

Department of Health and Social Care

Programme for Government Service Delivery Plan 2017/18



Isle of Man
Government
Reiltys Ellan Vannin

**OUR ISLAND:
A SPECIAL PLACE
TO LIVE AND WORK**

PROGRAMME FOR
GOVERNMENT
2016-2021

Introduction from Minister for Health and Social Care Kate Beecroft, MHK

The Department of Health and Social Care provides essential services to the people and visitors of the Isle of Man.

This year we are faced with significant challenges around improving the quality of our services whilst managing our budgets against increasing financial pressures.

Our commitment remains to delivering services closer to people's homes and a priority this year must be about delivery of the integrated care element of our strategy. We have also given additional commitments to improving the quality of local acute health services, and we will continue to strengthen our contracting position to ensure we receive good quality services for those people who need treatment from hospitals in the UK.

This year you will see a continuation of external peer reviews and visits from other inspection providers, and we will also look to strengthen our working arrangements with local providers both in the private and third sectors.

I do not underestimate the work that needs to be done by my Department to deliver on the commitments we have made to you in the Five Year Strategy for Health and Social Care and I will continue to ensure that by working to the priorities identified in this plan for 2017/18 we will continue to meet those commitments.

Introduction from Chief Executive Malcolm Couch

In delivering a very broad range of services during a period of change and challenge, it is worth restating our departmental values.

We are committed to people, our community and our colleagues, and working together to provide customer-centred care. We seek to understand individual needs and enable access to the best care service required.

Our communication must be good. We will listen to what people have to say and demonstrate we have heard them.

My colleagues should be courageous to speak up and do the right thing, have integrity in everything that they do, respect others: and above all behave ethically and with integrity. We will trust and be trusted.

The Department will support best practice and innovation as it transforms its services over the coming years, and as we meet any barriers we will seek to overcome them in a spirit of goodwill.

We will always strive to develop our skills and knowledge and do our roles to the best of our ability.

My principal aim, in support of my many colleagues, is to ensure that people in the Isle of Man receive health and social care services which are safe, effective, caring, responsive to their needs, efficient and well led.

Context

The Department of Health and Social Care was formed in April 2014, bringing together about 3,500 people who provide a broad range of health and social care services for our community.

In November 2015 we published a Five Year Strategy for Health and Social Care. The underlying theme of the strategy is that we do not have to choose between improving the quality of services and making them more efficient. Providing care closer to people's homes and doing things right first time will improve the quality of our service at the same time as increasing efficiency and reducing cost. This will become ever more important as the Isle of Man faces the same pressures on the health and social care budget that are causing concern throughout the developed world.

People are living longer and we should celebrate that achievement. However, as we age, we may develop more complicated health and social care needs. Many conditions become more common with age: including heart disease, stroke, cancer, respiratory disease, social isolation and dementia. That is an international trend, but the circumstances of the Isle of Man make us especially affected by demographic change.

The recent Isle of Man census of April 2016 shows that overall the Island's population has decreased by 1.4% since 2011 and now stands at 83,314 people. During the same period, the Island's economically active population has also fallen by 4.1%. The number of people who classed themselves as working at this time has also seen a fall of 3.1% on previous figures. This causes significant challenge for the funding and delivery of public services and for health and social care services in particular.

The Isle of Man has an ageing society and we need a bigger working population paying taxes to support services for those people who need them. The number of babies born in the Isle of Man continues to fall year on year and has recently been recorded as being at a 30 year low. The over 65 population on the Island now makes up 21% of the Island's resident population, compared with 18% in 2011 and since 1996, the over 95 years of age population has increased by 188%.

Our aim is to improve the health and wellbeing of the people of the Isle of Man and to deal with these economic and demographic pressures by becoming more efficient.

Department of Health and Social Care Strategic Plan

This year our focus will be on the continued delivery of the following priorities against the Five Year Strategy for Health and Social Care, which align with the policy statements within the Programme for Government.

