ITEM No ...4.....



REPORT TO: PERFORMANCE & AUDIT COMMITTEE – 31 JULY 2018

REPORT ON: ANNUAL PERFORMANCE REPORT 2017/18 UPDATE

REPORT BY: CHIEF FINANCE OFFICER

REPORT NO: PAC43-2018

### 1.0 PURPOSE OF REPORT

To update the Performance and Audit Committee on progress towards producing the 2017/18 Health and Social Care Partnership Annual Performance Report.

#### 2.0 RECOMMENDATIONS

It is recommended that the Performance & Audit Committee (PAC):

- 2.1 Notes the updates contained within this report.
- 2.2 Notes the summary version of the Annual Performance Report (attached as Appendix 1) that will be published on the Health and Social Care Partnership website on 31 July 2018.

### 3.0 FINANCIAL IMPLICATIONS

None.

### 4.0 MAIN TEXT

### 4.1 Background Information

- 4.1.1 Section 42 of the Public Bodies (Joint Working) (Scotland) Act 2014 states that Integration Authorities must prepare an annual performance report for each reporting year. A performance report is described as a report which sets out an assessment of performance by each Integration Authority in planning and carrying out its integration functions. The Public Bodies (Content of Performance Reports) (Scotland) Regulations 2014 sets out the prescribed content of an annual report prepared by an Integration Authority in terms of Section 42 of the Act.
- 4.1.2 There is a requirement for each Integration Authority to publish their Annual Performance Report within four months of the end of the reporting year. The second annual report of the Dundee Health and Social Care Partnership (for 2017/18) is therefore due for publication by 31 July 2018.

### 4.2 Progress Towards Development of Annual Performance Report 2017/2018

- 4.2.1 In line with the approach taken for the production of the first Annual Performance Report, the production of this year's report has been undertaken in collaboration with a range of officers and stakeholders. An inclusive and collaborative approach has ensured that, as well as meeting regulations, the annual performance report will form a true representation of the diversity and breadth of activity and performance within the Partnership during 2017/18.
- 4.2.2 Regulations require that an annual performance report be published by the Partnership no later than 31 July 2018. As was the case for the 2016/17 report this has proved to be a challenging deadline given the availability of data regarding performance against the national indicators, for which the Partnership is reliant on validated data from NHS National Service

Scotland Information Services Division (NSS ISD) rather than local data from NHS Tayside. Due to the publication dates for this data and the pre-arranged schedule of Integration Joint Boards (IJB) the earliest time at which the Annual Performance Report can be submitted for approval is at the IJB scheduled for 28 August 2018.

- 4.2.3 In order to meet the regulations the Partnership will publish a summary version of the Annual Performance Report on 31 July 2018, subject to the approval of content and format by the Chairperson, Vice-Chairperson and Clerk of the IJB, Chief Officer, Chief Finance Officer and the Head of Service Health and Community Care. This summary is attached as Appendix 1 of this report. The summary version fulfils the key requirements of the regulations, including information regarding progress against the National Health and Wellbeing Outcomes and key headlines at Partnership and locality level in relation to financial planning and performance, best value, and scrutiny/inspection. The Scottish Government has indicated that this approach is acceptable, as has the Clerk of the IJB.
- 4.2.4 The summary version has been developed to ensure that performance information is accessible to, and available for scrutiny by, the widest possible audience including members of the public, stakeholders of the Partnership and scrutiny bodies. The summary version produced in 2017 was the subject of significant levels of positive feedback. A number of Partnerships from across Scotland have adopted this approach and format for their own Annual Performance Reports. The summary version will be published on the Partnership website with appropriate pro-active media liaison accompanying publication.
- 4.2.5 A full version of the Annual Performance Report has also been developed. This expands on the headline information in the summary version, providing broader context and further detail regarding performance, improvements and outcomes as required by the regulations. This will be submitted to the IJB on 28 August 2018 for approval and will be published as soon as possible thereafter. Proposals for publication and dissemination of the full report will be made to the IJB at the time of submission of the report for approval. A copy of the summary version of the annual performance report will also be presented to the IJB for information.
- 4.2.6 During 2018/19 a review of the Partnership's Strategic and Commissioning Plan is to be undertaken in-line with legislative requirements. In parallel with this the Strategy and Performance Service will review the approach taken to production of the Partnership's Annual Performance Report to ensure that the report for 2018/19 reflects the content and style of the revised Strategic and Commissioning Plan and is further enhanced in terms of accessibility for all stakeholders, particularly members of the public.

### 5.0 POLICY IMPLICATIONS

This report has been screened for any policy implications in respect of Equality Impact Assessment. There are no major issues.

### 6.0 RISK ASSESSMENT

This report has not been subject to a risk assessment as it a status update and does not require any policy or financial decisions at this time.

