

Report of Health and Social Care Integration Programme

Report to: The Sustainable Economy and Culture Scrutiny Board

Date: 9th September 2014

Subject: Integrated Health and Social Care Estate programme

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number: 4	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Summary of main issues

1. The development of Integrated Health and Social Care (IHSC) Teams at a neighbourhood level is a key element of the Council's drive to deliver more joined up and personalised Health and Social Care services to people in their local communities.
2. The main aim of the IHSC Estate programme is to support the above service changes, and to support those services to work more effectively and efficiently. The IHSC Estate work is an enabling workstream and part of the wider IHSC Programme. The Estates workstream works alongside the People and Technology workstreams, all of which have a high degree of interdependency with each other and the main programme.
3. It is expected that the IHSC estate programme will contribute to the delivery of a better utilisation of buildings and contribute to the rationalisation of assets for both organisations. The rationalisation of assets across two independent organisations has given rise to challenges, which the workstream, made up of representatives from both organisations, are seeking to address. Overcoming these challenges will however, provide invaluable learning for future Integration and Partnership working with external partners.

Recommendation

4. Note the progress made by the IHSC Estates workstream to date.

1 Purpose of this report

- 1.1 The purpose of the report is to inform scrutiny board about the approach taken and progress made by the integrated health and social care estate workstream to create office accommodation suitable for the newly developed integrated health and social care neighbourhood teams.
- 1.2 The report also explains the arrangements put in place to ensure that risks and rewards gained from this transformation programme are shared fairly between partner organisations, Leeds City Council (LCC), Adult Social Care (ASC) and Leeds Community Health Trust (LCH), and that decision making processes are transparent.

2 Background information

2.1 Executive Summary

- 2.1.1 Significant progress has been made to prepare LCC and LCH asset management and IM&T teams for the change required to create office accommodation for integrated neighbourhood teams across the city.
- 2.1.2 Governance arrangements have been put in place to ensure transparent decision making can take place across LCH and LCC in relation to asset management decisions. The Governance diagram is included as Appendix 1.
- 2.1.3 The IHSC estate requirements are incorporated in the wider asset management review recommendations and long term property strategies in LCH and LCC. A joint Office Accommodation Strategy (based on the Council's Changing the Workplace) for the IHSC Teams has been developed and approved by ASC & LCH Leadership Teams and the Council's Asset Management Board
- 2.1.4 The IHSC estate workstream is working closely together with the IM&T and People workstream to ensure new ways of working can be introduced and taken into consideration when specifying the requirements. This is expected to create better utilisation of premises and greater efficiency alongside more flexible office accommodation for staff to use that can meet their requirements.
- 2.1.5 The IHSC estate workstream has identified high level options for each of the 13 neighbourhood teams. These options were developed based upon the high level requirements detailed by the main programme. These options are now in the process of being validated against the emerging detailed requirements of the teams with the relevant managers.
- 2.1.6 Further work is currently being undertaken to develop the necessary legal, financial and property management arrangements, together with the appropriate risk and reward mechanisms to support this work. This work will inform individual business cases for the preferred options for each neighbourhood team.

3 Main issues

3.1 Background:

- 3.1.1 Integration of health and social care services in Leeds developed as a priority from the work commissioned by NHS Leeds, and supported by the Health and Social Care Transformation Board, that Price Waterhouse Cooper carried out in early 2011.
- 3.1.2 Adult Social Care (ASC), Leeds Community Healthcare NHS Trust (LCH), NHS Leeds and the Leeds Clinical Commissioning Groups (CCGs) all formally committed to support the integration of health and social care, with leaders from all sectors stating that: "Our ambition is that at every point during their journey through health and social care services, people will experience better co-ordination of their care".
- 3.1.3 The first stage of the integration programme enabled co-location of LCH staff in 12 neighbourhood team areas in October 2012. Over time a few social workers were able to join those teams, where space and technology had the capability to support this. All these teams are located in Health Centres (LCH). Based on the success and improved outcomes for customers the transformation board agreed to develop the Target Operating Model (TOM) that would create joint services at neighbourhood level. This work was one of the key factors in Leeds being awarded Pioneer Status for the Integration of Health & Social Care.
- 3.1.4 Senior leaders from across the health and social care sector signed up to the high level TOM on 30th January 2013. The TOM is still being finalised but in the final stages of approval and is expected to become operational during Q3 2014/15. Based on the caseload analysis and the initial experience gained from the co-located teams a decision was taken to align neighbourhood teams (NT) to 13 GP practices clusters.

