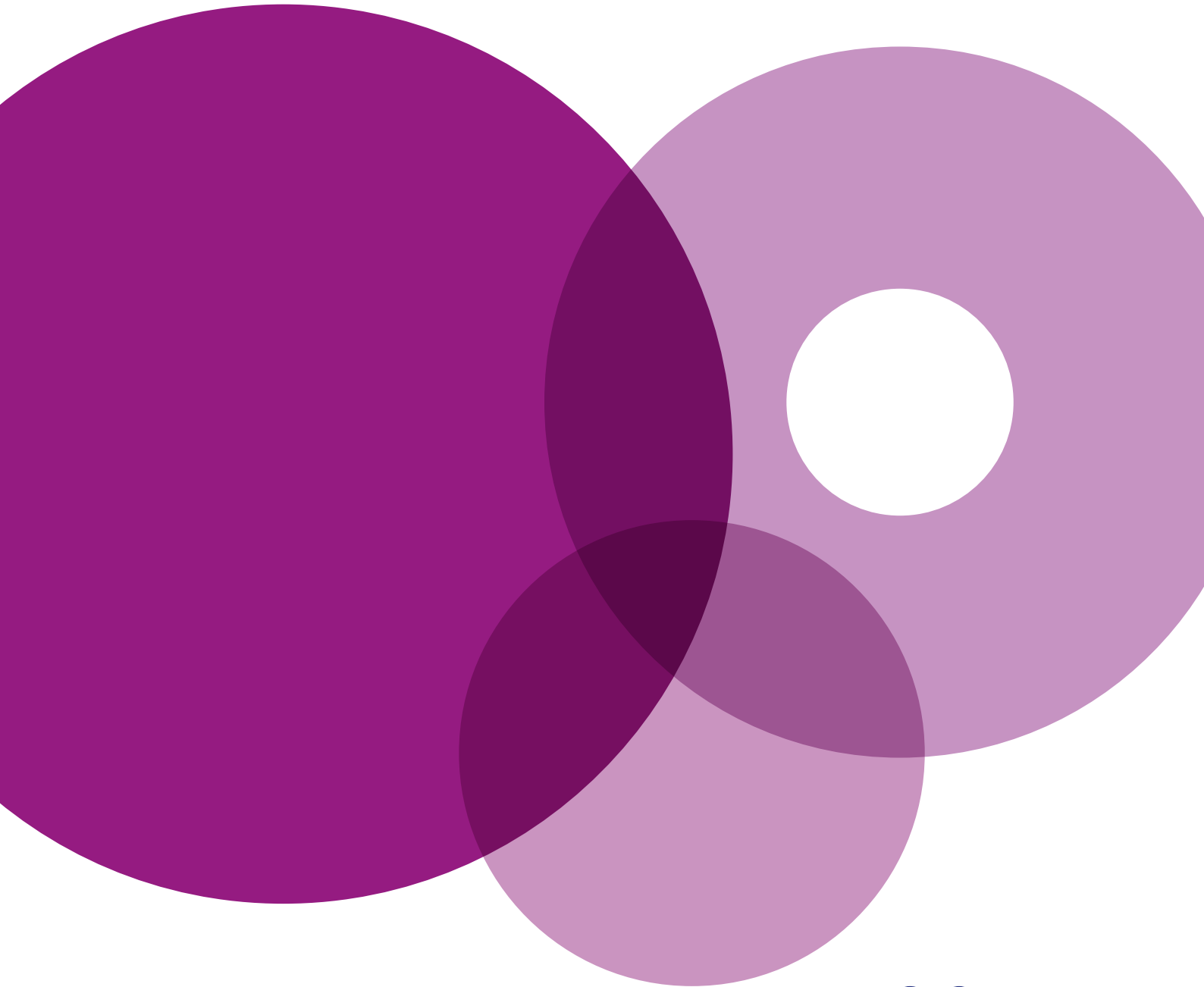# Stepping up to the place:

Integration self-assessment tool

Introduction

Bringing together health and social care to provide high-quality and sustainable services to improve health and wellbeing outcomes has been a constant and dominant policy theme for the past decade. Many places around the country are already demonstrating the potential to transform health and social care services so that they are person-centered and focused on the needs of the local area.

