



East Renfrewshire Health and Social Care Partnership

Annual Performance Report 2019/20

Executive Summary



Introduction

East Renfrewshire Health and Social Care Partnership (HSCP) was established in 2015 under the direction of East Renfrewshire's Integration Joint Board (IJB) and has been leading the way in integrating local health and care services. The IJB is required to publish an Annual Performance Report (APR) and this summary focuses on key highlights from the 2019-20 report.

Our Vision and Strategic Priorities

Our vision statement, "*Working together with the people of East Renfrewshire to improve lives*", was developed in partnership with our workforce and wider partners, carers and members of the community. Everything we do as a partnership is guided by the following principles.

- *Valuing what matters to people*
- *Building capacity with individuals and communities*
- *Focusing on outcomes, not services*

Our Strategic Plan covers the period 2018-21 and sets out seven strategic priorities. These are:

- Working together with **children, young people and their families** to improve mental wellbeing
- Working together with our community planning partners on new **community justice** pathways that support people to prevent and reduce offending and rebuild lives
- Working together with our communities that experience shorter life expectancy and **poorer health** to improve their wellbeing
- Working together with people to maintain their **independence at home** and in their local community
- Working together with people who experience **mental ill-health** to support them on their journey to recovery
- Working together with our colleagues in primary and acute care to care for people to reduce **unplanned admissions** to hospital
- Working together with **people who care for someone** ensuring they are able to exercise choice and control in relation to their caring activities

Our key achievements in 2019-20

1. Working together with children, young people and their families to improve mental wellbeing

How we delivered in 2019/20

- Our enhance **Family Wellbeing Service** expanded its presence in GP surgeries. The service supports children and young people who present with a range of significant mental and emotional wellbeing concerns.
- We continued to invest in and develop our **Psychology of Parenting Project (PoPP)** which offers support to families experiencing difficulties with behaviour.
- The **PACE (Permanence and Care Excellence)** programme works to ensure more looked after children experience permanence and stable, secure environments. In 2019/20 we streamlined our processes, and have developed 'common understanding' of permanence across the whole system.
- We continued the implementation of the **Signs of Safety** model which focuses on developing relational interventions with children, young people, their families and carers in order to reduce risk and improve children's wellbeing.
- The **East Renfrewshire Champions Board** supports children and young people to take part in participation and engagement. In 2019-20, 87 young people were engaged through 520 engagement opportunities – 27 led to recognised accredited awards for the participants.

The progress we made in 2019/20

- 96% increase in improved outcomes for children after parent/carer completion of our Psychology of Parenting Project (PoPP)
- 98% positive response to Viewpoint question "Do you feel safe at home?"
- 96% of children/young people attending our Family Wellbeing Service with improved emotional health at end of programme in 2018/19
- Balance of Care for looked after children - 98% of children being looked after in the community (the best in Scotland)
- 90% of supported mothers confirming they received information about close and loving relationships from staff

2. Working together with our community planning partners on new community justice pathways that support people to prevent and reduce offending

How we delivered in 2019/20

- East Renfrewshire's **Community Payback Team** successfully completed 9,057 hours of unpaid work.
- Our employment training programme **Strive** resulted in a number of positive outcomes for people with convictions, including employment. Our "No Barriers" project continued to provide support with literacy and numeracy.

- We worked in partnership with East Renfrewshire Women's Aid Service to deliver a helpline, drop in and direct support services for women, children and young people who have experienced **domestic abuse**.
- During 2019/20 our local Community Addictions and Recovery Team provide tailored support including planning for **recovery**, one-to-one and group support, family support and links to other agencies and resources to help people in their recovery journey.

The progress we made in 2019/20

- 100% of people reported that their community payback order helped to reduce their offending.
- 71% of community payback work placements were completed within court timescale.
- 79% of women accessing domestic abuse support services demonstrated a positive improvement in their outcomes.
- 16% of people moved from drug/alcohol treatment into recovery services.

3. Working together with our communities that experience shorter life expectancy and poorer health to improve their wellbeing

How we delivered in 2019/20

- **Exercise sessions** and **walking groups** have been delivered in Barrhead and Neilston. Chair based exercise groups for older adults were also provided in Barrhead and other venues.
- Our **Health Improvement Team** supported a range of training and information sessions to build staff/partner capacity to address health behaviour and raise awareness of health related issues.
- We jointly funded an active health and wellbeing manager within ER Culture and Leisure Trust. This post has been developing **Ageing Well** activity.

The progress we made in 2019/20

- Our premature mortality rate remains significantly below the national average at 308 per 100,000 (Scotland 432)
- Male life expectancy at birth in our 15% most deprived communities is 74.7 compared to 72.1 for Scotland.
- Female life expectancy at birth in our 15% most deprived communities is 79.8 compared to 77.5 for Scotland.

4. Working together with people to maintain their independence at home and in their

How we delivered in 2019/20

- **Talking Points** hubs have been established across East Renfrewshire as places where people can go to have a good conversation about their health and wellbeing within their own community. We delivered a total of 102 'Talking Points' engagement sessions during 2019/20.
- We are supporting people to have greater choice and control over their lives. In 2019-20, our 'individual budget' calculator replaced our previous equivalency model for **resource allocation** for adults.

