



To: Renfrewshire Integration Joint Board

On: 24 June 2016

Report by: Chief Officer

Heading: Change and Improvement Programme 2016/17

1. Summary

- 1.1. During 2015/16, members have received regular update reports on the work undertaken to prepare for the Integration Joint Board (IJB) assuming full, legal delegated responsibility for health and adult social care services across Renfrewshire from 1 April 2016.
- 1.2. This report confirms that the necessary processes, policies and plans are now in place, in line with the Public Bodies (Joint Working)(Scotland) Act, and requests the formal closure of the 2015/16 Programme.
- 1.3. This report also provides an overview of the Health and Social Care Partnership's (HSCP) 2016/17 Change and Improvement Programme which will:
 - Deliver the in-year financial savings and pressure mitigation measures through more sustainable service delivery models, ensuring resources are focused on areas of greatest need and deliver the best outcomes for our service users.
 - Establish a health and social care service which is managed and delivered through a single organisational model in order to optimise the benefits which can be derived from integration.

2. Recommendation

2.1. It is recommended that the IJB:-

- Approve the formal closure of the 2015/16 work programme (Appendix 1);
- Agree that the approval of the final 2016-19 Strategic Plan and 2016/17 Financial Plan will be carried forward into the 2016/17 work programme;
- Approve the 2016/17 Change and Improvement Programme (Appendix 2), which will be subject to further review once the IJB's final 2016-19 Strategic Plan and 2016/17 integrated budget are finalised;
- Note the Chief Officer will bring regular reports to the IJB on the progress of the 2016/17 work programme;
- Note that the findings of service reviews and supporting recommendations will be brought to the IJB for consideration and direction.

3. Background

2015/16 Work Programme

- 3.1. Over 2015/16, a structured programme of work (see Appendix 1) was undertaken to ensure the necessary processes, policies and plans were in place to allow local implementation of integrated health and social care services in terms of the Public Bodies (Joint Working) (Scotland) Act 2014, including
 - Appointing its Chief Officer and Chief Finance Officer to lead integrated services and manage the joint budget;
 - Agreeing the strategic Vision for the new IJB, drawing on the value of joint working in order to achieve the best possible outcomes for the people of Renfrewshire;
 - Establishing a Strategic Planning Group (SPG) to ensure the interests of different local stakeholder groups are represented in relation to health and social care services within the strategic planning process;
 - Development of its Strategic Plan which describes how the IJB will move towards delivering on our organisational vision – setting out the context, challenges, priorities and action plans for the period 2016-2019;
 - Putting in place sound financial governance and assurance arrangements for the IJB in line with national guidance;
 - Carrying out the required due diligence process to consider and ensure the sufficiency of the two parent organisation budgets being delegated to the IJB from 1 April 2016 and thereby to ensure the HSCP can proceed on a sound financial basis;
 - Managing the effective delegation of the prescribed functions to the new IJB on 1 April 2016; and
 - Issuing Directions to the Council and NHS GGC for their respective delegated functions from 1 April 2016, as set out in Renfrewshire's Integration Scheme.
- 3.2. On 1 April 2016 health and adult social care functions in Renfrewshire were formally delegated to the IJB.
- 3.3. With the exception of approving the IJB's 2016-19 Strategic Plan and 2016/17 Financial Plan, the 2015/16 programme has now been successfully delivered (see Appendix 1).
- 3.4. It is proposed that the IJB agree the formal closure of this programme, and that approval of the final Strategic and Financial Plans is carried forward into the 2016/17 work programme.

4. 2016/17 Change and Improvement Programme

4.1. Over 2015/16, the IJB has successfully overseen the delivery of all core services within existing resources. It is recognised that current service provision is insufficient to meet future need. Going forward the scale and pace of the changes anticipated by new IJBs are significant.

