

**South Ayrshire Council**

**Report by Director of Health and Social Care  
to Leadership Panel  
of 18 January 2021**

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**Subject: Health and Social Care Partnership (HSCP) Winter Pressures Funding (Additional Posts)**

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**1. Purpose**

- 1.1. The purpose of this report is to seek the Leadership Panel's approval for a range of staffing changes (10 new posts and permanency of 22.8 existing temporary posts) within the Health and Social Care Partnership (HSCP), using additional 'winter pressures' funding from Scottish Government.

**2. Recommendation**

**2.1 It is recommended that the Panel:**

- 2.1.1 **considers the background and [South Ayrshire HSCP Winter 2021-22 Investment Plan](#), outlining the rationale for the proposed use of additional Scottish Government funding;**
- 2.1.2 **agrees to the creation of the posts outlined within the report and detailed in Section 4; and**
- 2.1.3 **agrees that recruitment to these posts should be expedited to ensure maximum impact - ie alleviating current pressures on the local health and care system.**

**3. Background**

- 3.1 On 5 October 2021, the Cabinet Secretary announced new recurring investment of £300m to help protect health and social care services over the winter period and to provide longer term improvement in service capacity across health and social care systems. This announcement was followed up by a letter from NHS Scotland Chief Operating Officer and the Director of Mental Wellbeing and Social Care, detailing the winter planning investment for health and social care (included within the [South Ayrshire HSCP Winter 2021-22 Investment Plan](#)).
- 3.2 This investment is intended for the planning and building of resilience into the system through winter 2021-22 and beyond to ensure sustainability and build the recovery and renewal strategy as set out in the [NHS Recovery Plan](#), including enhanced social care support. The investment has four key principles:

- Maximising Capacity;

- Ensuring Staff Wellbeing;
- Ensuring System Flow; and
- Improving Outcomes.

3.3 On 4 November, a funding allocation letter was received from the Scottish Government detailing the specific IJB allocations of Winter Pressures Funding to the meet the four key principles above. The funding allocation has been split into specific tranches that can be measurable in terms of input and expected outcomes measurable by Key Performance Indicators (KPIs). Again, this detail is contained within the [South Ayrshire HSCP Winter 2021-22 Investment Plan](#), including the alignment of the HSCP’s proposed investment with these KPIs.

3.4 The allocation in the letter is for 2021-22 only, with further detail on the recurring funding confirmed in the Scottish Budget for 2022-23.

3.5 The funding proposals in this paper refer to the allocations noted in the table below. On a recurring basis the investment is £4.110m and this amount is used to plan the longer term needs of the service to improve system flow, build capacity and improve outcomes for the people of South Ayrshire in line with our strategic priorities set out in our [Strategic Plan 2021-31](#).

Area	Allocation	Scottish Government Allocation (£m)	Funding Status	South Ayrshire 21-22 (£m)	South Ayrshire 22-23 (£m)
<b>Winter 21/22 Funding</b>	Interim Care Beds	40.282	Non Recurring	1.002	0.501
	Care at Home Capacity	61.563	Recurring	1.554	3.108
	Multi-Disciplinary Teams	101.845	Recurring	0.501	1.002
			<b>TOTAL</b>	<b>3.057</b>	<b>4.611</b>

3.6 Full details of proposed use of this additional funding and how this activity will deliver on both the Scottish Government’s ‘key performance indicators’ for the fund and the IJB’s Strategic Plan are provided in the [South Ayrshire HSCP Winter 2021-22 Investment Plan](#) (which also includes the original funding letters from Scottish Government). Funding allocations agreed by the IJB are included in the table below:

Investment Area	Investment Proposal Description	Proposed Investment (£m)
<b>Hospital at Home</b>	Investment in practitioners and business support to support the Ayr Hospital ‘hospital at home’ model, manage interim care beds, linking with the community rehab and ICT team	£0.384m
<b>Discharge without Delay</b>	Investment in additional social work capacity at hospital to support discharge without delay and co-ordinate services with ICT, Community rehab and care at home	£0.105m

