Foreword

I’m sure at the time we all thought that the end of 2019/20, just as the Covid-19 pandemic emerged, was the most challenging period of recent history. The first lockdown came in March 2020, and we only appeared to have worked through that when a further wave resulted in a second lockdown in November 2020. The past two years have been tough for everyone, presenting truly difficult times for our communities and our staff.

We don’t yet know the full, long-term impacts of the pandemic, but we do know that our service users, carers, staff, and the wider community have all been impacted in some way. We are currently working on the development of our new strategic plan and it’s clear that addressing some of the inequality exacerbated by Covid will be central to our future work.

Over the next few months, we are carrying out work with stakeholders and communities to better understand the priorities in West Lothian for the future delivery of health and social care - we hope you will contribute through meetings and feedback opportunities.

However, whilst there have undoubtedly been difficult times, people have continued to pull together and have tested out new ways of working, trying their very best to care for people within the restrictions we needed to have in place.

We have reflected on our experiences over the past two years, looking at the changes we want to keep, those which we might want to develop further and those which can now be stood down as the restrictions lift.

We have managed to progress our transformation work and have expanded the ‘Home First’ programme which you can read about in the report. We are also progressing important developments too in mental health, drug, and alcohol services and in supporting people with learning disabilities to live more independently within West Lothian. We recognise how important it is to support people with caring responsibilities and we put new arrangements in place to expand support to carers and implement our Carers’ Strategy.

We now await further information on changes to adult social care as recommendations contained in the Independent Review of Adult Social Care progress across Scotland.

I hope you find the information provided in the annual performance report helpful in giving an overview of the performance of the partnership and of the developments which have taken place over the past year.

Alison White
Chief Officer
West Lothian Integration Joint Board
Contents

Foreword ..................................................................................................... 1
Contents ...................................................................................................... 2
Introduction ................................................................................................. 3
  Annual Performance Report ................................................................. 3
  The Role of the Integration Joint Board .................................................. 4
Integrated Services in West Lothian ....................................................... 4
Review of the West Lothian Integration Scheme .................................... 5
Membership of the IJB ............................................................................ 5
Role of the IJB Chief Officer .................................................................... 5
Strategic Planning ....................................................................................... 6
  Strategic Plan .......................................................................................... 6
  National Health and Wellbeing outcomes ............................................. 6
  Refreshing our Approach to ‘Home First’ ................................................ 9
Review of Planning Structure .................................................................. 11
Communication and Engagement Plan Update ....................................... 11
Locality Profiles ..................................................................................... 12
Ongoing Covid-19 Response .................................................................... 13
  How We Have Continued to Respond .................................................. 13
  Personal Protective Equipment Hub ...................................................... 13
  Support to Care Homes ........................................................................ 13
  Vaccination Programme ........................................................................ 13
Care at Home Assurance ....................................................................... 14
Service Delivery Challenges ................................................................. 14
Performance Reporting ............................................................................. 16
  Performance Review ............................................................................... 16
  Summary of Core Suite of Integration Indicators .................................. 17
Outcomes and Examples .......................................................................... 19
  Outcome 1 ............................................................................................. 19
  Outcome 2 ............................................................................................. 22
  Outcome 3 ............................................................................................. 24
  Outcome 5 ............................................................................................. 29
  Outcome 6 ............................................................................................. 32
  Outcome 7 ............................................................................................. 34
  Outcome 8 ............................................................................................. 36
  Outcome 9 ............................................................................................. 37
Ministerial Strategic Group Integration Indicators ................................. 39
Financial Planning and Performance ........................................................ 43
  Financial Planning ................................................................................ 43
  Budget Summary .................................................................................. 43
  Financial Performance .......................................................................... 44
  Future Financial Plans .......................................................................... 45
Best Value ............................................................................................... 46
  Best Value Framework and Compliance ............................................... 46
Inspection and Regulation of Services ...................................................... 47
  Inspections by the Care Inspectorate .................................................... 47
Significant Decisions and Directions ......................................................... 48
  Complaints ............................................................................................ 48
Key Priorities for 2022/23 ......................................................................... 49
Introduction

Annual Performance Report

The West Lothian Integration Joint Board (IJB) has responsibility for planning for most of the health and social care services for adults in West Lothian.

The IJB is required to publish an annual performance report setting out an assessment of progress toward its vision to ‘increase wellbeing and reduce health inequalities across all communities of West Lothian’.

The annual performance report for 2021/2022 has been prepared to give an overview of the following aspects of planning and service delivery as required by The Public Bodies (Joint Working) (Scotland) Act 2014.

What’s included

- Review of the IJB's Strategic Plan
- Progress against priorities of the Strategic Plan
- Progress towards national health and wellbeing outcomes
- Ministerial Strategic Group integration indicator performance
- Financial management and performance
- Best Value
- Regulation and inspection of Services
- Significant decisions and directions
- Managing during the pandemic
- Next Steps for 2022/23
The Role of the Integration Joint Board

The Public Bodies (Joint Working) (Scotland) Act 2014 established a legal framework for the integration of health and social care services in Scotland.

On 1st April 2016, an Integration Joint Board (IJB) was established in West Lothian and has responsibility for planning most of the integrated health and social care services for adults in the area.

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 priorities for health and social care for adults. 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.

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 table provides an overview of the services which are delegated in West Lothian by the local authority and the health board in the integration scheme. In addition, West Lothian’s IJB has responsibility for podiatry services and the Lothian Work Support Service on a Lothian-wide basis.
Review of the West Lothian Integration Scheme

West Lothian Council and NHS Lothian agreed the original integration scheme for health and social care services in May 2015. It was approved by Scottish Ministers on 16 June 2015.

New integration functions were created by the Carers (Scotland) Act 2016. As a result, West Lothian Council and NHS Lothian followed a review process and agreed a second integration scheme which was approved by Scottish Ministers on 19 September 2019.

The Public Bodies (Joint Working) Scotland Act 2014 requires a review to be carried out before the expiry of five years from the date of approval of the original integration scheme. Undertaking such a review within this timeframe was delayed because of the COVID-19 pandemic. However, in line with the requirement from Scottish Government, a review has now been completed and a third integration scheme (West Lothian Integration Scheme 2022) has been proposed for consideration by Scottish Ministers.

Preparation of the new scheme involved a consultation process which was advertised on social media channels, the health and social care partnership’s website and issued to staff, service users, service provider and partner networks. Efforts were made to target all statutory consultees and views expressed were considered during the review process.

