



**ANGUS HEALTH AND SOCIAL CARE  
INTEGRATION JOINT BOARD – 11 DECEMBER 2019  
STRATEGIC PLANNING PROGRESS REPORT  
REPORT BY VICKY IRONS, CHIEF OFFICER**

**ABSTRACT**

This report summarises a number of strategic planning issues and related operational matters to provide an overview of progress in a number of key activity areas. More detailed individual reports are being submitted at today's IJB regarding a number of the matters covered, including a Strategic Financial Planning update, and some of the information contained within this report will feed into that plan. The overall intention is to provide a picture of the current operational and strategic "terrain" and the work that is being done to adjust to it in terms of changing demand, impact on service delivery, and cost implications. These are monitored and planned for in the Improvement and Change Programme Board and in the Angus Care Model Delivery Group.

**1. RECOMMENDATIONS**

It is recommended that the Integration Joint Board:-

- (i) Notes the content of this report
- (ii) Cross references to specific individual reports where indicated
- (ii) Notes that at the April 2020 IJB a report regarding Physical Disability services will be submitted.

**2. BACKGROUND**

Reviewing the quality of our services, adapting them to meet new or changed demand, and driving improvement work into the services is a continuous activity for operational managers and strategic planning staff. Where a change is significant enough it is usually reported to the IJB in an individual report, or collectively under a particular change programme. However it is helpful, periodically, to provide the IJB with a summary of the overall strategic picture in order to be sighted on cross-cutting themes and to better understand the interaction between the various areas of work. This report does capture much of the work carried out through the IJB's Improvement and Change Board unless that work has already been reported separately.

**3. CURRENT POSITION**

- 1. **The Strategic Commissioning Plan 2019-22** was approved at IJB on 24 April 2019. Work has continued on implementation with coordination through the Strategic Planning Group (SPG). A focus needs to be sustained on progressing the tasks within the Ministerial Strategic Group Action Plan. The Market Facilitation Statement is also being reviewed. In particular, and taking into consideration issues emerging from the residential

care review, we wish to develop the relationship with independent residential care sector providers. The intention is to create a more “level playing field” of conditions for provision by creating the kind of cooperative, collegiate environment that was developed with home care providers in Help to Live at Home and which is well developed in Disability Services. Whilst it will be important to develop this future picture jointly with the independent sector, it would ideally be characterised by:

- A shared approach to strategic development and co-creating future developments in Angus
  - A joint approach to risk identification and risk management across sectors
  - Shared assurance about resource control mechanisms and shared decision-making around quality and safety approaches
2. The role of **the third sector** and its future relationship with the statutory sector, has been the subject of three thematic events to date and a fourth one is planned. The inclusion of the third sector in genuine partnership and equal decision-making is well developed in the AHSCP, and our next step is to strengthen the role that third sector can play in the Strategic Plan’s preventative elements. Significant poverty levels in some areas of Angus, the potential impact of Brexit on food supplies, the connection between poverty and deprivation with mental health problems and substance misuse, all add an element of urgency, as does increasing demographic demand on statutory services.
  3. **Care About Angus (CAA)** has demonstrated good progress in enacting their business plan under their new manager; it has not required financial assistance over the last two months, a much higher match between worked hours and paid hours has been established, and overall there is greater confidence in its effectiveness and stability as an organisation. CAA is an essential element of the preventative work referred to above, and a report recommending a grant-based approach is submitted at today’s IJB.
  4. **LIG’s.** The LIG plans have been approved by the SPG; they are consistent with the Strategic Commissioning Plan and will support the progression of its objectives at a local level; the LIGs have contributed to the development of the Strategic Commissioning Plan. Shared approaches across LIGs are being developed in regard to some issues e.g. mental wellbeing services.
  5. **Change Programmes.** These continue to be monitored through the Improvement and Change Programme (ICP) and its operational arm, the Support and Care Steering Group, or through the Angus Care Model Group. The approach is one of programme planning with each workstream being progressed as a project, depending on scale. A collegiate approach is essential with input from Finance, operations, strategic planning, HR, Communications, Legal services and Procurement.

Programmes currently being progressed are

- a) **Help To Live at Home (HTLH).** This is moving from a programme to “everyday business”. HTLH continues to provide learning for other programmes, for example to the future development of residential care and to the partnership with private providers. Two important lessons from HTLH have shown us how the future of care at home provision needs to be managed: developing mature relationships with providers to co-produce a shared service which is responsive to changing need; and adequately resourcing the organisation and maintenance that goes with a 95% outsourced service, including adjusting services according to a changing picture of demand, and problem –solving. Jerry Forteach has been tasked to provide a report to determine the future support needs for this service area when Pauline Reid, seconded Contracts Officer, returns to the Procurement Team in February 2020. Plans are still in place to introduce the CM2000 contract monitoring system from April 2020 and a financial benefit (c£50k) is assumed from that as costs incurred will more closely align to services delivered. In addition it is assumed plans for a marginal adjustment to the Fair Cost of Care for Management costs

will reduce the costs of Home Care by a further c1% (c£50k) per annum in each of 2021/22 and 2022/23.

