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Introduction

Introduction from Minister for Health and Social Care David Ashford, MHK

As a department we should be focused on continual improvement - always pushing ourselves to deliver our services at the next level. I firmly believe that here in the Isle of Man we have a unique opportunity to drive forward changes that can deliver a forward looking, new and innovative way of delivering Health and Social Care.

In order to do that we need to have a robust service delivery plan in place to monitor our progress against both the Programme for Government and the wider five year strategy approved by Tynwald in 2015.

By working in partnership we can ensure that our vision becomes a reality and deliver on our ambition to provide a forward looking Health and Social Care system fit for the $21^{\rm st}$ Century of which all of us can be proud.

Introduction from Chief Executive Malcolm Couch

The Department wants to provide the people of the Isle of Man with the best island-based health and care service. To achieve this, and to build on what is good already, we must make continuous improvement a key aspect of 'business as usual'.

We should always provide the right care and support, at the right time, in the right place: delivered by professionals who are skilled, caring and who enjoy their work.

Our services in the Isle of Man should be based on a partnership between the people (and their carers) using them and the professionals who deliver them.

Many changes are happening in the Department, flowing from our five year strategy and the Programme for Government; and this year's objectives appear later in this plan.

When working with the people using our services and with each other, my colleagues will show our CARE values of **commitment**, **appreciation**, **respect** and **excellence**.

DHSC Minister and Members











Programme for Government 2018/19

The Programme for Government has three strategic objectives and 20 outcomes that describe the future for the Isle of Man, and provides 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 <u>click here</u>.

The following section details the outcomes that the Department of Health and Social Care will contribute towards during 2018/19. It sets out the National Indicators, Key Performance Indicators and specific Actions which underpin delivery of the outcomes; performance of which will be measured quarterly online at www.gov.im/performance

Programme for Government Outcomes

OUTCOME	National Indicator(s)	Explanation	Measure
We have affordable and accessible housing which meets our social and economic needs	Reduce the time that people wait for residential or nursing care	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.	Number of eligible people on the waiting list for residential or nursing care following needs assessment
	Increase the number of people regularly undertaking physical activity	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.	The 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
	Reduce the number of people dying prematurely from preventable cancer	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.	Under 75 mortality rates from cancers considered preventable
We live longer, healthier lives	Reduce the number of people dying prematurely from heart disease	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.	Under 75 mortality rate from cardiovascular disease considered preventable
	Improve the health related quality of life of the population	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 through information provided by Public Health	Increasing the average health status score of adults using survey responses to questions covering 5 dimensions: mobility, self-care, usual activities, pain/discomfort, anxiety/depression

	Increase healthy life expectancy	If the Programme for Government is succeeding, then we will be living longer, healthier lives. 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
	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
We have improved the quality of life for children, young people and families at risk	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 UK 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 UK figures

Programme for Government Key Performance Indicators

OUTCOME	POLICY STATEMENTS	KPI	Baseline	Target
	We will help everyone to take greater responsibility for their	Maintain our uptake of adult screening programmes at current levels	Cervical – 80% Bowel – 63% Breast – 72%	Cervical – 80% Bowel – 63% Breast – 72%
	own health, encouraging good lifestyle choices	Maintain percentage of eligible population registered with GP online services	21%	21%
	We will help people to stay	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
	well in their own homes and communities, avoiding	Maintain bed utilisation / occupancy levels at Ramsey Cottage Hospital	86%	85-90%
	hospital and residential care	Reduce adult acute mental health bed occupancy	92%	85%
	wherever possible	Increase in 5 day discharge follow-up rate by Mental Health Services	90%	100%
We live longer, healthier lives		Older people will be transferred to Community Social Work team caseloads within three months of being on a Hospital Social Work team caseload	10%	90%
	We will improve services for	The hospital will achieve 93% aggregate performance for 2 week cancer waiting times	89%	93% - 2019
	people who really need care in hospital	No patient will wait >52 weeks for elective inpatient surgery by the end of March 2019	13.2%	0%
	·	ED attendances less than 4 hours from arrival to admission, transfer or discharge	79%	85%
		ED attendances less than 6 hours from arrival to admission, transfer or discharge	92.8%	95%
		Reduce ED mean waiting time	156 minutes	135 minutes
	We will work to ensure that	Maintain spend against budget through delivery of the cost improvement plan	104.3%	100%
	everyone receives good value health and social care services	Reduce by 10% the number of patients travelling to the UK for outpatient first attendances and follow up treatment and provide care where appropriate locally	7,299	6,569

