



GLASGOW CITY HSCP ANNUAL PERFORMANCE REPORT 2021/22 SUMMARY

Overview

The **Glasgow City Integration Joint Board** (IJB) was established in February 2016 and provides strategic direction and leadership for community health and social care services in the city, which are jointly delivered through the **Health and Social Care Partnership** (HSCP). The IJB is required to publish an **Annual Performance Report** (APR) and this summary focuses on key highlights from the 2021/22 report.

Our Vision and Priorities

We believe that Glasgow's people can flourish, with access to health and social care support when they need it. This will be done by transforming health and social care services for better lives. Our **Strategic Priorities** are:

- Prevention, early intervention, and harm reduction
- Providing greater self-determination and choice
- Shifting the balance of care
- Enabling independent living for longer
- Public Protection



Key Achievements in 2021/22

- Produced **cervical cancer screening awareness videos** to encourage women with learning disabilities to be screened, in response to evidence of their lower attendance rates.
- Launched an updated **Family Support Strategy** and awarded a tender for new Family Support services, which aim to support children to remain within their families and local communities and reduce the need for statutory social care intervention.
- Published '**Glasgow's Promise**' (2021-24), which identifies how we will implement the Scottish Government's **Promise** locally, in order to improve the care system for children and young people in Glasgow.
- Introduced the '**Improving Modern Apprenticeships Programme**' (IMAP) which seeks to improve the transition into Modern Apprenticeships for young people with autistic spectrum conditions.
- Received final approval to build a new **Health and Care Hub** in Parkhead. This will be the largest primary health care facility in Greater Glasgow and Clyde and Scotland's first net zero carbon health and social care facility.
- Expanded the support available for GP patients in relation to a range of issues which may be affecting their mental health and wellbeing such as money, housing, or social isolation, by extending the **Community Link Worker** and **Welfare Advice Health Partnership** initiatives.
- Continued to adapt the way we support people through the **Maximising Independence** approach, which aims to ensure that people live independently, safely and in good health for as long as possible.
- Expanded, to cover 16/17 year olds, the **Compassionate Distress Response Service**, which provides a rapid and more effective response to people experiencing emotional distress, and introduced a **service to support their parents and carers**.
- Progressed the **Homelessness Rapid Rehousing Transition Plan**, including the delivery of 3,505 settled lets in 21/22 (a rise of 14%) and secured an additional 50 settled tenancies for people with complex needs through the **Housing First** programme.
- Established a Crisis Outreach Team to tackle drug related deaths (DRD's) and non-fatal overdoses (NFOD) in the city.
- Launched a **specialist Complex Needs service** to provide a range of support to individuals with multiple and complex health and social care needs who find it difficult to engage with mainstream services.
- Introduced a Youth Court in an effort to improve the effectiveness and outcomes of community sentences for young people.

COVID-19 - Response and Recovery

The HSCP has been actively responding to COVID-19 since early 2020. Throughout this period, we have had business continuity and planning structures in place to respond to the initial impact of COVID-19 and to plan for the recovery and renewal of community-based services.

Detailed information on recovery responses and progress for all HSCP service areas, can be found in the [COVID-19 updates](#) which have been regularly published on a dedicated section of the HSCP website over the last 2 years.

As part of the recovery process, services across the HSCP are continuing to identify where there may be opportunities to consolidate some of the most effective practices adopted during the pandemic and incorporate these going forward within mainstream service delivery, in order to offer greater flexibility for service users and improve service efficiency.



Key Performance Improvements in 2021/22

Indicators where performance has shown the greatest improvement over the past 12 months.

| Indicator | Baseline Year End 20/21 | Year End 21/22 |
|--|-------------------------------|----------------------|
| Older People and Carers | | |
| Percentage of service users who receive a reablement service following referral for a home care service: Hospital discharges | 70.9% | 71.7% |
| Number of New Carers identified during the year that have gone on to receive a Carers Support Plan or Young Carer Statement | 1,928 | 2,391 |
| Has the Carer's Service improved your ability to support the person that you care for? | 90% | 97% |
| Telecare: Standard | 2,326 | 2,771 |
| Telecare: Enhanced | 444 | 672 |
| Unscheduled Care | | |
| Number of Unscheduled Hospital Bed Days – Mental Health (18+) | 170,093 | 163,455* |
| Children's Services | | |
| Children with disabilities in receipt of a personalised social care service | 291 | 382 |
| Adult Services | | |
| Adult service users in receipt of a personalised social care service | 3,063 | 3,244 |
| Health Improvement | | |
| Alcohol Brief Intervention Delivery | 4,269 | 7,749 |
| Criminal Justice | | |
| Percentage of Community Payback Order (CPO) unpaid work placements commenced within 7 days of sentence | 76% | 87% |
| Percentage of Community Payback Orders (CPO) with a Case Management Plan within 20 days | 85% | 93% |

