
Report To:	Inverclyde Integration Joint Board	Date:	20 March 2023
Report By:	Craig Given Head of Finance, Planning and Resources Inverclyde Health & Social Care Partnership	Report No:	IJB/13/2023/CG
Contact Officer:	Andrina Hunter Service Manager Planning and Performance	Contact No:	01475 75381
Subject:	Inverclyde HSCP Strategic Plan 2023-24		

1.0 PURPOSE AND SUMMARY

- 1.1 For Decision For Information/Noting
- 1.2 The purpose of this report is to present the final Transition Plan progress update and seek approval from the Integration Joint Board for the refreshed Strategic Plan and associated Outcomes Framework for 2023-24.
- 1.3 The 2019-24 Strategic Plan set out the shared strategic priorities and ambitions for Inverclyde. The plan was always to be refreshed in 2022-23 with a revised plan in place for the remaining term focussed on our future challenges. The Covid 19 pandemic impacted on the delivery of the original Strategic Plan and a two year Transition Plan has been in place until March 2023.
- 1.4 The Strategic Needs Assessment undertaken in 2019 has been refreshed and the refreshed Strategic Plan for 2022-24 has been developed and continues with the focus on the six Big Actions for Inverclyde with 49 key deliverables. Consultation of the plan has taken place throughout 2022 with an online survey and range of focus groups (both online and face to face).
- 1.5 The Strategic Plan progress will be reported regularly to the Strategic Planning Group with 6 monthly performance reports to the Integration Joint Board.
- 1.6 The development of a future Strategic Plan will be reviewed in line with progress towards the National Care Service.

2.0 RECOMENDATIONS

2.1 That the Integration Joint Board:

1. Notes the final 2021-23 Transition Plan progress update
2. Notes the engagement and consultation that has shaped the refresh of the Strategic Plan
3. Notes the refreshed Strategic Needs Assessment
4. Approves the refreshed Strategic Plan and Outcomes Framework for 2023-24
5. Approves the proposal for 6 monthly updates on the Strategic Plan in line with the planned 6 monthly performance reporting

Kate Rocks
Chief Officer
Inverclyde Health and Social Care Partnership

3.0 BACKGROUND AND CONTEXT

- 3.1 In 2019 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 at that time with the people across Inverclyde, professional colleagues, staff, those who use services including carers and children and young people across all sectors and services. The 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.
- 3.2 The outbreak of the Covid 19 pandemic in March 2020 resulted in a range of activities being put in abeyance as the HSCP initiated its Business Continuity Plan. This was required to ensure focus on delivering essential services and support our staff and citizens during this unprecedented time.

Officers within the HSCP reviewed the existing Strategic Plan priorities and agreed a revised priority list to reflect new Covid 19 related themes; the need for recovery; and to reflect 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. This Transition Strategic Plan set out 29 key deliverables for focus through the Covid 19 pandemic.

- 3.3 Due to the ongoing Covid 19 situation, the Transition Strategic Plan has continued until March 2023. This plan has now been completed and a summary report forms Appendix 1. In order to ensure any key uncompleted actions are not lost, a short audit has been undertaken to ensure any uncompleted actions are transferred to the new plan, this is referenced in the Transition Strategic Plan.

4.0 REFRESHED STRATEGIC PLAN 2023-24

- 4.1 As stated it was always the intention to refresh the Strategic Plan in year 3. To undertake this refresh we have:
- Reviewed the original actions within the [Strategic Plan](#); [Transition Plan](#) and the wider [Inverclyde Alliance Covid 19 Partnership Recovery Plan](#)
 - Updated the Strategic Needs Assessment to better understand our demographic and health challenges;
 - Reviewed the impact of the Covid 19 pandemic on services and wider community;
 - Reviewed the wider planning context;
 - Listened to communities and what they have told us through various engagement opportunities
- 4.2 Through discussion at the Strategic Planning Group and with 3rd sector and community representatives, there was a strong consensus that we should retain the original vision and priorities set out through the 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.
- 4.3 The refreshed plan contains key deliverables under the 6 Big Actions which link clearly with the nine National Outcomes for Scotland and also the national outcome framework Children, Young People and Community Justice. It continues the 'road map approach' utilised in the original plan and has been developed by officers and utilising previous feedback from our communities. The plan forms Appendix 2.

Within the plan we set out a clear direction of travel for locality planning which is integral to ensuring we work with our key partners and communities.

4.4 Strategic Needs Assessment

Our current demographic context for Inverclyde is presented fully within the updated Strategic Needs Assessment (SNA). The full Strategic Needs Assessment can be accessed [Inverclyde HSCP Strategic Needs Assessment 2022](#)

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.

