

Agenda item:

[No.]

General Purposes Committee

On 29 March 2011

Report Title: Summary of Adult and Community Services Restructuring Proposals

Report of: **Mun Thong Phung, Director of Adult, Culture and Community Services**

Signed:

Contact Officers: Helen Constantine, Head of Business Improvement

Wards(s) affected: **All**

Report for: **Non-Key Decision**

1. Purpose of the report

- 1.1. To provide an overview of the proposed restructuring of Adult Services & Commissioning business unit and Safeguarding & Strategic Services' business unit.
- 1.2. To seek agreement from the General Purposes Committee (GPC) to the recommendations set out in section 3 below.

2. State link(s) with Council Plan Priorities and actions and /or other Strategies:

- 2.1. ACCS Council Plan Priorities are:
 - Encouraging lifetime well-being at home, work, play and learning;
 - Promoting Independent living while supporting adults and children in need; and
 - Delivering excellent customer focused cost effective services.
 Full Council Plan Priorities can be found on the left hand side of the page at <http://harinet.haringey.gov.uk/index.htm>.
- 2.2. The proposals summarised in this report are designed to implement the council's budget strategy.

3. Recommendations

3.1. That members:

- Note the overview of the current and proposed future shape of the service and summary of proposed restructures set in Appendix 1 of this report.
- Note the delegation of authority to the Director of Adult, Culture and Community Services as outlined in table contained in section 4 of Appendix 1, taking into account of the appropriate Equality Impact Assessment.
- Note the requirement for further reports on the conclusion of staff and public consultation on the following proposed closures:
 - Adult Services Residential Care Homes;
- Note the requirement for further reports on the conclusion of staff consultation on the following proposed restructures:
 - New Reablement Service (to be formed by ring-fencing existing Home Carers);
 - Assessment, care management, equipment and occupational therapy (re-alignment to match self-directed support pathway).
- Note the progress of reductions in administration and business support that are being actioned via Delegated Authority.

4. Reason for recommendation(s)

- 4.1. To ensure that GPC is briefed on the overall shape of organisational changes as they affect Adult & Community Services and Safeguarding & Strategic Services, and is able to confirm the most appropriate route for decision-making on elements of these changes, as set out in section 4 of Appendix 1.
- 4.2. The proposed changes are designed to create services that are more flexible, more personalised and give greater choice and control whilst delivering financial savings to contribute to the £84 million savings the Council must find over the next three years.
- 4.3. To minimise the delay in realising savings towards the council's overall targets.

5. Other options considered

- 5.1. Where applicable, reports on specific changes will detail other options considered.

6. Summary

- 6.1. Adult Services & Commissioning and Safeguarding & Strategic Services be restructured in response to three key drivers:
- To promote a healthier Haringey where every adult has an equal chance of having a healthy, safe and fulfilling life.
 - The current financial challenges placed on adult social care, which involves considerable reductions in grant funding and core budgets.
 - The need to respond to changes within a framework of new policy directives from central government.

- 6.2. The proposals set out in this paper seek to respond to these challenges, that will ensure the Borough (including partners) can secure support for the most vulnerable whilst not losing sight of the need for universal and early interventions that prevent escalation into greater difficulty; in summary, the development of a clear balance, within available resources, of universal, targeted and specialist provision, including the introduction of personalisation.
- 6.3. The strategic direction and priorities for future Adult Social Care service delivery are as follows:
- [Putting People First](#) (Department of Health Transformation of Adult Social Care Agenda) and the delivery of personalised care through personal and individual budgets. The aim of personalised care is to give vulnerable adults more choice, control and independence through a personal budget.
 - Continue to enhance Adult Safeguarding;
 - Developing early intervention and prevention; develop volunteering, social capital and enablement, working in partnership with Haringey's residents and other internal and external agencies such as: Housing, Health and the Voluntary Sector. We need to work closely with our residents and with other key partners to develop good prevention services with the wider community in recognition that this is wider than a Council responsibility.
- 6.4. Different types of services are needed to take forward the strategic direction and deliver the priorities for Adult Social Care for example:
- **Reablement** – this means that a person will receive a very short intensive burst of rehabilitation, using a combination of focused 'reabling' home care which is about doing 'with' and not 'for' someone, occupational therapy and physiotherapy, either following a hospital admission or preventing admission to get a person back on their feet and functioning independently again without the need for long-term care.
 - **Extra-care** – this means very sheltered care. It can be alternative to residential care as there is 24 hour on-site care. The difference being that people have their own front door and some independence and the extra dignity this affords.
 - **Personal budgets** – those assessed and eligible for care can have a personal budget which can give greater choice and control over their care arrangements and help people have more flexibility terms of when and where they want to arrange their care. Adult Services are still there to help and support people and risk assessments and safeguarding practice applies, as per usual procedures.
 - **Neighbourhood Well-being Networks** – work with the voluntary sector and stimulate the development of social capital to deliver early intervention and prevention, including 'good neighbour' schemes, volunteering and time bank.
- 6.5. The organisational restructuring of the two business units recommended in this report has been developed to ensure the structure is fit for purpose. The revised organisational structure has been developed within the cash envelope available,

whilst delivering the required Council reductions.

