



## INTEGRATION JOINT BOARD

<b>Date of Meeting</b>	24 <sup>th</sup> March 2020
<b>Report Title</b>	Grampian-wide Strategic Framework for Mental Health and Learning Disability Services 2020-2025.
<b>Report Number</b>	<i>HSCP.19.108</i>
<b>Lead Officer</b>	<i>Sandra MacLeod, Chief Officer</i>
<b>Report Author Details</b>	<i>Name: Kay Dunn Job Title: Lead Planning Manager (Grampian MHL D Review) Email Address: <a href="mailto:kay.dunn1@nhs.net">kay.dunn1@nhs.net</a> Phone Number: 01224 557840</i>
<b>Consultation Checklist Completed</b>	Yes
<b>Directions Required</b>	No
<b>Appendices</b>	a. Grampian-wide Strategic Framework for Mental Health and Learning Disability (2020-2025)

### 1. Purpose of the Report

- 1.1. The purpose of the report is to seek approval of the Grampian-wide Strategic Framework for Mental Health and Learning Disability (MHL D) 2020-2025.

### 2. Recommendations

- 2.1. It is recommended that the Integration Joint Board (IJB):

- a) Approve the Grampian-wide Strategic Framework for Mental Health and Learning Disability (MHL D) 2020-2025 [appendix a].
- b) Note Aberdeen City Health and Social Care Partnership (AC-HSCP), Aberdeenshire HSCP (A-HSCP) and Moray HSCP (M-HSCP) plan to refresh their respective Mental Health and Learning Disability Strategy/(ies) for community-based services in 2022.



## INTEGRATION JOINT BOARD

- c) Instruct the Chief Officer to report back on the Performance Framework and Programme Transformation Plan to Aberdeen City IJB on the 25<sup>th</sup> June 2020, Aberdeenshire IJB on 24<sup>th</sup> of June and Moray IJB on 26<sup>th</sup> of June to provide assurance of detailed plans for service redesign, timelines and measures to monitor progress and sustainability.

### 3. Summary of Key Information

#### Developing the Framework

- 3.1** In May 2019, the three Integration Joint Boards (IJBs) and the Senior Leadership Team of NHS Grampian (NHSG) jointly made a commitment to carry out a strategic review to place the Grampian system-wide Mental Health and Learning Disability (MHL) Services on a more sustainable footing.
- 3.2** The development of the Strategic Framework included a staff survey and four staff engagement workshops to ensure input from a broad range of stakeholders. Between 60 and 70 people attended the workshops which covered:
- Workshop One – current challenges and opportunities for transforming services
  - Workshop Two – moving from business as usual to the envisioned future state
  - Workshop Three – reviewing feedback from the consultation with people with lived experience of services, conducted by the Health and Social Care Alliance
  - Workshop Four – consolidation event to consider the emerging views for the future shape of services
- 3.3** The Health and Social Care Alliance (the Alliance) undertook a Grampian-wide consultation process to engage local people, communities and third sector organisations in informing the Grampian strategic review of integrated services for people who have mental health problems and those with mental health problems as well as learning disability needs. The Alliance held six afternoon and evening engagement events in five geographical areas across Grampian.
- 3.4** In total 124 people participated in the events and in excess of 650 responses, comments and statements were given. The outcome of this process was a comprehensive report from the Alliance: Listening to the Voices and



## INTEGRATION JOINT BOARD

Contribution of People. The feedback has been welcomed and has been actively used to inform the Strategic Framework.

- 3.5** The Grampian-wide Strategic Framework for MHL (2020-2025) aims to respond to all individuals, families and carers who have mental health problems, including those with mental health problems and a learning disability who require support whether their needs can be met at home, in their community or in an inpatient or specialist service setting.

### Summary of Key Messages

- 3.6** The executive summary sets out the following key messages:
- Services will integrate across partners based on the needs of the population rather than preserving institutional and professional boundaries
  - We need to focus on a shared vision of collaborative leadership in order to shift demand for services upstream
  - The population should be able to access services as local as possible and as specialist as necessary
  - The ongoing challenge to recruit to clinical and nursing posts in mental health and learning disability services is also impacting on the sustainability of our current model of care
  - The current model of care is no longer fit for purpose if we are to meet the increasing demand and more complex needs of a changing demographic
  - We need to consider and design new ways of supporting people, consider new roles and how we work together with our partners to meet the challenges
  - A change is required to get better at supporting people with maintaining their wellbeing and providing timely and effective intervention in the community
  - Where we need to support people in a hospital settings, they should have timely access to services as specialist as necessary
  - We need to work together to balance a population approach, person centred care and securing best value with the available resource



