

Adult Health and Social Care Performance Report Quarter Two 2020/21



01. Progress in delivery of strategic outcomes

"People in Midlothian will lead longer and healthier lives by getting the right advice, care, and support, in the right place, at the right time."

The Midlothian Health and Social Care Partnership 2019-22 Strategic Plan outlines a major 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.

Aligned to Midlothian Council's covid recovery route map the Midlothian Health and Social Care Partnership has put in place a 'Remobilisation Plan'. The plan sets out an ambitious four-phase approach and sets out our recovery priorities.

1. Integration

Midlothian Health and Social Care Partnership (HSCP) is progressing work to implement the ambitions of the Strategic Plan while managing the impact of the COVID-19 pandemic. The Remobilisation Plan priorities in Q2 included reinstating care home visiting, continued support to people who were shielding, launch of a GP publicity campaign to encourage self-management, and increased digital options for people to access support and implementation of a detailed recovery action plan locally.

The scale of the pandemic resulted in Midlothian Council and the Midlothian Community Planning Partnership devoting much of their time and collective resources to responding to the welfare needs of the population. Midlothian Health and Social Care Partnership established a dedicated COVID Team that reported daily to its Senior Management Team. This team kept staff within the HSCP informed of developments and sources of advice and assistance on such matters as personal protection equipment.

A Working Group, involving representatives from Volunteer Midlothian, Communities and Life Long Learning Service, and the Midlothian HSCP, was established and it created a suite of guidance on volunteering for front-line community responders, and for distance volunteering (e.g. telephone befriending). Midlothian HSCP subsequently made a commitment to volunteering and agreed to recruit a Volunteer Service Manager.

The Shielding Team continued to support people until the end of August. This team was established to provide support and services to people who were shielding (approximately 3,000) as a consequence of underlying health conditions. This support included referring 'shielders' to the hubs and community groups for support with shopping, food and prescriptions.

2. Inequalities

Health and Social Care services remain committed to contributing to reduce health inequalities. Local people, the third sector, public sector and private sector created a plan to prevent type 2 diabetes.

Some programmes to support people most vulnerable to health and other inequalities continued during Q2, others were delayed as a result of the pandemic. Support to people in homeless accommodation was delivered in a different way but did continue, as did support to people engaged with mental health, substance misuse, and social work and justice services. Some programmes, such as the one involving pregnant women who smoke, and the Type 2 Diabetes prevention work was delayed in Q2 until early September.

3. Justice Service

The 2019/20 financial year saw a new approach taken to the delivery of unpaid work in Midlothian. The team work alongside community groups and organisations to undertake a variety of projects that have sought to promote clients' engagement in their communities whilst making reparation (payback) to those communities who experience the highest levels of crime and anti-social behaviour.

This has been a significant change in the practice of the team and developing and maintaining the close working relationships with community groups has allowed the Justice team to support these organisations and communities as they started to deal with the impact of COVID19 in March 2020. The team supported the establishment of food

services providing hot food to the most vulnerable in the community and also assisted by delivering hot food and food parcels and in supplying food by transporting donated food from supermarkets.

There is now an established pathway created for people who do Peer Support Training and are interested in volunteering. Next steps include looking into providing Scottish Vocational Qualifications (SVQ's) to support people into employment. Further, the Peer Support Development Worker is working in partnership with HMP Edinburgh to develop peer support in the prison for Midlothian men and women. The plan is to build a supportive relationship during their sentence, identify barriers prior to release (e.g. benefits, housing, bank account, photo identification, prescriptions), and aid a smooth transition back into the community. This service will also be available to those on remand who currently cannot access support services.

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 shielding or self-isolating through both the initial lockdown period and the subsequent months. Despite Covid restrictions impacting service delivery the Midlothian Substance Misuse service instigated an outreach model to those individuals who were most at risk both current patients in service and also offering support and treatment to those individuals identified who were not currently in service. This is over and above the patients normally seen through other aspects of service delivery.

In the early phases of lockdown, there appeared to be a potential risk that as normal drugs of choice became more scarce or expensive that people may turn to other available substances whether they are safe or not. As a consequence Midlothian and East Lothian Drug and Alcohol Partnership (MELDAP) issued information regarding a "Stick don't Twist" leaflet, advising people who use drugs to keep to known patterns of drug use.

In July/August, there were 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 created a specific multi-agency group which includes people with lived experience to examine a range of issues around the use of diazepam and illicit benzodiazepines.

5. Technology

Technology offers a range of tools to support pathway and service redesign in terms of both iterative improvements and transformative initiatives. We continue to proactively engage with the emerging digital agenda in Scotland to maximise the value that technology, in all its forms, can add. COVID19 brought forward the NHS Lothian rollout of NHS Near Me video conferencing and supported by a dedicated project team. Access to this channel is now widely available with multiple services signed up. Embedding the channel into the service TrakCare eWorkflow becomes the new challenge. This is a pan Lothian challenge and the central Trak team are seeking Board support for resources. We await notification from eHealth regarding next steps.

