



Item No: 12

Meeting Date: Wednesday 1st December 2021

# Glasgow City Integration Joint Board

Report By: Susanne Millar, Chief Officer, GCHSCP

Contact: Susanne Millar, Chief Officer

Phone: 0141 287 8853

# Strategic Partnership with University of Strathclyde

Purpose of Report:	To advise the IJB of discussions with University of Strathclyde Health and Care Futures Institute and to seek
	agreement to enter into a Strategic Partnership Agreement with University of Strathclyde.

Background/Engagement:	There have been ongoing discussions between GCHSCP
	and University of Strathclyde on the benefits of working
	together to focus on key strategic priorities for the HSCP
	and Glasgow City using the expertise in University of
	Strathclyde to support the strategic work.

Recommendations:	The Integration Joint Board is asked to:
	<ul> <li>a) Note the partnership working already underway between GCHSCP and University of Strathclyde; and</li> <li>b) Agree there is now a formal strategic partnership agreement signed and a Strategic Board established.</li> </ul>

## Relevance to Integration Joint Board Strategic Plan:

The strategic partnership with University of Strathclyde will support the HSCP to deliver on all of its strategic priorities.

# **Implications for Health and Social Care Partnership:**

Reference to National Health & Wellbeing Outcome:	The strategic partnership with University of Strathclyde will support the HSCP to deliver on all of its strategic priorities.
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Personnel:	The strategic partnership will have key benefits across
	the HSCP staff group, supporting the HSCP to foster a
	collaborative leadership, strengthen areas of

# **OFFICIAL** succession planning, talent development, recruitment, and retention. Carers: None **Provider Organisations:** None **Equalities:** None **Fairer Scotland Compliance:** None Financial: None Legal: Support from Legal Services colleagues from the Council (by Direction) will be required to facilitate the signing of the formal strategic partnership agreement. **Economic Impact:** None Sustainability: None **Sustainable Procurement and** None Article 19: **Risk Implications:** None **Implications for Glasgow City** None Council: **Implications for NHS Greater** None Glasgow & Clyde:

# 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. The purpose of this report is to to advise IJB of discussions with University of Strathclyde Health and Care Futures Institute and to seek agreement to enter into a Strategic Partnership Agreement with University of Strathclyde.

## 2. Background

- 2.1. There have been ongoing discussions between Glasgow City HSCP (GCHSCP) and University of Strathclyde (UoS) on the benefits of working together to focus on key strategic priorities for the HSCP and Glasgow City using the expertise in University of Strathclyde to support the strategic work.
- 2.2. University of Strathclyde have established a <a href="Health and Care Futures Institute">Health and Care Futures Institute</a> with a vision to support the health and care sector to become fully integrated and data driven. GCHSCP was approached by the Institute in 2020 to explore options around a partnership between GCHSCP and the Health and Care Institute to work together on our strategic priorities. They have strategic relationships with other public bodies.
- 2.3. There were a number of discussions across the GCHSCP and with the University of Strathclyde on possible areas of collaboration and partnership and this report sets these out in more detail and asks the IJB to agree to formalise this strategic collaboration through a Strategic Partnership Agreement.

# 3. Proposal

- 3.1 Glasgow City HSCP and UoS share a joint vision for the future development of the City of Glasgow through innovation and through citizen centred service and empowerment. Our shared aspirations for a formal partnership approach is that we harness the significant skills and expertise within GCHSCP and UoS to contribute to the development of a modern, innovative, sustainable and enabling health and care system.
- 3.2 The proposed Strategic Partnership between GCHSCP and UoS will facilitate the development and delivery of a joint research and development agenda bringing together teams of multidisciplinary academics to work in partnerships with GCHSCP to develop solutions in response to the real world challenges. Our research and development will inform best practice and drive innovation in the health and social care sector. Existing partnership working is predominantly via The Centre for Excellence in Children's Care and Protection (CELCIS) as well as joint PhD studentships between the Glasgow City HSCP and UoS Business School in the field of collaborative leadership.
- 3.3 Following consideration this partnership will progress and further develop activity in the following 3 areas initially:
  - Maximising Independence
  - Leadership
  - Addressing Multiple and Complex Needs

