



Aberdeen City Health & Social Care Partnership
A caring partnership

Transformation 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**

Overall Transformation Programme

The Aberdeen City Health and Social Care Partnership's Transformation Programme seeks to deliver the 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 cases and project 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 currently ongoing to fill additional posts. New Transformation Programme Managers (4) are expected to commence with the partnership at the beginning of September 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 Executive Programme Board 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 Enhanced role of communications and engagement group 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 and benefits 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	The programme does not clearly articulate the anticipated benefits, and/or the anticipated benefits are	MED/ MED	Benefits realisation workshop undertaken with former Integration and Transformation Programme Board.

programme	not delivered.		<p>Robust business planning process to clearly set out anticipated benefits.</p> <p>Programme Board and Working groups tasked to ensure benefits are realised.</p> <p>Additional resource in place to evaluate/measure benefits realisation</p>
Failure to balance transformation with business as usual	The balance of resource/ capacity allocated to change activities impacts on ability to deliver business as usual.	MED/ MED	<p>Operational managers (as Business Change Managers) are on Programme Boards.</p> <p>Change process builds in double running resources where required.</p>

Programme Management Governance:

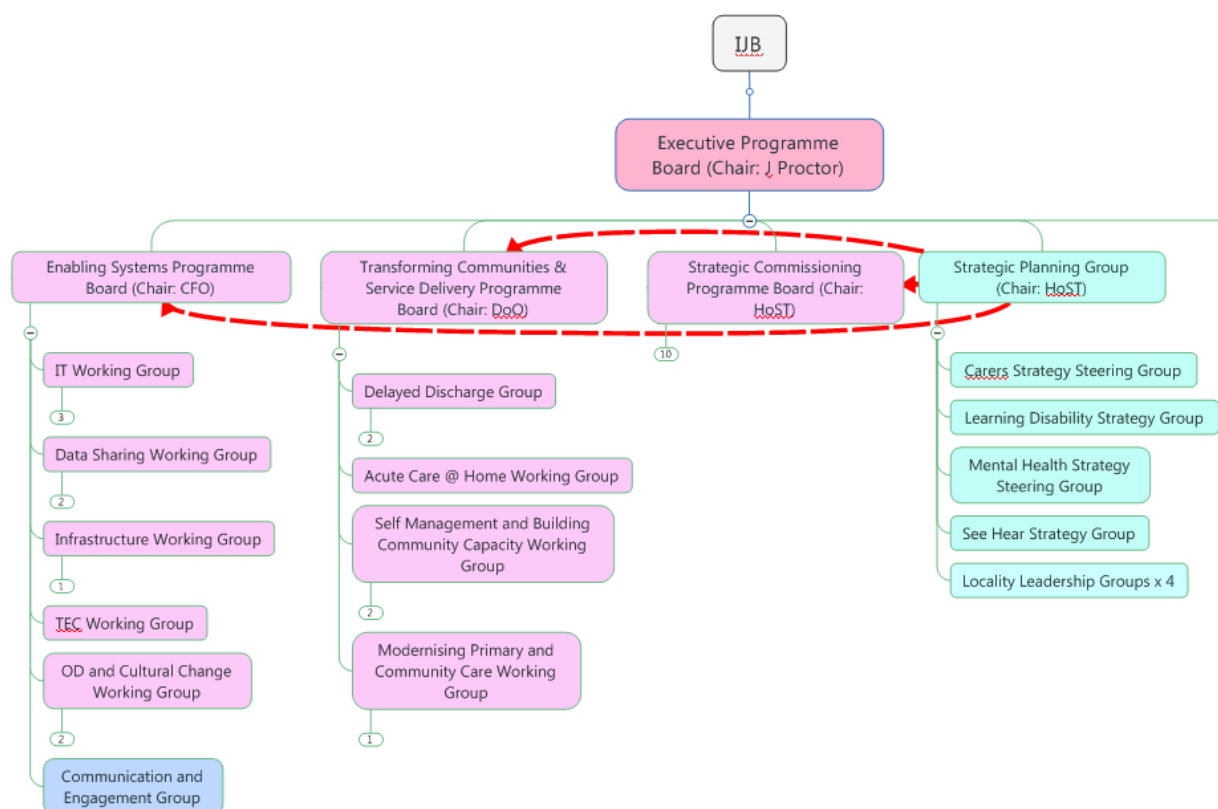
A programme management approach has been adopted across our transformation portfolio. This approach seeks to ensure progress while managing the natural tensions that will exist between corporate strategy, change processes, and business as usual operations.

