

INVERCLYDE HEALTH & SOCIAL CARE STRATEGIC PLAN 2019 – 2024

YEAR 3 REFRESH (2022-24)

As at 13/4/22

“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 Alan Cowan

Section 1

1. Background
2. Our Vision and Priorities for 2022-24
3. Demographic profile
4. Impact of Covid 19
5. Strategic Context
6. Engagement with communities

Section 2

Six Big Actions

Section 3

Financial Landscape

Section 4

What will success look like and how will we know

Appendices

- Appendix 1 - 6 Big Actions –Key Deliverables
- Appendix 2- National Outcomes
- Appendix 3- Public Health Priorities
- Appendix 4-Refreshed Housing Contribution Statement

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 अक्षरों 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 formie audio.

Punjabi

ਇਹ ਦਸਤਾਵੇਜ਼ ਹੋਰ ਭਾਸ਼ਾਵਾਂ ਵਿਚ, ਵੱਡੇ ਅੱਖਰਾਂ ਵਿਚ ਅਤੇ ਆਡੀਓ ਟੇਪ 'ਤੇ ਰਿਕਾਰਡ 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۔



Inverclyde Health & Social Care Partnership, Hector McNeil House, 7-8 Clyde Square, Greenock PA15 1NB



01475 715365



Strategic.Comm@inverclyde.gov.uk

Welcome from Alan Cowan

Chair Inverclyde IJB



We are pleased to present the refresh of our second Strategic Plan (2019-24) 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.

Our HSCP was set up in response to the requirements of the Public Bodies (Joint Working) (Scotland) Act 2014, often referred to as the integration legislation. Since integration, Inverclyde HSCP has had a clear ambition to improve the lives of the people of Inverclyde and the benefits of integration are already evidenced with excellent performance in a number of areas.

When we published the original five year plan in 2019 we had huge ambition to deliver the priorities set out within it, and looked forward to continuing our commitment to improving outcomes for Inverclyde people over the lifetime of the plan. In March 2020 the COVID-19 pandemic began to impact on our communities and services and it has brought two of the most challenging years for all of us. Our vision *“Inverclyde is a caring and compassionate community working together to address inequalities and assist everyone to live active, healthy and fulfilling lives”* has never been more important as we know the impact the pandemic has had on our communities. Despite the challenges and uncertainty brought by the pandemic there have been significant improvements in services over the last three years, however there is still much more to do.

Whilst the Covid 19 pandemic brought constraints and challenges there has also been significant learning, with new and innovative ways of working, and much to build into our future working. Our staff are our main asset and have demonstrated great resilience and commitment to supporting the Inverclyde community.

We had always planned to refresh this Strategic Plan in year three (2021/22) however the measures put in place to keep us safe during the COVID-19 pandemic meant that we had to prioritise key areas of work which we delivered through our Transition Strategic Plan (20-22).

This refreshed plan brings together the actions from the original Strategic Plan; the Transition Plan; and the Inverclyde Covid 19 Recovery Plan; and sets out our key priorities, focused around our Six Big Actions, for the remaining two years until March 2024.

I welcome the ongoing commitment from our staff; our partners; and our community to the delivery of actions within this plan to achieve the best possible outcomes for the Inverclyde community.

Section 1

1. Background

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 IJBs require to have a Strategic Plan and in line with the legal requirements, the IJB established a Strategic Planning Group with wide representation from partners including carers and community representatives, who are responsible for shaping and monitoring the effectiveness of the plan.

Within Inverclyde 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 continue to offer many different opportunities to build on our previous achievements and continue what we can improve on to benefit the local people and communities of Inverclyde.

1.1 Our original 5 year Plan (2019-24)

Inverclyde IJB initially set out through its 5 year Strategic Plan (2019-24), and in particular the 6 Big Actions, its ambitions and vision. This plan reflected the many conversations we 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.

Our original plan set out the shared strategic priorities and ambitions for Inverclyde and what we had planned to deliver by 2024; the plan was always to be refreshed in 2022-23 with a revised plan in place for the remaining two year term focussed on our future challenges.

1.2 Our Transition Plan (2020/22)

In response to the Covid 19 Pandemic and to allow services to focus on the delivery of crucial services and recovery, the work to deliver the original actions in the Strategic Plan (2019-24) were paused and a more streamlined Transition Plan for 20/22 developed. This transition plan reflected a revised priority list to include new Covid 19 related themes and the deliverability of existing priorities in the midst of a pandemic. Engagement with our communities was undertaken in December 2020 by CVS Inverclyde and Your Voice to gain a community view to ensure Inverclyde HSCP were prioritising the right themes and services for 2020/2022.

1.3 Our refreshed Plan (2022-24)

As previously stated, it was always the intention to refresh the original strategic plan in year 3 to ensure a continued focus on the key priorities for Inverclyde. This refreshed plan will set out our priorities for 2022-24 and should be read in the context of our original plan.

To undertake this refresh we have:

- Reviewed our original actions within the [Strategic Plan](#); [Transition Plan](#) and the wider [Inverclyde Alliance Covid 19 Partnership Recovery Plan](#)
- Updated our Strategic Needs Assessment to better understand our demographic and health challenges;

- Reviewed the impact of the Covid 19 pandemic on our services and wider community;
- Reviewed the wider planning context;
- Listened to our communities and what they have told us through various engagement opportunities

The actions in our previous plans have been reviewed and either closed off as complete or continued, in a new format into our refreshed plan. An audit trail of our previous actions is available on request.