4.5 Consultation and Engagement

To ensure that partners and the community were fully engaged on the proposed refreshed plan, throughout 2022 a full consultation was undertaken supported by key partners, YourVoice, CVS Inverclyde and Inverclyde Council's Community Learning and Development Team. An online survey was developed alongside nine focus groups (mixture of face to face and virtual). There were 20 responses to the online survey and 74 people attended the focus groups. The majority of the responses stated that they found the refreshed Strategic Plan easy to read and understand. Key themes from the consultation were related to: access to services; pathways of care; stigma and future funding, the plan has been updated to ensure it captures these. In addition, the refreshed plan was subject to consultation with NHSGGC through the Finance, Planning and Performance Committee, and Inverclyde Council Social Work and Social Care Scrutiny Panel.

4.6 Outcomes Framework

An Outcomes Framework has been developed in order to show how our plan contributes the national outcomes previously mentioned and how we will monitor progress against each Big Action/outcome. A suite of key local indicators have been developed to support progress and we will report on these alongside the national Integration Indicators. Appendix 3 sets out the Outcomes Framework.

The HSCP will utilise Pentana, a performance management information system, which will allow great monitoring of this plan and more accurate and detailed management of our performance information.

4.7 Governance and Monitoring

It is crucial we are held to account by our communities and our Integration Joint Board (IJB) on the Strategic Plan, and we can also monitor the effectiveness of our actions.

Quarterly reports will be presented to the Strategic Planning Group with six monthly report submitted to the IJB. The IJB will receive a formal Annual Performance Report which will include progress on the Strategic Plan actions providing accountability and strong governance. In addition, a new six monthly report will be introduced detailing both Strategic Plan progress and a 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.

4.8 National Care Service Development

The Scottish Government has committed to establish a functioning National Care Service by the end of the parliamentary term in 2026. The introduction of a National Care Service will fundamentally change the delivery of health and care services locally and we await further information and detail as to new delivery and governance models. The Inverclyde HSCP Strategic Plan (2023-24 refresh) will be reviewed in line with the timeline for the development of the new National Care Service.

5.0 IMPLICATIONS

5.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO	N/A
Financial		X	
Legal/Risk	X		
Human Resources		X	
Strategic Plan Priorities	X		
Equalities	X		
Clinical or Care Governance		X	
National Wellbeing Outcomes	X		
Children & Young People's Rights & Wellbeing			X
Environmental & Sustainability			X
Data Protection			X

5.2 Finance

The Strategic Plan will be delivered within the existing IJB budget as approved each year.

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report	Virement From	Other Comments

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact	Virement From (If Applicable)	Other Comments

5.3 Legal/Risk

Section 29 of the Public Bodies (Joint Working) (Scotland) Act 2014 requires the IJB to prepare and publish a Strategic Plan.

5.4 Human Resources

The Strategic Plan will be delivered by the existing workforce.

5.5 Strategic Plan Priorities

This report sets out the new refreshed priorities for the Strategic Plan

5.6 Equalities

(a) Equalities

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:

x	YES – Assessed as relevant and an EqIA is required. The Equality Impact Assessment for the refreshed Strategic Plan can be accessed here https://www.inverclyde.gov.uk/health-and-social-care/equalities
	NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqIA is required. Provide any other relevant reasons why an EqIA is not necessary/screening statement.

(b) Equality Outcomes

How does this report address our Equality Outcomes?

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	Supported by Big Action 1,2,6.
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	Supported by all 6 Big Actions
People with protected characteristics feel safe within their communities.	Supported by Big Action 3
People with protected characteristics feel included in the planning and developing of services.	The Strategic Plan and 6 Big Actions has involved a range of partners and community in its development.
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	Supported by Big Action 6.
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	Supported by Big Action 3.
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	Supported by Big Action 6.

5.7 Clinical or Care Governance

There are no clinical or care governance implications arising from this report.

5.8 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 focus of Big Action 1 is to support individuals and communities with their health and wellbeing
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 focus of Big Action 4 is to support people to live independently.
People who use health and social care services have positive experiences of those services, and have their dignity respected.	All the Big Actions are focussed on delivery person centred effective evidence based services
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	All the Big Actions are focussed on delivery person centred effective evidence based services
Health and social care services contribute to reducing health inequalities.	The focus of Big Action 1 is to work to reduce and mitigate 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 focus of Big Action 6 is to support carers in the role they undertake.
People using health and social care services are safe from harm.	The focus of Big Action 3 is to protect the population 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.	The focus of Big Action 6 is to support staff to deliver the best services they can
Resources are used effectively in the provision of health and social care services.	The focus of all the Big Actions is to meet this.

