

ABERDEEN CITY COUNCIL

COMMITTEE: Social Care and Wellbeing DATE: 22 April 2010

DIRECTOR: Fred McBride, Social Care and Wellbeing

TITLE OF REPORT: Proposed Management Structure for Social Care and Wellbeing Service

REPORT NUMBER: SCW/10/002

1. PURPOSE OF REPORT

The purpose of this report is to inform members of the finalised proposals for the management structure and functions of the Social Care and Wellbeing service. A structure chart is contained at Appendix 1

2. RECOMMENDATION(S)

It is recommended that the Committee:

- i. agrees the management structure and functions of the Social Care and Wellbeing service; and
- ii. agrees to provide delegated authority to the Director of Social Care and Wellbeing to implement further restructuring below the management structure and in accordance with Council policies and procedures for Trade Union consultation and managing organisational restructuring, thereby enabling delivery of the agreed 2010/11 budget savings.

3. FINANCIAL IMPLICATIONS

The cost of the proposed management structure will be met from existing resources within the 2010/11 budget, taking account of savings agreed by the full Council on 10 February 2010.

4. SERVICE & COMMUNITY IMPACT

The proposed management structure is lean and cost effective but also has sufficient capacity to make a major contribution to the development of a five year corporate business plan by ensuring a focus on the most vulnerable citizens of Aberdeen whilst at the same time being able to lead and co-ordinate partnership working to achieve the general wellbeing of all citizens in the city.

5. OTHER IMPLICATIONS

The Concordat agreed in November 2007 between the Scottish Government and local government sets out the terms of a new relationship based on delivering outcomes in partnership. It requires each local authority to prepare a Single Outcome Agreement with the Scottish Government based on the direction of policy expressed by the Government through a number of national outcomes that the public sector in Scotland are expected to achieve, For Social Care and Wellbeing the priority outcomes for the citizens of Aberdeen are:-

5.1 Healthier

Local Priorities:-

- Responding to an increasing **elderly population** with increasingly complex needs
- Tackling **health inequality** – closing the gap
- Addressing the needs of more **vulnerable** communities with often **complex and varied needs** e.g. Gypsies/Travellers; people who are homeless; prisoners; young people leaving care
- Reducing **alcohol and drug** related harm
- Responding to the changing **health/wellbeing, family support, preschool education, childcare and play needs of families.**

5.2 Safer and Stronger

In 2008 Aberdeen Community Safety Partnership carried out a Strategic Assessment of the key community safety issues. As a result, the following issues were identified as Strategic Priorities:-

- Controlled Drugs;
- Antisocial Behaviour;
- Domestic Abuse;
- Serious and Violent Crime;
- Fire Safety (Wilful Fireraising); and
- the Sex Industry

6. REPORT

6.1 Previous Structure

The Interim Director for Social Care and Wellbeing, appointed on 7 July 2008, assisted the creation of an integrated Social Care and Wellbeing service. The management structure comprised the following:

- Head of Children's Services with responsibility for all statutory social work services to children and families
- Head of Adult Services with responsibility for mental health services, substance misuse, learning disability, long term conditions and older people and rehabilitation services.
- Head of Contracts, Commissioning and Community Engagement with responsibility for Strategic Commissioning, Contracting and engaging

the community in changing the way we deliver social care services into the future.

The structure was fit for purpose for the period of time which it served. In particular there was clearly a need to dedicate senior management capacity to creating a strategic commissioning framework and engaging the community and partners in addressing some fundamental changes which were required in how Social Care services are delivered in Aberdeen.

6.2 Progress of Commissioning, Contracting and Community Engagement

A Strategic commissioning framework and a community engagement strategy have been created and approved by Social Care and Wellbeing Committee. These are dynamic strategies which will be able to adapt and change with changing need. Therefore there is no longer a need for a dedicated senior manager for this purpose. There is also an intention within the proposed structure that there is no longer a need for a separate contracts team and commissioning team and that these functions should be merged into one team under one team manager.

6.3 Role of Operational Managers in Strategic Commissioning

Whilst the Contracts and Commissioning team will be responsible for the process of contracts and commissioning, the decisions about what actually requires to be commissioned lies with operational managers and practitioners as it is their front line management and operational practice and experience which will capture the needs of citizens and the shape of the social care market into the future.

6.4 The Need for Additional Capacity in Adults and Older People's services

In the previous structure all of Adult Services including Criminal Justice and Older People services were managed together under one Head of Service. Growth of need in areas such as substance misuse and Older People services makes the previous portfolio of services extremely large.

