

BARNSELY METROPOLITAN BOROUGH COUNCIL

This matter is not a Key Decision within the Council's definition and has not been included in the relevant Forward Plan

Report of the Executive Director, Adults and Communities and the Chief Officer, NHS Barnsley Clinical Commissioning Group

**TRANSFORMING ADULT SOCIAL CARE AND HEALTH –
INVERTING THE TRIANGLE / HOME TRUTHS**

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to update members on the policy direction for Adult Social Care and Health services in Barnsley and to seek commitment to the development of a joint transformation programme. Whilst the initial scope is clearly centred around Adult Social Care and Health, the proof of concept should enable the approach of 'Inverting the Triangle' to be rolled out across wider service design and delivery, if this is felt appropriate.

2. RECOMMENDATIONS

It is recommended that:-

- 2.1 **Members note the future policy direction around adult social care and health and the development of a joint transformation programme for Barnsley.**
- 2.2 **Members receive the presentation on the initial thinking and vision for the transformation programme, along with some initial findings from the Home Truths work and Inverting the Triangle.**
- 2.3 **Members delegate responsibility to the Senior Strategic Development Group, to develop the transformation programme, with partners, and report progress periodically into the Health and Wellbeing Board.**

3. INTRODUCTION/BACKGROUND

- 3.1 The current changes taking place across health and social care represents the most significant period of change since the inception of the NHS in 1948. The national, regional and local architecture is changing following the Health and Social Care Act in 2012.
- 3.2 Nationally, the NHS Commissioning Board has been established, primarily to oversee the operation of the Clinical Commissioning Groups throughout the Country, with 4 regional outposts and 27 Local Area Teams – Barnsley being covered by South Yorkshire and Bassetlaw. This marks the abolition of the previous Strategic Health Authorities at a regional level and Primary Care Trusts at a local level.

3.3 Health and Wellbeing Boards were established in shadow form throughout 2012 and took on full responsibilities in April 2013, at which point the Clinical Commissioning Groups came into legal effect. Furthermore, Public Health England has been established nationally and the Public Health function transferred to Local Authorities as of 1 April 2013. Local Authorities were also required to establish Healthwatch – the local consumer champion from April 2013, building on the work of the LINKs which has been commissioned separately.

4. TRANSFORMING ADULT SOCIAL CARE AND HEALTH – INVERTING THE TRIANGLE / HOME TRUTHS

4.1 It is clear that due to the challenges facing Barnsley around public sector cuts and wider reform, the current health and social care system isn't fit for purpose or sustainable. The previous approach to cutting services at the fringes will not manage the financial challenge facing Barnsley or deliver the best possible outcomes with residents and communities in the 21st Century.

4.2 To address this challenge, Barnsley Council and its health partners need to embrace whole systems transformation and have initiated a new approach known locally as 'Inverting the Triangle'. This will see a step change and strategic shift from the current approach with a greater focus on prevention and early intervention, enabling residents to support themselves and their families, within their communities, rather than being drawn into the formal system. This will allow the limited resources available to be focussed on those with the greatest need and build on the successes of personalisation and self directed support.

4.3 It is however acknowledged that this will require a change in relationship with residents and communities, one which sees a shift from passive recipient of services to active agent, facilitated by a move away from an overly professionalised model to a community and citizenship model, where all parts of the community have a role to play and are encouraged to do so.

4.4 This is further informed by a piece of work called Home Truths commissioned by the Clinical Commissioning Group and jointly sponsored with Adults and Communities within the Council. Home Truths focuses on exploring how dysfunctional relationships between GP's and Social Care staff is driving demand for Adult Social Care.

4.5 This work and the wider transformation of the NHS Barnsley Clinical Commissioning Group will form part of the overall transformation programme for Barnsley and is anticipated to have a joint programme office to ensure delivery across adult social care and health.

5. CHALLENGES AND NEXT STEPS

5.1 Due to the amount of change taking place across the social care and health system, it is important that the Council and its partners are committed to whole systems change; simple transactional change and salami slicing will no longer deliver the outcomes required for the residents and communities of Barnsley, with the reduced financial envelope facing the Borough.

- 5.2 The transformational change anticipated via Inverting the Triangle presents such an approach, one which looks to re-design the current system with innovation and new thinking, where people are supported via prevention and early intervention to keep them out of the formal system and connected with their families and communities for as long as possible.

6. CONCLUSION

- 6.1 The option of maintaining the status quo or doing nothing simply isn't viable in the current climate; this will ultimately see the management of decline. Inverting the Triangle represents an opportunity to do something different, to innovate and to develop a new service delivery offer across adult social care and health with residents and communities which could be applied to broader functions of the Council and indeed the wider public sector.

7. LIST OF APPENDICES

None.

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