INVERCLYDE HSCP
Health and Social Care Partnership

Strategic Plan
2019 - 2024

Inverclyde
Health and Social Care Partnership

NHS Greater Glasgow and Clyde

Inverclyde council

Our vision

Inverclyde *is a caring and compassionate community working together to address inequalities and assist everyone to live active, healthy and fulfilling lives.*

Improving lives

Contents:

Welcome

We are pleased to present the second strategic plan for Inverclyde Integrated Joint Board which has been developed by the Health and Social Care Partnership (HSCP) and the Strategic Planning Group, in consultation with the people of Inverclyde.

There have been significant improvements in services over the last three years, however there is still more to do. This plan outlines our priorities and our commitment to improving outcomes for Inverclyde people over the next five years.

Our HSCP has been set up in response to the requirements of the Public Bodies (Joint Working) (Scotland) Act 2014, often referred to as the integration legislation, but here in Inverclyde, we have had integrated services since 2010. Integration was acknowledged as the best way forward so that health and care needs can be delivered in a more joined up way, and so that people will be cared for closer to home. Since integration in Inverclyde we have had a clear ambition to improve the life of the people of Inverclyde. The benefits of integration are already evidenced in Inverclyde with excellent performance in a number of areas. Over the next five years we intend to maintain our high performance and build on it. Nurturing Inverclyde - getting it right for every child, citizen and community - is the long established vision of the council and the Alliance Board. With this is mind, our strong history means we have firm foundations to take forward our vision.

Inverclyde is a caring and compassionate community working together to address inequalities and assist everyone to live active, healthy and fulfilling lives.

The vision was created by Inverclyde people, including carers, service users and Inverclyde HSCP staff. It reflects the caring nature of Inverclyde and a unique challenge of intergenerational inequalities - often reinforced by persistent poverty and lack of good quality jobs - and states our commitment to ensuring we work together to help people stay healthy for longer. We recognise that being in regular and satisfying employment is one of the biggest single factors in promoting equality, so this plan also underscores our commitment to working across Inverclyde partners to tie economic improvement to improved health and social care outcomes. This approach puts the child, citizen and community at the centre of our thinking, planning and our actions.

This plan aims to set out the improvements we will make, based on these key values and what local people have told us that they want. The plan reflects these values, and describes what will change over the next five years. The Integration Joint Board (IJB) will oversee the plan's progress, and we will report our business on our website page.

Simon Carr
Chair of the Integration Joint Board

Section 1


VISION
STATEMENT
your voice
INVERCLYDE
HSCP
Health and Social Care Partnership
Your COMMUNITY, Your IDEAS

The Integration Joint Board

Inverclyde Integration Joint Board (IJB) is a distinct legal body which was created by Inverclyde Council and NHS Greater Glasgow and Clyde, and approved by Scottish Ministers in line with the legislation.

The IJB is a decision-making body that meets regularly to discuss, plan and decide how health and social care services are delivered in Inverclyde. All IJB decisions are in line with the strategic plan which is why it is such an important document. Membership of the IJB is wide, consisting of:

- Four elected members (councillors)
- Four NHS non-executive directors
- Carer representative
- Service user representative
- Staff-side representative x 2
- Clinical director
- Chief nurse
- Chief social work officer
- Acute sector clinician
- Third sector representative x 2
- Chief officer
- Chief financial officer

In line with the legal requirements, the IJB established a Strategic Planning Group with wide representation from partners as noted below including carers and community representatives, who are responsible for shaping and monitoring the effectiveness of the plan.

The Strategic Planning Group is chaired by the chief officer and has representation from:

- Service users
- Carers
- People involvement advisory network
- The local third / voluntary sector
- The Independent sector
- The acute hospitals sector
- Social work services
- Community health services
- Primary care
- Nursing
- Allied Health Professionals
- Inverclyde Housing Associations Forum
- Inverclyde Council Strategic Housing Services
- Staff-side
- Inverclyde Community Planning Partnership

It is important that we engage with people in their own communities so we have locality and local plans that link with community planning partners.

Strategic Context

Over the past few years, the Scottish Government has enacted key legislation and published a number of policy documents that set the strategic direction for Health and Social Care.

Legislation includes:

- The Public Bodies (Joint Working) (Scotland) Act, 2014
- The Children and Young People (Scotland) Act, 2014
- Housing (Scotland) Act, 2014
- Community Empowerment (Scotland) Act 2015
- The Carers (Scotland) Act, 2016.

Appendix 3 shows the complex landscape of policy within Health and Social Care.

Together the legislation and policies aim to shape a whole system of health and social care, providing seamless care for everyone who needs it, with a focus on better outcomes for the people who use services, and services being delivered in the right setting, at the right time, and by the right professionals.

Regional Planning

At regional level, the Scottish Government has commissioned Regional Delivery Plans to be developed, taking a whole-system approach to the delivery of health and social care for each of three distinct regions (North, East and West). This work aims to deliver the National Clinical Strategy (2015) and the Health and Social Care Delivery Plan (2016), ensuring better health, better care and better value. Inverclyde is part of the West of Scotland Region, which is covered by five NHS Boards (including NHS Greater Glasgow and Clyde), 16 local authorities and 15 health and social care partnerships as well as the Golden Jubilee Foundation.

Moving Forward Together

Inverclyde HSCP has been a key partner in the development of Moving Forward Together (MFT). MFT is a programme of work that brings together the Greater Glasgow and Clyde NHS Board and Acute Hospitals Sector, as well as the six HSCPs that fall within the NHS Board catchment (Inverclyde; Glasgow City; Renfrewshire; East Renfrewshire; East Dunbartonshire and West Dunbartonshire). MFT will develop and deliver a transformational change programme, aligned to national and regional policies and strategies. This is our first venture as a whole system to develop the future strategy, essentially, health and social care services need to modernise to keep pace with the changes that are taking place in technology; innovations in supported self-care, and the integration of community health and social work services. MFT describes how NHSGGC will deliver across all health and social care services, with particular focus on the benefits of integration at local levels. Good health is fostered by a range of supports, not just health services, and MFT recognises this. The MFT programme emphasises quality and the need to deliver safe, effective, person-centred and sustainable care to meet the current and future needs of our population. The programme reinforces the need to design support and care around specific needs of individuals and different segments of our population, not around existing organisations and services. There will be continuous engagement opportunities to involve communities in developing, leading and influencing strands of this work. Further information on MFT can be found on our website using the link in Appendix 3.

Local Outcome Improvement Plan

As part of the Community Planning element of the Community Empowerment (Scotland) Act 2015, the Inverclyde Alliance is responsible for a Local Outcome Improvement Plan (LOIP). Further information on LOIP can be found on our website using the link in Appendix 3.

The LOIP demonstrates a clear, evidence-based and robust understanding of local needs, circumstances and aspirations of local communities. It also sets out which communities experience significantly poorer outcomes. Inverclyde's LOIP has been informed by both the results from the 'Our

Place Our Future' survey and a comprehensive strategic needs analysis. The plan identifies three strategic priorities that the Alliance Board will focus on:

Population - Inverclyde's population will be stable and sustainable with an appropriate balance of socio - economic groups that is conducive to local economic prosperity and longer term population growth.

Inequalities - There will be low levels of poverty and deprivation and the gap between the richest and poorest members of our communities will be reduced.

Environment, Culture and Heritage - Inverclyde's environment, culture and heritage will be protected and enhanced to create a better place for all Inverclyde residents and an attractive place in which to live, work and visit.

Inverclyde HSCP Strategic Approach

We are keen to deliver improvements in the spirit of the legislation and policy guidance. Essential to that is our commitment to working closely with our communities and other partners, to deliver better outcomes through Regional Planning, Moving Forward Together, Inverclyde Alliance Board Community Plan and our own Strategic Plan (2019 - 24).

This plan sets out our roadmap to reshaping health and social care, taking full account of the wishes, priorities and assets of local people. The Market Facilitation and Commissioning Plan, Primary Care Improvement Plan and the Inverclyde People Plan should all be regarded as supplementary to this plan.

Market Facilitation and Commissioning Plan

The Market Facilitation and Commissioning Plan represents the communication we have had with service providers, service users, carers and other stakeholders about the future shape of our health and social care market. By implementing the plan we will ensure we are being responsive to the changing needs of Inverclyde service users. To deliver our commitment we need to ensure the people who use our services can choose from a number of care and support providers and have a variety of creative support options available to them. To deliver new provision in Inverclyde, we recognise that commissioners and providers need to build improved arrangements for working together, to improve quality, increase choice and deliver a more responsive and efficient commissioning process which involves our third sector partners. This mature and constructive partnership working is critical to ensuring that we create an innovative and flexible approach to service delivery for our communities.

Primary Care Improvement Plan

In 2017 a new GP contract was agreed for Scotland– this outlines how GPs and the wider multi-disciplinary team will deliver healthcare which reflects changing demographics and developments in the roles of other professionals such as nurses and physiotherapists. The role of the GP is changing; supported by a wider multi-disciplinary team, GPs will focus their unique skills on the most complex patients including those with multiple long term conditions and those with palliative care and at the end of life. Inverclyde has been at the forefront of these changes delivering a successful pilot (New Ways) allowing us to ensure that this new model is safe, effective and acceptable to the people of Inverclyde. These additional staff, along with the development of key roles such as receptionists being involved in improved signposting means that we can offer access to the skills of the most appropriate professional, in the right place, when it is most needed. This is supported by our 'Choose the Right Service' campaign.

Inverclyde People Plan

As a requirement of the integration legislation each HSCP is required to produce a Workforce Plan. In Inverclyde, the decision was taken to adopt a more inclusive approach in recognising that to deliver our aims set out in our Strategic Plan our 'workforce' extends beyond staff within the HSCP. There are many individuals and organisations that make up the overall workforce delivering health and social care in Inverclyde for example unpaid carers and volunteers, providers in the third and independent sectors, as well as wider roles that indirectly support the delivery of good care and ultimately better outcomes. The People Plan incorporates a four tier structure to help us identify the resource and helps us achieve effective succession planning for our people in the future.

Our Vision, Values and Big Actions

This strategic plan outlines our ambitions and reflects the many conversations we have had with the people across Inverclyde, our professional colleagues, staff, those who use our services including carers and our children and young people across all sectors and services.

We fully support the national ambition of ensuring that people get the right care, at the right time, in the right place and from the right service or professional. We strongly believe that integration will offer many different opportunities to reflect on our achievements and what we can improve on to benefit the local people and communities of Inverclyde.

Inverclyde HSCP is built on our established integration arrangements and our vision, values and six 'Big Actions' have been shaped through a wide range of mechanisms of engagement, to reach as many local people, staff and carers as possible. We have also undertaken targeted engagement with the children and young people of Inverclyde to ensure that their voices are heard. Our vision is:

'Inverclyde is a caring and compassionate, community working together to address inequalities and assist everyone to live active, healthy and fulfilling lives'.