2. Our Vision and Priorities for 2022-24

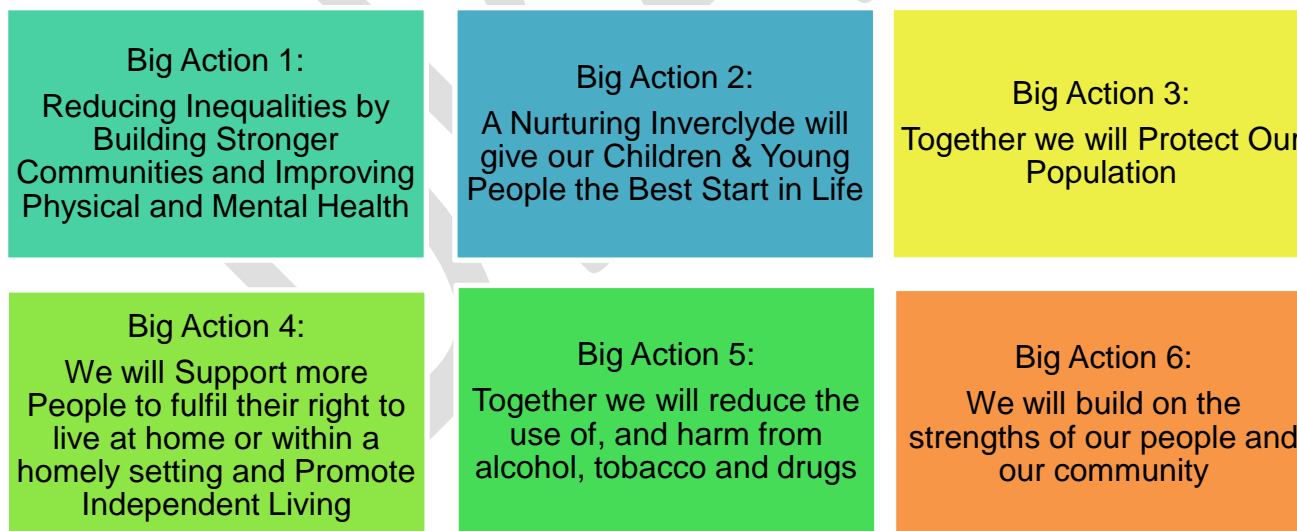
Inverclyde HSCP is built on our established integration arrangements and our vision, values and six 'Big Actions' set out in our original strategic plan were shaped through a wide range of mechanisms of engagement, to reach as many local people, staff and carers as possible. As part of that we also undertook targeted engagement with the children and young people of Inverclyde to ensure that their voices were heard.

Through recent discussion at our Strategic Planning Group and with our 3rd sector and community representatives, there was a strong consensus that we should retain our original vision and priorities set out through our six Big Actions for Inverclyde. Feedback received is that these were set for five years and are still relevant, and importantly, well known and understood by our communities.

2.1 Our Vision

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

2.2 Our Priorities-Six Big Actions

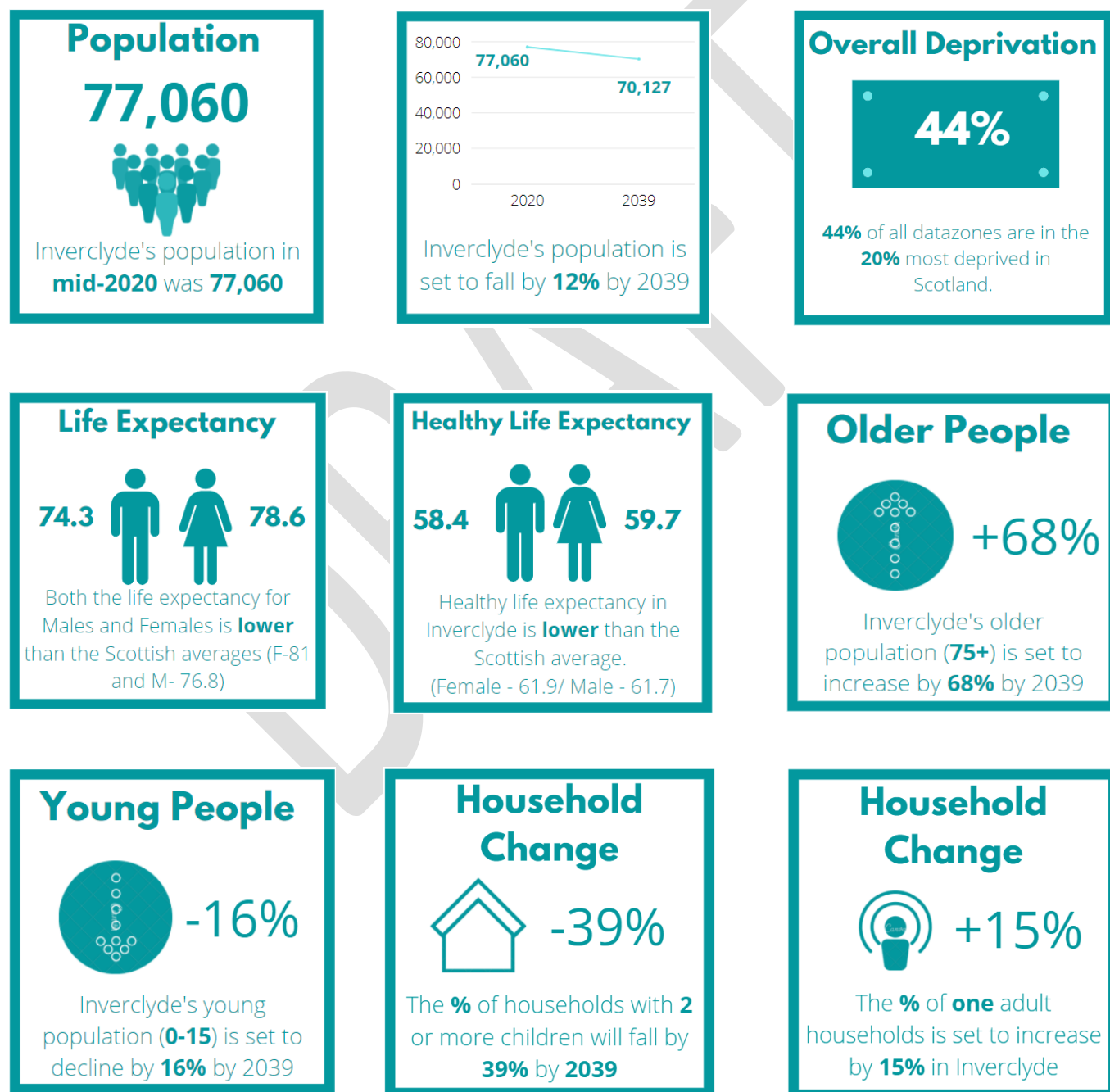


Our Six Big actions link clearly with the nine National Outcomes for Scotland and also the national outcome framework Children, Young People and Community Justice. Appendix 2 provides an overview of how our Big Actions align with the National Outcomes and Appendix 3, the links to national Public Health Priorities.