*Provisional

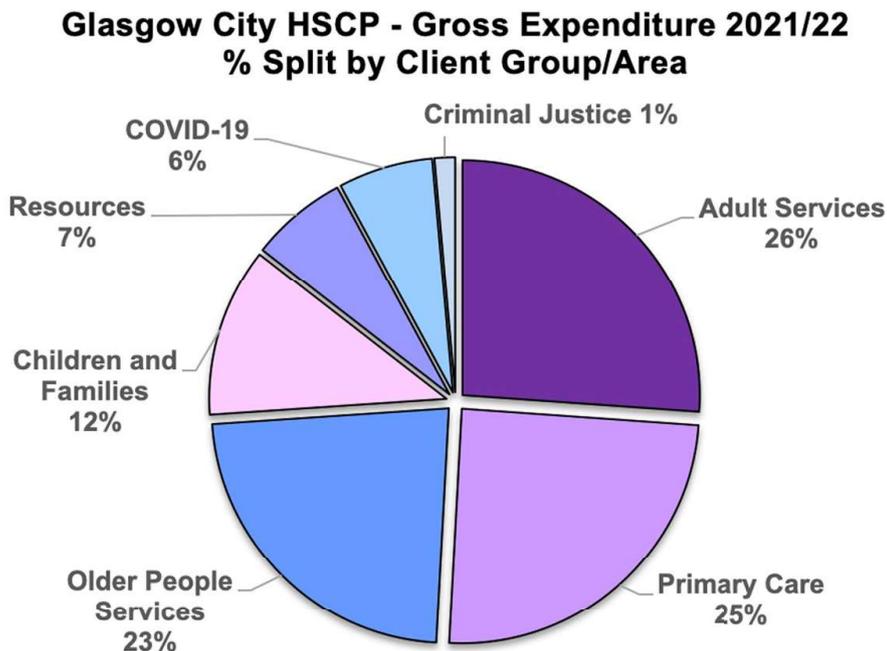
Areas for Improvement in 2022/23

Specific areas where we would like to improve performance over the next 12 months include the following:

| INDICATOR | Target | Actual |
|---|---|--|
| Older People | | |
| Number of Anticipatory Care Plan (ACP) conversations and summaries completed and shared with the patient's GP | 800 Conversations 200 Summaries | 208 Conversations 50 Summaries |
| Intermediate Care: Percentage of service users transferred home | >30% | 15% |
| Unscheduled Care | | |
| Total number of Older People Mental Health (OPMH) patients delayed (Excluding AWI) | 0 | 19 |
| Number of Unscheduled Hospital Bed Days - Acute (18+) | 453,866 | 517,348 |
| Total number of Acute Delays and Bed Days Lost to Delays (All delays and all reasons 18+) | Delays 0 Bed days 39,919 | Delays 136 Bed days 64,853 |
| Total number of Acute Bed Days lost to delayed discharge for Adults with Incapacity (AWI) (Older People 65+) | 1,910 | 16,209 |
| Children's Services | | |
| Access to specialist Child and Adolescent Mental Health Services (CAMHS) | 100% | 59.4% |
| Adult Mental Health | | |
| Total number of Adult Mental Health delays | 0 | 26 |
| Homelessness | | |
| Number of households reassessed as homeless/potentially homeless within 12 months | <480 per annum | 526 |
| Health Improvement | | |
| Exclusive Breastfeeding at 6-8 weeks (general population) | 33% | 28% |
| Exclusive Breastfeeding at 6-8 weeks (15% most deprived data zones) | 24.4% | 20.6% |
| HR | | |
| Sickness Absence Rates (Health and Social Work) | NHS < 4% Social Work < 10.2 ADL (average days lost) | NHS 6.39% Social Work 19.7 ADL (average days lost) |

Managing Our Resources

The total financial resources available to the Partnership for 2021/22 were around £1.4billion. These were allocated across service areas as shown below.



