

Transforming CHC, FNC and Complex Care Services

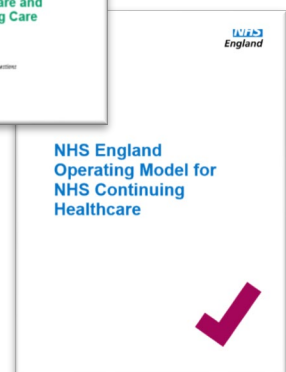
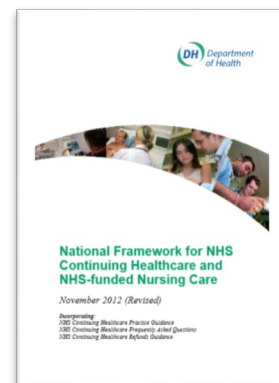
1. Situation

Integral Health Solutions was commissioned by 5 CCGs to undertake a large system-wide commissioning and service transformation programme for CHC, Complex Care and Funded Nursing Care. This involved working across a large geographical system, and included 5 CCGs, local authorities and NHS providers (acute, community and mental health).

The CCGs were dissatisfied with the support services that they were receiving as assessment targets were not being met. As a collective, the CCGs wanted to better understand the service provision prior to the service being transitioned to an in-house model.

The programme of work consisted of 3 stages of work:-

- i) **Stage 1** – Understanding the current state
- ii) **Stage 2** – Transfer of the services to an in-house model, ensuring the safe and effective transition of the CHC, FNC and Complex Care services
- iii) **Stage 3** – Service transformation including development of a Business Case and new Target Operating Model



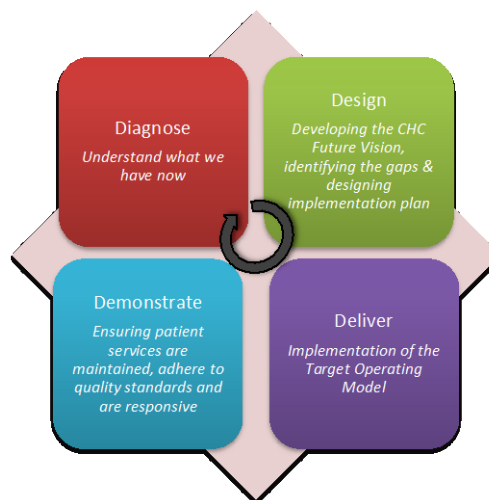
2. Task

We utilised our robust diagnostic approach to complete **Stage 1 – Understanding the existing state**. We utilised our robust **Due Diligence Review** methodology to determine the effectiveness of existing services, and to identify the areas of risk.



Based on the outcomes of the Due Diligence Review, we supported the CCG leads with **Stage 2 – Managing the Transition**. This included the following key activities:-

1. **Supporting the TUPE process** and transfer of staff into CCG's
2. Developing a CCG-led CHC interim **Target Operating Model** (including commercial arrangements & financial position)



3. Service stabilisation and service transformation:-

- i. Service stabilisation, establishing a stable state and mitigating immediate areas of risk (Due Diligence Report)
- ii. Workforce Redesign (Workforce Report)
- iii. Service Re-design: Immediate opportunities for improvement, streamlining and efficiency for delivery from Day 1 of the transfer

We used the concept of a Target Operating Model (TOM) with the CCGs to drive a change in the provision of their CHC, FNC and Complex Care commissioning services. This commenced with the transition of these services to the CCGs.

Following **Stage 2 – Managing the Transition** we commenced **Stage 3 – Service Transformation**, focusing on the re-design of the service following transfer into the CCG's, underpinned by service stabilisation and mitigating the risks identified as part of Phase 1 and 2. Stage 3 included the following deliverables:-

- A **CHC Future Service Model** and supporting **Business Case**



- Detailed project plans and supporting PMO arrangements that supported the established Governance arrangements to oversee the programme.

