



PERTH AND KINROSS INTEGRATION JOINT BOARD

27 September 2019

JOINT INSPECTION OF 'THE EFFECTIVENESS OF STRATEGIC PLANNING IN PERTH AND KINROSS HEALTH AND SOCIAL CARE PARTNERSHIP.'

**Report by Chief Officer / Director of Integrated Health and Social Care
(Report No. G/19/ 166)**

PURPOSE OF REPORT

This report provides IJB members with information on the Joint Inspection of the HSCP carried out by Healthcare Improvement Scotland and the Care Inspectorate and their final report which was published on the 23 September 2019. It outlines the context, findings and recommendations and provides details of the action plan that the Partnership has begun work on in response.

1. RECOMMENDATION(S)

It is recommended that the Perth and Kinross Integration Joint Board (IJB):

- (i) Considers this report on the joint inspection.
- (ii) Notes the detailed findings in the full Joint Inspection Report ([https://www.careinspectorate.com/images/documents/5288/Perth%20and%20Kinross%20joint%20inspection%20\(adults\)%20strategic%20planning_September%202019.pdf](https://www.careinspectorate.com/images/documents/5288/Perth%20and%20Kinross%20joint%20inspection%20(adults)%20strategic%20planning_September%202019.pdf))
- (iii) Requests that the Chief Officer produces a comprehensive improvement plan to address the areas for improvement outlined within the Joint Inspection Report and reports back to the IJB on early progress at the IJB meeting on 11 December 2019.

2. INTRODUCTION

- 2.1 The Care Inspectorate and Healthcare Improvement Scotland have carried out a series of inspections across Scotland to report on the effectiveness of strategic planning by integration authorities. These inspections focus on how Integration Authorities plan, commission and deliver high-quality services in a co-ordinated and sustainable way. Reflecting the stage of partnerships' evolution, these inspections do not seek to evaluate people's experience of services in their area, but to assess the extent to which the Health Care Partnership is making progress in the journey towards efficient, effective and integrated services.

- 2.2 An inspection of strategic planning in Perth and Kinross Health and Social Care Partnership (HSCP) took place between January 2019 and March 2019, focussing on the two year period from February 2017 until February 2019.

The focus of this inspection was how well the Partnership had:

- Improved performance on both health and social care
- Developed and implemented operational and strategic planning arrangements, and commissioning arrangements, and
- Established the vision, values and aims across the partnership, and the leadership of strategy and direction.

- 2.3 Following meetings with the inspectorates in April and May, the HSCP submitted further evidence, comment and corrections to the draft report. A further meeting took place with the inspectorate in August, before the final inspection report was published on 23 September 2019.
- 2.4 While the findings of this inspection are concerning, they mirror the areas of improvement that we had identified in our own self-evaluation, our Strategic Risk Management Framework and our governance audit. Consequently we have begun to take action to address these failings, as well as to look to build on the positive areas the inspection also highlighted.
- 2.5 The findings of this inspection reaffirm how frontline staff are working effectively and positively to deliver improved outcomes for the people we support and care for. While our Annual Performance Report evidences that we are performing above the Scottish average across most performance indicators and our registered services are consistently evaluated as good or very good, we recognise that this inspection highlights the need for us to improve our inputs, processes, systems and strategic leadership. It also reflects the need to consider our aligned structure, our approach to strategic planning and to monitoring performance. These are important areas for us to develop and we are committed to doing so, in order that we can further enhance the quality of services and the outcomes the deliver to the people of Perth and Kinross.

3. JOINT INSPECTION REPORT– KEY FINDINGS

- 3.1 This section of the report summarises the inspection's key findings, both the strengths and the areas for improvement, as well as the grades awarded across each of the three quality indicators considered.

Performance

- 3.2 The inspection identified that although Perth and Kinross HSCP was performing well we lacked strategic leadership on performance and did not have a robust and integrated performance framework. It identified that as well as limiting our ability to measure performance against strategic priorities this also prevented us from reporting effectively to the IJB and its Committees.

- 3.3 The inspection commended our performance in a number of areas, but highlighted that in many we had no formal mechanisms for monitoring performance, that we lacked a comprehensive approach and that there was confusion within the senior team about different roles and expectations.
- 3.4 Concern was also raised about the use of data, how it was collated and used and where responsibility lay for reviewing and monitoring performance. Limited performance information was available to Localities, which prevented managers from assessing the impact of service provision and identifying areas of need locally.

Evaluation: Weak

Strategic Planning

- 3.5 While progress had been made in implementing a number of actions from our Strategic Commissioning Plan the inspection evidenced a lack of a balanced and effective approach. This was partly attributed to the demands of inpatient mental health and learning disability inpatient services.
- 3.6 Although we have achieved significant improvement in delayed discharge and unscheduled care, the inspection highlighted slow progress on complex care and on workforce planning. It was reported that financial planning had improved, together with collaborative working between senior management and finance. The inspectors also positively recognised that there were effective arrangements in place for the commissioning, procurement and monitoring of services purchased from external providers.
- 3.7 However, the inspection found that the HSCP lacked a systematic approach to monitoring and evaluating the implementation of all its plans and had not sufficiently considered whether its plans were achievable and realistic. Plans were found to not be underpinned by effective programme and project management or subject to regular review and re-prioritisation, taking into account the capacity available to deliver them.
- 3.8 The Inspectors recognised that the Partnership had worked hard to establish its localities. It was clear that Locality Teams had driven the development of early intervention and prevention, but processes to ensure alignment with strategic priorities were absent. The inspection highlighted that self evaluation and quality assurance had not been priorities. While there was commitment to involve external stakeholders, this was found to not have been consistently implemented.

