

BW10 Integration Programme Report

Reporting Period – September 2015



Programme RAG Status and Headlines

<div style="background-color: #FFD700; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">A</div>	<ul style="list-style-type: none"> • Revised Berkshire West 10 (BW10) Integration governance and board structure operational from September. • Delivery Group Terms of Reference reviewed and updated. • Programme Management Office (PMO) – Head of PMO post now vacant. Only part time cover in place for PMO functions, current officer leaves end of October. • Hospital at Home – The project has formally been paused due to a lack of activity going onto the agreed pathway. • Integrated Carers Commissioning - Status change from Green to Amber - The fragmentation of commissioning arrangements for carers information advice and support provision is likely to detract from the stated aspiration to move towards single pot funding for all carer support across the West of Berkshire.
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Key progress for last period

- **Reading BC** – Part year review of Better Care Fund (BCF)/Reading Integration completed - Identified the need to review milestones. Partners for Change work commenced in Adult Social Care with innovation sites expected to be in place by November.
- **West Berks BC – Joint Care Provider** - An element of the project (condition 1 – Discharge) has been adopted as business as usual, preparation underway to extend to other acute NHS sites. **7 Day Services** - Pilot of weekend Social Worker presence at RBH has proved successful and beneficial. **Personal recover guide** - scheme is operational, initial referrals made within the RBH with positive feedback.
- **Wokingham – H&S Hub** - Project Board established. Revised project plan and schedule drawn up and in place, implementation time-scale revised from October 2015 to April 2016. **Step up/step down (SUSD)** - occupancy increased and referral options expanded to include GP. Re-designing pathway to make Hub first point of contact. Project impact recording being undertaken, estimated savings included on HR.

Berkshire wide Programme and Enablers

- **Connected Care** – Project Board has agreed to move into the procurement process (Phase 2). Procurement documentation being prepared, looking to issue materials to the market week commencing 19 October.
- **Enhanced Support to Care Homes** - 14 care homes from Berkshire West attending leadership programme. Pharmacy/medicine management programme delivered £26k savings.
- **Frail Elderly Pathway** – Update provided via standalone report
- **Hospital at Home** - Phase 2 go-live for September paused. Options appraisal for project re-configuration under review.
- **Integrated Carers Commissioning** - Berks West CCGs, Reading and West Berkshire have continued to develop service descriptions in preparation for re-commissioning carer Information Advice & Support service.
- **Market Management** – Business case for purchasing data pooling via Data Hub complete.
- **Workforce** - Project manager recruited and in post from September. New Project Initiation Document drafted and to go to Delivery Group for review/comment.

Planned activities for next period

- **Reading BC** - BCF/Integration workshop action log to be reviewed at Reading Integration Board BW10 Delivery Group. Finalise Discharge to Assess (DTA) GP cover and continue work with Royal Berkshire Hospital to streamline discharges. Agree format of DTA project evaluation. Detail of extended hours and Saturday opening for GPs being formulated.
- **West Berks BC – BCF04 Joint Care Provider** - New Pathway to be route for service for all patients from community or full range of hospitals from 2nd November 15. *BCF03 Personal Recovery Guide* – extend referrals to GP, develop outcomes monitoring and specification for tender
- **Wokingham BC** - Continue consultation to look at impact of SUSD and its expansion to 3 units. Complete negotiations with Optalis regarding expanding Domiciliary Care service to 24/7. New Head of Service for Integrated short term health & social care team recruited
- **Connected Care** - Phase 2 Procurement documentation is being prepared, looking to issue materials to the market week commencing 19 October.
- **Enhanced Support to Care Homes** - Care Home best practice group to finalise guidance by November 2015.
- **Frail Elderly Pathway** – Update provided by standalone report
- **Hospital at Home** - Proposals for the remainder of 15/16 being worked up with the local teams and will be shared with the Health and Well-Being boards for agreement. – see Highlight report for proposed options.
- **Integrated Carers Commissioning** - Berks West Carers Commissioning Strategy outline and Project Plan prepared for the Berks West Carers Forum.
- **Market Management** - Data Hub/Service Directory business case complete and decision on commissioning to be confirmed at October project group.
- **Workforce** – Local Authorities to evaluate Generic Support Worker (GSW) Job Description. Trial Introduction of GSWs across Berkshire

Key Risks

Mitigating Actions

Finance (Risk 19): BCF schemes started 2015/16 are not funded in subsequent years threatening continuation of integration programme.