## INTEGRATION JOINT BOARD

### Leadership

- 3.7** In December 2019, a Transitions Steering Group (Grampian MHL D) was established to ensure the effective governance, management, delivery and monitoring of Grampian-wide inpatient and specialist MHL D Services and includes clinical, professional, service/business support and Staffside across NHS G and the Integration Authorities. The planned date for the transition of NHS G managed inpatient and specialist MHL D services to Aberdeen City IJB to host on behalf of Aberdeenshire IJB and Moray IJB is the 1<sup>st</sup> of April 2020.
- 3.8** In January 2020, a Transformation Board (Grampian MHL D) was established to lead the development of a Transformation Programme Plan (Grampian MHL D) to ensure the delivery of the strategic intent set out in the Grampian-wide Strategic Framework for Mental Health and Learning Disability Services (MHL D). The Transformation Board includes representation from the 3 Health and Social Care Partnerships (HSCP), MHL D Triumvirate (Clinical and Medical Director MHL D, Director of Nursing MHL D, Director of CAHMS and Director of Psychology Services NHS G), Third Sector, Police Scotland, Scottish Fire and Rescue, the Scottish Ambulance Services, NHS24, Workforce and Staffside. The Transformation Board will focus on short term actions to secure a sustainable service as well as medium to long term actions to transform the delivery of Grampian inpatient and specialist MHL D to ensure the service can meet the future needs of the population.
- 3.9** In March 2020, the Transformation Board came together for the second time to participate in a System Leadership Workshop to ensure a whole system leadership culture across our Grampian wide partners so that we can collectively lead the transformation required to put Grampian MHL D on a more sustainable footing, ensure a tiered approach, shifting more support upstream to community settings and ensuring inpatient and specialist services are accessible to those who need it.

### Transformation Programme Plan

- 3.10** In April 2020, the Transformation Board will consider a Draft Transformation Programme Plan (Grampian MHL D). The Transformation Programme Plan will set out the changes required across inpatient and specialist MHL D Services and how this will inform the planning and development of community MHL D Services delegated to the three IJBs (Aberdeen City, Aberdeenshire and Moray). The Transformation Programme Plan will set out a number of specific actions across the strategic themes of governance, policy and guidance to support integrated working, the redesign of Tier 1 to 4 Services (as set out on Page 18 of the Strategic Framework), enablement (technology,



## INTEGRATION JOINT BOARD

data, infrastructure, integrated workforce planning) and the development of a Quality Indicators Framework (including sustainability measures).

- 3.11** In April 2020, the Transformation Board (Grampian MHL D) will establish the associated Workstreams so that we can engage further with staff, partners and people with lived experience as we move forward with service redesign and transformation.

### Performance Framework

- 3.12** The Transformation Board (Grampian MHL D) are working with NHSG Health Intelligence colleagues to develop a Grampian MHL D Performance Framework. This will include operational data, agreed measures for sustainability and the national Quality Indicators and will be embedded in the Aberdeen City IJB Performance Dashboard. Regular performance reporting will be undertaken in line with the Aberdeen City IJBs performance reporting and shared across NHSG, Aberdeenshire IJB and Moray IJB.

### Governance Framework

- 3.13** The Transitions Steering Group (Grampian MHL D) was established in December 2019 to ensure the effective governance, management, delivery and monitoring of Grampian-wide inpatient and specialist MHL D Services as we transition to host arrangements. There is representation from clinical, professional, service/business support and Staffside across NHS Grampian and Aberdeen City, Aberdeenshire and Moray IJBs. The Transitions Steering Group (Grampian MHL D) has developed a Governance Framework to ensure clear lines of financial, clinical and care governance and educational governance are in place across delegated community MHL D and hosted inpatient and specialist MHL D Services to ensure an integrated whole system approach. There is agreement across the 3 IJBs and NHSG that a review of the governance structures for delegated community MHL D Services and hosted inpatient and specialist MHL D Services will be completed by September 2020. The Transformation Board (Grampian MHL D) will take account of the recommendation and make any recommended changes.

