



Item No: 12

Meeting Date: Wednesday 20th November 2019

Glasgow City Integration Joint Board

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MAXIMISING INDEPENDENCE IN GLASGOW CITY: UPDATE

Purpose of Report:	To update the IJB on progress with the Maximising Independence programme approved on 26 June 2019 ; and, to seek approval for pump prime investment to support the programme.
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Background/Engagement:	As per 26 June IJB report referenced in main body of this report.
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Recommendations:	The Integration Joint Board is asked to: a) Note progress to date with the development of the Maximising Independence Programme; b) Support proposed pump prime investment to support the programme; c) Earmark £8.5M from the current financial year's underspend to fund the investment outlined in 4.1; and d) Note regular updates will be provided to the IJB.
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Relevance to Integration Joint Board Strategic Plan:

The proposals in this paper are intended to give effect to key elements of the Strategic Plan, including those in relation to shifting the balance of care, promoting independence and achieving budget balance.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	Outcomes 1, 2, 3, 4, 6, 7 & 9.
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Personnel:	This report contains proposals to invest in staff capacity and culture change to support a different way of working for staff,
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	patients and service users to support the ambition of the Maximising Independence programme.
Carers:	As per 26 June IJB report, it is envisaged this programme will result in an increasing contribution from families and carers, particularly in relation to low level needs that do not meet social work eligibility criteria. Potential new models of care around family support may also impact on the carer role in future.
Provider Organisations:	This programme envisages an increasing role for housing associations and third sector organisations around prevention and early intervention.
Equalities:	An EQIA will be undertaken as part of the programme associated with these proposals.
Fairer Scotland Compliance:	Any relevant implications from this paper in relation to combatting the impact of socio-economic disadvantage within the city will be identified in the EQIA with appropriate mitigations put in place.
Financial:	These proposals are associated with the £4.2M balance of care saving approved as part of the 2019/20 IJB budget.
Legal:	Any changes emerging from this programme will be consistent with the HSCP's statutory duties.
Economic Impact:	None
Sustainability:	None
Sustainable Procurement and Article 19:	There are likely to be procurement considerations in relation to the future funding of neighbourhood-level prevention and early intervention initiatives associated with this programme.
Risk Implications:	A detailed risk management plan will be developed as part of the programme.
Implications for Glasgow City Council:	The Council can expect some political challenge in relation to changes to the future HSCP offer in relation to adults and older people's care. This programme is also associated with delivery of significant Council savings.
Implications for NHS Greater Glasgow & Clyde:	As provider of last resort the NHS can expect to experience higher levels of demand should this programme fail to deliver

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	the desired reduction in overall levels of demand for adult and older people's social care.
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Direction Required to Council, Health Board or Both	Direction to:	
	1. No Direction Required	
	2. Glasgow City Council	
	3. NHS Greater Glasgow & Clyde	
	4. Glasgow City Council and NHS Greater Glasgow & Clyde	✓

1. Purpose

1.1 To update the IJB on progress with the Maximising Independence programme approved on 26 June 2019; and, to seek approval for pump prime investment to support the programme.

2. Background

2.1. On 26 June 2019 the IJB approved the development of a Maximising Independence programme for Glasgow City. Specifically, it approved the following recommendations:

- i) Note the HSCP's emergent thinking in relation to maximising independence for patients and service users; and,
- ii) Support the continued development of this programme with a commitment to return to the IJB with more specific proposals later in 2019.