Integration, however, is not an end in itself, or a panacea for the system's financial challenges. Its primary purpose is to shift the focus of health and care services to improving public health and meeting the holistic needs of individuals, of drawing together all services across a place for greatest benefit, and of investing in services which maximise wellbeing throughout life.

At a local level, many leaders across health and care systems are assessing their present effectiveness and making the improvements needed to be fit for the future. The evidence base shows that integrated systems can take many forms, depending on local need and circumstance. Transformation, where successful, is iterative and requires trial and error, incremental change, and sustained effort and commitment. Nevertheless, there are key elements and characteristics that need to be addressed in order to succeed.

This self-assessment tool is designed to support local health and care leaders through health and wellbeing boards (HWBs) to critically self-assess their ambitions, capabilities and capacities to integrate services to improve the health and wellbeing of local citizens and communities.

It focuses on the key elements and characteristics needed for successful integration, offering insight into where you are now and the right way forward for you.

Stepping up to the place: The key to successful health and care integration

The Association of Directors of Adult Social Services (ADASS), Local Government Association (LGA), NHS Clinical Commissioners and NHS Confederation have come together to describe what a fully integrated, transformed system should look like based on what the evidence tells us.

This vision – published as 'Stepping up to the place: The key to successful health and care integration' built on our existing joint work over many years, and takes it to the next level – to call on local and national players to work together to ensure integration becomes integral to a transformed system. In short, to be seen as business as usual.

The vision, plus supporting evidence and essential questions for local and national leaders to consider are available at http://www.nhsconfed.org/~/media/Confederation/Files/Publications/Documents/Stepping%20up%20to%20the%20place_Br1413_WEB.pdf

Stepping up to the place:
The key to successful health and care integration – self-assessment tool

Who is the self-assessment for?

The self-assessment tool sits within the suite of sector led improvement offers. It derives directly from the vision document 'Stepping up to the place: The key to successful health and care integration'. Both the vision and tool are jointly sponsored by:

ADASS
www.adass.org.uk/home

LGA
www.local.gov.uk

NHS Clinical Commissioners
www.nhscc.org

NHS Confederation
www.nhsconfed.org

The self-assessment tool is for HWBs and place-based local health and care systems wishing to improve their capability to integrate health and care services. Wherever a local health and care system is on its journey of integration, the tool offers an opportunity to self-assess the present state of readiness across the key elements and characteristics needed for success and to identify areas for improvement.

The tool focuses on two core questions:

A) **Do you have the essentials for the integration journey?**

B) **How ready for delivering integration is your health and care system?**

How to use the integration self-assessment tool

The tool has been tested with strategic place based leaders in 10 pilot HWB areas between July and October 2016. External evaluation has demonstrated that the methodology is flexible enough to be applied in a range of local areas with differing complexities and challenges. The overall messages from the evaluation are positive.

"Probably the best self-assessment/ discussion I've been involved in".

"Exceeded my expectations in terms of generating conversations that we need to have".

"Resulted in an agreed set of actions that would otherwise not have been agreed".

The facilitated workshop is a half day on site event with a rapid, focused self-assessment process at its heart. There is no preparation required as the impact is in the live experience. We follow up the session with a call to support continuing momentum on action planning.

The Care and Health Improvement Programme (CHIP) will provide facilitation for this tool. We will work with you to understand your local system before running the workshop and aim to co-design it with you to ensure it meets your needs. Facilitators come from the four sponsoring organisations. To arrange a session please contact caroline.bosdet@local.gov.uk

Integration self-assessment tool

The tool has two core modules and two optional modules and an action planning template:

Core modules
A) Do you have the essentials for the integration journey?
This module considers the broad characteristics of systems capable of turning shared ambitions for integration into reality for local people.
B) How ready for delivering integration is your health and care system?
This module assesses the practical arrangements required across a health and care system for securing sustainable and transformed services.

