

Annual Performance Report

West Lothian Integration Joint Board

2020/2021

West Lothian
Health & Social Care Partnership
westlothianhscp.org.uk



**West Lothian
Council**

Foreword

I joined the West Lothian Health and Social Care Partnership at the beginning of July this year replacing Allister Short as the Chief Officer of the Integration Joint Board.

It goes without saying that this year has been enormously challenging for many people as a result of the Covid-19 pandemic. However, whilst there have undoubtedly been difficult times, there are many examples too of people pulling together, supporting each other and trying to do their very best to care for the most vulnerable people in our communities as well as each other.

The main priority over the past year has been responding to the pandemic and continuing to support people as far as physical distancing requirements would allow. That said, you will see from some of the highlights contained in this report, that the partnership has continued to focus on improvement through service development and transformation with some great things having been achieved during the course of 2020/21 despite the circumstances.

Although I have only been here for a few weeks, I already have a sense of how hugely committed our staff and stakeholders are to improving outcomes for the people of West Lothian. I have been made to feel very welcome and I look forward to building on the good work already underway to further improve integrated health and social care across our communities.

The next year is likely to bring changes to adult social care as recommendations contained in the Independent Review of Adult Social Care progress. I very much look forward to working with our stakeholders and partners to shape the future and I hope to meet as many people as possible over the coming months to begin important conversations about how we take things forwards.



Alison White
Chief Officer
West Lothian Integration Joint Board

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Introduction

Purpose of the Report

The Public Bodies (Joint Working) (Scotland) Act 2014 established a legal framework for the integration of health and social care services in Scotland. In West Lothian an Integration Joint Board (IJB) was established on 1st April 2016 and is responsible for planning and setting the direction for the majority of integrated health and social care services for adults in the area.

The IJB is required to assess how it has performed in the areas it has responsibility for and to publish an annual performance report. This report sets out an assessment of progress toward the IJB's vision to 'increase wellbeing and reduce health inequalities across all communities of West Lothian'. The report covers:

- Review of the IJB's Strategic Plan
- Progress against key priorities set out in the Strategic Plan
- Progress towards the nine national health and wellbeing outcomes
- Ministerial Strategic Group integration indicator performance
- Financial management and performance
- Best value in planning and carrying out integrated functions
- Regulation and inspection of Services
- Significant decisions and directions
- Next steps

The Role of the Integration Joint Board

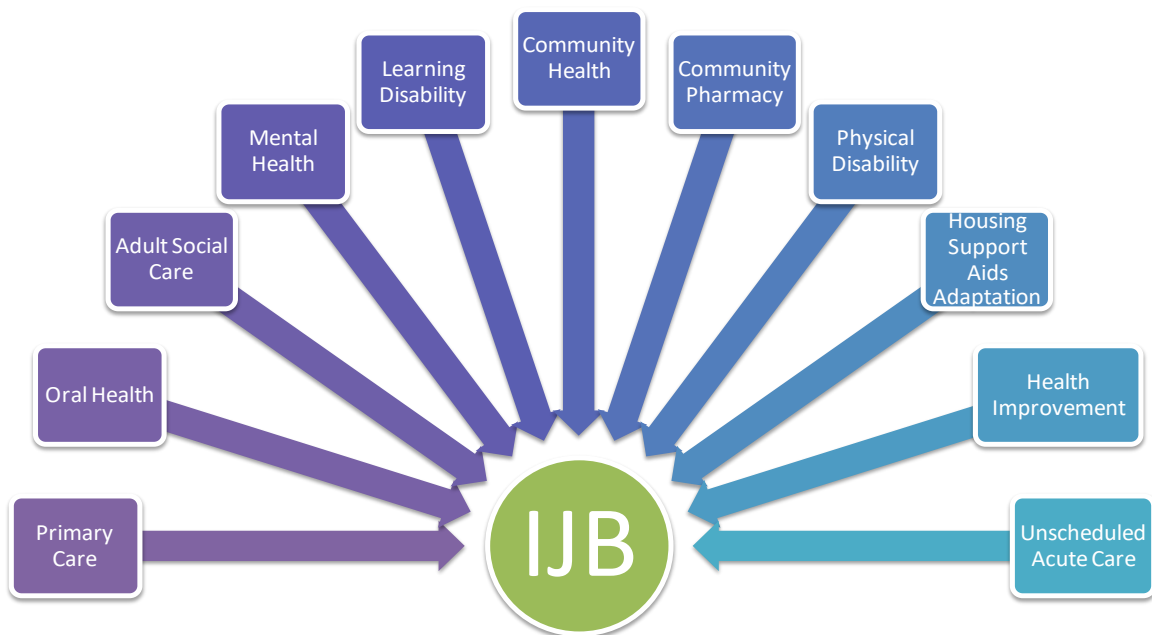
The Integration Joint Board's role is to set the strategic direction for functions delegated to it and to deliver the priorities set out in its Strategic Plan. It receives payments from West Lothian Council and NHS Lothian to enable delivery of local strategic outcomes for health and social care. The Board gives directions to the council and health board as to how they must carry out their business to secure delivery of the Strategic Plan.

The Chief Officer

The legislation requires the IJB to appoint a Chief Officer who has responsibilities to the Board and for the management and operational delivery of delegated functions. A new Chief Officer, Alison White, was appointed in West Lothian in July 2021 replacing Allister Short.

Integrated Services in West Lothian

The health board and local authority are legally required to delegate some of their functions to the Integration Joint Board. The following provides an overview of the services which are delegated in West Lothian by the local authority and the health board:



Complaints to the IJB

Complaints received by the IJB are reported to its meetings on a quarterly basis, in line with recommendations from the Complaints Standards Authority and the IJB's Complaints Handling Procedure.

Complaints to the IJB may relate to dissatisfaction with:

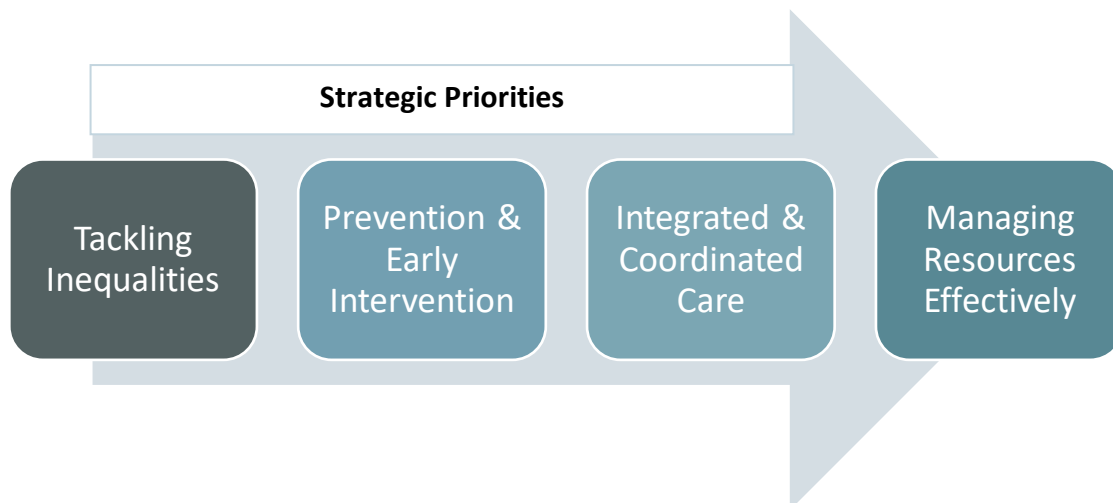
- West Lothian IJB's procedures
- West Lothian IJB's decisions
- the administrative or decision-making processes followed by the IJB in coming to a decision

No complaints were received by the IJB in 2020/21.

Strategic Planning

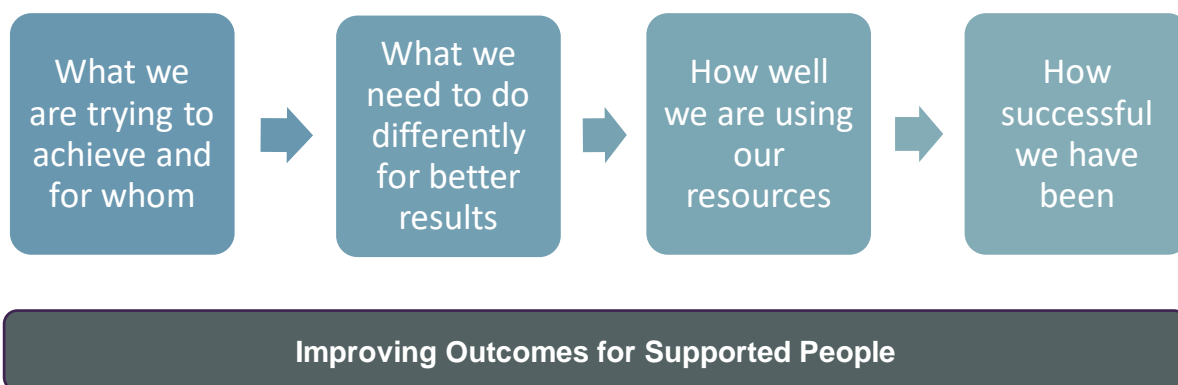
Strategic Plan

The IJB originally developed a long term strategic plan for the period 2016 to 2026 which set out its key priorities. The plan was reviewed during 2018/19 which resulted in a new Strategic Plan being developed and approved by the IJB in April 2019. The priorities in the new plan were identified through extensive consultation with a wide range of stakeholders in the West Lothian community. The strategic priorities outlined in the plan are as follows:



Strategic Commissioning Plans

Strategic commissioning is the term used for setting out:



Strategic commissioning plans for mental health, learning disability and physical disability services have been in place since January 2020 having been approved during the span of the last annual performance report. The Primary Care Improvement Plan has been progressing since 2018. Copies of the plans can be found via the following links:

Learning
Disability

Mental Health

Physical
Disability

Primary Care

Updates on the action plans associated with each commissioning plan are provided regularly to the Strategic Planning Group (SPG) and the IJB. Most of the actions are progressing well but some have been delayed or impacted by the pandemic. A copy of the most recent update on progress can be found in IJB committee papers [here](#).

Alcohol and Drug Partnership

The commissioning plan for alcohol and drug services was due to be submitted to the IJB in April 2020 but was eventually approved in September 2020 having been delayed by the pandemic.

A whole system approach has been adopted to reviewing and developing alcohol and drug services in West Lothian. This means that we are thinking about how we invest our resources, aiming to have fewer people develop problematic drug and alcohol use, providing high quality and effective treatment when needed whilst recognising in many instances that services work best when they are delivered locally.

We are working on the principle of offering health and social care services in community settings unless there is a very good reason not to. We are looking at how we shift the balance of care towards delivery of care and support at the right time in local communities.

Our approach:



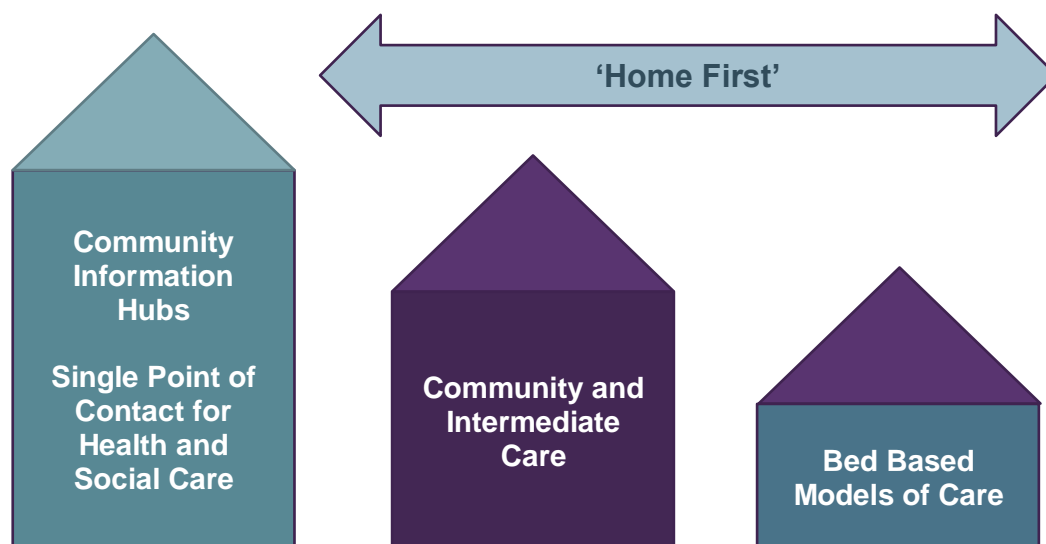
The [Alcohol and Drug Services Commissioning Plan](#) covers a three year period from 2020 to 2023 and progress is overseen via the Alcohol and Drug Partnership, SPG and IJB.

Commissioning Plan for Older People

In November 2020 a new [commissioning plan](#) for older people and people living with dementia was approved by the IJB and sets out an ambitious programme for transforming services in West Lothian over the next three years. The plan also incorporates planning for end of life care and the redesign of urgent care.

'Home First' is the overall ambition of the programme. This means we are trying to ensure that people are supported to remain at home or in a community setting for as long as possible. It focuses on developing new ways of working and models of care to manage people in the community, with admission to an acute hospital only where there is clinical need for this to happen. The norm should be to receive care and support at home and prevent hospital admission wherever appropriate. Where hospital admission is necessary for clinical reasons, we are trying to ensure that responsive support is available to facilitate discharge and allow people to return to a community setting without delay. This is the right thing to do as we know that staying longer than is necessary in hospital can result in poorer outcomes for some people, especially those who are frail.

The programme is being progressed via three work streams:



Review of Our Strategic Priorities and Planning Arrangements

The global pandemic brought unprecedented operational challenges and meant that we could not progress some of the actions identified in our commissioning plans in the timescales we set originally. It also meant, however, that we had a chance to do things differently and test new ways of working which otherwise might not have been possible.

In July 2020, the IJB's Strategic Planning Group held a reflections session and engaged with all stakeholders on what had worked well during the pandemic, what had stopped and should remain stopped, what had been started and would ideally continue and how those things would impact our strategic commissioning priorities going forwards.

We produced a Covid reflections summary which was used by planning and commissioning leads across all our services in conjunction with the Strategic Planning Group to review existing plans and make adjustments where necessary. The main things highlighted were:

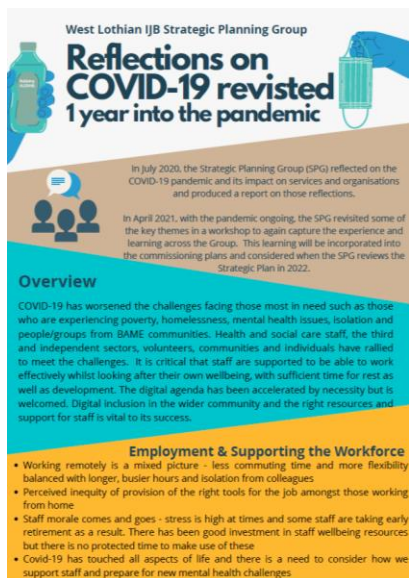


Emerging Themes

- Communication between partners and improved and positive partnership working
- Technology to support health and care delivery and different patterns of working
- Personal Protective Equipment and ongoing support
- Sustainability funding and support to independent and third sector organisations
- Willingness to change and change quickly
- Concerns about impact on inequality

Revised and updated commissioning plans were submitted to the IJB and took account of the emerging themes from the pandemic response.