The Strategic Planning Group also built on the previous plan (2016-19) when shaping this new plan. The June 2018 review of the previous plan showed that there are a number of areas where Inverclyde's performance is excellent, and there are a number of actions that are still in progress.

Following on from our last strategic plan we are still committed to our ambition 'Improving Lives'. The review of our previous Strategic Plan (2016-19) identified a number of commitments that were still to be fully delivered, including:

- Full implementation of the requirements of the Carers (Scotland) Act 2016
- Review of treatment rooms
- Learning Disability Services redesign
- Allied Health Professionals (AHP) review
- Full implementation of the Primary Care Improvement Plan
- Development of an Inverclyde Dementia Strategy
- Addictions Services review
- Community Justice Partnership review
- Development of a cross-cutting public health approach
- Further development of Compassionate Inverclyde.

These commitments are underway, and on track to be delivered within their timescales, and are reflected in the six 'Big Actions'. Our vision is underpinned by these 'Big Actions' and the following values based on the human rights and wellbeing of:

- Dignity and respect
- Responsive care and support
- Compassion
- Wellbeing
- Be included
- Accountability

The first five of these align with the National Care Standards, and our HSCP staff added Accountability. The six 'Big Actions' below are underpinned by the values stated above.

Equality and Diversity - Our Approach

Inverclyde HSCP has statutory legal obligations under the terms of the Equality Act 2010. We are committed to the principles of fair equality and diversity. We also recognise our responsibilities as a health and social care service provider, to ensure the fair treatment of all individuals and to tackle social exclusion and inequality. This also extends to community benefits and HSCP staff. The legislation identifies a number of protected characteristics that are known to carry a risk of unequal outcomes. These protected characteristics are: age; disability; gender reassignment; pregnancy and maternity; race; religion and belief; sexual orientation; sex; marriage and civil partnership (for which the law provides protection in the area of employment and vocational training only).

At the heart of our obligations and commitments to equality and diversity is the further requirement to develop a set of equalities outcomes and to report on these as a minimum every two years. Our outcomes will be refreshed during year one of the Strategic Plan.

Working Together

Inverclyde HSCP is committed to working better together because we know that's what makes a difference. There is a history of strong partnership working with communities, patients, service users, our local GPs and hospitals, the independent and third sector service providers, council partners and housing providers.

Inverclyde HSCP includes all community health, social care, and community justice services along with the budgets and staff associated with them. These services are delivered by the HSCP and overseen by the IJB.

Our strategic plan recognises the value of building on our strengths (an asset-based approach) to develop effective and sustainable models of care that focus on health and wellbeing, and reducing unequal outcomes. We are committed to maximising the assets of both individuals and communities. By "asset-based", we mean building on the positive resources that already exist in Inverclyde.

In order for the HSCP to ensure it continues to meet the needs of our local population we must maintain a clear understanding of the differing levels of need and service provision across the HSCP. To help us understand these differences, we have considered our community in terms of three localities, Central, East and West. Some of the information we have has been organised into what we term 'locality profiles'. These describe the important characteristics of the people who live in these areas. This is not to suggest that everyone who lives in the locality will experience the challenges or benefits described, but rather, that these are the most common things we observe when we look at the information we have relating to the whole population of that area.

The links below show each of the locality profiles.

- **Inverclyde East** - see appendix 3 for appropriate link.
- **Inverclyde Central** - see appendix 3 for appropriate link.
- **Inverclyde Wes**t - see appendix 3 for appropriate link.

During the early implementation phase of this plan, Inverclyde HSCP will move to six localities in line with the Inverclyde Community Planning Partnership (the Inverclyde Alliance). Through engagement, Inverclyde local people have told us that individuals and families see themselves as part of smaller communities. Smaller communities will ensure that the agreed actions are the right ones and will make the most difference to people's lives. By working at a more localised level, we recognise that communities themselves often have the answers to the problems experienced by those living in their area.

Therefore the localities will be:

- Kilmacolm and Quarriers Village
- Port Glasgow
- Greenock East and Central
- Greenock South and South West
- Greenock West and Gourock
- Inverkip and Wemyss Bay

The review of the last Strategic Plan 2016-2019 and the information within our strategic needs assessment, leads to the big actions that we want to achieve during the life of the plan. Improvements will be measured against the nine National Outcomes for Scotland which haven't changed from the previous strategic plan. These are:

National Outcomes

- People are able to look after and improve their own health and wellbeing and live in good health for longer.
- People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.
- People who use health and social care services have positive experiences of those services, and have their dignity respected.
- Health and social care services are centred on helping to maintain or improve the quality of life of people who use the services.
- Health and social care services contribute to reducing health inequalities.
- People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.
- People who work in health and social care services are safe from harm.
- People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.
- Resources are used effectively in the provision of health and social care services.

These outcomes are supported by a suite of 23 national outcomes indicators, and we will produce an annual performance report each year, which will describe our progress in respect of the 23 indicators.

We also aim to deliver better outcomes for Children, Young People and Community Justice, using their National Outcomes as our framework.

- Our children have the best start in life and are ready to succeed.
- Our young people are successful learners, confident individuals, effective contributors and responsible citizens.
- We have improved the life chances for children, young people and families at risk.
- Community safety and public protection.
- The reduction of re-offending.
- Social inclusion to support desistance from offending.

These outcomes will be brought to life through an inclusive approach. Appendix 1 provides an overview of how our 'Big Actions' align with the national outcomes and public health priorities.

Ministerial Strategic Group Indicators

As well as the National Wellbeing Outcomes, the Scottish Government has developed a suite of six ministerial strategic group indicators. These indicators aim to gauge how well our systems are working, defined by a few key measures that are important to people's experience of care. These indicators are not written into legislation and can be subject to change, depending on what big issues the Government is alerted to. Inverclyde HSCP recognises that the current suite of indicators also align to national policy and local priorities.

Up to March 2019, the indicators are:

- Emergency Hospital Admissions
- Number of unscheduled hospital bed days
- A&E attendances
- A&E % seen within four hours
- Delayed discharge bed days
- Percentage of last six months of life by setting

Although these indicators are largely focused on hospital care, they are the responsibility of the HSCP and important because they tell us that people would rather receive care in their own home, if at all possible. If we can reduce the use of hospital care in favour of care at home, then evidence shows that people often have a better quality of recovery.

Our Strategic Needs Assessment

Our full strategic needs assessment can be found on our website (using the link in appendix 3) , and has highlighted the following key messages:

- We have high quality children's houses and adoption and fostering services that provide sector leading support.
- We are one of the best partnerships in Scotland at preventing delayed hospital discharge.
- Death rates for substance misuse and liver disease are significantly higher in Inverclyde than the rest of Scotland.
- High numbers of children are on the child protection register for reasons linked to parental drug misuse.
- Increasing numbers of Advice Service users are requiring extensive and extended support.
- Alcohol, drug and chronic obstructive pulmonary disease (COPD) hospital stays are significantly higher in Inverclyde than the rest of Scotland.
- Breastfeeding rates are significantly lower in Inverclyde.
- We have a higher rate of mental health problems.

When we consider these headlines in the context of our vision, that Inverclyde is a caring and compassionate, community working together to address inequalities and assist everyone to live active, healthy and fulfilling lives, it becomes apparent that we need to understand:

- Why these differences exist
- What demand these differences create for services
- What we need to do differently
- How we can develop people's personal capacity to self-manage
- How to sustain recovery
- High level child vaccinations

Our Strategic Needs Assessment makes reference to some key information relating to children, because our six Big Actions relate to all of our people, including our children and young people. Our Joint Children's Services Plan should be regarded as a companion document to this Strategic Plan, and can be found on our website using the link in appendix 3.

Our Community Engagement

This Strategic Plan has been developed by engaging and consulting with our staff, partners and the communities we serve. This feedback along with the responses from our survey questionnaire, Strategic Needs Assessment and locality profile intelligence has given us an understanding of local perspective and things that matter to people. The process of engagement led to major revising and re-drafting of the plan to fully reflect what people were telling us. We believe that the plan is now much richer, thanks to the very many helpful contributions throughout the development process.

The full engagement and consultation document can be found on our website ((using the link in appendix 3).

We will continue to seek out the voices of local people when reviewing and updating this Plan.

Principles of Integration

The principles of integration describe the way services will be provided in a way which:

- Respects the rights of service users.
- Protects and improves the safety of service users.
- Improves the quality of the service.
- Best anticipates needs and prevents them from arising.
- Makes the best use of the available facilities, people and other resources.

Services must be:

- Integrated from the point of view of service users.
- Planned and led locally in a way which is engaged with the community (including in particular service users, those who look after service users and those who are involved in the provision of health or social care).

Services must take account of:

- The particular needs of different service users.
- The participation by service users in the community in which service users live.
- The dignity of service users.
- The particular needs of service users in different parts of the area in which the service is being provided.
- The particular characteristics and circumstances of different service users.

Section 2


Our 5th "Big Action" is:
Our 6th "Big Action" is:
Our 4th "Big Action" is:
Our 2nd "Big Action" is:
Our 3rd "Big Action" is:
Protecting Our Population" (Our People, Children and Young People)
Our 1st "Big Action" is:
Reducing Health Inequalities by Building Stronger Communities and Improving Physical and Mental Health