The third integration scheme (West Lothian Integration Scheme 2022), aims to update the scheme generally, and no changes were suggested to the delegation of legal functions or associated services to the IJB.

Membership of the IJB

The West Lothian IJB is made up of representatives from West Lothian Council, NHS Lothian, Third Sector representatives, service users, and carers. The current chair of the Board is Bill McQueen CBE, a non-Executive Board Member of NHS Lothian. A list of all the members of the board can be found here.

Role of the IJB Chief Officer

The legislation requires the IJB to appoint a Chief Officer who has responsibilities to the Board for strategic planning as well as the management and operational delivery of delegated functions. The Chief Officer in West Lothian is Alison White who was appointed in July 2021.
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. Integration legislation requires a review of the IJB’s Strategic Plan every three years and the first plan was reviewed during 2018/19 which resulted in a new Strategic Plan being developed and approved by the IJB in April 2019 for the period up to 2023.

The priorities in the new plan were identified through extensive consultation with a wide range of stakeholders in the West Lothian community. The current key priorities are:

National Health and Wellbeing outcomes

The 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.

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
Strategic Commissioning Plans

Strategic commissioning is the term used for setting out how the partnership will improve outcomes for people who need care, treatment, and support. It covers:

- What we are trying to achieve and for whom
- What we need to do differently for better results
- How well we are using our resources
- How successful we have been

In support of the IJB’s Strategic Plan, strategic commissioning plans were approved for key care groups.

- Mental Health
- Learning Disability
- Physical Disability
- Alcohol and Drugs Partnership
- Older People
- Primary Care Improvement Plan

Each of the commissioning plans contains a series of actions and sets out how services will be developed to support the IJB’s planning priorities.

Review of the IJB’s Strategic Plan in 2021/2022

The current strategic plan was due to be reviewed before March 2022 in line with integration legislation. A review of the Strategic Plan is the minimum needed and does not require the creation of a new plan – it is up to the board, in consultation with its stakeholders, to decide whether a new plan is required or not.

As part of the review of the Strategic Plan, the partnership worked closely with the Strategic Planning Group to reflect on the experience of managing through the pandemic. Consideration was given to what had worked well, what had been challenging, and what needed to change.
Review Of Plans Against Reflections

The learning and reflections which came from the Strategic Planning Group were used to review each of the strategic commissioning plans alongside the actions contained within them. Plans and actions were amended to reflect new and changing priorities and were then submitted to the IJB for approval.

Extensive work was done to reconfigure the commissioning plan for older people with a new approach developed which now encompasses unscheduled care for adults, dementia, and end of life care. This is known as the ‘Home First’ programme.

Continuation of the Strategic Plan 2019 to 2023

Considering the extensive reflection which had taken place with the Strategic Planning Group, and the fact that all commissioning plan actions had been reviewed and updated, the IJB approved continuation of the existing Strategic Plan to 2023. The IJB requested that a new plan be developed from 2023 onwards and planning for this is underway.
Refreshing our Approach to ‘Home First’

‘Home First’ is the overall ambition of our programme to transform the way we deliver care to adults and older people. In line with national direction, we are trying to ensure that people are supported to remain at home or in a community setting for as long as possible. Hospitals should not be places where people go to live, even people who have ongoing clinical needs. Hospitals are places for people who need specialist short-term care and should therefore only be considered when care cannot be delivered in any other care setting.

Our transformation programme 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 deterioration and crisis wherever possible.

Where hospital admission is necessary for clinical reasons, we are trying to ensure that responsive support is available to enable discharge and allow people to return to community settings without delay. This is the right thing to do as we know that staying longer in hospital than is necessary can result in poorer outcomes for some people, especially those who are frail.

In November 2020 a new commissioning plan for older people and people living with dementia was approved by the IJB which sets out an ambitious programme for transforming services in West Lothian. The plan also incorporated aspects of planning for end-of-life care and the redesign of urgent care. The main areas of development were in relation to:

During 2021/2022, despite the challenging circumstances created by the pandemic and the need to focus on operational priorities, work continued with the Home First programme. The programme now embeds planning for acute hospital beds, unscheduled care, end of life care and dementia. Care at home was recently added as an additional workstream ensuring delivery of a comprehensive, whole system approach to transformation. The revised workstreams are outlined in the programme overview below:
Home First Programme Overview

West Lothian Integration Joint Board

Strategic Planning Group

West Lothian Community and Acute Care Commissioning Board

1. Access to Community and Acute Service – Avoid Unnecessary Hospital Attendance
   - 1A: Community Information Hubs
   - 1B: Access Criteria to Community/Acute Pathway
   - 1C: Single Point of Contact (SPoC)

2. Care at Home – Home First
   - 2A: Urgent Care Pathways Linked to SPoC
   - 2B: Proactive Care, ACP, longer-term assessment
   - 2C: Front Door Integrated Model (SDEC/EMA/MAU/A&E)
   - 2D: Facilitated Hospital Discharge

3. Bed Based Review
   - 3A: Acute Bed Utilisation – medicine and rehab (incl. LOS)
   - 3B: Community Bed/Intermediate Care Bed Base (step up/step down/Care Homes)

4. Care at Home Contract & Commissioning
   - 4A: Oversight Assurance Group
   - 4B: Short Term Improvements
   - 4C: Contract Framework and Design 2023-28

Specific Technology for Project Scope

Dementia

Palliative Care

Specific Technology for Managing Care at Home Contract
Focus on Primary Care in the West Cluster

Significant work has taken place in primary care. The information below provides an overview of some of the developments in the West cluster of GP practices.

Sharing Good, Practice-based, Quality Improvement Work

- Acute prescribing review
- Multi-disciplinary care home reviews
- Reception sign-posting activities

Raising Awareness of New Services and Programmes

- Improving the cancer journey presentation and information shared with practices
- Integrated back pain service and pain decision tool with focus on efficient use of resources to improve patient care
- Pharmacy First educational activities within practices and raising awareness of service through text messaging to patients
- Home First transformation model presentation and cluster involvement in service development
- Prescribing Project (Green escape plan) presented and approach supported by West Cluster as an alternative to prescribing medication

Learning From the Pandemic

- SWOT analysis workshops
- Developing a mission statement - The West Cluster aims to initiate and evaluate relevant quality improvement activity, to enhance team resilience, and to improve the health and wellbeing of local people.
- Reflecting on multi-disciplinary practice in primary care - what matters to you?
- Working better together - aiming to understand the HSCP structure better and develop more effective working relationships

Quality Improvement Projects

- Pain management project - resulting in reduced opioid analgesic and supportive patient information leaflet. Project called 'not Just Painkillers' - positive impact on daily work and now shared across Lothian through pharmacy team and pan-Lothian Cluster network
- Integrated back pain project - including educational activities and audit of outcomes
- Pharmacy First - ongoing project with aim of improving patient care pathway, including audit of possible change on use of Pharmacy First service in the community
Locality Profiles

The locality profile below set out an overview of each of the West Lothian localities: East and West.