Priority One: Taking greater responsibility for our own health and care

The Department is committed to helping everyone take greater responsibility for their own health, encouraging good lifestyle choices and by communicating with the public about the way our health and care services are provided. Many services need to work effectively together to help people understand their health and care needs and how they can influence their own health and care by making informed lifestyle choices. This year we will:

- ✓ Develop a Public Health outcome dataset, to support the ongoing health needs of the Island
- ✓ Complete work on the Joint Strategic Health Assessment (JSNA) for drugs and alcohol and use the findings to identify priorities for a new Drugs and Alcohol strategy
- ✓ Encourage people to take part in screening and immunisation programmes
- ✓ Book and manage their own appointments and requests for prescriptions on line with GPs
- ✓ Identify how we can help people take more exercise and choose healthier food and drink
- ✓ Support more people to stop smoking

Priority Two: Moving towards integrated care

Last year in our service delivery plan we stated that we would work out how best to deliver more integrated care through locating services together, better use of technology to join information and services up, and by improving the way in which people could access services when they need them. This still remains a big challenge for us but this year we will focus on delivering some of the building blocks that will help this happen:

- ✓ We will improve the way in which people can access and receive emergency care from our services
- ✓ We will deliver more services in the community and ensure our services are joined up. This will include services delivered through our community teams, voluntary agencies, and mental health services, our aim is that people only go to hospital when they need to
- ✓ We will use modern ways of working and digital technology to help deliver services to people both in their own homes, at community health centres and in residential and nursing care homes

Priority Three: Improving our hospital services

This year will be challenging for our hospital services as they work to deliver better quality services and care, whilst at the same time better managing the cost of doing this.

Nobles Hospital will continue to concentrate on delivering acute specialist work which can only be delivered in that setting. It will function as an "acute care hub", where patients are treated and stabilised and then rapidly transferred back to the community, or to a UK care centre as required. Nobles will play an active part in supporting the development and delivery of integrated care and will support initiatives designed to enable patients to get home earlier. We will also look at the following areas for improvement:

- ✓ We will use more beds in the community when people are ready to leave hospital but still need a bit of extra support
- ✓ We will continue to deliver improvements from the WMQRS reviews and prepare for two more inspections in 2017/18
- ✓ We will repatriate from the UK as much patient activity as possible which can be delivered safely on the Isle of Man
- ✓ We will work towards reducing waiting times for A&E, outpatient appointments, diagnostic investigations and inpatient procedures

Priority Four: Safeguarding vulnerable people

The Department has a duty to provide safeguards for people who cannot protect themselves, and this has been reaffirmed in the Programme for Government. We work with a number of vulnerable people across our service areas but have a specific focus on safeguarding through our work with the two Safeguarding Partnerships for Children and Young People and Adults. We also deliver support and services to vulnerable people within both the acute and community setting, which are being enhanced through the continued implementation of our Mental Health and Wellbeing Strategy. This year we will:

- ✓ Continue to drive the delivery of year two of the Mental Health and Wellbeing Strategy
- ✓ Create a statutory footing for the Safeguarding Partnerships
- ✓ Improve the outcomes for families through early intervention
- ✓ Improve safety in care environments and protect people from avoidable harm

Priority Five: Balancing our budget

The biggest challenge for the Department this year is to rebalance our budget to ensure that we deliver good quality services that are value for money against an environment of having to make significant savings at a level not previously delivered. See the Department in Numbers section for further details.

For several years the Department has required a supplementary vote to balance its budget at the end of each year. This has been down to a number of different things including the increasing demand for, and cost of hospital and social care, the cost of sending our patients away to the UK for treatments and our continuing need to rely on agency and bank staff to cover for absences and vacant posts.

This year we will address some of these issues by:

- ✓ Reducing the reliance upon Agency and Locum staff
- ✓ Reducing the level of sickness absence across the Department but with a special focus on supporting colleagues to manage their own health and well being
- ✓ Reducing the overall number of visits we ask people to make to the UK for straightforward treatments and follow up visits which could be done here
- ✓ Delivering an effective programme of cost improvements across all areas to ensure that we get good value for the money we spend
- ✓ Continuing to deliver the digital programme for Health and Social Care which will modernise the way we deliver services and make us more efficient, whilst at the same time enabling us to provide a better service to our customers.

How Did We Perform Last Year

The Department identified 12 key priorities for delivery during the 2016/17 financial year, and our performance was reported quarterly on the Government website using a 'red, amber, and green' rating system. At the end of March 2017 the Department had progressed well with some of the 12 areas of work and less well with others. We did not do well enough on: delivery of a strategy for integrated care; not establishing in all cases clear contracts for service providers both on-Island and off-Island; delivery of an effective communication strategy both internally with colleagues and externally with our customers and stakeholders; and finally, delivery of an effective recruitment and retention strategy for all parts of the Department, but especially for those areas that struggle to recruit qualified and experienced workers.