- 6.6. In doing so, we have taken available opportunities to review business efficiencies by reviewing the use of administrative and management resources, with a view of streamlining them and taking into account the Corporate Support Function Reviews.
- 6.7. A table setting out the proposed restructures and unit closures is included in section 4 of Appendix 1. For those still to conclude staff consultation, we propose that this committee agree to either delegate the final decision to the Director of Adult, Culture and Community Services (for those affecting under 20 staff) or require a report to a future meeting of the committee as set out in the table. In all cases the final recommendations will be accompanied by a full account of the consultation, a response to points raised in consultation and an Equalities Impact Assessment.

7. Chief Financial Officer Comments

- 7.1. The Chief Financial Officer has been consulted in the preparation of this report and comments that the savings set out are consistent with those agreed by Cabinet and are essential in achieving the budget strategy agreed by the Council.

8. Head of Legal Services Comments

- 8.1. The Head of Legal Services has been consulted on the contents of this report. Consultation with staff and recognised trade unions is an essential part of the responsibilities of an employer in the course of a business reorganisation. The requirement for consultation with employees and their trade union representatives is recognised within the report.
- 8.2. In each of the separate proposals outlined in this report due consideration will need to be given to responses received as a result of the consultation before any final decision is reached concerning the proposals outlined. Further, due consideration must also be given to the authority's public sector equalities duties before such a final decision, taking into account the outcome of an appropriate equality impact assessment.

9. Head of Procurement Comments – [Required for Procurement Committee]

- 9.1. Not applicable.

10. Equalities & Community Cohesion Comments

- 10.1. For each saving proposal, an Equalities Impact Assessment (EqIA) screening document has been completed to identify whether a full EqIA was needed.

- 10.2. Where the screening document identified potential impacts on service users, 'service delivery' EqlAs are being conducted – this is the case for the majority of the savings proposals.
- 10.3. Staffing EqlAs are being undertaken for each proposed restructure or service closure.
- 10.4. final decisions whether made by the GPC or by delegated authority will have full regard to the findings of full EqlAs being conducted on service delivery and on staffing (the proposed restructures and unit closures are detailed in section 4 of Appendix 1).

11. Consultation

- 11.1. There is a formal period of consultation for each of the proposed restructures or unit closures. During this period meetings are held with staff and trade union representatives. Consultation with service users and other stakeholders also forms part of the 'service delivery' EqlA process.
- 11.2. The consultation is designed to identify those people who wish to request voluntary redundancy as a means of minimising disruption to services and staff.

12. Use of appendices /Tables and photographs

- 12.1. Appendix 1: Overview of the Proposals for the Future Shape and Role of Adult and Community Services
- 12.2. Appendix 2: Organisation Charts

13. Local Government (Access to Information) Act 1985

- 13.1. Not applicable

Overview of the Proposals for the Future Shape and Role of Adult and Community Services

1. The Current Position

Adult, Culture and Community Services is currently organised into four delivery Business Units as follows:

- Adult Services and Commissioning;
- Safeguarding and Strategic Services;
- **Recreation Services; and*
- **Culture, Libraries and Learning.*

**Recreation Services and Culture, Libraries & Learning have been excluded from this report, as has Community Housing Services. This has been covered in the Rethinking Haringey proposals that have previously been submitted to GPC.*

Within Adult Services & Commissioning and Safeguarding & Strategic Services, there are a number of services as outlined below.

Adult Services and Commissioning Business Unit

Assessment and Personalisation and Occupational Therapy

This service assesses the personal care needs of adults and the support needs of their carers. Each assessment is carried out by a care manager in consultation with the service user. Following the assessment, and within agreed eligibility criteria known as Fair Access to Care Services, the service may provide support ranging from help within the user's home, such as assistance with personal care tasks, to residential or nursing care for people with more complex needs. This includes ensuring a safe and sustainable discharge from hospital.

In line with the *Putting People First* programme, the Council is committed to delivering personalised care through self-directed support, with the aim of ensuring that vulnerable adults have greater choice, control over their care, and over their lives. The proposed changes are designed to respond to the changing needs of older people and those with mental health issues by providing more cost effective, individualised care and support packages, with the aim of ensuring they are able to live more independently in the community.

The Council in line with Government policy have been piloting a new way of delivering adult social care services. The pilot programme *Transforming Social Care* has been directed and developed under the governance arrangement of the Transforming Social Care Board. The pilot programme has developed a new social care system for delivery of a range of services to vulnerable residents and their carers. This service includes a

single point of access to Adult Social Care through the Integrated Access Team. This service provides a first point of contact for all social care enquiries; the service provides a high level of advice and sign-posting to services which are generic and specialist; as well as, a contact screening service for people who are likely to be entitled to services funded by the Council in line with its eligibility criteria.

