



# **ANGUS HEALTH AND SOCIAL CARE INTEGRATION PARTNERSHIP**

**Locality Development Events  
September 2015**

**North East Angus**

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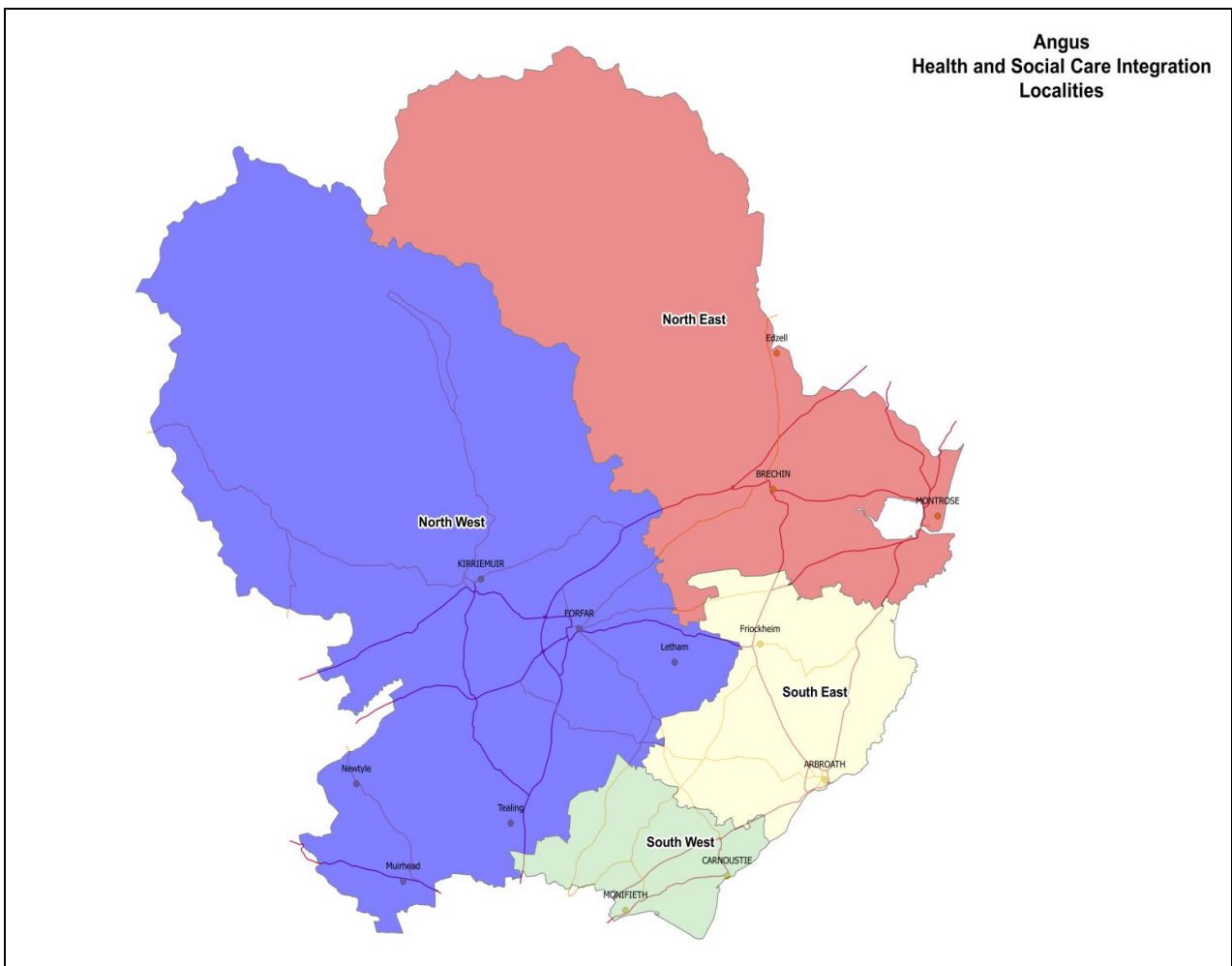
# 1. Introduction

This feedback report aims to take locality commissioning a little further forward from the development events. The information required to deliver a locality plan is not fully complete. This feedback is based on information provided at the events with some additional information that has become available. This will be used by the Locality Development Group to identify local priorities.

