



Aberdeen City Health & Social Care Partnership

A caring partnership

Integration and Change Programme

Acceleration and Pace Highlight Report

- **Organisational Development & Cultural Change**
- **IT, Infrastructure and Data Sharing**
- **Modernising Primary & Community Care**
- **Supporting Self-Management of Long Term Conditions and Building Community Capacity**
- **Strategic Commissioning**
- **Acute Care @ Home**

**Highlight
Report 2.1**

**Jan - Feb
2017**
1/1 0

Overall Integration and Change Programme

The Aberdeen City Health and Social Care Partnership's Integration and Change Programme seeks to deliver the transformational change that is required for the partnership to deliver its strategic priorities.

General Comments:

Much of the overall integration and change programme is at the Define stage – including the development of options appraisals and business plans. Once the overall programme moves more into Implement stage, this report will also incorporate an overall plan timeline.

Overall progress is slower than desired due to gaps in programme management capacity. Work is ongoing to progress additional posts early in 2017.

Activities and Projects within the programme are categorised as follows:

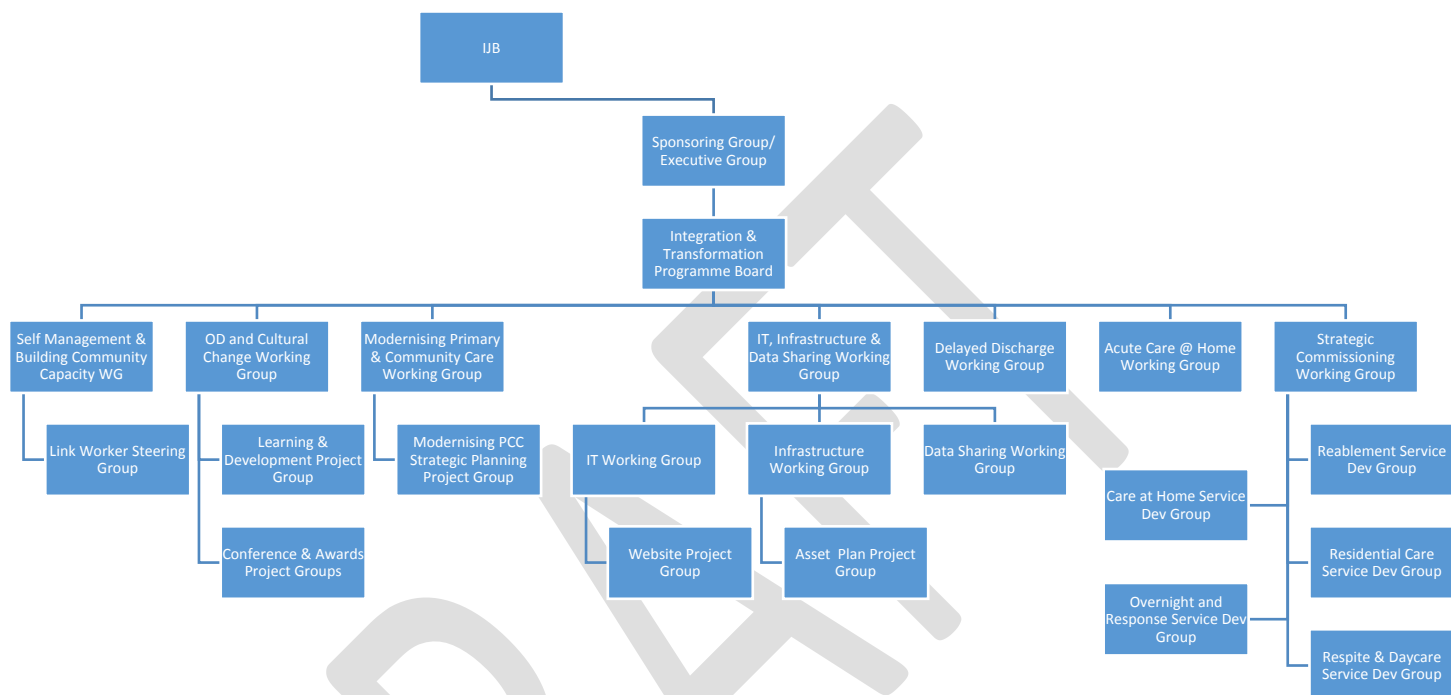
- **TRANSFORMATIVE** – activities that are intended to change the current operating arrangements into new, different operating arrangements
- **INNOVATIVE** – activities that will introduce a new way of working into the current operating system
- **ENABLING** – activities and infrastructure which are essential to support innovation and transformation to happen.

