

WEST DUNBARTONSHIRE SHADOW COMMUNITY HEALTH AND CARE PARTNERSHIP

**Report by the Head of Legal, Administrative and Regulatory Services
West Dunbartonshire Shadow Community Health
and Care Partnership: 11 August 2010**

**Subject: Changes Required to West Dunbartonshire Council's Standing Orders
to create West Dunbartonshire Community Health and Care Partnership**

1. Purpose

- 1.1 To detail the changes which will be required to the Committee remits part of West Dunbartonshire Council's Standing Orders. In particular, the Standing Orders will need to change to remove delegation to the Social Work and Health Improvement Committee and the Education and Lifelong Learning Committee and to recommend the removal of the Health Improvement and Social Justice Partnership. In place thereof, these functions will require to be delegated to a new Council Sub-Committee to be known as West Dunbartonshire Community Health and Care Partnership. It is recommended that the Shadow Partnership makes recommendations to West Dunbartonshire Council regarding the necessary changes.

2. Background

- 2.1 At present the Council delegates its social work functions to the Social Work and Health Improvement and Education and Lifelong Learning Committees. Criminal Justice functions are delegated to the Argyll, Bute and Dunbartonshires Criminal Justice Social Work Partnership Joint Committee. The Health Improvement and Social Justice Partnership of the Council co-ordinates work with the Health Board and Community Health Partnership.
- 2.2 The present delegation by the Council of social work functions to the Social Work and Health Improvement and Education and Lifelong Learning Committees will be removed. Essentially this will disband the Social Work and Health Improvement Committee. The present delegation to the Argyll, Bute and Dunbartonshires Criminal Justice Social Work Partnership Joint Committee will remain in place. In place thereof the social work functions previously delegated to the Social Work and Health Improvement and Education and Lifelong Learning Committees will be delegated to a new Sub-Committee to be known as the West Dunbartonshire Community Health and Care Partnership.
- 2.3 It is necessary to create the CHCP as a Sub-Committee of the Council to allow equality of membership with the Health Board. The Local Government (Scotland) Act 1973 provides that Council Committees are to have a minimum of two-thirds councillor membership. However, this restriction does not apply to Sub-Committees. As the Council can delegate powers directly to a

Sub-committee, in the same way that it might delegate to a committee, there will in practice be no difference between the CHCP acting as a Council Sub-committee, rather than Committee.

3. Main Issues

- 3.1 The proposed changes to West Dunbartonshire Council's Standing Orders are intended to move all current functions and responsibilities of the Social Work and Health Improvement Committee and the relevant Social Work functions and responsibilities of the Education and Lifelong Learning Committee to a new Committee – the West Dunbartonshire Community Health and Care Partnership.
- 3.2 The suggested changes to Council's Standing Orders are detailed in Appendix 1.
- 3.3 There are four particular issues to consider within the attached Appendix regarding sections 29(b)(iii), 29(c) and Appendix 3(e) of the Standing Orders – these issues are typed in italics to allow identification of the consideration required.
- 3.4 In addition the proposed changes also creates within the Standing Orders information on the remit, delegated powers and arrangements for meetings of the Argyll, Bute and Dunbartonshires Criminal Justice Social Work Partnership Joint Committee, which was previously not included within the Standing Orders.

4. People Issues

- 4.1 The changes to Standing Orders do not themselves create people issues.

5. Financial Issues

- 5.1 The Council will still remain responsible for social work functions and the budget thereof. As such, the changes to Standing Orders to create the CHCP do not in themselves have any financial impact.

6. Risk Section

- 6.1 There are potential risks as follows:
 - There are cultural differences between the NHS and Local Authorities. With NHS Officers and Clinicians sitting on the new body along with Councillors, this diverse background may manifest itself in concern over Councillors lack of clinical knowledge verses concern over NHS Officers lack of public accountability. The voting arrangements which are proposed in the draft Scheme of Establishment try to address this issue, by encouraging consensus decisions, while ensuring that one Partner cannot overrule the other;
 - The CHCP will require to spend within the respective budgets allocated by the Health Board and Council. This will require ongoing management control of the allocated CHCP budget;

- If Partners see the new arrangements as a means of enhancing their own budgets rather than enhancing the integrated service, there may be risks to the long term future of the organisation. The financial arrangements outlined in the draft Scheme of Establishment address this issue; and
- Staff may fear integration as a threat unless the process of organisational change is handled properly. Regular communications to employees of both organisations have been made and will continue through the change process, alongside regular meetings with the joint trades union and staff representative group.

7. Equalities Impact Assessment

- 7.1 The creation of the CHCP will be subject to an Equalities Impact Assessment prior to the final reports to both Council and the Health Board in September which will seek to approve moving from a Shadow CHCP to a full CHCP.

