

IPOA Programme Objectives

		Weighting
1	To improve patient outcomes, especially those that deliver better patient centered care. The agreed IPOA solution should support the following service user requirements: <input type="checkbox"/> I am always kept informed about what the next steps will be <input type="checkbox"/> The professionals involved with my care talk to each other <input type="checkbox"/> When I use a new service, my care plan is known in advance and respected <input type="checkbox"/> When I move between services or settings, there is a plan in place for what happens next <input type="checkbox"/> I know in advance where I am going, what I will be provided with, and who will be my main point of professional contact <input type="checkbox"/> If I still need contact with previous services/professionals, this is made possible	25.0%
2	The need to reduce waiting times by providing transparent and accessible data and advice about health and services	18.3%
3	The need to manage the impact of a predicted skills shortfall by effectively managing the workforce, through different ways of working and better supporting technology	20.0%
4	The need to meet rising demand for health and social care	18.3%
5	The need to drive better value for money and achieve financial sustainability	N/A for OA event
6	The need to deliver integrated care by optimising the use of estates, ensuring care is provided in appropriate cost effective settings, reducing duplication and eliminating waste	18.3%
		100.0%

Critical Success Factors

		Weighting
1	Acceptability -will the option be acceptable to key stakeholders? This is particularly relevant where stakeholder/ partner support is critical to the scheme.	33.3%
2	Achievability -will the option be achievable? This might include, for example considerations such as physical space; likely planning constraints; resource issues such as staffing; amongst others.	33.3%
3	Strategic Fit -how well does the option fit with the strategic direction of travel for the organisation's and wider LLE economy?	33.3%

4	Affordability -in terms of both capital and revenue. How will in programme investment be realised from partners or will the programme need to be centrally funded to achieve partner commitment.	N/A for OA event
5	Value for Money -which brings together revenue and capital considerations. Will ongoing costs to partners represent a saving verses existing costs? Will partners be able to justify investment compared against the amount of service user benefit created that may or may not be cashable to the investing partners?	N/A for OA event 99.9%

Range of potential integration by existing Points of Access - weighted scores

Range of potential integration by existing Points of Access .			i	ii	iii	iv	v	vi
		Weighting	remain as is and don't integrate	County ASC (inc FC+) and CHS	County ASC (inc FC+), City ASC and CHS	County ASC (inc FC+), City ASC, Bed Bureau and CHS	County ASC (inc FC+), City ASC, Bed Bureau, Rutland ASC and CHS	County ASC (inc FC+), City ASC, Bed Bureau, Rutland ASC, AMH and CHS
Objectives								
1	To improve patient outcomes, especially those that deliver better patient centered care.	25%	1.00	1.50	2.00	2.00	2.00	2.00
2	The need to reduce waiting times by providing transparent and accessible data and advice about health and services	18%	0.18	1.10	1.19	1.19	1.28	1.47
3	The need to manage the impact of a predicted skills shortfall by effectively managing the workforce, through different ways of working and better supporting technology	20%	1.00	1.05	1.10	1.15	1.20	1.25
4	The need to meet rising demand for health and social care	18%	0.55	0.60	0.64	0.69	0.73	0.78
5	The need to drive better value for money and achieve financial sustainability	N/A for OA event						
6	The need to deliver integrated care by optimising the use of estates, ensuring care is provided in appropriate cost effective settings, reducing duplication and eliminating waste	18%	0.18	1.28	1.28	1.38	1.38	1.38
Sub total objectives score			2.92	5.53	6.22	6.40	6.59	6.87
Success Factors								
1	Acceptability-will the option be acceptable to key stakeholders? This is particularly relevant where stakeholder/ partner support is critical to the scheme.	33%	1.67	3.33	2.66	2.66	1.00	1.00
2	Achievability-will the option be achievable? This might include, for example considerations such as physical space; likely planning constraints; resource issues such as staffing; amongst others.	33%	3.33	2.66	2.33	2.33	2.00	1.33
3	Strategic Fit-how well does the option fit with the strategic direction of travel for the organisation's and wider LLE economy?	33%	2.00	2.66	2.75	2.83	2.91	3.00

Range of potential integration by existing Points of Access .			i	ii	iii	iv	v	vi
		Weighting	remain as is and don't integrate	County ASC (inc FC+) and CHS	County ASC (inc FC+), City ASC and CHS	County ASC (inc FC+), City ASC, Bed Bureau and CHS	County ASC (inc FC+), City ASC, Bed Bureau, Rutland ASC and CHS	County ASC (inc FC+), City ASC, Bed Bureau, Rutland ASC, AMH and CHS
4	Affordability-in terms of both capital and revenue. How will in programme investment be realised from partners or will the programme need to be centrally funded to achieve partner commitment.	N/A for OA event						
5	Value for Money-which brings together revenue and capital considerations. Will ongoing costs to partners represent a saving verses existing costs? Will partners be able to justify investment compared against the amount of service user benefit created that may or may not be cashable to the investing partners?	N/A for OA event						
Total CSF score			6.99	8.66	7.74	7.83	5.91	5.33
GRAND TOTAL SCORES			9.91	14.19	13.96	14.23	12.50	12.20
RANK			6.00	2.00	3.00	1.00	4.00	5.00