		In relation to adult safeguarding alerts meeting the threshold for further investigation, increase the proportion of cases where the views and wishes of the person concerned (and their carers when relevant) were sought and documented	75%	100%
We have improved the	We will provide safeguards	Maintain the proportion of adult safeguarding alert cases meeting the threshold for further investigation where the person concerned feels safer after the intervention	87%	87%
quality of life for children, young	for people who cannot protect themselves	We will meet all compliance standards for milestones within the Safeguarding adult's policy and procedures	81%	85%
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	5.0 to 5.9 per 1,000	5.0 to 5.9 per 1,000
		Number of children subject to a Child Protection Plan to be maintained within target range	3.8 to 5.2 per 1,000	3.8 to 5.2 per 1,000

Programme for Government Actions

Outcome	Action	Political Sponsor	Target Delivery Date
We have more responsive legislation and regulation	Embed a robust governance framework for Research and Development activity, whilst improving the quality of research applications and associated outcomes	Jason Moorhouse, MHK	Mar-20
We have affordable and accessible housing which meets our social and economic needs	Investigate and report 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	David Ashford, MHK Minister	Dec-18
We live longer, healthier lives	Continue the external peer review process (WMQRS) of health services and implement the recommendations	Clare Bettison, 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	Deliver clear legal frameworks for all essential Health and Social Care services	Jason Moorhouse, MHK	Mar-21
We live longer, healthier lives	Continue to digitally transform the hospital and health and care services more generally	David Ashford, 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	Clare Bettison, MHK	Mar-19
We live longer, healthier lives	Implement the Mental Health & Wellbeing Strategy	Ann Corlett, MHK	Dec-20
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	Mar-21
We live longer, healthier lives	Improve governance and accountability in the way we provide health and care services	Jason Moorhouse, MHK	Mar-19
We live longer, healthier lives	Design and deliver a suite of core data sets to underpin the core work streams	David Ashford, MHK Minister	Mar-21
We live longer, healthier lives	Develop and implement the Integrated Care Strategy	Ann Corlett, MHK	Mar-21
We live longer, healthier lives	Become an employer of choice in healthcare	David Ashford, MHK Minister	Mar-21
We have improved the quality of life for children, young people and families at risk	Ensure that all Health and Social Care services have the appropriate levels of Regulation and Inspection	David Ashford, MHK Minister	Mar-21
We have improved the quality of life for children, young people and families at risk	Put the Safeguarding Children Board on statutory footing through legislation, and consider putting in place a statutory board for safeguarding adults	Ann Corlett, MHK	May-18

About the Department

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.

The 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%.

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 2018-19 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 £5.5m for 2018/19 to £271,495,000 gross. However, even to meet the new target, efficiency savings of nearly £7.5m 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 currently provided. Achieving these efficiency savings, whilst 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.

<u>Independent Review of the Isle of Man Healthcare System:</u>

On 16 January 2018, Tynwald, the Isle of Man's parliament, approved the Treasury Minister's motion, which was as follows:

That Tynwald notes the financial pressures for the future delivery of Health and Social Care services, and supports:

- a) The Council of Ministers commissioning and receiving an independent review to determine change options for service delivery and funding to provide a modern, fit for purpose healthcare system for the Island; and
- b) That the Council of Ministers report to Tynwald by January 2019 with recommendations for the future of the Healthcare Service.