Our Big Actions

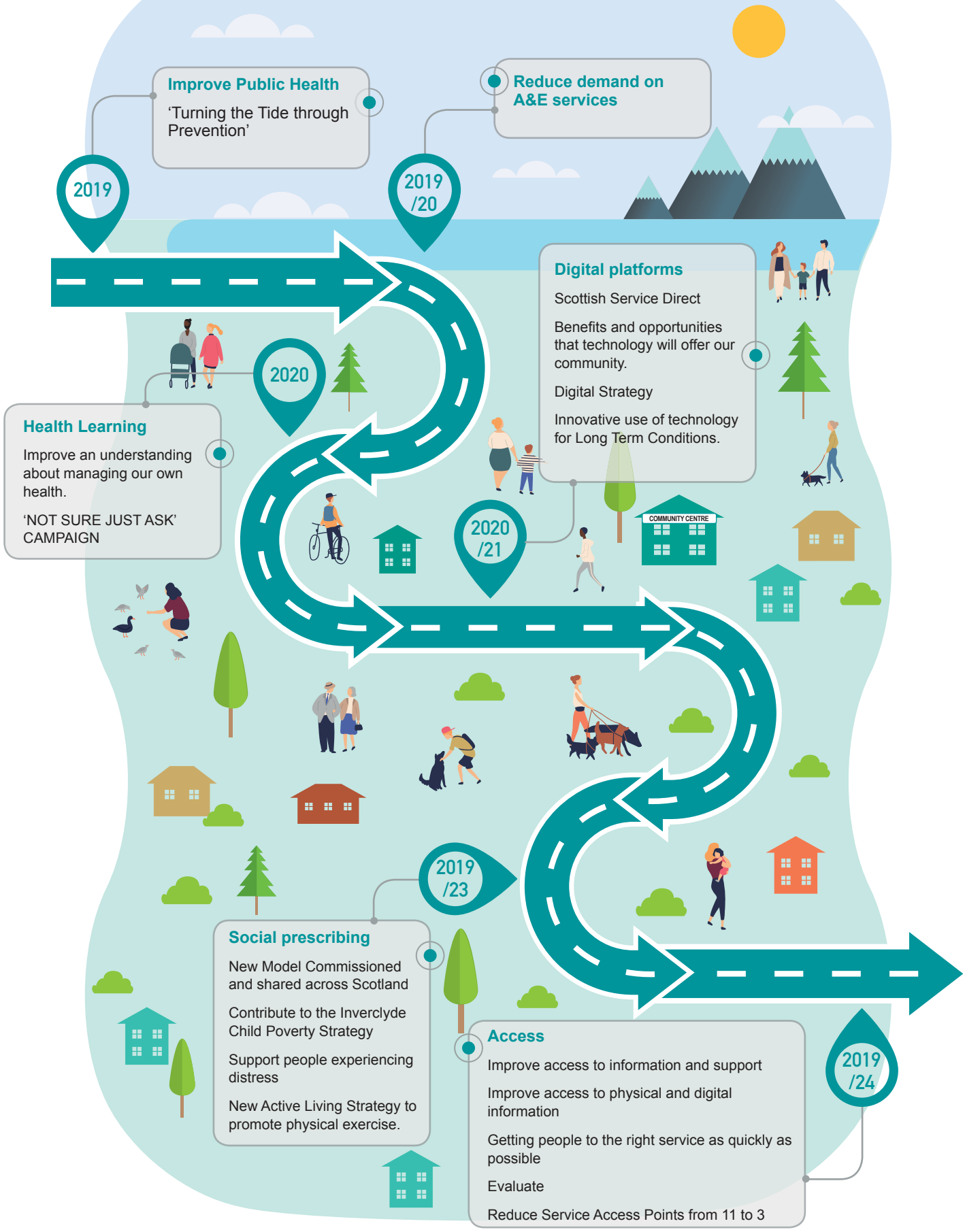
The Strategic Plan sets the blueprint for services that will improve health and wellbeing. Our 'Big Actions' will give a focused view of Inverclyde people's priorities, and how services will support those who are vulnerable or in need.

The following 'Big Actions' will be delivered over the next five years.

The development of the 'Big Actions' is an ongoing process and progress will be reviewed and reported through regular updates to and by the Strategic Planning Group (SPG), and six monthly reports to the IJB. Each action has a more detailed implementation plan, with measures which will be monitored and reported to the SPG.

Big Action 1 Roadmap

Reducing inequalities by building stronger communities and improving physical and mental health.



Big Action 1

Reducing inequalities by building stronger communities and improving physical and mental health.

We will promote health and wellbeing by reducing inequalities through supporting people, including carers to have more choice and control.

The causes of inequalities in health are complex, and often the people who are most likely to experience poorer health also experience other inequalities, for example; lower income, fewer qualifications, poorer quality housing. We recognise mental health has a significant impact on our local community and this was a key message from our engagement process and strategic needs assessment. Poor mental health often impacts on physical health and the person's ability to work or to engage with their community. Where this affects unpaid carers, inequalities can impact on both the carer and the cared-for person. 'Big Action 1' will focus on ways to support people to understand their health and wellbeing through better information, the development of pathways, technology and self-management. If people can understand their own health better, they will be equipped to be active participants in preventing or mitigating poorer health outcomes.

Although the roots of inequalities are complex and inter-connected, there is strong evidence to support approaches that prevent illness, and promote good mental and physical health. Where physical or mental illness exists, there are many ways in which people can be supported. Significant work has been undertaken by the Community Planning Partnership through the Local Outcomes Improvement Plan (LOIP) which can be found on our website using the link in Appendix 3. 'Big Action 1' aims to build on existing relationships within our communities, to support a more robust approach to improving physical and mental health.

Most of the physical health inequalities outlined in our Strategic Needs Assessment correlates closely with deprivation (as defined by the Scottish Index of Multiple Deprivation). Those who live in our poorest areas are more likely to have lower life expectancy and have more years of ill-health. They are less likely to have good quality, secure jobs and the lack of satisfying work or activity can also damage health. Intergenerational inequalities and poverty impacts on all aspects of people's lives. Reducing these inequalities requires strong partnerships and new and innovative ways to work with communities to tackle the underlying causes of deprivation.

The HSCP has a key role in educating the public to understand their health needs; the services available, and our collective responsibility on how to use our services appropriately and effectively. Further development of multi-disciplinary teams in primary care will be essential to deliver our vision to assist everyone to live active, healthy and fulfilling lives. We will build stronger community services in order that the public feel confident to support the move from hospital to community services where appropriate. We will do this through easy access to information, advice, and support. We will build on our current models that connect people with a range of services when they need them, or point them to less formal support that might be more effective for them.

Key deliverables:

Health Learning

1.1 In 2019 we will progress the implementation of key actions to improve public health as outlined in the NHSGGC Public Health Strategy - 'Turning the Tide through Prevention'.

1.2 In 2019 we will promote and develop 'Choose the Right Service' to support people to access pharmacy, social prescribing and the extended multi-disciplinary team in primary care.

1.3 We will reduce demand on A&E services by supporting people to understand the available care pathways they can use.

1.4 By autumn 2020 we will have an agreed work plan to empower and help people to understand their health.

1.5 By 2021 we will have developed and implemented innovative use of technology to monitor and support people with long term conditions.

1.6 We know that the factors that cause women to become involved in the criminal justice system are very likely to relate to multiple vulnerability. We are developing a model to reduce social exclusion and encourage participation in communities.

1.7 Throughout the life of this plan we will take forward the actions in relation to Realistic Medicine: Further information on realistic medicine can be found using the link in Appendix 3.

Digital platforms

1.8 From 2019/20 we will consider the benefits and opportunities that technology will offer for all of our community.

1.9 By 2020 we will be part of the Scottish Service Directory for local services to improve public information.

1.10 By 2021 we will have a Digital Strategy to support technology-enabled care and self-management. This will include developing a replacement recording system for social care.

Access

1.11 In 2019 we will engage with the public and other partners on ways to improve access to information and support within our communities. This will include options on supporting education; health literacy and self-management.

1.12 By 2020 we will have developed a model to improve access to physical and digital information.

1.13 By 2021 we will establish and implement an evaluation framework.

1.14 By 2021 we will have the evaluation of the current arrangements for initial referral.

1.15 By 2024 we will improve access to HSCP services by moving from our current 11 service access points to three.

Social prescribing to improve physical and mental wellbeing

1.16 In 2019 we will develop our approach to social prescribing.

1.17 In 2019 we will have developed a set of actions that sets out the HSCP's contribution to the Inverclyde Child Poverty Strategy.

1.18 By 2020 we will have developed new commissioning models for social prescribing to ensure that more people get support.

1.19 By 2021, in line with the NHS Greater Glasgow & Clyde five year Mental Health Strategy, we will develop a model to support people experiencing distress, including early intervention to help people before they reach crisis. This work will also help us to deliver on the Government's Ministerial Strategic Group targets to improve community-based responses to health crises.

1.20 By 2023 we will have worked with Inverclyde Alliance to develop a new Active Living Strategy, to promote physical exercise (the current 10 year Strategy was approved in March 2013).

Big Action 2 Roadmap

A nurturing Inverclyde will give our children and young people the best start in life.

2019

Increase our health workforce to support children in early years.

2020

Increase the number of home visits by Health Visitors.

2021

More than 85% of Inverclyde children will reach developmental milestones.

2019/24

Support from birth to early childhood

We will improve maternal and perinatal health.

2020/23

Corporate Parenting

Technology to help young people with disabilities live as independently as possible.

Meet the housing and support needs of young people, entitled to continuing care.

Create intergenerational opportunities for people to come together to build nurturing capacity.

Increase the ratio of children looked after in family based care.

Increase the number of children from Inverclyde, who, when they are looked after, will remain in Inverclyde.

2020

Supporting mental health

Upskill our workforce to support young people's mental health and wellbeing needs.

Support for families affected by parental mental ill-health and substance misuse.

Improve children and young people's mental health.

2020

Maximise Learning, achievements and skills for life

Increase the availability of family support for families asking for help.

Evaluate the range of family support and parenting initiatives to measure the difference our work is making.

2023

We will increase the ratio of children looked after in family based care by at least 5%.

Big Action 2

A nurturing Inverclyde will give our children and young people the best start in life.

We will ensure our children and young people have the best start in life with access to early help and support, improved health and wellbeing with opportunities to maximise their learning, growth and development. For the children we take care of, we will also ensure high standards of care, housing and accommodation.

Inverclyde is a beautiful place to live and grow up, however we know that some children growing up in Inverclyde face deep rooted and intergenerational challenges. We have become increasingly attuned to the nature and impact of these challenges. Poverty and the impact of poverty on people's life chances present some of our biggest challenges. We have improved our use of evidence-informed approaches that help us to target and mitigate the impacts. This requires us to work in partnership across Inverclyde HSCP to support those families, children and young people affected by alcohol, drugs and mental illness. The re-emergence of research related to adverse childhood experiences has helped to re-emphasise the importance of early help and early intervention. We recognise that the challenges we face here in Inverclyde require a long-term strategic response. Getting it Right for Every Child (GIRFEC) where every child has a named person and access to support constitutes a core aspect of that strategic response.

The GIRFEC pathway ensures that help is offered timeously where a child may have additional needs that may require enhanced or specialist support. The implementation of the Inverclyde GIRFEC Pathway and the National Practice Model has provided a framework for our aim that every child in Inverclyde will be safe, healthy, achieving, nurtured, active, respected, responsible and included. The GIRFEC pathway has strengthened and clarified the roles and responsibilities of our wider children's services, particularly in relation to ensuring that the right help is offered at the right time.

'Nurturing Inverclyde' is our collective vision to ensure that everyone has the opportunity to have a good quality of life and good mental and physical health. This approach puts the child, citizen and community at the centre of our thinking, our planning and our actions. We have and we will continue to build 'Nurturing Inverclyde' into our culture. One way in which this is evident is our focus on high quality relationships with children and their families including their active participation in decision making and in developing services that affect them.

