

Integration Joint Board

Item 12

Date of Meeting: 29th January 2020

Title of Report: Transformation Programme Board Report

Presented by: Stephen Whiston

The Board is asked to:

- Note the update on the programme progress

1. EXECUTIVE SUMMARY

- 1.1 This report provides the IJB with an update on what progress has been made on the programmes following the paper presented to the IJB on the 25 September 2019.
- 1.2 The Board agreed the range of recommendation and actions outlined in the September report which identified that the following work streams were to be paused and or reviewed / informed once the new adult Heads of Service were in post:
 - Care home/housing – Paused to December 2019
 - Learning disability – SIO resource identified and appointment made in December 2019
 - Acute Hospital services – review and realignment
- 1.3 There were also a number of changes in the executive leadership in the programmes due to changes in the adult HoS as referenced above and these are being implemented from December 2019.
- 1.4 It was approved that the Finance and Policy committee would provide governance oversight of the Transformation Programme and since November reports have been provided to the committee with a formal written report covering the other programmes presented on the 12th December 2019 notably:
 - Children's Services
 - Dementia redesign
 - Community Model of Care
 - Corporate Services – IT system integration

2. INTRODUCTION

The IJB has put in place a “Transforming Together” programme with 8 work streams to strengthen and build on our achievements to date and continue the changes required to meet our vision, priorities and objectives.

These have been detailed in the HSCP 3 year Strategic Plan, with priorities for service change detailed for years 1, 2 and 3. Each of these service transformation work streams are expected to involve significant change in services over the period of the HSCP strategic plan (Appendix 1 details the objectives of each work stream).

They have all progressed over the course of the last 12 months but not all have met expected timelines or achieved the expected outcomes including cost savings in years one and two (appendix 2).

The IJB considered a report on the programme at its meeting on the 25th September 2019 and directed officers to progress the recommendations made i.e.

- To change the executive leadership of the project,
- Review and resource the programme project officer support subject to availability of resource for each work stream
- Amend the governance reporting arrangements to the Finance and Policy committee.

This paper provides an overview to the Board over the progress made in the last 3 months.

3. DETAIL OF REPORT

Acute Services – Executive Lead Liz Higgins Lead Nurse

Acute Services is currently under review in terms of planning and resource allocation to enable delivery. Due to the complexity and requirement for increased consultation small pockets of work have been undertaken but not with the anticipated transformational impact. A highlight report on the re-aligned work streams will be presented to the next Finance and Policy Committee in January

Community Model of Care- Executive Lead Caroline Cherry Head of Adult Services

This transformational work stream has been developing a model of care across communities in order to support adults (primarily older adults within our communities) to live well at home. The progressed work has included pathway development; co-location of staff and the use of Carefirst across teams and the sharing of good practice including reablement approaches.

It was recognised that whilst good progress had been made in developing a multi-disciplinary community team approach and supporting practice development led by Linda Currie, Lead AHP, some areas of work were service developments and not necessarily transformational.

Linda Currie and Caroline Cherry have been reviewing the Community Model of Care against the original strategic plan and have a paper developed which embeds an early intervention and community asset approach as well as pursuing a clear model of care within our teams to ensure consistency across the Partnership. This is in line with the ethos of the Christie Commission Report on the future delivery of

public services (2011) and our need to ensure a strong focus on prevention within our communities. Accordingly, it is recommended that the name of the work stream changes to Communities Together.

Additionally the refreshed implementation of Self Directed Support (Social Care) Scotland Act (2013) will sit under this work stream.

A summary of this work stream is outlined below.

The aim of Communities Together is to support older adults to stay well and independent within their own communities wherever possible.

- ✓ We will focus on community assets and well-being to avoid the use of formal/statutory services wherever possible recognising the differences within communities
- ✓ We will embed individual choice and control wherever possible where formal services are required
- ✓ Our Health and Social Care community services will be easy to access and offer an approach which is strength based and minimises duplication

The next phase will involve further discussion with a wide range of colleagues and a refreshment of actions to align with the three areas outlined above.

Learning Disability & Autism- Executive Lead Julie Lusk

This project has also been recommended for a full review of project specification, work packages and resource due to lack of progress made beyond business as usual reviews of care provision. An update/report with deliverables and milestones will be provided to the Finance and Policy committee at its February meeting.

