



East Lothian Integration Joint Board Annual Performance Report 2019-20

East Lothian
Health & Social Care Partnership



Foreword

This report covers the period from the beginning of April 2019 to the end of March 2020. If we had to choose one word which best describes what this period has been about, it is change. Some of the changes were planned, to deliver better and best value services across the county, and some were in response to the Covid-19 pandemic. All were made easier by the integration of our health and social care services, working together to improve the health and wellbeing of local people.

We had some real successes during 2019-20. Perhaps the most visible of these was the opening of the new East Lothian Community Hospital, helping us to make significant progress in our commitment to providing more care locally. We have brought a host of services back to East Lothian, for example, Urology, Orthopaedics (musculoskeletal), Rheumatology, Gynaecology, Adult ENT and Audiology. We also introduced a range of new services including Plastic Surgery for hands, Adult Psychiatry, Antenatal Services, Dietetics and Palliative Care. The hospital is also now a base for some of our integrated Health and Social Care teams which, during the pandemic, has enabled us to make efficient use of our staff resource.

It was also a year in which we gained recognition for our innovative services. Our Well Wynd Hub, Care When It Counts (CWIC) Team, and East Lothian Community Hospital all won regional and national awards. It is such innovative approaches, along with the commitment of our staff and partners that has enabled us to adapt so quickly to the Covid-19 challenges.

Directions have also played a critical role in driving the integration of services in East Lothian and the delivery of better outcomes for people who use our services. They are vitally important in clarifying responsibilities and requirements between ELHSCP, East Lothian Council and NHS Lothian, giving us the legal framework and resources we need to action our strategic commissioning plans.

We hope that as you read the report you will see that the way we deliver services, lent itself to supporting patients and service-users well in these challenging times. We have been heartened by the support from the local community and local providers which has enabled us to respond to the ever-changing demands on our services. Our staff across Health and Social Care have also been outstanding showing flexibility and commitment. We are grateful to each and every one of them.

The message we want you to take away from this report is that we are making good progress in meeting our strategic aims and our innovative approach has helped us to respond swiftly and well to the pandemic. However, there is no room for complacency and we will be working hard to continue to deliver our **strategic aims in the 'new normal'**.



Alison Macdonald
Chief Officer

East Lothian IJB and East Lothian
Health and Social Care Partnership



Councillor Fiona O'Donnell
IJB Chair, 2019-21

Contents

Foreword	3
East Lothian in numbers	4
East Lothian Strategic Plan	5
Best Value	6
Keeping Independent and Well	8
Living independently at home or in your community	12
Positive experiences of health and social care	18
Maintaining or improving your quality of life	21
Reducing health inequalities	27
Carers	29
Keeping people safe from harm	33
Engaging and supporting our staff	36
Money matters	40
Performance at a glance	43

East Lothian in numbers

East Lothian as a whole performs better on a number of measures (emergency admissions, emergency bed days and hospital bed days) than Scotland as shown below:



East Lothian IJB Strategic Plan

In April 2019, the East Lothian integration Joint Board approved its new three-year strategic plan.

The plan commits to:

- delivering more care closer to home, taking a more community-based approach to delivering a wide range of services
- better access to services at GP practices
- faster assessment and clearer referral pathways
- helping people to exercise choice and control over their care and to live as independently as possible.

ELHSCP already has a proven track record in successfully delivering care closer to home with services like Hospital to Home, Hospital at Home and Discharge to Assess, which help people avoid unnecessary hospital admission and prolonged stays in hospital when they are medically ready to come home. They have helped East Lothian sustain some of the lowest delayed discharge figures in Scotland over the last two years.

The new East Lothian Community Hospital will be instrumental in keeping care closer to home. Some services have been repatriated from Edinburgh, including Urology, Orthopaedics (musculoskeletal), Rheumatology, Gynaecology, Adult ENT and Audiology. The new hospital also hosts services new to East Lothian, such as, Plastic Surgery for hands, Adult Psychiatry, Antenatal services, Dietetics, and Palliative Care. We also offer Paediatric ENT, Paediatric Audiology and Phototherapy.

The Strategic plan details how the IJB and ELHSCP will also be playing key roles in developing phases 2 and 3 of the new Royal Edinburgh Infirmary and working alongside Hub South East and local communities in transforming services for older people.

We already work with East Lothian Council's Housing Team to help people with additional support needs to live independently. Close working with East Lothian Council's Transportation Team and third sector providers supports flexible transport arrangements for people to travel to hospital and health appointments or services.



Best Value

The duty of Best Value applies to all public bodies in Scotland and underpins ELHSCP's strategic planning, procurement and service evaluation processes.

Audit Scotland is committed to ensuring that Best Value auditing across the public sector:

- adds value to existing arrangements
- is risk-based and builds on our knowledge of individual public bodies
- reports on the delivery of outcomes for people who use services
- **protects taxpayers' interests by examining the use of resources**
- puts an increasing emphasis on self-assessment by public bodies with audit support and validation
- works collaboratively with NHS QIS to ensure our work is aligned and prevent duplication.

ELHSCP works within NHS Lothian and East Lothian Council internal audit programme. All areas of our work are audited, including planning, performance and engagement. The East Lothian IJB's Audit and Risk Committee and ELHSCP's Clinical Governance Group also play key roles in ensuring Best Value.

In terms of procurement, commissioning and delivery of services:

- we have clear a procurement timetable to ensure services operate under clear contract terms
- our contracts have clear measures of performance and service specifications to monitor service outcomes
- our Commissioning Board oversees commissioning and decommissioning of services
- our scorecard system ensures annual review of services and evidence of year-on-year service improvement.

Our Care at Home framework is an example of this.

We also carried out a Strategic Fit and Best Value Review, resulting in an improved grants process that links to our IJB Directions and Strategic Plan.

Best Value

Is about ensuring that our services are well run, operate to high standards and use efficiently the money, equipment and staff they have.

Care at Home Framework

We had a statutory duty to re-tender our set of contracts with providers (Frameworks) openly, equally and transparently under the Procurement Regulations. After an extended engagement period with a wide range of stakeholders, including service-users, families, carers and providers, we concluded a tendering process to ensure agencies on our new Framework for Care at Home Providers met necessary quality standards.

Best Value

Examples of the impact of Best Value on ELHSCP's commissioning and procurement include:

- increased funding to advocacy organisations.
- development of an in-house Financial Management Services to mitigate risks of an external provider
- development of a Carers Support Providers Framework (contracts with providers)
- development of a Community Support Framework.

Our commissioning team monitors and evaluates delivery and outcomes with service-users and ELHSCP staff. There are also specialist teams like the Community Review Team and the Care Home Assessment and Review Team, who work closely with providers, to monitor and evaluate outcomes.

Developing Care at Home Services
Update: April 2017

New framework providers announced:
The two frameworks (groupings of contracts with providers) that provide care at home and housing support, expire on 31st March 2017. Therefore, the council had a statutory duty to re-tender these services openly, equally and transparently under the Procurement Regulations. This process got underway in December 2016, after an extended engagement period with a wide range of stakeholders, including service users, families, carers and providers. The council has been assessing tender applications over the last few weeks and has now decided which providers should be included in the new Framework. They are:

Provider	
Allied Healthcare	McSena Communications Ltd
Beyond Homecare	Mears Care (Scotland) Limited
Call In Homecare Ltd	Peulumbia
Caroline Homecare	Places for People Scotland
Crossreach	Real Life options
Delight Supported Living Ltd	Social Care Recruitment and Training
ELCAP	Thera (Scotland)
ENABLE Scotland	

If your provider is not on this list
If your provider is not on this list—it does not mean they are not working in East Lothian. Many of the Providers not on this list will continue to provide support under self directed support option 1 & 2.

What happens next?
We will write out to service users if we can't contract with their provider directly. If this is the case we will offer a further provider or you can use self directed support option 1 or 2 to purchase your support. There are a number of possible outcomes for supported people and their families under the new Framework, including that:
• the provider is successful and no change to service.
• the provider is unsuccessful or chooses not to tender for new services in which case

Hi
My name is Simon Pearce and I'm the Managing Director for Thera (Scotland). We believe that we are as focused as we can be for people with a learning disability being leaders in their society because:
• the people we support lead their support.
• we regularly check the quality of their support.

We have a strong vision that underpins everything we do. Thera (Scotland) has a Board that has people with a learning disability as Directors on the Board that enables a lived experience of receiving support and additional skills being complimented to Thera (Scotland). We are very excited about working with and in East Lothian and I hope to meet you soon.