The Council in partnership with the NHS intend to establish a reablement assessment service for all referrals to adult social care. This new service will include both health and social care staff to undertake assessment of need, set goals for the re-enablement with individuals before moving further along the social care pathway to having a longer-term package of support funded from the Council. The service will aim to optimise resident's independence before agreeing the level of funding they might need in the longer term. The new service will also include an income maximisation assessment to ensure residents are claiming their full entitlement to welfare benefits.

A new service of Personal Budget Support and Review is to be established to provide advice and practical assistance to residents in organising the various activities/services necessary to meet people's eligible needs.

Integral to the development of the service offer to residents is the development of a Personalisation/Self Directed Care Hub. It is proposed to reconfigure the current day service (Winkfield Resource Centre), into a user led group service where staff are available to organise and procure group activities.

The development of local social capital is integral to the development of a transformed social care system. The pilot programme has been operating a number of small social media and volunteering schemes (Neighbourhood Connects and Time Bank).

Staff in this service will be re-aligned in accordance with the above. This will be implemented using the council's reorganisation procedures. The proposals will affect 124 staff. Given the number of staff that are covered by these changes, it is proposed that a specific report is referred to GPC in April 2011. It is envisaged that a very small number of staff will be displaced by this re-alignment.

Learning Disabilities

The service consists of social workers and health workers working in Partnership, and provides health and social care services for people with learning disabilities and their carers. These may include issues around a person's housing, occupation, recreation and/or emotional needs. The user's choice, independence, rights and inclusion is maximised in their care plan. The team works with people from the age of 16, helping to facilitate their transition into adult services.

Closure of Whitehall Residential Care Home for People with Learning Disabilities – the proposal is to re-provide this service to enable people through personal and individual budgets to access more ordinary living options. The move from institutionalised care to supported living arrangements offers residents: improved choice, flexibility, freedom

and control, whilst offering greater value for money with the added benefit of access to housing benefits. This will affect 30 employees and therefore a specific report will be provided to GPC in June/July 2011.

We have also taken the opportunity to rationalise administrative and management functions which has led to a reduction in posts. This is being achieved via Delegated Authority.

Provider Services

There are three in-house residential homes for Older People in the Borough. The proposal is to close The Red House, Cranwood and Broadwater Lodge residential homes. There will be no change to Haringey Council's eligibility criteria to access adult social care services. It is worth noting that two-thirds of all residential care is already purchased from the independent sector. The cost of running residential care that is owned and run by the Council is approximately 40% more than that for those owned by other sectors, partly due to higher administration and labour costs. A higher percentage of older people's social care budget is spent on residential care, which means that there is less available to spend on more personalised services, which are tailored to the needs of individuals.

The number of staff affected at The Red House is 43.

The total number of staff affected at Cranwood is 40 and Broadwater Lodge is 44.

It is proposed that specific reports are referred to GPC in June/July 2011.

The proposed Mental Health Unit closure, Alexandra Road is a 24/7, 365 days/year service that provides care and support to people with mental health problems and are in crisis. People usually stay there for a maximum of one week, as an alternative to hospital care and provides a crisis service to 8 people when at full capacity. The number of staff affected is 16.

It is proposed that, given the number of staff involved and the fact that funding is ceasing in July 2011, this change will be implemented by delegated authority once the Council has taken its final decision on the future of this service following the public consultation which ends on the 30 April 2011.

Woodside Day Centre, The Haven and the Six8Four Centre provide care and support to more frail and/or vulnerable people living in the community who have been assessed by a social worker as needing such a service and who do not require more intensive long-term care e.g. in a residential care home. People who attend are financially assessed to determine how much they contribute towards the cost of their support in the community, including any day care element.

The number of staff affected at Woodside Day Centre is 8.

The number of staff affected at Six8Four Centre is 7.

The number of staff affected at The Haven is 6.

It is proposed that this change is implemented by delegated authority once the Council has taken its final decision on the future of these services following the public consultation which ends on the 30 April 2011.

The Grange in Tottenham and the Haynes Centre in Hornsey provide services specifically for older people who are still living in the community with varying degrees of dementia. The closure of a centre and merging on one site will result in savings in the form of staffing efficiencies. There should be no reduction in levels of care and support to service users and their carers. It is proposed that this is actioned via delegated authority.

There are four Council funded drop-in centres for Older People: Abyssinia Court, Willoughby Road, The Irish Centre and Woodside House (separate building from Woodside Day Centre). The drop-in centres are used solely by people who do not meet threshold into care services criteria. They are 'walk-in', non-assessed services which are not charged for. The Council has no legal obligation to provide such a service. The number of staff affected is 7. It is proposed that this change is implemented by delegated authority once the Council has taken its final decision on the future of these services following the public consultation which ends on the 30 April 2011.