Optional modules
C) Effective governance for delivering integration
This tool offers an opportunity to take a deeper look at effective system wide governance arrangements.
D) Effective programme management for delivering integration
This module provides an opportunity to take a deeper look at effective programme management arrangements.

Action planning template
The template provides a simple grid to capture actions whilst working through the tool.

Core modules

Module A) Do you have the essentials for the integration journey?

This module is the starting point for the integration journey and explores the essential elements that need to be in place for integration ambitions to be achieved. It explores whether or not your system has a shared culture, and trust between individual organisations, as well as the shared commitment and agreement to redesigning the health and social care landscape together, decommissioning ineffective services as well as creating new ones. Shared culture and trust, as well as a shared purpose, are essential to create a resilient system that is able to cope with the practical challenges of transforming services.

The module also looks at whether there is a genuine sense of shared leadership across the system, with a clear understanding of where joint and individual accountability sits. And finally, this module prompts leaders to consider whether the system has the right governance and leadership to achieve its integration ambitions.

1. Shared commitment
To what extent:

	Comments
Is there agreement and a shared understanding on the objectives of integration and prevention, and what needs to change in order to achieve these objectives?	
Have system leaders created a shared purpose, which sets a clear vision of how to improve local people's health and wellbeing?	
Do leaders understand the benefits and challenges of integration, from both public and organisational perspectives?	
Have leaders taken responsibility for their contribution to improving health and wellbeing?	
Is there a shared and demonstrable commitment to a preventative approach, focusing on promoting food health and wellbeing for all citizens?	
Have system leaders gained commitment from all stakeholders to make the changes required for transformation?	
Are local systems designed around individuals and the outcomes important to them?	

2. Shared leadership
To what extent:

	Comments
Do local leaders have the right relationships, shared values and behaviours to work together for the public good?	
Do leaders have the honest conversations about challenges facing the whole system and its component parts?	
Have leaders been able to reach shared solutions?	
Is there a willingness to put the needs of the public before the needs of individual organisations?	
Is there trust between leaders and organisations?	

3. Shared accountability
To what extent:

	Comments
Are roles and responsibilities clear, set out in terms of reference, and do they match the decision-making authority?	
Does the health and care system have arrangements in place for organisations to be held to account for delivery?	
Is business only done in the right places?	
Are links to each other's organisations statutory decision-making responsibilities clear?	
Does the system share data?	
Are there agreed key metrics and benefits?	
Is there clear governance for accounting to partners for progress?	
Is there open communication?	
Is the right information provided to the right people to enable them to carry out their roles and responsibilities?	

4. Getting it done
To what extent:

	Comments
Is there local capability to deliver integration?	
Given the scale and scope of local integration, are there appropriate arrangements and transactional skills in place to deliver across the health and care system?	
Are governance arrangements able to make binding decisions, and are they at the right place and pace required?	
Have leaders agreed the processes to bring about change locally which will meet the tests of law for public bodies: public consultation? Procurement? Competition?	
Have leaders agreed a change model for the whole health and care system?	
Is there capacity including strong joint programme management to align resources and tasks?	

Module B) How ready for delivering integration is your health and care system?

Having taken a broad overview in Module A of the commitment to deliver integration, this module focuses on the practical working arrangements that are required to ensure that the shared commitment is translated into successful delivery.

1. Your shared vision
To what extent:

	Comments
Do leaders have a clear picture of future resources?	
Do leaders have a clear shared evidence-based assessment of future demand for services?	
Do leaders have a shared understanding of local variation in outcomes, service quality and standards?	
Do leaders have a clear understanding of gaps in capacity and resources?	
Do leaders plan jointly including how to address gaps in capacity and resources?	
Does the local case for change reflect the national analysis of challenges?	

2. Shared decision-making
To what extent:

	Comments
Have leaders agreed the governance for local system-wide working?	
Are the right stakeholders involved and can binding decisions be taken?	
Do leaders recognise, engage and harness local energies to lead integration?	
Are all relevant partners – local authorities, CCGs, NHS England, providers and community and voluntary sector leaders engaged and committed to playing their part?	
Are system leaders engaging with communities and stakeholders to secure their engagement in what, why, and how change needs to happen?	
Are services and the local system developed with the people who use and provide services, and your communities?	
Are leaders clear that you have the right decision making footprints agreed for planning and delivering the integration improvement needed?	