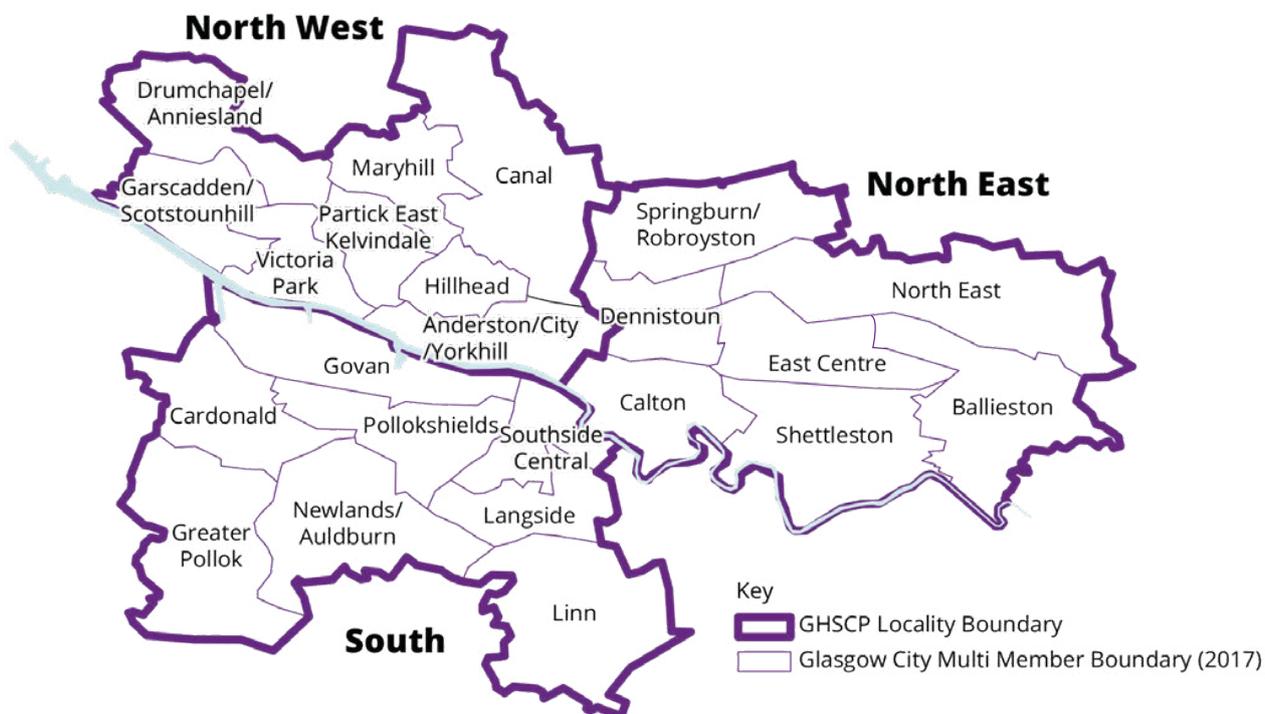
Budget monitoring has reported an underspend throughout 2021-22. The IJB has continued to operate under the powers introduced by the emergency legislation in relation to COVID-19 during 2021-22. As a result, financial performance has continued to change as the IJB has been required to adapt

in response to the challenges of the pandemic. The IJB has also received increased Scottish Government funding to meet the increased demand being experienced across client groups. The final operational position secured was an underspend of £18.2m.



Our Localities

The Partnership is divided into three areas, known as localities, to support operational service delivery and respond to local needs. These localities - North East, North West and South - are shown below.



Each locality has developed a **Locality Plan**, which details how they are taking forward the **IJB's Strategic Plan (2019-22)** and responding to locally identified needs and priorities.

Across the City, we have established **Locality Engagement Forums** (LEFs) which feed into local management arrangements and city-wide networks. LEFs are made up of a range of stakeholders, mainly patients, service users and carers from local communities. They have an important role to play in linking to the governance, decision-making and planning structures of the locality and HSCP, ensuring that feedback and the opinions of patients, service users and carers are heard. These form a key role in our local participation and engagement arrangements, in line with the HSCP's current **Participation and Engagement Strategy**. LEFs have continued to meet online over the course of the last year focusing on local topics and interests.

Equalities

Updated **Equalities Outcomes** have been produced following the publication of the IJB **Equalities Mainstreaming Report (2020-24)** in March 2020. These new outcomes are closely aligned with our **Strategic Plan 2019-2022** and aim to enable the HSCP to reduce inequality caused by socio-economic disadvantage, in line with the **Fairer Scotland Duty**. Full details of the substantial progress made in relation to the new outcomes is provided in our **Equalities Progress Report**.

