Midlothian Integration Joint Board





Thursday 7th December 2017, at 2.00pm

Chief Officers Report

Item number: 5.7

Executive summary

This report describes the progress being made on integration and key service developments as well as some of the significant pressures being faced by health and care in recent months.

Board members are asked to:

1. Note the issues and updates raised in the report

Report

Chief Officers Report

1. Purpose

1.1 This report provides a summary of the key activities within health and social care over the previous two months.

2. Recommendations

2.1 To note the issues and updates raised in the report

3. Background and main report

Service Pressures

3.1 Care Homes

The issue of ensuring high quality care delivery within Care Homes remains a key strand of the work within Midlothian and this has proved challenging for a number of care homes in the area. Whilst there are currently no care homes under large scale investigation (LSI), there are a number of multi-agency meetings being held to review a range of concerns and these are being managed in conjunction with the Quality Assurance Officer, Care Home Nurse Advisor and the management team from the relevant care home. This area remains under closer scrutiny and there is close working with the Care Inspectorate on a number of issues.

3.2 Care at Home

As previously reported to the IJB, care at home delivery presents a major challenge and this has been exacerbated due to one of the major providers (Aspire) handing back their contract on 26 November. This required the transition of 1,500 care hours per week to existing providers and the transfer of over 80 members of staff. This was a significant piece of work and was delivered successfully in line with the contract end date noted above. I would wish to acknowledge the excellent work by the team within Midlothian in delivering on this change process in very difficult circumstances. This incident has further highlighted the need to consider alternative models of care for the effective and sustainable delivery of care at home. The work on the new model is continuing, with engagement sessions being held with members of the public through the Hot Topics group and additional sessions with staff, carers and families. A progress report on the new model of care will be presented to the IJB in March 2018.

3.3 Delayed Discharge

Midlothian continues to perform poorly compared to previous performance in relation to delayed discharge. A major factor has been availability of packages of care, which has been driven by the contract issues as noted at 3.2. The work being progressed around a more community-based model of care will support a

more effective service model and aspects of this are already being implemented with encouraging results. We are also exploring options around what works well in other areas and staff are due to meet with East Lothian H&SCP to better understand their Hospital 2 Home model, with a view to testing this out in Midlothian. There is further work required to consider the current rehabilitation pathway within Midlothian Community Hospital, which has replaced the Liberton model. There appears to be indications that this is not working as effectively as planned, with extended lengths of stay now being experienced within Edenview Ward. A planning session is being taken forward with the clinical teams to develop and strengthen the current pathway, with the aim of reducing overall length of stay.

Service Developments

3.4 Extra Care Housing

Following the issues with the gas ingress and resulting demolition of houses at Gore Avenue, work has now started on planning the replacement housing as well as seeking to identify a site in Dalkeith for further extra care housing. These developments will build on the Cowan Court model, which places extra care housing within communities and enables care to be stepped up, avoiding the need for further house moves for the tenants.

Integration

3.5 Management Review Progress

Following a lengthy process, progress has now been made with the Management Review, with work ongoing to align the HR processes for Midlothian Council and NHS Lothian. The formal wider consultation process, as set out within NHS Lothian processes, has now concluded and staff are now being offered 1:1 meetings to discuss the implications and opportunities of the proposed management review. Similarly, Midlothian Council staff affected by the change have been formally notified. The intention is to have interviews completed during January 2018.

3.6 Approval for Recovery Hub

Funding for the development of a Recovery Hub, which will bring together mental health, substance misuse and criminal justice services, including third sector partners, has been approved by Midlothian Council. The hub reflects the wishes of people with lived experience to have better co-ordinated, easily accessible services that reduce the need to repeat their stories. The Hub will strengthen the partnership's core priorities which are to develop a more effective Recovery Integrated System of Care. Peer support through peer workers, volunteers and mentors will be an integral part of the Recovery Hub. The Care Inspectorate report on the work of the partnership noted 30 strengths, one of which was, 'It was evident that service users were offered high quality, evidence informed treatment, care and support interventions'.

3.7 Head of Primary Care and Older People's Service
Following the recent recruitment process for the appointment of the above post
and in line with the Council policy on Head of Service appointments being
agreed through Cabinet, I am delighted to report that Morag Barrow will take up
position on Monday 5 February 2018. Morag is currently Director of
Unscheduled Care at NHS 24 and previously worked with NHS Lothian.

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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