A further engagement exercise was undertaken during the second period of lockdown to further gauge the impact of the pandemic on our communities which reaffirmed priorities.



Key Themes One Year On

- Growing evidence of impact on inequality
- Supporting the health and social care workforce – high stress levels with no protected time for recovery and wellbeing
- Digital and technology – opportunities for new ways of working but also barriers to access feeding further into inequality
- Partnership working – great things possible during the pandemic but energy to continue needs to remain high

Review of Planning Structure

When the IJB approved its refreshed Strategic Plan in 2019, a new strategic planning structure was implemented to support delivery of the IJB's strategic priorities through a more integrated approach to planning, commissioning and service development. This structure gave the Strategic Planning Group (SPG) oversight of new Planning and Commissioning Boards which have been instrumental in the development of commissioning plans for care groups working in conjunction with the Strategic Planning Group. The revised strategic planning structure is now fully implemented and has provided clarity on governance and reporting.

Views were sought from members of the SPG in February 2021 on whether members had sufficient involvement in strategic planning and development and were involved at the right stage; if they felt the SPG's membership was appropriate in relation to its remit; and if they were satisfied overall that the strategic planning structure was fit for purpose. The responses from members of the SPG and planning and commissioning boards were consistently positive that the current structure was fit for purpose and working well.

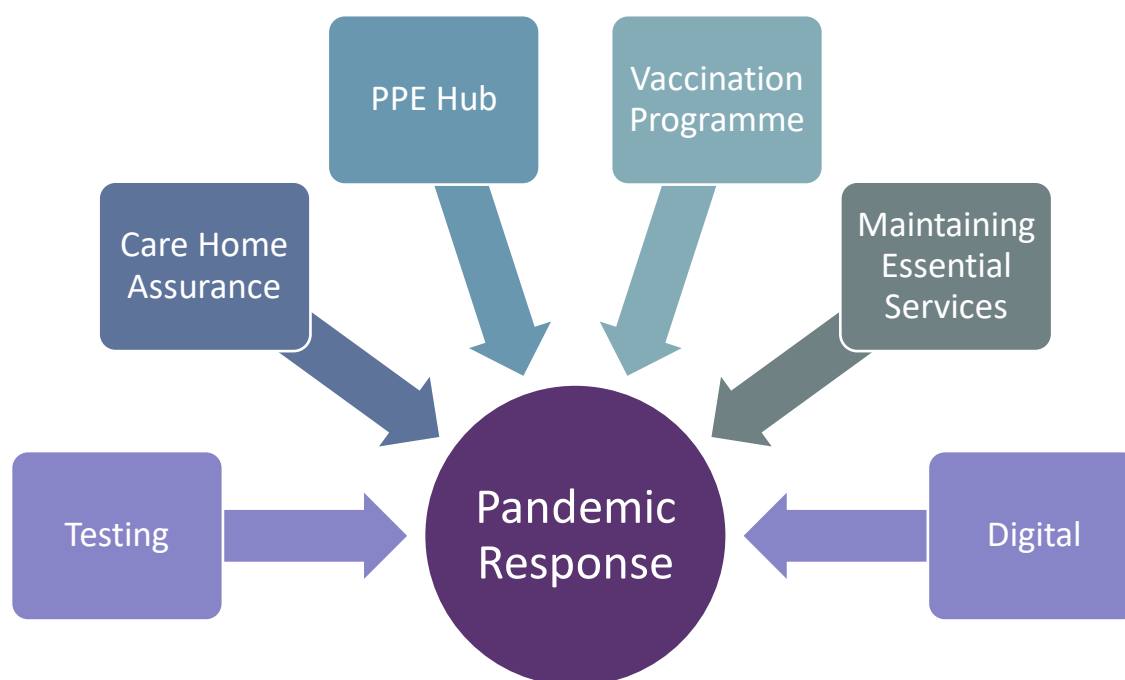
Communication and Engagement Plan Update

The SPG and IJB also asked for an update on implementation of the Communication and Engagement Strategy to be included in the annual performance report. A report was submitted to the IJB on activity during 2020/2021 and can be found [here](#).

Covid-19 Pandemic

How We Responded

The beginning of the year saw the West Lothian Health and Social Care Partnership responding to the unprecedented circumstances of the COVID-19 pandemic. The main focus of the past twelve months has been continuation wherever possible of essential health and social care services during a period of significant uncertainty for our communities and our staff. A range of measures were put in place for continuing some services, safely reducing other services and developing alternative approaches to meeting the needs of our local population whilst responding to UK wide and Scottish Government policy. The annual performance report includes some of the areas we have focused on.



Personal Protective Equipment Hub

A local PPE hub was established to coordinate supply of essential PPE across health and social care services in West Lothian as part of the pandemic response put in place nationally via NHS National Services Scotland. Using a West Lothian Council warehouse, and operated by staff seconded from the partnership's strategic planning and business support teams, the hub was developed very quickly and has played an important role in the distribution of PPE to local health and social care services. The hub has also worked in partnership with Carers of West Lothian to supply PPE to unpaid carers.

The success of the PPE distribution arrangements in West Lothian has resulted in the the hub being continued until March 2022. The hub is now being managed through our community equipment store and has expanded its role to include the distribution of Covid testing kits to social care services and carers.

Support to Care Homes

The Covid-19 pandemic has had a significant impact on older people and on people living in care homes in particular. Care home residents, their loved ones and staff had to adapt quickly to new ways of living and working to reduce the risk of Covid-19 transmission. The sector also had to adjust to new governance arrangements with NHS Directors of Nursing being asked to oversee responsibility for infection prevention control measures, training and guidance from May 2020.

The West Lothian Care Home Clinical and Care Professional Oversight Group has worked with the care home sector over the past year to ensure safe and effective care delivery within care homes. The partnership continues to deliver enhanced support to the sector through daily oversight meetings which are attended by the Chief Nurse, Chief Social Work Officer, Chief Officer and Public Health to identify emerging issues and to determine the appropriate response.

Operational support has also been provided by the West Lothian Care Home Team ranging from helping with mass swabbing to providing advice and information on infection prevention and control and training to help staff identify and support residents with Covid.

The position across care homes in West Lothian has been relatively stable over the past 6 months. The number of care homes experiencing Covid-19 outbreaks over this time has remained low and planning is now taking place to develop a model of care home assurance which will be sustainable for the future and allow the range of supports developed during the pandemic to continue in an appropriate way.

Vaccination Programme

Although the vaccination programme across the Lothians has been managed by NHS Lothian, staff from the partnership have played a key role in administering vaccinations to health and social care staff, people who are clinically vulnerable and those living in communities which are sometimes hard to reach.

Vaccinators, administrative staff and volunteers worked tirelessly to roll the programme out ensuring people could be vaccinated at the earliest possible opportunity in line with national guidance. Clinics have been running in Strathbrock Partnership Centre, Howden Health Centre and Stoneyburn Health Centre since the programme began.



Our Voluntary Sector Partners

The Voluntary Sector Gateway West Lothian (VSGWL) led the Third Sector response to the pandemic. The VSGWL worked closely with Third Sector colleagues locally, the wider Third Sector Interface Network as well as the West Lothian Health and Social Care Partnership, West Lothian Council, and other Community Planning Partners to support individuals and communities during the crisis.

Coordination of volunteering opportunities

The community response to the pandemic was incredible. The sector responded at speed, particularly during the early weeks with many moving quickly to provide help and support services online.

Over 1200 people from across West Lothian signed up to be volunteers during the crisis. A volunteering database was created which allowed volunteers to be managed and for requests for assistance from partners to be supported. Individuals secured opportunities with a range of third sector partners to help with food parcel deliveries, support delivery of PPE supplies to carers, arrange medicine pick-ups and as ward helpers in St John`s Hospital.

Support to the Covid-19 vaccination rollout programme

The VSGWL has supported NHS Lothian with co-ordination of volunteer support to the mass vaccination site at The Pyramids in Bathgate. The site has been operating seven days per week from 15th February 2021.

There was an astonishing response from individuals offering to undertake `meet and greet` roles. Within hours of a sign-up rota database being created, all three shifts per day, seven days a week through to the end of June were allocated. The VSGWL continues to work closely with NHS Lothian to support volunteers at the site.

Our Volunteers said.....



Liz told us..... Volunteering at the vaccination centre at the Pyramids, Bathgate has been a very positive experience for me. My role involves welcoming patients and helping to guide them through the system, managing queues and answering any queries that arise, as well as helping to identify anyone who might need extra support.

I have enjoyed meeting a variety of patients, NHS staff and volunteers during my sessions, and feel part of a team doing a very worthwhile job. I am well aware of the pressures the NHS has been under in the last year and feel a sense of achievement that I am able to contribute in some way to the vaccine rollout.

Catherine said..... Once accepted as a volunteer, I received regular emails updating me on the process for registering and booking shifts using the 3Rings website. The registration process which required me to attend a short meeting in Bathgate was very well organised and efficient. At this meeting I received & signed various documents regarding health & safety, data protection & confidentiality and I was issued with my security badge which would allow access to the staff entrance at the vaccination centre.

On the morning of my first shift, I arrived bright and early at 7.45am. On the way in I met a member of the NHS staff who kindly showed me the way through the maze of the Pyramid site to the staff quarters where I met the rest of the volunteering team including Colin who was the volunteer co-ordinator on duty that day. After signing in, Colin took me on a tour of the vaccination centre, explaining as we went what was required of me at the various volunteer stations. Then it was straight to work.

As volunteers, recognisable by our purple tee shirts, we are mainly required to welcome patients to the centre, directing and guiding them to the relevant place to register for their vaccine, then on to the vaccination booths and finally to the seating area for 15 minutes before heading off to get on with the rest of their day. The vaccination centre setup is extremely well organised and runs like clockwork and the atmosphere is one of calm and efficiency. All staff from vaccinators to security, cleaning staff, nursing and admin staff are friendly, helpful and happy at their work. Even on busier days patients very rarely have to queue for long to get their jab and many have commented on how well run the process is.

This is the first time I have volunteered and have found the whole experience enjoyable and satisfying.



**Thank you to all our
volunteers**

Digital

Video conferencing facilities, Near Me, were installed in all GP practices across West Lothian and are being used by GPs to work with patients via video link. Initial feedback on usage has been very positive from GPs and from patients. The Near Me technology was also rolled out to other service areas to reduce face to face contacts and a review of learning from the use of this technology is underway to inform future service planning.



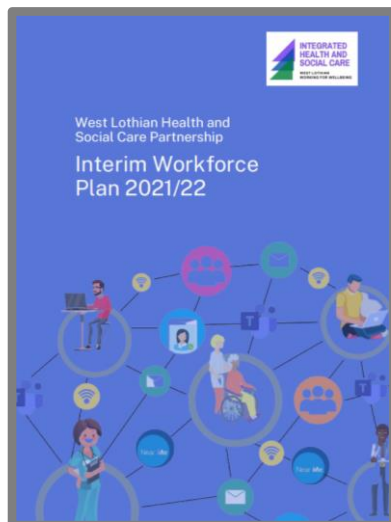
Find out more
about
[How it Works](#)

Staff Support

In recognition of the impact of the pandemic on health and social care staff, local teams and managers developed innovative ways of supporting people in the delivery of front line services and for helping staff cope with rapid change and new ways of working.

A range of supports were made available locally and nationally. Examples, include a national wellbeing hub and dedicated helpline, *Here For You* which provided a listening ear for those who were worried, anxious or stressed or who needed help with practical concerns such as financial advice or information on supporting an elderly or vulnerable relative. Staff were also able to access a range of supports from NHS Lothian and West Lothian Council.

During the pandemic the Scottish Government asked partnerships to develop interim, one year workforce plans, setting out the priorities for health and social care staff for the year ahead. Development of the West Lothian plan involved significant engagement with staff from across the partnership, including third and independent sector partners.



A copy of the plan can be found [here](#).

Appreciation of Our Teams

Many organisations and individuals contacted us early on in the pandemic to thank our staff for the contribution they were making to the pandemic response. There are too many to mention individually but the photograph below shows partnership staff receiving 'care bags' donated by the Rotary Club of Livingston.

Staff also received treats via the 'hub in a tub' initiative funded by the Edinburgh and Lothians Health Foundation.

We are very grateful to everyone for their generosity, messages of gratitude and kind support.

Staff receiving their care bags.....

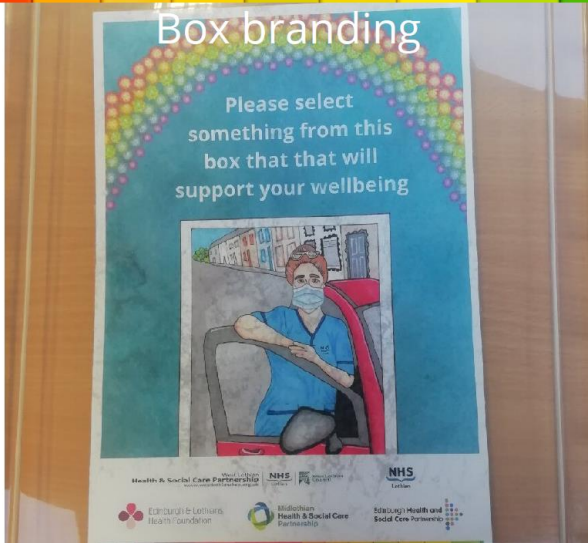


..... we're happy to help out in any way we can. You and your fantastic teams are doing such brave and essential work and we're so grateful to have such strong professionals

Quote from an organisation making a donation for our staff.

Some hub in a tub treats.....

OPERATION HSCP HUB IN A TUB



Achieving Positive Outcomes

National Health and Wellbeing outcomes

The nine National Health and Wellbeing Outcomes provide the foundation for the West Lothian Strategic Plan. The outcomes are high level statements by the Scottish Government setting out what health and social care partners are attempting to achieve through integration and how improvements can be made for people. The outcomes framework below has been used to report progress in West Lothian.

- 1 People are able to look after and improve their own health and wellbeing and live in good health for longer
- 2 People as far as possible 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 reducing any negative impact of their caring role on their own health and wellbeing
- 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 in the provision of health and social care services

Performance Reporting

Performance Review

West Lothian IJB has developed a range of performance indicators to allow progress against health and wellbeing outcomes and integration indicators to be measured. Underneath the nine National Health and Wellbeing Outcomes sits a Core Suite of Integration Indicators, which all Health and Social Care Partnerships use to report their performance against. Performance indicators are scrutinised regularly by the Integration Joint Board and the Strategic Planning Group to monitor progress against objectives and identify areas for improvement.

The annual performance report outlines how West Lothian is performing against the main indicators. Data for the financial year 2020/21 is not yet published and the Scottish Government has indicated that calendar year data for 2020 should be used at this stage. Full financial year data for 2020/2021 will be submitted to the IJB when it becomes available.

A 'Performance at a Glance Section' is included [here](#) to provide a quick overview of performance in relation to the Core Suite of Integration Indicators.

Key

↓ Percentage/rate has decreased. Performance has also declined ↑ Percentage/rate has increased. Performance has declined

↑ Percentage/rate has increased. Performance has improved ↓ Percentage/rate has decreased. Performance has improved

→ Percentage/rate has remained the same. Performance is unchanged

Summary of Core Suite of Integration Indicators

Indicators 1 to 9

Indicators NI1 to NI9 are reported in the [Scottish Health and Care Experience Survey](#) commissioned by the Scottish Government. Data relating to these indicators for 2019/20 was originally due to be published in April 2020 but due to staff redeployment during the COVID-19 pandemic the publication was delayed and eventually published in October 2020. The latest data from the 2019/2020 survey is now included below. Unfortunately, the data in indicators 1 to 9 cannot be compared with previous years because of changes in the way the survey was designed. This survey is sent randomly to around 5% of the Scottish population every two years. The response rate across Scotland was 26%. In West Lothian 3,894 people responded to the survey, a response rate of 26% in line with the Scottish position.

