

AGENDA ITEM NO: 18

Report To:	Inverclyde Integration Joint Board	Date: 10 September 2019
Report By:	Louise Long Corporate Director, (Chief Officer) Inverclyde Health and Social Care Partnership (HSCP)	Report No: IJB/54/2019/LL
Contact Officer:	Louise Long Corporate Director, (Chief Officer) Inverclyde Health and Social Care Partnership (HSCP)	Contact No: 01475 712722
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 areas of work.

## 2.0 SUMMARY

2.1 The report details updates on work underway across the Health and Social Care Partnership.

# 3.0 RECOMMENDATIONS

3.1 The Integration Joint Board is asked to note the items within the Chief Officer's Report and advise the Chief Officer if any further information is required.

Louise Long Corporate Director, (Chief Officer) Inverclyde HSCP

### 4.0 BACKGROUND

4.1 There are a number of issues or business items that the IJB will want to be aware of and updated on, which do not require a full IJB report, or where progress is being reported which will be followed by a full report. IJB members can of course ask that more detailed reports are developed in relation to any of the topics covered.

#### 5.0 BUSINESS ITEMS

#### 5.1 Strategic Plan Implementation

Further to the Strategic Plan 2019-24 approval in March of this year, we have been working closely with staff, service users and other stakeholders to develop implementation plans in respect of our 6 Big Actions. Your Voice has led on engaging with our local communities, and the implementation plans reflect the actions that need to be undertaken to deliver the Big Actions. The Strategic Planning Group is fully involved, and it is proposed that going forward, officers will submit full update reports to the SPG, and streamlined reports to the IJB on an exceptions basis. A development session will be held in October for the Board on the implementation plans.

#### 5.2 Market Facilitation Plan

Work has begun on supporting services to commission in clusters that deliver similar outcomes. The commissioning plan encourages services to move away from commissioning in silos.

Additional legal capacity has been put in place to support the increased activity. Commissioning intentions fit with the Market Facilitation Plan which is currently being updated and will be presented to the IJB in the Autumn.

#### 5.3 Localities – Working in Partnership

The Inverclyde Alliance Board and the HSCP have been developing 6 localities together. Events are being held across the months of August and September to encourage communities to engage and support changes in their local areas. The events have been supported by Your Voice, CVS, the Council, Police, Fire and Rescue and the Scottish Ambulance service.

### 5.4 Sandyford Update

Reports in September 2018 and May 2019 have been brought to the attention of the Inverclyde Integration Joint Board, detailing the proposal for an area-wide review of Sandyford Sexual Health Services. These have described the intended future direction of travel for the entire service, with a focus on the local implementation, which highlighted Inverclyde will be allocated a Tier 1 service, operating 2 days per week (9.00am to 7.30pm) in Greenock Health Centre. The full report and recommendations need to be considered by Glasgow IJB; if endorsed a follow-up report will be presented to the Inverclyde IJB. A fuller consultation is currently taking place before the proposal is considered by Glasgow IJB.

### 5.5 Social Worker – Grade H Posts

There has been ongoing difficulties recruiting and retaining social workers. A number of social workers are new and are now undertaking the full role of a social

worker. In response, Inverclyde Council has reviewed the starting salary and removed the yardstick so that all social workers are paid as an H Grade. Costs of this have been contained in the social worker budget.

# 6.0 IMPLICATIONS

## FINANCE

## 6.1 **Financial Implications**:

One off Costs

Cost Centre	Budget Heading	Budget Years	Propose d Spend this Report £000	Virement From	Other Comments

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments
Various	Employee Costs	August 2019	£88,000	N/A	£44,000 each of C&F employee costs and Health & Community

# LEGAL

6.2 There are no legal issues within this report.

### HUMAN RESOURCES

6.3 There are no human resources issues within this report.

### EQUALITIES

6.4 There are no equality issues within this report.

Has an Equality Impact Assessment been carried out?

	YES (see attached appendix)
$\checkmark$	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?

Equalities Outcome	Implications
People, including individuals from the protected characteristic groups, can access HSCP services.	The Strategic Plan has a strong focus on tackling inequalities, and the implementation plans aim to identify tangible and measurable actions to ensure that the 6 Big Actions are delivered.
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	Not applicable
People with protected characteristics feel safe within their communities.	Not applicable
People with protected characteristics feel included in the planning and developing of services.	The inclusive approach taken to develop the Strategic Plan has carried through to the development of the Implementation Plans, and delivery will be monitored closely by the SPG.
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	Not applicable
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	Not applicable
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 implications arising from this report.

# 7.0 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes?

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	The updated implementation plans will help us to identify areas that are progressing well, and areas that might need greater focus.
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 inclusive approach taken to develop the Strategic Plan has carried through to the development of the Implementation Plans, thus ensuring a voice for people with a disability or long-term condition.

People who use health and social care services have positive experiences of those services, and have their dignity respected.	As above.
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	As above.
Health and social care services contribute to reducing health inequalities.	Our implementation plans have an underpinning ethos of 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.	The SPG has a range of participants, including a carers representative, to ensure that carers and other important participants are fully represented and supported by the implementation plans.
People using health and social care services are safe from harm.	N/A
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.	Staff will have greater job satisfaction when dealing with appropriate levels of need, focused on delivering the 6 Big Actions.
Resources are used effectively in the provision of health and social care services.	As above.

# 8.0 DIRECTIONS

# 8.1

	Direction to:	
Direction Required		Х
to Council, Health	2. Inverclyde Council	
Board or Both	3. NHS Greater Glasgow & Clyde (GG&C)	
	4. Inverclyde Council and NHS GG&C	

# 9.0 CONSULTATION

9.1 There are no consultation requirements related to this report.

# 10.0 LIST OF BACKGROUND PAPERS

10.1 None.