<b>Investment Area</b>	<b>Investment Proposal Description</b>	<b>Proposed Investment (£m)</b>
<b>Interim Care</b>	Commissioning interim care home beds across localities. Managed / monitored by the Hospital team for discharge without delay.	£0.502m
<b>Care at Home (capacity)</b>	Investment in existing care at home services both internal and commissioned, increasing capacity to provide flow from hospital and reablement services, including resources allocated to Out Of Hours and Mobile attendants to provide round-the-clock access to support.	£1.145m
<b>Care at Home (supervisory)</b>	Additional supervisory capacity to manage systems and care at home services including business support, quality assurance and officers to monitor care and data systems essential to capture activity to continually improve standards	£0.689m
<b>Community AHP</b>	Additional Physios, OTs, SLT and HSCW aligned to localities to provide a rehabilitation service, enabling discharge from hospital and recovery at home or in a homely setting. Working alongside hospital teams and Multi-Disciplinary Teams to embed good practice and clear referral practices	£0.256m
<b>Community Nursing</b>	Additional community nurses and a clinical nurse manager resource to build capacity in the community to provide services that would otherwise be delivered in hospital. Team will focus on anticipatory care.	£0.406m
<b>Enhanced Locality MDT Workforce (CTAC)</b>	Community Treatment Assessment Centre nursing resource, to provide hospital services in the locality linked to GP service	£0.107m
<b>Enhanced Locality MDT Workforce (PC Dietetics)</b>	Additional Primary Care Dietetics to provide capacity in supporting people in their locality and enhancing preventative approach to avoid care needs escalating	£0.106m
<b>Enhanced Locality MDT Workforce (OTs)</b>	Additional Occupational Therapy support to provide early intervention and prevention to frailty to avoid and reduce care needs escalating.	£0.298m
<b>Enhance Community Supports</b>	Commission services from to provide supports to carers and alternative support to traditional services allowing greater choice and control to meet health and social care needs in the community	£0.250m
<b>Technology Enabled Care</b>	Invest in technology enabled care to provide early intervention support and support people in their homes, this includes resources to understand the needs of the end user and how these can be met from the various technology options	£0.363m
<b>Total</b>		<b>£4.611m</b>

3.7 The Leadership Panel should note that of the funding outlined above, only a proportion of this will be used to fund council-employed posts with the rest being used to create additional HSCP capacity within the NHS staffing establishment.

#### 4. Proposals

4.1 It is proposed that the Leadership Panel agrees to the creation and/or continuation (as set out in the table below) of the posts associated with this additional funding to deliver on the allocations agreed by the IJB above.

4.2 It should be noted that the majority (22.8) of the 32.8 FTE posts concerned have already been created within the structure on a temporary basis. Ten new posts are therefore proposed. The table below describes each post concerned, the current status of each and sets out what Leadership Panel are being asked to agree in relation to these posts. Temporary roles which are being requested to become permanent were unable to be permanent in the first instance as the IJB did not have the assurances we now have from Scottish Government that funding would be recurring.

Ref	Purpose	Job Description	Level /Grade	FT E	Annual Cost (£)	Current status	Request of Leadership Panel
<b>New posts to be created</b>							
1	Additional social work resources to support complex assessments	<b>Social Workers</b> Additional Capacity for assessments (AWI)	10	2	£104,710	Awaiting LP confirmation.	Agree to create posts.
2	Expand Existing Services	<b>Admin Assistant</b> Care at Home Purchased	4	1	£26,578	Awaiting LP confirmation.	Agree to create post.
3	Expand Existing Services	<b>Team Supervisor</b> Sourcing Team	9	1	£47,865	Awaiting LP confirmation	Agree to create post.
4	Adding capacity to CAH Quality Assurance	<b>Commissioning Officer (Quality &amp; Improvement)</b>	12	1	£65,000	Awaiting LP confirmation. Job desc. agreed.	Agree to create new posts.
5	Expand Existing Services	<b>Assistant Supervisor</b> CM2000 Support	7	2	£75,584	Awaiting LP confirmation	Agree to create post.
6	Expand Existing Services	<b>Admin Assistant</b> CM2000 Support	4	1	£26,578	Awaiting LP confirmation	Agree to create post.
<b>Five temporary posts made permanent / Two new posts created</b>							
7	Expand Existing Services	<b>Care at Home Assistants Supervisors</b> 7x 45 hours	7	7	£242,283	5 temp posts previously approved by ELT (28 Nov); additional 2 to be created.	Agree to creation of 2 posts at level 7 (perm) and permanence of remaining five posts.