Key Risks

RISK	DESCRIPTION	LIKELIHOOD/ IMPLICATION	MITIGATION
Failure to deliver transformation required	Failure to deliver the scale of transformation required within the timescales that additional funding is available, or within the time available before service demand is unsustainable.	MED/ HIGH	Recruitment of additional resource to support the delivery of the transformation programme Scrutiny of progress via Programme Board/ Exec Group and Audit and Performance Systems Committee
Engagement & Change Strategy	Managing change with staff and partners may not be successful due to complexity of programme and other operational pressures	HIGH/ HIGH	Develop communications strategy Key stakeholders/ leaders as Programme Board members OD and Cultural Change Programme will provide development training
Sustainability of transformational change	There is a risk that new ways of working do not release resource within the overall system or that "blockages" prevent old system resource from transferring to new systems.	HIGH/ HIGH	Key stakeholders as Programme Board members Robust business planning and scrutiny to identify where resource will be released from and to allow "blockages" to be identified early. Ongoing review at key milestones to check that outputs remain aligned with corporate objectives
Failure to realise anticipated benefits of programme	The programme does not clearly articulate the anticipated benefits, and/or the anticipated benefits are not delivered.	MED/ MED	Benefits realisation workshop planned with Programme Board. Robust business planning process to clearly set out anticipated benefits. Programme Board and Working groups tasked to ensure benefits are identified and realised. Additional resource identified to evaluate/ measure benefits realisation
Failure to balance	The balance of resource/	MED/ MED	Operational managers (as Business Change

transformation with business as usual	capacity allocated to change activities impacts on ability to deliver business as usual.		Managers) are on Programme Board. Change process builds in double running resources where required.
---------------------------------------	--	--	--

Programme Management Governance Structure:



Overall Programme Expenditure

Work stream	Projected Spend 2016/17	Actual Spend to date 2016/17*	Projected Spend 2017/18	Legally Committed Spend 17/18	Projected Spend 2018/19	Legally Committed spend 18/19
Supporting Transformation Infrastructure	£851,223	£335,170	£1,349,408	£0	£1,031,361	£0
Infrastructure, IT and Data Sharing	£580,726	£247,043	£1,292,208		£854,805	
Acute Care At Home	£14,804	£2,870	£1,150,000	£0	£1,270,000	£0
Supporting Management of Long Term Conditions and Building	£443,685	£325,430	£1,495,075	£0	£1,282,700	£0

Work stream	Projected Spend 2016/17	Actual Spend to date 2016/17*	Projected Spend 2017/18	Legally Committed Spend 17/18	Projected Spend 2018/19	Legally Committed spend 18/19
Community Capacity						
Modernising Primary & Community Care	£1,745,351	£212,681	£1,755,818	£0	£1,066,685	£0
Culture and Organisational Change	£533,000	£300,004	£1,113,600	£0	£1,054,100	£0
Strategic Commissioning and Development of Social Care	£41,605	£21,605	£420,000	£0	£370,000	£0
Delayed Discharge	£205,000	£123,629	£230,000	£0	£0	£0
	£4,415,395	£1,568,431	£8,806,109		£6,929,651	

*Note: Actual Spend to date does not include some elements of spend that are ongoing (including some salary costs) or that are reconciled at year end (such as support for prescribing).