NI-1: Percentage of adults able to look after their health very well or quite well

West Lothian	92
Scotland	92

NI-2: Percentage of adults supported at home who agree that they are supported to live as independently as possible

West Lothian	68
Scotland	70

NI-3: Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided.

West Lothian	59
Scotland	63

NI-4: Percentage of adults supported at home who agree that their health and care services seemed to be well co-ordinated.

West Lothian	60
Scotland	67

NI-5: Percentage of adults receiving any care or support who rate it as excellent or good

West Lothian	67
Scotland	69

NI-6: Percentage of people with positive experience of care at their GP practice.

West Lothian	75
Scotland	79

NI-7: Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life.

West Lothian	61
Scotland	67

NI-8: Percentage of carers who feel supported to continue in their caring role.

West Lothian	36
Scotland	34

NI-9: Percentage of adults supported at home who agree they felt safe.

West Lothian	70
Scotland	73

Indicators 11 to 19

The primary source of data for National Indicators NI11 to NI20 are Scottish Morbidity Records (SMRs) which are nationally collected discharge-based hospital records. In accordance with recommendations made by Public Health Scotland (PHS) and communicated to all Health and Social Care Partnerships, the most recent reporting period available is calendar year 2020; this ensures that these indicators are based on the most complete and robust data currently available. It is not expected that these numbers will differ greatly to 2020/21 financial year figures once available and so should not affect any conclusions that have been drawn.

Indicator		2018/19		2019/20		2020		Change and performance against previous year	
		West Lothian	Scotland	West Lothian	Scotland	West Lothian	Scotland	West Lothian	Scotland
NI - 11	Premature mortality rate per 100,000 persons (calendar year)	434 (2018)	432 (2018)	390 (2019)	426 (2019)	438 (2020)	457 (2020)		
NI - 12	Rate of emergency admissions for adults (per 100,000 population)	11,914	12,279	12,671	12,522	11,658	11,100		
NI - 13	Rate of emergency bed days for adults (per 100,000 population)	107,317	120,155	102,206	118,288	85,554	101,852		
NI - 14	Emergency readmissions to hospital within 28 days of discharge (per 1,000 discharges)	110	103	113	105	118	114		
NI - 15	Proportion of last 6 months of life spent at home or in a community setting	88%	88%	89%	88%	91%	90%		
NI - 16	Falls rate per 1,000 population aged 65+	19.5	22.5	22.0	22.8	20.0	21.7		
NI - 17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections	85%	82%	81%	82%	85% (2020/21)	82% (2020/21)		
NI - 18	Percentage of adults with intensive care needs receiving care at home (Calendar Year)	69% (2018)	62% (2018)	68% (2019)	63% (2019)	64% (2020)	63% (2020)		
NI - 19	Number of days people spend in hospital when they are ready to be discharged (per 1,000 population)	1,214	793	934	774	367 (2020/21)	488 (2020/21)		
NI - 20	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency	22%	24%	22%	24%	20%	21%		

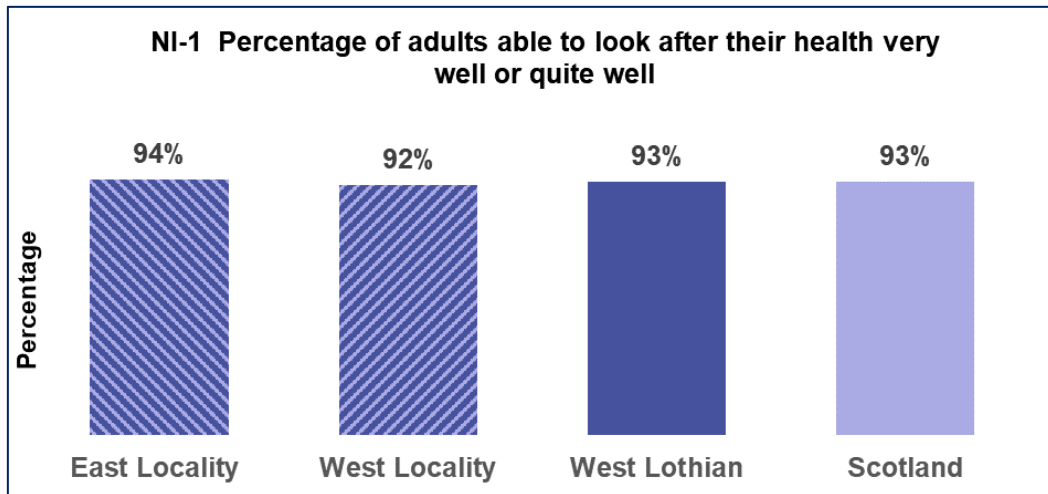
The next section of the report sets out how delegated functions performed throughout 2020/21 and provides examples of what was done to progress the IJB's priorities and national outcomes. We use indicators to look at how well we are achieving the National Health and Wellbeing Outcomes and have provided comparisons for each indicator with performance across Scotland.

Outcomes and Examples

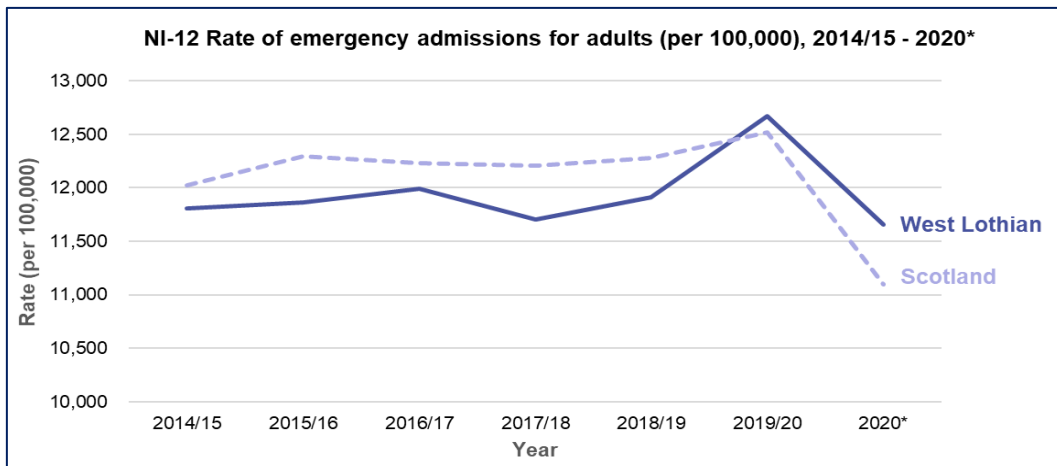
Outcome 1

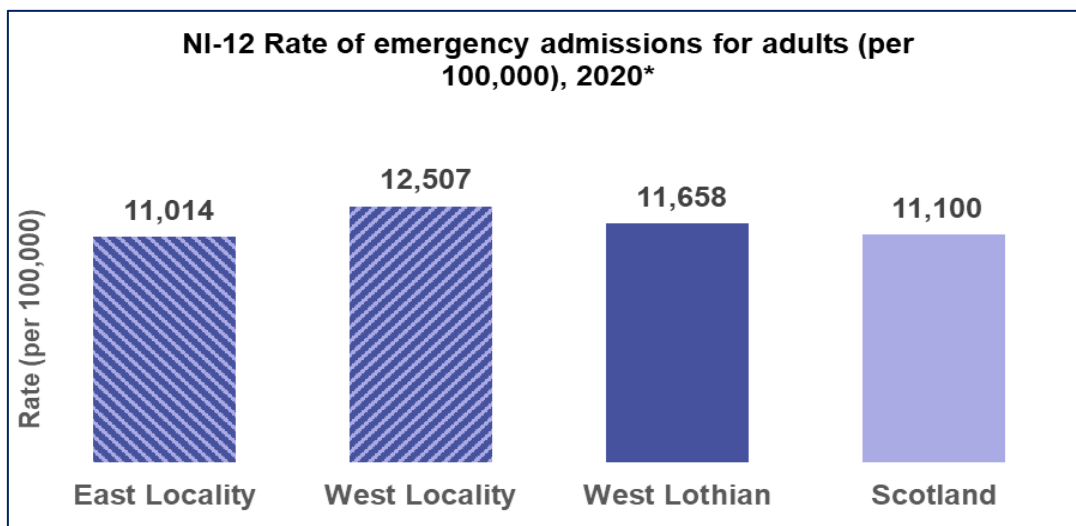
- ❖ People are able to look after and improve their own health and wellbeing and live in good health for longer

Our Performance



In financial year 2019/20, the percentage of people in West Lothian who thought that they could look after their health very well or quite well was 93%. This is a very positive response, and reflects the response in Scotland for 2019/20.





The rate of emergency admissions in adults per 100,000 has been steadily increasing from 11,811 emergency admissions in 2014/15, to 12,671 admissions in 2019/20. However the latest rate for 2020 is a reduction to 11,658 per 100,000. This trend is also reflected in the Scottish rate. The reduction in emergency admissions is likely due to the fact that in 2020 there was a national lockdown because of COVID-19 and may not reflect a true improvement in performance.

What we have done

REACT Respiratory Team

The REACT Respiratory Team (RRT) was established in March 2019 to provide a specialist community based respiratory service which optimises self-management for people living with a confirmed long term respiratory condition within West Lothian. The service also aims to prevent unnecessary hospital admission.

The multidisciplinary team consists of specialist respiratory physiotherapists, a physiotherapy support worker and a respiratory facilitator. The team is supported by the Rapid Elderly Assessment Care Team (REACT) Hospital at Home Service and two funded sessions per week from respiratory consultant physicians.

- 387 patients supported in total during 2020-21
- 230 patients with a respiratory referral to the service received a full respiratory review which was discussed at weekly multi-disciplinary team meetings
- 157 patients were assessed and followed up in either clinic or at home
- 55% female and 45% male; with an age range of 39-94years of age with an average age of 70yrs
- 100% of patients strongly agreed or agreed that the service helped them to manage their condition more effectively

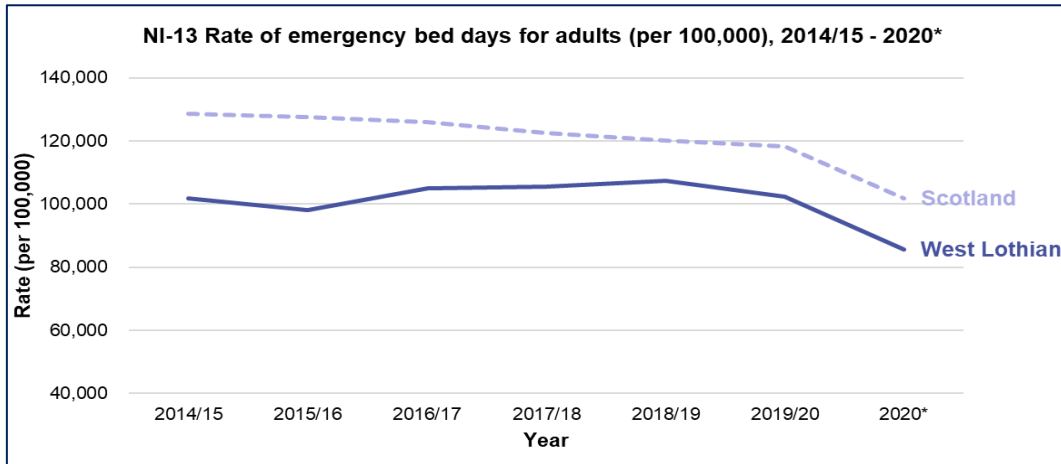
"I feel I have learned quite a lot especially the exercises which I will keep. It has made me more aware of how I can help myself a bit more. I was very grateful they came to my house."

"Useful aspects of the service was exercises and friendliness. Helping me manage my lung condition with exercises and using my inhalers better. Found it very rewarding. "

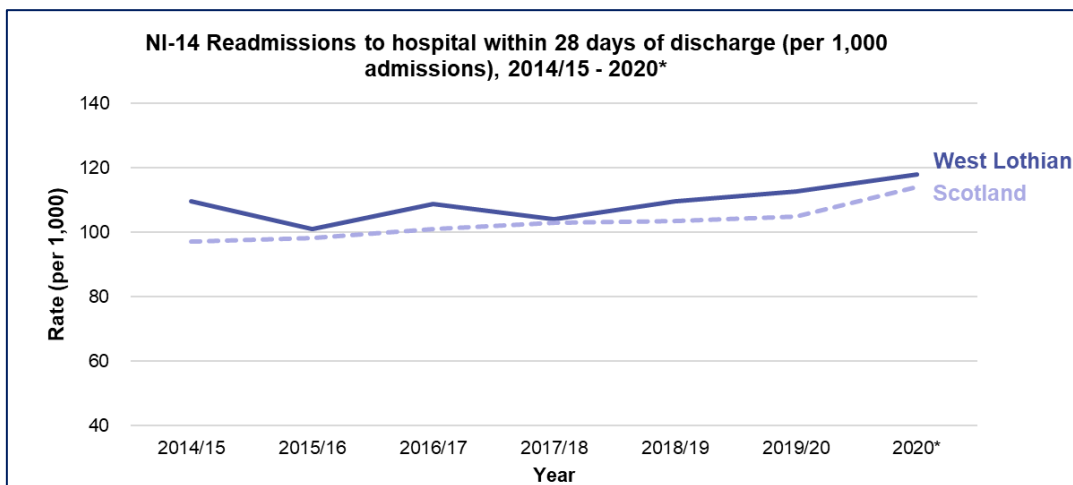
Outcome 2

- ❖ People as far as possible 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.

