# **STATES OF JERSEY**



## REDESIGN OF THE HEALTH AND SOCIAL CARE GOVERNANCE MODEL (S.R.9/2017): RESPONSE OF THE MINISTER FOR HEALTH AND SOCIAL SERVICES

Presented to the States on 28th December 2017 by the Minister for Health and Social Services

**STATES GREFFE** 

#### REDESIGN OF THE HEALTH AND SOCIAL CARE GOVERNANCE MODEL (S.R.9/2017): RESPONSE OF THE MINISTER FOR HEALTH AND SOCIAL SERVICES

Ministerial Response to:	S.R.9/2017
Ministerial Response required by:	22nd December 2017
Review title:	Redesign of the Health and Social Care Governance Model
Scrutiny Panel:	Health and Social Security Scrutiny Panel

#### FINDINGS

	Findings	Comments
1	The System Partnership Board will consist of Health and Social Services Department representatives, a Voluntary and Community Sector Forum, a Public and Patient Advisory Group, a Clinical and Professional Forum and an independent Chair and 2 Non- Executive Directors.	Acknowledged – as noted in <u>P.60/2017</u> .
2	There is widespread support among stakeholders for a change to the current governance of health and social care.	Acknowledged. The proposed new strategic governance model has been co-produced with a wide range of stakeholders.
3	The consultation exercise undertaken to establish a new governance model generated widespread in principle agreement that the System Partnership Board should be established.	Acknowledged. The proposed new strategic governance model has been co-produced with a wide range of stakeholders.
4	Concerns have been raised that further preliminary work needs to be undertaken before the System Partnership Board is established and to give assurance to stakeholders that the proposed governance model is workable and appropriate for Jersey.	Agreed. A draft action plan recognises the detailed work which needs to be completed in order to establish the System Partnership Board. Much of this is scheduled to take place following States approval and appointment of the Chair, in order that the Chair can influence fully the detail of the new strategic governance model.
5	Evidence given at a public hearing suggests that the Minister for Health and Social Services considered children would be given a voice by the presence on the board of the Chief Executive Officer and Corporate Directors of Health and Social Services.	Acknowledged. The Managing Director of Community and Social Services has significant experience and interest in Children's Services, being a children's Social Worker by background. The Chief Nurse is the Safeguarding lead for Health and Social Services.

Findings	Comments
There is no certainty that any other representative on the System Partnership Board would directly represent the voice of children and young people.	Representatives would be chosen from their respective groups. It is highly likely that at least one of the Voluntary Sector representatives would be from a children's organisation. It is also highly likely that at least one of the Public and Patient representatives would be a parent.
There is currently no official forum or group that exists to represent the public and patient voice on the System Partnership Board.	Agreed. Setting up a well-functioning and resourced Public and Patient Advisory Group is one of the key aims of the proposed strategic governance model.
The Health and Social Services Department has asked Citizens Advice Jersey to lead in establishing a Public and Patient Advisory Group, though it is not yet clear what processes will be used.	Acknowledged. Citizen's Advice Jersey will lead on developing the Public and Patient Advisory Group. Health and Social Services is supporting this, including providing research and project management resource to assist and to share processes and approaches across the various groups and the System Partnership Board in order to have a consistent framework within which the individual Leads can develop their preferred approach to their group.
The Minister for Health and Social Services and his department have been reluctant to involve themselves in arrangements to establish the group, notwithstanding that the proposition suggested the System Partnership Board could be fully functional by the end of 2017. The Panel considers this approach unhelpful and contrary to the public interest.	The wording of this finding is somewhat negative and may give the wrong impression as to what the department is seeking to do. The Health and Social Services Department has led the process to co-produce the proposed strategic governance model. The clear message from a number of stakeholders is that their skills and abilities should be recognised and appreciated, and that Departmental involvement in their remits can be interpreted as an attempt to control the agenda and ensure that only the Department's aims are achieved. In recognition of this, the Department continues to lead on the overall project management and provides support to the Leads of the Advisory Groups – but it does not control the process nor dictate the methodologies. Departmental resources assist the Leads by providing research and project management and sharing processes and approaches across the various groups and the System Partnership Board in order to have a consistent framework within which the individual Leads can develop their
	The Minister for Health and Social Services and his department have been reluctant to involve themselves in arrangements to establish the group, notwithstanding that the proposition suggested the System

