

ENABLER OUTLINE SUPPORT PLAN

Abstract

This business case describes the enabling plans necessary to deliver the Stockport Together Transformation programme, which will be delivered from 2017/18 to 2020/21.

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1. EXECUTIVE SUMMARY

1.1 Stockport Together

Stockport Together is an ambitious partnership between Stockport NHS Foundation Trust, NHS Stockport Clinical Commissioning Group, Pennine Care NHS Foundation Trust, Stockport Metropolitan Borough Council and Stockport's GP Federation - Viaduct Health - working alongside GPs and voluntary organisations to fundamentally reform the way health and social care is delivered in Stockport.

It aims to ensure the best possible outcomes for local people at a time of growing demand and restricted funding. To achieve this, we are proposing new integrated forms of care underpinned by a significant investment in out of hospital care.

1.2 Business Case Overview

This paper sets out plans for the supporting work required to deliver the full Stockport Together transformation programme. It covers: Information Management & Technology; Business Intelligence; Information Governance; Workforce; Business Support; Programme Management; Estates and Finance.

The document sets out the enabler work plans, investment requirements, and anticipated risks to delivery as well as the mitigations in place to maximise benefits.

1.3 The Case for Change

Like many areas across the country, health and social care services in Stockport are subject to growing demand from an ageing population with increasingly complex care needs. In its current fragmented form, the health and social care system is financially unsustainable. If no changes are made, by 2010/21 there will be a combined deficit of **£156m** across Stockport's health and social care services.

Stockport's Health and Social Care system is made up of a range of statutory bodies who commission local services; NHS, public, private and voluntary organisations delivering health and social care services. The economy is committed to undertaking significant whole system change that will improve services to meet growing and changing health and care needs within limited budgets. As described within the detailed business cases, this requires both a significant number of service reforms and an integrated approach to change. Responsive and ambitious enabling support is critical to delivering this change at the pace required in a consistent and coordinated way.

The Stockport Together partners have agreed a single approach to enabler plans, including a centralised coordination of resources with the intention of shaping a shared service for the

health and social care economy. This pooling of resources will create a more resilient and cost effective service at a time when all partners are increasingly calling on these teams to support the transformation agenda.

1.4 Enabler Plan

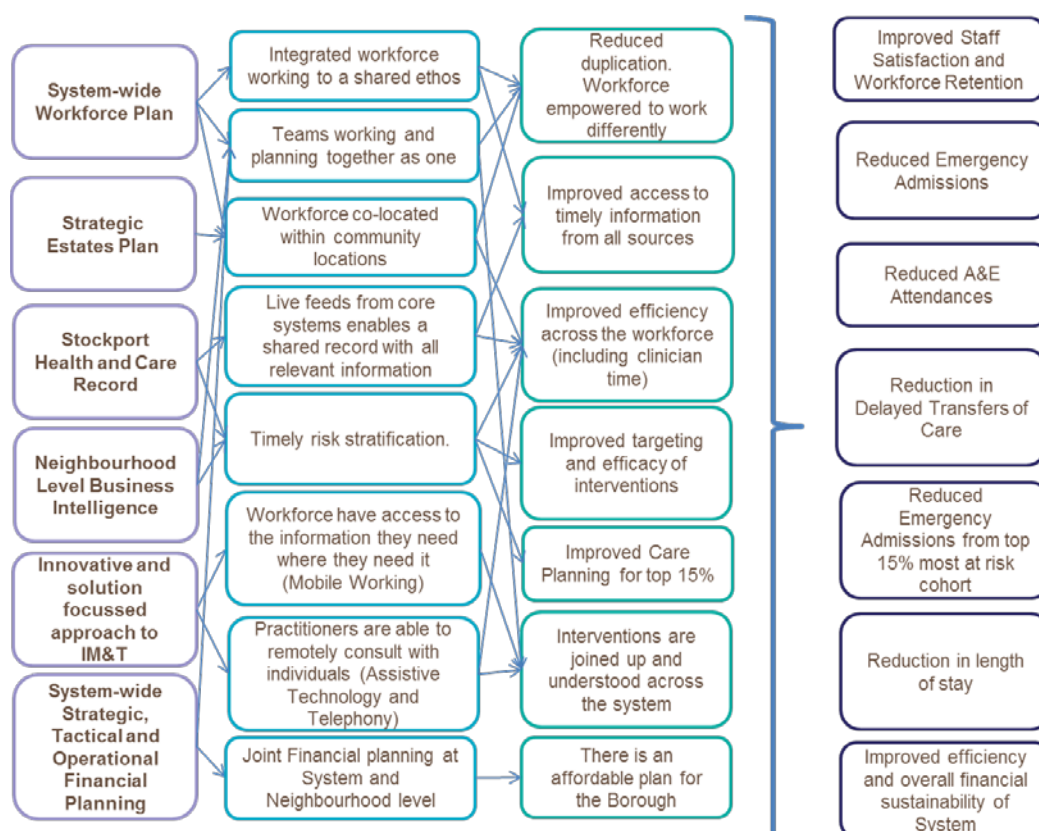
To deliver change, the system needs support services which are transformational, delivering integrated solutions and support to ensure that Stockport is able to fully achieve its ambitions. To that end, this plan aims to develop:

- An **innovative and solution-focussed approach to Information Management and Technology** which enables Stockport's Health and Social Care workforce to work in the right place, with the right information at the right time. In addition this approach needs to empower people (service users and patients) through ensuring individuals can access their own information as well as tools and resources for self-care and information about support within their own community.
- A **cohesive workforce** with the right skills which is engaged and well informed, working in the right place and working to an integrated and person centred ethos
- **Joined up, cost effective Business Support** which ensures that work is done at an appropriate level and that maximises the time made available to front line practitioners to support people in the community
- An **intelligent and outcomes led** approach to planning, resource allocation and interventions which enables the system to proactively rather than reactively address need and risk effectively and efficiently;
- **Systems and person level information** which are integrated and contain a 'single version of people's needs, choices and assets';
- A **strategic estates plan** which enables integrated services to work closer to the community and in buildings that are fit for the future and able to respond to changing needs and priorities;
- An **approach to transformation and programme management** which is perceived to add value, sufficiently agile to respond to a changing landscape and joined up across different parts of the health and social care economy

1.5 Benefits

This support plan contributes directly towards the delivery of the outcomes and financial objectives summarised within the overarching and work stream business cases. An outline of the headline benefits that enablers will contribute towards are outlined below.

Figure 1: Enabler Outcomes & Objectives



1.6 Investment Plan

This business case sets out a total investment requirement of **£7.8m** over 4 years.

Table 1: Planned Investment

Planned Investments:	2016/17	2017/18	2018/19	2019/20	TOTAL
Co-located Accommodation	£301,000	£505,000	£327,000	£327,000	£1,460,000
Primary Care Estates	£140,000				£140,000
Information Governance	£21,815	£21,815			£43,630
BI Platform	£246,063	£209,000	£70,500	£13,500	£539,063
Stockport Shared Record	£180,000	£270,000	£360,000	£360,000	£1,170,000
System Development & Integration	£622,000	£455,000			£1,077,000
System Integration capacity	£87,817	£350,290	£181,887		£619,994
Mobile Working Kit and Infrastructure	£210,000	£300,000	£31,000	£31,000	£572,000
Organisational Development	£25,000	£100,000	£100,000		£225,000
HR and Workforce Planning)	£10,000	£20,000	£20,000	£20,000	£70,000
Workforce and HR Capacity	£60,225	£351,503	£318,493		£730,221
Accountancy Support		£78,508	£78,508		£157,016
Programme & Project Management		£104,458			£104,458
TOTAL	£1,903,920	£2,765,574	£1,487,388	£751,500	£7,803,924

Investment will be sought from baseline support service spending, recurrent investment by partners and the Greater Manchester Transformation fund.

Table 2: Indicative Funding Sources

Funding Source:	2016/17	2017/18	2018/19	2019/20	2020/21
Baseline Support Service Spend*	£52,000,000	£52,000,000	£52,000,000	£52,000,000	£52,000,000
Additional Investment / Recurrent spend Identified	£1,903,920	£2,765,574	£1,487,388	£751,000	£700,500
GM Transformation Funding	-£1,869,200 (approved)	-£2,765,574 (requested)	-£1,487,388 (requested)		

* This baseline figure makes no assumption around potential support service efficiencies.