3. Demographic Profile

Our current demographic context for Inverclyde is presented fully within our updated Strategic Needs Assessment (SNA). The full Strategic Needs Assessment can be accessed [here \(link to be added\)](#). The Strategic Needs Assessment is updated utilising the most up to date verified data at the time of writing and as such there will be a data lag with some of the information sources.

Whilst the SNA doesn't therefore represent fully the impact of Covid which is still emerging, we know from our local intelligence the impact is being seen within our services and this will be fully captured within our Annual Performance Report and the next SNA which will be refreshed in line with the next strategic plan in 2024.



Our Strategic Needs Assessment makes reference to some key information relating to children, because our 6 Big Actions relate to all of our people, including our children and young people. Our Joint Children's Services Plan (2020-23) should be regarded as a companion document to this Strategic Plan, and can be found here [Children's Services Plan 2020/23](#).

4. Impact of Covid 19

The Covid 19 pandemic has had, and continues to have, a significant impact on Inverclyde and it will only be in the fullness of time that the true impact of Covid 19 will become clear. Our thoughts are with those members of our community who lost loved ones during the pandemic.

Our services worked incredibly hard through the pandemic to ensure services were delivered to those most vulnerable within Inverclyde, and whilst there were many challenges, and many will continue, we also know there has been positives and new and innovative ways of working.

National evidence shows that the pandemic has had a disproportionate impact for disadvantaged communities and specific vulnerable groups, a number of groups have been particularly affected, including households on low incomes or in poverty; low paid workers; children and young people; older people; disabled people; minority ethnic groups and women. Many of these are our service users therefore we need to ensure we continue to support them through these ongoing challenging times.

The consultation undertaken by YourVoice and CVS Inverclyde in December 2020 on behalf of the HSCP highlighted poverty, social isolation and mental health and wellbeing as the key areas of concern for the community. National research has concluded there will be significant longer-term impacts on mental health and wellbeing from the pandemic therefore we need to ensure a real focus in this area.

However positives have emerged locally and nationally in response to the pandemic, such as the rapid implementation of innovative approaches, particularly in relation to the expansion of digital services to ensure that service users remain connected, as well facilitating ongoing service delivery, albeit in a different way. One huge strength that has emerged has been the extraordinary response from Inverclyde's communities in coming together to offer help and support to each other. In addition the improved partnership working and communication across partners has been incredibly helpful and if all this can be sustained and strengthened then there will be a lasting positive impact on communities.

Our HSCP staff have been at the forefront of the Covid 19 pandemic and have showed their resilience and innovation throughout. Many teams have had to cope with increased staff sickness and absence due to self-isolation periods and for some specific areas, difficulties in recruitment to vacant posts. It will be important to continue to provide high levels of support to our teams to preserve and build their wellbeing.

5. Strategic Context

5.1. Related Strategies, plans and legislation

Inverclyde HSCP operates within a complex and evolving framework of national guidance and legislation; and local and regional plans; and policies. The partnership is committed to delivering high quality and appropriate services to our communities taking cognisance of this evolving landscape. Together the legislation and policies aim to shape a whole system of health and social care, providing seamless care for everyone who needs it. We have 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.

As this framework is large we have set out below a summary, which is not exhaustive, and also some further information related to the Independent Review of Adult Social Care and the National Care Service; and the Independent Care Review and The Promise which will undoubtedly shape current and future service delivery.

Legislation	National Strategies and guidance	Local Strategies and Guidance	HSCP Plans
Public Bodies(Joint Working) Scotland Act 2014	Remobilise; Recover; Redesign The Framework for NHS Scotland (2020)	Inverclyde Council Inverclyde Council Corporate Plan	Workforce Plan Digital Plan
Community Empowerment (Scotland) Act 2015	Realising Realistic Medicine (2017)	NHS Greater Glasgow and Clyde NHSGGC Remobilisation Plan	Primary Care Improvement Plan Rapid Rehousing Transition Plan
Children and Young People (Scotland) Act 2014	Getting it Right for Every Child (GIRFEC)	Moving Forward Together	
Carers (Scotland) Act 2016	Public Health Scotland's Strategic Plan (2020/23)	Turning the Tide through Prevention	Market Facilitation and Commissioning Plan
The 2018 General Medical Services Contract in Scotland	A National Clinical Strategy for Scotland (2016)	NHS GGC Mental health Strategy	Clinical and Care Governance Strategy and Plan
The Equality Act(Scotland) 2010	Independent Care Review-The Promise 2020	Inverclyde Alliance (Community Planning Partnership) Local Outcome Improvement Plan (LOIP)	
Child Poverty (Scotland) Act 2017		Integrated Children's Services Plan Inverclyde Alcohol and Drug Partnership Strategy Inverclyde Community Justice Outcomes Improvement Plan	

5.2 Independent Review of Adult Social Care and a National Care Service

The Independent Review of Adult Social Care in Scotland was published in February 2021 and set out the vision for adult social care across Scotland. The principal aim of the review was to recommend improvements to adult social care in Scotland, primarily in terms of the outcomes achieved by and with people who use services, their carers and families, and the experience of people who work in adult social care. The review took a human-rights based approach. The report set out three key foundations which the review proposed as integral to future delivery:

- The need for further implementation of need self-directed support and full integration of health and social care
- Nurturing and strengthening the social care workforce.
- Support and enable unpaid carers to continue to be a cornerstone of social care support

In August 2021 the Scottish Government published its consultation paper “A National Care Service for Scotland” which went beyond the recommendations in the adult social care review report. The consultation sought views on 7 key areas:

- Improving Care for People
- Establishing a National Care Service
- The scope of a National Care Service
- Reforming Integration Joint Boards
- Improving Commissioning of Services
- Regulation
- Valuing people who work in Social Work

Nearly 1400 responses have been received from the consultation and await further information. At this time it is still uncertain what structural and systems change will be required, however we expect over the lifetime of this plan to better understand the Scottish Government’s plans for future delivery of health and social care; and we will ensure recommendations and specific actions from the Scottish Government are implemented.

