
Report To: Inverclyde Integration Joint Board **Date:** 28 January 2019

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Partnership **Report No:** IJB/10/2020/HW

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Subject: UPDATE FROM TRANSFORMATION FUND

1.0 PURPOSE

- 1.1 The purpose of this report is to update the IJB on the journey so far in relation to transformational change across the HSCP and how the Transformation Board has helped steer the work to date through Transformation Fund investment.

2.0 SUMMARY

- 2.1 The IJB has approved around £1.8m of Transformation Fund investment over the last 18 months to support innovative projects across a range of services. Investments have been agreed for a wide range of exciting and transformational work that will shift practice and help us deliver differently in a complex and evolving arena full of competing demands. The investment is helping support the overall change programme and delivery of the Strategic Plan.
- 2.2 The IJB on 4th November requested an annual return on investment report for the Transformation Fund. This is the first of those reports which provide an update on the investment projects and the links to delivery of the 6 Big Actions within the Strategic Plan.

3.0 RECOMMENDATION

- 3.1 That the Integration Joint Board notes the progress to date and returns on investment through the Transformation Fund and the transformational change linked to effective delivery of the Strategic Plan and its 6 Big Actions.

4.0 BACKGROUND

- 4.1 The HSCP Transformation Fund was created in 2018/19. Bids are initially made through the Transformation Board and all are subsequently ratified through the IJB via the IJB Financial Monitoring reports. Projects over £100k or of strategic significance require a specific report for IJB approval.
- 4.2 Over the last 18 months, the Fund has supported a number of initiatives that have helped key partners as well as helping the HSCP, for example funding for Long Term Condition Nurses, One Handed Care, and Winter Planning investment. Routine oversight and governance for the Fund is through the Transformation Board which receives regular updates on all agreed projects and all other transformation and change projects underway.

5.0 TRANSFORMATIONAL CHANGE UPDATES

The following is an update on the return on investment so far on all key projects. All of these projects have clear links to the delivery of the outcomes linked to the 6 Big Actions within the Strategic Plan.

5.1 Long-Term Conditions Nurses - £80.5k

Long-Term Conditions and Technology Enabled Care Investment

The project was for the recruitment of 2 x Band 5 long term condition nurses for one year to work with GP practice teams focusing on self-management and health improvement for groups of patients with long-term conditions.

Long-Term Conditions and Technology Enabled Care - Outcomes to Date

Docobo Home Health Monitoring Hubs – 30 new hubs have been purchased with 16 used to replace existing, and 14 used by new patients since April 2019. This is significant improvement on previous years as referral numbers were very low. District nurses monitor these patients and respond to exacerbations with advice and anticipatory care medication if required.

An audit was carried out on hospital admissions and the number of bed days across the existing 16 patients using Docobo over a period of 9 months. Prior to using the hubs, they were admitted in total over 30 times equating to 121 bed days. While using the hubs over a following 9 month period, admissions had decreased to 11 and bed days to 35. This has evidenced a 64% reduction in admissions to IRH and a 71% reduction in number of bed days for these patients.

In addition, on 20 occasions over the 9 months patients commenced on their anticipatory medication which could have contributed to preventing further admissions or GP appointments.

Hypertension - There has been a total of 76 patients who have had their blood pressure monitored using Florence (FLO), a text messaging service using a phone app. Patients were recruited from 3 local GP practices and, on average, 43% have been diagnosed as having hypertension following use of FLO. Forty one patients no longer use FLO with 35 remaining and still being monitored. This has saved approximately 300 appointments in total with practice nurses or health care assistants equating to 50 hours.

Diabetes – Nine patients have been supported, using Florence (FLO) to become more

aware of managing their condition and independent in self-administering their insulin. This has saved 63 district nurse visits per week equating to a total of 21 hours.

Joint collaborative working with the acute diabetes specialist teams in both hospital and community has commenced with consultant physician reviewing patients on DN caseload via a virtual clinic to optimise treatment plans and include health improvement measures. This approach has proved successful and innovative with primary and secondary teams working jointly. Eleven patients who have undergone the review process were receiving a total of 106 district nursing visits per week and since review have reduced to 51 visits per week. This is a saving of 18.5 hours in DN visits per week.

5.2 Winter Plan and Unscheduled Care Plan 2018/19 - £118.4k

Last Winter this funding supported an increased Home Care response team, providing evening, out-of-hours and weekend cover to allow safe discharge over 7 days, as well as increased capacity at Emergency Department to allow prevention of admissions where appropriate diverting to community resources. This successfully enabled Inverclyde to address Winter Pressures, improve services for local people and minimise pressure on Acute Services and Set Aside budgets.

Based on last Winter's experience the IJB has approved further Transformation Funding to support this in 2019/20 to provide increased assessment and care coordination capacity at the front door at IRH based within the discharge team, working to support the Emergency Department and keep people at home rather than hospital for longer.

