



Name of meeting: Cabinet

Date: 12th December 2023.

Title of report: Implementing integrated community approaches

Purpose of report:

To seek Cabinet approval for a service redesign as part of a phased approach to develop an integrated model of support across Kirklees communities.

<p>Key Decision - Is it likely to result in spending or saving £500k or more, or to have a significant effect on two or more electoral wards? Decisions having a particularly significant effect on a single ward may also be treated as if they were key decisions.</p>	<p>Yes – has implications affecting all wards of Kirklees and savings over £500k</p>
<p>Key Decision - Is it in the <u>Council's Forward Plan (key decisions and private reports)</u>?</p>	<p>Key Decision – Yes Public Report</p>
<p>The Decision - Is it eligible for call in by Scrutiny?</p>	<p>Yes</p>
<p>Date signed off by <u>Strategic Director</u> & name</p> <p>Is it also signed off by the Service Director for Finance?</p> <p>Is it also signed off by the Service Director for Legal Governance and Commissioning?</p>	<p>Richard Parry – Strategic Director for Adults and Health - 30/11/23</p> <p>James Anderson - Head of Accountancy on behalf of Isabel Brittain – Service Director for Finance – 01/12/23</p> <p>Karl Larrad - Legal Head of Corporate on behalf of Julie Muscroft – Service Director for Legal, Governance and Commissioning – 20/11/23</p>
<p>Cabinet member portfolio Committee details - Cabinet Kirklees Council</p>	<p>Cllr Jackie Ramsay – Health and Social Care (statutory responsibility for Adults)</p> <p>Cllr Paul Davies – Deputy Leader and Cabinet member Corporate</p> <p>Cllr Mussarat Pervaiz – Communities</p>

Electoral wards affected: All wards

Ward councillors consulted: No

Public or private: Public

Has GDPR been considered? There is no personal data within this report

1. Summary

Across the Kirklees footprint we currently have community contacts and engagement spread across multiple teams. The Community and Access Services (CAS) integration model proposes to streamline CAS functions and services providing a more cohesive support network for the people they support, focusing on achieving better outcomes whilst creating efficiencies.

The report identifies the impacts and mitigating actions on Kirklees employees, residents, voluntary and community sector, and placed based working approaches.

The model will focus on working in a more integrated holistic way, supporting transformational conversations, reacting to emerging community needs, and increasing local community knowledge.

There is a commitment to ensuring Kirklees citizens and communities have the right information, right support, at the right time and in the right place to enable them to live good lives in safe, supported, and inclusive communities.

2. Information required to take a decision.

2.1 Background:

Currently there is a core of community facing roles and functions delivered across Communities and Access Services (CAS) that are being proposed for integration.

An integrated community model has been a long-term ambition to further develop place-based working, continue to embed early intervention and prevention, and support the re-defining of the council's relationship with communities.

These are teams and functions which have historically developed separately across the services, focused on individual and communities' multiple needs. This proposal aims to improve efficiency and outcomes by integrating these teams and roles to a much greater extent than is currently the case. It focuses on function and responsibilities first, not service roles. The new model sets the foundation for future developments to continue to build capacity alongside communities.

The proposed integrated model looks to build on Place Based working, [Inclusive Community Framework](#), and [Access Strategy](#) principles, reducing duplication and multiple service contacts. Learning from the pandemic, place-based pilots, data and insight inform the proposed model so as to support future ambitions and maximise opportunities to draw on broader multi-skilled teams.

Similarly, customer contact arrangements have developed in several parts of the council. Whilst some have integrated, there remain opportunities to further integrate these functions to generate efficiencies that balance economies of scale with specific technical knowledge.

This paper sets out changes to three service and function areas:

- I) Integration of community facing teams during 2024 resulting in new multi-disciplinary teams
- II) Integration of the council's individual telephone contact centers, during 2024 - starting with Kirklees Direct and the Community Health and Social Care Hub - and a review of opening hours.
- III) A reduction in grant distribution from the Community Plus Grants Scheme used to distribute external funding from April 2024

Efficiencies will be made across management support as well as frontline staff. The proposed staffing reductions are identified by using the broader skill sets the integrated model requires.

3. Change 1: Integrated Communities Team

The proposal will integrate the functions of key community facing services including Prevent engagement, Cohesion and Community Plus (including the Everybody Active team).