8. Conclusions and Recommendations

- 8.1 It is recommended that the Shadow Partnership:
- (a) considers the proposed amendments to the Council's Standing Orders and considers the four issues identified at sections 29(b)(iii), 29(c) and Appendix 3(e) of the Standing Orders; and
 - (b) recommends to Council that it makes the changes detailed in Appendix 1 in order to create and delegate functions to the West Dunbartonshire Community Health and Care Partnership.

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Appendix:	Appendix 1 - Changes to West Dunbartonshire Council's Standing Orders Part II and Appendix 3 - Committee Remits
Background Papers:	None
Wards Affected:	All

PROPOSED CHANGES TO WEST DUNBARTONSHIRE COUNCIL'S STANDING ORDERS

PART II AND APPENDIX 3 - COMMITTEE REMITS

STANDING ORDERS PART II

29 - PROCEEDINGS OF COMMITTEES AND SUB-COMMITTEES

- (a) Insert at the beginning "With the exception of the West Dunbartonshire Community Health and Care Partnership, the".
- After the first sentence insert "The West Dunbartonshire Community Health and Care Partnership has its own Standing Orders for meetings".
- 29(b)(iii) This provides that Council can consider any matter which is within the remit of a Committee or Sub-Committee. *Would Council wish to retain this power in relation to the CHCP?*
- 29(c) The Ordinary Meetings of Committees and Sub-Committees are set at times determined by the Council. In the case of the CHCP, the time of meetings will require to be agreed with Health Board Members. *In these circumstances would Council wish to allow the CHCP to set its own dates and times of meetings?*
- 29(h) Insert at the end "The Chair of the West Dunbartonshire Community Health and Care Partnership shall be a Council nominee and the Vice-Chair shall be a Health Board nominee".
- 31(a) Delete "Social Work and Health Improvement Committee" and add "West Dunbartonshire Community Health and Care Partnership Sub-Committee (to be known as West Dunbartonshire Community Health and Care Partnership)" and "Argyll, Bute and Dunbartonshires Criminal Justice Social Work Partnership Joint Committee".
- 32 Other Constituted Bodies - delete paragraph (a) relating to the Health Improvement and Social Justice Partnership.
- 32(e) The Social Work Complaints Review Panel - this will remain but will now report to the West Dunbartonshire Community Health and Care Partnership Committee.

PART V

43 - DEFINITIONS

In 13(e) add "the Standing Orders of West Dunbartonshire Community Health and Care Partnership".

APPENDIX 3(e) - Education and Lifelong Learning Committee

Paragraph 2.1 General, delete bullet point 2 “Direct and supervise the discharge of the relevant functions of the Council under the Social Work (Scotland) Act 1968, the Children (Scotland) Act 1995, and other relevant legislation”.

Delete bullet point 10, being “Providing the key accountability on behalf of the Council as the ‘Corporate Parent’ for looked after and accommodated children and young people.
Alternatively should this remain with Education?”

Paragraph 2.2 - Best Value and Performance Review - Delete Social Work and Health Department Service Plans.

Paragraph 2.4 - Early Years/Out of School Care Services, propose that there are no changes to this paragraph, i.e. to remain within remit of Education and Lifelong Learning Committee.

Alternatively should elements be considered as a role of the CHCP?

Paragraph 2.6 - Delete all of this paragraph.

Appendix 3(k) - Social Work and Health Improvement Committee - delete this appendix as it stands in its entirety and replace with the following:

“West Dunbartonshire Community Health and Care Partnership (the CHPC)”

1. Membership/Arrangements for Meetings

- 1.1 The membership of the West Dunbartonshire Community Health and Care Partnership will comprise 12 members. Six members will be nominated by NHS Greater Glasgow and Clyde Health Board and the remaining 6 members will be Elected Members. The Chair shall be a Council appointee and the Vice-Chair shall be a Health Board appointee.
- 1.2 The West Dunbartonshire Community Health and Care Partnership shall have its own Standing Orders for meetings, as approved by Council and the NHS Board.
- 1.3 In addition to the power to establish sub-committees, the West Dunbartonshire Community Health and Care Partnership will have the power to establish Working Groups to examine and report on specific issues.

2. Role and Remit

2.1 General

The purpose and remit of West Dunbartonshire Community Health and Care Partnership Sub-Committee is to:-

- Direct and supervise the Health Improvement activities of the Council.

- Direct and supervise the relevant functions of the Council under the Social Work (Scotland) Act 1968, the Children (Scotland) Act 1995, related Acts, and other relevant legislation.
- Direct and supervise the activities of the Council under national and local Social Inclusion/Social Justice agendas.