Find out more about Thera at www.thera.co.uk/thera-scotland

Find out more about person-centred care by emailing info@eastlothian.gov.uk

NHS
Forth Valley

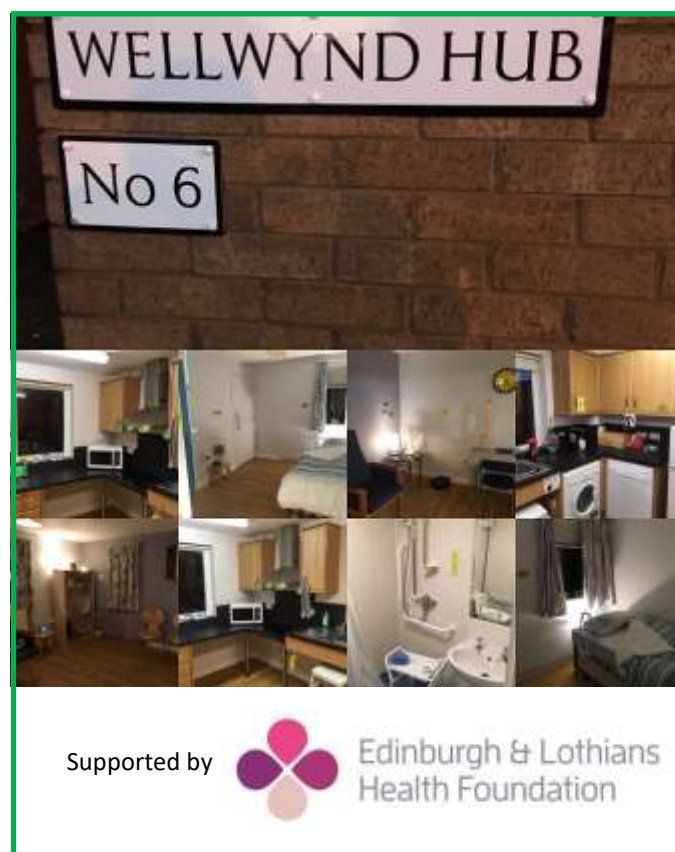
Keeping independent and well

In this section, we look at how East Lothian Health and Social Care Partnership is working with people to help them look after their health and wellbeing. Much of this section focuses on the work of our Rehabilitation, Falls and MSK Teams and the use of smart technology. However, it is worth noting that we have continued to promote healthy living through our Public Health Team and their partners, support for better mental health and active living. You will find more information about this in other sections of the report.

Telecare — from analogue to digital

Our TEC team is working closely with the Digital Office (working with local authorities in Scotland to effect 'digital transformation') and the Scottish Government Technology Enabled Care programme team to trial new digital alarms in preparation for the proposed decommissioning of the analogue phone network by 2025.

This is a complex task and requires involvement from a variety of stakeholders. As part of the trial East Lothian was awarded funding to update the alarm receiving centre and purchase digital alarms and a variety of sensors to trial.



Smart technology

We opened the award-winning Wellwynd Hub, at the end of 2018, and we now have a part-time Occupational Therapist working alongside the Telecare Team to lead on smart technology. Smart technology includes low-cost and readily available products which many people already have in their homes without realising their full potential. Examples include voice activated smart speakers, video doorbells, smart lighting, apps, Telecare and community alarm. Smart technology provides real benefits, particularly to people with lower-level needs and risk, assisting with:

- self management
- control of environment
- summoning help
- supporting people to continue to engage in meaningful activity.

The devices can assist with reminders (appointments and medication), control of lighting and electrical items and phone calls. These functions can allow a person to remain independent with a task which otherwise would have required someone to help them.

Keeping independent and well

Smart TEC sits alongside and complements existing technologies including Community alarm, Telecare and Environmental Control. We find huge benefit to linking smart technology with these services.



On Friday 25th October, the Hub won the Chartered Institute of Housing (CIH) Excellence in Health & Wellbeing award (sponsored by River Clyde Homes), which focuses on excellence in the areas of fit-for-purpose housing, adaptations and preventative services - Wellwynd Hub definitely fills the bill!

Many people with a higher level of need and risk are supported by use of specialist equipment from the EATS (Environmental and Assistive Technology Service) team

There are huge advantages in introducing smart TEC earlier on in a **person's journey to enable them to remain as active and independent as possible.**

We now offer outcome focused interventions to people who have a long term condition or a health need to support them in understanding what role smart technology may have in their life. Sessions are either delivered at home or within Wellwynd Hub (smart home) led by the Occupational Therapist.

TEC Training

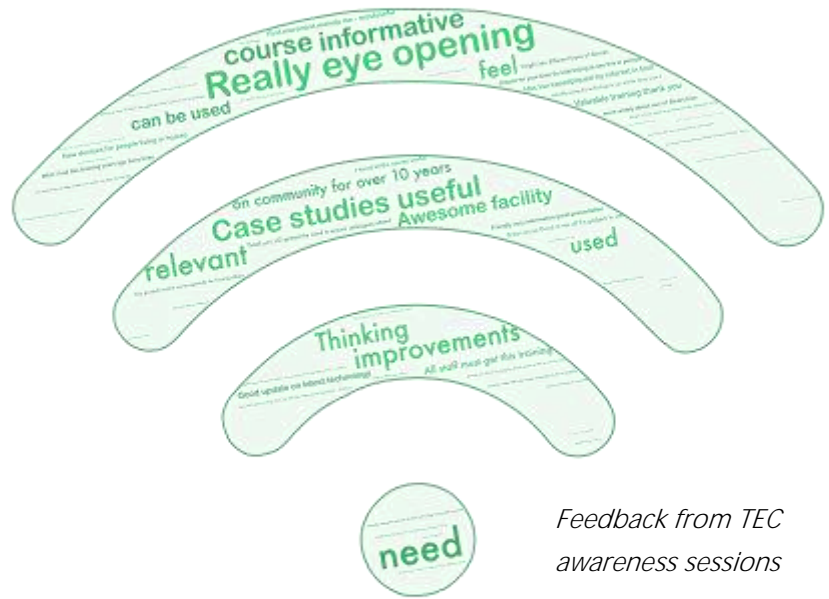
To enable a more informed and confident staff approach to Telecare and smart technology, the TEC team now deliver twice monthly awareness sessions. These target all frontline staff working with people in East Lothian who are vulnerable, have a disability or health condition. We want to help develop the knowledge, skills and understanding required to embed technology enabled care into packages of care to support vulnerable people live independent lives.

Keeping independent and well

Services

A redesign of musculoskeletal services (which manage problems that affect muscles and joints) was carried out over the last year. This succeeded in reducing the routine MSK waiting list to six weeks.

At the same time, primary care drop-in clinics were launched giving individuals quick access to MSK assessment.



Drop-in clinic services are available from Musselburgh Primary Care Centre and East Lothian Community Hospital with six clinics running a week (three per site). Following attendance at these clinics, the individual is provided with treatment if required or directed to another appropriate service such as PACE (Physical Activity Community Education). Ongoing evaluation of these services ensures we continue to offer patients the appropriate level of intervention, at a time that is convenient for them.

How we reduced waiting lists

A project team considered and modernised waiting list arrangements. Laptops with smart technology are now used to input assessments direct onto the Mosaic IT system. This allows colleagues to complete assessments and associated paperwork on the site visit, reducing time spent in the office.

The laptop is used to obtain client signatures for consent to intervention. In addition, it can be used to show clients equipment that may improve their independence, allowing them to better understand equipment choice and function, reducing the need for multiple equipment visits.

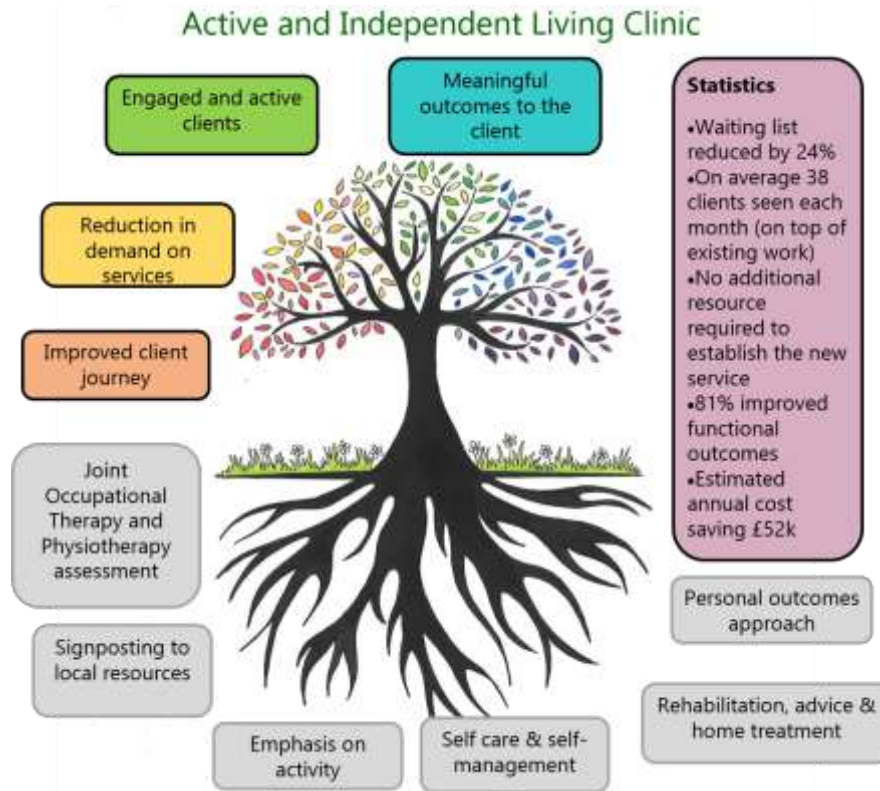
The team now uses iPhone technology, allowing for photographs of property layout to be taken to assist in the equipment planning process. The device can also take measurements and add these to photographs of steps, garden paths, baths etc. increasing the accuracy and speed of assessment.

Our outcomes:

In October 2019, we had 283 people waiting for 39 weeks (10 months) for an Occupational Therapy Assessment.

In February 2020, we had 53 people waiting for under 5 weeks (mean waiting time is 2 weeks) for Occupational Therapy Assessment.

Keeping independent and well



Duty, Response and Rehabilitation Falls Team

A key approach in keeping older people mobile, active and healthy is the prevention of falls.

The Duty, Response and Rehabilitation Falls Team, aims to improve the care, experience and outcomes of people following a fall.

Referrals come from Emergency Care Service, hospital Allied Health Professionals (for example, physios, occupational therapists) GPs, families, Scottish Fire & Rescue Service, Scottish Ambulance Service and District Nurses.

The team provides information, advice, environmental and functional assessments, with ongoing rehabilitation as required and referral onto appropriate agencies. On average 60 referrals a month are followed up by the team.

