# Midlothian Integration Joint Board





Thursday 29th March 2018

# **Chief Officer's Report**

Item number: 5.4

# **Executive summary**

The paper sets out the key service pressures and service developments happening across Midlothian IJB over the previous 4 weeks and looks ahead to the following 4 weeks.

#### Board members are asked to:

- 1. Note the issues and updates raised in the report
- 2. Note and approve the appointment of Jill Stacey as Chief Internal Auditor to Midlothian Integrated Joint Board

# Report

# **Chief Officer's Report**

### 1. Purpose

**1.1** This report provides a summary of the key activities within health and social care over the previous month and future key developments.

### 2. Recommendations

**2.1** To note the issues and updates raised in the report.

## 3. Background and main report

#### 3.1 Service Pressures

#### **Delayed Discharge**

As previously reported, ensuring patients are discharged from hospital when they are medically ready continues to be challenging within Midlothian. A separate report has been prepared for Midlothian IJB setting out the current position and the agreed actions to improve performance going forward.

### 3.2 Service Developments

#### **Primary Care**

The new Practice at Newtongrange is planned to open by the end of February and this represents a strong partnership between the Health & Social Care Partnership and Newbattle Medical Practice. At times of increasing pressures within primary care, the commitment from the partners and staff at Newbattle Medical Practice has been greatly appreciated and this new Practice will provide much needed capacity within the area. An official opening of the Practice will be arranged for the end of March.

#### 3.3 Quality Issues

The Quality Governance Meeting (QIT) meet quarterly to share and learn from quality issues. The meeting is chaired by the Clinical Director and ensures governance and quality improvement and shared learning. There were three issues from the most recent meeting that it was felt should be escalated to the IJB.

Springfield Bank Care Home – the home is currently being monitored under a Large Scale Investigation (LSI) as part of our Adult Support and Protection

Procedures. Their most recent Care Inspection has given them grades of 1 (unsatisfactory) across three themes, Management and Leadership, Care and Support and Staffing. They have a grade 2 (weak) for the environment theme. The LSI is leading on a multi-agency response to support the home to make improvements which will protect the residents. There is daily contact with the care home to monitor and review improvement work. We work closely with the Care Inspectorate to share information. There is currently a moratorium on admissions. A meeting with family members has been held and individual reviews are underway to ensure that people's needs are being met.

Newbyres – following a recent Care Inspection we are pleased to advise that the home has seen improvements across all four themes, with all now graded as 5 (very good). This is the first time since Newbyres opened that we have seen grades at this level and it is a testament to the manager and his team that we have seen this improvement. The service has seen a number of changes over the last couple of years including the introduction of nurses and the development of two dementia units.

Midlothian Community Hospital – in response to a request from Health Improvement Scotland to test out their inspection processes, it was agreed to volunteer MCH as a test site. Whilst not a formal inspection, it was treated as such by the service and the feedback from HIS was very positive – some key points are outlined below:

- Calm, welcoming and bright environment
- Got a real sense of the patient and their journey
- Joined up site approach with good leadership evident
- SCN took pride in their team and valued team members
- Good staff engagement with patients
- Activities showed good socialisation between staff and patients

The suggested learning points were:

- Care Rounding booklet doesn't include oral hygiene assessment
- Some care plans reviewed but when plan says 'no change' it is sometimes difficult to look back at what the original care plan stated.
- Oral supplements prescribed and signed as given but no record of how much the patient actually consumed.
- Patient's weight and MUST need to see the original scores to evidence any change

#### 3.4 Integration

#### **Recovery Hub**

Following agreement of capital costs to refurbish Dalkeith Social Work Centre to develop a recovery hub where staff from Mental Health, Substance Misuse and

Criminal Justice are co-located, work has been underway to ensure that we make best use of this opportunity to change the way that we deliver services. An engagement session was held on 7<sup>th</sup> February where service users, carers and community groups came together to talk about the service. There were 25 participants. A number of key themes raised are now being explored and developed to ensure that the building designs enables the flexible use of space as the service develops. Further consultation sessions are planned.

Staff are already working together to improve service development and a learning and development plan is near finalisation which will both improve practice and increase team cohesion.

#### **Voluntary Sector Summit**

Following discussions with the voluntary sector reference group, there was strong support for a voluntary sector summit to create a space for the third and public sectors to explore new ways of working together to make the best use of available resources. In recognising the challenges ahead and the need for transformational change, both the public sector and the third sector need to be willing to stop doing some things and use the capacity this creates to work together to start creating new asset based, community led services. The provisional date for this event is Wednesday 30 May.

#### Staffing

The wider integration of the Health & Social Care Partnership continues to progress, with the new management structure having been agreed through the appropriate governance routes within Midlothian Council and NHS Lothian. The implementation of this new structure is now underway. Further to this, the new Head of Primary Care & Older People's Services, Morag Barrow, started on 5 February and has been meeting staff and services across Midlothian.

#### Communications

Following the departure of Catherine Evan's, arrangements have been put in place to ensure ongoing engagement and communication within the Partnership. As part of this work, we will be progressing options for developing a website, logo and possible social media presence. Further information will be brought back to a future IJB for discussion and agreement.

#### **Chief Internal Auditor**

Following the joint appointment of Jill Stacey as Chief Internal Auditor across Midlothian and Scottish Borders, Jill will provide this role for Midlothian IJB. Therefore, approval is sought from the IJB in support of this appointment.

## 4 Policy Implications

**4.1** The issues outlined in this report relate to the integration of health and social care services and the delivery of policy objectives within the IJBs Strategic Plan.

## 5 Equalities Implications

**5.1** There are no specific equalities issues arising from this update report.

# **6** Resource Implications

**6.1** There are no direct resource implications arising from this report.

#### 7 Risks

**7.1** The key risks associated with the delivery of services and programmes of work are articulated and monitored by managers and, where appropriate, reflected in the risk register.

## 8 Involving People

**8.1** There continues to be ongoing engagement and involvement with key stakeholders across the Partnership to support development and delivery of services.

# 9 Background Papers

#### None

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