Care Homes and Housing- Executive Lead Linda Currie Lead AHP

As agreed at the IJB this programme has been on pause until planning support resource was available in December 2019. This is now in place and an update report will be brought to the next Finance and Policy committee meeting in January.

Children's Services – Executive Lead Alex Taylor Head of Children's Services

Within this service there are a number of work areas detailed below and highlight reports have been provided to the Finance and Policy committee outlining progress and next steps. Further work on timelines, deliverables re outcomes and evidence and use of existing capacity re core and cluster accommodation was requested and will be presented in February to the committee.

- Commissioning Children's disability services
- Youth Justice
- Children's Management structure review
- Children's Core and Cluster housing

Corporate Services – Executive lead (as specified)

Co-location- Charlotte Craig Business Improvement Manager

This is now reported on a monthly basis to SLT to ensure progress. Co-location of Oban social work and health staff is progressing with detailed plans now in place and on-going staff involvement and consultation.

Planning for the accommodation of the remaining Aros main building staff has been hampered by late and additional information. Communication has been a challenge but measures have now been put in place to address this. While slower than required progress continues to be made.

Community IT System – Stephen Whiston Head of Strategic Planning and Performance

An implementation group continues the work to normalise and expand the use of the social work Carefirst system by NHS community and AHP staff. This project has a key facilitation and supporting role for the community model work stream referenced above.

New work streams 2020/21

Proposed work streams in establishing joint council and NHS Catering transformation work stream and HSCP Business Administration pending outline specifications before March 2020.

4. RELEVANT DATA AND INDICATORS

Project highlight updates are being presented to the Finance and Policy committee for scrutiny.

There is further requirement to ensure the golden thread between the Strategic Plan, Project specification and a milestone report for activity across the programme of work is articulated.

Risks and issues are collated separately but interdependencies do exist and the Transformation Board would seek to address this with the developing the leadership role of the new Heads of Adult Services.

5. CONTRIBUTION TO STRATEGIC PRIORITIES

Transformation work streams are identified as key driving activity to deliver the priorities of the Strategic Plan.

6. GOVERNANCE IMPLICATIONS

6.1 Financial Impact

Quantifiable to each work stream, none presented for recommendation today.

6.2 Staff Governance

No staff governance issues identified relating to this report

6.3 Clinical Governance

Any issues noted in accompanying QIA, EQEISA documentation and highlighted when recommendation is requested from the committee to the IJB

7. PROFESSIONAL ADVISORY

Professional advisory referenced through each work stream

8. EQUALITY & DIVERSITY IMPLICATIONS

Please ensure that you have considered the requirement for EQIA and notify completion if required.

9. GENERAL DATA PROTECTION PRINCIPLES COMPLIANCE

None in the presentation of this report.

10. RISK ASSESSMENT

Risks and issues specific to work stream project management.

11. PUBLIC & USER INVOLVEMENT & ENGAGEMENT

Planned as per each individual work stream, there is no requirement for recommendation to be made to the IJB at present.

12. CONCLUSIONS

As presented at the IJB in September 2019, this paper provides an update on the status of the various transformational work streams and actions in hand to review and change executive leadership and project support.

The highlight reports presented at the Finance and Policy committee detail the progress, challenges and issues and next steps regarding transformational work and financial savings.

Further review and specification now that the new Adult Heads of Service are in post is in hand as indicated.

New work areas will be developed for 2020/21 and presented as outlined.

13. DIRECTIONS

Directions required to Council, NHS Board or both.	Directions to:	tick
	No Directions required	x
	Argyll & Bute Council	
	NHS Highland Health Board	
	Argyll & Bute Council and NHS Highland Health Board	

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Appendix 1 – Transforming together work streams 3 Year priorities

Transformational Area 1 - Children's Services

Priorities Year 1:	Priorities Year 2:	Priorities Year 3:
<ul style="list-style-type: none"> Strengthen Early Intervention and Support 	<ul style="list-style-type: none"> Use of logic modelling to help define and separate strategic and operational performance measures. Align all self-evaluation involving children and young people's services under the Children and Young People's Service Plan to provide more uniformity when identifying multiagency and single agency performance measures Deliver the Children and Young People's wellbeing survey. Develop the 2020 – 2023 Children and Young People's Service Plan 	<ul style="list-style-type: none"> Launch 2020 – 2023 Children and Young People's Service Plan
How will we measure our progress? We will monitor outcomes against our plan objectives, service inspections and feedback.		

