



Background/Why Change?

Feedback from customers¹, members of the public and other stakeholders, on the SSA indicated that despite a comprehensive training programme involving a wide range of staff from across the agencies involved in community health and care services, the process was not being used as a “single”, “shared” assessment.

Up to 30 individual assessments existed between different agencies in Shetland. This meant duplications, wasted time and losses in other resources. Particular issues included:

- Unclear boundaries and roles,
- Delays in service provision,
- A lack of positive outcomes for some customers,
- Creations of bottlenecks in service delivery, which led to services being resource driven,
- A crisis response service rather than planned service,
- Service driven, inflexible approach to solutions
- Long waiting lists for some services, and
- Lack of access to relevant information

There is also a clear imperative for change if we are to meet the needs of a population that is ageing rapidly. **More of the same will not do.** This alone means that we must have a radical change at this time; a change that will shift the focus back to the customer, their needs and responsibilities; an approach that is enabling, supportive and one that works, **With YOU, For YOU.**

Shetland’s Community Health and Care Partnership² signed up to a number of key objectives for the year 2009/10:

- To maintain the position of zero hospital discharged delayed over 6 weeks.
- To increase the number of people with long term care needs who are supported to live at home.
- To decrease the number of people waiting for an Occupational Therapy

¹ Customers; are service users/patients, carers, all stakeholders, Partner agencies etc.

² Joint partnership between NHS and SIC to improve Health and Care services in Shetland.

<http://www.shb.scot.nhs.uk/healthcare/community/index.asp>

- assessment; and
- To reduce the number of older people (65+) admitted to hospital as an emergency.

To help meet these objectives and to improve services for our customers, a complete redesign of the single shared assessment and accompanying process was made a top priority for Council and NHS staff in the year 2009/10.

The CHCP agreed to use the LEAN methodology, as they identified a need for rapid and radical change to support the achievement of their goals.