The strategic direction of the HSCP's services to children and families is heavily integrated with that of our Community Planning Partners, as well as the strategic priorities set out in our Children's Services Plan and our Corporate Parenting Strategy. We have led on a joint approach to data analysis in children's services across the Inverclyde Community Planning Partnership, resulting in a robust and detailed strategic needs analysis, which can be found on our website using the link in appendix 3.

The analysis incorporates the views and opinions of children, families and service providers. This Integrated Strategic Needs Analysis in turn has strongly informed the strategic direction of our Children's Services Plan and our Corporate Parenting Strategy. These are companion documents to this strategy and can be accessed using the appropriate links in appendix 3.

'Big Action 2' is therefore aligned with the strategic aims of the Inverclyde Integrated Children's Services Plan and Corporate Parenting Strategy. This includes

- Access to early help and support.
- Improved health and wellbeing outcomes.
- Opportunities to maximise learning, achievements and skills for life.
- Access to high quality care, accommodation and housing that will meet the needs of looked after children.

'Big Action 2' is informed by children, families and the wider Inverclyde community. We are very aware of the challenges facing children growing up in Inverclyde. We have been making good progress in addressing these. However during the lifetime of this plan we are determined to continue to tackle those challenges to ensure all of our young people have the best start in life.

Key deliverables:

Access to early help and support - Enhancing and further embedding the Inverclyde GIRFEC Pathway

2.1 By 2019 we will have increased our health workforce to support increased focus on assessment and planning for children in the early years via the revised universal pathway.

2.2 In 2020 we will implement the Universal Pathway 0-5 to increase the number of home visits by health visitors.

2.3 By 2021 we will have a single agency child's plan for all children on the universal pathway, and we will develop for those children who require additional support an enhanced plan in partnership with parents and carers.

2.4 By 2023 we will have exceeded our target of 85% of children reaching their developmental milestones.

Improved health and wellbeing - Supporting from birth to early childhood

2.5 In 2019 we will develop a response to improving maternal health.

2.6 By 2020 we will have mapped pathways for perinatal support and developed recommendations for improvement.

2.7 By 2024 we will increase the number of parents breast feeding.

Improved health and wellbeing - Support and improve children & young people's mental health

2.8 By 2019 we will have directed investment to upskilling of our workforce to be confidently equipped to recognise and support young people's mental health and wellbeing.

2.9 By 2020 we will develop family support for families affected by parental mental ill-health and substance misuse.

2.10 By 2022 we will align our strategy to support and improve children and young people's mental health in line with the national review.

Opportunities to maximise learning, achievements and skills for life

2.11 By 2020, we will increase the availability of high quality family support for families supported on a voluntary basis.

2.12 By 2023, with partners we will evaluate the enhanced range of family support and parenting initiatives to measure the impact and effectiveness of the support.

Access to high quality care, accommodation and housing that will meet the needs of looked after children - Corporate Parenting

2.13 From 2019 Inverclyde will implement the recommendations of the national review of the care system.

2.14 In 2019, as part of the revised Learning Disability Services model, we will ensure that technology and support is available to help young people with disabilities live as independently as possible.

2.15 By 2020, we will implement an accessible model of service to meet the housing and support needs of young people entitled to continuing care, beginning with the development of four supported tenancies.

2.16 By 2021 we will have developed a strategic approach to extend the champions board to include the Inverclyde community in order to promote and create intergenerational opportunities for people to come together to build nurturing capacity within the community.

2.17 By 2023 we will have increased the ratio of children looked after in family based care by at least 5%.

2.18 By 2023 we will have ensured that more children from Inverclyde, when they are looked after, will remain in Inverclyde.

Big Action 3 Roadmap

We will reduce the risk of harm to everyone living in Inverclyde by delivering a robust public protection system with an emphasis on protecting the most vulnerable in our communities.

Big Action 3

Together we will protect our population.

We will reduce the risk of harm to everyone living in Inverclyde by delivering a robust public protection system with an emphasis on protecting the most vulnerable in our communities.

Together we have a duty to ensure that people who are vulnerable within our community are protected and feel safe. This is and will remain a core strategic priority for the HSCP. We have arrangements in place to raise awareness of public protection issues, facilitate proportionate information sharing, diligent screening, prompt assessment and timely targeted support to people who may require advice, support and protection.

The main areas where we provide support in public protection are in relation to child protection, adult protection and people affected by serious and violent crime.

Within each aspect of public protection we have a suite of readily accessible procedures and guidance to assist staff in working together and to ensure safe, consistent practice in this very complex area. Robust arrangements are in place to ensure procedures, processes, systems and practice are updated in relation to new research or emerging areas of risk that are identified locally or nationally. For example, the Scottish Child Abuse Inquiry is likely to deliver recommendations, and we will be well placed to act on emerging recommendations. With regard to technology, the internet, while being a very valuable source of information and knowledge, can also pose a number of challenges. Our Digital Strategy will also include key actions to help foster cyber safety.

Public protection activity by its nature relies on a partnership approach. The direct governance of our public protection activity is through the Public Protection Chief Officer's Group (PPCOG). The PPCOG provides robust challenge and scrutiny of the public protection agenda and in particular in respect of planning and improvement in public protection including approval of annual business plans and quarterly scrutiny of public protection activity. The strategic direction of public protection is closely aligned to The Child Protection Committee, the Adult Protection Committee and the Multi Agency Public Protection Arrangements.

Recent internal and external audits identify good evidence that there are strong public protection arrangements in place in Inverclyde. However continuous improvement has been identified as a key mechanism in maintaining quality. Consequently, ensuring quality is a key priority.

Our strategic needs analysis identified a growing trend in gender-based violence and domestic abuse as a significant risk across our communities. The impact this has on victims, children, perpetrators and the wider community is considerable and far reaching. We have identified the need to intervene early to change attitudes to domestic abuse. We will identify a suitable programme that can be delivered initially jointly by Children's and Criminal Justice Services and then extended across the HSCP.

Our strategic needs assessment also tells us that there is a strong trend of neglect and self-neglect, and this is a key challenge for our communities. There is long standing evidence that neglect impacts on every age group, so our future work with communities will have a focus on identifying neglect and self-neglect, and developing ways to reduce it.

We all have an important role to contribute to the reduction of violence, crime and disorder in our community. As part of our Criminal Justice Strategy we will continue to develop our approach to reducing offending and reoffending. Our Community Justice Outcome Improvement Plan 2017-2022 can be found on our website using the link in appendix 3.

We will look to strengthen our whole-system approach and will develop our system of early and effective intervention with young people involved in offending. We will ensure that, where we can, we divert young people from offending. Where this is not possible, we will provide safe alternatives to young people being detained in custody.

We know that the factors that cause women to become involved in the criminal justice system are very likely to relate to multiple vulnerability. We are developing a model to reduce social exclusion, and encourage participation in their own community.

The protection of our most vulnerable service users is not concluded simply by ensuring their safety. An important theme of this strategy is supporting our population to enjoy good physical and mental health and wellbeing. We have a responsibility to ensure our staff are confident and competent in all aspects of public protection. While it can be a difficult area to work within, developing high quality helping relationships is key to the recovery.

Key deliverables:

Raising Awareness

3.1 By 2019 and thereafter for each year we will contribute to a thematic communication plan to raise public awareness about the protection of children, vulnerable adults and those affected by serious and violent crime.

3.2 In 2019 public protection will be a main focus of our engagement with our communities.

3.3 By 2021 we will have a Digital Strategy, which will include key actions to help foster cyber safety.

Planning

3.4 By 2019 and thereafter for each year of this Strategic Plan we will have in place an annual business plan to deliver consistently high quality child and adult protection and MAPPA services.

3.5 By 2020 we will formally align planning process in relation to the Alcohol and Drug Partnership and the Violence Against Women Partnership with our existing Public Protection processes, under the governance of the PPCOG.

Interventions

3.6 In 2019 young people involved in offending will continue to have access to appropriate support.

3.7 By 2020 we will develop and implement a new model for women involved in offending.

3.8 In 2020 we will have commissioned an evidenced-informed approach to reducing gender based violence and domestic abuse in our community.

3.9 By 2020 staff working in the public protection arena will be supported and equipped to provide relationship-based and trauma informed support to victims and perpetrators of abuse.

3.10 In 2021 we will extend our work to reduce the occurrence of Neglect and Self-neglect across our partnership.

Ensuring Quality

3.11 In 2019 we will develop a Clinical and Care Governance Strategy for the partnership which will incorporate all aspects of public protection.

3.12 By 2020 we will implement a self-evaluation framework with agreed minimum standards applied across public protection services.

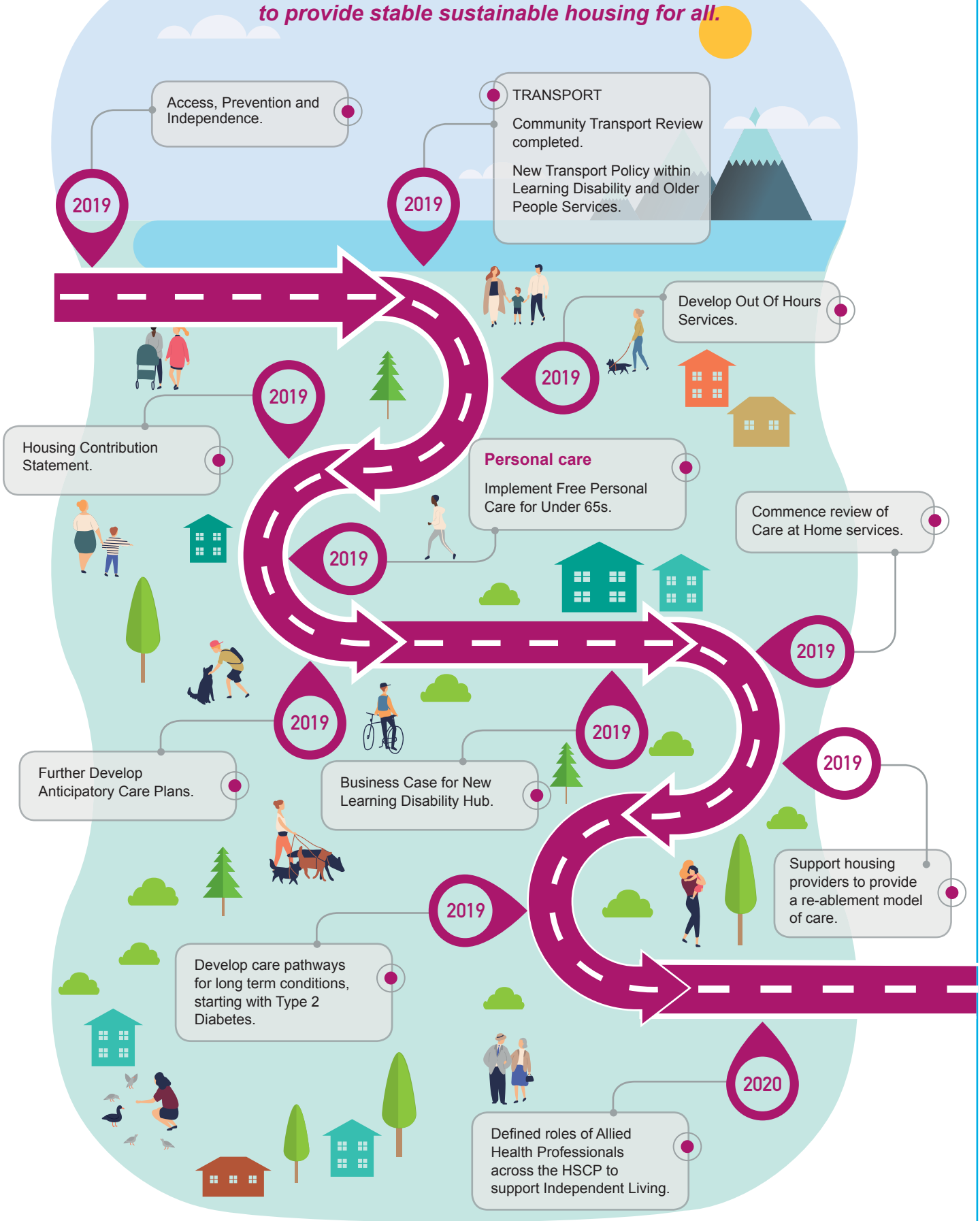
3.13 By 2020 we will implement the HSCP Quality Assurance Framework with agreed minimum standards.

