Encouraging engagement between Sustainability and Transformation Partnerships and the adult social care sector

Introduction

In March 2017, the Care Provider Alliance (CPA) was awarded a grant from the Department of Health to scope and deliver a programme of work to enhance engagement with and by the independent and voluntary adult social care sector. The programme includes projects developing the sector's engagement with local government and CCG commissioners, with the NHS Five Year Forward View, and with contingency planning.

It was agreed early in the programme that the first priority should be to produce a document to support and encourage engagement between the adult social care sector and Sustainability and Transformation Partnerships (STPs). That document is published alongside this report. This report provides the background to it.

STPs are new partnerships in which the NHS and local councils have come together to develop proposals to improve health and care and to plan jointly for the next few years¹. There are 44 STPs across England, covering areas whose populations range from 300,000 to 2.8 million². The aim is that they should be built around the needs of the local population across whole areas, not just those of the individual organisations involved. They don't have a formal constitution or decision-making authority, and their operation therefore focuses on collaboration. They may be led by a leader from a CCG, an NHS provider or a local authority³.

The independent and voluntary adult social care sector includes residential and nursing homes, care provided in people's homes, day services, and services such as befriending that are often supported by volunteers. It is a big sector, employing 1.45 million people in England⁴, which is more than the NHS does⁵. Its economic impact has been estimated by Skills for Care at up to £40 billion per year⁶.

Residential and nursing homes in England provide 460,000 places⁷, compared to around 131,000 beds in NHS hospitals⁸, and they support many of the frailest people in our communities. Over 500,000 more people, many of whom have multiple complex health conditions, rely on social care in their own homes⁹.

Without high quality, sustainable adult social care services, the NHS would soon be completely overwhelmed. However, when each STP published its initial plan in December 2016, only seven of the plans would appear to have been developed with any involvement from the adult social care sector¹⁰. This finding was in line with feedback from members of the Care Provider Alliance that neither they, nor the care providers who make up their membership, had generally been engaged in the development of the plans.

The wider context is one in which STPs have come together quickly, and have had limited time and resources for engagement. The Kings Fund¹¹(February 2017) suggested that broader community engagement by STPs had so far been limited. In addition, the task for an STP wishing to engage in a meaningful and representative way with the social care providers in its area often won't be straightforward. There

will be a wide range of different types of service, provided by organisations that vary greatly in size and nature. This diversity is a great strength of the sector – but it makes engagement across a substantial geographical area more challenging.

A note about terminology

This report concerns engagement between STPs and the independent and voluntary adult social care sector. The sector is made up of the huge diversity of organisations which provide adult social care services including residential and nursing homes, homecare, shared lives schemes, extra care services and day services. The organisations involved range in size from owner managers through to large regional and national organisations. Some work in the private sector, while others are charities or other non-profit organisations.

For ease of reference, in this report the title of the sector has generally been shortened to the "adult social care sector."

How this report has been written

Over recent months, in order to inform a document to help STPs and others to overcome these challenges, the Care Provider Alliance has:

- Read many of the published Sustainability and Transformation plans.
- Held a national engagement event in July 2017 with representatives from CPA members, care providers, the Department of Health, NHS England, STPs and sector agencies.
- Sought wider feedback via an informal consultation document published in July 2017.
- Spoken in more depth to people in a small number of areas where positive engagement between an STP and the adult social care sector had previously been reported. We did this to better understand the challenges and how they might be overcome.

In total there has been input from around 60 people in addition to CPA members.

This report summarises what has been found. We acknowledge that this has been a small-scale piece of work, rather than a fully comprehensive survey. There is, however, a consistency in the responses received that suggests that they have some value.

The move to integrated care

The creation of STPs is part of the wider programme, set out in the NHS Five Year Forward View, aiming to make what NHS England¹² describes as "the biggest national move to integrated care in any major western country." Many published Sustainability and Transformation plans emphasise the intention to develop proactive, integrated care based on neighbourhood teams in which health and social care staff work together as one.

In addition, the programme of the Five Year Forward View includes the work of 50 Vanguard sites, piloting and developing new service models within which the need

for more integrated multi-disciplinary working across different types of service, both health and social care, is a key theme. In relation to social care, the emphasis so far has generally been on support to people living in care homes.

