
To: Renfrewshire Integration Joint Board

On: 29 June 2018

Report by: Chief Officer

Heading: Inspection of Adult Health and Social Work Services in Renfrewshire

1. Summary

1.1 On 11 September 2017, the Chief Officer, Renfrewshire Health and Social Care Partnership received notification from the Care Inspectorate and Healthcare Improvement Scotland that a joint inspection of adult health and social care services in Renfrewshire would be undertaken in the coming months. The aim of the inspection is to ensure that the relatively newly formed integration authority has the necessary building blocks in place to plan, commission and deliver high quality services in a co-ordinated and sustainable way, namely:

- a shared vision
- leadership of strategy and direction
- a culture of collaboration and partnership
- effective governance structures
- a needs analysis on which to plan and jointly commission services
- robust mechanisms to engage with communities
- a plan for effective use of financial resources, and
- a coherent integrated workforce plan which includes a strategy for continuous professional development and shared learning.

1.2 The purpose of this inspection was for the HSCP to answer the question “How well do we plan and commission services to achieve better outcomes for people?” Included within the inspection was an evaluation of how people experience our services and the extent to which the HSCP is making progress in its journey towards efficient, effective and integrated services which are likely to lead to better experiences and improved outcomes over time.

1.3 Renfrewshire was the second HSCP to be inspected using this new model.

2. Recommendation

It is recommended that the IJB:

- Note the publication of the Inspection Report;
- Acknowledges the work of staff throughout the HSCP in delivering the positive leadership and performance that is reflected in the Inspection Report; and
- Agrees the Improvement Plan as detailed in Appendix 1.

3. **Joint Inspection of Adult Health and Social Care Service in Renfrewshire**

3.1. The joint inspection took place between October and December 2017. In preparation for the inspection, the partnership undertook a self evaluation across the following Quality Indicators that the Care Inspectorate and Healthcare Improvement Scotland had identified as being in scope for the inspection:

- Quality Indicator 1 - Key performance outcomes
 - 1.1 Improvements in partnership performance in both health and social care
- Quality Indicator 6 – Policy development and plans to support improvement in service
 - 6.1 Operational and strategic planning arrangements.
 - 6.5 Commissioning arrangements
- Quality Indicator 9 – Leadership and direction that promotes partnership
 - 9.1 Vision, values and culture across the partnership
 - 9.2 Leadership of strategy and direction.

The partnership self evaluated each of the Quality Indicators as Level 4 – Good using the Care Inspectorate/Healthcare Improvement Scotland's six point scale below.

Level 6	Excellent	Outstanding or sector leading
Level 5	Very good	Major strengths
Level 4	Good	Important strengths with areas for improvement
Level 3	Adequate	Strengths just outweigh weaknesses
Level 2	Weak	Important weaknesses
Level 1	Unsatisfactory	Major weaknesses

3.2. The self-evaluation together with supporting evidence and examples of good practice were submitted to the Inspection Team on 27 October 2017. Following this the inspectors carried out a series of onsite scrutiny sessions with staff, partners, providers, carers and service users.

- 3.3. In addition, a staff survey was undertaken by the inspectors and the results of which have informed the inspection report. The results of the survey were presented to the Health and Social Care Senior Management Team on 10 November 2017. At that time the response rate (34%) was the highest received by the inspection team and it was also noted that the overall response to the questions was more positive than the national average.
- 3.4. On 18 April 2018, the Care Inspectorate and Healthcare Improvement Scotland published their findings from the inspection in the report 'Joint Inspection (Adults) the Effectiveness of Strategic Planning in Renfrewshire'. A copy of the report is available at:
[http://www.careinspectorate.com/images/documents/4344/Joint%20inspection%20\(Adults\)%20Strategic%20Planning%20Renfrewshire.pdf](http://www.careinspectorate.com/images/documents/4344/Joint%20inspection%20(Adults)%20Strategic%20Planning%20Renfrewshire.pdf)
- 3.5. The report:
- highlights that Renfrewshire Health and Social Partnership are making significant progress on improving residents' health and social services,
 - concurs with the self assessment that Quality Indicators 1 and 6 are Level 4 – Good.
 - very positive comments on Quality Indicator 9 have been provided within the report. In advance of the inspection, the partnership was advised that Quality Indicator 9 would not be given a formal grade.
- 3.5. On the whole, the report is positive and highlights the following key successes:

Key Performance Outcomes

- The partnership has a robust, structured approach to monitoring progress in performance. Regular reports are produced and these are reviewed by senior managers and the IJB. Exception reports are also produced for the IJB.
- The partnership is performing well against national targets. A key area of success is the timely discharge of individuals from hospital. The partnership has a history of low rates of delayed discharge and is continuing to perform well.

Strategic Planning and Commissioning Arrangements

- The partnership has completed a joint strategic needs analysis, supporting the development of its joint strategic plan and related plans.
- The partnership has successfully begun the development of a range of early intervention and support services for adults and their carers.

Leadership and Direction that supports Partnership

- The partnership has a clear vision which is understood and shared by all grades of staff. There is a strong commitment to the delivery of health and social care services in line with this vision. There are clear connections between the vision and the strategic plan.
- Members of the senior management team are highly visible, and supportive of frontline staff. Joint working is promoted, and a culture of integrated working is evident. The joint working is contributing to the delivery of positive outcomes for people experiencing health and social care services.