The West Dunbartonshire Community Health and Care Partnership Sub-Committee will undertake a number of general responsibilities. These include:-

- Ensuring that the committee retains a primary focus on its responsibilities for delivering on the outcomes which are within its area of responsibility - as set out in both the Community Plan for West Dunbartonshire, and the Council's Corporate Plan.
- Monitoring the work of the committee and ensuring that the activities reported to the committee are responsive to the needs of local people.
- Involving users and carers, local people, employees, partners and other stakeholders in service planning, and ensuring that their views are sought on the development and delivery of services.
- Promoting Social Inclusion and Equalities in all areas for which the committee has responsibility.
- Promoting Health Improvement in all areas for which the committee has responsibility and as part of the wider activity of the Council.
- Promoting the delivery of relevant inter agency collaboration and supporting partnership working, particularly in the context of Joint Future and NHS integration.
- Setting performance targets (within the context of the Corporate, Service and Strategic Planning processes, including the Joint Performance Information Assessment Framework, and the NHS Community Health Partnership Annual Plan), for the overall standards of service and to receiving reports on these.
- Directing the implementation of the 21st Century Review of Social Work proposals.
- Establishing a strategic financial framework to underpin service delivery, continuous improvement and partnership arrangements.
- Monitoring capital expenditure in respect of each area of the committee's activity.
- Monitoring revenue budgets in respect of each area of the committee's activity.

- Considering the findings and recommendations of any working groups relevant to the committee's areas of activity.
- Providing the key accountability on behalf of the Council as the 'Corporate Parent' for looked after and accommodated children and young people.

2.2 Best Value and Performance Review

The West Dunbartonshire Community Health and Care Partnership will monitor the implementation of Best Value and other continuous improvement initiatives within the scope of its remit. It will scrutinise statutory and other performance information. This may include:-

- Approving relevant service plans, including the Social Work and Health Departmental Service Plan, the Integrated Children's Services Plan and setting targets.
- Scrutinising performance reports on Service Plans.
- Considering reports on Best Value Service Reviews and other continuous improvement and quality initiatives.

2.3 Partnership Arrangements

The West Dunbartonshire Community Health and Care Partnership Sub-Committee will work in partnership with the Argyll, Bute and Dunbartonshire Social Work Criminal Justice Partnership Joint Committee and the Criminal Justice Authority to ensure that key criminal justice issues are addressed. For example:-

- Developing and enhancing the range and quality of community based disposals and services, so enabling courts to reduce the use of custody.
- Developing throughcare services.
- Tackling offending behaviour.
- Involving the community in responding to crime and its consequences and reducing the fear of crime, with other Community Safety Partners.
- Supporting victims of crime.
- Responding to the challenges and opportunities of joint working through the new Community Justice Authority and the Management of Offenders (Scotland) Act 2005.

2.4 Social Work Services

The West Dunbartonshire Community Health and Care Partnership will develop and monitor the provision of relevant Social Work services. This may include:-

- Targeting the provision of public funded care, help and support to the people most in need of care and protection.
- Supporting independent living to enable people to live at home safely wherever possible.
- Providing high quality services which address people's needs and which respects their rights.

For all Adult Community Care Services, and in partnership with relevant Health Services and other partners, the CHPC will oversee:-

- Assessing and responding to needs for services of all adult community care client groups.
- Assessing care needs and through care management systems planning and co-ordinating community care and support services for people at home or in hospital.
- Implementing agreed delayed discharge policies to return people from hospital care to their own communities or alternative care settings.
- Ensuring access within available resources to required services.
- Ensuring that a suitable Adult Protection scheme is implemented.
- Determining social policy and service provision at a local level in association with NHS, Communities Scotland, Housing Associations, the Community Planning Partnership, voluntary and independent providers.
- Assessing and designing services to address the emerging needs of minority ethnic groups.
- Promoting anti-poverty and financial inclusion strategies, within the overall council framework, and in partnership with the Community Planning Partnership and other agencies and providers.
- Providing welfare rights/money/debt advice to maximise the income of those who are entitled to welfare benefits or who have low incomes from work, including campaigning for the uptake of benefits.
- Through care management, money advice and welfare rights supporting people into work, education and training.

- Providing welfare rights and money advice to all community care services to ensure that incomes from state benefits are maximised to augment their care and support opportunities.
- Improving training and employment opportunities for all adult service users.
- Encouraging the development of community based local organisations, forums, and user and carers groups to participate in the strategic work of service planning and consultation.

2.5 Health Improvement

The West Dunbartonshire Community Health and Care Partnership will work with partners to develop and monitor the provision of relevant Health Improvement services.