Issues securing resources to implement the necessary technical changes to enable safe data sharing from Midlothian Council to NHS Lothian (both eHealth and Digital Services) and finalising information security remain, but we have found an acceptable interim solution by sharing anonymised/ pseudonymised and/or aggregate data. We continue to pursue and explore options to progress incrementally. COVID19 has changed priorities and pressures in the central Trak team in the development of improved informatics for MERRIT. The changes we would have been seeking are now needed across most services in Lothian and resourcing this is being considered by NHS Lothian eHealth Board. Our needs and aspirations have been voiced with the team and they are aware that we remain keen for these changes.

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 the training subgroup will reconvene early November.

The project to review and redesign day services to reduce costs including transport was suspended due to COVID19. This is now being progressed as part of the 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.

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. Despite COVID there has been significant progress at the Bonnyrigg High Street site and Primrose Lodge in Loanhead.

7. Older People

Older Peoples services have seen an increase in referrals across most services as an impact of COVID19. There has been an increase of around 15% to referrals to the Social Work duty team, an increase in the number of unpaid carers looking after an older person seeking support through VOCAL, and increase in demand for Care and Home services, and an increase in the number of crisis/emergency situations due to some older people's services still remaining closed. Day care and respite services remain closed, however plans are in place to attempt to re-establish these to provide some respite/short break to individuals and their unpaid carers.

The care home support team have commenced the flu vaccination programme with the residents in the care homes and once the residents are complete they will vaccinate all staff. This has been welcomed by the care homes and supported by the GP practices. The care homes have been highly effective and resilient in keeping Covid out of the homes in the second quarter. They are highly committed to work with all partners to maintain high standards of infection control and compliance while providing a homely and stimulating environment for all residents.

Plans for the development of extra care housing complexes across three sites in Midlothian is ongoing with Spring 2022 proposed for completion. A review of Intermediate care and rehab services is underway to review and explore improved pathways for individuals ensuring they receive the right care in the right place at the right time. The third sector continue to support individuals and their families in the community and have been creative in identifying other means of support through weekly telephone calls, meals delivery service, newsletters and technology enable care to keep people, connected as an alternative to face to face support that has been suspended due to Covid. This is continually reviewed through the older people's planning group which has been meeting on a 4 weekly basis and attendance has been particularly high.

8. Carers

Since implementation of the Carers Act in April 2018, there have been considerable changes in funding, service demand, legislative requirements and duties on Local Authorities and Health Boards. Existing carer support contracts have been in place for a number of years, and it was assessed that in light of the significant changes in the unpaid legislative landscape combined with the contract of the main services provider coming to an end (March 2020), that a period of review and consultation leading to recommissioning of services was necessary to best serve carers moving forward. Agreement to this process was sought from and agreed by the Contracts and Commissioning Group; enabling a one year extension to existing contracts (due to end March 2020) to facilitate this process. Actions to follow through on this work began in Q4 2019/20, with a schedule of review, consultation and procurement through 2020/21; new contracts planned for April 2021. Due to the impact of the pandemic in early 2020, the timescale for completion of the work required to be adjusted, with timescales revised for new contracts to begin in July 2021. The consultation phase has recently ended and we are in the process of reviewing the data and drawing up the service specification of the new contracts. Tender will be opened at the beginning of January 2021 (Q4), with new services starting in July 2021.

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 in 11 practices and from the end of November all 12 practices will have a Primary Care Mental Health Nurse. Evaluation of the impact of primary care nurses is being developed.

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

In September consultation on the recommissioning of community mental health and wellbeing supports currently delivered by Health in Mind started; 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. The consultation for people who use services was facilitated by CAPS Independent Advocacy. A working group is developing the service specifications for commissioned mental health and wellbeing services and supports. The Invitation to Tender will be issued in January 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 current closure to the public of the Audiology Department due to Covid, we have recruited volunteers to uplift peoples' faulty hearing aids from their homes. They will deliver the aids to Midlothian Community

Hospital (MCH) for an Audiology technician to repair, and then return the repaired aids back to the individuals. This service is due to start on 27th October.

11. Sport and Leisure

Sport & Leisure Services resumed operations at all sites on a phased basis from 31st August 2020 in line with Scottish Government guidelines. COVID19 restrictions are in place to protect the public and staff members, these include staggered activity start and finish times, all sessions are required to be booked and paid in advance online or by phone, limited capacities in each activity and the generic physical distancing, hand sanitising and use of face covering practices that are the norm in most public spaces. 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 at the end of October should 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.

The Adult, Health and Social Care Service Plan for 2020-21 was updated in September 2020 to reflect the Partnerships Covid Recovery Strategy. The HSCP Remobilisation plan is aligned to Midlothian Council's Route map and the Nesta recommendations. Our performance measures were reviewed and revised as part of this exercise. In summary the changes included:

Service Priority: Health Inequalities

PI target reduced for the number of people who will receive a health assessment from the Community Health Inequalities Team as this will now be done online.

