

Agenda item: 9
Paper no: 5

	Surrey County Council use	CCGs use
Section 151 Finance cleared on:	11/3/22	14/02/22
Legal cleared on	17/03/22	
Executive Director cleared on:	01/03/22	01/03/22
Cabinet Member cleared on:	14/03/22	

Title of Report:	Entering into a staffing partnership agreement to support integrated commissioning in Surrey, and the creation of a Section 75 agreement regarding a pooled budget for jointly funded posts	
Status:	TO APPROVE	
Committee:	Surrey-wide Commissioning Committees in Common	Date: 31/03/2022
Venue:	MS Teams - Virtual	
Presented By:	Simon White, Director of Adult Social Care, Surrey County Council	
Author(s)/ Lead Officer(s):	Louise Inman, Health Integration Policy Lead, Surrey County Council	

Executive Summary:

To improve integration of health and social care services, commissioning partners in the Surrey health and care system are integrating health and social care commissioning teams and establishing other integrated directorates, including creating joint posts and integrated teams, where staff from one organisation have authority to line manage staff from another organisation, and to act as budget holders for partner organisations' budgets. At this point in time Frimley are not intending to designate any of these joint posts as budget holders for any Frimley budgets.

A Partnership Agreement is required to provide a legal framework to underpin these integrated ways of working. The staffing Partnership Agreement described in this paper has been co-developed by Surrey County Council, Surrey Heartlands CCG and Frimley CCG and describes a framework acceptable to all parties.

A Section 75 Agreement is required to provide a legal framework for management of the pooled budget required to fund the joint posts created to support integration of health and care services. The Section 75 Agreement proposed in this paper has been co-developed by Surrey County Council, Surrey Heartlands CCG and Frimley CCG and describes a framework acceptable to all parties. Please note that the section 75 elements may be incorporated into the body of the Partnership Agreement.

Governance:

Conflict of Interest:	None identified	✓
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<p>Previous Reporting: (relevant committees/ forums this paper has previously been presented to)</p>	<p>Committee name: Surrey Strategic Health and Care Commissioning Collaborative Meeting date: 11th March 2022 Outcome: The Collaborative approved the recommendations of the paper and indicated that they would be happy for the agreement to be signed by Officers without coming back to Committees in Common, assuming that a) the final agreement reflects the heads of terms outlined in this paper and b) that the financial amounts to be included within the Section 75 pooled budget arrangements are within a 5% margin of the financial values proposed in this paper.</p> <p>Committee name: ICS Executive Meeting date: Feb 2022 Outcome: approved</p>	
<p>Freedom of Information:</p>	<p>Open – no exemption applies. Part I paper suitable for publication.</p>	<p>✓</p>

Decision Applicable to:

<p>Decision applicable to the following partners of the Committees in Common:</p>	<p>NHS Frimley CCG</p>	<p>✓</p>
	<p>NHS Surrey Heartlands CCG</p>	<p>✓</p>
	<p>Surrey County Council</p>	<p>✓</p>

Recommendation(s):

The Surrey-Wide Commissioning Committees are asked to:

1. note the proposed contents of the staffing Partnership Agreement and the Section 75 Agreement (which may be incorporated into one Agreement); and
2. note that the proposed agreement will need to be supported by a Collaborative Commissioning MoU setting out host and lead commissioning arrangements between the three partners.
3. approve entering into a Partnership Agreement and a Section 75 Agreement (which may be incorporated into one Agreement) to provide a legal and financial framework to underpin the joint working of integrated commissioning teams.

Reason for recommendation(s):

Surrey Heartlands Health and Care Partnership, Surrey County Council and Frimley CCG/ICS are committed to partnership working to improve health and care outcomes for Surrey’s residents. As part of its new operating model, Surrey Heartlands CCG/ICS executive has created integrated and joint roles, directorates and teams. There are several posts that are jointly employed by the three organisations. The Partnership Agreement and Section 75 are required to provide a

legal framework to formalise the new working arrangements for these new team structures and roles.

Next Steps

1. For the draft text of the Partnership Agreement and Section 75 (which may be incorporated into one Agreement) to be reviewed by CCG legal teams before being agreed by each partner prior to signature (completion end of May 2022)
2. For the three partners to draft and develop a Commissioning Collaborative MoU setting out host and lead commissioning arrangements between the three partners.