We know that there are differences in key outcomes between the localities and we want to place more focus on this in our new strategic plan.
Ongoing Covid-19 Response

How We Have Continued to Respond

Operational challenges associated with Covid have continued and have required the ongoing support of the partnership in key areas. 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 original pandemic response. 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 PPE distribution arrangements in West Lothian continued during 2021/2022 with the hub now being managed through our community equipment store with expanded responsibility for the distribution of Covid testing kits to social care services and carers.

Support to Care Homes

The West Lothian Care Home Clinical and Care Professional Oversight Group continued working with the care home sector over the past two years to ensure safe and effective care delivery within care homes. The partnership continued to deliver enhanced support to the sector through daily oversight meetings 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.

Vaccination Programme

The vaccination programme continued throughout the reporting year with national guidance being updated on a regular basis. Staff from the partnership played a key role in ensuring the vaccination programme was delivered.

In line with revised guidance, a mass clinic ran in the Pyramids Business Park with local clinics held in Strathbrock Partnership Centre, Carmondean Health Centre, and West Calder Health Centre. The mass clinic in Pyramids provided the physical space and enabled the huge volume of appointments required by national policy to be delivered.
Temporary clinics were set up to offer local venues to those living in communities which are sometimes hard to reach. A substantial number of vaccinations were delivered in homes for people who were housebound and unable to travel to local clinics. In December 2021 national guidance was updated to offer all adults over 18 Covid boosters by end of December 2021 which presented a significant challenge to the West Lothian HSCP.

The partnership reached out to all relevant staff groups across services asking them to assist with the delivery of the vaccination programme. Staff rose to the challenge which provided additional capacity across the vaccination sites.

We are very grateful to everyone who worked incredibly hard to deliver the vaccination service in West Lothian. There was undoubtedly pressure, but staff did a remarkable job of vaccinating the eligible population of West Lothian in a very short period of time.

**Care at Home Assurance**

Significant challenges were experienced over the course of the year in relation to the supply of care at home services. Care providers were impacted by absences because of Covid-19 but also challenges with recruitment and retention of staff.

The Scottish Government introduced weekly reporting on key measures in relation to care at home and the partnership implemented a Care at home Oversight Group, like the one operating for care homes.

Data reporting in relation to care at home can be complex and a review was undertaken to inform new reporting arrangements which were put in place in August 2021. The data is now being used to better understand the overall picture of care at home demand, where there are challenges in meeting demand and how care assessments and reviews are undertaken. The information gathered is being used to inform the development of a new care at home contract which is due to be in place by October 2023.

**Service Delivery Challenges**

The second wave of the pandemic brought considerable challenge across the partnership as significant numbers of staff needed to isolate because of Covid. This undoubtedly had an impact on service delivery during the Winter of 2021. Staff, however, showed a willingness to be flexible and supported each other in very difficult circumstances.

The Scottish Government allocated Winter Wellbeing Funding in November 2021. The funding was designed to reach all those working in health and social care across the system and support wellbeing. Small grants were offered to health and social care teams including those in commissioned and Third sector organisations.

The funding could be used for supporting practical needs over the winter on things such as: hot drinks, food, appropriate transport, rest facilities or other measures to aid rest and recuperation.
The Food Train provided hot drinks, bananas and biscuits to staff and volunteer drivers and helpers. Everyone welcomed the refreshments and the provision of reusable hot drinks cups to take out on deliveries.
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 to monitor progress against objectives and identify areas for improvement.

The annual performance report outlines how West Lothian is performing against the main indicators using the latest published data.

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.
Summary of Core Suite of Integration Indicators

Indicators 1 to 9

Indicators NI1 to NI9 are reported in the Health and Care Experience Survey commissioned by the Scottish Government. The latest data from the 2020/2021 survey is 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.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>NI-1 Percentage of adults able to look after their health very well or quite well</td>
<td>93.4%</td>
<td>92.9%</td>
<td>89.5%</td>
<td>90.9%</td>
</tr>
<tr>
<td>NI-2 Percentage of adults supported at home who agree that they are supported to live as independently as possible</td>
<td>79.4%</td>
<td>80.8%</td>
<td>70.4%</td>
<td>78.8%</td>
</tr>
<tr>
<td>NI-3 Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided</td>
<td>70.7%</td>
<td>75.4%</td>
<td>80.6%</td>
<td>70.6%</td>
</tr>
<tr>
<td>NI-4 Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated</td>
<td>75.7%</td>
<td>73.5%</td>
<td>71.7%</td>
<td>66.4%</td>
</tr>
<tr>
<td>NI-5 Total percentage of adults receiving any care or support who rated it as excellent or good</td>
<td>75.4%</td>
<td>80.2%</td>
<td>80.5%</td>
<td>75.3%</td>
</tr>
<tr>
<td>NI-6 Percentage of people with a positive experience of the care provided by their GP practice</td>
<td>74.6%</td>
<td>78.7%</td>
<td>62.2%</td>
<td>66.5%</td>
</tr>
<tr>
<td>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</td>
<td>75.3%</td>
<td>80.0%</td>
<td>79.0%</td>
<td>78.1%</td>
</tr>
<tr>
<td>NI-8 Total combined % carers who feel supported to continue in their caring role</td>
<td>36.4%</td>
<td>34.3%</td>
<td>25.2%</td>
<td>29.7%</td>
</tr>
<tr>
<td>NI-9 Percentage of adults supported at home who agreed they felt safe</td>
<td>86.7%</td>
<td>82.8%</td>
<td>79.8%</td>
<td>79.7%</td>
</tr>
</tbody>
</table>
Indicators 11 to 19

The primary source of data for National Indicators NI11 to NI20 are Scottish Morbidity Records (SMRs) which are collected nationally. 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 2021; 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 full 2021/22 financial year figures and so should not affect any conclusions that have been drawn.

The next section of the report sets out how delegated functions performed throughout 2021/22 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.