Existing temporary posts to be made permanent							
8	Expand Existing Services	<b>Mobile Attendant</b> Nights	5	4	£129,024	Approved by ELT as temp posts on 8 Nov 2021.	Agree to make permanent.
9	Expand Existing Services	<b>Mobile Attendant</b> Days	5	2	£50,328	Approved by ELT as temp posts on 8 Nov 2021.	Agree to make permanent.
No change to staffing establishment							
10	Expand Existing Services	<b>Care at Home Workers</b> 18 x 21 hours	5	10.80	£355,541	Posts approved at ELT (23 Nov). Ongoing recruitment.	None
11	Expand Existing Services	<b>Senior Supervisor</b> (upgrade 9 to 10)	10	1	£4,470	ELT paper approved on 22 Nov 2021.	None
12	Additional social work resources to support complex assessments	<b>Mental Health Officer</b> Additional Payment (AWI)			£11,810	Paper in process with ELT.	Agree to increase in additional payment

4.3 The total full time equivalent of these new roles is 32.8 at a cost of £1.14m per annum. For each post/group of posts a manager has been assigned to ensure job descriptions are prepared and to support HR to have everything in place for timely recruitment.

4.4 It is proposed that each of the 'new' posts will be recruited on a permanent basis, given the Scottish Government have assured HSCPs that this funding will be recurrent. Further, it is proposed that recruitment to these roles is expedited as the initial tranche of funding has been put in place to alleviate system pressures related to increased winter demand. A similar exercise will be taken forward for the NHS-employed posts (a roughly equal number) within the HSCP to ensure those posts are filled as quickly as possible.

## 5. Legal and Procurement Implications

5.1 The recommendations in this report are consistent with legal requirements.

5.2 There are no procurement implications arising from this report.

## 6. Financial Implications

6.1 The additional cost of £1.14m per annum is being funded from the Scottish Government's winter system pressures fund allocated to all HSCPs.

## 7. Human Resources Implications

7.1 Approval of this report will increase the HSCP staffing establishment by 32.8 FTE posts.

## **8. Risk**

### **8.1 *Risk Implications of Adopting the Recommendations***

8.1.1 There are no risks associated with adopting the recommendations.

### **8.2 *Risk Implications of Rejecting the Recommendations***

8.2.1 There are operational and reputational risks associated any delay in the use of this funding.

## **9. Equalities**

9.1 The proposals in this report are being assessed through the Equality Impact Assessment Scoping process and a full EQIA will go to the February IJB. There are no significant potential positive or negative equality impacts of agreeing the recommendations.

## **10. Sustainable Development Implications**

10.1 ***Considering Strategic Environmental Assessment (SEA)*** - This report does not propose or seek approval for a plan, policy, programme or strategy or document otherwise described which could be considered to constitute a plan, programme, policy or strategy.

## **11. Options Appraisal**

11.1 An options appraisal has not been carried out in relation to the subject matter of this report.

## **12. Link to Council Plan**

12.1 The [South Ayrshire HSCP Winter 2021-22 Investment Plan](#) sets out how the funding relates to the IJB's Strategic Objectives, published in 2021, which are in turn heavily linked to the Council Plan.

## **13. Results of Consultation**

13.1 There has been no public consultation on the contents of this report however the HSCP has engaged with a range of groups including out multi-agency Strategic Planning Advisory Group.

13.2 Consultation has taken place with Councillor Julie Dettbarn, Portfolio Holder for Adults' Health and Social Care, and Councillor Brian McGinley, Portfolio Holder for Resources and Performance, and the contents of this report reflect any feedback provided.

13.3 The wider IJB membership have also been consulted, and the contents of this report reflect any feedback provided.

## **14. Next Steps for Decision Tracking Purposes**

14.1 If the recommendations above are approved by Members, the Director of Health and Social Care will ensure that all necessary steps are taken to ensure full implementation of the decision within the following timescales, with the completion

status reported to the Leadership Panel in the 'Council and Leadership Panel Decision Log' at each of its meetings until such time as the decision is fully implemented:

<b><i>Implementation</i></b>	<b><i>Due date</i></b>	<b><i>Managed by</i></b>
All new posts advertised	31 January 2021	Director of Health and Social Care
Permanency of current temporary posts	28 February 2021	Director of Health and Social Care

**Background Papers**     [South Ayrshire HSCP Winter 2021-22 Investment Plan](#)

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