



Dumfries and Galloway
Transformation and Innovation / Futures Committee

12th November 2024

This Report relates to
Item 8 on the Agenda

Assessment of the Effectiveness of Integration and Proposed Actions

Paper presented by Ananda Allan

For Discussion

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List of Background Papers:	Framework for Community Health and Social Care Integrated Services The Health Foundation; 'Leave no one behind', Jan 2023 https://reader.health.org.uk/leave_no_one_behind/bridging-the-implementation-gap Health and Care Experience Survey - gov.scot	
Appendices:	Appendix 1 - SPG workshop analysis Appendix 2a - Audit Scotland_240725_ijb_performance Appendix 2b - Audit_240725_ijb_performance_supp1 Appendix 2c - Audit_240725_ijb_performance_supp2	
Direction Required to Council, Health Board or Both	Direction to:	
	1. No Direction Required	X
	2. Dumfries and Galloway Council	
	3. NHS Dumfries and Galloway	
	4. Dumfries and Galloway Council and NHS Dumfries and Galloway	

1. Introduction

1.1 This paper summarises findings and reflections on the effectiveness of integration based on an assessment process undertaken by the Strategic Planning Group (SPG) and a report published by Audit Scotland.

1.2 The IJB Transformation and Innovation / Futures Committee is asked to consider actions which will support the Partnership to deliver more effective integration.

2. Recommendations

2.1 **The Transformation and Innovation / Futures Committee is asked to:**

- **Reflect on the feedback in relation to the effectiveness of integration in Dumfries and Galloway and**
- **Advise on any changes to the include within the next Strategic Commissioning Plan which will support the Partnership to deliver more effective integration**

3. Background and Main Report

3.1. Strategic Planning Group (SPG) Workshop 11 July 2024

3.2. On 11 July 2024, the SPG were presented with an opportunity to consider the effectiveness of integration arrangements.

3.3. The [Framework for Community Health and Social Care Integrated Services](#) describes effective integration as follows:

- Good health and social care integration involves planning, commissioning, and delivering coordinated, seamless services that support people to live healthy, independent, and dignified lives.
- The goal is to improve outcomes for the entire population by ensuring everyone receives the Right Care, in the Right Place, at the Right Time.
- In Scotland, integration authorities play a significant role in this process, emphasizing anticipatory and preventative care while working closely with local communities and care providers.
- Ultimately, successful integration centres on positive experiences for service users, respecting their dignity, and reducing health inequalities.

3.4. A selection of evidence was considered, including:

Evidence at the end of May 2024	Progress
• Around 100 people are medically fit to go home but are still waiting in hospital beds	About the same
• 350 people have been assessed for care and support at home, and agreed how this will be delivered, and are now waiting for it to be put in place	Getting better
• Over 3,000 people have been assessed for and agreed to have a hospital procedure, and have been waiting for this more than 12 weeks (3 months)	Getting worse

<ul style="list-style-type: none"> Over 5,500 people have been referred to see a specialist at an out patient appointment, and have been waiting for this more than 12 weeks (3 months) 	Getting worse
<ul style="list-style-type: none"> A wide range of responses to the Health and Care Experience (HACE) survey show that people are less satisfied with their experiences 	Getting worse
<ul style="list-style-type: none"> The Dumfries and Galloway Carers Survey 2024 showed that respondents experienced joined up support 'rarely' 20.6% (36) and 'never' 25.7% (45) of the time 	About the same
<ul style="list-style-type: none"> There have been multiple mentions of integration and joined up working during the Right Care, Right Place engagement and consultation processes. The main themes have been: <ul style="list-style-type: none"> – need for more integrated input in community – positive impact of Home Teams – need for more flexibility between health and social care beds – need for more joined up working (cross sector not just health and local authority) – need for better links between acute and intermediate care – need to improve communication and joined up working practice 	n/a
3.5.	The SPG did a self assessment exercise based on the Characteristics of Effective Integrated Care, found in the framework. Details of the questions are in Appendix 1, SPG workshop analysis.
3.6.	In general the SPG found almost every aspect of integration they considered, to be 'partially established'.