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
<th>2019/20</th>
<th>2020/21</th>
<th>2021</th>
<th>Change and performance against previous year</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>West</td>
<td>Scotland</td>
<td>West</td>
<td>Scotland</td>
</tr>
<tr>
<td>NI - 12</td>
<td>Rate of emergency admissions for adults (per 100,000 population)</td>
<td>12,674</td>
<td>12,525</td>
<td>11,643</td>
<td>10,982</td>
</tr>
<tr>
<td>NI - 13</td>
<td>Rate of emergency bed days for adults (per 100,000 population)</td>
<td>103,870</td>
<td>118,574</td>
<td>83,377</td>
<td>101,115</td>
</tr>
<tr>
<td>NI - 14</td>
<td>Emergency readmissions to hospital within 28 days of discharge (per 1,000 discharges)</td>
<td>113</td>
<td>105</td>
<td>123</td>
<td>130</td>
</tr>
<tr>
<td>NI - 15</td>
<td>Proportion of last 6 months of life spent at home or in a community setting</td>
<td>89%</td>
<td>88%</td>
<td>92%</td>
<td>90%</td>
</tr>
<tr>
<td>NI - 16</td>
<td>Falls rate per 1,000 population aged 65+</td>
<td>22.0</td>
<td>22.8</td>
<td>19.0</td>
<td>21.7</td>
</tr>
<tr>
<td>NI - 17</td>
<td>Proportion of care services graded “good” (4) or better in Care Inspectorate inspections</td>
<td>81%</td>
<td>82%</td>
<td>84%</td>
<td>82%</td>
</tr>
<tr>
<td>NI - 18</td>
<td>Percentage of adults with intensive care needs receiving care at home (Calendar Year)</td>
<td>68% (2019)</td>
<td>63% (2019)</td>
<td>64% (2020)</td>
<td>63% (2020)</td>
</tr>
<tr>
<td>NI - 19</td>
<td>Number of days people spend in hospital when they are ready to be discharged (per 1,000 population)</td>
<td>934</td>
<td>774</td>
<td>360</td>
<td>484</td>
</tr>
<tr>
<td>NI - 20*</td>
<td>Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency</td>
<td>22%</td>
<td>24%</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

* NHS Boards were not able to provide detailed cost information for 2020/21 due to changes in service delivery during the pandemic. As a result, PHS have not provided information for indicator 20 beyond 2019/20. PHS previously published information to calendar year 2020 using costs from 2019/20 as a proxy but, given the impact of the COVID-19 pandemic on activity and expenditure, PHS no longer consider this appropriate.
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

| NI-1 Percentage of adults able to look after their health very well or quite well |
|---------------------------------|-----------------|-----------------|-----------------|-------------|
|                                 | East Locality   | West Locality   | West Lothian    | Scotland    |
| 2021/22                         | 90%             | 89%             | 89%             | 91%         |

In financial year 2021/22, the percentage of people in West Lothian who thought that they could look after their health very well or quite well was 89%. This is 4 percentage points lower than 2019/20 and two percentage points lower than Scotland.

The rate of emergency admissions in adults per 100,000 has been increasing steadily from 11,701 emergency admissions in 2017/18, to 12,674 admissions in 2019/20. There was then a reduction in 2020/21, likely due to the fact there was a national lockdown in 2020 due to COVID-19. However, the latest rate for 2021 has seen an increase in admissions to 12,365 per 100,000. This trend is also reflected in the Scottish rate.
What we have done

Community Information Hubs
As part of the Home First programme, we are supporting development of community hubs across communities in West Lothian where people can get information and advice to help them access support at an early stage with the aim of avoiding crisis wherever possible.

We are working in partnership with council services such as the Anti-poverty Service, Economic Development, Housing and others to offer a comprehensive one stop model of support in community locations which provide easy access for people.

Work is underway to recruit volunteers to work alongside staff to make better connections with communities.

Pilot projects began earlier in the year in West Calder and Linlithgow and learning from those areas is being used to plan expansion.

It is also hoped that a digital alternative to accessing the hubs can be developed alongside the face to face drop-ins to ensure that the service is accessible to as many people as possible.

West Space
Westspace is West Lothian’s online resource for mental health and wellbeing information. The resource provides a directory of services where people in West Lothian can find mental health and wellbeing support. The resource can be found [here](#).

Since relaunching the website last year, it has gone from strength to strength. The total number of user accessing the site was 16,521, a 115% increase from the previous year.
Focus on Primary Care in the West Cluster

Significant work has taken place in primary care. The information below provides an overview of some of the developments in the West cluster of GP practices.

Sharing Good, Practice-based, Quality Improvement Work

- Acute prescribing review
- Multi-disciplinary care home reviews
- Reception sign-posting activities

Raising Awareness of New Services and Programmes

- Improving the cancer journey presentation and information shared with practices
- Integrated back pain service and pain decision tool with focus on efficient use of resources to improve patient care
- Pharmacy First educational activities within practices and raising awareness of service through text messaging to patients
- Home First transformation model presentation and cluster involvement in service development
- Prescribing Project (Green escape plan) presented and approach supported by West Cluster as an alternative to prescribing medication

Learning From the Pandemic

- SWOT analysis workshops
- Developing a mission statement - The West Cluster aims to initiate and evaluate relevant quality improvement activity, to enhance team resilience, and to improve the health and wellbeing of local people.
- Reflecting on multi-disciplinary practice in primary care - what matters to you?
- Working better together - aiming to understand the HSCP structure better and develop more effective working relationships

Quality Improvement Projects

- Pain management project - resulting in reduced opioid analgesic and supportive patient information leaflet. Project called ‘not Just Painkillers’ - positive impact on daily work and now shared across Lothian through pharmacy team and pan-Lothian Cluster network
- Integrated back pain project - including educational activities and audit of outcomes
- Pharmacy First - ongoing project with aim of improving patient care pathway, including audit of possible change on use of Pharmacy First service in the community
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 emergency bed day rate of adults, per 100,000 population, was 89,302 for West Lothian in 2021. This was an increase of 5,925 bed days compared to 2020/21. The Scotland rate in 2021 is 109,429, which is also an increase compared to 2020/21. West Lothian has outperformed Scotland’s emergency bed day rate consistently. The recent increase in the emergency bed day rate is likely to be due to the national lockdown in 2020, which reduced rates for 2020/21.

The re-admission rate to hospital for adults within 28 days in 2021 was 113 per 1,000 admissions. The trend has been fluctuating since 2017/18, with the highest rate of 123 in 2020/21, and low of 104 in 2017/18. The Scotland rate has followed a very similar trend.
The latest data we have for this indicator is calendar year 2021, where 67% of adults with intensive care needs are receiving care at home. The trend has remained consistent, fluctuating between 64% and 69%. The trend for the Scottish average has remained below the West Lothian rate since 2017.