Overall Programme Income

FUNDING AVAILABLE				£	£	£	£
	R/NR	Partner body		16.17	17.18	18.19	19.20
Integrated Care Fund	R	nhs		3750000	3750000	3750000	3750000
Integrated Care Fund c/f from 15.16	NR	nhs		2193000			
Change Fund c/f	NR	nhs		243000			
Delayed Discharge	R	nhs		1125000	1125000	1125000	1125000
Delayed Discharge c/f from 15.16	NR	nhs		921000			
Winter resilience (non recurring) c/f from 15/16	NR	nhs		190000			
Additional investment	R	acc		4750000	4750000	4750000	4750000
Primary Care Transformation	NR	meantime	nhs	270841			
Mental Health Fund	NR	meantime	nhs	146884			
Transforming Urgent Care	NR		nhs	285762			
ERDF TEC match funding	NR		acc	195000			
Care at Home/Housing	NR		acc	87000			
				14157487	9625000	9625000	9625000

Abbreviations used throughout the report:

ACHSCP: Aberdeen City Health and Social Care Partnership

ITPB: Integration and Transformation Programme Board

MPCC: Modernising Primary & Community Care






SMCC: Supporting Self-Management of Long Term Conditions & Building Community Capacity

ODCC: Organisational Development & Cultural Change

IIDS: IT, Infrastructure and Data Sharing

SC: Strategic Commissioning

AC@H: Acute Care at Home

RAG	Definition
	Successful delivery of the project to time, cost and quality appears highly likely and there are no major outstanding issues that, at this stage, appear to threaten delivery significantly.
	Successful delivery appears probable, however, management will be needed to ensure current risks do not develop into major issues threatening delivery.
	Possible but significant issues already exist, requiring management attention. These appear resolvable at this stage and if addressed promptly would not prevent an acceptable outcome.
	Successful delivery of the project is in doubt with major risks or issues apparent in a number of key areas. Urgent action is required to ensure these are addressed and determine whether resolution is feasible.
	Successful delivery of the project appears to be unachievable. There are major issues on project definition, schedule or budget, quality and/or benefits delivery which at this stage do not appear to be manageable or resolvable. The project may need re-scoping or its overall viability re-assessed.

Organisational Development and Cultural Change

1. Programme Summary and Anticipated Benefits

This **ENABLING** work stream recognises that people are key to delivering our integration and transformation ambitions. The appropriate organisational culture is an essential core building block and we will be unable to successfully embed the transformation we seek without changing the culture of our organisation and the people who make it.

Activities in this work stream support the development of the new “Team Aberdeen” culture and will ensure that people are in the right places and with the right skills and attributes to support people in communities. The work stream also recognises the anxiety many of our staff will feel as we transition into our new partnership and integrate at every point of delivery, aligning with our values of caring, person centred and enabling.

2. Programme Status

Overall RAG Status:	GREEN/ AMBER
---------------------	---------------------

3. Project progress during this period

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Organisational Development Plan	November 2016	November 2016	An organisational development plan is now in place and is progressing towards delivery.	
Effective Induction Programme	November 2016	January 2017	Induction process including a video welcome from the Chief Officer is now in place and is being implemented for all new starts to the partnership.	
Organisational Development for Senior Management Team	Not yet set	ongoing	Executive Team Away day took place in Jan 2017 including a Myers Brigg Evaluation.	
Wider Leadership Development Support	Not yet set	ongoing	SSSC providing Collaborative Leadership in Practice Programme to members of Central Locality Leadership Group – ongoing.	
Ensure a fit and healthy workforce	November 2017	ongoing	12 month transition arrangements agreed while review of Healthy Working Lives and options appraisal to ensure sustainability is undertaken.	
Ongoing Board Development, systems and governance testing	31/3/17	ongoing	GGI continuing to support members of Clinical and Care Governance Committee as part of ongoing board development.	
Ideas Hub: “Our IDEAS”	April 2017	ongoing	Soft launch of “OurIDEAS” innovation platform at ACHSCP conference in November 2016. Full launch took place in January 2017.	Development of comms plan and processes ongoing.

