

Adult Health and Social Care

Quarter Three Performance Report 2021/22



Cabinet
Tuesday 08 March 2022
Item 5.2

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.

Work on the IJB Strategic Plan 2022-25 continued in Q3. In order to meet the legal requirements of the Public Bodies (Joint Working) (Scotland) Act 2014, the HSCP is required to develop, consult on, and publish a new Strategic Plan in 2022. Official consultation on the draft plan is underway. The feedback from the consultation will be considered by planning groups and required changes will be made to the plan before the final plan is submitted to the IJB in March 2022 and published by 1st April 2022.

1. HSCP COVID-19 Response

The COVID-19 pandemic brought many challenges and much disruption to the Health and Social Care Partnership, its partners and the communities it serves. There was increased anxiety and pressure on many service users, unpaid carers and staff. While challenges may have changed since 2020, they continued in 2021, and into 2022. The Omicron variant resulted in additional vaccination clinics and changed restrictions.

The top priority of the Partnership is the safety of clients, carers, communities and staff. In response to the pandemic it was important to be innovative and support clients effectively and safely. In Q3 some services again had to adapt in how they operated with, for example, changes to relative visiting arrangements and changes to service delivery, reduced face to face where feasible. Reduced opportunities for carer respite remain a concern. The Omicron variant resulted in increased staff absence – people isolating or testing positive for the COVID. This increased pressure on service delivery.

As well as presenting a tremendous challenge to services, staff and partners, the crisis also created an opportunity to build on existing and new community connections. Volunteering programmes continued and were further supported by the Partnership.

2. Seasonal Flu/COVID Booster Programmes

The COVID Booster programme for eligible residents started on Monday 27th September. Vaccinations for care home residents, children under 5 and primary school children also started. This is the first year when the Health and Social Care Partnership is leading the flu programme and has taken over this service from General Practices as part of the new GP contract. The majority of vaccinations are provided from three venues: Gorebridge Leisure Centre, Midlothian Community Hospital and Eastfield Medical Practice. The Health and Social Care Partnership also leads the ongoing COVID vaccination programme which includes Evergreen (1st and 2nd COVID doses), 12-15 years olds, 3rd dose for people who are immunosuppressed and the Booster programme.

As a result of the Omicron variant there was additional pressures on the booster programme in efforts to have people boosted before the end of the year. Additional clinic hours were arranged with increased stations and vaccinators. At full capacity a total of 9001 appointments per week were offered across both sites plus 658 for Tranche 1/evergreen. By end Q3 50,253 of all adults in Midlothian had received a booster, including 91.5% of adults over 70 years. A clinic for people with a Learning Disability was held on 08.12.21 - approximately 80 people vaccinated.

3. Service Transformation

Health and Social Care services continued to develop during Q3. This included the ongoing transformation of local service pathways to embed a Home First approach, whereby people are supported out of hospital promptly, with a greater emphasis on supporting people at home, through investment in care at home, early intervention and prevention. Data indicates that the increased capacity within the team has facilitated earlier discharge from acute hospitals although pressures on Care at Home and other services have remained.

Mental Health, Substance Misuse and Justice services continue to operate and adapt according to COVID guidelines. Work to reduce drug related deaths was progressed and will continue into Q4.

4. Justice Service

Activity during Q3 continued to focus on recovery and our response to the COVID-19 pandemic. Service delivery focused on managing individuals in the Justice system through a mixture of face-to-face and virtual meetings. This continues to be based on dynamic assessments using risk and needs to determine levels of involvement. The Justice team are continuing to design alternatives to prosecution/Court disposals. Structured Deferred Sentences offered to the Court by the Justice team have been reviewed and streamlined. Change Grow Live and Venture Trust have been identified as offering structured interventions to individuals involved in the Justice system. It is anticipated that this will increase the options for assisting with the backlog of cases within the Court system and provide better outcomes for individuals in the Justice system. Further conversations with colleagues in the Courts have progressed the design of services such as Supervised Bail and Diversion.

