



INTEGRATION JOINT BOARD

Date of Meeting	19 November 2024
Report Title	Getting it Right for Everyone and Putting People First
Report Number	HSCP.24.083
Lead Officer	Shona Omand-Smith
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Consultation Checklist Completed	No
Directions Required	No
Exempt	No
Appendices	a) GIRFE toolkit b) Putting People First Summary Report c) Presentation for IJB
Terms of Reference	Performance 4. Approve, monitor and review a performance framework for the IJB in respect of its policy objectives and priorities in relation to all delegated functions of the IJB. This includes ensuring that the Chief Officer establishes and implements satisfactory arrangements for reviewing and appraising service performance against IJB budgets, the National Health and Wellbeing outcomes, the associated core suite of key performance indicators and other appropriate local objectives and priorities



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1. Purpose of the Report

- 1.1. This report seeks to provide IJB members with an update on the progress of the Getting it Right for Everyone (GIRFE) Pathfinder work and NHS Grampian's Putting People First approach.

2. Recommendations

- 2.1. It is recommended that the Integration Joint Board:
- a) notes the content of the report on GIRFE and Putting People First; and
 - b) endorses the collaborative approach being taken to align approaches into a clear whole system approach.

3. Strategic Plan Context

- 3.1. One of the strategic aims of the Aberdeen City Health and Social Care Partnership (ACHSCP) strategic plan is Caring Together which ensures we are working with people and communities to ensure decisions are made together and that services can be delivered which ensures they have access to the right care, at the right time and in the right way. This aim is at the heart of both GIRFE and Putting People First which aims to work with people to ensure they have access to high quality care which is accessible and safe and that they are treated with dignity and respect by everyone who works with them. The strategy also requires a whole system approach and close working with NHS and other key partners. We are bringing these two updates together to demonstrate the collaborative and cross system approach we are taking.

4. Summary of Key Information

- 4.1. In 2022, ACHSCP and Aberdeen City Council applied to become a Pathfinder on two of the five thematic areas of GIRFE:
- Older Adults and frailty; and
 - Families with multiple and/or complex needs and young people in transition from GIRFEC to GIRFE.



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As set out in the Chief Officer's report to the Integration Joint Board on 31 January 2023, the application was successful, and Aberdeen City was selected as one of 11 successful areas. The person-led approach to the programme which puts people at the centre of the decision-making processes is, as set out above, aligned to our Strategic Plan. Pathfinder status was considered as an enabler to reshaping a better health and social care support service for the residents of Aberdeen now and in the future.

- 4.2. GIRFE is a multi-agency approach to health and social care support and services from young adulthood to end of life care. GIRFE builds on existing best practice and learning from getting it right for every child (GIRFEC). GIRFE is part of a programme to improve population health and wellbeing, reduce health inequalities, create sustainable health, and care services. will provide a national practice model to embed inter-agency working. It works in line with the community health and social care integrated service framework and provides a model to deliver the framework that supports person centred outcomes.
- 4.3. ACHSCP worked with other pathfinders and partners, the GIRFE team from Scottish Government and with local people on the GIRFE design school which is based on the Scottish approach to service design. The process followed four phases discover, define, develop, and deliver. This support model helped to build relationships, get ready for co-design work and engage people with lived experience on the specific thematic area, problem exploration or redesign challenges.
- 4.4. Aberdeen City, through the design process, has helped shape the design and development of a national toolkit which is designed to deliver a more personalised way to access help and support when it is needed. Locally, the GIRFE ethos and principles have been embedded into all new contracts including those with Bon Accord Care, Granite Care Consortium and the Supported living and Complex Care frameworks. This ensures that GIRFE is the approach the service will take to ensuring they are getting it right for everyone across Aberdeen City. Key Performance Indicators (KPI's) are in the process of being co-designed with providers, this will further embed the GIRFE approach. So far, Aberdeen is the only Pathfinder who is taking this approach to embed GIRFE into contract co-design and contracts with services and other areas across Scotland are actively engaging with us on our approach.
- 4.5. As part of the pathfinder process, Aberdeen has helped to inform the development of a national toolkit to help inform a person led approach to



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managing transitions between children's services and adult services. This included the application of feedback from parents in Aberdeen who have experience in local arrangements. To help improve the experience of those that are cared for and their families when moving between children's and adults' services, a multi-agency group was recently established in Aberdeen. This group will seek to apply the new GIRFE toolkit to its activities and an update on the work of the group will be provided to the IJB in the first half of 2025.