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		demonstrates the Department's trust in the abilities of the Leads, and provides the opportunity for the Leads to shape the way their Group will function, within an overall framework.
10	There is uncertainty over the composition of the Public and Patient Advisory Group, its Terms of Reference, how it would represent the wider sector from which it is drawn, how it would operate and be accountable to that sector.	Acknowledged. The detailed work is scheduled to take place following approval to proceed from the States. Undertaking significant preparatory work, which may then be of little value should approval not be achieved, would be a waste of resources, time and effort and would raise unrealistic expectations. Citizen's Advice Jersey is leading on developing the Public and Patient Advisory Group. The detailed work will commence once approval has been secured from the States Assembly.
11	There is uncertainty over how the Patient and Public Advisory Group would elect its members onto the System Partnership Board. The Minister for Health and Social Services has suggested that selection onto the System Partnership Board be based both on nomination and an assessment of an individual's capacity, capability and approach. It is not clear to the Panel how a nomination process would also ensure representation based on merit.	Acknowledged. The detailed work is scheduled to take place following approval to proceed from the States. Undertaking significant preparatory work, which may then be of little value should approval not be achieved, would be a waste of resources, time and effort and would raise unrealistic expectations. Citizen's Advice Jersey are leading on developing the Public and Patient Advisory Group. The detailed work will commence once approval has been secured from the States Assembly.
12	The Minister for Health and Social Services has suggested that at the point the Public and Patient Advisory Group puts its representatives forward, they would meet a specification the System Partnership Board has agreed. The Panel finds this a circular argument. The Board cannot agree a specification if board members have not yet been elected. The Panel believes the Health and Social Services Department is relying upon the independent Chair and Non- Executive Directors to oversee the establishment of the Public and Patient Advisory Group and ensure its good governance.	This is not a correct interpretation. P.60/2017 outlines a broad person specification for all System Partnership Board members: 'ability to be broadly representative, work positively and professionally in partnership, consider alternatives and work collaboratively towards shared solutions, and operate at a strategic level'. The Health and Social Services Department is <u>not</u> relying upon the independent Chair and Non-Executive Directors to oversee the establishment of the Public and Patient Advisory Group and ensure its good governance; this is the role of the Public and Patient Advisory Board Lead (Citizen's Advice Jersey), supported by the Health and

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		Social Services resource.
13	Upon approval of the proposed governance model, resources will be allocated to form the Voluntary and Community Sector Forum.	Acknowledged.
14	No current forum exists with a clear role and remit to represent the diverse voluntary and community sector. The need to find a means of establishing a representative body is a challenge to the sector which lacks the resources available to the Health and Social Services Department.	A Voluntary Sector Partnership existed up to 2016, funded by the Chief Minister's Department. Since that time, Chief Executives of a number of Voluntary Sector organisations have met to discuss common aims, to build relationships and to consider mutual assistance. It is agreed that there needs to be a means of establishing a representative body; this is why it is incorporated as one of the key features of the proposed strategic governance model. The Chief Executive of Jersey Hospice has offered to act as Chair of the Voluntary
		Sector Forum whilst it is being established. She is supported by the Health and Social Services Department resource, undertaking research and project management as requested.
15	There is uncertainty over the composition of the Voluntary and Community Sector Forum, its Terms of Reference, how it would represent the wider sector from which it is drawn, how it would operate and be accountable to that sector, and how it would elect representatives to sit on the System Partnership Board.	Acknowledged. The detailed work is scheduled to take place following approval to proceed from the States. Undertaking significant preparatory work, which may then be of little value should approval not be achieved, would be a waste of resources, time and effort and would raise unrealistic expectations.
		The Chief Executive of Jersey Hospice is leading on developing the Voluntary and Community Sector Forum. The detailed work will commence once approval has been secured from the States Assembly.
16	Stakeholders frequently raised the view that there was little clarity as to how the proposed model would be implemented.	The proposed strategic governance model was co-produced with stakeholders. It is overseen by the Transition Plan Steering Group.
		The detailed work is scheduled to take place following approval to proceed from the States. Undertaking significant preparatory work which may then be of little value should approval not be achieved would be a