1.1 Introduction

1.2 Surrey Heartlands Health and Care Partnership, Surrey County Council and Frimley CCG/ICS¹ are committed to partnership working to improve health and care outcomes for Surrey's residents. As part of its new operating model, Surrey Heartlands CCG/ICS executive has created integrated directorates. Two Joint Executive Director posts now oversee the management of teams comprising staff employed by Surrey Heartlands CCG/ICS and Surrey County Council. An integrated commissioning team for Children's services brings staff from both organisations under a single director for children's commissioning under the Executive Director for Children, Families and Lifelong Learning. The three partners have also employed three system conveners to operate across the Surrey footprint. As the partnership evolves, more joint posts and integrated teams may be established. Some of the posts within these teams are jointly funded by some or all partners.

1.3 Definitions:

- A joint post: a post where Staff will undertake functions and responsibilities on behalf of a partner organisation (i.e., recruitment, hiring, line management)
- An integrated team: a team comprising Staff employed by more than one organisation
- An integrated directorate: a directorate comprising Staff employed by more than one organisation
- A jointly funded post: a staff role funded by two or more partner organisations.

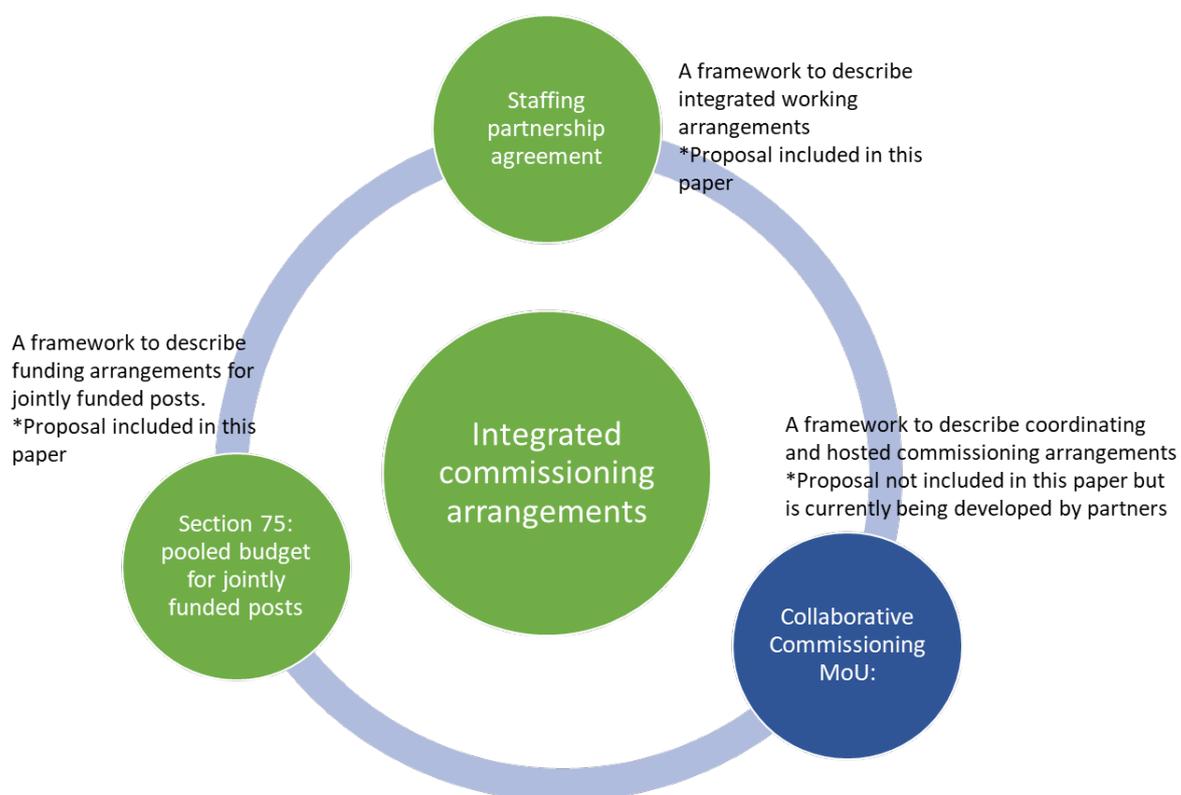
1.4 Three elements are required to underpin integrated commissioning arrangements at this stage:

¹ Although both Frimley CCG and Surrey Heartlands CCG are operating in shadow form as Integrated Care Systems, until the Health and Care Bill has become law, Clinical Commissioning Groups are the legal entity responsible for making decisions on behalf of the local NHS. Employment contracts are currently between CCGs and their staff. This paper therefore refers to CCG/ICS to reflect this transition state.

