	London Borough of Hammersmith & Fulham CABINET 9 DECEMBER 2013
TRI-BOROUGH ADULT SOCIAL CARE PORTFOLIO DELIVERY RESOURCE PLAN	
Report of the Cabinet Member for Community Care - Cllr Marcus Ginn	
Open Report	
Classification: For Decision	
Key Decision: Yes	
Wards Affected: All	
Accountable Executive Director: Liz Bruce, Executive Director, Tri-Borough Adult Social Care	
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1. EXECUTIVE SUMMARY

- 1.1. The Tri-Borough Adult Social Care Portfolio plans are at the early stages of development and include a number of large transformational projects that are expected to deliver substantial efficiencies and improvements over the next five years in the way care services are accessed and delivered.
- 1.2. The report sets out the additional resource requirements and invest-to-save financial contribution needed from the London Borough of Hammersmith and Fulham to deliver the Tri-Borough Adult Social Care (ASC) Transformation and Efficiency Savings Portfolio of work. The portfolio is made up of eight large projects which are collectively expected to deliver savings of at least £3.2 million over two years and £5.7 million over five years across Adult Social Care in Hammersmith and Fulham.
- 1.3. Each of the Councils in Tri-Borough will be contributing to the resources needed to deliver the ASC Transformation and Efficiency portfolio. This work underpins the achievement of the strategic vision, objectives and outcomes set out in the 2014/15 Tri-Borough Adult Social Business Plan (overview presentation document is included in Appendix 4 of this report). It will also ensure all planned 2014/15 Adult Social Care medium term savings commitments are delivered.
- 1.4. The majority of the savings will be delivered through the following transformation work programmes:

- Tri-Borough Adult Social Care Operations Alignment – This will concentrate on improving assessment and care management services for customers by simplifying processes and systems. It will harness the benefits of Tri-Borough working by bringing together frontline social care services and teams across the three Boroughs.
- Tri-Borough Adult Social Care Commissioning Alignment – This programme will strengthen the existing Tri-Borough and Joint Health commissioning governance and organisation structures and operating processes. It will make sure these are in good shape to translate the changes that are identified in the other programmes into clear service specifications that can be procured and ensure the care provider market is ready and able to respond to this.
- Health and Social Care Whole Systems Integration – This will spearhead the design, contracting and delivery of joint health and social care services and make the best use of the combined resources available. It will focus on joining up health and social care services to provide better coordinated care for the most frail and vulnerable residents. It will also focus on those residents with severe long-term health conditions that are most at risk of ending up in hospital or in residential care to remain independent for longer.
- Homecare Service Procurement – This will establish a Tri-Borough homecare service framework. It will help to address the gap and inconsistencies in existing homecare services, provide more choice and help people with complex health and care needs to remain independent and live the life they chose.

1.5. Delivery of the 2014/15 ASC savings target will be supported through the following efficiency savings work programmes. These are focused on reducing demand for high cost packages of care through more effective use of reablement and assistive technology and achieving savings through more efficient contract management:

- Care packages and placements reviews
- Residential and nursing placements quality and safety review
- Residential care spot purchasing price review
- Large provider contracts review

1.6. An overview of each of the main programmes in the portfolio is included in Appendix 1. of the report.

2. RECOMMENDATIONS

2.1. That approval be given to the allocation of £622,000 for the delivery of the Transformation and Efficiency portfolio work programme and the release of resources from balances to fund this (£487,000 to be released from existing ASC balances and reserves, with only £135,000 needed from the Corporate Efficiency Project reserve).

2.2. That approval be given to the initial spend of £243,000 to deliver the first phase of work which includes developing the necessary business cases for the programmes set out in the ASC Portfolio work programme.

- 2.3. That authority be delegated to the Cabinet Member for Community Care to approve the release of funds to implement plans once Business Cases for each piece of work have been approved.
- 2.4. To note that regular updates will be submitted on progress.

3. REASONS FOR DECISION

- 3.1. The work that will be delivered through the Transformation and Efficiency portfolio is considered vital to improving care services to ensure these remain focused on customers and make it easier for people to get the right care when they need it.
- 3.2. It is expected to deliver the efficiencies needed to meet savings requirements in 2014/15 and over the next 5 years and to meet the expected increases in demand from an ageing and growing population.
- 3.3. The work programme includes a large project to join up Adult Social Care operational teams, processes and systems across the three Boroughs. This is expected to deliver substantial efficiencies and make it easier to integrate services with Health, where this makes sense for residents and the Council.
- 3.4. This is a large and complex transformation programme of work which will require a lot of input from Adult Social Care staff. A large proportion of the work will be done by existing staff. However, additional Corporate invest-to-save resources are required over the next two years to support the implementation of this ambitious portfolio of work and ensure it delivers the expected scale of efficiencies and pace of change to achieve this.

4. INTRODUCTION AND BACKGROUND

- 4.1. The ASC transformation and efficiency saving plans and the resources to deliver these have been developed and prioritised by the Tri-Borough Adult Social Care senior leadership team. These have been agreed in principle by the Lead Cabinet Members and senior officers at the various Borough Corporate Management Boards and through Budget Savings challenge meetings over the last few months.
- 4.2. Investment in this portfolio of work will ensure that savings targets are achieved in 2014/15 and the local system of care remains affordable and is able to cope with the expected increases in demand for services. It will also ensure that there are the resources to support our most vulnerable residents and each Borough continues to be able to safely meet its statutory care and wellbeing obligations.
- 4.3. This resource plan sets out the additional requirements to produce the necessary business cases needed to take this work forward and provides an estimate of the level of additional support that will be required to deliver this. It also includes the additional resources required to support the delivery of 2014/15 medium term efficiency savings.
- 4.4. These are large pieces of work that will need to be delivered over a number of years and some additional capacity will be needed so this can be done alongside day-to-

day work. The resource plan highlights only the essential additional resources that will be required over the next 24 month period to support delivery of the programmes in the portfolio. There are a number of programmes which do not require additional resources and will be delivered by existing ASC staff.

4.5. The additional resources are required in the following key areas:

- Tri-Borough Adult Social Care operations and customer journey alignment
- Health and social care integration
- Efficiency savings medium term plan delivery

5. PROPOSAL AND ISSUES

5.1. Initial estimates indicate that the Tri-Borough ASC Transformation and Efficiency Portfolios will deliver a total potential cost saving in current Tri-Borough Adult Social Care budgets of at least £7.8m (total Tri-Borough saving) over two years from an initial invest-to-save commitment of £1.6m (total Tri-Borough investment). This will deliver at least an additional £6.1m (Tri-Borough figure) above the existing budget savings for these projects in 2014/15 and will put Tri-Borough Adult Social Care in a good position to meet the expected financial challenges from the next round of Local Government spending reviews.

5.2. The benefits from better integrated commissioning with Health still need to be validated and are not expected to start to be realised until after 2015/16. But based on the initial analysis produced through the Community Budgets pilot, the current view is that the Health and Social Care Whole Systems Integration Programme could deliver a £7.6m saving across Tri-Borough Adult Social Care over 5 years. Achievement of the savings would be dependent on collaboration with GP Clinical Commissioning Groups and Health provider organisations. This figure combined with the expected savings from the Tri-Borough ASC Alignment and Efficiency programmes set out in this resource plan, would deliver an total estimated saving of £15.4m over 5 years. It is assumed that the work programmes that will be jointly delivered with Health will be funded from Health monies.

5.3. The Health and Social Care Whole Systems Integration Programme will focus on establishing a whole systems approach to the commissioning of integrated health and social care services. This will include joining up the way health and social care services are commissioned and provided so these deliver a better experience and outcomes for people who use care across Tri-Borough. The first phase of this programme will concentrate on integrating rapid response and short-term care services. Work will initially focus on the development of a joint Health and Social Care Tri-Borough community independence service specification. This will inform the integration of community health and social care provider services, where this makes sense and demonstrates clear benefits for patients and service users.

5.4. All initial cost savings and individual Borough return-on-investment estimates will need to be validated as part of the business case development and evaluation stage for each programme in the portfolio. If the business case does not demonstrate a sufficient return on the overall investment, the initiative will not be taken forward. The current assumption is that the savings and expected benefits will be equally shared across each of the three Boroughs or in proportion to their funding contribution

towards delivery of the work programme. This will ensure there is no cross subsidisation and benefits are distributed fairly across the three Boroughs and with Health.

5.5. The initial total Tri-Borough ASC £7.8m saving is expected to be mainly delivered through the implementation of a simplified Tri-Borough Adult Social Care customer journey and operating model to support this. This will include an extensive review of way services are currently delivered. It is expected to lead to the removal of bureaucratic processes and systems which do not add any value to the overall customer experience or the care and support that they receive. This will be achieved through the following:

- Greater alignment of care management and assessment processes and practice
- Streamlined organisation and management structures
- Improved data management and quality
- Consistent safeguarding and quality management controls across Adult Social Care
- An increased focus on early intervention and prevention services that will help people to get the care and support they want and need quickly

Tri-Borough Programme Benefits and Additional Investment Overview

5.6. The table in this section provides an overview of the estimated combined Tri-Borough ASC additional costs and savings assumptions for each of the main pieces of work. The costs are displayed in two views:

- Cost to deliver the initial phase of work which will include the production of business cases and options.
- Total additional invest-to-save costs which are the estimates to do the entire piece of work. These will be validated when business cases are produced.

