

Report

Report to:	South Lanarkshire Integration Joint Board
Date of Meeting:	17 August 2021
Report by:	Interim Chief Officer, Health and Social Care Partnership

Subject:	Draft Integration Joint Board Annual Performance Report 2020/2021
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ present a draft copy of the Integration Joint Board's Annual Performance Report for 2020/2021 and to highlight performance

2. Recommendation(s)

2.1. The Integration Joint Board is asked to approve the following recommendation(s):-

- (1) that the progress with the Annual Performance Report be noted; and
- (2) that any final amendments to the Annual Performance Report are delegated to the Chief Officer and Head of Commissioning and Performance to approve.

3. Background

- 3.1. Section 42 of the Public Bodies (Joint Working) (Scotland) Act 2014 requires that Annual Performance Reports (APRs) are prepared by an Integration Authority or Integration Joint Board (IJB) in a South Lanarkshire context. The 2014 Act obliges that the APR should cover the preceding year's activity and be published four months after the end of that reporting year.
- 3.2. The purpose of the APR is to ensure that performance is open and accountable, whilst at the same time providing an overall assessment of performance in relation to planning and carrying out integration functions.
- 3.3. Whilst there is no formal requirement to submit the APR to the Scottish Government, the content and assessment of performance within the Report is expected to be used and acted upon locally. The Report should also be of interest to the Health Boards and South Lanarkshire Council in monitoring the success of the integration arrangements they have put in place, as specified within their Integration Scheme.
- 3.4. To assist Health and Social Care Partnerships (HSCPs), the Scottish Government issued Guidance for HSCP Performance Reports in March 2016. Although it is at the discretion of local Partnerships to decide areas to include in their APR, this guidance provided a helpful framework and recommended the following areas for inclusion:

- ◆ a summary of progress against the nine National Health outcomes using as a minimum, the 23 core national performance indicators
- ◆ financial performance and best value
- ◆ reporting progress with localities
- ◆ inspection of services, summarising any activity undertaken by Healthcare Improvement Scotland, the Care Inspectorate, Audit Scotland, Accounts Commission and Scottish Housing Regulator in the year of review

3.5. As with previous years, the APR is aligned to reporting progress against the intentions outlined in the Strategic Commissioning Plan. For this particular APR, it will cover the second year of the 2019-2022 Strategic Commissioning Plan.

3.6. The Scottish Government have advised that the Coronavirus Scotland Act (2020) has been extended to 30 September 2021. Similar to last year, Integration Authorities can delay the release of their APR until November 2021 if they wish using the same mechanisms as last year and as laid out in Coronavirus Scotland Act (2020), Schedule 6, Part 3. To help accommodate this, Public Health Scotland will release two Core Suite Integration Indicator publications, the first in July and the second in September containing refreshed data. A standard set of wording has been provided within appendix 2 of the Draft Annual Performance Report to this effect. The timing of the APR publication will determine which release of the Core Suite Integration Indicators should be referred to, more detail is provided below.

4. Context to South Lanarkshire Draft Report and Format

4.1. A copy of the draft APR for the South Lanarkshire HSCP is attached at appendix 1. The draft APR for South Lanarkshire IJB covers each of the above areas and is structured as follows:

Section	Heading	Summary of Content
1	Introduction	Provides the context within which the Annual Performance Report has been produced.
2	Executive summary	Statement from Chief Officer and Chair of the IJB
3	South Lanarkshire: at a glance	South Lanarkshire demography
4	Local context	Locality snapshots
5	Strategic Overview	Summarises what the HSCP is working to achieve in South Lanarkshire.
6	Governance and accountability	Governance structure
7	Key partnership decisions	Outline of key decisions made by the IJB in 2020/2021
8	A quick look at our Partnership performance	Progress against our Strategic Priorities
9	Financial Performance and Best Value Summary	Provides an overview of the financial performance of the HSCP for 2020/21
10	Inspection of services	Provides an overview of our regulatory registered services.
11	National health and wellbeing outcomes	Overview