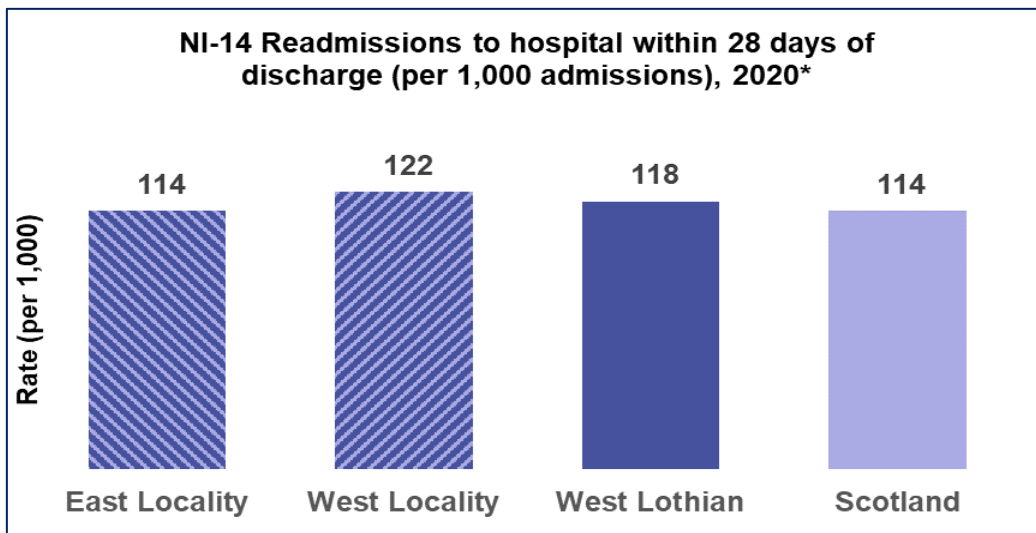
Our Performance



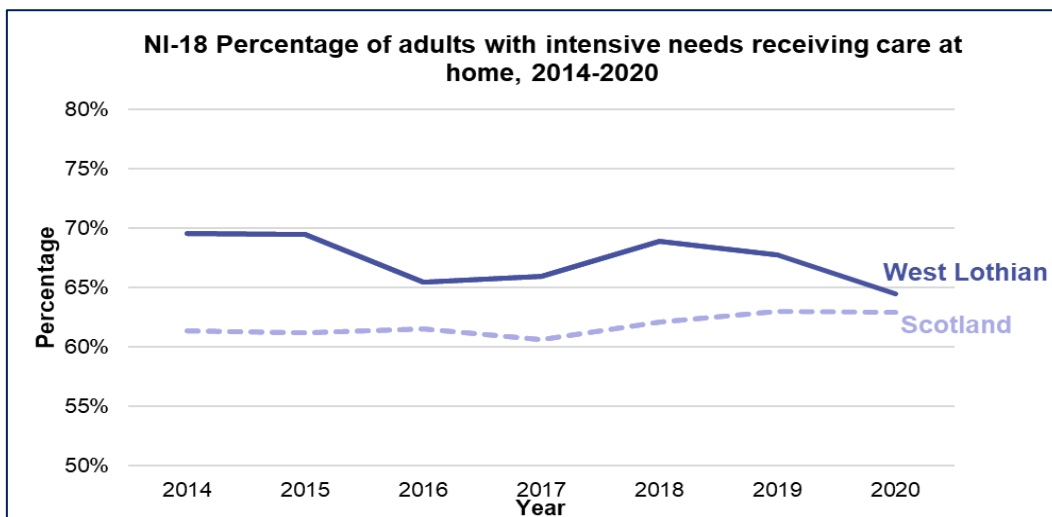
The data implies that patients are staying for a shorter amount of time in hospital. West Lothian has outperformed Scotland's emergency bed day rate consistently. However, the improved performance overall is likely to be due, in part at least, to the national lockdown in 2020 for COVID-19.



The re-admission rate to hospital for adults within 28 days in 2020 was 118 per 1,000 admissions. The trend has been fluctuating since 2014/15, with the highest rate of 118 in 2020, and low of 101 in 2015/16. The Scotland rate has been increasing steadily also.



The re-admission rate in the East of West Lothian is in line with the national rate but the rate in the West is higher than the Scottish position.



The latest data shows 64% of adults with intensive care needs are receiving care at home in West Lothian. The trend has remained fairly constant, fluctuating between 64% and 70%. The trend for the Scottish average has remained below the West Lothian rate since 2013.

What we have done

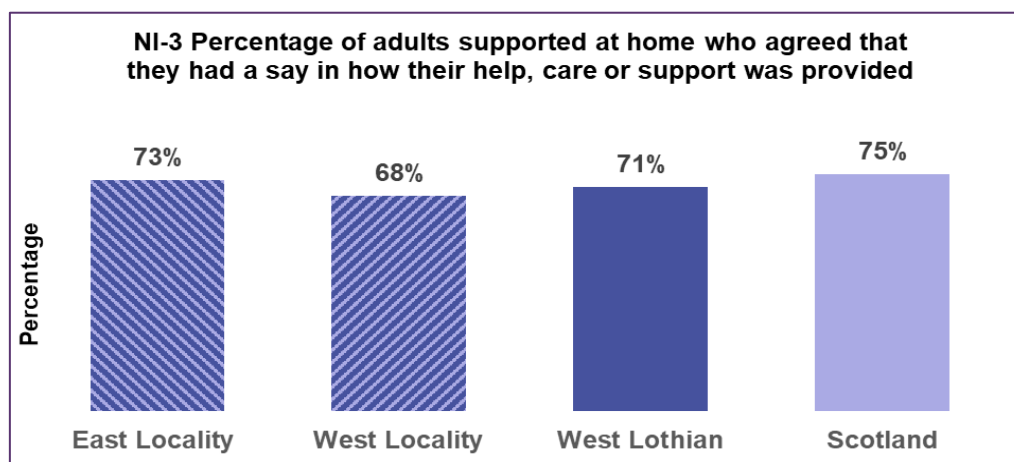
Integrated Discharge Hub Tracker

A multi-disciplinary team of health and social care staff works at St John's Hospital and has developed a patient tracker to help track and plan the discharge of all patients who are admitted to the hospital and who may need ongoing care and support in the community. The tracker enhances the arrangement already in operation by allowing early discharge planning to take place and for discussion of all patients admitted to happen at daily flow meetings. The partnership has seen a significant improvement in delayed discharges on the St John's Hospital site as a result and in the number of hospital bed days lost to delays.

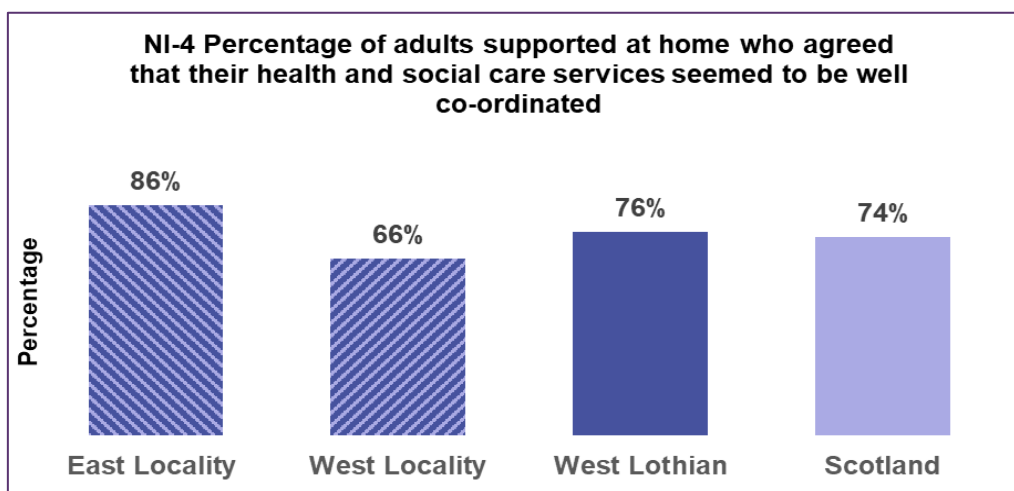
Outcome 3

- ❖ People who use health and social care services have positive experiences of those services, and have their dignity respected

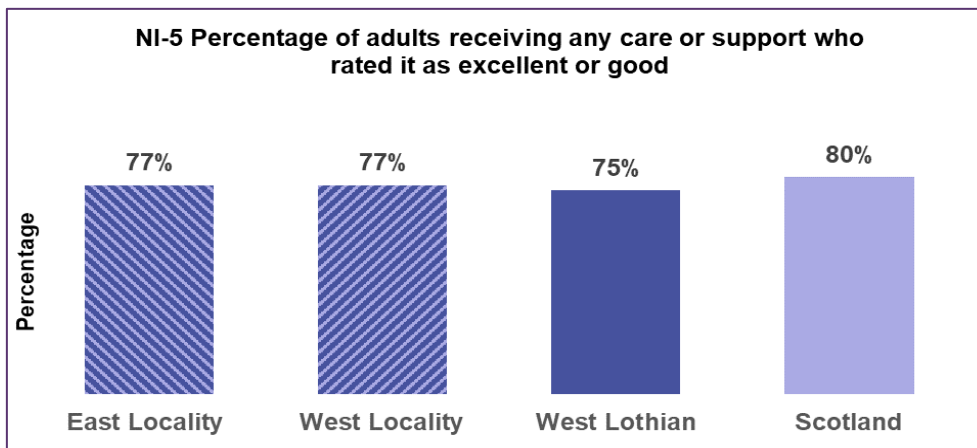
Our Performance



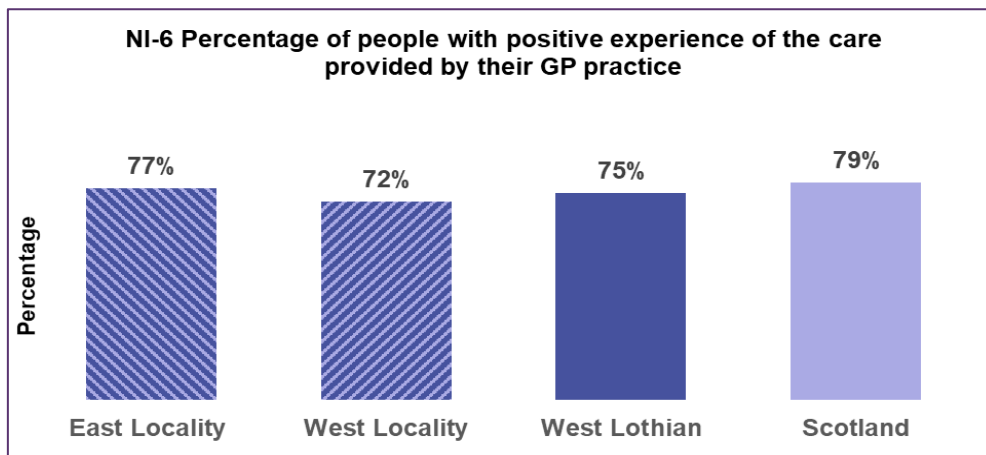
In West Lothian, 71% of people surveyed in 2019/20, agreed that they had a say in how their help, care or support was provided. Although this is a relatively high percentage, the result for West Lothian sits four percentage points lower than the Scotland average.



In financial year 2019/20, 76% percentage of adults supported at home, agreed that their health and social care services seemed to be well coordinated. The response for West Lothian sits above the Scottish average of 74%.



The percentage of adults receiving any care or support, who rated it as excellent was 75% in 2019/20. The Scottish average was 80% in 2019/20.



In 2019/20, the percentage of adults who had a positive experience of the care provided by their GP practice was 75%. The Scotland average was 4 percentage points higher for the same year.

What we have done

Primary Care

All practices adapted during the pandemic remaining open and embracing new ways of working including remote working and the use of virtual appointments. There are many examples of GPs and pharmacists consulting with patients, issuing fit notes and prescriptions for collection at the practice or pharmacy without the need to attend a face to face appointment.

All GP practices supported the Covid vaccination effort ensuring the most vulnerable people got their vaccination as close to home as possible. Patient feedback was very positive: *“extremely well organised and quick”*. Uptake rates were very high and waste was minimised by the use of ‘short notice’ lists of patients who were prepared to attend for unused doses.

A suite of performance indicators for primary care has been developed to provide assurance to the Integration Joint Board around outcomes in primary care services.

The Mini Pinnie Project

A project was tested to improve patient comfort, safety and dignity during mealtimes whilst reducing stress and distress. The project involved designing and manufacturing a new style of apron to suit the needs of patients in the Roseberry Wing of Tippethill Community Hospital. 'Mini-pinnies' can be varying sizes and/or lengths to meet patients' needs and have a short neck strap with a quick release Velcro fastening and no back tie. The pinnies are made from a double sided fabric suitable to be washed at high temperatures.

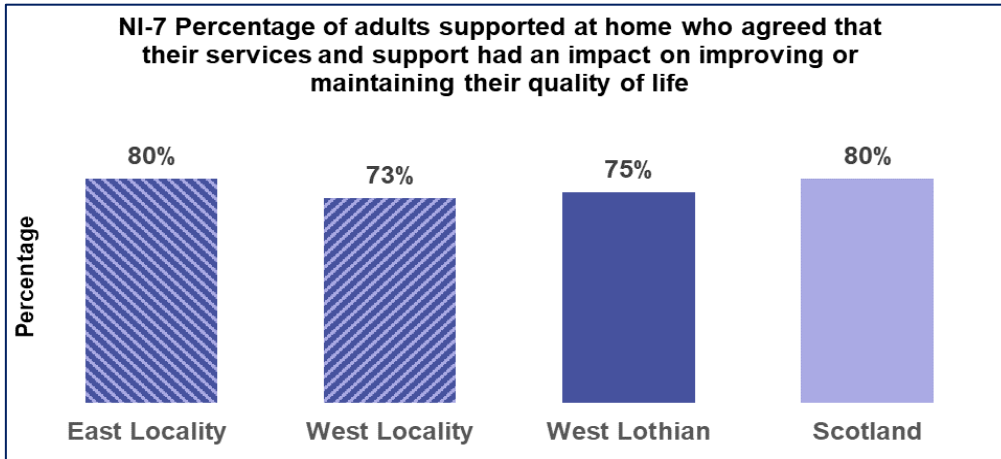
Feedback from nursing staff indicated that patients were less distressed after meals when pinnies were removed easily, some of the patients were proud to wear their pinnies and some were using them as fidget pinnies too.



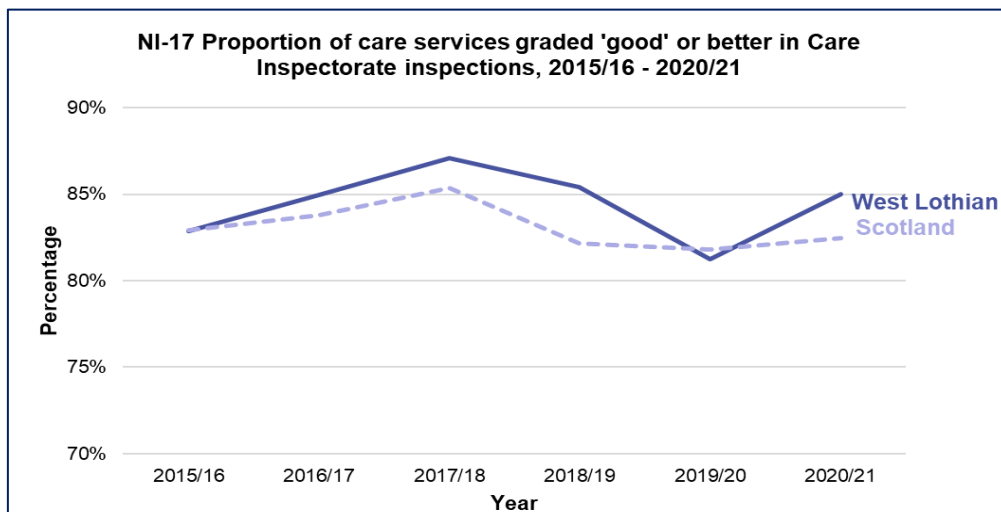
Outcome 4

- ❖ Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services

Our Performance



The percentage of adults supported at home who agreed that their services and support had an impact on improving or maintaining their quality of life was 75% in 2019/20. The Scotland response rate was slightly higher at 80% in 2019/20.



The overall quality of care as good (4) or better in Care Inspectorate inspections was 85% in 2020/21, which is 3% higher than the Scottish average of 82%. Not all services are inspected each year and inspections in 2020 were different than in previous years due to the COVID-19 pandemic.

What we have done

Supporting People with Learning Disabilities During the Pandemic

There were significant challenges in maintaining some services during the pandemic especially those which could not operate in the usual way as a result of requirements for physical distancing. This created challenges for service users and their families but staff worked hard at developing creative alternatives ensuring that people continued to be supported in the community.

