

12th June 2017



Report To: Inverclyde Integration Joint Date:

Board

Report By: Louise Long Report No: IJB/29/2017/HW

Corporate Director

Inverclyde Health & Social Care

Partnership (HSCP)

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Subject: CHIEF OFFICER'S REPORT

1.0 PURPOSE

1.1 The purpose of this report is to update the Integration Joint Board on a number of workstreams that are currently underway.

2.0 SUMMARY

2.1 There are a number of issues or business items or workstreams that the IJB will want to be aware of, that perhaps do not require a full IJB Report. IJB members can of course ask that more detailed reports are developed in relation to any of the topics covered. This paper provides a brief summary of such workstreams that are currently or soon to be live.

3.0 RECOMMENDATIONS

- 3.1 That the Integration Joint Board notes the Chief Officer's Report and advises the Chief Officer if any further information is required.
- 3.2 That the Integration Joint Board advises the Chief Officer if IJB Seminars are to be organised.

4.0 BACKGROUND

4.1 This report highlights workstreams that IJB Members should be alert to.

4.2 Compassionate Inverclyde

Compassionate Inverciyde is a new public health approach to palliative and end of life care which will improve the health and wellbeing of people facing the challenges associated with potentially life-limiting illness, loneliness, dying, death and bereavement in Inverciyde. It will do this by adopting a people-led, strengths-based approach to promote compassionate citizenship and to transform societal, institutional and individual attitudes and experiences.

Specific projects will include:

- Developing and delivering a transferable wellbeing programme which can be offered to patients and carers, but also to community groups, workplaces and schools.
- Recruiting, training and developing volunteer "compassionate citizens" who
 will be able to support dying people and their families across the
 community in partnership with formal services.
- Undertaking awareness-raising and transformational work, initially with schools but also extending this to the wider population.
- Working with local businesses and workplaces to promote compassionate policies and processes aimed at supporting and equipping employees dealing with their own or a loved one's diagnosis and potentially end of life / bereavement

The Compassionate Inverclyde programme will enable and empower patients and their families who are facing the challenges associated with the end of life to help and support each other at times of increased health need and in bereavement, recognising the importance of families and communities working alongside formal services.

In all of these ways, Compassionate Inverclyde will have a transformative effect on the community of Inverclyde, developing social capital, building community capacity and resilience and positively influencing the lives of individual community members.

4.3 I;DEAS –Invercive Delivering Effective Advice and Support.

Inverclyde Council/HSCP is the lead partner in the I:DEAS programme-a £2.35m contract with Big Lottery, backed by European Social Funding, to increase the financial capacity and improve the social inclusion of the most disadvantaged individuals and households in Inverclyde. Commencing in August 2017 approx. 2000 local people will be offered support around a range of interventions which will aim to support them to have increased money management skills and are no longer affected by debt as a barrier to social inclusion.

The contract between the Council and Big Lottery has now been signed and the I:DEAS Steering Group has been established to ensure coordination and contract governance. Although the contract is with the Big Lottery, European Social Funding (ESF) requirements are applicable to all aspects of the contract delivery and to ensure compliance with these strict requirements, a case management system is currently being procured. A detailed Delivery plan; Communications Plan and Engagement Plan have all been developed and approved by the Big Lottery.

The Council/HSCP has now signed contracts with a range of local and national partners including Barnardo's; CVS Inverclyde; Financial Fitness; River Clyde Homes; Scotcash and The Wise Group alongside service level agreements with the HSCP Advice Services Team and the Council's Community Learning and Development service.

The programme will aim to support individuals who meet the contract criteria of being individuals in workless, lone parent (i.e. living in a single adult household with dependent children) or low income households by delivering a range of intensive holistic services. These new services are aimed to improve financially capability and reduce debt and will complement the current range of core services available locally.