It is proposed therefore to split the previous portfolio under two Heads of Service, one for Adult Services comprising services for substance misuse, mental health, learning disability and criminal justice and another Head of Service with responsibility for older people, and rehabilitation services including long term conditions. This ought to lever in sufficient management capacity into both Adult services and Older People services in order to drive forward the shifting the balance of care agenda, i.e. achieving the most cost effective mix of services to enable people to remain independent for as long as possible and also to constrain the growth in expenditure associated with an ageing population. The proposed structure will also allow a greater concentration on managing the growth of substance misuse as well as continuing to drive up standards in our Criminal Justice services.

6.5 **Working with Health Services**

There have been significant discussions with Health colleagues in relation to the proposed structure for Social Care and Wellbeing and they are satisfied that the division of Social Work services into specific care groups will facilitate positive joint working with Health and clearer points of contact. The continuation in the proposed structure of a jointly funded planning and development post will also continue to support the work of newly constituted integrated Strategic Management team between Social Care and NHS.

All of the above will strengthen and build on the work of our existing 23 integrated social care and health teams aligned to GP practices.

6.6 **Children's Services**

The Children's Services structure has followed a themed approach as follows:

- Children in Need
- Reception and Protection service
- Young People's Care and Accommodation
- Alternative Family Care
- Family & Community Support

This will achieve a greater focus on the initial identification and assessment of need and ensuring a proportionate response to child welfare and child protection concerns. In other words the Reception and Protection service will undertake initial assessment and will free up other teams to concentrate on those children and families who require a more sustained response, including planning for those children who require permanent substitute care.

6.7 **Capacity for Planning, Development and Project Management**

The Social Care and Wellbeing service is a large and complex service with currently around 1700 staff. At any one time there are a large number of projects to be driven forward including the need for improvement, redesign and innovation. It is extremely important that we have sufficient capacity for change, improvement and innovation in order to provide the most cost effective services to a growing group of vulnerable people within tight financial constraints.

It is also important that this capacity is built into operational structures in order that these responsibilities are not seen as separate to operational management and practice but are in fact the core business of operational managers.

The proposal therefore, is to convert what were previously known as Strategists into Planning and Development Managers aligned to each Head of Service and the Director. The role of these Planning and Development Managers will be to capture the knowledge and experience of Operational Managers and frontline staff and thereby build and support the case for change and improvement projects. This will ensure a much

more effective link between Operational Management and strategic planning.

One Planning and Development Manager will report to the Director and will have a co-ordinating role in terms of the range of change and improvement projects being developed across the service and will feed these into our service business plan and performance reporting framework.