The Community Learning Disability Team maintained a high level of support to all those involved within their services including both direct support as well as contact using 'Near Me' videoconferencing.

As the vaccination role programme developed, nursing staff from the team played a key role in the delivery of vaccinations to care home residents ensuring that those with Learning Disabilities were able to access their vaccinations in environments that were comfortable and familiar to them.

Some comments we noted.....

Throughout the past year Eliburn have consistently phoned to keep up to date with how (she) is doing or asking if she needed anything. (She) has always enjoyed attending Eliburn and hopefully this can resume this year. Staff communication always great."

"We are continuing to look at ways of expanding what we are doing for those who can't or are not ready to come into Pathways. January 2021 marked the launch of 'Annie's Kitchen'. This a weekly cooking session run by Annie from her own kitchen (in order to create a similar environment to what others may have at home), with a focus on healthy eating and easy meal preparation. Before each online session all those who have registered an interest are provided with a recipe card and information on where they can get supplies from."

Outcome 5

❖ Health and social care services contribute to reducing health inequalities

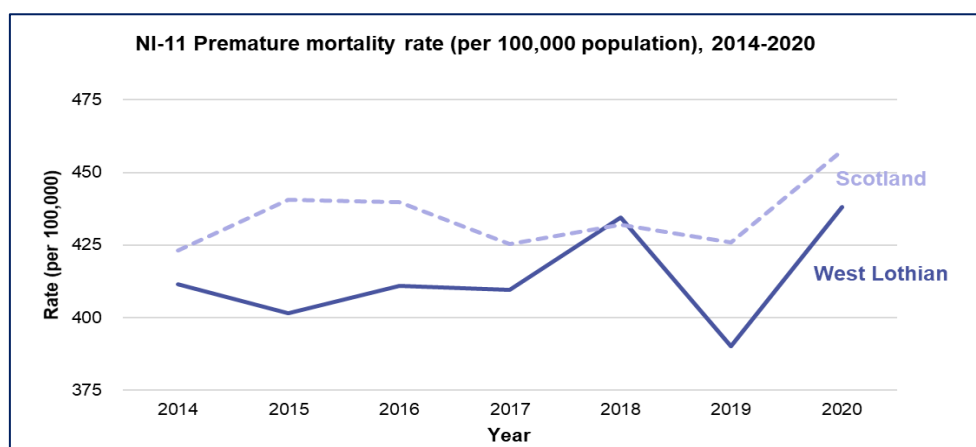
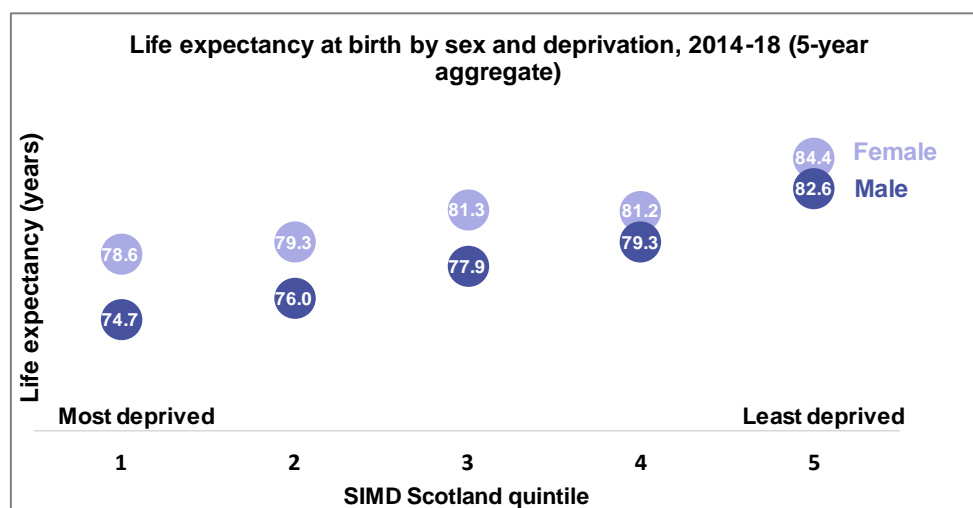
Our Performance

Life expectancy at birth by sex, 2012-2019 (3-year aggregates)

		2012-14	2013-15	2014-16	2015-17	2016-18	2017-19
West Lothian	Male	77.8	78.2	78.3	78.1	77.8	77.9
	Female	80.5	80.8	80.8	81.0	80.8	81.0
Scotland	Male	77.1	77.1	77.1	77.0	77.1	77.2
	Female	81.1	81.1	81.1	81.1	81.1	81.1

Source: NRS

Female life expectancy is better than for males which is consistent with the national picture. Life expectancy in West Lothian is consistent with the Scottish position. Life expectancy is higher in least deprived areas of West Lothian and Scotland.



The premature mortality rate, which is the number of people dying before the age of 75, for West Lothian was 438 deaths per 100,000 in 2020. Scotland's premature mortality rate was 457 deaths per 100,000. West Lothian's premature mortality rate has routinely outperformed the Scotland average since 2014 but is worse than previous years.

What we have done

NHS National Services Screening Project

Over the past year we have been working on a project with NHS National Services Scotland, North Lanarkshire Health and Social Care Partnership, NHS Lothian, NHS Lanarkshire and Public Health Scotland to better understand why some people don't participate in health screening. We know that early intervention is important and that early treatment has better outcomes.

The project we have been working on has used data to drill down into communities to give us a better understanding of some of the barriers people face in accessing screening programmes. We now have data at West Lothian level down to council ward areas. We specifically want to focus on thinking about using local resources and third sector partners more effectively to encourage and facilitate participation in screening. The work we have done so far was selected for a presentation at the annual NHS Scotland Conference and the next step is to develop two projects looking at localising and personalising services and how we can use community assets in a better way to encourage uptake.

Change, Grow, Live

The organisation is part of the recovery service operated by the West Lothian Drug and Alcohol Partnership. Services moved online just before the official lockdown apart from the community evening meal and drop-in services at hubs. Coffee club and other online spaces were created to try and continue the community connections that people needed. A weekly women's group and recovery drop-ins emerged alongside more established SMART and Foundations of Recovery bite-sized support groups.

Recovery support online was established to provide welfare and connection to many of our community who were isolated and isolating during this difficult time. Yoga and other health practices went online too and Bingo/Quiz nights established monthly.

Recovery Connections started with small grant funding, providing electronic devices, data packages and training to help those who were digitally challenged to get connected with others in recovery.

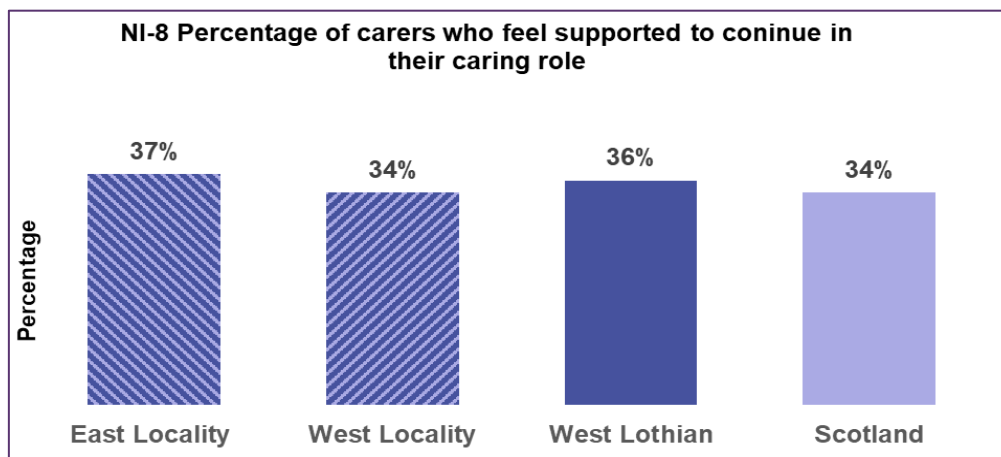
RED Talks (Recovery Education Discussion) were planned to take place in the Hub in Bathgate monthly with inspirational speakers with lived experience of recovery from addictions attending. This was moved online and meant that we were able to interview far more people to considerable public acclaim.

RED Talks + developed, interviewing people who work in the sector and who have something important to say. The interviews can be heard on the organisation's YouTube channel.

Outcome 6

- ❖ People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing

Our Performance



In the 2019/20 survey, 36% of carers responded saying that that they feel supported to continue in their caring role. West Lothian's rate is slightly higher than the national average of 34% but we want to improve this position.

What we have done

The critical role carers play in the health and social care system has never been more apparent than during the pandemic. People have felt increasingly isolated over the past year and are concerned about their mental health and wellbeing.

Carers of West Lothian is the organisation commissioned to support carers. The organisation provides information, advice and support to carers to enable them to continue in their caring role. COWL has worked in partnership with the HSCP throughout the pandemic and has developed its services and delivery models, moving many supports online, in response to the challenging circumstances faced by all. Work is now taking place to support carers in the recovery phase of the pandemic, focusing on early intervention and prevention.

Carers Strategy

The IJB developed a new Carers Strategy in 2020 which will shape how carers are supported in West Lothian over the next three years. A Carers Strategy Implementation Group has been established to ensure that carers and their representatives are at the heard of service planning and development.

Feedback from Local Carers

In May 2020, 127 people responded to a survey by COWL looking at the impact of lock down. Carers said that they were worried about a range of things including: what would happen if they got ill; going out to public places; their own mental health; testing being available for social care support staff and paid carers; and about social care support being reduced in the future.

People were asked what they needed from Carers of West Lothian and they said they needed help with: information and advice; emergency care plans; help with finance and benefits; one to one telephone support; help with POA; and counselling. COWL made contact with everyone completing the survey who left their details.

There were positive comments too:

- *Thanks you for your social media updates and ability to be contacted, stay safe*
- *I have already applied for help with PPE and I really appreciate the PPE packages I received. Thank you so much.*
- *I have enjoyed taking part in your exercise class and seeing other people via Zoom*

In November 2020 a further survey completed by 106 people provided feedback and indicated that they were looking for: opportunities to relax and unwind; respite; more interest groups; and chances to improve health and wellbeing.

Comments from people about the quality of support provided included:

- *You provide a great service which is much appreciated*
- *I have never had any help from anyone before but wish I'd asked for help sooner*
- *Staff I've spoken with have been very supportive and it was clear they were listening to what I said by detail of their responses*
- *I have been on a few courses for wellbeing and found this very useful during these times*
- *Highly professional counselling service*
- *There is always someone there to listen and give support, sometimes you just need someone to listen, as when you talk some of the answers you need pop into your head and you also feel less alone*

The partnership is using the information gathered during the pandemic to try and reach more carers who are eligible for support and also to shape future services.

COWL Case Study

In February 2021, West Lothian HSCP matched short breaks funding provided through the Scottish Government enabling us to distribute grants to local unpaid carers. This project provided grants for unpaid carers to spend money on something that would make a difference to them, give them respite or offer a chance to take some time for themselves at a time when so many carers struggled with isolation and no breaks from their caring role. £22,000 was distributed to 69 unpaid carers, including 27 parent carers who do not benefit from Shared Care Scotland Short Breaks funding. 17 new unpaid carers also registered with COWL through this initiative.

Thomas cares for his wife and adult son providing 24/7 care. He contacted COWL about PPE last year and following a self-assessment, short breaks funding was discussed. He secured a grant allowing the family to fence the garden, giving them more space to support their son with additional needs and helping the family as a whole. Thomas explained that being able to plan the garden space not only helped their mental health and wellbeing but has reconnected the family to their peers who helped with the renovations and helped the carer build confidence.

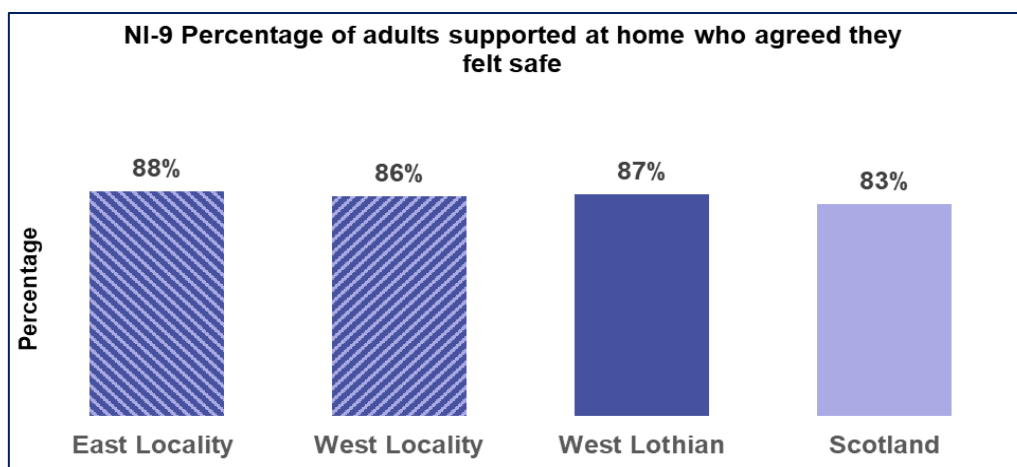
Thomas said:

Being awarded the grant has been fantastic! The fence is in place and is making a vast difference to us as a family. The garden is now secure and is becoming a nice extra space for me and the family to enjoy. It's been great to keep my mind occupied thinking about how to plan the garden space as before I became a full time carer for my son and wife, I was a landscape gardener. 10/10 for COWL for how the whole thing has been organised from start to finish. Brilliant, thank you!

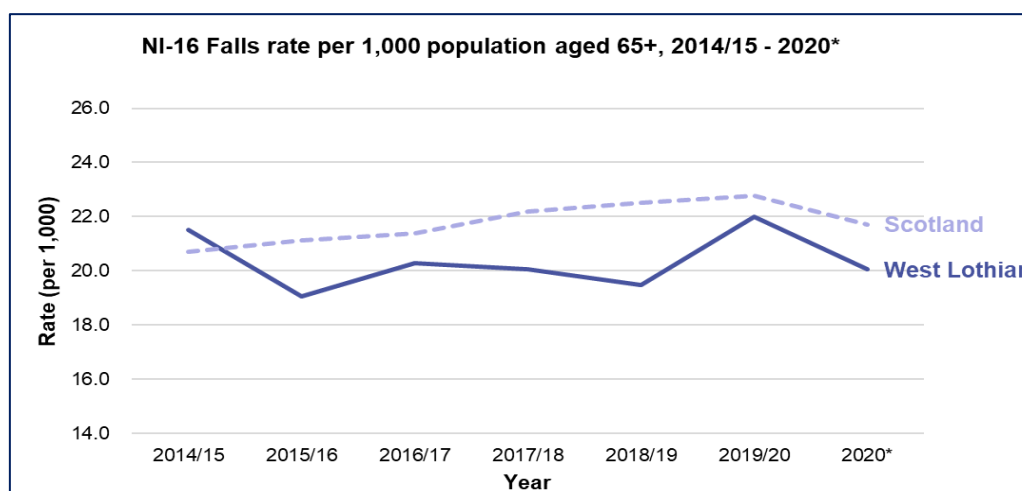
Outcome 7

- ❖ People who use health and social care services are safe from harm

Our Performance



The percentage of adults in West Lothian who responded to the survey, and agreed that they felt safe was 87% in 2019/20. This is higher than the Scottish average which is 83%.