	Findings	Comments
		waste of resources, time and effort and would raise unrealistic expectations.
17	Although the Health and Social Services Department provided a worked example to the Panel, there was insufficient detail to understand how the System Partnership Board would operate.	Further detail could have been provided; however, this was not requested by the Panel.
18	The System Partnership Board in the proposed model will consist of 21 members.	Acknowledged.
19	The Minister for Health and Social Services has agreed that the size of the System Partnership Board could be problematic.	The Minister has also acknowledged that the System Partnership Board representation is broad.
20	The Health and Social Services Department will be represented by 9 Corporate Directors including the Chief Executive Officer.	Incorrect – the Health and Social Services Department will be represented by <u>7</u> Corporate Directors including the Chief Executive Officer, plus 2 Medical Directors, who are not Corporate Directors.
21	It is the view of the Minister for Health and Social Services that no Corporate Directors should be left off the System Partnership Board.	Acknowledged.
22	There is a prevailing view from both the Minister for Health and Social Services and key stakeholders that a strong Chair is crucial to the success of this model.	Acknowledged.
23	The Health and Social Services Department will fund the administrative cost of the System Partnership Board and will also provide research facilities to the Board.	Acknowledged.
24	There are currently no proposals as to how the System Partnership Board would develop once the 3-year trial period has concluded.	Acknowledged. The success of the Board will be assessed during the trial period and in light of this the Minister would then decide how the Board would develop.

### RECOMMENDATIONS

	Recommendations	То	Accept/ Reject	Comments	Target date of action/ completion
1	The System Partnership Board should align its Terms of Reference with any work being undertaken by the incoming Children's Commissioner, and any other persons appointed pursuant to proposals following recommendations made in the Independent Jersey Care Inquiry.	HSS	Accept	The Terms of Reference will align with all relevant policy and strategy groups from across States of Jersey.	1st June 2018 or upon commencement of Board, whichever is sooner
2	The Minister for Health and Social Services should ensure that one or more of the appointees among the Chair and Non-Executive Directors has significant and relevant training and experience in community and social services, to better ensure the voice of children is represented.	HSS	Reject	The Chair and Non- Executive Directors must be independent and able to consider the needs and priorities of all vulnerable groups. However, the Board will include the Managing Director of Community and Social Services, who will be held to account by the Chair for ensuring the voice of children is represented in all discussions.	
3	There are risks in the fluid approach adopted by the Minister for Health and Social Services. It is important that the Public and Patient Advisory Group should be able to represent the diverse interests of the public and patients and that it should be supported by its own system of governance. Given the part the Public and Patient Advisory Group will play in setting future strategy, the Panel considers it is in the public interest for the Minister to ensure that appropriate departmental resources are allocated to lead in establishing this group.	HSS	Accept	The Lead for the Public and Patient Advisory Group will continue to be supported with Health and Social Services Department resources, and will continue to be able to access advice, support and guidance from across Health and Social Services Department, for example, in devising robust and effective governance systems. The emerging detailed plans for the Public and Patient Advisory Group and System Partnership Board will be iterated during the planning	1st April 2018

	Recommendations	То	Accept/ Reject	Comments	Target date of action/ completion
				process to ensure they are aligned.	
4	The System Partnership Board should not begin its operational role until the Public and Patient Group is satisfactorily established and their representatives are elected onto the System Partnership Board.	HSS	Accept	The intention is for the Public and Patient Advisory Group to be established by 31st March 2018.	1st April 2018
5	The Minister for Health and Social Services should ensure that a detailed worked example of how the Voluntary and Community Sector Forum will operate is made available to assist the sector to understand its role in the new model.	HSS	Reject	The Voluntary and Community Sector Forum is responsible for designing how its forum will operate. This is important in order to ensure ongoing ownership and to ensure the Forum effectively meets the needs of its members. The Lead for the Voluntary and Community Sector Forum will continue to be supported with Health and Social Services Department resources, and will continue to be able to access advice, support and guidance from across Health and Social Services Department, for example, in devising robust and effective governance systems. The emerging detailed plans for the Voluntary and Community Sector Forum and System Partnership Board will be iterated during the planning process, to ensure they are aligned.	
6	The System Partnership Board should not begin its operational role until the Voluntary and Community Sector Forum is satisfactorily established and	HSS	Accept	The intention is for the Voluntary and Community Sector Forum to be established by 31 March	1st April 2018

