



Integration Joint Board

29th November 2018

This Report relates to
Item 13 on the Agenda

Performance Management Locality Reports for Area Committee (January 2018 – June 2018)

(Paper presented by Ananda Allan)

For Approval

Approved for Submission by	Vicky Freeman, Head of Strategic Planning
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List of Background Papers	The Public Bodies (Joint Working) (Scotland) Act 2014 The Public Bodies (Joint Working) (Content of

	<p>Performance Reports) (Scotland) Regulations 2014</p> <p>Health and Social Care Integration Public Bodies (Joint Working) Scotland Act 2014 – Core Suite of Integration Indicators</p> <p>Guidance for Health and Social Care Integration Partnership Performance Reports</p> <p>Integration Scheme between NHS Dumfries and Galloway and Dumfries and Galloway Council</p> <p>Feedback from Area Committee meetings for Performance Reports Oct 16 - Apr 17</p>
<p>Appendices</p>	<p>Appendix 1 Draft Area Committee Report – Annandale and Eskdale</p> <p>Appendix 2 Draft Area Committee Report – Nithsdale</p> <p>Appendix 3 Draft Area Committee Report – Stewartry</p> <p>Appendix 4 Draft Area Committee Report – Wigtownshire</p> <p>Appendix 5 Draft New Locality Report Template</p>

SECTION 1: REPORT CONTENT

Title/Subject:	Performance Management Locality Reports for Area Committee (January 2018 – June 2018)
Meeting:	Integration Joint Board
Date:	29 th November 2018
Submitted By:	Ananda Allan
Action:	For Approval

1. Introduction

- 1.1 The purpose of this paper is to present accurate, up to date information on progress towards delivering the commitments contained with the Locality Plans. This will enable members of the Area Committee to scrutinise the implementation of the Locality Plans.
- 1.2 Dumfries and Galloway Integration Joint Board is committed to the accountability of locality health and social care services to communities through their Area Committees.
- 1.3 Point 2.3.8 of the Dumfries and Galloway Health and Social Care Integration Scheme states, “Health and Social Care Services in each locality will be accountable to their local community through the Area Committees and to the IJB.”
- 1.4 Point 4.14 of the Scheme states “The Parties recognise the need for local community ownership in the development of health and social care services. In developing this Scheme and the Strategic Plan, democratic accountability to local communities will be important to the progress and success of integration. In Dumfries and Galloway, Area Committees will scrutinise the delivery of integrated services within their communities against the planned outcomes established within the Strategic Plan and the Locality Plans and provide reports to the IJB”.
- 1.5 These reports follow on from work previously undertaken to develop the performance management arrangements for the Dumfries and Galloway Health and Social Care Partnership.

2. Recommendations

2.1 The Integration Joint Board is asked to:

- **Approve the Locality Reports for Annandale and Eskdale, Nithsdale, Stewartry and Wigtonshire for Area Committees.**

- **Approve the new Locality Report Template that will replace the current template used for Locality Reports for Area Committee.**

3. Background

- 3.1 The Scottish Health and Care Experience Survey (HACE) is a postal survey commissioned by the Scottish Government. This was sent to a random sample of people who were registered with a GP in Scotland in October 2017. The survey has been run every 2 years since 2009. The survey asks about people's experiences of receiving care, support and help with everyday living.
- 3.2 Across Dumfries and Galloway, a random sample of 16,071 adults was invited to take part in the HACE survey in October 2017 and 4,986 responded. The response rate for the region was 31%. This is significantly better than for Scotland, where 22% of people responded.
- 3.3 For the first time, the results for the HACE survey have been published for localities. Previously, only results for the Dumfries and Galloway region have been made available. This has enabled 4 indicators (D1, D3, D11 and D14) to be reported for the first time.
- 3.4 Results of the HACE survey are publicly available at Partnership, Locality (GP Cluster) and individual GP practice level at this website: www.gov.scot/GPSurvey
- 3.5 The performance management framework for Dumfries and Galloway Health and Social Care Partnership is reviewed regularly to ensure that it remains fit for purpose. In response to feedback, including from IJB elected members, the template for the Area Committee Reports has been reviewed.

