# Adult Health and Social Care Performance Report 2022/23



#### Progress in delivery of strategic outcomes

**Our Vision**: People in Midlothian are enabled to lead longer and healthier lives. **Our Values:** Right support, right time, right place.

Midlothian Integration Joint Board plan and direct the services that are delivered by Midlothian Health and Social Care Partnership (HSCP). The HSCP is a partnership between NHS Lothian and Midlothian Council and is responsible for services that help Midlothian residents to live well and get support when they need it. This includes all community health and social care services for adults in Midlothian and some hospital based services such as Accident and Emergency.

In order to meet the legal requirements of the Public Bodies (Joint Working) (Scotland) Act 2014, the HSCP was required to develop, consult on, and publish a new 3 year Strategic Plan in 2022. The new Strategic Plan for 2022-25 was published in April 2022.

**HSCP COVID-19 Response**: The Health and Social Care Partnership, its partners and the communities it services continued to be impacted by the ongoing effects of the COVID19 pandemic. A recent spike in infections over the winter months coupled with Influenza cases has caused significant pressure on our workforce due to absences. The Health and Social Care Partnership has maintained delivery of services and continues to work with its partners to ensure resources are being managed and deployed to cover staff absences where needed. The partnership continue to deliver the vaccination programme across sites in Midlothian. Midlothian Community Hospital have seen a return in face-to-face outpatient clinics. More recently, guidance around PPE has been further relaxed and there has been an indication from the World Health Organisation (WHO) that, "with great hope", the pandemic is at an end.

**Seasonal Flu/COVID Booster Programmes:** The Midlothian Vaccination Team have responsibility for all vaccinations; Seasonal Flu, all covid vaccines, shingles and pneumococcal and all unscheduled vaccines that were part of the Vaccination Transformation Programme from the GPs to the HSCP.

The Autumn/Winter 2022/23 Vaccination Programme for Flu and Covid boosters concluded on 31st March 2023. As of 31st March 2023, the uptake of flu vaccines for adults administered in Midlothian HSCP is 71% for Flu vaccines and 70% for Covid Booster vaccines.

The Community Vaccination Team continue to deliver the school flu programme and the 0-5 immunisation team deliver the 2-5 year flu programme with a 61% uptake on 31st March 2023.

Shingles and Pneumococcal vaccinations – as of 31st March 2023, Shingles vaccination uptake for Midlothian is 82% and the pneumococcal vaccination uptake for Midlothian is 78% with some second offers outstanding. This will be picked up following the spring booster vaccination programme.

The Spring Covid Booster Vaccination Programme commenced on 27th March 2023. The first two weeks have been dedicated to Care Home and House Bound patients. All eligible cohorts thereafter, 75+ and those 12+ with Weakened Immune Systems (WIS), have been invited for their vaccinations across 3 venues from 11th April 2023 – Midlothian Community Hospital, Rosewell Steading and Dalkeith Medical Practice.

As part of the ongoing inclusivity plan and to promote further uptake in line with the Scottish Government, Pop-up vaccination clinics have taken place to target areas of deprivation, areas of lower uptake, residents in homeless accommodation, those with substance misuse and those involved in the Criminal Justice System. These venues include: IKEA Edinburgh, Mayfield Community Big Dig event, local Ukrainian coffee morning, Dalkeith Library/Arts Centre and Warm Hubs in Midlothian, separate clinic sessions were held inviting individuals in homeless accommodation and Learning Disabilities teams continue to support with vaccinating their patient who are unable to attend clinics.

**Service Transformation:** Whilst there remains some pause on the work to develop a National Care Service, discussions continue around the preparation required at both Chief Social Work Officer meetings and other Social Work Scotland fora.

It should be noted that both COSLA and Social Work Scotland have requested that the Scottish Government pause on the Bill pending further consultation. Notice was provided in March 2023 that there would be a pause in NCS progression pending the outcome of the election of a new First Minister. It had been anticipated that work would restart in June 2023 but the new Minister for Social Care, Wellbeing and Sport, Maree Todd, has indicated that the debate may be pushed further back in the timetable.