COVID Reponse

Because the Rehab Team had already been exploring TEC and app-based solutions, they were able to respond to the necessary changes to face-to-face appointments very swiftly. They ceased the drop-in clinics at the start of the outbreak and substituted an East Lothian MSK helpline. This enables people to consult with a specialist MSK practitioner over the phone, and provides them with an assessment, links to online support and onward referral, where necessary.



Living independently at home or in your community

This section looks at the range of our work to support people to retain their independence both at home and in community residential settings. It's just as important for people living in care homes to maintain their independence as it is for anyone else and our Care Home Team has a vital role to play in achieving this.

The Care Home Team

The nurse-led Care Home team supports the residential and nursing care home sector and acts as first point of clinical contact for the Care Homes. The Care Home Team delivers:

- a clinical care home service
- a care home education and liaison team.

The clinical care home service supports care home staff and GP practices to deliver prompt and continuous care to residents of care homes. Nursing expertise combines with clinical decision-making capabilities and prescribing, offering more seamless ongoing and acute care.



The Care Home Education and Liaison Team (CHET) provides support to all 17 care homes in East Lothian. It works to improve the quality of care by providing support and ongoing education to care home staff of all grades in the care-home sector. The team supports local health protection and infection control support and guidance, including training and delivery of the yearly flu vaccination programme to care home staff. It also works closely with the Care Home Review Team to investigate concerns in individual facilities and address issues as needed.



The education programme is supported with input from the NHS Lothian clinical education department at Comely Bank.

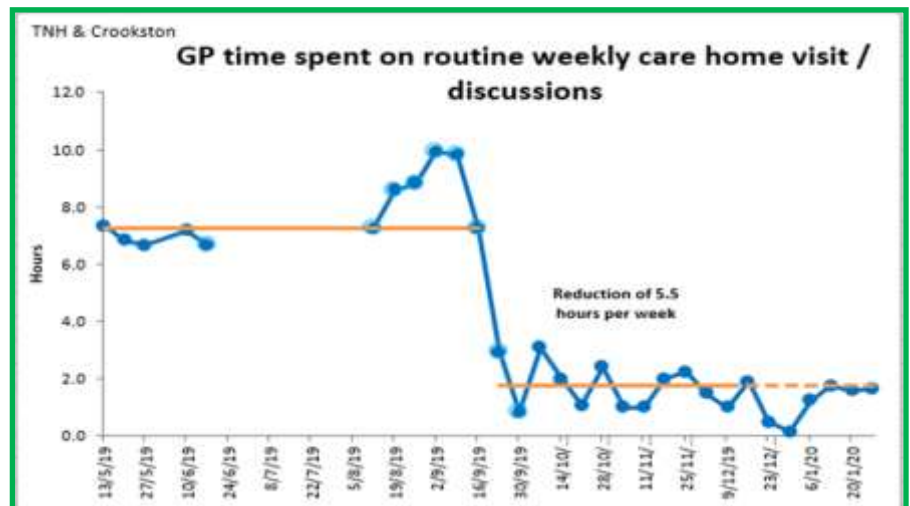
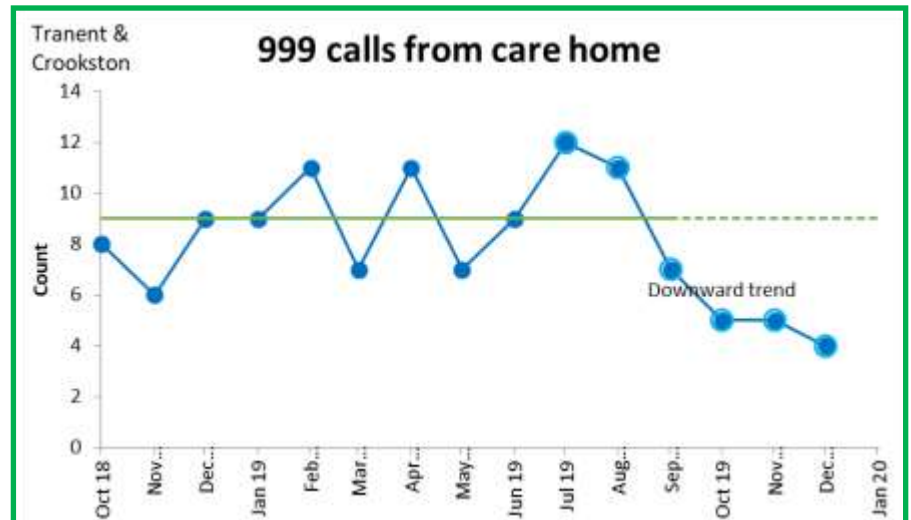
Living independently at home or in your community

Impact of Care Home Team

The Living Well in Communities (LWiC) branch of the Improvement Hub for Healthcare Improvement Scotland have been working jointly with East Lothian HSCP, Tranent Care Home, and Tranent Medical Practice over the last year to evaluate the impact of the Care Home Team locally and better understand the impact of this service.

Data collection began in April 2019 and is ongoing. Early findings from this project highlight:

- ✓ a reduction in 999 calls from care homes
- ✓ an improvement in Anticipatory Care Planning, with the majority of patients now having their preferred place of final care recorded.



Support to GP practices

The project also highlights the value of the Care Home Team from the GP Practice perspective, including increased levels of confidence in the ability of the Nurse Practitioners to provide an excellent level of clinical care. LWiC are keen to look at ways to spread learning from the innovative approach taken in East Lothian to other areas of Scotland.

The Care Home Assessment and Review Team (CHART)

The Care Home Assessment and Review Team comprises a team of social workers dedicated to supporting people to access the most appropriate community support to meet their needs when they are leaving hospital. They support complex discharge planning, through person-centred assessments that take into account wider social and family circumstances, and information from their family, friends, Power of Attorney, and others who support the person.

Living independently at home or in your community

Recommendations may include the type of support that is required on discharge or potential placement in a residential or nursing care home where a return home is not possible. CHART also upholds Adult Support and Protection legislation, including robust investigation of concerns or complaints, and regular reviews and monitoring of placements to ensure individuals receive a good quality of service. This also feeds into our Best Value process (see pages 19-21).

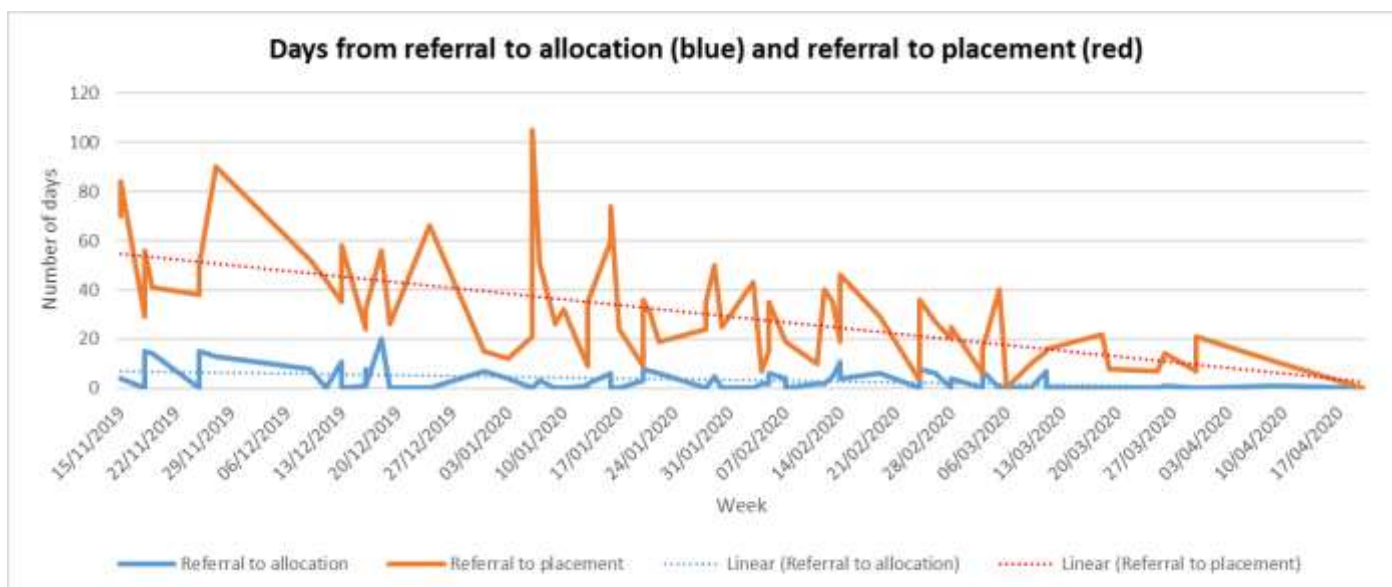
CHART also has a wide-ranging role in monitoring and evaluating care homes in East Lothian.

There are:

- 17 care homes in East Lothian
- 674 placements funded by East Lothian Health and Social Care Partnership
- 246 new placements in 2019 alone including 160 care home placements from hospital.

A further 13 people were returned home supported by Home First.

It is the team's aim to see people able to access their care home place as soon as possible as safely as possible. The table below shows that they have made a significant impact on shortening the length of time between the time a person is referred for allocation and their referral to a placement.



The Team is the point of contact for any incidents within care homes, operating a 'duty' system to deal with immediate concerns, including any Adult Protection issues. A Link Social Worker role has been developed for all East Lothian care homes, improving communication between providers and the HSCP. Where necessary, and guided by the Public Protection Office, the Team takes a lead role in Large Scale Investigations within care homes across East Lothian.

Living independently at home or in your community

In 2019-20, there was an average of 30 care home incidents and one Adult Protection investigation per month. The team employs various techniques in pursuing their enquiries. Below is a case study of an incident during 2019-20.