### 7.0 CONSULTATIONS

The Chairperson, Vice-Chairperson, Chief Officer, Head of Service - Health and Community Care and the Clerk were consulted in the preparation of this report.

#### 8.0 BACKGROUND PAPERS

None.

Dave Berry Chief Finance Officer DATE: 4 July 2018

Lynsey Webster Senior Officer, Strategy and Performance

Kathryn Sharp Senior Manager, Strategy and Performance

**Appendix 1** 



# **Annual Performance Report SUMMARY 2017-18**

"Each citizen of Dundee will have access to the information and support that they need to live a fulfilled life"

This is the second statutory Annual Performance Report of the Dundee Integration Joint Board (IJB), established on April 1st 2016 to plan, oversee and deliver adult health and social care services through the Dundee Health and Social Care Partnership.

The Dundee Health and Social Care Partnership consists of Dundee City Council, NHS Tayside and partners from the third sector and independent providers of health and social care services. The Partnership is responsible for planning and delivering a wide range of adult social work and social care services, and primary and community health services for adults. The Partnership is also responsible for some acute hospital care services.

# **Our Big Achievements**



Invested £1.1 million of additional resources in home care services and secured additional national investment of over

£600k for 3 years to pilot a Health and Work Support service in Dundee and an additional £480k to increase the number of communitu link workers to support reducing inequalities within the city.



In 8 out of 9 National Health and Wellbeing Indicators

regarding health and care experience, Dundee performed better than the Scottish average. For the remaining indicator, Dundee performed the same as the Scottish average.

Developed Communitu Services that have reduced the length of time people spend in hospital when they have been admitted in an emergency. We reduced the number of hospital bed nights required by 10,342 during 17-18.



Reduced the variation in performance between our most and least deprived localities across key national performance indicators, including emergency bed days, delayed discharges and 28 day hospital readmissions.

Over the last 12 months we have **reduced** 

bu more than one half the number of bed days occupied where the person's discharge from hospital was delayed (further improvement from 16-17).



Demonstrated that we are embedding a culture of

listening to service users and their families and improving our services based on what they say and suggest to us.

# Where we have made progress...



The creation of a multi-disciplinary discharge hub and assessment at home service, introduction of 7 day working within the acute frailty team and

further development of the Enhanced Community Support Team has enabled us to speed up the safe discharge from hospital of people who are frail and acutely unwell.

Created a shift from the more traditional 'medical model' and service led approach, to a more integrated and holistic approach to improving quality of life and outcomes by further developing recovery, asset-based and outcome focused approaches.



The redesign of health inequalities activities in the city has contributed to improved

health outcomes by promoting healthier lifestyles and increasing the availability of health checks, as well as ensuring services are accessible to the most vulnerable citizens.

The location of Welfare Rights services within GP practices has resulted in 734 patients receiving £1.5M of additional benefits.





Increased the spend on Self Directed Support Options 1 and 2 from £1.3M in 2016-17 to £1.7M in 2017-18.

25 new models of accommodation have been developed which support people to secure their own tenancy. This has been made possible due to the ongoing work between partnership representative and neighbourhood services colleagues as part of the Strategic Housing Investment Plan.



A move to more integrated services – the integrated discharge hub and the integration of occupational therapy services within the community.





A number of services were recognised at local award ceremonies, including the Dundee Carers Partnership which won an Outstanding Service and Commitment Award from Dundee City Council and the Leg Ulcer Clinic which received a NHS Star Award.

# What you have told us...

84%

of adults supported at home agreed they are supported to live as independently as possible.

82%

of adults receiving any care or support rated it as excellent or good.

93%

of adults said that they can look after their health very well or quite well.

"I wanted to let you know that the work and empathy of my Mum's Care Manager was second to none. Although he was only involved for a short time prior to her passing, he showed the care and commitment that made those last weeks for her as comfortable and the best they could be by way of ensuring that her care was met by those she knew and trusted. So often we only hear the negatives but I wanted you to know that on behalf of her family and friends that her care was superb."

(Care Management Team for Older People)

84%

of people said they have had a positive experience of care provided by their GP practice.

85%

of adults supported at home agreed that their services and support had an impact in improving or maintaining their quality of life.

"My mother-in-law was a resident .... for eight months until she died. Staff at the care home welcomed her into the home and respected her and valued her uniqueness. The staff provided excellent care and support for her from day 1, they encouraged us as a family to make it as homely as possible so that she would feel more comfortable. They had shown her and the family compassion-dignity and were always respectfully present without being intrusive during her last days, they made a very difficult situation so much easier not only for my mother-in-law but for all her family"

(Dundee Health and Social Care Partnership Care Home)

87%

of adults supported at home said they feel safe.

