



A – Z Introductory Guide to Health and Social Care in Scotland

Whole Systems Working

Brief Description

The concept of “whole systems working” is popular, but elusive. It entered the mainstream of health and social care discourse in the late 1990s, and has been used mainly with reference to management and service delivery. Broadly, it refers to the process of involving all stakeholders in an area in discussion about service change in that area. Stakeholders are encouraged to think about the way the whole service delivery system works, rather than focusing only upon their own service, and on how ‘the system’ could be changed to improve care processes or outcomes.

Key Developments and Expectations

Encouraging the development of whole systems approaches is a key feature of recent policy imperatives across children’s and adult services:

- In 2001, *For Scotland’s Children* urged the development of a ‘*Children’s Services System*’, and a similar line has been developed in the 2005 Consultation Paper, *Getting it Right for Every Child*.
- The 2003 NHS White Paper argued that to address the root causes of discharge delays, each NHS Board must take a ‘whole system’ approach to service redesign.
- The 2005 National Framework for Service Change in the NHS in Scotland (also known as the Kerr Report) presses the case more systematically, recommending a ‘*re-profiling of the current ‘one size fits all’ system ...In its place we want to see a whole system approach*’.
- The 2005 framework *Better Outcomes for Older People* states that ‘*the whole system approach puts the older person at the centre of all service delivery and planning. It provides the right support, at the right time by addressing the entire range of their needs*’.
- The 2005 Audit Scotland review of delayed discharges comes to a similar conclusion, stating that ‘*delayed discharges are a symptom of a wider, systemic problem, and cannot be treated as a stand-alone issue*’.

Although much of the discussion of whole systems working has been in the context of delayed discharge from acute care, the principles and approach have a wider application across all aspects of local health and care services.

Indicators

There is a 'whole systems indicator' relating to services for older people– the Joint Performance Information and Assessment Framework Whole System Indicator [JPIAF 10] – in which local partnerships need to indicate how they are managing the 'balance of care'. Five sets of performance information are identified:

- The number of people receiving Single Shared Assessments – an upward trend is desirable;
- The number of delayed discharges – a downward trend is desirable;
- The number of individuals over 65 admitted to hospital as emergency admissions – a downward trend is desirable;
- The number of individuals being supported long-term in accommodation other than in their own home – ideally a long-term relative decrease is desirable;
- The number of individuals being supported in their own homes through receiving 10 or more hours of home care per week – an upward trend is desirable.

In addition, a sixth set of performance information may subsequently be used – the waiting time for receiving assessments and care packages. This information will be available when another indicator – JPIAF 6 – is fully introduced.

The difficult thing is to demonstrate a relationship *between* these variables. The Scottish Executive is developing a methodology for expressing these relationships and local partnerships will in future be asked to comment on the way these factors relate to each other locally.

In *Moving On? A handbook for modelling the whole system for delayed discharge in Tayside*, an attempt is made to develop a whole systems model for Tayside to help tackle its delayed discharges from hospital. This model can be viewed online at www.audit-scotland.gov.uk/publications/discharges.htm and is based on a 'stocks and flows' approach that has been likened to filling and emptying a bathtub. The bathtub represents the 'stock' of water which can rise or fall due to the 'flow' of water coming in from the taps or released through the plug.

The report concludes that by enabling stakeholders to investigate the impact different strategies could have on their system, a number of lessons were learned:

- It is important to provide a balance of strategies if sustained reductions in delayed discharge are to be achieved;
- There is no single or "one size fits all" solution;
- Changes in process are as important as investment in capacity;
- Although each of the strategies produced reductions in delayed discharges, without redesign of processes there appears to be a level of delayed discharges below which it would be extremely difficult to go.

Implications for Joint Working

The push for whole systems working has three main implications for joint working:

- First, that *ad hoc* collaborative relationships are no longer adequate – the partnership agenda is stepping up to a higher gear.
- Secondly, the new agenda requires *both* a top-down and bottom-up approach to change in which all parties have to be engaged and committed.
- And finally, the concept of a ‘whole system’ needs greater clarity, otherwise – as ISD Scotland [Kendrick and Conway, 2003] has suggested – it may be reduced to little more than an empty buzzword. Benson’s model of an ‘inter-organisational network’ is one example of a coherent conceptual framework [Integrated Care Network, 2004]. An alternative is the ‘onion model’ being used in England by the Department for Education and Skills for implementing the *Every Child Matters* reforms [DfES 2004].

How can I find out more?

Audit Scotland [2005], *Moving On? An overview of delayed discharges in Scotland.*

www.audit-scotland.gov.uk/publications/pubs2005-07-18

Audit Scotland [2005], *Moving On? A handbook for modelling the whole system for delayed discharge in Tayside.*

www.audit-scotland.gov.uk/publications/pubs2005-07-18

Scottish Executive [2005], *Better Outcomes for Older People: Framework for Joint Services.*

<http://www.scotland.gov.uk/Publications/2005/05/13101338/13397>

Scottish Executive [2005], *Building A Health Service Fit for the Future.*

<http://www.scotland.gov.uk/Publications/2005/05/23141307/13104>

Scottish Executive [2005], *Getting it Right for Every Child: proposals for Action.*

<http://www.scotland.gov.uk/Publications/2005/06/20135608/56098>

DfES [2004], *Every Child Matters: Change for Children.*

<http://www.everychildmatters.gov.uk/publications/?asset=document&id=15516>

Integrated Care Network [2004], *Whole Systems Working: A Discussion Paper.*

www.integratedcarenetwork.gov.uk

Kendrick, S. and Conway, M. [2003], *Increasing emergency admissions among older people in Scotland: a whole systems account.* Information and Statistics Division: NHS Scotland.

www.isdscotland.org/wholesystem

Scottish Executive [2003], *The Joint Performance Information and Assessment Framework: Circular CCD1/2003.*

<http://www.scotland.gov.uk/Topics/Health/care/17673/11489>

You can find out more about the Joint Performance Information and Assessment Framework by visiting the Joint Future website, or contacting that team within the Scottish Executive via its website:

<http://www.scotland.gov.uk/Topics/Health/care/JointFuture/Introduction>

[There is also a separate guide on the JPIAF in this A-Z series published by the Joint Improvement Team.]

Scottish Executive [2001], *For Scotland's Children*.

<http://www.scotland.gov.uk/library3/education/fcsr-00.asp>

Scottish Executive [2003], *Partnership for Care: Scotland's Health White Paper*.

<http://www.scotland.gov.uk/library5/health/pfcs-00.asp>