5.9 Children and Young People

Has a Children's Rights and Wellbeing Impact Assessment been carried out?

	YES – Assessed as relevant and a CRWIA is required.
x	NO – Assessed as not relevant as this report does not involve a new policy, function or strategy or recommends a substantive change to an existing policy, function or strategy which will have an impact on children’s rights.

5.10 Environmental/Sustainability

Summarise any environmental / climate change impacts which relate to this report.

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
x	NO – This report does not propose or seek approval for a plan, policy, programme, strategy or document which is like to have significant environmental effects, if implemented.

5.11 Data Protection

Has a Data Protection Impact Assessment been carried out?

	YES – This report involves data processing which may result in a high risk to the rights and freedoms of individuals.
x	NO – Assessed as not relevant as this report does not involve data processing which may result in a high risk to the rights and freedoms of individuals.

6.0 DIRECTIONS

6.1	Direction Required to Council, Health Board or Both	Direction to:	
		1. No Direction Required	x
		2. Inverclyde Council	
		3. NHS Greater Glasgow & Clyde (GG&C)	
		4. Inverclyde Council and NHS GG&C	

7.0 CONSULTATION

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

8.0 BACKGROUND PAPERS

8.1 None.

Transition Strategic Plan-Key Priorities IMPLEMENTATION MONITORING REPORT April 2022 to March 2023



R.A.G. Progress Status

Red = significant slippage

Amber = slight slippage

Green = on track

Grey = future work

Blue = complete

Red	0
Amber	3
Green	19
Blue	7

Principal Author	Andrina Hunter
Responsible Head of Service	Craig Given
Report Date	As at March 2023

**EMERGING KEY PRIORITIES.
TOGETHER WE WILL MITIGATE THE CHALLENGES AND SUPPORT ANY OPPORTUNITIES PRESENTED BY
COVID19 AND COVID RELATED HEALTHCARE PRESSURES.**

Objective	Lead
We will minimise and manage significant ongoing pressures presented by the Covid-19 pandemic. We will prioritise and develop key priority services to ensure they are equipped to deal with the pandemic, safeguarding sustained delivery and development of service, improving lives and improving outcomes for people who require support.	Kate Rocks Chief Officer.

EKP Ref	Relate to big action	Key Deliverable	Target Date	Progress (Details of progress / useful information / barriers, etc.)	RAG	FUTURE ACTION STRATEGIC PLAN
1.1	N/A	Covid 19 Live: We will develop and administer a flexible and responsive plan for Covid assessment and testing. (Winter 2020 + beyond)	March 2023	Twice weekly meetings continue with all HSCP Chief Officers regarding delayed discharges across NHS GGC. Winter tasks operation plans in place with a focus on discharge without delay and unscheduled care. We will continue to work collaboratively with the Care Home Collaborative (CHC) to support care homes. Weekly Oversight meetings continue. First round of CHAT visits to all adult and older people's homes have been completed. Themes and trends reported to IJB. Reports all shared with wider GGC team for overarching report. Second round of visits now commencing	Green	BA1 & 4
1.2	N/A	Winter plan will be developed to facilitate effective delivery of Key services including a largescale programme of seasonal Flu immunisation.	March 2023	Continuation of position for the delivery of housebound flu vaccinations. Team increased capacity to achieve target completion of housebound population for end of December 2022. Continuation of GGC roll out programme in community setting and mobile bus to target specific populations.	Green	BA1
1.3	N/A	Covid 19 recovery: To facilitate recovery we will implement effective lockdown arrangements (where	Mar 2023	We will continue to report statistics to inform Scottish Government decisions on tiered intervention status. Continuation of document learning/evidence from COVID management/recovery strategies, including public views. Business continuity plans have been updated and will be monitored and updated regularly.	Complete Blue	

