



REPORT TO: PERFORMANCE & AUDIT COMMITTEE – 19 JULY 2017
REPORT ON: ANNUAL PERFORMANCE REPORT UPDATE
REPORT BY: CHIEF FINANCE OFFICER
REPORT NO: PAC16-2017

1.0 PURPOSE OF REPORT

The purpose of this report is to update the Performance and Audit Committee on progress in producing the 2016/17 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 provided and the unformatted advance draft summary of the Annual Performance Report (attached as Appendix 1).
- 2.2 Approves the planned approach to approval and publication (sections 4.2.3, 4.2.4 and 4.2.5).

3.0 FINANCIAL IMPLICATIONS

None.

4.0 UPDATE

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 first annual report of the Dundee Health and Social Care Partnership (for 2016/17) is therefore due for publication by 31 July 2017.
- 4.1.3 At the meeting of the Performance & Audit Committee held on 14 March 2017, Report Number PAC7-2017 was submitted that detailed requirements relating to the annual performance report and the planned approach to its development within the Partnership.

4.2 Progress in Development of Annual Performance Report 2016/2017

- 4.2.1 The production of the annual performance report has been led by the Strategy and Performance Team working 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 2016/17.

- 4.2.2 Regulations require that an annual performance report be published by the Partnership no later than 31 July 2017. This has proved to be a challenging deadline given the availability of data regarding performance against the national indicators, for which the Dundee Partnership is reliant on validated data from NHS National Service Scotland Information Services Division (NSS ISD) rather than local data from NHS Tayside. The availability of data has also interacted with the schedule of Integration Joint Board (IJB) meetings, at which the annual performance report must be approved prior to publication, meaning that the first IJB meeting at which data is available in sufficient time for committee processes is the IJB scheduled for 29 August 2017.
- 4.2.3 In order to meet the regulations it is proposed that the Partnership publish a summary version of the annual performance report on 31 July 2017, 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. An advance draft of the content of this summary is attached in Appendix 1 of this report. The summary version fulfils the key requirements of the regulations, including headline information regarding progress against the national outcomes and Partnership and locality level, financial planning and performance, best value, and scrutiny/inspection. The Scottish Government has indicated that this approach is acceptable.
- 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. It is proposed that the summary version be published on the Partnership website with appropriate pro-active media liaison accompanying publication.
- 4.2.5 A fuller 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 29 August 2017 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.

5.0 POLICY IMPLICATIONS

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

6.0 CONSULTATIONS

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

7.0 BACKGROUND PAPERS

None.

Dave Berry
Chief Finance Officer

DATE: 3 July 2017



Annual Performance Report Summary 2016/17

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

The Dundee Integration Joint Board (IJB) was established on 1st April 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 Health and Social Care Partnership for planning and delivering a wide range of adult social work and social care service, and primary and community health services for adults. The Partnership is also responsible for some acute hospital care services

Our Big Achievements....

- ⇒ Gratings awarded by the Care Inspectorate following statutory inspection of services are high. 88% of registered care services were rated good or excellent by the Care Inspectorate.
- ⇒ Substantially increased investment in homecare services by £1 million.
- ⇒ Developed Community Services which have reduced the length of time people spend in hospital when they have been admitted in an emergency. For every 100 adults in Dundee, 136 beds days were occupied.
- ⇒ People want to be supported in their own home towards the end of their life. On average Dundee performed well with 87% of last 6 months of life being spent at home on in the community
- ⇒ Over the last 12 months we have reduced the number of bed days occupied where the person's discharge from hospital was delayed by more than one fifth.
- ⇒ Exceeded national standards for dementia diagnosis (65%) and have the highest post diagnostic support rate in Scotland (98 OR?? 99%).

Where we have made progress...

- ⇒ Increased community based supports for people leaving hospital through our Home from Hospital and Enablement Services and introduced 'step down services"
- ⇒ We have improved services for young people at risk of homelessness and as a result we identified 122 young people at risk of homelessness, supporting 70 to remain at home and 52 to secure alternative safe accommodation.
- ⇒ Expanded and developed our range of technology enabled care options including; a 'smart flat', increased investment in telecare and enhanced engagement with stakeholders at the annual Smart Care Convention and via social media.
- ⇒ Developed a Care Home Liaison Team which provides a dedicated service to residents in care homes experiencing mental ill health, leading to admission rates for this group to the specialist hospital ward being reduced by 75%.
- ⇒ Improvement in the rate of patients with a leg ulcer who are healed within 12 weeks from 29% to 85%
- ⇒ The location of Welfare Rights services within GP practice has resulted in 216 patients receiving £390,560 of additional benefits.
- ⇒ 75% of staff members said that they would recommend the Partnership as a good place to work
- ⇒ In partnership with Neighbourhood services and voluntary sector providers more than 40 units (houses) and support was secured for adults with additional support needs during 2016/17. Between now and 2022, approximately a further 85 units will be secured with suitable support.

What you have told us....