Other external funding sources have been identified to resource enabler investment requirements:

- **Digital Excellence Fund** - Stockport Foundation Trust has put in a bid in for £5m under the second tranche of the Digital Excellence Fund to become a Centre of Global Digital Excellence.
- **GM Capital (Estates)** - This support plan contains a number of capital investment requirements. There are limited opportunities for capitalisation beyond existing organisational sources. However some GM monies have been identified which Stockport has bid in to. The original bid totals £56m and is to deliver new community hubs and an intermediate tier bed unit. The outcome of this process is not yet known. Should Stockport be unsuccessful in this bid, the capital requirements will need to be reviewed in terms of deliverability and in line with other capital funding routes.
- **GM Capital (IM&T)** – Some capital monies have been identified to support IM&T transformation. Stockport has submitted a bid equating to £2.6m which would cover those IM&T requirements identified above.

This investment plan will be reviewed once the outcome of the bid has been received.

1.7 Risk Management

The main risks to delivery of the enabler plans are set out in the table below with mitigation plans to support the full realisation of benefits.

Table 3: Risk and Mitigation

Risk	Mitigation
Conflicting priorities amongst the Stockport Together organisations. This can affect capacity and pace.	An agreed Enabler Product Plan which is shared regularly with Provider Board and where necessary Executive Board, to ensure clear cross partnership support. Where necessary additional capacity to be supported through the Enabler allocation of the Transformation Fund.
Difficulty in establishing detailed requirements for implementation.	Close working with workstreams to jointly develop requirements and specifications. Enabler Plan to ensure transparency in agreed priorities and scope.
Delays in developing standard or streamlined support service approaches.	Joint working arrangements in place initially, which support initial alignment of services with the next phase of work to further integrate prioritised within the programme.

A lack of alignment between the plans and priorities within the Workstreams and Enablers.

An agreed Enabler Product Plan which is shared regularly with Provider Board and where necessary Executive Board, to ensure clear cross partnership support.

1.8 Next Steps and Implementation

All of the business cases for Stockport Together will be taken through the formal governance processes in each of the partner organisations to agree the new models of care, levels of investment and implementation plans.

Stockport Together will undertake a 'listening period' from 20th June - 31st July 2017 enabling the public to further influence how health and social care will be provided. A report summarising the feedback and key themes will be taken to the Stockport Together programme board in August who will agree how local views will be taken forward in the plans.

2. INTRODUCTION, PURPOSE AND SCOPE

2.1 Introduction

Stockport Together

The health and social care organisations in Stockport see the next five years as a challenging, but pivotal period. There is a strong desire to transform the way in which health and social care is delivered and to generate improved outcomes. The local partnership, Vanguard status and Greater Manchester Devolution provide an opportunity to tackle the challenges, develop innovative approaches and transform services to create a sustainable and vibrant health and social care economy.

The key provider and commissioner organisations that form the health and social care economy of Stockport have been working together in partnership. These partner organisations are Pennine Care NHS Foundation Trust, NHS Stockport CCG, Stockport Metropolitan Borough Council, Stockport NHS Foundation Trust and Viaduct (Stockport's GP Federation). Mastercall Healthcare, Independent Health and Care providers (e.g. Home Care and Care Homes) and the Voluntary and Community Sector are also important partners in this work.

The collective vision is to provide a sustainable health and care system driven by improved health outcomes, reduced health inequalities and lower bed-based care. This reform is described as 'Stockport Together'. The expected outcomes from the Stockport Together partnership are: Healthier People, Quality Services and a Sustainable System. There are a number of key challenges that the partners collectively face and in particular:- financial sustainability of the system, the high inequality gap across the borough, the

ageing population and a system that is over-reliant on the urgent care system.

The Stockport Together work is constructed around four work streams that form an integrated service solution delivering improvements for the locality. These work streams are:



Core Neighbourhood: collectively moving to a model of care for adults, built on strong integrated working at a neighbourhood level



Borough-wide: transforming intermediate and other borough-wide community based services to align to neighbourhoods



Acute Interface: implementing significant changes in the way acute hospital services interface with primary and community services



Healthy Communities: transforming the way the public are empowered to support each other, take control of their own health and engage in the creation of healthy communities

2.2 National, Regional and Local Drivers for Change

NHS Five Year Forward View

The NHS five year forward view sets out the challenges facing the NHS, including more people living longer with more complex conditions, increasing costs whilst funding remains flat and rising expectation of the quality of care. In response, it places much greater emphasis on integration of systems and ways of working. The 2016-17 planning guidance pushes this forward with a much greater emphasis on locality based planning, transformation and transparency. In particular the forward view focuses on:

- Prevention and empowerment
- Greater patient and service user control and choice
- Removal of barriers between care organisations
- A new deal for GP practice
- Requirement to rebalance demand, efficiency and funding of the NHS.

NHS Vanguard

NHS 'Vanguard' sites for new models of care are one of the first steps towards delivering the Five Year Forward View and the integration of services. A number of sites have been selected to build and test new models of care and new organisational forms. Central to this NHS England and NHS Improvement have committed themselves to work together to support these sites. Stockport Together is an NHS Vanguard site, one of 15 MCP (Multispecialty Community Provider) sites in England.

The Care Act 2014

The Care Act aims to provide a coherent approach to adult social care. It

consolidates previous health and social care laws, regulations and guidance. As an integrated piece of legislation, different sections of the Act are designed to work together, and will encourage local authorities to collaborate and cooperate with other public authorities. The key impact is that it changes the eligibility criteria and offers a more 'universal offer' to a wider population. It is anticipated by some that the Care Act will increase the demand for Social Care services.

Greater Manchester Devolution

Greater Manchester Devolution is important in shaping the thinking within our plans. The GM (Greater Manchester) Integrated Health and Social Care Strategy describes five specific areas where change is envisaged and each GM locality is required to demonstrate delivery in these areas. In addition, there is significant work underway as part of this which is of specific relevance to enabling areas, including: Estates, Workforce and IM&T. Stockport's enabling approaches are aligned to the sub-regional direction and are actively engaging in this work.

2.3 Scope and Purpose of document

Purpose of document

The Stockport Health and Care economy is committed to undertaking large whole system change. As described within the overarching business case, this requires both a significant number of specific service changes and an integrated approach to that change. Responsive and ambitious enabling support is critical to delivering this change and without it there would be a less than consistent and coordinated approach and we will not achieve change at the pace required.

In addition, there has been agreement for the development of a single approach to enablers, including a centralised coordination of the resource with the intention that the approach could shape a shared service for the health and social care economy. Whilst this is in development the approach to enablers should afford us the opportunity to test out both assumptions and ability to effectively combine and collaborate where possible to create a more resilient and cost effective offer and manage competing priorities. It also enables a better ability to pull on short term core resource from each partner organisation when required. The approach therefore to a single enabler offer is therefore critical to ensure that synergies can be achieved as early as possible with the evidence of the benefits seen in practice.

This document however specifically describes the approach for enabling the change required across the overarching system to deliver Stockport Together implementation and identifies the resource requirements to deliver this. This is based upon discussions to date with the workstreams regarding priorities and timescales. It is recognised though that the enabler plan will need to be reviewed following discussion and agreement of final business cases for the

models of care so that enablers can respond to any changes to the model or changes to priorities that are made at the sign off stage.

Scope and exclusions

Scope

This support plan will particularly cover enabling support required to deliver the integrated service solution described within the overarching business case. Specifically, those services within the context of this support plan, are:

- HR;
- OD and Training;
- Estates;
- Information Management and Technology;
- Information Governance;
- Business Intelligence;
- Business Support;
- Finance;
- PMO (Programme Management Office) and change resource: for the delivery of the programme as a whole including the separate components.

Exclusions

Enablers 'enable' change within the System and as such separate benefit metrics will not be included within this support plan – although an outline of how enabling activity will support the system and workstreams to meet benefits will be outlined. This is based on the assumption that the ambition and activity described in this support plan will support the delivery of key programme and system benefits identified within other business cases.

In addition, at present the Enablers are largely focussed on supporting transformation within Provider led areas (e.g. operational delivery), albeit mainly in the MCP arm of the ACT (Accountable Care Trust); with the exception of Business Intelligence and Information Governance which have distinct deliverables to support Stockport Together commissioners. This reflects the current status of the programme but the work programme of the Enablers needs to be further revised to ensure that Commissioners are fully supported.

This document indicates the recurrent and future requirements for support services within Stockport. These will be critical to the effective and sustainable delivery of the integrated model solution but do not form part of the approval of the Enabler support plan. A specification for support services will be prepared separately and follow to relevant partners.

2.4 Strategic Enabling Requirements

The strategic vision for Stockport Together is centred on implementing a new

model of care which will deliver the right care and support in or close to people's homes rather than in hospital. This new model will be designed by patients, carers, clinicians and social care professionals and will enable more appropriate evidence based primary and community alternatives to hospital admission and attendance. Stockport Together seeks to deliver £38m recurrent savings for the Health and Social Care economy through delivering this transformation.