- b) Residential Care Home review.** This covers in house provision, the development of a mental health wing at Seaton Grove, internal efficiencies in in-house provision, charging elements, commissioning elements, refurbishments, Care Inspectorate matters, the planned changes to POA, nursing input in care homes, IIC bed provision, service provider failure or problems, and respite provision changes. Work progresses on all areas and will be the subject of a progress report to the IJB in February 2020. Of particular note at this time, is that work is progressing on the proposed mental health wing with costings being finalised, a capita bid secured, and consultations taking place with staff regarding the staffing model. A capital bid has also been submitted for the general refurbishment work at Seaton Grove.

The Residential Care Home Review has been a major contributor to the IJB's recent financial plans. It is noted that the previous target savings of c£500k per annum will not now be achievable following the decision not to outsource Seaton Grove; the revised estimated saving, to be derived from internal efficiencies, that can be included in the IJB's financial plan is circa £200, 000 from mid financial year 2020-21.

The estimated savings from the review of nursing input to Care Homes is now estimated at circa £80,000 to £100,000 with systems modelling still to be worked out.

- c) Learning Disability Priority Improvement Plan.** Work against this year's priorities is progressing well. A review report will be submitted to December's IJB. Most recently, the review of Overnight Support was commended as an exemplar of good practice.

Building on the good work of the Learning Disability review, it is now proposed that the IJB commissions a similar Physical Disability review. This will allow the IJB to holistically consider the status of the IJB's Physical Disability resources and budget, assist the service to move towards a planning framework that allows it to live within its means, and ensure that the IJB's resources deliver a fair allocation of care to all service users.

- d) Review of Day Care.** An interim report was submitted to Improvement and Change Programme on 4-11-19. A number of issues were identified for further work

- The balance of day care between the North and South localities
- The efficacy of the current funding system and possible alternatives
- The types of services on offer in day care provision
- The balance of carers' needs and service users' needs
- Charging arrangements and waiving of charges for carers

These issues will be progressed through the working group and ICP then an implementation plan developed for agreed changes.

- e) Free Personal Care for Under 65's.** Implementation is progressing in a satisfactory manner and the local implementation group has been wound up with any outstanding work being addressed in the Improvement and Change Programme. There are early signs of a small increase in demand for personal care hours and in the size of care packages, in particular in Disability Services, but these need further assessment. Detailed below is a breakdown of the funding received for the implementation of the Act against various headings. There have been difficulties in quantifying the impact of the Act and the in-year and recurring projected spend noted below is provisional at this time. We will continue to monitor the impact of the Act.

|                | Funding Allocation | Current Projection | Recurring Projection |
|----------------|--------------------|--------------------|----------------------|
| Loss of Income | £48,000            | £110,000           | £110,000             |

|                                      |          |          |          |
|--------------------------------------|----------|----------|----------|
| New Demand                           | £517,000 | £218,000 | £436,000 |
| Assessment, Review and Co-ordination | £21,000  | £0       | £40,000  |
| Care Home Contributions              | £14,000  | £0       | £14,000  |
| Total                                | £600,000 | £328,000 | £600,000 |

f) **Carers Act implementation.** A report on the new Carers Strategy will be submitted to the December IJB.

g) **Implementation of Social Care Worker Posts in Adult Services.** A new Social Care Worker post has been introduced into adult service staffing structures. The post sits below that of a Social Care Officer and introduces a range of benefits to help address some of the issues currently being faced by the social care workforce. These include more flexibility and a better skills mix, a staffing structure more aligned to the Scottish Social Services Council staff registration categories, the potential to improve staff recruitment and retention by providing posts with varying levels of responsibility, qualifications and skills requirements and a more sustainable structure.

The implementation of the Social Care Worker post has commenced across adult services with a phased approach. Projected financial savings attached to this development are £130k by 2021/22.

h) **Review of Supported Housing.** This review has concluded and reported to the Improvement and Change Programme on 4-11-19. Some additional work was identified and a full implementation plan will be developed. The revised associated financial plans have also now been completed with maximum savings of £204k projected but a number of risks associated with full delivery of that target.

6. There is a need to strengthen **care management** in both Disability and Older People's Services OPS. Taking into consideration the pressures on care management previously described in the demographic report submitted to the December 2018 IJB, it is necessary to add 5 care managers to the existing care management teams, one to each of the four Older Peoples Services teams and one to the Physical Disability Team. Funding has been identified for 4 of the posts (three of the OPS teams and the Physical Disability team); further work is required to identify funding for the fourth OPS post.