Tri-Borough Portfolio Programme Description	Cost To Deliver The First Phase	Total Additional Invest-To-Save Costs	2014/15 Savings Estimate*	Total Estimated Savings 2015/16	Total Estimated Savings 2018/19
Tri-Borough Adult Social Care Alignment	£395k	£818k	-	£5.5m	£5.5m
Health and Social Care Whole Systems Integration (Health Funded)	£54k	£378k	-	-	£7.6m
Tri-Borough ASC and Joint Health Commissioning Alignment	-	-	-	£400k	£400k
Transformation Costs & Savings	£449k	£1.2m	-	£5.9m	£13.5m
Efficiency Programme - Continuing Care, Homecare Placements and Provider Contracts Review	£149k	£357k	£1.7m	£1.9m	£1.9m
Efficiency Investment & Savings	£149k	£357k	£1.7m	£1.9m	£1.9m
TOTAL INVESTMENT & SAVINGS	£597k	£1.6m	£1.7m	£7.8m	£15.4m

**Contribution towards 2014/15 Medium Term Budget Saving Plan commitments*

- 5.7. Tri-Borough Adult Social Care needs to deliver a medium term financial saving (MTFS) of £9.4m by the end of 2014/15 of which £4.8m is needed to meet the requirements in Hammersmith and Fulham. A review of current savings plans has identified a £1.7m delivery risk within the continuing care and placements review efficiency saving initiatives. This requires some additional case review and procurement resources (£357,000) to ensure the necessary work is completed in sufficient time to deliver the required savings.

Adult Social Care Resource Requirements Summary For Each Tri-Borough

- 5.8. The following table provides an overview of the additional invest-to-save funding contribution required from each Borough and the expected return on investment over a 5 year period. This includes £445,000 to address some specific operational process, management and IT issues in Westminster, which only Westminster will be funding.

Additional Portfolio Programme Investment and Savings Summary	Cost To Deliver The First Phase	Total Additional Invest-To-Save Costs	2014/15 Savings Estimate*	Total Estimated Savings 2015/16	Total Estimated Savings 2018/19
Hammersmith and Fulham	£243k	£622k	£1.0m	£3.2m	£5.7m
Kensington and Chelsea	£192k	£499k	£471k	£2.5m	£5.0m
Westminster	£163k	£876k	£150k	£2.1m	£4.7m
TOTAL INVESTMENT & SAVINGS	£597k	£2m	£1.7m	£7.8m	£15.4m

**Contribution towards 2014/15 Budget Saving Plans (MTFS) commitments*

Additional Hammersmith and Fulham ASC Resource Requirements Summary

- 5.9. The following table provides an overview of the additional invest-to-save funding contribution required to deliver the Hammersmith and Fulham component of the Tri-Borough ASC work programme and expected return on investment over a 5 year period. The funding source is also listed.

LBHF Additional Portfolio Programme Resource Description	Cost To Deliver The First Phase	Total Additional Invest-To-Save Costs	2014/15 Savings Estimate*	Total Estimated Savings 2015/16	Total Estimated Savings 2018/19
Tri-Borough Adult Social Care Alignment	£132k	£273k	-	£1.8m	£1.8m
Health and Social Care Whole Systems Integration (Health Funded)	£18k	£126k	-	-	£2.5m
Tri-Borough ASC and Joint Health Commissioning Alignment	-	-	-	£133k	£133k
Efficiency Programme - Continuing Care, Homecare Placements and Provider Contracts Review	£93k	£224k	£1.0m	£1.2m	£1.2m
TOTAL INVESTMENT & SAVINGS	£243k	£622k	£1.0m	£3.2m	£5.7m

**Contribution towards 2014/15 Budget Saving Plans (MTFS) commitments*

Year 1 Cost	£487k	Funding source: ASC balances and reserves
Year 2 Cost	£135k	Funding source: Corporate Efficiency Project resources

- 5.10. A detailed Borough level cost and savings overview is set out in Appendix 2 of this report and a full listing of all additional resource requirement assumptions is included in Appendix 3.

Portfolio Delivery Organisation and Aims

- 5.11. This resource plan proposes to adopt a similar change management structure to the one currently in operation in Tri-Borough Children's Services and is informed by corporate best practice portfolio management arrangements in operation across Tri-Borough.
- 5.12. It will include the establishment of a small central Tri-Borough ASC portfolio delivery office function which will oversee project monitoring, quality and risk management processes. This will include the production of reporting and management dashboards across the entire change programme portfolio. It will also have sufficient capacity to undertake a number of specific project delivery activities including preliminary business analysis and financial modelling for a range of projects. The establishment of a shared and centrally coordinated pool of change management staff within Tri-Borough ASC will remove the need for multiple project delivery and governance structures to manage projects and will improve resource management across the entire ASC project portfolio.
- 5.13. The ASC Portfolio will be governed through a Change Board, chaired by the Executive Director of ASC. Each programme lead will be expected to report on progress to the Board and decisions made on business cases and resources.
- 5.14. This plan aims to achieve the following:
- Ensure projects are appropriately resourced with clear lines of accountability so outcomes and outputs are consistently delivered to agreed quality, time and budget parameters
 - Senior Managers and Members have complete visibility on project management resource requirements and these are clearly defined and costed
 - Tri-Borough ASC and joint initiatives with Health get the most value from change management resources and greatest return on investment
 - Establish a central support function within Tri-Borough ASC with the necessary skills and capacity to support the delivery of Transformation and Efficiency Portfolio work programmes
 - Establish a consistent approach to project management that embeds Corporate best practice within Tri-Borough ASC
 - Eliminate duplication and have one set of project portfolio monitoring and reporting tools and processes in operation across Tri-Borough ASC
 - Develop and extend the skills and competencies within ASC teams to be able to perform a range of project management and delivery activities alongside core operational and service delivery functions

- Use the establishment of an ASC change delivery hub to provide individual learning and development and secondment opportunities as part of the broader ASC organisation development and talent management strategy

6. OPTIONS AND ANALYSIS

- 6.1. This report sets out the minimum additional resources which ASC has assessed as being required to deliver the portfolio plan. The plan has been developed with Corporate change management teams and assumes that the majority of work will be managed within existing teams and budgeted resources and done alongside business-as-usual activities.
- 6.2. The resource plan aims to address the limited capacity in the current Tri-Borough Adult Social Care and Corporate organisation to deliver large and complex change work programmes.
- 6.3. The following table describes the three options that have been considered in the development of this resource plan.

Ref:	Option	Impact Assessment and Conclusions
1.	Do not proceed with the Tri-Borough Adult Social Care Transformation and Efficiency Portfolio Plans	Transformational change is needed to deliver the scale of efficiencies required to meet the combined challenges of increased demand for care services from a reduced funding allocation. The option not to proceed with the implementation of transformation and efficiency plans is judged to be an unacceptable option.
2.	Deliver the Transformation and Efficiency Portfolio Plans from existing Adult Social Care and Corporate staffing resources	This resource plan has been developed with Corporate colleagues in the Tri-Borough Innovation and Change Management Team, the Westminster Business Development Unit and with Health. It takes account of the level of existing resources and support available to deliver the portfolio work programme. The work programme and benefit assumptions set out in this report would only be partially achieved and would not deliver the scale of transformation required to meet the immediate cost and demand challenges that have been identified in the Tri-Borough ASC Business Plan (2014-15).
3.	Make available additional invest-to-save resources to fund the delivery of Tri-Borough Adult Social Care Transformation and Efficiency Portfolio Plans and expected scale of benefits within the required timeframes	The indicative savings listed in the resource plan are dependent on there being sufficient additional invest-to-save resources available to support existing Tri-Borough Adult Social Care teams in the development and delivery of portfolio plans. If these are made available, this option assumes that the minimum savings would be achieved, although this will need to

Ref:	Option	Impact Assessment and Conclusions
		be validated as part of the business case development and assurance process.

7. CONSULTATION

- 7.1. Elements of the Transformation and Efficiency Portfolio such as the customer journey mapping work programme will require engagement with staff, residents and key stakeholders. Engagement and consultation requirements will be determined and planned as part of the individual programme delivery arrangements.

8. EQUALITY IMPLICATIONS

- 8.1. Recruitment to the additional roles set out in this resource plan will be undertaken in accordance with the Council's HR and Equalities policies and procedures.
- 8.2. Equality Impact Assessments will be conducted as part of the business case development and plan delivery arrangements where appropriate for each programme proposal in the Portfolio.
- 8.3. Implications verified by: Carly Fry, Opportunities Manager, tel: 020 8753 3430

9. LEGAL IMPLICATIONS

- 9.1. It is noted that the resource plan will be implemented and operated in accordance with the conditions regarding the recruitment and cost sharing arrangements set out in the Tri-Borough Adult Social Care Legal Agreement and relating Section 113 agreements.
- 9.2. Health and Social Care Whole Systems Integration roles that are funded from Health monies will need to be supported by a Section 75 agreement. This would support the pooling of NHS and Local Authority resources and the appropriate delegation of responsibilities to undertake the work.
- 9.3. It is noted that any procurement required to support the objectives in this report will be carried out in accordance with EU procurement rules.
- 9.4. Implications verified by: Catherine Irvine, Senior Solicitor (Contracts), tel: 020 8753 2774.