In order to achieve this, a number of strategic enabling priorities have been identified, including:

- **A cohesive workforce** with the right skills which is engaged and well informed, working in the right place and working to an integrated and person centred ethos;
- **Joined up, cost effective Business Support** which ensures that work is done at an appropriate level and that maximises the time made available to front line practitioners to support people in the community;
- An **intelligent and outcomes led** approach to planning, resource allocation and interventions which enables the system to proactively rather than reactively address need and risk effectively and efficiently;
- **Systems and person level information which are integrated and contain a 'single version of people's needs, choices and assets';**
- A **strategic estates plan** which enables integrated services to work closer to the community and in buildings that are fit for the future and able to respond to changing needs and priorities;
- An **approach to transformation and programme management** which is perceived to add value, sufficiently agile to respond to a changing landscape and joined up across different parts of the health and social care economy
- An **innovative and solution focussed approach to Information Management and Technology** which enables Stockport's Health and Social Care workforce to work in the right place, with the right information at the right time. In addition this approach needs to empower people (service users and patients) through ensuring individuals can access their own information as well as tools and resources for self-care and information about support within their own community.

Ultimately, the system needs support services which are transformational, delivering integrated solutions and support to ensure Stockport is able to fully achieve the ambition outlined within its new integrated service solution.

2.5 Requirements from the Workstreams

Underneath those areas identified above, each of the Stockport Together Workstreams have developed detailed business cases, including enabler requirements.

2.5.1 Short Term Requirements

The table below shows a summary of the short term requirements against the key Workstream milestones.

Healthy Communities

Component	Milestone	Enabler requirements
Business case	Complete business case alongside neighbourhood business case	Workforce: Organisational and communications strategy for culture change to embed person and community-centred approaches, including coproduction, in all areas of work
Healthy Living Pharmacies	Agreement for continuation of current work	Included in Find & Treat – see below
Voluntary Support for Discharge	Agree funding to continue service for 17/18 via approval at Exec Management Board	IG- support to enable TPA access to EMIS/SHCR
Health Champions	Pilot approach across 3 GP practices	Estates: Access to meeting and event spaces in practices and neighbourhood hubs
Peer support for carers	Website operational	
Self-care	Commence implementation of model	IM&T: Explore potential for tele-health approach. IM&T: IT support for 16 fte self-care coaches, including mobile technology and access to EMIS /SHCR. IM&T: Development of online resources that will form part of the existing Healthy Stockport website. Estates: Flexible accommodation in the neighbourhood hubs/practices for face to face work and desk based work. Workforce: Recruitment support

Component	Milestone	Enabler requirements
Find & Treat	Commence implementation of mode	IM&T: Development of EMIS Web referral templates and pathways; IM&T: PharmOutcomes to support the development of Healthy Living Pharmacies health. Estates: Flexible accommodation for 4fte posts in neighbourhoods. BI: Support for EMIS Search & Reports for public health Workforce: Recruitment support
<i>Place based integration</i>	<i>Commence 2nd place based pilot in Heaton's neighbourhood</i>	Workforce: OD support to embed the ethos and values and develop skills and for people and community-centred working, including leadership, team and personal development approaches.

Core Neighbourhoods

Component	Milestone	Enabler Requirements
Enhanced case management (ECM)	Trial and refine approach in Tame Valley and Marple Go live of two further neighbourhoods Complete roll out of ECM model to all neighbourhoods	IM&T: Mobile access to the Stockport Health and Care Record and IM&T: Access to other health assessments IM&T: System flags, notifications and reminders for staff IM&T: Custom health assessment views for Social Workers, District Nurses and ANPs
Contact, access and triage (CAT)	Phase 1 offer for hospital discharge Phase 2 offer Full CAT model	IM&T: Laptops/PCs /Phones /printing facilities for District Nurses IM&T: Fax alternative for work allocation to neighbourhoods IM&T: Secure method of transferring work between District Nurses and ASC. IM&T: Phone system for District Nurses/ASC – linked with ASC contact centre and crisis response hub IM&T: Electronic Nurse scheduling system Estates: Co-location of the team
Enhanced Primary Care (EPC)	Mental Health, Medicines Optimisation and Physio offered across 25 GP practices	

Component	Milestone	Enabler Requirements
Integrated Neighbourhood Teams (INT)	<p>DNs and caseload aligned to neighbourhoods (excluding existing complex LTCs & EoLC)</p> <p>INTs and caseloads fully aligned with increased capacity</p> <p>Agreed model for extended hours working & process approved by Provider Board</p> <p>Implementation of full extended hours offer</p> <p>Phase 2 - embedding integrated leadership in 3 neighbourhoods commences (based on co-location)</p>	<p>IM&T: Shared access to printers</p> <p>IM&T: IT equipment for District Nurses</p> <p>IM&T: Shared network folders for team</p> <p>IM&T: Shared access to staff management system (iTrent)</p> <p>IM&T: GP access to shared folders</p> <p>IM&T: On call system support for staff operating outside of core hours</p> <p>IM&T: Secure email for SWs, DNs, ANPs, GPs, Admin staff, TPA, OT</p> <p>Estates: 6 co-located Neighbourhood hubs</p> <p>IM&T and Estates: support for 7 day and extended hours service delivery.</p> <p>IG – data sharing support</p>

Borough Wide Services

Component	Milestone	Enabler Requirements
Active Recovery	Single service go live with one point of contact Development of beds options appraisal and business case	IM&T: Support for developing integrated working. Estates: Team co-location Estates: Support for developing a bed care centre
Transfer to Assess	Complete trial on SSOP (Short Stay Older People's Unit) Review and revise model, agree SOP (Standard Operating Procedure) Roll out implementation to wards E2 and M4 Commence roll out of pathway 1 Complete roll out of pathway 1 Scope roll out of pathway 2 Commence implementation of Trusted assessor Full implementation of Trusted assessor role	IM&T: Development of CareFirst to support information from rapid assessment tool to Active Recovery Team Workforce: Support to develop Trusted Assessor role (Phase 1 – T2A, Phase 2 wider to be scoped)
Crisis response	Optimise CRT to ensure that full capacity is utilised and contract fulfilled Review first 6 months and develop future commissioning and delivery plan	IM&T: Support for developing integrated working IM&T: Support to assess viability of a dedicated bed management system Estates: Team co-location
Integrated Transfer Team	Integrated team established and service goes live	IM&T: Support for integrated working Estates: Team co-location Workforce: Support for integrated working
Community Specialist Services	Commence review following sign off of scope and design challenges at EMB Draft model and implementation plan complete Business case approval complete	Workforce: Support for a staffing review
Cross cutting support	All areas:	Workforce: Support to transition to new workforce/management structure Workforce: Recruitment support BI: Development of KPIs and reporting arrangement to track impact of new model

Acute Interface Implementation

Component	Milestone	Enabler Requirements
Ambulatory III	<p>Optimise collaborative streaming pathway to achieve projected numbers:</p> <p>EMIS viewer in triage</p> <p>Substantive staff in place</p> <p>Implement see and treat</p> <p>Implement agreed POCT (Point of Care Testing)</p> <p>Rapid access to angio</p> <p>Fully optimise increased capacity on ACU</p>	IM&T: Implementation of EMIS viewer in the Emergency Department triage.
Outpatient business case	<p>Complete outpatient business case with implementation and benefits plan</p> <p>Approval of outpatient business case by all partner organisations</p>	<p>IM&T: IT software solutions to support new ways of working in Outpatients eg Telehealth</p> <p>Estates: Review of the out-patients estates to identify opportunities for efficiencies and possible locations for delivery of services in the community e.g. capacity in GP surgeries.</p> <p>Workforce: A review of the workforce capacity and skills to ensure it supports the future delivery model.</p>

2.6 Evidence base

Public and Staff Insight

As described within the overarching business case, the Stockport Together programme has undertaken continual engagement with the public and staff.

