

# **Summary Target Operating Model**

**National Care Service**



# INTRODUCTION

## Overview

This document provides:

- i. Summary Target Operating Model (TOM),
- ii. A high level visual of the relationships and accountability in the planned new system,
- iii. Initial view of functions of the new system,
- iv. A visual illustrating the envisaged scope of the new system

## Context

The accompanying visuals provide a high-level view of the planned system as it is known now. This will be built on and refined further in line with the commitment to co-design.

# DRAFT SUMMARY TOM



**Service Delivery Model:** The future system will include a National Care Service Board which will provide effective national oversight and governance of social work, social care support and community health services. [Redacted] will retain [Redacted] for delivery of services, assets and staff. [Redacted]. [Redacted].



**Process:** The NCS Board will bring coherence and collective focus to strategic planning and delivery; monitor system performance to ensure consistent, fair, human rights based social care support and community health services; improve transparency of delivery and outcomes; ensure that data is improved to support these aims; improve collective learning and [Redacted] a process of escalation and intervention where required.



**Digital and Technology:** The future system will seek to improve digital tools and technology to support new ways of working. This will include mechanisms to better share information, and digital and non-digital ways for people to interact with services and find information, to help improve outcomes.



**People:** The future system will include people with lived and living experience in decisions. It will better recognise the value of unpaid carers and those within the different professions that support people and make it easier for them to provide high quality care and support.



**Performance and Data:** The National Care Service Board will scrutinise planning and performance, with strengthened powers to require evidence and documentation, and a progressive support and improvement framework.



**Governance and Legislation:** The future system will have a clearer set of accountabilities. It will be simpler with fewer variations in how services operate across Scotland, with a greater role and voice for those using and providing care. Reformed IJBs would be accountable to the National Care Service Board.



**Finance:** The future system will have a clearer funding model with greater transparency of spending. Scottish Ministers will, in agreed circumstances, be able to fund specific activities carried out by local partners directly should they wish to do so. [Redacted].

# RELATIONSHIPS AND ACCOUNTABILITIES TO THE NCS BOARD



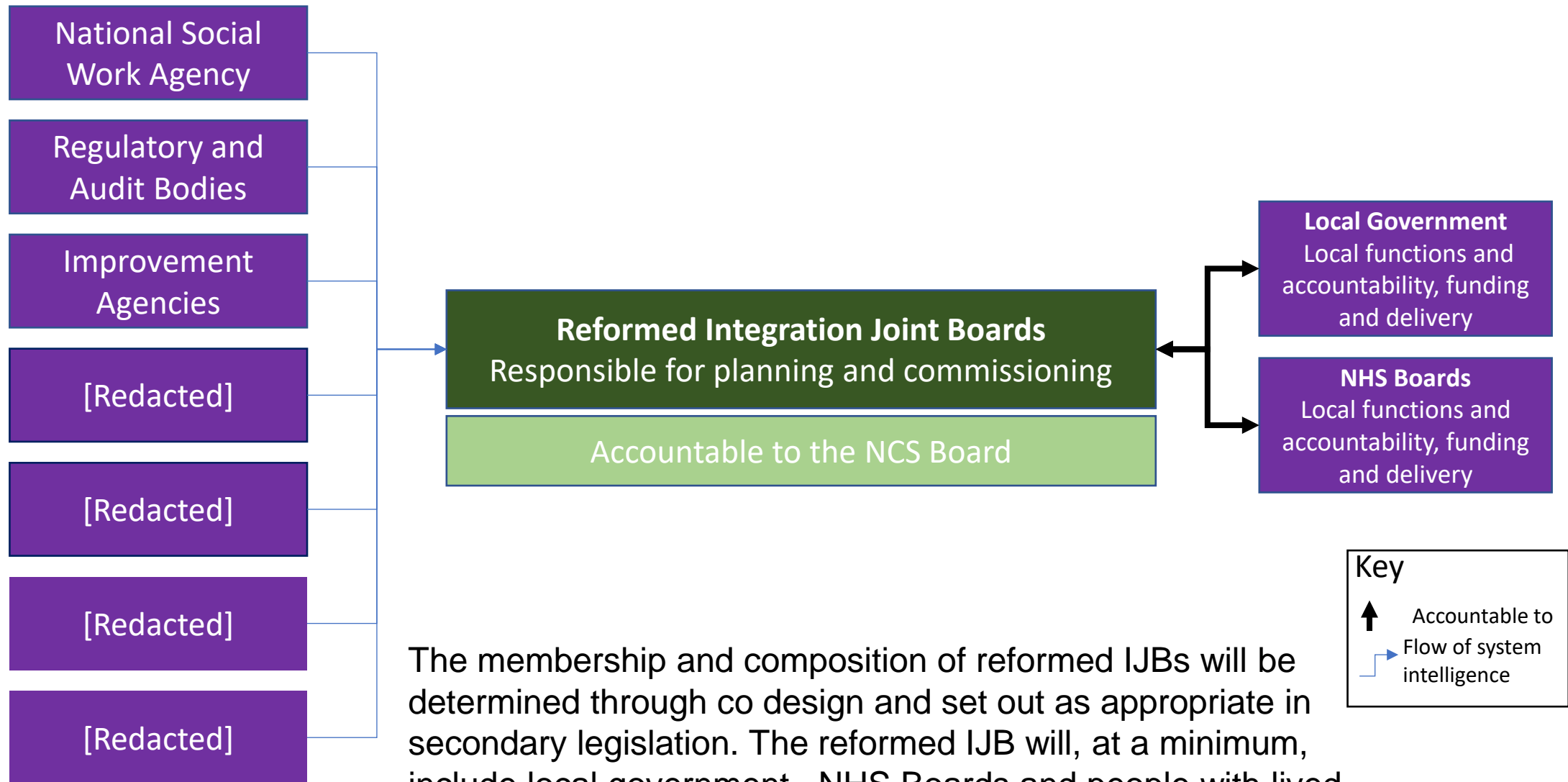
The membership and composition of the NCS Board and reformed IJBs will be determined through co design. The National Board will, at a minimum, include an Independent Chair, [Redacted] from Scottish Ministers, local government and NHS Boards and people with lived experience. The full membership of the National Board will be co-designed.

