# Strategic Delivery Plan

**IJB Meeting** 

**22 November 2019** 





## **Today's presentation**

Context for delivering our Strategic Plan

Emerging driving principles

Proposed approach and governance

Transformational funding





### Key messages from September IJB

Strategic Delivery Plan paper outlining emergent thinking endorsed at September 2019 IJB

Recognised the current health and social service models cannot meet demand given demographic and financial pressures.

Need a step change to ensure our sustainability going forward, with a focus on:

- Future investment in community-based services which enable people to be cared for in their homes and are also more cost effective;
- Prevention, early intervention & self-care initiatives to mitigate future demand; and
- Promoting independence through an ethos of 'working with' rather 'doing to'

HSCP will review and expand the current Change and Improvement Programme to become a Strategic Delivery Plan that can drive this change forward in light of these pressures.





### **Financial Planning 2020 onwards**

- Anticipated gross pressures of between £45m to £52m of over the next
   5 years
- Reasonable to estimate the HSCP will be required to deliver at least £3m for 2020/21 (this figure may change significantly subject to our partners budget offers and the CFO's updated financial planning)
- Assumption is that similar or greater savings will need to be delivered in subsequent years





# Estimated Financial Pressures 2020 onwards (medium scenario)

Estimated Pressure	2020/21 £'000's	2021/22 £'000's	2022/23 £'000's	2023/24 £'000's	2024/25 £'000's	TOTAL £'000's
Pay - assumed at 3% from 2020/21	2,918	2,964	3,073	3,186	3,303	15,444
Inflation - assume 4% from 2020/21	1,890	2,145	2,979	3,399	3,706	14,119
Prescribing - assumed 4% PA	1,398	1,454	1,512	1,572	1,635	7,571
Demographic and Demand changes - 2.25%	2,118	1,591	2,162	1,632	1,876	9,379
TOTAL	8,324	8,154	9,726	9,789	10,520	46,513

Impact of 1% Change	2020/21 £'000	2021/22 £'000	2022/23 £'000	2023/24 £'000	2024/25 £'000	TOTAL £'000's
Pay	£810	£818	£826	£834	£842	£4,130
Inflation	£630	£636	£643	£649	£656	£3,214
Prescribing	£350	£353	£357	£360	£364	£1,783
Demographic and Demand Change	£741	£748	£756	£764	£771	£3,780
TOTAL	£2,530	£2,555	£2,581	£2,607	£2,633	£12,906





#### Estimated Financial Pressures 2020/21 to 2029/30

Based on Recurring Budget P7	20-21	21-22	22-23	23-24	24-25	25-26	26-27	27-28	28-29	29-30	TOTAL
2019/20	£'000's	£'000's	£'000's	£'000's	£'000's	£'000's	£'000's	£'000's	£'000's	£'000's	TOTAL
LOW SCENARIO											
Contractual Pressures	1,276	1,464	2,281	2,688	2,981	3,077	3,176	3,278	3,383	3,492	27,095
Pay Pressures	2,918	2,955	3,064	3,177	3,294	3,405	3,521	3,641	3,765	3,894	33,633
Demand Pressures	1,775	1,238	1,798	1,259	1,491	1,566	1,584	1,602	1,621	1,640	15,573
Living Wage	858	925	943	960	979	997	1,016	1,036	1,057	1,078	9,849
Prescribing	1,398	1,454	1,512	1,572	1,635	1,701	1,769	1,839	1,913	1,990	16,782
Total Pressures	8,225	8,035	9,597	9,656	10,380	10,746	11,065	11,396	11,739	12,094	102,933
				MEDIUM S	CENARIO						
Contractual Pressures	1,277	1,471	2,292	2,701	2,996	3,106	3,221	3,341	3,465	3,593	27,463
Pay Pressures	2,918	2,964	3,073	3,187	3,304	3,426	3,553	3,684	3,820	3,962	33,890
Demand Pressures	1,869	1,337	1,901	1,366	1,603	1,684	1,708	1,733	1,758	1,784	16,742
Living Wage	863	930	949	966	985	1,007	1,030	1,053	1,078	1,104	9,965
Prescribing	1,398	1,454	1,512	1,572	1,635	1,700	1,768	1,839	1,913	1,989	16,781
Total Pressures	8,325	8,156	9,727	9,791	10,523	10,924	11,280	11,650	12,034	12,432	104,840
				HIGH SC							
Contractual Pressures	1,277	1,478	2,303	2,714	3,010	3,136	3,268	3,405	3,548	3,697	27,836
Pay Pressures	2,918	2,968	3,077	3,191	3,309	3,437	3,569	3,706	3,849	3,997	34,020
Demand Pressures	2,056	1,535	2,110	1,588	1,837	1,925	1,956	1,989	2,022	2,055	19,073
Living Wage	870	938	956	973	993	1,018	1,045	1,074	1,103	1,135	10,105
Prescribing	1,747	1,835	1,926	2,023	2,124	2,230	2,342	2,459	2,582	2,711	21,978
Total Pressures	8,867	8,754	10,373	10,490	11,274	11,746	12,180	12,632	13,103	13,594	113,012
WORST SCENARIO											
Contractual Pressures	1,277	1,485	2,314	2,727	3,025	3,166	3,315	3,470	3,632	3,803	28,215
Pay Pressures	2,918	2,973	3,082	3,196	3,314	3,447	3,585	3,728	3,877	4,032	34,153
Demand Pressures	2,057	1,536	2,111	1,589	1,839	1,935	1,976	2,017	2,061	2,105	19,226
Living Wage	876	945	964	981	1,001	1,030	1,062	1,095	1,131	1,169	10,254
Prescribing	2,097	2,223	2,356	2,497	2,647	2,806	2,974	3,153	3,342	3,542	27,637
Total Pressures	9,225	9,162	10,828	10,991	11,825	12,384	12,911	13,464	14,043	14,651	119,484