Table 1: Outcome of the SPG self assessment of the effectiveness of integration

Established?	Most commonly agreed statement
Partially	People are supported to identify the resources available to them and consider how they may be used alongside those of the Partnership to offset any problem or difficulty
Partially	People are signposted to relevant information and peer support that will help them better understand and manage their condition
Partially	There is some knowledge of the local network of community groups and, through social prescribing, some professionals encourage people to engage with these
Partially	Technologies are being trialled and targeted to individuals who need support with the daily living and long-term condition management
Partially	Team members have a shared case load but professional boundaries are still very obvious
Partially	There is evidence of progress with establishing extended primary care teams and delivering community treatment and care, urgent care and vaccination services
Partially	There is evidence of joint working with care homes and supported accommodation to enhance their staff skills, competencies and capabilities in line with local need

Partially	Secondary care and community staff work together to provide diagnostics, assessment, treatments and care planning, in homely settings, and to jointly plan admissions and discharge
Partially	There are clearly defined and well understood pathways for professionals to use when seeking to engage others in supporting and caring for an individual whose needs they have assessed
Partially	Selected people are engaged in conversations about their future goals and preferences as their needs change, with the outcomes recorded in anticipatory care plans
Not yet	Reablement services are offered to those identified as likely to derive benefit through an assessment of their care needs
Partially	Integrated teams offer a limited amount of short-term, targeted interventions to address avoidable admissions and support discharge

3.7. **Audit Scotland Findings July 2024**

3.8. In the same period, Audit Scotland published a report on Integration Joint Boards Finance and Performance 2024. See Appendix 2a, 2b and 2c.

3.9. The IJB did a workshop on the findings of this report 09 October 2024. The following challenges for IJBs from the report were highlighted:

- A complex landscape, with unprecedented pressures
- It's getting worse despite driven and committed workforce
- No significant evidence of shifting the balance of care
- Governance complex, making planning/decision making difficult
- Whole system strategy needed
- Recruitment challenges
- Increased pressure on unpaid Carers
- Insecurity over National Care Service
- Instability of leadership
- Lack of collaboration and systematic shared learning
- Financial pressures, real terms drop of 1%
- National IJB reserves halved
- Projected funding gap for 23/24 has tripled
- No sustainable approach to balancing budgets
- Performance data quality poor and national indicators show decline in outcomes
- Commissioning driven by competition and cost rather than people's outcomes, risk to sustainability
- Health inequality gap is widening
- Reactive services, with little capacity for early intervention and prevention

3.10. Attendees at the workshop were asked to consider how we are addressing these challenges through the following questions:

- Do we have a plan?

- Are we delivering what we plan?
- Are we having an impact?
- Are these approaches successful?

3.11. Through the evidence presented it was clear that the IJB and the delivery partnership have plans and strategies for most of the challenges mentioned in the Audit Scotland report.

3.12. It was less clear that plans are being effectively delivered. This is being described nationally as ‘the implementation gap’, a common observation that is mentioned as a root cause for the lack of progress in health and social care and in particular around reducing inequalities. See The Health Foundation; ‘Leave no one behind’, Bridging the Implementation Gap, Jan 2023.

3.13. Attendees identified that Directions, the legally binding instructions that the IJB issues to the delivery partners are key to articulating how actions are to be delivered. Areas requiring more input are:

- For each service impacted by a Direction to include costings and budgets related to the service change.
- For Directions to clearly define the ambitions for delivery and expected outcomes that are reportable.

3.14. In addition, attendees were keen to discuss areas where the IJB can have more impact than the individual delivery partners could have alone, although no specific priorities were identified.

4. Conclusions

4.1 The Transformation and Innovation / Futures Committee is asked to:

- Reflect on the feedback in relation to the effectiveness of integration in Dumfries and Galloway and
- Advise on any changes to be included within the next Strategic Commissioning Plan which will support the Partnership to deliver more effective integration

5. Resource Implications

5.1 All Directions should have a robust description of the resource required to deliver the Direction. Additional corporate support resource may be required to develop robust Directions.

6. Impact on Integration Joint Board Outcomes, Priorities and Policy

6.1 Advice from the committee will have a direct influence on the development of the next Strategic Commissioning Plan.

7. Legal and Risk Implications

7.1 Any Directions issued by the IJB are legally binding documents for the delivery partners. The issuing of Directions should be at the end of a process of dialogue with the Partnership.

8. Consultation

8.1 The Strategic Planning Group discussed the effectiveness of integration at a workshop on 11 July 2024, but were not asked to propose actions for the IJB.

8.2 The IJB considered the findings of the Audit Scotland report at a workshop on 09 October 2024. No specific actions were identified.

9. Equality and Human Rights Impact Assessment

9.1 As this paper does not propose a change to Policy an Impact Assessment is not required.

10. Glossary

IJB	Integration Joint Board
SCP	Strategic Commissioning Plan
SPG	Strategic Planning Group
HACE	Health and Care Experience