A number of specific overarching thematic views from this engagement relate directly to enabling activity. An example of this is outlined below:

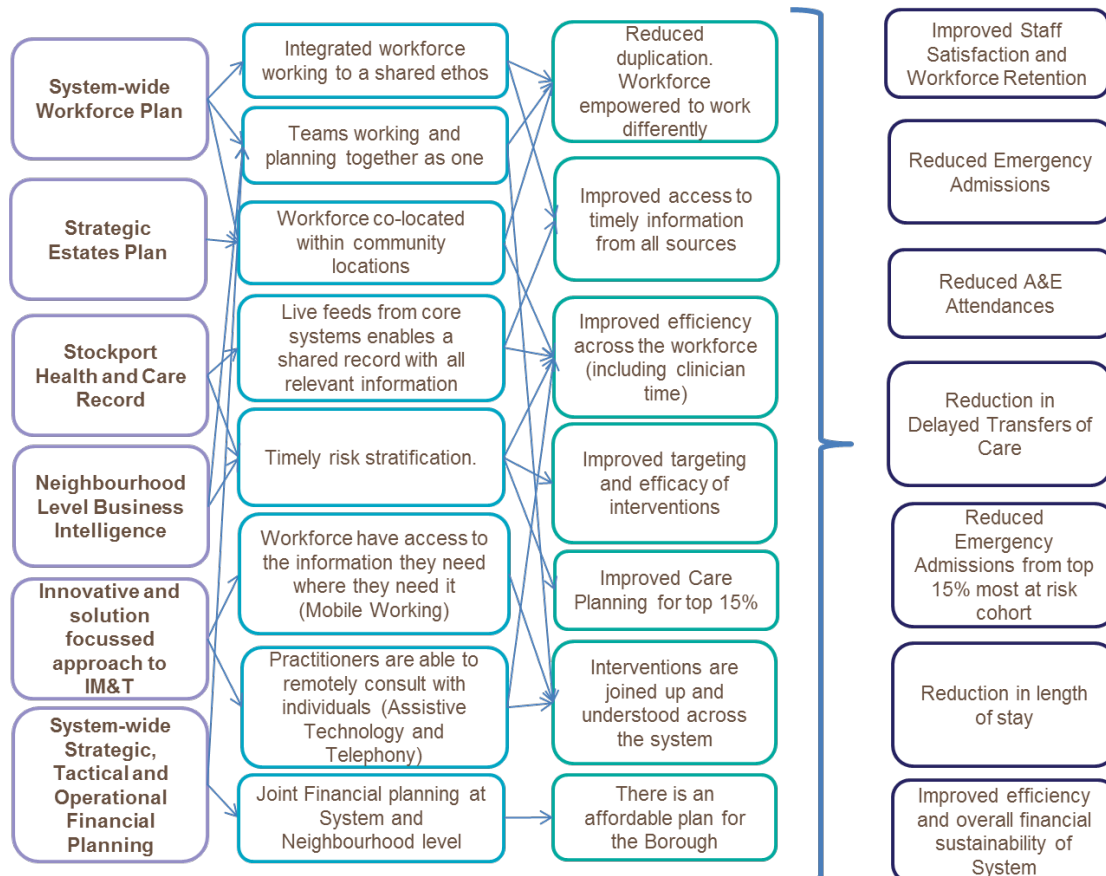
<i>Public View</i>	<i>Economy Response</i>	<i>Enabling Activity</i>
Many services currently provided in hospital should be closer to home.	Our plans will move much more outpatient activity and diagnostics to neighbourhoods.	Activity based within community bases (estates) with teams able to work mobile where required.
People don't want to keep repeating their story at each appointment.	We are creating a single shared record and single neighbourhood teams will create greater continuity of care.	Stockport Health and Care record.
Online access viewed as right thing to do but some fear less IT empowered people will be disadvantaged.	Online is an enhancement for those who wish to use and not the only route.	Public portal.
The sharing of care records to improve care is generally supported.	A Stockport Health and Care record, underpinned by strong Information Governance agreements in place.	Stockport Health and Care Record and cross-organisational IG sharing agreement.

2.7 Strategic Fit of this support plan

This enabling support plan is aligned to national, sub-regional and local strategic direction. As with the Integrated Service Solution model, the enabling work is closely aligned with the Devolution agenda across Greater Manchester (GM). The integration of Health and Social Care is a key priority for the Greater Manchester Combined Authority (GMCA) and work is taking place across IM&T, Estates and Workforce to look at opportunities for alignment of strategies, sharing of best practice, and GM approaches to resourcing. This is particularly well developed within Estates and IM&T and Stockport's local strategies in these areas both align with those at GM. Stockport Enabler leads are also represented on relevant GM groups (e.g. IG, IM&T, Estates and Workforce). As such interim, as well as longer term transformation within these areas will be developed with this sub-regional direction in view.

2.8 Outcomes and Objectives

This support plan contributes directly towards the delivery of the outcomes and financial objectives summarised within the overarching and work stream business cases. An outline of the headline benefits that enablers will contribute towards are outlined below.



A spotlight on a small number of these areas is provided below:

1) *Stockport Integrated Health and Social Care Record*

Process Change / Improvement

The Stockport Health and Care Record provides a holistic view of the patient at the point of care, including their relevant history, care plans, preferences and relevant history.

The enhanced version due in April 17 will allow for live feeds from host systems and will provide an improved mobile version. Initial launch will include a live feed into the GP system Emis Web.

Benefits

- Provides in-depth knowledge of an individual to all health and care professionals
- Safer, more appropriate and timely care for individuals across care settings
- Improved coordination of care across services and providers
- Greater opportunities to create and monitor care pathways;
- Reduced costs associated with avoided acute (re)admissions and diagnostic tests
- Improved patient experience, avoids the need for patients to re-tell their history
- Reduced risk of medicines interactions and improved patient safety;
- Reduction in time spent looking for information freeing up additional time

2) *Shared Wi-Fi*

Process Change / Improvement

Employees can now connect back to their own office network via secure Wi-Fi, as if they were at their normal place of work. Shared Wi-Fi is available at the following locations: Stockport NHS Foundation Trust buildings, Stockport Council buildings, NHS CCG buildings, Stockport GP Practices and Health Centres.

Benefits

- Provides flexibility to employees who can now work in any Stockport Together organisation building that has Wi-Fi
- Supports the mobile working initiative
- Improved productivity of employees
- Avoids cost of providing additional IT infrastructure to support multi-agency working
- Improved Health and Wellbeing of employees, as they are able to more efficiently deliver their work

3) Mobile Working

Process Change / Improvement

Mobile working to be introduced across Core Neighbourhoods, Borough wide and Health Communities.

Currently being piloted with Active Recovery and Neighbourhood officers

Benefits

- Access to care records in patient's homes, care/nursing homes, and away from the office or surgery
- The ability to maintain the same level of access to information no matter which location employees are in, ensuring that care is delivered safely
- Negate the need to regularly return to the surgery or office, and reduce data duplication and double entry
- Improved workflow and scheduling
- More time to spend with patients clarifying care issues, resulting in reduced demand on health services, and/or to see more patients
- Improved Health and Wellbeing of employees, as they are able to more efficiently deliver their work

Enabler contributions to System and Workstream benefits will be further refined as system wide benefits are developed further. For clarity, and to avoid duplication, System and Workstream benefits will remain out of scope of this support plan.

3 THE ENABLERS

This section sets out the vision and detailed delivery plans for each enabler service.

3.1 Information Management and Technology (IM&T)

Health and Social Care IM&T is fundamental to the delivery of Stockport Together, it links information management, systems, technology and telecommunications across health and care to improve the quality and safety of care for our population. At its simplest it is about getting the right information, to the right person, at the right time.

The work in this area will be structured around the following themes:

- 1. Connect:** Connected infrastructure
Resilient infrastructure enabling practitioners, services and patients to connect across the health and care setting.
- 2. Integrate:** Integrated Systems and Digital Care Records
Providing integrated systems and records that have the ability to be interlinked across Stockport and beyond. Establishing a consent and information sharing model and robust data standards, security and quality.
- 3. Understand:** New insights using health & care intelligence
Using data in new ways to lead to earlier intervention and enabling improved outcomes and wellbeing for people and the population. Provide an evidence base to inform service delivery and commissioning.
- 4. Empower:** A consistent, multi-channel user and patient experience
A common, digital front door to our services, complementing traditional interactions. Enabling increased public and patient control and empowerment, moving away from a paternalistic culture of care.

Key Deliverables:

- 1. Connect**
 - Connected networks and infrastructure (e.g. Wi-Fi, a shared resource domain, unified communications and Neighbourhood Hub IT infrastructure)
 - Mobile and flexible working
 - Responsive support arrangements
- 2. Integrate**
 - Improvements to Care Centric/Graphnet (Stockport Integrated Health and Care Record)
 - System consolidation & integration
 - New systems / modules

- Extending access to existing systems
- Document management and messaging

3. Understand

- A business intelligence platform and tools (*see Business Intelligence section below*)

4. Empower

- Personalised online information, advice and guidance
- Personal health records
- Telehealth and Telecare

Work to date:

The Connect and Integrate work streams have made good progress with IM&T colleagues from across each of the partner organisations working together to deliver solutions. Shared Wi-Fi, shared printing for some locations, and a joined up approach to IT support have enabled the co-location of frontline practitioners from different organisations. The implementation of the EMIS Community EPR and the imminent improvements to the SHCR provide a platform for improved data sharing, the removal of paper and manual processes, and the rollout of mobile working.

