

ANGUS COUNCIL

SCRUTINY AND AUDIT COMMITTEE 25 SEPTEMBER 2018

ANGUS INTEGRATION JOINT BOARD ANNUAL STRATEGIC AND PERFORMANCE REPORT

REPORT BY VICKY IRONS, CHIEF OFFICER

ABSTRACT

The purpose of this report is to update the Scrutiny and Audit Committee on the progress made in delivering the Strategic Plan and the effect of the Partnership's activity on performance during 2017/18. This report builds on previous quarterly performance reports presented to the IJB. The report demonstrates the level of improvement activity being delivered across the Angus Health and Social Care Partnership (AHSCP) and shows how it is driving progress towards the delivery of the Partnership's vision, strategic direction and planned outcomes for the people of Angus.

1. RECOMMENDATION

It is recommended that the Committee review the report and provide any comments.

2. ALIGNMENT TO THE ANGUS LOCAL OUTCOMES IMPROVEMENT PLAN/CORPORATE PLAN

Not applicable. This report relates to the strategic priorities approved by the Angus IJB. However, alignment with Angus Council's strategic planning activity ensures that these priorities are consistent with those of the Council and that they enact the Council's legal powers and duties.

3. BACKGROUND

The attached report was submitted to the Angus IJB on 27 June 2018 and approved. Whilst the strategic and operational functions reported are delegated to the IJB, it is recognised that there are a number of overlapping areas with Angus Council functions and responsibilities and that the content, with its focus on the impact of health and social care interventions on Angus citizens, will be of interest to elected members.

The IJB has agreed previous reports related to the development of the Partnership's performance framework. This 2017/18 Strategic Progress and Performance Report aims to review the performance described in the Partnership's performance framework. This includes the national core indicators, which demonstrate progress against the national outcomes.

The report also summarises the position of the Strategic Planning Group in reviewing the Strategic Plan 2016-2019, the consensus that the four priorities of the Strategic Plan 2016-2019 remain fit for the future and that they should be retained as the focus of the strategic plan for 2019-2022. These are:

- Priority 1 Improving health, wellbeing and independence
- Priority 2 Supporting care needs at home
- Priority 3 Developing integrated and enhanced primary care and community responses
- Priority 4 Improving integrated care pathways for priorities in care

The report also provides both progress and performance information on a further three performance areas:-

Performance area 1 - Clinical and care governance
Performance area 2 - Staff
Performance area 3 - Resources

4. CURRENT POSITION

The 2017/18 Strategic Progress and Performance Report provides evidence of progress in line with the requirements for the annual performance report set out in regulations.

The report highlights that:

- Angus performs well nationally in relation to most national core indicators. This good performance shows the progress that the Partnership has made in shifting the balance of care to more community based and responsive services and addressing the average length of stay in hospital following an emergency admission.
- The Partnership has developed the Angus Care Model. This has improved the pathway for people through services in and out of hospital. It is enabling the delivery of change in the inpatient bed model across Angus, the care home model, minor injury and illness services, care and treatment services to support GP practice and timely discharge. Through this the Partnership gained public recognition that typically having 37 unoccupied hospital beds was not sustainable or desirable and gained acceptance of the need for change.
- Progress has been made in addressing hospital bed occupancy. Angus has seen a continuing decrease in the bed day rates although admissions continue to increase. The Partnership has extended Enhanced Community Support (ECS) into the North East locality. ECS is an approach to integrated multi-disciplinary team working and facilitates Medicine for the Elderly Consultant follow-through from hospital to community, as well as Advanced Nurse Practitioner support. ECS has delivered improvements in admissions and average length of hospital stay for people over 75.
- The Partnership has completed the delivery of Help to Live at Home. The outsourcing of personal care and housing support services has ensured that we have been able to increase the level of personal care available within our communities by 47% over the last 2 years. Recognising that care providers are partners in supporting the needs in our communities, we have developed a new contractual framework which includes the delivery of a fair cost of care with providers.
- We have delivered the integration of enablement and community alarm services in the new Enablement Response Teams, providing enablement and short term support to increase independence, prevent admission to hospital or residential care and ensure support at discharge from hospital. We are supporting people in the community with greater levels of need for longer.
- The Partnership can demonstrate that people are moving into care homes later in life for a shorter period of time but with higher levels of need as they are supported at home for longer.
- The Partnership aims to merge Occupational Therapy services and has introduced advice on 'Life Curve' as part of a new approach to self-management. This has included the delivery of self-assessment for some equipment including community alarm. Self-assessment can be accessed at any time through Independent Living Angus.
- We continue to improve Involvement and Engagement approaches through locality improvement groups, care home improvement groups, GP clusters, provider's forums and the locality conversation programme.
- We are improving the relationship with community planning through the development of Locality Outcome and Improvement Plans. These will link closely with the HSCI Locality Improvement Groups.

- We have supported improvement in medication management in care homes. A new process developed by the care home improvement group with GPs and pharmacy has led to significantly reduced medication waste in care homes.
- We have introduced Mental Health and Wellbeing nurses to support GP practices, thereby reducing demand on GP appointments and supporting people with non-medication alternatives to managing mental and emotional wellbeing.

5. CONSULTATION

The Report was approved by the IJB on 27 June 2018 following the appropriate processes.

REPORT AUTHOR: George Bowie, Head of Community Health and Care Services

EMAIL DETAILS: BowieGS@angus.gov.uk

List of Appendices: Angus Integration Joint Board Annual Strategic and Performance Report