- 4.2. To support the delivery of the IJB's Strategic and Financial Plans, the Chief Officer has established an ambitious Change and Improvement Programme, detailed in Appendix 2, which will:
 - Deliver the in-year financial savings and pressure mitigation measures through more sustainable service delivery models, ensuring resources are focused on areas of greatest need and deliver the best outcomes for our service users.
 - Establish a health and social care service which is managed and delivered through a single organisational model to optimise the benefits which can be derived from integration.
- 4.3. As the health budget to be delegated to the IJB has still to be finalised, the current programme of work does not take into account NHS GGC saving targets to be delivered during 2016/17, or future years saving targets for both parent organisations.
- 4.4. Once the IJB's 2016/17 budget is finalised, the Chief Officer will advise the IJB of the operational implications of any viable and agreed health savings, and the impact to current service delivery and performance levels. At this point, an updated Change and Improvement Programme will brought to the IJB in line with the final 2016-19 Strategic Plan and 2016/17 integrated budget.

5. Delivering the 2016/17 Financial Plan

- 5.1. Over 2016/17 the Change and Improvement Programme will address a number of prioritised areas which will enable the IJB to mitigate a number of the key demographic and financial pressures identified within social care:
 - Service review of Home@Care a detailed update is contained in a separate report to this meeting;
 - Service review of Care Homes;
 - Service review of Occupational Therapy services and provision of equipment and adaptations;
 - Service review of Self Directed Support;
 - Review with each provider how services will be delivered from 1 October 2016.
- 5.2. These prioritised areas reflect the national policy direction to shift the balance of care, promote independent living and ensure person centred care. The service reviews will critically appraise and challenge our current models of service delivery to ensure our resources are focused on greatest need delivering the best outcomes for our service users. The findings of these reviews and supporting recommendations will be brought to the IJB for consideration and direction.

6. Optimising Integrated Working

- 6.1. Establishing a health and social care service which is managed and delivered through a single organisational model is critical to unlocking the benefits which can be derived from integration. Over 2016/17 the HSCP is looking to further develop its ways of working, particularly to build a structured approach to how we involve and engage General Practitioners to ensure they are meaningfully part of our wider team and service based working.
- A number of change projects will progress over 2016/17 to inform how the HSCP can best design an effective and dynamic approach to 'locality' and 'cluster' based working and to build collaboration and joint working between services. These projects will bring together GP's, Social Work, District Nurse, Rehabilitation Service, Mental Health and other staff to consider how they can improve joint working to better support the needs of local patients and service users.
- 6.3. The IJB cannot transform health and social care services in isolation. Over 2016/17 the HSCP will actively involve other key stakeholders, our parent organisations, community planning partners, NHS GGC Acute Services, the third sector and providers. As part of the Change and Improvement Programme, the Partnership will maximise the use of the Integrated Care Fund (ICF) to explore and test innovative new ideas and wider service change, where available adopting evidence based approaches, designed to shift the balance of care rather than to maintain historic arrangements and relationships:
 - To roll-out successful rehabilitation, reablement and technology-enabled models of service to all adult care groups;
 - To deliver a community capacity building plan, engaging a wide range of stakeholders in its development and delivery, with a view to third sector organisations or partnerships leading on a number of the work areas; and
 - To develop locality and cluster based models of working and networking.
- 6.4. In addition to our locally led Change and Improvement Programme, the HSCP is also involved in a number of other NHS GGC system wide initiatives, such as the District Nursing review, In-patient Services redesign, the new GGC Community Mental Health Framework and Learning Disability Redesign, which are listed in Appendix 2.

7. Programme Governance and Delivery Model

- 7.1. A Change and Improvement Programme Board has been established to support the Chief Officer and Chief Finance Officer deliver the programme and ensure it delivers the expected outcomes and benefits.
- 7.2. The Chief Officer will provide regular programme highlight reports to the IJB to update members on progress. More detailed reports on specific service reviews and projects being undertaken will also be brought to the IJB for consideration and approval as appropriate. This Board includes all of our HSCP Heads of Service.