**Justice:** The Justice Team have continued to deliver a range of interventions that fulfil our statutory requirements, despite managing a number of vacancies throughout the financial year. This has included making progress to implement the national outcomes outlined in the Scottish Government's <u>Vision for Justice in Scotland</u>. To ensure that we are able to provide early interventions at the Court stage we continue to liaise with colleagues locally and nationally to enable us to offer and provide a range of bail services to those resident in Midlothian. As evidenced by the updated performance measures we have made good progress against the performance indicators, despite workforce pressures and this has been supported by close partnership working to ensure that we can achieve positive outcomes for service users.

Throughout the 2022-2023 financial year the Community Justice and Safety Manager has continued to work with partner agencies (statutory and third sector) to deliver the outcomes in the 2020-2023 Community Justice Outcome and Improvement Plan (CJOIP) and to develop the forthcoming 5 year plan (2023-2028). The importance of communicating and increasing awareness and understanding of Justice and Community Justice was highlighted and during 2022-23 financial year and we worked in collaboration with media students at Edinburgh College (Dalkeith Campus) to raise awareness around the issues on topics including Hate Crime, Masculinity, Restorative Justice and Violence against Women and Girls. The project culminated in the students producing short videos highlighting the issues which were showcased at an event on 21<sup>st</sup> February 20203. This prompted detailed and positive discussions allowing sharing of knowledge & expertise between the students, professionals and others in attendance. In addition the event allowed opportunities for discussion on gaps that Midlothian Council and partners could address in the coming years to address issues and concerns together with establishing and developing partnership Feedback from the event was extremely positive with partner agencies keen to build on the work undertaken to inform learning and development within their own organisations.

**Substance Misuse:** Key services based in Number 11 in Dalkeith continued to provide services including outreach treatment, injecting equipment provision (IEP), Naloxone, and information/advice. Currently, there are challenges with recruitment. However, the Midlothian Substance Use Service continues to support and treat those individuals who are most at risk. This includes the provision of Buvidal (an injectable form of Buprenorphine).

MELDAP is in the top six ADPs in terms of the uptake of Buvidal. The national uptake is 12.5% while the MELDAP figure is 25%.

MELDAP has been advised of a provisional Green rating for Medication Assisted Treatment (MAT) Standards 1-5. MAT 1 included improved access and starting treatment on the same day as presenting. For Q4 the waiting times performance was 95%. (National standard is 90%). Midlothian is well placed to deliver MAT Standards 6 -10 by the March 2024. The Scottish Government predicts a rating of amber for these standards. This is due to the fact that Scottish Government have yet to confirm the processes and measurements associated with the delivery of these standards.

**Learning Disabilities**: Finance and Performance Group approved the recommendations of the Complex Care Expert Panel for allocation of the Community Change Fund. The key spending priorities are the recruitment to a Transition Development Worker, Improvements to Day Service Venues for people with Complex Needs, A Positive Behavioural Support Training Programme and grants to third sector organisations.

The Human Rights Expert Panel has completed its first programme of activity and has now agreed a programme of two monthly meetings for the remainder of 2023.

Building work has started on the flats at Bonnyrigg High Street and is scheduled for completion in June 2024. Designs for Primrose Lodge in Loanhead are complete, and the property is now vacant. A reapplication for capital to

fund the project was refused, and alternative sources of funding are being sought. Renovations at Teviot Court are now complete with the exception of some outside groundwork that should not affect tenants.

Numbers on the Learning Disability waiting list remain constant. Cases are prioritised based on urgency and the figures will mask the turnover of cases on the waiting list or cases that have been allocated immediately. The waiting list is regularly reviewed for any change in circumstances that will require immediate allocation.

**Older People:** Care at home: Our internal and external providers delivered 68,765 planned hours of care during this quarter. Our internal Care at Home service delivered 35% of the planned hours, and a total of 56,537 visits across Midlothian. A new Resource Manager was appointed and face to face meetings have been held with carers in each area, jointly with Union partners. Staff feedback and engagement has helped with the development of a Service Improvement Plan. Learning and Development continues to be a significant focus, with the opening of the new training suite at Hardengreen offering a local space to facilitate Moving and Handling training.

