

PERTH & KINROSS INTEGRATION JOINT BOARD

15 February 2019

CHIEF OFFICER STRATEGIC UPDATE

Report by Chief Officer (Report No. G/19/8)

PURPOSE OF REPORT

The purpose of this report is to update board members on progress against tasks outlined in the rolling actions list.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board note the following updates:

- Winter Planning update
- Joint Inspection update
- Refresh of the Strategic Plan update

2. Winter Plan – support of capacity and flow

- 2.1 The 2018/19 NHS Tayside Winter Plan was developed jointly with the three Health and Social Care Partnerships in Tayside. The fully developed plan was presented to the NHS Board on October 25th 2018, building on learning from previous years. The Tayside plan is held as an exemplar of good practice in Scotland.
- 2.2 In 2018/19, Perth and Kinross HSCP have additional measures in place to anticipate and address issues known to contribute to winter pressures. Greater attention to capacity and flow with daily reports on status, overall reductions of delays in comparison to previous years and regular communication across Tayside. In year developments have assisted in building system resilience. The Home Assessment and Recovery Team is well embedded and managing the process of transition from care back to home. Capacity and response is still constrained by the escalating demand for hours of Care at Home. This is largely a reflection of increasing complexity rather than any significant increase in rates of referral.

- 2.3 P&K still has the highest proportion of people delayed in Tayside, however, there has been a significant drop in the number of occupied bed days meaning that the length of delay has reduced significantly
- 2.4 Support for people awaiting discharge is boosted by the availability of rehabilitation over 7 days, a significant feature of future plans that will seek strategic investment in increased levels of Rehabilitation and Reablement to keep people as independent as possible for as long as possible
- 2.5 Changes to distribution of beds in PRI has distinguished emergency admissions from planned care. This means that people are able to come in for planned procedures at the same time we are working to support people to return home after acute illness.

3. Joint Inspection

3.1 On the 10th December 2018, Perth and Kinross Health and Social Care Partnership (HSCP) received notice of a joint inspection of Adult Services by Care Inspectorate and Health Improvement Scotland commencing January 18th 2019. An initial meeting with inspectors set out the timetable (See below)

15 January - 11 February	- Staff Survey	
18 January 2019	- Professional Discussion 1 – Inspectors initial briefing	
	- HSCP briefing to IJB	
31 January 2019	- EMT sign off	
4 February	- Distribution to Board Members and Partners	
6 February 2019	- Submission of pre-inspection Information	
25 February 2019	- Fieldwork Week 1 (4.5 days)	
18 March 2019	- Fieldwork Week 2 (2.5 days approx)	
5 April 2019	- Professional Discussion 2 – inspection initial feedback	
15 May 2019	- Professional Discussion 3 – final feedback	

- 3.2 The purpose of the inspection is to help P&K HSCP answer the question "How well do we plan and commission services to achieve better outcomes for people"?
- 3.3 The inspection involves distribution of a staff survey to almost 2000 employees of the partner organisations and a self evaluation document the Inspectors will use in designing their inspection for the needs of Perth and Kinross. We are required to submit evidence of good practice

Self Evaluation / Position Statement

- How good are we now?
- How do we know?
- How good can we be?

Good Practice Examples

• Evidence supporting information provided within the above.

3.4 The inspection will assess the extent to which the HSCP is making progress towards efficient, effective and integrated services that are likely to lead to better experiences and improved outcomes over time. The inspectors do not evaluate how individuals and groups experience services in their area; however, they will be informed by the overall impact of improved outcomes.

Quality Indicators

- Self evaluation is based around the following QIs
- Each will be evaluated highlighting strengths and areas for improvement
- Backed up by strong evidence:

1. Key Performance outcomes:

QI 1.1. Improvements in integrated authority performance in both health care and social care

6. Policy development and plans to support improvements in service:

- QI 6.1. Operational and strategic planning arrangements
- QI 6.5 Commissioning arrangements

9. Leadership and direction that promotes partnership:

- QI 9.1 Vision, values and culture across the partnership
- QI 9.2 Leadership of strategy and direction
- 3.5 Inspection has two fieldwork events:

W/c 25/2/19

- Inspectors meet with staff, senior managers, IJB members, external providers, and other stakeholders.
- Focus Group meeting and observation of our key meetings e.g.
 IJB/Strategic Commissioning Board/ Audit and Performance Committee/ EMT/ IMT/Locality Partnership meetings.

W/c 18/3/19

Specific Officers and Stakeholders interviews

Inspectors will join the IJB on the 15th February and the Audit and Performance Committee on the 19th February 2019

Inspectors will conduct a meeting with IJB members immediately after the IJB.

3.6 Professional Discussions take place before and after the inspection. The initial professional discussion was held on January 18th and was attended by 52 senior representatives of the IJB, the NHS Tayside Board, Perth and Kinross Council and the Third Sector. A presentation by the Inspectors was followed by a development session to inform IJB members about the process in more detail. The discussion on the 5th April will present initial findings and a final discussion on the 15th May will present the final report.

4 REFRESH OF STRATEGIC PLAN

- 4.1 The Strategic Plan will be refreshed and presented for approval by the IJB at the March 2019 IJB meeting. The document will be a smaller, high level strategic summary of intentions for the next phase of the partnership. A consultation process will involve IJB members, Partner Organisations and the public. Officers are working towards conclusion by the end of the financial year with approval to follow thereafter. The refreshed plan builds upon the original strategic ambitions set in 2016. The plan will focus upon the ambitions set out by four Care Programme Boards that will contribute more detail to support modernisation and further integration of services, addressing matters of service distribution across Perth and Kinross where historical location of services is no longer sensitive to the population need.
- 4.2 The plan will be informed by recent available population trend data and public health intelligence. A needs analysis will be considered by locality and will seek to accommodate changes in the wider NHS and Council services across Perth and Kinross
 - Older People and Unscheduled Care
 - Mental Health and Well-being
 - Primary Care
 - Carer Support
- 4.2 The refreshed Strategic Plan will consider, sustainability and affordability. It will fully evaluate the workforce planning requirements.
- 4.3 This work will be developed in partnership with service users, carers and staff and overseen by the Strategic Planning Board

5.0 Strategic Programme of Care Boards

IJB members are asked to note that a single paper for information is being presented today to update progress across the four Strategic Programmes of Care Boards.

In support of the ongoing development of these Boards, a "Strategic Programme of Care Framework" is being finalised and will be presented to the IJB for scrutiny and approval at the additional IJB meeting scheduled for March 2019. The Strategic Framework has been developed in line with the needs of the programme boards.

Terms of Reference for the four Strategic Programme of Care Boards are presented for approval at this meeting of the IJB.

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NOTE: No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information), were relied on to any material extent in preparing this report.