Identify possible additional sources of funding for continuation of schemes. FSG undertaking preparatory work pending NHSE guidance on BCF for 16/17.

Connected Care (risk 28): Risk that the project funding proposals are not sufficiently secure

Project leads working with Finance Sub Group to identify funding options and strengthen proposal, where required

Hospital at Home (risk 22) Insufficient referrals to service undermines business case assumptions on number of patients admitted and Length of Stay on inpatient wards - Impacts as per Risks 1, 2 & 3

Project proposals for the remainder of 15/16 being worked up with the local teams and will need to be shared with the Health and Well-Being boards for agreement.

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	↔		<p>Delivery Group, Finance Sub Group, Programme Management Office (PMO)</p> <p>Delivery Group</p> <ul style="list-style-type: none"> • New DG regime met for first time in September. Group Terms of Reference reviewed and updated. The primary programme need was agreed as a need to refresh and refocus on the intended outcomes and required benefits for the programme of activities. • Other governance reviewed/agreed including - refreshing role definition in projects to clarify responsibility to drive change in 'business as usual', agreeing 'what good looks like' and maintaining a library of best practice examples of Business Cases and Highlight reports, review of group membership and subgroups. • Areas of future focus to include - Co-production and user involvement, PMO and Learning Disabilities/Mental Health work stream resources. <p>Finance Sub Group</p> <ul style="list-style-type: none"> • Undertaking full year to date spend and full year forecast for all Integration/BCF projects to agree robust financial position – feedback/report available post October meeting. • October meeting to begin undertaking initial BCF forward planning to prepare for 16/17 financial years, and beyond. <p>Programme Management Office</p> <ul style="list-style-type: none"> • Head of PMO post now vacant. • Only part time cover in place for PMO functions, current part time PM leaves end of October.
RAG Assessment	Progress vs. previous	↑ ↔ ↓	Update on Progress – Frail Elderly Pathway
	↔		<p>Frail Elderly Pathway</p> <p>Update provided by standalone report</p>

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RAG Assessment	Progress vs. previous	↑ ↔ ↓	Update on Progress - Locality Programmes
A	↔		Reading
			<p>Current Status</p> <ul style="list-style-type: none"> • Part year review of BCF/Reading Integration completed - Identified the need to review milestones for all projects. • Discharge to Assess up and running (105 referrals to the Willows and 432 through CRT) and GP cover proposal now drafted and awaiting funding agreement. • 2 pilots for neighbourhood clusters up and running. Health model reviewed with possibility of restart with social care to restart September 15. • Partners for Change work commenced in Adult Social Care with innovation sites expected to be in place by November. This work will refine the approach to neighbourhood clusters. • Social Care and community nursing and therapy services operating 7 day cover. • Acute and GP surgeries yet to implement whole systems 7 day cover. Ongoing work between CCG's and GP surgeries with detail of extended hours and Saturday surgery opening for GPs now being formulated. • Section 75 pooled budget agreement (s75) with RBC Legal for review and due to be signed off imminently. <p>Next steps/Planned Activity</p> <ul style="list-style-type: none"> • Discharge to Assess (DTA) – Discussions on-going with regards to funding GP cover for 14 beds before going out to tender for the service. Work has started to scope the use of two or three beds for planned respite admissions to accommodate people with mental health needs. • Whole System Whole Week: 1) Neighbourhood Clusters - Review of pilot projects in Reading and how they fit with BCF to be undertaken. • Whole System Whole Week: 2) 7 day access - Further work with RBH to address issues regarding discharge. Emergency Duty Service contract is up for renewal and initial discussion about our requirements going forward have started. • Whole System Whole Week 3) GP Access 7/7 - Detail of extended hours and Saturday surgery opening for GPs now being formulated. <p>Key issues raised</p> <ul style="list-style-type: none"> • Identified the need to review milestones for all projects. This is ongoing work which will be finalised once the detail of projects has been signed off by the Partnership Board.