5.2 Independent Care Review and The Promise

Beginning in 2016, The Independent Care Review consulted with over 5,500 individuals with over half being babies, infants, children, young people and adults with experience of care. This also included over 300 families and voices from the paid and unpaid workforce. On 5 February 2020, the Care Review published seven reports, with ‘the promise’ narrating a vision for Scotland, built on Five Foundations:

Voice: Children and young people must be listened to and meaningfully and appropriately involved in decision making about their care, with all those involved properly listening and responding to what they want and need. There must be a compassionate and caring decision making culture focussed on children and those they trust.

Family: Where children are safe in their families and feel loved they must stay – and families must be given support together, to nurture that love and overcome the difficulties which get in the way.

Care: Where living with their family is not possible, children must stay with their brothers and sisters where safe to do so, and belong to a loving home, staying there for as long as needed.

People: The children that Scotland cares for must be actively supported to develop relationships with people in the workforce and wider community, who in turn must be supported to listen and be compassionate in their decision-making and care.

Scaffolding: Children, families and the workforce must be supported by a system that is there when it is needed. The scaffolding of help, support and accountability must be ready and responsive when it is required.

Inverclyde HSCP in partnership with CVS Inverclyde and Your Voice submitted a successful application to the Promise Partnership and have now established an I Promise Partnership locally. This will enable Inverclyde to identify and design system changes that can be informed from our current learning and to reach out further across the community. Paramount to this will be the commitment to cultural changes in how Inverclyde HSCP and in turn our partners, delivers services across the partnership.

5.4 Equality and Diversity

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). An updated Equalities Outcome Plan is required for the HSCP and this will be developed and implemented in the lifetime of this refreshed plan. An Equality Impact Assessment has been undertaken of this plan and can be accessed here-([link to be added once published](#))

6. Engagement with Communities

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.

Our original five year Strategic Plan was developed in 2019 by engaging and consulting fully with our staff, partners and the communities we serve. That feedback along with the responses from our survey questionnaire, Strategic Needs Assessment and locality profile intelligence gave us the understanding of local perspective and things that matter to people. From that we developed our Six Big Actions.

This refreshed plan (2022-24), has been developed following feedback from a range of partners involved in the Strategic Planning Group and consultations undertaken previously by our 3rd sector and community partners. Full consultation on this plan will be undertaken with our communities and key feedback included in the final version. We will continue to seek out the voices of local people in all our future planning and delivery.

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. Inverclyde Alliance (Community Planning Partnership) previously agreed to trial a model of locality engagement which would meet both the Public Bodies (Joint Working) Scotland Act 2014 and the Community Empowerment Act 2015 legislation, and try to build an overarching structure for community engagement across Inverclyde.

The structure involved the establishment of six locality based Communication and Engagement groups and six formal Locality Planning Groups. The Covid 19 pandemic has hampered the full development of locality planning structures however six localities were developed as follows:

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

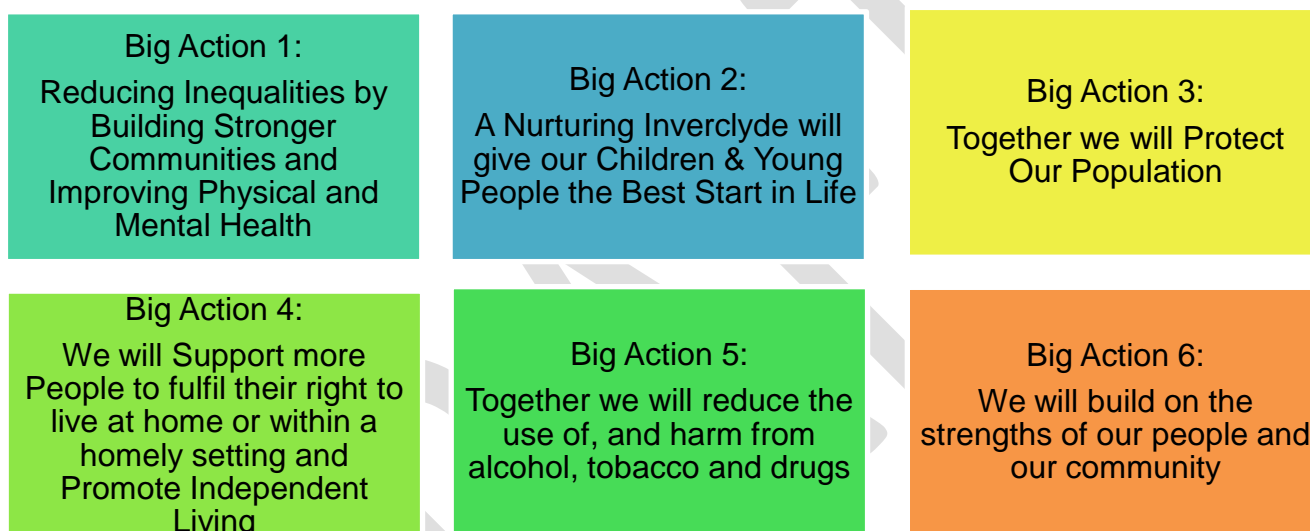
The six Communication and Engagement Groups are now well established across Inverclyde. Two Locality Planning Groups were piloted in Port Glasgow and Inverkip and Wemyss Bay and learning from these groups and discussions for future models of delivery are underway. A proposal is being considered to retain the six Communication and Engagement Groups to deliver under the Community Empowerment Act 2015 and have responsibility for developing the locality plans; and move to Locality Planning Groups (East and West Inverclyde) to meet the needs of the HSCP under the Public Bodies (Joint Working) Scotland Act 2014 legislation. Through the remaining 2 years of this plan locality planning groups will be fully established.

Section 2

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 2 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), with 6-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

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. Although the roots of inequalities are complex and interconnected, 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) click [here](#) to view the LOIP. 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 – the lack of satisfying work or activity can also damage health. Intergenerational inequalities and poverty impacts on all aspects of people's lives. We need to ensure that our community are supported to engage in ways that are accessible for them, our focus on improving digital access and also innovative ways to manage long term health conditions will be necessary.