CHART case study

In an exit interview, a staff member raised concerns re conduct of other staff. This was reported by the care home provider to the Care inspectorate and then to social work. CHART carried out an investigation under a statutory Duty to Inquire – Adult Protection investigation. This involved speaking to residents and their families, carrying out reviews and examining records.

This was a huge challenge for the care home, which had a relatively new management team and a close staff team. It was very distressing for all involved.

CHART provided support to the management team of the care home.

Outcome: the staff members who were the complaint were suspended and ultimately dismissed

Our care homes also focus on keeping people as independent as possible, as their recent Care Inspectorate reports confirm.



Crookston Care Home gets 'Very Goods' from the Care Inspectorate

The Care Inspectorate carried out an unannounced inspection of Crookston Care Home in December 2019 to check how well Crookston supports people's wellbeing and plans their care and support. The answer is very well indeed.

Inspectors reported that people were happy with their care and support. Relatives told them that the home keeps them well informed about their loved one and staff were always kind towards them when they visited.

'No matter what time of day or night we visit, we always find staff being attentive to our relative,' said one family.

Living independently at home or in your community

Residents have a say in decisions about the care and support which affect them, including end of life. They also choose where and how to spend their time and participate in a range of activities. **During the inspection, several female residents went to Crookston's own hair salon, which turned into a real social event for the women involved.** The inspectors noted that staff in different units engaged in small-group activities with residents. Mealtimes were very calm and relaxed and residents enjoyed their meals. Staff sat with residents at mealtimes, making meals more of a social experience. The inspectors commented that meals were of a good quality and people spoke highly of them.

They found that care plans were regularly reviewed and updated, and involved input from relevant professionals, and that as well as considering best practice, care plans make clear **resident's preferences and wishes.** They were able to see residents' health improving as a result of the support that they received. They also commented on a section within care plans relating to physical activity, which they thought was useful for identifying how individuals could stay as physically active as possible.

East Lothian Integration Joint Board Chair Councillor Fiona O'Donnell says:

'Pauline and her team really deserve their "Very Good" rating. They look after the people who use the home with great affection and respect and are very supportive of relatives too. They are also very innovative, pioneering work with Rempods in East Lothian – people might have seen these reminiscence rooms for people living with dementia when they received backing on Dragon's Den. Crookston was also part of an award-winning intergenerational project last year with Sanderson's Wynd Primary.

....And the Care Inspectorate officers were particularly impressed with the work of staff to ensure its residents could vote. The report said: "We visited the service in the run up to a General Election and could see that residents were actively supported to vote and exercise their citizenship rights."

The care home received a grading of 5 (very good) for its care and support planning and the way it supports residents' wellbeing. The inspectors praised staff for their relationships with residents as well as the activities on offer and meals offered, and also the strong links with the community health team. They said: "People living at The Abbey were able to contribute in a variety of ways to decisions which affected them and people were able to choose where and how they spent time.

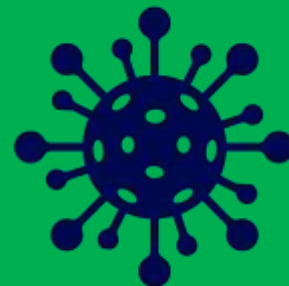
"We observed warm, compassionate and nurturing relationships between staff and people who lived at The Abbey, with lots of good humour and laughter. These warm relationships extended to family members, who were welcomed and included as part of the ethos of care and support within the service."

From an article in East Lothian Courier, 8th February 2020

Living independently at home or in your community

COVID response

The Care Home Team and District Nursing teams supported staff to adhere to up-to-date guidance and advice. In addition, specific training and support has included:



- Ensuring the safe application and disposal of PPE
- Escalated support to homes with positive cases to ensure robust infection control
- Arranging urgent PPE from East Lothian hub stock if required
- Circulating all current guidance and ensuring our homes have access to information that is circulated
- Visiting homes to demonstrate PPE donning/doffing and infection control
- Educational components focused on infection control, including helping staff understand PPE, including 'how safely to put it on and take it off
- Video links of training provided and offers to all care homes for visits as needed
- Continued emotional and phone support for staff
- Delivery of face-to-face training where agreed.

Role of CHART

- Ensuring adequate PPE was available
- Monitoring and supporting homes where there were COVID cases.

Positive experiences of health and social care

Community Treatment and Care Service



In Autumn 2019, we began developing our first Community Treatment and Care Service (CTACS), which is based at the new East Lothian Community Hospital. We planned to open CTACS early in 2020. The treatments rooms were in place, staff team recruited and the communications campaign delivered. Unfortunately, we had to delay opening until early June 2020, as the highly-trained nurse-led team were pulled in to support our effort to combat the spread of Covid-19. However, because the groundwork was in place before outbreak, they were able to deliver the service from early June 2020.

Patients of the Haddington practices have been able to access services provided by expertly trained nursing staff and benefit from being assessed and treated in the excellent new premises at East Lothian Community Hospital. CTACS updates the three Haddington practices involved on patient management and involves them in patient care when necessary. Services include:

- Removal of sutures/staples after operations or injuries
- Wound care – including management of leg ulcers or wounds after surgery or injury
- Some blood tests that may have been requested by hospital specialists.

'CTACS is a new way of receiving care – one which helps us to ensure people are able to see the right person at the right place at the right time, and one which I am sure the community will come to value.'

Councillor Fiona O'Donnell
East Lothian IJB Chair



Positive experiences of health and social care

CWIC (Care When It Counts)

The CWIC team was established in Musselburgh Primary Care Centre in 2017 using Primary Care Transformation Funds in order to test approaches to meet same day demand through a non-medical team.

This has allowed the Health & Social Care Partnership (HSCP) to assess the role of Nurse Practitioners, Advanced Nurse Practitioners and Advanced Scope Physiotherapists in delivering primary care services. In doing so, this has directed appropriate activity from GPs, one of the requirements of the new General Medical Services (GMS) contract.



In parallel to CWIC, the HSCP developed, in partnership with NHS 24, a new primary care telephone triage service. Telephone triage is being considered for roll-out to other GP practices across the county.

East Lothian Community Hospital

In Autumn 2019, NHS Lothian and East Lothian Health and Social Care Partnership were 'given the keys' for the remainder of the newly completed East Lothian Community Hospital building.

The Outpatients Department had already been in operation since March 2018. The final phase, focusing on car parking and landscaping was delivered in Spring 2020. The new three-storey, 22,000sqm hospital building in Haddington provides:

- inpatient care
- endoscopy and minor procedures
- outpatient services (including mental health and new service developments)
- shared therapies
- third sector and community facilities.



Alison Macdonald, Chief Officer, East Lothian Integration Joint Board, said:

The new hospital brings huge benefits for patients and carers in East Lothian. In particular, it will enable people to have a range of procedures in a brand new, purpose-built hospital for which they previously had to travel to Edinburgh or further afield.'

'It is also a real asset to the community, with public rooms available to local groups, local radio providing hospital broadcasting and the hospital's grounds open to all. I would really like to take this opportunity to thank our project team, our staff, our local artists and the community for their collaboration and support for the new East Lothian Community Hospital. They have done a fantastic job.'

Positive experiences of health and social care

Winter Plan

Every year, NHS boards are required to produce plans to ensure resilience over the winter months. East Lothian's Winter Plan, agreed by the East Lothian Integration Joint Board on Thursday 31 October 2019, aimed to keep pressure off Lothian's acute hospitals by treating more people than ever at home or closer to home.



Services like our Discharge to Assess intensive rehabilitation team, the COPD Advanced Physiotherapy Practitioner and our Patient Flow Team worked extended hours seven days a week to support speedier assessment and discharge from hospital. This relieved pressures on hospital beds over the winter measures months. We increased the capacity of the Hospital at Home team to ensure that patients had care packages in place as soon as they were medically ready to be discharged from hospital. We also increased the operating hours of the Emergency Care Service, so that it ran overnight as well as during the day. This service focuses on helping people to stay at home during a crisis rather than having to be admitted to a care home or hospital bed.

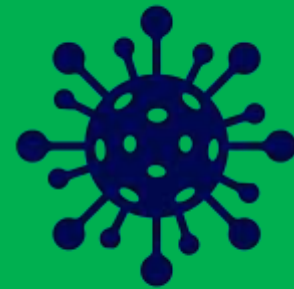
East Lothian Health and Social Care Director/East Lothian IJB Chief Officer Alison Macdonald says:

"We developed our plan alongside other Health and Social Care Partnerships in the Lothians and the Acute Services Division of NHS Lothian.

"We had a good range of services already working to reduce hospital admissions and help people home from hospital as soon as they were ready and it's great that we were able to enhance this tried-and-tested provision over the winter months to help take the pressure off Lothian's acute hospitals. We believe that early intervention and care closer to home is the way forward for winter and all year round."

COVID Response

The key things we did to ensure positive experiences of health and social care at the beginning of the Covid-19 outbreak were to:



- share reliable information quickly and effectively through as many channels as possible, including social media, the local press, **radio, web pages, partners' information-sharing networks** and internal staff communications. This included information about visiting restrictions for care homes and hospitals, how to use PPE correctly and alternative arrangements for GP practices, mental health and MSK support
- transfer as much face-to-face support to phone, video and online support (for example, NHS Inform) so that we were able to continue supporting people through different means
- keep people in our care homes in touch with their friends and families through social media
- keep patients and relatives in touch using iPads and Kindles in East Lothian Community Hospital
- Using feedback from staff, community resilience teams, East Lothian Council and third and independent sector partners to identify areas of concern for people who use our services and trying to provide them with the information they needed to address issues.