10. FINANCIAL AND RESOURCES IMPLICATIONS

- 10.1. In order to establish the Hammersmith and Fulham envelope of £622,000 for the ASC Transformation and Efficiency portfolio work programme, £487,000 can be released from existing ASC balances and reserves, with £135,000 needed from the Corporate Efficiency Project reserve.

10.2. Implications verified/completed by: Rachel Wigley, Tri-borough Director of Finance, ASC, tel: 020 8753 3121

11. RISK MANAGEMENT

11.1. *The key risks associated with the resource plan are summarised in the following table:*

Ref:	Risk Description	Mitigation
1.	Insufficient balances and Corporate Efficiency Reserves to fund the ASC Portfolio Delivery Resource Plan	The resource plan has been reviewed and agreed by the LBHF Business Board and will be prioritised for funding from Corporate Efficiency Reserves subject to the development of supporting business cases for each programme.
2.	Business case assumptions do not support the scale of investment set out in the ASC Portfolio Delivery Resource Plan	The current return on investment assumptions represent the minimum expected savings. These are based on the typical level of savings that have been achieved in other Local Authorities that have undertaken similar customer focused process reviews. The health and social care integration savings are based on the analysis produced as part of the Tri-Borough Community Budgets work. There are clearly defined and owned governance arrangements in place to monitor benefits and ensure these are on track to be realised. There are regular check points to confirm this before further resources are committed.
3.	Health funding is not made available to support the delivery of health and social care integration programmes	The Health and Social Care Whole Systems Integration Programme is jointly sponsored with Health. A Programme Director has been jointly appointed to lead the development of joint integration plans.

12. PROCUREMENT AND IT STRATEGY IMPLICATIONS

12.1. A specialist consultancy organisation is being procured to undertake the initial Adult Social Care customer journey 'as is' mapping work over a four month period up to the 31 March 2014. This work is critical to identifying the opportunities to improve services and deliver efficiencies through Tri-Borough alignment and integration with Health.

12.2. The assumed value of this contract is £250,000 which is over the EU threshold of £173,934 for supplies and services. The contract regulations for all three boroughs states that at least five tenders must be sought.

12.3. The Council will use Lot 2.2 of the Cabinet Office procured ConsultancyOne framework to call off this contract. 20 suppliers have been appointed to Lot 2.2 and will all be invited to tender for this opportunity.

- 12.4. The full OJEU procedures will be followed during the procurement from the framework and as such the Council fulfils its requirements in relation to the OJEU requirements for Part A services which this service falls under.
- 12.5. The OJEU notice for the framework published on 29th November 2011 clearly states that Local Authorities are able to access the framework.
- 12.6. Westminster City Council will be the Lead Contracting Authority and the development of Contract documentation will be carried out by Sharpe Pritchard the Council's appointed solicitors in conjunction with the Bi-Borough Contracts Team.
- 12.7. Implications verified by Charles Stephens MCIPS, ASC Procurement and Contracts Manager, tel: 020 7361 2717

LOCAL GOVERNMENT ACT 2000
LIST OF BACKGROUND PAPERS USED IN PREPARING THIS REPORT

No.	Description of Background Papers	Name/Ext of holder of file/copy	Department/ Location
1.	Executive Decision Report for The Tri-Borough Contracts and Commissioning Board: Tri-Borough Adult Social Care Alignment Programme Customer Journey Analysis Work Package Procurement	Sherifah Scott, Tri-Borough Head of Procurement and Contracting ASC, scsott@westminster.gov.uk / 020 7641 8954	Tri-Borough Adult Social Care Procurement/ 77 Glenthorne Road

LIST OF APPENDICES:

- Appendix 1 – Tri-Borough Transformation and Efficiency Portfolio Work Programme
- Appendix 2 - Additional Resource Requirements Summary
- Appendix 3 – Year 1 and 2 Portfolio Additional Resource Plan Financial Summary
- Appendix 4 – Vision for Tri-Borough Adult Social Care and Strategic Roadmap

TRI-BOROUGH TRANSFORMATION AND EFFICIENCY PORTFOLIO WORK PROGRAMME

1. Tri-Borough Adult Social Care Operations Alignment Programme

Description of the opportunity and proposal

Why We Need To Do This Work

Although Adult Social Care is now managed as a Tri-Borough service, there are substantial differences in the way services and teams are organised and operate in each Borough.

The evidence from the Joint Strategic Needs Assessments clearly highlight the combined pressures on the local system of care of an ageing and growing population and increasing costs which need to be met from reduced budgets. Meeting this challenge while continuing to provide the best care for residents alongside the scale of savings required over the next few years, will require substantial changes to way adult care social care services are currently organised and delivered in Tri-Borough.

The ambition in Adult Social Care is to establish a Tri-Borough operations team structure, develop consistent ways of working and remove processes that make it unnecessarily difficult and complicated for people to get the services they need when they need them. Simplified systems and processes will make it easier for customers to use services and for social care staff to be freed up to use their skills and expertise to ensure people get the right help and support when they need it. This is expected to create sizable efficiencies and more importantly improve the way services are delivered, providing a much better experience for customers, helping them to remain independent and more able to live the lives they chose.

This programme will be delivered in three phases spanning 24 months depending on the scale and complexity of the final phase delivery plan:

- **Phase 1** – Current ‘As Is’ social care operations review, customer journey analysis and ‘quick win’ improvement opportunities (4 months)
- **Phase 2** – Future organisation design development and options appraisal (4 months)
- **Phase 3** - Tri-Borough adult social care operations alignment plan implementation (16 months)

Phase 1 Overview

The first phase of the project will carry out a comprehensive review and analysis of how Adult Social Care teams currently work in each Borough and how people use and find their way around Adult Social Services. This will be a very intensive piece of work over a relatively short period (4 months), so a specialist organisation that has experience of doing this type of work in other Local Authorities has been commissioned to help with this essential piece of ‘As Is’ work.

The work will include talking to frontline social care staff to understand exactly how

Description of the opportunity and proposal

services get delivered and what the differences and similarities are across the three Boroughs. This will also provide staff with an opportunity to highlight what things they feel work well and what gets in the way of providing a really good service for customers and helping them to get the support they need quickly.

It will also include talking to a whole range of customers to find out what it's really like to use social care services in each Borough. This will help to build up a detailed picture of what things work well and what needs to change. The information gained from talking to our customers will be turned into a set of guiding principles that reflect the voice of our customers. This will be used to challenge the current ways of working across the different social care teams in each Borough and will help to determine what the future organisation design and ways of working will look like. This will inform the business case and options to deliver this. This will also identify changes that can be made quickly to deliver some immediate benefits and start to build momentum for the bigger opportunities. It will also help us to understand where we need to join things up better with Health and care provider organisations

Phase 1 Legacy

Building the necessary skills and knowledge to take this work forward within Tri-Borough Adult Social Care and use this in other parts of the department is an important part of this initial piece of work. This forms part of the statement of works for the procurement. The expected learning from doing this work and the tools that will be used is also expected to be of benefit to other departments considering a similar approach to transforming the way they work. The Corporate Tri-Borough Innovation and Change Management team have been involved in the procurement of the 'As Is' review work programme to ensure this legacy is delivered and can be reused in other areas across the three Councils.

Benefits Summary

Project Benefits

- Improved customer experience
- Single Tri-Borough ASC operating model and simplified practices and processes which will deliver a cashable saving of £5.5m (Tri-Borough) after 2 years (£3.2m for LBHF)
- More personalised, responsive and accessible services for customers with a better overall experience and outcomes
- Better use of Adult Social Care staff and assets
- A consistent model of care and processes that support and make it easier to integrate with Health where this makes sense for the Council and residents
- A better understanding of interfaces and alignment opportunities with other Directorates (e.g. Children's Services, Housing, Environment, Leisure etc) and more effective hand-offs
- Toolkit and expertise within ASC to manage large scale customer focused change projects

Benefits Summary

What Will Be Different For Customers

- Services are easier and quicker to use and will be provided in or closer to home
- Customers have access to accurate information which enables them to make more informed choices about their care and support requirements
- Customers are offered a choice of options
- Customers are able to get the right care and support without having to deal with lots of different people
- Personal information only has to be provided once and is shared securely with other organisations involved in the person’s care
- Care is provided safely by well trained teams
- Someone always takes responsibility for making sure care is coordinated and the person being cared for, their family and carers, are kept informed
- People are supported to be as independent as possible

How Will Savings Be Achieved

- Reduced management costs
- Reduced support function costs
- Reduced overheads (e.g. systems and facilities)
- Combined teams and enhanced roles
- More effective use of social care resources to reduce demand for high cost care packages and placements

ADDITIONAL INVESTMENT COSTS		ESTIMATED CUMULATIVE SAVINGS OVER 5 YEARS		
Cost To Deliver First Phase 1 (Business Case)	Total Additional Investment Cost	TOTAL AFTER 1 YEAR (2014/15)	TOTAL AFTER 2 YEARS (2015/16)	TOTAL AFTER 5 YEARS (2018/19)
£132k	£273k	-	£1.8m	£1.8m

2. Health and Social Care Whole Systems Integration

Description of the opportunity and proposal

Why We Need To Do This Work

Delivering better coordinated and integrated care with Health is a key part of the vision for Adult Social Care (ASC) in the future as set out in the 2014/15 Tri-Borough ASC Business Plan.