3.14 By 2021 we will develop and implement an HSCP-wide learning and development framework that that will develop confident and competent staff.

3.15 By 2022 we will implement the national approach to learning together to improve quality in public protection and in the interim we will implement any learning that emerges from the Scottish Child Abuse Inquiry.

Big Action 4 Roadmap

We will support more people to fulfil their right to live at home or within a homely setting and promote independent living, together we will maximise opportunities to provide stable sustainable housing for all.



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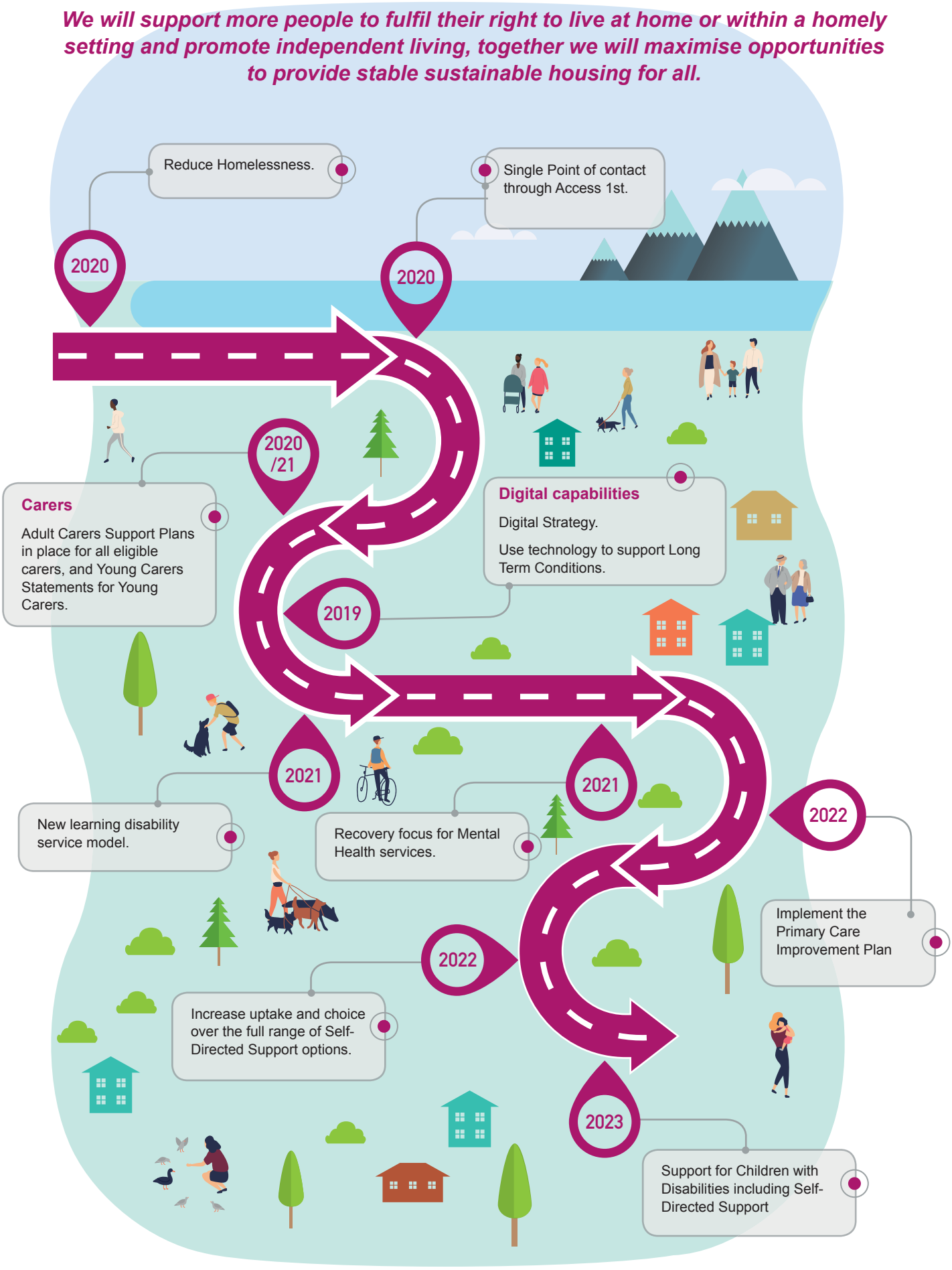


Big Action 4

We will support more people to fulfil their right to live at home or within a homely setting and promote independent living, together we will maximise opportunities to provide stable sustainable housing for all.

We will enable people to live as independently as possible and ensure people can live at home or in a homely setting including people who are experiencing homelessness, enhancing their quality of life by supporting independence for everyone

Throughout the life cycle there will be times when people's physical and emotional health and wellbeing may require additional support. Whilst this can happen at any age, this has a specific relevance to our older people. However people have consistently told us that they would rather remain in their own homes if at all possible. Over a number of years we have been developing our care at home supports, and although our older population has been growing, we have been able to support an increasing number of people to stay in their own homes this includes a commitment to introduce free personal care for under 65s. Using a combination of home visits, home care and technology, we have continued to develop approaches to independence while managing risk across all care groups.

Our Home 1st Service has enabled us to assess people to live at home with appropriate support as the first option. The Home 1st Plan identifies action to reduce the incidence of events that can impact on people's confidence to live independently through early intervention and re-ablement. It enables us to support people to leave hospital quickly so that they can be cared for in a more appropriate place. We recognise the positive contribution of families and unpaid carers as equal partners to enable us to deliver the strategy. We will continue to develop a strategic approach to taking advantage of technology, including dementia-friendly technology - through the development of our Digital Strategy. Some people will require support that can only be provided in a care home and we recognise this as a positive choice. We will continue to work with local care home providers to ensure the highest standards of care are maintained.

Learning Disability Services have consulted with service users, families, carers and other key partners in actively developing a new service model. This focusses on four high level themes in line with the National Strategy, Keys to Life:

- Independence (Where I Live)
- Choice and Control (My Community)
- A Healthy Life (My Health)
- Active Citizenship (My Safety and Relationships)

The service will develop a new resource hub for day and social opportunities bringing together a range of centre based and community based services and supports for people aged 16+ with a learning disability, including those who may have complex and multiple needs. We will continue to enable the development of individual's independent living skills, including independent travel. We recognise the need to focus on education and employability training opportunities and promoting active citizenship. Self- directed support is the way by which we will continue to offer increased choice and control to achieve improved outcomes.

Growing and sustaining social care and community supports is key to enabling people to self-manage their own condition and prevent deterioration.

Inverclyde HSCP will continue to build local services to support primary care and ensure that only those who need to be seen at hospital are seen there. Multi-disciplinary teams and technology should allow us to support people more long term. In line with National Strategy and NHSGG&C Moving Forward Together, the HSCP will develop care in the community and provide a more joined up service with hospitals to stop people needing hospital care and when they do getting them home quickly.

'Big Action 4' emphasises the basic human right to a home or homely setting. This extends across all of our population. We have identified the need to improve our responses to people presenting to the homelessness service. This includes people who need help both with access to a settled tenancy and support to sustain their home. A significant number of people who experience homelessness in Inverclyde have a mental health problem or difficulty with drugs and/or alcohol. There might be times when a staged approach is best, to enable some of our most vulnerable people to build up their confidence to live independently. This is part of our Rapid Rehousing Transition Plan.

'Big Action 4' focuses on our aim to provide the right support at the right time, and for the right length of time across all our services, so that we can help people towards the highest level of independence

possible. Our approach is dependent on partnership working with a range of local and national agencies. Our mental health strategy identifies the need to increase our support to people recovering from mental ill-health, enabling them to live confidently within the community, and have access to opportunities for meaningful activity and work. Our Housing Contribution Statement brings the HSCP together with local housing providers to plan future housing designed for a lifetime of independent living.

The Housing Contribution Statement can be found on our website using the link in Appendix 3.

Key deliverables:

Access

4.1 In 2019 we will implement free personal care for under 65s.

4.2 In 2019 we will review and develop a model for NHSGGC wide and local support for out of hours.

4.3 In 2019 we will update all our existing and new Anticipatory Care Plans (ACPs) on the new IT format to ensure improved sharing of information across all relevant health and social care sectors.

4.4 By May 2019 we will have completed a full business case for a new Learning Disability Hub to consider viability of a new build.

4.5 By end of 2019 we will have commenced a service review of care at home.

4.6 In 2019 we will work to develop pathway for long term conditions such as COPD, diabetes, including use of technology.

4.7 By 2020 we will have defined the role of Allied Health Professional (AHP's) across the HSCP in their support of independent living.

4.8 By 2020 Health and Community Care services will have a single point of contact through Access 1st.

4.9 By 2021 we will roll out a new Learning Disability service model to ensure people are supported to live independent lives.

4.10 By 2021 all eligible carers will have an adult carer's support plan in place or a young carer's statement for young carers.

4.11 By 2021 we will have developed a recovery orientated system of care within mental health.

4.12 By 2022 the people who access services will have the confidence to exercise choice over the full range of Self Diirected Support (SDS) options.

4.13 By 2022 we will have implemented the Primary Care Improvement Plan (PCIP) delivering the expanded MDT to offer a wider range of choice for support to both acute and chronic illness.