Our multi-disciplinary integrated communities' team will remain working at place, based in community venues and buildings such as libraries and other key community-based venues, where our teams are confident in providing a breadth of information and support by appointment. This is where we provide public access IT and phones on site, supported by our focused phone and online services. This will enable the teams to work with communities on improving health and wellbeing, self-care, reducing social isolation, and creating inclusive communities. For example, a staff member will have the skills and knowledge to support someone to access community activities to reduce their isolation, improving wellbeing, whilst also helping provide whole family support to raise awareness of safeguarding risks, in partnership with the voluntary and community sector and schools. Council staff will also be better placed to gauge and feedback community tension information as well as provide community assurance.

3.1 Expected Impacts

- *Reduce customer contacts with multiple services:* Staff will work within communities supporting people with a range of needs therefore supporting the 'tell your story once' model of working. This will allow this single team to support a person's journey opposed to several different services supporting each area of need and then 'handing off' people if they need wider support.
- *Reduced duplication:* Community engagement will be completed by a single team, building trusted relationships in the places they work across multiple organisations and community sectors such as faith, Voluntary Community Sectors and health. The focus will be on community-based problem solving and reducing signposting activity across services and partners. For example, events will no longer be attended by a range of staff from across different services. A single integrated team will provide support across community needs such as social isolation, improving wellbeing, cohesion, cost of living support etc.
- *Increased targeted support delivered to those facing increased inequalities:* Using data, intelligence and community voices, support will be targeted for those people and communities most in need, for example, targeted cost of living support to household with low incomes.

This model will enable staff to work across a place, led by the needs of the community and offering flexible availability and locations. It will build upon the strengths and assets already in our communities.

3.2 Risks and Mitigations

Staff reductions may result in a reduced service flexibility to be deployed for crisis support. This will be mitigated through integrated efficiencies (supporting people with multiple needs) and trusted relationships in the community. Community engagement will continue to take place but will be supported by a single team as opposed to a presence from multiple services.

As the model is embedded, communities and partners may perceive there to be decreased staffing levels on a community footprint due to an integrated approach. Staff will be upskilled to provide support and information across skill sets which are currently delivered in silos. This increased skill set will mitigate the decrease in staffing numbers.

Increased demand for statutory services, especially during transition to new delivery model. Close working with health, adult social care and children's social care to monitor any increase in demand. We anticipate any increased demand will emerge over a longer period of time. The integrated community model will support both adult's and children's social care to reduce demand and will enable savings across other areas.

3.3 Proposed approach to change delivery model

To implement the proposed model a service change process will be required. This will bring together staff from across the affected teams.

There is a potential role reduction across management and frontline employees. All roles are currently funded through base budgets.

To help address the impact of the proposed integration our services have been managing vacancies. Whilst a service change will be required the impact of managing those vacancies will reduce the impact on staff.

The service will also seek to maximise external income opportunities to try to reduce impact on staff.

3.4 Proposed savings and staffing reduction

This provides cumulative savings of £519k and a reduction of 12.5fte in respect of this proposal.

4. Change 2. Integrated contact centres

The Access Strategy outlines our key principles for service delivery, including getting the basics right. This principle builds on the successes of our digital by design programme and commitment to continue to develop our online offer as our preferred channel of contact (supported by telephony and place-based access to services for those most in need).

Our Access Strategy vision also includes making a positive difference from the first contact, reducing the need for repeated and multiple calls. To help us deliver against this aim, we are proposing to integrate the council's individual telephone contact centres.

The council receives over 800,000 telephone calls per year from citizens and businesses to access services. We have a number of individual telephone contact centres all using the same technology to deliver on these contacts.

Each call centre supports a different council service or set of services. The individual call centres also have different arrangements for service development, training, and problem solving. In addition, the contact centres currently have different opening hours when they are publicly accessible. This can create challenges when one contact service relies on the availability of another to be able to address an issue for a member of the public. The proposal therefore also includes reviewing the current ways of working and opening hours from early 2024 to align across our services (informed by needs of citizens and opportunities created by integration).

Therefore, this proposal is to integrate the contact centres (across two phases) to provide a broader offer of support at first point of contact, reduce the need for multiple calls, bring economies of scale, and reduce confusion for callers.