- 1.4.1 A Partnership Agreement to describe integrated working arrangements for joint posts within the partnership.
- 1.4.2 A section 75 pooled budget for jointly funded posts.
- 1.4.3 A memorandum of understanding to provide a framework for commissioning arrangements across the partnership.

1.5 These are described in more detail below.

Figure 1: The three elements of proposed integrated commissioning arrangements



1.6 Purpose of the staffing partnership agreement

- 1.7 These integrated teams and joint posts require a legal framework to underpin these integrated ways of working so that staff employed by one organisation have the legal authority to conduct their work on behalf of partner organisations. A Partnership Agreement is the preferred mechanism for creating this legal framework. This Agreement is not intended to change the respective accountability or statutory responsibilities of each partner and it does not cover arrangements through which Partners will commission services on behalf of each other. The purpose of this staffing Partnership Agreement is therefore solely to

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create a framework within which integrated teams and joint posts can operate without the need for individual secondment agreements. The agreement will cover all staff in joint posts and partners will not need to produce separate agreements such as secondment agreements for them.

1.8 Purpose of the Section 75

Some (but not all) of the joint posts are jointly funded posts. The creation of joint posts incurs financial and non-financial costs to partners in the form of staff salaries and on-costs. A Section 75 agreement is required but please note that the Section 75 elements may be incorporated into the Partnership Agreement. The purpose of the Section 75 is to provide a legal framework for the management of a pooled budget to fund costs associated with jointly funded posts. The budget amount to cover these staff costs is detailed in table 1, below.

Surrey County Council	NHS Surrey Heartlands CCG	NHS Frimley CCG	Total
£857,027	£900,624	£44,900	£1,802,552

Table 1: Value of the pooled budget for shared funded post.

1.9 Collaborative commissioning arrangements

1.10 Many of the integrated teams, joint posts and jointly funded roles will be supporting Surrey County Council, Surrey Heartlands CCG/ICS and Frimley CCG/ICS to commission collaboratively. Collaborative commissioning arrangements do not fall within the scope of either the staffing Partnership Agreement or its associated Section 75. A legal arrangement is required in order for staff who hold commissioning responsibilities within their job descriptions to be able to operate effectively across the Surrey footprint to ensure high quality, consistent services with best patient outcomes for all Surrey's residents. A separate memorandum of understanding (MoU) is being developed which will provide a framework for establishing a range of coordinating and hosted commissioning arrangements around key contracts and service areas, including those that fall within the scope of these integrated commissioning teams. This MoU is being developed with reference to this staffing Partnership Agreement and Section 75 but is not considered within this paper.

1.11 Heads of Terms for the Staffing Partnership Agreement

1.12 The staffing Partnership Agreement will document the following:

1.13 Agreed HR arrangements:

- 1.13.1 an agreement by the partners to each place staff at the disposal of the other²;
 - 1.13.2 that the terms and conditions of the contractual employer will apply. Staff will be employed by one partner organisation and will be subject to the terms and conditions set out in their contract of employment.
 - 1.13.3 that there will be joint posts that will have responsibilities in partner organisations.
 - 1.13.4 that partners can delegate responsibilities to staff employed by another partner organisation for posts identified and agreed as joint.
 - 1.13.5 processes to identify, assess and approve requests to:
 - 1.13.6 create a new post with joint responsibilities across partners
 - 1.13.7 to change a post to have joint responsibilities across partners
 - 1.13.8 to create a new post with shared funding arrangements across partners
 - 1.13.9 to change the host organisation [and funding] of a joint post
 - 1.13.10 to authorise additional expenditure for a joint post
 - 1.13.11 principles for the management of staff in integrated teams, including joint posts
- 1.14 Agreed arrangements for accommodation and provision of facilities:**
- 1.14.1 arrangements to ensure access to work in specified and agreed partner building locations
- 1.15 Agreed IT and digital provision**
- 1.15.1 a set of principles for the provision of IT required to operate as a joint post or within an integrated team
 - 1.15.2 arrangements to access relevant partner applications and systems and ensure acceptable use.
- 1.16 Agreed data confidentiality arrangements**