78%

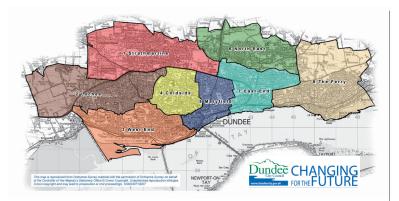
of adults supported at home said they had a say in how their help, care or support was provided.

81%

of adults supported at home said that their health and care services seemed to be well co-ordinated.

"My service has been first class. I've been helped so much when I was lost and in a dark place" (Psychological Therapies Service)

# Working in localities



We have enhanced our focus on targeting resources, planning and delivering services in service delivery areas. Examples are; the development of a locality approach to carers in Coldside and Strathmartine, the roll out of the 'MacMillan Improving the Cancer Journey' in Coldside and Lochee, the roll out of the leg ulcer clinic to a second locality, a whole system approach to supporting children and families in Lochee and an East End health and wellbeing drop in initiative.

The established four GP Clusters continue to support quality improvement and shared learning. In addition, the development of a Primary Care Improvement Plan will support the implementation of the recent GP contract which includes development in; pharmacotherapy, care and treatment services, vaccinations and travel advice, urgent care and support for mental health, musculoskeletal conditions and wider social and wellbeing issues.

Work has commenced to identify where resources are spent within locality areas in the city. The next step during 2018-19 is for us to expand the use of data to better understand how resources should be allocated, taking into account health inequalities, demand on services and demographics projections.

The enhanced community support and post diagnostic support teams work in localities to identify people at an early stage of their journey and provide comprehensive assessment, early intervention and anticipatory care.

Plans have been developed to improve how we support people experiencing distress. The availability of 24/7 community mental health support, the strengthening of pathways between accident and emergency department, primary and community mental health supports, the provision of a safe place including accommodation, a 24/7 phone line offering mental health support, drop in facilities, are all included within these plans.

The development of a more community — based service model to improve the journey to employment for local people. This includes an expansion of services in Finmill Centre and the Lochee Community Hub.

# Where we need to improve...

### Realign

Statutory services to the four service delivery areas in order to ensure services are located where they are needed most.

### Continue

The large scale mental health services redesign in order to improve timely access to services which are integrated and focussed on recovery.

### **Improve**

Responses to people at risk of harm, including those who do not meet the statutory definition of an adults at risk of harm, as defined in The Adult Support and Protection (Scotland) Act 2007.

### Increase

The level and range of services delivered in localities, in line with the Primary Care Improvement Plan.

### Redesign

Services for adults with substance misuse problems to improve access to recovery orientated treatment services and supports and improve outcomes for people and their families.

### Increase

The proportion of carers who feel supported to continue caring by implementing the Carers Act and further developing the range of supports for carers.

### Better

Articulate our future locality planning through the review of the Strategic and Commissioning Plan.

### Reduce

The length of time people are delayed in hospital due to complex reasons regarding; accommodation, specialist individualised support or legal reasons.

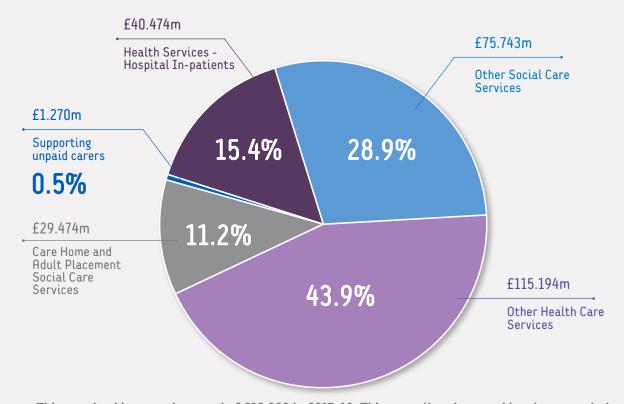
### Develop

Pathways for adults who experience long term conditions, including regular users of specialist acute services.

### How we have spent our resources

Dundee Integration Joint Board spent £262.2 million on integrated health and social care services during 2017-18

The Actual Expenditure Profile for Integrated Health & Social Care Services for 2017/18 was:



This resulted in an underspend of £29,000 in 2017-18. This overall underspend has been carried forward into 2018-19 through the Integration Joint Board reserves, mainly to support the further development of new models of care.

The IJB Transformation Programme continued into 2017-18 to ensure resources are used effectively and in line with Strategic Priorities.

### Quality of our services

In 2017-18 there were 149 services for adults registered with the Care Inspectorate in Dundee. Of these services, 81 were inspected during this year. 21 of these inspections were combined inspections where both the Housing Support and Support Services were inspected together.

Of the 81 services that were inspected **77%** received no requirements for improvement.

None of the services inspected received an enforcement notice. Of the 12 services directly provided by the Partnership that were subject to inspection by the Care Inspectorate over the last year, **75% received** grades of 'very good' or 'excellent'