



Report

Older People's Inspection Update

Edinburgh Integration Joint Board

22 September 2017

Executive Summary

1. A report on the Care Inspectorate and Health Improvement Scotland's joint inspection of older people's services in Edinburgh was presented to the Edinburgh Integration Joint Board (EIJB) on 16 June 2017. The report detailed the findings of the inspection, together with the 17 recommendations for improvement.
2. This report updates the EIJB on the Partnership's progress in responding to the 17 recommendations and outlines the commitment to review the original action plan to ensure activity is prioritised appropriately and realistically.

Recommendations

3. The EIJB is recommended to:
 - a. note actions taken to date in responding to the inspection's recommendations, as set out in Appendix 1; and
 - b. note the Partnership's intention to review the associated action plan and report back on priorities and timescales.

Background

4. The Care Inspectorate and Health Improvement Scotland undertook an inspection of the Edinburgh Health and Social Care Partnership's services to older people in the autumn of 2016 and reported their findings in the spring of 2017. The report highlighted significant challenges and areas for improvement, which were accepted by the Partnership. These challenges include:
 - a higher than expected use of residential and nursing home placements
 - under provision of and difficulty in accessing care at home
 - under developed early intervention, preventative services and local community support

- a long-standing culture of delays in undertaking assessments, delivering services to meet assessed need and in reviewing support plans.
5. The inspection report made 17 recommendations for improvement and the Partnership developed a comprehensive action plan in response. Appendix 1 sets out progress made via the action plan against the 17 recommendations.
 6. Improvements relating to services for older people cannot be progressed in isolation from other critical work required by the Partnership on behalf of the EIJB, in particular in relation to financial sustainability, performance and quality. The Partnership is in the process of reviewing the original action plan to ensure that actions are prioritised appropriately and that these will address not only the issues raised by the inspection, but also those identified by the Partnership more generally.
 7. A revised action plan will be presented to the EIJB at a future date for consideration.

Key risks

8. Ensuring that older people are safe and protected from harm is a key responsibility of the Health and Social Care Partnership. The Care Inspectorate's report has raised concerns about the extent to which older people are protected effectively in Edinburgh. The risks of not having a robust action plan to address the recommendations include:
 - individual risk to wellbeing and safety
 - inability to deliver the key priorities within the EIJB's Strategic Plan
 - ineffective and inefficient service delivery
 - financial inefficiency and loss
 - reputational damage to the EIJB, NHS Lothian and the Council.
9. A risk register will be created to monitor project leads' individual risks as part of the improvement programme management.

Financial implications

10. Current waiting times for assessment, review and service delivery are unacceptably long and the associated risks are not adequately mitigated.
11. The Partnership is tasked with addressing these delays in 2017 and maintaining the system in a steady state thereafter. A series of actions required to support delivery have been identified, but are likely to require additional resources. Before these can be quantified, it is important that the Partnership can demonstrate all possible efficiencies.
12. Precise identification of additional costs requires further testing and will be the subject of future reports to the EIJB.

Involving people

13. Consultation with staff, service users and stakeholders was a key aspect of the inspection process and is reflected in the inspection reports.

14. Stakeholders will be invited to contribute to reshaping the improvement plan.

Background reading/references

[Care inspectorate Report – May 2017](#)

[Older People Inspection Report - IJB 16 June 2017](#)

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Appendix 1

Recommendation 1

The Partnership should improve its approach to engagement and consultation with stakeholders in relation to:

- its vision
- service redesign
- key stages of its transformational programme
- its objectives in respect of market facilitation.

Progress

- Health and Social Care sub-groups have been established in each locality to develop the HSC element of each Locality Improvement Plan. This has included consultation with citizens, including older people.
- Negotiations are taking place with Volunteer Edinburgh who co-ordinate the Equality and rights Network (EaRN) and the LOOPs project to strengthen the voice of older people at both a city-wide and locality level; and to facilitate improved engagement in service planning and re-design.
- A member of the Strategic Planning Group (SPG) of the EIJB has agreed to lead the development of an engagement strategy in collaboration with stakeholder representatives.
- The approach to the market shaping strategy is being developed through the SPG.
- The EIJB has issued a direction in relation to the development of the engagement and market facilitations strategy.
- A set of directions for 2017/18 has been approved by the EIJB and has been published as part of EIJB papers.

Recommendation 2

The Partnership should further develop and implement approaches to early intervention and prevention services to support older people to remain in their own homes and help avoid hospital admissions.