- 7.3. Under the new integrated arrangements, the HSCP will optimise the use of current NHS GGC and Renfrewshire Council resources involved in change and improvement activities within a new, centralised Change and Improvement Team.
- 7.4. This team will play a significant supporting and enabling role to Heads of Service and others, to drive service improvement and organisational change within the HSCP. The team will ensure a structured approach to managing change, optimising the use of change and improvement competencies and developing and sharing best practice throughout the HSCP.
- 7.5. The HSCP Organisational Development (OD) and Learning and Education (LE) resources will be aligned to this new team. This will ensure staff and managers are supported through the change process, building greater capability for change, and ensuring staff are appropriately equipped to carry out the requirements of their job roles. This approach is fully shaped by the IJB approved Participation, Engagement and Communication Strategy and our Organisational Development and Service Improvement Strategy.

Implications of the Report

- **1. Financial** the Change and Improvement Programme will support the delivery of the 2016/17 Financial Plan
- **2. HR & Organisational Development** HR and OD resources will be aligned to the new Change and Improvement Team
- 3. Community Planning the HSCP will ensure there are appropriate links into the wider community planning process
- **Legal** supports the implementation of the provisions of the Public Bodies (Joint Working) (Scotland) Act 2014.
- **5. Property/Assets** property remains in the ownership of the parent bodies.
- **6. Information Technology** technology enabled solutions may be identified as part of the service reviews and pilot work.
- 7. Equality & Human Rights The recommendations contained within this report have been assessed in relation to their impact on equalities and human rights. No negative impacts on equality groups or potential for infringement have been identified arising from the recommendations contained in the report. If required following implementation, the actual impact of the recommendations and the mitigating actions will be reviewed and monitored, and the results of the assessment will be publised on the Council's website.
- **8. Health & Safety** health and safety processes and procedures are being reviewed to in order to support safe and effective joint working
- **9. Procurement** procurement activity will remain within the operational arrangements of the parent bodies.
- 10. Risk None.
- **11.** Privacy Impact n/a.

List of Background Papers – none

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Appendix 1: Legal requirements and commitments

The tables below detail Renfrewshire's legal requirements and commitments in relation to Health and Social Care Integration as set out in the Public Bodies (Joint Working) (Scotland) Act 2014 Act and its Integration Scheme.

Requirement / commitment source:	Key
Act & supporting Regulations	Act
Renfrewshire Integration Scheme	IS
Scottish Government guidance	SG
Established governance arrangements for parent bodies	Gov

1. Governance (non-financial) arrangements				
Legal requirement /commitment	Туре	Legal deadline	Target / actual date	RAG
Integration Scheme approved, published and Integration Joint Board (IJB) legally established	Act	27/06/15	-	×
The 1 st meeting of the legally constituted IJB	Act	-	18/09/15	X
Ratify the remit and constitution of the IJB including its voting and non members, chair and vice chair.	Act	-	18/09/15	×
The Procedural Standing Orders of the IJB agreed	Act	-	18/09/15	×
IJB ratify the appointment of the Chief Officer, Chief Finance Officer and establish the Strategic Planning Group (including governance arrangements and Terms of Reference)	Act	-	18/09/15	×
Risk policy, strategy, procedures and list of key strategic risks approved by IJB	IS	27/09/15	18/09/15	×
Arrangements for Hosted Services agreed amongst the IJBs in the GG&C area.	IS	31/03/16	15/01/16	×
Health and Safety policy and procedures in place	IS	31/03/16	15/01/16	X
Complaints policy and procedures in place	IS	31/03/16	15/01/16	X
Fol policy and procedures in place and Publications Scheme in place	Act	31/03/16	15/01/16	×
Business continuity arrangements in place	IS	31/03/16	15/01/16	K
Parent organisations agree the provision of support services for the IJB	IS	31/03/16	15/01/16	×
CO confirms all governance arrangements in place (IJB Report) for functions to be delegated from parent organisations to the IJB	IS	31/03/16	18/03/16	×
Functions delegated to IJB	Act	01/04/16	01/04/16	K

Key:	×	Complete	②	On target		Risk of delay		Significant Issues
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2. Communication and engagement