The Department's quarterly performance reports can be found at the link below:

<https://www.gov.im/about-the-government/departments/health-and-social-care/>

We will continue to work throughout 2017/18 to complete the outstanding priorities from the previous year, and continue with work programmes such as delivery of the Joint Strategic Needs Assessment (JSNA) for drugs and alcohol and implementation of the Mental Health and Wellbeing Strategy which are much longer pieces of work.

A more detailed summary of the Department's priorities and work for 2017/18 can be found in the DHSC Annual Service Delivery Plan on the Isle of Man Government website.

The Department in Numbers

In common with most western healthcare systems, the financial pressure on the Department is severe. Recruiting staff remains difficult, leading to cost pressures as expensive agency and locum staffing is used to provide continuity of service. This is particularly true in vital front-line roles to ensure that services are delivered. Maintaining good morale in these circumstances is difficult, and two consequences of this are higher than expected rates of staff absence and staff turnover.

The Department's overall budget for 2017-18 has been increased to recognise the growing pressures on the cost of providing health and social care services but there remains a significant challenge to realise the cost savings and efficiency improvements needed to meet this budget. Our budget has increased by some £12m for 2017/18. However, even to meet the new target, efficiency savings of nearly £11m must be achieved during the year. The Department will have to make very difficult choices in the allocation of its resources which will affect the services provided currently. Achieving these efficiency savings, while necessary, will not be sufficient to put services on a sustainable footing in the longer term. To do this, the Department must undergo the fundamental reforms set out in the Five Year Strategy.

As mentioned earlier, the population profile of the Isle of Man is shifting as people live longer: and they may sometimes have more complex health and social care needs, which inevitably creates further financial pressure. External reviews (e.g. those carried out by the West Midlands Quality Review Service with Noble's Hospital) have led to many recommendations about improving our quality of care, and implementing them will require a wide-ranging and sustained programme of work.

The Department's overspend in 2016-17 came mainly from staff costs at Noble's Hospital: particularly expenditure on agency and locum staff required to cover vacancies (particularly in difficult to fill positions) and absences through illness.

Capital projects in 2017-18 will include work on the following:

- Commence building an older persons' residential and resource centre for the East of the Island (Summerhill View);
- Relocation of day care services (Eastcliffe) to the Noble's Hospital estate;
- Completion of staff residential accommodation at Noble's Hospital (Henry Bloom Noble Healthcare Trust Residence).

The following tables show how we spend our current budget.

NET EXPENDITURE - BY DIVISION					
	Net Actual	Net Probable	Gross Spend	Gross Income	Net
	2015-16	2016-17	2017-18	2017-18	2017-18
	£,000	£,000	£,000	£,000	£,000
DIVISION					
Public Health	1,282	1,290	1,653		1,653
Noble's Hospital	87,320	91,136	84,320	2,885	81,435
Tertiary Referrals	17,546	19,318	19,497		19,497
Mental Health	18,046	20,041	19,347	1	19,346
Government Catering Services	2,958	3,050	7,118	4,757	2,361
NI Contributions	(36,417)	(37,366)		38,500	(38,500)
Children & Family Services	14,350	15,202	16,266		16,266
Adult Services Area	25,063	28,852	35,196	5,849	29,347
DHSC Corporate Services	6,011	7,469	16,015	114	15,901
Primary Health Care Services	57,140	60,125	63,810	1,659	62,151
Occupational Health	307	462	630	90	540
NET EXPENDITURE	193,606	209,579	263,852	53,855	209,997

INCOME & EXPENDITURE - BY CATEGORY					
	Actual	Probable	Budget	Provisional Budgets	
	2015-16	2016-17	2017-18	2018-19	2019-20
	£,000	£,000	£,000	£,000	£,000
INCOME					
Taxation Income	36,520	37,463	38,606	39,761	40,951
Third Party Contributions	455		24	24	24
Operating Income	13,817	15,134	15,133	15,425	15,708
Other Non-Trading Income	57	93	92	92	92
TOTAL INCOME	50,849	52,690	53,855	55,302	56,775
EXPENDITURE					
Employee Costs	138,091	148,684	147,799	148,904	150,170
Infrastructure Costs	1,211	1,603	1,762	1,762	1,762
Transport Costs	4,675	4,819	4,594	4,594	4,594
Supplies & Services	25,355	25,132	25,411	25,658	25,596
Agency & Contracted Services	71,317	75,521	76,605	76,605	76,605
Loan Charges	7,165	8,539	9,261	10,296	10,222
Other	(3,359)	(2,031)	(1,580)	(1,893)	(1,848)
TOTAL EXPENDITURE	244,455	262,267	263,852	265,926	267,101
NET EXPENDITURE	193,606	209,577	209,997	210,624	210,326

The Programme for Government

This section sets out how the Department of Health and Social Care will contribute to the Programme for Government, which is the Isle of Man Government's plan for the next five years.