Maintaining or improving your quality of life

We take a person-centred approach to all our care. We work with people to find out what will help them to maintain and improve their independence and give them the support and advice they need to achieve this and live the sort of life they want to. As you can see from this section, this is a wide-ranging topic covering everything from preventing hospital admission and speeding up discharge to making Self-Directed Support as easy as possible through to supported housing and Shared Lives.

Discharge to Assess (D2A)

From Feb 2019 to Feb 2020 D2A saw 361 people - an average of seven patients per week across the county.

The team started taking prevention of admission referrals directly from the GP - 57 people for the 2019/20 period.

We are in the process of expanding and integrating the entire Occupational Therapy (OT) and Physiotherapy (PT) community teams across Health and Social Care. This places East Lothian community rehabilitation (rehab) teams at the forefront of integrated developments in Scotland.



The integrated team roles include:

- management and assessment of all patients admitted to Hospital at Home
- physiotherapy assessment and rehab of all patients referred for community physiotherapy input
- OT and PT assessment and rehab of all patients admitted to the rehab and step-down wards across East Lothian
- assessment of all patients referred and accepted into Discharge to Assess
- high intensity, high frequency, same day assessment and ongoing rehab for patients referred for 'prevention of admission'
- long-term management of Community OT clients requiring assessment for adaptations and equipment
- crisis OT assessment.

This work has contributed to a significant increase in bed days saved and positive outcomes for patients and families.

Maintaining or improving your quality of life

Self-Directed Support (SDS) Pre-payment cards

Over the year, this service option for people in receipt of Direct Payments has grown. We now have one third of all Direct Payment recipients managing their service in this way. Prepaid cards have been welcomed by all service users currently using them. They provide clients with real-time information on the balance of account, with no need to provide returns and a dedicated customer service team to help with any queries.



For staff, there is much less time involved in monitoring card accounts. Any discrepancies can be identified, queried and resolved swiftly.

SDS Uptake

TOTAL UPTAKE FOR EACH OPTION	2017-18	2018-19	2019-20
All Option 1 (Direct Payment—service user or carer selects and arranges services out of an agreed personal budget)	112	126	126
All Option 2 (Service-user chooses provider, but ELHSCP or other agency manages budget)	98	196	176
All Option 3 (ELHSCP selects and arranges support for the service-user)	845	831	908
All Option 4 (included in Options 1, 2 and 3) (A mixture of options)	129	151	203
TOTAL UPTAKE FOR WHERE PEOPLE SELECT ONE OPTION ONLY	2017-18	2018-19	2019-20
Option 1 only	36	72	58
Option 2 only	45	92	99
Option 3 only	716	687	785
Option 4 (mixed)	129	151	203
TOTAL CLIENTS	926	1002	1145

Maintaining or improving your quality of life

Supported Housing

Adult Services, in partnership with East Lothian Council secured and developed a core and cluster development for supported living in the Prestonpans area.

This cluster of accommodation now supports five individuals with shared on-site support, including an overnight response service. This model of care is enabling a more efficient use of our valuable staff resources and allows us to support more individuals to live independently in the community. We continue to work in partnership with our colleagues in East Lothian Council to identify further opportunities to expand this model of care and support.



Services for People with Learning Disability

ELHSCP in partnership with NHS Lothian and housing provider Castlerock Edinvar has secured a property in Haddington which we are developing to provide a residential short breaks service for people with complex needs. NHS Lothian provided funding which is allowing us to refurbish the property, inside and out, to deliver a bespoke care environment. This service will provide opportunities for short breaks for 2 or 3 people at a time plus will give us the option to provide emergency short term accommodation for an individual as circumstances demand, rather than pursue unnecessary hospital admissions. This service will open in 2020/2021.

Shared Lives East Lothian

Shared Lives East Lothian recruits and supports Shared Lives Carers who work on a self-employed basis. The Shared Lives Carers provide an alternative form of care and/or support where the Shared Lives Carers use their homes as a resource, giving people the opportunity to engage in family and community life. Shared Lives arrangements are set up and supported by Shared Lives East Lothian and the care and accommodation people receive is provided by ordinary individuals, couples or families in the local community. Individuals and their Shared Lives carers enjoy shared activities and life experiences.

The types of care or support that can be provided are:

- long-term accommodation and support
- short breaks/respite
- day time support.

The people who can make use of Shared Lives arrangements are aged over 16 and have a specific support need that may be associated with a learning disability, physical disability, sensory

Maintaining or improving your quality of life



impairment, autism, age and/or mental health. People may use the service if they have had a social work assessment that identifies support needs that we are likely to be able to meet. People referred to the service often have difficulty living on their own or need support to remain living in their own home. People also use the service to give their main carers a short break.

Across Scotland Shared Lives services achieve excellent outcomes for supported people and the services are generally less costly than other comparable services. As a result we plan to recruit more Carers and in 2019/20 we have been progressing this. Following a financial review we have secured agreement to increase the fees paid to Carers and also to change the way that people supported by the service contribute to bring it in line with the charging for other services. We have developed a comprehensive new Carers Handbook which involved reviewing all of the service specific policies and procedures to bring them in line with the Health and Social Care Standards.

Feedback from people supported by the service

'It was the best decision of my life moving here'

'I never got to go on holidays before and now I go with my new family and I love it'

And from carers

'It is a really rewarding job and I get great support whenever I need it'

Maintaining or improving your quality of life

Community Learning Disability Team

The team has supported the client group successfully with no inpatient admissions, and continues to review service delivery arrangements to maximise opportunity.

The nursing team continue to contribute to development of the Paediatric Learning Disability (LD) diagnostic pathway. This remains in pilot stages but is due to be rolled out to health and education. The pathway provides an opportunity for cases to be discussed within a multi-professional forum to identify appropriate diagnosis, required assessments and those best places to work with individual and family/carers. The aim was to reduce the number of inappropriate referrals received by paediatric services including the LD nursing team and to streamline the process to reduce waiting times. Whilst the pathway is in place for children age eight and above, we have discussions in place to review the process for pre-school children and would hope to develop a similar system for this client group.

The logo for the Community Learning Disability Team (CLDT) consists of the letters 'CLDT' in a white, sans-serif font, centered within a light green rectangular background.

The Learning Disability team now operates out of East Lothian Community Hospital and has developed excellent links with fellow Mental Health clinicians. Weekly meetings support integrated working and the sharing of good practice and ideas across teams.

Covid response

The Learning Disability Team have continued to strive to provide ongoing input and support to the client group, families and carers despite the current COVID-19 restrictions.

Initially all clients received a rapid response letter on behalf of the team explaining changes to the service and relevant contact details. This appears to have significantly reduced anxieties and initially reduced the contact requested of the team. Where possible, the team continued to offer essential face-to-face contact and support via technology available to us to prevent acute admission, reduce anxiety and maintain therapeutic relationships. The team drew up a vulnerable risk register and all clients identified are contacted weekly to ensure safety and risk identified are managed.



Reducing health inequalities

Health inequalities are unfair and avoidable differences in **people's health across social groups and between** different population groups. Health inequalities exist between affluent and deprived areas because poverty and deprivation have a major impact on health and life expectancy.



To address this Scottish Government has established a set of standards for public authorities to work to, which are:

- A Scotland where we live in vibrant, healthy and safe places and communities.
- A Scotland where we flourish in our early years.
- A Scotland where we have good mental wellbeing.
- A Scotland where we reduce the use of and harm from alcohol, tobacco and other drugs.
- A Scotland where we have a sustainable, inclusive economy with equality of outcomes for all.
- A Scotland where we eat well, have a healthy weight and are physically active.

Some of these standards are not within ELHSCP's direct remit, although we work alongside partners at East Lothian Council and NHS Lothian to assist in addressing all factors, which may lead to health inequalities, for example, promoting breast-feeding, good parenting, physical activity, income maximisation and amenity housing. We are directly involved in supporting better mental-health and well-being, supporting people with substance misuse problems, supporting people who have committed offences, and helping people to increase their mobility and activity to maintain their independence.

Here are some examples of activities in 2019-20 that also helped to address issues that contribute to health inequalities.

Violence against women and girls (VAWG)

The East and Midlothian Public Protection Office (EMPPO), through its Violence against Women and Girls Partnership, runs a year-round campaign to raise awareness of violence against women and girls. They produce a monthly newsletter for professionals and the public which pulls together information on policy developments, **events, training and courses**. They also work with Women's Aid East and Midlothian on specific events.

East Lothian Health and Social Care Partnership actively supports the work of VAWG and helps to promote awareness widely.



Reducing health inequalities

16 Days of Activism and White Ribbon campaign

From 25 November to 10 December 2019, we promoted 16 Days of Activism which focused on working with communities to enlist their help to put an end to gender-based violence. We invited local individuals and groups to share social media posts on their accounts to promote awareness. We also invited them to run off some of our *Hidden in plain sight* posters and put them up in communities and workplaces. There was also a *Building Wellthy Communities* event.



ELHSCP and EMPPO encouraged senior staff to be proactive in supporting the White Ribbon Campaign, signing up to the pledge:

'Most men do not commit violence against women but all men have a role in ending it. Making a pledge never to commit, condone or remain silent about men's violence against women in all its forms will make a huge difference. Sign the White Ribbon Pledge today.'



East Lothian Council Depute Chief Executive Alex McCrorie personally encouraged men in East Lothian to sign up, as did Head of Infrastructure Tom Reid and Communications Manager Stewart Cooper, in a series of videos that were very well received, shared and viewed.

Sexual exploitation statement

East Lothian Health and Social Care Partnership supports EMPPO and East Lothian Council's Sexual Exploitation of Women Statement, which was adopted by the council in 2018.