The Review will build upon previous work, including: Beamans (2013); West Midlands Quality Review Service reports (2015-2018); and, the Tynwald-approved Department of Health and Social Care five year strategy (2015).

Specifically, the Review will consider the goals of the strategy and make recommendations, as necessary, to ensure that they remain valid and current. In addition, the Review will assess progress in delivering the goals of the strategy, report on where and why progress has been difficult and recommend additional actions, as necessary, to enable successful implementation.

The Review will run for a period of 12 months from April 2018 with an interim statement presented to Tynwald in January 2019 and a final report submitted to Tynwald in May 2019. The final report will be a public document that will set out recommendations, policy options and a summary of the evidence that has been gathered in reaching these conclusions.

To read the Terms of Reference for the Independent Review in full please click here.

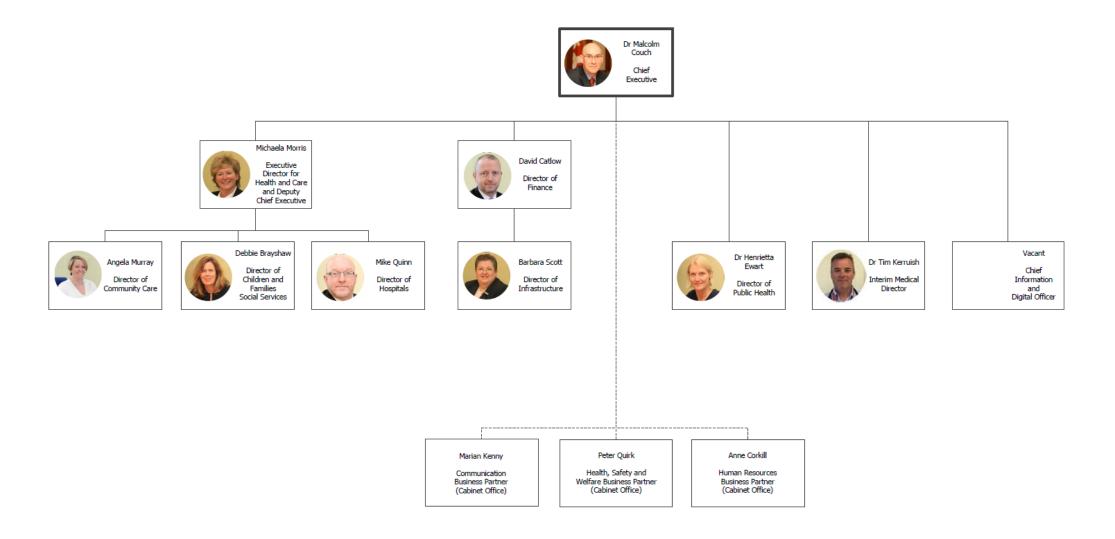
Our Budget

The following tables show how we spend our current budget:

INCOME & EXPENDITURE – BY CATEGORY						
	Actual	Probable	Budget	Provisional Budgets		
	2016-17	2017-18	2018-19	2019-20	2020-21	
	£,000	£,000	£,000	£,000	£,000	
INCOME						
Taxation Income	38,010	38,600	39,749	40,939	42,156	
Third Party Contributions	1,156	1,173	23	23	23	
Operating Income	14,261	14,933	15,603	15,885	16,199	
Other Non-Trading Income	45	15	13	13	15	
TOTAL INCOME	53,472	54,721	55,388	56,860	58,394	
EXPENDITURE						
Employee Costs	150,864	152,815	151,159	155,929	157,445	
Infrastructure Costs	1,659	1,868	1,663	1,663	1,663	
Transport Costs	4,941	4,947	4,804	4,804	4,804	
Supplies & Services	25,164	26,969	25,907	25,845	25,845	
Agency & Contracted Services	74,916	78,547	79,921	79,921	79,921	
Loan Charges	8,539	9,261	9,892	9,968	10,047	
Other	(3,028)	(1,642)	(1,851)	(1,806)	(1,760)	
TOTAL EXPENDITURE	263,054	272,765	271,495	276,325	277,965	
NET EXPENDITURE	209,583	218,044	216,107	219,465	219,571	

