



Submission to the Health Committee enquiry into Sustainability and Transformation Partnerships (STPs)

1. Executive summary

- 1.1 The independent and voluntary adult social care sector, comprising care homes, homecare and other community services, is a large and vital sector. Without it, the NHS would soon be completely overwhelmed. However, the engagement of STPs with the sector has so far been limited.
- 1.2 The Care Provider Alliance (CPA) believes that, if STPs are to achieve the system transformation that they have been established to lead, increased future engagement is essential. It recommends that:
 - (i) Guidance to STPs should highlight the need for them to engage proactively with the independent and voluntary adult social care sector; and that a formal expectation that they will do so should be created.
 - (ii) The next version of the progress dashboard for STPs should include indicators of the performance of adult social care services in the STP area; and of how well health and adult social care services are working together; and of whether the STP has engaged with the independent and voluntary adult social care sector.
 - (iii) Funding should be made available, either centrally or from individual STPs, to support the engagement of the independent and voluntary adult social care sector at an STP level.
 - (iv) The CPA should continue to be funded by the Department of Health and Social Care to maintain a national overview and coordinating role.

2. About the Care Provider Alliance

- 2.1 The Care Provider Alliance (CPA) brings together the 11 main national associations which represent independent and voluntary adult social care providers in England. It works to represent the sector and ensure a coordinated response to the major issues that affect it.
- 2.2 The CPA's members 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

- 2.3 The current chair of the CPA is Rhidian Hughes, Chief Executive of the Voluntary Organisations Disability Group: rhidian.hughes@vodg.org.uk
- 2.4 The chair of the CPA's Programme Board, which oversees its work in relation to STPs, is Bridget Warr, Chief Executive of the United Kingdom Homecare Association: bridget.warr@ukhca.co.uk

3. The Care Provider Alliance's work in relation to STPs

- 3.1 In March 2017, the 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.
- 3.2 It was agreed that the first priority should be to produce a document to support and encourage engagement between the independent and voluntary adult social care sector and STPs. Between May and August 2017, the CPA sought to find out what engagement was happening, and what issues and challenges had been found. An extract from our subsequent report is appended.
- 3.3 We sent a summary document to each STP lead encouraging their engagement with the sector. A copy can be downloaded from <http://www.careprovideralliance.org.uk/stp-engagement.html>.
- 3.4 The document was sent to STPs with a covering letter co-signed by the Parliamentary Under-Secretary of State for Public Health and Primary Care. The letter asked that:
 - (i) Each STP should hold a discussion about engagement with the independent and voluntary adult social care sector at an STP Board meeting.
 - (ii) By March 2018, each STP should share information on its website or elsewhere about how it is taking engagement with the sector forward.
- 3.5 The CPA offered to help STPs with this. However, support has so far only been requested by two STPs.

4. Why the Care Provider Alliance is encouraging engagement by STPs

- 4.1 The independent and voluntary adult social care sector includes residential and nursing homes, homecare, day services, supported living, shared lives services, retirement communities and services such as befriending.
- 4.2 The sector employs 1.45 million people in England¹. Residential and nursing homes in England provide 460,000 places² and 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 homes².
- 4.4 Without high quality, sustainable adult social care services, the NHS would soon be completely overwhelmed. Without engagement with the independent and voluntary adult social care sector, STPs will struggle to achieve the system transformation they were established to secure.
- 4.5 The CPA recognises, however, that STPs came together quickly, and have had limited time and resources for engagement. 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. The CPA's offer is to help STPs navigate this complexity.

