

**Report to the Cabinet**

Meeting to be held on Thursday, 19 January 2023

**Report of the Director of Corporate Services**

**Part I**

Electoral Division affected:  
None;

**Corporate Priorities:**  
Delivering better services;

**Secondment Arrangement of Executive Director of Adult Services and Health and Wellbeing to the Lancashire and South Cumbria Integrated Care Board**

Contact for further information:

Laura Sales, Tel: (01772) 538958, Director of Corporate Services,

[laura.sales@lancashire.gov.uk](mailto:laura.sales@lancashire.gov.uk)

**Brief Summary**

This report sets out the rationale for sharing the services of the county council Executive Director of Adult Services and Health and Wellbeing with the Lancashire and South Cumbria Integrated Care Board on the basis of 80 per cent Integrated Care Board, 20% county council. It is proposed that this be achieved by way of a secondment agreement with authority delegated to the Director of Corporate Services, in consultation with the Interim Director of People, to finalise terms. The consent of the Executive Director of Adult Services and Health and Wellbeing is also required in so far as the arrangement amends her existing terms of employment with the county council.

**Recommendation**

Cabinet is asked to:

- (i) Approve in principle the secondment of the Executive Director of Adult Services and Health and Wellbeing to the Lancashire and South Cumbria Integrated Care Board for 80% of her working time to take up the role of Director of Health and Care Integration; and
- (ii) Authorise the Director of Corporate Services, in consultation with the Interim Director of People, to negotiate and agree appropriate secondment agreement terms with the Lancashire and South Cumbria



Integrated Care Board (subject to the agreement of the Executive Director of Adult Services and Health and Wellbeing).

## Detail

Integrated Care Boards were established in England on 1 July 2022 and replaced Clinical Commissioning Groups. Their principal functions include developing health plans to meet the needs of the local population, managing the NHS budget and arranging the provision of health services in a geographic area. Each Integrated Care Board has its own constitution, leadership team and staff.

In order to appoint to the leadership team, the Lancashire and South Cumbria Integrated Care Board advertised to appoint four Directors of Care and Integration each aligned to the relevant upper tier authority areas, key roles in achieving its objectives in relation to successful integration between health and social care services. The Executive Director of Adult Services and Health and Wellbeing applied for and was appointed to one of the posts on the basis that the role would be done in conjunction with her current county council role. The parties considered that appointing on this basis signalled their joint intent to move towards a more integrated delivery of health and care services across the Lancashire footprint. The primary focus of the role alongside integration is to improve the health outcomes for Lancashire and South Cumbria residents, address health inequalities and achieve value for money.

Other requirements to ensure the shared nature of the employment would succeed were also included and are set out later in this report.

In working on a shared basis across the county council and Integrated Care Board, the Executive Director of Adult Services and Health and Wellbeing is looking for opportunities to jointly plan and deliver services and at the same time establish and embed integrated multi-disciplinary neighbourhood teams whose roles extend beyond NHS/upper tier local authority professional boundaries. Although this is a new role and its shared nature presents a fresh approach in terms of how such appointments are generally managed (although replicated in other areas including the Northwest), there are significant advantages to a joint approach given the interconnectivity between adult and children's social care, public health and the NHS.

The need for health and social care integration has been highlighted by the Government and in the media and it is anticipated that allowing this role to operate across the organisations will bear fruit in terms of improved discharge rates, improved services for vulnerable adults and children and increased capacity.

It is proposed that the role will be notionally split with 80% of time spent working for the Integrated Care Board and 20% of time undertaking duties as Executive Director of Adult Services and Health and Wellbeing for the county council. This will of course be flexible as neither role lends itself to such a precise split in time and the postholder will undoubtedly prioritise as she deems necessary using her professional judgment. As this way of operating is new to the county council and to the NHS, safeguards have been built into the draft agreement to protect the postholder's wellbeing. The postholder will report to the Chief Executive of the Integrated Care



Board in the Integrated Care Board role and to the Chief Executive of the county council in her Executive Director of Adult Services and Health and Wellbeing role and regular meetings have been included between the two Chief Executives to ensure that the arrangement is working well with flexibility to change any aspect which becomes problematic.

