## NEATH PORT TALBOT COUNTY BOROUGH COUNCIL

#### **Personnel Committee**

24<sup>th</sup> July 2017

# Report of the Director of Social Services Health and Housing

#### **Nick Jarman**

#### **Matter for Decision**

Wards Affected: All wards

**Review of Homecare Service management structure** 

#### 1. Purpose of the report

- 1.1 To provide members with an update on the staffing position vis-à-vis numbers of permanent, temporary and seconded posts within the Homecare management team
- 1.2 To seek members' approval to consolidate the management structure within the Homecare Service by
  - i. Making all temporary posts permanent.
  - ii. Creating one additional Supervisor post.
  - iii. Deleting one Community Care programmer post.
  - iv. To remove the operation of the flexi time scheme for Supervisors.

#### 2. Background

In 2015 the Homecare Service had lost the entire management team to ER/VR, and was subject to a significant service improvement plan. Similarly, CSSIW inspections at that time also highlighted deficits in service quality and the levels of staff supervisions.

In August 2015, a new management team was put in place with a clear steer on what, and how the service was to improve. A temporary Quality Assurance Manager post was created to assist with the improvement process, along with an interim Operational Manager.

The CSSIW inspection report of January 2016 was encouraging and revealed that the service was showing signs of improvement.

The Homecare Service underwent a significant management of change exercise in 2016, which was designed to improve shift patterns, ensure consistent distribution of the workforce throughout the day and improve the flexibility and responsiveness in the way the service is provided to people.

36 Community Care Assistants also left the service under the ER/VR scheme. This necessitated the transfer of 1000 hours of care per week out to the private provider market.

July 2016 also saw the creation of the Homecare Rapid Response Team (HRRT). This team was developed in response to increasing pressures within the Health and Social Care System, with a view to reducing the number of unscheduled hospital admissions and delayed transfers of care. Initially the team comprised 12 Community Care Assistants, but the demand for the service was such that the team quickly expanded, and now comprises 24 Community Care Assistants, and 1 Supervisor. The team was selected by seeking expressions of interest from within the existing establishment and going through a competitive interview process. These posts have not been backfilled.

The service now has a higher Supervisor to Care Assistant ratio, which is having a positive impact on the quality of the service. Industry standards suggest a ratio of 1:25, whereas the structure proposed in this report would provide a ratio of 1: 19. February 2017 CSSIW Inspection report has specifically referred to the progress that the current management team has made in terms of both developing the service and on the quality of the service provided.

#### 3. Consultation Process

All staff were subject to a 30-day consultation period, which ran from 15th of June 2017 to the 14<sup>th</sup> of July 2017 as per the Management of Change in Partnership Policy.

#### **Current staff structure:**

#### 4.1 Management Team:

- 1 x 37hr Interim Operational Manager post (temporary) Grade 11 (Scp 44 to 47 Bar at Scp 46).
- 1 x 37hr Deputy Homecare Manager post (Permanent) -Grade 9 (Scp 35 to 40 – Bar at Scp 39).
- 1 x 37hr Quality Assurance Manager post (Temporary) -Grade 7 (Scp 27 to 32 – bar at Scp 31). Currently at Scp 30.
  - Current post holder is seconded from substantive post of Community Care Supervisor
- 1 x 37hr Business & Finance Manager (Permanent) Grade 7 (Scp 27 to 32 Bar at 31). Currently at Scp 29.

## 4.2 Community Care Supervisor team:

- 7 x 37hr Community Care Supervisor posts (permanent) –
   Grade 6 (Scp 23 to 28 Bar at Scp 27)
- 2 x 37hr Community Care Assistant posts (Temporary) -Grade 6 (Scp 23 to 28 – Bar at Scp 27)
  - Current post holders seconded from substantive post of Community Care Programmer to
    - a. Backfill Quality Assurance Manager post
    - b. Cover maternity leave for one permanent Community Care Supervisor.

**NB**. This post holder returned from maternity leave in May 2017, but the service has retained the seconded post as supernumerary to the establishment in order to achieve the higher Supervisor to Community Care Assistant ratio.

