

# Annual Performance Report

## Summary 2019-20

This is the fourth statutory Annual Performance Report of the Dundee Integration Joint Board (IJB), established on April 1st 2016 to plan, oversee and deliver adult health and social care services through the Dundee Health and Social Care Partnership.



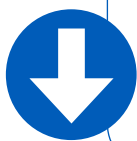
**Each citizen of Dundee will have access to the information and support that they need to live a fulfilled life.**



The Dundee Health and Social Care Partnership consists of Dundee City Council, NHS Tayside and partners from the third sector and independent providers of health and social care services. The Partnership is responsible for planning and delivering a wide range of adult social work and social care services, and primary and community health services for adults. The Partnership is also responsible for some acute hospital care services.

Following the declaration of the COVID-19 pandemic by the World Health Organisation in March 2020 the health and social care workforce, including the people who would normally contribute to the production of our annual report, have been focused on ensuring safe, effective services and supports are in place for people who are at risk in our communities, including unpaid carers. This means that our approach to the 2019-20 annual performance report has been adjusted; this summary provides a concise overview of our performance in 2019-20 and covers all of the elements of performance we are legally required to report. It will be supplemented by a fuller annual performance report for 2019-20 that we aim to publish before the end of October 2020.

## Our biggest achievements



Reduced the number of days Dundee citizens spent in hospital as a result of an emergency by 13%, **from approximately 161,000 in 2015-16 to around 141,000 in 19-20** as a result of concerted partnership working across the health and social care system.



Of the 10 services directly provided by the Partnership that were subject to inspection by the Care Inspectorate over the last year, 100% received grades that were 'good' or better and **80% received grades of 'very good' or 'excellent'**.



Maintained good performance in relation to the number of bed days lost to delayed discharge per 100 people aged 75 years or over; in 19-20 Dundee was the **11th best performing Partnership in Scotland**.



**More than doubled the spend on Self Directed Support Options 1 and 2** from £2.5M in 2018-19 to £5.5M in 2019-20.



Improved prescribing practice continues to result in a reduction in expenditure taking **Dundee's cost per weighted patient and items dispensed per weighted patient to below the Scottish average**.



**Increased the capacity of care and treatment** to support the care of all of those with leg ulcers who can be managed in a community setting, with the benefits this brings of improved healing rates. Roles have been expanded to provide wound care and phlebotomy and injections are also being provided by this team.



Significant improvements achieved during the **redesign and development of physiotherapy and occupational therapy teams in order to improve quality, patient outcomes and access to services**. This service has been a front runner in the use of technology to improve access to services.



We have **listened to the findings of the Dundee Drugs Commission and Tayside Mental Health Inquiry** and worked with our partners to reflect on our performance and to identify effective improvement actions, including our Drug Deaths Action Plan for Change.



**Further reduced care home admissions, increased the proportion of people able to continue to live independently in their own homes following assessment and reduced delays** through the provision of enhanced support at point of discharge through our collaborative work with British Red Cross.

## Where we have made progress



Two Navigators joined the team within the Emergency Department at Ninewells Hospital. Navigators are able to establish a supportive role with people who present at the Emergency Department with a range of challenges including addiction, mental health problems and all forms of violence, including domestic abuse. The Navigators can enable a connection with a range of community supports that can help to address the impact of disadvantage, whether through health inequalities, poverty, unemployment or homelessness.



The Aspen Project (Assessing and Supporting Psychological and Emotional Needs) within Dundee Women's Aid is now fully operational. A Consultant Clinical Psychologist works with women who have experienced trauma and have a complex set of needs as a result, including; homelessness, mental health difficulties, risky coping strategies (such as substance misuse, deliberate self-harm and offending behaviour) and risk of exploitation. During the first year, over thirty women were referred for individual assessment and treatment and 27 commenced the group treatment "Survive and Thrive," a trauma specific intervention. There were also 50 formal case consultations provided to Women's Aid and Violence Against Women partner organisations and training was provided to a broad range of staff with regard to trauma and understanding domestic violence.



Introduced a dedicated Self Directed Support team to support service users to make the right choice and decisions for themselves. The team is continuously exploring new and service user friendly approaches to ensure meaningful personal outcomes for service users, improving implementation and increasing choice.