The in-house Home Care Service is small and of good quality, but relatively expensive service providing short-term intensive and long-term continuing domiciliary care for people over 50 years. It currently consists of 82 staff. The new reablement service will provide service users a very short intensive burst of rehabilitation, using a combination of focused, 'reabling' home care, occupational therapy and physiotherapy, either following a hospital admission or preventing admission to get a person back on their feet and functioning independently again without the need for long-term care, thus reducing pressure on commissioning budgets. This proposal will not adversely impact service users, as it has been demonstrated that having a period of reablement, prior to agreeing a longer term package/personal budget, results in improved outcomes for people by enabling them to live more independently for longer in their own homes. However, it is anticipated that a significant number of displaced home care workers will be recruited to the new reablement service on adjusted job descriptions and contracts. The aim is to select as many reablement workers as possible from our pool of home carers. A specific report will be prepared for GPC with regard to the detailed arrangements of this new reablement service.

Commissioning Services

Commissioning value for money personalised services is core to the work of the strategic commissioning unit in order to transform adult services and deliver the required efficiencies. Market development and better market management is also central to the work of the unit. Joint strategic planning and commissioning will continue to be informed by the work of internal and external partners such as the third sector and NHS London (and good practice learning from other areas), in relation to developing systems around joint planning and commissioning which will be flexible to meet the needs of the local population, and to respond to the [DH World Class Commissioning programme](#). This work will affirm that most commissioning will be

driven locally and involve all stakeholders in the health and wellbeing agenda. Strategic policy and planning support inform the strategic commissioning function council as well as directorate-wide. This function will transfer to Corporate Centre as part of the Support Function Review. Reviewing the Directorate's plans, supporting the reporting mechanism to external assessors and Central Government and working on specific aspects of the personalisation agenda are also active elements of the team's remit. The service also supports the Research Governance Framework (a statutory requirement), which has been developed in such a way as to effectively link with Health and academic ethics committees, and the council's consultation framework.

This division is responsible for the strategic development of carers' services. There are currently 16,000 carers in the Borough and services offered are: respite, support, advice and information.

Posts have been deleted as part of the efficiency savings via delegated authority.

Safeguarding and Strategic Services Business Unit

Safeguarding and Strategic Services manages and co-ordinates a range of services that manage and/or deliver infrastructure and back office functions for the department. These include: Social Care Finance, Safeguarding, Supporting People programme, contract management, complaints, system development and service/business improvement.

Given the nature of this business unit a great number of the posts have been covered by the Corporate Support Functions Review. This and other drivers referred to earlier have led to the remaining services in this business unit being merged with services currently in Adult Services and Commissioning business unit to form the new Adult and Community Services.

This has provided the opportunity to delete one Assistant Director role as set out in the *Rethinking Haringey* proposals, which have been previously presented to GPC.

Management, Administration and business support staffing rationalisation

Adult Social Care has had to set the strategic direction and priorities for the service over the next three years in the context of budget challenges. This proposal is part of the re-organisation of Adult Social Care against this background. The aim is to make savings and contribute to the £41 million savings requirement for 2011/12.

With this in mind, there has been an administration and business support review within Adult Services & Commissioning and Safeguarding & Strategic Services, in order to contribute to the overall savings. In the course of the review, administrative resources have been reassessed to ensure that any duplication/multi-handling is eradicated; and, that appropriate structures are in place to support the delivery of core business and have greater consistency across the division.

This comprises of a number of staffing restructures, including:

- Reconfigure the two business units and bring together services into revised groupings that will see a reduction in the number of Assistant Director posts from two to one, as set out in *Rethinking Haringey* and referred to earlier;
- Deletion of the Independent Chair of Safeguarding post;
- Staffing efficiencies at middle manager level (four posts) as referred to earlier and being implemented via delegated authority;
- Deletion of two admin officer posts and one administrative manager post within the Learning Disability Partnership, as referred to earlier and being implemented via delegated authority;
- Deletion of four Business Manager posts, as referred to earlier and being implemented via delegated authority;
- Deletion of two posts in the Systems Development (Framework-i) service; this will be implemented via delegated authority;
- Deletion of two posts in the Financial Assessment Team; this will be implemented via delegated authority;
- Deletion of one post in the Safeguarding Team; this will be implemented via delegated authority; and

All proposals for the deletion of the above-mentioned posts have followed the provisions of the Council's policies regarding organisational restructuring and redundancy, and taken due account of any equalities issues relating to staff.

2. The challenge

The need to reorganise the structure is in response to three key drivers:

- To promote a healthier Haringey where every adult has an equal chance of having a healthy, safe and fulfilling life.
- The current financial challenges placed on adult social care, which involves considerable reductions in grant funding and core budgets.
- The need to respond to changes within a framework of new policy directives from central government.

The proposals set out in this paper seek to respond to these challenges, that will ensure the Borough (including partners) can secure support for the most vulnerable whilst not losing sight of the need for universal and early interventions that prevent escalation into greater difficulty; in summary, the development of a clear balance, within available resources, of universal, targeted and specialist provision, including the introduction of personalisation.

3. The Overall Shape of Change

In brief, the proposal is that the Service reduces from two business units to one – Adult and Community Services - with a commensurate reduction in the number of Assistant Director posts from two to one Deputy Director post. The two reconfigured business units bring together services into revised groupings that see further reduction in the number of managers, effectively de-layering the current arrangements. These business

units are described below.