**Carers:** Unpaid carer management oversight changed to Service Manager Disabilities at the start of Q4. Work during Q3 to produce a business case and plan committing available recurring and underspent Carers Act funding continued during Q4, but the change in manager allowed the opportunity for a status check on HSCP internal funding utilisation and commitment. Carers Act funding is ring-fenced, but recognition is being given to the impact on carers and services of the wider Council/HSCP budgetary situation. Head of Adult Services has been apprised of carer funding proposals, and is working with the Service Manager and Carer Planning Officer regarding a transparent and collaborative decision making process regarding the commitment of available funds.

The Carer Planning Officer is in discussion with Alzheimer Scotland senior managers regarding the Dementia Carer Support Practitioner post. Identification of an HR issue has resulted in changes to the original /person specification, but this is resolved and can hopefully result in the post being advertised as soon as possible.

**Mental Health:** Primary Care 2022 Action 15 developments continues to be postponed still awaiting update from Scottish Government.

Individual Placement Support Occupational therapist post has been recruited into and commenced and has a triage referral caseload of 25 individuals. During Q4 up until the IPS OT commenced post it's important to note that the core Adult Mental Health OT service has been able to support the following individuals: Employment (14), Volunteering (3), and Education (17).

Continued Strong partnership working continues between Housing, Health and Social care with third sector. Providing support for individuals with complex needs, through the housing first model.

The current local Adult Mental Health Social Work Team/Mental Health Officer team comprises 4 full time Mental Health Officers (MHO), 2 trainees currently out of practice and 1 part time social worker. The team is currently progressing with the recruitment of 1 further Social Worker for the team.

Over the last year there have been various challenges in relation to workforce pressures and recruitment of MHOs. Locally we identified the need to support further development, training and retention of MHOs within the current Midlothian Social Work teams, thus enhancing the capacity to address both the Mental Health Social Work waiting list and the Welfare Guardianship Order waiting list.

As a service we addressed these challenges through the review of the current waiting list at the time, identified the local Social Work staff who were appropriate to progress with MHO training as well as having the opportunity to invest further through additional monies the recruitment of a 1 wte permanent Social Worker for the team. We were also able to proceed with the recruitment and support of one agency MHO and one casual MHO to support with progressing and reducing the Welfare Guardianship Order waiting list.

Over 2022/2023 we have successfully made a significant impact on our waiting list from 60 individual's waiting for MHO report to current waiting list being 18.

We are hopeful that once our current MHO trainees are back in practice and the new Social Worker is in post, we will be able to maintain a minimal waiting list and be reactive to WGO's, as a service we will continue to monitor the demand and waiting list on a monthly basis.

Adults with Long Term Conditions, Disability and Impairment: Awareness training sessions for relevant HSCP staff, provided by Sight Scotland are being delivered, starting in June 2023. Sight Scotland continue to provide information sessions to staff in relation to the services they provide and report back on the people they have worked with. They continue to reduce waiting lists for people requiring their service, which is offered in their community and evidence this through quarterly reporting.

Deaf Action now have a qualified Social Worker in place who has actively engaged with Social Work and Physical Disabilities Teams within the Partnership. A review of work being undertaken by CCA's at Deaf Action has taken place jointly with the Physical Disabilities Team.

Volunteers continue to uplift peoples' faulty hearing aids from their homes and deliver the aids to Midlothian Community Hospital for an Audiology technician to repair, and then return the repaired aids back to the individuals. Specially trained staff are also able to repair hearing aids for people on the same day. This service is offered both by HSCP and Red cross staff. There has been no active movement in terms of re-introducing Community Audiology Clinics as there has been no communication from the Audiology Service, despite several attempts.

The Physical Disabilities Team and Long Term Conditions Team is currently part of a joint project with the Thistle Foundation which aims to improve support provided to someone who has Neurological Condition. This is due to be evaluated in the Autumn. The Service is also in the process of reviewing its Guidelines for the provision of Aids and Adaptations with the aim that this document can be shared with members of the public to help them understand better the role and remit of the Service

Hybrid model up and running for delivery of face to face and digital for all weight management programmes. Digital devices secured for people referred so they are able to decide what options best suits their needs Improving.

**Sport and Leisure:** The Sport and Leisure Service Review is nearing completion and the new structure will be implemented from early 2023/24. Vacancies remain in the service and recruitment is continuing for these.

*ToneZone Memberships* have increased from 4103 at the start of the quarter to 4346 at the end of Q4. On return form Covid we had 3570 memberships which currently sits at 4346 (1796 less than pre Covid) however up 776 since reopening.