Worked in partnership with NHS Tayside to remodel the way we provide services to support people who require acute care and developed the acute medicine for the elderly / ortho-geriatric model and frailty at the front door and surgical pathways. This has reduced the pressure on the acute hospital and allowed for increased investment in community services.



Taken various approaches to improve awareness of violence against women, including a social attitudes survey, development of Multi Agency Risk Assessment Conference processes and governance for victims at highest risk of harm, further development of the Safe and Together Model to inform our response to children affected by domestic abuse and a programme of activities through the 16 days of activism against gender based violence campaign to raise public and professional awareness.



Contributed to the development of a local consortium to deliver intensive housing support for a programme of 100 Housing First tenancies over 3 years. At the end of 2019-20 there were 44 Housing First tenancies created and 89% had been successfully sustained.

## Where we have made progress



Revised our Participation and Engagement Strategy to ensure that those who use health and social care services in Dundee, their families and carers remain at the centre of our work.



Made progress in implementing the actions within the Dundee Action Plan for Change to address drug deaths. These include tests of change and subsequent implementation of the Non-Fatal Overdose Pathway, increased assertive outreach services – including a test of change to follow up on people who disengage from services, the implementation of same-day prescribing from substance misuse services and increased delivery of services in localities.



Community Mental Health Teams have enhanced the level of support provided to people as they transition from hospital to home settings by establishing the Dundee Discharge Hub. This provides additional wrap-around support to ensure that people are fully engaged with their community based supports and treatments and are coping well with life at home.



Continued to implement our services to deliver care to people who are acutely unwell in their own homes and in care homes. Our Integrated Care Home team has provided support to care homes, both in terms of providing direct clinical support and in building the capacity of care homes to provide appropriate care. Advanced practice paramedics are being embedded within our General Practices to provide support for urgent unscheduled care within primary care, providing a first response for home visits and responding to urgent call outs to patients.



Revised our Participation and Engagement Strategy to ensure that those who use health and social care services in Dundee, their families and carers remain at the centre of our work.



Developed a better understanding of the high rate of hospital admissions due to a fall to help us to improve and design services and initiatives for people who fall or are at risk of falling. These include a comprehensive referral and triage procedure to identify people at risk, community balance and exercise classes, the falls SAFE project, a pilot of joint working between nutrition & dietetic and falls services and falls roadshows. We have also developed posters and leaflets which contain exercise, prevention and signposting information.



Continued to create more opportunities for our workforce to be engaged with the communities in which they work. Our health and wellbeing networks bring together our workforce within the local community planning areas they are aligned to. Our networks have been central to the development of the local community plans and we are exploring how they can link with other locality networks.



Continued to develop and enhance support for carers, including the hosting of five Carers Interest Network meetings, refresh of the local Carers Charter, the continued delivery of a short breaks brokerage service, marketing and outreach strategies to connect with and support carers, the further development of Young Carers Statements and young carers support as well as the launch of a carers wellbeing point pilot project.



Extended our use of Value Management across many teams including the Integrated Discharge Hub, Physiotherapy Community Rehab Team and the Pelvic and Obstetric Physiotherapy Team to empower them to drive quality improvement in their service areas and ensure best value for the patient, staff and organisation.



Reviewed our eligibility criteria and associated financial guidelines and published a specific eligibility framework and criteria for carers in order to maximise the use of resources and ensure that people get the right support at the right time from the right services.



Further improved our Post Diagnostic Support (PDS) service for people with dementia including; further integrated working; achieving national targets and the introduction of cognitive stimulation and therapy groups as a way of meeting increased demand for PDS.



Rapidly developed a comprehensive Induction Resource and a suite of COVID-19 learning resources in March 2020 to ensure that all existing and redeployed health and social care workers were given the right knowledge and information to practice in a safe and informed way as a response to the COVID-19 pandemic. We have also worked with Dundee City Council to develop a Wellbeing Service to support the health and wellbeing of our workforce during this crisis.

## What you have told us



They are good communicators and work well in a multidisciplinary way. With the nature of the complex people they work with they have to work with lots of different professionals such as psychiatrists, psychology, dietitians, mental health nurses, learning disability nurses, GPs, care managers and the police. They do this really well.

*- Professional's comment regarding the Dundee Community Living Service*



I am leaving the surgery feeling a lot lighter than when I arrived. I feel like I have been listened to and that my thoughts about my illness are valid and accurate. I have been given information about various services which will assist me with current issues I'm facing. Thank you kindly.

