

Agenda Item	14.
Report No	PEO 36/17

HIGHLAND COUNCIL

Committee: People Committee

Date: 19 October 2017

Report Title: Joint transition service for young people aged 14 to 25 years

Report By: Director of Care and Learning

1. Purpose/Executive Summary

- 1.1 This report provides further detail of the implementation plan to create a joint service for young people with a disability across children and adult services.
- 1.2 The last report was discussed by the Committee on 23 August 2017.

2. Recommendations

- 2.1 Members are asked to:
 - i. Agree the implementation plan as set out in the report.

3. Progress in implementation

- 3.1 In the period since the last People Committee, the implementation plan for the joint transition service has moved forward in a number of respects.
- 3.2 The NHS Health and Social Care Committee meeting of 8 September approved the plan to create the new service.
- 3.3 The Project Board continues to meet, but in recognition of the need for detailed planning, a Steering Group has now been established with a membership including Staff Side representatives and operational leads amongst others.
- 3.4 The updated implementation plan is at **Appendix 1**.
- 3.5 Scoping of a potential site for the co-location of staff is underway, with one option in Inverness currently being evaluated.
- 3.6 The Transition Project Manager will be returning to her substantive post. However, arrangements are in hand to recruit a replacement as it is recognised that there is a need for oversight of the detailed planning stage.

4. Implications

- 4.1 **Resource:** The proposals are cost neutral, other than the requirement to continue to employ a Transition Project Manager to oversee the detailed implementation plan for the remainder of this financial year. This cost can be met from existing funding.
- 4.2 **Legal:** There are no specific legal implications, but the proposal aims to ensure that both Highland Council and NHS Highland are able to meet statutory duties towards the identified group of young people.
- 4.3 **Community (Equality, Poverty and Rural):** The proposal seeks to enhance services for young people with a disability. There has been consultation with service users and the proposal follows the principles set out in the national Scottish Transition Forum's Principles of Good Transitions, specifically Principle 2 "Support should be co-ordinated across all services" and Principle 3 "Planning should start early (age 14) and continue up to the age of 25 years."
- 4.4 **Risk**
 - 4.4.1 Risks are identified in the detailed implementation plan; the main ones being factors which could impact on the proposed time-scale, rather than posing a threat to the desired outcomes.
 - 4.4.2 Whilst in Children's Services the identification of the group of staff who could transfer to the new service is relatively straightforward, this is less so in Adult services, where teams are mostly providing a generic service, rather than a specialist focus on young adults. This therefore requires a bigger piece of work to identify posts, taking account of competing priorities within the existing service.
 - 4.4.3 Whilst staff moving to the new service would retain their existing terms and conditions, there will still need to be agreement on how staff are identified and what impact this will have on services remaining in Children's and Adult services.

4.4.4 The lead-in time for co-location in terms of establishing appropriate ICT support, requires that the team location would need to be confirmed soon. Any delay in confirming a suitable site could lead to a delay in the service being established on the ground.

4.5 There are no identified implications for **Climate Change/Carbon Clever** or **Gaelic**.

Designation Director of Care and Learning

Date 6 October 2017

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Version 2.0
18 September 2017

DISTRIBUTION

Stakeholders

NHS Highland
The Highland Council

Lead Officers

Joanna Macdonald: Director of Adult Social Care, NHS Highland &
Sandra Campbell: Head of Children's Services, Highland Council

Project Board

Bill Alexander, Director of Care and Learning, THC
Sandra Campbell, Head of Children's Services, THC
Joanna Macdonald, Director of Adult Social Care, NHSH
Claire Watt, Transitions Project Manager, NHSH
John Gallon, SDS Peer Advisor
Ellie Wolf, Health and Happiness
Mairi Morrison, Children's Services Manager South, THC
Debbie Milton, Children's Services Area Manager Mid, THC
Dr Gaener Rodgers, Non-executive Board Member, NHSH
Shirley Jack, Manager The Orchard, THC
Bernadette Cairns – Head of Additional Support Services THC
Gillian Newman – Policy Lead Highland Children's Forum
Kate Stephen – Elected Member THC
Jean-Pierre Sieczkarek – Area Manager NHS Highland
Donellen Mackenzie – District Manager NHSH
Kenny Rodgers – Finance Manager NHSH
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Lived Experience Advisors:

Bec Nicholson
John Gallon
Kiah Fox
Beth Vickers

Implementation Steering Group

Operational Leads: Katrina Beaton,
THC, Rhiannon Pitt, NHSH

Communications: Ruth Clelland, THC,
Andy Devlin, NHSH

Business Support: Lisa McClymont,
THC, James Bain, NHSH

Finance: Fiona Bremner, THC, Gavin
Gilray, NHSH

HR: Marie Mackenzie, THC, Kevin
Colclough, NHSH

Staffside Partnership: John Gibson,
Unison, THC, Bernice Nott, GMB, NHSH,
Margaret Macrae, RCN, NHSH

IT: WIPRO (to be confirmed) THC,
NHSH IT Services (to be confirmed)

Carefirst: Phil Dickson, THC and NHSH

Estates: (to be confirmed)

Document Control

	Author	Document Holder
Name	Claire Watt	Anne Hunter

Change History

Version	Date	Changes	Initial
2	18/9/17	Intro Steering group added, S1 background content updated, S2 objectives expanded	CW
2	21/09/17	S3 Scope of the plan expanded and clarified	CW
2	04/10/17	Detail to timeline added	CW

Approval

Role	Name	Signature	Date
Sponsor			

1. Background To The Transitions Project

The Transitions Project was approved by The ECAS committee of The Highland Council in May 2016 and the NHS Highland Health and Social Care Committee July 2016. The Project Manager was appointed in August 2016, with a 12 month remit to map existing Transition processes and scope options for improvement.

