

Adult Health and Social Care Performance Report Quarter One 2021/22



01. 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.

The Midlothian Health and Social Care Partnership 2019-22 Strategic Plan outlines our programme of activity focused on prevention and early intervention; planned support, treatment and recovery; and unplanned treatment and support. We are achieving this by changing the emphasis of our services, placing more importance and a greater proportion of our resources on our key values. Many voluntary sector and independent providers work with the Partnership to deliver our objectives. The Midlothian Health and Social Care Partnership (HSCP) has continued to implement the ambitions of the Strategic Plan against the challenging impact of the COVID-19 pandemic.

1. Integration

The COVID-19 pandemic continued to bring many challenges to the Health and Social Care Partnership, its partners and the communities it serves. The vaccination programme continued to expand with various community venues being established, including Gorebridge Leisure Centre. In addition bespoke vaccination clinics were established, for example clinics for people in homeless accommodation and for people with a learning disability. Community based testing also expanded and testing in health and social care settings, including care homes continued.

Care Homes and other services areas continued to receive support and advice as they managed the safety of people, communities and staff. Services continued to support clients effectively and safely during this time. Staff continued to see people face-to-face where this was clinically essential, but in order to reduce face-to-face contact, where feasible, teams adapted how they delivered services. The provision of personal protective equipment (PPE) and staff testing evolved but continued to be led by the Partnership.

2. Service Transformation

Health and Social Care services continued to develop during Q1. This included the ongoing transformation of local service pathways to support people to stay at home as opposed to hospital. This included service developments to support people out of hospital as soon as they are considered fit for discharge such as the Discharge to Assess Team and the redesign of Care at Home Service contracts. It also included service improvement to support people to avoid a hospital admission such as the Community Respiratory Team and Care Home Support Team.

Substance Misuse and Justice services continued to operate and adapt according to COVID guidelines.

3. Justice Service

Activity during Q1 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. Diversion, Structured Deferred Sentences and Supervise Bail are all being considered in relation to new areas of practice for the Midlothian team. 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. We hope to see these new areas of practice in place by September 2021.

Q1 saw a return of unpaid work service users completing their hours. Supporting this is our new unpaid work supervisor who was recruited to 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. It is hoped to include placements in community gardens, increased training opportunities with a local college and placements in a community hub supporting one of the most deprived areas of Midlothian.

The Justice specific Men's service is progressing in its development. The holistic trauma-informed group for men is due to start in August. To support the delivery of this service, Justice identified funding to recruit a health and social care practitioner. Some of the work of this service 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 Co-ordinator post was previously reviewed in relation to the role and remit with a clear focus being given to the

development of a pathway for volunteer peer supporters to form a network for services within Number 11. Recruitment to this post is being taken forward by Health in Mind and Justice.

4. Substance Misuse

Key services based in Number 11 in Dalkeith continued to provide services including outreach treatment, injecting equipment provision [IEP], naloxone, information/advice and door step deliveries of Opiate Substitute therapy [OST] and other medication to those requiring this support within Scottish Government guidance. Despite Covid restrictions impacting service delivery the Midlothian Substance Misuse 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 were [and are] 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 has provided Police colleagues with credit card sized information cards with information on available treatment and support services. Police are issuing these when appropriate to do so. MELDAP services are developing 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 in 2021/22. MELDAP has requested that all services consider what learning and practice developments driven by the Covid pandemic need to continue 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.

5. Technology

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.

6. 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.

The project to review and redesign Day Services to reduce costs including transport is now being progressed as part of the COVID-19 Remobilisation Plan with a focus on re-establishing and building up centre based services within the restriction of current guidance and supplemented by home based, community based, and on line using new models of support. Analysis of Day Service transport and retender of the taxi contract has started.

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 late 2022. Primrose Lodge in Loanhead plans complete.

7. Older People

Older People's services have continued to see an increase in referrals as an impact of COVID-19. The impacts of carer stress, isolation and lack of physical activity on older people's health and wellbeing continue to be of concern as restrictions ease. Mental health referrals have increased, along with Adult Support and Protection referrals relating to financial harm. As unpaid carers return to work there are an increasing number of referrals for urgent assessment for packages of care or admission to care. This is likely to increase further.