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RAG Assessment	Progress vs. previous	↑ ↔ ↓	Update on Progress - Locality Programmes
A	↔		West Berkshire
			<p>Current Status</p> <ul style="list-style-type: none"> • Joint Care Provider (inc 7 day services and direct commissioning) <ul style="list-style-type: none"> • An element of the Joint Care Provider project (condition 1 – Discharge) has been adopted as business as usual and preparation is underway to extend this part of the service to other acute NHS sites. Scoping and delivery timescales for the initial elements of the remaining three conditions are in preparation. Future activity to be undertaken as business as usual. Project closedown undertaken – closure report and post-project actions document prepared. • Milestone Status – A new project plan concerning the extension of the Discharge condition and the initial stages of the remaining three conditions is in preparation. • Personal recover guide/Key worker project <ul style="list-style-type: none"> • The scheme is operational in pilot phase and some initial referrals have been made within the RBH. Initial feedback from RBH staff very positive. Project closedown undertaken – closure report and post-project actions document prepared. • VCWB has recruited a Team Manager and are appointing volunteers. British Red Cross has appointed a manager, two Care Navigators and 1 Personal Recovery Guide. Age UK have also appointed a PRG Team Manager. • By 30 September 18 referrals to the service had been made leading to 16 patients being supported by the scheme. • The providers remain on target to offer incremental building service through all 3 charities by 1st October 15 <p>Next steps/Planned Activity</p> <ul style="list-style-type: none"> • Joint Care Provider <ul style="list-style-type: none"> • Pathway Redesign (Discharge) - Full implementation of new pathway from 2nd November 15. • 7 day services <ul style="list-style-type: none"> • Care Management Staff to be operational at Weekends to continue discharge and community care planning processes across 7 days from 2nd November 15. • Operational Management weekend cover to be established to support enhanced service. • Direct Commissioning (Trusted Assessors) <ul style="list-style-type: none"> • Community Nursing Staff will now have a role in urgent care and undertake rapid response assessments and in that role they will procure care. • Council staff under the New Way Of Working within Adult Social Care are able to initiate care where it is appropriate to avoid having to go through a second access route to care provision. • Personal Recover Guide <ul style="list-style-type: none"> • Extend referrals to GPs – publicity is now available for distribution. • Outcomes monitoring in development • Develop contract specification as preparation for upcoming tender exercise.

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RAG Assessment	Progress vs. previous	↑ ↔ ↓	Update on Progress - Locality Programmes
Subject to WISP confirmation	↔		Wokingham
			<p>Project Status</p> <ul style="list-style-type: none"> BCF programme in Wokingham is progressing with Step Up Step Down being utilised more effectively, the Health and Social Care Hub progressing regarding operational, technical and HR issues, the appointment of a new Head of Service for the WISH team, the new Community Navigator Co-ordinator starting and the Local section 75- signed by both parties who each have a copy. The CCG have signed Berks West S75 with Council's for signing. A Project Support Officer is to start 19/10/15 and additional Finance support will start 9/11/15, the HWBB were briefed regarding 2015 Quarter 1 Department of Health return. <p>Next Steps Planned activity</p> <ul style="list-style-type: none"> Integrated short term health & social care team <ul style="list-style-type: none"> New Head of Service to start 9/11/15 Step Up Step down <ul style="list-style-type: none"> Further resident meeting and consultation to look at impact of SUSD and its expansion. Expand the service to 3 units Domiciliary Care Plus <ul style="list-style-type: none"> Complete negotiations with Optalis LTS regarding expanding Domiciliary Care service to 24/7. Options appraisal to be returned to WISP for night domiciliary care elements with additional financial information. Complete service specification and pathway for night domiciliary care service. Neighbourhood Cluster Teams <ul style="list-style-type: none"> Neighbourhood Cluster Steering group to agree which services can be clustered, clear plans for implementation including timescales, KPIs / metrics will be developed and agreed, and the PID and project plan will be updated. Public "Have your Say" event is taking place on 20th October GPs to consider whether Vitality – type partnership arrangement is a suitable model for Wokingham; if not, then alternative ways of working can be explored. Aim to reach a decision by end of October. Overview & Scrutiny Review expected to start late Oct/Nov. Primary Prevention <ul style="list-style-type: none"> Meeting to discuss Ageing Well and subsequent work to develop locality-wide Prevention strategies scheduled for 15 October. Access to general practice <ul style="list-style-type: none"> Consider access for patients with practices not covered by CES scheme. <p><i>- Hub progress reported on page 6 -</i></p>