What we have done

E-frailty Pilot

We worked on a pilot with a GP practice to better understand the level of frailty within the community and assist with the development of services for this group.

Around 2,500 people aged over 65 completed a simple frailty indicator tool while attending for their flu/Covid vaccination. The tool helped identify an additional 80 people who were frail and is enabling staff to provide better support and signposting to other services.

The intention is to roll the work out to most GP practices in West Lothian and collect data via this year’s winter vaccination programme.
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, 81% of people surveyed in 2021/22 agreed that they had a say in how their help, care or support was provided, 10 percentage points higher than the 2019/20 figure and the 2021/22 Scotland average.

In financial year 2021/22, 72% of adults supported at home, agreed that their health and social care services seemed to be well coordinated, 4 percentage points lower than in 2019/20. The response for West Lothian sits above the Scottish average of 66%.

The percentage of adults receiving any care or support who rated it as excellent or good was 81% in 2021/22, an improved result from the survey in 2019/20. The response for West Lothian sits above the Scottish average of 75% in 2021/22.
In 2021/22, the percentage of adults who had a positive experience of the care provided by their GP practice was 62%. The Scotland average was 5 percentage points higher for the same year.

Specialist Bladder & Bowel Team

“The Bladder & Bowel Team engaged with a variety of services over the last 18 months including Hospital at Home, REACT Rehab and the Care Home Assurance Team to increase reach to a wider range of people with continence needs. In particular their targeted input to one of the care homes resulted in reduced catheter insertions and District Nursing callouts. The team provided alternative treatment options and increased patient/family/carer satisfaction”.

Continence Specialist WL Bladder & Bowel Team

Caley Mentors

Pathways Day Service has been involved with The Royal Horticultural Society, 'The Caley' and the Scottish Rural College at Oatridge for a number of years. In 2019, a number of service users completed the second level of the Caley’s grow and learn awards which aim to connect people, plants and nature. The awards recognise individual progress and achievement in horticulture.

Having completed both stages of the grow and learn programme, participants from Pathways were keen to remain involved with the project and were invited by the Grow & Learn coordinator to get involved in the new Grow and Learn Mentoring Scheme. Pathways participants are supporting the co-production of this initiative to ensure it is accessible to as many people as possible. In Dec 2021 participants completed video demonstrations of how to use gardening tools, and carry out gardening activities which are being used to support other learners.

A huge ‘well done’ to all involved.
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 79% in 2021/22, 4 percentage points higher than in 2019/20. The Scotland response rate was slightly lower at 78% in 2021/22.

The overall quality of care as good (4) or better in Care Inspectorate inspections was 81% in 2021/22, which is 5 percentage points higher than the Scottish average of 76%. 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

**West Lothian Local Pain Service**

Pain services in Lothian have long been difficult to access for West Lothian patients as they are based centrally at the Astley Ainslie Hospital, although remote consultations during the pandemic did improve access. Nevertheless, there was still a gap for patients with less complex pain problems who did not meet the criteria for the specialised service. The arrangements result in pressure on GPs with frequent presentations from this group, and can lead to over-reliance on medications where there is a lack of alternative approaches to offer patients.

Primary Care Transformation funding from NHS Lothian is being used to fund a West Lothian Pain Service, staffed by advanced physiotherapists. For the majority of patients with chronic pain, the issues are musculoskeletal in origin. Operating via community wellbeing hubs, patients are offered a range of interventions to help them understand and manage their pain better, improve wellbeing and reduce dependance on medication.

The service design is robust and funding has been identified to ensure the service can continue. Links have agreed with the exercise referral scheme run in partnership with West Lothian Leisure to offer patients ongoing support once they leave the pain service.

**Project Search**

Project SEARCH is a global employability model for young people with Autism and/or Learning Disabilities, preparing participants for paid employment. Due to the pandemic, and the concentration by NHS Lothian on the pandemic response, a new host employer was required in 2021 - Deer Park Country Club was secured in August 2021. 6 out of 9 students from the cohort secured paid mainstream employment in a variety of roles: production operative, domestic assistant, bar person, kitchen assistant, care assistant, cleaner, with another undertaking a work trial for a landscape garden apprenticeship.

The work of the team has been recognised both nationally and internationally. In 2021 West Lothian won the Global Award for Outstanding Performance out of 650 Project Search sites. It also received the Exceptional Innovation Award for UK and Ireland sites for creating home-based placements during lockdown. The placements ensured students remained structured and motivated during the pandemic restrictions whilst gaining important skills within their home environment.
West Lothian Supported Employment Service

In 2020, the Supported Employment Service contacted the Department of Work and Pensions to consider how best to support job seekers with disabilities during lockdown. From this, the Supported Employment Service developed an online programme named EVOLVE, which was initially for 16 to 24 year olds with a disability, but later extended in 2021 to everyone over 16 with a disability.

During April 2021 – March 2022, over 70 people completed the 12-week programme. Training sessions offered a variety of wellbeing, confidence and team building opportunities, job search sessions and 100% of participants said the course alleviated isolation, was fit for purpose and offered training that was relevant and engaging. Over 30 participants accessed volunteering and placement opportunities on completion of the course, and 31 have secured paid employment. EVOVLE was nominated and made the final 3 out of over 60 employability services across the UK in the ‘Outstanding Contribution and Innovation during Covid’ category.

A significant number of customers referred to EVOLVE did not have access to internet or IT equipment, which limited engagement. An arrangement with DWP was agreed, and anyone referred to the programme without internet or equipment was given funding for a laptop. Internet access was also arranged by their Job Centre work coach. The arrangements increased participation and enabled people to job search, access one to one support with an employment advisor and attend online sessions.

Delivering Respite to Unpaid Carers

Research has demonstrated the impact of COVID on unpaid carers particularly from having no respite from their caring role during the past two years. In West Lothian a rising need for emotional support has been evident.

During 2021/22, the Scottish Government provided respite funding which Carers of West Lothian distributed through their "Just a Little Extra" Fund. Asda vouchers were given to struggling carers to help them manage the rising cost of living, particularly around food and fuel costs. 198 vouchers at an average value of £303 were distributed and 75 new carers were identified who are now receiving additional support.

One carer gave feedback, saying “I received my Asda gift card last month and I honestly can't put into words how much it’s appreciated, it's been so nice going for the messages and not worrying if I've enough money to cover the food bill ....I am so grateful!!”