For example, a number of the Vanguard sites are about Enhanced Health in Care Homes, where more proactive working arrangements between care homes and NHS staff are reducing the number and the length of hospital admissions for people who live in care homes.¹³

We haven't spoken to or heard from anyone who argued against the aim of greater integration. We were told:

- "The key is the integrated delivery team."
- "There tend to be fewer delayed transfers of care in areas where the NHS and social care work together as one team."
- "I have seen great outcomes where people have pulled their experience together and been willing to share knowledge and skills."
- "What's most exciting is the way that health and social care teams are working together at neighbourhood level. STPs have the opportunity to support and encourage these relationships."
- "Where health and care services work together well at a local level, there can be clear benefits for the people who need care, and for the sustainability of the overall health and care system."
- "It's a win-win situation."

However, moving towards more integrated working is not without its challenges. We have found quite a widespread feeling that adult social care services and staff can feel they are viewed as having a lower status and value than those in the NHS. Different respondents told us:

- "It doesn't matter how much engagement we've done at a strategic level if the health staff on the ground don't trust us enough to work constructively with us."
- "The care sector feels that it is lowest in the food chain with A and E at the top. It isn't respected or recognised."
- "At times social carers not only are treated but are also generally viewed to be the least educated hence their contribution is seen to be less important than their colleagues from the health sector."

Reflecting concerns of this kind, the need for mutual trust and respect between all those involved, and the need for the adult social care sector to be engaged as an equal partner, have been consistent themes.

Feedback about current engagement between STPs and the adult social care sector

Specifically in relation to current engagement between STPs and the adult social care sector, the picture that has emerged is that:

- While published Sustainability and Transformation plans make frequent reference
 to "health and social care services", most of the plans read essentially as plans
 for the NHS in the STP's area, rather than as plans for the overall health and care
 system. There are some published plans that make more substantial reference to
 adult social care, for example to the need for the sector to be sustainable, but
 most do not.
- A small number of STPs have representatives of a local care association on their partnership board or on other groups within the STP.
- A small number of STPs are encouraging and supporting the development of new strategic forums in which to meet adult social care providers, or representatives of the adult social care sector.
- In one STP, a member of staff seconded to the STP with a specific focus on care at home, has contacted a range of care providers and arranged individual meetings with them.
- A small number of STPs have included in their work plans specific projects and priorities related to social care services.

These are all welcome initiatives. However, they do not appear to be widespread and there has been mixed feedback from the adult social care sector as to how valuable they have proved so far.

Some respondents were positive:

- One described in a positive way having been able to make health colleagues at the STP more aware of the homecare sector and of the challenges it faces.
- In another area, the engagement of a sector representative on the STP's stakeholder board was described as working well, with a number of practical cross-sector projects being progressed. The STP lead from the same area also spoke positively about working arrangements with the adult social care sector.

Other respondents have questioned how meaningful the current engagement by STPs is in practice. Respondents from different areas, in each of which there is current engagement with STPs, have told us:

- ".... the STP focus is on NHS services and priorities. There has so far been little apparent appetite for engagement with the perspective and experience of the social care provider sector."
- "STPs say the right thing but we are not sure if they see wider engagement than with public sector officers as worthwhile."
- "In my experience engagement is presented as a positive but is more 'window dressing'... the STP I have been engaged with is dominated by the larger NHS acute providers no real transformation seems likely..."

At a more practical level, the degree of change in some STPs has been a challenge. Care provider representatives from one area described having met with STP leaders, and found good enthusiasm for working together. However, all of the senior NHS managers then moved to other roles, and the process has had to start again.

Another area described the process of engagement having been complicated by the fact that the local STP had already had four different leaders.

The need for social care representatives to get to grips with NHS terminology and acronyms has also been described as a challenge by some respondents who have been engaged with an STP. Underlying this is the wider challenge that care providers and others face in keeping up with a fast-developing policy agenda.