Factors influencing a decline in retuning customers include:

- post Covid training habits more people are inclined to use the outdoor spaces;
- delayed access in returning to facility of choice (specifically Lasswade and Newbattle);
- current cost of living;
- alternative gyms opening in the Midlothian and outside Midlothian.

The management team in Sport and Leisure are working hard to identify opportunities to increase participation, membership and income and these include:

- A Tone Zone marketing plan (£0 costs involved) is available initiatives include reduced joining and membership fees, a focus in December on fitness, free months;
- Promote all our offerings on social media platforms and via the Council Communications team regularly (43 posts about classes, 70 posts about individual centres and operational matters, 13 posts about offers such as joining fees, 20 general media type posts such as success of Ageing Well initiatives, Destination Hillend updates and Walk the Line calls for entries);
- We also promote through Active Schools (April 23) 15 tweets, 17.4K tweet impressions, 544 visits, 24 mentions and 3 new followers.

## <u>Project work</u>

We continued to undertake various project work including:

- CLLE: we have continued to work in partnership with CLLE to offer opportunities to identified young people and families;
- Daily Mile: We are continuing to work on promoting and providing support for schools to deliver this;
- Cycle fund: We have received £7522 from Scottish Cycling to purchase some bikes and organise training to allow us to deliver more cycling sessions and make cycling more accessible to all. We plan to apply for year 2 funding to expand this programme to allow us to take a more targeted approach;

• Kit for All: we have continued to develop this with Young Ambassadors driving this project. They are currently promoting the project and coordinating donation and collection of kit. This is currently running in 3 areas, with plans to expand into others.

## Secondary Schools

Work in our Secondary Schools continues:

- Young Ambassadors: Our young ambassadors have worked on various projects this term including kit for all, inter house events, Active Girls events & promotion and organisation of Lasswade Sports Personality event;
- Fit for Girls (FFG) our existing and new FFG group attended a workshop delivered by national trainers to help with planning and development of our FFG work in Midlothian.

#### Challenges and Risks

**COVID-19:** The Health and Social Care Partnership, its partners and the communities it serves continued to be impacted by the COVID 19 pandemic. The Health and Social Care Partnership has maintained delivery of services and continues to work with its partners to ensure resources are being managed and deployed to cover staff absences where needed and continue to develop our remobilisation plans. We continue to work to ensure key staff receive both the Covid and flu vaccine. The winter covid 19 vaccination programme has been completed, with plans for the spring booster programme by cohort groups planned to commence 27 March 2023

A growing and ageing population: Midlothian is the second smallest Local Authority in mainland Scotland but the fastest growing. This will continue to pose challenges for health and social care services whilst also changing some local communities. As people live for longer many more people will be living at home with frailty and/or dementia and/or multiple health conditions. An increasing number of people live on their own, and for some this will bring a risk of isolation. We have invested further in providing post-diagnostic support to people living with dementia in their own homes, particularly to those newly diagnosed. We are working hard to ensure all people diagnosed with dementia have access to a link worker for the first year post-diagnosis

**Higher rates of long-term conditions:** Managing long-term conditions is one of the biggest challenges facing health care services worldwide, with 60% of all deaths attributable to them. Older people are more susceptible to developing long-term conditions; most over 65s have two or more conditions and most over 75s have three or more conditions. People living in areas of multiple deprivation are at particular risk with, for example, a much greater likelihood of early death from heart failure. They are also likely to develop 2 or more conditions 10-15 years earlier than people living in affluent areas. Our Community Treatment and Assessment centres (ctac) continue to develop within our localities linked to our GP practices. We provide phlebotomy services Long term condition monitoring, wound management in our CTAC clinics. We plan to collaboratively develop a digital platform that engages people to access preventative support with activities of daily living (ADLs) using the LifeCurve platform to empower people to feel more in control of their own health and wellbeing. This will bring together learning and insights from several projects including the Neurological Conditions project, the Long Covid Pathway and the Integrated Falls Pathway which aim to target support for the wellbeing and symptom management of those living with long term conditions in Midlothian.