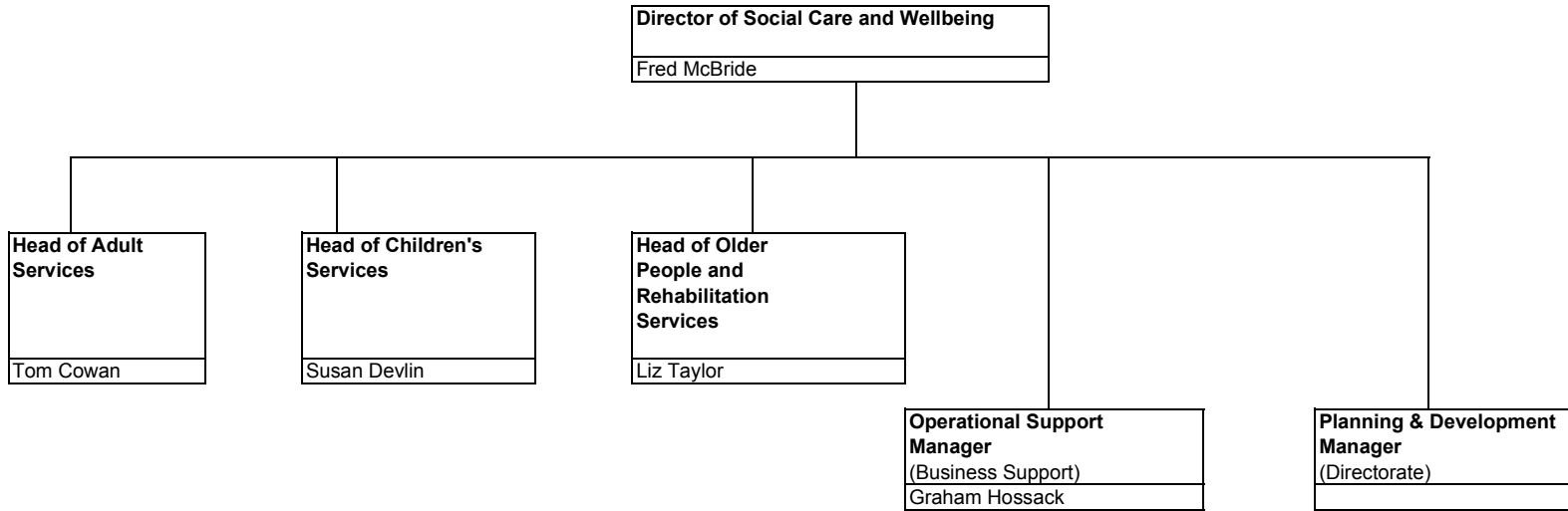
6.8 **Operational Support**

The Operational Support Manager will continue to report to the Director under the new proposals and take responsibility for ensuring the smooth running of business support to the whole service including staffing, accommodation and property management and providing the interface with HR, Finance and Corporate Communications.

All of the above proposals are met from within existing resources for the Financial Year 2010/11 taking account of agreed savings and offer the capacity to identify further efficiencies, improvements and innovations into the future.

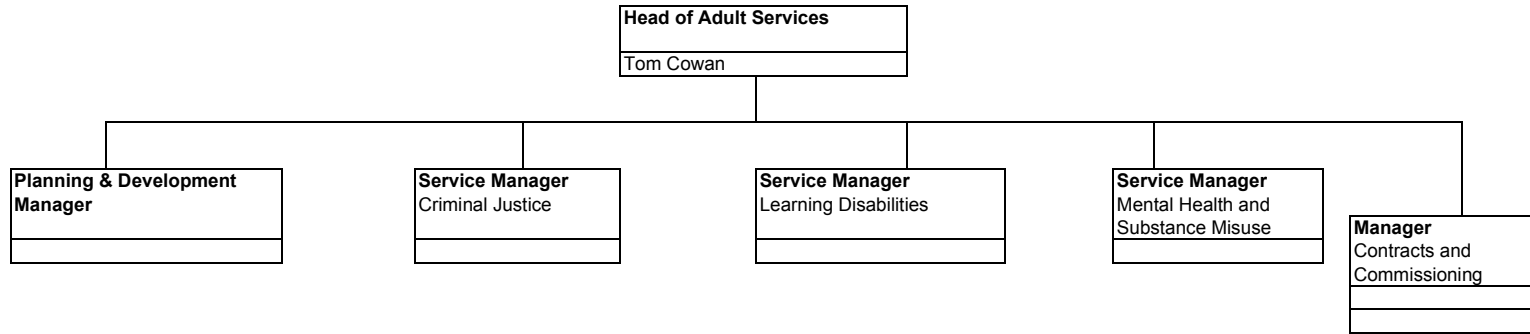
7. **REPORT AUTHOR DETAILS**

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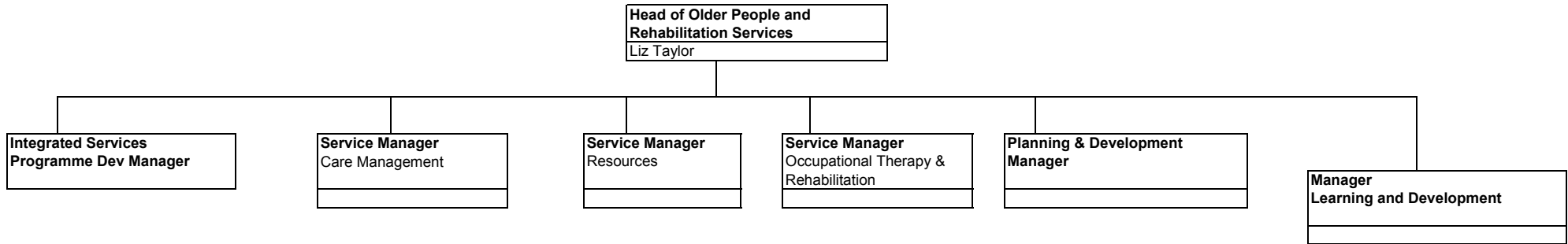


SOCIAL CARE AND WELLBEING

Adult Services 2010



Older People and Rehabilitation Services 2010



Children's Services 2010