#### 3.4 Maximising Independence

- 3.4.1 'Maximising Independence means supporting people, who can and want to remain living at home safely for as long as possible with the right support in place. We know that the best health and care outcomes happen when people can self-manage and enjoy their independence' (GCHSCP).
- 3.4.2 Within the HSCP strategic work on Maximising Independence we maintain that people thrive in an environment where they feel empowered and experience themselves as active decision-makers of their own journey.
- 3.4.3 Key challenges for Maximising Independence:
  - More people are living for longer and there is a need to support people and those who care for them to live well
  - Transforming the way that care is delivered, will reflect that way they live now, balancing the need for care and support
  - Services have been adapting for many years to meet the challenges however there is now a need for more significant change creating an opportunity for one of the most progressive transformations of Glasgow city's health and social care provision for generations.
  - To enable the above will require a culture of chance and a focus on delivering something meaningful and tangible – solving the most wicked problems and avoiding drift to solve everything.
- 3.4.4 The University of Strathclyde brings a wealth of expertise to work in partnership with GCHSCP to address these significant challenges. Their multidisciplinary approach to health and care and expertise in data analytics, digital health including telecare, rehabilitation, carers research, whole systems change, and leadership provides expertise within the partnership to leverage the required substantive change to maximise independence.
- 3.4.5 The teams at GCHSCP and UoS have worked together and have:
  - Convened a maximising independence collaborative working group to identify key priorities for collaborative working from senior GCHSCP leads and colleagues from Strathclyde Departments of Computer and Information Sciences, Social Work & Social Policy, Biomedical Engineering and the Strathclyde Institute for Pharmacy and Biomedical Sciences (SIPBS).
  - Agreed an initial focus on next generation telecare services and associated data analytics, with potential focus on data analytics in falls work
  - Agreed to identify internal (GCHSCP) and external funding opportunities to progress activities.

#### 3.5 Leadership

- 3.5.1 Collaborative leadership aims to bring managers, executives, and staff out of silos to work together. Collaborative leaders regularly seek out a diversity of opinions and ideas among team mates to build strategies and solve problems. The complexity and inter-connectedness of modern challenges in health and social care and wellbeing require a move away from traditional top-down leadership pyramids. There is a need for collaborative leadership and empowerment of the whole team to support and enable the substantive whole systems change that is required to deliver the next generation of integrated health and care services. This is an approach to leadership already supported within GCHSCP but there remain key challenges in:
  - The need to develop the collaborative leadership model within GCHSCP to inform, support and enable systems change
  - How to manage variation in practice throughout different sectors and departments – moving from the implementation of 'textbook solutions' to the co-development of purpose-designed leadership models that are agile and responsive to changing needs of the people and organisation
  - As part of collaborative leadership model, strengthen areas of succession planning, talent development, recruitment, and retention.
- 3.5.2 Hosting one of the top business schools in the UK with a focus on leadership and whole systems change the University of Strathclyde is in an optimal position to work in collaboration with GCHSCP to design and develop an effective model of collaborative leadership for the organisation. UoS Business School can provide extensive research, development and training to shape a new, organisational approach and support Glasgow City HSCP in the introduction of collaborative management styles. The combined expertise of both organisations can bring benefits, leading to the inclusion of a wider diversity of experience and thinking within Glasgow City HSCP.
- 3.5.3 Early meetings of a working group on collaborative leadership to identify key priorities for collaborative working has agreed the following key priorities:
  - Workforce development and succession planning, specifically around creating a cadre of staff whose identity is rooted in the partnership rather than the NHS or the Council.
  - Compassionate leadership and the development of a coaching leadership style suitable for managing political complexities, complexity of services and high of level of change, which characterises the partnership's business.
  - This work will also link with existing PhD studentships (currently funded by GCHSCP) focusing on collaborative leadership to inform the research and development agenda
  - Discussion with SBS re development of educational portfolio on collaborative leadership for GCHSCP
  - Identify internal (GCHSCP) and external funding opportunities to progress activity.