Q3 saw a continuation of unpaid work service users completing their hours. Supporting this is our new unpaid work supervisor who was recruited in response to addressing the backlog of unpaid work hours. The Justice team have also focused our efforts in engaging with our third sector partner organisations to look at opportunities for expanding the work placements available to our service users. A contract was agreed with Cyrenians to provide work placements in Bonnyrigg community garden. Further, a pilot project to increase training opportunities with a local college has proved beneficial to a number of individuals within the Justice System.

The Justice specific Men's service launched in September 2021. Stride is a holistic trauma-informed group for men involved in the Justice system. To support the delivery of this service, Justice identified funding to recruit a health and social care practitioner. The service has completed two rounds of group work to date with further sessions planned for early 2022. Some of the intervention delivered by Stride mirrors the work being undertaken by Spring, our women's service. Spring continues to support women and has been able to re-establish group work activities.

Our funded Peer Support Coordinator role has now been recruited to and the post holder has led two peer volunteer training programmes to date. This has increased the number of volunteer peers available within Health and Mind to support No 11 patients, clients and service users.

5. 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. Despite Covid restrictions impacting service delivery, the Midlothian Substance Use Service instigated an outreach model to those individuals who were most at risk. This includes the trialling of Buvidal [an injectable form of Buprenorphine].

There continues to be concerns about the availability in some communities of what would appear to be illicit Diazepam tablets and also Etizolam and Alprazolam [Xanax] whose quality is variable but would appear to be much stronger. These tablets are likely to be used in conjunction with other drugs [poly drug use] increasing the level of risk. Alerts and Intelligence continue to be shared between Police Scotland, MELDAP and Drug Treatment and Support services to ensure that officers/workers had information to support harm minimisation information and support to people who use drugs. MELDAP services have developed and distributed electronic and other versions of information highlighting the risks caused by poly drug use. MELDAP services continue to provide data packages, basic smart phones and tablets to those individuals as part of impacting the digital inequalities agenda. The partnership intends to continue this work for the rest of 2021/22. All MELDAP services are continuing to provide the Covid driven practice developments that have proven useful to their clients/patients as restrictions ease. One particular area is providing a blended care approach of one to one engagement augmented with the use of digital/phone platforms according to choice and need.

6. Digital

Technology offers a range of tools to support pathway and service redesign in terms of both iterative improvements and transformative initiatives. We continued to proactively engage with the emerging digital agenda in Scotland to maximise the value that technology, in all its forms, can add. With the inauguration of a new Digital Governance Group within our structure we anticipate improved planning and resourcing of projects (internally) which connect effort across the partnership. Furthermore, we hope to be able to present a united front to and for our key business partners with regard to digital development planning and to support prioritisation. We need to consider how services are designed and incorporate technology, therefore, as the HSCP supports development of the next IJB strategic Plan, we are positioning Digital as an enabler of transformation rather than a service or resource to demonstrate the paradigm shift required to deliver digital transformation.

7. Learning Disabilities

Implementation of a framework for providing positive behavioural support within Midlothian has been completed and continues to receive support from all stakeholders. Implementation has been impacted by COVID19, but the steering

group has now reconvened and training at levels one and two is underway and the pathway has been updated. Work with People First to produce a video from a service users' perspective to be used in staff training has been delayed as a consequence of the new guidelines responding to the Omicron variant. Two services are piloting a quality framework aimed at improving the quality of care for service users. PBS Pathway now in use within Community Learning Disability Team.

The project to review and redesign Day Services to reduce costs including transport continues as part of the COVID-19 Remobilisation Plan with a focus on re-establishing and building up centre based services supplemented by home based, community based, and on line models of support. Progress is contingent on further national guidance.

Buildings based services are further limited by the risk associated with the COVID 19 Omicron variant. Model for Day Service transport and retender of the taxi contract agreed by Senior Management Team and tender will be issued when restrictions on shared taxi transport are relaxed.

Work continues to progress plans in relation to housing, both short term by making best use of the property available and longer term by ensuring needs as considered as part of the Phase 3 Housing Programme. Bonnyrigg High Street site scheduled for completion Mid 2023. Designs for Primrose Lodge in Loanhead are complete but still awaiting availability of the property.