### Scope of the Framework

- 3.14** Grampian inpatient and specialist MHL D Services include the following areas:

- Inpatient and specialist services at the Royal Cornhill Hospital
- Inpatient and specialist services at Elmwood at Royal Cornhill Hospital
- Residential Community Rehabilitation Service at Polmuir Road



## INTEGRATION JOINT BOARD

- Residential Forensic Community Rehabilitation Facility at Great Western Lodge
- Psychotherapy (outpatient)
- Eating Disorder Service (outpatient)
- Eden Unit (North of Scotland)
- Managed Clinical Network for Eating Disorders
- Adult Liaison Psychiatry Service
- Older Adult Liaison Psychiatry Service
- Unscheduled Care
- Rehabilitation Services (outpatient) for Adult Mental Health
- Forensic Services
- Perinatal Services
- Gender Identity Services
- Child and Adolescent Mental Health Service
- Business and Support Management Services across inpatient and specialist services

**3.15** Since April 2016, NHSG delegated the strategic planning and management of community based MHLD to Aberdeen City, Aberdeenshire and Moray IJBs. This includes Adult Community Mental Health Teams, Older Adult Community Mental Health Teams, Substance Misuse Services and Learning Disability Community Teams. Moray IJB also has delegated authority for the inpatient services at Dr Gray's Hospital in Elgin (Ward 4) and Seafield Hospital in Buckie (Muirton Ward). Aberdeenshire IJB also has delegated authority for inpatient services in community hospitals at Fraserburgh (Bruckley Ward), Inverurie (Ashcroft Ward) and Banchory (Scolty Ward). Strategic Delivery Plans exist across the three IJBs. A Governance Framework, Communication and Stakeholder Engagement Plan and Risk Register for the Grampian-wide Framework have been developed to ensure any service redesign identified in the Transformation Programme Plan for inpatient and specialist services are managed, dependencies understood and risk assessed and mitigated system wide.

**3.16** Grampian MHLD provides inpatient and specialist services for other IJB areas which include inpatient beds for Orkney and Shetland and the Eden Unit for the North of Scotland. Inpatient beds are also purchased for medium secure at Rohallian Perth and inpatient services for young people in Dudhope Dundee. Regional and National dependencies and risks have been taken into account in the development of the Governance Framework and Transformation Programme Plan.





## INTEGRATION JOINT BOARD

3.17 The Strategic Framework is being presented to Aberdeen City IJB on 24<sup>th</sup> of March, and Aberdeenshire IJB on 25<sup>th</sup> of March 2020, Moray IJB on 26<sup>th</sup> of March 2020 for consideration with a recommendation to approve.

### 4. Implications for IJB

#### 4.1. Equalities

4.1.1 The Strategic Framework has been through an Equality Human Right Impact Assessment (EHRIA) and submitted to committee services and recommendations have been taken into account in the final version of this document.

4.1.2 Following the development of a Transformation Programme Plan (MHL D), further EHRIA assessments will be undertaken at a programme and project level to ensure the IJBs fully understand the impact of any recommended changes to service delivery.

4.1.3 The strategic intent set out in the Grampian-wide Framework for MHL D could lead to the following positive impacts on those with protected characteristics:

- **Age** - some services may be increased up to the age of 18 years for children and young people experiencing mental health problems / or both a learning disability and mental health problems (e.g. social work services in line with the national direction)
- **Disability** – redesigned provision to improve the support and crisis support upstream in Tiers 1 and 2 (community services) and a redesign of Tier 4 (specialist and inpatient services) for people in Grampian for those living with a Mental Health Problems and a Learning Disability to improve outcomes
- **Gender reassignment** – further development of the pathway to improve access to Gender Identity Services in Grampian
- **Marital Status** – no direct impact
- **Pregnancy and Maternity** – further development of the pathway to improve access to perinatal services in Grampian
- **Race, Religion or belief or Non-belief** – no direct impact
- **Sex, and** – no direct impact
- **Sexual Orientation** – no direct impact

#### 4.2. Fairer Scotland Duty

4.2.1 Mental health and wellbeing affects all communities and people of all socio-economic status. However, there is a higher prevalence of mental ill health



## INTEGRATION JOINT BOARD

and mental illness in communities where there is socio-economic disadvantage. IJBs are committed through their Locality Plans to take account of socio-economic disadvantage in respect of the allocation of resources according to the needs of population. The design and delivery of Grampian-wide inpatient and specialist MHL D Services will require a balance of a population approach, person centred care and securing best value with the available resource. The design and delivery of Grampian-wide services will take account of the population needs across the three IJB areas.