The falls rate for adults aged 65 years and older has been fluctuating since 2014/15, with the highest level of 22 in 2019/20, to the lowest 19 in 2015/16. West Lothian's rate per 1,000 of the population has decreased from 22 in 2019/20 to 20 in 2020. It is also good news, however, that West Lothian has been performing better than the Scotland average since 2014/15.

What we have done

West Lothian Suicide Prevention Action Plan

Suicide Prevention in West Lothian is everyone's business. We are encouraging everyone to read the actions and plan and ask themselves 'How can I help?' As we progress the actions within the plan we will work with local and national organisations to deliver on the actions within the plan and support the National Suicide Prevention campaign. In West Lothian we are all United to Prevent Suicide".

The West Lothian Suicide Prevention Action Plan 2020-2023 was published in December 2020. The plan outlines the key actions of the Community Planning Partnership (CPP) to ensure that suicide prevention is not only a leading strategic position but also was a practical and operational focus across partner organisations.

The West Lothian Mental Wellbeing and Suicide Prevention Group developed the plan and used feedback from public consultation, service user consultation and discussions amongst teams and services. A range of organisations participate in the group such as the WLHSCP, West Lothian Council, West Lothian College and Police Scotland to name a few. Close links to the 3rd sector have also been established with a 3rd sector lead taking forward key developments such as social care, training and development and supporting families bereaved by suicide. The plan will continue to focus on ensuring that suicide prevention becomes everyone's business in West Lothian.

The group has secured £5,000 to increase the number of Mental Health First aiders and is working closely with several third sector training providers - 100 MH first aiders have been trained in West Lothian since April 2020.

Falls Prevention

We developed an online falls class, aimed at increasing strength, balance and function and reducing risk of admission caused by falls. Patients included in the class were those at risk of a fall or who recently had experienced a fall. There was specific focus on target people who had been affected by inactivity following the lockdowns. The online approach enabled a much larger number of people to be supported and overall the project was a great success.



Community occupational therapists also worked hard to ensure that people supported in the community remained physically active. Approximately 12 staff were redeployed across health and social care services, enabling them to learn new skills and ensure support was offered in a different way.

Outcome 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

Our Performance

We are working on ways to measure staff engagement and satisfaction across the health and social care partnership. All health and social care staff were due to take part in the iMatter staff survey during 2020/2021 but this was postponed as a result of the pandemic. There are plans in place for the survey to be undertaken in 2021/2022.

During the past year, staff from across the partnership have worked flexibly, often undertaking different roles voluntarily to ensure that essential services could continue and that new services to support the operational response happened.

What we have done

Community Equipment Store



The Community Equipment Store provides a critical service to support people to access equipment after an assessment by health and social care staff. The service has continued to operate during the pandemic and recycling equipment has been a vital component in maintaining stock.

The store operators have adapted to the use of technology, taking environmental photographs to progress requests and changes quicker than would previously have been possible. The staff developed their knowledge to support the PPE hub and ensure essential services had the deliveries they required.

Naloxone Champion West Lothian

The West Lothian Alcohol and Drug Partnership commissioned a Naloxone Champion through new funding from the Scottish Government. This post, started in January 2020, will build on the work already happening to address and reduce drug deaths both locally and nationally through increasing the provision of Naloxone in both outlets and distribution. Naloxone is a medication used to block the effects of opioid drugs such as heroin and methadone. It can reverse temporarily the effect of opioids if somebody overdoses and keep the person alive until the ambulance service can attend.

A worker from the West Lothian Drug and Alcohol Service (WLDAS) has been trained by the NHS to 'train the trainer' level which allows him to equip others to supply or administer Naloxone. This training is available free to any organisation or individual in contact with people who use drugs, or their families and friends and consists of locally developed training combined with online training from the Scottish Drugs Forum. Since the start of February WLDAS has trained 45 individuals and 8 organisations to administer and supply Naloxone. Due to COVID-19, the training is currently being provided virtually, but will be able to be delivered face to face when restrictions ease.

Brian Pringle, General Manager at WLDAS:

"Drug-related deaths have a devastating toll on individuals, families and the wider community. Naloxone is an effective way to reduce these deaths, so we are delighted to provide organisations with the training to supply and administer Naloxone as needed in their line of work. It's a valuable tool for all organisations and front-line services. We want to get Naloxone out to as many people as possible in West Lothian."

Lisa Drinnan, Project Manager, Community Action Blackburn comments: *"We recently had the opportunity to attend WLDAS's online training on the distribution and use of Naloxone to prevent opiate overdoses. The course is informative, clear and accessible, providing valuable practical advice and guidance on recognising an overdose and using the Naloxone kit. We would highly recommend the course to other community organisations. As a local community-led and run charity, it gives us the knowledge and confidence to raise awareness of Naloxone and to help support individuals, their families, friends and carers to prevent drugs-related deaths in Blackburn."*

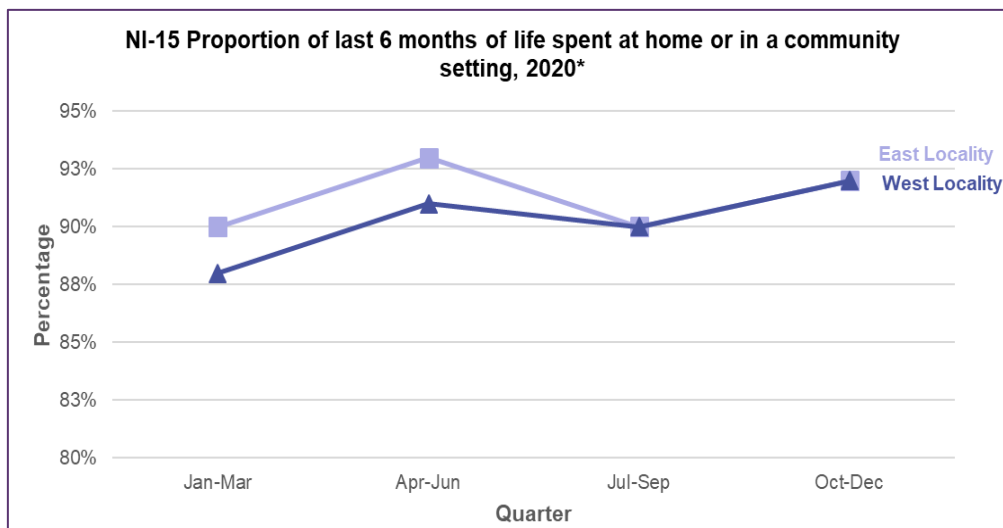
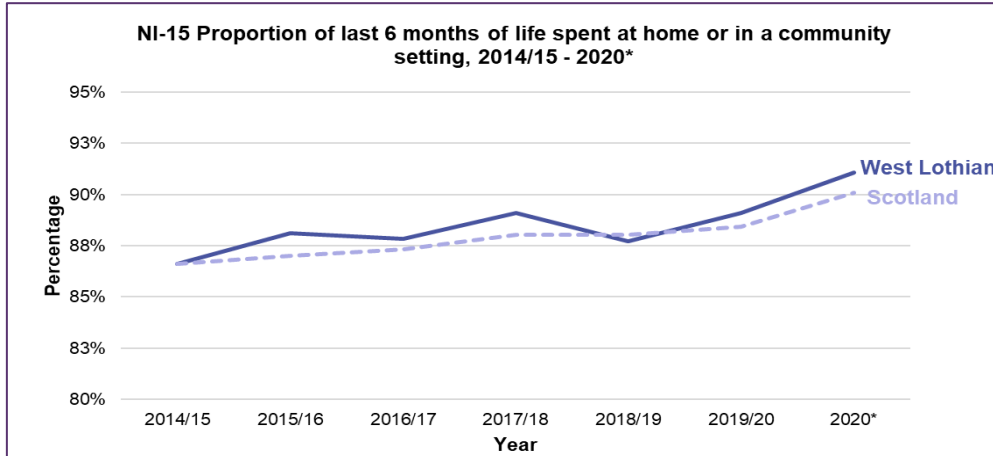
Jane Deary, CEO, Craigshill Good Neighbour Network comments: *"As a central support service in our community, Craigshill Good Neighbour Network was pleased to be offered staff training on the administration of Naloxone which is used on someone who potentially has taken an overdose. The training was very informative and has led to our staff being confident in utilising this life saving medication should a situation arise"*.

Helen Davis, Project Director, Youth Action Project comments: *"The training provided by Ozzy was informative, detailed but succinct and to the point. The subject matter is never easy to discuss, as opiate use evokes many emotions, however, the training provided increased our knowledge of how straightforward it is to administer Naloxone to a person who has overdosed, reducing the risk of death. We consider it vital as a community based agency and individuals to have access to Naloxone kits. I am now informed on the legalities and enabled to cascade the information to colleagues, we were also provided with a range of additional material on Naloxone for our staff, clients, families and the wider community"*.

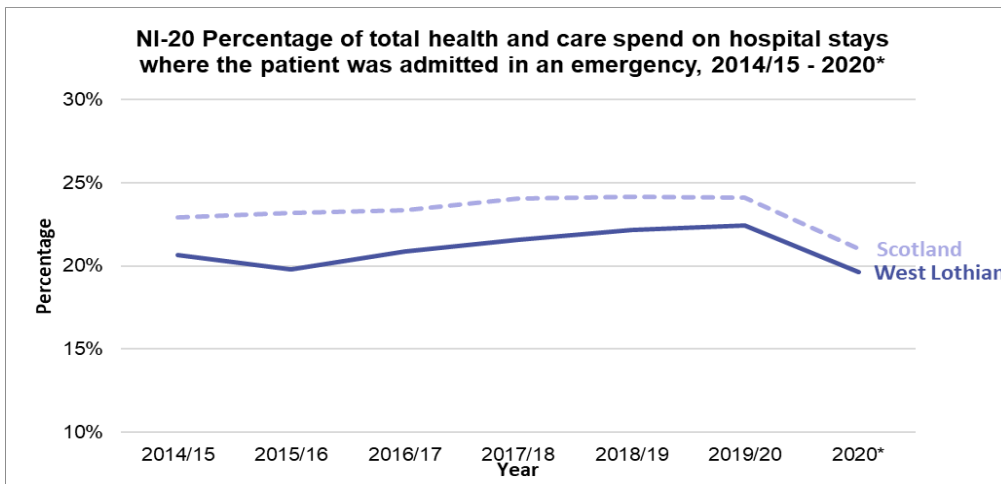
Outcome 9

- ❖ Resources are used effectively in the provision of health and social care services

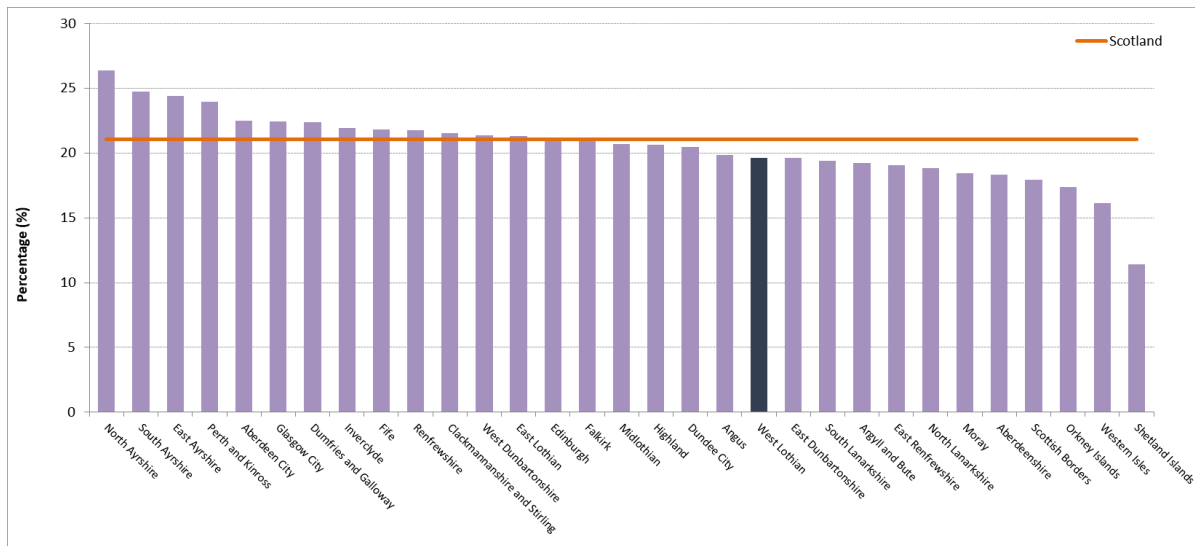
Our Performance



The percentage of time West Lothian residents have spent at home, or in a community setting, during the last six months of their life, has increased from 87% in 2014/15 to 91% 2020. The trend reflects that of Scotland which has also increased from 87% in 2014/15 to 90% in 2020.



In 2020, the percentage of health and care resources which were spent on hospital stays for emergency admissions was 20%. The Scottish average is slightly higher at 21% in 2020. The trend for West Lothian has remained relatively constant between 20% and 22% since 2014/15. The Scottish average has fluctuated between 21% and 24% over the same time frame.



What we have done

Lothian Care Academy

We are working with NHS Lothian to progress a vision for the development of a Lothian care academy to support and develop the health and social care workforce. We aim to :

- Agree core training requirements for care delivery across the HSCPs
- Identify the process whereby shared learning can take place
- Standardise training and content to enable a more cost-effective approach
- Enhance career pathways for care staff across health and social care
- Stabilise the care workforce (recruitment and retention) making health and social care a positive and attractive place to be employed

Police Scotland and the Acute Care and Support Team



Police Scotland and the West Lothian Health and Social Care Partnership (HSCP) have worked together to support mental health and wellbeing in the community. The Police Community Liaison referral was established last year, working with the Acute Care and Support team (ACAST) to ensure that anyone engaging with police officers in the community displaying signs of high distress could be seen by the correct mental health service in a more timely way.

The pilot project, which is now everyday practice between the two teams, ensures that police officers are waiting for shorter periods of time in the Emergency Department. Over the past 10 months Police Scotland has determined that throughout the pilot period, 40 days of policing time have been saved due to officers being back out on the street.

Police Scotland said: *“This is an example of partnership working to both protect resources, improve lines of communication but most importantly ensure that residents of West Lothian remain safe. We look forward to continue our work with the HSCP to ensure that we can support residents of West Lothian when they need of specialist support.”*

ACAST team manager said:

“The relationship we have built over the past 10 months has been critical to ensuring that we are seeing individuals in crisis a lot quicker than we previously were. This has been welcomed by our team, our colleagues in Police Scotland and the residents of West Lothian that we support”.