Evaluation: Adequate

Leadership and Direction

- 3.9 The Inspectors found that the HSCP had a clear vision and aims, underpinned by strategic themes and that the Partnership's vision was largely aligned with the strategic vision of partner agencies. It was widely recognised and understood by partnership staff. Locality teams were led by effective managers who were well respected by frontline staff.
- 3.10 However, the inspection highlighted that there was disconnect between senior managers in the wider partnership and staff in localities, where there was a lack of strategic direction from senior managers and leaders were perceived as distant. Staff and managers were found to not be confident about workforce planning intentions, despite difficulty in adequately staffing all service areas. The inspectors found that while staff worked in a collaborative way, they expressed a desire to progress to an integrated workforce.
- 3.11 Due to the aligned rather than integrated structure, there were a number of different clinical and care governance and management groups and the inspectors reported that this has contributed to a lack of clarity about roles of groups, duplication of work, lack of communication between groups and inefficient use of senior staff time.
- 3.12 Further, the inspection highlighted that the IJB was not equipped to fulfil its role, with poor communication, sharing of information and training cited as having a negative impact on the development of the IJB members. The inspection also asserted that the IJB was not setting the strategic direction for the partnership or fulfilling its governance role.
- 3.13 The inspection acknowledged that the Partnership had a new leadership team with two new Chief Executives and a new Chief Officer, who expressed their commitment to the integration agenda and enthusiasm for taking a leadership role to drive the vision and culture of integration. However, it was recognised that, at the point of this inspection, it was too early to evaluate the impact that this new team would make.

Evaluation: Weak

4. KEY AREAS FOR IMPROVEMENT

The inspection report evidences key priority areas for improvement and these are presented in the following table. This has been supplemented, in the final column, with information on the early action that the Partnership has taken on these. These actions will be incorporated into the Consolidated Improvement Plan that we are currently developing.

	Areas for Development	HSCP Improvement Actions
1	The Partnership should improve its approaches to performance measurement and management.	We have dedicated resource to develop a Corporate Performance Framework, which will routinely provide performance and management information and will enable remedial action to be taken to improve performance. This will also enable us to provide regular performance reports to the IJB and will support the development of our Annual Performance Report.
2	The Partnership should improve its strategic planning and commissioning processes.	In developing our new Strategic Plan we have identified the need to review our strategic planning processes and to consider the effectiveness of our current planning and organisational structures. We are also committed to refreshing and revitalising our Strategic Planning Group and the Third Sector Forum.
3	The Partnership should put in place a systematic approach to monitoring and reviewing the implementation of its strategic commissioning plan and any other plans and strategies which support its implementation.	Revision of our strategic planning structures and groups will ensure routine monitoring, evaluation and reporting of our strategic plans. The development of a Corporate Performance Framework will enable us to track, chase and deliver progress and improvement across our key indicators, plans and programmes.
4	The Partnership should ensure that it places greater priority on evaluating the impact of its plans and strategies.	
5	The Partnership should ensure that workforce planning is maintained as a key priority in all its activities and encompasses the workforce requirements of the NHS, Perth and Kinross Council and third and independent sector providers.	We have begun a series of workshops within our current strategy groups and programmes of care to inform the development of our Workforce Plan. We await national guidance and a reporting template from the Scottish government and will use this to complete and submit our workforce plan by the end of this financial year.
6	The Partnership should build on existing good relationships with care providers and housing services to identify where there is potential to co-produce solutions to strategic challenges.	We have brought together a group of national care and housing providers to look at how we can collectively design and deliver new models of care, particularly for people with complex needs. We have already identified properties to support people with complex care needs to move from long-stay hospital beds and we are developing plans to partner a care provider, social landlord and developer to design further builds.

7	The Partnership should review its participation, engagement and communication strategies.	We are reviewing our approach to participation and engagement and will refresh our activity in this area through the work of our Community Engagement Team.
8	The Partnership should review its structures and processes for management, strategic planning and governance to ensure the structure is fit for purpose.	We are reviewing our organisational structure, to become more integrated and to provide greater accountability and clearer lines of responsibility. This will create the conditions for improvement, innovation and for the delivery of transformation programmes.
9	The Partnership should invest in the development and support of the IJB members.	We will engage with the incoming Chair to support him to lead on a development needs analysis for IJB Members. This will inform a development plan that will enable IJB Members to carry out their important role with greater insight, competence and confidence.

5. CONCLUSION

- 5.1 The findings of the Joint Inspection Report are of concern. Despite the HSCP performing well across a range of indicators and despite frontline staff working effectively to deliver high quality care and support, these findings clearly highlight the need for the Partnership to deliver improvements across a number of areas and functions. The Partnership Senior Leadership Team is fully committed to achieving this and has already taken steps to deliver on this commitment.
- 5.2 The IJB will wish to note and discuss the contents of this report and the full Joint Inspection Report and will wish to be assured by the partnership's commitment to consolidate what is working well and to take action to deliver improvements in monitoring performance, financial and strategic planning, providing effective, visible and strong leadership and in setting the strategic direction for the HSCP.

Author(s)

Name	Designation	Contact Details
Gordon Paterson	Chief Officer/Director of Integrated Health & Social Care	Tay_uhb.chiefofficerpkhscp@nhs.net

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.