



Joint Inspection Report: Questions and answers

Q: What is a Joint Inspection?

A: The Care Inspectorate (CI) and Healthcare Improvement Scotland (HIS) carry out joint inspections of health and social work services for older people in Scotland.

They aim to make sure that seamless, consistent, efficient and high-quality services are delivering good outcomes for the people who need them and their carers.

Inspections are based on a set of quality indicators. These determine how effectively health and social work services work in partnership. Inspections also look at the role of the independent and third sectors.

Inspection teams comprise inspectors and associate inspectors from CI and HIS, along with clinical advisers seconded from NHS boards. CI and HIS aim to inspect six Health & social Care Partnerships per year. Inspection reports are published on the CI website <http://www.careinspectorate.com/index.php/publications-statistics>

Q: What did the Aberdeen City inspection involve?

A: The joint inspection went ahead between November 2015 and February 2016.

The purpose was to assess whether our health and social work services improve outcomes for older people and their unpaid carers by:

- making sure people receive the right care, at the right time, in the right setting;
- delivering high-quality services to older people;
- supporting older people to be independent, safe, as healthy as possible and have a good sense of wellbeing.

The inspection team met more than 100 older people and carers, and around 300 staff from health and social work services, and the third and independent sectors. They also read samples of older people's health and social work service records and studied documents provided by the Partnership about services for older people and their carers in Aberdeen.

Q: How does the grading system work?

A: There are nine quality indicators, which can be rated as follows:

- *Excellent* – outstanding, sector-leading
- *Very good* – major strengths
- *Good* – important strengths with some areas for improvement
- *Adequate* – strengths just outweigh weaknesses
- *Weak* – important weaknesses
- *Unsatisfactory* – major weaknesses

Q: How did we do?

Quality indicator		Evaluation
1	Key performance outcomes	Adequate
2	Getting help at the right time	Good
3	Impact on staff	Good
4	Impact on the community	Very Good
5	Delivery of key processes	Weak
6	Policy development and plans to support improvement in service	Adequate
7	Management and support of staff	Adequate
8	Partnership working / Management of resources	Adequate
9	Leadership and direction	Adequate

Q: What did the inspectors recommend?

Recommendations for improvement	
1	<p>The Partnership should increase the pace of its development of sustainable joint approaches that help to support improvement to:</p> <ul style="list-style-type: none">• deliver the Scottish Government’s delayed discharge target of no delays over two-week duration;• ensure fewer older people experience delayed discharge from hospital.

2	<p>The Partnership should work with carers and those services that support them to ensure that:</p> <ul style="list-style-type: none"> • carers are routinely offered a carer's assessment; • carers assessments are completed for those carers who request them; • offering and completing carers assessments is clearly documented; • revisions to future formats for carers' assessments take into account new carers legislation.
3	<p>The Partnership should ensure that:</p> <ul style="list-style-type: none"> • pathways for accessing services are clear; • eligibility criteria are applied consistently across services; • waiting lists are monitored to manage the allocation of pressurised resources equitably.
4	<p>The Aberdeen City Adult Protection Committee should support improvement in adult support and protection by:</p> <ul style="list-style-type: none"> • including timescales for all partners for the completion of all stages within the adult protection processes; • providing oversight of progress against all action plans completed from audits; • providing oversight and quality assurance of any action plan resulting from the commissioned review of adult support and protection.
5	<p>The Partnership should take action to ensure that frontline staff are supported to complete initial inquiries, risk assessments and risk managements plans timeously. This action should include:</p> <ul style="list-style-type: none"> • working alongside Police Scotland to develop a joined-up approach for completing inquiries; • streamlining its risk assessment frameworks • ensuring that risk assessments and risk management plans are completed and actioned.
6	<p>As part of the continued development of the new integrated arrangements, partners should develop their strategic approach to joint training and development. This should aim to:</p> <ul style="list-style-type: none"> • offer opportunities beyond mandatory training; • include the third sector to enhance a shared knowledge of roles and responsibilities, • achieve a cohesive approach to care delivery for older people.
7	<p>As part of the continued development of the new integrated arrangements, partners should put a formal plan in place that sets out the future allocation of the integrated care fund and set out clear criteria for how these projects would</p>

	be evaluated.
8	As part of the continued development of the new integrated arrangements partners should set a clear timetable to agree and implement the structure for locality management teams.

Q: Are the findings influenced by the fact that the inspection was carried out well before the Partnership went ‘live’ on 1st April 2016?

A: The report is by definition a snapshot in time of the inspection period, November 2015 to February 2016. We set out our concerns about the timing when the inspection was first proposed. We felt that it was taking place at a time of significant transition – just before ‘go-live’ on 1st April and at a time when we were still preparing for formal health and social care integration.

Many pieces of important work which are referred to in the report as “not delivered” have since been completed in accordance with legislation, including our Strategic Plan, integrated budgets, the Board Assurance Framework, the Strategic Commissioning Plan, the Financial Framework, and the Performance Framework.

Q: Does the report contain any findings which should make us feel especially proud of our Partnership?

A: Yes. We were evaluated as ‘Very Good’ in terms of our ‘Impact on the community’. Since 2013, there has only been one previous ‘Very good’ rating under any of the nine quality indicators evaluated across the 12 local authority areas jointly inspected so far by the Care Inspectorate/Health Improvement Scotland. In other words, the inspectors have awarded just two ‘Very goods’ out of 108 evaluations so far. It is especially pleasing that it was given for our impact on the Aberdeen community – because that, after all, is our core business.

Q: What is the Partnership’s response to the overall findings in the report?

A: Many of the issues raised in the inspection report were well known to us already. Many of the report’s recommendations have been actioned and completed already in the months which have passed since the inspection was completed last February. Progress on the outstanding recommendations is well in hand and an Action Plan is being developed to ensure that all matters are fully dealt with.

We welcome the Care Inspectorate’s findings and the recommended areas for improvement. We will act upon all the matters which remain to be dealt with. We will build on our recognised areas of good practice to ensure that our Partnership is recognised as an exemplary organisation, with excellent governance, processes,

practices and service delivery – and the best possible health and wellbeing outcomes for our citizens.

The inspection report has highlighted a number of areas of very good practice in the Partnership. The inspectors have recognised that our staff are highly skilled, knowledgeable, hard-working and dedicated. There can be no better foundation upon which to build our new organisation.

Q: What action is being taken now in response to the report?

A: An action plan is being drawn up to address the immediate impact of the report's publication. This includes:

- the preparation of this Q&A for our staff and the wider Partnership;
- the preparation of a straightforward message to all of our staff and the wider Partnership, which summarises and explains the 25,000-word report;
- the establishment of a team which will take forward the preparation of the longer-term action plan (see below) to address the report's recommendations and how we will measure our success in doing so.

Q: What happens next as far as the Care Inspectorate is concerned?

A: The inspectors, as is normal practice, have asked the Partnership to produce a short, medium and longer-term action plan to show how we are implementing their recommendations, and will monitor progress.



ACHSCP

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