The Programme for Government has three strategic objectives and 20 outcomes that describe the future for the Isle of Man, and provide direction and focus for Departments, Boards and Offices as well as public service employees. It helps to ensure that the Government's policies and resources are aligned with the aims of the Council of Ministers.

To read the Programme for Government in full please click [here](#). In order to show how we're performing, a set of indicators have been identified that will measure the successful delivery of the Programme for Government. Progress against the indicators will be measured quarterly online at gov.im/performance

The following section details the outcomes that we are responsible for helping to achieve or report against, and the National Indicators used to measure progress. It also includes information on our operational indicators against the Programme for Government and our plans for delivery against the actions identified within it.

The outcomes we will help to achieve

OUTCOME	National Indicator(s)	Explanation	Measure
<p>We have affordable and accessible housing which meets our social and economic needs</p>	<p>Reduce the time that people wait for residential or nursing care</p>	<p>It's important that as people get older they have accommodation that meets their needs. If people don't have to wait as long for the right accommodation, they will be able to live more independently for longer. We will measure the length of time people are waiting for residential or nursing placement following a needs assessment.</p>	<p>Number of eligible people on the waiting list for residential or nursing care following needs assessment</p>
<p>We live longer, healthier lives</p>	<p>Increase the number of people regularly undertaking physical activity</p>	<p>We want people to live longer, healthier lives. This includes taking responsibility for their own health. A part of this is doing more exercise. We will measure the number of people who are doing the minimum recommended physical activity per week through the healthy lifestyles survey.</p>	<p>Percentage of adults achieving at least 150 minutes of physical activity per week in accordance with UK Chief Medical Officer (CMO) recommended guidelines on physical activity</p>
	<p>Reduce the number of people dying prematurely from preventable cancer and heart disease</p>	<p>Deaths from preventable cancer and heart disease are two of the biggest causes of death in the Isle of Man. We will measure these statistics through information provided by Public Health.</p>	<p>Under 75 mortality rates from cancers considered preventable and under 75 mortality rate from cardiovascular disease considered preventable</p>
	<p>Improve quality of life for people with long-term conditions</p>	<p>As people grow older, they need more support to help them live more independently with a good quality of life, particularly those with long term conditions. We will measure this information through the social attitude survey.</p>	<p>The quality of life for people with long-term conditions who report their quality of life is good, indicated through a range of questions</p>

	Increase healthy life expectancy	Healthy life expectancy is defined as 'Healthy life expectancy at birth: the average number of years a person would expect to live in good health based on contemporary mortality rates and prevalence of self-reported good health'. We will measure healthy life expectancy based on the lifestyle survey and mortality rates.	Healthy life expectancy at birth as measured by Public Health
We have improved the quality of life for children, young people and families at risk	Improve safety in care environments and protect people from avoidable harm	We need to look after the most vulnerable people in our society, particularly in care environments. We will measure the number of reported incidents in care environments.	The number of reported Safeguarding alerts in care homes
	Increase the number of families supported out of early help assistance	If we can support more families to become independent so that after an initial intervention they are able to return to a more stable life, then we will know that our early intervention is working. The Children's Services Partnership will provide this data.	Number of families entering early help that were supported out of assistance and remained so
	Maintain the number of children in care relative to current UK benchmark	We want to protect children who are vulnerable or at risk. Currently the number of children in care is below the UK average which is a good benchmark to maintain.	Number of children under 18 in care per 10k of population compared to England figures
	Maintain number of children with child protection plans relative to UK benchmark	It's important that vulnerable and at risk children have a plan in place which sets out the right level of intervention. Currently the number of children with child protection plans is below the UK average which is a good benchmark to maintain.	Number of children under 18 subject to a child protection plan per 10k of the population compared to England figures