We know that Covid 19, along with the impacts of Brexit, and the recent increases to the cost of living, will have a significant effect on the most vulnerable members in our community. The Council and HSCP are trying to mitigate where possible these impacts through the Anti-Poverty funding and Covid 19 Recovery funding, and we will continue to work through our strong partnerships to tackle the underlying causes of deprivation.

We recognise mental health has a significant impact on our local community and this was a key message from our previous, and also more recent engagement process, and the strategic needs assessment. Poor mental health often impacts on physical health and the person's ability to work or to engage with their community therefore we will continue to innovate to deliver quality mental health services within Inverclyde.

Big Action 1 Roadmap

REDUCING INEQUALITIES BY BUILDING STRONGER COMMUNITIES AND IMPROVING PHYSICAL AND MENTAL HEALTH

1.1 We will respond to the proactive and reactive needs of the Covid 19 Pandemic

1.2 We will review and deliver the HSCP Digital strategy

1.3 We will deliver a replacement recording system to support health and social care

1.4 We will deliver HSCP projects funded through the Council/HSCP Anti-poverty fund which aim to support the most vulnerable in our communities

1.5 We will develop mental health inpatient and community advanced clinical practice roles to sustain and improve service delivery

1.6 We will develop and implement the Scottish Government's Mental Health and Wellbeing Primary Care Service model

1.7 We will review the action plan and strengthen relationships within the Inverclyde Financial Inclusion partnership

1.8 We will contribute to the delivery of the NHSGGC mental health strategy and deliver on specific areas for Inverclyde

1.9 We will deliver the health improvement plan which is focussed on delivering the national and NHSGGC public health priorities



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, and this requires us to work with key partners across Inverclyde HSCP to support those families, children and young people particularly affected by alcohol, drugs and mental illness.

"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. This will continue through the work of the Scottish Government's Independent Care Review and The Promise, whose aim is to identify and deliver lasting change in Scotland's 'care system', and leave a legacy to transform the wellbeing of infants, children and young people.

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, click [here](#) to view the full analysis and our Children's Service Plan.

Big Action 2 Roadmap

A Nurturing Inverclyde will give our Children and Young People the Best Start in Life

2.1 We will implement and deliver all aspects of #The Promise Partnership within Inverclyde

2.2 We will review the support to families for young carers and children with Additional Support Needs (ASN)

2.4 We will support children who require to be looked after away from home to remain within Inverclyde with a particular focus on increasing availability of foster care

2.3. We will continue to support young people's mental health and wellbeing through the delivery of the Children's Wellbeing Service

2.5 We will continue to deliver a Whole System Approach to youth offending including EEI, diversion, court support, embedding Care and Risk Management (CARM) to support risk reduction and management in the community.

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 and clinical and care governance 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.

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.

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.

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 and work closely with our partners to deliver the Community Justice Outcome Improvement Plan. We know that the factors that cause women to become involved in the criminal justice system are very likely to relate to multiple vulnerability. In addition we know that many of our service users have experienced trauma therefore we need to ensure we are supporting our staff to fully understand trauma informed approaches are key to delivery and support.

We will look to strengthen our whole-system approach to offending extending, and will develop our system of early and effective intervention to 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.

Big Action 3 Roadmap

Together we will protect our population

3.2 We will continue to deliver our Clinical and Care Governance Plans and ensure appropriate reporting on feedback and learning to be presented to HSCP Clinical and Care Governance group and IJB

3.1 We will implement the learning and recommendations from the 2021 Adult Protection Inspection and any Significant Adverse Incidents (SAI's)/Significant Critical Incidents (SCI's)

3.3 We will fully implement the national Child Protection Guidance with a strengthened focus on children's rights, engagement with families and more holistic approaches to reduce stressors on families and communities

3.4 We will continue to support the national Child Abuse Enquiry as required and implement learning and recommendations once available

3.5 We will roll out trauma informed approaches across all HSCP staff and commissioned services to ensure delivery of trauma informed services

3.6 We will continue to progress the Woman in Criminal Justice System Project



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. 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 using a ranges of services including increased use of technology and we have continued to develop approaches to independence while managing risk across all care groups.

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. Multidisciplinary teams and technology has enabled us to support people more long term. In line with National Strategy and GG&C Moving Forward Together the HSCP will continue to develop care in the community and provide a more joined up service with hospitals to stop people needing hospital care, and when they do get them home quickly. If members of our community require to go into hospital we have an excellent record on supporting them 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 delivery supports and we will build on this. Some people will require support that can only be provided in a care home and we recognise this as a positive choice. Care homes in particular have been impacted by Covid 19 and we will continue to work with local care home providers to ensure the highest standards of care are maintained.

We are well underway to having a new purpose built learning disability 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.

All of our community have the basic human right to a home or homely setting. We have identified the need to improve our responses to people presenting as homeless, including 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 and require sustained support.

Our aim is 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 Housing Contribution Statement (Appendix 4) brings the HSCP together with local housing providers to plan future housing designed for a lifetime of independent living.

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.

4.1 We will continue to roll out Access 1st to all adult services across the HSCP to ensure easy access and the right support to people accessing adult social care services

4.2 We will undertake and complete the Review of our internal and external Care at Home Services

4.3 We will continue to deliver the range of work related to Unscheduled Care with a focus on preventing admission for those with long term conditions; and ensuring we continue our good record on ensuring people are not delayed from being discharged from hospital.

4.4. We will support the development of the Care Home Collaborative Team for NHSGGC through the hosting agreements for Hub 5.

4.5. We will ensure engagement in the development of the Care Home Collaborative and utilisation of available resources by local care homes to support residents care

4.6 We will deliver the new Learning Disability Hub to provide transformational support for our learning disabled clients

4.7 We will continue to work to ensure appropriate Out of Hours services are available for the Inverclyde community

4.8 We will continue to work with our wider primary care partners to implement the Primary Care Improvement Plan

4.9 We will continue to support and ensure carer engagement to help develop and shape services

4.10 We will continue to work to support patients and families through the provision of compassionate, responsive, patient centred end of life care

4.11 We will continue to support Inverclyde residents through the provision of Reablement and Rehabilitation programmes.

4.12 We will implement a new model for homeless services within Inverclyde to support people where possible in their own tenancies

4.13 We will continue to work toward delivering Inverclyde's Rapid Rehousing Transition Plan

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. A higher proportion of our 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 original Strategic Plan highlighted that communities felt more had to be done to support families affected by alcohol and drugs.