The Whole System Integrated Care proposal is a commissioning led initiative that builds on the previous Community Budgets work. It will seek to address the elements of the local Health and Social Care system that need to change so that more people are supported to remain in their own homes and communities rather than in hospital or residential care. It will also ensure care is better coordinated and provided by multi-

Description of the opportunity and proposal

disciplinary teams that are able to deal with a person's health and social care needs.

There is substantial evidence both nationally and internationally that integration is seen to drive efficiencies and savings by reducing duplication in the system through integrated assessment, care planning and delivery, joint teams, estates and IT systems and monitoring performance based on shared Health and Social Care outcomes. This proposal will also contribute toward achievement of the Clinical Commissioning Group's Out of Hospital Strategies and the Adult Social Care Mandates. Implementation of this proposal is estimated to deliver a total Tri-Borough ASC cashable saving of £7.6m (£2.5m saving for LBHF) after 5 years.

The Whole Systems programme will focus on the system changes needed to deliver integrated care; focusing on the current barriers to integration. It will seek to:

- Develop a model of the health and social care needs of local population using risk stratification, developing the outcomes for this population and the integrated service models required to deliver these outcomes
- Develop options for how providers may work together through integrated networks and provider vehicles
- Develop contractual models for commissioners to pool budgets for their identified populations and to work with/contract with provider networks
- Develop new financial models that enable pooled budgets between commissioners and capitated budgets for the identified population
- Develop options for models of IT and information governance that support and enable an integrated system
- Support the development of GP networks

The programme represents a significant transformational change agenda, involving a large number of partners and affecting areas of high health and social care spend. The system changes proposed are complex and are un-tested. The programme will work with and receive support from the wider integrated care programme in North West London. The complexity and scale of the programme merit it being managed outside of day to day business.

High level outcomes and milestones

- By March 2014: Undertake the development and design work to agree a local model of integrated care. Agree an implementation plan and whether this will include any pilot or test sites.
- Mar 2014-Mar 2015: Implementation of changes likely to be in shadow form
- Apr 2015: Implementation continues, some changes may become live
- 2018/19: Benefits realisation date as estimated by the Cost Benefit Analysis model

How will this be delivered:

- Development and co-design Sept 13 – Feb 14
- Local Implementation (shadow form) : Mar 14 – Mar 15
- Local Implementation (live): Mar 15 onwards

Benefits Summary

Project Benefits

- Reduction in demand for residential care, high cost packages of care, hospital admissions and lengths of stay
- Maximising self reliance, personal responsibility and enabling more people to find their own care solutions
- Achieving greater productivity and value for money from social care and health budgets through the development of enhanced roles to include health and social care coordination and hybrid working
- Integrated health and social care commissioning teams and functions
- More effective commissioning of joint health and social care services and market management

What Will Be Different For Customers

- People are better able to manage their own care and find the right support for them
- People with long term health conditions receive care closer to home, stay independent and live the lives they choose
- People have a better experience of social care services
- People feel like they are dealing with one joined up organisation
- Personal information only has to be provided once and is shared securely with other organisations involved in the person's care

How Will Savings Be Achieved

- Reduced commissioning operations costs
- Reduced support function costs
- Reduced overheads (e.g. systems and facilities)
- Combined teams and enhanced roles
- Reduced demand for long-term care
- Reduced demand for residential and nursing care
- Contract efficiency savings through better market management and reprovision of services

ADDITIONAL INVESTMENT COSTS		ESTIMATED CUMULATIVE SAVINGS OVER 5 YEARS		
Cost To Deliver First Phase 1 (Business Case)	Total Additional Investment Cost	TOTAL AFTER 1 YEAR (2014/15)	TOTAL AFTER 2 YEARS (2015/16)	TOTAL AFTER 5 YEARS (2018/19)
£18k	£126k	-	-	£2.5m

3. Tri-Borough Commissioning Alignment

Description of the opportunity and proposal

Why We Need To Do This Work

This project seeks to understand and address the following issues relating to the current Tri-Borough Adult Social Care Commissioning and Joint Commissioning organisation structure and ways of working:

- Duplicate processes and inefficient practices
- Tri-Borough commissioning management and organisation structures
- Accountability and ownership
- Governance processes and forums with Health for joint commissioning decision making
- Lack of coordination within Tri-Borough Adult Social Care commissioning and with health commissioners
- Readiness for and adequately resourced to lead and take forward the Tri-Borough whole systems integration agenda
- Insufficient capacity and capability to perform market development and quality assurance role
- Alignment of commissioning strategies with Health
- Adult Social Care placement monitoring roles and functions

This project will be informed by the commissioning review work that has already been undertaken earlier this year.

The project will manage an ‘As Is’ review of the current Adult Social Care and joint Health commissioning operating model and organisation across Tri-Borough. It will also seek to quickly identify and evaluate examples of best practice commissioning models in operation nationally to inform the design of an appropriate ‘To Be’ commissioning model. This will include determining the best fit for the Placement Monitoring Officer function.

The project will be resourced from existing ASC resources with input from HR to support the people change management process. The project will review current staffing roles/skill mix and structures and make proposals for a Target Operating Model (TOM) which will realise operational and management efficiency savings. The expectation is that the design work for the future management and team structures will be completed by April 2014 with implementation by June 2014.

Benefits Summary

Project Benefits

- Rationalised commissioning activity with a reduced number of better quality service procurements
- Better co-ordination of ASC and Health joint commissioning through a single commissioning team

Benefits Summary

- More effective provider contract management
- Aligned and joint commissioning strategies with inner North West London Clinical Commissioning Groups
- Stronger market development and quality assurance role
- Clear accountability and ownership

What Will Be Different For Customers

- Services are more joined up
- Better customer experience
- Services are accessible and there is good coverage
- Services are safe, properly staffed and well managed
- Customers have more choice about where they get their care and support
- Care organisations are provide good quality services

How Will Savings Be Achieved

- Reduced commissioning operations and staffing costs
- Reduced support function costs
- Reduced overheads (e.g. systems and facilities)
- Combined teams and enhanced roles
- Contract efficiency savings through better market management and reprovision of services

ADDITIONAL INVESTMENT COSTS		ESTIMATED CUMULATIVE SAVINGS OVER 5 YEARS		
Cost To Deliver First Phase 1 (Business Case)	Total Additional Investment Cost	TOTAL AFTER 1 YEAR (2014/15)	TOTAL AFTER 2 YEARS (2015/16)	TOTAL AFTER 5 YEARS (2018/19)
-	-	-	£133k	£133k

4. Tri-Borough Homecare and E-Monitoring Contract Reprovision

Description of the opportunity and proposal

Why We Need To Do This Work

The homecare provider contract framework in Hammersmith and Fulham ends in October 2014. The Westminster framework has ended and homecare is purchased on an individual spot basis. The Kensington and Chelsea framework runs until 2019 but is not in step with the Tri-Borough strategic ambitions for more flexible and personalised homecare services. Consultations and customer feedback has shown that the level of satisfaction with the homecare services in all three boroughs is low and would continue to be so without significant changes.

This project is not expected to deliver savings but is a critical part of delivering

Description of the opportunity and proposal

community services capable of supporting more people to remain in their own homes for longer. It will also support the Clinical Commissioning Group's out-of-hospital strategies. The current traditional homecare services are not designed to care for complex health and social care cases in the community. The aim is to develop a service that enables and maintains independence wherever possible, and is capable of being a partner in an integrated health and social care system.

The project will oversee the design, specification and procurement of a Tri-Borough homecare service and will deliver the following outputs:

- Financial model
- Homecare specification and contract
- Procurement plan & related documents
- e-monitoring specification (provider contract management systems to monitor payments, quality and value)
- proposals for homecare management team structure and role
- recommendations/requirements for changes to care management activity to support new homecare contract (to feed into relevant operational projects)

High Level Milestones

Financial model development - 19/07/2013
Specification and tender documents complete (homecare) - 20/10/2013
Quality Assurance Gate Review - 25/10/2013
Quality Assurance Gate Review - 01/11/2013
Procurement PQQ & evaluation - 03/02/2014
Procurement ITT & evaluation - 07/04/2014
Governance - 01/06/2014
Award and implementation -06/2014

Benefits Summary

Project Benefits

- Create the provision and capacity to support more people at home and reduce demand for residential care placement
- Establishment of a consistent and flexible and better quality homecare provider contract
- Homecare provision is fits with Adult Social Care strategic commissioning intentions

What Will Be Different For Customers

- People receive better services which meet there individual requirements
- People are able to remain independent and in their own homes for longer

How Will Savings Be Achieved

Benefits Summary

- Contract efficiencies
- Reduction in existing contract costs
- Decommissioning and/or re-provision of services
- Demand management – The financial model includes conservative estimates for reduction in care across the population

ADDITIONAL INVESTMENT COSTS		ESTIMATED CUMULATIVE SAVINGS OVER 5 YEARS		
Cost To Deliver First Phase 1 (Business Case)	Total Additional Investment Cost	TOTAL AFTER 1 YEAR (2014/15)	TOTAL AFTER 2 YEARS (2015/16)	TOTAL AFTER 5 YEARS (2018/19)
-	-	-	-	-

5. Efficiency Savings Programme – Continuing Care, Placements and Market Management

Description of the opportunity and proposal

Why We Need To Do This Work

There is a requirement to deliver a total £4.8m medium term plan Adult Social Care efficiency saving in Hammersmith and Fulham in 2014/15. £1m (21%) needs to be delivered through reduced demand for high cost packages of care and residential care and more effective contract management and purchasing of spot packages.