4.14 By 2023, we will work with partners to improve the range and access of support for children with disabilities including SDS.

Prevention and Independence

4.15 Throughout the life of the plan we will work to reduce activity at the hospital and when someone requires hospital ensure they get home quickly, maintain sector leading performance in reducing delayed discharge.

Digital Strategy

4.16 By 2021 we will develop our Digital Strategy to support technology enabled care and self-management. This will include developing a preferred option for the SWIFT replacement recording system in Social Care.

4.17 Use technology support LTC.

Transport

4.18 By December 2019 we will have reviewed our community transport and introduced a new Transport Policy within the Learning Disability and Older People services.

Housing

4.19 By 2019 we will have an agreed Housing Contribution Statement.

4.20 In 2019 we will support housing providers to provide a re-ablement model of care.

4.21 By 2020 we will develop community support to reduce homelessness in Inverclyde.

Big Action 5 Roadmap

Together we will reduce the use of, and harm from alcohol, tobacco and drugs.

Big Action 5

Together we will reduce the use of, and harm from alcohol, tobacco and drugs.

We will promote early intervention, treatment and recovery from alcohol, drugs and tobacco and help prevent ill health. We will support those affected to become more involved in their local community.

Our Strategic Needs Assessment demonstrates that Inverclyde has a number of particular challenges related to the use of alcohol, drugs and tobacco. Inverclyde has a long history of people affected by alcohol and drug use and our rates are higher than most of Scotland. For example Inverclyde has shorter life expectancy and a higher proportion of child protection registrations are due to parental drug and alcohol use.

These issues impact on all communities; from the wellbeing of children to the increased demand on our local services; and on the ability for those affected to contribute to the local economy and community. People with alcohol and drug problems are more likely to have persistent difficulties sustaining their own home. The consultation for the Strategic Plan highlighted that communities felt more had to be done to support families affected by alcohol and drugs. Our approach to tackling this requires actions across services and agencies including the Community Planning Partnership. The multi-agency Alcohol and Drug Partnership (ADP) is responsible for developing strategic approaches to tackling these issues. The New National Framework for alcohol and drugs will help to support strategic direction of ADP and the focus on recovery across Inverclyde and measuring improvement for the people of Inverclyde.

There is work being undertaken across the wider system to support people with alcohol and drug problems. Preventative and early intervention work includes education within schools and programmes for young people, and the provision of appropriate information to support and inform young people and families affected by drug and alcohol misuse.

In order to ensure we are meeting the complex needs of those affected, we are undertaking a review of alcohol and drug services to transform our service into a fully integrated and cohesive service which will best deliver appropriate models of treatment and recovery. This will enable a wider system of care to be developed by continuing our close working with a range of partners and developing new partnerships as required. This will build an inclusive network of support for the person affected; their family and the Inverclyde community.

From the initial part of the review we have identified the need to develop clearer pathways for people going in to assessment and treatment and to access recovery supports both during and after treatment within our service. We have also identified gaps in access to support across seven days, which impacts on where people can go to when they need urgent help, and the need for us to further develop support to families and carers.

People who have problems with drug and alcohol and tobacco use are more likely to experience other significant physical and mental health problems. The Strategic Needs Assessment identified that they are more alcohol, drug and chronic obstructive pulmonary disease (COPD) related hospital stays than in the rest of Scotland. Therefore we need to develop different pathways that can provide appropriate support to people to prevent deterioration in their health and avoid unnecessary hospital admissions.

The focus on recovery will be supported by the development of a wider recovery strategy, to extend support to people recovering from alcohol, drug use and mental ill health. This will need to include work with our partners and other agencies to address some of the barriers that people in recovery experience in accessing wider opportunities. People who currently use our services have told us that support from other people who have experienced these difficulties is very helpful and we will continue to develop approaches to peer support within this strategy.

As well as the focus on treatment and recovery services, we will continue to ensure prevention is prioritised and work with our partners and wider community to intervene early to support less people to become addicted to alcohol, drugs and tobacco.

Key deliverables:

Working with the Wider System

5.1 In 2019 we will continue to work with partners to ensure our focus on alcohol, drug and tobacco prevention continues across all life stages, including developing digital support.

5.2 In 2019 we will complete the review of alcohol and drugs and implement an integrated addiction services for Inverclyde, located within the Wellpark Centre.

5.3 In 2020 we will review the role and function of the Alcohol and Drug Partnership to develop engagement with carers and those that use alcohol and drug services.

5.4 In 2020 we will develop further support to families with caring responsibilities for those with alcohol and drug problems.

Ensure Appropriate Treatment

5.5 In 2019 we will develop further the addictions primary care model and other community based interventions

5.6 In 2019 we will develop a pathway for those with long-term conditions COPD, including supporting use of technology.

5.7 By 2020 we will work to develop a seven day service to better support people with alcohol and drugs problems

5.8 By 2021 we will reduce the impact on A&E from people with alcohol and drugs problems

Focus on Recovery

5.9 In 2019 we will deliver a recovery strategy that outlines the vision to support people on the road to recovery

5.10 By 2020 we will commission a robust recovery network across Inverclyde for people who need support to recover from illness.

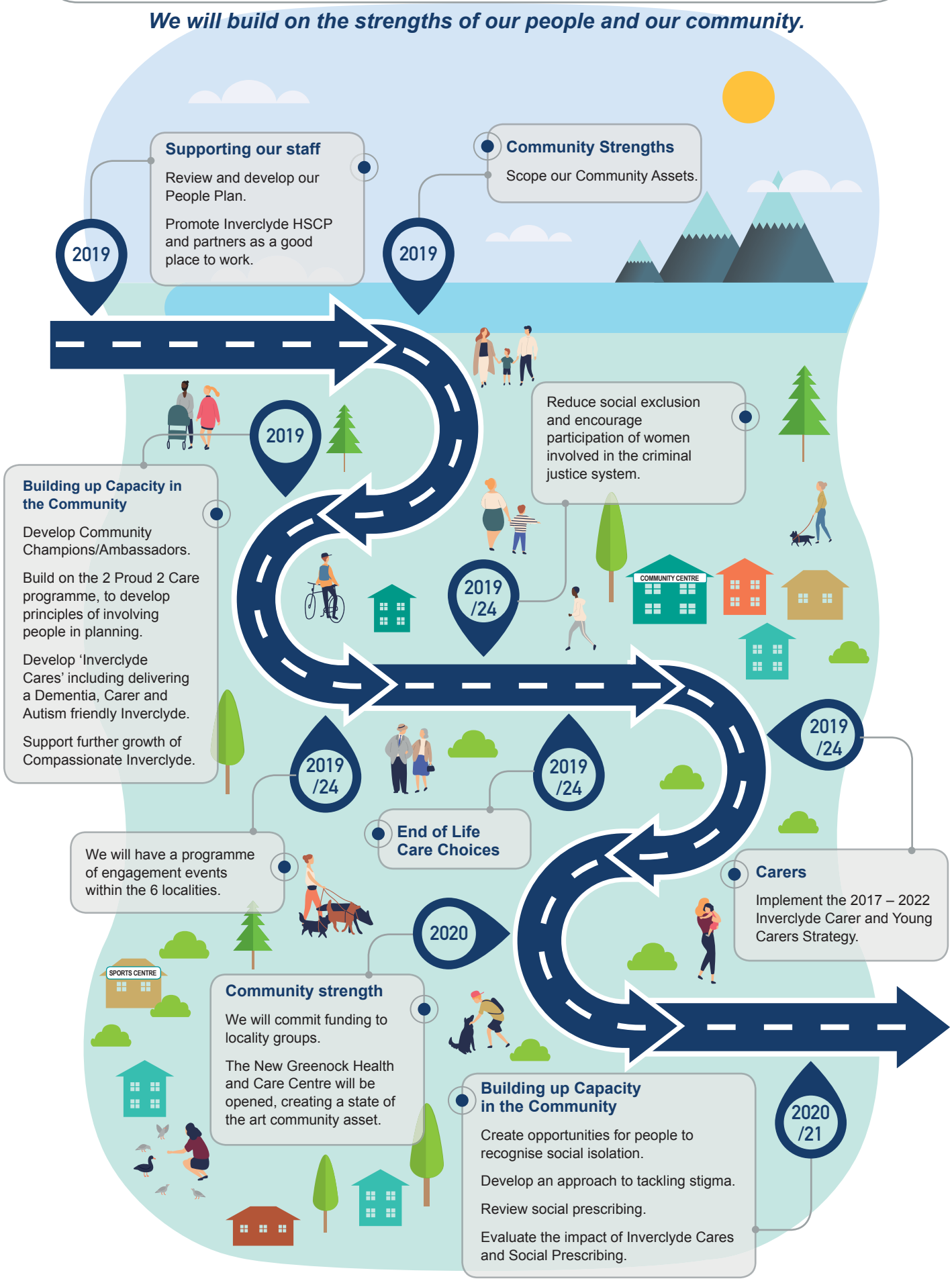
5.11 By the end of 2020 all adults will have a recovery plan in place to ensure a recovery focussed approach is at the forefront of all client journeys

5.12 By 2021 new models of support will be available for people at risk of homelessness.

5.13 By 2022 we have evaluated a peer support model and considered its ability to roll out across the HSCP.

Big Action 6 Roadmap

We will build on the strengths of our people and our community.



Big Action 6

We will build on the strengths of our people and our community.

We will build on our strengths. This will include our staff, our carers, our volunteers and people within our community, as well as our technology and digital capabilities.

A Nurturing Inverclyde has been key to our HSCP success, whether that is our staff, carers or communities.

A shared desire to see Inverclyde thrive motivates us to work together, to build on our assets and develop communities that care for one another. Health and Social Care Services know that we cannot deliver everything for everyone. Social isolation or exclusion is common in society and impacts on people's physical and mental health and wellbeing. It is a public health issue. The human relationships that people need can be developed by creating opportunities in communities to notice, to connect and to show kindness. 'Inverclyde Cares' will bring together different strands of work in communities to support and provide a better response to those who are lonely, vulnerable or excluded. We are therefore committed to further development of Compassionate Inverclyde and the Dementia and Autism Friendly communities. Given the inherent strength of our communities, and the overwhelming comments during our engagement, we are also committed to working with communities to find ways of tackling stigma. We also want to work with communities and partners to further develop social prescribing – a way of finding community solutions to life problems that can affect physical or mental health.

We will continue to create opportunities so that people are able to support one another, and we will support Your Voice so that those with specific conditions or similar issues are able to spend time together. The underlying principle is that people in Inverclyde want to help one another and that can often be more effective than formal services.

Inverclyde Cares is the foundation on which we will support the development of community initiatives. These initiatives will support people at all stages in life providing a real opportunity for early help. Our Carers Centre and third sector providers will also provide specific support to ensure carers get access to the help they need when they need it.