The multi-agency Alcohol and Drug Partnership (ADP) is responsible for developing strategic approaches to tackling these issues and increased funding from the Scottish Government has enabled a range of work to be progressed to date. HSCP Alcohol and Drug services have been redesigned to provide more a more cohesive and fully integrated service for people affected by drugs and alcohol.

We know there is much more work to be done and the increased focus on developing services and on recovery will continue to be supported by a wider recovery system of care. This will include extending services and support to people both recovering from alcohol and drug use and their 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.

Big Action 5 Roadmap

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

5.1 We will continue to commission and expand our recovery and support communities for those affected by drugs and alcohol

5.2 We will deliver on the Medication Assisted treatment (MAT) standards across all services within the Alcohol and Drug Partnership

5.3 We will develop a residential rehabilitation pathway for people affected by drugs and alcohol and increase the number of people from Inverclyde accessing these residential services

5.4 We will expand the Alcohol and Drug recovery service (ADRS) to deliver a 7 day a week service to ensure appropriate support for individuals.

5.5 We will continue to work with our NHS GGC partners to deliver smoking prevention and cessation within Inverclyde

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. Social isolation or exclusion is common in society and impacts on people's physical and mental health and wellbeing. This has been exacerbated by the Covid 19 pandemic and we know from our recent engagement our communities feel this is a key concern.

The human relationships that people need can be developed by creating opportunities in communities to notice, to connect and to show kindness. Given the inherent strength of our communities, seen through Covid 19, and the overwhelming comments during our previous and ongoing engagement, we will continue to build on this. We are also committed to working with communities to find ways of tackling stigma, felt most by some of our most vulnerable in our communities.

Involvement in service design and feedback from our service users and community is key to our development and we need to ensure we have robust feedback mechanisms and learn from this. We need to ensure our partners and communities are involved in future planning of health and social care services.

Health and social care services cannot deliver everything for everyone therefore it's important that we have our Market Facilitation and Commissioning Plan. This gives us the opportunity to design and commission services differently so that people are treated first and foremost as people rather than for their specific conditions.

We recognise our duties to protect the health of our staff and to ensure that they have a safe working environment and that we look after their health and wellbeing. This extends to our commissioned partners and carers who are key partners in our wider delivery.

Whilst we have excellent assets within our community, including our local award winning new Greenock Health and Care Centre, we want to ensure we have continued investment to enable our services are delivered to the highest possible standard.

Big Action 6 Roadmap

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

6.1. We will implement Care Opinion to ensure a consistent means of evidencing that feedback is being requested and that staff and the public can see what changes have occurred as a result

6.2 We will use our complaints process to ensure continuous learning and development of quality services

6.3. We will continue to deliver on the Market Facilitation and Commissioning Plan and support providers to be ready to tender for future contracts

6.4 We will continue Inverclyde Cares to develop the four key focus areas of addressing stigma; supporting bereavement and loss; implementing The Kindness Award; and delivering the Covid 19 memorial project

6.6 We will work with Inverclyde Council in participatory budgeting and explore ways the HSCP can contribute to this

6.5 We will take forward locality planning through the establishment of locality planning groups for the HSCP, linking with key partners and our community

6.7 We will develop our HSCP workforce plan with a key focus on supporting the health and wellbeing of our staff and our commissioned partners' staff

6.8 We will continue to develop initiatives and campaigns to support our communities through Covid 19 recovery

6.9 We will continue to develop Capital investments to support sustained delivery and improvement of services

Section 3

Health & Social Care Spend

Financial Performance to Date

Financial Year 2019/20

The financial year 2019/20 resulted in an overall surplus against budget of £1.169m. The main reasons for this were as follows:

- Additional Covid funding of £0.400m to be carried forward
- Various Health services underspends of £0.743m due to the delay in filling vacancies
- Underspend in Prescribing £0.300m
- Underspend in Social Care services £0.504m mainly due to delay in filling vacancies
- Overspends in Mental Health budget £0.343m
- Overspends in Learning and Psychical Disabilities £0.315m mainly due to increased demand and equipment costs

Financial Year 2020/21

The financial year 2020/21 resulted in an overall surplus against budget of £6.482m. The main reasons for this were as follows:

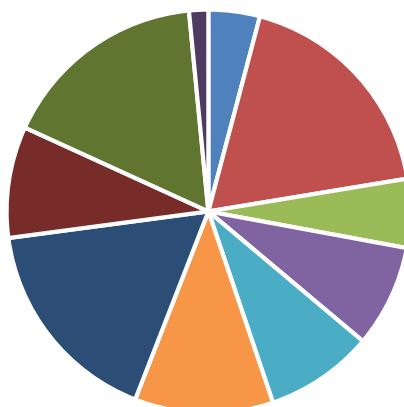
- Additional Covid funding of £3.250m to be carried forward
- Various Health services underspends of £1.023m due to the delay in filling vacancies
- Underspends in PCIP, Action 15 and ADP £1.413m when funding was received at the end of the year but commitments not due to 2022/23.
- Underspend in Prescribing £0.454m
- Underspend in ADRS £0.499m mainly due to vacancies

The IJB is facing continued cost pressures in a number of areas including Children & Families Residential placements, Learning disability, Mental Health inpatient services and Prescribing.

The key areas of uncertainty for the IJB include:

- Impact of future Scottish Government funding levels for our partners
- Pay settlements
- Demand led pressures in all services
- Prescribing costs

2022/23 Budget by Service



- Strategy & Support Services
- Learning Disabilities
- Children and Families
- Family Health Services
- Set Aside
- Older Persons
- Mental Health
- Prescribing
- Other
- Addiction & Substance Misuse

IJB Budget 2022/23 to 2023/24

The high level budget estimates for the IJB for the next three years are based on assumed pressures around pay inflation, drug inflation and demographic changes. We expect a net anticipated funding gap of £2.046m over this period.