This may include:-

- Assessing and defining local needs.
- Developing and monitoring local strategy to support national policy.
- Developing and monitoring local strategy to deliver on local priorities for health improvement.

2.6 Services for Children and Young People

The West Dunbartonshire Community Health and Care Partnership will develop and monitor the provision of relevant social work services for children and young people. This may include:-

- Providing support in ways which enable children and young people to take advantage of opportunities which help them to achieve their full potential.
- Promoting the protection of children from physical, sexual and emotional abuse and neglect, continuing to give high priority in staffing, training and research, working with other statutory and voluntary agencies and monitoring procedures and practice in the light of developments.
- Assessing and responding to children considered to be Children In Need such as those affected by parental substance misuse, mental health issues or disability.
- Providing support which enables children and young people to live, whenever possible, within their own families in a safe, secure supportive family setting.
- Preventing family breakdown and the admission of children into care by providing practical support to families in their own home, targeted financial support, the use of community initiatives, planning and assessment

mechanisms to ensure that children are adequately supported within the community.

- Providing substitute family care for children who require to be looked after and accommodated by the local authority.
- Recruiting, training and supporting foster carers and adoptive parents to meet the needs of children and young people in care, including those from black and ethnic minority groups, and those with additional needs.
- Providing a range of residential care for children, which are well staffed and flexible in response to need, and providing greater training opportunities for residential staff in line with national targets.
- Preparing young people leaving residential care for adult life by offering a range of practical, personal support to assist them with accommodation, employment and income maintenance.
- In association with Housing Services and other statutory and voluntary agencies, improving the services for homeless young people.
- Working within the Children's Hearing System to develop programmes which reduce the possibility of future involvement in the Criminal Justice system as a consequence of serious or persistent offending.
- Assessing and responding to the care and support requirements of children with additional needs.
- Planning for the transitional needs of all young people moving into Adult Services from Children's Services.
- Assessing and designing services for the emerging needs of minority ethnic groups.
- Overseeing the implementation of 21st century review proposals and securing a programme of continuous improvement for Children's Social Work Services.

2.7 Delegated Powers

The West Dunbartonshire Community Health and Care Partnership will have full delegated powers to implement its functions, remit and responsibilities."

Insert a new Appendix 3(o), being:

"Argyll, Bute and Dunbartonshire's Criminal Justice Social Work Partnership Joint Committee

1. Membership/Arrangements for Meetings

- 1.1 The membership of the Argyll, Bute and Dunbartonshire's Criminal Justice Social Work Partnership Joint Committee will be 6 Elected Members, being 2 each from Argyll and Bute Council, East Dunbartonshire Council and West Dunbartonshire Council. In addition, the Joint Committee may decide that the three Councils may each nominate one person who is not a member of any of the three Councils to represent local community interests within that Council area.
- 1.2 A quorum for the Joint Committee shall be 3 persons, constituted by the attendance of one member of each member authority or his/her substitute.
- 1.3 More detailed provisions regarding membership are contained in a Minute of Agreement executed between Argyll & Bute, East Dunbartonshire and West Dunbartonshire Councils.

2. Role and Remit

2.1 General

The purpose and remit of the Argyll, Bute and Dunbartonshire's Criminal Justice Social Work Partnership Joint Committee shall be:-

- Direct and supervise the Social Work Criminal Justice activities of the Council, including:-
 - Multi-Agency Public Protection Arrangement;
 - Prison based Social Work Services;
 - Probation Services;
 - Criminal Justice Community Services;
 - Services to Courts;
 - Aftercare/Licences and Parole Services; and
 - Services for sex offenders.
- To work in partnership with the Criminal Justice Authority to ensure that key criminal justice issues are addressed, including:-
 - Developing and enhancing the range and quality of community based disposals and services, so enabling courts to reduce the use of custody.
 - Developing through care services.
 - Tackling offending behaviour.
 - Involving the community in responding to crime and its consequences and reducing the fear of crime, with other community safety partners.
 - Supporting victims of crime.
 - Responding to the challenges and opportunities of joint working through the new Community Justice Authority and Management of Offenders (Scotland) Act 2005.

2.2 Best Value and Performance Review

The Argyll, Bute and Dunbartonshire's Criminal Justice Social Work Partnership Joint Committee will monitor the implementation of Best Value and other continuous improvement initiatives within the scope of its remit. It will scrutinise statutory and other performance information. This may include:-

- Approving relevant service plans and setting targets.
- Scrutinising performance reports on Service Plans.
- Considering reports on Best Value Service Reviews and other continuous improvement and quality initiatives.

2.3 Delegated Powers

The Argyll, Bute and Dunbartonshire's Criminal Justice Social Work Partnership Joint Committee will have full delegated powers to implement its functions, remit and responsibilities."