The evaluation of the locality events was very positive. There was a recognition of the value of multidisciplinary working and we have begun to identify how to present data and information in a way that will support wider understanding.

## Angus Localities will deliver:

- A range of core services;
- Local leadership;
- Partnership with the voluntary sector/independent sector;
- Relevant local commissioning;
- Local access to support.



## 2. Understanding North East Angus

During the development event, we had the opportunity to look at a range of information about Angus. This is a summary of what it tells us. We are currently working on a full needs assessment profile that we will be able to provide in a few weeks.

- Population is 25,745, 22% of the total population of Angus.
- Population has grown by 1857 people over the past 10 years (7.7%).
- Over the last 10 years the population age distribution has changed, people aged over 65 have increased from 19% to 20.3% of the population, within that increase people aged over 85 which have increased by 33.5%. Population of children and young people under 18 have decreased by 0.6% and the working age population has increased by 8%.
- In the next 20 years in Angus as a whole the overall size of the population is not expected to change significantly. The age distribution of the Angus population is expected to continue to change with reductions in the population of children and young people and working age people but a significant increase in the proportion of the population who are over 65 with, again, the most significant increase being in relation to people who are over 85 years.
- Average life expectancy in Angus is greater than the Scottish average at 78.3 for men and 81.6 for women. Life expectancy across Angus varies depending on a number of factors which include deprivation. Life expectancy in North East Angus is lower than the Angus average with a range, for men, of 74.2 (Montrose South) to 82.6 (Hillside) and for women, of 76.7 (Brechtin East) to 84 (Hillside).
- Around 300 births each year, there has been a slight decline in the past 10 years. The birth rate amongst women aged 15 to 44 is 59.2/1,000, this is the highest birth rate in the Angus localities and below the Angus average.
- Around 370 deaths each year with a rate of 12.6/1,000 residents. This is the highest death rate in Angus and is above the Angus average.
- Brechtin East is amongst the 10% most deprived areas in Angus.
- 12,831 household spaces in North East Angus, 95.4% of those are occupied. 59.4% are owner occupied properties.
- 4446 people live alone, 42.9% are over 65 years. This accounts for 37% of all over 65 households.
- 39.1% working age population is in full time employment, 14.3% in part time employment and 7.8% are self-employed.
- 4.4% (1188 people) of the working age population is unemployed.
- 5078 (19.3%) people say that their activities are limited due to health or long term conditions.
- 1162 describe their health as bad or very bad.

- 1230 people are on ESA, incapacity or disability benefits.
- 1574 people describe themselves as providing 49 hours or more of care yet only 225 people are in receipt of carers allowance.
- 10.7% of the population are obese.
- 22% smoke.
- Population estimates suggest that 6728 people will have 2 or more long term conditions

Pharmacy data has now been broken down to localities. We are showing just one part of it here.

**Prescribing information tells us that:**

- 5 patients prescribed 10+ distinct BNF chapters (no high risk) (4 patients over the age of 65 years).
- 333 patients prescribed 10+ distinct BNF chapters (high risk) (243 patients over the age of 65 years).
- 798 patients prescribed 5+ distinct BNF chapters (no high risk) (275 patients over the age of 65 years).
- 4,666 patients prescribed 5+ distinct BNF chapters (high risk) (2,399 patients over the age of 65 years)

The 5 GP practices in North East Angus provide for 88% of the population (22,658 people). 19,983 people used pharmacies in the past 12 months and presented 2 or more prescriptions. Information from the practices and pharmacies tells us that:

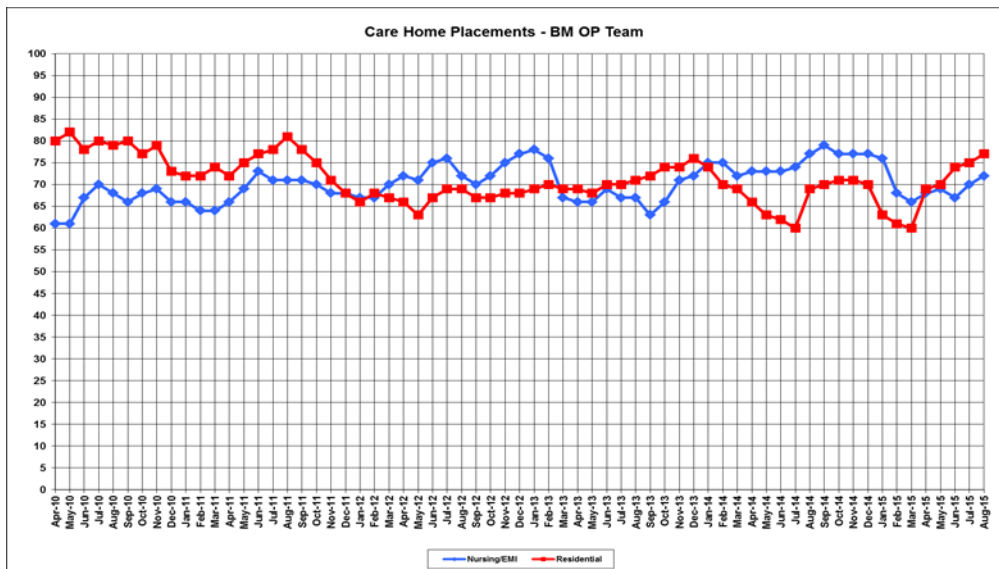
Diagnosis	Number of people	Prescriptions	unique patient identifiers
Depression	875	Anti- depressants	3,412
dementia	222		
diabetes	1,518		
Learning disability	141		
Mental health	286		
Osteoporosis	83		
cancer	498	Breast cancer Prostate cancer	88 48
Palliative care	33		
Stroke/TIA	719		

We do know that the mental health foundation suggests that 2.6% of the population have depression, 4.7% anxiety and 9.7% depression and anxiety. We need to consider what the Quality & Outcomes Framework (QOF) and pharmacy data is telling us and how this relates to the level of services provided for mental health.

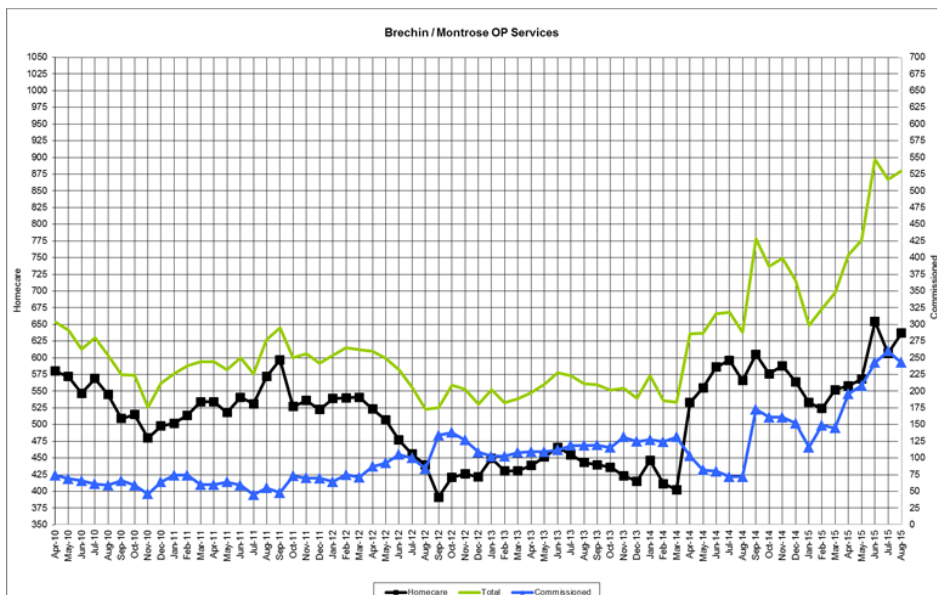
### 3. Current Performance

We are working on the development of a performance framework. We need to be able to provide all performance information at a locality level. Some information in relation to Angus wide services is not yet available at locality level. Other information is gathered at team level so new systems need to be put in place to deliver locality based information. Information included in this report therefore requires to be reviewed to reflect locality information. Only part locality information is described here. This includes information on drug and alcohol use and services, adult mental health services and learning disability services.