There is, however, also a recognition that it is early days, and there is a generally positive and open attitude towards future development. A number of respondents have been particularly positive about the potential for more integrated neighbourhood working in the future. There is also a recognition that engagement is a two-way responsibility, and that there is the need for the adult social care sector to reach out to STPs in a positive and proactive way.

Feedback on practicalities

A number of practical suggestions to support and encourage engagement have been suggested:

- It was recognised that it will take time for all sides to reach a good understanding of each other's worlds, and that there is the need to have realistic expectations.
- It may be a good idea to start with a practical task on which everyone can work together. One specific suggestion was for people from different sectors to work together to map out the overall health and social care system across an STP area, including adult social care as well as the NHS and local authorities. It was highlighted that adult social care services can bring to this picture information about the many people who pay for their own care and who may not be known to the local authorities.
- The Vanguard projects, referred to on pages 2 and 3 of this report, offer a number of achievable models where services can work together locally and expect early practical wins. For example, enhanced healthcare support to people being supported by social care services who have complex health needs.
- There was widespread agreement that engagement with the sector is more manageable where adult social care providers come together in local associations or forums. In some areas, these are well-established. In others they are not, and the need for such groups to be fostered was widely highlighted. It may take time, effort and resources to get to the point where a group is representative of the diversity of the adult social care sector in an area.
- It was recognised that the challenge for STPs that cover a larger number of local authorities may be greater, particularly where it's not a geography that is used to working together as one.
- Workforce was identified as a key issue and a risk to quality and sustainability for both health and care services. With the NHS, local authorities and the independent and voluntary sector all competing over scarce skills, it was stressed that it makes sense to plan and manage this together.

- The need for the way in which engagement is gone about to make best use of the time of those involved was consistently highlighted. Traditional face to face meetings are time consuming but technology may help to share information and feedback more efficiently.
- It was recognised that sometimes there is concern that engaging the adult social care sector can give rise to a conflict of interest. However, it was noted that this is no different to the situation with health providers and that, in a situation of trust and confidence, it can be managed through transparency and good governance.
- Shared platforms were highlighted as an excellent way of building and strengthening relationships, as well as symbolically demonstrating the commitment of sector leaders to integrated working.
- The issue of fee levels cannot be ducked, but there was recognition that, while it must be addressed, all parties need to avoid it being the only issue.
- It was highlighted that there is a risk that it is larger providers who have capacity to engage, and that the voice of small providers is not heard sufficiently. Specific effort may therefore be needed to support smaller providers to engage.

Discussion and recommendations

It is clear from this short review that engagement between STPs and the adult social care sector is generally at an early stage of development. Bearing in mind that the development of an integrated system of health and care is a key national aim, and that the adult social care sector makes up a good half of the system whose transformation STPs are responsible for, this would appear to be a significant gap.

Through the sector's engagement at the STP level, there is a huge opportunity to develop strategic alignment between these vital parts of the system, so that they work together in the best interests of patients and people supported by social care services. There is also the opportunity for system leaders from all sectors to model and promote the trust and understanding that is needed between colleagues working together in local services.

Our recommendations to support this aim are as follows:

- 1. For the leaders of all sectors to recognise and promote the interdependence and equal status of the health and adult social sectors, and for adult social care to be at the table as an equal partner.
- 2. For STPs that don't have established arrangements for engagement with the adult social care sector to:
 - Complete or commission a quick overview of the adult social care sector in their area, looking at the scale of provision and identifying any provider forums or associations.
 - Consider the options for engagement suggested in this report.
- 3. For STPs that do have established arrangements for engagement with the adult social care sector, to review them in discussion with their partners in the light of the points raised by this report.

- 4. For all STPs, to hold a discussion at an STP Board meeting about engagement with the adult social care sector; and, by March 2018, to share information on their website or otherwise about how they are taking engagement with the sector forward.
- 5. For adult social care providers and organisations:
 - If not already aware of and informed about STPs, to start by visiting www.england.nhs.uk/stps.
 - ➤ To take time to understand how the way the NHS works is changing and, in particular, the role of STPs.
 - To have a look the STP plan for their area, and at who leads it.
 - ➤ To be willing to engage positively, constructively and openly on behalf of the sector.