The IJB recognises that there are existing core funding pressures in Children and Families and Learning Disabilities. As such the relevant services have developed 2 spend to save initiatives which deliver a total of £0.500m recurring savings. The Savings and Efficiencies also includes the 2022/23 effect of prior year savings of £0.143m that were agreed.

Key Budget Assumptions

Partner Contributions

- **Health** – in 2022/23 we anticipate a 2% uplift on all budgets in line with the Scottish Government Health settlement. This includes a 2% uplift in Set Aside. This same 2% assumption has been used in the remaining year of the plan.
- **Council** - in 2022/23 The Government announced extra funding for councils for onward transmission to IJBs of £554m as part of its Winter planning Commitment. A condition of the local authority grant settlement is that the 2022/23 contribution by councils to their IJBs should be no less than the recurring 2021/22 IJB contribution plus that council's share of the £554m. The IJB's uplift from Inverclyde Council linked to this is £9.184m. In addition to this Scottish Government also announced an Additional £22m of Social Care funding for 2022/23. The IJB's share of this would be an additional £0.360m and an additional £40m for Multi Discipline teams (MDTS) in 22/23. The IJB's share of this is an additional

£0.655m, Additional £30m for Band 3/4 changes. The IJB's share of this is an additional £0.491m. Also the IJB will receive its share of the Mental Health Recovery and Renewal Funding. This is an additional £0.051m and its share of the National Trauma Training funding. This is an additional £0.050m. In addition there is a one off contribution of £0.550m to be passed to IJB Earmarked Reserves from Council Reserves to assist with general pressures in the IJB.

For the remaining year of the Council funding the IJB is expecting a flat cash settlement.

Pressures and Savings 2023/24

- Pay award pressures - £1.3m Council staffing based on estimated pay uplift. We are assuming all Health pay awards are funded from Scottish Government funding.
- Demographic Changes - £0.280m assumed estimate increased costs due to demographic changes in the area.
- Loss of Council non-recurring funding - £0.550m assumed one off funding expected to stop at the end of 2022/23.
- Drug Inflation Pressure - £0.100m assumed increase in 2022/23 onwards. We expect this to be covered as part of the overall 2% Health budget increase.
- Savings – it is anticipated that additional funding or savings will be required to offset any resultant funding gap each year. Current estimate in £2.046m in year 2023/24.
-

IJB Budget 2021/22 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:

PARTNERSHIP FUNDING/SPEND ANALYSIS	Anticipated Outturn 2021/22 £000	Proposed Budget 2022/23 £000	Indicative 2023/24 £000
NHS Contribution to the IJB	102,755	99,214	100,575
NHS set aside (notional)	28,177	29,350	29,937
Council Contribution to the IJB	57,553	66,071	65,571
IJB Net Income	<u>188,485</u>	<u>194,635</u>	<u>196,083</u>
Social Care Expenditure	57,553	66,071	67,623
Health Expenditure	130,932	128,564	130,506
Transfer to Reserves	767	0	0
HSCP SURPLUS/(DEFICIT)	0	0	(2,046)

Section 4

What will success look like and how will we know

The Inverclyde Health & Social Care Partnership Strategic Plan (2022-24) lays out our vision, our ambitions, and our aspirations for the next two years. These have been shaped in partnership with our communities and other partners and the Plan provides a realistic blueprint for us to work together to deliver better outcomes for the people of Inverclyde throughout this Covid 19 recovery period.

Delivery of effective and lasting transformation of Health and Social Care is central to Inverclyde's vision and this plan outlines how we will continue on our journey to plan and deliver a range of services with partners, carers and those who use services. We firmly believe health and social care integration brings great opportunity to work together to serve communities and individuals better.

Each of our six big actions has an implementation plan which sets out the specific details of what we will do. The Strategic Planning Group will monitor and report regularly to the IJB. By providing specific actions, we can be held to account by our communities and our Integration Joint Board (IJB), and we can also monitor the effectiveness of our actions.

We review our performance data against agreed local and national performance indicators including:

National Integration Indicators
Ministerial Strategic Group (MSG)
Statutory Performance Indicators

Throughout the lifetime of this plan the HSCP will implement Pentana a performance management information system which will allow great monitoring of this plan and more accurate and detailed management of our performance information.

The IJB will receive a formal Annual Performance Report providing accountability and strong governance with a six monthly performance update. 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.

The link to our 2020/21 Annual Performance Report can be found [here](#)

Appendix 1 Our Key Deliverables

Big Action 1	
1.1	We will continue to respond to the proactive and reactive needs of the Covid 19 Pandemic as per Scottish Government guidelines
1.2	We will review and deliver the HSCP Digital strategy which encompasses all aspects of staff, service and user delivery
1.3	We will deliver the replacement recording system to support health and social care delivery
1.4	We will deliver the HSCP projects funded through the Council/HSCP Anti-poverty fund which aims to support the most vulnerable in our communities
1.5	We will develop mental health inpatient and community advanced clinical practice roles to sustain and improve service delivery
1.6	We will develop and implement the Scottish Government's Mental Health and Wellbeing Primary Care Service model
1.7	We will review the action plan and strengthen relationships within the Inverclyde Financial Inclusion Partnership
1.8	We will contribute to the delivery of the NHSGGC mental health strategy and deliver on specific areas for Inverclyde
1.9	We will deliver the health improvement plan which is focussed on delivering the national and NHSGGC public health priorities

Big Action 2	
2.1	We will implement and deliver all aspects of #The Promise Partnership within Inverclyde
2.2	We will review the support to families for young carers and children with Additional Support Needs (ASN)
2.3	We will continue to support young people's mental health and wellbeing through the delivery of the Children's Wellbeing Service
2.4	We will support children who require to be looked after away from home to remain within Inverclyde with a particular focus on increasing availability of foster care
2.5	We will continue to deliver a Whole System Approach to youth offending including EEI, diversion, court support, embedding Care and Risk Management (CARM) to support risk reduction and management in the community.