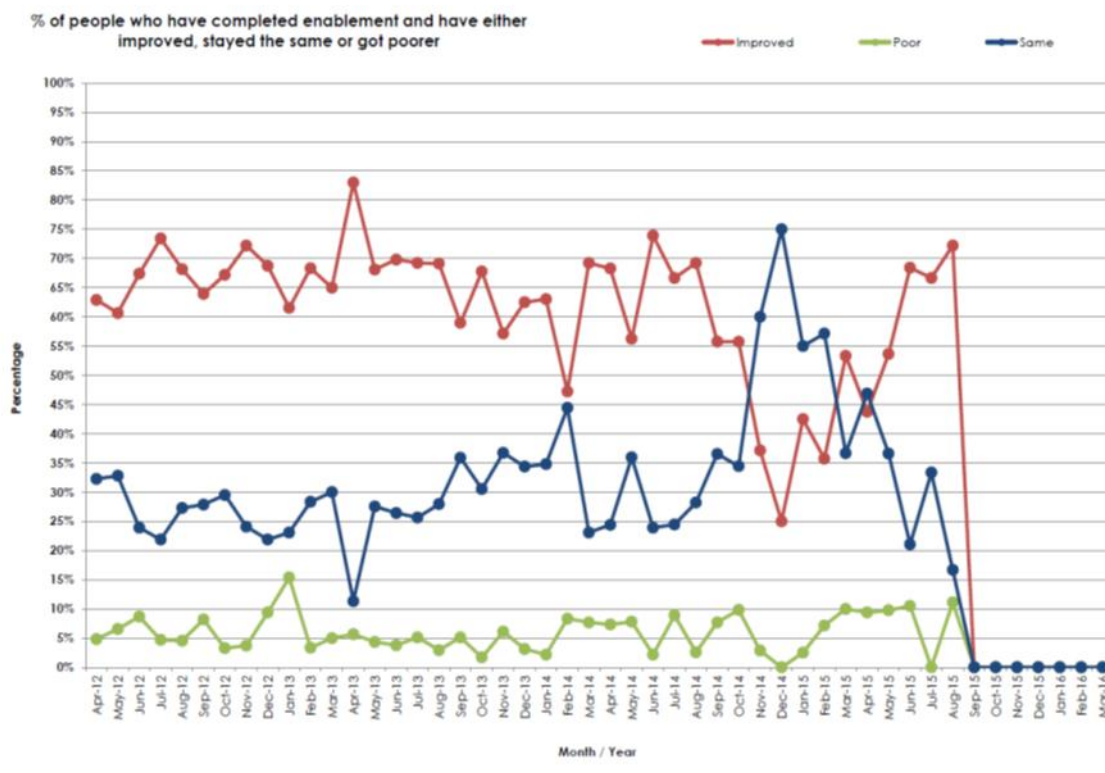
Care home placements for older people have been reducing over the past 5 years. The age at which people move into a care home has been increasing and the length of stay reducing. There are 222 care home beds provided through 7 care homes. Vacancy rates are low. Angus Council supports approximately 71 nursing home and 76 residential home placements for older people alone in this locality.



The amount of personal care provided to older people in the North East has increased in the past year. The independent sector is providing an increasing level of care at home.



Enablement services delivered for the first 4 to 6 weeks following a social care referral continue to support people to greater independence and reduce reliance on social care services especially housing support and community meals services.