Legal requirement /commitment	Туре	Legal deadline	Target / actual date	RAG
IJB agrees its participation and engagement	IS	27/12/15	20/11/15	×
strategy				

3. Strategic Plan (the order of Strategic Plan activities are prescribed in the Act but not specific individual deadlines for each stage)

Legal requirement /commitment	Туре	Legal deadline	Target / actual date	RAG
IJB agree its proposals for the Strategic Plan	Act	-	18/09/15	×
SPG feedback on the proposals for the Strategic Plan content	Act	-	23/09/15	X
IJB agree its first draft of Strategic Plan, taking account of SPG feedback	Act	1	20/11/15	X
SPG feedback on the first draft of the Strategic Plan content	Act	-	27/11/15	×
IJB agree its second draft of Strategic Plan, taking account of SPG feedback	Act	-	15/01/16	×
Formal consultation with prescribed stakeholders including SPG, Health Board and Council (commences 18/01/16)	Act	-	07/02/16	×
NHS GGC agree its response to the draft Plan **	Gov	Not logal	17/02/16	X
Leadership Board agree the Council's response to the draft Plan **	Gov	Not legal req't	17/02/16	×
Update report on consultation and final draft of Strategic Plan prepared for the IJB	Act	-	24/02/16	×
IJB approve its final version of the Strategic Plan	Act	31/03/16		
Equalities scheme and EQIAs completed for Partnership (previously reported under Governance)	IS	31/03/16	18/03/16	×
Strategic Plan published along with financial statement and statement of action taken by IJB under section 33 (consultation and development of the Strategic Plan).	Act	31/03/16		

^{**} Please note: this commitment has changed; parent organisations had previously planned to update their Boards on the final draft version of the Strategic Plan (this is not a legal requirement)

4. Performance Management				
Legal requirement /commitment	Туре	Legal deadline	Target / actual date	RAG
Parties prepare a list of targets and measures in	IS	27/06/15	27/06/15	×
relation to delegated and non delegated functions				
Council and Health Board develop proposals on	IS	-	18/09/15	×
targets and measures for 2015/16 'interim'				
performance framework to be submitted to an early				
meeting of the IJB				
IJB agree its reporting arrangements and supporting	IS	-	18/09/15	X
plan to develop 2016/17 performance framework				
with the Council and Health Board				
IJB agree 2016/17 performance framework, taking	IS	27/06/16	24/06/16	
account of localities, reporting arrangements and				

plans to publish the annual performance report		
25/02/16		

5. Delivering for Localities				
Legal requirement /commitment	Туре	Legal deadline	Target / actual date	RAG
IJB agree locality arrangements (in line with SG guidance), based on stakeholder engagement, which will be reflected in the Strategic Plan	IS	-	20/11/15	×

6. Workforce				
Legal requirement /commitment	Туре	Legal deadline	Target / actual date	RAG
Parent organisations formal structures established to link the Health Board's area partnership forum and the Council's joint consultative forum with any joint staff forum established by the IJB.	IS	31/03/16	18/03/16	×
Workforce plans and agreed management / governance structures approved by Health Board	IS	31/03/16	29/03/16	×
Workforce plans and agreed management / governance structures approved by Council	IS	31/03/16	29/03/16	×
Chief Officer implements Workforce governance arrangements between the IJB and parent organisations (this is captured within parent organisation joint Workforce Plan)	IS	31/03/16	31/03/16	¥
IJB note the approved Workforce plans and agree management / governance structures	Gov	Not legal req't	17/06/16	A

7. Clinical and Care Governance				
Legal requirement /commitment	Туре	Legal deadline	Target / actual date	RAG
IJB approve draft Quality, Care & Professional Governance Framework and implementation plan, including approach to working with parent organisations	Gov	Not legal req't	18/09/15	×
The Parties and the IJB implement appropriate clinical and care governance arrangements for its duties under the Act.	IS	31/3/16	18/03/16	×
IJB Quality, Care & Professional Governance Framework in place	IS	31/03/16	18/03/16	×
Health and Care Governance Group established	IS	31/03/16	18/03/16	×
Chief Social Work Officer provides annual report to IJB (Section 5.15 of IS) – will be carried into the 2016/17 Programme	IS	-	31/10/16	Ø