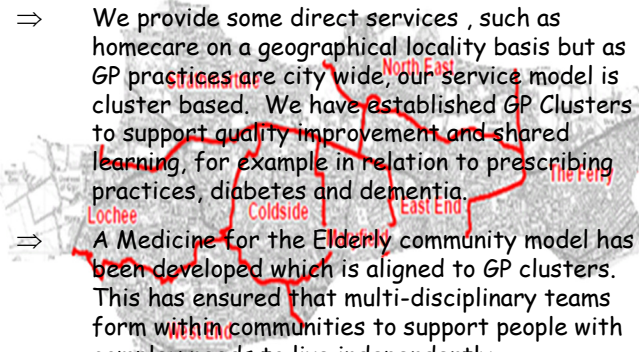
- ⇒ 93% of adults said that they can look after their health very well or quite well
- ⇒ 90% of people said they have had a positive experience of care provided by their GP practice
- ⇒ 88% of adults supported at home agreed that their services and support had an impact in improving or maintaining their quality of life
- ⇒ 94% of adults supported at home agreed they are supported to live as independently as possible
- ⇒ 85% of adults supported at home said they feel safe
- ⇒ 94% of adults receiving any care or support rated it as excellent or good
- ⇒ 79% of adults supported at home said they had a say in how their help, care or support was provided
- ⇒ 76% of adults supported at home said that their health and care services seemed to be well co-ordinated

"I came away with a feeling of optimism. I have since taken positive steps to make some changes in my life, which have improved my mental and emotional wellbeing" (Do you Need to Talk service)

"I would like to thank the service for making mum feel safe and comfortable" (Post Diagnostic Support)

"I believe staff go the "extra Mile" for clients. Are sensitive to the needs/wishes/feelings of carers. Overall a great service whose help is very much appreciated." (Wellgate Day Support Service)

Working in Localities

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- ⇒ We provide some direct services, such as homecare on a geographical locality basis but as GP practices are city wide, our service model is cluster based. We have established GP Clusters to support quality improvement and shared learning, for example in relation to prescribing practices, diabetes and dementia.
 - ⇒ A Medicine for the Elderly community model has been developed which is aligned to GP clusters. This has ensured that multi-disciplinary teams form within communities to support people with complex needs to live independently.
 - ⇒ Community capacity building has worked well in localities and we have developed a range of projects which include 'time banking, 'men's shed' and 'Lochee Hub'
 - ⇒ The Employment Support Service are piloting locality and outreach working. We are currently working in partnership in the DD4 area of Dundee two days per week, one session per week at the 'Community Hub' at Dundee Jobcentre and more recently one session per week at the 'Advice Centre' based within Ninewells Hospital.
 - ⇒ The health inequalities teams, comprising Keep Well, Dundee Healthy Living Initiative, Equally Well and Sources of Support continue to offer high quality, targeted work within disadvantaged areas incorporating a wide range of clinical, social, developmental and lifestyle activities, and have been working more closely together to streamline and enhance their services and approach.
 - ⇒ Maryfield Men's Shed secured a Capacity Building Level 1 Small Grant. The Maryfield Men's Shed was developed in co-production with local people and has now developed into a self-sustaining constituted group with its own committee. The group have made links and strong partnerships with a wealth of organisations including the Scottish Wildlife Trust, who they are building bird boxes for.

What have we spent?

Dundee Integration Joint Board had a total delegated budget of £257.494, of which there was an overall surplus of £4.963m

Against Social Care budgets, an underlying underspend of £1.032m was reported with a further £3.931m of underspend in Integration Change Funding.

Against health budgets an underlying overspend of £3.462m was reported. This consisted of an overspend of £2.209m in prescribing, £1.394m in relation to services hosted across Tayside by Dundee, Angus and Perth & Kinross IJB's on behalf of the other IJB's, with an underspend of £141k on services directly operationally managed by Dundee Integration Joint Board.

Present in ring chart?	2016/17 Expenditure £000
Health Services - Hospital In-Patients	44,696
Other Health Care Services	116,068
Care Home and Adult Placement Social Care Services	45,660
Supporting Unpaid Carers	1,158
Other Social Care Services	44,949
Total Expenditure	252,531

What Inspectors said about Health and Social Care Services.....

In 2016/17 there were 141 services for adults registered with the Care Inspectorate in Dundee. Of these services, 115 were inspected during this year. 28 of these inspections were combined inspections, where both the Housing Support and Support Services were inspected together.

36 care homes were inspected and of these 1 received an enforcement notice and 14 had complaints upheld or partially upheld.

39 support services were inspected and during these inspections 7 services received requirement(s) and 1 had a complaint upheld or partially upheld.

Key functions or services provided or commissioned by the Partnership were also inspected by Audit Scotland,

Where we need to improve

- ⇒ Strengthen our pathways, such as the falls pathway, to ensure that people receive support at the right place and time
- ⇒ Develop a better understanding of reasons for hospital readmissions within 28 days, and develop appropriate supports to enable people to remain at home appropriately
- ⇒ Further develop health and social care support at home to support more people to receive health support out with hospital
- ⇒ Further develop the market to increase choice of support which enables individuals to make the best use of Self Directed Support
- ⇒ Improve outcomes for individuals in communities by reducing inequalities and increasing healthy life expectancy.
- ⇒ Improve the proportion of carers who feel supported to continue caring by implementing the Carers Act and further developing the menu of supports for carers.
- ⇒ Develop locality plans with local communities which reflect their priorities for health and social care over the next 2 years.
- ⇒ The Transformation Programme will also continue to consider the opportunities to remodel services to ensure the best use is made of scarce resources in line with the IJB's Strategic Priorities.