Progress

- The SPG has recommended that the EIJB approve expenditure of £600k on an invest-to-save basis to expand the use of telecare across the city as a means of increasing independence, preventing admission to hospital and residential care, and as an alternative to traditional health and social care services.
- A direction has been issued by the EIJB in respect of prevention and early intervention. This includes the development and implementation of a prevention and early intervention strategy and a strategy for social prescribing and collaboration with partners to review existing grant programmes over the next 12 months.

Recommendation 3

The Partnership should develop exit strategies and plans from existing interim care arrangements to help support the delivery of community based services that help older people and their carers to receive quality support within their own homes or a setting of their choice.

Progress

- The EIJB has issued a direction for the capacity plan for older people to be finalised by 31 October 2017. This will include exiting Liberton Hospital by September 2018 and identifying suitable longer term bed based solutions to the existing interim care facilities.

Recommendation 4

The Partnership should engage with stakeholders to further develop intermediate care services, including bed-based provision, to help prevent hospital admission and to support timely discharge.

Progress

- The direction issued by the EIJB in respect of older people includes the identification of requirements for community rehabilitation and intermediate care.

Recommendation 5

The Partnership should work in collaboration with carers and carers' organisations to improve how carers' needs are identified, assessed and met. This should be done as part of updating its carers' strategy.

Progress

- A carers' strategic partnership has now been established as part of the EIJB/HSC strategic planning arrangements. The remit of the group covers both adult and young carers, and membership includes representatives of carers' organisations and unpaid carers. The work of this group is focusing on the development of the new carers' strategy and implementation of the Carers Act.
- The EIJB has issued directions in respect of carers.

Recommendation 6

The Partnership should ensure that people with dementia receive a timely diagnosis and that diagnostic support for them and their carers is available.

Progress

- Work is underway to re-commission the existing dementia diagnostic support service. (The SPG has recommended that the EIJB agree to this investment, and money is already in the financial plan and part of a referral report from SPG going to the EIJB on 22 September)
- Eight GP practices in North East Edinburgh have been successful in their bid to become one of three sites testing the relocation of dementia post diagnostic support services to a primary care setting.

Recommendation 7

The Partnership should streamline and improve the falls pathway to ensure that older people's needs are better met.

Progress

- Work on the falls pathway has commenced, with a target completion date of December 2017. Key actions related to this have been logged and are being managed.
- Allied to the above is the recruitment of two Falls Coordinators who are aligned to two localities each.
- Actions related to the review of data and the recording of falls have been completed.

Recommendation 8

The Partnership should develop joint approaches to ensure robust quality assurance systems are embedded in practice.

Progress

- The Partnership has strengthened its approach to quality assurance by establishing:
 - a Quality Governance and Risk Management Group responsible for the overview of safe effective care within the Partnership. Membership includes representatives from each locality and the Hospital and Hosted Quality Improvement Team, the lead professionals and senior managers, strategic leads, and quality leads from NHS and Social Care quality assurance.
 - An integrated Business Resilience Group is working to combine processes to ensure effective integrated work across the Partnership.
- Each locality is in the process of fully implementing their integrated multi-agency quality improvement teams. All hospital and hosted services have established quality improvement teams. The Partnership also has well established professionally aligned quality improvements teams, for example in relation to District Nursing, Physiotherapy and Pharmacy.
- A new complaints handling procedure for social work complaints was implemented from 1 April 2017. A procedure for NHS complaints was established on the same date. Health and Social Care complaints are now managed in the Partnership, but are held on a different database. The intention is to transfer those complaints to Datix within the next three to six months. A weekly review meeting for all complaints has been set up where the status of the complaint, quality of complaint responses and learning action are monitored. The EIJB complaints process is being finalised. Two complaints advisors for Social Work complaints have now been appointed.
- In conjunction with the professional leads, the Partnership has developed professional frameworks to improve standards of professional practice across all professional groups, promoting best practice, clear lines of professional accountability and shared learning: nursing, allied health professional, medical and social work staff. The Partnership is working to identify funding to appoint a lead social work professional to support the role of the Chief Social Work Officer.
- The Partnership is working with NHSL quality academy and NHS Education Scotland (NES) to develop an arms' length quality improvement faculty for Health and Social Care to build capacity across the Partnership in improvement methodology to ensure the Partnership can progress the transformational changes required to deliver services in a different way. The proposal is to have this fully implemented by March 2018.
- Led by the Partnership's Chief Nurse, a quality support hub across Health and Social Care to support education, research and development,

innovative practice and quality of care is being developed. The proposal is to have this fully operational by November 2017.

Recommendation 9

The Partnership should work with the local community and other stakeholders to develop and implement a cross-sector market facilitation strategy. This should include a risk assessment and set out contingency plans.