Transformational Area 2- Care Home and Housing

Priorities Year 1:	Priorities Year 2:	Priorities Year 3:
<ul style="list-style-type: none"> Scoping of future needs and planning future care homes and housing models (Phase 2/3) 	<ul style="list-style-type: none"> Agree the future shape of service provision at locality and Argyll and Bute level for the cohort of care provision required (Phase 3/4) Develop a commissioning strategy (Phase 3/4) 	<ul style="list-style-type: none"> Working in partnership with Argyll & Bute Council Housing Services, local Registered Social landlords and care home providers to fulfil the future requirement of care homes or housing from existing or new stock. (Phase 4)

How will we measure our progress?

Set targets and objectives including:

- Reduce out of area placements
- Provision of care home or specialist housing at the time required, without delay

Transformational Area 3 - Learning Disability Services

Priorities Year 1:	Priorities Year 2:	Priorities Year 3:
<ul style="list-style-type: none"> Develop 'Care Campus' approaches to services that will be designed, commissioned, and delivered in a way that meets the identified needs of individuals and groups, rather than assigning provision in 'categories' of 	<ul style="list-style-type: none"> Fully utilise opportunities offered through Self-directed Support to influence the variety of providers and support available to meet personal outcomes for people with learning disabilities Work with people with Learning Disabilities and their carers when devising packages of care to 	<ul style="list-style-type: none"> Deliver training focused on identifying risk, prevention, choice and rights to our staff and those of partner organisations Further embed and strengthen links made between services (e.g.

<p>care needs.</p> <ul style="list-style-type: none"> • Reduce the number of people cared for 'out of area', by making provision available within Argyll & Bute. • Use approaches such as 'Strategic Change through Person Centred Thinking' to obtain qualitative and quantitative information from those receiving services and use it to shape our plans to help them achieve their objectives. • 	<p>incorporate carers' needs and expertise in the design and delivery of these packages. Examples of this will include:</p> <ul style="list-style-type: none"> • Involving carers of people with learning disabilities when identifying potential services that meet the outcomes of the person with a learning disability as part of the approach to developing new commissioning plans. • Asking carers how best to support caring relationships and make sure the wellbeing of carers themselves will be supported and enhanced. • Invest in the asset based/community capacity building approach to ensure people with learning disabilities have access to a choice of community resources, lifelong learning and employment opportunities 	<p>child to adult, adult to older people's care) to ensure that all transitions are well planned and managed whether due to age or change of needs or health. People will be supported and be fully involved at periods of transition across all Services.</p>
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How will we measure our progress?

In order to ratify strategic outcomes/priorities and ensure that they are met, immediate next steps will include:

- Establishing a steering group with responsibility to deliver the Implementation Plan, with representation from partners, including provider organisations; Dec 2019
- Devising and delivering an outcomes-based implementation plan for this Strategy by Jan 2019
- Setting out funding priorities and ambitions within the implementation plan (identifying clearly the opportunities and need for savings to be made); by Jan 2019
- Putting in place robust monitoring and reporting arrangements (i.e. a performance framework, consistent with strategic and corporate requirements); by Apr 2019
- Identifying risks to achieving the strategic outcomes and propose mitigation measures; by Jan 2019
- Developing Commissioning Plans for all services to be provided;
- Establishing consultation plans (using the Engagement Specification) with people with learning disabilities and their carers' as part of the process to set our strategic objectives; by Feb 2019
- Utilising feedback from professionals and those affected by our plans through a Health Impact Assessment and Equality and Socio-Economic Impact Assessment; by Mar 2019

Transformational Area 4 – Community Model of Care

Priorities Year 1:

- Multi-disciplinary teams will be established across all Argyll and Bute.
- All teams have a Single Point of Access.
- All teams have a daily huddle with referral and caseload allocation.
- All teams are working appropriately and where necessary, extended hours to deliver care.

- All teams are working to the agreed standards for community teams in Argyll and Bute.
- Generic workers will be a key role within the teams

Priorities Year 2:

- All teams will be working on an 'asset based approach'.
- The use of TEC will be fully embedded in the assessment and care in the community.
- IT will support mobile and agile working for the community teams.
- The teams will be working to a single record and data system.
- Advanced nurse practitioners will be developing in the teams.
- Anticipatory care planning will be fully embedded within the team.