In addition to this, 99 carers benefitted from accessing Short Breaks funding, providing breaks from caring with an average grant of £284 being given out. Again the fund enabled more carers to be identified, with 27 new carers applying and registering with Carers of West Lothian. Breaks were allocated for overnight stays, leisure and fitness activities and classes.
Outcome 5

- Health and social care services contribute to reducing health inequalities

Our Performance

### Life expectancy at birth by sex, 2013-2020 (3-year aggregates)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>West Lothian Male</td>
<td>78.2</td>
<td>78.3</td>
<td>78.1</td>
<td>77.8</td>
<td>77.9</td>
<td>77.5</td>
</tr>
<tr>
<td>Female</td>
<td>80.8</td>
<td>80.8</td>
<td>81.0</td>
<td>80.8</td>
<td>81.0</td>
<td>80.5</td>
</tr>
<tr>
<td>Scotland Male</td>
<td>77.1</td>
<td>77.1</td>
<td>77.0</td>
<td>77.1</td>
<td>77.2</td>
<td>76.8</td>
</tr>
<tr>
<td>Female</td>
<td>81.1</td>
<td>81.1</td>
<td>81.1</td>
<td>81.1</td>
<td>81.1</td>
<td>81.0</td>
</tr>
</tbody>
</table>

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.

**Expanded Working with West Lothian Leisure**

"Delivering health and wellbeing programmes to the wider population is at the heart of our charitable purpose, therefore, we are delighted to build on our relationship with NHS Lothian and the wider health and social care sector. This funding will enable us to scale up so that we can help improve the health of many more people in West Lothian and contribute to reducing health inequalities which have widened during the pandemic." [West Lothian Leisure in ground-breaking NHS partnership - West Lothian Council](#)

The premature mortality rate, which is the number of people dying before the age of 75, for West Lothian was 468 deaths per 100,000 in 2021. This rate has been steadily worsening from 2017 to 2018 with the rate is now at its highest value of deaths per 100,000. West Lothian’s premature mortality rate has routinely outperformed the Scotland average since 2019. Scotland’s premature mortality rate was 471 deaths per 100,000 in 2021.
What we have done

West Lothian HSCP Cervical Screening Inequalities Programme
Since August 2021, we have been working with NHS National Services and North Lanarkshire HSCP on a project to better understand the uptake of health screening. About 30% of the population do not attend screening appointments. We have begun work to better understand the barriers to attendance and how a more personalised service could influence uptake.

We are now working with a sample of GP practices to test some ideas such as targeted text messaging. The work was selected for presentation at the NHS Scotland annual conference in 2022.

Connecting Scotland
In response to the pandemic, the Scottish Government created a new initiative aimed at helping 50,000 digitally excluded households online by the end of 2021.

The Connecting Scotland programme is a partnership between the Scottish Government, local councils, and the Scottish Council for Voluntary Organisations (SCVO). The program provides connectivity to digital devices through mobile data and supports people who are digitally excluded and on low incomes to develop digital skills.

The partnership was involved in the first 3 phases of the program and were provided with 125 devices to deploy in the community. All were successfully distributed along with 63 MiFi mobile data devices.

Candidates who met the criteria for the program were supported to get online by staff acting as their ‘Digital Champion’ to help build confidence and skills.

The most popular usage of the devices was to connect with family and friends using video calling functions, accessing entertainment or researching hobbies. Some candidates wanted to further their education and apply for jobs or help young people with their homework.
Digitalisation Programme Pathways

West Lothian Council approved funding for interactive touchscreen tables to be purchased for services supporting people during the pandemic. Pathways day service was one of the services to benefit from this. In addition, funding was also granted for other devices such as tablets and netbooks.

Purchasing this type of technology and the installation of wi-fi has been key to providing a service both to people who have been in the day service and those at home throughout the pandemic. It has helped people to remain connected, has reduced isolation and has helped people to develop new skills.

The interactive table has offered individuals of varying ages and abilities the chance to immerse themselves in the interactive experience whether this has been in exploring topics on the internet or downloading apps, keeping stimulated through word searches, doing some reflection for reminiscence, or improving fine motor movement through simply using the touchscreen.

The size of this screen has also assisted those with sight impairment, helping people to be engaged with technology.
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

<table>
<thead>
<tr>
<th>Percentage</th>
<th>East Locality</th>
<th>West Locality</th>
<th>West Lothian</th>
<th>Scotland</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>27%</td>
<td>23%</td>
<td>25%</td>
<td>30%</td>
</tr>
</tbody>
</table>

In the 2021/22 survey, 25% of carers responded saying that they felt supported to continue in their caring role. West Lothian and Scotland’s rate have decreased since the survey in 2019/20.

What we have done

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 of West Lothian continued to offer online support during 2021/22 and towards the end of the year returned to Sycamore House and to some face-to-face support. It was great to see people in person again but for many, anxieties around attending events and groups remain so face to face activities have been re-introduced gradually. All groups, one to one support, information and advice and counselling sessions continued, however, COVID did have an impact on the number of new carers referred through health and social care teams. New referrals are expected to return to pre-COVID levels in the next year.

Who did COWL support in 2021/22?
- 997 adult carers, 178 young carers
- 77 disabled people
The partnership issued a survey for carers to all households in West Lothian via the council’s Bulletin. The aim was to better understand how supported carers felt and what could be done better. Work is now underway working to improve support for carers via the Carers Strategy Implementation Group. Results of the survey are [here](#).

**Carers Survey**

We had 592 people who responded to the survey.

How do you feel in your caring role?

- 61% Everything is okay
- 21% Everything in my life is going well most of the time
- 31% Everything is okay most of the time
- 38% I find this hard a lot of the time
- 5% I find this hard all of the time

**Young Carer Zoe**

Caring for her mum over the past nine years has been incredibly rewarding and humbling for Zoe. Zoe is there to help her mum with cleaning, shopping, looking after the pets, going to the pharmacy and anything else that is needed. She has nearly finished college and although most of the time her caring role is okay, there are times it has impacted her life.

The biggest thing is the worry she feels about her mum’s wellbeing especially if she is out and about. Zoe has received great support from Carers of West Lothian through counselling, short breaks and simply having someone to talk to who understands. Zoe would encourage everyone to be aware that individuals may be managing a caring role and may need extra support at times. She said: “Not all young carers are visible, A lot of them will stay quiet about their caring role, so just be mindful.”
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 80% in 2021/22. This reflects the Scottish average which is also 80%.