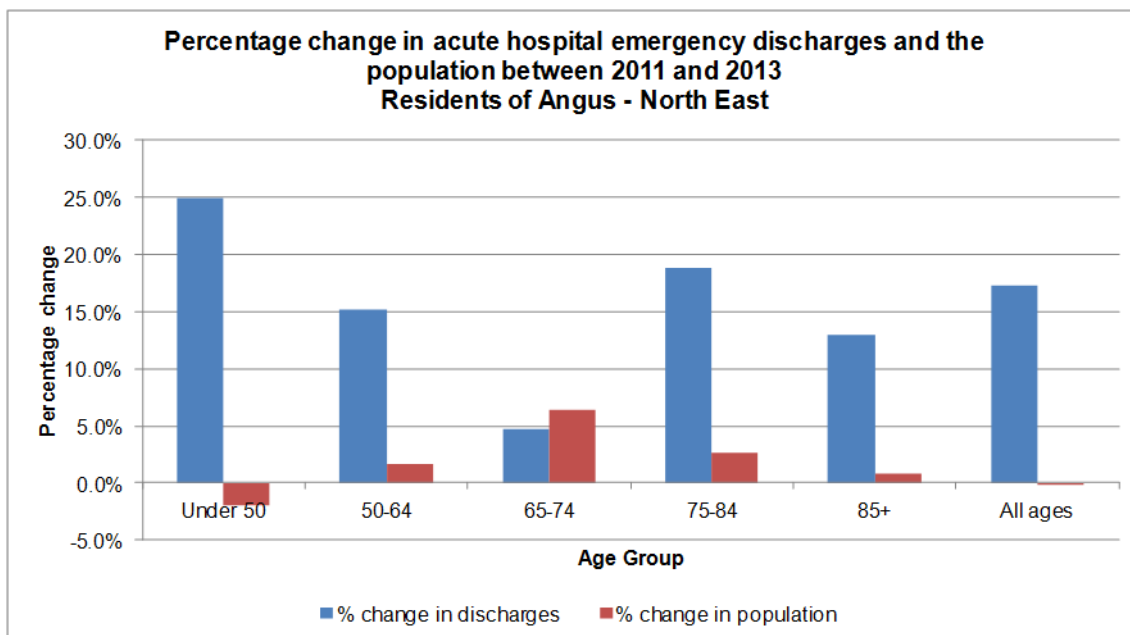


The rate of emergency admissions fluctuates year on year. The rate in the North East is the highest rate in Angus. The number of people admitted following a fall is increasing especially among over 85s.

	2011/12	2012/13	2013/14
Number of discharges	2,150	2,441	2,521
Crude rate per 100,000 population	8,338.3	9,471.8	9,778.9

Emergency admissions continue to rise at a greater pace than change in population:





North East has the second highest rate of emergency admissions for over 65s in Angus:

Angus patients (aged 65+) with multiple (2+) emergency hospitalisations  
Age standardised rate per 100,000 population

Locality	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013
<b>Angus - North East</b>	<b>4,582.7</b>	<b>4,056.0</b>	<b>3,867.8</b>	<b>3,668.1</b>	<b>3,971.6</b>
Angus - North West	4,317.8	4,387.4	4,144.4	4,005.6	3,810.0
Angus - South East	3,837.6	4,195.9	3,943.7	3,867.4	3,801.5
Angus - South West	4,176.9	4,212.4	4,215.0	4,085.6	4,024.4
Angus	4,261.4	4,252.4	4,073.6	3,929.0	3,907.0

The number days lost to delayed discharge is reducing.

Number of days people spend in hospital when they are ready to be discharged

Locality	2010/11	2011/12	2012/13	2013/14	2014/15
<b>North East</b>	<b>1,504</b>	<b>2,127</b>	<b>3,246</b>	<b>2,817</b>	<b>2,313</b>
North West	4,348	3,526	3,527	3,146	2,037
South East	3,010	1,989	2,597	1,530	1,446
South West	1,947	1,765	1,644	1,415	1,195
<b>ANGUS TOTAL</b>	<b>10,809</b>	<b>9,407</b>	<b>11,014</b>	<b>8,908</b>	<b>6,991</b>

## **4. Current Improvement activity**

Four priorities for improvement will be taken forward through the Angus Health and Social Care Partnership Strategic Commissioning Plan. These improvement priorities are already being delivered in North East Angus through the following activity:

### **1. Improving health, wellbeing and independence**

- Self management of long term conditions
- ALISS development
- Third sector single point of contact officer
- Edzell drivers
- Carer development worker
- Carer befriending / sitting / voucher scheme

### **2. Supporting care needs at home**

- ADL smartcare development
- Integration of occupational therapy services
- Enablement
- Help to live at home project
- Self directed support

### **3. Developing integrated and enhanced primary care and community responses**

- Hospital discharge pathway
- Physiotherapy and generic rehabilitation and falls
- Poly pharmacy
- Orthopaedic pathway

### **4. Improving integrated care pathways for priorities in care**

- Housing solutions for adult mental health and learning disability
- Dementia diagnosis and support

## **5. Developing specific priorities for the North East**

Looking at a range of case studies provided an opportunity to consider and identify opportunities for development specific to North East Angus.

