



**Shetland Islands Health and Social Care Partnership
Annual Report 2019-20**



November 2020

Welcome ...to the fourth Annual Performance Report for Shetland Islands Health & Social Care Partnership. This report covers our fourth full year as a Health and Social Care Partnership under the terms of the Public Bodies (Joint Working) (Scotland) Act 2014.

This year has been one of change. In May 2019 we welcomed Natasha Cornick to position of Chair of the Integration Joint Board, replacing Marjorie Williamson who had completed her term as an NHS Shetland Board Member. Simon Bokor-Ingram, the Chief Officer was replaced by an interim post holder Josephine Robinson while he was seconded to the role of Chief Executive of NHS Shetland. At the end of March 2020, both Natasha's term as Chair and Councillor Allison Duncan's term as Vice Chair of the Integration Joint Board came to an end. We said farewell to Councillor Duncan as he stepped down from the board; Natasha stepped into the Vice Chair role, and Councillor Emma MacDonald was welcomed into the position of Chair.

A major highlight of 2019/20 was the opening of the new Eric Gray@Seafield centre for people with Learning Disabilities and Autistic Spectrum Disorders; the long-awaited fruition of many years of planning and active support from members of the community. A new approach to community engagement was launched in the form of Community Led Support and a review of how care to the people of Bressay was provided was widely welcomed by stakeholders. These things could not have been achieved without healthy and respectful working relationships, in partnership with colleagues and communities the length and breadth of Shetland.

In February 2020, along with the rest of the country, we were catapulted into full pandemic response mode, in response to the world-wide COVID-19 pandemic. As we write this, we are still in recovery phase from the Pandemic whilst facing a second wave. This report is therefore necessarily brief, acknowledging that given the full scope of Integration Joint Board business we cannot hope to describe in detail the full range of achievements, but we look forward to continuing to review how the role and achievements of the Integration Joint Board are promoted within Shetland, including through the use of technology, into 2020.

We work hard at delivering the best possible health and care services for the community but there is still plenty of work to do. We hope you enjoy reading about our work.

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Our Vision is that by 2025 everyone is supported in their community to live longer, healthier lives and we will have reduced health inequalities.

Introduction

Shetland Health and Social Care Partnership (HSCP) was formally established in June 2015 in line with the Public Bodies (Joint Working) (Scotland) Act 2014. The Integration Joint Board (IJB) oversees the work of the HSCP and is a joint board of Shetland Islands Council and NHS Shetland.

All Integration Authorities are required to publish an Annual Report providing an assessment of their performance in line with The Public Bodies (Joint Working) (Content of Performance Reports) (Scotland) Regulations 2014. This Annual Report covers the HSCP's performance for the period of 1st April 2019 to 31st March 2020.

Overview of the HSCP

Shetland IJB is responsible for the integrated planning and delivery of health and social care services for adults and older people. This covers a very broad and diverse range of services as set out in the Integration Scheme including, but not restricted to:

- Primary care (including General Practice and Optometry)
- Dental
- Pharmacy services
- Community Nursing services
- Community Care services (including home care and care home provision)
- Community mental health services
- Drug and alcohol services
- Care and support for adults with physical disabilities and learning disabilities

- Allied Health Professions (such as Occupational Therapy, Physiotherapy, Podiatry)
- Health improvement
- Criminal Justice
- Carers support

The HSCP works in partnership with the third sector via Voluntary Action Shetland (VAS) which acts as a conduit for the third sector on the IJB and Strategic Planning Group. VAS supports the HSCP to develop the role of the third sector to contribute to health and social care outcomes.

The HSCP has a workforce of over 1,200 staff and responsibility for a budget of £46M. It covers a population of 22,920. Health and care provision are organised around 7 localities and delivered through local multidisciplinary teams plus wider specialist team members such as podiatrists and occupational therapists. This structure ensures services are built around natural communities and responsive to local population need.

Aims of the Annual Report

The purpose of the annual performance report is to provide an open account of our performance in relation to planning and delivering the health and social care services that we are responsible for.

In this report for 2019-20 we have also set out to:

- Describe the key areas of work and achievements for Shetland Health and Social Care Partnership from April 2019 to March 2020.
- Acknowledge the various challenges we have faced in the last year, what we have learned and how we have responded to these challenges.
- Describe the progress of the HSCP in delivering our strategic priorities, and what this has meant for the people who use our services, communities, staff and partners.
- Explain the leadership role of the Shetland Integration Joint Board in steering the change and progress of the HSCP to date. Through this report the HSCP also reaffirms its commitment to, and seeks to demonstrate evidence of, 'Best Value'. This is a

formal duty placed on all public sector organisations to ensure ‘good governance and effective management of resources, with a focus on improvement, to deliver the best possible outcomes for the public’.

Policy and Strategic Context

The National Health and Wellbeing Outcomes (Appendix 1) set out the framework for all HSCPs in Scotland to improve the quality and experience of services for people and communities, through the delivery of integrated health and social care services.

The Shetland HSCP Strategic Plan 2019-2022 provides the local strategic context describing how the partnership will work together to deliver integrated services and improve the health of local people. The plan was revised in March 2019 in order to address how we respond to the key challenges of increasing demand, the need to invest in preventative services and helping people to help themselves to tackle the causes of ill health, the wider economic environment, an aging workforce and challenges with the effective use of technology in a remote and rural environment. The Strategic Plan identifies our priorities as:

- **Develop a single health and care system**
- **Maximise population health and wellbeing**
- **Develop a unified primary care service**
- **Streamline the patient’s journey in hospital**
- **Achieve a sustainable financial position by 2023**

Our **Priorities** are built on:

- Keeping people safe from harm, protecting vulnerable people
- Delivering integrated health and care pathways and single point of entry to services by continuing to shift resources to primary and community care
- Strengthening and working in partnership with individuals, their families and communities
- Reducing avoidable admission to and inappropriate use of hospital services
- Developing primary care and community responses through multi-disciplinary teams

- Supporting unpaid carers
- Tackling inequalities, with a focus on health inequality
- Prevention and early intervention
- Promoting healthy lifestyles
- Improving mental health and wellbeing
- Promoting self-management and independence

Locality Planning

The Strategic Plan is considered across seven localities based on geography and ward boundaries. The Strategic Plan links closely with the Shetland Partnership Delivery Plan 2019-22 which can be found [here](#).