Priorities Year 3:

- Advanced nurse practitioners will be embedded in the teams.
- A frailty pathway will have been developed and implemented in all teams.
- Improvement work will be shared and implemented as standard work.
- Agreed outcome measures will have been tested and implemented.

How will we measure our progress?

- Reduced delayed discharges in Argyll and Bute.
- Improved discharge planning with Greater Glasgow and Clyde.
- Reduced number of unnecessary emergency admissions to hospital.
- Reduced length of stay in hospitals.
- More people will be looked after at home rather than hospital or care home.
- Reduced number of professionals involved with a person in receipt of care.

Transformational Area 5 - Mental Health Services

Priorities Year 1:	Priorities Year 2:	Priorities Year 3:
<ul style="list-style-type: none"> Progress planned developments associated with Transforming Together agenda for mental health : - Community Mental Health Services review and outcomes Psychological Therapies Care Reviews Inpatient services Dementia services, including development of a local dementia strategy 	<ul style="list-style-type: none"> Establish clear pathways to keep patients in local hospitals before transferring to acute units and further develop community supports and strategies, aimed at supporting individuals to remain at home and in their community and ensure effective admission and discharge planning. 	<ul style="list-style-type: none"> Consider and consolidate standardisation of processes; roles and responsibilities; care and support co-ordination and utilisation of effective training and delivery models (i.e. specialist / generic), as appropriate to support mental health and dementia services locally.
How will we measure our progress?		
<ul style="list-style-type: none"> Monitor the number of acute admissions, year on year to assess the effectiveness of community supports and strategies which support individuals at home. Evaluate and monitor reductions in demand and spend for out of hour's services; Police Scotland and interventions by other emergencies services. Realise reductions in acute hospital admissions and / or use of compulsory measures in terms of detention under Mental Health legislation. Monitor the number of crisis interventions provided by practitioners. Monitor the number of service users requiring detentions in community hospitals. Evaluate service and carer satisfaction levels relating to above outcomes. 		

Transformational Area 6 – Hospital Services

Priorities Year 1:	Priorities Year 2:	Priorities Year 3:
<ul style="list-style-type: none"> Moderate reduction in the number of hospital beds. Begin service specification for all community hospitals. Complete bed modelling exercise across all inpatient areas. 	<ul style="list-style-type: none"> Completion of service specification for Community Hospitals and Lorn and Islands Rural General Hospital. Increase day case services in all hospitals. Fully embed Quality Improvement initiatives across all hospitals. Reduction in unscheduled activity into NHS GG&C Hospitals 	<ul style="list-style-type: none"> Continue to deliver more care in the community, less inpatient care and appropriate use of our A&E Departments, reducing unscheduled activity into Glasgow.
How will we measure our progress?		
<ul style="list-style-type: none"> We will monitor and manage the level of acute activity delivered locally 		

- Reduce the increase in emergency activity into NHS GG&C Hospitals
- Incorporate into our patient outcomes and experience of services patient/user feedback
- Monitor and manage services to ensure consistent high quality standards of care.

Transformational Area 7 – Corporate Services

Priorities Year 1:	Priorities Year 2 and 3:
<ul style="list-style-type: none"> • Implement co-location plans and arrangements as identified • Identify other estate rationalisation and co-location opportunities • Increase the number of health staff using the single health and social care IT system- “CareFirst” • Pilot mobile App for staff using the “CareFirst” IT system 	<ul style="list-style-type: none"> • Provide single integrated corporate services for health and social care staff in Finance, HR etc. • Put in place a single unified telephone and IT system between the NHS and the council saving money and increasing productivity of staff • Establish and operate a single catering service for Education, NHS and Social Care within Argyll and Bute
How will we measure our progress?	
<ul style="list-style-type: none"> • Reduced number of buildings and estate • Productivity benchmark targets improved • Significant cost reduction in corporate services of between 10-20% (To be confirmed) 	