8. Finance and Audit				
Legal requirement /commitment	Туре	Legal deadline	Target / actual date	RAG

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IJB Audit arrangements agreed	IS	31/03/16	18/09/15	*
Insurance arrangements (claims handling) in place	IS	31/03/16	31/12/15	×
IJB agree procedure with other relevant integration		31/03/16	18/03/16	×
authorities for any claims relating to Hosted				
Services				
IJB sign off financial governance arrangements as	IS	31/03/16	20/11/15	×
per the national guidance				
IJB report on due diligence on delegated baseline	IS	31/03/16	18/03/16	
budgets moving into 2016/17 – draft report				
presented on 18/03/16				
Draft proposal for the 2016/17 Integrated Budget	IS	31/03/16	-	-
based on the Strategic Plan approved by IJB				
Draft proposal for the Integrated Budget based on	IS	31/03/16	31/03/16	×
the Strategic Plan presented to Council for				
consideration as part of their respective annual				
budget setting process				
Draft proposal for the Integrated Budget based on	IS	31/03/16	-	-
the Strategic Plan presented to the Health Board for				
consideration as part of their respective annual				
budget setting process				
Council confirm final social care budget	IS	31/03/16	31/03/16	×
Health confirm final health budget	IS	31/03/16	-	
Financial statement published with the Strategic	Act	31/03/16	-	
Plan				
Resources for delegated functions transferred to	Act	31/03/16	31/03/16	×
IJB from parent organisations				
IJB issue Directions to the Council and NHS GCC	Act	31/03/16	31/03/16	×
for their respective delegated functions				
Audit Committee established with agreed Terms of	IS	31/01/16	31/03/16	×
Reference (cannot meet until post 1 April 2016				
when functions are delegated)				

9. Information Sharing and ICT				
Legal requirement /commitment	Туре	Legal deadline	Target / actual date	RAG
Information Sharing Protocol ratified by parent organisations	IS	31/03/16	25/02/16	×
Information Sharing Protocol shared with IJB	Gov	Not legal req't	15/01/16	×
Appropriate Information Governance arrangements are put in place by the Chief Officer	IS	31/03/16	15/01/16	×

Appendix 2: 2016/17 Change and Improvement Programme

The 2016/17 Change and Improvement Programme will be managed in two workstreams:

- Workstream 1: Delivery of 2016/17 Financial Plan
- Workstream 2: Optimising Integrated Working

In addition, the HSCP is also involved in a number of other NHS GGC system wide projects and service reviews, which are detailed in section 3.

1. Workstream 1: Delivery of 2016/17 Financial Plan and ICF

This work stream will deliver the in-year financial savings and pressure mitigation measures as committed within the Chief Finance Officer's Due Diligence Report.

Pr	oject	Objective(s)
1.	Implementation	Ensure all the HSCP's contracted care providers in Renfrewshire
	of Living Wage	are paying their care staff the Living Wage by 1 October 2016, in line with Scottish Government guidance and Renfrewshire
		Council's commitment to the Living Wage.
2.	Care@Home	Attract new recruits into the service through sustained
	Improvement	recruitment campaigns to increase service capacity and
	Plan (Home	reduce reliance on temporary agency staff.
	Care)	Review staffing structures to ensure appropriate infrastructure
		exists to enable the service to undertake its functions.
		Develop a business case for a Care at Home Management,
		Rostering and Monitoring System – to reduce duplication of
		effort, error and inefficiency and support managing and
		planning within the service.
		Review of business processes and service pathways to
		improve service provision
		Review of supervision and management capacity to ensure
		that appropriate infrastructure is in place to manage and
		supervise staff.
		Align services with new geographic boundaries and consider
		opportunities for streamlining and integrating service delivery
		Review the balance of internal and external provision to
		explore the potential to increase the capacity within the external market and review the balance that exists between
		the internal and external markets.
3.	Care Homes	Review the different options for redesigning the three HSCP
	review	residential care homes to create a fit for purpose, sustainable
		service that meet demographic demand and has the flexibility to
1	Occupational	respond to changing demands going forward.Develop OT referral pathways to improve levels of
4.	Therapy (OT)	Develop O1 referral pathways to improve levels of personalisation in service provision and minimise delays in
	Therapy (OT)	personalisation in service provision and minimise delays in