4. Main Body of the Report

- 4.1 Please see Draft Area Committee Report - Annandale and Eskdale (Appendix 1).
- 4.2 Indicators from the Annandale and Eskdale report which have particular points to note:
- 4.2.1 C1 Adults accessing Telecare as a percentage of the total number of adults supported to live at home** - The results for March 2018 (74.0%) and June 2018 (74.8%) were above the target of 73%.
- 4.2.2 D1 Feeling safe when using health and social care services** - 82% of people from Annandale and Eskdale who responded to the HACE survey and are supported at home agreed they felt safe. This is lower than for Dumfries and Galloway, 87%, but similar to the rest of Scotland, 83%.
- 4.2.3 D3 Well co-ordinated health and social care services** - 78% of people from Annandale and Eskdale who responded to the HACE survey and are supported at home agree that their health and social care services seemed

well co-ordinated. This is lower than the result for Dumfries and Galloway, 83%, but higher than the rest of Scotland, 74%.

4.2.4 D11 Carers who agree they receive the support needed to continue in their caring role - of the 229 Carers from Annandale and Eskdale who responded to the HACE survey, 37% agreed they felt supported to continue in their caring role, 43% neither agreed nor disagreed and 20% did not agree.

4.2.5 D14 Well communicated with and listened to - 77% of people from Annandale and Eskdale who responded to the HACE survey and are supported at home agreed that they were aware of the help, care and support options available to them. This was higher than the results for Dumfries and Galloway and Scotland, both 73%.

4.3 Please see Draft Area Committee Report - Nithsdale (Appendix 2).

4.4 Indicators from the Nithsdale report which have particular points to note:

4.4.1 C1 Adults accessing Telecare as a percentage of the total number of adults supported to live at home - 71.1% of adults from Nithsdale supported to live at home are accessing Telecare. This is below the target of 73%.

4.4.2 D1 Feeling safe when using health and social care services - of the 74 people from Nithsdale who responded to the HACE survey and are supported at home, 86% agreed they felt safe. This is slightly lower than the result for Dumfries and Galloway, 87%, but higher than the result for Scotland, 83%.

4.4.3 D3 Well co-ordinated health and social care services - 78% of adults from Nithsdale who responded to the HACE survey and are supported at home agreed that their health and care services seemed well co-ordinated. This was lower than for Dumfries and Galloway, 83%, but higher than for Scotland, 74%.

4.4.4 D11 carers who agree they receive the support needed to continue in their caring role - of the 183 Carers from Nithsdale who responded to the HACE survey, 43% agreed that they felt supported to continue in their caring role, 32% neither agreed nor disagreed and 25% did not agree.

4.4.5 D14 Well communicated with and listened to - 72% of people from Nithsdale who responded to the HACE survey and are supported at home agreed that they are aware of the help, care and support options available to them. This was slightly lower than for Dumfries and Galloway and Scotland, both 73%.

4.5 Please see Draft Area Committee Report - Stewartry (Appendix 3).

4.6 Indicators from the Stewartry report which have particular points to note:

4.6.1 C2 Number of adults receiving care at home via SDS Options 1, 2 and 3 - The number of adults from Stewartry supported through SDS has decreased from 410 in December 2017 to 380 in June 2018.

- 4.6.2 C7 Number of adults under 65 receiving care at home (via SDS Option 3)** - There continues to be a steady decline in the number of adults from Stewartry aged under 65 who are supported through SDS Option 3. In September 2017 there were 99 adults whereas in June 2018 there are 85 adults. This pattern mirrors that seen under indicator C2.
- 4.6.3 D1 Feeling safe when using health and social care services** - of the 37 people from Stewartry who responded to the HACE survey and are supported at home, 91% agreed they felt safe. This is higher than the result for Dumfries and Galloway, 87% and the result for Scotland, 83%.
- 4.6.4 D3 Well co-ordinated health and social care services** - 91% of adults from Stewartry who responded to the HACE survey and are supported at home agreed that their health and care services seemed well co-ordinated. This was higher than for Dumfries and Galloway, 83% and for Scotland, 74%.
- 4.6.5 D11 carers who agree they receive the support needed to continue in their caring role** - of the 92 Carers from Stewartry who responded to the HACE survey, 41% agreed that they felt supported to continue in their caring role, 41% neither agreed nor disagreed and 18% did not agree.
- 4.6.6 D14 Well communicated with and listened to** - 71% of people from Stewartry who responded to the HACE survey and are supported at home agreed that they are aware of the help, care and support options available to them. This was slightly lower than for Dumfries and Galloway and Scotland, both 73%.