Appendix 2 – Transforming together Cost saving plan

SUMMARY OF SAVINGS TARGETS 2019/20 BY TRANSFORMATION WORKSTREAM

WORKSTREAM				Year to 31 Dec 2019			Full Year
Ref.	Unachieved Savings Description	Manager	Target	Achieved	Unachieved	%	Achievement
			£' 000	£' 000	£' 000	Achieved	£' 000
Learning Disability and Autism							
1819-19	Review and Redesign of Physical Disability Services	Jim Littlejohn	28	0	28	0%	
1819-19	Review and Redesign of Learning Disability Services - Sleepovers and Technology Argyll Wide	Jim Littlejohn	299	0	299	0%	
1819-19	Review and Redesign of Learning Disability Services - Packages of Care Cowal	Alison McKerracher	125	0	125	0%	
1819-19	Review and Redesign of Learning Disability Services - Packages of Care Helensburgh	Linda Skrastin	152	0	152	0%	
1819-19	Review and Redesign of Learning Disability Rothesay Resource Centre	Jane Williams	14	0	14	0%	
1819-19	Review and Redesign of Learning Disability Assist Cowal Resource Centre	Jayne Lawrence Winch	30	0	30	0%	
1819-19	Review of Ext Residential Learning Disability Placements	Jim Littlejohn	194	0	194	0%	
1920-47	Review of lower priority (P3 and below) cases to ensure appropriate and in line with best practice	LAMs	170	0	170	0%	
	Totals		1,012	0	1,012	0%	
Community Services workstream							
1819-8	Assessment and Care Management	Jim Littlejohn/Donald Watt	42	0	42	0%	
1819-22	Adult Care West - Restructure of Neighbourhood Teams (SW & Health)	Caroline Cherry	250	0	250	0%	
1819-25	Older People Day/Resource Centre - Address high levels of management - consolidate opening hours - shared resource	Caroline Cherry	212	0	212	0%	
1819-46	Adopt a Single Community Team Approach to undertaking Assessment and Care Management	Caroline Cherry	120	0	120	0%	

1920-40	Implement best practice approaches for care at home and re-ablement across all areas following Bute pilot	Linda Currie / Caroline Cherry		300		0
1920-41	Extend use of external home care transferring hours as gaps occur	Donald Watt	33	0	33	0%
1920-42	Step up/step down of care to be suspended except for exceptional cases	Judy Orr	227	0	227	0%
1920-43	Cap on overtime	Donald Watt / Morven Gemmill		87		0
1920-44	Reduction on adult services social work travel	Jim Littlejohn/ Donald Watt	25	0	25	0%
1920-45	Planned changes in staffing	Morven Gemmill / George Morrison		28		0
1920-46	Cap on Care Home placements equivalent to £30,000p.a.	LMs / HoS	160	0	160	0%
1920-48	Reinforcement of guidelines on self-directed support (SDS) direct payment packages and limit to appropriate standard hourly rates	LAMs	15	0	15	0%
1920-49	Reduction of overtime being worked in internal home care	LAMs	4	0	4	0%
1920-50	Review provision of respite flat at Jura Progressive Care Centre	Donald Watt	5	0	5	0%
	Totals		1,508	0	1,508	0%

Childrens Services

1819-14	Redesign of Internal and External Childrens Residential Placements	Pamela Hoey	200	0	200	0%
1819-15	Children and Families Management Structure	Alex Taylor	150	0	150	0%
1819-31	Integrate HSCP Admin, digital Tech and Central Appoint System	Alex Taylor / Kirsteen Larkin	125	21	104	17%
1819-16	Children & Families services staffing	Alex Taylor	50	0	50	0%
1819-40	SLA and Grants operate within allocation	Alex Taylor	23	0	23	0%
	Totals		548	21	527	4%

Corporate Services - co-location

1819-4	Closure of West House / Argyll & Bute Hospital site	David Ross	120	100	20	83%
1819-5	Closure of Aros (running costs)	David Ross/Charlotte Craig	40	0	40	0%

Corporate services - catering					
1819-33	Catering, Cleaning and other Ancillary Services	Alex / Jayne Jones/ Caroline Cherry		100	30
1819-32	Catering and cleaning review		20	n/a	n/a
Acute services					
1819-44	Advanced Nurse Practitioners - Oban	Caroline Henderson	14	0	14
1920-38a	LIH Theatre nurse staffing - HAK112	Caroline Henderson	60	22	38
1920-38b	Lorn & Islands Hospital staffing	Lorraine Paterson	200	52	148
1920-22	Dunoon Medical Services	Rebecca Heliwell	100	0	100
Totals			374	74	300
					20%