Service Priority: Carers

PI target reverted back to data only for the number of Carers receiving an adult carer support plan of their care needs by Adult Social Care. Limited face to face contact impacted numbers for the foreseeable, and the move to critical service delivery only.

Service Priority: Older People

The action to develop and deliver a pilot for Roaming Day Care in partnership with Volunteer Midlothian has been removed. This pilot is currently on hold.

The PI target for the number of people attending activity groups hosted by Ageing Well was amended to reflect the operational return from Covid 19 restrictions to accommodate the months left to operate.

The Action and associated PIs to increase community awareness of extra care housing was replaced with an Action and PIs on consulting with extra care housing tenants re the impact of Covid-19 on their health and wellbeing and identify common themes of concern around future engagement in one to one, group or wider community settings to aid future extra care housing service planning.

Service Priority: Mental Health

PI target reduced for the number of people (per annum) in employment or education following intervention to accommodate change in practice.

PI target reduced for the number of stress control classes run in community venues to accommodate change in practice.

Service Priority: Substance Misuse

New action introduced to run a pilot of an online SMART recovery group for veterans to increase the range of treatment and recovery interventions.

Service Priority: Adults with long term conditions, physical disabilities and sensory impairment

PI target reduced for the number of people assessed by weight management triage to accommodate change in practice.

Action deleted to put in place a housing group to determine how to increase choice, numbers and accessibility to increase the availability of suitable housing. Given the current circumstances, this group has been put on hold. Contributions have been made however, to related consultations, both national and local, therefore, a new action has been introduced on the contribution to both national and local consultations to support an increase in the accessibility and availability of suitable housing.

Service Priority: Digital

Actions amended to reflect a change in priorities and pressures due to Covid19 which has brought forward and embedded a number of digital enhancements. Actions revised to focus on supporting NHS Lothian to continue channel shift and support services to maintain and adopt new digital working practices as part of remobilisation arrangements.

Service Priority: Learning Disability

Data only PI removed for the number of people with autism engaged in day activities due to Covid19 restrictions.

Data only PI removed for the number of practitioners trained on positive behavioural support as part of a programme of positive behavioural support in Midlothian as formal training has been postponed due to Covid19 restrictions.

02. Challenges and Risks

COVID-19

The impact, threat and uncertainty of the coronavirus pandemic has become a significant challenge and will continue to be a challenge during 2020/21 and beyond. Collaboration and effective community and interagency working is fundamental, along with having in place a clear mobilisation and recovery programme to address the significant challenges faced in service delivery, addressing the wider health and care needs of the people of Midlothian, and ensuring workforce resilience and safety.

Funding pressures

Continuing requirement to deliver a balanced budget by achieving major efficiencies despite the growing demand, particularly those with complex needs.

Capacity and Quality of Services

Increasing demand on Care at Home services continues to be a major challenge to deliver the care and support needed. Since adopting a locality based model this has increased capacity and improved the efficiency of the service by 6%. However, the demand for care at home continues to exceed supply and an extensive recruitment programme and recommissioning exercise is underway.

Delays in hospital continue to challenge the partnership ensuring people are discharged timeously. One of the main challenges in facilitating timely discharges is the increasing demand on the Care at Home services and supporting people at home in the community who require increased care and support. Discharge to assess continues to facilitate earlier discharges and works closely with Care at Home services and the Flow Hub to support individuals to return home safely.

Absence Management

Increasing levels of absence in service creates challenges for delivering effective and efficient service delivery. Work is targeted at teams with greater absence levels to maximise attendance and promote health and wellbeing in staff teams. Absence management monitoring is underway at local team and Head of Service level, working with colleague from HR. Managers are actively supporting individuals through the absence management process where required.

Adult, Health and Social Care

Successes and Challenges

Corporate Performance Indicators (latest)

● 3 ● 10 ? 0 📄 6

Service Plan Actions (latest)

▲ 4 ● 31 ? 0

Service Plan PIs (latest)

● 5 ● 16 ? 0 📄 13

Service Risks (latest)

▲ 12

Corporate PIs Off Target

PIs ● 3

% of service priority Actions on target / completed, of the total number

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

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

Service Plan Actions Off Target

Actions ▲ 4

Improve awareness and understanding of sensory impairment among HSCP staff and partners by delivering 2 half days of training with RNIB and Deaf Action.

Reduce the waiting times for occupational therapy and social work services

Work with Building Services and Housing to seek and achieve planning permission for extra care housing projects at Gorebridge, Dalkeith and Bonnyrigg.

Enhance community resources for social prescribing by running a specific stress control classes in community venues.

Service Plan PIs Off Target

PIs ● 5

Number of people who received a health assessment from the Community Health Inequalities Team.

Average waiting time for occupational therapy services

Average waiting time for social work services

Number of stress control classes run in community venues.

Number of people supported with Cancer

High Risks

Risks ▲ 3

Capacity of voluntary and private sector to meet Council's requirements in relation to quality and cost of services

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

COVID 19

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