### **Case studies: Alex, Brian, Morag and Pete (Mental Health, Drugs & Alcohol & Learning Disability)**

#### **What already exists in the community?**

- A lot of resources already in the locality – but not everybody knows how to access these.

#### **What supports are missing?**

- Under 65 CMHT weekly visits
- Lack of self-help group/3<sup>rd</sup> sector involvement due to rurality

### **Case studies: James and family (Long Term Conditions)**

#### **What already exists in the community?**

- A lot of resources already in the locality

#### **What supports are missing?**

- Lack of services/opportunities for younger people e.g. Angus Young Carers, youth club
- Bereavement counselling
- Welfare rights and financial advice

### **Case studies: William, Jimmy, Mary & Yvonne (Older Person)**

#### **What already exists in the community?**

- A lot of resources already in the locality

#### **What supports are missing?**

- Dementia support groups
- Dementia friendly environment
- Good transport links

- Just checking service
- Bereavement support
- Daycare

Focusing specifically on change, groups identified:

## **A. Positive attributes of locality:**

- Wide range of services available in locality
- Excellent MDT working – strong willingness to work together

### **Brechin**

- Good day care provision

### **Montrose**

- Lots of support and services available within the community

### **Edzell**

- A lot of resources in a relatively small area

## **B. Areas for development**

- Care co-ordination
- Access to information

### **Brechin**

- Greater mix of clinical capacity required e.g. GPs and Advanced Nurse Practitioners
- Services come to local groups e.g. chiropody, podiatry, O.T.
- Reduce duplication of deliverable community/social services

### **Montrose**

- Set up a 'wellbeing café/lunch club/dementia café

### **Edzell**

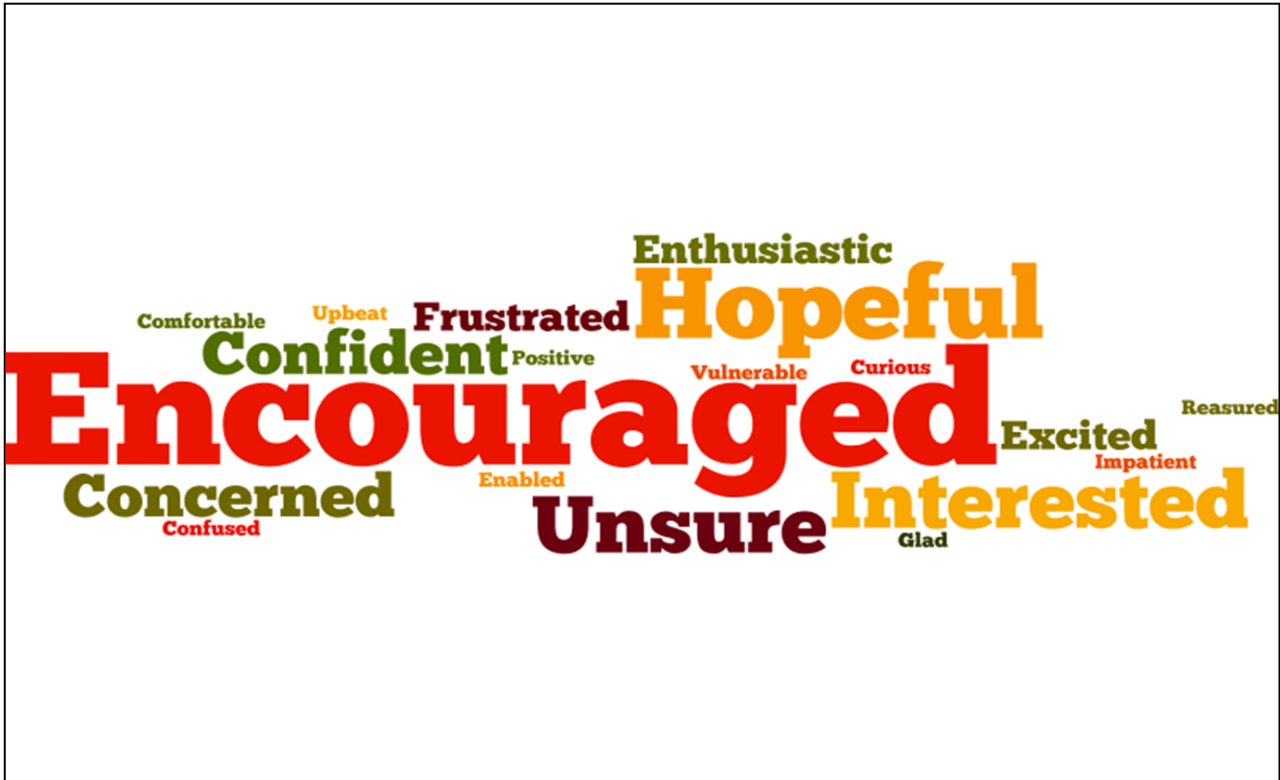
- Cross boundary issues
- Attracting services to a more rural area
- Respite beds