- We continued to expand our **Telecare** provision. Around 3,000 residents are now benefitting from the service.
- Our **Home and Mobile Health Monitoring (HMHM)** service is now active in the vast majority of GP practices. During 2019/20 we scaled-up our support with the team now monitoring the blood pressure and heart rate of East Renfrewshire patients remotely.
- We support a wide range of meaningful activities in the community for people with **learning disabilities** including social enterprise groups delivering bike workshops, jewellery making, gardening groups and kitchen/café training.

The progress we made in 2019/20

- 88% of people reported that their 'living where you/as you want to live' needs were being met
- 8.2% of adult social work spend is spent through SDS Options 1 and 2 (4th best in Scotland)
- 58% of people aged 65+ with intensive needs are receiving care at home

5. Working together with people who experience mental ill-health to support them on their journey to recovery

How we delivered in 2019/20

- Our community **Link Workers** were established in all GP practices to support preventative and holistic approaches. The workers signpost people to a wide range of physical, social and psychological interventions and have provided support to approximately 2000 local people.
- We promoted the use of **computerised cognitive behavioural therapy (cCBT)** resulting in 287 referrals from GPs to cCBT in 2019/20.
- In 2019/20 our referrals to the **Dialectic Behavioural Therapy (DBT)** service in South Glasgow have seen a reduction in the use of acute mental health days by individuals with Borderline Personality Disorder.

The progress we made in 2019/20

- 65% accessing psychological therapies within 18 weeks (improving).
- 16% of service users moving from drug treatment to recovery service

6. Working together with our colleagues in primary and acute care to care for people to reduce unplanned admissions to hospital

How we delivered in 2019/20

- We continued to work closely with **GP practices** and at cluster level and focus on **local data** (e.g. frequent attenders) to determine what further action would provide better support to patients and avoid unnecessary presentations at hospital.
- During 2019/20 we continued our collaborative work with local **care homes**, working to minimise emergency attendances and admissions.
- We continued to develop our model for supporting safe and early discharge from hospital by increasing the resources and skill mix within our **Hospital to Home team**.

- In 2019/20 we supported **End of Life** provision by working collaboratively with Prince and Princess of Wales and Accord Hospices and by using data and case file reviews to better understand local circumstances.
- In 2019/20 we supported better outcomes for residents through a **prescribing initiative** and the **Medication Support Service**.

The progress we made in 2019/20

- Average of 2 delayed discharges per month
- 1,788 hospital bed days lost to delayed discharges (adults) – down 21% from 2018/19
- 20,090 A&E attendances (adults) – slight reduction from 2018/19 (20,212)
- 7,504 emergency hospital admissions (adults) – slight increase from 2018/19 (7,320)
- 88% for % of last six months of life spent in community setting (up from 86% previous year)

7. Working together with people who care for someone ensuring they are able to exercise choice and control in relation to their caring activities

How we delivered in 2019/20

- In 2019/20 we continued to support carers in collaboration with our local **Carers Centre**.
- Staff completed 56 **Adult Carer Support Plans** (ACSP) and 14 carers were identified as requiring further social work support.
- During the year we work closely with partners to develop the appropriate range of creative **short breaks and respite** options as support for families with their caring role.

The progress we made in 2019/20

- 92% of people reported 'quality of life for carers' needs fully met
- 37% of carers feel supported to continue in their caring role (2017/18- in line with Scottish average)

8. Indicators we are seeking to improve

Ongoing improvement is sought across all services within the HSCP and the performance management arrangements in place are designed to facilitate this. There are specific areas we would like to improve going forward and these are set out in our current Strategic Plan.

Key indicators we would like to improve on include the following:

- Children and young people starting treatment for CAHMS within 18 weeks of referral
- % of unpaid work placement completions within Court timescales
- Number of people self-directing their care through receiving direct payments and other forms of self-directed support.
- % of people waiting no longer than 18 weeks for access to psychological therapies
- People waiting more than 3 days to be discharged from hospital into a more appropriate care setting
- Number of A&E Attendances
- Number of Emergency Admissions

Our Financial Performance 2019/20

Our annual report and accounts for the IJB covers the period 1st April 2019 to 31st March 2020 and provides a detailed financial overview of the year which ended with an operational overspend of £0.065 million.

Service	Budget	Spend	Variance (Over)/ Under	Variance (Over)/ Under
	£ Million	£ Million	£ Million	%
Children & Families	13.268	12.631	0.637	4.80%
Older Peoples Services	18.736	19.072	(0.336)	(1.79%)
Physical / Sensory Disability	5.498	5.468	0.030	0.55%
Learning Disability – Community	10.586	10.681	(0.095)	(0.90%)
Learning Disability – Inpatients	8.361	8.359	0.002	0.02%
Augmentative and Alternative Communication	0.220	0.220	-	-
Intensive Services	10.570	11.100	(0.530)	(5.01%)
Mental Health	4.130	3.941	0.189	4.58%
Addictions / Substance Misuse	1.111	1.098	0.013	1.17%
Family Health Services	23.805	23.805	-	-
Prescribing	15.779	16.090	(0.311)	(1.97%)
Criminal Justice	-	-	-	-
Planning & Health Improvement	0.230	0.132	0.098	42.61%
Finance and Resources	9.766	9.528	0.238	2.44%
Net Expenditure Health and Social Care	122.060	122.125	(0.065)	(0.05%)
Housing	0.276	0.276	-	-
Set Aside for Large Hospital Services	31.223	31.223	-	-
Total Integration Joint Board	153.559	153.624	(0.065)	(0.05%)

The £0.065 million overspend (0.05%) is broadly in line with the reporting taken to the IJB during the year and the overspend is funded, as planned, from our reserves.