NET EXPENDITURE – BY DIVISION					
	Net	Net	Gross	Gross	
	Actual	Probable	Spend	Income	Net
	2016-17	2017-18	2018-19	2018-19	2018-19
	£,000	£,000	£,000	£,000	£,000
DIVISION					
Chief Operating Officer's Office	683	736			
Public Health	1,309	1,239	1,798		1,798
Noble's Hospital	92,482	93,891	90,606	2,933	87,673
Tertiary Referrals	19,752	20,931	19,500		19,500
Mental Health	20,246	19,412	20,281		20,281
Administration and Grants	140				
Ambulance Service	3,352				
Practitioner Services	37,795				
Prison Health Service	417				
Ramsey Hospital	3,963				
Allied Health Professionals	5,314				
Government Catering Services	3,262	3,512	5,085	3,021	2,064
NI Contributions	(37,908)	(38,500)		39,665	(39,665)
Children & Family Services	15,162	15,314	15,857		15,857
Adult Services Area	28,004	28,926	35,970	5,849	30,121
DHSC Corporate Services	6,765	11,789	13,450	84	13,366
Primary Health Care Services		60,794			
Occupational Health					
Commissioning & Contracted Services			43,960	3,636	40,324
Digital Transformation			1,006		1,006
Community Health Care Services	8,846		23,983	200	23,784
NET EXPENDITURE	209,583	218,044	271,495	55,388	216,107

DHSC Organisational Chart



Our Strategy: 5 Years, 5 Goals

A number of our strategic objectives are captured within Programme for Government as shown above; the following section sets out our additional objectives for 2018/19 in pursuit of delivering the five goals of our five year strategy.



Greater Responsibility

We will help everyone to take greater responsibility for their own health, encouraging good lifestyle choices.

Objectives for 2018/19:

- Ensure delivery of quality assurance and accountability review for all current screening programmes
- o Complete needs assessment into children's oral health
- Develop programmes aimed at reducing childhood obesity and improving children's oral health; drawing on funds from the Soft Drinks Industry Levy



More Care in the Community

We will help people to stay well in their own homes and communities, avoiding hospital or residential care whenever possible.

- Development of Community Wellbeing services including Care Companions in line with the DHSC Strategy for Integrated Care
- o Develop sustainable plan for GP out of hours services
- Expand the scope of the Adult Social Work team to ensure care is not limited to those who have Learning Difficulties or Mental Health problems
- o Continue to reshape Learning Disability Services in line with the Learning Disability Strategy 2014-2019
- Move appropriate paediatric activity from the hospital setting as an outreach service, provided in the community
- o Development of older persons integrated hub service pilot
- o Complete merger of 3 divisions into Directorate of Community Care
- o Put in place a shared care agreement between the hospital and GP surgeries to determine which services will be

- moved to GP care
- Complete Phase 1 of the Eastcliffe project; relocating Day Services for Adults with Learning Disabilities to the Noble's Complex
- o Subject to full planning approval, commence development of the Summerhill View older persons care facility



Improve Hospital Services

We will improve services for people who really need care in hospital.

- Develop Ramsey Cottage Hospital into a vibrant community hospital with elderly care/rehabilitation facility, outpatient clinics and day case theatre
- Review the clinical model delivered by the ambulance service to ensure that it is at the forefront of modern urgent care delivery
- Building on Digital Health Record Project's digitisation of the medical records library, reduce future paper record production for Noble's inpatients through the introduction of digital clinical noting practices and procedures across the acute care setting (CAN)
- Develop a high quality dermatology and skin service that ensures that all patients with skin complaints are seen and treated in accordance with clinical guidelines
- Evaluate the introduction of Histopathology (the study of changes in tissues caused by disease) Telemedicine solutions
- o Improve access to radiology services through the implementation of sustainability plan
- \circ Create 24/7 access to stroke thrombolysis treatment through the use of telemedicine
- Develop and enhance quality management systems within the medical laboratory in pursuance of the ISO 15189:2012 standard (recognises quality and level of competence in medical laboratories)
- Redesign the pathway for the admission of the acute medical patient from Emergency Department into hospital setting
- \circ Redesign the chemotherapy clinic space to accommodate the increase in patients receiving treatment on the Island
- o Improve patient safety through the system upgrade of the infection, prevention and control software

