being



The White Paper on health and social care creates a real opportunity to meet the needs of local communities by building strong local partnerships between adult social care and health. An approach based on key strategic developments currently taking place at a national level around partnerships, neighbourhoods, governance and, in particular, Local Area Agreements could foster an effective partnership approach for the future.

what we want to achieve

To meet local and user needs

We want to create an environment which supports choice and control through the delivery of services that are built around what each person actually wants, not only to meet their health and care needs but also to improve their well-being.

Using this approach could ensure that the delivery of health and social care is tailored to the needs of the community and responsive to local circumstances. It could join-up health care, social care and health improvement strategies in a stronger and more cohesive way, making these services more reflective of local needs, whether at a local authority or neighbourhood level. The emphasis in the approach on local engagement and consultation reflects national commitments to devolve power to neighbourhoods and the wish for a more patient-focused NHS.

Services which are more integrated and responsive could also significantly improve local people's experience and choice. This should increase trust, ownership and confidence in the way that services are delivered locally.

To support the well-being of communities

A wide range of services need to be able to contribute to tackling health inequalities and promoting public health in order to create community well-being. This partnership approach enables a range of local services to be pulled together, placing the well-being agenda at the centre of procurement, commissioning and delivery. Bringing health and social care together at the heart of the well-being agenda ensures a continuing focus on improving health and reducing health inequalities locally, in addition to treating illness.

how we could achieve it

Strategic Vision

Local partners will agree the overarching strategic vision for the area. This vision will be rooted in local priorities, which are decided through consultation and engagement with local communities and a range of local partners, including the independent, community and voluntary sectors. The Local Authority and Primary Care Trusts (PCTs) will then work in partnership to deliver the vision.

This will be supported by integrated commissioning and quality assurance processes, joint workforce planning and development and an effective, shared, local performance management framework.

If the well-being agenda becomes firmly established at the centre of local strategic planning, there will be an increasing focus on ensuring that NHS and local government planning processes are closely aligned. This will be greatly assisted by reconfigured PCTs having a clear relationship with local authority boundaries, enabling synergy across all areas of service provision that impact on community well-being.

This approach could be based on shared assessment procedures that take into consideration an individual's holistic care needs, as well as their wider life interests such as their relationship with carers, family, neighbours, work colleagues and friends. The aim will be to intervene in ways that increase people's independence and their ability to exercise personal choices about how they live their lives.

Commissioning

Partners must have flexibility to determine their own commissioning arrangements, as this will ensure that local people's needs, entitlements and rights are at the centre of delivery.

Partners across the public, community, voluntary and independent sectors will decide local solutions for delivery through developing an integrated strategic commissioning framework. They will work together and share good practice, streamlining local commissioning and contracting arrangements to ensure efficiencies are maximised.

This shared strategic planning and commissioning will ensure more effective market management and contestability, to meet community needs. Local partners may develop a co-ordinating role in signposting access to good quality service providers and ensuring that local stakeholders respond to the challenges of the new market. Local government has experience it can share with the health service, through supporting the growth of new providers in the social care field and in the creation of joint ventures to deliver positive social outcomes.

Integrated commissioning will include all out of hospital care and support - community health services, public health, adult social care, housing and primary care. This will develop to include a wider range of services from across all tiers of local government and local partners which impact on people's health and well-being, such as leisure, recreation, community safety, benefits advice and access to work programmes.

This joint commissioning will need to take place at different levels: regional, sub-regional and local. This will require identification of the outcomes that best lend themselves to different levels of commissioning and the viability of joining strategic functions in order to secure effective services at optimum value. Given their new commissioning role, it is essential that GPs are encouraged to participate in these new arrangements and we are looking further at ways in which incentives could be used to foster this.

Procurement

Whilst some elements of health procurement will be undertaken at sub-regional, regional or national level, there will also be areas such as health improvement activity and community services which would be better procured in partnership, using existing local authority structures. Increasingly it will be important to align and develop existing commissioning and procurement arrangements in order to strengthen the delivery of good value, flexible and responsive services to meet agreed needs and outcomes.