3.6 As well as recognising the Partnerships important strengths, the Inspection report also identifies the following areas for improvement:

QI 1.1 Improvements in partnership performance in both healthcare and social care:
Develop a strategic approach to gathering qualitative and outcome focussed feedback from people who experience health and social work services.
Benchmark our performance against other partnerships across the country
QI 6.5 Commissioning Arrangements
Work with the local community and with other stakeholders to develop and implement a cross-sector market facilitation strategy
Develop joint robust quality assurance systems and a joint programme of quality assurance activity that are embedded in practice
Involve people who experience services, carers and key stakeholders, including the third and independent sectors, at an earlier stage when services were being planned or (re)designed
Revised and updated strategic commissioning plan including: <ul style="list-style-type: none">• how priorities are to be resourced• how joint organisational development planning to support this is to be taken forward• how consultation, engagement and involvement are to be maintained• fully costed action plans including plans for investment and disinvestment based on identified future needs expected measurable outcomes
QI 9.2 Leadership of strategy and direction
Conduct a training needs analysis and developing a structured programme of sessions for IJB members

The Inspectors feedback highlighted that the HSCP has built a strong foundation to work from in taking forward improvement actions. The improvement plan, detailed in Appendix 1, will support the partnership to address the areas for improvement identified within the inspection report.

4. Next Steps

- 4.1 Following agreement of this report and improvement plan, the actions identified within Appendix 1 will be driven forward and an update will be provided as part of the Annual Performance Report 2018/19.
- 4.2 The Inspection report will also be considered at key fora such as the Public Protection Chief Officers group, the NHS Board's Clinical and Care Governance Committee and the HSCP's Staff Partnership Forum and more specific or detailed recommendations from these groups which support the improvement plan will be fed into the overall improvement programme.
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Implications of the Report

1. **Financial - none.**
 2. **HR & Organisational Development - none**
 3. **Community/Council Planning – none**
 4. **Legal – none.**
 5. **Property/Assets – none**
 6. **Information Technology – none**
 7. **Equality & Human Rights** - The Recommendations contained within this report have been assessed in relation to their impact on equalities and human rights. No negative impacts on equality groups or potential for infringement of individuals' human rights have been identified arising from the recommendations contained in the report because it is for noting only. If required following implementation, the actual impact of the recommendations and the mitigating actions will be reviewed and monitored, and the results of the assessment will be published on the Council's website.
 8. **Health & Safety – none**
 9. **Procurement – none**
 10. **Risk – none**
 11. **Privacy Impact – none**
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List of Background Papers - Update on Joint Inspection for Adult Services (15 September 2017)

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Adult Health and Social Care Services in Renfrewshire

Inspection Improvement Plan

Quality Improvement Indicator 1: Key Performance Outcomes:			
QI 1.1 Improvements in partnership performance in both healthcare and social care			
Improvement Area 1: Develop a strategic approach to gathering qualitative and outcome focussed feedback from people who experience health and social work services			
Action	Responsible Officer	Timescales	
Patient experience feedback is closely linked to the Strategic Plan and an annual report will be presented to the IJB. Actions will include: <ul style="list-style-type: none">Recruitment of volunteers to undertake patient experience surveysExplore opportunities with Renfrewshire Council to include feedback questions within the revised Public Services Panel surveyContinue to consider feedback from Adult Health and Wellbeing Survey (every 3 years)	Head of Strategic Planning and Health Improvement	Ongoing	
Improvement Area 2: Benchmark our performance against other partnerships across the country			
We will continue to make use of the Local Government Benchmarking Framework (LGBF) and review our own performance over time, compare performance against peer authorities (family group) and identify areas for improvement.	Head of Strategic Planning and Health Improvement	Ongoing	
Using LGBF we will investigate additional opportunities for benchmarking with members of the family group (Clackmannanshire, Dumfries & Galloway, Falkirk, Fife and West Lothian)	Head of Strategic Planning and Health Improvement	Ongoing	
Include benchmarking data within the Strategic Plan Annual Report	Head of Strategic Planning and Health Improvement	Included within the 2017/18 Annual Report	

Quality Improvement Indicator 6: Policy development and plans to support improvement in service			
QI 6.5 Commissioning Arrangements			
Improvement Area 3: Work with the local community and with other stakeholders to develop and implement a cross-sector market facilitation strategy			
Develop our Market Facilitation Plan in consultation with our stakeholders	Head of Strategic Planning and Health Improvement	First Market Facilitation Plan will be developed by end of June 2018, however this will be regularly reviewed an updated	
Improvement Area 4: Develop joint robust quality assurance systems and a joint programme of quality assurance activity that are embedded in practice			
Continue to provide the Clinical and Care Governance Annual Report	Clinical Director	By end of September each year	
Where appropriate, each service will develop and embed quality assurance practice	Clinical Director	Ongoing	
Improvement Area 5: Involve people who experience services, carers and key stakeholders, including the third and independent sectors, at an earlier stage when services were being planned or (re)designed			
We will build on our existing practice of involving key stakeholders at an early stage in (re)designing our services. As part of this we will investigate using design methods of developing services including the double diamond design process.	All Heads of Service	Ongoing	
Improvement Area 6: Revised and updated strategic commissioning plan including:			
<ul style="list-style-type: none"> • how priorities are to be resourced • how joint organisational development planning to support this is to be taken forward • how consultation, engagement and involvement are to be maintained • fully costed action plans including plans for investment and disinvestment based on identified future needs expected measurable outcomes 			
Develop a revised Strategic Commissioning Plan	Head of Strategic Planning and Health Improvement	April 2019	

Quality Improvement Indicator 9:Leadership and direction that promotes partnership			
QI 9.2:Leadership of strategy and direction			
Improvement Area 7: Conduct a training needs analysis and developing a structured programme of sessions for IJB members			
IJB members to undertake a Training Needs Analysis	Head of Administration	December 2018	
Develop a programme of development sessions for members of the IJB	Head of Administration	End of September 2018	