The falls rate for adults aged 65 years and older has been fluctuating since 2017/18, with the highest level of 22 in 2019/20, to the lowest 19 in 2020/21. West Lothian’s rate per 1,000 of the population has increased from 19 in 2020/21 to 21 in 2021. It is also good news that West Lothian has been performing better than the Scotland average.
What we have done

Naloxone Champion

In January 2021 a new role funded by West Lothian Alcohol and Drug Partnership through the Drug Deaths Taskforce started within the West Lothian Drug and Alcohol Service (WLDAS). The National Naloxone Programme is contributing to the aim of reducing fatal opioid overdoses in Scotland. Naloxone is a medication that reverses the effects of opioid overdose.

The Naloxone Champion’s role is to increase the numbers of Take-Home Naloxone kits in the community by training health workers, carers, family members and the community on how to respond to an overdose. The focus on early intervention could save a life and is therefore a vital part of the national mission on the drug deaths crisis. Some key aspects of the programme are to:

- Increase organisations who will hold/ distribute Naloxone in West Lothian
- Increase reach to friends and family of Naloxone including those being liberated from Prison
- Provide a co-ordinated response involving other services such as, Criminal Justice, Housing, Community Addiction Service, Third Sector and Social work
- Ensure that accurate data is collated and recorded.
- Increase numbers of first responders that are Naloxone trained
- To undertake street work to establish where future services should be placed

| 37 organisations trained |
| 195 individuals trained to administer and supply |
| 292 individuals trained to administer |
| 133 kits held by organisations able to supply |
| total kits distributed 568 |
| Kits distributed to individuals 435 |

The number of take-home Naloxone kits distributed in 2020/2021 was **155**, and in 2021/2022 it had increased to **435**
Admissions to Acute Mental Health Wards

In October 2021, the Acute Care and Support Team (ACAST) based at St John’s moved to a 24-hour 7-day week service from its previous operating hours of 0800-2000.

The revised hours allow a consistent approach to mental health assessment over a 24-hour period supported by a multidisciplinary team. Those who attend the emergency department at St John’s Hospital in a state of distress, are met by the team, receive a rapid and comprehensive mental health assessment and an outcome which may be admission to a mental health ward, referral back to the GP or to a course of home treatment with ACAST known as Intensive Home Treatment.

The consistency of the assessment from mental health nurses has seen a reduction in admissions to mental health wards within West Lothian. Data shows that unnecessary admissions are being prevented as more people are receiving care in their own home.

There has been improvement in staff morale and in particular improved feedback from junior psychiatry doctors in training. They report greater satisfaction at work which promotes West Lothian as a more desirable place to work for psychiatrists.
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

A range of staff surveys took place across the health and social care partnership during 2021/2022 and all staff were invited to complete the iMatter survey.

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

What we have done

New Mentoring Programme for Social Care Staff

‘I think mentoring is a great support to have, someone impartial from care home management and to have the opportunity to speak to someone who is there to listen’.

‘Good to have the support, this is not something I’ve had before. I think it’s a great initiative’
Falls Prevention

“During Covid 19 patient contact had to be limited as much as possible while still providing high quality services for falls prevention and rehabilitation in the community.

I wanted to support student development and offer clinical placements where possible, therefore developed an online exercise class run by students for West Lothian patients, targeted at fall prevention.

All outcomes improved on the initial implementation of this therefore I have repeated it with a further 4 cohorts of students, which has enabled 24 patients to complete the program.

The work inspired me to apply for the Digital Leadership course supported by NHS NES and I submitted a poster abstract to the NHS Scotland Conference which was accepted. I am presenting my poster at the conference in June 2022.”

REACT Physiotherapist

Lothian Work Support Service

NHS Lothian’s Work Support Service (LWSS) is piloting a vocational rehabilitation service for council and NHS staff within the West Lothian Health and Social Care Partnership as well as secondary care colleagues in West Lothian. The aim is to improve well-being and staff absence.

Employees with long term absence of 4+weeks will be encouraged to receive support. The service is an enhancement of existing occupational health services already in place.

There is evidence that vocational rehabilitation improves mental and physical wellbeing, reduces length of absence, and increases the likelihood of sustainable return to work. Staff will be supported using focused therapies.
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 89% in 2017/18 to 91% 2021. The trend reflects that of Scotland which has also increased from 88% in 2017/18 to 90% in 2021.

The latest comparator information available for this indicator for inclusion in this report is 2019/20.

Care Home Multi-disciplinary Team (MDT) Reviews

Following a pilot in 2021/22, a programme of MDT meetings has been established to review medicines. MDT meetings involve consultant geriatrician, pharmacist, GP and care home staff, who carry out polypharmacy reviews. Initial work suggests it will be successful in reducing the amount of medication people take and in making more effective use of staff time.
**What we have done**

**Workforce Planning**
We developed an interim one-year and submitted it to the Scottish Government. We have been working on a longer term plan which will set out our workforce challenges and actions to address them. Both documents can be found on the partnership’s website.

**Careers in Care**
A new initiative to support Careers in Care was developed in September 2021 to support the recruitment of staff to care homes and the Support at Home Service. The initiative incorporates support for Scottish Social Services Council registration and includes a mentoring programme. The work is also contributing to a pilot to develop a Lothian Care Academy which aims to deliver a consistent approach to staff training across the health and social care partnerships in Lothian.

Recruitment campaigns, both internal and external, were widely circulated on social media, on the website, on advertising boards and banners developed for use in and around Council premises. The campaign resulted in the recruitment of 21 new staff – 5 within Support at Home Service and 16 within Care Homes and 16 existing staff members came forward to support care services.

We have also worked in partnership with colleagues in Access to Employment to recruit young people 16-25 through the Jobs Fund. Eight opportunities were identified. The aim is to use learning from what we’ve done and expand opportunities for careers in care through working with young people and those looking for new career direction.

**Focus on Pharmacy**
A pharmacotherapy hub was established in Stoneyburn Health Centre to process discharge letters remotely and assist with medicine administration. The programme is helping to support GP practices and free up capacity in practice pharmacy teams. The hub has been working with three practices in the pilot phase and the service model will be expanded from August onwards.