The 13 Cluster areas are: (for details see appendix 2 & 3)

SOUTH areas: Kippax, Middleton, Beeston, Morley

WEST areas: Woodsley, Armley, Pudsey, Yeadon, Holt Park

EAST areas: Meanwood, Chapeltown, Seacroft, Wetherby

3.2 IHSC Estates

- 3.2.1 The IHSC Estate Workstream is an enabling workstream. It works closely together with the People and IM&T workstreams as there are many interdependencies in ensuring that staff are enabled to work in the most flexible and efficient way possible. Working in this way will also reduce the dependency on the level of Estate required. It is also highly dependent on the development of the TOM and decisions regarding the alignment of staff (from LCH and ASC) to local neighbourhood teams or hubs, the work style of NT staff and IT & telephony requirements to understand the office accommodation requirement for each area. There is no specific Business Case for the estate work as this links in to the asset review from LCC and LCH and the overarching IHSC Programme. Individual business cases will be constructed based upon the preferred option for each neighbourhood team.

- 3.2.2 Whilst the estate requirements of the programme are yet to be fully determined, the estate workstream has worked proactively to review and identify viable options for office accommodation for the NTs across the city. This took into account the LCC Asset Review and LCH Property Review both indicating the long term purpose of buildings based on strategic fit and cost effectiveness. This is an ongoing process to ensure that opportunities that arise are considered and long term benefits for services maximised as well as achieving cost effectiveness.
- 3.2.3 Currently NT staff are based at over 50 different premises across LCC and LCH. The alignment of staff to GP clusters and NT areas will reduce the amount of premises significantly (One base for each neighbourhood team (13) and potentially 3 area hubs and a citywide hub). None of the current buildings occupied is solely occupied by adult services (from LCH or ASC) but they make up a significant group. The changes initiated by the integration programme will provide opportunity for LCH and LCC to review and change the use of buildings or release or dispose of properties. In this way the integration programme contributes to the targets set by both organisations to reduce their property portfolio and make best use of resources. Actual savings will mainly come from operations. Estate cost will be determined by each NTs requirement and may require investment to deliver longer term efficiencies.
- 3.2.4 By locating professionals close to where customers live will reduce their travel time and increase customer contact time. Working alongside each other in one team is expected to improve the quality of service to customers and reduce duplication. The project will also aim to improve efficiency and effectiveness by creating fit for purpose office accommodation and introducing new ways of working where possible and appropriate.
- 3.2.5 Integrated teams require access to ASC and LCH customer information and databases. To create IT capabilities that support integrated teams seamlessly provides our IM&T colleagues with a significant challenge and is part of a longer term development programme (electronic patient records (LCH) and flexible working for LCC). This means that the need and requirements for office accommodation will further change over time.
- 3.2.6 Both organisations are in the process of introducing flexible working technology allowing staff to access information where and when they need it (usually at people's own homes). The introduction of PSN across LCH and LCC does help to create interim solutions, but full integration and seamless access to information will require significant investments and development of systems and technology.
- 3.2.7 To ensure that decision can be made jointly and the governance of the IHSC estate project involves representation of all parties (ASC, LCC asset management, LCH property services) at all levels (Shared sponsors, Board, Project team, Delivery Groups). This has led to the development and sign up to the Joint IHSC Office Accommodation Strategy (appendix 3) and Design principles (appendix 4) and is evident in the amount of resources made available by LCH, LCC and ASC to deliver this IHSC estate programme. Sign off procedures include the Better Live through Integrated Services Board but also Corporate Asset Management Board (LCC) and LCH Estate Board.