2.2. The full report can be accessed via the following link for ease of reference:

<https://glasgowcity.hscp.scot/sites/default/files/publications/ITEM%20No%2019%20-%20Maximising%20Independence%20in%20Glasgow%20City.pdf>

2.3. In summary, the key messages from the report in June were that:

- We have reached a point in our transformation journey where we must fundamentally review the 'health and social care contract' with the public to ensure a sustainable health and care system into the future
- Any future contract must be guided by maximising independence, enabling proportionate risk and supporting individuals to remain living at home for as long as possible. This recognises that the best health and care outcomes are associated with the highest possible levels of self-management and independence
- There is a continuing long-term inverse relationship between growth in demand for health and social care services and the budgets available to meet that demand
- Arising from that, the time is now right for the HSCP to pursue a step change in individual, family and community independence from statutory HSCP support, increasingly focusing organisational resources and energies on prevention and early intervention approaches in partnership with local communities, third sector, independent sector, housing sector and community planning partners

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- There are opportunities to develop place and asset-based approaches in line with the new neighbourhood teams for adult services, older people's services, delivery of the mental health strategy, Primary Care Improvement Plan and review of learning disability services
- Families, carers and communities will be expected to provide more support at lower levels of need that do not meet revised eligibility criteria for statutory support. Resources will be reconfigured in recognition of this change
- The principles of the new GP contract will be applied, with social workers and other HSCP staff working to 'the top of their licence' and being substantially only engaged in the lives of those with the most complex need
- The HSCP is actively engaged with other authorities that face similar challenges and have made similar efforts to fundamentally reset the health and care social contract. Most notably these include Wigan and Coventry.

3. Progress since 26 June 2019

- 3.1 In line with approval of the 26 June report, priority was attached to the establishment of a multi-partner Maximising Independence Programme Board. Membership of the Board has deliberately sought to reflect the range of principal stakeholders whose commitment and support will be a pre-requisite to the successful delivery of the programme. This includes service user, carer, third sector, independent sector, housing and community planning representatives. Full membership of the Programme Board is attached as Appendix 1.
- 3.2 Recognising the breadth of ambition and complexity attached to this programme, members of the Board have been asked to make a significant commitment with respect to both their time and energies. At this stage they are being asked to participate in monthly seminars to develop an agreed clarity of vision and purpose; and, to begin to map out the detailed areas of work to be undertaken in support of that agreed vision.
- 3.3 A seminar approach has been deliberately favoured at this stage of the programme given the imperatives around shared understanding and ownership of all that Maximising Independence will involve. As both the programme and the Programme Board mature it is envisaged that there will be a natural transition towards more conventional business meetings based on workstream progress reports and accountability.
- 3.4 The draft vision for Maximising Independence that has been developed by the Board is "*Glasgow will be a city where everyone will achieve their potential for health, wellbeing and independence*". The intention is to test this draft vision with members of the public via focus groups. A deliberate effort has been made to create a shared ownership rather than strictly HSCP-led approach; for example, the second Programme Board meeting was led by the third and housing sectors leaders.

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3.5 The programme is now at the stage where specific areas of work are being commissioned in support of the Maximising Independence vision. These will address the key aspects of reform, including:

- Future HSCP workforce planning
- Whole system learning, development and culture change
- Development of place and asset-based community models, with key roles for the third, independent and housing sectors
- Development of new family support service models
- Developing effective transitions supports
- Future finance and resource planning
- Engagement and consultation with all key constituencies, including public messaging

3.6 Notwithstanding the development of these wider thematic workstreams, progress is being made on a number of specific initiatives that align very clearly with the aspirations of the Maximising Independence programme. These 'early wins' include:

- Maximising Independence aligns into the wider City Vision work instigated by Glasgow City Council, with the support of Community Planning partners. City Vision seeks to re-imagine and re-set the City Ambition for the next 25-year period reflecting on the issues that are, and will more so, be faced by Glasgow's residents over the next decade, alongside the potential opportunities for transformation with the recent legislative and government ambitions in Scotland. The key theme's driving significant suffering and hardship within the city form the four areas for impact; health, poverty, justice and skills. The work of the Maximising Independence Board is forming one of the key areas of focus under the health theme. The HSCP is supporting the City Vision via the part-time alignment of a senior manager who is also a member of the Maximising Independence Programme Board.
- Supporting Moving Forward Together – it has been agreed that the work from this programme will inform the MFT's work in relation to unscheduled care (https://www.nhsggc.org.uk/media/256389/item-9-paper-no-19_47-moving-forward-together-update.pdf)
- Supporting the Community Planning Partnership's strategic priorities, outlined here (www.glasgowcpp.org.uk/annualreport2019)
- Technology Enabled Care (TEC) – early talks have been conducted with strategic TEC partners regarding the technology component of Maximising Independence and the shared opportunities for future expansion of existing partnerships
- Work has begun on the establishment of a Glasgow Carers Academy that will complement wider carer support services in the city by providing carers with practical, everyday skills such as moving and handling that will support the objectives of Maximising Independence
- The HSCP continues to support the Health and Social Care Alliance to establish a Compassionate Glasgow programme that aims to mobilise family and community assets to increase the number of palliative and end of life patients being supported within their own homes and communities.
- Glasgow HSCP is working with Healthcare Improvement Scotland/ iHub in the Living and Dying Well with Frailty Collaborative to enable community teams to

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proactively use data and anticipatory care planning to identify and support people aged 65 and over to live and die well with frailty in their community, rather than in hospital

- There is an ongoing programme of review of complex home care and other community-based packages where the guiding principles of Maximising Independence are being applied to ensure the HSCP is enabling individuals to live as independently of statutory support as their needs permit
- Implementation of the Mental Health Strategy across the City to support early intervention and prevention and steps to reform specialist mental health services across the City
- New approaches are being developed to support the work in Glasgow Alcohol and Drugs services and the ongoing developments led by the City's Alcohol and Drug Partnership.
- The Primary Care Improvement Plan, which has a number of related workstreams around enhancing multi-disciplinary team working, community link workers, and a wide range of developments to enhance self-care, where appropriate. The mental well-being model for primary care brings many of these connections together at a practice and cluster level.

3.7 As outlined above, we are working across the wider health and social care system to locate our Maximising Independence strategy within the City Vision, MFT and the National Performance Framework, attached at Appendix 2.

4. Programme Investment

4.1 The IJB is asked to support the following priority areas of investment in the programme and future year savings proposals being developed in support of the 2020/21 budget. These would be funded from HSCP reserves on a non-recurring basis. A total investment of £8.5M is currently proposed to be funded from this year's projected underspend over the two years 2020-22.

Proposal	Description	£s
Maximising Independence – developmental approach for change & staff engagement	<p>Investment in staff capacity and culture change to support the Maximising Independence programme.</p> <p>The service changes required to support a different way of working for staff, patients and service users will challenge all of our current thinking on organisations and working within them. There is a large body of evidence to support an assets based approach with staff and clients as a way of engaging and supporting personal and organisational change. The ongoing approach to service change within the HSCP aims to focus on, an evidence based approach to change, an engaging and enabling culture and developing relationships as a key</p>	<p>£150K for each of the next two financial years (2020-22).</p> <p>Total = £300K</p>

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	method of engagement and sustainability.	
Maximising Independence – Branding & Marketing Strategy	To fund a test of change around public messaging to support the Maximising Independence programme. Would borrow learning from POA Campaign, Fostering & Adoption and Home Care recruitment and would be co-ordinated with NHSGGC’s wider communications activity around Unscheduled Care. The intention would be to test messaging via social media and other platforms to cut through to target population cohorts with an established pattern of otherwise avoidable use of health and care services (e.g. under 35s, most deprived quintile). The learning from this exercise would guide any future investment in public messaging to support both Maximising Independence and Unscheduled Care.	£100K for each of the next two financial years (2020-22). Total = £200K
Maximising Independence – Community Capacity Investment Fund	Pump prime funding to build community capacity around meeting low level support needs. Detail of programme to be co-produced with Third Sector. Intention being to use HSCP funding to draw in a match funding element. The potential to include ‘loans’ to social enterprises will be explored. All of this to align with other community level funding streams, including the Council’s Glasgow Communities Fund and HSCP’s Wellbeing for Longer Fund. There will be a specific focus on how the principles of the Glasgow Communities Fund and Maximising Independence best converge to meet the challenges of poverty and inequality. There is an expectation that HSCP funding will continue from 2022/23 at around £500K per annum and that an element of match funding will be achieved.	£500K in 2020/21; £1M in 2021/22. Total = £1.5M
Expansion of Rehabilitation and Enablement resources	In line with the ethos of time-limited purposeful interventions designed to reable individuals and enable them to live more independently of health and care interventions.	£370K for each of the next two financial years (2020-22).