Following robust scoping of the current Transitions challenges four options for improvement were developed through a solution focussed approach and in consultation with practitioners (Highland Council and NHS) parents/carers; third sector partners and young people;

- Option 1 – Status Quo
- Option 2 – development of a joint 14-25 Transitions Team
- Option 3 – development of 14-18 team in Highland Council and 18-25 team in NHS Highland
- Option 4 – Specialist Transition Workers within existing Highland Council and NHS Highland teams.

The four options were circulated and presented to the relevant improvement groups including Transitions, Learning Disability and Carer's improvement groups as well as to dedicated project working groups. Reports were also submitted to the Senior Operational Management Teams of THC and NHS and to the Project Board. The consensus was a clear preference for Option 2 – development of a Joint Transitions Team.

Underpinning development of Option 2 has included:

- Data analysis of the number of young people requiring support, their level of need and agency statutory responsibilities. A full data report has been produced with the support of NHS Highland Improvement Team. These numbers have been matched to levels of staffing currently involved, to inform a draft team structure for a Joint Transitions Team.
- Utilising current staffing resources and relevant skill sets more effectively – avoiding the duplication which can happen under current Transitions pathway.
- Promoting *the Principles of Good Transition (Version 3)* developed by ARC Scotland and endorsed by the Scottish Government.

The four options were initially presented to ECAS committee in March 2017 requesting approval to develop Option 2. Further detail was requested around the options therefore a workshop including presentations from young people with lived experience of Transitions was held on 21 June 2017 for elected council members and NHS Board non-executive members.

The request to support the development of a Joint Transitions Team was unanimously agreed by the People's Committee on 24 August 2017. NHS Health and Social Care Committee also approved the direction of travel at their meeting on September 8th.

There was a request from both Committees for a more detailed Implementation Plan co-ordinating workstreams across the following:

- Operational Readiness
- HR and staff side re movement of staff
- Finance
- Business Support
- Care First
- Training needs
- Communications (including the development of a detailed communications plan)
- IT
- Office Location

Statutory Duties

Under the current integration arrangement within Highland, to deliver integrated Health and Social Care Services through a Lead Agency model, Highland Council commission NHS Highland to deliver Adult Services, similarly NHS Highland commission Highland Council to deliver Children's Services. The development of a Joint Transitions Team serving ages 14 – 25 builds on these principles in developing a model with a single management and governance structure. This builds on the progress made to date in both services following integration highlighting that Transitions bridges both Children's and Adult Services. Statutory responsibilities to provide assessment, support, care and protection under relevant legislation for Children and Young Adults will continue to be met under this new model, which is also supported and underpinned by the Public Bodies (Joint Working) (Scotland) Act 2014.

2. Objectives Of The Implementation Plan

- Achieve the timely development of the Joint Transitions Team
- Map the stages and associated timeline to create the Joint Transitions Team
- Agree improvement outcomes across stakeholders
- Consider the implications of wider change processes across stakeholders (proposed staffing is from existing resource)
- Facilitate parallel change planning across stakeholders
- Ensure co-ordination of steering group
- Enable priority setting and problem solving
- Update stakeholders and lead officers

The draft Implementation Plan is to be delivered, as requested, to the People's Committee of Highland Council on 19th October and NHS Health and Social Care Committee on 9th November.

3. Scope Of The Implementation Plan

Inclusions

In consultation with the named Steering Group Advisors – see page 3:

Operations

- Agree operational readiness for change process
- Ratify changes to existing team and staffing structures
- Support and supervise movement of workload responsibilities as per organisational policies and procedures

HR

- Movement of staff from existing teams to Transitions Team as per appropriate organisational policies and procedures
- Any necessary amendments to Job descriptions
- Any necessary recruitment
- Any necessary amendments to staff contracts
- Advice and guidance to Project Manager to support process
- Identification of any issues arising

Staff Side

- Support the development of and any proposed amendments to job descriptions
- Support engagement of staff with changes process
- Represent staff interests and highlight any challenges/solutions during change process
- Support communication to front line staff

Finance

- Identification of staff transferring from existing budgets
- Setting up of new cost centres to identify staffing costs for Transitions Team

Business Support

- Agree standard process for new service procurement and standard process for service closure.
- Agree standard process for payment of providers
- Support business process to support improved cost forecasting
- Support improvement in process for recording and maintaining Care First Service agreements

Care First

- Creation of a new team 'desktop'
- Migration of cases from existing teams to new team desktop
- Support for any required training