² The legal framework for local government to operate in partnership with NHS bodies is Section 113 of the Local Government Act, which permits a local authority to enter into an agreement with the CCG to 'place staff at the disposal' of these partners. Section 75 of the National Health Service Act 2006 contains powers enabling NHS bodies (as defined in section 275 of the NHS Act 2006) to exercise certain local authority functions and for local authorities to exercise various NHS functions. Section 75(2)(d) allows CCGs to put their staff at the disposal of the Council.

- 1.16.1 each organisation will comply with their obligations under data protection legislation and assist partners to comply with their obligations.
- 1.16.2 ISAs to enable access to and sharing of confidential business data and staff/personal data and commit to use of data in compliance with these ISAs.

1.17 Freedom of information (FOI) and environmental information regulations (EIR)

- 1.17.1 An agreed FOI/EIR process

1.18 Complaints

- 1.18.1 Individual organisations complaints procedures shall apply, and partners agree to assist one another in the management of complaints arising from this Agreement or as a result of integrated commissioning for health and social care services. Partners will keep a record of all complaints and provide these for review by Committees in Common, as the body responsible for oversight of this Agreement.

1.19 Funding arrangements

- 1.19.1 Many (but not all) joint posts will have shared funding arrangements. Shared funding arrangements for joint posts will be governed by a Section 75 Agreement (which may be incorporated into the Partnership Agreement) between the three partners. Whether a post is to be jointly funded or not will be decided on a case-by-case basis.
- 1.19.2 Each partner shall provide the non-financial contributions as required to comply with its obligations under the Partnership Agreement in respect of joint working. These contributions shall be provided at no charge to the other partner. Non-financial contributions include, but are not limited to:
- IT Support
 - Premises
 - HR support, including advisory support for Managers to undertake formal HR employee relations processes and access to OD and strategic HR input via a senior member of the respective HR teams.
- 1.19.3 Where costs are incurred in order for staff to fulfil their duties and comply with the obligations proposed in the Partnership Agreement, they will be resolved collaboratively, enabling the views of all affected partners to be considered.

1.20 Agreed financial arrangements for joint posts and integrated working

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- 1.21 a set of financial principles, including that partners will:
- 1.21.1 maintain separate budgets and manage their respective budgets, funding and expenditure, unless specific arrangements are made;
 - 1.21.2 gain appropriate internal approval to allow financial authority to be delegated to Staff that are not employed by their organisation.
 - 1.21.3 Manage budgets in line with internal governance processes, and in line with schemes of delegation and collaborative arrangements where they exist.
 - 1.21.4 Manage conflicts of interest when making decisions affecting partners and, where possible, avoid creating cost pressures for partners or third parties to the gain of another, unless by specific agreement made separate to this Partnership Agreement.
 - 1.21.5 Work together to develop joint financial reporting based on an open book approach, so that post holders with budgetary responsibilities across partner organisations can see a consolidated summary of their combined budget positions and provide clarity on the financial position for each key budget area in each organisation.

1.22 Term of the agreement

- 1.22.1 The proposed term of Agreement is three years, with each partner required to give at least six months' notice to terminate. The requirement to draft and agree an Exit Plan will also be included in the Agreement.

1.23 Dispute resolution

- 1.23.1 The expectation is that the partners will seek to operate the agreement through consensus and resolve issues locally. Matters that cannot be resolved by executive leadership will be referred to the Committees in Common. The Agreement will set out a process for dispute resolution.

1.24 Insurance

- 1.24.1 The Agreement will contain appropriate levels of insurance.

1.25 Liabilities and indemnity

- 1.25.1 The Agreement will include liability and indemnity clauses to reflect what has been agreed by the partners.

1.26 Standards of Conduct and Service

- 1.26.1 The Agreement will set out expectations of partners in relation to corporate governance, including clinical governance.