Assessment and Personalisation

This service will deliver the following functions:

- Delivery of the personalisation agenda including personal care, budgets and comprehensive information and advice;
- Care management and assessment for older people and adults with physical and mental health disabilities; and
- No recourse to public funds.

Putting People First, a shared vision and commitment to the transformation of adult social care, was published in December 2007 and set out the shared aims and values for transforming social care. Personalisation is a new way of providing support to all users of adult social care in a much wider range of ways to help them achieve what they want to do with their lives. A number of key features of personalisation have already been put in place, including self-directed support, self assessment, and personal budget and personalised support plans.

The new Government continues to support the personalisation agenda which is a key principle specified in their Vision for Adult Social Care. The Vision states that individuals not institutions should take control for their care. Personal budgets, preferably as direct payments, should be provided to all eligible people. The Vision also states that information about care and support should be available for all local people, regardless of whether or not they fund their own care.

This service will be key to the continued successful delivery of the personalisation agenda.

Adult Commissioning

This service will deliver the following functions:

- Value for money commissioning of adult care services;
- Market development and management;
- Council lead for the integration with the NHS;
- Mental health care for Adults and Older People;
- Strategic planning, development and management of the council wide voluntary sector; and
- Managing Supporting People programme.

The Adult Commissioning Service will be integral to delivering priorities outlined in the new *Vision for Adult Social Care* and the *Putting People First* concordat. The commissioning service will need to ensure it does this within strict financial constraints in order to achieve the most cost effective, personalised services. The Government propose a vision for a thriving social market in which innovation flourishes, with councils playing a key role in stimulating, managing and shaping the market. Councils will need to support communities, voluntary organisations, social enterprises and

mutuals to flourish and develop innovative and creative ways of addressing care needs. The first step in market shaping is for councils, in partnership with the NHS, to move away from traditional block contracts and support growth of a market in services that people want. Commissioners need to work with suppliers in the independent and voluntary sectors to better understand market capacity and capability, and decide how innovation and best value can be incentivised effectively. The *Vision for Adult Social Care*, NHS white paper and public health white paper all set out the Government's requirement for councils to work closely with the NHS to pool budgets and jointly commission services.

- *Health:* A number of recent policy directives from the Government, including the *Vision for Adult Social Care*, NHS white paper and public health white paper, have stressed the importance of joint working between the NHS and local authorities. This service will support partnership working with health colleagues, including joint commissioning and working with GP collaborative, the new Health and Wellbeing Board and the integration of health improvement functions within the local authority. The service will also take a lead role in revising the [Joint Strategic Needs Assessment](#) (JSNA), as outlined in the *Vision for Adult Social Care*.
- *Mental Health:* The Adult Commissioning Service will be responsible for the mental health assessment and care management teams, and mental health commissioning budgets.
- *Supporting People:* This service will continue to manage the Supporting People programme which delivers a range of support services, including housing related support, to over 9,000 people in Haringey. The new Government's *Vision* recognises that the Supporting People programme helps to avoid more costly interventions, improves outcomes for individuals and returns savings to other areas. The programme is thought to save at least double what it invests by preventing access to more expensive services.
- *Voluntary Sector:* The importance of the voluntary sector in achieving excellent health and social care outcomes is emphasised in all of the Government's new policy directives. It is recognised that the voluntary sector is essential in delivering the personalisation and prevention agendas. Emerging direction from the Government is designed to open up public services to ensure that charities, social enterprises and co-operatives have a much greater role in the running of services. Councils will work with the voluntary sector to stimulate the development of social capital to deliver early intervention and prevention, including strong neighbourhood wellbeing networks. The Comprehensive Spending Review stated that paying and tendering for services will be by results rather than the Government being the default provider. The Government will look at setting proportions of services to be delivered by independent providers, such as the voluntary sector. Key areas to be explored include the provision of adult social care and community health. The Council currently invests over £12 million in the voluntary sector through a combination of grants and commissioned projects to improve the health and wellbeing of residents. It is inevitable that there will be less funding available for the voluntary sector due to local authority cuts and reduction in grant aid. The revised [Voluntary Sector Strategy](#) will provide a revised commissioning and funding framework which sets out the core principles for how the Council will support and work with the voluntary sector, including how the Council will fund and commission

services. The strategy applies to all voluntary sector services funded by the Council and its strategic partners that currently receive grant aid or provide commissioned services. This service will play an essential role in developing and implementing the new strategy and commissioning framework and ensuring there is a thriving, innovative range of services delivered by the local voluntary sector.

Prevention Services

A proposal is being made to establish, and register with the Care Quality Commission, a new short-term (6 week maximum duration) community reablement service to deal with provision of reablement and rehabilitation to mainly older people post hospital discharge, with a view to restoring them to independence. This service will be working in partnership with the new multi-disciplinary reablement assessment service, managed within Occupational Therapy.

Recruitment for all new posts in the reablement service will be by application and interview, drawing initially from the pool of home care staff and managers whose employment is threatened by the proposed closure of the home care service. The selection process will be on the basis of an open-ring fence which means the applicant will have to demonstrate that they meet the requirements of the post. Following a two-week period of induction and training in June 2011, it is anticipated that the new service will go live in July 2011.

