



AGENDA ITEM NO 10

REPORT NO IJB 21/21

ANGUS HEALTH AND SOCIAL CARE

INTEGRATION JOINT BOARD – 23 JUNE 2021

ANNUAL PERFORMANCE REPORT

REPORT BY GAIL SMITH, INTERIM CHIEF OFFICER

ABSTRACT

The purpose of this report is to update the Integration Joint Board (IJB) on the progress made in delivering the strategic plan and the effect of our activity on performance during 2020/21. This report builds on previous performance reports presented to the IJB. The report demonstrates the impact of some of the improvements being made across the partnership and how progress is being made towards delivering the vision, strategic shifts and planned improved outcomes for the people of Angus.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board:-

- (i) note the current performance within Angus HSCP for 2020/2021
- (ii) requests the Chief Officer to provide a performance dashboard to the IJB biannually
- (iii) note work to progress further improvement where the targets have not been achieved is captured within existing improvement/action plan

2. BACKGROUND

The requirements to produce an Annual Performance Report are set out in the regulations. The report is aimed at the general public; however the Scottish Government, through legislation and engagement with Partnerships, has agreed that Annual Performance Reports from IJB's are available from June 20 onwards. It should be noted that due to the national COVID-19 pandemic that performance reports for 19/20 was delayed until October 2020. Angus HSCP presented an interim annual performance report in June 2020 to the IJB, which was welcomed given the ongoing pandemic. The full annual report has now been completed and the data has been uploaded directly to the Angus HSCP website IJB (Report number) June 2020

The four priorities of the Angus HSCP Strategic Commissioning Plan aim to deliver on the nine National Health and Wellbeing Outcomes

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

The IJB has agreed previous reports related to the development of the Partnership's performance framework and this report includes an annual review of performance for April 20 – March 21

3. CURRENT POSITION

The aim of the Angus Health and Social Care Partnership (AHSCP) Strategic Commissioning Plan 2019-22 is to progress approaches that support individuals to live longer and healthier lives. This includes having access to information and support within communities. The focus for Angus HSCP's is on health improvement and disease prevention including addressing health inequalities; building capacity within our communities; supporting carers and supporting the self-management of long term conditions.

Improving Health and Wellbeing

Falls

- There has been a continued reduction in the number of people aged over 65 admitted to hospital following a fall and a reduction in referrals to the falls pathway. It is assumed this, in part, can be attributed to elderly people remaining indoors during winter period and shielding as a result of the COVID-19 pandemic. Parallel to this there has been:
 - an increase in home safety advice by ERT, Fire & Rescue and care providers,
 - better balance classes were reintroduced, and
 - ERT are using the LifeCurve so providing exercise advice to improve mobility from independent living Angus

Prescribing

- Performance against the measures of number of people prescribed medication for hypertension, diabetes, and anxiety & depression, have been maintained or reduced in line with target performance set out in the Strategic Commissioning Plan 2019-22

Telecare

- There has been an increase of 1% in the usage of community alarm compared to 2019/20.
- Angus HSCP's Interim Annual Performance report 2019/20 noted that the use of telecare equipment (e.g. fall detectors, bed exit monitors etc), offered in addition to community alarm, has declined from 19% to 13% of community alarm users. Whilst it is recognised that people are moving to digital alternatives that they can source themselves e.g. mobile phones and digital devices like Alexa, the decline in telecare use appears to follow the introduction of a charge of £1/week in June 2019 for telecare equipment in addition to the charge for community alarm. On 5 April 2021, the standard rate charge for all CA unit installations increased from £5.05 to £5.20 per week for all Community Alarm (CA) unit installations. In an effort to encourage uptake of telecare people can now trial a range of telecare equipment for up to eight weeks before they commit to a weekly additional charge of £1. Based on the first 4 months of 2021, it is estimated that the projected annual telecare referral figure for 2021 will be approximately 300 which would indicate an overall increase in uptake in comparison to the previous 2 years.
- A successful trial of [KOMP](#) has been undertaken. KOMP is a simple plug in device (size of a small TV) which provides effective remote communication for vulnerable adults who have been left behind by the digital age. The innovative device is managed by the carer and family who can set reminders for medication and appointments as well as allowing video calls with the vulnerable adult which alleviate the effects of social isolation. Positive feedback was received from the majority of staff, service users and families. Seven families have decided to purchase the KOMP following completion of the test of change.