ACHSCP Conference: Taking Care of Transformation	30/11/16	30/11/16	First partnership conference took place on 30/11/16. Positive feedback received.	
HEART Awards	16/2/17	16/2/17	First partnership awards event took place in February 2017.	

4. Change Control

Change	Impact	
	Budget/Resource	Schedule
Social Care Campus – stop and review	Projected £730k (17/18), £778k (18/19) This change could result in the removal of these project costs from programme plan.	None – reconsidered requirement for this service.

5. Issues and Opportunities *New and Update*

Current challenges relate to lack of Programme Management capacity to progress projects at a desired pace. This is anticipated to be resolved over the coming months through the appointment of additional capacity.

6. Major Risks *New and Update*

No major risks identified in current period.

7. Outlook and Next Period

Anticipated milestones for the coming period include:

- Progress towards recruitment of Learning and Talent Lead Officer

IT, Infrastructure and Data Sharing

1. Programme Summary and Anticipated Benefits

This **ENABLING** programme considers Infrastructure, ICT, Technology Enabled Care and Data Sharing, which present significant and complex challenges and opportunities, and are essential for realising our integration and transformation ambitions.

The delivery of activities within this work stream will be critical to supporting delivery of other transformation programmes, including: the Modernising Primary and Community Care programme, including the provider of smart devices to support our workforce directly caring for people in our communities; the Self-Management and Building Community Capacity programme, including the provision of technology enabled care to support people in communities to effectively self-manage their long term conditions.

2. Programme Status

Overall RAG Status:	GREEN/ AMBER
---------------------	---------------------

3. Project progress during this period

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Capacity in place to deliver programme activities	1/4/17	ongoing	ITPB approved proposal for additional resource to drive forward this workstream. Related expenditure was approved by IJB on 31/1/17. Recruitment processes are now underway in line with Partners standard processes.	
Partnership Website	31/3/18	ongoing	A brief for the new website is currently being developed, including plans for the technical development and content management of the site. It is planned to procure the technical development and employ content management/ marketing expertise on a two year fixed term period.	
Information Sharing Hub - Odro	31/12/17	Currently in trial phase	The "Odro" trial is currently ongoing, with 15 web based virtual meeting rooms available for use. Using these virtual meeting rooms reduces need to travel to meetings and does not require any specific software. "Attend Anywhere" (an alternative system) will also be considered during the one year trial phase. Odro supplier has now modified system to include an option for rooms to be "locked" in order to facilitate use for confidential meetings including clinical consultations.	The odro system presents a challenge in how it could be rolled out on a wider basis linked to how virtual room bookings can be managed. Potential solutions are being discussed with the supplier.

Management Systems Workstream (incl. HR systems, payments, expenses etc.)	31/10/17	ongoing	A list of NHS management systems in use has been drawn up. A list of Council systems is now in the process of being developed to add to this list.	As new managers move into posts supporting ACC and NHSG employees, it is important that access to appropriate systems is in place.
---	----------	---------	--	--

4. Change Control

Change	Impact	
	Budget/Resource	Schedule
No substantive changes during current period		

5. Issues and Opportunities *New and Update*

Progress is slower than desired due to a general lack of project and programme management capacity. The required capacity required specific to ICT, Technology Enabled Care and Data Sharing has been identified and approved and is being progressed. It is hoped that this additional resource will be in place by April 2017.

6. Major Risks *New and Update*

No major risks identified in current period.

7. Outlook and Next Period

Anticipated milestones for the coming period include:

- Federate ACC and NHS emails and calendars through a common mailbox function – Office 365 will be rolled out as a trial with 30 users including ACC and NHSG employees.
- A review/ re-focus of the Technology Enabled Care priorities within this work stream, through the creation of a clear vision and framework.
- A preferred approach around data sharing and the development of Information Sharing Protocols will be presented to key stakeholders in February 2017, with a recommendation of forming a Grampian Data Sharing Board to drive forward some of the key challenges within this work stream.