Inverclyde HSCP has a good track record in working with communities and young people to develop services. Over the next five years we will build on this and begin to design services with our communities for our communities, (this is known as coproduction). We know from the consultation that people – and in particular young people - want us to build a digital system that will allow them to access support online, for example. In response, we will ensure the Digital Strategy includes commitment to this action.

We recognise our duties to protect the health of our staff and to ensure that they have a safe working environment, so we will develop a Health & Safety Plan in collaboration with staff, and ensure that it is reviewed every year.

This is one way that we will demonstrate that the HSCP culture supports and values our staff. We are also keen to support and value the staff in services we commission. Our People Plan here outlines an ambitious programme to develop staff and plan for the future. Our market facilitation plan gives opportunity for us to design services differently so that people are treated first and foremost as people rather than for their specific conditions.

Further information on these plans can be found on our website using the links on appendix 3.

Key deliverables:

Building up Capacity in the Community:

6.1 In 2019 we will develop 'Inverclyde Cares' including delivering a dementia, carer and autism friendly Inverclyde. Compassionate Inverclyde will continue to develop by supporting people in the community and in hospital who are at the end of their life or lonely/isolated.

6.2 We will continue to implement the 2017-22 Inverclyde's Carer and Young Carers Strategy to ensure that all support outlined in the Carers Act is available and easy to access.

6.3 Throughout 2019 we will build on the work of Proud 2 Care, to develop principles of coproduction for all service redesigns or planning.

6.4 In 2019 we will evaluate our approach to Community Champions Ambassadors and consider extending this across communities.

6.5 By 2020, working with Your Voice and CVS, we will review social prescribing to ensure more people are linked to workers in GP practices and in the communities.

6.6 By 2020 we will evaluate the current models of peer support to form our future approach to address stigma.

6.7 By 2020 we will have a programme to create opportunities for people in communities to notice social isolation, and to be able to act positively and confidently to help reduce its impacts.

6.8 By 2021 we will have evaluated the impact of Inverclyde Care's and social prescribing.

Community Strengths

6.9 By spring 2019 we will have scoped our Community Assets.

6.10 By 2020 the New Greenock Health and Care Centre will be opened, which will provide a modern state of the art community asset.

6.11 By 2020 we will commit 1% of the budget provided to the HSCP from the council to participatory budget.

6.12 We know that the factors that cause women to become involved in the criminal justice system are very likely to relate to multiple vulnerability. We are developing a model to reduce social exclusion and encourage participation in their own community.

6.13 Throughout the life of this plan we will work to develop models of care so that people are able to make choices about their end of life care.

6.14 Throughout the life of the plan we will have a programme of engagement events within six localities.

Supporting our Staff

6.15 In 2019 we will review and develop our People Plan to ensure that staff in the HSCP are being supported and we have succession plans for the future.

6.16 In 2019 we will have developed promotional material for Inverclyde HSCP and partners to support recruitment and training.

6.17 In 2020 we will further develop our SVQ Centre.

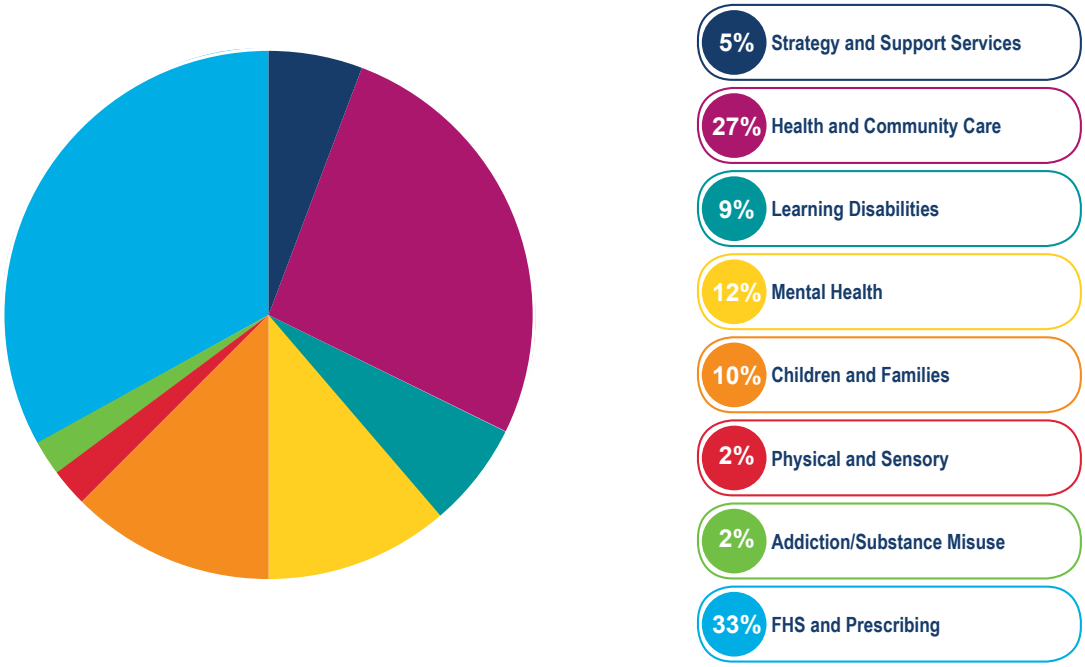
6.18 Throughout the lifetime of the plan we will work together to promote staff attendance and maintain Gold Healthy Working Lives initiatives.

Section 3

Health and Social Care Spend

2019/20 Budget by service

The current health and social care budget is split across services and care groups as follows:



The IJB is facing continued cost pressures in a number of areas including: mental health inpatient services; prescribing; care at home services for older people; learning disability and residential placements for children.

The areas of key uncertainty for the HSCP include:

- Impact of future Scottish Government funding levels for our partners.
- Pay settlements and the impact of the decision to lift the pay cap on public sector pay.
- Demand led pressures particularly in the area of older people services but also for learning disability and children's services.
- Prescribing costs as a consequence of rising costs and short supply of drugs.

IJB Budget 2019/20 to 2023/24

The high level budget estimates for the IJB for next five years are based on assumed pressures around pay inflation, drug inflation, demographic and volume changes. The total estimated budget pressures from 2020/21 to 2023/24 are £13.9m; this is partially offset by an anticipated £5m growth in funding over the same period, leaving a net anticipated funding gap of £8.9m over that four year period. An updated medium term financial plan has been developed covering the period of this new Strategic Plan.

2019/20 Budget by Service

Key Budget Assumptions

Partner Contributions

- **Health** - in 2019/20 we anticipate a 1.8% uplift on all budgets plus a further 0.8% uplift on pay costs in line with the Scottish Government Health settlement. This assumption has been used in the remaining four years of the plan.
- **Council** - Funding for local government for Health and Social Care has been protected in 2019/20 and will see a £148m increase in investment across Scotland. The additional money is to be spent on a combination of new initiatives. This additional funding is conditional on council contributions to Integrated Joint Boards being no less than the 2018/19 recurring budget plus the councils share of this extra sum less up to 2.2% of the 2018/19 adult social care budget. There has been no commitment to retain this protection beyond 2019/20. The plan assumes flat cash from the council.

Pressures and Savings

- **Pay Award pressures** - £6.1m - based on estimated pay uplifts.
- **Drug inflation pressures** - £3.6m - assumed 5% increase per annum Demographic and Volume pressures - £1.1m - based on the additional costs around initiatives such as the Carers Act, Free Personal Care to Under 65's (Frank's Law) etc. together with other anticipated cost pressures linked to this area.
- **Inflation** - £3.1m - anticipated inflationary pressures on non-pay areas including the National Care Home Contract and Living Wage.
- **Savings** - it is anticipated that additional funding or savings will be required to offset any resultant funding gap each year. Current estimate is £8.9m over the four years to 2023/24.

IJB Budget 2019/20 to 2023/24

The high level budget for the IJB over the life of the Strategic Plan, based on the above assumptions is as follows:

	Indicative budgets				
Partnership funding/spend analysis	**2019/20 £m**	**2020/21 £m**	**2021/22 £m**	**2022/23 £m**	**2023/24 £m**
NHS contribution to the IJB	87.1	88.3	89.6	90.8	92.1
NHS set aside (notional)	16.4	16.4	16.4	16.4	16.4
Council contribution to the IJB	50.6	50.6	50.6	50.6	50.6
HSCP NET income	**154.2**	**155.4**	**156.6**	**157.9**	**159.2**
Social Care	67.4	67.4	67.4	67.4	67.4
Health	70.3	70.3	70.3	70.3	70.3
Anticipated budget pressures	**0.0**	**3.5**	**4.6**	**5.9**	**7.3**
Additional funding requirements/savings	**0.0**	**(2.2)**	**(2.2)**	**(2.2)**	**(2.3)**
Set aside (notional)	16.4	16.4	16.4	16.4	16.4
HSCP NET expenditure	154.2	155.4	156.6	157.9	159.2
Surplus/(funding gap)	**0**	**0**	**0**	**0**	**0**

Section 4


This is a
No Moan
zone
VISION
STATEMENT
HSCP
INVERCLYDE
1st "Big Action" is:

What will success look like and how will we know we have succeeded

The Inverclyde Health and Social Care Strategic Plan (2019 – 2024) lays out our vision, our ambitions, and our aspirations for the next five years. These have been shaped in full partnership with our communities and other partners. The plan provides a realistic blueprint for us to work together to deliver better outcomes for the people of Inverclyde. Delivery of effective and lasting transformation of health and social care is central to Inverclyde's vision. This plan outlines a significant change in how we plan and deliver a range of services with partners, carers and those who use services. Health and social care integration brings great opportunity to work together to serve communities and individuals better.

Our engagement with communities told us that Inverclyde is a great place to live, but that there is more to do to improve people lives. People also told us that they recognise that some have better life chances and outcomes than others, and that the differences can be mitigated by taking decisive action. The views of our communities and staff chimed with our Strategic Needs Assessment, so we created six 'Big Actions'.

Inverclyde is a very successful partnership due to strong collaborative working, high quality staff and high levels of engagement with our communities, which brings a genuine level of confidence that we will be able to deliver improved outcomes through the six Big Actions outlined in our Strategic Plan.

The Strategic Plan relates to everyone who lives in Inverclyde, and we have a number of additional plans which act as the foundation of the strategic plan. The Plan also sits comfortably alongside the Community Planning Partnership (Inverclyde Alliance) Local Outcome Improvement Plan, and the NHS Greater Glasgow and Clyde Moving Forward Together Strategy.

Each action has an implementation plan which sets out the specific details of what we will do and the targets we aim to achieve, with specific timescales. The Strategic Planning Group will monitor and report regularly to the IJB. By providing specific targets, we can be held to account by our communities and our IJB and we can also monitor the effectiveness of our actions.