Prevention Services will deliver the following functions:

- Reablement;
- Community alarm;
- Supported housing;
- Day opportunities;
- Integrated Community Equipment and Major Adaptations; and
- Occupational Therapy.

Prevention is one of the seven principles of the *Vision for Adult Social Care* published by the new Government. The *Vision* states that empowered people and strong communities will work together to maintain independence. Where the state is needed, it will support communities and help people to retain and regain independence. The *Vision* expects councils to commission a full range of appropriate preventative and early intervention services such as reablement and telecare. The new Early Intervention and Prevention Service will ensure the Council delivers against the prevention principle in the vision.

The *Vision* has a significant focus on reablement which covers a range of short-term interventions which help people recover their skills and confidence after an episode of poor health, admission to hospital or bereavement. Reablement can help people to continue to live independently in their own homes, avoiding expensive readmissions to hospital and ongoing social care packages. The Government is supporting the expansion of reablement.

Learning Disabilities Partnership

This service will deliver the following functions:

- Health and social care services for people with learning disabilities and their carers;
- Service planning, including identification of housing, leisure, employment and learning opportunities; and
- Transition from Children's to Adults' Services.

The Learning Disability Partnership contributes to the delivery of *Putting People First* and *Valuing People Now* by providing a range of personalised services to people with learning disabilities. This unit will play a key role in continuing to deliver personal budgets to all adult social care users. The *Vision for Adult Social Care* recognises that people with learning disabilities, autism, disabled people and those with complex needs require person-centred planning to maximise choice and control, and appropriate help in cases where a direct payment is not chosen. The service contributes to this objective through the provision of advocacy to help people express views and receive the services they want. The service also plays a role in monitoring compliance with the CQC's essential standards of quality and safety at its registered locations.

Safeguarding Services

This service will deliver the following functions:

- Promoting awareness of adult safeguarding and risk assessment;
- Management and governance of the safeguarding process;
- Setting the strategic direction of safeguarding through the Safeguarding Adults Board; and
- Management of the Deprivation of Liberty Safeguards process.

The protection of vulnerable people forms one of the key principles underpinning the *Vision for Adult Social Care*. With effective personalisation comes the need to manage risks to maximise people's choice and control over their care services. Individual risk assessment enables the safeguarding of vulnerable adults against the risk of abuse or neglect while allowing for individual freedom.

The CQC's risk-based approach supports the safeguarding agenda by monitoring provider compliance with the essential standards of quality and safety and identifying where standards are at risk of failing. Targeted inspections will be carried out where a significant risk is identified. Inspections may also be triggered through performance information reported in the Quality and Outcomes Data Set, local intelligence or feedback from service users. In the context of localism, the local HealthWatch and other neighbourhood groups will become the eyes and ears of safeguarding, highlighting and reporting suspected neglect and abuse. The Adult, Commissioning and Safeguarding Quality Board oversees compliance against the essential standards of quality and safety to ensure robust practices are in place. This service will be key to continuing the successful delivery of the safeguarding agenda and risk management.

Business Improvement

This service will deliver the following functions:

- Business planning;
- Service improvement;
- Compliance monitoring;
- Interface with regulators e.g. CQC;
- Management of internal and external audits;
- Supporting partnership working, including the Health and Wellbeing Board;
- Risk management;
- Co-ordination of health and safety, including policy development and safety liaison officer role;
- Business continuity;
- Emergency planning; and
- Oversight of administration and business support.

The Business Improvement Service will be integral to the successful delivery of the strategic objectives of the Adult and Community Services business unit. The service will do so via: business planning; service improvement; monitoring and evaluation of services; and partnership working. Performance monitoring by the Care Quality Commission is currently undergoing a series of significant changes; this service will manage the implementation and delivery of these changes. This will include monitoring compliance against the new essential standards; producing the new local account; supporting risk based inspections and service reviews; and monitoring delivery against the new outcomes framework for adult social care.

Systems Development

This service supports Adult and Children's Directorates and will deliver the following functions:

- Supporting users of Framework-I;
- Delivering training and technical support to Framework-I users;
- System design, monitoring and evaluation;
- Data quality monitoring;
- Commitment validation for budget management in relation to adult care purchasing and personalisation; and
- Overseeing new IT developments for the business unit.

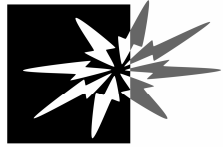
Strong IT systems are crucial in the context of the increasing flexibility of service provision through personalisation. Good system support and development enables adult social care staff to maintain accurate records, ensure appropriate processes are followed and monitor quality and performance. This service will contribute to the delivery of Haringey's Information Management Strategy, which sets out the framework for improved information management across the Council.