- 4.6. The ambition of GIRFE is to place the person at the centre of all decision making, with a joined up consistent approach, regardless of the support needed at the stage of their life. The work has culminated in the development of a national toolkit (see appendix A) focusing on developing a 'Team around the person,' which can help support the move towards a person-led approach.
- 4.7. ACHSCP has further ambitions to work in connection with other national approaches to development of a person led approach to service delivery. ACHSCP has committed to working with Health Improvement Scotland (HIS) for the next eighteen months on implementing a Human Learning Systems approach. Human learning systems is an approach that starts with the belief that public service exists to support human freedom and flourishing and will enable us to learn and experiment with the aim of designing better systems and services which will ensure that we are Putting People First.
- 4.8. Putting People First is a Grampian initiative based around four key guiding principles:
 - We always put people first
 - Collaborate always
 - We value each other as equals
 - We care about our shared purpose and learn together.

There are four workstreams which will help embed the aim and vision of the programme:

- Supporting people's skills and confidence
- Developing community led health responses
- Increase public voice in public service
- Grow a network of innovators.



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- 4.9.** NHS Grampian's Plan for the Future articulates an ambition to change the relationship with the public so we can create a more preventative system and develop sustainable models of care rooted in communities. A focused piece of work has been undertaken to help refresh NHS Grampian's approach to how to involve and listen to people in line with evidence on effective community engagement. The output from this is NHS Grampian's Putting People First approach. The Putting People First approach (see Appendix B) requires a shift towards building relationships with communities and creating two-way ongoing dialogue to help create more preventative and sustainable models of care. It recognises that to succeed, this will need to be developed with local HSCPs and Community Planning Partnerships.

Mindful of the culture change required and the financial pressures facing the health and care system, the three horizons model provides a framework where over the next two years, the focus is on setting the foundations for Putting People First through the following workstreams:

- Increasing people's skills and confidence in listening to and involving others
 - Developing Community Appointment Day and other community led health approaches
- 4.10.** Increasing the feedback we receive and acting on what we hear making listening to and involving people a visible priority and growing a movement of collaborators and sharing learning across the system. Aberdeen HSCP is involved and actively collaborating across all four workstreams.
- 4.11.** We recognise multiple but similar approaches (e.g., GIRFE, Human Learning Systems, Putting People First) can be confusing for staff and public. We also recognise that resources are limited, and we are going to be more impactful where we work collaboratively across aligned agendas. ACHSCP will work with partners to work together to refine and simplify where possible and maximise the opportunities these approaches provide to drive forward our prevention agenda. ACHSCP will seek to embed the approaches into the new IJB Strategic Plan for 2025-2029. This will promote an approach across all ACHSCP services that is in line with person led and outcome focused care for the citizens of Aberdeen.

5. Implications for IJB

There are no direct legal / financial / workforce implications arising from the recommendations set out in the report.



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5.1. Equalities, Fairer Scotland and Health Inequality

For the purposes of this report, an IIA is not required.

5.2. Financial

The GIRFE programme from Scottish Government has come with no additional resources or funding and has been supported by ACHSCP.

The risks have been mitigated in regard to the balancing of staff and work to ensure the GIRFE work can progress with minimal impact on other pieces of work.

There are no additional financial impacts going forward.

5.3. Workforce

there are no direct workforce implications arising from the recommendations of this report.

5.4. Legal

There are no direct legal implications arising from the recommendations of this report.

5.5. Unpaid Carers

Unpaid carers have been supported to be part of the co-design discussions with GIRFE to help shape the national resource toolkit and will be part of The work going forward for Putting People First

5.6. Information Governance

There are no direct information governance implications arising from the recommendations of this report.

5.7. Environmental Impacts

There are no direct environmental implications arising from the recommendations of this report.



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5.8. Sustainability

There are no sustainability considerations to be detailed as a result of this report.

6. Management of Risk

Financial risks	low
Regulatory compliance risks	low
Risks to quality and innovation outcomes	low
Risk of harm to patients/clients and staff	low
Reputational risk	low
Risks relating to commissioned and hosted services	low

6.1. Identified risks(s)

The main risk to the projects is staffing risks, this is due to both programmes of work not receiving any additional resources but are being carried out as an additional task. The risks have been mitigated as these programmes of work have been identified as work with could improve and positively influence the culture and quality of care delivery across Grampian, and indeed Scotland.

The staff involved in the programmes have been well supported operationally by line management and strategically via senior leadership engagement and commitment to seeing the programmes through to completion.

6.2. Link to risks on strategic or operational risk register:

There are risks as highlighted above in relation to the staffing resources.