5.3 Localities Engagement Officer - £61k

An interim locality manager was seconded from another HSCP to help develop and drive locality planning across Inverclyde, to establish and develop six Locality Planning Groups (LPGs) and respective Communications & Engagement Groups in line statutory requirements.

Since approval, the manager has been working with community planning colleagues & communities to begin establishing the LPGs, including their respective Communications & Engagement Groups.

The locality manager is currently working to establish the six Locality Planning Groups (LPGs), it is planned to have Kilmacolm & Quarriers LPG & Greenock South & South West LPG in place by January, with the possibility of Port Glasgow being established by the end of February.

Development sessions will be run to ensure LPGs have the capacity and capability to develop their Locality Action Plans informed by HSCP Strategic Plan, Inverclyde LOIP, locality profile intelligence etc.

This investment has enabled Inverclyde to accelerate its locality development work to ensure we are compliant with Scottish Government requirements and work with the Alliance Board to be one of the first in Scotland to undertake a joint initiative.

5.4 I:DEAS Project - £5k

I:DEAS is funded by the National Lottery Community Fund (Lottery) and European Social Fund (ESF) for the delivery of financial inclusion services to eligible participants in Inverclyde. The Transformation Fund supported additional temporary staffing for the project.

The project had two main areas of concern:

- Achieving compliance.
- Payment on Outcome funding model which is placing financial and reputational risk on all stakeholders.

Following discussions with the Lottery it was recommended that an independent audit of the I:DEAS programme should be carried out. RSM Risk Assurance Services who have experience in ESF Funded Programmes was commissioned to carry out this work.

The Consultant suggested areas for change and explored ways forward with I:DEAS team and the Lottery.

A reviewed audit process was devised based on the recommendations of the Consultant which focused on compliance and claim submissions to achieve funding.

Using the reviewed audit process there has been an increase in compliance rates for cases submitted for funding, the reviewed systems will continue to be used by I:DEAS to ensure full compliance.

5.5 Infant Feeding Co-ordinator - £37.1k

The Infant feeding post has been instrumental in supporting a positive breastfeeding culture within C&F and in coordinating and supporting the achievement and embedding of UNICEF's Gold Baby Friendly award for the service. Support staff have been upskilled in order to support Breast Feeding Mums on a 1:1 and group basis. The post holder has supported targeted breast feeding support and adopted innovative approaches to peer support. In the Port Glasgow PDSA, there has been a 4% rise in Mums exclusively breastfeeding at the 6-8 week assessment from 9.2% in 2018 to 13.2% in 2019. Given the complex nature of supporting and sustaining a breastfeeding culture, there would be the intention to request that support is continued past the November 2020 timescale in order to scale this work up to cover Greenock and eventually the whole of Inverclyde. We are exploring how we can influence long term sustainability and will be connecting with partners through a collective impact approach including Compassionate Inverclyde, GPs, Pharmacist, Breastfeeding Network, CVS, and Your Voice, and communities (to name a few) in order to explore a whole system approach to culture change, early help and support and improved public acceptability.

5.6 CELSIS - £31.6k

The Addressing Neglect and Enhancing Wellbeing (ANEW) team was commissioned by the Scottish Government and Inverclyde was selected as one of the areas selected to work in partnership with CELSIS in developing new approaches aimed at reducing childhood neglect and enhancing wellbeing using implementation methodology. This work commenced in October 2018. The ANEW team have undertaken extensive listening and collaboration in order to learn what practitioners (Health, SW and Education) think is working well and what is not working so well. This extensive consultation has allowed the team to develop an options appraisal which has been presented to the GIRFEC Strategic Group and will now progress to SMT. The options seek to support named person and team around the child activity, interagency collaboration and transitions/early intervention. The knowledge gleaned from the practitioner engagement is also being utilised to support practice development within health. The secondment continues until September 2020 and it is envisaged that the work will continue following this.

5.7 Agile Working - £42k

The Transformation Board has funded a number of laptops/IT equipment to allow staff to work agile. Agile working has facilitated more effective use of our buildings and

staff time while supporting communication and feelings of a team's cohesiveness, and containment. Staff are able to work across many of the HSCP sites, reducing travel and allowing more time spent with patients/clients. Through agile working the HSCP has been able to rationalise its estate and reduce the number of buildings required, freeing up resources to support projects like Wellpark and the new Greenock Health Centre.

5.8 Priority Management - £24.5k

Priority Management was a targeted approach which has successfully been rolled out previously within GG&C. The investment was to train Extended Management Group (EMG) and Business Support staff. Participants attended Priority Management workshops, working through a model called WorkingSm@rt™, which is a flexible and practical combination of behaviour-changing methods, best practice tools and processes that aimed to transform ways of working. The focus of the training was to increase capacity and effectiveness of the staff involved to increase overall team resilience and productivity.