4. Detail of staffing changes

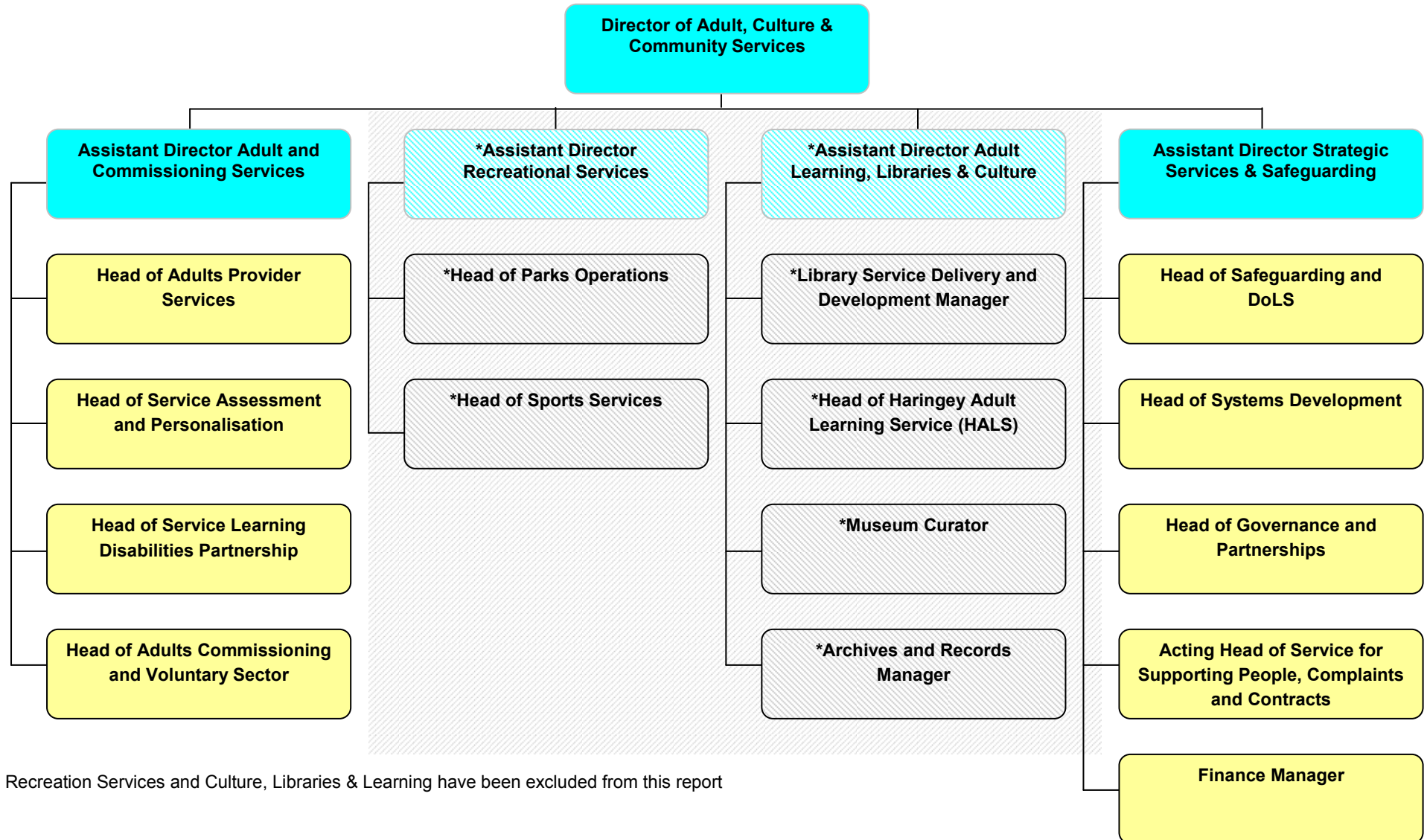
In order to implement the changes outlined in the previous section, a number of proposals are being put forward. These are summarised in the table below.

Proposal	Restructure or unit closure	No. of Staff Affected	Proposed no. of posts in new structure	Status	Decision Route
Alexandra Road Crisis Unit	Unit Closure	16	0	Consultation taking place from 31 January 2011 until 30 April 2011	DA
Adult Services Drop-in Centres	Unit Closure	7	0	Consultation taking place from 31 January 2011 until 30 April 2011	DA
Adult Services Day Centres					
The Haven	Unit Closure by March 2012	6	0	Consultation taking place from 31 January 2011 until 30 April 2011	DA
Woodside Day Centre	Unit Closure by March 2012	8	0	Consultation taking place from 31 January 2011 until 30 April 2011	DA
Six8Four Centre	Unit Closure by March 2012	7	0	Consultation taking place from 31 January 2011 until 30 April 2011	DA
Adult Services Residential Care Homes					
Cranwood	Unit Closures by March 2013	40	0	Consultation taking place from 31 January 2011 until 30 April 2011	GPC
The Red House	Unit Closures by March 2013	43	0	Consultation taking place from 31 January 2011 until 30 April 2011	GPC
Broadwater Lodge	Unit Closures by March 2013	44	0	Consultation taking place from 31 January 2011 until 30 April 2011	GPC
Whitehall Street	Unit Closures by March 2012	30	0	Consultation taking place from 31 January 2011 until 30 April 2011	GPC
Close Home Care and establish new Reablement Service	Restructure	82	45 (TBC)	Consultation taking place from 31 January 2011 until 30 April 2011	GPC
Realign the Assessment and Personalisation service	Restructure	124	TBC	Timetable and process being planned and report being	GPC