The IJB will receive annual performance reports providing accountability and strong governance. Regular reports will also be presented to the NHS Board and the council, and, in addition, the annual performance reports will be published on the HSCP and council websites so that our communities can also take stock of our progress.

Although the strategic plan covers a period of five years, officers will work with communities and other partners to undertake a refresh of the plan at the three year point, which will ensure that any new policies or emerging community priorities are taken into account, and that the plan is updated accordingly. The success of the strategic plan will be judged on the differences and the improvements that we have made to the health and wellbeing of the people of Inverclyde, we know that success cannot be achieved alone - only by working together alongside our partners and communities will we be able to address inequalities and assist everyone to live active, healthy and fulfilling lives.

Section 5


Store
Our 5th "Big Action" is:
We will strive to reduce the use of, and the harm from alcohol, tobacco and drugs
Our 4th "Big Action" is:
Support more People to live at Home or within a Community Setting and Promoting Independent Living
Our 2nd "Big Action" is:
A Nurturing Inverclyde will give our Children & Young People the Best Start in Life
Our 3rd "Big Action" is:
Protecting Our Population" (Our People, Children and Young People)
st "Big Action" is:
Reducing Health Inequalities by Building Stronger Communities and Improving Physical and Mental Health

Appendices

Appendix 1

Overview of how our big actions meet the national outcomes

The National Health and Wellbeing Outcomes are high-level statements of what health and social care partners are attempting to achieve through integration and ultimately through the pursuit of quality improvement across health and social care.

Outcome	BIG Action 1	BIG Action 2	BIG Action 3	BIG Action 4	BIG Action 5	BIG Action 6
People are able to look after and improve their own health and wellbeing and live in good health for longer.	X	X		X	X	
People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.				X	X	X
People who use health and social care services have positive experiences of those services, and have their dignity respected.	X		X			
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.				X	X	
Health and social care services contribute to reducing health inequalities.	X			X		
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and well-being.	X			X		X
People using health and social care services are safe from harm.	X	X	X	X	X	X
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	X			X		X
Resources are used effectively and efficiently in the provision of health and social care services.	X		X			X
Children and Criminal Justice Outcomes						
Our children have the best start in life and are ready to succeed.		X				X
Our young people are successful learners, confident individuals, effective contributors and responsible citizens.		X				X
We have improved the life chances for children, young people and families at risk.		X				X
Community safety and public protection.	X		X			
The reduction of re-offending.	X				X	
Social inclusion to support desistance from offending.	X			X	X	

Appendix 2

Overview of how our big actions meet Scotland's Public Health Priorities

Public Health Priority	BIG Action 1	BIG Action 2	BIG Action 3	BIG Action 4	BIG Action 5	BIG Action 6
A Scotland where we live in vibrant, healthy and safe places and communities.			X			
A Scotland where we flourish in our early years.		X				
A Scotland where we have good mental wellbeing.	X					
A Scotland where we reduce the use of and harm from alcohol, tobacco and other drugs.					X	
A Scotland where we have a sustainable, inclusive economy with equality of outcomes for all.	X			X		
A Scotland where we eat well, have a healthy weight and are physically active.						X

Appendix 3

Document links

Plan/Strategy/Policy	Link
Inverclyde HSCP Strategic Plan 2016 to 2019	https://www.inverclyde.gov.uk/2016 to 2019 Strategic Plan
Review of the 2016/19 Strategic Plan	https://www.inverclyde.gov.uk/Review of the Strategic Plan
Moving Forward Together	http://www.movingforwardtogether
Inverclyde Local Outcome Improvement Plan	https://www.inverclyde.gov.uk/Local Outcome Improvement Plan
Inverclyde Central Locality Profile	https://www.inverclyde.gov.uk/Central Locality Profile
Inverclyde East Locality Profile	https://www.inverclyde.gov.uk/East Locality Profile
Inverclyde West Locality Profile	https://www.inverclyde.gov.uk/West Locality Profile
Inverclyde Strategic Plan Strategic Needs Assessment 2019	https://www.inverclyde.gov.uk/2019 Strategic Needs Assessment
Inverclyde Children's Service Plan 2017	https://www.inverclyde.gov.uk/Children's Service Plan 2017
Full Strategic Plan Engagement and Consultation Report	https://www.inverclyde.gov.uk/Full Engagement Report 2019
Summary Engagement and Consultation Report	https://www.inverclyde.gov.uk/Summary Engagement Report 2019
Realistic Medicine	https://www.nhsinform.scot/NHS Realistic Medicine
Corporate Parenting Policy 2016 to 2019	https://www.inverclyde.gov.uk/Corporate Parenting Policy
Inverclyde People Plan 2017 to 2020	https://www.inverclyde.gov.uk/People Plan
GIRFEC Practice Guidance Meeting the needs of Children, Young People and Families	https://www.inverclyde.gov.uk/GIRFEC Practice Guidance in Inverclyde: Getting it Right for Every Child Practice Guidance 2016
Inverclyde Child Protection Committee Website	http://www.inverclydechildprotection.org/
Multi Agency Public Protection Arrangements (MAPPA)	https://www.inverclyde.gov.uk/Multi Agency Public Protection
Inverclyde Public Protection - Child Protection and Adult Support and Protection	https://www.inverclyde.gov.uk/Inverclyde Public Protection Adult Support and Protection
National Community Justice Strategy	https://www.gov.scot/Community Justice Strategy
Community Justice Outcome Improvement Plan 2017-2022	https://www.inverclyde.gov.uk/Community Justice Improvement Plan
The Keys to Life	https://keystolife.info/
Housing Contribution Statement	https://www.inverclyde.gov.uk/Housing Contribution Statement
All Together Now (Alcohol and Drug Strategy)	https://www2.gov.scot/All Together Now
Raising Scotland's Tobacco-free Generation	https://www.gov.scot/Raising Scotland's Tobacco-free Generation
Inverclyde Carer and Young Carer Strategy 2017 to 2022	https://www.inverclyde.gov.uk/Inverclyde Carer and Young Carer Strategy
Inverclyde Market Facilitation and Commissioning Plan	https://www.inverclyde.gov.uk/Inverclyde Market Facilitation and Commissioning Plan
Not Sure Just Ask Campaign	https://ihub.scot/Not Sure Just Ask Campaign
Scotland's Digital Health and Care Strategy	https://www.gov.scot/Scotland's Digital Health & Care Strategy
Scotland's Public Health Priorities	https://www.gov.scot/Scotland's Public Health Priorities
Inverclyde Child Protection Committee Website	http://www.inverclydechildprotection.org/
Scottish Universal Health Visiting Pathway	https://www2.gov.scot/Scottish Universal Health Visiting Pathway
Adverse Childhood Experiences (ACEs)	http://www.healthscotland.scot/Adverse Childhood Experiences

Tackling the Attainment Gap by Preventing and Responding to ACEs	http://www.healthscotland.scot/Tackling the Attainment Gap
Inverclyde Active Living Strategy	https://www.inverclyde.gov.uk/Active Living Strategy
National Outcomes for Scotland	https://www2.gov.scot/National Outcomes for Scotland
National Clinical Strategy for Scotland	https://www.gov.scot/National Clinical Strategy for Scotland
Joint Strategic Commissioning Plan for Older People 2013-2023	https://www.inverclyde.gov.uk/Strategic Commissioning Plan for Older People to 2023
Autism Strategy Action Plan (10 Year Plan)	https://www.inverclyde.gov.uk/Autism Strategy Action Plan
Social Prescribing Resources	http://www.healthscotland.scot/Social Prescribing Resources
Choose the Right Service (Inverclyde)	https://www.inverclyde.gov.uk/Choose the Right Service
Mental Health Strategy 2017 to 2017	https://www.gov.scot/Mental Health Strategy
Health and Care Experience Survey 2017/18	https://www.gov.scot/Health and Care Experience Survey
Scotland's Suicide Prevention Action Plan (Every Life Matters)	https://www.gov.scot/Every Life Matters
The Healthcare Quality Strategy for Scotland (2010)	https://www2.gov.scot/Healthcare Quality Strategy for Scotland
The 2020 Vision for Health and Social Care (2011)	https://www2.gov.scot/2020 Vision for Health and Social Care
Age, Home and Community: A Strategy for Housing - Scotland's Older People 2012-2021	https://www.gov.scot/Age, Home and Community Scotland's Older People 2012-2021
Health and Social Care Workforce Plan 2018	https://www.gov.scot/Health and Social Care Workforce Plan
The Modern Outpatient Programme 2017 - 2020	https://www.gov.scot/Modern Outpatient Programme
Palliative and End of Life Care by Integration Authorities 2018	https://www.gov.scot/Palliative and End of Life Care
Community Empowerment (Scotland) Act 2015	http://www.legislation.gov.uk/Community Empowerment Act
The New Care Standards Scotland	http://www.newcarestandards.scot/
The Health and Social Care Delivery Plan 2016	https://www.gov.scot/Health and Social Care Delivery Plan
Mental Health in Scotland: A 10 Year Vision	https://consult.gov.scot/Mental Health in Scotland: A 10 Year Vision
Primary Care Transformation Programme	https://www2.gov.scot/Primary Care Transformation Programme

This document can be made available in other languages, large print, and audio format upon request.

Arabic

هذه الوثيقة متاحة أيضا بلغات أخرى والأحرف الطباعية الكبيرة وبطريقة سمعية عند الطلب.

Cantonese

本文件也可應要求，製作成其他語文或特大字體版本，也可製作成錄音帶。

Gaelic

Tha an sgrìobhainn seo cuideachd ri fhaotainn ann an cànanan eile, clò nas motha agus air teip ma tha sibh ga iarraidh.

Hindi

अनुरोध पर यह दस्तावेज़ अन्य भाषाओं में, बड़े अक्षरो की छपाई और सुनने वाले माध्यम पर भी उपलब्ध है

Mandarin

本文件也可应要求，制作成其它语文或特大字体版本，也可制作成录音带。

Polish

Dokument ten jest na życzenie udostępniany także w innych wersjach językowych, w dużym druku lub w formacie audio.

Punjabi

ਇਹ ਦਸਤਾਵੇਜ਼ ਹੋਰ ਭਾਸ਼ਾਵਾਂ ਵਿਚ, ਵੱਡੇ ਅੱਖਰਾਂ ਵਿਚ ਅਤੇ ਆਡੀਓ ਟੇਪ 'ਤੇ ਰਿਕਰਾਡ ਹੋਇਆ ਵੀ ਮੰਗ ਕੇ ਲਿਆ ਜਾ ਸਕਦਾ ਹੈ।

Urdu

درخواست پر یہ دستاویز دیگر زبانوں میں، بڑے حروف کی چھپائی اور سننے والے ذرائع پر بھی میسر ہے۔

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Inverclyde
council