Modernising Primary & Community Care Programme

1. Programme Summary and Anticipated Benefits

This work stream includes a range of predominantly **TRANSFORMING** and **INNOVATION** projects:

- Collaborative working, in locality hubs, with increased pharmacist provision, social work links and GP led beds to help to reduce admissions to hospital
- locality hubs supported by the design of integrated health and care teams, and investigating new models such as Buurtzorg and Advanced Nurse Practitioners
- New service delivery models primary care and modernising of infrastructure

2. Programme Status

Overall RAG Status:	GREEN/ AMBER
---------------------	---------------------

3. Project progress during this period

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Service Plan for Modernisation of Primary Health and Care Services	July 2018	ongoing	Terms of Reference and Governance Paper has been developed along with PID.	Progress to deliver the plan is anticipated to be slower than planned due to delay in recruiting additional resource.
GP Practice new ways of working	No end date identified	ongoing	GP workshop planned to share and discuss different models for triage. Dyce and Denburn are currently scoping out options for collaborative working.	Define Stage.
Community and Locality Hubs	No end date identified	ongoing	Middlefield Community Hub incorporating Healthy Hoose is now operational (from 9/1/17). Frailty and Falls pathway being reviewed.	Define/ Implement stage.
Community Mental Health Hubs	March 2019	ongoing	Business case for creation of Community Mental Health Hubs within Localities approved at ITPB February 2017. Recruitment to the associated posts now progressing.	Test will run for an initial 2 year period and will be evaluated after one year of operation to ascertain benefits realised.
Buurtzorg Community Nursing and Care Teams	June 2018	ongoing	Work is ongoing to develop a comprehensive business case. It is planned to test this approach in two local communities. A governance and shadow operational group has been established to drive the project forward.	
GP Led Step up/ Step Down Care Home Beds	No end date identified	ongoing	Letter has gone to all GP practices with initial scoping questions. Outputs of this exercise and options appraisal will be considered by MPCC working group in March 2017.	Define stage.

Community Phlebotomy Service	31/12/17	ongoing	Community Phlebotomy service options appraisal complete and business case for preferred option being developed.	It is anticipated that benefits for this service will include releasing pressure on existing community nursing teams as well as releasing capacity.
Primary care capital developments	31/7/17	ongoing	All PPM documentation for Denburn Practice replacement now in place. Outline business case currently in development and scheduled for completion in Mar 17.	
Clinical Governance Intranet	31/3/19	Not yet commenced.	Agreed to proposal to develop Clinical Governance Intranet over a three year period at MPCC Working Group 14/12/16.	Dependent on funding being agreed from other 2 IJBs and NHS Modernisation.

4. Change Control

Change	Impact	
	Budget/Resource	Schedule
New clinical roles – Primary Care Mental Health Community Hub, linked to bid to Scottish Government for Primary Care Mental Health monies. Change from proposal to create Link Worker posts to the creation of a more senior Clinical Psychologist role in the community. Considered and approved at ITPB on 6/12/16.	All Primary Care Mental Health Funding is now allocated to testing Community Mental Health Hubs. Link Workers are included, resourced and planned for in SMCC work stream.	No impact.

5. Issues and Opportunities *New and Update*

Confirmation has been received that ACHSCP will receive £285,762 of funding for “Transforming Urgent Care”. This funding is for a single year and supporting projects are in process of being scoped.

Delays in additional Programme Management capacity

6. Major Risks *New and Update*

No major risks identified in current period.

7. Outlook and Next Period

Anticipated milestones for next reporting period include:

- Community Phlebotomy service business case anticipated to come to MPCC working group in March 2017.
- Options appraisal for GP led bed test of change in locality anticipated to come to MPCC working group in March 2017.