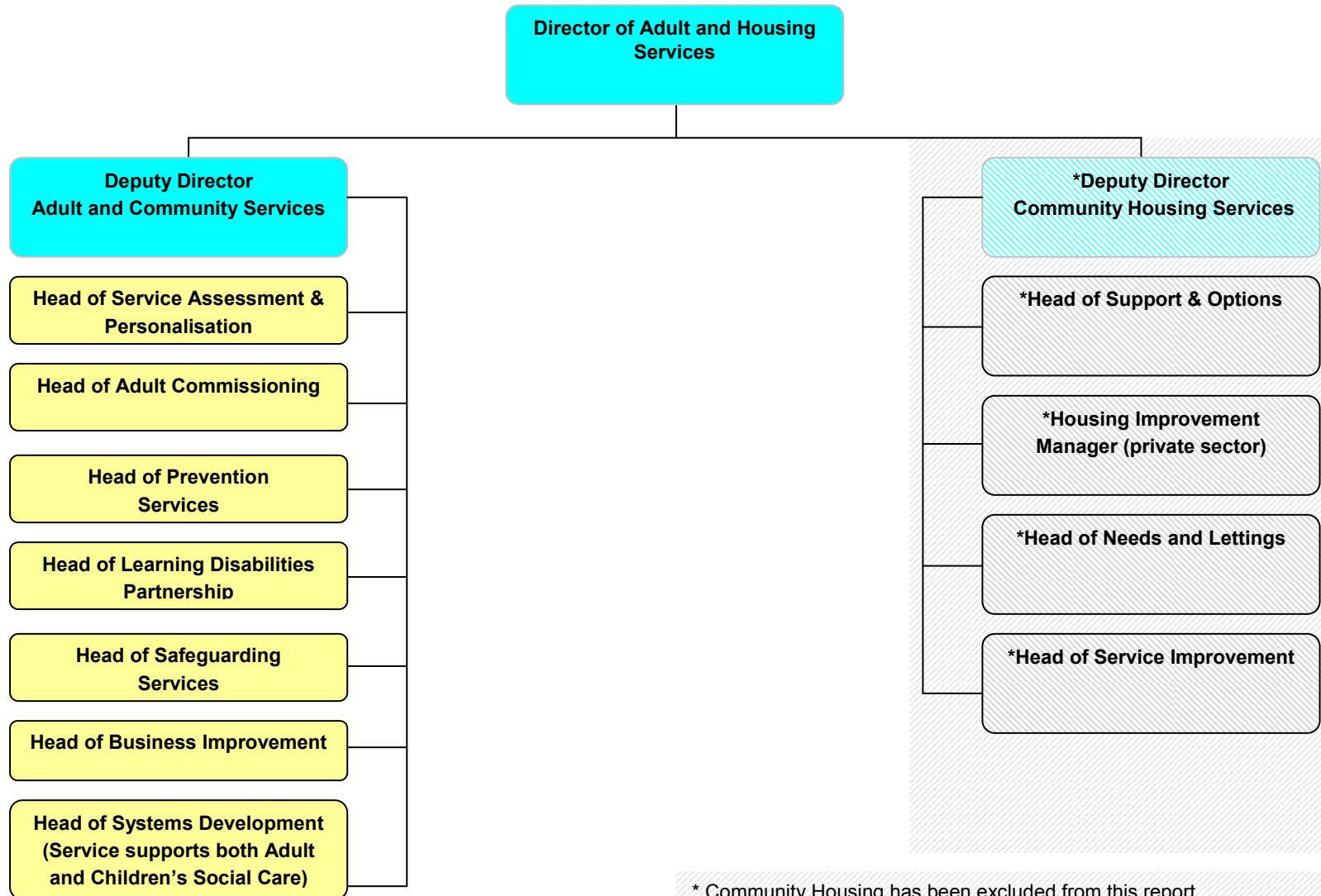
Proposal	Restructure or unit closure	No. of Staff Affected	Proposed no. of posts in new structure	Status	Decision Route
in view of self directed support				prepared	
Management, Administration and Business Support rationalisation					
a) Delete one Assistant Director post b) Delete Independent Chair of Safeguarding c) Middle management d) LDPB admin officers e) LDPB admin manager f) Business Managers g) Systems Development h) Financial Assessment i) Safeguarding	Restructure	[a] 2 [b] 1 [c] 4 [d] 5 [e] 1 [f] 4 [g] 2 [h] 1 [i] 1	[a] 1 [b] 0 [c] 0 [d] 3 [e] 0 [f] 0 [g] 0 [h] 0 [i] 0	These have all been implemented via delegated authority	DA



Current Adult Culture & Community Services Structure



Proposed Adult and Housing Services Structure Phase 1 & 2



* Community Housing has been excluded from this report