## **C. Wild card suggestions**

- Drop in centre
- Wellbeing centre where everything is under the same roof
- Day access to care home
- Inglis Court seated exercise to be made available to non-residents

## 6. Next Steps

At the end of the event you expressed how you felt about integrated working in your locality:



You agreed the most important message is:



## Timeline for Strategic Commissioning Plan

Date	Milestone
Early September	Locality commissioning events
October 2015	High level strategic aims and priorities published
October 2015	Strategic Needs Assessment completed
November 2015	Baseline performance information
December 2015	Locality commissioning priorities identified
February 2016	Draft Strategic Commissioning Plan for public consultation Draft locality plans
March 2016	Market facilitation plan set out
April 2016	Delivery of strategy following delegation of powers to IJB

Each locality has a Locality Improvement Group which will progress the development of the Locality Improvement Plan.

How will you work together, in this locality, to identify what, in addition to the Angus improvement priorities, you need to deliver and how improvement can be delivered?

## 7. Attendees

<b>NAME</b>	<b>REPRESENTING</b>
Helen Adamson	Health
Aileen Alberts	Independent Sector
Kathy Anderson	Public / Carers
Lesley Anderson	Carers
Elizabeth Baillie	Public/Carers
Pat Brodlie	Third Sector
Morag Cave	Health
Dr Ruth Cranswick	Health
Chris Curnin	Independent Sector
Carol Dougan	Carers
Lorraine Duncan	Council
Douglas Fairweather	Council
Gordon Firth	Council
Christine Garden	Carers
Julie Gordon	Council
Lenny Gunning	Third Sector
Joyce Hayat	Public
Alan Hope	Council
Hester Howie	Independent Sector
Dr Marc Jacobs	Health
Kasia Jerzyk-Smith	Council
Mavis Leask	Council
James Lindsay	Public
Susan MacLean	Council
Tyler McCrorie	Third Sector
Alison McGurk	Health
Robert Martin	Independent Sector



<b>NAME</b>	<b>REPRESENTING</b>
David May	Independent Sector
Wendy Meldrum	Health
Joy Milne	Health
Irene Mitchell	Independent Sector
Alan Monks	Council
Careen Mullen	Health
Helen Nicoll	Independent Sector
Alison Page	Health
Alison Paterson	Health
Liz Paterson	Health
Hilary Paton	Council
Pauline Reid	Council
Eileen Rimmer	Public
Fiona Robertson	Health
Maureen Robertson	Carers
Fraser Scott	Fire & Rescue
Graeme Shand	Health
Gail Smith	Health
Claire Stewart	Health
Irene Sutherland	Council
Gail Swankie	Independent Sector
Delvenia Thomas	Council
Sharron Valentine	Health / Council
Ciara Walkden	Health
Kaye Wiseman	Health