This work is focused on the following four areas which will collectively support the achievement of the £1m saving:

1. Care package and placements review – This is focused on reviewing individual complex cases to determine whether reablement, rehabilitation and assistive technology options have been fully explored.
2. Placement quality and safety review – This is focused on ensuring that effective quality management controls are in place to monitor residential placements funded by both Health and Social Care. It will review current arrangements to identify opportunities to align teams and processes that are involved in this activity.
3. Residential care spot purchase rate review – There are different spot purchase rates for residential care packages in use across the three Boroughs due to the different historical agreements that are in place with care providers. This piece of work is focused on establishing consistent pricing across of each of the Boroughs and developing a market management strategy to ensure spot prices are competitive and represent good value.
4. Main provider contracts review – This work programme is focused on using the combined spot purchasing power across Tri-Borough Adult Social Care to secure a

Description of the opportunity and proposal

better deal and more competitive prices from those providers which r
business across Tri-Borough.

APPENDIX 1

Benefits Summary

Project Benefits

- Deliver £1m contribution towards achievement ASC 2014/15 savings targets
- Improved quality management of residential care placements
- More people can be supported from existing care budgets

What Will Be Different For Customers

- Better customer experience
- Better value and more affordable care
- Care organisations are provide good quality services

How Will Savings Be Achieved

- Alternative packages of care
- Care package spot rate efficiencies
- Provider contract efficiencies

ADDITIONAL INVESTMENT COSTS		ESTIMATED CUMULATIVE SAVINGS OVER 5 YEARS		
Cost To Deliver First Phase 1 (Business Case)	Total Additional Investment Cost	TOTAL AFTER 1 YEAR (2014/15)	TOTAL AFTER 2 YEARS (2015/16)	TOTAL AFTER 5 YEARS (2018/19)
£93k	£224k	1.0m-	1.2m	1.2m

ADDITIONAL RESOURCE REQUIREMENTS SUMMARY

1. HAMMERSMITH & FULHAM PORTFOLIO RESOURCE COST & SAVINGS ESTIMATES

Additional Portfolio Programme Resource Description	Investment Requirement Over 2 Years	2014/15 Savings Estimate*	Total Estimated Savings After 2 Years	Total Estimated Savings Over 5 Years
Tri-Borough Adult Social Care Alignment	£273k	-	£1.8m	£1.8m
Health and Social Care Whole Systems Integration (Health Funded)	£126k	-	-	£2.5m
Tri-Borough ASC and Joint Health Commissioning Alignment	-	-	£133k	£133k
Efficiency Programme - Continuing Care, Homecare Placements and Provider Contracts Review	£224k	£1.0m	£1.2m	£1.2m
TOTAL INVESTMENT & SAVINGS	£622k	£1.0m	£3.2m	£5.7m

*Contribution towards 2014/15 Budget Saving Plans (MTFS) commitments

Year 1 Cost	£487k	Funding source: ASC balances and reserves
Year 2 Cost	£135k	Funding source: Corporate Efficiency Project resources

2. KENSINGTON & CHELSEA PORTFOLIO RESOURCE COST & SAVINGS ESTIMATES

Additional Portfolio Programme Resource Description	Investment Requirement Over 2 Years	2014/15 Savings Estimate*	Total Estimated Savings After 2 Years	Total Estimated Savings Over 5 Years
Tri-Borough Adult Social Care Operations Alignment	£273k	-	£1.8m	£1.8m
Health and Social Care Whole Systems Integration (Health Funded)	£126k	-	-	£2.5m
Tri-Borough ASC and Joint Health Commissioning Alignment	-	-	£133k	£133k
Efficiency Programme - Continuing Care, Homecare Placements and Provider Contracts Review	£101k	£471k	£537k	£537k
TOTAL INVESTMENT & SAVINGS	£499k	£471k	£2.5m	£5.0m

**Contribution towards 2014/15 Budget Saving Plans (MTFS) commitments*

Year 1 Cost	£365k	Funding source: Corporate balances and reserves
Year 2 Cost	£135k	Funding source: Corporate balances and reserves

3. WESTMINSTER PORTFOLIO RESOURCE COST & SAVINGS ESTIMATES

Additional Portfolio Programme Resource Description	Investment Requirement Over 2 Years	2014/15 Savings Estimate*	Total Estimated Savings After 2 Years	Total Estimated Savings Over 5 Years
Tri-Borough Adult Social Care Operations Alignment	£273k	-	£1.8m	£1.8m
Health and Social Care Whole Systems Integration (Health Funded)	£126k	-	-	£2.5m
Tri-Borough ASC and Joint Health Commissioning Alignment	-	-	£133k	£133k
Efficiency Programme - Continuing Care, Homecare Placements and Provider Contracts Review	£32k	£150k	£171k	£171k
TOTAL INVESTMENT & SAVINGS	£431k	£150k	£2.1m	£4.7m

**Contribution towards 2014/15 Budget Saving Plans (MTFS) commitments*

Westminster Business-As-Usual ASC Operations and IT resources	£445k
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TOTAL ADDITIONAL RESOURCES	£876k
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Year 1 Cost	£828k	Funding source: Adult Social Care resources
Year 2 Cost	£135k	Funding source: Adult Social Care resources

YEAR 1 & 2 PORTFOLIO ADDITIONAL RESOURCE PLAN FINANCIAL SUMMARY

ADULT SOCIAL CHANGE PROGRAMME PORTFOLIO ADDITIONAL RESOURCE REQUIREMENTS

Ref.	Resource Description	Assignment	Headcount	Duration	Total Full Year 1 Cost £000s	Total Full Year 2 Cost £000s	Total Year 1&2 Cost £000s	Cost Allocation														
								H&F ADDITIONAL RESOURCE COSTS					RBKC ADDITIONAL RESOURCE COSTS					WCC ADDITIONAL RESOURCE COSTS				
								YEAR 1		YEAR 2		TOTAL	YEAR 1		YEAR 2		TOTAL	YEAR 1		YEAR 2		TOTAL
								% Alloc	£000s	% Alloc	£000s	£000s	% Alloc	£000s	% Alloc	£000s	£000s	% Alloc	£000s	% Alloc	£000s	£000s
1	Head of Portfolio Delivery	Change Portfolio Delivery	1	24 months	£82	£82	£164	33%	£27	33%	£27	£55	33%	£27	33%	£27	£55	33%	£27	33%	£27	£55
2	Project Delivery Manager	Change Portfolio Delivery	1	24 months	£63	£63	£126	33%	£21	33%	£21	£42	33%	£21	33%	£21	£42	33%	£21	33%	£21	£42
3	Project Support Officers	Change Portfolio Delivery	2	24 months	£71	£71	£141	33%	£24	33%	£24	£47	33%	£24	33%	£24	£47	33%	£24	33%	£24	£47
4	ASC Customer Journey Analysis Work Package	Tri-Borough ASC Alignment Programme: Customer Journey	0	4 months	£255		£255	33%	£85			£85	33%	£85			£85	33%	£85			£85
5	Interim ASC Learning Disabilities Care Practice Specialist	Tri-Borough ASC Alignment Programme: Practice Quality Review	1	90 days	£54		£54	33%	£18			£18	33%	£18			£18	33%	£18			£18
6	ASC Procedures Review and Documentation Officer	Tri-Borough ASC Alignment Programme: Practice Issues	1	130 days	£78		£78	33%	£26			£26	33%	£26			£26	33%	£26			£26
Total Additional Tri-Borough ASC Alignment Programme Resources			6		£602	£215	£818		£201		£72	£273		£201		£72	£273		£201		£72	£273
7	Project Delivery Manager	Whole Systems Integration	1	24 months	£63	£63	£126	33%	£21	33%	£21	£42	33%	£21	33%	£21	£42	33%	£21	33%	£21	£42
8	Business and Information Analyst	Whole Systems Integration	1	24 months	£63	£63	£126	33%	£21	33%	£21	£42	33%	£21	33%	£21	£42	33%	£21	33%	£21	£42
9	Financial Modelling Specialist	Whole Systems Integration	1	24 months	£63	£63	£126	33%	£21	33%	£21	£42	33%	£21	33%	£21	£42	33%	£21	33%	£21	£42
Total Additional Health & Social Care Whole Systems Integration Resources			3		£189	£189	£378		£63		£63	£126		£63		£63	£126		£63		£63	£126
10	Reviewing Officers	Continuing Care & Placements Review Programme Delivery - Homecare High Cost Packages	3	12 months	£163		£163	63%	£102			£102	28%	£46			£46	9%	£15			£15
11	Reviewing Officer (Mental Health)	Continuing Care & Placements Review Programme Delivery - Homecare High Cost Packages	1	12 months	£54		£54	63%	£34			£34	28%	£15			£15	9%	£5			£5
12	Reviewing Team Manager	Continuing Care & Placements Review Programme Delivery - Homecare High Cost Packages	1	12 months	£77		£77	63%	£48			£48	28%	£22			£22	9%	£7			£7
13	Procurement Officer	Continuing Care & Placements Review Programme Delivery - Residential Care Spot Placements	1	12 months	£63		£63	63%	£40			£40	28%	£18			£18	9%	£6			£6
Total Additional MTFs Efficiency Savings Programme Delivery Resources			6		£357	£0	£357		£224		£0	£224		£101		£0	£101		£32		£0	£32
TOTAL ADDITIONAL CHANGE PORTFOLIO DELIVERY RESOURCES			15		£1,148	£404	£1,553		£487		£135	£622		£365		£135	£499		£296		£135	£431