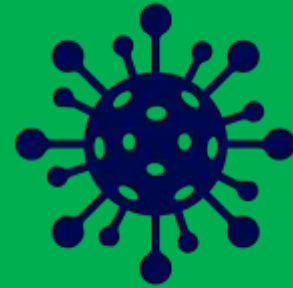
Integrated Impact Assessments (IIAs)

ELHSCP, like all public sector organisations, is required to assess the impact of our decisions and policies on equalities groups. We do this through a process call Integrated Impact Assessment. Representatives for people affected by our decisions (including staff, service-users, the third and independent sectors) work through an IIA framework together. They look at the potential and actual positive, neutral and negative impacts of decisions on the groups they represent. Outcomes of IIAs through the year are available on the HSCP and East Lothian Council websites.

Reducing health inequalities

COVID response

We worked with partners to mitigate the impact of Covid-19 with East Lothian Council and local resilience groups, responding swiftly to a constantly changing situation. You will have seen details elsewhere in this report, but it is worth mentioning here the work we did to:



- **Support homeless people's health needs**
- Ensure that vulnerable and isolated people received help, support and food
- Support the mental health service-users by adapting our services from face-to-face to phone support immediately
- Support the mental health of staff and communities by putting them in touch with online resources that offered help and advice
- Establishing the HR implications of shielding and self-isolation for staff.

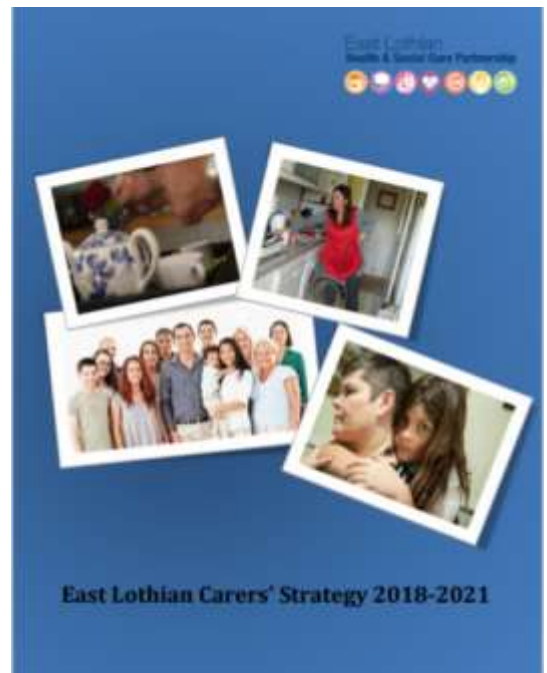
Carers

Caring for someone can be a rewarding experience, but when you're coping day to day and responding to the needs of others it can be difficult. We continue to work closely with young carers and adult carers and the organisations that represent them to try to ensure that they have the information and support they need.

Supporting carers

Now that the East Lothian Carers Strategy has been published, ELHSCP are focusing on its implementation. This has included developing an Action Plan to guide activity over the next few years. Work on implementation continues to be led by the Carers Change Board that is also directing the use of the additional funding provided by the Scottish Government towards increasing support available to carers. We are currently in year two of the 5 year increase in funding.

The majority of the Carers Act funding for 2019/20 has again been passed directly to our local carers organisations. Funding has been used for a variety of purposes with organisations increasing their staffing with the aim of improving the identification of carers but also their capacity to respond to increasing demand on their services as more carers are identified. Young carers club places have also been increased to provide more young carers with access to breaks from caring.



Developments over the year

- Carers of East Lothian (COEL) moved their base to the East Lothian Community Hospital in 2019. This has improved their profile with staff at the new hospital, and carers visiting their relatives on the wards. COEL are now also actively involved in the Hospital at Home virtual ward rounds and are already seeing an increase in referrals to their service.
- COEL are also using their new base to publicise their Thinkcarer training, which is being provided to NHS staff at the hospital. The training aims to increase awareness of carers among professionals to ensure that carers are aware of and informed of their rights, and the support available to them.
- COEL have also set up a new counselling service for carers. Although the service is in its initial stages, the plan is to develop capacity within this further through the recruitment of volunteer counsellors and trainees.
- COEL increased the capacity of their parent carer support service by making this post full time in 2019. This is in response to a continued increase in referrals from parent carers to the service.

Carers

- A range of events were held during Carers Week again this year, including the renewal of the carers card supported by East Lothian businesses with offers and discounts available for carers. COEL also organised a film screening of the film *Carers' Stories* at the Brunton Theatre with over 200 people attending.



Councillor Fiona O'Donnell
Chair, East Lothian
Integration Joint Board



'I want to make sure that all our unpaid carers are recognised for the way they are dealing with the difficulties they are experiencing. I cannot tell you how much I respect them for the way they have responded during these challenging times.'



- ELHSCP has supplemented short breaks funding that COEL receive from Shared Care Scotland and to date 37 grants have been awarded to carers towards short breaks (for first 6 months of 2019)
- East Lothian Young Carers continue to work with schools to raise awareness and are offering lunchtime drop in sessions for young carers at Preston Lodge High School and Ross High School.
- ELHSCP amended its charging policy in relation to the provision of replacement care and short breaks in 2019 with carers who meet the eligibility criteria now able to access these services free of charge.
- ELHSCP are continuing to undertake engagement with carers to find out what services they find most helpful and where they would like to receive support from. Surveys were given to adult and parent carers and we are continuing to arrange focus groups with young carers and young adult carers. Feedback from these will help to inform how to develop carer services in the future.
- **Childrens' Wellbeing have also been working closely with schools to raise awareness of young carers.** A new young carer referral pathway was developed and to date 80% of Head Teachers and Deputy Head Teachers have been briefed on how young carers can be referred for services.
- ELHSCP is continuing to work with Dementia Friendly East Lothian on their Meeting Centres Initiative. Meeting Centres are local community social spaces for people with dementia, their carers and family and friends. Centres are able to provide information, training and support to those attending. A pilot is being planned and led by Musselburgh Local Area Partnership Health and Wellbeing Sub Group.

Carers facts and figures for 2019-20



14.5% ↗ increase in adult carers accessing support through COEL

22% ↗ of carers in East Lothian are known to COEL

£580,000 ↗ gain for COEL carers on benefits over 6 months

87 ↗ young carers supported by East Lothian Young Carers

Carers

Carer's eye-view

In East Lothian it is estimated that at least one in six of the population have an active caring role. The IJB greatly values the vital role that Carers play in our society and seeks to build on its support for Carers. The IJB also recognises and supports the important roles the Third Sector plays in delivering services and contributing to policy development. Here are a couple of examples where working in partnership with the Third Sector, grant funding directed by the IJB has helped extend existing services or create new ones for Carers throughout East Lothian.

Jess Wade, Chief Executive, Carers of East Lothian explained:

"In 2019/20 Carers of East Lothian had our busiest year yet, with additional financial support from the IJB ensuring we could provide direct, individual support to over 1,200 carers.

'We are delighted to report that, thanks to continued funding of our Welfare Rights Worker, we were able to support carers to claim over £1,000,000 in annualised welfare benefits.

'Additional Carers Act funds allocated also meant we were able to set up a local counselling service specifically for carers in East Lothian, which has proved a particularly important resource to support carers through the COVID-19 crisis'

Sarah Davis Director, East Lothian Young Carers said:

'Funding approved by the IJB in 2019-20 allowed East Lothian Young Carers to support seventy eight young carers.

'Young carers were offered practical and emotional support including Young Carers Statements, support with school and further education, individual support and breaks from caring.

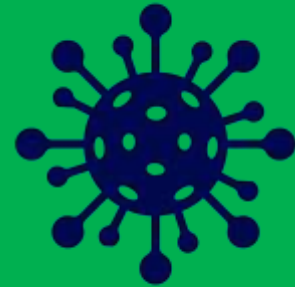
'Working with young carers and their families holistically, support was provided to reduce any negative effects of caring and to ensure young carers had the same social and educational opportunities as their peers.'



East Lothian Young Carers
Covid-19 Support Packs

Covid response

The mainstay of our Covid-19 response was working in close partnership with:



- staff who were supporting carers, for example, care-at-home workers, community care workers and social workers. This began immediately and centred on learning from staff what the key issues were in terms of delivery and support, for example, PPE, dealing with isolation/shielding and sustaining good mental health and physical wellbeing
- carers representative groups - Carers of East Lothian, East Lothian Young Carers and Bridges Project. This helped us to respond to carers needs as much as possible and share information about support, advice and resources. Carers of East Lothian produced a weekly resources guide which we shared with staff, third sector partners and community resilience groups
- Community Resilience Groups, who kept us informed about the wellbeing of carers they were working with and specific help needed. Third and Independent sector partners also kept us informed of issues, for example, around the correct putting on and taking off of PPE and when to wear it.

Social media

Social media, both ours and that of our partners, played a key role in:

- keeping carers informed and up to date with policy and guidance
- providing training around PPE
- linking into support with managing digital access (through Ability Net webinars)
- trying to keep up morale
- linking to health and wellbeing resources, both by phone and online.

Keeping people safe from harm

Keeping people safe from harm underpins everything that we do (and you will already have seen some examples in other sections of the report). It ranges from protecting vulnerable people from others who put them at risk to ensuring that vulnerable people are protected from their own actions and do not put others at risk.

Justice Social Work Service

In East Lothian, Justice Social Work Services provide a statutory service to people who offend, their families and victims of crime. The key outcomes are community safety and public protection, the reduction of re-offending and promoting social inclusion to support desistance from offending. We are committed to reducing the imposition of custodial sentences in line with the extension of the Presumption Against Short-term Sentences (PASS), which came into effect in July 2019, by offering a wide range of community disposals.