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	<p>This investment will be used to support the re-balancing of the HSCP workforce through time towards greater emphasis on prevention and reablement.</p>	<p>Total = £740K</p>
<p>Development of Family Support Models</p>	<p>Develop a programme of work with third sector partners in supporting a family support model for Adults with Learning Disabilities and Older Adults with Dementia and those who may require palliative care.</p>	<p>£350K for each of the next two financial years (2020-22).</p> <p>Total = £700K</p>
<p>Developing Effective Transition Models</p>	<p>Investing in a Maximising Independence Service to support service users at the point of transition to make best use of community resources and reduce reliance on high cost resources.</p> <p>We will explore all options through a process of joint development with partners.</p>	<p>£400K for each of the next 2 years (2020-22).</p> <p>Total = £800K</p>
<p>Investment in change management resources to support programme</p>	<p>Successful delivery of change will require investment in change management resources, including project management, communications, data analysis, graphic design and OD. The HSCP will work with partners to ensure this resource is applied effectively across the system and is not retained entirely within the HSCP. Consideration will be given to the support communities themselves will require with respect to enhanced decision-making responsibilities.</p>	<p>£580K for a 2 year fixed-term, subject to review thereafter.</p> <p>Total = £1.16M</p>
<p>Investment to support delivery of 'early wins'</p>	<p>Expanded application of Technology Enabled Care (TEC) will be a key enabler to support the successful delivery of Maximising Independence, particularly in relation to the consumer pathway where individuals and families purchase their own devices. This proposed investment relates to signposting and enabling informed consumers; and, to the development of innovative TEC products in partnership with the wider TEC sector. This will build on the success to date of the Can Do challenge sponsored by Scottish Enterprise.</p>	<p>£200K (during 2020-21)</p> <p>£20K (19/20)</p>

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	<p>Compassionate Glasgow – HSCP contribution to support establishment of programme and encourage match funding from other public and private sector sources.</p> <p>Carers Academy - This programme will be designed to offer the citizens of Glasgow opportunities to access the best training and learning resources to ensure that they are skilled in managing their own health and care or that of a loved one as much as possible.</p>	<p>£210K (2020-22)</p> <p>Total = £430K</p>
Central Review Team	<p>To support the review of individuals with complex needs to ensure that their reablement potential is optimised and that all continuing statutory interventions are necessary and proportionate. This investment will be in HSCP assessment and review resources.</p>	<p>£2.67M (2020-22)</p>

4.2 Aspects of these investments are relevant to be financially supported through the city vision programme and as negotiations take place over the next three months on the financial framework for the City Vision, we will ensure our work on maximising independence is included.

5. Recommendations

5.1 The Integration Joint Board is asked to:

- a) Note progress to date with the development of the Maximising Independence Programme;
- b) Support proposed pump prime investment to support the programme;
- c) Earmark £8.5M from the current financial year's underspend to fund the investment outlined in 4.1; and
- d) Note regular updates will be provided to the IJB.