The seven localities in Shetland are:

- North Isles
- North Mainland
- West Mainland
- Whalsay and Skerries
- Central Mainland
- Lerwick and Bressay
- South Mainland

Each area currently has a set of services delivered within the locality:

- primary care;
- community nursing;
- care at home; and
- care home resources

alongside a broad range of voluntary activity to support individual and community wellbeing. We look to find ways to actively work with local communities to share problems, identify solutions and make the best possible use of all resources available.

Examples of this engagement are shown below:

Caring for Bressay Project

The Caring for Bressay Project was established to explore the health and care needs of residents on Bressay and aims, through working in partnership, to create a sustainable, affordable and professionally acceptable service model which meets the health & care needs of islanders for the future. Involvement of the population in creating a solution has resulted in a future model of care that:

- Considers Whole Population Health including prevention and early intervention;
 - Shifts the Balance of Care to closer to home;
 - Develops sustainable models of care;
 - Improves Access and Information through use of Technology enabled care;
 - Enhances Community Resilience via First Response services;
- and is
- Designed with People as Equal partners

Community Led Support

Community Led Support is a principles-based approach to assist organisations to work collaboratively with their communities and their staff teams to redesign supports that work for everyone, that evolve and are continually refined based on learning. Sessions were held the length and breadth of Shetland in order to hear from different localities:

- What we want to change
- Where we want to get to
- How we will know whether you are making a difference

Workshop sessions were held on “Rights and Risks” on the basis that:

Everyone who lives in Shetland, regardless of their age or ability has rights:

- The right to a private and family life; to choose where and with who they live.
- The right to have real and meaningful relationships with other people.
- The right to choose what they do, where and how they spend their time and their money.
- The right to make their own choices about what risks they do or don't take.

In January 2020, the first innovation site was selected for Brae, in the north mainland of Shetland, and the name “Living Well Hub” was established.

*As a result of the COVID-19 pandemic response, resources involved in the development of this hub were directed towards the Caring for People aspect of the emergency response so progress on the specific project slowed, but the Caring for People Hub delivered on similar outcomes. Plans are now underway to reactivate the programme.

Otago & More

Throughout 2019/20 the Otago & More project funded through IJB reserves for a Falls Prevention Coordinator continued to roll-out the programme across the isles following successful pilots in Unst and Yell. The roll out of the programme has been a success and by the beginning of 2020 all areas had successfully hosted an initial programme and all participants had access to maintenance classes to sustain and build on the benefits of taking part in the classes.

Feedback from classes has been overwhelmingly positive, and objective results have been excellent in nearly all participants (155 have attended the full programme or proceeded straight to maintenance classes, a further 55 have followed a home exercise programme and are not included in the objective measures), over 90% of patients attending the Otago programmes have improved their strength and balance. 80% of patients improved their fear of falling, and there have been innovative approaches to tackle barriers in a number of areas.

The programme has been adapted to take account of the needs of the population in each locality. In Whalsay, the carers take the day care users to a tailored maintenance class at the leisure centre as part of their weekly routine. This has had a positive response from all staff and patients. This structure could be looked at in different areas, depending on timing, staffing and the numbers of patients suitable. This is an example of how the programmes are co-designed with the community which links in with the integrated approach ambition from the falls and fractures prevention strategy for Scotland (2019-2024).

Performance Measurement

During 2019/20 the HSCP has continued to report performance against a suite of both nationally and locally agreed indicators every quarter to the IJB. Our aim is to show progress achieved against the National Health and Wellbeing Outcomes shown in the table below.

National Health and Wellbeing Outcomes

1	People are able to look after and improve their own health and wellbeing and live in good health for longer.
2	People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.
3	People who use health and social care services have positive experiences of those services, and have their dignity respected.
4	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
5	Health and social care services contribute to reducing health inequalities
6	People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being
7	People who use health and social care services are safe from harm
8	People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.
9	Resources are used effectively and efficiently in the provision of health and social care services

There are 23 national indicators for Health and Social Care Partnerships, shown in the table below. These indicators help to describe progress towards meeting the National Health and Wellbeing Outcomes. The Health and Care Experience indicators (indicators 1 to 9) are reported in the Scottish Health and Care Experience Survey commissioned by the Scottish Government. The

full Health and Care Experience report including interactive tables can be accessed [here](#). Ten of the other measures are collated by Public Health Scotland from health activity, community and deaths information and the remaining four indicators cannot be reported as national data is not available or there is not yet a nationally agreed definition. These are denoted by an asterisk (*).

Comparisons for Shetland between previous years and against the Scottish Average are shown in Appendix 1. It can be seen that in most cases, we have improved our performance and are above the Scottish average, but it should be noted that some of the data is only available from 2017/18. A review of how these figures are presented and associated targets is due to be undertaken through the Performance Monitoring Group.

Outcome Indicators

NI - 1	Percentage of adults able to look after their health very well or quite well
NI - 2	Percentage of adults supported at home who agreed that they are supported to live as independently as possible
NI - 3	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided
NI - 4	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated
NI - 5	Total % of adults receiving any care or support who rated it as excellent or good
NI - 6	Percentage of people with positive experience of the care provided by their GP practice
NI - 7	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life
NI - 8	Total combined % carers who feel supported to continue in their caring role
NI - 9	Percentage of adults supported at home who agreed they felt safe
NI - 10*	Percentage of staff who say they would recommend their workplace as a good place to work

Data Indicators

NI - 11	Premature mortality rate per 100,000 persons (European age standardised mortality rate per 100,000 for people aged under 75)
NI - 12	Emergency admission rate (per 100,000 population)

NI - 13	Emergency bed day rate (per 100,000 population)
NI - 14	Readmission to hospital within 28 days (per 1,000 population)
NI - 15	Proportion of last 6 months of life spent at home or in a community setting
NI - 16	Falls rate per 1,000 population aged 65+
NI - 17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections
NI - 18	Percentage of adults with intensive care needs receiving care at home
NI - 19	Number of days people aged 75+ spend in hospital when they are ready to be discharged (per 1,000 population)
NI - 20	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency
NI - 21*	Percentage of people admitted to hospital from home during the year, who are discharged to a care home
NI - 22*	Percentage of people who are discharged from hospital within 72 hours of being ready
NI - 23*	Expenditure on end of life care, cost in last 6 months per death

In addition, the HSCP reports against a core suite of local performance indicators which further helps us understand how we are performing in key areas across health and social care. Where our performance falls outside agreed targets these are identified and improvement actions agreed by the IJB. Some of the measures also help us to indicate Best Value, for example, introduction of pool cars for staff.

