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CITY OF **WOLVERHAMPTON** COUNCIL

Cabinet Meeting

26 April 2017

Report title People Directorate Commissioning Strategy

Decision designation Amber

Cabinet member with lead

responsibility

Councillor Sandra Samuels

Adults **Key decision** No

In forward plan Yes

Wards affected ΑII

Accountable director Linda Sanders, Strategic Director

Originating service People

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Report to be/has been

considered by

Cabinet 26 April 2017 30 May 2017 Scrutiny Board 13 June 2017

Adults and Safer City Scrutiny

Panel

Children, Young People and 14 June 2017

Families Scrutiny Panel

Recommendation(s) for action or decision:

Cabinet is recommended to:

1. Receive and comment on the attached draft People Directorate Commissioning Strategy 2017-21, direct any required further actions; and approve the issuing for consultation and engagement with stakeholders prior to request for Cabinet approval of a final draft on 19 July 2017

1.0 Purpose

1.1 For Cabinet to note the content of the attached draft People Directorate Commissioning Strategy (Appendix 1)and advise on any point of content or process for completion of the strategy

2.0 Background

- 2.1 The attached Draft People Directorate Commissioning Strategy explains the overall drivers, approach and content of the strategy for all parts of the service directorate.
- 2.2 The draft strategy is titled *Shaping Futures, Changing Lives.* It updates our approach in two ways.
- 2.3 Firstly, by bringing together the wide-ranging activity already underway through transformation initiatives in one place.
- 2.4 Secondly, it shapes the direction for the People Directorate in the next stage of development in creating a single, simple narrative and model which will inform on-going engagement, service transformation and planning as part of one council and with partners.
- 2.5 Updating a commissioning strategy also gives opportunity to incorporate developed approaches such as our approach to de-commissioning. It gives new focus to other initiatives such as the HWBB priorities established in 2015/16. It also underpins the way in which commissioning is being harmonised within the People Directorate.

3.0 Progress, options, discussion, etc.

- 3.1 There has been significant engagement across all sections of the People Directorate as well as with colleagues in corporate procurement, finance, HR and workforce to develop the product to this stage. It may be that the content offers a template for application in other parts of the Council.
- 3.2 An early version of the draft was shared as evidence with OFSTED to support a positive view of the "leadership" element of the 2017 inspection.
- 3.3 It is planned to share the draft Commissioning Strategy with NHS commissioning colleagues in the context of overall work on care and health integration. The current stage of development and direction for care and health integration is reflected in the attached draft.
- 3.4 Best practice would suggest the need to engage with citizens and people using services to support the development process of the strategy. It may be possible to link this to engagement activity being considered by care and health partners. A detailed plan is to be drawn up.

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4.0 Financial implications

- 4.1 There are no direct financial implications arising from this report. Any actions arising from the Strategy and the associated plans will be delivered from existing budgets.
- 4.2 A commissioning strategy and associated plans will be key instruments in managing the financial environment for the People Directorate over the coming period. [AS/23022017/B]

5.0 Legal implications

- 5.1 Details of law relevant to the development of a Commissioning Strategy are included in the draft strategy in Section 4.0 and include:
 - O The Health and Social Care Act 2012 section 192 (amending the Local Government and Public Involvement in Health Act 2007 section 116 (as amended by the Act section 192) require a "responsible local authority" and each of its partner CCGs to prepare Joint Strategic Needs Assessment and Joint Health and Well Being Strategies; and section 116A (as inserted by the Act section 193); Section 196 provides that these functions are to be exercised by the health and wellbeing board established by the local authority.
 - The Care Act 2014
 - Section 3 establishes legal basis of integration of care and support with health services
 - Section 53ff. establishes requirements relating to market oversight
 - Children's Act 1990 Section 22G creates a statutory requirement for a Sufficiency Strategy for accommodation of children looked after by the council under which is an important part of the commissioning
 - Children and Families Act 2014 introduced new requirements including
 - those on adoption, special educational needs or disabilities
 - statutory requirements on integration with health and joint commissioning with health partners (Sections 25-26). [RB28022017/V]

6.0 Equalities implications

6.1 The draft Commissioning Strategy is underpinned by population needs assessment analysis and market shaping activity. These strands provide a framework for action to support all parts of the community in the City of Wolverhampton to allow specific market shaping as needed.

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7.0 Environmental implications

7.1 A key intention of the draft Commissioning Strategy is to ensure sustainability for people needing support or care through sustainable resources management and service design. This augments the assets which people bring in their lives. The development of neighbourhood and locality approaches support more sustainable approaches to personal support with potential positive benefit for the environment.

8.0 Human resources implications

- 8.1 The Commissioning Unit has been re-organised and recruitment to vacant staff team roles is being finalised.
- 8.2. Any other activity which affects Council staff arising from this strategy will be managed through the relevant approved project plan and further advice sought as needed.

9.0 Corporate landlord implications

9.1 There are no corporate landlord implications at this stage.

10.0 Schedule of background papers

10.1 Not applicable.