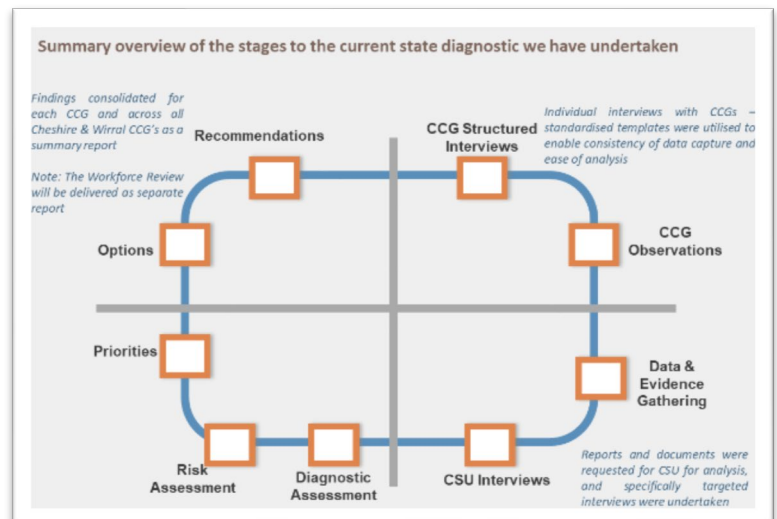
Whilst working on the design of the **CHC Future Model**, we consolidated the service improvements identified in Stage 1, 2 and 3 into one CHC Programme plan.

4. Action

Our Methodology

A structured approach was adopted through the design of questions and templates to capture responses during interviews with key stakeholders.

We established workshops and interviews to fully understand the workforce process. We undertook a data collection exercise to understand service and performance KPIs (Key Performance Indicators) as well as financial and staffing data. This was supplemented by a workforce activity review, as part of understanding workforce pressures.



This holistic diagnostic assessment enabled us to fully understand and assess:-

- Organisational capability
- Performance against the SLA and concerns expressed by CCG leads
- The individual service components of the CHC service.

We adopted a workshop approach to shape the development of the **Future Service Model**. Building on the outputs from two visioning events we facilitated a series of workshops and meetings with the *Clinical Quality & Future Model Group* to develop the **Outline Future Service Model & Vision** for the service. This included: 'Start, Stop, Continue, Activities'; Model Review/Analysis; Development of key components of the Future Model; Future



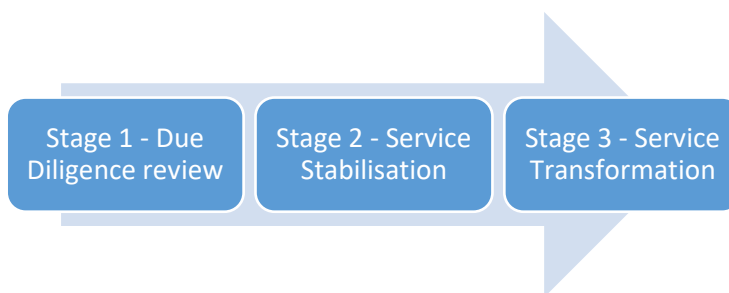
Model Definition workshops post visioning events and an Option Evaluation session.

The **Outline Future Service Model and Vision** was produced to describe in 'Outline' the key features and characteristics of the **Future Model** for the purpose of producing a business case for its implementation. It described the different components to ensure a clear understanding of:-

- What it means to key stakeholders including staff, patients and carers
- How people work and the way in which they integrate across the system;
- How technology should be used to enable access and visibility of data;
- How limited resources are used to meet patient needs;
- How clinical governance and safeguarding is assured;
- How staff will be supported and developed;
- Identify the milestones and timeline for implementing the **Future Model**

5. Results – what we have achieved

We successfully supported the five CCGs on their journey to firstly understand the existing state, following which we were able to design a patient-centred service transformation programme for CHC, FNC and complex care services.



This resulted in establishing a new **CHC Future Service Model** including delivery of the following outcomes and deliverables :-

- a consolidated Programme Plan
- a 'Hybrid' Business Case template, business case guidance and associated Business Case for the CHC Future Service Model, including the development of implementation milestones, risks and dependencies



- Programme Leadership to the Joint Committee and Interim Programme Manager
- PMO support to the various committees set up as part of the wider governance arrangements

The Business Case provided the outline of the **CHC Future Service Model** and its characteristics – including a revised structure. We were able to add significant further value to the CHC Transformation programme through delivery of the following activities / outcomes that were not included in the scope for this phase of work:-

- The development of a milestone and implementation plan to support the detailed business case
- Further development of the vision for the Future Model of CHC, FNC and Complex Care Commissioning alongside the development of ‘a practical and possible’ 12-month plan to inform the development of a business case to deliver service excellence.”