5. Summary of our headline achievements for 2020/21

- 5.1. Throughout 2020/21 South Lanarkshire Health and Social Care Partnership has made significant achievements through the incredible effort and commitment from staff across the partnership - working with individuals, their carers and families, with colleagues in other agencies and the voluntary and independent sector. These include:
- Establishment of a pan-Lanarkshire COVID-19 Assessment Hub as required by the Scottish Government. A telephone triage Hub and an assessment centre are operational within the Airdrie Out of Hours (OOH) base and there is an assessment centre within the Douglas Street Clinic in Hamilton. Over 43,000 patients have been through the Hub with over 15,000 being assessed and treated in the COVID-19 Assessment Centres.
 - Staff and patient COVID-19 testing improving rapidly. Testing of residents in care homes quickly developed a higher profile and the HSCP worked with NHSL colleagues and providers to implement current guidance in this respect.
 - Unused wards in Udston Hospital were brought back into use for rehabilitation patients who could be transferred out of Acute beds thereby freeing up ward space for COVID-19 patients.
 - Community hospital beds re-configured to facilitate isolation and Community Nursing Teams continued to visit those patients requiring ongoing clinical care.
 - The Integrated Community Support Teams (ICST) continue to provide care supporting patients in their homes to avoid hospital admission and timely discharge.
 - High uptake of winter flu vaccination programme. This was quickly followed by the continuing COVID-19 vaccination programme and uptake is high.
 - Use of Near Me technology has been used extensively allowing patients, families and carers to be supported during this period.
 - Treatment room services were initially suspended with those patients who required ongoing support having this provided in their homes.
 - Improvement on accident and emergency attendances (2019/2020 108,834 and 83,193 for 2020/21)
 - maximised early hospital discharge and continued to reduce the number of Delayed Discharges from hospital (17,285 bed days against the target of 21,344).
 - One of the key strategies for the HSCP is shifting the balance of care from hospital to community settings. The partnership continues to make steady progress towards this aim, from 88.3% during 2019/20 to 90.2% 2020.
 - Work continues to progress well on phase 1 of the Blantyre development of the modernising care facilities programme.
 - The adult and older people day care review is now complete with the agreement that the next stage of the review is to engage in consultation with key stakeholders on the options arising from the review.
 - The review of the care and support service includes recommendations for improvement activity to sustain and modernise the service with a revised service specification to take account of self-directed support principles and operate within a cost effective and safe staffing model.
 - Care at home transformation board continues to oversee several workstreams taking forward service redesign with significant improvement in Hamilton and Rutherglen Care at home services.
 - Partners continue to contribute to preventing homelessness and progress with the implementation of the routine enquiry direction is proving successful with NHSL continuing to provide a Health and Homelessness nurse led service.

- Progress on the Lanarkshire Mental Health and Wellbeing Strategy 2019-2024 continues with work to transfer the operational management of SL Community Mental Health Teams to SL HSCP.

6. Next Steps

- 6.1. Following approval by the IJB, the draft APR will be subject to further changes and updating as appropriate in relation to data release as outlined at 3.6 above prior to publication. The Report will then be made available on the HSCP website.
- 6.2. The Strategic Commissioning Plan for the period 2019-2022 was approved by the IJB at its meeting of 25 March 2019. Engagement on preparation for the next Strategic Commissioning Plan 2022 – 2025 is being undertaken from August – October 2021.

7. Employee Implications

- 7.1. There are no employee implications associated with this report.

8. Financial Implications

- 8.1. There are no financial implications associated with this report.

9. Climate Change, Sustainability and Environmental Implications

- 9.1. There are no implications for climate change, sustainability or the environment in terms of the information contained in this report.

10. Other Implications

- 10.1. There are no additional risks associated with this report.
- 10.2. There are no other issues associated with this report.

11. Equality Impact Assessment and Consultation Arrangements

- 11.1. This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy and therefore, no impact assessment is required.
- 11.2. This report is an APR and relates to the Strategic Commissioning Plan 2019-2022, which was extensively consulted on.

12. Directions

Direction to:	
1. No Direction required	<input checked="" type="checkbox"/>
2. South Lanarkshire Council	<input type="checkbox"/>
3. NHS Lanarkshire	<input type="checkbox"/>
4. South Lanarkshire Council and NHS Lanarkshire	<input type="checkbox"/>

Marianne Hayward
Interim Chief Officer, Health and Social Care Partnership

Link(s) to National Health and Wellbeing Outcomes

People are able to look after and improve their own health and wellbeing and live in good health for longer	<input checked="" type="checkbox"/>
People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonable practicable, independently and at home or in a homely setting in their community	<input checked="" type="checkbox"/>
People who use Health and Social Care Services have positive experiences of those services, and have their dignity respected	<input checked="" type="checkbox"/>
Health and Social Care Services are centred on helping to maintain or improve the quality of life of people who use those services	<input checked="" type="checkbox"/>
Health and Social Care Services contribute to reducing health inequalities	<input checked="" type="checkbox"/>
People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing	<input checked="" type="checkbox"/>
People who use Health and Social Care Services are safe from harm	<input checked="" type="checkbox"/>
People who work in Health and Social Care Services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide	<input checked="" type="checkbox"/>
Resources are used effectively and efficiently in the provision of Health and Social Care Services	<input checked="" type="checkbox"/>

Previous References

- ◆ Strategic Commissioning Plan 2019 - 2022
- ◆ Annual Performance Report 2019/2020

List of Background Papers

- ◆ Appendix 1 - Annual Performance Report 2020/2021

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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