Effective use of resources

As well as being more responsive, this approach may mean that delivery is more efficient and effective. Joint delivery may lead to back office functions and processes being shared and lead to synergy between different workforces. Bringing local organisations into more effective partnership arrangements will foster more effective use of

people, money and buildings and improve career pathways and skill sharing for different elements of the workforce.

It also provides an opportunity to allow for integrated information provision at the different access points, including a possible single portal for non-emergency services, ensuring better signposting to the most appropriate services.

Provider Vehicles

This approach also offers opportunities for local authorities to provide some of the services that will be contracted out by PCTs, possibly by establishing joint provider vehicles for local health improvement and for health and social care provision. These vehicles could include social enterprises, social firms and other models. This will provide real opportunities to build services around different access points such as schools, GP surgeries and existing council premises.

Joint provision and delivery would ensure a range of providers offer flexible, high quality services that would meet the needs of the whole community. The focus will remain on delivering agreed outcomes for local people, as these models are more concerned with the quality and availability of services than the specifics of the organisations that commission or provide them.

Health Scrutiny

This approach needs to be accountable to local people. One mechanism for achieving this is through a strengthened health scrutiny function built on extensive public involvement and participation from all local partners in order to ensure that it meets local needs and locally agreed outcomes. Because a scrutiny function focuses on people and communities, not organisations or structures, it is uniquely placed to be the 'guardian' of patient and public involvement in its area, to suggest innovative ways of improving services to reflect the needs and wishes of local communities and to take a strategic perspective regionally and sub-regionally. Rights to scrutinise practice-based commissioning and other providers could be given at appropriate levels, in order to review patient journeys within and across sectors.

Performance Management and Inspection

The overarching partnership will be responsible for managing pooled/aligned resources and setting and monitoring outcome-based performance targets derived from local and national targets.

Building on Local Area Agreements, the aim will be to agree both the strategic framework and local priorities with central government through an open negotiating process.

An integrated inspection framework should be established nationally to monitor the effectiveness of local partnership work, to ensure that common national outputs and standards are maintained. A revised performance framework should be based on a few high-level national outcomes that measure well-being, as highlighted in the Green Paper on adult social care.

The stronger partnership networks will be able to establish a more creative relationship with central government at both regional and national level, allowing for self assessment, peer review and interventions proportionate to risk. This approach also offers flexibility to develop innovative arrangements progressively, whilst allowing local partners to retain control of the services, processes and expenditure for which they are still directly accountable.

The role of performance management and inspection should be seen alongside the role of improvement. The Improvement and Development Agency is working with the Care Services Improvement Partnership, the Local Government Association, the Commission for Social Care Inspection and the Social Care Institute for Excellence to develop an improvement package for adult social care.

Local Governance and Accountability

What has been outlined here is very much an approach rather than a model - each locality will decide its own partnership components and structure depending on local circumstances and needs. However, it is likely that each part of the structure will be tied together by a shared performance management framework, flows of funding and

clear, consistent lines of public engagement, rather than by rigid governance structures.

Joint appointments and joint governance arrangements will ensure that the national and local priorities are monitored and delivered across the agencies.

It will build on existing developments, such as Local Area Agreements and existing examples of effective partnership working across all local agencies, in order to establish a new strategic role for local government and local partnerships.

It also has clear parallels with the changes to service provision and structures around supporting children and young people, and reflects ongoing discussion around empowering neighbourhoods to improve local services. Lessons learnt from these agendas could feed into the development of new, sufficiently funded structures to deliver the future vision for adult social care and health.