Some day care and day support services have reopened. The Bungalow, operated by Alzheimer's Scotland, opened to a limited number of clients with dementia on Tuesday 6th April. St Davids Day Centre has also reopened also with limited capacity and over fewer days. The Grassy Riggs hub has reopened for organised groups, rather than for drop ins. Broomhill Day Centre plan to open in September. The third sector continue to support individuals and their families in the community through creative alternatives and increasingly through direct face to face support. This is continually reviewed through the Older People's Planning Group.

The Care Home Support Team are beginning to focus on educational programmes and improvement support, including rolling out the Restore2 Toolkit, and improving Anticipatory Care Planning. Care homes are committed to working with all partners to maintain high standards of infection control and compliance while providing a homely and stimulating environment for residents.

Plans for the development of Extra Care Housing complexes across three sites in Midlothian is ongoing with Spring 2023 proposed for completion.

A review of intermediate care and rehab services is underway to improve pathways and ensure individuals receive the right care in the right place at the right time, implementing the Home First principles, as agreed by NHS Lothian.

8. Carers

Following the review and recommissioning process during 2020/21 which had been slightly delayed by the pandemic, Q1 (2021/22) was the extension period of the existing contracts. During Q1 the new contracts were prepared and finalised in preparation for beginning 1st July 2021. Staff TUPE has taken place, and a reporting schedule and monitoring and evaluation framework is being agreed between the HSCP and VOCAL.

The Scottish Government recently announced a significant additional resource for carers for 2021/2022. This announcement and budget was announced at the end point of recent recommissioning. In discussion with the Carers Strategic Planning Group it was agreed that a series of workshops to support collaborative discussions would help decide on priorities, to be shared with the IJB in August. The first workshop took place in June, with proposals submitted under the themes of: strengthening existing service; identifying and addressing gaps; areas of innovation; use of underspend from Q1, 2021/22. Feedback will be collated, and shared with the IJB.

A draft Midlothian Carers Strategy has been shared with the planning group for feedback by mid July.

9. 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 and the role of OT is being recruited to supplement the service. Evaluation of the impact of primary care nurses is being developed.

Midlothian Access Point has re-started and people can access the service directly via email and then will be allocated an assessment.

Recommissioning of community mental health and wellbeing supports currently delivered by Health in Mind has been concluded; this involved key stakeholders staff and third sector colleagues working across the HSCP, as well as consultation with people who use services through a paper questionnaire, online survey monkey, focus groups and individual interviews. New contracts will commence 1st July 2021.

10. Adults with Long Term Conditions, Disability and Impairment

It has not been possible to progress the creation of Audiology clinics in the Midlothian Community Hospital due to the pandemic. This has, however, brought an opportunity to look at potential new technologies which could facilitate more local provision.

Awareness training sessions for HSCP staff, provided by Deaf Action and The Royal National Institute of Blind People (RNIB) have also not been possible due to the pandemic and training over Zoom or Teams cannot provide practical, hands on training.

In response to the closure to the public of the Audiology Department due to Covid restrictions, we recruited volunteers 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.

ICJ Midlothian went live March 2021 with a soft start. The person-centred approach is focused on providing support to those living with, or previously affected by cancer, and help develop an understanding of their needs. During Q1 key tasks in terms of managing referrals by phone and email, contacting people to make appointments and developing efficient processes to ensure people affected by cancer have progressed well. As of 18th June, there had been 25 referrals to the service. Of these, one person has declined and no health needs assessment was completed. 18 are now completed while the remaining are in progress.

11. Sport and Leisure

Sport & Leisure Services resumed operations at sites on a phased basis from 31st August 2020 with the exception of Newbattle and Lasswade Leisure centres who remain on reduced opening hours due to being co-located on a school campus. This is in line with Scottish Government guidance. COVID-19 restrictions are in place to protect the public and staff members. Community sport and activity clubs and other external lets have resumed where the current guidance, facility availability and reasonable Covid modifications has allowed.