Improvement highlights

- Sickness rate for Community Health & Social Care Directorate – rate dropped from **7.0%** in Q4 of 2018/19 to **5.7%** in Q1 of 19/20 and **5.6%** in Q2 as a result of close working and monitoring in conjunction with Human Resources. Employee Miles Claimed for Community Health & Social Care Directorate - rate dropped from **107,792** in Q4 of 2018/19 to **71,736** in Q1 of 19/20 and further to **42,338** in Q2 due to the purchase of vehicles
- FOISA responded to within 20-day limit - Health & Social Care Services - rate increased from **30%** in Q4 of 2018/19 to **91%** in Q1 of 19/20 as a result of administration developments. This was maintained at **89%** in Q2.
- Number of emergency admissions dropped from **460** in Q4 2018/19 to **271** in Q1 19/20 and **261** in Q2 and **251** in Q3
- Number of admissions from A&E dropped from **428** in Q4 2018/19 to **290** in Q3 19/20

Areas requiring Improvement

18 weeks referral to treatment for Psychological Therapies (percentage of completed waits less than 18 weeks)
In Q4 of 18/19 this figure was **40%**, it increased to **68.6%** in 2019/20 Q1, then decreased to **23.3%** by the end of Q3
The mental health direction for 2020/21 contains an improvement plan for this area.

Sustain and embed Alcohol Brief Interventions in 3 priority settings (primary care, A&E, antenatal) and broaden delivery in wider settings.

In Q4 of 18/19 this figure was **153**. It decreased to **13** in 2019/20 Q1, then decreased to **49** by the end of Q3. The Health Improvement Direction for 2020/21 contains an action to improve this measurement, however it is recognised a system wide approach is required for improvement in this area.

Other examples of good practice are shown below:

Good practice:



The Eric Gray@Seafield centre was formally opened. A crowd of around 100 service users, family members, staff and invited guests turned out to celebrate the new premises which provide an accessible modern hub for adults with learning disabilities, autism and complex needs, and offers supported day opportunities and vocational activities. The new building has increased floor and corridor size than that of the former Eric Gray Resource Centre, originally built in 1978, and offers more space to deliver a wider range of activities. These include developing life skills, accessing pre-work opportunities, further education and social activities.

- Continued development and work to implement the Primary Care Improvement Plan embedding the ethos of 'right person, right place, right time';
- Review and development of IJB Directions following the Statutory Guidance for IJB Directions being published in January 2020, acting on recommendations for improvement made by Internal Audit Glasgow in March 2020;
- The Palliative and End of Life Care Strategy for Shetland 2019-2022 was developed and approved. The strategy focuses on what is important to people who are dying, their relatives and the carers/family who support them. It promotes respect, choice, dignity and safety for all regardless of age, ability and of diagnosis;
- Work facilitated through the Self-directed Support Programme Board to take forward the recommendations of the Care Inspectorate's Self-directed Support Thematic Review and deliver on the Self-directed Support Action Plan 2019/2020;
- Continuation of the review of Council funded Adult Services for adults with learning disability, autism and complex needs, to ensure equitable access to resource and service and sustainability of resource and service in an area of demographic increase;





- Establishment of the Assertive Community Transitions (ACT) Service, created to support young adults with learning disabilities and complex needs. The service provides accommodation and staffing to allow intensive support to the individuals, providing better outcomes and avoiding the need to access expensive off-island placements; and
- Development of Social Care 'Test of Change' Projects identified previously through a review of Sustainable Social Care Models. This includes the design and implementation of a scheduled overnight care service, to allow for the delivery of 24-hour support at home, and also planning for extended day care services at Edward Thomason House, to provide longer hours intended to improve outcomes for individuals accessing care and to support their unpaid carers.

In June 2019 a joint Performance Management Framework for NHS Shetland, Shetland Islands Council and the IJB was presented to the IJB and approved.

The Framework can be found [here](#) and is intended to be a "Once for Shetland" approach focussing on two key dimensions:

- assurance and scrutiny; and
- identifying and managing continuous improvement.

This Framework will be used to develop effective reporting mechanisms during 2020/21.

Financial planning and performance

For the year-ended 31 March 2020, the IJB generated a surplus of £0.073m (2018/19: £0.541m), after adjustment has been made for additional contributions made by SIC and NHSS.

The surplus of £0.073m represents the underspend of Scottish Government Additionality Funding and other specific funding allocations during the year off-set by expenditure that the IJB agreed would be met from its Reserve. This surplus will be carried forward and the IJB can then make decisions on how best it can be utilised to further its objectives, in line with its Strategic Commissioning Plan.

The outturn position at 31 March 2020 for IJB commissioned services is an overall deficit against budget of £1.951m (2018/19: £3.116m), which represents an underspend in relation to services commissioned from SIC of £0.680m (2018/19: overspend £0.157m)

and an overspend in relation to services commissioned from NHSS of £2.631m (2018/19: overspend £2.959m). The £1.951m deficit (which includes 'set aside budget) is detailed in Row 3 in the following table.

In order to achieve the final IJB surplus of the year of £0.073m, NHSS made a one-off additional contribution of £2.734m to the IJB. The additional contribution from NHSS is non-recurrent in nature and does not require to be paid back in future years. The SIC received a one-off additional contribution from the IJB of £0.710m.