1.27 Governance

- 1.27.1 Committees in Common (CiC) holds responsibility for making health and care commissioning decisions for Surrey residents and therefore is proposed as the Committee responsible for oversight of the Partnership Agreement. If there is an issue with the agreement or its implementation, partners will contact the secretariat of CiC. Issues will be raised with CiC for review, discussion and resolution, or delegated to an appropriate forum.
- 1.27.2 The Health and Wellbeing Board will be updated regularly on the operation of the partnership agreement and any recommendations for amendments or changes.
- 1.27.3 The Adults and Health Select Committee and Children, Families and Lifelong Learning Select Committee have scrutiny responsibilities for all decisions taken by Committees in Common. Both committees will be updated regularly on the progress of arrangements.

1.28 Review/monitoring and reporting

- 1.28.1 The agreement will set out expectations for reporting against this agreement, including an annual report about its implementation to be provided to Committees in Common.

1.29 Schedules within the staffing Partnership Agreement.

- 1.30 Specific schedules will set out the detail of the processes and protocols agreed in the Partnership Agreement. These schedules can be amended, if necessary, by agreement of the partners. The schedules to be included within this Agreement are:
 - 1.30.1 The governance arrangements for management of integrated teams and joint posts.
 - 1.30.2 Details of the shared financial principles and processes as required.
 - 1.30.3 A list of the service areas to be covered by joint arrangements
 - 1.30.4 A list of joint posts that, once the Agreement has been signed by all parties, will have responsibilities in partner organisations. These joint responsibilities could be joint strategic/professional responsibilities, joint line management responsibilities or joint financial management responsibilities.
 - 1.30.5 Details of the staff management protocol
 - 1.30.6 A list of jointly funded posts and shared funding arrangements
 - 1.30.7 Details of agreed IT principles

1.31 Heads of Terms for the Section 75 Agreement

1.32 The Section 75 Agreement will document the following but as mentioned above, may be incorporated into the Partnership Agreement:

1.33 The purpose of the Agreement

1.33.1 The purpose of the Agreement is to set out the terms and principles on which the partners have agreed to pool budgets for staffing costs associated with joint staffing arrangements. It is not a means by which partners will hold funds centrally.

1.34 Aims of the Agreement

1.35 The aims of partners entering into the agreement are to:

1.35.1 Share the funding of costs for posts that have joint staffing arrangements

1.35.2 Make decisions regarding shared costs in an efficient manner.

1.36 Term of the Agreement

1.37 The intention is to backdate the start of the Agreement to April 2021, in order to include costs incurred since then. It is proposed that the length of the term is aligned with that of the Partnership Agreement.

1.38 Scope of the Agreement

1.39 The scope of the Agreement is solely to cover staffing costs for posts with shared funding.

1.40 Pooled budget management

1.41 The Section 75 will set out how the pooled budget is to be managed, including the proposal that Surrey County Council host the budget, and arrangements for management of the budget, including processes and mechanisms for managing:

1.41.1 Financial and non-financial contributions

1.41.2 Risk-sharing arrangements

1.41.3 Processes for managing underspends and overspends

1.41.4 Processes for billing and payments

1.41.5 Processes for complaints, dispute resolution etc (aligned with the Partnership Agreement)

1.42 Governance of these arrangements

- 1.43 Tripartite governance of these arrangements sits with Committees in Common, supported by the Surrey Strategic Health and Care Commissioning Collaborative. The Collaborative provides a forum for senior leadership to come together to discuss matters pertaining to Surrey-wide integrated working.

1.44 Next steps

- 1.45 Once the teams working on the draft Agreements (which may be incorporated into one Agreement) have finalised the text in line with the proposals outlined in this paper, this will need to be agreed by legal representatives of the three partners prior to signature. Once finalised, the Partnership Agreement will need to be approved by the Surrey Heartlands CCG/ICS executive before it is presented to Committees in Common. Other partners may also wish to request additional governance.

2. Consultation:

- 2.1 Consultation with affected staff has taken place where required as part of the establishment of the new working arrangements.