### 4.3. Financial

- 4.3.1 The Net Budget for Grampian MHL D Services for 2020 to 2021 is £37M and NHSG Finance are forecasting a £1.8M overspend. The Grampian MHL D Services are also planning to achieve a 2% efficiency (£750,000) so the expected budget to be transferred by NHSG to cover the projected spend is £38M (subject to inflation and earmarked funds adjustments).
- 4.3.2 Given the financial pressures in the whole system there is an expectation that any service delegated is fully funded, so as not to place financial pressure on the IJBs or the other partners who may need to pick-up a share of any overspend.
- 4.3.3 On 1<sup>st</sup> of April 2020, NHS Grampian plan to transfer the revenue budget to the Aberdeen City IJB and will ensure resource is available for the forecasted spend on Grampian-wide inpatient and specialist MHL D Services. There is currently a financial deficit within the inpatient and specialist MHL D services. NHS Grampian have agreed to underwrite any financial loss on inpatient and specialist MHL D Services for up to two financial years (from 1<sup>st</sup> of April 2020 to 31<sup>st</sup> of March 2022).
- 4.3.3 If a financial deficit remains at the end of this period, then after discussion and agreement with NHS Grampian, the three IJBs and the respective local authorities, an agreed budget will be proposed for approval by respective Boards.
- 4.3.4 The delivery of the strategic intent set out in the report aims to ensure inpatient and specialist MHL D services are on a more sustainable footing for the future and delivered within the agreed budget to be set in consultation with the NHSG and 3 IJB.
- 4.3.5 All redesign projects under the Transformation Programme Plan will go through robust and costed business case option appraisal and any funding





## INTEGRATION JOINT BOARD

requirements will be submitted to the IJBs and NHSG for scrutiny and consideration for approval.

### 4.4. Workforce

4.4.1 The delegated functions will not lead to changes in the Terms and Conditions of staff, who will remain employed by NHS Grampian, Aberdeen City Council, Aberdeenshire Council or Moray Council.

4.4.2 Any changes arising from the Transformation Programme Plan will go through the workforce, Staffside and staff engagement processes set out by the respective employer organisations (NHSG, Aberdeen City Council, Aberdeenshire Council and Moray Council). Staff will be engaged in the work streams arising from the Transformation Programme Plan and will receive regular briefings. Staff engagement has been identified in the Communication and Stakeholder Engagement Plan and Risk Register.

### 4.5. Legal

4.5.1 No direct legal implications have been identified.

### 4.6. Other

4.6.1 None identified.

## 5. Links to ACHSCP Strategic Plan

5.1. Resilience - working with our partners to support people so that they can cope with, and where possible, overcome the health and wellbeing challenges they may face.

5.2. Personalisation – ensuring that the right care is provided at the right place at the right time when people are in need. Ensuring that our systems are as simple and efficient as possible.

## 6. Management of Risk

### Financial Risk

6.1 The Grampian MHL D Services are also planning to achieve a 2% efficiency (£750,000).

6.2 The Net Budget for Grampian MHL D Services for 2020 to 2021 is £37M and NHSG Finance are forecasting a £1.8M overspend. The Grampian MHL D



## INTEGRATION JOINT BOARD

Services are also planning to achieve a 2% efficiency (£750,000) so the expected budget to be transferred by NHSG to cover the projected spend is £38M (subject to inflation and earmarked funds adjustments). NHS Grampian have agreed to underwrite any financial loss on inpatient and specialist MHL D Services for up to two financial years (from 1<sup>st</sup> of April 2020 to 31<sup>st</sup> of March 2022).

- 6.3** If a financial deficit remains at the end of this period, then after discussion and agreement with NHS Grampian, the three IJBs and the respective local authorities, an agreed budget will be proposed for approval by respective Boards.
- 6.4** There are no direct financial risks arising from the approval of the Strategic Framework. The Transformation Programme Plan will aim to ensure whole system collaboration to better balance a population approach, person centred care and secure best value with the available resource. Any financial implications arising from the Transformation Programme will be fully appraised and considered for approval by the IJBs and NHSG.

### **Governance Risk**

- 6.5** There is a perceived risk that transition to delegated services could have an impact on the clinical and care governance of inpatient and specialist MHL D Services. In order to provide assurance, the Transitions Steering Group (Grampian MHL D) has developed a Governance Framework to set out clinical, care and financial governance arrangements for delegated community services across Aberdeen City, Aberdeenshire and Moray IJBs and delegated inpatient and specialist services hosted by Aberdeen City IJB on behalf of the Aberdeenshire and Moray IJBs.

### **Legal Risk**

- 6.6** No direct legal risks have been identified at this time. Any major change to service delivery arising from the development of the Transformation Programme Plan will be managed in line with the guidance set out in the Scottish Health Councils Major Service Change process and timeline for public consultation.