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A	↔		Connected Care Current Status <ul style="list-style-type: none"> Phase 1 – complete Phase 2 <ul style="list-style-type: none"> Connected Care Board has agreed to move into the procurement process. Procurement documentation is being prepared, looking to issue materials to the market week starting 19 October. Funding sources have been identified (CCG's priming the project via existing funding streams) – subject to confirmation. Pilot project user acceptance testing has identified significant issues. Next steps/planned activity <ul style="list-style-type: none"> Start the development of the Full Business Case and associated (CCG) partnering agreement. Start the development of the participating organisation partnering agreement. Issue the Invitation To Tender (ITT) week starting 19 October. Develop the ITT briefing pack for those directly involved in the marking process. Orion pilot: Deploy to the identified teams. New Risks Identified <ul style="list-style-type: none"> FY15-16 Primary Care Infrastructure Fund has not been confirmed and may not be confirmed until late Q4. Future multi-year funding for phase 3 (full deployment of selected solution) has not been confirmed. <ul style="list-style-type: none"> IMPACT: Move into the procurement in the knowledge that it may need to be cancelled if no Primary Care Infrastructure funding is available (project becomes unaffordable). IMPACT: Build the multi-year cost model on sensible assumptions. Ensure protection for Wokingham CCG via the Partnering Agreement.
			Market Management Current Status Project group re-convened early September following 2 month absence due to vacant Project Manager (PM) post (PM role now delivered via BW10 PMO). Group reviewed position of current initiatives and the required next steps to complete. Group also considered position of the project in relation to the wider Joint Commissioning aspirations and general consensus was that projects should merge. This will be further explored upon completion of current initiatives and at October project group.
A	↔		Planned next steps: <ul style="list-style-type: none"> Market Management Information System - Compile Data Hub/Directory business Case and circulate to group for comments and clarification prior to next project group - Yes/No decision on progress at October meeting Fair Pricing – Review of existing locality Older People residential costing models (i.e. locally tailored LaingBuisson tool kits) Provider failure protocols - Review local protocols and align processes, where appropriate, and identify areas where partner collaboration can strengthen management/failure policy

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A	↔		Workforce <p>Current status:</p> <ul style="list-style-type: none"> New Project Manager appointed 7th September 2105 to implement the Workforce Action Plan signed off by the Partnership Board. The Senior Responsible Officer (SRO) and two NHS members of the group have left the service. A new SRO is required as are two new NHS representatives. September meeting very poorly attended. Funding for the project continues to be drawn from the from Health Education Thames Valley award. <p>Key Achievements:</p> <ul style="list-style-type: none"> Updated Project Initiation Document (PID) drafted and will go to Delivery Group and Finance Sub Group for comment/approval Report received from Skills for Health following three successful workshops. The report outlines the project methodology, outcomes and Next Steps/Recommendations. The workshop successfully defined the role of the Generic Support Worker and is represented in a Job Description Template. The Report has been circulated to the Steering Group for comment. <p>Next steps:</p> <ul style="list-style-type: none"> LA to evaluate Generic Support Worker (GSW) Job Description Trial Introduction of GSWs across Berkshire <p>Key issues raised:</p> <ul style="list-style-type: none"> Currently no project SRO If the valuation of the GSW Job Description is higher than current rates for Health Care Assistants and Support Workers the project may not be fully supported.
			Health and Social Care Hub – Wokingham Locality Progress <p>Key Achievements</p> <ul style="list-style-type: none"> Project Board established, meeting monthly Revised project plan and schedule drawn up and in place. Implementation time-scale revised from October 2015 to April 2016 Operational implementation group (OIG) established Cross organisation HR links made and linked to OIG WBC customer service ASC activity modelling underway as part of the cost for change work. Integrated hub presentation completed for WBC ASC staff away day <p>Planned Next steps</p> <ul style="list-style-type: none"> Staff engagement workshops to begin Integrated hub staffing and cost for change option paper to drawn up and presented to the November project board meeting. WBC ASC lean pathway transfer to be complete by 02/11/2015. Staff engagement schedule due to be agreed week ending 09/10/2015.