The Justice Social Work Service provide reports to the Court to aid sentencing as well as the Parole Board to support people returning to the community after a period in custody.

Those who have received a custodial sentence are provided with support on their release. In all cases, the Justice Social Work Service will develop an action or case management plan to support the individual to avoid further offending and resettle back into their community.

East Lothian Substance Misuse Service Developments 2019/20

East Lothian Substance Misuse Service supports a wide range of drug and alcohol problems. Here are some highlights of a very busy year:

- Confirmed appointment of first permanent full time service manager in more than five years
- Developed a weekly drop-in clinic for the most chaotic clients,
- Initiated a successful trial of two full-time substance misuse nursing posts working within Primary Care and supporting primary care colleagues. There are plans to expand this service by two more posts in 2020-21
- Successfully addressed longstanding waiting lists issues, now routinely meeting [the HEAT A11] target of access to treatment within 21 days
- Established a regular weekly Blood-Borne Virus Clinic
- Established a pilot of a weekly evening Women's Sexual Health Clinic with plans for this to be established as core to service over the coming next year
- Initiated routine prescription deliveries to all East Lothian pharmacies
- Increased levels of joint working with MELD 3rd sector partnership colleagues, holding the first ever joint EL NHS/3rd Sector service development day to plan for the future of East Lothian Substance Use services.

Keeping people safe from harm

In partnership with MELD workers established East-Lothian-wide Injecting Equipment Outreach Service – Plans to expand this service over the coming year. They have also agreed and secured funding for the purchase of ECG and vital signs monitoring equipment to allow our client group faster access to appropriate health screening.

MELDAP Rights, Respect and Recovery

The key areas of activity for MELDAP and its commissioned services over the last year were promoting recovery, keeping people safe and reducing the harm to individuals who use alcohol and drugs in problematic ways. These themes and how MELDAP plan to further address them are set out in its draft Delivery Plan 2020-23.



The Delivery Plan's priorities are aligned to those in the key national documents including: Rights, Respect and Recovery, the Alcohol Framework, Staying Alive in Scotland, the work of the National Drug Related Deaths Taskforce, 'Evidence-based Strategies for Preventing Drug-Related Deaths in Scotland: Our Emergency Response. It also takes into account, local data and evidence of need reported in the Health 2019 Needs Assessment and through consultation events.

Challenging the stigma and discrimination experienced by people who use drugs, providing accessible and flexible services available at evenings and weekends were themes consistently raised which are included for action in the Delivery Plan.

Engaging harder to reach clients, the re-engagement of people who drop out of service or have little or no sustained contact with our main treatment services has been a key priority as these are the people most at risk of harm.

Helping people reconnect with services and the recovery community are key protective factors. Delivering more community based support and interventions through the expansion of assertive outreach has been strengthened by significant additional investment including peer workers and GP practice based nurses. Ensuring people are seen quickly and have rapid access to opiate replacement therapy are all being delivered. The wider distribution of Take Home Naloxone (THN) has been strengthened through the introduction of Safe Storage Boxes (SSB) available to clients with children. Each box contains THN as well as guidance on safe storage of methadone. The SSB scheme has been extended to include any at risk client.

Staff report that poly-drug use is increasing with a marked increase in the number of people using stimulants, cocaine in particular. MELD has recently been awarded Scottish Government funding to develop a stimulant service. Using the experiences of past and current stimulant users will be a cornerstone of when, what and how services are provided.

A young people's services providing support and advice for people aged 12-21 began seeing young people from January 2020. Closely linked to the six secondary schools the service aims to target those young people at risk of exclusion, who have record of irregular attendance, have been involved in the care system and who have begun to use alcohol and drugs in ways likely to cause harm.

Keeping people safe from harm

Elderly Community Mental Health Team

The team has been changed from Dementia and non-dementia sub-teams to an East and West sector split with all nursing staff now having the opportunity to upskill in all areas of mental health. This will improve the patient journey through our service.



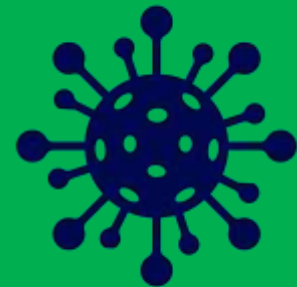
The team is working closely with Oaktree Ward to offer a smoother patient journey and to reduce the length of admissions. It is also developing a Mild Cognitive Impairment group as evidence shows that early intervention can prevent development into Dementia for some people.

Staff have also been proactive in arranging in house training to continue their development over the next few months to improve their knowledge and skills as the service changes.

COVID response

MELDAP

Covid-19 has increased the level of harm for people who use alcohol and drugs. The partnership and its services have responded promptly and creatively. Advice set out in the March 2020 document issued by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) update on the implications of COVID-19 for people who use drugs (PWUD) and drug service providers was used to develop a set of key harm reduction messages, 'Stick Don't Twist' used by adult services.



Elderly Community Mental Health Team

- We continued to provide support to all existing patients via telephone support.
- We continued with face to face visits for any urgent referrals during Covid.
- We took part in joint working with social work colleagues to carry out urgent assessments for care packages.
- Staff have been proactive in learning new technology to continue with good communication pathways, adjusting their working patterns to allow for social distancing whilst continuing a high standard of service.
- A waiting list of 28 patients developed for dementia diagnosis due to cancelled appointments. However, this list was reduced to 0 within 5 weeks as staff adapted to telephone assessments and diagnosis.

Engaging and supporting our staff

We value our staff and engage and support them throughout their working life with the Partnership. Engaged staff are committed, motivated, enthusiastic and invested. Input from our staff enriches our organisational culture and their experience, learning and ideas feeds into our strategy, commissioning and delivery.

Here are some of the key staff engagement activities from 2019-20.

Welcome events

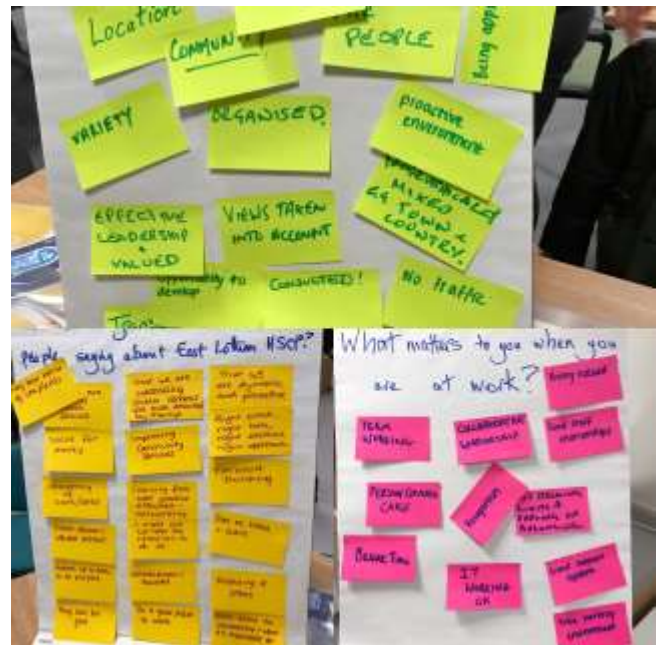
Combining staff from two different employers presents certain difficulties for integrated working so we have established Welcome Events for new staff. These focus on showing that East Lothian Health and Social Care Partnership shares the values of East Lothian Council and NHS Lothian, and that, in fact, that these two organisations share many of the same values themselves.



The sessions also reflect on the ethos of the Public Bodies Joint Working Act (Scotland) 2014 and the **benefits it foresaw for integrated working**. We look at the Partnership's strategic planning objectives and Directions (the instructions to East Lothian Council and NHS Lothian to deliver the appropriate resources to deliver our strategy).

The Welcome Event is delivered through a mixture of workshop sessions and presentations. A key feature is that senior managers take part in the session, as does the IJB service-user representative to underscore the importance that the Partnership places on **service-users' involvement and experience**. The workshop sessions are based around five themes.

- What would you like to hear people saying about East Lothian HSCP?
- What's been the best thing so far about working in East Lothian?
- How do you want to treat each other?
- What questions would you put to senior managers present today?
- What matters to you when you are at work?



Workshop feedback is used and fed back to managers and planners.

Engaging and supporting our staff



Management engagement events

We also have a rolling programme of management engagement events that enable services managers to understand what is happening in other services across the partnership, share good practice and look for joint-working opportunities. There is also a focus on what is happening nationally in health and social care integration.

The Partnership is a large organisation, encompassing many disciplines, and these events have proved to be both popular and fruitful. It is also an opportunity for managers to find out more about one another and focus on how to work together to best achieve our strategic aims.

Alison's Blog

As staff are still employed by either the council or the NHS, there was no integrated system for communicating with all Partnership staff. Therefore, in **December 2019, we launched Alison's Blog** which is accessible to all staff via PC, laptop or mobile phone.

In early March, 2020 we decided to use **Alison's Blog as a way of getting** information out to staff quickly in the light of Covid-19. We have been producing daily updates for staff, with a link to new articles sent out to staff every day. We use the blog to update people on guidance, policy, national developments, sources of help (for example, mental health and wellbeing support), resources and staff news.

It has a comment feature that enables readers to have a conversation about articles and add information. It also hosts that MYVOICE email account for people who wish to discuss anything sensitive directly with the Chief Officer.

