

PERTH & KINROSS INTEGRATION JOINT BOARD

15 February 2019

Audit Scotland Report – 'Health and Social Care Update on Progress'

Report by Chief Officer (Report No. G/19/9)

PURPOSE OF REPORT

This report shares Audit Scotland's recently published report 'Health and Social Care Integration – with the Integration Joint Board.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board:

- notes the recommendations contained in the report;
- considers which areas highlighted should be reviewed with partner agencies;
- notes that the IJB management team will review this document to form an action plan.

2. BACKGROUND

This report (see Appendix 1) is the second of three National Performance Audit Reports on Health and Social Care Integration. It contains a series of key messages as follows:

- a. Integration Authorities have started to introduce more collaborative ways of delivering services and have made improvements in several areas, including reducing unplanned hospital activity and delays in discharging people from hospital. People at the end of their lives are also spending more time at home or in a homely setting, rather than in hospital. These improvements are welcome and show that integration can work within the current legislative framework, but Integration Authorities are operating in an extremely challenging environment and there is much more to be done.
- b. Financial planning is not yet fully integrated, long-term or focused on providing the best outcomes for people who need support. This is a fundamental issue that will constrain the ability of Integration Authorities to improve the health

and social care system. Financial pressures across health and care services are making it difficult for Integration Authorities to achieve meaningful change. Integration Authorities were designed to control some services provided by acute hospitals and their related budgets. This key part of the legislation has not yet been enacted in most areas.

- c. Strategic planning needs to improve and several significant barriers must be overcome to speed up change. These include: a lack of collaborative leadership and strategic capacity; a high turnover in Integration Authority leadership teams; disagreement over governance arrangements; and an inability or unwillingness to safely share data with staff and the public. Local areas that are effectively tackling these issues are making better progress.
- d. Significant changes are required in the way that health and care services are delivered. Appropriate leadership capacity must be in place and all partners need to be signed up to, and engaged with, the reforms. Partners also need to improve how they share learning from successful integration approaches across Scotland. Change cannot happen without meaningful engagement with staff, communities and politicians. At both a national and local level, all partners need to work together to be more honest and open about the changes that are needed to sustain health and care services in Scotland.

The report includes a series of recommendations including:

- 1) Commitment to collaborative leadership and building relationships.
- 2) Effective strategic planning for improvement.
- 3) Integrated finances and financial planning.
- 4) Agreed governance and accountability arrangements.
- 5) Ability and willingness to share information.
- 6) Meaningful and sustained engagement.

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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.