The range of services will aim to:

Help managing & Prevent Debt
Provide access to Affordable Credit and lack of basic transactional banking
Improve digital skills and money management skills
Improve money management skills online including access to affordable products
Support with Income Maximisation
Reduce Fuel Poverty
Improve Family Support
Implement a financial inclusion volunteer strategy

The programme is funded for 3 years and all participants involved in the programme will have a bespoke action plan based on their individual needs and a local mentor to support them on their journey to improved financial outcomes.

4.4 IJB Seminars

In recognition that the HSCP is a complex organisation with many stakeholders and inter-relationships with other agencies, IJB members are asked to consider attending regular seminars to explore some of the issues and relationships in greater depth. It is proposed that seminars should be organised between the meetings of the IJB, with specific themed focus. Areas for further analysis might include, for example, commissioning, workforce planning, the community and acute sector interface, etc. IJB members are asked to consider whether or not they would find this useful, and if so, what topics they would like to explore further.

5.0 PROPOSALS

5.1 The content of this report is mainly for noting, and to ensure that IJB Members are informed about the business of the HSCP. However the Chief Officer should be advised if members would like IJB Seminars to be organised.

6.0 IMPLICATIONS

Finance:

6.1 There are no financial implications in respect of this report.

Financial Implications:

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments
N/A					

6.2 **Legal:**

There are no legal implications in respect of this report.

6.3 Human Resources:

There are no human resources implications in respect of this report.

6.4 **Equalities**:

Has an Equality Impact Assessment been carried out?

	YES (see attached appendix)
	NO - This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or Strategy. Therefore, no Equality Impact Assessment is required □

6.4.1 How does this report address our Equality Outcomes?

a) People, including individuals from the protected characteristic groups, can access HSCP services.

Compassionate Inverclyde will support people from the protected characteristic groups and their carers.

b) Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.

Not applicable.

c) People with protected characteristics feel safe within their communities.

Not applicable.

d) People with protected characteristics feel included in the planning and

developing of services.

The future implementation of 'Compassionate Inverclyde' will support this outcome.

e) HSCP staff understand the needs of people with different protected characteristics and promote diversity in the work that they do.

Not applicable.

f) Opportunities to support Learning Disability service users experiencing gender based violence are maximised.

Not applicable.

g) Positive attitudes towards the resettled refugee community in Inverclyde are promoted.

Not applicable.

CLINICAL OR CARE GOVERNANCE IMPLICATIONS

- 6.5 There are no clinical or care governance issues within this report.
- 6.6 NATIONAL WELLBEING OUTCOMES

 How does this report support delivery of the National Wellbeing Outcomes?
 - a) People are able to look after and improve their own health and wellbeing and live in good health for longer.

The future implementation of 'Compassionate Inverclyde' will support this outcome, by ensuring that people are fully involved in identifying their own priorities for palliative care planning.

b) 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.

The future implementation of 'Compassionate Inverclyde' will support this outcome, by ensuring that people are fully involved in identifying their own priorities for palliative care planning.

c) People who use health and social care services have positive experiences of those services, and have their dignity respected.

The future implementation of 'Compassionate Inverclyde' will support this outcome, by ensuring that people are fully involved in identifying their own priorities for palliative care planning.

d) Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.

The future implementation of 'Compassionate Inverclyde' will support this outcome, by ensuring that people are fully involved in identifying their own priorities for palliative care planning.

e) Health and social care services contribute to reducing health inequalities.

The future implementation of 'Compassionate Inverclyde' will support this outcome, by

ensuring that people are fully involved in identifying their own priorities for palliative care planning.

f) 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.

The future implementation of 'Compassionate Inverclyde' will support this outcome, by ensuring that carers are fully involved in identifying their own priorities alongside those of the cared-for person.

g) People using health and social care services are safe from harm.

Not applicable.

h) 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.

Not applicable.

7.0 CONSULTATION

7.1 This report has been prepared by the Chief Officer, Inverclyde Health and Social Care Partnership (HSCP) after due consultation with relevant senior officers in the HSCP.

8.0 LIST OF BACKGROUND PAPERS

8.1 None.