Financial Transactions 2019/20

	2019/20			2018/19		
	SIC £000	NHSS £000	TOTAL £000	SIC £000	NHSS £000	TOTAL £000
1 Budgets delegated to the Parties from the UB	23,698	25,860	49,558	22,396	23,830	46,226
2 Contribution from the Parties to the UB (against delegated budgets)	(23,018)	(28,491)	(51,509)	(22,553)	(26,789)	(49,342)
3 Surplus/(Deficit)	680	(2,631)	(1,951)	(157)	(2,959)	(3,116)
4 Additional contributions from Parties to meet UB Direct Costs	(17)	(16)	(33)	(15)	(14)	(29)
5 UB Direct Costs (Audit fee, Insurance & Members Expenses)	17	16	33	15	14	29
6 Additional contributions (to)/from SIC and NHS to UB	(710)	2,734	2,024	144	3,513	3,657
7 Final Surplus/(Deficit) of IJB	(30)	103	73	(13)	554	541

Significant Budget Variance Table

Service Heading	2019/20			2018/19		
	Revised Budget £000	Budget Variance £000	Budget Variance %	Revised Budget £000	Budget Variance £000	Budget Variance %
Mental Health	2,413	(282)	(11.7%)	2,071	(463)	(22.4%)
Substance Misuse	588	94	16.0%	543	47	8.7%
Oral Health	3,133	162	5.2%	3,084	13	0.4%
Primary Care	5,418	(624)	(11.5%)	5,676	139	2.4%
Community Nursing	2,994	(149)	(5.0%)	2,862	(172)	(6.0%)
Adult Services	5,803	(98)	(1.7%)	5,472	65	1.2%
Adult Social Work	3,090	(310)	(10.0%)	2,530	-	0.0%
Community Care Resources	11,984	752	6.3%	11,350	(398)	(3.5%)
Health Improvement	365	55	15.1%	259	48	18.5%
Unscheduled Care	3,233	(1,006)	(31.1%)	2,964	(823)	(27.8%)
Intermediate Care Team	672	80	11.9%	662	81	12.2%
Other Services	10,769	279	2.6%	10,603	197	1.9%
Efficiency Target	(904)	(904)	100.0%	(1,850)	(1,850)	100.0%
Total	49,558	(1,951)		46,226	(3,116)	

Explanations for significant budget variances can be seen in the Financial Review section of the IJB Annual Accounts 2019/20.

Reserves

The IJB approved its Reserves Policy on 6 September 2017. The balance as at March 2020 was £0.978M, of which £0.496M is earmarked and a further £0.118M has been committed to specific projects.

2020/21 Budget and Medium-Term Financial Outlook

The IJB Board approved the proposed budget for 2020/21 of £50.736m, on 28 May 2020, subject to NHSS Board approval of their delegated budget at its meeting on 18 August 2020. The IJB noted the risks associated with Covid-19 and the impact this may have on 2020/21 budgets and costs.

For the first time since the inception of the IJB, the proposed payments to the IJB from the Parties are equal to the cost of services. This means the IJB will begin the financial year with a balanced budget position.

The IJB approved its Medium-Term Financial Plan (MTFP) 2019/20 to 2023/24 on 13 March 2019. The Plan identified a likely funding shortfall over the five-year period of £7.7m if no action is taken to mitigate the impact of rising costs and reducing funding. A revised MTFP is due to be presented in November/December 2020 following the update of Shetland Island Council & NHS Shetland MTFPs. The role of the IJB in planning and directing services will be key to addressing the financial challenges it faces into the future.

Inspection of services

The annual report requires that we report on the results of any inspections of services that have been undertaken during the year.

Care Inspectorate Grades

Our care homes, day care and respite services are subject to inspections by the Care Inspectorate at regular intervals. As can be seen from the table below, the majority of the inspections carried out in 2019/20 were regarding the Quality of Care and Support. Of the 16 services inspected, 11 were Very Good, with Eric Gray @ Seafield scoring an Excellent. Northaven scored an Adequate which was no improvement from the previous score.

Service	Quality of Care & Support		Quality of Environment		Quality of Staffing		Quality of Leadership & Management		Wellbeing	
	2019/20	Previous Grade	2019/20	Previous Grade	2019/20	Previous Grade	2019/20	Previous Grade	2019/20	Previous Grade

Edward Thomason & Taing	4 Good	5 Very Good	N/A	N/A	N/A	N/A	N/A	N/A	4 Good	4 Good
Eric Gray @ Seafield	6 Excellent	6 Excellent	6 Excellent	N/A	N/A	N/A	N/A	6 Excellent	N/A	N/A
Fernlea	5 Very Good	5 Very Good	N/A	N/A	N/A	N/A	N/A	N/A	4 Good	5 Very Good
Isleshavn	5 Very Good	5 Very Good	N/A	N/A	N/A	N/A	N/A	4 Good	4 Good	5 Very Good
Isleshavn Day Care	5 Very Good	4 Good	N/A	N/A	5 Very Good	N/A	N/A	4 Good	N/A	N/A
Annsbrae Mental Health Support Service	5 Very Good	5 Very Good	N/A	N/A	N/A	5 Very Good	5 Very Good	5 Very Good	N/A	N/A
Montfield Support Service	5 Very Good	5 Very Good	N/A	N/A	N/A	N/A	N/A	N/A	4 Good	N/A
Newcraigie lea	5 Very Good	5 Very Good	N/A	N/A	N/A	N/A	4 Good	5 Very Good	N/A	N/A

Newcraigie lea Support Service	5 Very Good	5 Very Good	N/A	N/A	4 Good	N/A	N/A	4 Good	N/A	N/A
Nordalea	5 Very Good	5 Very Good	N/A	N/A	N/A	N/A	N/A	N/A	4 Good	5 Very Good
North Haven	3 Adequate	3 Adequate	N/A	N/A	N/A	N/A	N/A	N/A	4 Good	4 Good
North Haven Support	4 Good	4 Good	N/A	N/A	4 Good	N/A	N/A	4 Good	N/A	N/A
Overtonlea	5 Very Good	5 Very Good	N/A	N/A	N/A	N/A	N/A	4 Good	5 Very Good	5 Very Good
Support at Home Shetland	5 Very Good	5 Very Good	N/A	N/A	N/A	5 Very Good	5 Very Good	N/A	N/A	N/A
Supported Living and Outreach	5 Very Good	N/A	N/A	N/A	5 Very Good	N/A	4 Good	N/A	N/A	N/A
Walter and Joan	4 Good	3 Adequate	4 Good	4 Good	4 Good	3 Adequate	3 Adequate	4 Good	4 Good	3 Adequate

Gray Home (commissioned service)										
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Audit Scotland report

Audit Scotland published their 2018/19 Audit of the Shetland Islands IJB in September 2019 with recommendations to be completed in 2019/20. The report can be found [here](#). A key conclusion of the report was regard to value for money in which they noted that the IJB had been performing consistently against its targets. However, they felt that this information did not enable the IJB to fully understand its performance:

“while the IJB has performed consistently, this is because it is meeting targets which have not changed. From our review of indicators in 2018/19, we noted that performance has declined from 2017/18 in 51% of cases (improving in 34%). From the IJB’s performance monitoring reports, it is difficult for the Board to fully assess performance, including performance against outcomes, given that performance information provided is lengthy, highly numerical and difficult to follow, with the accompanying report lacking detail. There needs to be a link made between cost and performance, and the IJB should consider the targets it sets on an ongoing basis to ensure they remain realistic whilst also demonstrating a commitment to improvement.”