Looking ahead:

IM&T can be a significant enabler of service transformation but for this to be successful IM&T and the frontline management teams and practitioners need to work closely at the outset to identify and deliver IT solutions that are embedded into new ways of working.

The digital transformation aspects of the programme have so far remained largely unexplored. Requirements are starting to emerge out of the work stream business cases for improved digital self-service, telehealth and telecare solutions. There is huge potential in this area so the IM&T team will work with colleagues to explore digital opportunities.

3.2 Business Intelligence

There is a need to develop an integrated sustainable and quality Business Intelligence information system with the capability and resource to meet the current and future needs of Stockport Together for intelligence at the operational, tactical and strategic levels. Business Intelligence will also use person and population data in innovative ways to lead to healthier outcomes and better lifestyles for the Stockport population. The aim is to develop “one version of the truth and an easy way to capture process and understand it”.

The work in this area will be structured around the following themes:

- To develop high quality data sources for all areas which are consistent and capable of being linked
- To be able to integrate systems to do analysis of whole system impacts of people and conditions
- To identify people early so that the system can intervene before crisis point and make prevention a core function
- Have robust outcome and performance reporting, so that we can track what difference is being made (including supporting the system level Outcomes Framework)
- Support the new contractual forms and commissioning activities
- To identify people in the highest risk throughout the population through risk stratification
- Develop a BI system that is proactive and steers models of care and strategy
- To develop the wider workforce so that they are equipped to use data and be led.

Key Deliverables

An overarching strategy is required for Business Intelligence, this is currently being developed and will support the identification and clarification of key deliverables. However, in the meantime, headline deliverables are identified below:

- To improve data quality to ensure a single data set across the health and social care system.
- An agreed approach to Risk Stratification, including the development of systems either through existing or new tools to allow more detailed data analysis to be undertaken at operational, tactical and strategic levels.
- Training, development and resource to support evidence led interventions and decision making at neighbourhood levels.
- Outcomes Framework to inform and support strategic commissioning.
- Performance Monitoring at operational, tactical and strategic levels.

Work to date:

So far the Business Intelligence teams across Stockport have delivered a coordinated range of support to each of the programmes including the development of neighbourhood profiles, provision of detailed risk stratification to MDTs and the creation of an integrated dataset for monitoring outcomes, which has been described as the most complete in the country.

Looking ahead:

For the future we need to continue to develop an overall strategy, lining up the development of BI capacity, skills and datasets with the emerging needs of the workstreams and the new organisational forms. Our linked dataset will be a key

enabler for this, progressing with the inclusion of adult social care and community health data - priorities for this work.

3.3 Information Governance

To develop robust information governance processes, that meet legislative and integrated working requirements to support the current and future priorities of the Stockport Together partnership.

To include:

- To develop effective processes for sharing information to support direct care in a multi-agency setting;
- To develop effective processes for sharing information to enable risk stratification, outcomes monitoring and case finding;
- To create information governance protocols that allow teams to work in an integrated, co-located environment;
- To develop protocols and procedures to allow integrated teams to access new or partner systems;
- To develop information governance advice and support arrangements for teams and managers within the Stockport Together partnership.

Key Deliverables:

- To review and develop a revised Privacy Impact Assessment process, that covers all co-location requirements and multi-disciplinary team arrangements.
- Agreed approach to consent model and role based access.
- Development of effective training and communication activities that allow timely and positive engagement on information governance with all stakeholders, including alignment with wider engagement work for GPs, staff and third party providers.
- Development of single aligned information governance coordinated support including working arrangements, templates, toolkits and breach procedures.

Work to date

Work has been progressing on the development of effective Information Sharing Agreements. Responding to feedback and concerns about information sharing, and working closely with key interested parties including primary care representatives, a series of Privacy Impact Assessments have been undertaken in selected areas to understand the implications of changes to how information is shared, and who with, and to best inform practice in the future. As well as this, work has been undertaken to align, where possible, policies and processes across organisations to ensure a shared understanding of information sharing is in place.

Looking ahead

The work undertaken to date forms the foundation of a safe but enabling

approach to information sharing. Information Governance will work closely with workstreams and front-line practitioners to understand how they are now and in the future, working and continue to progress towards the establishment of partnership information sharing agreements. Working closely with Communication, OD (Organisational Development) and Change Management, there will be activity and communication to ensure that the public and practitioners are fully informed and empowered to use information effectively and safely.

3.4 Workforce

The success of the Stockport Together programme is dependent on the ability to create a cohesive workforce with staff that will be working in multiple settings and organisations. This in itself is a challenge due to the complexity of contractual arrangements, differing JD's (job descriptions) with similar skill sets, and differing pay scales.

Currently there are multiple cultures and ways of working, and the new model is reliant on the development of an aligned culture across multiple organisations and a fundamental and radical change to the way people think and work. Simply co-locating staff is therefore not sufficient to embed true integration, and investment in the development of teams and leaders is vital in ensuring the vision of integration is delivered. As such, in order to realise the vision for the programme, Workforce including organisational development, IM&T and Estates must all be in place to support the successful functioning of the integrated teams.

In addition to the challenges identified above there are specific challenges relating to the recruitment and retention of key skills and professions within Stockport (including Primary Care). Whilst Stockport is not alone with this, it requires a truly joined up and innovative approach to organisational development, engagement and workforce planning to ensure Stockport is identified as a beacon for best practice and innovative ways of working which will recruit the talent needed to deliver the ambition of the new integrated service delivery model.

The work in this area will be structured around the following themes:

- Developing a leadership culture across the sector which works well together, drawing upon individual strengths and working together in order to achieve a clearly defined shared ambition;
- Formal and informal consultation and engagement with our collective workforces and their representatives in order to implement new ways of working as defined in the emerging business cases;
- Delivery of the approach and process for implementing workforce change across organisations, including support at an individual level to help people make the transition from old ways of working to new ways of working;

- Ensuring that our workforce is appropriately trained in order to meet our 'business as usual' requirements, and developed so that they can thrive in the new setting. Making sure this training is delivered in a way which is efficient and effective. Embedding a shared ethos and culture which is based around core values (incorporating Healthy Community principles);
- Supporting the design of new roles and new ways to recruit, develop and retain staff; designing a flexible workforce which is able to respond to the changing environment.

Key Deliverables:

- To respond to the emerging priorities of the Business Cases, joining up areas of shared HR and OD needs and looking for economies of scale in terms of consultation, recruitment and service redesign.
- To operationalise the Business Cases, working with Senior Managers and Programme Managers to develop staff-facing consultation exercises, particularly in relation to extended working hours, integrated management structures (including spans of control and layers of hierarchy), relocation/co-location and changes to contractual arrangements.
- To review emerging job roles across the whole system, looking for opportunities to develop a flexible workforce and embedding 'The Stockport Way' into HR-related activity (job descriptions, person specifications, contracts, recruitment etc.) across the whole system.
- To join up recruitment, selection, induction and ongoing development activity, taking steps to streamline where we can, create consistency in our processes and the ability to 'passport' staff from one part of the organisation to another with limited bureaucracy.
- To work with managers to develop their 'business as usual' training plans, whilst also identifying transformational training needs and new ways of engaging with providers to help them develop the type of workforce we need in the future
- To ensure that Stockport continues to be aligned to GMCA Health and Social Care Transformation and takes a proactive approach to ensure opportunities at a sub-regional level meet our local needs and can therefore be fully utilised
- To build upon existing leadership and management development activity, enabling us to work to our new Vision and Values, reinforcing the message that we are not in competition with each other and continuing to put the community of Stockport at the heart of our decision making and interactions with each other.

- To support the workforce through this change, providing effective internal communication, engagement and development opportunities where appropriate to directly affected employees.

Work to date

The Supporting People Through Change programme has had a positive impact with initial teams and the further implementation of this approach will be explored to support teams at key transitional periods. The Workforce Team have also been working with strategic leads to support high level workforce planning activity to inform the development of the new models of care.

Looking ahead

At the heart of Stockport Together is Stockport's Health and Social Care workforce. All parts of Stockport's workforce will be progressing through a period of significant change and this will be particularly challenging over this next phase of the Programme as new models of care are implemented and different organisational forms are developed at an ambitious pace. Access to joined-up and timely HR expertise alongside the investment in time and approaches to support the workforce during this period will be fundamental and needs to cut across all workstreams and enabling areas to ensure this is effective.