The programme governance structure has been established to support the development and delivery of transformation at pace and at scale. This includes the Executive Programme Board which is tasked with providing overall direction to the complex programme of activities, in line with agreed strategy and policy. Three further Programme Boards, including a broad range of stakeholders, are in place to support progression at pace. Working Groups ensure progress on agreed portfolio projects, including supporting the development of business cases and specific projects which are delivered by Project Teams.

There is a good cross section of involvement from across the wider partnership throughout our programme management structure, including executive, operational, strategic, business functions, and including representation from our partners, NHS Grampian, Aberdeen City Council, 3rd Sector and Independent sector.

Work is ongoing to support all aspects of this complex programme of activity to comply with best practice in relation to programme management and good governance. This includes the adoption of an iterative project development process including the development of robust business cases which clearly identify the anticipated benefits, inputs required, and risks of any project.

The governance structure is set out below and highlights the strong relationship that exists between strategy and delivery of transformation programmes:



Overall Programme Expenditure

Our transformation programme seeks to release savings, through the development of leaner systems, and most of our initial work and investment seeks to create the environment which will allow this to happen. Further information about our benefits realisation framework including timescales will be included in future progress reports.

Work stream	Projected Spend 2017/18 (£000)	Actual Spend to date 2017/18 (£000)	Projected Spend 2018/19 (£000)	Projected Spend 2019/20 (£000)
Supporting Transformation Infrastructure	2,157	0	2,325	1,892
Infrastructure, IT and Data Sharing	1,332	20	1,564	860
Acute Care @ Home	408	0	724	724
Supporting Management of Long Term Conditions and Building Community Capacity	941	36	1,461	1,259
Modernising Primary & Community Care	1,516	6	1,788	456
Culture and Organisational Change	339	10	1,066	1,061
Strategic Commissioning and Development of Social Care	4	4	770	770
Budget Allocations Programme	6,209	0	228	228
Delayed Discharge	734	33	263	223

Work stream	Projected Spend 2017/18 (£000)	Actual Spend to date 2017/18 (£000)	Projected Spend 2018/19 (£000)	Projected Spend 2019/20 (£000)
	13,640	109	10,189	7,473

Note: actual spend through to end July 2017 awaiting input from finance. Variation in project spend is due to refinement process as projects are scoped and developed. There are delays in incurring spend due to unanticipated delays in recruitment etc.

Overall Programme Income

<u>FUNDING AVAILABLE</u>			£000	£000	£000
	R/NR	Partner body	17.18	18.19	19.20
Integrated Care Fund	R	nhs	3,750	3,750	3,750
Integrated Care Fund c/f from 16/17	NR	nhs	2,532	0	0
Delayed Discharge	R	nhs	1,125	1,125	1,125
Delayed Discharge c/f from 16/17	NR	nhs	1,429	0	0
Winter resilience (non recurring) c/f from 15/16	NR	nhs	190	0	0
Additional investment	R	acc	9,504	9,504	9,504
Additional Investment c/f from 16/17		acc	4,754	0	0
			0		
Primary Care Transformation	NR	Tbc nhs		0	0
Primary Care Transformation c/f from 16/17		nhs	695	0	0
Mental Health Fund	NR	tbc nhs	0	0	0
Mental Health Fund c/f from 16/17		nhs	54	0	0
Transforming Urgent Care c/f from 16/17	NR	nhs	190	0	0
Other additional funding		acc	4,130	0	0
			<u>28,353</u>	<u>14,379</u>	<u>14,379</u>

Abbreviations used throughout the report:

ACHSCP: Aberdeen City Health and Social Care Partnership

EPB: Executive 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 will support this new “Team Aberdeen” culture to be developed and will support the development of people 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
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3. Project progress during this period

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Roll out of Aston Team Journey	October 2018 for completion of 1st journeys	Ongoing	3 Development Facilitators completed training in October 2017 and are progressing their first intervention	No team has completed full journey yet as teams can take between 6 mths & 2 years to complete journey but roll out has started.
Monitor staff engagement through Imatter	17/11/17	Ongoing	Staff & manager briefing sessions May - July, last one 26th July.	Briefing session attendance & iMatter system usage is being monitored, including chasing up mgrs when required. Questionnaire to be completed between 24/07 & 14/08. Action plans to be completed between 25/09 & 17/11/17

Develop workforce planning model	30/8/18	ongoing	A Workforce Plan Development Group was established in Spring 2017 and has met 3 times. Group is developing an action plan.	Purpose of the group is: 1. To review our current workforce plan in light of the new national guidance on workforce planning to be released in Spring 2017. 2. To compile an action plan of what needs to be done to effectively workforce plan, on an ongoing basis, from the point at which the four localities are suitably established.
Ideas Hub: "Our IDEAS"	April 2017	31/4/19	EPB approved continuation of contract until 31/4/19. Promotional plan in place.	May 17 performance: 22 active ideas, approx. 1800 page views
Social Care Centre of Excellence	May 2016	31/3/19	EPB discussed options appraisal and agreed to identify resource to increase pace of delivery.	