Big Action 3	
3.1	We will implement the learning and recommendations from the 2021 Adult Protection Inspection and any Significant Adverse Incidents (SAI's)/Significant Critical Incidents (SCI's)
3.2	We will continue to deliver our Clinical and Care Governance Plans and ensure appropriate reporting on feedback and learning to be presented to HSCP Clinical and Care Governance group and IJB
3.3	We will fully implement the national Child Protection Guidance with a strengthened focus on children's rights, engagement with families and more holistic approaches to reduce stressors on families and communities
3.4	We will continue to support the national Child Abuse Enquiry as required and implement learning and recommendations once available
3.5	We will roll out trauma informed approaches across all HSCP staff and commissioned services to ensure delivery of trauma informed services
3.6	We will continue to progress the Woman in Criminal Justice System Project

Big Action 4	
4.1	We will continue to roll out Access 1 st to all adult services across the HSCP to ensure easy access and the right support to people accessing adult social care services

4.2	We will undertake and complete the Review of our internal and external Care at Home Services
4.3	We will continue to deliver the range of work related to Unscheduled Care with a focus on preventing admission for those with long term conditions; and ensuring we continue our good record on ensuring people are not delayed from being discharged from hospital.
4.4	We will support the development of the Care Home Collaborative Team for NHSGGC through the hosting agreements for Hub 5.
4.5	We will ensure engagement in the Care Home Collaborative and utilisation of available resources by local care homes to support resident care
4.6	We will deliver the new Learning Disability Hub to provide transformational support for our learning disabled clients
4.7	We will continue to work to ensure appropriate Out of Hours services are available for the Inverclyde community
4.8	We will continue to work with our wider primary care partners to implement the Primary Care Improvement Plan
4.9	We will continue to support and ensure carer engagement to help develop and shape services
4.10	We will continue to work to support patients and families through the provision of compassionate, responsive, patient centred end of life care
4.11	We will continue to support Inverclyde residents through the provision of Reablement and Rehabilitation programmes.
4.12	We will implement a new model for homeless service within Inverclyde to support people where possible in their own tenancies
4.13	We will continue to work toward delivering Inverclyde's Rapid Rehousing Transition Plan

Big Action 5	
5.1	We will continue to commission and expand recovery and support communities for those affected by drugs and alcohol
5.2	We will deliver on the Medication Assisted Treatment (MAT) standards across all services within the Alcohol and Drug Partnership
5.3	We will develop a residential rehabilitation pathway for people affected by drugs and alcohol and increase the number of people from Inverclyde accessing these residential services
5.4	We will expand the HSCP Alcohol and Drug recovery service (ADRS) to deliver a 7 day a week service to ensure appropriate support for individuals.
5.5	We will continue to work with our NHS GGC partners to deliver smoking prevention and cessation within Inverclyde

Big Action 6	
6.1	We will implement Care Opinion to ensure a consistent means of evidencing that feedback is being requested and that staff and the public can see what changes have occurred as a result
6.2	We will use our complaints process to ensure continuous learning and development of quality services
6.3	We will continue to deliver on the Market Facilitation and Commissioning Plan and support providers to be ready to tender for future contracts
6.4	We will continue Inverclyde Cares to develop the four key focus areas of addressing stigma; supporting bereavement and loss; implementing the Kindness Award; and delivering the Covid 19 memorial project
6.5	We will take forward locality planning through the establishment of locality planning groups for the HSCP, linking with key partners and our community
6.6	We will work with Inverclyde Council in participatory budgeting and explore ways the HSCP can contribute to this
6.7	We will develop our HSCP workforce plan with a key focus on supporting the health and wellbeing of our staff and our commissioned partners' staff
6.8	We will continue to develop initiatives and campaigns to support our communities through Covid 19 recovery
6.9	We will continue to develop Capital investments to support sustained delivery and improvement of services

Appendix 2 - 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 3 - 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 4 Housing Contribution Statement

The Housing Contribution Statement is a statutory requirement, set out in the Statutory Guidance and Advice note to support the Public Bodies (Joint Working) (Scotland) Act 2014. The guidance advises Integration Authorities, Health Boards and Local Authorities on their responsibility to involve Housing Providers to achieve outcomes for Health and Social Care. The Inverclyde Housing Contribution Statement (HCS) has been developed in partnership with Housing and Health and Social Care strategic planners and operational practitioners. The statement acknowledges people's right to live at home or within a homely setting; that suitable, quality housing contributes to reducing health inequalities; and recognises Housing's role as the 'stabilising third leg of health and social care integration

Inverclyde has successfully established a multi-agency Housing Partnership Group (HPG) which has responsibility for delivering on the actions contained within the HCS.

The currently HCS is underpinned by 3 outcomes which the HPG will aim to realise:

Outcome 1 - Increase the provision of quality, affordable homes across all tenures which meet the needs of the people of Inverclyde

Outcome 2 - Provide suitable provision of housing adaptations and housing related support to ensure that our people live in homes which meet their physical and wellbeing needs

Outcome 3 - Ensure easy access to relevant information and advice on housing and support services to improve housing outcomes for all Inverclyde residents

The HPG has determined that the following actions will help deliver on its outcomes, help meet the vision of the Strategic Plan, and safeguard Housing's role as the stabilising third leg of Health and Social Care integration:

1. Use evidence based need and demand to identify specialist provision housing requirement early in the planning of the Affordable Housing Supply Programme.
2. Review how information about partners' services, products and customers is shared and who they share it with.
3. Continue the joint review of Inverclyde's Adaptation Services
4. Continue to improve housing outcomes across a range of measures for young people, including care leavers.
5. Ensure smooth transition to a Rapid Rehousing approach by 2024, utilising Housing First where necessary.
6. Assess whether a buyback programme assisted by the Affordable Housing Supply Programme might better address health inequalities & build stronger communities.
7. Review and address fuel poverty in light of the Scottish Government's target to reduce the number of households in fuel poverty to 5% by 2040.
8. Review how to address poor stock condition in the private rented and owner occupied sectors

The HPG will continue to address and deliver on ongoing actions from the actions in the HCS 2019-2024 however the Statement 2019-2024 is currently being refreshed to reflect the Inverclyde Health and Social Care Partnership Strategic Plan 2019-2024 three year refresh. The progress made will be reviewed, any gaps identified and an updated action plan to reflect priorities for the remaining 2 years (2022-24). The refreshed Housing Contribution Statement will be available here. [Add Link in here](#)