3. Risk Management and Implications:

- 3.1 The main risks associated with the proposals of this paper are those arising either a) as a result of entering into a partnership agreement and an associated Section 75 pooled budget arrangement (which may be incorporated into one Agreement) or b) as a result of *not* entering into the Agreement(s) as recommended.
- 3.2 These risks are described below, including any significant risks, any negative implications and the mitigating actions being taken to address them.
- 3.3 Risks arising as a result of entering into a Partnership Agreement and an associated Section 75 pooled budget arrangement arise from the commitment that each partner will make to adhere to an agreed set of processes and ways of working. As mentioned above, the Section 75 elements may be incorporated into the Partnership Agreement.
- 3.4 For example, by entering into the Partnership Agreement, partners agree to follow certain HR processes to support the recruitment and management of Staff in joint posts, integrated directorates and teams. There is a risk that where a process is unfamiliar to a Partner organisation's HR team, Staff are not properly supported in accordance with the processes as set out in the Agreement and associated schedules. This could expose an organisation to risk where issues of grievance or performance are taken to external tribunals.
- 3.5 Similarly, the Agreement commits partners to following a set of processes with regards to compliance with organisational data security policies, including a

commitment that each organisation will assist partners to comply with their obligations.

3.6 Finally, the Partnership Agreement exposes partners to the operational risks of joint working, in that the Agreement is predicated on an understanding that all Partners will commit sufficient resource to support effective working of the joint posts, integrated directorates and teams.

3.7 For all these risks, the mitigating actions are similar:

3.7.1 The protocols and processes described in the Partnership Agreement and Section 75 have been jointly developed by the relevant teams within the Partner organisations and have been agreed as acceptable to all parties.

3.7.2 Training and guidance will be provided to all staff supporting joint posts, integrated directorates and teams to ensure that all are aware of the agreed processes and protocols.

3.7.3 Regular monitoring and reporting on the implementation of the agreement to this Committee, to identify and address any issues as they arise.

3.7.4 Appropriate and agreed liability and indemnity clauses will be included in the legal Agreement(s) to cover all parties.

3.8 The risks associated with *not* entering into the Agreement(s) as recommended fall within the same categories as described above, with significant risks in the following categories:

3.8.1 HR

- Without a Partnership Agreement, staff will not be able to recruit or manage staff from a separate organisation, and the partners will not be able to fully realise their ambitions of more integrated working.
- The two Joint Executive Directors recently appointed by Surrey Heartlands CCG and Surrey County Council will not be able to oversee integrated directorates as intended.

3.8.2 IT&IG

- Without a Partnership Agreement, staff will not have formally agreed processes to support the provision of essential IT equipment for joint posts and staff in integrated teams and directorates to be able to perform their assigned duties.

3.8.3 Finance

- Without agreement of the financial principles as described in the Partnership Agreement, and the various mechanisms for management of the pooled budget as described in the Section 75 arrangements, partners will not be able to manage the shared funding of posts as agreed.

3.9 The Partnership Agreement is intended to mitigate against the key risks associated with joint working outside of any formal arrangements. It is therefore recommended that the Committee approve the decision to enter into the arrangements as proposed.

4. Financial and ‘Value For Money’ Implications

4.1 The Partnership Agreement facilitates integrated commissioning of health & social care services, including management of services budgets across partner organisations by post holders with joint responsibilities. It does not have any direct financial implications on the service budgets of each partner organisation, although it is expected that improved joint working will deliver some efficiencies across the system. It is too early to be able to quantify the potential benefits at this stage.

4.2 The Section 75 pooled budget for joint posts will involve partners committing to funding posts across Surrey’s health & social care system on an ongoing basis. In most cases, the cost of these posts is already built into each organisation’s budget based on their agreed funding share. However, the creation of the pooled budget will formalise the joint funding of these posts on an ongoing basis until such time as partners agree to change the arrangements for a post in line with the agreed processes.

5. Section 151 Officer Commentary

5.1 Although significant progress has been made to improve the Council’s financial position, the medium term financial outlook beyond 2022/23 remains uncertain. With no clarity on central government funding in the medium term, our working assumption is that financial resources will continue to be constrained, as they have been for the majority of the past decade. This places an onus on the Council to continue to consider issues of financial sustainability as a priority in order to ensure stable provision of services in the medium term.

5.2 In this context the Section 151 Officer recognises how the Partnership Agreement and Collaborative Commissioning MoU will enable the Council to work more effectively with its health partners in making sound joint commissioning decisions to ensure the combined and limited resources across the whole health and social care system are invested to maximise value for money in service provision. Further consideration and approval will be required should it be proposed that

commissioning budgets are pooled or integrated in some from across partners as these joint commissioning arrangements develop.