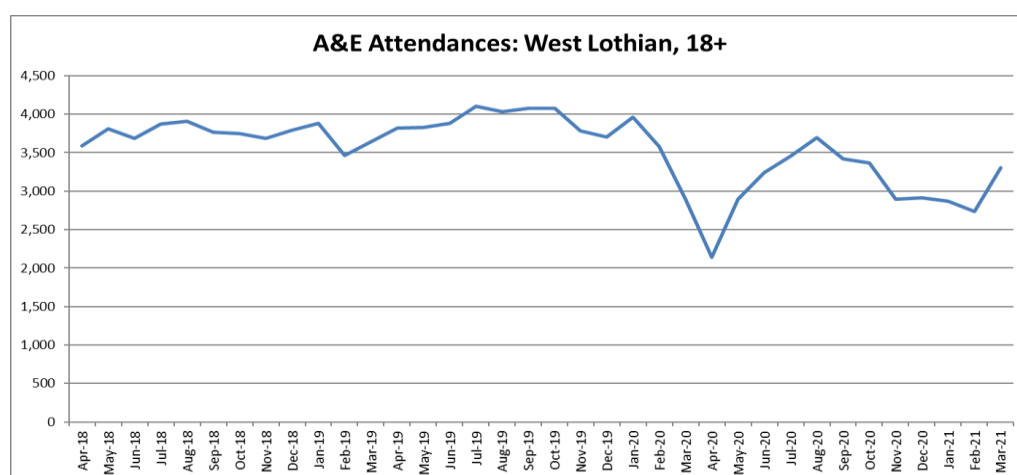
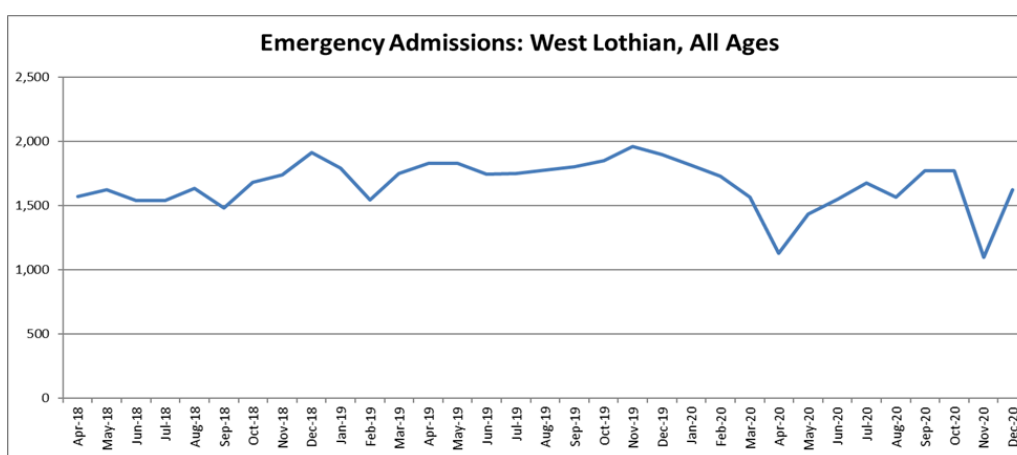
Ministerial Strategic Group Integration Indicators

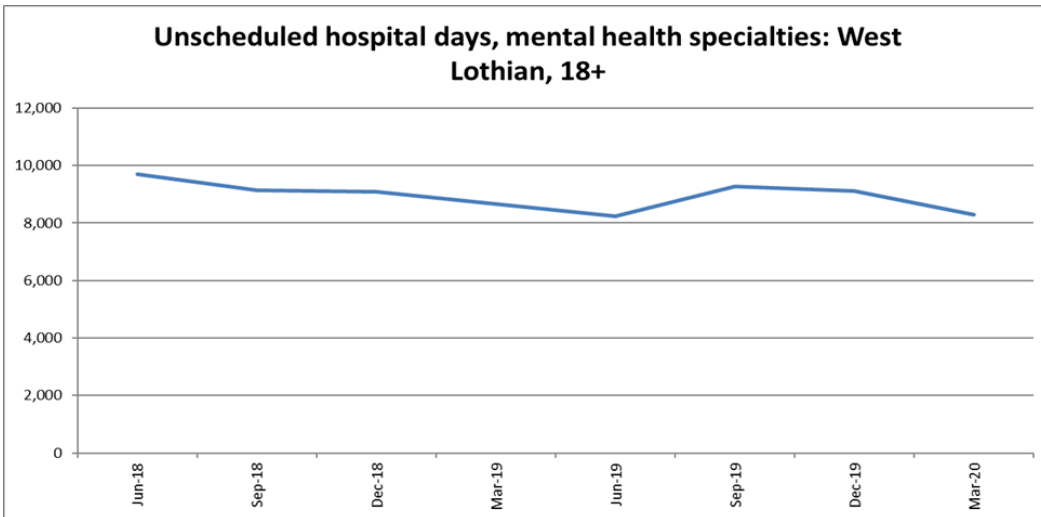
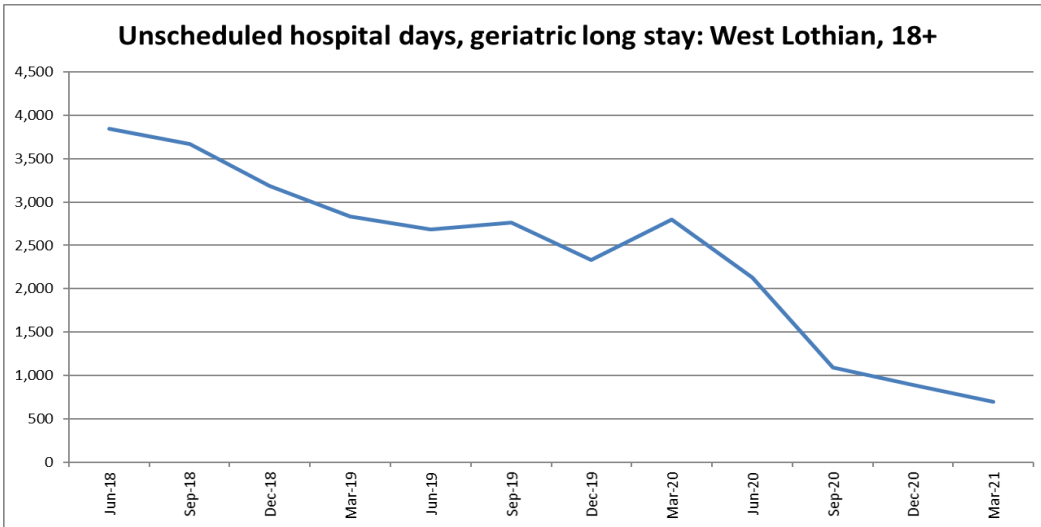
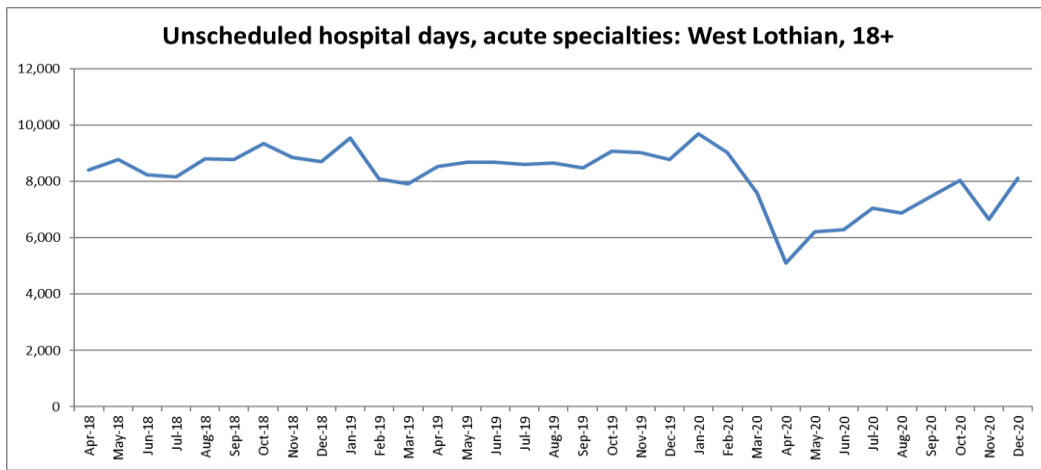
Alongside the Core Suite of Integration Indicators, the Ministerial Strategic Group (MSG) for Health and Community Care defined six key indicators of integration authorities' performance in 2017 which are monitored quarterly. The Ministerial Strategic Group is made up of leaders from health and social care and is tasked with providing leadership and direction on matters relating to health and social care. The indicators are:

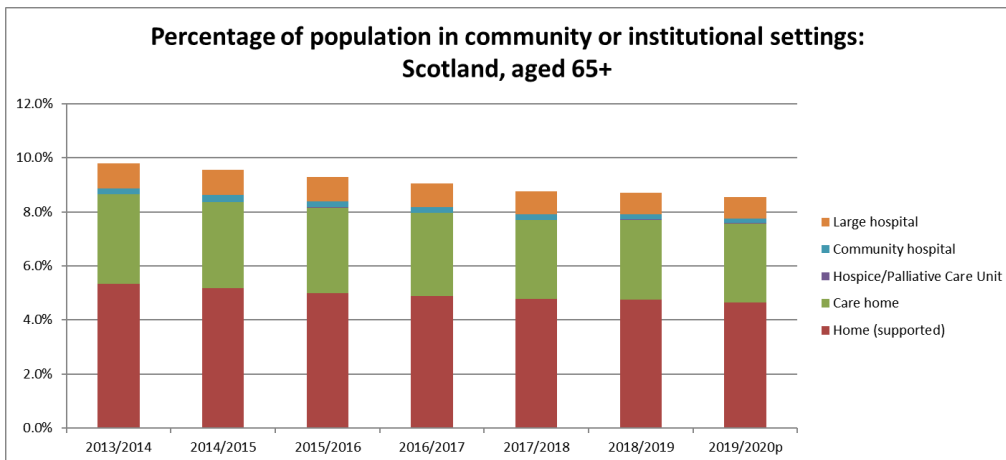
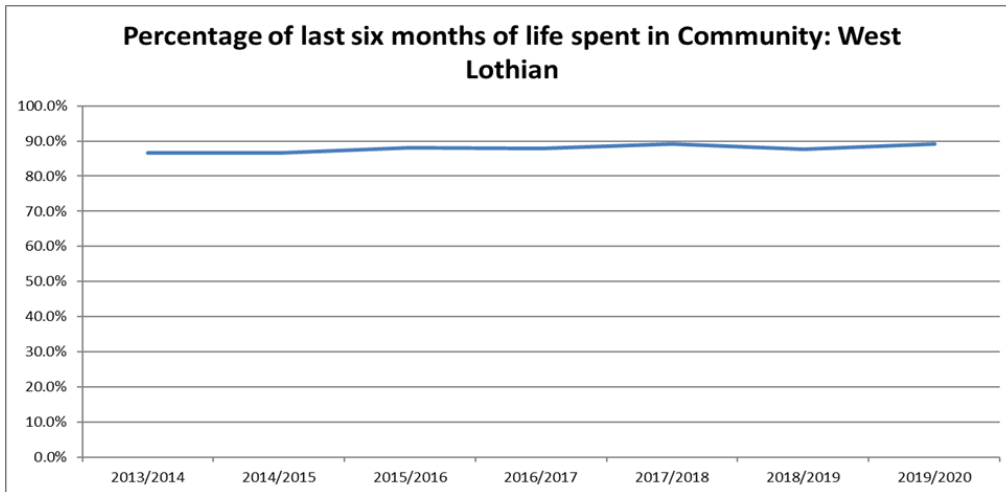
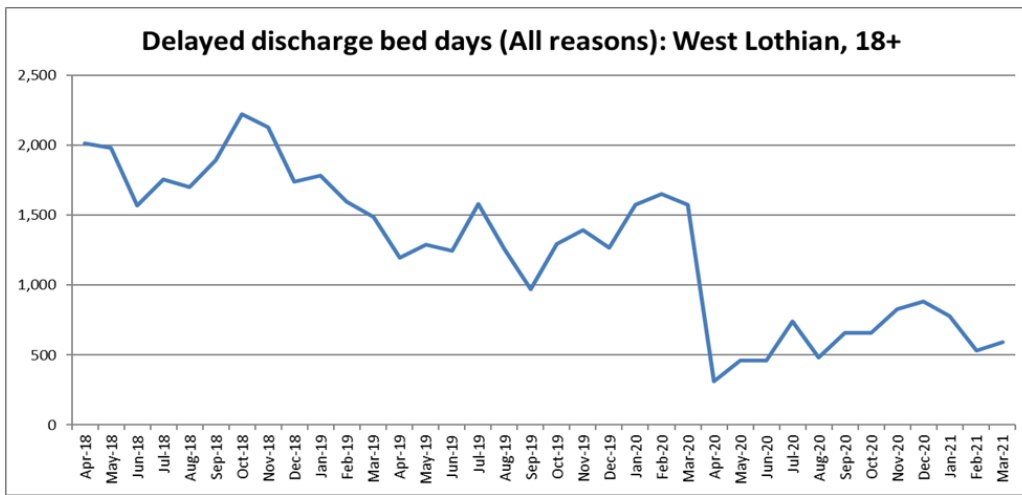
1. Number of emergency admissions
2. Number of unscheduled hospital bed days
3. Number of accident and emergency attendances
4. Number of delayed discharge bed days
5. Percentage of last six months of life in the community
6. Percentage of population residing in non-hospital setting for all people aged 65+

Some of the indicators overlap with the core suite of integration indicators detailed in the section above but some are different.

The following graphs show West Lothian's performance for all six MSG indicators based on the latest data available for individual indicators.



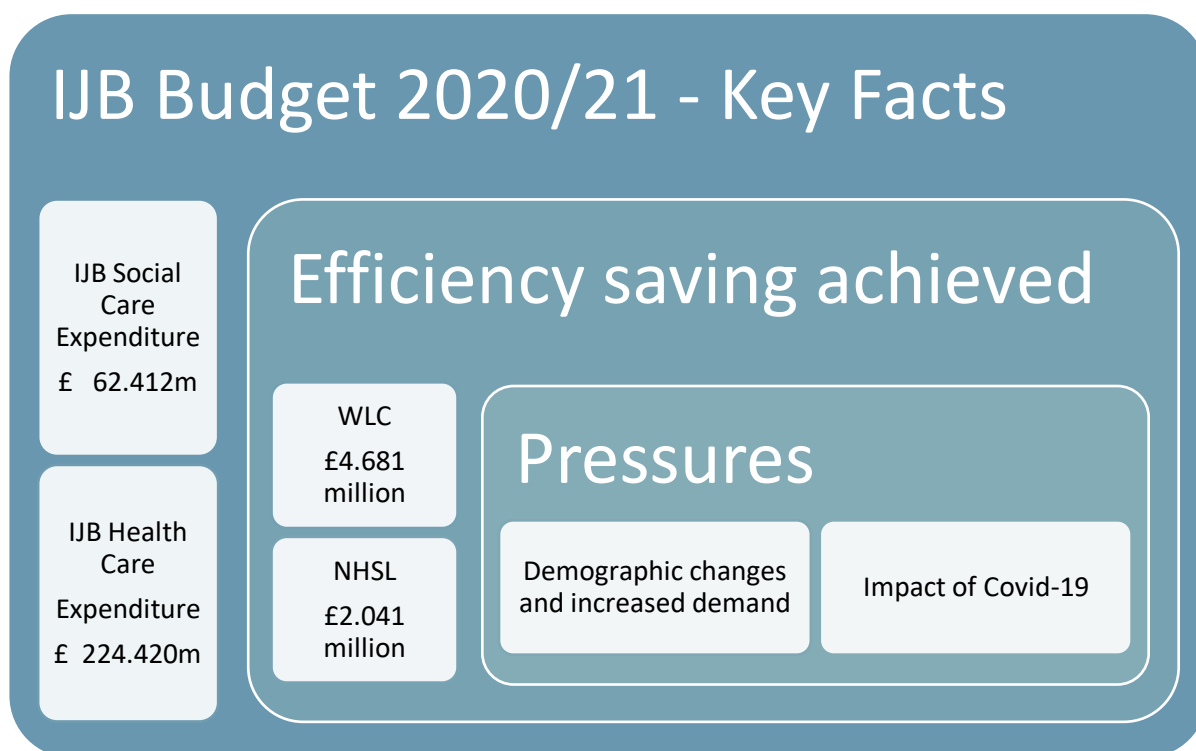




Financial Planning and Performance

Financial Planning

The Public Sector (Joint Working) (Scotland) Act 2014 requires each Integration Authority to publish an annual financial statement on the resources that it plans to spend in implementing its strategic plan. The total expenditure on IJB delegated functions for 2020/21 was £286.832 million. This was fully funded through contributions from West Lothian Council and NHS Lothian. In addition, reserve balances of £8.224 million were available at 31 March 2021 for earmarked spending priorities, including the ongoing costs of Covid-19, and £1.084 million was established as a general reserve.