4. Change Control

Change	Impact	
	Budget/Resource	Schedule
None at current time		

5. Issues and Opportunities *New and Update*

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

The recruitment of the OD manager has been paused due to Partner processes.

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:

- Completion of iMatters exercise
- Development of 2017 Taking Care of Transformation Conference

IT, Infrastructure and Data Sharing

1. Programme Summary and Anticipated Benefits

This programme considers a range of enablers including Infrastructure, ICT, Technology Enabled Care and Data Sharing, which are significant complex activities that are essential for realising our integration and transformation ambitions.

There are clear links between this enabler work stream and delivery 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
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3. Project progress during this period

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Smarter working – Len Ironside Centre	24/7/17	ongoing	Integrated staff hub in LIC – 60 staff will be moving into 30 desks. Will commence 24/7/17.	Learning from this will inform future working arrangements
Single email and calendar through Microsoft 365	31/10/17		Small scale implementation ongoing. Technical aspects being progressed and workshops taking place with key users to ensure that solution meets requirements	The inclusion of Sharepoint will also allow integrated document management and improved document processing and control
ICT devices for nurses and care workers	31/3/18 (first phase)		EPB agreed an iterative agile approach to device roll out, prioritising Buurtzorg teams.	Linked to roll out of Community Vision project (pan grampian)

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. A Business Analyst commenced at the end of June and this resource will now be progressing some of the projects within this workstream. Further recruitment is underway during July 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.
- Development of full business case for devices.

Modernising Primary & Community Care Programme

1. Programme Summary and Anticipated Benefits

This work stream includes reviewing and developing strategies for:

- 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
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3. Project progress during this period

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
New Northfield Practice – new ways of working	1/5/17	1/6/17	Aurora Medial Practice is now providing clinical cover at the Northfield Practice.	
Pharmacy and Prescribing	No end date yet identified	ongoing	IJB approved outline proposal to enhance pharmacy services. Full business case being developed.	
Testing Buurtzorg Principles in Aberdeen	1/11/17 (for first phase implementation)	ongoing	2 test teams will be implemented in Cove and Peterculter. Each team will consist of nurses (NHS) and care at home workers (employed by Bon Accord Care). Business Case developed and approved by EPB. Team members participated in a visit to Holland to learn more about how the principles work in practice. This learning will inform the project development. Work ongoing to plan recruitment processes around these new teams.	Separate briefing paper on Buurtzorg provided to IJB members in August 2017.
GP Led Step up/ Step Down Care Home Beds	No end date identified	ongoing	Options appraisal has been developed and considered by Transforming Communities and Service Delivery Programme Board. Business case to be developed on option that includes staged process to cross city implementation.	
Nursing succession planning	March 2021	Ongoing	Project proposal agreed that will support a greater number of nurses to achieve the qualifications required to become a District Nurse. IJB approved expenditure and business case now being developed.	

Community Falls clinic and pathway	31/3/18	ongoing	As at May 2017: • 20% of people who have been attended by SAS post fall but not conveyed to hospital have been referred to CAARS for triage & appropriate assessment & support. Prior to the project less than 1% of patients were referred. • Deep dive of the referrals received has identified distinct patient profiles which is informing discussion about the Partnership's response to people who have fallen & require immediate assistance.	
Community Mental Health Hub	31/3/19	ongoing	Recruitment challenges have slowed down the implementation of this project. Currently partially operational and work is ongoing to deal with other unforeseen issues.	

4. Change Control

Change	Impact	
	Budget/Resource	Schedule
West Unscheduled Care – afternoon day visiting service for West Locality GPs	£32,000 (budgeted from unscheduled care funding)	none

5. Issues and Opportunities *New and Update*

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:

- Pharmacy development Business Case.
- Recruitment processes underway for Buurtzorg teams.
- Phlebotomy business case
- West unscheduled care business case

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
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3. Project progress during this period

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Link Workers	March 2018	ongoing	The procurement process for the external provider will commence imminently, with the evaluation process expected to be undertaken during August 2017.	Implementation of Link Workers will be on a phased basis.
Social Transport	March 2018	ongoing	Provision of social transport through Thinc is continuing during 2017/18 to allow time for a wider options appraisal.	
House of Care	March 2019	ongoing	ACHSCP is participating in a cross grampian approach to adopt this person centred methodology for patient care. Steering group will commence in August.	
Golden Games	July 2017	July 2017	Another Golden Games event has been delivered. Project report is awaited.	