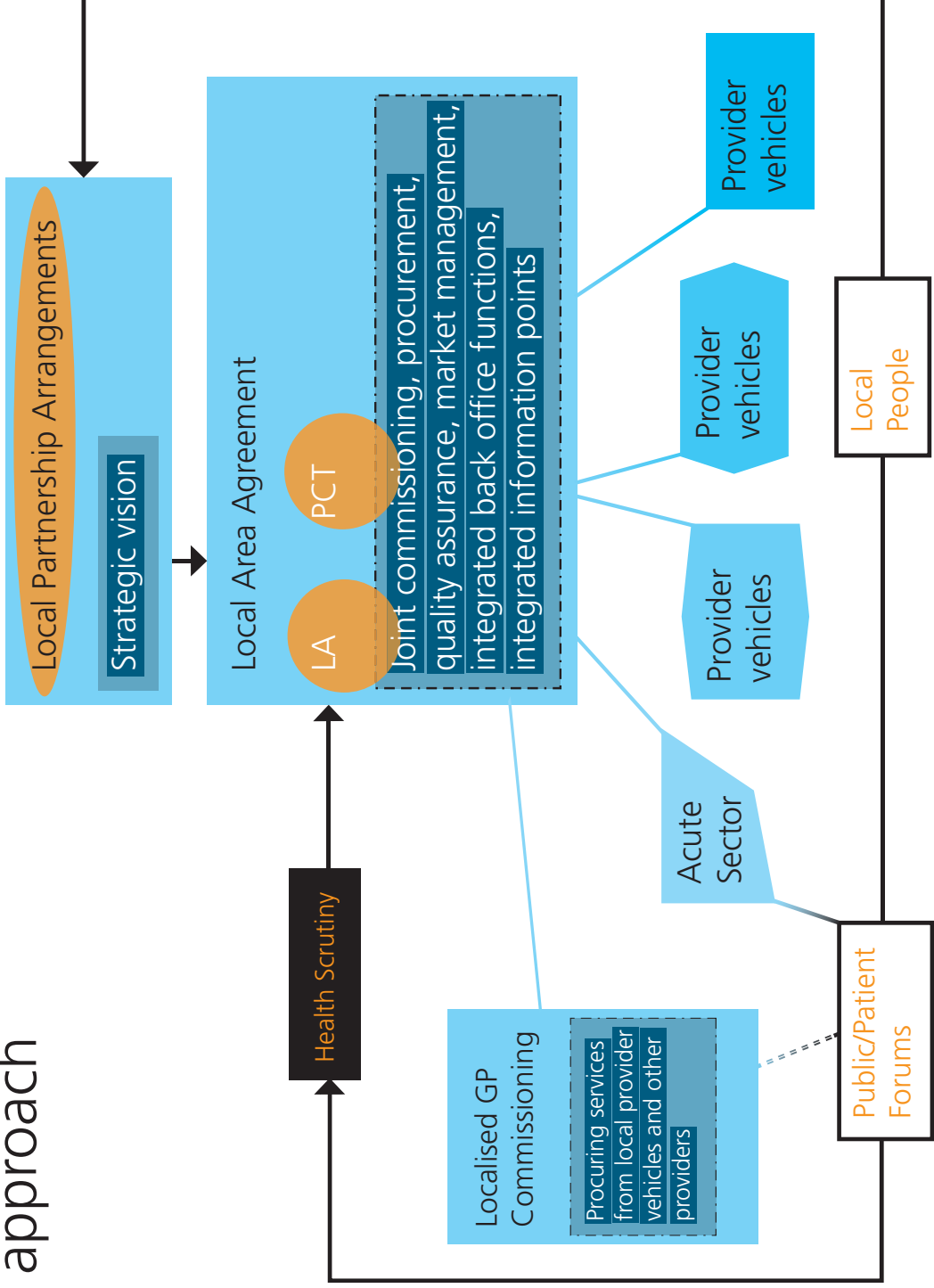
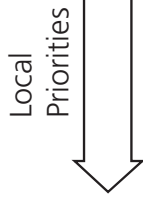
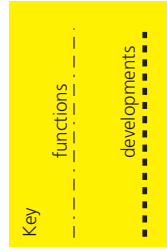
The next step

Below are a list of questions which will help guide future developments of the approach. For comments and queries, please contact the information centre at the LGA via info@lga.gov.uk or 020 7664 3131.

- What are the strong points in this approach?
- What do you think needs strengthening in this approach?
- Do you feel that this approach would encourage ownership across all agencies?
- What do you think needs to be put in place nationally to ensure a cross agency approach and delivery?



Partnership approach



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For further information please contact the Local Government Association at: Local Government House, Smith Square, London SW1P 3HZ

or telephone LGconnect, for all your LGA queries on 020 7664 3131, Fax 020 7664 3030, Email info@lga.gov.uk

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