5. Responses to a number of the Committee's specific questions

- 5.1 *How effective have STPs been in joining up health and social care across their footprints, and in engaging parts of the system outside the acute healthcare sector, for example primary care, local authorities, public health, mental health and voluntary sector partners? How effectively are they engaging local communities and their representatives?*
- 5.2 The Care Provider Alliance's key interest is in the engagement of STPs with the independent and voluntary adult social care sector. We note with disappointment that, despite the size and vital importance of the sector, engagement with it is not listed in the question that the Committee has here posed.
- 5.3 As will be seen from the information throughout this submission, engagement between STPs and this sector has so far been limited. We believe that this is a huge lost opportunity to develop strategic alignment between these vital parts of the system, so that they work together in the best interests of patients and of people supported by social care. There is also the opportunity for leaders from all sectors to model and promote the trust, respect and understanding that is needed between colleagues working together in local services.
- 5.4 *How reliable are the ratings in the [Sustainability and Transformation Partnerships Progress Dashboard](#), and what do they tell us about the state of the plans and the relationships that underpin them?*
- 5.5 The STP ratings would so far appear to be solely concerned with health services. None of the measures give any indication as to the status or performance of adult social care services in the STP area, or of how well health and care services are working together, or of whether the STP has engaged the sector. The CPA believes that this is a significant gap.
- 5.6 The Care Provider Alliance recommends that the next version of the dashboard should include indicators to cover this.
- 5.7 *Looking across all STPs, are there any major areas where the content of the plans needs to be tested for credibility and realism? Are there any major gaps? For example, are proposals in some plans to reduce bed capacity credible? are the NHS efficiency estimates in STPs robust? is the workforce available to enable the implementation of STPs? or is the timescale for the changes proposed in STPs realistic?*
- 5.8 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 independent and voluntary adult social care sector³. This finding was in line with feedback from members of the CPA that neither they, nor the care providers who make up their membership, had generally been engaged in the development of the plans.
- 5.9 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.

- 5.10 *What governance, management and leadership arrangements need to be created to enable STP planning and implementation to be carried out effectively? Are additional, or different, arrangements required for areas which are developing ACSs?*
- 5.11 The document that the CPA sent to STP leads in September 2017⁴ suggested a number of ways in which an STP could engage with the independent and voluntary adult social care sector. We highlighted that some STPs have invited a representative of the sector to join the STP Partnership Board. This could, for example, be the chair of a local care association, where one exists. Other STPs have set up ad hoc or ongoing forums through which to engage with providers. The CPA doesn't believe that any one option is necessarily going to be right for every area, but it does believe that every STP should have an engagement arrangement of some kind.
- 5.12 *What legislative, policy and/or other barriers are there to effective STP and ACS governance and implementation, and what needs to be done by national bodies and national leaders in the NHS to support the implementation of STPs and ACSs?*
- 5.13 The Provider Alliance recommends that:
- (i) Guidance to STPs should highlight the need for them to engage proactively with the independent and voluntary adult social care sector, and a formal expectation that they will do so should be created.
 - (ii) Funding should be made available, either centrally or from individual STPs, to support the engagement of the independent and voluntary adult social care sector at an STP level.
 - (iii) The CPA should continue to be funded by the Department of Health and Social Care to maintain a national overview in this area.

References

1. 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>
2. 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>
3. 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>
4. Encouraging engagement between Sustainability and Transformation Partnerships and the adult social care sector. Care Provider Alliance (September 2017). http://www.careprovideralliance.org.uk/uploads/1/0/8/0/108055907/cpa_publication_on_stp_engagement_170911.pdf

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

1. Introduction

1.1 Between May and August 2017, the CPA:

- Read many of the published Sustainability and Transformation plans.
- Held a national engagement event.
- Sought 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.

1.2 There was input from around 60 people in addition to CPA members.

1.3 We acknowledge that this was a small-scale piece of work, rather than a fully comprehensive survey. There was, however, a consistency in the responses received that suggests that they have some value.

2. Integration of health and care

2.1 We didn't speak to or hear 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."

2.2 However, we 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."

Appendix. Extracts from the CPA's September 2017 report on STP engagement

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

3.1 The picture that emerged was that:

- 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.

3.2 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.

3.3 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.

3.4 Other respondents have questioned how meaningful the current engagement by STPs is in practice:

- "... 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.
- The need for social care representatives to get to grips with NHS terminology and acronyms has also been described as a challenge.

4. Feedback on practicalities

- #### 4.1 A number of practical suggestions to support and encourage engagement were suggested:

Appendix. Extracts from the CPA's September 2017 report on STP engagement

- 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.
- The Vanguard projects offer a number of achievable models where services can work together locally and expect early practical wins.
- There was widespread agreement that engagement with the sector is more manageable where adult social care providers come together in local associations or forums. 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.
- Workforce was identified as a key issue and a risk to quality and sustainability for both health and care services.
- 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.
- 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.

5. Recommendations

5.1 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.

5.2 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.

Appendix. Extracts from the CPA's September 2017 report on STP engagement

- 5.3 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.
- 5.4 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.
- 5.5 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.

September 2017.

The full text of this report can be downloaded from <http://www.careprovideralliance.org.uk/stp-engagement.html>