3. Shared systems – models
To what extent:

	Comments
Have leaders critically assessed and agreed which modern care delivery models would best improve the outcomes that leaders agree need to address locally?	
Have leaders appraised and agreed which organisational models may better support delivery of modern chosen care delivery models?	
Have leaders appraised and agreed how financial resources could be deployed to best effect?	
What financial models, contracting methods and risk sharing would best achieve the outcomes leaders wish to improve by integration?	

4. Shared systems – enablers
To what extent:

Are you integrating resources for:	Comments
Information and technology – at individual and population level, shared between relevant agencies and individuals?	
Workforce – across the whole system to ensure supply, adequate training and development of a multidisciplinary approach?	
Estate – are leaders maximising access and efficiencies?	

Optional modules

The optional modules were not tested in the pilots. However the pilots demonstrated that these modules should be used in a follow up session and not combined with the core modules in one session. It was evident from the pilots overall that these modules would provide very useful additional support.

Optional Module C) Effective governance for delivering integration

Many health and care systems delivering integration may experience governance as a particular challenge to delivery. If in looking at your own system in the core modules you identified governance as a challenge, this optional module is intended to explore further governance arrangements and to identify steps to move forward.

1. Decision making authority	Comments
Do committees and groups have the appropriate legal authority to make decisions?	
Can binding decisions be secured at the right level and at the pace required?	

2. Clear roles and responsibilities	Comments
Are roles and responsibilities clear and set out in terms of reference?	
Do roles and responsibilities match the decision making authority?	

3. Engaging stakeholders	Comments
Are the right stakeholders engaged in the right places and at the right times?	
Do committees and groups include membership from all the organisations which will need to make decisions?	

4. Managing interfaces	Comments
Is business only done in the right places?	
Are links to each organisations' statutory decision making responsibilities clear?	

5. Information flow	Comments
Is the right information provided to each committee and group to enable it to carry out its role and responsibilities?	

Optional Module D) Effective programme management for delivering integration

Effective programme management for the whole system is essential to putting shared ambitions and commitments into practice. If when using the cored modules there is any uncertainty over the clarity of programme shaping and delivery arrangements, then this module is designed to look closer into identifying the requirements for effective programme management.

Setting out the shared vision	Comments
Describe the ambitions of the local health and care system	
What is the present state of the local health and care system? What sources will you use?	
What are the system challenges?	
Have you agreed what needs to be done?	
What action is needed to move the system forward?	
What changes are needed to develop shared culture and behaviour?	
How will you hold everyone to account for the changes and outcomes?	

Programme planning	Comments
Is there an appropriate programme plan to transform your local health and social care system and make it sustainable?	
When will it happen?	
Who will lead what? And who will be involved?	
When will decisions be taken?	
When will ambitions be delivered?	
Have you agreed clear milestones and checkpoints?	

Planning footprints	Comments
What are the planning footprints for the services being improved?	
Who is the population which will benefit from the plans agreed?	
Which organisations within the planning footprint will be engaged?	
How do the local delivery footprints or localities align with other existing strategic planning footprints?	

Programme interdependencies	Comments
Are the interdependent strands of the programme recognised and aligned?	

Monitoring progress	Comments
How will progress be appropriately assessed and reported?	
How will you ensure reporting is insightful into reasons for status?	
How will you ensure expectations are proactively identified and managed?	

Action planning

This action planning grid can be used to capture key actions when working through the modules of this tool which are necessary for your system to make progress on integration. Actions should be specific, with responsible stakeholders to lead on the actions, and include projected timelines, staff and financial resources and the outcome you want to achieve from the action.

10 Key actions	Who is responsible?	When will this be done?	Resources	Outcome
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

For a copy in Braille, larger print or audio,
please contact us on 020 7664 3000.
We consider requests on an individual basis.

REF 1.29