#### 3.6 Multiple and Complex Needs

- 3.6.1 People with multiple and complex needs experience several problems at the same time, such as mental health, homelessness, drug, and alcohol misuse, offending and family breakdown. GCHSCP has already undertaken work on integrating our approach to working with people with multiple and complex needs, identifying a range of challenges, including:
  - The complexity of needs in this population often results in frequent referrals for support, with multiple touch points and interventions across different services – that often do not sustain over time.
  - Disparate engagement and an absence of converging opinions across various sectors and key stakeholders can prevent the delivery of timely interventions to those in greatest need of assistance.
  - Identifying people with multiple and complex needs and defining success is challenging. It is hard to define the population and calculate the overall effectiveness of the multiple solutions deployed by various agencies to support this complex group.
  - Addressing multiple and complex needs requires partnership working between key sectors and collective understanding to inform shared approaches for management and improvement.
  - The workforce needs to be skilled, well supported, and resilient to understand needs and ways to manage this complex population.
- 3.6.2 Expertise at UoS can support responding to these challenges in a broad range of aspects. Their significant expertise in advanced data analytics can support GCHSCP to fully understand and define complex care; its determinants, mediators, and outcomes to inform innovative interventions to address the complexity, target those in most need and identify the causal factors leading to events and crisis points. This in turn will inform the delivery of a more anticipatory and preventative model of health and social care to address challenges faced by these complex populations.
- 3.6.3 A key component of effective interventions within complex care will be tried and tested behaviour change techniques embedded in digital health solutions. The University's expertise in social sciences, behaviour change and digital health is ideally placed to support GCHCSP to develop solutions to support individuals to better manage the day to day complexities of their life and when required directing them to relevant services and professionals when required.
- 3.6.4 There is also great potential in co-designing CPD, modules and courses to support the health and care workforce to better manage people with multiple and complex needs. These courses could be co-designed with GCHSCP to make sure they address real world needs and importantly equip the support and professional health and care workforce to deal with this complex care in the future

- 3.6.5 To date we have convened a meeting of a working group including GCHSCP and Strathclyde colleagues from the Departments of Computer & Information Sciences, Strathclyde Institute of Pharmacy and Biomedical Sciences, Design Manufacturing and Engineering Management, Management Science and the department of Social Work and Social Policy. This group will progress work on:
  - Data analytics sub-group to inform application of AI in the identification and management of people with multiple and complex needs
  - Identify internal (GCHSCP) and external funding opportunities to progress activity

#### 4. Next Steps

- 4.1 Having completed this initial stage of working with UoS to identify the key areas for collaboration and partnership, it is now proposed we formalize this through a formal partnership agreement. To formalise the working relationship between the University of Strathclyde and the Council such that over an agreed time period there is a coordinated process for identifying, defining and progressing potential opportunities for engagement through collaboration.
- 4.2 Key features of the partnership agreement will be:
  - Principal/Chief Officer to the Integration Joint Board approval of the Strategic Partnership Agreement
  - Agreed PR announcements on the benefits of the partnership agreement.
  - Nominated lead colleagues as the main points of contact between the two organisations.
  - Establishment of a Steering Group to meet regularly at an interval to be agreed when opportunities can be identified and progress accessed.
  - Joint commitment to seek external funding support (where available) for projects.
  - Arrangements for review and feedback of benefits of the partnership agreement.
  - A process for developing case studies based on project successes.
  - In order to simplify and expedite arrangements for undertaking individual projects/activities, the partners shall separately conclude a Framework Agreement which will incorporate template agreements relevant to different types of project/activity. Each project/activity that is agreed by the partners will then have a separate individual bespoke to cover agreed outcomes, IP, confidentiality, resource requirements etc. as appropriate.

#### 5. Recommendations

- 5.1 The Integration Joint Board is asked to:
  - a) Note the partnership working already underway between GCHSCP and University of Strathclyde; and
  - b) Agree there is now a formal strategic partnership agreement signed and a Strategic Board established.



# **Direction from the Glasgow City Integration Joint Board**

1	Reference number	011221-12
2	Report Title	Strategic Partnership with University of Strathclyde
3	Date direction issued by Integration Joint Board	1 December 2021
4	Date from which direction takes effect	1 December 2021
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 Direction covers activity at a strategic level related to the development of a modern, innovative, sustainable and enabling health and care system. The Direction will have benefits for all delegated functions through an initial focus on priorities around maximising independence, leadership and addressing multiple and complex needs.
8	Full text of direction	Glasgow City Council is Directed to carry out the required activity to put in place a formal Strategic Partnership Agreement between Glasgow City Health and Social Care Partnership and University of Strathclyde, taking into account the priorities outlined in sections 3.4, 3.5 and 3.6 of this report and as outlined in section 4.2.
9	Budget allocated by Integration Joint Board	The Direction should be carried out using existing resources allocated to
	to carry out direction	Glasgow City Integration Joint Board and Health and Social Care Partnership.
10	Performance monitoring arrangements	Performance monitoring arrangements will be considered and built into the detail of the Strategic Partnership Agreement and will, where appropriate,

		include existing performance monitoring arrangements used within the Health and Social Care Partnership.
11	Date direction will be reviewed	1 December 2022