# NATIONAL CARE SERVICE BOARD FUNCTIONS

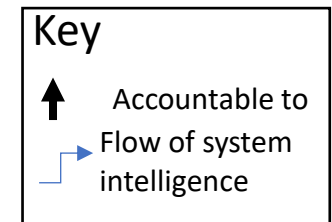
NCS Board [Redacted]					
[Redacted]	National Commissioning for specific support and services by agreement	Development and oversight of Standards, Guidance & Operating Frameworks	[Redacted] Support for improvement, good practice, innovation [Redacted]	Ensure meaningful participation by people with lived experience in decision making	Ongoing Co-design with people who use, and work in, support and services
[Redacted] & seek assurance of Local Strategic and Delivery Plans [Redacted]	Ethical Commissioning Framework	Maintaining and implementing Support an Improvement Framework	Powers of Intervention & Provision of Improvement Support, where standards are not being met	Visibility of Data, [Redacted] & Data Sharing	[Redacted]
[Redacted] direct funding [Redacted], in specific agreed circumstances	National approach to workforce planning, development, collective voice and Fair Work	Monitoring & Reporting System Performance	Provide other delivery support to local areas	[Redacted]	[Redacted]

- National Board functions and operations will continue to be defined in more detail through co-design.

# RELATIONSHIPS & ACCOUNTABILITIES FOR REFORMED IJBS



The membership and composition of reformed IJBs will be determined through co design and set out as appropriate in secondary legislation. The reformed IJB will, at a minimum, include local government, NHS Boards and people with lived experience. Further work is underway with local government and the NHS to consider chairing arrangements at local level.



# REFORMED IJB FUNCTIONS

- Key:**
- Existing function
  - Reformed function
  - New function

## Reformed Integration Joint Boards

Finance	Workforce (Strategic Planning via LA, HBs through HSCP arrangements)	Implementation and oversight of delivery of National Standards and guidance	Data Reporting and Performance Monitoring	Locality arrangements	Administration	Lived Experience Representation
Assets (Strategic Planning via LA, HBs through HSCP arrangements)	Area resilience/delivery assurance	Accountability to National Board and Support & Escalation Framework	Service/Support planning, design, provision, supply and logistics	Emergency Interventions	Market Insights and response	Governance Arrangements
Complaints & Advocacy	Local Strategic Planning and ethical commissioning	Implementation of operating frameworks	Technology, Digital Development and Information Sharing	Local workforce planning, training & Support	Improvement, best practice and innovation	Funding Flows

Ongoing Co-design with people who use, and work in, support and services

Local reform, and the way in which reformed IJBs will carry out these functions, will continue to be defined in more detail through co-design and set out as appropriate in secondary legislation.

# SCOPE OF SERVICES WITHIN FUTURE STATE NCS



<b>Adult Social Care</b>
<b>Social Work</b>
<b>Community Health</b>
<b>Children's Services</b>
<b>Justice Services</b>
<b>Addiction Services</b>
<b>Population Health</b>
<b>[Redacted]</b>

The NCS will include all adult social work and social care services, as well as community health provision. We are working with COSLA to consider how the benefits of the NCS can apply to children's services and justice services.

- There will be no backtracking on achievements accomplished by the 2014 Act in terms of integration. Reform should build on what has already been achieved. There should be a presumption in favour of integration where there is inconsistency, in recognition of its benefits in providing greater continuity of care.
- There should be no disintegration based on the 2014 Act unless there is evidence to suggest this would be advantageous i.e.. In particular local government and community health services which are currently delegated should remain so unless there is a clear rationale for change.
- We will work with local government and with people with lived experience to develop a more detailed understanding on the arrangements for specific services such as mental health, and drugs and alcohol services.
- Public and Population health should have a clear role in the planning and delivery of community health and social care support services.
- Given the very variable delegation arrangements currently in place for social work children's services and community justice and community health services, we continue to work with local government and the NHS to seek agreement on arrangements to achieve improvement, including access to timely, consistent, equitable and fair, high-quality health and care support.
- In time, we expect that support and services will be co-designed locally with statutory bodies, providers and people to ensure that local needs are understood and met.