APPENDIX 3

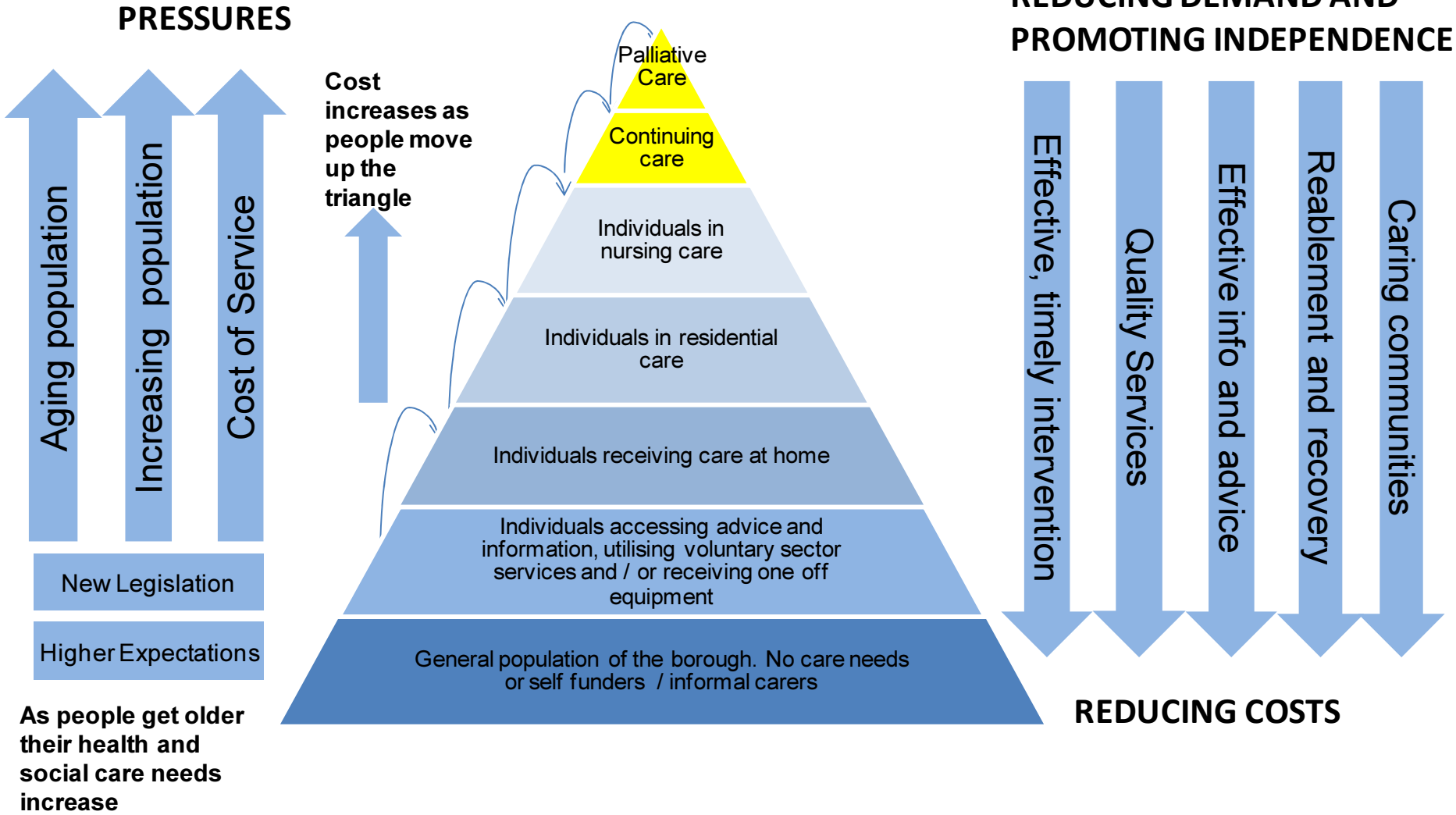
ADULT SOCIAL BUSINESS-AS-USUAL PORTFOLIO ADDITIONAL RESOURCE REQUIREMENTS																						
Ref.	Resource Description	Assignment	Headcount	Duration	Total Full Year 1 Cost £000s	Total Full Year 2 Cost £000s	Total Year 1&2 Cost £000s	Cost Allocation														
								H&F ADDITIONAL RESOURCE COSTS					RBKC ADDITIONAL RESOURCE COSTS					WCC ADDITIONAL RESOURCE COSTS				
								YEAR 1		YEAR 2		TOTAL	YEAR 1		YEAR 2		TOTAL	YEAR 1		YEAR 2		TOTAL
								% Alloc	£000s	% Alloc	£000s	£000s	% Alloc	£000s	% Alloc	£000s	£000s	% Alloc	£000s	% Alloc	£000s	£000s
14	ASC Operations Practice Support Interim Resource	Tri-Borough ASC Alignment Programme: Practice Issues	1	130 days	£78		£78	0%	£0			£0	0%	£0			£0	100%	£78			£78
15	Brokerage Team Members (WCC)	Homecare Invoicing	3	12 months	£150		£150	0%	£0			£0	0%	£0			£0	100%	£150			£150
16	Carers Action Plan (WCC)	Carers Action Plan Implementation	1	6 months	£38		£38	0%	£0			£0	0%	£0			£0	100%	£38			£38
17	Framework(i) Training and Issues Management Resource (WCC)	Westminster Framework(i) Issues management	1	6 months	£33		£33	0%	£0			£0	0%	£0			£0	100%	£33			£33
18	Framework(i) Client Management System (CMS) and related IT Development (WCC)	Westminster Framework(i) Enhancements: Electronic Upload; Secure Supplier Communication; Mobile Working	0	9 months	£146		£146	0%	£0			£0	0%	£0			£0	100%	£146			£146
Total Additional Change Portfolio Delivery Office Resources			6		£445	£0	£445		£0	£0	£0		£0	£0	£0		£0	£445	£0		£445	
TOTAL ADDITIONAL BUSINESS-AS-USUAL PORTFOLIO DELIVERY RESOURCES			6		£445	£0	£445		£0	£0	£0		£0	£0	£0		£0	£445	£0		£445	
TOTAL ADDITIONAL ADULT SOCIAL CARE PORTFOLIO DELIVERY RESOURCES					£1,593	£404	£1,997		£487	£135	£622		£365	£135	£499		£741	£135	£876			

Notes:

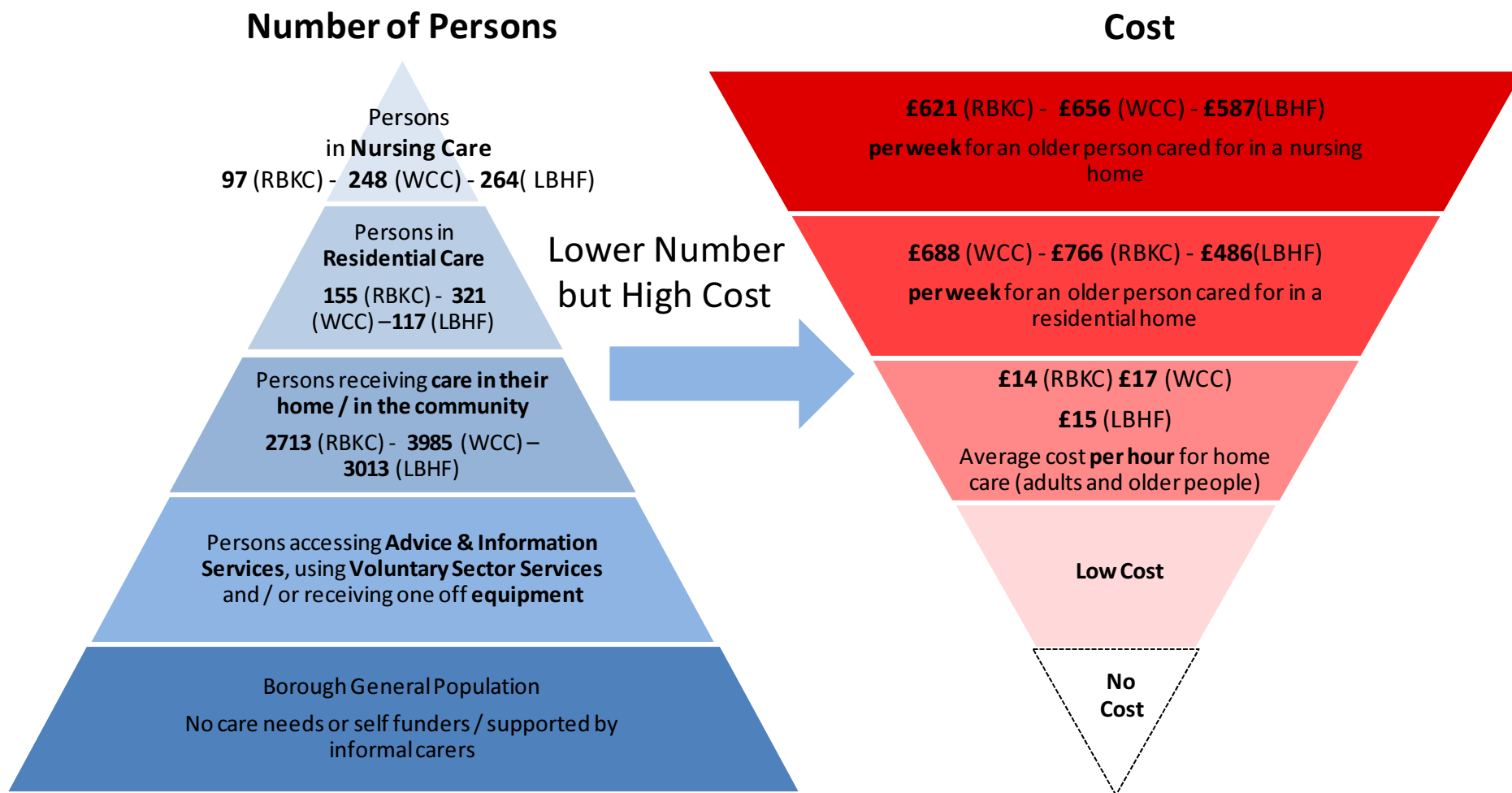
- On costs for fixed term employment contracts are calculated at 26% of salary costs
- All interim contract costs assume a 20% agency premium on top of the base day rate figure
- All contract costs are stated without VAT