Budget Summary

In 2020/21 the IJB has achieved an accounting underspend of £9.245 million which mainly related to additional funding received from the Scottish Government during 2020/21 to meet the ongoing costs of Covid-19, and also additional specific funding for future costs associated with mental health, primary care and unscheduled care.

The impact of Covid-19 created an unprecedented challenge in respect of service delivery and the associated additional financial implications during 2020/21. Taking account of this, Health Boards and Integration Authorities worked with the Scottish Government to prepare Local Mobilisation Plans (LMPs) detailing how they were responding to the resulting impact on the delivery of care services. The Board also worked closely with NHS Lothian and West Lothian Council on the financial management of IJB budget resources and funding required to deliver delegated IJB functions.

The additional spend associated with Covid-19 in 2020/21 was just over £9 million and

this was fully funded by the Scottish Government through the Mobilisation Plan process.

IJB delegated services faced significant challenges during 2020/21. The main areas of significant additional spend incurred due to the pandemic included:

- Additional Staffing Costs – this included the recruitment of additional Home First/REACT staff to help prevent hospital admission and facilitate supported discharge. Also, included additional costs of social care staff to help ensure services were maintained across internal care at home and care homes
- Additional Prescribing Costs – this included the impact of increased volumes and price increases. Price per item in 2020/21 was significantly higher than anticipated in original budget plans prepared pre the pandemic
- GP Practice Costs – This related to additional payments made to GP practices for additional practice costs and extending opening required as a result of the pandemic
- Additional Care Home Capacity – this related to contractual arrangements put in place at the start of the pandemic to purchase additional care home beds to increase capacity available over the short term
- Additional Support to Care at Home providers – this related to increased hourly rate payments based on commissioned hours to cover costs resulting from COVID-19, such as staffing and PPE, and helped ensure providers were supported to remain financially sustainable
- Additional Support to Care Homes – this reflected additional costs to external care homes to help ensure they were sustainable during the pandemic. Sustainability payments will cover additional provider costs linked to reduced bed occupancy, staff sickness, additional staffing, PPE and other costs as resulting from Covid-19
- Reduced Care Income – charging for eligible non-residential care was suspended as a result of Covid-19 due to the impact it has had on delivery of chargeable care (e.g. closure of day care centres). This recommenced from 1 October 2020, for those receiving relevant care services. Contributions from care home residents were also lower than budget in 2020/21.

IJB delegated services saw continued growth in demand during 2020/21 in a number of areas. There remain significant risks around ongoing impact of COVID-19, and this will require to be closely monitored along with other key risks identified.

During 2020/21, budget savings of £6.722 million were delivered against the productivity and efficiency plan to help ensure spend on IJB functions was managed within budget resources available.

Financial Performance

Reporting on the performance of delegated resources is routinely undertaken by the IJB in line with its approved financial regulations and Integration Scheme. The Integration Scheme details that when resources have been delegated by the IJB via strategic directions, NHS Lothian and West Lothian Council apply their established systems of financial governance. This reflects the IJB's role as a strategic planning

body which does not deliver services directly, employ staff or hold cash resources. Budget monitoring of IJB delegated functions is undertaken by finance teams within West Lothian Council and NHS Lothian working with budget holders to prepare information on financial performance. The IJB Chief Finance Officer works closely with these teams to provide information on operational budget performance to the Board in respect of delegated health and social care functions.

Expenditure on services commissioned by the IJB over the period 2016/17 to 2020/21 is shown in the table below.

West Lothian IJB Expenditure on Delegated Functions 2016/17 to 2020/21						
	2016/17	2017/18	2018/19	2019/20	2020/21	5 YR Total
	£'000	£'000	£'000	£'000	£'000	£'000
Core Health Services	104,600	110,443	115,814	122,584	139,961	593,402
Hosted Services	20,058	22,453	20,649	21,318	25,584	110,062
Acute Set Aside Services	33,647	34,726	32,583	34,747	35,717	171,420
Non-Cash Ltd Services	18,221	18,282	19,322	20,448	23,158	99,431
Social Care Services	60,584	64,457	63,833	69,728	62,412	321,014
Total	237,110	250,361	252,201	268,825	286,832	1,295,329

Future Financial Plans

The 2021/22 budget contributions from NHS Lothian and West Lothian Council have been taken account of in Directions issued to Partners. Based on the financial assurance undertaken, both West Lothian Council and NHS Lothian budget contributions indicate a balanced budget position compared to initial 2021/22 spend forecast.

It is important to note however that these budget contributions do not take account of the additional cost implications anticipated to arise as a result of COVID-19. While there remains significant uncertainty around COVID-19 implications going forward and resulting costs, at this stage additional 2021/22 costs resulting from COVID-19 in relation to West Lothian are estimated to be £7.2 million.

Taking account of this, it will be crucial that the 2021/22 budget position is closely monitored with regular updates being provided to the Board, including options to manage budget pressures arising and ensure a balanced position is achieved for 2021/22.

The IJB has a statutory responsibility for delegated health and social care functions in relation to the strategic planning of future health and social care delivery. Plans for this are developed via the health and social care management team and council and NHS Lothian staff supporting the IJB. The IJB's strategic plan and strategic commissioning plans will help inform decisions around prioritisation of resources, new models of service delivery and disinvestment decisions, all of which will be necessary in the medium term financial planning process associated with health and social care services. The implications arising from COVID-19 on delivery of care services are being taken account of in the ongoing review of strategic commissioning plans

With regard to future years, health and social care services will be faced with significant challenges to meet demands and operate within tight fiscal constraints for the foreseeable future. The implications associated with COVID-19 will further

increase the financial challenges and may impact on current plans to meet demands. In line with the Board's agreed approach to IJB financial planning, budget plans have been and continue to be developed across IJB health and social care functions with the objective that overall health and social care considerations are taken into account in joint IJB / Partner financial planning.

An update on the existing financial plan to 2022/23 taking account of latest funding and expenditure assumptions was reported to the Board on 29 June 2021. At this stage, there remains uncertainty around COVID-19 financial implications and these will be closely monitored during 2021/22. As funding and cost implications linked to COVID-19 become clearer over the coming months, current future year planning assumptions will be updated accordingly.

Best Value

The Local Government (Scotland) Act 2003 places a duty on Local Government bodies to secure Best Value. As a Section 106 body under the 2003 Act, Integration Joint Boards have the same statutory duty to secure best value.

The statutory duties of the 2003 Act are:

- The duty of Best Value, being to make arrangements to secure continuous improvement in performance (while maintaining an appropriate balance between quality and cost); and in making those arrangements and securing the balance, to have regard to economy, efficiency, effectiveness, the equal opportunities requirements and to contribute to the achievement of sustainable development
- The duty to achieve break-even in trading accounts subject to mandatory disclosure
- The duty to observe proper accounting practices
- The duty to make arrangements for the reporting to the public of the outcome of the performance of functions

The above duties apply to the IJB other than the duty to secure a break-even in trading accounts which is not relevant to the IJB as it does not have trading accounts.

Best Value Framework and Compliance

An updated Best Value Framework was approved by the Board on 18 March 2021.

Taking account of all the relevant factors including Legislation, Ministerial Guidance and Audit Scotland Guidance, the agreed area relevant in assessing the achievement of best value for the IJB are shown below.

- Vision and Leadership
- Governance and Accountability
- Effective Use of Resources
- Partnership and Collaborative Working
- Working with Communities
- Sustainable Development
- Fairness and Equality

It was agreed for each of these areas there would be an annual assessment of how the IJB has demonstrated best value in the delivery of delegated functions. This is achieved through an Annual Statement of Compliance produced by the Chief Finance Officer, considered by the IJB senior management team and reported to the IJB Audit, Risk and Governance Committee for consideration. The Annual Statement of Compliance is used to inform the Governance Statement within the annual accounts and the Annual Performance Report. The 2020/21 Best Value Annual Statement of Compliance was agreed by the IJB Audit, Risk and Governance Committee on 17 June 2021.

Inspection and Regulation of Services

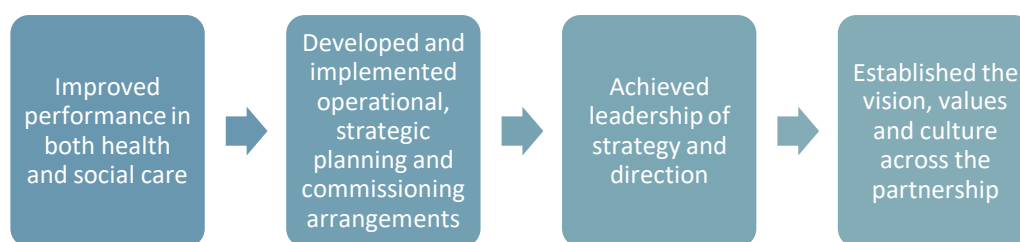
The annual performance report requires Integration Joint Boards to report on inspections by: Healthcare Improvement Scotland; Social Care and Social Work Improvement Scotland (The Care Inspectorate); Audit Scotland; Accounts Commission and the Scottish Housing Regulator which relate to delegated functions.

Inspections by the Care Inspectorate

During the pandemic, the Care Inspectorate did not undertake routine inspection activity and instead focused on infection prevention and control, personal protective equipment and staffing in care settings. The Care Inspectorate undertook targeted inspections that were short, focused and carried out with colleagues from Health Improvement Scotland and Health Protection Scotland, to assess care and support for people during the COVID-19 pandemic. More information on the approach to inspections and reports can be found on the [Care Inspectorate website](#).

Joint Strategic Inspection

The Care Inspectorate and Healthcare Improvement Scotland undertook a joint inspection of strategic planning for the IJB functions of the West Lothian Health and Social Care Partnership during January and February 2020. The report of the inspection was due to be published in June 2020 but was delayed by the pandemic and was received on 9th September 2020. The focus of the inspection was on how well the partnership had:



The evaluations of the inspection were as follows:

Quality Indicator	Evaluation
○ Improvements in partnership performance in both health care and social care	Good
○ Policy development and plans to support improvements to service	Adequate
○ Leadership and direction that promotes partnership	Adequate

The inspection report made eight recommendations and an action plan to address those recommendations was approved by the IJB on 10th November 2020.

Significant Decisions and Directions

Significant Decisions is a legal term defined within section 36 of the Public Bodies Joint Working (Scotland) Act 2014. It relates to making a decision that would have a significant effect on a service out with the context of the Strategic Plan.

Decisions made by the Integration Joint Board during the year 2019/20 are set out in the IJB's papers which are hosted on West Lothian Council's website.

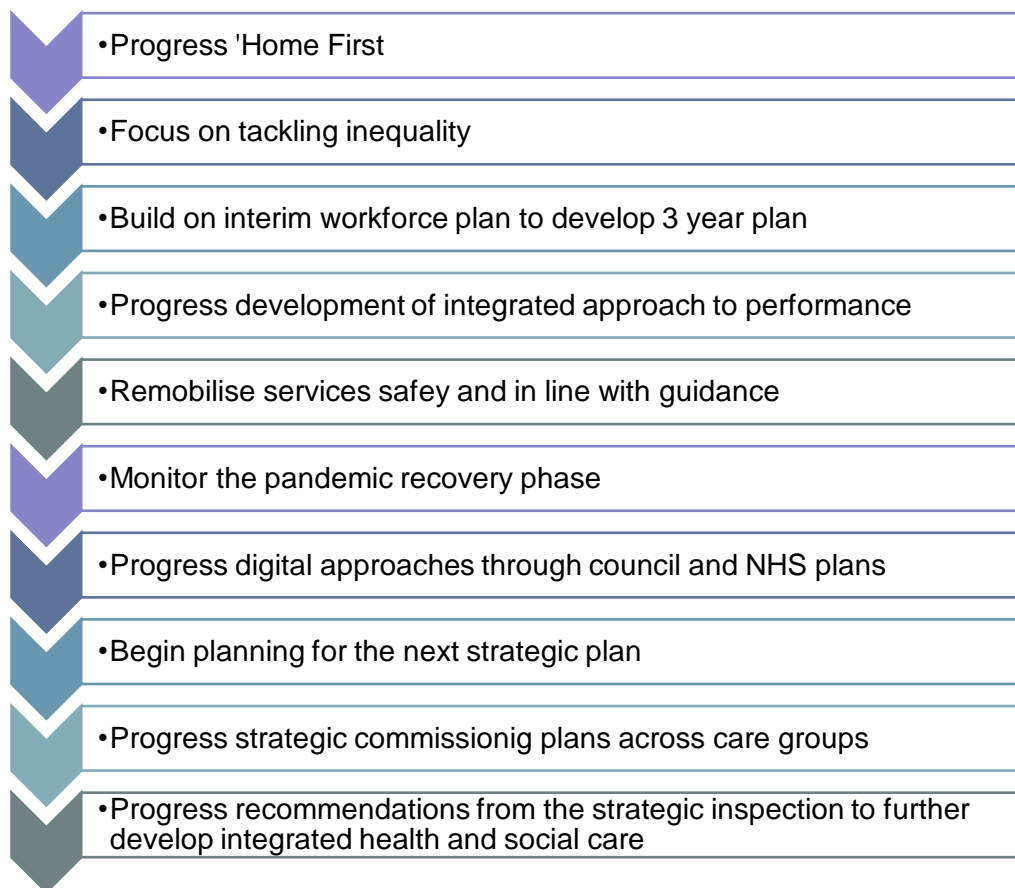
Towards the end of the reporting year 2019/2020, the West Lothian Health and Social Care Partnership required to respond to the COVID-19 pandemic which meant making a range of adjustments to the operation of services across the partnership during March 2020 and beyond. Those decisions will be reviewed by the Board in the course of the reporting year 2020/21 and adjustments made to the IJB's Strategic plan where it was considered necessary.

The Board issued four overarching Directions during 2019/20 to NHS Lothian and West Lothian Council. Additional strategic Directions were developed during 2019/20 to reflect strategic decisions made by the IJB and held with IJB papers hosted on the West Lothian Council website.

Key Priorities for 2021/22

The WLHSCP continues to respond to the Covid-19 pandemic and operational service delivery is shaped by the ongoing need to deliver services in a challenging environment. The focus of the next year will be on recovery, remobilisation and future planning.

We are acutely aware that our communities, service users, their families and our staff have been impacted considerably by the events over the past year. We will focus now on working with our partners on the following key priorities:



Independent Review of Adult Social Care



The Independent Review of Adult Social Care was published by the Scottish Government in February 2021 and recommend improvements to adult social care in Scotland. The aim of the recommendations is to achieve better outcomes, through significant reform, for people who use services, their carers, their families, as well as the experience of people who work in adult social care.

Progress is expected over the next year in laying out what the changes will mean for future governance and service delivery.