DIRECTION FROM THE GLASGOW CITY INTEGRATION JOINT BOARD

1	Reference number	201119-12
2	Report Title	Maximising Independence in Glasgow City: Update
3	Date direction issued by Integration Joint Board	20th November 2019
4	Date from which direction takes effect	20th November 2019
5	Direction to:	Glasgow City Council only
6	Does this direction supersede, revise or revoke a previous direction – if yes, include the reference number(s)	No
7	Functions covered by direction	The Maximising Independence Programme result in the development and implementation of that will impact on a variety of functions within adults and older people's services, with the full scope yet to be determined. Functions within scope will include; family support models; residential services and high cost care home packages; home care; supported living; intermediate care; Acute services; shared care and kinship care.
8	Full text of direction	Glasgow City Council and NHS Greater Glasgow and Clyde are jointly directed to invest £8.5M of the IJB's 2019/20 financial year underspend in the proposals referred to in section 4 of this report.
9	Budget allocated by Integration Joint Board to carry out direction	The budget for investment in the proposals outlined in this report is £8.5M.
10	Performance monitoring arrangements	In line with the agreed Performance Management Framework of the Glasgow City Integration Joint Board and the Glasgow City Health and Social Care Partnership and via the Maximising Independence Programme Board.
11	Date direction will be reviewed	20th November 2020

Maximising Independence Programme Board - Membership

<u>Name</u>	<u>Organisation</u>	<u>Designation</u>
Susanne Millar	Glasgow City HSCP	Interim Chief Officer
Sharon Wearing	Glasgow City HSCP	Chief Officer, Finance and Resources
Stephen Fitzpatrick	Glasgow City HSCP	Assistant Chief Officer, Older People's Services and South Operations
Jackie Kerr	Glasgow City HSCP	Assistant Chief Officer, Adult Services and North West Operations
Kirsty Orr	Glasgow City HSCP	Programme Manager – Health and Social Care Out of Hours Services and Maximising Independence
Isla Hyslop	Glasgow City HSCP	Head of Organisational Change and Development
John O'Dowd	NHS Greater Glasgow and Clyde	Consultant in Public Health
Fiona Moss	Glasgow City HSCP	Head of Health Improvement and Inequality
Alison Noonan	NHS Greater Glasgow and Clyde	UCC Improvement & Development Manager
Olga Clayton	Wheatley Group	Group Director of Housing and Care
George McGuinness	Community Representative	North East Glasgow Locality Engagement Forum
Shona Stephen	Queens Cross Housing Association	Chief Executive
Julia Egan	Glasgow City HSCP	Nurse Director
Fiona Brown	Glasgow City HSCP	Head of Older People's Services (North East)
Isobel Paterson	Glasgow City HSCP	Head of Adult Services (North East)
Hamish Battye	Glasgow City HSCP	Head of Planning & Strategy (Older People and South)
Janet Hayes	Glasgow City HSCP	Head of Planning & Strategy (Adult Services and North West)
Paul Adams	Glasgow City HSCP	Head of Older People & Primary Care Services (North West)
Katrina Phillips	Glasgow City HSCP	Head of Adult Services (South)
Jean Honan	Carers Representative	Glasgow South Carers Centre
Ian Bruce	Glasgow Council for Voluntary Services	Chief Executive
Frances McMeeking	Glasgow City HSCP	Assistant Chief Officer, Operational Care Services
Sandra McDermott	Glasgow City Council	Head of Financial Inclusion

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Anne Mitchell	Glasgow City HSCP	Head of Older People and Primary Care Services (South)
Gordon Bryan	Glasgow City HSCP	Operations Manager (Care Services)
Richard Groden	Glasgow City HSCP	Clinical Director (South)
Fiona McMahon	Glasgow City HSCP	Service Improvement Manager Mental Health Service Redesign
Frances Millar	Glasgow City HSCP	Change and Development Manager (South)
Councillor Mhairi Hunter	Glasgow City Council	City Convener for Health and Social Care Integration
Gary McNally	NHS Greater Glasgow and Clyde	Senior Crisis Practitioner Staff Partnership Representative
Chris Furse	Glasgow City HSCP	Senior Officer Older People's Services
Laura Pluck	Loretto Care	Managing Director of Care
Colin McCormack	Glasgow City HSCP	Head of Adult Services (North West)
Geri McCormick	Glasgow City HSCP	Head of Commissioning
Peter Millar	Aspire Housing & Personal Development Services	Chief Executive

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