3.5 Programme Management & Change Management

At its best, HR-related activity, training, communications, project management, programme management and workforce engagement activity all contribute to effective organisational change and development. Within a complex, co-dependent system, the impact of change is rarely contained within the neatly defined limitations of a structure chart. We are therefore developing a single and coordinated approach to Programme Management and Change Management that provides relevant and appropriate resource for longer term programme management and assurance and joined up change management support (which may include HR and OD capacity). There are a variety of roles working in this space that will benefit from single leadership and direction, working to the requirements of the Interim Provider Director and the Programme Director. A joined up resource deployed appropriately would enable the most cost effective means of delivery and would allow flexibility across the economy to better meet competing demands. This will also enable short term resource to be deployed from mainstream activity with the creation of small teams at the core of the programme with the appropriate resources to pull on.

The work in this area will be structured around the following themes:

- To develop a system of programme management and transformation that has clearly defined governance and leadership which is able to keep the whole system in view, reducing duplication, making connections and prioritising the use of limited resources

- To develop a flexible Programme Management and Transformation workforce which has clearly defined roles and responsibilities that can be deployed flexibly according to need and can move between
- To reduce 'internal competition' for Programme Management, Project Management and Change management capacity, eliminating scenarios where key personnel effectively move to another part of the same system for more money
- To agree an approach to programme, project and change management methodology in order to facilitate our aspiration to develop a flexible workforce in this arena
- To clarify the relationship between the SRO (Senior Responsible Officer?) and the Programme Managers, and how these two key stakeholders work together to commission the capacity they may need to implement change

Key Deliverables:

It is recognised that PMO will be informed and directed by the leaders in the system responsible for delivery of the range of programme activity. This would include:

- Bringing into scope all programme management, project management and change resource for redesign into a new single model as described with alignment in the first instance of the support needed for the FT CIP programme.
- Establishment of an agreed approach to Programme Management across the Council, Trust and CCG with all change and transformation capacity 'in view' within a centrally managed team within the enabler programme.
- Appropriate deployment of this centrally managed programme management capacity across the programme to work directly with Senior Management in order to progress the development of commissioning, organisational form and new models of care.
- Development of a shared approach to Change Management and implementation of the model across the system; effective alignment of change management capacity (including HR and OD capacity) to key projects with clear accountability for delivery of change required.
- Alignment with the enabler support provided as outlined in this paper.

Work to date

A range of change and programme management support has been in place to enable the Stockport Together programme to reach its current phase of development but sits uncoordinated.

Looking ahead

As the Programme reaches a critical period of delivery, a coordinated approach is vital to enabling the Programme to deliver the pace and outcomes required. Establishing a joined-up resource will enable partners to do this in a cost-effective and efficient way.

3.6 Estates

Estates is a key enabler for Stockport Together to deliver the future service model, and therefore service design and clinical need will be the main factor that will drive and influence the configuration of our future estate.

This influence manifests itself at two levels, firstly the service redesign process being undertaken by Stockport Together and secondly the impact of developments and programmes that may be driven across the Greater Manchester area.

The work in this area will be structured around the following themes:

- **Neighbourhood hubs** – the development of six accommodation hubs located in the communities that the Neighbourhood teams support. The hubs will allow Council Adult Social Care Workers and NHS District Nurses to be based in the same location facilitating a more integrated way of working. The hubs will also provide a drop in space for staff from the Targeted Prevention Alliance, Mental Health Services and Public Health.
- **Intermediate Tier Hubs** – The development of co-located accommodation for teams within the Intermediate Tier to support the organisational integration of teams.
- **Estates utilisation studies** – studies into the utilisation of estates across the Foundation Trust and Primary Care estates to understand the impact of service changes and any areas for improvement.
- **Community Hubs** - community based hubs to co-locate Health and Care services, including Neighbourhood Teams, Intermediate Tier Services, Primary Care and Outpatients.

Key Deliverables:

Co-location of the Core Neighbourhood Teams

- Werneth Team to be established at either Woodley Health Centre or

Werneth Young People's Centre

- The Heatons Team & Tame Valley Team to be established at Baker Street. (This is a co-location with REACH and Pennine NHS Mental Health Trust).
- Bramhall and Cheadle teams to be established at Eden Point (proposed).
- Co-located contact, access and triage service at Fred Perry House.

Intermediate Tier Services Accommodation

- Provision of a new bed care facility.
- Creation of a new Crisis Response team hub, bringing together several teams into one location.
- Creation of an Active Recovery Team hub location to support the transformation of service for several teams, currently in several locations.
- Creation of an Integrated Discharge Team hub at Stepping Hill Hospital.

Review of Primary Care and Foundation Trust Estate

Foundation Trust Estate:

- To carry out a review of the hospital and outpatient estate to understand the impact of change in service delivery on the hospital and outpatient estate (such as AMU wards and 24/7 Ambulatory Care).
- To explore possible alternative accommodation for face to face outpatient's services.
- Investigate rationalising the Acute estate in response to the strategy to reduce admissions and undertake a number of services in the locality, as part of the redesign of the health care in Stockport.

Primary Care Estate:

- To carry out a review of the Primary Care estate to understand the impact of change in service delivery on the existing estate and to identify any short, medium and long term requirements (from improvements to existing estate to consideration of new community hub facilities).

Community Hubs

1. Capital Investment programme to deliver provision of new community based hubs to co-locate Health and Care services, including Neighbourhood Teams, Intermediate Tier Services, Primary Care and Outpatients.
2. To develop specification jointly across the Programme and with Operational Leads, Staff and the Public.

The development of a longer term Estates and Asset Management Strategy across the shared public sector estate is also a key deliverable in this area.

Work to date

Co-located neighbourhood team bases have been delivered within 3 of the 8

neighbourhoods to date. Learning from these bases is being built into the planning for further co-located accommodation solutions which are expected over the course of the next 12 months. Alongside this work, Estates have been surveying the existing health and social care estate to inform long-term and strategic planning and the identification of future estate needs.

Looking ahead

Estates is an important enabler of service transformation both in terms of how and where our workforce operate, but also how our services are accessed. For this opportunity to be realised, Estates will work closely with Workstreams, other enabling areas (such as Workforce and IM&T) and Stockport's communities to shape and design Stockport's long-term estates offer, looking beyond just Health and Social Care estate footprints, as well as the delivery of immediate accommodation solutions.

3.7 Business Support

To develop a Business Support infrastructure that will support the frontline practice by providing competent, organised and professional business support staff, deployed as appropriate to the MCP. Staff will be trained to fully understand and adhere to systems and processes to ensure we meet legal and technical business requirements and support the current and future priorities of Stockport Together.

The work in this area will be structured around the following themes:

- Baseline assessment of existing resources and deployment overview aligned to Estates Strategy and in particular the development of community based hubs
- Documented understanding of business processes and workflow undertaken site by site including areas of potential service improvement (linked to IM&T activity and digitalisation)
- Development of an aligned general administrative support offer delivered via integrated teams with single line management arrangements where appropriate; a balance of locally delivered and remotely delivered support
- Where appropriate dedicated staff focused on specific activities e.g. Aids and Adaptations, Blue Badges, Intermediate Tier bed management etc.

Key Deliverables:

It is recognised that Business Support activity will be informed and directed by the services we support and will change as the models of community delivery evolve. As such, the Business Support offer will change over time. As a foundation to this evolution, the Business Support deliverables are currently:

- A fully costed baseline assessment of staff and resources.
- A fully costed business support staffing model to support the integrated care model.
- Business Support Core Offer (outlining the scope and range of work)
- Updated JD/PSs (Person Specification).
- A base by base manual of protocols and activities compiled into allocated work-programme and deployment plan.
- Options appraisal (outlining potential working models).

Work to date

Working closely with operational teams, business support have been supporting teams as they trial and implement new approaches to service delivery (e.g. MDTs). Alongside this, an initial baselining exercise is underway to understand existing business support requirements as well as future need.

Looking ahead

As the Business Support Core Offer is developed, the alignment of this work with broader workforce planning and the identification and implementation of digital solutions (such as mobile working and the digitalisation of transactional business processes) will need to be key to ensuring that Business Support provides the appropriate support to front line services.

3.8 Finance

Finance deliverables cut across all parts of the Stockport Together programme, commissioning, provider, strategic, operational and tactical and include an overarching responsibility around programme and organisational governance. A Finance sub-group is in place which reports in to the Executive Board and consists of Directors of Finance from the Foundation Trust, Clinical Commissioning Group and the SMBC Borough Treasurer. In addition, a senior Finance lead has been established for the Provider Board. This Support plan does not seek to duplicate finance requirements identified within other parts of the Programme, however it recognises the critical enabling role performed by Finance (e.g. advice, financial modelling, strategic financial agreements and oversight) and the alignment with support service considerations.