This issue is currently being addressed through the creation of Directions which include updated performance indicators. A Performance Monitoring Group has also been established and this will monitor and review performance reporting in order to provide appropriate assurance to the IJB as we progress through 2020/21 and beyond.

Appendices:

Appendix 1 - Performance

IJB Annual Report Appendix 1



Shetland Islands Council

Generated on: 18 November 2020

Indicator	13/14		15/16		17/18		19/20		Graphs	Latest Note
	2013/14		2015/16		2017/18		2019/20			
	Value	Target	Value	Target	Value	Target	Value	Target		
NI1 Percentage of adults able to look after their health very well or quite well	96.4%	90%	94.8%	90%	94%	90%	95%	90%		A slight increase and higher than the Scottish average of 92%.
NI2 Percentage of adults supported at home who agree that they are supported to live as independently as possible	68%	84%	78%	84%	78%	84%	82%	84%		Increase in positive values from previous survey and above national average (70%). (Source: Health and Care Experience Survey) 2019-20.

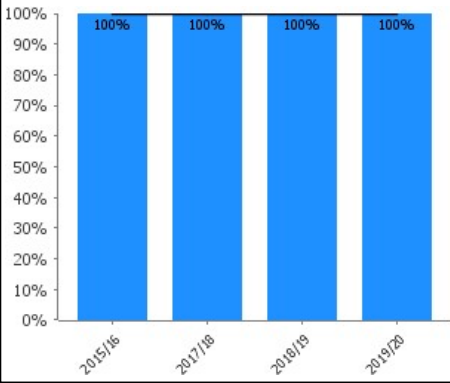
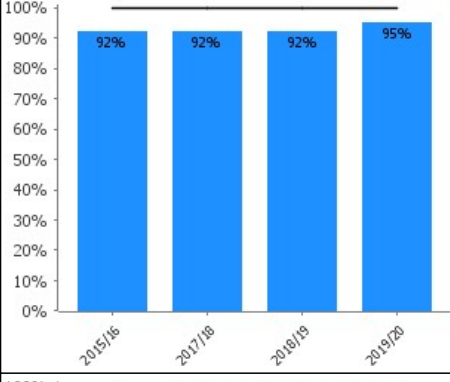
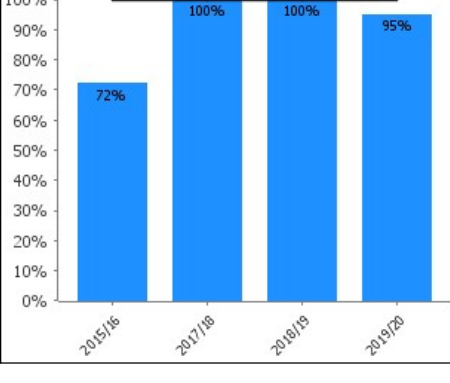
Indicator	13/14		15/16		17/18		19/20		Graphs	Latest Note										
	2013/14		2015/16		2017/18		2019/20													
	Value	Target	Value	Target	Value	Target	Value	Target												
NI3 Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided	80%	83%	81%	78%	75%	78%	80%	78%	<table border="1"> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2013/14</td> <td>80%</td> </tr> <tr> <td>2015/16</td> <td>81%</td> </tr> <tr> <td>2017/18</td> <td>75%</td> </tr> <tr> <td>2019/20</td> <td>80%</td> </tr> </tbody> </table>	Year	Value	2013/14	80%	2015/16	81%	2017/18	75%	2019/20	80%	Value has risen since previous survey and is now well above national average of 63%. (Source: Health and Care Experience Survey 2019–20)
Year	Value																			
2013/14	80%																			
2015/16	81%																			
2017/18	75%																			
2019/20	80%																			
NI4 Percentage of adults supported at home who agree that their health and care services seemed to be well co-ordinated.	64%	79%	60%	75%	72%	75%	81%	75%	<table border="1"> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2013/14</td> <td>64%</td> </tr> <tr> <td>2015/16</td> <td>60%</td> </tr> <tr> <td>2017/18</td> <td>72%</td> </tr> <tr> <td>2019/20</td> <td>81%</td> </tr> </tbody> </table>	Year	Value	2013/14	64%	2015/16	60%	2017/18	72%	2019/20	81%	Significant increase of 9% since last survey and now well above local target (75%) and national average (62%). (Source: Health and Care Experience Survey 2019–20)
Year	Value																			
2013/14	64%																			
2015/16	60%																			
2017/18	72%																			
2019/20	81%																			
NI5 Percentage of adults receiving any care or support who rate it as excellent or good	81%	84%	79%	81%	86%	81%	80%	81%	<table border="1"> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2013/14</td> <td>81%</td> </tr> <tr> <td>2015/16</td> <td>79%</td> </tr> <tr> <td>2017/18</td> <td>86%</td> </tr> <tr> <td>2019/20</td> <td>80%</td> </tr> </tbody> </table>	Year	Value	2013/14	81%	2015/16	79%	2017/18	86%	2019/20	80%	Question was asked in a way that was not comparable to 2018. Shetland much higher than the national average of 69%.
Year	Value																			
2013/14	81%																			
2015/16	79%																			
2017/18	86%																			
2019/20	80%																			