Support for designing integrated teams in communities	31/3/18	ongoing	Further to a robust procurement exercise, a preferred partner has been identified to work with staff and partners in our communities to encourage and support bottom up development of integrated and empowered community teams.	Formal communication will be issued on conclusion of formal procurement stand still period.
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4. Change Control

Change	Impact	
	Budget/Resource	Schedule
Thinc Social Transport – change required due to new information about funding requirements. Funding (as approved at 28/3/17 IJB) requires to be processed to both Buchan Dial a Community Bus (£61,711) and Aberdeenshire Council (£12,064). Previously it was understood and approved that the full funding allocation would be processed via Aberdeenshire Council.	No change to budget/ resource	No delay to project schedule, although delay in incurring expenditure.

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.
- Appointment of preferred partner to provide Link Worker resource.
- Initial integrated community team work to commence.

Strategic Commissioning

1. Programme Summary and Anticipated Benefits

The Partnership was required by the Public Bodies legislation to produce a Strategic Commissioning Plan/Strategic Plan and this was published on our 'Go live' date in 2016.

Aligned to this will be a Commissioning Implementation Plan which will translate the Strategic Plan's ambitions and priorities into commissioning intentions for the next six years and include a Market Facilitation Statement which will outline how the partnership can best support the local health and social care market.

Five work streams have been established to develop our commissioning intentions in particular areas. These were identified through a combination of factors including: effectiveness of existing models, readiness for change, likely impact of new models and contractual/procurement matters, and include : care at home, residential care, re-ablement service, out of hours and responder services, and a joint equipment store.

Anticipated benefits include contractual arrangements that are fit for purpose; more appropriate care models; improved quality of experiences and 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
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3. Project progress during this period [with Kevin to update]

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Draft Commissioning Implementation Plan and Market Facilitation Statement produced.	April 2017	June 2017	External colleague who was leading the development of these pieces of work has concluded her relationship with the partnership. Summary briefing presented at a 'Commissioning Workshop' 16 th June. 50+ attendees.	Next phase development to be carried forward by the emerging Strategy & Transformation team. Good feedback received. Also, announcement that another workshop would be arranged as part of our consultation received favourably.

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. The main resource supporting this workstream has been unable to work for most of this year due to illness and is now moving elsewhere.

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
- Failure to envisage innovative models of care.

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

7. Outlook and Next Period

Anticipated milestones for next reporting period include:

- Commencement of new Strategic Commissioning Programme Board.
- Presentation to IJB of draft Commissioning Implementation Plan/Market Facilitation Statement
- Commencement of consultation and engagement in respect of draft document.

Acute Care @ Home

1. Programme Summary and Anticipated Benefits

We are seeking to develop an Acute Care at Home service that will provide, 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 such a 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
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3. Project progress during this period

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Business Case	August 2017	ongoing	A project summary has been prepared and expenditure approved, in principle, by IJB. Work is now ongoing to develop a robust business case. A benefits identification session will take place with the project team in July.	A Programme Manager will be assigned to support this project as a priority once the ongoing recruitment processes are concluded.
Initial operational staff in place	November 2017	ongoing	Work ongoing to plan recruitment for these posts.	

4. Change Control

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

5. Issues and Opportunities *New and Update*

The project is progressing slower than desired due to capacity challenges. This should be resolved once Programme Management resource is in place.

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:

- Programme Manager assigned to support management and delivery of project
- Business Case development including benefits and evaluation plan
- Recruitment of operational staff to deliver new service

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)

Document Status The current status for this document is **DRAFT**

Revision History Date of next revision:

Version number	Revision date	Previous revision date	Summary of changes	Changes marked
V1.0	20/12/16	N/A	1st draft	N/A
V2.0	5/2/17		Updated	no
V3.0	5/7/17		Updated	no

Distribution This document has been distributed as follows

Name	Responsibility	Date of issue	Version
APS consultation list	S Gibbon	8/8/17	V3.0

Purpose The purpose of a Highlight Report is to provide the Integration Joint Board/ Audit and Performance Systems Committee/ Executive Programme Board 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 Lead Transformation 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