**Higher rates of mental health needs:** Many mental health problems are preventable, and almost all are treatable, so people can either fully recover or manage their conditions successfully and live fulfilling healthy lives as far as possible. The incidence of mental health issues in Midlothian, while similar to the rest of Scotland, is a concern. Living in poverty increases the likelihood of mental health problems but also mental health problems can lead to greater social exclusion and higher levels of poverty. People who have life-long mental illness are likely to die 15-20 years prematurely because of physical ill-health. Alongside more established nursing and social work services, Midlothian HSCP established the Mental Health and Resilience Service (MHARS) in August 2022. This is a 7-day per week telephone service people can access for advice and support around how they can better manage their mental health. It is self-referral and there are a range of options available post-telephone call.

**Our services are under pressure:** People place a high value on being able to access effective health services when they need them. People expect to receive high quality care services when these are needed whether as a result of age, disability, sex, gender or long term health conditions. Yet there are a number of pressures on our services. For example, we have particular pressures regarding transitions of young people with learning disabilities from childrens' to adults' services.

**Financial pressures** Financial pressures on public services are well documented. There is no doubt that we need to do things differently: the traditional approach to delivering health and care services is no longer financially sustainable. We have particular pressures in our disability services with challenges to meet complex needs in the community when in the past care settings may have been considered. In working through the IJB budget for 2023-24, we are beginning to look at how we can make efficiencies. It is likely that difficult choices may have to be made.

**Transitions from Children's Services** There is a specific pressure regarding the transition of young people from children's' to adult services (mainly with learning disabilities). There is an increasing number of young people meeting eligibility criteria for support and the number of you people with particularly complex needs also increasing. In additional to the overall financial pressure of increased support provision by adult services there are challenges related to improving the experience of transitions, Improvement work is being progressed to improve multi-agency practice in relation to transitions and embed the newly developed Principles of Good Transitions. Specific ring-fenced Learning Disability funding will be used to recruit a development worker who will be tasked specifically taking forward this work related to improving the transition pathway.

**Workforce pressures** The Covid-19 pandemic has and will continue to influence the demand for, and deployment of, the health and care workforce for the foreseeable future. There is reduced availability of staff with appropriate qualifications or skills, including General Practitioners, Social Care Workers and Staff Nurses. This impacts on service delivery and development. Whilst we continue to attempt recruitment, we acknowledge that some areas remain stubbornly difficult to recruit to. To offset this, where we can, we look to change workforce skills mix but this is not always feasible.

Our Lothian wide clinical education plans have been developed to respond to the need to develop numbers of staff working at and Advanced Practice level in nursing and AHP as part of the approach to orienting the whole system to meet modern challenges, thus enabling GPs focus on more complex work by developing the skills of the nursing and AHP workforce to undertake diagnosis and prescribing. Midlothian currently has a Pharmacy team that is fully established and has a recent history of successful recruitment. This team is deployed in GP practices supporting the principles of the 2018 GMS contract focussing on delivery of Pharmacotherapy, within the limits of the current funding allocation. Practice pharmacy teams have discussions with patients daily to ensure the safest and most appropriate use of their medicines.

**Unpaid carers** Unpaid carers fulfil significant, valuable and wide-ranging roles within Midlothian communities, helping to keep people with care and support needs within our communities. During the pandemic many people became carers for the first time, or saw changes to their caring role, resulting in them providing significantly more care for their elderly, sick or disabled family, friends and neighbours. Through this period services supporting carers continued to offer a range of support, including digitally, and by telephone, though services supporting the person they provide support to may have been reduced, e.g. respite and day services, impacting on carers. Further work is required to reduce the significant pressure and impact of caring that carers reported, by continuing to explore innovative options to enable support to be given to both carers and the cared-for, and for there to be opportunities for breaks from caring. We are currently working with key stakeholders to determine how best to allocate the resources we have for unpaid carers. We are particularly keen to see an increase in capacity of respite opportunities for both individuals and their carers.

Acute hospitals Acute hospitals are under huge pressure due to unsustainable demand and financial restrictions. Investing in community based services and work with carers is required to minimise avoidable and inappropriate admissions and facilitate earlier discharge. By treating people closer to home, or in their own home the HSCP can support admission avoidance and improve people's outcomes. Winter has seen a consistent pressure at the front doors of our hospital sites across Lothian. Midlothian HSCO community services are focusing on flow through the hospital and have invested in an umbrella of community services to embed our Home First model of care delivery. Community Respiratory Team, Rapid response team, district nursing, care at home services have been supported to increase capacity to sustain support to those within community and avoid hospital admission.