*- comment regarding the Patient Assessment, Management and Liaison Service (PALMS)*



The Care Home Team has worked very hard within the care home, responding quickly to referrals. The Integrated Partnership approach has resulted in positive outcomes for all our residents. Having an appointed Mental Health Nurse enables robust management and support for our residents with dementia. This approach promotes the physical and mental well being of our residents enabling them to stay within their own home environment, while establishing supportive connections and relationships with all staff within the home.

*- comment regarding the Social Care Response Service*



They encourage people to be part of their local community and to make the most of their lives. Sometimes people have come out of long-term stays in hospital and the service manages to hold onto them and help them to adjust to this different way of life.

*- Professional's comment regarding the Dundee Community Living Service*





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They are there when I need them. I don't mind if I get male or female carers they always respect my privacy and make me feel safe. A good bunch! 10 out of 10!

- comment regarding the Social Care Response Service



The service are good communicators; and we work very well together in the interests of better supporting my daughter. I think she has developed her skills since moving to the community living team. She is more independent and her behaviour is much more settled.

- Carer's comment regarding the Dundee Community Living Service



The mental health specialist is great. I feel like she really listens and takes my concerns seriously. She also remembers what I've said before and about my life which is really comforting – feel like a real person and not just another patient. I also like that this is held here at their GP, it's less intimidating.

- comment regarding the Mental Health Specialist service in their GP surgery



From the first meeting she connected and treated me like a person and not just a case. She seemed as though she had all the time in the world to take a history at the first visit I felt she got to know me. She was very accepting and open minded to what I said.

- comment regarding the Pelvic and Obstetric Physiotherapy team



Just a big 'Thank You' for all your help with my hand. You restored my faith in the healing power of the body and enabled me to skip amongst the trees again.

- Comment regarding the Outpatients Hand Therapy Team



## Complaints



In 2019-20 a total of 230 complaints were received regarding health and social care services provided by the Partnership. This year 32% of complaints were resolved at the first stage of the complaint process, frontline resolution. Complaints related to a number of different aspects of health and social care provision and these are categorised below as:

- Staff attitude
- Delay in responding to enquiries and requests
- Disagreement with treatment/ care plan
- Failure to meet our service standards
- Problem with medication
- Failure to provide our service
- Unacceptable time to wait for appointment
- Dissatisfaction with our policy
- Clinical Treatment

## Awards



**Services provided by the Partnership strive for quality and excellence. Examples of some of our latest achievements are:**

The work of the multi-agency Humanitarian Protection Partnership (HPP) to support refugees has been recognised by a number of awards including a COSLA Gold award for the Get Ready for Work Programme and a Scottish Social Services Council (SSSC) award, 'Silo buster', recognising the way the city has welcomed and provided joined-up services for refugees.

The Psychiatry of Old Age Care Home Team was a finalist in the 'Silo Busting' category at the SSSC Awards 2019.

Wellgate Day Support Service was successful at the Dundee City Council, Outstanding Service and Commitment Awards in June 2019 and was presented with the Lord Provost Award.

The First Contact Physiotherapy service was nominated for a NHS Tayside Staff Appreciation and Recognition (STAR) award in 2019.