4.7 Please see Draft Area Committee Report - Wigtownshire (Appendix 4).

4.8 Indicators from the Wigtownshire report which have particular points to note:

- 4.8.1 C1 Adults accessing Telecare as a percentage of the total number of adults supported to live at home** - 68.6% of adults from Wigtownshire supported to live at home are accessing Telecare. This is below the target of 73%.
- 4.8.2 D1 Feeling safe when using health and social care services** - of the 73 people from Wigtownshire who responded to the HACE survey and are supported at home, 90% agreed they felt safe. This is higher than the result for Dumfries and Galloway, 87%, and the result for Scotland, 83%.
- 4.8.3 D3 Well co-ordinated health and social care services** - 90% of adults from Wigtownshire who responded to the HACE survey and are supported at home agreed that their health and care services seemed well co-ordinated. This was higher than for Dumfries and Galloway, 83%, and for Scotland, 74%.
- 4.8.4 D11 carers who agree they receive the support needed to continue in their caring role** - of the 169 Carers from Wigtownshire who responded to the HACE survey, 46% agreed that they felt supported to continue in their caring role, 41% neither agreed nor disagreed and 14% did not agree.

4.8.5 D14 Well communicated with and listened to - 72% of people from Wigtownshire who responded to the HACE survey and are supported at home agreed that they are aware of the help, care and support options available to them. This was slightly lower than for Dumfries and Galloway and Scotland, both 73%.

- 4.9 Following a specific request from the Wigtownshire Area Committee, an addendum will be included with the report for Wigtownshire. This will contain information about the number of Wigtownshire residents experiencing a delay to their hospital discharge.
- 4.10 The latest version of the Performance Management Handbook is available on the 'Our Performance' page of the DG-Change website (<http://www.dg-change.org.uk/our-performance>). The handbook explains the terminology used and provides background information for the indicators being reported.
- 4.11 Following a review of the template for the Area Committee reports, and in response to feedback from key stakeholders (including from an IJB elected members workshop), a revised template has been drafted. Please see the New Locality Report Template (Appendix 5). (Please note that sample text in light grey has been added to the template to give an idea of the spacing required.)
- 4.12 To support Area Committees in their role of scrutinising “the delivery of integrated services within their communities against the planned outcomes established within the Strategic Plan and the Locality Plans”, this new template includes the following features:
- 4.12.1** An introduction from the Locality Manager. This will contain information about integration, the Locality Plan and the purpose of the report.
 - 4.12.2** The template is structured using the 9 National Health and Wellbeing Outcomes. This is the same structure used in Dumfries and Galloway Health and Social Care Partnership’s Annual Performance Report and for reporting performance information to Scottish Government.
 - 4.12.3** There will be 1 section for each of the 9 National Health and Wellbeing Outcomes under which there will be 3 subsections:
 - **How we support this outcome in our locality** - a brief description of the approach being taken by the locality in working towards achieving the National Health and Wellbeing Outcome
 - **How we are addressing this outcome in our locality** - this subsection will include a list of the We Will commitments made in the Locality Plan that are mapped to the National Health and Wellbeing Outcome along with a Red, Amber, Green (RAG) status to indicate progress. This subsection will also include narrative to describe programmes of work being undertaken by the locality team.

- **How we are getting on** - this subsection will include the performance indicators that have been mapped to the National Health and Wellbeing Outcome.

4.12.4 A page at the back of the report contains a list of useful links to publically available information on health and social care performance.

4.13 Performance reports on locality activity are timetabled to appear at Area Committees twice a year: in May and in November. Each National Health and Wellbeing Outcome will be reported once a year so that in one report there will 5 outcomes reported and in the second report for that year, the remaining 4 outcomes will be reported.

5. Conclusion

5.1 Submitting locality reports to the Area Committees fulfils Dumfries and Galloway Health and Social Care Partnership's reporting responsibilities under the Integration Scheme and the Public Bodies (Joint Working) (Scotland) Act 2014.

SECTION 2: COMPLIANCE WITH GOVERNANCE STANDARDS

6. Resource Implications

6.1 There are no resource implications.

7. Impact on Integration Joint Team Board Outcomes, Priorities and Policy

7.1 Critical to the delivery of Board Strategy.

8. Legal & Risk Implications

8.1 Section 42 of the 2014 Public Bodies (Joint Working) (Scotland) Act requires that performance reports be prepared by the partnership.

9. Consultation

9.1 Elected Members Workshop – 16 December 2016

9.2 IJB Elected Member Workshop - 22 June 2018

10. Equality and Human Rights Impact Assessment

10.1 An Impact Assessment is not required.

11. Glossary

D&G Dumfries and Galloway
HACE Scottish Health and Care Experience Survey
RAG Red/Amber/Green
IJB Integration Joint Board
SDS Self Directed Support