

Key messages

Reshaping care for older people

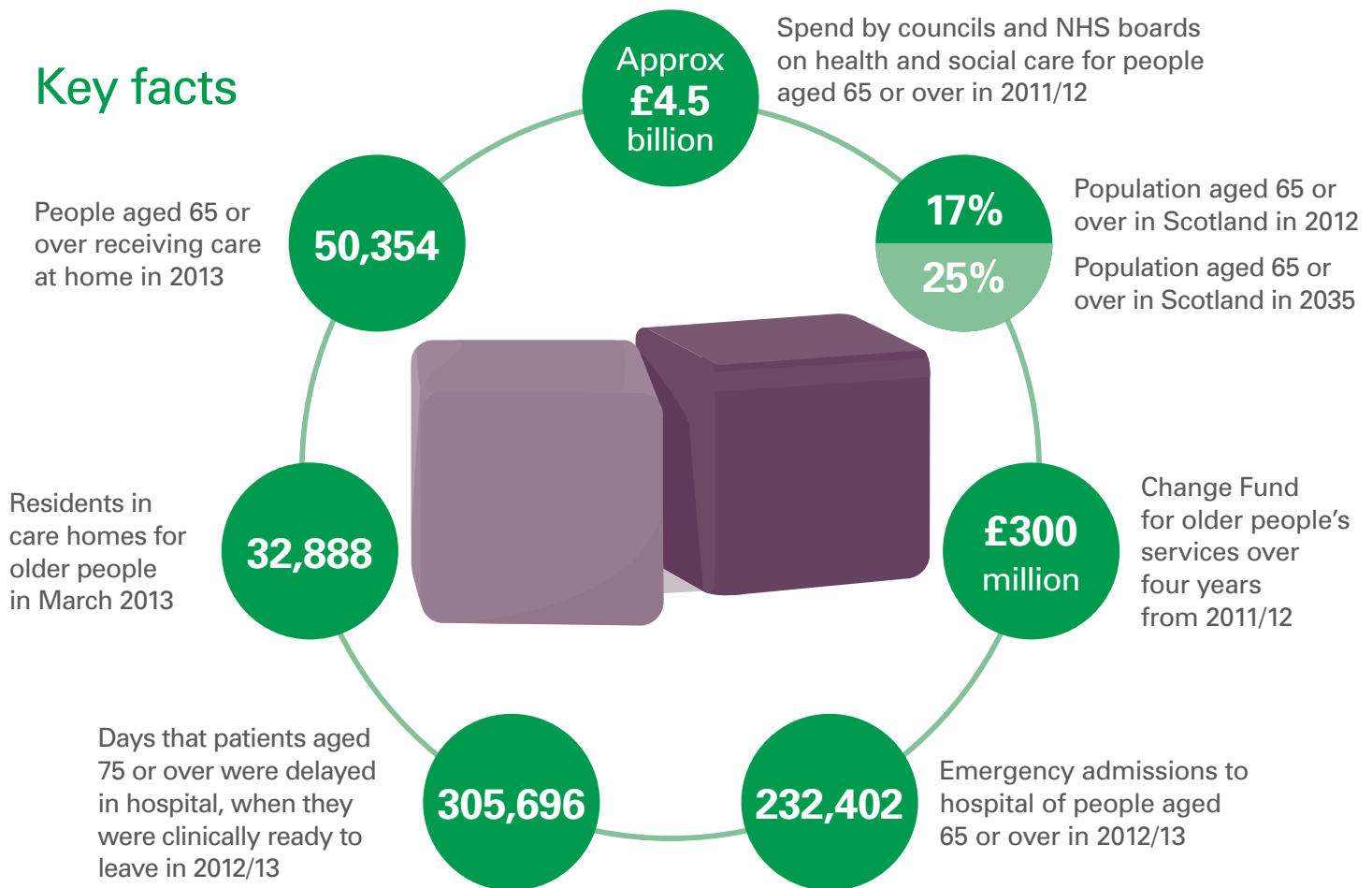


 ACCOUNTS COMMISSION

 AUDITOR GENERAL

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Key facts



What's this report about?