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R	↓		Hospital at Home
			<p>Project Status</p> <ul style="list-style-type: none"> The project has formally been paused: due to a lack of activity going onto the agreed pathway. During the soft launch period only 1 patient was successfully accepted out of the 36 patients identified as potentially suitable. Berkshire Healthcare Foundation Trust have been asked to suspend further recruitment at this time to allow for consideration of next steps. Staff including advanced nurse practitioners and a Community Geriatrician have already been appointed to and are in post. A multi-agency task and finish group has been tasked with developing a proposal for the immediate redeployment of the staff already in post to support current system pressures and winter resilience. The group has also been tasked to explore potential options for the future to be considered jointly between the Local Authorities and CCGs in the context of the wider integration programme and the 16/17 planning round. These proposals will be required to go through the local integration groups, CCG QIPP and Finance Committee for onward to the HWBs for approval. Interim staff work plan proposals were shared with the 3 Local Authorities and Senior leads and presented to the Urgent Care Programme Board on 24th September, in order to gain support on the immediate redeployment of staff to support system resilience. <p>Next Steps</p> <ul style="list-style-type: none"> Proposals for the remainder of 15/16 being worked up with the local teams and will need to be shared with the Health and Well-Being boards for agreement. – see Highlight report for detail of proposed options.
A	↓		Integrated Carers Commissioning
			<p>Key Achievements:</p> <ul style="list-style-type: none"> Carer Information Advice & Support Contract (IAS): Berks West CCGs, Reading and West Berkshire have continued to develop service descriptions in preparation for re-commissioning carer IAS. Wokingham Borough Council is not a party to these arrangements. Carers breaks provision and support: Ongoing consultation in Reading on a Wellbeing Bidding Framework which includes funding opportunities for carer support – now extended to include cares of disabled children as well as carers of adults. Similarly, West Berkshire is engaging with VCS providers to develop their second VS Prospectus. Wokingham is reviewing currently commissioned carer services through one to one engagement with providers. <p>Next Steps/Planned Activities</p> <ul style="list-style-type: none"> Carer Information Advice & Support contract: Host a provider event to help finalise details of the bidding framework approach and then formally invite bids. Carers breaks provision and support: Finalise Bidding Framework for Reading and Prospectus for West Berkshire. Concluded review in Wokingham. BW Carers Commissioning Strategy: Outline and Project Plan to be prepared for the BW Carers Forum. <p>New Risks Identified</p> <ul style="list-style-type: none"> The fragmentation of commissioning arrangements for carers information advice and support provision is likely to detract from the stated aspiration to move towards single pot funding for all carer support across the West of Berkshire.

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A	↔		Enhanced Support To Care Homes
			<p>Current status</p> <ul style="list-style-type: none"> Project: Green due to all recruitment needs met. Financial: Amber - The intended reduction in non-elective admissions has not been met for month 4 Activity: Green - reduction in activity has been met for the first time with the revised Healthcare Resource Group (HRG) codes. Milestones: Amber - One milestone outstanding; monitoring of accurate data on admissions. <p>Key Achievements</p> <ul style="list-style-type: none"> Care home leadership programme - 14 care homes from Berkshire West attending course Pharmacy/medicine management - Report received demonstrating a £26k monthly savings Care home data - Comprehensive database in development <p>Next steps/planned activity</p> <ul style="list-style-type: none"> Hospital at Home programme to consider opportunities for identifying care home resident at risk of NELs Review market management scheme and links to Care Home Scheme Care Home best practice group to finalise guidance by November 2015 <p>New Risks Identified</p> <ul style="list-style-type: none"> Ensure Local Authority (LA) engagement is maintained in Care Home working group . <ul style="list-style-type: none"> IMPACT: LA Contracting knowledge on scheme initiatives will be compromised Ongoing risk of the accuracy of monitoring of non-elective admissions continue; validation by analytics completed and to be discussed at coding meeting with RBFT <ul style="list-style-type: none"> IMPACT – Non Elective (NEL) activity monitoring could be incorrect