IT

- Clarification as to whether single system is required – if so which?
- Access to email
- Agreement regarding shared drives for team storage
- Cost implications – quotes for any required hardware and/or software access and development

Estates/Office Location

- Advise on availability of suitable premises and appropriate process for establishing team base
- Cost implications including outfitting of office
- Facilitate logistics of any movement of existing staff
- Liaise with relevant departments as necessary (Operational Management, Staff side and IT)

Communications

- Press releases utilising appropriate channels
- Manage press and public enquiries (PR)
- Articles within existing internal staff bulletins and specific updates to directly affected staff
- Advising Project Manager re any external presentations

Training for Transitions Team members

- Development of Staff Training Needs Analysis
- Advise on delivery, including timescales of identified training needs
- Linking with existing organisation trainers and training providers
- Support development of team

Exclusions

- Undertaking wider workload and waiting list review (outwith relevant 14-25 Cases) within existing Adult and Children's Services teams.

Constraints/Risks

- Management of change process – including conflicting priorities within Operational Units of both NHS Highland and Highland Council
- Potential lack of sufficient notes of interest from existing staff willing and eager to change teams to develop the Transitions Team
- Challenges in sourcing an appropriate team base to enable Transitions Team to be co-located.
- Lack of identified team base could impact on timescales for IT and other services and also impact on communication to frontline staff who require this detail prior to expressing note of interest.

Assumptions

- Support from People’s Committee
- Support from Health and Social Care Committee
- Support and agreement of Staff side
- Support from Operational Units re timescales of Implementation Plan

4. Method To Be Used

Named persons allocated to Steering Group to facilitate and advise on preparation of Implementation Plan and Timeline from named departments within both NHS Highland and Highland Council.

5. Consultation With Stakeholders

- Governance of Implementation Plan will be through the Governance Group (Project Board) (see section 1) and reports to Senior Operational Management Teams NHS Highland and The Highland Council.
- Consultation throughout Implementation Planning process will include updates to, and opportunity for feedback from relevant Improvement Groups (Transitions, Learning Disability, Carers, Autism Strategy) and project working groups

6. Output

- Implementation plan for development of Joint Transitions team and associated timescale agreed and ratified by stakeholders

7. Draft Implementation Timetable

An outline timetable is given below:

Objective	Proposed outcome	Completion date
Report to People’s Committee	Recommendation to support Joint Transitions Team approved	23/08/2017 19/10/2017 06/12/2017
Report to NHS Highland Health and Social Care Committee	Recommendation to support Joint Transitions Team approved	08/09/2017 09/11/2017

Project Steering Group agreed by Governance Group	Project Steering Group initiated, and monthly meetings arranged	27/09/2017
Agree Project Communication Plan with Governance Group	Action Communication Plan and share with stakeholders	27/09/2017
<p>Monthly Steering Group meetings held to maintain progress resolve issues across workstreams including:</p> <ul style="list-style-type: none"> • HR (including Staff side) • Finance • Business Support • Care First • Staff Training Plan • IT • Office Location • Operational Readiness 	Manage continued progress and resolution of issues across workstreams to achieve targets and the delivery of Joint Transitions Team.	Monthly meetings Nov 17 – Mar 18
Monthly Steering Group meeting reports given to Governance Group and Senior Management Teams – across both Highland Council and NHS Highland (<i>Tier 1 Communications plan</i>) and necessary direction received	Ensure ongoing governance of the implementation plan and ratification of change process	Monthly reports delivered from Nov 17 – Mar 18
Review of Transitions Team Staffing across both Children's and Adult Services to ensure that movement of staff from existing teams supports Transitions without creating vulnerabilities.	Ratification from Senior Management Teams within both NHH and THC of Transitions Team Structure.	31/10/2017
Provide information to estate management of NHH and THC regarding Transitions Team staffing numbers to explore possible office location.	Identification of staff base to share with steering group.	31/11/2017

Information provided to IT service THC (Wipro) and NHSH eHealth regarding office location	Agreement of solutions for IT services including hardware and software for staff	31/01/2018
Communication Bulletins, supported by communications teams in NHSH and THC, to relevant staff teams to ensure staff awareness and to support staff through change process.	Monthly internal staff bulletins to ensure frontline staff are kept informed and updated - to support opportunities for notes of interest.	Monthly bulletins delivered from Nov 17 – Mar 18
HR process initiated within NHSH and THC to facilitate movement of staff from existing teams to Transitions Team - expressions of interest to internal interview/selection process.	Individual Transition Team members identified	Dec 17 – Mar 18
Business Support within both NHSH and THC agreement re standard process for managing transition service agreements	Transitions Service Agreement process ratified by SMT	31/03/2018
Information regarding staffing detail provided to Finance managers in NHSH and THC	New Cost centre set up within both NHSH and THC transferring staffing costs from existing budgets to new cost centre	15/03/2018
Carefirst provided with staff members detail and agreement with operational management regarding migration of case details	Development of Carefirst “desktop” for Transition Team	01/03/2018-31/03/2018
Training programme developed for Transition Team members following training needs analysis	Training programme and schedule agreed with SMT in NHSH and THC	31/04/2018