## Working in localities



- Dundee Carers Centre Caring Places has progressed their locality approach to support carers and the successful development in Coldsides and Strathmartine has been mirrored in all the 8 LCP areas.
- Dundee Keep Well Community Team contributes to outreach in a range of community settings; short health consultations, comprehensive health checks, follow up, referral onwards and support to access services. 590 health checks were completed. The largest client groups benefiting from these were 237 people involved in drug and alcohol use, 128 unpaid carers, 113 people involved in the criminal justice system and 39 homeless people.
- The community health team nurses are involved in community engagement and health consultations in a range of local settings and they deliver health talks to local groups.
- The redevelopment of Lochee Health Centre was completed to create an integrated space for both the practice and a wide range of teams who work to care for those in the local community. The new building includes a community kitchen which can be used by groups to support cooking skills and healthy eating.
- The Crescent shows how services to tackle social and health inequalities in one of Scotland's most deprived housing estates were integrated, in a way which also supports the physical regeneration of the estate and engages with local people. Aims include improved social and health outcomes and an increase in public and private sector house building to continue the regeneration of the area. Within the Crescent there is a GP surgery, library and out-patient clinics.
- Strong joint working relationships have been built with a range of local groups and networks which support people with lived experience of mental health issues including Dundee Healthy Minds Network, Making Recovery Real Network, Faith in Communities, and community based health issue groups ensure that channels are open for both ongoing and project specific dialogue.
- The Adult Psychological Therapies Service has expanded to include a new Patient Assessment, Management and Liaison Service (PALMS). The aim is to enable 'without barriers' access to a within-GP practice Mental Health Specialist (MHS). This is currently established in almost half the GP practices in Dundee. 97% of the people who received this service were satisfied with the help received.
- First Contact Physiotherapy (FCP) has expanded to all 4 GP clusters across Dundee by utilising an innovative federated appointment system. Patients now have direct access to the advanced physiotherapy care they need for their musculoskeletal problems. The FCP service has demonstrated significant reductions in secondary care referrals by offering advanced skills to assess, diagnose, offer self-management advice and, where necessary, refer for investigations or further treatment. This has released GP capacity while providing faster access to diagnosis and treatment.
- Sources of Support (SOS) is a social prescribing link worker service operating in GP Practices to work with patients whose mental health and wellbeing is impacted by social and economic issues. Link workers often help patients to meet their core needs such as food, clothes, warmth, housing, income and wellbeing. Once these needs are met, factors such as structure and routine, sense of purpose and belonging can be addressed. The service was asked to extend coverage to an additional 10 practices within existing resources to meet the requirements of the GP contract. 893 people were referred to Sources of Support during 2019-20.

## How we have spent our resources

Dundee Integration Joint Board spent £276.10 million on integrated health and social care services during 2019-20

	2016/17	2017/18	2018/19	2019/20
Total Spend	£254.5M	£257.5M	£263.1M	£276.10M
Health Service - Hospital In-Patient	£44.7M	£40.4M	£42.1M	£43.6M
Other Social Care Services	£64.4M	£71.1M	£72.6M	£76.4M
Other Health Care Services	£116.2M	£115.2M	£117.5M	£123.2M
Care Home and Adult Placement Social Care Services	£28.0M	£29.5M	£29.5M	£31.5M
Supporting Unpaid Carers	£1.2M	£1.3M	£1.4M	£1.4M

This resulted in an overspend of £2.274m after additional financial contributions totalling £3.063m were provided by Dundee City Council and NHS Tayside under the financial risk sharing arrangement set out within the Integration Scheme.

The IJB Transformation Programme continued into 2019-20 and following a recent audit we have revised our approach to transformation.

The Partnership contributed to the self-evaluation submitted to Audit Scotland to support the ongoing Best Value Audit of Dundee City Council, with evidence being collated under 8 themes. Areas identified for improvement through the self-evaluation process have been embedded in improvement plans and a commitment has been made to fully implement these.

## Quality of our services



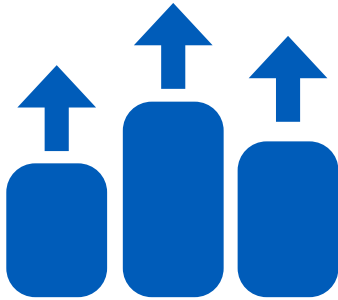
In 2019-20, 75 services for adults registered with the Care Inspectorate in Dundee were inspected. 22 of these inspections were combined inspections where both the Housing Support and Support Services were inspected together.

Of the services that were inspected, 79% received no requirements for improvement. More information about requirements and gradings can be found [here](#).

None of the inspected services received an enforcement notice.

**100% of services provided directly by the Partnership and 80% of all services in Dundee which were subject to a Care Inspectorate inspection last year received grades of 'good', 'very good' or 'excellent'**

## Where we need to improve



At the time of publication of this performance summary the Partnership, alongside other public, third and private sector organisations, are responding to the unprecedented challenge of the COVID-19 pandemic. Partnership services have been rapidly re-designed to support the health and social care response to people who have been directly impacted by COVID-19, as well as to maintain essential services to individuals and wider communities.

Significant work has also been undertaken to support our workforce and unpaid carers and to protect their mental health and wellbeing. Our response to the COVID-19 pandemic will be reported in our next annual performance report.