	Indicators that are On Target	Indicators that are Off Target		Laborators that are Data Only		Indicators that	have No Data Available
	26 Actions that are On Target	<b>1</b> 0 Actions that are Off Target		<b>12</b> Quarterly ASC Service All Risks		Quarterly AS	O BC Service High Risks
dult l	Health and Social Care INDICATORS Off	Target					
	Code & Title		Gauge	Value	Target	Last Update	History
•	AHSC.MPI.02 Average number of working da	iys lost due to sickness absence (cumul		21.16	10.53	Q4 2022/23	
•	AHSC.P.12.1a Number of specific activities a	vailable per site for target population.	-	582	2,450	Q4 2022/23	
•	HSCP.P.4.8a Review complete. Future mode	of delivery identified.	_	35%	100%	Q4 2022/23	
•	AHSC.P.2.1a Average wait time for occupation	nal therapy services	_	13 weeks	6 weeks	Q4 2022/23	
•	AHSC.P.10.8a Lines of communication forma	Ily agreed with all relevant agencies.	_	45%	100%	Q4 2022/23	
•	AHSC.P.6.6a Draft Dynamic Risk Tool trialled	l.	_	50%	100%	Q4 2022/23	
•	BS.ASC.S.05.05c Maintain at zero the numb	er of patients delayed in hospital for mo		6	0	Q4 2022/23	
•	xP.AHSC.4.2a Additional benefit income to N	idlothian residents identified as frail		£104,988	£150,000	2022/23	
•	ASC.SPSO.05.1 Percentage of complaints a	t stage 1 complete within 5 working days		70%	95%	Q4 2022/23	
•	AHSC.P.11.1a Complete opening and active	use of Extra Care units (including 1 bari		75%	100%	Q4 2022/23	
•	AHSC.P.11.3a Completion of 6 month pilot of	residential respite within Cowan Court		75%	100%	Q4 2022/23	
•	AHSC.P.3.3a Local Power of Attorney campa	ign delivered.		75%	100%	Q4 2022/23	
•	AHSC.P.6.4a Renovation and Remodelling c	omplete.		75%	100%	Q4 2022/23	
•	AHSC.MPI.05 % of Service PIs that are on ta	arget/ have reached their target. (does n		70.45%	90%	Q4 2022/23	
•	ASC.SPSO.05.2 Percentage of complaints a	t stage 2 complete within 20 working days		75%	95%	Q4 2022/23	
•	AHSC.MPI.03 % of service priority Actions or	n target / completed, of the total number		72.97%	90%	Q4 2022/23	
	BS.ASC.07 % of satisfactory complete Comm	nunity Payback Orders		73%	80%	Q4 2022/23	
•	AHSC.P.2.1b Average wait time for social wo	rk services		7.5 weeks	6 weeks	Q4 2022/23	
•	xP.AHSC.4.1a Number of people supported	with Cancer - Welfare Rights Service (a		233	250	Q4 2022/23	
•	ASC.SPSO.04.1 Average time in working day	s to respond to complaints at stage 1		5.8	5	Q4 2022/23	

SMP Adult Health and Social Care ACTIONS Off Target											
		Code & Title	Progress	Status	Due Date		Туре				
ഹ		AHSC.P.2.1 Reduce waiting times for occupational therapy and social work services.	30%	Overdue	31 Mar 2023	٩	Action				
Ð		AHSC.P.3.3 Support carers to be involved in future planning by developing a local po	75%	Overdue	31 Mar 2023		Action				
ഹ		AHSC.P.6.4 Develop Primrose Lodge in Loanhead into long term accommodation for	75%	Overdue	31 Mar 2023	\$	Action				
ക		AHSC.P.10.8 Establish effective links between the Physical Disability Planning Grou	45%	Overdue	31 Mar 2023	\$	Action				
ഹ		$\ensuremath{\text{AHSC.P.11.1}}$ Open and actively use the 48 new build Extra Care units (including 1 b	75%	Overdue	31 Mar 2023	\$	Action				
	+	1 of 2 →									