Supporting Self-Management of Long Term Conditions and Building Community Capacity

1. Programme Summary and Anticipated Benefits

This work stream recognises that pressures on mainstream primary and community care services cannot be reduced through a “more of the same” approach. The work stream seeks to shift our relationship with communities to enable a more co-productive approach and to nudge the culture towards being more empowered and responsible in relation to ourselves and each other. A number of referrals and appointments in primary care currently relate to social issues and low level anxiety/ depression, and evidence exists that this can be reduced through “non-clinical” support and link resources, embedded in the community and our locality teams.

To deliver population level impact and change we need to go beyond small tests of change and develop at scale activities.

2. Programme Status

Overall RAG Status:	GREEN/ AMBER
---------------------	---------------------

3. Project progress during this period

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Working Group in place	December 2016	15/12/16	A working group to drive this programme of activity forward is now in place.	The group is now forming, however the delay in forming this working group has not hindered progress in some of the key associated projects.
Link Workers	March 2018	ongoing	A steering group is now in place and have developed: a detailed project plan; a brief for services. Following an event for General Practices in September 2016, 29 out of 30 practices have confirmed their interest in participating in the Links Approach. IJB approved expenditure relating to procurement in Jan 2017, and this process will now commence.	
Link App	July 2017	ongoing	Work is ongoing to map out those people in the city that “link” people and services. A Health Hack weekend considered potential options for “linking” together data and service/ community resources information.	

Community Builders	April 2018	ongoing	Work is ongoing to develop an implementation plan for Community Builders, paying attention to provide the environment to enable “bottom up” planning for this resource by communities.	This resource will build on the Asset Based Community Development promotional activities undertaken during 2015/16 (across our broader partnership).
--------------------	------------	---------	--	--

4. Change Control

Change	Impact	
	Budget/Resource	Schedule
None during this reporting period		

5. Issues and Opportunities *New and Update*

Current challenges relate to lack of Programme Management capacity to progress projects at a desired pace. This is anticipated to be resolved over the coming months through the appointment of additional capacity.

6. Major Risks *New and Update*

No major risks identified in current period.

7. Outlook and Next Period

Anticipated milestones for the coming period include:

- Development and specification of Care Navigators project.
- Commence procurement process for Link Worker Partner Provider.

Strategic Commissioning

1. Programme Summary and Anticipated Benefits

The Partnership is required by legislation to publish a strategic commissioning plan and a market facilitation plan. The commissioning plan will translate the Partnership's plan into commissioning intentions for the next six years, whilst the market facilitation plan will in turn translate the commissioning intentions into specific information to help the market prepare for forthcoming opportunities. Five work streams have been established to develop commissioning intentions in priority areas: care at home; residential care; reablement service; out of hours and response services; and respite and daycare.

Anticipated benefits include contractual arrangements that are fit for purpose; more appropriate care models; improved quality of outcomes for individuals, particularly in terms of being supported to remain safely at home for longer; and improved efficiency.

2. Programme Status

Overall RAG Status:	GREEN/ AMBER
---------------------	---------------------

3. Project progress during this period

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Work streams established	Mid December 2016	End December 2016	Leads and team members for each workstream identified and briefed. Terms of reference for each workstream agreed.	Substitute lead was required and now identified for Respite and daycare work stream.
First workstream meetings held	End of December 2016	By February 2017	Dates scheduled for all meetings other than Respite and daycare	See above
Market facilitation plan steering group established	September 2016	September 2016	Terms of reference drafted for agreement in January Three meetings of the group have taken place and a further two scheduled	
"Product" templates drafted	End December 2016	Mid January 2017	Commissioning intentions template drafted Highlight report template drafted Market facilitation plan outline drafted	Report "spines" for commissioning plan and market facilitation plan not yet drafted

4. Change Control

Change	Impact	
	Budget/Resource	Schedule
No substantial changes during current reporting period		

5. Issues and Opportunities *New and Update*

The key challenges associated with this project are around capacity to carry out the substantial work required within the timescale available. It is becoming apparent that colleagues involved in the work streams, including those from Scottish Care and ACVO, are struggling to find the time to commit to the project. The ITPB (Feb 2017) supported the provision of resource to Scottish Care to enable additional capacity.