As we begin to develop our recovery plan this sets the context within which we will undertake wider improvement activities during 2020-21 and will have a significant impact on the capacity and resources available to address improvement priorities. At this time we have identified a small number of improvement priorities from 2019-20 that will continue to be implemented over the next 12 months, as well as a small number of new areas that will be prioritised alongside COVID-19 recovery work.

### CONTINUE

to develop our approach to locality working and enhance the collation, analysis and reporting of performance information at a locality and neighbourhood level.

### STRENGTHEN

Clinical, Care and Professional Governance reporting arrangements for hosted services through governance systems and for Primary Governance Groups.

### CONTINUE

work with partners across the Dundee Partnership to streamline and add structure to our engagement with local communities.

### CONTINUE

to implement the Primary Care Improvement Plan, including testing new models of community based service delivery and building on and further developing our new initiatives in response to Covid-19.

### RESPOND

to the recommendations from the Tayside Mental Health Inquiry and Dundee Drugs Commission by working closely with partners, including people with lived experience to fully implement agreed actions.

### INCREASE

the pace of improvement in relation to key performance challenges including falls, complex delayed discharges and unscheduled care.

### ACTION

the areas for improvement identified by the Best Value self-evaluation for Dundee City Council and respond to any subsequent recommendations in their Best Value Audit report.

### REFRESH

our arrangements for responding to adults at risk, including our operational guidance and arrangements for assessing and responding to concerns about vulnerable adults who do not meet the adult protection three-point test.

### REVIEW

our learning from the COVID-19 pandemic and continue to adapt our delivery models, based on our learning, to address the impact of COVID-19 on our population and to manage the transition back to community service delivery.

National Indicator Source: Core Suite of Integration Indicators	2015-16 Dundee (Scotland)	2016-17 Dundee (Scotland)	2017-18 Dundee (Scotland)	2018-19 Dundee (Scotland)	2019-20 Dundee (Scotland)	Comparison with Scotland 2019-20
11. Premature mortality rate (per 100,000 people aged under 75)	546 (441)	572 (441)	554 (425)	539 (432)	N/A	N/A
12. Emergency admission rate (per 100,000 people aged 18+)	12,168 (12,281)	12,425 (12,215)	12,815 (12,192)	12,703 (12,195)	12,569* (12,602)*	↑
13. Emergency bed day rate (per 100,000 people aged 18+)	146,192 (128,630)	141,439 (126,945)	135,284 (115,518)	125,377 (116,485)	120,584* (117,478)*	↓
14. Readmission to acute hospital within 28 days of discharge rate (per 1,000 population)	122 (98)	127 (101)	127 (103)	129 (103)	127* (104)*	↓
15. Proportion of last 6 months of life spent at home or in a community setting	87% (87%)	87% (87%)	89% (88%)	89% (88%)	89%* (88%)*	↑
16. Falls rate per 1,000 population aged 65+	25 (22)	26 (22)	29 (23)	31 (22)	31* (23)*	↓
17. Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections	88% (83%)	86% (84%)	85% (85%)	86% (82%)	80% (82%)	↓
19. Percentage of days people spend in hospital when they are ready to be discharged, per 1,000 population	832 (915)	754 (841)	349 (762)	372 (793)	488* (783)*	↑
20. Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency	28% (24%)	27% (24%)	27% (25%)	26% (24%)	24% (23%)	↓

\* Calendar year 2019 is used here as a proxy for 2019-20 due to the national data for 2019-20 being incomplete. We have done this following guidance from Public Health Scotland and to improve consistency between our report and those for other Health and Social Care Partnerships.

\*\* National data for Indicators 1- 10, and 21-23 are not available.

\*\*\* National data for Indicator 18 will not be published until 25 August 2020.

\*\*\* Data relating to indicators 1-9 for 2019-20 was originally due to be published in April 2020 but, due to staff redeployment during the COVID-19 pandemic, the publication was delayed and so the most recent survey results were not available for inclusion within this report. Please refer to the 2018-19 APR for the most recent results.

[https://www.dundeehscp.com/sites/default/files/publications/dhscp\\_annual\\_report\\_oct23.pdf](https://www.dundeehscp.com/sites/default/files/publications/dhscp_annual_report_oct23.pdf)

↑ Better than Scotland    ↓ Worse than Scotland    ↔ Same as Scotland

■ Improved since 2015/16  
■ Worsened since 2015/16