## Scottish Borders Health & Social Care Integration Joint Board

Meeting Date: 18 December 2017



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PERFOR	RMANCE	REPORT - TRANSFORMATION PROGRAMME TRACKER
Purpose of Report:		To update the Health & Social Care Integration Joint Board on
		progress in developing and delivering the transformation programme.
Recommendations:		The Health & Social Care Integration Joint Board is asked to:
		a) Note the report.
Personnel:		Resource and staffing implications are being developed as part of
1 Grootinon		both the development of the project briefs and the service
		redesigns that will be addressed through the projects.
		Programme Proposals are being developed through the Joint
		H&SC Management Team and with service leads. A workshop
		was held on 5 <sup>th</sup> September to ensure all key managers in the
		programme are aware of and engaged in the programme.
Carers:		Not Applicable
Equalities:		A comprehensive Equality Impact Assessment was completed as part of the strategic planning process.
- Financial:		Description in the state of the
Financial:		Resource and staffing implications are being developed as part of both the development of the project briefs and the service
		redesigns that will be addressed through the projects.
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Legal:		This Programme will support the delivery of the Partnership's Strategic Plan.
Risk Implications:		The risks relating to each project are being developed as part of the project briefs. Overall, there is a risk that without a robust programme, the Partnership will be unable to address the current
		and future affordability gap

- and future - affordability gap.

## Background

- 1.1 A progress report on the development of the programme was presented to the IJB at its 23<sup>rd</sup> October meeting.
- 1.2 There are currently 10 projects that comprise the IJB Transformation Programme. These are:
  - I. Community & Day Hospitals
  - II. Care at Home (including Re-ablement)
  - III. Allied Health Professionals
  - IV. Dementia
  - V. Mental Health Redesign
  - VI. Re-Imagining Day Services
  - VII. Carers Strategy
  - VIII. Alcohol & Drug Services
    - IX. IT & Telehealth Care
    - X. Re-Imagining Integrated Health & Social Care Teams
- 1.3 A high level Programme Plan is set out in Appendix 1 and a Programme Tracker which sets out activity in the current reporting period to the end of November as well as planned activity in the next is provided at Appendix 2.

## **Summary**

- 2.1 As shown in the attached appendices, 4 of the 10 projects are shown as being on track:
  - Home Care, Including enablement
  - Allied Health Professionals
  - Mental Health
  - Carers Strategy
- 2.2 6 of the 10 projects are shown as Amber these are:
  - Community & Day Hospitals Project resources are now in place to deliver this project. The initial review of the service, which is being led by Anne Hendry is progressing well and an interim report is being prepared. Some slippage in timescales is anticipated, however, this is not expected to be significant.
  - Dementia The project needs to be re-scoped as the original project brief was
    drafted ahead of the publication of the National Dementia Strategy and the
    drafting of the Scottish Borders Dementia Strategy which is currently out for
    consultation. A £4.8m bid has been made under the Council's Capital
    Programme for a specialist residential dementia unit and an associated
    feasibility study is being developed for a Dementia Village.
  - Re-Imagining Day Services the project is making good progress in terms of decommissioning underutilised/inefficient services. However, the project is shown as amber as there is an ongoing risk in terms of the management of interdependencies. Three projects, Day Services, Dementia and Community & Day Hospitals, are looking at buildings-based day-services and the links between them need to be managed carefully to ensure that use of buildings or

- alternative arrangements are seen in the wider context. Meetings are being held between project leads to address this.
- **Alcohol & Drugs** A cost effective solution for co-location has still to be agreed. Again there will be some slippage while this is resolved.
- IT & Telehealth Care Good progress is being made in terms of the roll-out of Attend Anywhere (effectively a skype-like video phone application that enables virtual surgeries) and with practical IT problem-solving with integrated teams at various locations. However, the project is shown as amber as a detailed roadmap for a wider IT project has still to be finalised and agreed.
- Re-imagining Health & Social Care Teams The project is still to be formally scoped.
- 2.3 The current programme does not yet include the indicative financial savings which may be possible from each of the individual projects. Discussions had been planned over October/November with project leads, Chief Financial Officer, Chief Officer and Programme Manager to review the financial context and savings opportunities from each project. However, due to diary constraints, it has not been possible to complete this. Further meetings will be scheduled in the new year to enable this.
- 2.4 Preliminary discussions on the transformation programme, as developed to date, will result in a targeted level of recurring savings to the IJB in future financial year. As the programme develops, the level of these targeted savings will increase.
- 2.5 As can be seen from the programme plan at Appendix 1, projects are at a relatively early stage and new models of service delivery are still in the process of being determined or scoped. As these models are clarified and established, the potential financial and non-financial benefits from each project will be identified. The financial information on the programme will therefore show the delivery timescale of the partnerships' objectives and resultant efficiency gains over future years.
- 2.6 As part of the discussions with project leads, the resource requirements to deliver projects will be fully established. It is anticipated that additional resource will be required. A clear business case, based in achievement of outcomes against resources required, will be included in each funding application.