- A market facilitation and shaping strategy will be developed under the auspices of the SPG. This issue has been the main topic of discussion at the last two meetings of the group. A plan for the production of the strategy is being developed and linked to delivery plans in respect of the EIJB directions.

Recommendation 10

The Partnership should produce a revised and updated joint strategic commissioning plan with detail on:

- how priorities are to be resourced
- how joint organisational development planning to support this is to be taken forward
- how consultation, engagement and involvement are to be maintained
- fully costed action plans including plans for investment and disinvestment
- based on identified future needs
- expected measurable outcomes.

Progress

- A review of the strategic plan was undertaken and presented to the SPG and EIJB in April 2017, identifying progress made and priorities for delivery in 2017/18. This has also informed the development of a set of directions issued by the EIJB in August 2017. These include the production of both a workforce development plan and an engagement strategy.
- Delivery plans will be produced in respect of each direction.
- The EIJB financial plan for 2017/18 was approved in March 2017.

Recommendation 11

The Partnership should develop and implement detailed financial recovery plans to ensure that a sustainable financial position is achieved by the Integration Joint Board.

- A Savings Governance Group has been established, which is chaired by the Interim Chief Finance Officer. The group is tasked with scrutinising progress in relation to savings associated with transformation projects.
- Programme management support is in place to progress the above savings projects.
- A first draft of a five year financial plan is to be presented to the September EIJB.
- Financial frameworks for mental health, learning disabilities and older people are being developed, which will demonstrate how resources will shift from hospitals to the community.

Recommendation 12

The Partnership should ensure that:

- there are clear pathways to accessing services
- eligibility criteria are developed and applied consistently
- pathways and criteria are clearly communicated to all stakeholders
- waiting lists are managed effectively to enable the timely allocation of services.

Progress

- A customer experience review of Social Care Direct is being conducted by the Quality Assurance and Compliance team. This review should be completed by the end of October 2017, and is tasked with improving the pathway for older people to access services.

Recommendation 13

The Partnership should ensure that:

- people who use services have a comprehensive, up-to-date assessment and review of their needs which reflects their views and the views of the professionals involved
- people who use services have a comprehensive care plan, which includes anticipatory planning where relevant
- relevant records should contain a chronology
- allocation of work following referral, assessment, care planning and review are all completed within agreed timescales.

Progress

- Social Work practice standards have been created and communicated to staff.
- The adult support assessment tool, which is incorporated in the Partnership's social care management system, has been revised and shortened to help take account of staff concerns about efficiency and performance and the completion of assessments. Adult Support and Protection (ASP) training materials and resources have been updated with the importance of maintaining chronologies in records being emphasised.
- Staff and managers responsible for ASP work and the completion of chronologies will be referred to the minimum standards paper, internal guidance and the Care Inspectorate's revised guidance (2016).
- ASP has been boosted by the creation and recruitment of two ASP Senior Practitioners. The post holders have in their remit to ensure that ASP procedures and thresholds are complied with. The area of ASP is particularly relevant for older people due to their vulnerability and increased exposure to financial abuse.
- An Assessment and Review Board has been established with terms of reference and membership agreed. It will have the following outputs or deliverables: monitoring of compliance with social work standards; setting targets for assessment and review per week; reducing the assessment and review waiting lists to zero; and setting clear rules for prioritising incoming work and carrying it out.

Recommendation 14

The Partnership should ensure that risk assessments and management plans are recorded appropriately and are informed by relevant agencies. This will help ensure that older people are protected from harm and their health and wellbeing is maintained.

Progress

- Updated risk assessments have been completed. There is now ongoing support to the workforce on the implementation of adult support measures; the duty to enquire; and safety planning.

Recommendation 15

The Partnership should ensure that self-directed support is used to promote greater choice and control for older people. Staff and multi-agency training should be undertaken to support increased confidence in staff in all settings so that they can discuss the options of self-directed support with people using care services.

Progress

- A Locality Implementation Board for support planning and brokerage has been convened and a project plan developed. Three key work streams have been identified in relation to this, starting with a test of change relating to 100 service users in the North East Locality.

Recommendation 16

The Partnership should develop and implement a joint comprehensive workforce development strategy, involving the third and independent sectors. This will help to support sustainable recruitment and retention of staff, build sufficient capacity and ensure a suitable skill mix that delivers high-quality services for older people and their carers.

Progress

- A direction has been issued to produce and implement a workforce development strategy. This will be taken forward by the Workforce Development Steering Group led by the Chief Nurse.
- Family group decision making posts have been created and recruited to. These will assist and empower families to create their own plans for supporting older relatives in need of additional support.

Recommendation 17

The Partnership should work with community groups to support a sustainable volunteer recruitment, retention and training model.

Progress

- No progress to date against this recommendation.