- 5.3 The Section 75 Agreement to create a pooled budget for jointly funded posts will provide clarity in funding arrangements for joint posts where funding is shared across partners and establish a clear mechanism for accounting for costs across partners. The Council's funding shares for each post will factored into its Medium Term Financial Strategy.
- 5.4 It is noted that Legal Services may incorporate the Section 75 elements into the Partnership Agreement.

6. Legal Implications – Monitoring Officer

- 6.1 Subject to the requirement to consult in respect of Section 113 (1A)(a) of the Local Government Act 1972, the Council can enter into an agreement with CCGs (a) for the placing at the disposal of CCGs for the purposes of their functions, on such terms as may be provided by the agreement, of the services of officers employed by the local authority (b) for the placing at the disposal of the local authority for the purposes of their functions, on such terms as may be provided by the agreement, of the services of officers employed by CCGs.
- 6.2 Section 75 of the National Health Service Act 2006 contains powers enabling NHS bodies (as defined in section 275 of the NHS Act 2006) to exercise certain local authority functions and for local authorities to exercise various NHS functions. Section 75(2)(d) allows CCGs to put their staff at the disposal of the Council. The partners will be entering into the Partnership Agreement in exercise of those powers under and pursuant to the NHS Regulations 2000.
- 6.3 Legal Services have amended the draft Partnership Agreement and will consider the draft Section 75 Agreement. Legal Services may also incorporate the Section 75 elements into the draft Partnership Agreement.
- 6.4 Legal Services will arrangement to have the legal documentation/Agreement(s) executed by the parties.
- 6.5 Legal Services will provide such help and assistance as is required and will advise on any issues as and when they arise.

7. Equalities and Diversity

- 7.1 This work is expected to contribute to more aligned efforts to address health inequalities. There are no expected impacts on any specific group with protected characteristics.

8. Other Implications:

8.1 The potential implications for the following priorities and policy areas have been considered. Where the impact is potentially significant a summary of the issues is set out in detail below.

8.2 Corporate Parenting/ Looked After Children Implications

8.2.1 The aim of the staffing partnership agreement and associated section 75 pooled budget is to facilitate improved partnership working between Surrey County Council and its health partners. Our ambition is that this improved partnership working leads to improved joint planning and more joined up provision of placements for Surrey's Looked After Children, in particular where those placements have tripartite funding arrangements to meet a child's health, education and care needs.

8.2.2 We anticipate that improved joint planning and joint provision will lead to benefits for individual children by helping ensure sufficiency of provision for Looked After Children. The Staffing Partnership Agreement should enable commissioners to work more closely in partnership to ensure that where Looked After Children are placed in County, that there is sufficient and appropriate provision of health services wrapped around care home or foster care provision.

8.2.3 The staffing partnership agreement and associated section 75 pooled budget arrangements do not change or affect any individual partner's statutory responsibilities to corporate parenting and looked after children.

8.3 Safeguarding Responsibilities for Vulnerable Children and Adults Implications

8.3.1 The Staffing Partnership Agreement is underpinned by individual data sharing agreements to support the joint working of integrated teams. We anticipate that integrated structures will result in improved information sharing, for example clearer escalation routes where there are safeguarding concerns.

8.3.2 We anticipate that improved joint working will lead to a more holistic overview of safeguarding risks through more joint oversight of service provision.

8.3.3 We anticipate that improved joint planning will reduce the risk of safeguarding issues.

8.3.4 The staffing partnership agreement and associated section 75 pooled budget arrangements do not change or affect any individual partner's statutory safeguarding responsibilities for vulnerable children or adults.

8.4 Environmental Sustainability Implications

- 8.4.1 An Environmental Sustainability Assessment is not required for this decision.
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Consulted:

The proposals outlined in this paper have been discussed with stakeholders in Surrey Heartlands ICS and Frimley ICS, the Chair and Vice-Chairs of the Adults and Health Select Committee and the Chair and Vice-Chairs of the Children, Families, Lifelong Learning and Culture Select Committee.

Annexes:

No annexes have been attached to this report.

Sources/background papers:

No background papers have been attached to this report.

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