Newtongrange Leisure Centre has 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. Tier 2 weight adult weight management (Get Moving with Counterweight) and paediatric weight management (Get Going) courses are scheduled to resume when Covid restrictions allow.

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.

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.

Lockdown #2 during Q4 resulted in the closing of all Sport & Leisure sites and activities and the redeployment of staff to support critical services across the Council and Health & Social Care Partnership including Care Homes, Schools, Roads Services, IT Services, Housing and Homelessness, General Admin, Vaccination rollout, PPE Hub, and In School LFD testing pilot.

Sport and Leisure reopened following Lockdown #2 on 26th April 2021 under Level 3 restrictions which affected capacities, bookings, cleaning and distancing procedures etc as pre-lockdown. Adult fitness classes resumed on 17th May 2021 following movement into Level 2 restrictions and were ongoing for the remainder of Q1.

02. Challenges and Risks

Q1 21/22:

COVID-19

The challenges of the COVID-19 pandemic continues to impact the Health and Social Care Partnership, its partners and the communities it serves. Increased anxiety and pressure on many service users, unpaid carers and staff will be evident for the foreseeable future. Covid will continue to influence how the HSCP delivers core services, works with partners and communities and develops the workforce. In addition the Partnership will continue to adapt to deliver Covid related services, such as vaccination clinics.

A growing and ageing population

We are 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, 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. How the workforce interacts with people has also changed with an increased use of digital or telephone appointments. The Scottish Government has requested that IJBs develop a 3 year Workforce Plan no later than 31st March 2022. An interim workforce plan was submitted to the Scottish Government in April 2021 to cover the period from April 2021 to March 2022 setting out a cohesive picture of our workforce across the Partnership.

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 have become carers for the first time, or seen 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 Community services supporting carers have 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, resulting in an impact on carers. It is essential that we work to reduce the significant pressure and impact of caring that carers report feeling, 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 leading to caring being more sustainable. We are constantly looking for ways to offer respite and support to reduce the stress and impact of caring.

Acute hospitals

Acute hospitals are under huge pressure due to unsustainable demand and financial restrictions. We need to invest in community based and work with carers alternatives that will minimise avoidable and inappropriate admissions and facilitate earlier discharge. By treating people closer to home, or in their own home we can support admission avoidance and improve patient outcomes.

Adult, Health and Social Care

Successes and Challenges

Corporate Performance Indicators (latest)

● 5 ● 7 ? 1 ? 8

Service Plan Actions (latest)

▲ 2 ● 33 ? 0

Service Plan PIs (latest)

● 6 ● 24 ? 1 ? 15

Service Risks (latest)

▲ 2

Corporate PIs Off Target

PIs ● 5

% of invoices paid within 30 days of invoice receipt (cumulative)

% of Service PIs that are on target/ have reached their target. (does not include Corporate PIs)

% of internal/external audit actions progressing on target or complete this quarter.

Average time in working days to respond to complaints at stage 1

Percentage of complaints at stage 1 complete within 5 working days

Service Plan Actions Off Target

Actions ▲ 2

Improve awareness and understanding of sensory impairment among HSCP staff and partners by delivering training with RNIB and Deaf Action.

Reduce waiting times for occupational therapy and social work services.

Service Plan PIs Off Target

PIs ● 6

Number of people receiving the Wellbeing Service across all 12 GP practices

Average wait time for occupational therapy services

Average wait time for social work services

Number of carers accessing short breaks through VOCAL Wee Breaks Service (cumulative)

Number of stress control classes run in community venues.

Number of individuals referred through the Safe and Together approach.

High Risks

Risks ▲ 2

COVID 19

Meeting growing demands with constrained /reduced budgets, especially from external funders.

Key
PIs

- Off Target
- On Target
- ? Data Only
- ? Data Not Yet Available

Key
Actions

- ▲ Off Target
- On Target/Complete
- ? Data Not Yet Available

Key
PIs

- Off Target
- On Target
- ? Data Only
- ? Data Not Yet Available

Key
Risks

- ▲ High Risk/Medium Risk
- ? Data Not Yet Available