**Serial Prescribing**
Following an initial project with five practices in West Lothian, a 2 year programme to encourage further uptake of serial prescribing has been agreed with GP practices for 2022-24. Lunchtime training sessions were held with GPs in March. A complementary project is running with community pharmacies across West Lothian to provide training and support to allow them to process an increased number of serial prescriptions. Training for community pharmacies was also delivered in March. One practice from the initial projects has progressed beyond expectation with almost 25% of prescriptions being serial at April 2022.
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 2021/22 was £303.863 million. This was fully funded through contributions from West Lothian Council and NHS Lothian. In addition, reserve balances of £26.311 million were available at 31 March 2022 for earmarked spending priorities, including the ongoing costs of Covid-19, and £3.769 million was available within the IJB general reserve.

Budget Summary

The additional spend associated with Covid-19 in 2020/21 was just over £11.3 million and this was fully funded by the Scottish Government through the Mobilisation Plan process.

IJB delegated services faced significant challenges during 2021/22. The main areas of significant additional spend incurred due to the pandemic included:
• **Additional Staffing Costs** – this includes the recruitment of additional Home First / REACT staff to help prevent hospital admission and facilitate supported discharge, additional costs of social care staff to help ensure services are maintained across internal care at home and care homes, and additional support in the community for mental health concerns and to reduce the backlog of service referrals.

• **Additional Prescribing Costs** – this includes the impact of increased volumes and price increases directly due to the pandemic. The pandemic has had a significant impact on unit price and volume and this area will continue to be subject to close monitoring.

• **Additional Support to Care at Home providers** – this relates to increased hourly rate payments based on commissioned hours to cover costs resulting from COVID-19, such as staffing and PPE, and ensure providers are supported to remain financially sustainable. These payments were made up to the end of November 2021 and replaced by a separate uplift to Care at Home rates funded by Winter Planning funding.

• **Additional Support to Care Homes** – this reflects additional costs to external care homes to help ensure they are 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. Payments for reduced occupancy ceased at the end of October 2021 but expect significant staffing costs to continue.

• **Reduced Care Income** – non-residential care contributions were under budget in 2021/22 due to reduced capacity in day care and other chargeable services. Contributions from care home residents are also lower than budget this year.

• **Unachievable Savings** – delays due to Covid-19 in a number of savings and recovery plans have resulted in extra costs for 2021/22 which can be claimed through the Mobilisation Plan process.

IJB delegated services saw continued growth in demand in a number of areas during 2021/22. 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 2021/22, budget savings of £6.679 million were achieved 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 2017/18 to 2021/22 is shown in the table below.

<table>
<thead>
<tr>
<th></th>
<th>2017/18</th>
<th>2018/19</th>
<th>2019/20</th>
<th>2020/21</th>
<th>2021/22</th>
<th>5 YR Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£’000</td>
<td>£’000</td>
<td>£’000</td>
<td>£’000</td>
<td>£’000</td>
<td>£’000</td>
</tr>
<tr>
<td>Core Health Services</td>
<td>110,443</td>
<td>115,814</td>
<td>122,584</td>
<td>139,961</td>
<td>141,307</td>
<td>630,109</td>
</tr>
<tr>
<td>Hosted Services</td>
<td>22,453</td>
<td>20,649</td>
<td>21,318</td>
<td>25,584</td>
<td>28,006</td>
<td>118,010</td>
</tr>
<tr>
<td>Acute Set Aside Services</td>
<td>34,726</td>
<td>32,583</td>
<td>34,747</td>
<td>35,717</td>
<td>38,269</td>
<td>176,042</td>
</tr>
<tr>
<td>Non-Cash Ltd Services</td>
<td>18,282</td>
<td>19,322</td>
<td>20,448</td>
<td>23,158</td>
<td>23,926</td>
<td>105,136</td>
</tr>
<tr>
<td>Social Care Services</td>
<td>64,457</td>
<td>63,833</td>
<td>69,728</td>
<td>62,412</td>
<td>72,355</td>
<td>332,785</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>250,361</strong></td>
<td><strong>252,201</strong></td>
<td><strong>266,825</strong></td>
<td><strong>286,832</strong></td>
<td><strong>303,863</strong></td>
<td><strong>1,362,082</strong></td>
</tr>
</tbody>
</table>

**Future Financial Plans**

The 2022/23 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 2022/23 spend forecast.

These budget contributions do not take account of the additional cost implications anticipated to arise as a result of COVID-19. While there remains uncertainty around COVID-19 implications going forward and resulting costs, at this stage it is anticipated that additional 2022/23 costs resulting from COVID-19 will be met by earmarked IJB reserves available for COVID-19 costs. It will be important that any ongoing recurring costs associated with COVID-19 are identified.

Significant and persistent levels of inflation are creating financial risks in addition to demand and demographic pressures. Taking account of these factors, it will be crucial that the 2022/23 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 2022/23.

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 ongoing implications associated with COVID-19 may 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.

The preparation of a medium-term financial plan (MTFP) for the next strategic planning period covering 2023/24 to 2027/28 continues to progress taking account of an ongoing update of expenditure and income assumptions for the period. An initial financial outlook for the five year period was reported to the Board on 17 March 2022 and a further update on the MTFP was provided to the Board on 29 June 2022. There remain a number of material uncertainties including around inflationary pressures, increasing demands including demographic pressures and the implications arising from the outcome of the National Care Service consultation. These will continue to be closely monitored over the coming months, and 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
It has been agreed that 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 2021/22 Best Value Annual Statement of Compliance was agreed by the IJB Audit, Risk and Governance Committee on 15 June 2022.

**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 continued to focus 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.
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 2021/22 are set out in the IJB’s papers which are hosted on West Lothian Council’s website.

Throughout the reporting year 2021/2022, the West Lothian Health and Social Care Partnership continued to respond to the COVID-19 pandemic which meant ongoing adjustments to the operation of services across the partnership.

The Board issued four overarching Directions during 2021/22 to NHS Lothian and West Lothian Council. No further directions were issued during the year.

In August 2021, in response to acute staffing pressures created by the Covid-19 pandemic, the Chief Officer exercised emergency powers to close St Michael’s Hospital in Linlithgow temporarily and transfer patients to Baillie Ward in Tippethill Hospital in Whitburn. The transfer ensured that patients could be cared for safely at a time when there were significant staffing pressures in the health and social care system and allowed staff from St Michael’s to be redeployed to assist in other healthcare settings. St Michael’s Hospital has remained closed since that time because of ongoing staffing pressures and falling demand for Health Board Continuing Complex Care (HBCCC) beds in West Lothian.

The IJB and SPG has continued to hold its meetings remotely during pandemic.

Complaints

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 2021/22.
Key Priorities for 2022/23

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 in February 2021 and recommended 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.

Further detail on what can be expected from the reform is due to be published in early summer 2022.