## 4.3 The Community Care Programmer team comprises:

- 7 x 30hr Community Care Programmer posts (permanent) Grade 5 (Scp 20 to 25 Bar at 24) in the structure.
- 2 have been seconded into Community Care Supervisor posts for the reasons stated above.
- 1 Community Care Assistant has been temporarily medically redeployed into a Community Care Programmer post (22 ½ hour contract).
- Therefore only six of these posts are currently filled, and one post is vacant.

## 4. Proposals for consolidation

- Establish the Quality Assurance Manager post as a permanent post
  - i. Appoint of permanent employee will be on competitive interview.
  - ii. Because of the particular skills set and experience required to be effective in this post, applicants should be ring fenced to the existing Community Care Supervisor team.
- Increase the Community Care Supervisor establishment from 8 to 9 posts
  - i. Appointment of permanent employees will be on competitive interview.

- Applications should be ring fenced to Community Care Programmer
- Delete either 1 Community Care Programmer post.
  - i. The post to be deleted is currently vacant.

#### 5. Operation of Flexi Time Working Scheme

Supervisors have operated under the Flexi Time Working Scheme. This is a hangover from a point in time where Community Care Supervisors worked standard office hours (Monday to Friday 9am to 5pm). This shift pattern changed in 2007 and the rota system in place means that Supervisors work a combination of AM shifts (7am to 3pm) and PM shifts (3pm to 11pm) any 5 out of 7 days. This is outside of the flexi time bandwidth (7.30am to 7pm, Monday to Friday) as per the scheme.

It has become apparent that only 2 Supervisor are currently utilising the Flexi Time Scheme.

It is proposed that any additional hours worked will be accounted for as lieu time or overtime.

## 6. Financial Impact

The quality assurance manager is already budgeted for and existing in house homecare resources are sufficient to meet the differential of the supervisor and programmer posts. Permanent savings have been achieved in the overtime budget.

#### 7. Equality Impact Assessment

There is no requirement for an equality impact assessment on this Proposal.

## 8. Workforce Impacts

No employee is at risk of redundancy.

#### 9. Legal Impacts

Not applicable

#### 10. Risk Management

Not applicable

#### 11. Consultation

There is no requirement under the Constitution for external consultation on this item.

#### 12. Recommendations

- i. That members approve the proposals set out in section 5 of this report
- **ii.** That the recommendations set out in section 5 of this report are implemented.

#### FOR DECISION

#### **Reasons for Proposed Decision**

To improve service delivery, and efficiency in line with the Authorities policies and procedures.

## Implementation of Decision

The decision is proposed for implementation after the three day call in period

## 13. List of Background Papers Not applicable

## 14. Officer Contact

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#### **FINANCIAL APPRAISAL**

POST	PROPOSED CHANGE	Cost	
	(New Post/Delete/Regrade etc.)	Full year (current Spinal point)	Max
Quality Assurance Manager	establish post as permanent	36,377	38,703
Community Care Supervisor	Increase by 1 fte	28,613	33,780
Community Care Programmer	delete 0.81 fte	(- 24,037)	(- 24,037)
	TOTAL COST	40,953	48,446

	Full year (current		
FUNDING STATEMENT Costs Employee Costs (Financial Appraisal Statement)	Spinal point) <u>£</u>	<u>Max</u> <u>£</u>	
> Salary	40,953	40,953	
<ul> <li>Additional cost at Maximum Salary</li> <li>Accommodation Running Costs</li> <li>IT Annual Costs</li> <li>Other Running Costs (specify)</li> </ul>		7,493	
Total Recurring Savings	40,953	48,446	
Funding of Recurring Costs  External Sources Specific Grant: - staffing costs - other			
Funding from External Agencies Service Level Agreement Other (specify) Internal Sources HRA			sufficient budget in 45CHAA
Existing Budget Allocation Additional Guideline Allocation Other (specify)	40,953	48,446	In House homecare to meet these costs
Total Savings Available	40,953	48,446	