Indicator	13/14		15/16		17/18		19/20		Graphs	Latest Note
	2013/14		2015/16		2017/18		2019/20			
	Value	Target	Value	Target	Value	Target	Value	Target		
NI6 Percentage of people with positive experience of care at their GP practice	82%	87%	89%	87%	83%	87%	86%	87%	<p>A bar chart showing the percentage of people with positive experience of care at their GP practice. The y-axis ranges from 0% to 90% in 10% increments. The x-axis shows four survey periods: 2013/14, 2015/16, 2017/18, and 2019/20. The bars represent the following values: 82% (2013/14), 89% (2015/16), 83% (2017/18), and 86% (2019/20). A horizontal line at 87% represents the target. A bracket above the bars indicates a 3% increase from 2017/18 to 2019/20.</p>	Increase of 3% since last survey, below local target but now above national average (79%). (Source: Health and Care Experience Survey 2019–20)
NI7 Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life	80%	85%	84%	84%	83%	84%	75%	84%	<p>A bar chart showing the percentage of adults supported at home who agree that their services and support had an impact. The y-axis ranges from 0% to 80% in 10% increments. The x-axis shows four survey periods: 2013/14, 2015/16, 2017/18, and 2019/20. The bars represent the following values: 80% (2013/14), 84% (2015/16), 83% (2017/18), and 75% (2019/20). A horizontal line at 84% represents the target. A bracket above the bars indicates a decrease from 2015/16 to 2019/20.</p>	Decrease of 8% since last survey, but well above the national average (65%). (Source: Health and Care Experience Survey 2019–20)
NI8 Percentage of carers who feel supported to continue in their caring role.	41%	44%	54%	41%	41%	41%	50%	41%	<p>A bar chart showing the percentage of carers who feel supported to continue in their caring role. The y-axis ranges from 0% to 55% in 5% increments. The x-axis shows four survey periods: 2013/14, 2015/16, 2017/18, and 2019/20. The bars represent the following values: 41% (2013/14), 54% (2015/16), 41% (2017/18), and 50% (2019/20). A horizontal line at 41% represents the target. A bracket above the bars indicates a 9% increase from 2017/18 to 2019/20.</p>	Increase of 9% since last survey, significantly higher than the local target (41%) and the national average (34%). (Source: Health and Care Experience Survey 2019–20).

Indicator	13/14		15/16		17/18		19/20		Graphs	Latest Note																								
	2013/14		2015/16		2017/18		2019/20																											
	Value	Target	Value	Target	Value	Target	Value	Target																										
NI9 Percentage of adults supported at home who agree they felt safe	75%	85%	79%	84%	80%	84%	83%	84%	<table border="1"> <caption>NI9 Data</caption> <thead> <tr> <th>Year</th> <th>Value</th> <th>Target</th> </tr> </thead> <tbody> <tr> <td>2013/14</td> <td>75%</td> <td>85%</td> </tr> <tr> <td>2015/16</td> <td>79%</td> <td>84%</td> </tr> <tr> <td>2017/18</td> <td>80%</td> <td>84%</td> </tr> <tr> <td>2019/20</td> <td>83%</td> <td>84%</td> </tr> </tbody> </table>	Year	Value	Target	2013/14	75%	85%	2015/16	79%	84%	2017/18	80%	84%	2019/20	83%	84%	Improvement of 3% since last survey, just below local target (84%) but well above the national average (73%). (Source: Health and Care Experience Survey 2019-20).									
Year	Value	Target																																
2013/14	75%	85%																																
2015/16	79%	84%																																
2017/18	80%	84%																																
2019/20	83%	84%																																
NI10 Percentage of staff who say they would recommend their workplace as a good place to work										Under development. To be included in NHS and LA Staff Surveys.																								
NI11 Premature mortality rate (per 100,000 population)	360.6	418.4	406.6	418.4	322.5	418.4	331	418.4	<table border="1"> <caption>NI11 Data</caption> <thead> <tr> <th>Year</th> <th>Value</th> <th>Target</th> </tr> </thead> <tbody> <tr> <td>2013/14</td> <td>360.6</td> <td>418.4</td> </tr> <tr> <td>2014/15</td> <td>444</td> <td>418.4</td> </tr> <tr> <td>2015/16</td> <td>406.6</td> <td>418.4</td> </tr> <tr> <td>2016/17</td> <td>289.4</td> <td>418.4</td> </tr> <tr> <td>2017/18</td> <td>322.5</td> <td>418.4</td> </tr> <tr> <td>2018/19</td> <td>302</td> <td>418.4</td> </tr> <tr> <td>2019/20</td> <td>331</td> <td>418.4</td> </tr> </tbody> </table>	Year	Value	Target	2013/14	360.6	418.4	2014/15	444	418.4	2015/16	406.6	418.4	2016/17	289.4	418.4	2017/18	322.5	418.4	2018/19	302	418.4	2019/20	331	418.4	Can vary due to small numbers but showing a reducing trend. Baseline target added – new target required.
Year	Value	Target																																
2013/14	360.6	418.4																																
2014/15	444	418.4																																
2015/16	406.6	418.4																																
2016/17	289.4	418.4																																
2017/18	322.5	418.4																																
2018/19	302	418.4																																
2019/20	331	418.4																																