4.2 Expected Impacts

In the first phase we will focus on integrating the two highest volume contact centres; Kirklees Direct team (our main contact centre supporting over thirty services) and our Community Health and Social Care Hub.

The first phase of activity will also include a review across all the existing call centres to identify opportunities for increased consistency ahead of full integration (for example introducing new opening hours).

We would aim to deliver on this first phase in early 2024 and then seek to integrate other relevant telephone contact centres later across 2024-26.

The 24 hours service will continue to be provided (supporting emergency contacts) outside core operating times including weekends and bank holidays.

4.3 Risk and Mitigations

Potential loss of service delivery during transition to new operating model. Staff will be supported with training and support during this time and performance reporting will be closely monitored. Close working with Adult Social Care as part of the Adult Social Care transformation programme will support remedial actions to be effective and timely.

4.4 Proposed approach to change delivery model.

To implement the proposed model will require a service change process. This will bring together staff from Kirklees Direct team (our main contact centre supporting over thirty services) and our Community Health and Social Care Hub.

There is a potential role reduction across management and frontline employees. All roles are currently funded through base budgets.

To help address the impact of the proposed integration our services have been managing vacancies. Whilst a service change will be required the impact of managing those vacancies will reduce the impact on staff. All roles are currently funded through base budgets.

4.5 Proposed savings and staffing reduction

This provides cumulative savings of £350k and a reduction of 9.3fte in respect of this proposal.

5. Change 3: Integrating capacity building funding.

Community and Access Services has historically used core budget funding to support community capacity building as part of the council's responsibilities for ensuring continued community capacity. This proposal identifies the following two key funds to be integrated - Community Anchor funding and Community Plus grant fund.

5.1 Community Anchor funding

The Community Anchor model was established and developed in response to the covid pandemic. Outcomes reviewed from this crisis support led to a revised commission of the Community Anchors which started in April 2021. Over this period the network has grown and established across Kirklees, establishing 4 lead locality anchors and 11 local anchors. Through the development of the network, interdependencies have been established between the current anchor commission and the Voluntary and Community Sector infrastructure contract. As a result, the two contracts will be recommissioned as a joint contract when they both come to an end in April 2024. The reduction of support has been built into the procurement process led by the Third Sector Team. This will facilitate a reduction in administrative duplication and create efficiencies.

The funding was always designed to be reduced over time - once organisations had been established to enhance the capacity within the community supporting people to improve their health and wellbeing at a community and neighbourhood level.

The proposal is to reduce core council budget over the contract life (reducing to £180,000 for 24/25.) and work across partners to achieve an integrated funding approach that allows us to move to a relational and less transactional support function.

5.2 Community Plus Fund

The Community Plus fund (previously Community Investment Fund) was established in 2018 and is one of the few examples of organisations in Kirklees directly utilising council core budget to support community capacity building activity. The fund currently grants £378,000 p/a (<https://kirkleescommunityplus.co.uk/service/community-grants/>)

The current delivery model has been shown to deliver system wide support, addressing pressures across all health, social care and community levels. However, funding of the model has solely sat within the council.

This is no longer a sustainable position, and a different approach is required.

The proposal is to reduce core council budget over time to this fund (reducing to £49,500 in 24/25) and work across partners to achieve an integrated funding approach that allows the fund to continue, and to move to a relational and less transactional support function.

5.3 Expected impacts.

Once the joint commission is in place the funding for the Community Anchors will remain the same for 2024/25 but will be funded through external income sources. The contract then reduces over time with a view to leaving an established network in place.

The Community Plus Fund Scheme will stay open, utilising external funding, resulting in a reduced total funding amount to be distributed in 24/25.

It is proposed that a saving to the council be provided by reducing this scheme base budget funding and a reduction in 1 FTE. To help address the impact of the proposed integration our services have been managing vacancies.

This change would not halt the scheme as alternative grant funding from external grant schemes can be utilised during 2024/25 to ensure some support remains. Any further funding will depend on partnership and external funds being secured.

The timescale to release these savings will be subject in part to the service change process however they are expected to be realised within 2024/25.

5.4 Risk and Mitigations

This model allows scope for partner funding across the system to be implemented at any point to strengthen a sustainable offer in the future. These changes will result in a reduction in new low-level grant funded projects being funded in 2024/25. However, the support for existing provision will remain in place through the established community anchor network and the VCS infrastructure support contract.