- 3.2.8 One of the major issues arising from this work is to ensure that the risks and rewards arising from the rationalisation of assets are shared appropriately and fairly between the partners. The properties in scope both now and in the future will largely be in the possession of either the Council or LCH, however, those properties may be owned, leased in or subject to PFI arrangements. Depending on the property solutions chosen, and thus those properties chosen for disposal, there could be a significant imbalance of risk/reward between each partner. This could also be exacerbated by the way each property is funded. The overriding principle used by the project is to share risks and rewards and be as transparent as possible. A specific working group has been set up to develop a memorandum of understanding and explore new models that support shared use of buildings across partnership organisations that seek to address these issues.
- 3.2.9 The workstream has made appropriate links with other strands of asset management work, most notably that being undertaken as part of the 'One Public Sector Estate Pilot' and the development of Community Hubs. This may provide an opportunity to improve utilisation of these spaces, create safe and suitable accommodation for the neighbourhood teams and significantly increase the savings that could be achieved by all partners.
- 3.2.10 The programme timeline was recently brought forward to December 2014 at the request of the lead commissioners (CCG). As the TOM has not been fully detailed yet and staff alignment and consultation is not yet completed it is expected that solutions to office accommodation will need to be delivered in stages to enable teams to start making the operational change expected. This will provide level 1 solutions (quick solution, making best use of existing space and minor expansion) or level 2 (including new ways of working and increasing the flexibility of office space across teams and better utilisation of offices across the day by removing dedicated team areas).
- 3.2.11 The minimum lead in time for estate changes is approximately 3 months depending on availability of property in the right area. The estate workstream aims to have made progress in the critical areas by December but also recognises that the longer term final solutions will at least take another 6 to 12 months to be fully delivered.

4 Corporate Considerations

4.1 Consultation and Engagement

- 4.1.1 Regular (approx. every 6 weeks) managers briefing are held for operational services. This provides them with an update and opportunity to contribute to the development of the programme.
- 4.1.2 Estate Workshops have been held to identify high level viable office accommodation options for integrated teams. Participants were ASC & LCH senior managers from operational and strategic services involved in the development of integrated services; senior managers from LCC asset management and asset reviewing team; senior managers from LCH property services and finance; and project staff from integrated health and social care programme office. The findings were further validated by the IHSC estate

workstream by conducting site visits and where appropriate completing a jointly created building checklist. This provided the team with the information on current usage and spare capacity.

4.1.3 Local design teams will be established to ensure that staff affected by the changes can have input in specifying the requirements and communication can be facilitated. Their role will also include ensuring that other occupants in the affected facilities are kept informed and included in the planning.

4.1.4 In September, as soon as TOM data is available, follow up workshops will be held including operational services, asset management and senior managers to match TOM and staff data with available options in each area. To establish the final requirements for neighbourhood team's office accommodation changing the workplace type questionnaires will be used. This will enable us to specify a preferred option and action plan for each to the 13 neighbourhood team areas and construct the necessary business cases.

4.2 Equality and Diversity / Cohesion and Integration

4.2.1 This is part of a new way to deliver a service. IHSC Estate is only an enabler in this process to support staff to have suitable accommodation and technology allowing them to work together as one team closer to people's homes.

4.2.2 An outcomes framework has been developed in partnership with staff, service users and partner organisations asking people the key question 'how will we know that we have been successful' and using 'better, simpler, better value' as a starting point. The framework (see table below) was agreed by February 2013 Transformation Board and covers the interdependent programmes of work around risk stratification, supported self-management and integrated services.

	Better	Simpler	Better value
Service user and carer	I have choice and control over the services I get. Services see and treat me as an individual. I feel there is time for staff to listen to me.	Teams share information (with my consent), so I don't have to tell my story to too many different people. I know who go to if I need to discuss my support. I am seen in hospital swiftly if that's the best place for me [suggestion by the IHSCB building on debate at the workshop about the role of hospitals]	Formal services help me to make good use of everyday, community services and support. I can get the support I need to manage my own condition.
Staff	Service users receive a more holistic response because we're integrated. Integration enables us to use planning and meeting time more effectively. We are able to take a more preventative approach to support.	I can spend more time with users and carers because we're integrated. I am clear about my role and responsibilities and how they fit with other roles in the whole system.	There is less duplication because we're integrated. Processes (assessment, recording and review) are streamlined and transparent. We have clear ways of sharing learning and best practice between teams.
System	Integrated teams have led to improved health and well-being. Information flow between teams and to and from the wider system (Third sector) is better.	Integrated teams have led to shorter times from referral to response. There is a shared care plan across all relevant partners.	Integrated teams have helped people stay at home (and not go into hospital or care homes). There is flexibility in roles (for simple tasks) within neighbourhood teams and the wider system.