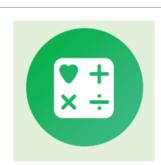


Protect Vulnerable People

We will provide safeguards for people who cannot protect themselves.

Objectives for 2018/19:

- o Development of an integrated (4 tier) Autism pathway
- o Development of an integrated MHS Forensic service with police/probation/prisons
- Work with colleagues in Department of Education, Sport and Culture to develop an integrated pathway for children with disabilities
- Improve safety and risk management practices through the replacement of the incident reporting and tracing application
- o Complete investigations into the feasibility of registering social care workers



Value for Money

We will work to ensure that everyone receives good value health and social care services.

- Improve the quality of financial information Provide more detailed, timely financial information to aid decision making processes and allocation of resources
- o Deliver savings from the Tertiary Services budget through the implementation of Cost Improvement Plans
- o Explore opportunities to repatriate as much activity as possible from the UK to be delivered safely on island
- \circ Explore opportunities to generate a greater level of hospital income through commercial enterprise
- Develop and implement Medicines Optimisation Programme which will improve patient safety whilst also delivering effective prescribing and cost improvement programme across the Department
- o Adopt a more robust approach to commissioning services from UK providers
- Development of Directorate wide Commissioning process for Community Care



Supporting the Delivery of the Strategy

There are a number of other work programmes taking place throughout 2018/19 which are above and beyond what's committed to in the Department's strategy; these priorities will enable service areas to evolve to better reflect the commitments of the strategy going forward.

- Ensure information across the business is delivered in a timely, accurate and consistent manner through the development of an information management strategy and implementation plan
- Support the facilitation of safe, cost-effective and responsive health and social care research projects through the development of a research strategy and implementation plan
- o Implement the new Isle of Man Research Ethics Committee (IOMREC) to provide ethical review for health and social care research
- o Improve communication channels by enhancing online presence including the introduction of a new website for health and care professionals and external stakeholder groups and updating our existing public webpage
- o Establish an effective communication plan for both internal and external stakeholders
- o Establish a functional Programme Management Office to support delivery of the Department's strategic objectives
- o Determine future commissioning arrangements for third sector organisations
- To produce a premises development plan for General Medical Practice; securing additional premises for Peel Practice as a priority
- Working with the Island's dentists to consider options for reforming the current dental contractual system by 1 April 2019
- To build a 'Pod', funded by Bridge the Gap Charity, on the Noble's site which will be jointly used by DESC and DHSC for support of young people with life limiting illnesses
- \circ Conclude investigations and make proposals for the implementation of an integrated care record
- Consider options for a package of digital solutions that provide all service users and pathways with a single, standard end-to-end electronic patient referral system

Our CARE Values

represents what is it like in the Department of Health and Social Care; who we are, how we want to be, and how we strive to provide safe, effective, caring, responsive, efficient and well led health and social care services to people in the Isle of Man.

We are:

Committed

We are **committed** to our **community** and **each other**. We **work together** to **understand** individual **needs** and enable **access** to the **best** customer-centric **care** services.

Appreciative

We **appreciate** each **other**, other points of **view** and **ways** of **working**. We **communicate**; let people **speak** and make sure we **listen**.

Respectful

We have **respect** and are **ethical** in everything we do. We **speak up** and do the **right thing**. We act with **integrity**, are **trusting** and are **trusted**.

Excellent

We thrive on **excellence**, **innovation**, and continuously **developing** ourselves and **best practice**. We **debate**, **challenge** and embrace **change**.