Indicator	13/14		15/16		17/18		19/20		Graphs	Latest Note																								
	2013/14		2015/16		2017/18		2019/20																											
	Value	Target	Value	Target	Value	Target	Value	Target																										
NI12 Rate of emergency admissions for adults per 100,000	10,897	11,225	10,607	11,225	10,503	11,225	10,213	11,225	<table border="1"> <caption>NI12 Data</caption> <thead> <tr><th>Year</th><th>Value</th><th>Target</th></tr> </thead> <tbody> <tr><td>2013/14</td><td>10,897</td><td>11,225</td></tr> <tr><td>2014/15</td><td>10,924</td><td>11,225</td></tr> <tr><td>2015/16</td><td>10,607</td><td>11,225</td></tr> <tr><td>2016/17</td><td>10,028</td><td>11,225</td></tr> <tr><td>2017/18</td><td>10,503</td><td>11,225</td></tr> <tr><td>2018/19</td><td>10,475</td><td>11,225</td></tr> <tr><td>2019/20</td><td>10,213</td><td>11,225</td></tr> </tbody> </table>	Year	Value	Target	2013/14	10,897	11,225	2014/15	10,924	11,225	2015/16	10,607	11,225	2016/17	10,028	11,225	2017/18	10,503	11,225	2018/19	10,475	11,225	2019/20	10,213	11,225	National ISD data now included for this indicator. These figures indicate that primary prevention of emergency admissions is working, when compared to the rest of the country. Revised target required. Note – this is 2019 calendar year data as January to March data is not complete for all Boards.
Year	Value	Target																																
2013/14	10,897	11,225																																
2014/15	10,924	11,225																																
2015/16	10,607	11,225																																
2016/17	10,028	11,225																																
2017/18	10,503	11,225																																
2018/19	10,475	11,225																																
2019/20	10,213	11,225																																
NI13 Rate of emergency bed days for adults per 100,000	94,609	88,126	76,048	88,126	66,181	88,126	67,122	88,126	<table border="1"> <caption>NI13 Data</caption> <thead> <tr><th>Year</th><th>Value</th><th>Target</th></tr> </thead> <tbody> <tr><td>2013/14</td><td>94,609</td><td>88,126</td></tr> <tr><td>2014/15</td><td>94,104</td><td>88,126</td></tr> <tr><td>2015/16</td><td>76,048</td><td>88,126</td></tr> <tr><td>2016/17</td><td>71,123</td><td>88,126</td></tr> <tr><td>2017/18</td><td>66,181</td><td>88,126</td></tr> <tr><td>2018/19</td><td>65,040</td><td>88,126</td></tr> <tr><td>2019/20</td><td>67,122</td><td>88,126</td></tr> </tbody> </table>	Year	Value	Target	2013/14	94,609	88,126	2014/15	94,104	88,126	2015/16	76,048	88,126	2016/17	71,123	88,126	2017/18	66,181	88,126	2018/19	65,040	88,126	2019/20	67,122	88,126	Shetland patients are spending less time in hospital after an emergency admission than in Scotland. Revised target required. Note – this is 2019 calendar year data as January to March data is not complete for all Boards.
Year	Value	Target																																
2013/14	94,609	88,126																																
2014/15	94,104	88,126																																
2015/16	76,048	88,126																																
2016/17	71,123	88,126																																
2017/18	66,181	88,126																																
2018/19	65,040	88,126																																
2019/20	67,122	88,126																																
NI14 Readmissions to hospital within 28 days of discharge (rate per 1000 population)	77	80	80	71	71	73	73	73	<table border="1"> <caption>NI14 Data</caption> <thead> <tr><th>Year</th><th>Value</th><th>Target</th></tr> </thead> <tbody> <tr><td>2013/14</td><td>77</td><td>80</td></tr> <tr><td>2014/15</td><td>80</td><td>80</td></tr> <tr><td>2015/16</td><td>80</td><td>80</td></tr> <tr><td>2016/17</td><td>69</td><td>80</td></tr> <tr><td>2017/18</td><td>71</td><td>80</td></tr> <tr><td>2018/19</td><td>68</td><td>80</td></tr> <tr><td>2019/20</td><td>73</td><td>80</td></tr> </tbody> </table>	Year	Value	Target	2013/14	77	80	2014/15	80	80	2015/16	80	80	2016/17	69	80	2017/18	71	80	2018/19	68	80	2019/20	73	80	Shetland much lower than Scottish rate of 104. Target required. Note – this is 2019 calendar year data as January to March data is not complete for all Boards.
Year	Value	Target																																
2013/14	77	80																																
2014/15	80	80																																
2015/16	80	80																																
2016/17	69	80																																
2017/18	71	80																																
2018/19	68	80																																
2019/20	73	80																																

Indicator	13/14		15/16		17/18		19/20		Graphs	Latest Note																
	2013/14		2015/16		2017/18		2019/20																			
	Value	Target	Value	Target	Value	Target	Value	Target																		
NI15 Proportion of last 6 months of life spent at home or in community setting (NIPI05a)	92.1%	86.4%	92.5%	87%	95%	88%	93.7%	88.6%	<table border="1"> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2013/14</td> <td>92.1%</td> </tr> <tr> <td>2014/15</td> <td>92.3%</td> </tr> <tr> <td>2015/16</td> <td>92.5%</td> </tr> <tr> <td>2016/17</td> <td>93.8%</td> </tr> <tr> <td>2017/18</td> <td>95%</td> </tr> <tr> <td>2018/19</td> <td>94%</td> </tr> <tr> <td>2019/20</td> <td>93.7%</td> </tr> </tbody> </table>	Year	Value	2013/14	92.1%	2014/15	92.3%	2015/16	92.5%	2016/17	93.8%	2017/18	95%	2018/19	94%	2019/20	93.7%	Currently best performing partnership in Scotland and consistently higher than Scottish average. Note – this is 2019 calendar year data as January to March data is not complete for all Boards.
Year	Value																									
2013/14	92.1%																									
2014/15	92.3%																									
2015/16	92.5%																									
2016/17	93.8%																									
2017/18	95%																									
2018/19	94%																									
2019/20	93.7%																									
NI16 Falls rate per 1,000 population in over 65s	22.6	21	20.3	21	18.7	21	16.7	21	<table border="1"> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2013/14</td> <td>22.6</td> </tr> <tr> <td>2014/15</td> <td>20.1</td> </tr> <tr> <td>2015/16</td> <td>20.3</td> </tr> <tr> <td>2016/17</td> <td>21.3</td> </tr> <tr> <td>2017/18</td> <td>18.7</td> </tr> <tr> <td>2018/19</td> <td>19.3</td> </tr> <tr> <td>2019/20</td> <td>16.7</td> </tr> </tbody> </table>	Year	Value	2013/14	22.6	2014/15	20.1	2015/16	20.3	2016/17	21.3	2017/18	18.7	2018/19	19.3	2019/20	16.7	In recent years Shetland has dropped well below the Scottish average. Note – this is 2019 calendar year data as January to March data is not complete for all Boards.
Year	Value																									
2013/14	22.6																									
2014/15	20.1																									
2015/16	20.3																									
2016/17	21.3																									
2017/18	18.7																									
2018/19	19.3																									
2019/20	16.7																									
NI17c Proportion of care services graded 'good' (4) or better in Care Inspectorate Inspections - Quality of Care & Support	80%	100%	92%	100%	92%	100%	95%	100%	<table border="1"> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2013/14</td> <td>80%</td> </tr> <tr> <td>2015/16</td> <td>92%</td> </tr> <tr> <td>2017/18</td> <td>92%</td> </tr> <tr> <td>2018/19</td> <td>96%</td> </tr> <tr> <td>2019/20</td> <td>95%</td> </tr> </tbody> </table>	Year	Value	2013/14	80%	2015/16	92%	2017/18	92%	2018/19	96%	2019/20	95%	Of 21 inspection areas, 20 have been rated as 'Good' or better. Only 1, North Haven Care Home was rated as Adequate.				
Year	Value																									
2013/14	80%																									
2015/16	92%																									
2017/18	92%																									
2018/19	96%																									
2019/20	95%																									

