

APPOINTMENTS COMMITTEE

MINUTES of a meeting of the Appointments Committee held on Monday 14 September 2020 (virtually).

PRESENT:

Cllr Iain Dobie	Cllr Carole Allaway Martin
Cllr Tim Harman	Cllr Kathy Williams
Cllr Mark Hawthorne MBE	Cllr Lesley Williams MBE

Officers in attendance: Peter Bungard and Mandy Quayle

1. APOLOGIES FOR ABSENCE

Apologies were received from Cllrs Nigel Moor, Richard Boyles and Paul Hodgkinson.

The following members were present as substitutes: Cllrs Tim Harman, Carole Allaway-Martin and Iain Dobie.

2. MINUTES

The minutes of the previous meeting held on 6 March 2020 were approved as a correct record.

3. PUBLIC QUESTIONS

No public questions were received.

4. MEMBERS' QUESTIONS

No members questions were received.

5. EXECUTIVE DIRECTOR OF ADULT SOCIAL CARE AND PUBLIC HEALTH

5.1 The Chair invited Mandy Quayle, Director of Digital and People Services, to present the report to the Committee, with comment from Peter Bungard, Chief Executive and Head of Paid Service.

5.2 The report was taken as read but Members noted the following points:

- The current Director of Social Care (DASS) is due to retire in spring 2021 and officers were aware from research that this was a particularly challenging role to recruit to, as was Public Health.
- There had been a significant amount of change already within the top team at the Council and there was a current senior officer with significant potential who GCC were at risk of losing.

- There are currently strong, operational deputy directors in both Adult Social Care and Public Health.
 - The LGA Peer Challenge of the Council in 2018 had highlighted a need to improve GCC's operating model, e.g. the top structure and this proposal would help to do that.
 - There was a significant overlap in job roles, as a number of meetings were currently being attended by both DASS and Director of Public Health (DPH), as they were looking after an overlapping client group of vulnerable people.
 - Having reviewed a number of factors, it was concluded that the most reasonable and positive way forward was to recruit to the position of Executive Director of Adult Social Care and Public Health which would replace the current arrangement of a DASS and DPH.
 - It was viewed that this would balance the likelihood of being able to recruit externally with retaining internal stability.
- 5.3 Referencing the point made about the current deputy directors, a Member questioned whether there was a chance one of them would apply if the director position was advertised for. It was advised that they were both relatively recent appointments and were still growing into their own roles.
- 5.4 It was queried whether this was a pattern replicated in other local authorities or whether Gloucestershire would be a pioneer of the combined post. Officers had found 1 or 2 examples but confirmed it was a relatively unusual situation. It was pointed out however, that it was common for the DPH position to sit under one of the main directors and given the current pandemic, having the DPH post essentially at a deputy level, would not be a desirable model going forward.
- 5.5 Questioning the point on a national shortage of both director positions in the current market, it was accepted that it would never be guaranteed that GCC would be unable to recruit to the current position, but issues like this would always be a balance of choice for the organisation. Given the information received during research, it was accepted that there was a shortage of skilled directors in these areas and therefore the balance of choice weighed in favour of maintaining internal stability.
- 5.6 A member questioned whether there was any particular criteria/legislation the DASS position had to comply with. It was advised that the position has statutory obligations to carry out but there were no legislative requirements on the skills/experience of the candidate.
- 5.7 A member expressed disapproval of the recommendation, urging that it appeared to downgrade the importance of the DPH which, in their view, should be a standalone position, particularly considering the current pandemic and the workload it had produced.
- 5.8 Members noted that the recommendation was not being made to make a saving to the Council but instead, it was a risk assessed route forward to

help improve the Council's structure. There was a small saving referenced in the report but this was only there to give the Committee a full picture, rather than a driving factor. There was also an ongoing conversation about reinvesting this saving into GCC's public health department.

- 5.9 It was stressed that officers feel they have given public health the recognition it deserves, including the decision very recently to recruit a deputy director.
- 5.10 The Cabinet Member for Public Health expressed their support for the recommended approach, confirming during their time as Cabinet Member, they had noticed the significant overlap in the current roles and felt it would strengthen the function of public health rather than weaken it.
- 5.11 It was confirmed that the new proposed role would be on a RB9 grade which is the same as the other four Executive Directors, the top of which is £140,000 per year.
- 5.12 A member asked whether all the functions of both director roles would be retained into the one new post, or whether some of the functions would be devolved, potentially to the current deputy directors. It was noted the reason for this query was a concern that the new post would be overwhelmed with responsibility, or if the functions were devolved, would there be a possibility of the saving being reinvested into the teams to support the additional workload.
- 5.13 The Committee heard that the deputy director role in the public health team was a new appointment, so the role was already paid to 'act up' to DPH when appropriate. The money saved by the proposed combined post was suggested to reinvest in the public health team to allow extra capacity to deal with the pandemic and future response, rather than revisiting the pay grading structure for individual officers.
- 5.14 The Chair accepted that it was a fair challenge for officers to take away as to whether the additional capacity caused by the pandemic on the DPH would be reflected at some point via a change in the grading structure.
- 5.15 A member reiterated their serious concern of combining two very large job roles, viewing the move as risky, which was further heightened by not 'testing the waters' as to whether the current structure could be maintained through recruitment of a new DASS.
- 5.16 The Chair challenged this concern with a view that instead of having an Executive DASS with a DPH at a deputy role underneath, what this proposal did was elevate the DPH post to a strategic, executive post with the additional capacity of deputy directors underneath. They viewed this as an enhancement of the current structure rather than a risk.

Minutes subject to their acceptance as a correct record at the next meeting

- 5.17 It was confirmed that prior to this proposal, feedback was invited from all current, relevant directors and this proposal had been supported by the current DPH and DASS.
- 5.18 The Cabinet Member for Adult Social Care Commissioning expressed their full support for this proposal. They had seen how closely the current DPH and DASS have worked during this pandemic and that there was a significant amount of common ground in their roles. They see a significant risk in losing the current DPH if there isn't progression available within the organisation and this new role could be a vision for other local authorities in the future.
- 5.19 **The Committee resolved to approve the recommendations in the report.**

CHAIR

Meeting concluded at 14:30.