The overall feedback has been extremely positive, with many of the people who attended the workshops reporting back that they are noticing a difference in their ways of working. It was also felt by several of the participants that having an input at the start of the workshops on the personal and professional objectives, had a positive impact on the way they are working and continuing to do so.

The training has supported changes in the support required, resulting in a saving of £85,000.

- 5.9 In 2018 an application was made to the IHUB (Health Improvement Scotland) for consideration of a 1 year project that looked at a test of change to tailor and seek opportunities to look at where 1 carer instead of 2 can provide care using special equipment and training. The bid was successful and funding was provided for 1 year costs for an Occupational Therapist to lead the project, training costs to train OT in the techniques and for start-up equipment costs. The aspirations of the project were to remodel the Moving and Handling training in Inverclyde, train staff in new techniques, assess all new cases where double-up care is required to ensure that any opportunities to tailor and train staff/families/carers to provide support in moving and handling using different techniques and equipment that only require support of one other.

The feedback from service users, families and carers was very positive as this approach allows for more choice around how care is delivered and people reported that care feels more intimate with 1 carer rather than with 2 people. Inverclyde also has a service user's representation group who tell us that they would prefer to have fewer people through their homes and this project is in line with the wishes of the service users.

One handed care solutions have gained gravitas in England and the results are encouraging, showing that approximately 30% of all cases previously requiring 2 carers have the ability to move to these solutions. With the pressure across care services in Inverclyde, this model offers opportunities to reduce some of the pressure on the sector in relation to care at home support. We have evidenced and created a saving of £100k to date. This work will continue in 2020 as we develop our approach moving forward.

6.0 NEXT STEPS

- 6.1 There are a number of projects that have been allocated Transformational Funding and not yet spent the funds for various reasons. For example, Sheltered Housing

Support Services, HR Advisor, Strategic Commissioning Team, which includes a Procurement Officer and Legal Support, are all in the process of recruitment or the person has only recently started within post and no update can be provided at this time.

6.2 A further update on the above projects will be brought back to a future IJB.

7.0 DIRECTIONS

7.1	Direction Required to Council, Health Board or Both	Direction to:	
		1. No Direction Required	X
		2. Inverclyde Council	
		3. NHS Greater Glasgow & Clyde (GG&C)	
		4. Inverclyde Council and NHS GG&C	

8.0 IMPLICATIONS

FINANCE

8.1 Financial implications are as outlined in the report.

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs / (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From	Other Comments
N/A					

LEGAL

8.2 There are no specific legal implications arising from this report.

HUMAN RESOURCES

8.3 There are no specific human resources implications arising from this report.

EQUALITIES

8.4 There are no equality issues within this report.

8.4.1 Has an Equality Impact Assessment been carried out?

YES

X

NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

8.4.2 How does this report address our Equality Outcomes

There are no Equalities Outcomes implications within this report.

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	Transformation Board ensures local services are accessible.
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	Equality Impact Assessments (EQI) may be required following transformational fund allocation.
People with protected characteristics feel safe within their communities.	Transformation Board will ensure that everyone with protected characteristics are safeguarded in our local communities and in line with our 6 Big Actions.
People with protected characteristics feel included in the planning and developing of services.	Transformation Board will include people in the planning and developing of services in line with our 6 Big Actions.
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	Staff have an awareness and understanding of the different needs of individuals and respond to individual needs.
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	Staff have an awareness and understanding of the different needs of individuals and respond to individual needs.
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	Transformation Board will ensure we work with local communities to develop positive attitudes the refugee community and in line with our 6 Big Actions.

8.5 CLINICAL OR CARE GOVERNANCE IMPLICATIONS

There are no governance issues within this report.

8.6 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes

There are no National Wellbeing Outcomes implications within this report.

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	Transformation Board in line with the 6 Big Actions ensures people will improve their health and wellbeing.
People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community	Transformation Board ensures those with disabilities can live at home or in a homely setting in their community.
People who use health and social care services have positive experiences of those services, and have their dignity respected.	Transformation Board in line with the 6 Big Actions ensures people will have a positive experience of services within health and social care.
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	Transformation Board in line with the 6 Big Actions ensures care services are to improve the quality of those who use services.
Health and social care services contribute to reducing health inequalities.	Transformation Board and the 6 Big Actions contributes to reduce health inequalities.
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	Transformation Board in line with the 6 Big Actions ensures people who are unpaid carers are supported to improve their own health and wellbeing.
People using health and social care services are safe from harm.	Transformation Board in line with the 6 Big Actions ensures people are safe from harm.
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	Transformation Board in line with the 6 Big Actions ensures those who work in health and social care are supported and engaged to provide support to service users.
Resources are used effectively in the provision of health and social care services.	Transformation Board ensures resources are effective.

9.0 CONSULTATION

9.1 None.

10.0 BACKGROUND PAPERS

10.1 None.