### 2020/21 Pressures

position @ 15/11/19								
	Using Medium	Using Medium	Using Medium Overall Position					
Type of Pressure	Health	Social Care						
7.	\$'0003	£000's	£000's					
Contractual	62	1,215	1,277					
Pay	2,012	906	2,918					
Demand	464	1,405	1,869					
Living Wage		863	863					
Prescribing	1,398		1,398					
Total Pressures	3,936	4,388	8,324					
uplift on health budget assume 2.5%	-3,085		-3,085					
uplift on Social care budget assume 2%		-1,200	-1,200					
= TOTAL GAP	-3,085	-1,200	-4,285					





### **Proposed Approach and Governance**

- Recognise our delivery approach must be based on partnership and engagement with partners, staff and critically our service users;
- Now in a period of engagement with staff, IJB member, partner organisations, voluntary sector, other GGC HSCPs to further refine our thinking;
- This work will inform the programme scope; criteria to demonstrate progress; refine our emerging key principles; and inform branding/ communication approach - importance of shared purpose and consistent messaging;
- Programme Board membership to be agreed and first meeting planned for December /early January; and
- Programme resources recruitment underway and transformation budget to be established by March 2020





### Emerging Principles that will enable us to deliver our Strategic Plan whilst remaining sustainable:

- Collective responsibility for our communities: best use of all community resources / assets to improve people's health and wellbeing (emotional and physical)
- 2. Citizen led approach to public health and well being: focus on prevention and early intervention, and tackling inequalities.
- **3. Realistic care:** adopting a strengths based approach which will seek to maximise service users independence and increased self management / recovery.
- 4. Right services at the right time and in the right place: care is consistent across Renfrewshire, we make effective use of HSCP resources; and ensure our approach to transitions and crisis intervention is integrated and seamless.





# **Emerging Principles align with National, NHSGGC and Local Direction and Priorities:**

- 'Turning the Tide' supports citizen led approach to public health
- 'Right for Renfrewshire' key themes are also prevention & early intervention and community development
- 'Moving Forward Together' reablement focus will support people to live well in their homes and communities, shifting balance of care
- Strategic Planning Group Partners expressed strong desire to build 'connected communities' and for Renfrewshire wide approach to health and wellbeing
- Community Planning: Local Partnership Priorities key priorities
  of loneliness and isolation; health and wellbeing; connectivity;
- NHSGGC HSCPs Chief Officers working together to develop opportunities for cross GGC approaches





### Proposed HSCP Transformation Programme

(Two Features)

#### INTERNAL CHANGE PROGRAMME

Step change in the way we work to ensure the sustainability of health and social care services going forward.