8. Older People

Extra Care Housing: As with many other areas, Midlothian faces many challenges in addressing the housing and care needs of an ageing population with increasingly complex requirements. Extra Care Housing is a model of accommodation and care that supports people to live in their own tenancy. Work was progressed on 3 sites (Dalkeith, Bonnyrigg and Gorebridge) to provide 106 ECH bungalows or flats. Timescales were impacted by Covid 19 but completion dates are still estimated as late 2022 (Dalkeith) and late 2023 (Bonnyrigg and Gorebridge).

Care Homes: Midlothian has 10 older people's care homes, 2 of which are HSCP run with one being an intermediate care facility. The remaining 8 are privately run either by private companies, charitable organisations or independent care homes. Health Boards and local Health and Social Care Partnerships continue to carry responsibilities for the clinical and professional oversight of the care provided to people resident in care homes in line with the Scottish Government guidelines (May 2020).

The Care Home Support Team has provided substantial support to care homes for older people to address the challenges faced throughout the Covid-19 pandemic. Examples include the provision of direct support to meet staffing challenges, input to meet the complex care needs of individual residents, vaccination, testing of staff and residents, support with the reintroduction of visiting and providing practical and emotional support to staff affected by the impacts of the loss of residents in unprecedented numbers.

Care at Home: Care at Home continues to be a key contributor to the HSCP vision for people to receive the right care in the right place; in their home and community as far as possible. It supports efforts to reduce length of hospital stay, as well as admission avoidance. Care at Home is currently provided by the HSCP and external providers. Midlothian experienced significant pressures within Care at Home services over the last 9 months. This was in line with the national challenges to recruit care staff. Despite this pressure, Care at Home worked hard to ensure packages of care continued to be delivered. On 1st September new contracts were awarded to external Care at Home providers. Work has been ongoing with the new providers in order to implement the contracts effectively.

9. Carers

Payment of carer additional resource allocations to community partners has been delayed; significant work demand on internal teams supporting this work as a result of recent staff departures. Despite considerable effort to initiate a residential respite resource within Cowan Court, this was not achievable during Q3 due to late notice staff recruitment withdrawals. Staffing issues have since been remedied and it is anticipated that offers of respite will be offered imminently. Respite for older people remains a particular challenge, but the Short Breaks funding that is provided by the HSCP and distributed by VOCAL remains in significant demand, so much so that funding for the year has been allocated, and the HSCP propose additional support for use in Q4. Changes to Carers Act regulations regarding Adult Carer Support Plans which came into effect during later summer 2021 are about to be implemented in local practice. The development of staff guidance and support plans forms have been developed for use after final consultation with Team Leader.

10. Mental Health

The Mental Health Strategic Planning group developed the Mental Health Action Plan reflecting the priorities set out in the Midlothian HSCP Strategic Plan. Primary Care Mental Health Nurses are now in 12 practices across Midlothian and we have appointed to the OT role to supplement the service. Evaluation of the impact of primary care nurses is ongoing and is a blend of quantitative and qualitative data. Current findings are positive.

Individual Placement Support has been impacted by Covid 19 however the service is providing assessment and support to 8 individuals who are seeking employment and/or Further Education.

The recommissioning of community mental health and wellbeing supports currently delivered by Health in Mind is now delivering services across new community venues across Midlothian for one-to-one meetings and group work as well as delivery of the Midlothian Access Point and our substance use support services.

11. Adults with Long Term Conditions, Disability and Impairment

Awareness training sessions for HSCP staff, provided by Deaf Action and Sight Scotland have also not been possible due to the pandemic and training over Zoom or Teams cannot provide practical, hands on training. Work has commenced with Sight Scotland to provide information sessions to staff in relation to the services they provide.

In response to the closure to the public of the Audiology Department due to Covid restrictions volunteers continue to uplift peoples' faulty hearing aids from their homes and delivered the aids to Midlothian Community Hospital for an Audiology technician to repair, and then return the repaired aids back to the individuals.

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.