In 2010, the Scottish Government and the Convention of Scottish Local Authorities (COSLA) launched a ten-year change programme, Reshaping Care for Older People (RCOP). This aims to improve the quality and outcomes of care, and to help meet the challenges of an ageing population.¹ RCOP builds on a number of previous policies and focuses on giving people the support they need to live independently in their own home and in good health for as long as possible. In 2011/12, the Government introduced a fund, the Change Fund, specifically to help these organisations take forward this area of policy.

This audit reviews progress with RCOP three years into a ten-year programme, and considers the impact of the Change Fund that has been in place for two years of the four years it is available. This report is timely given current plans to integrate health and social care services. Implementing our recommendations will help the Scottish Government, NHS boards and councils increase the pace of change.

Key messages

- 1 Reshaping Care for Older People (RCOP) is a complex programme of major transformational change affecting most health and social care services. Implementing the programme is challenging as organisations must continue to meet people's current care needs and plan future services while managing pressures on existing services. Strong national and local leadership is needed to take this significant agenda forward.
- 2 In 2011/12, the NHS and councils spent approximately £4.5 billion on care for older people. More needs to be done to target resources on preventing or delaying ill health and on supporting people to stay at home. There is little evidence of progress in moving money to community-based services and NHS boards and councils need clear plans setting out how this will happen in practice. To implement RCOP successfully, partners need to make better use of data, focus on reducing unnecessary variation and monitor and spread successful projects.

3 The Change Fund represents 1.5 per cent of all spending on older people in 2011/12 and this has led to the development of a number of small-scale initiatives. Initiatives are not always evidence-based or monitored on an ongoing basis and it is not clear how successful projects will be sustained and expanded. The Change Fund has been successful in bringing together NHS boards, councils and the third and private sectors to develop and agree joint plans to improve care for older people in their local area.

4 For several years, there has been a greater focus on improving quality of care for older people in Scotland and providing services in a joined-up way, but progress has been slow. National performance measures have not kept pace with policy changes and a greater focus on outcomes is needed. There is no clear national monitoring to show whether the policy is being implemented successfully and what impact this is having on older people.

Key recommendations

The Scottish Government should:

- set out clear measures for success when a new policy is introduced. The Government should monitor progress and publicly report on performance against these measures and use them to underpin local commissioning and scrutiny. These indicators should include measures that cover outcomes, quality, community services and services to prevent or delay ill health
- make information on the quality of care for older people across Scotland more accessible and easier to understand. In doing this, it should continue to support the development of joint inspections by Healthcare Improvement Scotland and the Care Inspectorate, particularly in light of plans to integrate health and social care services.

The Scottish Government should work with NHS boards, councils and their partners to:

- improve and maintain data on cost, activity and outcomes for health and care services, particularly community-based services where there are key gaps. This information matters as

it helps local decision-makers to decide where to spend, and not to spend, public money. It should be set out clearly as part of joint strategic commissioning plans

- do more to understand the reasons why activity and spending on services for older people vary across Scotland. They need to work with local practitioners to help:
 - use information to benchmark activity and costs
 - identify areas for improvement
 - identify good practice
- set out clear plans for how resources will shift to community services in the short and longer term.

NHS boards, councils and their partners, supported by the Joint Improvement Team and other national bodies, should:

- make better use of available data, focusing on understanding reasons for variation in activity and spend, and reducing unexplained variation
- monitor and spread successful projects by ensuring that initiatives aimed at improving services for older people have evaluation built in from the start to show how cost effective they are and how they are performing
- identify initiatives that have had a positive impact on older people and:
 - specify how much they cost and the impact on other services
 - be clear how they can be sustained in the longer term.

What happens now?

The full report can be accessed on our website www.audit-scotland.gov.uk We will present our report to the Scottish Parliament's Public Audit Committee. The Committee can call relevant people at the Scottish Government and other public bodies to discuss the issues our audit has raised.

We will also monitor progress against our recommendations through our audit work.

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www.audit-scotland.gov.uk 

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