The current financial crisis has already impacted the funding available and/ or competition for VCS and community building capacity funding. Partnership funding is already being explored with external partners to support to contribute to the continued utilisation of the Community Plus fund. This approach supports the VCS investment strategy and the work of the council's infrastructure contract.

5.5 Proposed savings and staffing reduction

This provides cumulative savings of £604k and a reduction of 1fte in respect of this proposal.

6. Overall Summary

The proposal in total will result in a saving of £1,473k partly achieved via a reduction of 22.8 FTE staff.

7. Implications for the Council

7.1 Working with People

The planned approach will require consultation with staff as part of an agreed change process. It will also require clear communication with key stakeholders such as our VCS partners.

7.2 Working with Partners

We will collaborate with all relevant partners to identify any collaborative opportunities to ensure the best outcomes possible for all concerned.

7.3 Place Based Working

Changes to the services structure will not impact on its ability to deliver placed based working. These services support residents from the whole of the Kirklees community.

7.4 Climate Change and Air Quality

This change will not impact on the council's carbon footprint. The service will continue to work in a placed based way, reducing travel and contributing to our commitment towards net zero.

7.5 Improving outcomes for children.

Integrating functions across community and access services will overall support the improvement of outcomes.

7.6 Financial Implications for the people living or working in Kirklees.

These changes will not impact on people's equality of access for support around cost-of-living support.

There will be potential implications for the Voluntary Community Sector in relation to available funds to support the local sector.

7.7 Other (e.g. Integrated Impact Assessment (IIA)/Legal/Financial or Human Resources) Consultees and their opinions

Before making a decision, Members must have regard to the Integrated Impact assessment in relation to the proposals. Section 149 of the Equality Act 2010 places a duty on the council in carrying out its functions to have due regard to the need; (a) eliminate discrimination; harassment; victimisation, and any other conduct that is prohibited by or under the Act; and (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; (c) foster good relations between persons who share a protected characteristic and persons who do not share it . Section 149(7) of the 2010 Act set out the protected characteristics which are age, disability, gender reassignment; pregnancy and maternity, race, religion or belief, sex and sexual orientation.

An Integrated Impact Assessment has been carried out for each element of this proposal and they are published on the Council's website. The assessments are contained at this link: <https://www.kirklees.gov.uk/beta/delivering-services/integrated-impact-assessments>

The assessments highlight some positive and negative impacts of the proposed changes, however overall the impacts remain neutral.

7.8 HR

There will be HR implications from these changes and staff and trade unions will be consulted in accordance with the usual procedures.

8. Consultation

This report has been subject to consultation with the Council's Executive Leadership Team (ELT), Executive Board, and the Portfolio Holders for Communities, Corporate Services, and Health and Social Care, and their comments have informed the contents of this report.

There will be HR implications from these changes and staff and trade unions will be consulted in accordance with the usual procedures.

Partners impacted by these changes will be consulted with following a cabinet decision.

9. Next steps and timelines

These savings are subject to approval and a service change process. The agreed service change process will determine the timescales for realisation with the expectation that savings are delivered in 2024/25 however some savings maybe realised earlier.

10. Officer recommendations and reasons

Cabinet is asked to agree:

- The overall approach to integrate currently segregated community services from across Community and Access Services.
- To commence a service change process to reduce management and staffing capacity by the required amounts to achieve integration and savings.

11. Cabinet Portfolio Holder's recommendations

We value and support Communities and Access Services in the ambition to integrate support so as to further improve the effectiveness of support available, reduce any duplication and to continue to build capacity alongside communities in Kirklees and partners. The council is facing huge financial challenges which means we need to make some very difficult decisions, which will result in a reduced offer.

12. Contact officer (s)

Sarah Mitchell, Head of Communities, 01484 221000-
Sarah.mitchell@kirklees.gov.uk

Mags Rogerson, Head of Service Local Integrated Partnerships, 01484 221000
Mags.rogerson@kirklees.gov.uk

Dave Thompson - Head of Access Strategy and Delivery, 01484 – 221000 –
Dave.thompson@kirklees.gov.uk

13. Background Papers and History of Decisions

None

14. Service Director responsible

Jill Greenfield – Service Director – Communities and Access Services – 01484 221000 – Jill.greenfield@kirklees.gov.uk