Indicator	13/14		15/16		17/18		19/20		Graphs	Latest Note										
	2013/14		2015/16		2017/18		2019/20													
	Value	Target	Value	Target	Value	Target	Value	Target												
NI17e Proportion of care services graded 'good' (4) or better in Care Inspectorate Inspections - Quality of Environment			100%	100%	100%	100%	100%	100%	 <table border="1"> <caption>Quality of Environment Performance</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>100%</td> </tr> <tr> <td>2017/18</td> <td>100%</td> </tr> <tr> <td>2019/19</td> <td>100%</td> </tr> <tr> <td>2019/20</td> <td>100%</td> </tr> </tbody> </table>	Year	Value	2015/16	100%	2017/18	100%	2019/19	100%	2019/20	100%	Of 21 inspection areas, all were rated as 'Good' or better.
Year	Value																			
2015/16	100%																			
2017/18	100%																			
2019/19	100%																			
2019/20	100%																			
NI17s Proportion of care services graded 'good' (4) or better in Care Inspectorate Inspections - Quality of Staffing			92%	100%	92%	100%	95%	100%	 <table border="1"> <caption>Quality of Staffing Performance</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>92%</td> </tr> <tr> <td>2017/18</td> <td>92%</td> </tr> <tr> <td>2019/19</td> <td>92%</td> </tr> <tr> <td>2019/20</td> <td>95%</td> </tr> </tbody> </table>	Year	Value	2015/16	92%	2017/18	92%	2019/19	92%	2019/20	95%	Of 21 inspection areas, 20 have been rated as 'Good' or better. North Haven Care Home was rated as Adequate.
Year	Value																			
2015/16	92%																			
2017/18	92%																			
2019/19	92%																			
2019/20	95%																			
NI17m Proportion of care services graded 'good' (4) or better in Care Inspectorate Inspections - Quality of Management and Leadership			72%	100%	100%	100%	95%	100%	 <table border="1"> <caption>Quality of Management and Leadership Performance</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>72%</td> </tr> <tr> <td>2017/18</td> <td>100%</td> </tr> <tr> <td>2019/19</td> <td>100%</td> </tr> <tr> <td>2019/20</td> <td>95%</td> </tr> </tbody> </table>	Year	Value	2015/16	72%	2017/18	100%	2019/19	100%	2019/20	95%	Of 21 inspection areas, 20 have been rated as 'Good' or better. Only 1, W&J Gray Care Home was rated as Adequate.
Year	Value																			
2015/16	72%																			
2017/18	100%																			
2019/19	100%																			
2019/20	95%																			

Indicator	13/14		15/16		17/18		19/20		Graphs	Latest Note																
	2013/14		2015/16		2017/18		2019/20																			
	Value	Target	Value	Target	Value	Target	Value	Target																		
NI18 Percentage of adults with intensive needs receiving care at home	72%		73%		77%				<table border="1"> <caption>Data for NI18 Graph</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2013/14</td> <td>72%</td> </tr> <tr> <td>2014/15</td> <td>69%</td> </tr> <tr> <td>2015/16</td> <td>73%</td> </tr> <tr> <td>2016/17</td> <td>74%</td> </tr> <tr> <td>2017/18</td> <td>77%</td> </tr> <tr> <td>2018/19</td> <td>75%</td> </tr> </tbody> </table>	Year	Value	2013/14	72%	2014/15	69%	2015/16	73%	2016/17	74%	2017/18	77%	2018/19	75%	Rate is the highest in Scotland and much higher than Scottish rate of 62%. Target required.		
Year	Value																									
2013/14	72%																									
2014/15	69%																									
2015/16	73%																									
2016/17	74%																									
2017/18	77%																									
2018/19	75%																									
NI19 Number of days people spend in hospital when they are ready to be discharged			534	800	505	800	521	800	<table border="1"> <caption>Data for NI19 Graph</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>534</td> </tr> <tr> <td>2016/17</td> <td>528</td> </tr> <tr> <td>2017/18</td> <td>505</td> </tr> <tr> <td>2018/19</td> <td>573</td> </tr> <tr> <td>2019/20</td> <td>521</td> </tr> </tbody> </table>	Year	Value	2015/16	534	2016/17	528	2017/18	505	2018/19	573	2019/20	521	Note: updated measure now showing a rate for people aged 75+. Interim target of national rate added.				
Year	Value																									
2015/16	534																									
2016/17	528																									
2017/18	505																									
2018/19	573																									
2019/20	521																									
NI20 Percentage of total health and care spend on hospital stays where the patient was admitted in an emergency	15%		15%		13.5%		13.7%		<table border="1"> <caption>Data for NI20 Graph</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2013/14</td> <td>15%</td> </tr> <tr> <td>2014/15</td> <td>16.2%</td> </tr> <tr> <td>2015/16</td> <td>15%</td> </tr> <tr> <td>2016/17</td> <td>14.8%</td> </tr> <tr> <td>2017/18</td> <td>13.5%</td> </tr> <tr> <td>2018/19</td> <td>13.6%</td> </tr> <tr> <td>2019/20</td> <td>13.7%</td> </tr> </tbody> </table>	Year	Value	2013/14	15%	2014/15	16.2%	2015/16	15%	2016/17	14.8%	2017/18	13.5%	2018/19	13.6%	2019/20	13.7%	Shetland has a substantially lower spend ratio on emergency admissions than Scotland (23.2%). No target has been set for this indicator. Note – this is 2019 calendar year data as January to March data is not complete for all Boards.
Year	Value																									
2013/14	15%																									
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Indicator	13/14		15/16		17/18		19/20		Graphs	Latest Note
	2013/14		2015/16		2017/18		2019/20			
	Value	Target	Value	Target	Value	Target	Value	Target		
NI21 Percentage of people admitted from home to hospital during the year, who are discharged to a care home										Under development
NI22 Percentage of people who are discharged from hospital within 72 hours of being ready										Under development – new collection methods required which will take up to 12 months
NI23 Expenditure on end of life care										Under development – final definition still to be agreed