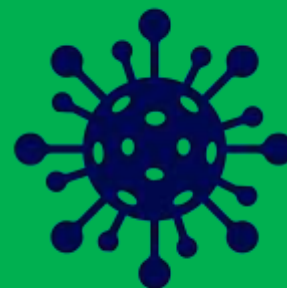


Engaging and supporting our staff

COVID response

Keeping staff safe and informed

- Towards the end of March, HSCP staff with non-clinical/ non-key worker roles began to work from home as the UK moved into 'lockdown'. This required staff to adapt quickly to working remotely, making use of technology and meeting with colleagues using online platforms. Preparations earlier in March helped to make sure that the necessary equipment and software supported staff to work effectively from non-office settings.
- Provision was also put in place during March to support those clinical and key worker staff still required to work in their usual and primarily clinical workplaces. This included early action in sourcing and managing delivery of Personal Protective Equipment (PPE) supplies to staff across all services, as well as making sure that staff had the information and advice they needed to use the PPE safely and effectively.
- Communication with staff was key from the outset, with *Alison's Blog* updates playing an important role in terms of communicating all the latest information and allowing two way dialogue with staff. The NHS Lothian COVID 'Speedreads' also provided daily updates to staff. In addition, some teams formed daily huddles as a means of keeping staff informed.



Managing the COVID-19 response

- Systems were put in place in the early stages of the pandemic to manage the flow of information and guidance to and from the Partnership. This included setting up a central, online repository for COVID-related communication and other documentation which needed to be acted on.
- A 'daily update' reporting procedure was introduced in March to ensure that the HSCP management team maintained a clear overview of the emergent situation. Individual services were asked to return a daily update which covered operational matters, including staffing, PPE supplies, risks and actions.
- COVID Management Briefings were started in March, bringing the management team together regularly to oversee the situation and to manage a collective response. As things progressed, Briefings were held on a daily basis.
- An Audit Governance Log was developed in the early stages of the pandemic to record decisions made in response to COVID. The Log included details of the rationale behind individual decisions, who was consulted, who made the decision, and information on related expenditure. This will be used as part of reflections on the response of the HSCP to COVID.

Money matters

How we spent our money in 2019/20

As in previous years, East Lothian Integration Joint Board (IJB) received a financial allocation from its partners (East Lothian Council and NHS Lothian) for the functions delegated to it.

East Lothian IJB had a total budget of £172m and ended the financial year with a small underspend of £0.626m, that is the charges from the partners for the IJB's services was less than the income available to the IJB. The finances of the IJB are explained in more detail in the annual accounts.

	Budget	Expenditure	Variance
	£	£	£
Health	124,533,000	123,732,000	801,000
Social Care	47,284,000	47,459,000	(175,000)
Total	171,817,000	171,191,000	626,000

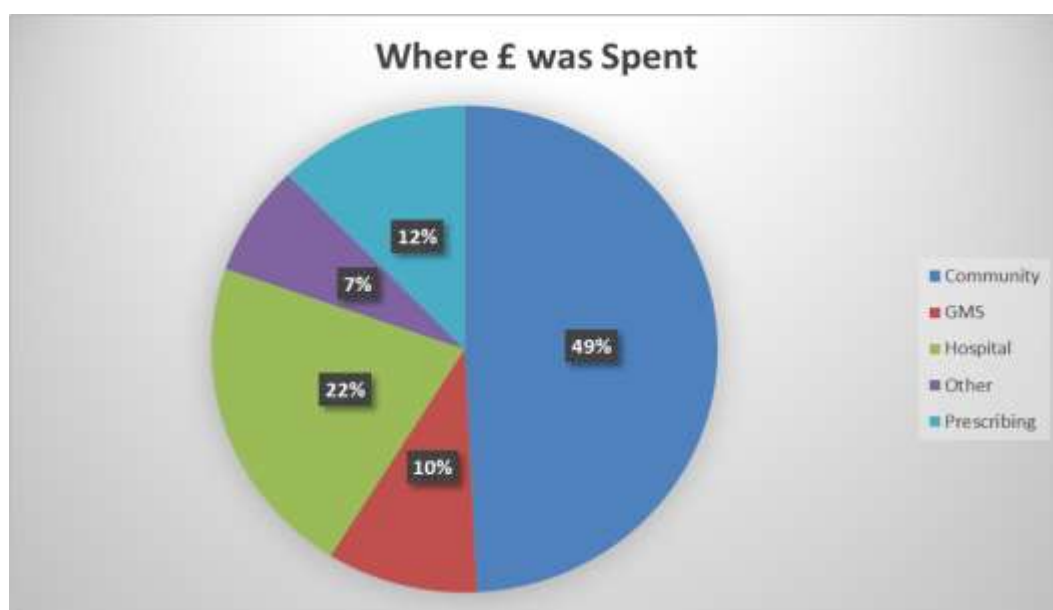


Figure 1 – where the budget was spent 2019-20

- GMS is the costs of running the GP service in East Lothian
- GP Prescribing is the costs of prescriptions for the 15 East Lothian GP practices.

Community	Hospital	Prescribing	GMS	Other	Total Expenditure
£84,232,000	£36,766,000	£21,031,000	£16,550,000	£12,613,000	£171,192,000
49%	21%	12%	10%	7%	100%

Money matters

Breakdown of Budget and Expenditure by service for 2019/20:

	Budget	Expenditure	Variance
Direct East Lothian Services			
Community AHPS	3,418,000	3,295,000	124,000
Community Hospitals	10,814,000	9,953,000	861,000
District Nursing	2,399,000	2,393,000	6,000
General Medical Services	16,206,000	16,550,000	(344,000)
Health Visiting	1,835,000	1,625,000	209,000
Learning Disabilities	15,856,000	17,363,000	(1,507,000)
Mental Health	7,275,000	7,438,000	(163,000)
Older People	25,351,000	24,049,000	1,302,000
Other	10,490,000	10,013,000	476,000
Physical Disabilities	3,274,000	3,321,000	(47,000)
Planning and Performance	2,828,000	2,663,000	165,000
Prescribing	20,944,000	21,031,000	(88,000)
Resource Transfer	3,226,000	3,226,000	-
East Lothian Share of pan Lothian			
Set Aside	21,663,000	22,118,000	(454,000)
Learning Disabilities	1,620,000	1,799,000	(179,000)
Mental Health	2,269,000	2,383,000	(114,000)
GP Out of Hours	1,449,000	1,544,000	(95,000)
Psychology	871,000	890,000	(19,000)
Sexual Health	769,000	772,000	(3,000)
Other	2,939,000	2,600,000	339,000
Rehabilitation	560,000	513,000	47,000
Allied Health Professions	1,462,000	1,419,000	43,000
Oral Health	2,085,000	2,048,000	38,000
Substance Misuse	530,000	501,000	29,000
Dental	6,134,000	6,134,000	-
Ophthalmology	2,042,000	2,042,000	-
Pharmacy	3,509,000	3,509,000	-
Total	171,818,000	171,192,000	626,000

Financial pressures

Throughout the year there have been financial challenges, these being mainly within the social care budgets and the financial pressure at the year end was a significant overspend within adult services, specifically for those clients with complex needs with learning and physical disabilities. This pressure was offset by an underspend in services for older people. The main financial pressure in the health budgets are within set-aside budgets. The term set-aside is used to describe the NHS Lothian services within the acute hospitals (Royal Infirmary of Edinburgh, the Western General Hospital and St. John's Hospital) which are delegated to the IJB, for example, Accident and Emergency, Geriatric Medicine, Rehabilitation Medicine and Respiratory Medicine.

The overspend within set-aside:

- Junior Medical Staff – due to additional staffing requested to cover rotas for sickness; maternity and vacancies, causing an over-establishment against funded levels in particular within A&E areas due to additional staffing to cover rotas for sickness; maternity and vacancies.
- General Medicine – **due to staffing issues (especially at St John's Hospital) where recruitment continues to be a challenge and bed pressures across all sites**
- Infectious Diseases - due to drug expenditure being higher than budgeted.

The Scottish Government new monies to support integration received by the IJB this year has **supported its aims, that being, delivery of the Living Wage, the Carers Act and Frank's Law in 2019/20** in line with Scottish Government guidance.

The IJB also has a duty under the Local Government Act 2003 to make arrangements to secure Best Value and does this through continuous improvement in the way in which its functions are exercised. Best Value includes aspects of economy, efficiency, effectiveness, equal opportunity requirements, and sustainable development.

Challenges and expectations next year

In May 2020 the IJB undertook part of its annual financial assurance process to review the budget offers for 2020/21 from East Lothian Council and NHS Lothian. Again this process identified **financial challenges but the IJB has accepted this budget as it passed the two tests of 'fair' and 'adequacy'. It should be noted that this was a challenging settlement for the IJB and any further reduction will have an impact on service delivery.** As part of the financial planning process for 2020/21, NHS Lothian has uplifted the baseline budget by 3% and East Lothian Council has passed through the additional social care monies from the Scottish Government (£96m nationally).

The challenge is, in financial terms, to continue the transformation of the services that deliver the **IJB's delegated functions whilst continuing to deliver high quality health and social care to the population the IJB supports.** The IJB has developed a medium term financial plan which was presented to the IJB at its meeting in June 2019. The IJB continues to develop this multi-year financial plan to support how the resources available to the IJB will be used to deliver the ambitions of the Strategic Plan, which provide fully integrated, locally delivered and community-based services for East Lothian that are financially sustainable.

Performance at a glance

National Health and Wellbeing Indicators

In this section, we show performance against the National Health and Wellbeing Indicators since 2013-14. The indicators are set by Scottish Government to gauge how well Health and Social Care Partnerships are performing across Scotland.

Indicators N1 to N9 present the results of the Health and Care Experience Survey, which is carried out every two years and which was last carried out in 2017-18 and published on 24th April 2018. Although the work for the 2019/20 survey has concluded, publication was delayed by COVID-19. For this reason, this year's report does not include a report on measures N1 to N9. Indicator N10 remains in development, as was the case in previous years, so no data is available for this.



Performance at a glance