## INTEGRATION JOINT BOARD

### 7. Link to risks on strategic or operational risk register:

1.	There is a risk that there is insufficient capacity in the market (or appropriate infrastructure in-house) to fulfil the IJB’s duties as outlined in the integration scheme. This includes commissioned services and general medical services.	High
2.	There is a risk of financial failure, that demand outstrips budget and IJB cannot deliver on priorities, statutory work, and projects an overspend.	High
3.	There is a risk that the outcomes expected from hosted services are not delivered and that the IJB does not identify non-performance in through its systems. This risk relates to services that Aberdeen IJB hosts on behalf of Moray and Aberdeenshire, and those hosted by those IJBs and delivered on behalf of Aberdeen City.	High
4.	There is a risk that relationship arrangements between the IJB and its partner organisations (Aberdeen City Council & NHS Grampian) are not managed to maximise the full potentials of integrated & collaborative working. This risk covers the arrangements between partner organisations in areas such as governance; corporate service; and performance.	Low
5.	There is a risk that the IJB, and the services that it directs and has operational oversight of, fail to meet both performance standards/outcomes as set by regulatory bodies and those locally-determined performance standards as set by the board itself. This may result in harm or risk of harm to people.	Medium
6.	There is a risk of reputational damage to the IJB and its partner organisations resulting from complexity of function, delegation and delivery of services across health and social care.	Medium
7.	Failure to deliver transformation at a pace or scale required by the demographic and financial pressures in the system.	High

The Transformation Board (Grampian MHL D) is developing a Strategic Risk Register for the Programme. The Strategic Risks will be included in the Strategic Risk Register of the Aberdeen City IJB and the Operational Risks currently reported within the NHSG Risk Register will be incorporated into the Aberdeen City IJB Operational Risk Register. The Strategic Risks and Operational Risk for Grampian MHL D will be escalated as appropriate within the procedures set out across the three IJBs and NHSG Board.

#### 7.1. How might the content of this report impact or mitigate these risks:

7.1.1 Risk 1 – the Transformation Programme Plan has identified key actions to (i) develop a Market Position Statement and (ii) a Commissioning Framework to ensure the Third Sector Interfaces across Grampian can support the market to develop the level of maturity required to support the delivery of Tier 1-4 MHL D Services.



## INTEGRATION JOINT BOARD

- 7.1.2** Risk 2 – the approval of the revised Scheme of Integration Report MHL D to be considered by the IJB, Council and NHS Grampian Boards with regard to financial arrangements aims to mitigate the financial risk of the gap between the budget and actual spend for inpatient and specialist MHL D Services.
- 7.1.3** Risk 3 – the development of a Performance Dash Board for Grampian-wide MHL D Services will ensure implementation of the 30 National Quality Indicators and other nationally and locally directed Key Performance Indicators to ensure the effective monitoring and reporting of community, inpatient and specialist MHL D Services to the respective NHS G and IJB Boards.
- 7.1.4** Risk 4 – the Sponsoring Group for all delegated hosted services is the North East System Wide Transformation Board to ensure cross system working across NHS G, IJBs and Council partners.
- 7.1.5** Risk 5 – a Quality Assurance Framework to report on performance across the 30 National Mental Health Indicator and additional Quality Assurance Measures for Learning Disability are being developed on an NHS G Performance Scorecard Dashboard by 1<sup>st</sup> of April 2020 and to the IJBs by June 2020. Most areas are still unable to report on all indicators and are awaiting further national guidance on reporting methodology to embed these within operational systems.
- 7.1.6** Risk 6 – the development of a robust Governance Framework for Grampian-wide MHL D Services (community, inpatient and specialist) will ensure clarity of function, delegation and delivery of services across health and social care for delegated community and delegated inpatient and specialist services hosted by the Aberdeen City IJB.
- 7.1.7** Risk 7 – in March 2020, a Whole System Leadership Development Session has been planned for the Transformation Board (Grampian MHL D) to ensure collective understanding and commitment to the change required (as articulated in the Executive Summary of the Framework). In addition, Managing Successful Programme Methodology (MSP) is being followed so that roles, responsibilities and accountabilities are clearly defined for the Transformation Steering Group (Grampian MHL D), Transformation Board (Grampian MHL D) and associated Work Streams (programme and project level).

### Approvals



## INTEGRATION JOINT BOARD

<i>These will be added once your report has final approval for submission to committee.</i>	Sandra MacLeod (Chief Officer)
<i>These will be added once your report has final approval for submission to committee.</i>	Alex Stephen (Chief Finance Officer)