Midlothian HSCP commenced work on Improving the Cancer Journey (ICJ) during 2021. ICJ is a partnership between Macmillan and the four Lothian Health and Social Care Partnerships. Midlothian Council hosts the Programme on behalf of the four HSCPs. The ICJ Programme aims to meet the non-clinical needs of people living with cancer; it promotes self-management and person-centred solutions. The service in Midlothian has strong links with the Wellbeing Service in GP practices and the MacMillan Welfare Rights Advisor in the Welfare Rights Team. Since going live in April 2021, 58 people have accessed the ICJ service and have completed initial assessments, with 12 of these also completing the 12 week review. Our aspiration by the end of our first year of being operational is to reach 30% of newly diagnosed people, which for Midlothian means 161 people. While referrals have been slow, the pace is increasing and local promotion has started, which was not possible before the official service launch in November. SIMD data indicates that the ICJ service has good reach with 48% of people using the service from SIMD 1 & 2. Referrals are mainly from Clinical Nurse Specialists, but Midlothian benefits from good engagement with third sector services, in particular VOCAL, Red Cross, Thistle and MELD.

12. Sport and Leisure

Following the move to "beyond Level 0" Sport and Leisure operations have continued to move towards pre-covid operations, however there are still significant challenges related to the pandemic.

The ongoing restrictions around schools has resulted in the continued closure to the public of Newbattle Community Campus and The Lasswade Centre during school hours, leaving only weekday evenings and weekends for Sport & Leisure operations. Gorebridge Leisure Centre continues to be utilised as a mass vaccination centre, now administering the Flu vaccine in addition to Covid vaccinations, and will continue to do so until at least 31/03/2022.

Newtongrange Leisure Centre had been utilised to accommodate Midlothian residents with pre-existing health conditions who access the Midlothian Active Choices (MAC) and Ageing Well programmes to provide safe, specific support to that vulnerable client group. However as a result of the Newbattle restrictions and use of Gorebridge for non S&L activities this dedicated use of Newtongrange has had to cease to allow other members of the public access to leisure facilities during the day in their local community. This has led to a drop in the usage by some MAC members who still hold concerns regarding Covid and the safety of mixing with the wider community due to their vulnerable health and wellbeing.

The Ageing Well programme of activities is nearly back to pre-covid levels in terms of the range of activities on offer. Participation and volunteering levels have been good but there has been an inevitable turnover of participants who cannot or who do not yet wish to return and the case is the same for volunteers, however the resumption of a much fuller programme has also seen a good number of new participants and volunteers access the project.

Sport & Leisure Services has supported Midlothian HSCP colleagues in delivering Flu Vaccination clinics and Let's Prevent, the Type 2 diabetes prevention programme by accommodating and integrating those services within Sport & Leisure facilities and programmes. Sport & Leisure Services via its Ageing Well and MAC programmes is directly involved in the Falls Prevention strategy and pathways for those experiencing or at risk of falls. The MAC team have also resumed delivery of the Tier 2 Weight Management Programme at Newtongrange Leisure Centre. Delivery is not back to pre-covid levels due to staff vacancies and facility availability at Newbattle and Lasswade centres however virtual delivery is due to commence in Q4.

Sport & Leisure services will continue to develop its digital capabilities including an expanded role out of online booking and advance payment for all activities, online fitness classes and activities as well as deploying digital platforms such as MS Teams for internal and external communication and workforce training and development.

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. Covid continued to influence how the HSCP delivered core services, it impacted on staff absence and deployment, and it required additional resource, for example to deliver vaccination clinics, coordinate staff testing for HSCP and other staff, and manage PPE provision locally.

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.

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.

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.

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.

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.

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. Mass vaccination programmes and other large scale recruitment programmes related to COVID 19 have increased pressure on already stretched resource.

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.

Review of Adult Social Care

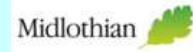
The Independent Review of Adult Social Care (published in February 2021) was set up to recommend improvements to adult social care in Scotland. It looked at these in terms of the outcomes for people who use services, their carers and families and the experience of those working in the sector. There are likely to be significant changes to care services as a result of this review.

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.

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.

Adult, Health and Social Care



Successes and Challenges