Respite

- In 2020/21 there has continued to be growth in the availability of care at home (both personal care and care and support). There has also been growth in the number of carers with a support plan in place supported by access to resources through self-directed support to deliver that support plan. Cancellation of all respite from 16 March 2020 was part of the response to the COVID-19 pandemic and will also have impacted upon the data. Some emergency respite was reintroduced at Seaton Grove

by the end of March 2020. Access to residential respite in care homes continued to be a challenge for most of the year

Supporting Care needs at home

- There has been a continued improvement in performance against the measure for individuals accessing Alcohol and Drug services and treated within three weeks. These improvements in pathways for service users and the use of resources are as a result of significant work to integrate the NHS and Local Authority Drug and Alcohol teams in AIDARS (Angus Integrated Drug and Alcohol Recovery Service) with 98% of people using alcohol and drug services treated within 3 weeks of referral
- The number of personal care hours has increased by 16% as a result of
 - a reduction in care home placements since April 2020
 - the closure of day care facilities which were also closed during the peak of the pandemic
 - improvements in discharge planning for people aged over 75

Developing Integrated and Enhanced Primary Care and Community Responses

- There has been a continued reduction in emergency admissions. This is in keeping with the impact of the COVID 19 pandemic and the changing pathways to support people at home and prevent admission as well as the maturing community infrastructure and Enhanced Community Support, which fully rolled out in 2019.
- The average length of stay in hospital following an emergency however has increased. This is likely to reflect the increase we have seen in delays in timely discharge.

Improving Integrated Care Pathways for Priorities in Care

Performance in relation to bed days lost to delays in discharge for people aged over 75 and complex delays has declined over the past year. (Q3 data only as annual data is not yet available)

Delayed Discharges >75's

- Number of people delayed in hospital over the age of 75 has increased. This is linked with the increase in number of people receiving care at home and over the period of the peak waves of the COVID 19 pandemic both our Enablement Response Team and private providers had limited capacity to manage the increase in demand, often resulting in delays.

Complex Delays

- Complex delays have increased mainly as a result of where guardianship applications have been slowed due to closure of the courts during the COVID 19 pandemic and although work has progressed to deal with the backlog of Guardianship applications, processing was slow.

There are also some psychiatry of old age patients whose discharge is delayed due to the lack of availability of appropriate community accommodation and support solutions and work is ongoing with Angus Council Procurement Team with a view to commissioning an appropriate care home within Angus.

- Both the number of delayed discharges and complex delays in Angus has now improved.

4. PROPOSALS

The Angus Integration Joint Board approves the content of the Annual Performance Dashboard and that the associated improvement actions will form part of the workplan for the Hospital Admission and Discharge Management Group and progressed monitored through this forum. It should be noted that a number of actions have been delayed as a result of the HSCPs response to and recovery from the COVID-19 Pandemic.

5. FINANCIAL IMPLICATIONS

There are no financial implications arising directly from this report.

6. RISK

Identified risks are:

- Inability to progress work and improvements as COVID-19 continues.
- Ability to demonstrate progress made in a timely manner.
- Inability to track strategic progress due to impact of COVID-19 on performance data.

7. OTHER IMPLICATIONS – if applicable

N/A

8. EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment is not required

9. DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in Section 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Angus Council and NHS Tayside.

Direction Required to Angus Council, NHS Tayside or Both	Direction to:	
	No Direction Required	x
	Angus Council	
	NHS Tayside	
	Angus Council and NHS Tayside	

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List of Appendices:

Appendix 1 – 2020/21 Performance Dashboard