- 4.2.3 The outcome measures arising from this are being developed. This work will start to shape the expectations around critical success factors specifically in terms of the integration of adult community health and social care services.
- 4.2.4 An equality impact screening took place at the start of the integration programme in 2012. It was acknowledged by the transformation board (OBC 2013) that only at the point where the target operating model is defined and operational the impact on service users, staff and other stakeholders can be assessed.

4.2.5 Council policies and City Priorities

- 4.2.1 The integration programme is part of the Better Lives Programme being delivered by Adult Social Care as reflected in the Best Council Plan and the health and wellbeing priority plan
- 4.2.2 Introduction of new ways of working and maximising utilisation of building is in line with to LCC asset strategic review, LCH property strategy and LCC's programme on Public Estate work

4.3 Resources and value for money

- 4.3.1 Funding received from the CCG 2% non-recurrent allocation to support the delivery was used to systematically review properties and is to be used to recruit an extra project officer for a period of 12 months to support new NT to specify their requirements, identify the preferred option and support the delivery of the project to create suitable office accommodation for each NT area.
- 4.3.2 The estate review was linked to the asset management review taking place in LCC and LCH. The future purpose of buildings is taken into consideration and informs decisions on selecting office accommodation for the neighbourhood teams across the city. The programme contributes to achieve the aims of the council.
- 4.3.3 As part of the Best Council Plan the Better Lives programme aims to help local people with care and support need to enjoy better lives though joining up health and social care. The IHSC estate programme supports neighbourhood teams to share office accommodation and work more flexibly by adopting new ways of working. This will contribute to a better utilisation of space and create opportunities for the council and LCH to reduce their estate portfolio.
- 4.3.4 Although, it is difficult to quantify the financial benefits of this work until individual business cases are constructed, it is anticipated that this work will make a significant contribution to the delivery of the Council's Asset Review target, in addition to the delivery of efficiency improvements within the operational service areas.

4.4 Legal Implications, Access to Information and Call In

- 4.4.1 Shared use of office accommodation and the legal and financial arrangements between LCH and LCC has highlighted potential barriers for partnership working,

as current systems, protocols, budget targets do not currently lend themselves to joint working arrangements.

4.5 Risk Management

4.5.1 This report is an information report to the Sustainable Economy and Culture Scrutiny Board and as such not subject to the Call In process

4.5.2 Main Risks

- Competing priorities and timelines set by operational services and commissioners and the process estates require to be followed to identify, create and deliver suitable office accommodation for neighbourhood teams leading to the risks that unplanned and ad-hoc office changes are made by teams. This would limit the overall asset and operational efficiencies that can be achieved across services and investments are made for short term and interim solutions.
- Current corporate systems and processes to support integrated working between LCH and social care (LCC) are not sufficiently developed with the risks that barriers are put in place for partnership working and sharing of accommodation and resources. This could limit the benefits that can be achieved from the new target operating model and improved utilisation across partner buildings.

5 Conclusions

5.1 Significant progress has been made to prepare LCC and LCH asset management teams for the change required to create office accommodation for integrated neighbourhood teams across the city

5.2 The governance has been put in place to ensure transparent decision making can take place across LCH and LCC in relation to asset management decisions.

5.3 The IHSC estate requirements are incorporated in the wider asset management review recommendations and long term property strategies in LCH and LCC. A joint Office Accommodation Strategy (based on the Council's Changing the Workplace) for the IHSC Teams has been developed and approved by ASC & LCH Leadership Teams and the Council's Asset Management Board.

5.4 The IHSC estate workstream is working closely together with the IM&T and People workstream to ensure new ways of working can be introduced and taken into consideration when specifying the requirements. This is expected to create better utilisation of premises and greater efficiency alongside more flexible office accommodation for staff to use that can meet their requirements.

5.5 The IHSC estate workstream has identified high level options for each of the 13 neighbourhood teams. These options were developed based upon the high level requirements detailed by the main programme. These options are now in the

process of being validated against the emerging detailed requirements of the teams with the relevant managers.

- 5.6 Further work is currently being undertaken to develop the necessary legal, financial and property management arrangements, together with the appropriate risk and reward mechanisms to support this work. This work will inform individual business cases for the preferred options for each neighbourhood team.

6 Recommendation

- 6.1 Note progress made by the IHSC Estates workstream to date.

7 Background documents¹

None

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.