Vision for Tri-Borough Adult Social Care & Strategic Roadmap

The Challenge

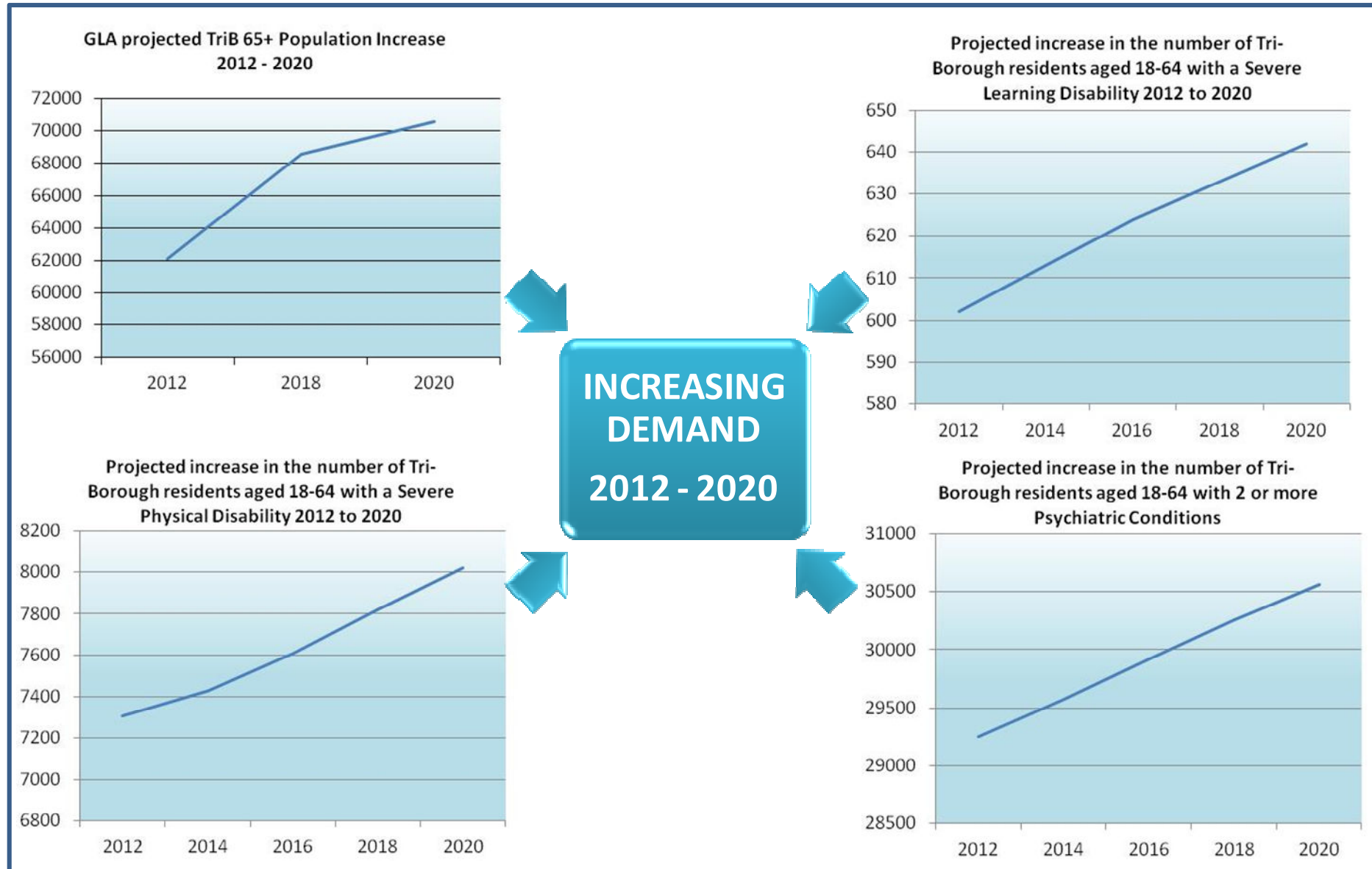


Reducing demand and reducing cost



Data taken from 2011/12 Statutory Returns

Demographic pressures – Can we afford to do nothing?



What This Means For Our Customers - Future ASC Models of Care



Model A

- Targeted preventative service offer
- Outcome focused care
- Integrated community service delivery
- Whole system integration – sharing of savings through system
- Information, advice and signposting
- Focus on carers
- Market developer role
- Fulfil statutory duties



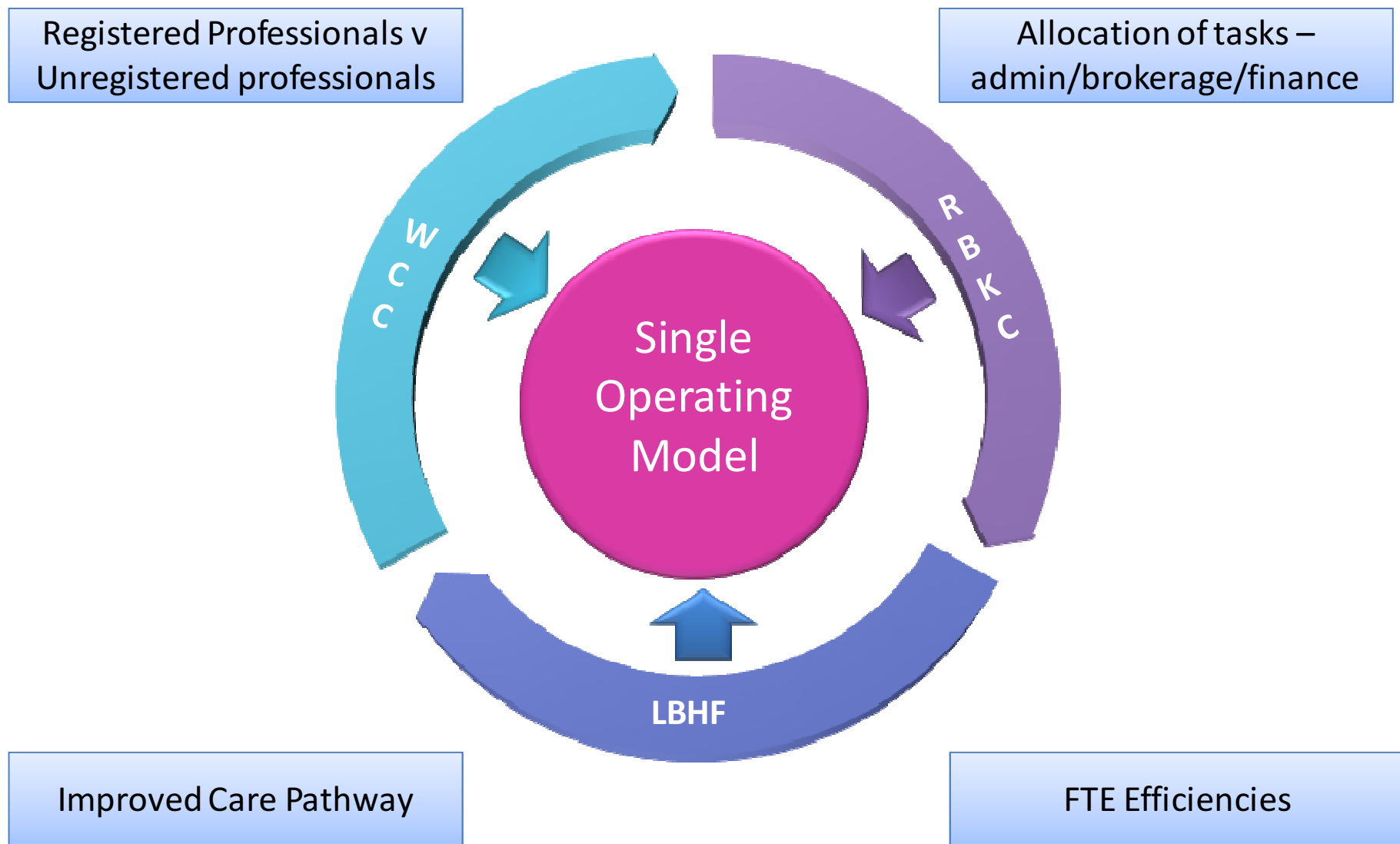
Model B

- Statutory duties only
- Critical FACs
- Duty delivered through Direct Payments
- De-commission community and in house care
- Market developer role
- Limited SP activity
- Limited joint working and integration with health