An overall **Review of Care Management** has recently commenced. Two consultation events have taken place with staff and a PID drawn up. This Review will address the pressures in the care management teams identified in previous reports and seek to identify more effective ways of working in order to manage increased demand. It will report through the Improvement and Change Programme.

7. As part of our **winter planning activities**, we are planning to use Unscheduled Care and Winter Planning monies to extend the size of the Enablement and Response Teams in each locality by one post and exploring a commissioned service for assessment and personal care with an alternative provider to cover Liff, Birkhill, Muirhead and Claverhouse. This funding is short term only and there will be challenges in recruiting to short-term contracts and around sustainability of any changes.

8. **Monifieth Integrated Care (MIC)** has been operational for over a year and its multi-disciplinary approach is favourably reported upon by all involved. An evaluation of MIC will be undertaken by the end of December 2019. This will inform future plans in Monifieth but also our potential for roll-out in other areas of Angus. A full briefing about this approach will be delivered to IJB members in due course.

- 9. Psychiatry of Old Age.** The Review of the Specialist Dementia Discharge Pathway project is focussing on the discharge pathway for individuals in Angus Old Age Psychiatry inpatient beds with dementia and complex stress and distress. The project group is tasked with delivering this work and has been engaging, meeting with and listening to a wide range of stakeholders to understand the issues and challenges around this complex pathway. A Project Initiation Document (PID), Terms of Reference, a Risk Log and a Stakeholder Engagement Plan have been agreed to progress this to the next stage. A workshop is planned for 27.11.19, which will bring together staff from across the Health and Social Care Partnership and the Independent Care Home Sector in Angus. This workshop will explore potential improvements and “test” alternative service models to support the timely discharge from hospital of individuals with dementia and stress and distress. A report on findings will be submitted to the Angus Integrated Joint Board in early 2020.

## **10. Inpatient Care Review**

### Former Mulberry Ward Area, Susan Carnegie Centre

A Project Manager has been identified to support the Head of Community Health and Care Services (North) in leading the review. Further options on the scale of work to be provided are being developed. The Strategic Assessment template will be updated. Piped oxygen requirements are being reviewed and costed. A Users sub-group has been established. The Project Manager is to prepare a variation schedule for Robertson FM (owner of Susan Carnegie Building) to obtain final costs. A staff update briefing is to be prepared.

### Clova and Isla Wards, Whitehills Hospital

In line with the Angus Care Model, Inpatient Medicine for the Elderly beds have now been reduced from 24 to 21 with no unintended impact noted at this time. Bed occupancy continues to be reviewed. Noting nurse staffing to bed ratios, and the associated workforce and financial implications, the IJB continues to review the configuration of Clova and Isla wards however there could be significant one-off costs associated with any reconfiguration. Nurse staffing remains stable, though there is a challenge ahead with a significant number of instances of maternity leave expected. This situation will continue to be monitored throughout the winter period.

## **11. Community Health Services**

Workload and caseloads continue to rise for the District Nursing Service. Caseload analysis is underway to consider how the service needs to develop for the future provision of care.

A test of change is underway with prompting and assisting of medication by Social Care providers

District nursing is going through a Transformation Programme which will require district nurses to undertake additional training to work in their new role. This will put additional pressure on the service in terms of staffing, mentorship and supervision.

## **12. Strategic planning risk**

Three significant risks are identified in relation to Strategic Planning. These are reviewed at each meeting of the Clinical Care Governance Forum

- a) Insufficient Corporate Support to allow the progression of our change plans and for day-to-day work. Corporate support is provided by Angus Council and NHST in the many areas including Procurement, Human Resources, Finance, Communications, Property and Legal Services. Most of these services have experienced rationalisation within their host organisation. It is sometimes difficult for the AHSCP to obtain sufficient support in a manner which fits our timescales. There are particular problems in obtaining adequate Procurement support that have led to difficulties in progressing some change programmes at the desired pace, ongoing shortcomings in

Finance support and more recently concerns have emerged regarding Services provided by Property and Legal Support Teams.

- b) Service provider failure. This addresses the risk to operational continuity by the loss of a service provider. This is very pertinent given the current situation with 4 Seasons Health Care and the announced closure in December of Linlathen Nursing Home in Dundee, where we have 5 service users.
- c) As detailed in a separate report being submitted to the IJB, the demographic challenge of increasing demand for personal care at home and Older Peoples Services more generally is a significant risk for the service. Care at home provision per week has now risen to over 8,000 hours. The funds intended to support expected growth have been absorbed well in advance of the expected time line. Work is ongoing on how to contain and manage the demand and its impact on service delivery.

## 5. FINANCIAL IMPLICATIONS

As is demonstrated in this report, the IJB's financial plan is dependent on many contributory factors and the realisation of a range of individual reviews. A number of finance implications are set out above and are also covered in individual subject reports; these will assist in populating the IJB's overall Strategic Financial Plan update which is tabled at today's IJB.

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