3.9 Cost Benefit Analysis (CBA)

In line with earlier in this support plan, a separate CBA won't be produced for the Enabler support plan as enablers support the delivery of benefits elsewhere within the system. However an approach to understanding the delivery of the benefits identified above will be developed jointly between the workstreams, enablers and the Programme in line with both the Outcomes Framework and the operational level benefit tracking.

3.10 Impact on Partner Organisations

The enabling vision outlined within this support plan, as well as the overarching strategic case will involve partners across the Health and Social Care economy developing integrated enabling approaches to ensuring the integrated vision of the model can be achieved. This is likely to involve critical changes to organisational led policies, processes and solutions to ensure in the interim, as a minimum, existing arrangements are more greatly aligned. Longer term opportunities for greater integration of support services may need to be considered. This isn't part of the scope of this support plan at present.

4. INVESTMENT PLAN

To ensure the Enabler Plan can be delivered at scale and pace it will need to have effective resourcing. This will come from both non-recurrent sources (e.g. GM Transformation Fund and Better Care Fund), in kind resources from partner organisations and capital funds.

Due to the nature of enabling services there will be recurrent resource requirements. This includes leasehold costs, software licence, data connections and system development. It is expected that this will be met through agreement with provider organisations in the first instance, however, it is recognised that work to review, align and integrate support services will need to include agreements relating to ongoing revenue costs. To reflect this, break clauses within 2018/19 have been built into agreements, where resources have been met through the Transformation Fund in the interim.

4.1 Investment Plan Assumptions

The following assumptions have been made in relation to the Investment plan for the Enabler work:

- a) This Investment Plan sets out the first significant wave of resources requested from the Enabler services by the Workstreams and is based on the current models of care prepared. It is anticipated that there will be further requirements and future waves of investments identified (such as for Telecare and Telehealth and Business Support capacity) in line with the future development of models of care (e.g. the wider Boroughwide Care services model, Outpatients and Primary Care) and the future model of support services.
- b) There will be a review of the support service provision to the MCP and across Stockport Together. It is anticipated that the integration of support services can deliver significant efficiencies to economy. Full financial modelling is required however, it is envisaged that due to the scale of opportunity resulting from support service integration that any additional

recurrent costs identified now would be met through efficiencies released through integration.

- c) Central to the Stockport Together model is a system-wide workforce plan that ensures we manage changes for employees and support culture and skills changes. It is anticipated that to deliver this will require further resources in terms of staffing (e.g. HR and TUPE expertise) and non-staffing (e.g. training costs, redundancy costs). The exact requirement will need to be developed and incorporated into an updated iteration of this investment plan but where possible, with a single approach to a PMO this will also be supported where possible from core organisational resource.
- d) Finally, the deliverables identified within this Support plan, and the requirements outlined within the Investment Plan, are dependent upon the continued commitment of all partners to ensure leadership is in place within enabling services across their organisation to deliver key enabling products.
- e) This support plan has been developed in response to the overcommitted ask of the transformation fund and as such is scaled back from earlier versions. As a result, it is expected that funding for business as usual IT equipment such as computers and peripherals for new staff, will be funded by the services and not from the Enabler budget.
- f) The coordinated approach to PMO is a key part of ensuring that there is a single view across the whole programme where short term resource can be released for stipulated activity as key points in the implementation plan.

4.2 Investment Requirements

The additional investment requirements are considered within staffing and non staffing.

4.2.1. Table.1: Detailed investment requirements

Please note, this table does not include the capital funding required to enable significant capital investment into any future developments. This is considered separately below.

Theme	Investment Description	2016.17 Costs (£)	2017.18 Costs (£)	2018.19 Costs (£)	2019.20 Costs (£)	Total costs (£)
Estates	Co-located Accommodation Bases <i>(includes Eden Point Accommodation; Carillion project management support)</i>	301,000	505,000	327,000	327,000	1,460,000
Estates	Primary Care Estates	140,000	-	-	-	140,000
IG	Information Governance <i>(IG Lead)</i>	21,815	21,815	-	-	43,630



IM&T	Understand (Business Intelligence Platform; BI Managers and Developers)	246,063	209,000	70,500	13,500	539,063
IM&T	Integrate - Stockport Shared Record (including linked DOCMAN systems developments)	180,000	270,000	360,000	360,000	1,170,000
IM&T	Integrate – System Development and Integration (Includes Community EPR, EMIS Web Rollout, Telephony Platform, Alert and Messaging System, EMIS Enterprise, Bed Management System, IG tools and shared repository)	622,000	455,000	-	-	1,077,000
IM&T	Integrate – System Development and Integration capacity (IM&T Lead, Project managers, Business Analysts and Developer)	87,817	350,290	181,887	-	619,994
IM&T	Connect - Mobile Working Kit and Infrastructure (Includes Video Conferencing, Infrastructure and Devices)	210,000	300,000	31,000	31,000	572,000
Workforce	Organisational Development and Training (includes: Culture Change Training and Development Programme)	25,000	100,000	100,000	-	225,000
Workforce	HR and Workforce Planning (includes Legal Advice and WRAPT)	10,000	20,000	20,000	20,000	70,000

It should be noted that investment requirements shown above do not include the investment to establish a Provider Programme Management Office which are captured in the Programme Office and Provider Board business cases.

4.2.2 Table 2: Summary of investment requirements

	16/17	17/18	18/19	19/20
	Costs (£)	Costs (£)	Costs (£)	Costs (£)
Non Staffing	1,583,000	1,750,000	851,500	751,000
Staffing	320,920	1,015,574	635,888	0
Total	1,903,920	2,765,574	1,487,388	751,500

4.3 Funding Sources

Outlined below is the overall indicative investment summary

4.3.1 Table.3 – Total Indicative Investment Required

	2016/17	2017/18	2018/19	2019/20	2020/21
Baseline Support Service Spend*	£52,000,000	£52,000,000	£52,000,000	£52,000,000	£52,000,000
Additional Investment / Recurrent spend Identified	£1,903,920	£2,765,574	£1,487,388	£751,000	£700,500
GM Transformation Funding	-£1,869,200 (approved)	-£2,765,574 (requested)	-£1,487,388 (requested)		

**Please note, this is a baseline figure and makes no assumption around potential support service efficiencies.*

It is anticipated that enabler requirements will be met through one of the following funding routes:

- Organisational Cash Limit
- Reshaping Support Services
- GM Transformation Fund
- Other External Funding (e.g. GM Capital Fund, Digital Excellent Fund, GM IM&T capital fund, Care Act)

Outlined below is a summary of how those investment requirements will break down across the four funding sources

4.3.2 Organisational Cash Limit

A number of requirements are currently being met through organisational cash limit, this includes:

- Ongoing revenue costs (including leases) on interim co-located accommodation bases (e.g. Hollins House, Hazel Grove Clinic and Baker Street);
- Implementation capacity (e.g. developers, client relationship managers and administrative support);
- Strategic organisational and enabler leadership;

There is a value to enabling activity being delivered as part of and in line with core organisational priorities and by the teams which will be delivering the support longer term. As such where possible and appropriate resource requirements are considered in the first instance through reprioritisation of existing organisation's resource and capacity and embedded within 'business as usual'. However, in some areas this is not a sustainable model of resourcing change nor does it deliver at the pace required to support operational change. In these instances additional resourcing requirements have been identified (and summarised within the tables above).

4.3.3 Reshaping Support Services

Support Services are critical to enabling operational services and supporting

the implementation of the new Integrated Service Delivery model and MCP within Stockport. As the two largest employers in Stockport, Stockport MBC and Stockport NHS Foundation Trust (FT) both retain significant public support services, with a shared value of approximately £49m, employing around 1,225 Whole Time Equivalents (WTE). Other Stockport Together partners also draw on important support services from a variety of sources.

Work to date, through the Enablers workstream within Stockport Together, has created an ethos of collaborative working across support services and delivered important early value however there is an opportunity to further build on this through a greater integration of support. This has led to a decision for the Council to lead the development of a proposal for a shared service.

The benefits associated with integration in individual service areas are diverse, ranging from the creation of efficiency savings to improving joint working between Partners. To this end, the starting position for this work would be that all support services are in scope. Which services are integrated at what phase in the transformation process will depend upon Stockport's priorities for change and commitment from partners to proceed with reshaping support services. Overarching benefits that have been identified from a Stockport-led integration of support services include:

- The local health and care economy retaining direct influence over support service quality and model, so that it can be adapted to meet future changes
- Greater local resilience through integration, with shared support services that can efficiently flex and respond to changing demands and priorities
- Value for Money through identifying cross-organisational efficiencies and economies of scale
- Integration challenges, cultural norms through sharing learning, skills and experience across the entirety of both organisations
- A clear focus on meeting immediate transformational requirements by reducing organisational barriers and therefore ensuring pace and responsive support; and
- Retaining a strong local employment offer with good careers in and across Stockport public services, enabling Stockport to recruit and retain talent thereby driving up quality and improving outcomes for local people.