	Recommendations	То	Accept/ Reject	Comments	Target date of action/ completion
	their representatives are elected onto the Board.			2018.	
7	The System Partnership Board should not begin its operational role until detailed worked examples are provided to the key stakeholders to their satisfaction. These examples should make reference to the communication pathways, training pathways, evaluation criteria and development of a set of guidelines to deal with challenges during implementation and operation.	HSS	Accept	Detailed plans for the System Partnership Board, including detailed worked examples, will be co- produced with stakeholders following approval to proceed by the States Assembly and once the Chair and Non- Executives are in post.	1st June 2018
8	The roles and responsibilities of each System Partnership Board Member should be clarified.	HSS	Accept	Detailed plans for the System Partnership Board, including Terms of Reference, role descriptions, culture, values and responsibilities, will be co-produced with stakeholders following approval to proceed by the States Assembly and once the Chair and Non- Executives are in post.	1st June 2018
9	The Minister for Health and Social Services should give consideration to the composition and size of the System Partnership Board with a view to reducing the number of Health and Social Services Department representatives.	HSS		The Minister will give consideration to the composition and size of the System Partnership Board including the number of Health and Social Services Department representatives.	
10	System Partnership Board members who would not be remunerated for attendance by virtue of their employment should receive an honorarium to reflect the work and commitment involved as a board member. It is not sufficient to offer the reimbursement of a day's pay if	HSS	Accept	Reimbursement for System Partnership Board members will be fair and transparent. It will not disadvantage or deter participation from individuals who are on low incomes or who are not in paid employment.	1st June 2018

	Recommendations	То	Accept/ Reject	Comments	Target date of action/ completion
	this is lost because some board members might be retired persons or would participate in the board in their own time.				
11	The Minister for Health and Social Services should ensure that the Public and Patient Advisory Group and Voluntary and Community Sector Forum are adequately resourced to allow them to participate on an equal basis with other System Partnership Board Members.	HSS	Accept	Reimbursement for System Partnership Board members will be fair and transparent. It will not disadvantage or deter participation from individuals who are on low incomes or who are not in paid employment.	1st June 2018
12	The Minister for Health and Social Services should ensure that the costs of establishing and operating the System Partnership Board are published on an annual basis.	HSS	Accept	The costs will form part of the Health and Social Services Department's annual accounts.	31st December 2018
13	The Minister for Health and Social Services should ensure that open and transparent discussions take place as to the future direction of the System Partnership Board. Any changes that may be proposed should be subject to full consultation and be brought to the States Assembly with adequate time for scrutiny and debate.	HSS	Accept	The System Partnership Board will be evaluated after 3 years. A report will be presented to the Council of Ministers for consideration and a presentation for States Members will be arranged.	31st December 2020
14	The Minster for Health and Social Services should report to the States Assembly at the last sitting of 2017, and the first sitting of March 2018, with an update on the progress made in implementing the System Partnership Board and its associated forums and groups.	HSS	Reject	<ul> <li>P.60/2017 was withdrawn by the Minister for Health and Social Services.</li> <li>Once guidance has been received from the Public Accounts Committee and Privileges and Procedures Committee, consideration will be given to bringing a further report to the States Assembly.</li> </ul>	1st April 2018

#### CONCLUSION

The Minister for Health and Social Services would like to thank the Scrutiny Panel and their Adviser for a thorough and well-considered report. The Minister notes in particular the ongoing commitment and enthusiasm of stakeholders who have coproduced the proposed strategic governance model.

The Minister reconfirms his intention to oversee the detailed planning of the System Partnership Board and its Advisory Groups, and notes that this requires States approval to proceed and the appointment of the Chair and Non-Executive Directors.

The Minister also reconfirms his expectation that his Department will continue to work in partnership with stakeholders, supporting and acknowledging the stakeholders' leadership, listening to their views, and providing resources to assist as they co-produce detailed plans for an improved strategic governance model which is inclusive and transparent.