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References

- 1. NHS England website accessed 7/9/2017 https://www.england.nhs.uk/stps
- 2. Sustainability and Transformation Plan footprints. NHSE (March 2016). https://www.england.nhs.uk/wp-content/uploads/2016/02/stp-footprints-march-2016.pdf
- Sustainability and transformation plans in the NHS How are they being developed in practice? Kings Fund (November 2016). https://www.kingsfund.org.uk/sites/default/files/field/field_publication_file/STPs_in_NHS_Kings_Fund_Nov_2016.pdf
- 4. The size and structure of the adult social care sector and workforce in England. Skills for Care (2017). http://www.skillsforcare.org.uk/Documents/NMDS-SC-and-intelligence/NMDS-SC/Analysis-pages/Size-and-Structure-2017.pdf
- 5. NHS Workforce Statistics March 2017, Provisional statistics. NHS Digital (2017). https://digital.nhs.uk/catalogue/PUB30003
- 6. The size and structure of the adult social care sector and workforce in England. Skills for Care (2017). http://www.skillsforcare.org.uk/Documents/NMDS-SC-and-intelligence/NMDS-SC/Analysis-pages/Size-and-Structure-2017.pdf
- 7. The state of adult social care services 2014 to 2017. Care Quality Commission (2017). http://www.cqc.org.uk/publications/major-report/state-adult-social-care-services-2014-2017
- 8. Beds open overnight. NHSE (May 2017). https://www.england.nhs.uk/statistics/statistical-work-areas/bed-availability-and-occupancy/bed-data-overnight/

- 9. The state of adult social care services 2014 to 2017. Care Quality Commission (2017). http://www.cqc.org.uk/publications/major-report/state-adult-social-care-services-2014-2017
- 10. System transformation and care homes: a discussion document. The Good Governance Institute and Care England (May 2017).

 http://www.careengland.org.uk/sites/careengland/files/System%20transformation%20and%20care%20homes%20draft%20paper%20%28Autosaved%29%20%281%29.pdf
- 11. Delivering sustainability and transformation plans From ambitious proposals to credible plans. Kings Fund (February 2017). https://www.kingsfund.org.uk/sites/default/files/field/field_publication_file/STPs_proposals_to_plans_Kings_Fund_Feb_2017_0.pdf
- 12. Next steps on the NHS five year forward view. NHS England (March 2017). https://www.england.nhs.uk/wp-content/uploads/2017/03/NEXT-STEPS-ON-THE-NHS-FIVE-YEAR-FORWARD-VIEW.pdf
- 13. NHS England website accessed 7/9/2017 https://www.england.nhs.uk/ourwork/new-care-models/vanguards/about-vanguards/

About the Care Provider Alliance

The Care Provider Alliance (CPA) brings together the 11 main national associations which represent independent and voluntary adult social care providers in England. We work to represent the sector and ensure a coordinated response to the major issues that affect it.

Together our members provide care and support to 1.2 million people through residential, home-based and community services, whether commissioned by local authorities and the NHS or privately purchased. Together our members employ over 620,000 care workers.

The Care Provider Alliance is an informal body with a rotating chair. Membership is of the representative associations with a national membership across the whole of England. However, some CPA members also represent services in Scotland, Wales or Northern Ireland.

We meet regularly with all the main national agencies involved in social care including Care Quality Commission (CQC), the Local Government Association (LGA) and the Association of Directors of Adults Social Services (ADASS). We have close links with the Department of Health, NHS England, Skills for Care, the Social Care Institute for excellence (SCIE) and the Think Local Act Personal Partnership (TLAP.)

Our members' services include residential and nursing care, homecare, supported living and extra care housing, shared lives schemes, advocacy and telephone helplines. They support children, adults of working age and older people.

The members of the Care Provider Alliance are:

- Associated Retirement Community Operators
- Association for Real Change
- > Association of Mental Health Providers
- > Care England
- Ceretas
- National Care Association
- National Care Forum
- > Registered Nursing Home Association
- > Shared Lives Plus
- > United Kingdom Homecare Association
- > Voluntary Organisations Disability Group

www.careprovideralliance.org.uk