To cover the gap left by the time spent by the Executive Director of Adult Services and Health and Wellbeing in undertaking Integrated Care Board business, additional director capacity has been secured by way of a deputy executive director of adult services and she will directly line manage the relevant adult services directors, provide day to day support and direction to them and provide professional support to the county council. The individual appointed is experienced both in adult social care work at a senior level and in working for a shire authority

The Executive Director of Adult Services and Health and Wellbeing will continue to provide the statutory director function as part of her new role in so doing she will regularly line manage the deputy executive director maintaining a line of sight on quality of practice, performance, finance and policy issues. It is anticipated that the Executive Director of Adult Services and Health and Wellbeing will retain her position on the Adult Safeguarding Executive and continue to be part of the executive management team, providing a substitute director on occasions as she does now when she is unable to attend.

Although this might appear to be a daunting task given the footprint of the Integrated Care Board, three deputies to the postholder have been appointed as part of her wider Integrated Care Board leadership team and their weekly meetings in the run up to the arrangement formally commencing has provided confidence in her ability to delegate as appropriate. In addition, the county council has added capacity to the county council's adult services leadership team through a new director for integrated commissioning who takes up post on 1 February and comes with both NHS and local government experience.

There are persuasive reasons for adopting this approach in terms of what it will potentially deliver for our residents. However, it does not lend itself to a neat legal device to reflect how the role will be shared between the two employers and it has been agreed that the most effective way of reflecting the Integrated Care Board /county council's expectations and responsibilities is through a secondment agreement. This is a common arrangement between organisations and in this case, the county council will remain as employer seconding the services of the Executive Director of Adult Services and Health and Wellbeing to the Integrated Care Board for a notional 80% of her worktime. The agreement reserves the right of both county council and Integrated Care Board to terminate the arrangement on notice if for whatever reason it proves unsatisfactory.

The terms have not yet been finalised and it is therefore proposed that authority to finalise the agreement is delegated to the Director of Corporate Services in consultation with the Interim Director of People.



## **Consultations**

Given how the two organisations are approaching the role, i.e. on a shared basis, the nature of the role and the terms on which it will operate have been the subject of ongoing consultation between the Executive Director of Adult Services and Health and Wellbeing and the Chief Executive. The Leader and Deputy Leader of the County Council as well as the Cabinet Member for Adult Social Care and the Cabinet Member for Health and Wellbeing have been briefed and kept up to date on developments. The Director of Corporate Services (the Monitoring Officer) has been involved in negotiating the terms of the secondment agreement with the assistance of a Senior HR Business Partner.

## **Implications:**

This item has the following implications, as indicated:

### **Financial**

The total cost of employing the Executive Director of Adult Services and Health and Wellbeing/Integrated Care Board postholder across the two organisations is £162,740 (exclusive of pension contributions, national insurance and other employee costs). Out of pocket expenses will be met by the organisation on whose behalf the expense is incurred.

The Integrated Care Board will meet 80% of these costs and the county council 20%, payment being in arrears by way of invoice.

### **Risk management**

The role of Executive Director of Adult Services is a statutory one reflecting that it is considered to be a key strategic position within an upper tier authority. As such seconding the lead officer to a different organisation for 80% of her time presents a risk to the council especially just as adult services are moving to an inspection regime similar to that applied to children's services. Notwithstanding the risks, there are plainly significant benefits to be secured for our residents and for the NHS/local authorities if the arrangement delivers improved integration between health and social care in the county, indeed collaboration between the NHS and the county council is one of the issues that the new inspection regime will consider. Safeguards have been built into the agreement including the provision of support to the postholder from both organisations, regular monitoring of how it is working at chief executive level and the ability of either organisation to bring it to an end if it no longer meets their needs.

The Executive Director of Adult Services and Health and Wellbeing has suggested that the audit service considers the operation of the arrangement with a view to identifying and addressing any salient risks. This is to be included in the workplan of the audit team at a suitable time within the next twelve months and the Chair of the Audit, Risk and Governance Committee is to be informed. It is also intended to invite the Local Government Association at an appropriate time to undertake a review of the arrangements to offer further assurance.



## List of Background Papers

Paper	Date	Contact/Tel
-------	------	-------------

None

Reason for inclusion in Part II, if appropriate

N/A