6. Major Risks

New and Update

A risk management plan has been produced. The top risks have been identified as:

- Failure to meet deadlines
- Failure to engage effectively with key stakeholders
- Uncertain political environment

Mitigating actions are in place for each of the risks identified.

7. Outlook and Next Period

Anticipated milestones for next reporting period include:

- Draft commissioning intentions produced by each of the workstreams (end February/early March)
- Commissioning plan drafted (end March)
- Market facilitation plan drafted (end March)

Acute Care @ Home

1. Programme Summary and Anticipated Benefits

We are seeking to develop a Hospital at Home service that will provide, initially for a limited time period, active treatment by appropriate professionals, in the individual's home, of a condition that would otherwise require acute hospital in-patient care.

The development of this **INNOVATIVE** new service fits with our ambition for our strategic intentions to have a greater preventative impact especially since we know that prolonged length of stay for the frail elderly and those with long term conditions can lead to a higher risk of acquired infection and other complications such as loss of confidence, function and social networks.

Increasingly, given the choice, individuals and their carers show a preference for receiving care at home, when they have confidence that it will be provided by skilled practitioners working collaboratively to ensure continuity of care.

2. Programme Status

Overall RAG Status:	AMBER
---------------------	--------------

3. Project progress during this period

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Steering group established.		May 2016	A working group has also been established (as of October 2016) to focus on the required operational detail for this proposed service.	
Service Specification	May 2017	Ongoing	Specification is discussed at every meeting and continues to develop.	
2016/17 Budget	February 2017	Ongoing	Finance colleagues working on draft budget for proposed service.	

4. Change Control

Change	Impact	
	Budget/Resource	Schedule
No changes in current reporting period.		

5. Issues and Opportunities *New and Update*

Chief Officer has requested that an Options Appraisal is presented to the Exec team. This paper will address the delivery focus of this proposed service, namely:

- alternatives to admission
- alternatives to admission **and** effective, early discharge

Options appraisal will also address to what extent, if any the service will be available to those individuals who meet the referral criteria but who are resident in Aberdeenshire and registered with a City GP practice.

Steering group is being refreshed in January with additional representation from key sectors.

6. Major Risks

New and Update

No major risks. There is a strong consensus on desirability of developing a hospital @ home service but some key elements require Exec. team decision.

7. Outlook and Next Period

Anticipated milestones for next reporting period include:

- Executive team decision regarding service emphasis and target population.
- Development of implementation plan including details of how and where service will commence its activities.
- Budget for service will be presented to steering group for discussion.

Document Location

This document is only valid on the day it was printed and the electronic version is located with the document owner (Integrated Localities Programme Manager)

Revision History

Version number	Revision date	Summary of changes	Changes marked
V1.0	20/12/16	1st draft	N/A
V2.0	5/2/17	Updated	no
V2.1	20/2/17	Updated	no

Distribution

This document has been distributed as follows

Name	Responsibility	Date of issue	Version
Integration & Transformation Programme Board	G Woodcock	20/12/16	V1.0
APS consultation list	S Gibbon		V2.0

Purpose

The purpose of a Highlight Report is to provide the Integration Joint Board/ Audit and Performance Systems Committee with a summary of the stage status at intervals defined by the board. The board will use the report to monitor stage and project progress. The Programme Manager (who normally produces the report) also uses the report to advise the Project Board of any potential problems or areas where the Board could help.

Quality criteria

- Accurate reflection of checkpoint information
- Accurate summary of Risk & Issue Logs
- Accurate summary of plan status
- Highlighting any potential problem areas