Service, equipment and housing adaptations review

service provision

- Reduce to a minimum and stabilise the waiting list for OT assessment for housing adaptations
- Ensure that practices, operating procedures, communications, shared understandings and definitions/ terminology are in line with good practice
- Deliver a programme of workforce development and staff supervision and support
- Reduce current waiting list for Care and Repair Adaptations
- Establish and maintain appropriate contractual/SLA relationships with internal and external providers

5. Self Directed Support (SDS) review

- Ensure equity across localities and reduce bureaucracy and time taken to deliver agreed care plan
- Improve 'workers' knowledge and understanding of the SDS processes and promote greater ownership of the process
- Ensure, where possible, that packages are managed within the RAS allocation and agreed tolerance levels

6. Integrated Care Fund (ICF)

Maximise the use of the Fund to explore and test innovative new ideas and wider service change, where available adopting evidence based approaches, to shift the balance of care rather than to maintain historic arrangements and relationships:

- Roll-out successful rehabilitation, reablement and technologyenabled models of service to all adult care groups;
- Deliver a community capacity building plan, engaging a wide range of stakeholders in its development and delivery, with a view to third sector organisations or partnerships leading on a number of the work areas; and
- Develop locality and cluster based models of working and networking.

2. Workstream 2: Optimising Integrated Working

This workstream will support the establishment of a health and social care service which is managed and delivered through a single organisational model to optimise the benefits which can be derived from integration

Project	Objective(s)
1. Developing Clusters and team working	 Design an effective and dynamic approach to 'locality' and 'cluster' based working and to build collaboration and joint working between services - bringing together GP's, Social Work, District Nurse, Rehabilitation Service, Mental Health and other staff to better support the needs of local patients and service users. Build a structured approach to how we involve and engage General Practitioners to ensure they are meaningfully part of our wider team and service based working, in line with Scottish Government Locality guidance
2. New GP Contract	 Establish Practice Quality Lead / Cluster Quality Leads, in line with the 2016/17 Contract, to support emerging integrated models of working Promote and support practices to work more closely together for the benefit of patients, practices and the wider health and social care system, in line with Scottish Government's Localities Guidance, the British Medical Association's (BMA) Scottish GP Committee Vision and UK Royal College of General Practitioners (RCGP) 2022 Vision.
3. Primary Care Transformat ion (PCTF)	 Develop proposals consistent with the PCTF process within/across NHS GGC Deliver on our local GP practice prescribing improvement pilots and ensure lessons are learned and shared
4. Interface with Acute Services	 Introduce structured ways of working with the Clyde Acute Senior Team with a view to continuing to address and improve
5. Community Planning	Develop clear links into the community planning process

3. NHS GGC Projects and Service Reviews

In addition to our locally led Change and Improvement Programme, the HSCP is also involved in a number of other NHS GGC system wide wide projects and service reviews, which are listed below:

Project / Service Review
District Nursing review
Children and Adolescent Mental Health Service (CAMHS)
3. Named Person / GIRFEC
4. Health Improvement
5. Mental Health – unscheduled care
6. Acquired Brain Injuries
7. Learning Disability Redesign
8. Frail Elderly Bed Transfer of Responsibility
Implementation of the Paediatric Framework
10. Community Mental Health Framework roll out and implementation
11. Hospice care transfer of responsibility to IJBs
12. Inpatient Services Redesign