#### **Delivering on principles:**

- 1. Realistic care and strengths based approach
- 2. Right services at the right time and in the right place

## RENFREWSHIRE JOINT PROGRAMME

'Connected community' agenda led by HSCP with key partners – Council, NHS, RL, Community Planning, 3rd Sector.

#### **Delivering on principles:**

- 3. Collective responsibility for our communities
- 4. Citizen led approach to public health





## **Proposed Programme Scope**

(still being defined)

#### INTERNAL CHANGE PROGRAMME

Addiction Review Implementation Learning
Disabilities
Review
Implementation

Local implementation of Mental Health Strategy

**Children's TBC** 

**GP Contract and** 

**PCIP** 

Other???

#### RENFREWSHIRE WIDE PROGRAMME





**Older People Redesign** 

Working

with RAH

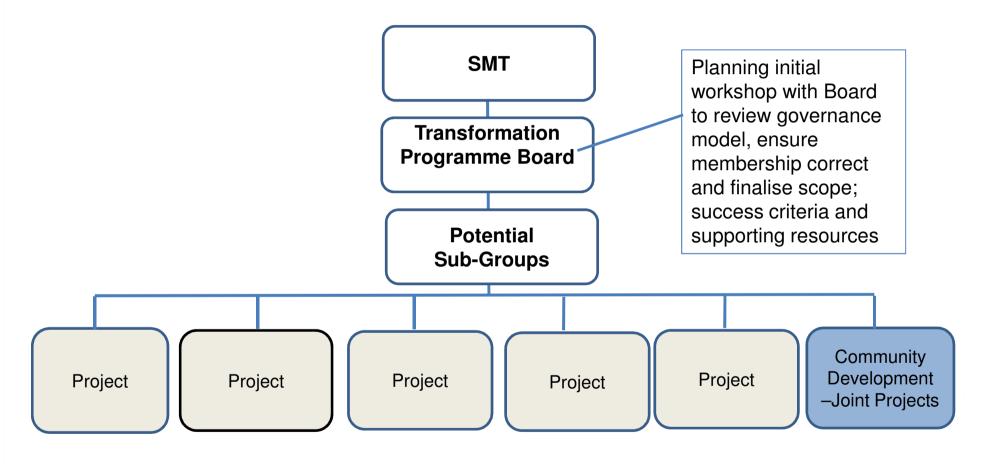
Palliative / End of Life TBC

CAH

Localities



### **Programme Governance**







## **Programme Board Membership**

- Chief Officer
- Chief Finance Officer
- Head of Strategic Planning
   and Health Improvement
- Programme Manager
- HSCP Operational HoS x 3
- NHSGCC MFT Lead
- Council R4R Lead
- Professional Leads
- Staff Side / Trade Union

- HR /OD Lead
- Public Health Consultant
- Engage 3<sup>rd</sup> Sector
- Housing Council
- Housing RSL
- Renfrewshire Leisure
- Carers Representative
- Community Representative
- Acute Representative





### How will we measure progress?

- Reduced demand on all HSCP services
- Improvement in levels of sickness absence
- Staff feedback
- Patient and service user feedback / experience improved outcomes
- More people living in their own homes
- A healthier population health and wellbeing survey / indicators
- Reduced health inequalities
- Minimising delayed discharge / lost bed days
- Reduced demand and hospital admissions
- Reduced waiting times
- Diverse community services which promote independence
- Effective, consistent and accessible HSCP services
- A balanced budget





## **Transformation Funding**

- £1.4m of earmarked reserves held by Renfrewshire Council to progress a range of service transformation and redesign projects and, support the HSCP transition from existing arrangements to new ones, as well as providing resource capacity to support the HSCP to deliver its change programme in 2019/20.
- In September 2019, the IJB approved the creation of a transformation reserve (the amount will be dependent on the 2019/20 year-end financial position) to provide resources to:
  - mitigate the risk of change;
  - to support the transition of HSCP services;
  - provide resource capacity to support the HSCP to deliver its change programme





## **Next Steps**

- Continued engagement to refine thinking
- Establishment of Programme Board initial workshops to develop scope
- Further IJB development session in January
- More detailed Strategic Delivery Plan paper to January IJB.