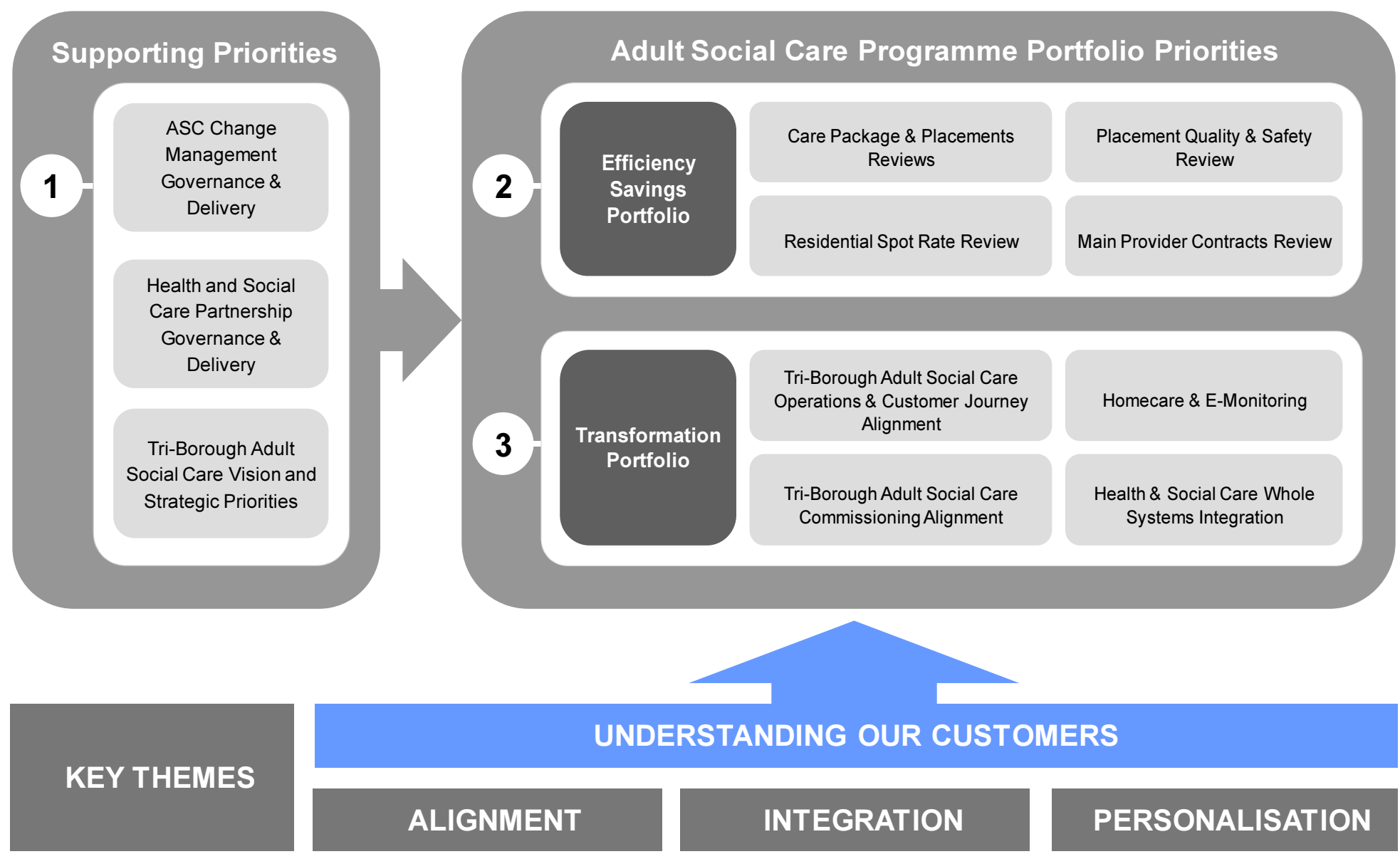
Tri-Borough ASC Strategic Outcomes

Outcome 1	Maximising self reliance, personal responsibility and enabling more people to find their own care solutions
Outcome 2	Providing people with the right help at the right time to facilitate recovery and regain independence
Outcome 3	Enabling people with long term conditions to receive care closer to home, stay independent and live the lives they choose
Outcome 4	Balancing risk effectively between empowering and safeguarding individuals
Outcome 5	Enabling people with disabilities to be active citizens and enjoy independent lives
Outcome 6	Ensuring Carers are identified and have their needs met within their caring role
Outcome 7	Enabling people to have a positive experience of social care services
Outcome 8	Achieving greater productivity and value for money

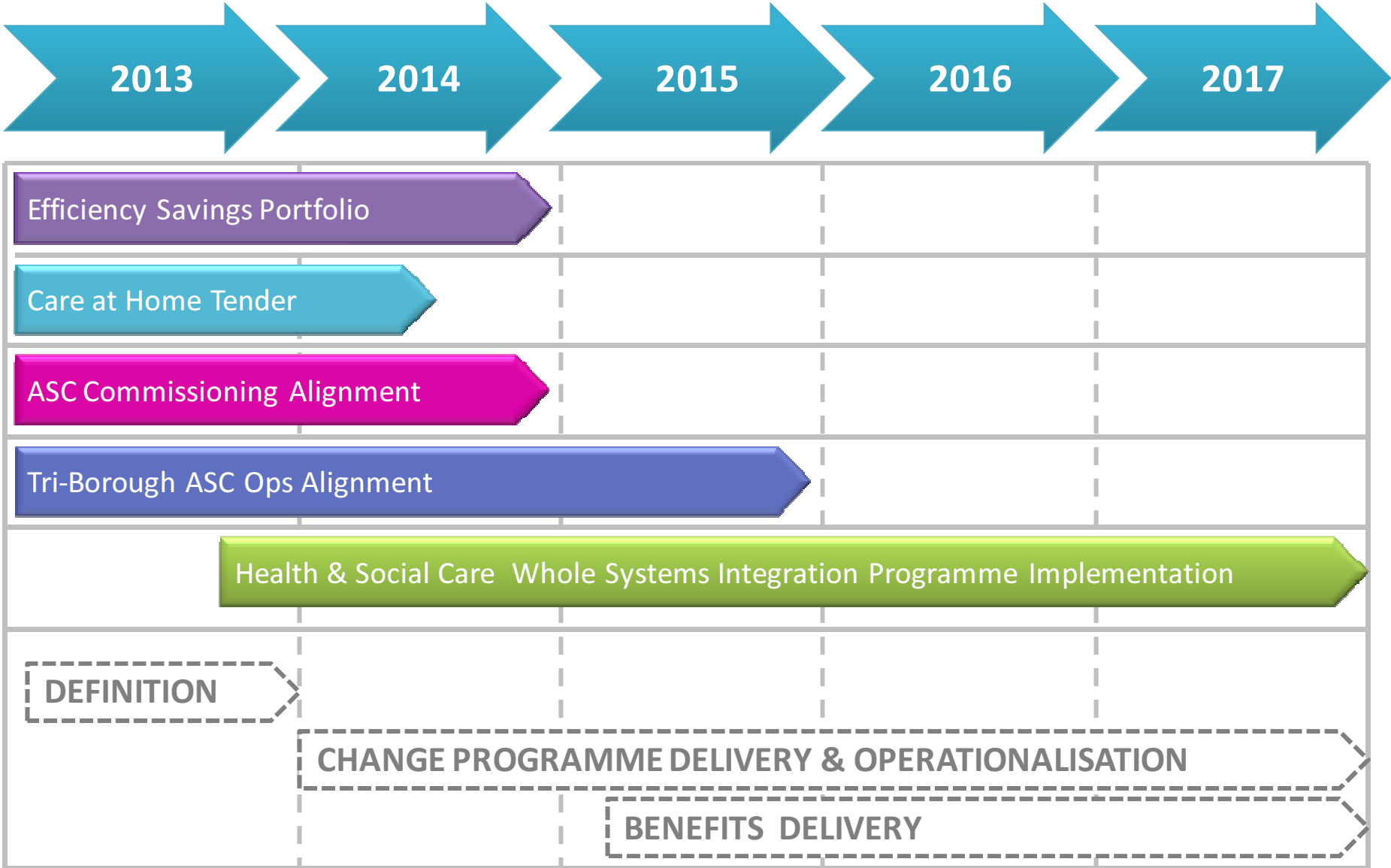
What This Means For Our Staff - Streamlining ASC Operational Services



Tri-Borough Adult Social Care Programme Portfolio Priorities



Key Activity Timeline To Deliver Our Vision For Tri-Borough ASC



Tri-Borough Governance