The policies we will contribute towards and the measures which show whether we're making a difference

OUTCOME	POLICY STATEMENTS	KPI	Baseline	Target
We live longer, healthier lives	We will help everyone to take greater responsibility for their own health, encouraging good lifestyle choices	Maintain our uptake of adult screening programmes at current levels	Cervical 80%, Bowel 58%, Breast 72%	Cervical 80% Bowel 58% Breast 72%
		Increase in eligible population registered with GP online services	10%	20%
	We will help people to stay well in their own homes and communities, avoiding hospital and residential care wherever possible	Reduce emergency admissions at Noble's for people with long term or chronic conditions, where appropriate management in the community has been shown to reduce the need for unplanned hospital admissions. These include conditions like asthma, diabetes and epilepsy	16%	13% by April 2019
		Increase bed utilisation / occupancy levels at Ramsey District Cottage Hospital	71%	85-90%
		Reduce adult acute mental health bed occupancy	96%	85%
		Increase in 5 day discharge follow-up rate by Mental Health Services	36%	100%
	We will improve services for people who really need care in hospital	The hospital will achieve 85% aggregate performance for 2 week cancer waiting times by the end of March 2018, 93% by the end of March 2019	74%	85% - 2018 93% - 2019
		No patient will wait >52 weeks for elective inpatient surgery by the end of March 2018	14%	0%
	We will work to ensure that everyone receives good value health and social care services	Maintain spend against budget through delivery of the cost improvement plan	105%	100%
		Reduce by 10% the number of patients travelling to the UK for follow-up treatment and provide care where appropriate locally	6108	5497
We have improved the quality of life for	We will provide safeguards for people who cannot protect themselves	Maintain at current level the proportion of people who use Adult Services who say that those services have made them feel safe and secure	97%	97%
		We will meet all compliance standards for milestones within the adult protection procedures	70%	75%

children, young people and families at risk		Number of Looked After Children (in the care of the Department, or where the Department provides accommodation for continuous period of more than 24 hours) to be maintained within target	0.54 to 0.6%	0.54 to 0.6%
		Number of children subject to a Child Protection Plan to be maintained within target range	0.38 to 0.52%	0.38 to 0.52%

Actions in the Programme for Government delivered by this Department

Outcome	Action	Political Sponsor	Target Delivery Date
We have affordable and accessible housing which meets our social and economic needs	Investigate how to ensure we have accommodation that can meet the needs of an ageing population including 'care' and 'extra care' housing, and nursing and residential homes	Kate Beecroft, MHK Minister	TBC
We live longer, healthier lives	Continue the external peer review process of the hospital and implement the recommendations	Jason Moorhouse, MHK	Mar-19
We live longer, healthier lives	Move more services from the hospital into the community so care is provided closer to peoples' homes	Ann Corlett, MHK	Mar-21
We live longer, healthier lives	Define the essential services always provided in health and social care and be clear about those that aren't	Jason Moorhouse, MHK	Mar-19
We live longer, healthier lives	Continue to digitally transform the hospital and health and care services more generally	Kate Beecroft, MHK Minister	Mar-21
We live longer, healthier lives	Define the services which will be provided on-Island and those which will be provided off-Island	Jason Moorhouse, MHK	Mar-19
We live longer, healthier lives	Reduce waiting times for operations	Kate Beecroft, MHK Minister	Mar-18
We live longer, healthier lives	Publish hospital waiting lists by April 2017	Kate Beecroft, MHK Minister	Apr-17
We live longer, healthier lives	Implement the Mental Health & Wellbeing Strategy	Ann Corlett, MHK	Dec-20
We live longer, healthier lives	Consider and recommend funding options for residential and nursing care	Clare Bettison, MHK	Jul-18
We live longer, healthier lives	Improve the way we communicate with the public about the way our health and care services are provided	Jason Moorhouse, MHK	Apr-21
We live longer, healthier lives	Improve governance and accountability in the way we provide health and care services	Jason Moorhouse, MHK	Apr-18
We have improved the quality of life for children, young people and families at risk	Put the Safeguarding Children Board on a statutory footing through legislation, and consider putting in place a statutory board for safeguarding adults	Clare Bettison, MHK	May-18
We have improved the quality of life for children, young people and families at risk	Investigate and make proposals for an independent health and social care regulator	Kate Beecroft, MHK Minister	Jan-18