Financial modelling is required to fully understand the breakdown of current services and the scale of opportunity. However initial indications are that this could not only release efficiencies (which in part could be used to cover new recurrent costs) but also align systems, workforce and processes to ensure a joined-up approach is embedded. It is envisaged that this piece of work will be critical to enabling operational transformation through innovation as well as supporting the economy to become more resilient and financially sustainable.

4.3.4 GM Transformation Fund

	17/18* Costs (£)	18/19* Costs (£)
Non Staffing	1,750,000	851,500
Staffing	1,015,574	635,888
Total	2,765,574	1,487,388

Below is a summary of the indicative Enabler investment requirements from the Transformation Fund.

*Year 2 and 3 asks are indicative and are based upon identified enabling requirements. This will need to be considered in line with a Programme wide approach to Transformation Fund allocation, Support Services review and the outcome of external funding bids.

Contract Break Points

Table.3 above identifies recurrent spending requirements beyond the transformation funding period. The key areas are:

- Eden Point Accommodation
- Stockport Health and Care Record

As outlined within the Investment Plan assumptions it is the intention that recurrent costs will be picked up through efficiencies within support services however in order to progress these key deliverables and in recognition that work to understand support service opportunities needs to take place, a break clause in contracts for both the above areas has been negotiated at the end of year 3. As such Stockport Partners would not be financially committed to either of these areas of spend beyond the end period of the GM Transformation Fund.

4.3.5 Other External Funding

Other external funding has been identified to resource Enabler investment requirements:

- *Digital Excellence Fund* - Stockport Foundation Trust has put in a bid in for £5m under the second tranche of the Digital Excellence Fund to become a Centre of Global Digital Excellence.
- *GM Capital (Estates)* - This support plan contains a number of capital investment requirements. There are limited opportunities for capitalisation beyond existing organisational sources. However some GM monies have been identified which Stockport has bid in to. The original bid totals £56m and is to deliver new community hubs and an intermediate tier bed unit. The outcome of this process is not yet known. Should Stockport be unsuccessful in this bid, the capital requirements will need to be reviewed in terms of deliverability and in line with other capital funding routes.

- **GM Capital (IM&T)** – Some capital monies have been identified to support IM&T transformation. Stockport has submitted a bid equating to £2.6m which would cover those IM&T requirements identified above.

This investment plan will be reviewed once the outcome of the bid has been received.

5. TIMELINE, RISKS AND MONITORING

5.1 Enabler Headline Milestones

Enabler	Phase 1 Milestones (August to October 2016) – completed
IM&T	IT infrastructure in place for the refurbished A15 “Community” Ward
IM&T	IT infrastructure in place for the SSOP (Short Stay for Older People) ward
IM&T	Mobile Working solutions provided for the Crisis Response Team
IM&T	Neighbourhood Hub IT infrastructure for Victoria, Marple & Stepping Hill
IM&T	Shared IT support arrangements in place
IM&T	Shared resource domain implemented
IM&T	Shared Wi-Fi implemented
Estates	Neighbourhood Team co-locations (Phase 1) Victoria, Marple, Stepping Hill
Workforce	Workforce Plans produced for Community Specialist Services and Core Neighbourhoods
Workforce	Workforce development plan - data collection (Phase 1)
Business support	Integrated working guide developed

Enabler	Phase 2 Milestones (November 2016 to March 2017)
IM&T	Bed Management system research
IM&T	Council Social Care System replacement - procurement decision
IM&T	District Nurses migrated from Dominic to EMIS Web
IM&T	EMIS EPR viewer access in A&E
IM&T	EMIS form for automated referral to START team
IM&T	EMIS Remote Consultation - pilot with 3 GP practices
IM&T	EMIS Web Community
IM&T	IT infrastructure for Ward A14
IM&T	Mobile Working offer developed
IM&T	Shared resource domain established for BI Teams
IM&T	SHCR – upgrade to Care Centric v3
IM&T	Single sign on for Social Workers to the SHCR
Workforce	Workforce plans for Borough Wide and Acute
Workforce	Workforce Development Plan
Workforce	Leadership development
Workforce	Organisation change and re-design
Workforce	Supporting People Through Change programme
Workforce	Recruitment
Estates	Co-location requirements of Intermediate Tier Services established
Estates	Co-location of contact, access and triage staff

Estates	Review of the Primary Care and Foundation Trust Estate
Estates	Strategic Estates Plan revised
IG	Privacy Impact Assessments
IG	Training and communication
IG	Alignment of Information Sharing policies and procedures
BI	Single data set identified for Outcomes Framework
BI	Discovery Workshops
Business support	Baseline staff assessment

Enabler	Phase 3 Milestones (April 2017 to March 2018)
IM&T	Bed Management System implemented
IM&T	Co-location IT infrastructure support
IM&T	Community EPR
IM&T	Council Social Care System replacement implementation
IM&T	Development of online resources for Healthy Communities
IM&T	EMIS Community EPR Mobile app & Phase 1 live
IM&T	EMIS Remote Consultation
IM&T	EMIS Web consolidation
IM&T	Federation of email systems
IM&T	i Docman pilot
IM&T	Integrated / aligned networks
IM&T	Integrated support arrangements
IM&T	Intermediate Tier co-location IT infrastructure
IM&T	Intersystems TrackCare EPR mobile app & Phase 1 live
IM&T	Support for Healthy Communities IT and digital initiatives
IM&T	Support for Outpatients Programme IT and digital initiatives
IM&T	Mobile working rollout
IM&T	Pennine Care added to the shared Wi-Fi network
IM&T	Proof of concept for extending the shared Wi-Fi network to Care Homes
IM&T	Shared resource domain extended to Pennine Care & FT printers added
IM&T	Stockport Health and Care Record (live feeds and apps)
IM&T	Tailored IT support for extended hours and 7 day service delivery
IM&T	Support for PharmOutcomes
IM&T	System consolidation / interoperability charter
IM&T	Telehealth pilot in Care Homes
IM&T	Unified telecommunications solutions investigated
IM&T	Patient Activation measure questionnaire system integration
Workforce	A system-wide workforce plan developed
Workforce	'Supporting People through Change' offer developed
Workforce	Development of a Training and Development plan for the Borough
Workforce	Development of integrated roles
Workforce	A shared ethos and culture embedded, which is based around core values (incorporating Healthy Community principles);
Workforce	Recruitment and retention planning and support

Workforce	Implementation of extended hours working
Estates	Community Hubs
Estates	Intermediate Tier Services co-located
Estates	Bed Care Facility
Estates	Review of the Outpatients estate
BI	Business Intelligence platform and tools developed for operational teams
BI	Business Intelligence Insight and Tools provided to support Enhanced Case Management
Business support	Integrated Business Support service implemented

5.2 Risk and Mitigation

The following table shows the risks that have been identified for the Enabler work and the mitigating action that will be taken to manage them.

Ref.	Risk	Mitigation
1.	Conflicting priorities amongst the Stockport Together organisations. This can affect capacity and pace.	An agreed Enabler Product Plan which is shared regularly with Provider Board and where necessary Executive Board, to ensure clear cross partnership support. Where necessary additional capacity to be supported through the Enabler allocation of the Transformation Fund.
2.	Difficulty in establishing detailed requirements for implementation.	Close working with workstreams to jointly develop requirements and specifications. Enabler Plan to ensure transparency in agreed priorities and scope.
3.	Delays in developing standard or streamlined support service approaches.	Joint working arrangements in place initially, which support initial alignment of services with the next phase of work to further integrate prioritised within the programme.
4.	A lack of alignment between the plans and priorities within the Workstreams and Enablers.	An agreed Enabler Product Plan which is shared regularly with Provider Board and where necessary Executive Board, to ensure clear cross partnership support.

5.3 Programme Management Resources

The Enablers programme will require dedicated programme management resources to effectively deliver this support plan, including:

- Programme Manager;
- Project Managers (to be deployed flexibly across the programme but to be

initially deployed to support IM&T).

This has been built into the resource requirements outlined above, but is currently funded from cash limit, and will work closely with wider programme resources to ensure a sharing of approach and best practice.

5.4 Monitoring and Evaluation

Monitoring and evaluation of this support plan will be aligned to the Programme reporting mechanisms to ensure that benefit realisation targets are considered across both the operational and enabling activity change. This will consist of weekly update reports and monthly highlight reports.