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1.4	BA1.1	appropriate) cognizant of local and national Tiered Interventions We will establish a framework and methodology to invest £1m anti-poverty funds, tackling fundamental causes of poor health.	March 2023	RISE project continues. 4 people are actively engaged in employment and work is progressing on an additional 14 young men workers	Green	BA1
1.5	N/A	We will ensure third sector are facilitated and 'ready' to bid for HSCP contracts.	March 2023	Procurement completed a Procurement demonstration. The delivery of tender training was also completed by Mid-December 2022 for all organisational staff including our 3 rd sector colleagues.	Complete Blue	
1.6	BA 4.8	We will complete our review of the Access 1 st test of change. Implement Access 1 st across all adult care services.	March 2024	Rolling out of the review continues to develop across Health & Community Care services. No further plans at present to extend to other services of HSCP. Ongoing discussions regarding future funding. Pilot electronic referrals from Access 1 st to care at home service being trialled over the winter months. A report of findings and recommendations of this pilot will be available end March.	Complete Blue	
1.7	BA 4.5	Care at Home: We will commence the review of our internal care at home service.	March 2023	Home Care Review Board established, sub groups continue to feed in to the Review Board. A paper of recommendations will be submitted to CMT highlighting recommendations and Best Value. Provision of new Tech unit has been out to tender, await outcome of procurement process to progress new contract for digital units and anticipate this will be announced in November. Work ongoing. Maximising independence post will drive forward the delivery of maximising independence, post holder in post.	Green	BA4

EKP Ref	Relate to big action	Key Deliverable	Target Date	Progress (Details of progress / useful information / barriers, etc.)	RAG	FUTURE ACTION STRATEGIC PLAN
1.8	BA 4.15	Unscheduled Care: We will prioritise an efficient system-wide approach to improving patient services and managing demand effectively.	March 2024	<p>Work progressing well. HSCP Unscheduled Care Delivery group reinvigorated. Two anchors identified to progress the planning of UCC. Monthly reporting agreed to co-ordinate relevant updates from Work stream Leads.</p> <p>Feedback updates from GGC Delivery Group to identify how this interprets locally for delivery. Highlight any areas that require local focus in line with GGC priorities.</p>	Green	BA4
1.9	BA 4.2	OOH review: We will work with Out of Hours team to develop a local solution for the OOH review.	March 2023	<p>Moving forward, plans include:</p> <ul style="list-style-type: none"> • Review of Home Visiting Model and co-location of GP with Home Visiting Vehicle • Ongoing development and implementation of a multi-disciplinary team workforce plan, with a focus on recruitment of ANPs and AHPs • Increasing the number of Salaried GPs to provide cover • Enhanced management, clinical leadership and governance arrangements • Establishment of remote working arrangements to support the service, either as a routine shift or as a surge response • Creation of a learning and development environment <p>Continue to have strong links with OOH and provide interface discussion between GP Practices/OOH/HSCP.</p>	Green	BA4
1.10	BA 4.4	New Learning Disability Hub: We will deliver our new Learning Disability Hub in Inverclyde by 2023 as planned.	Dec 2023	<p>The current draft programme is indicating that the earliest the project can be progressed through the remaining pre-contract design stages, statutory approvals (planning/building standards), and market testing phase stage would target financial close in 3rd Quarter of 2023 and construction start thereafter.</p> <p>The programme also requires to integrate further engagement with service users, families, carers and learning disability staff at key stages of the detail design progression which will be co-ordinated through the Client Service and supported by The Advisory Group (TAG).</p> <p>It should be noted that the project, as with all construction projects, remains subject to risk of inflation through a combination of sharply rising prices for construction materials, disrupted supply chains and labour shortages including the on-going impact of increasing fuel/utility costs. Hub West Scotland will engage with Property Services and the Client Service to develop the project proposals</p>	Green	BA4

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				through the remaining pre-contract design stages and statutory approval processes ahead of the market testing stage.		
1.11 a	BA 1.1	We will prioritise and develop Key Mental Health Services that are critical to the sustained delivery and improvement of services.	March 2023	<p>Mental Health Officer Review Complete</p> <p>Consultant Workforce Recruited to a number of Consultant posts and Clinical Director post (external resource). Recruited to trainee ANP and recruitment ongoing for additional ANPs. Challenges remain in OPMHT.</p> <p>Mental Health Assessment Unit: MHAU now taking same day referrals and GP referrals are being assessed locally. Pathways embedded and in place. Pathways embedded for a Single Point of Access for dealing with immediate urgent referrals from Police Scotland Scottish and Ambulance Service.</p>	Green	BA1
1.11.b	BA 1.10/ 1.19	We will prioritise and develop Key Mental Health Programmes that are critical to the sustained delivery and improvement of Dementia services	March 2023	<p>Dementia Final report of the external evaluation awaited. Service expecting evaluation to confirm correct direction of travel. Re-established Dementia strategy group to continue and maintain the work of the HIS project.</p>	Green	BA1
1.11.c	BA 1.19	We will prioritise and develop Key Mental Health Programmes related to supporting people in more appropriate ways	March 2023	<p>Distress Brief Interventions (DBI): There has been 500+ referrals between Jan 21- to date. The vast majority are from community link workers with an increase from GPs now that the SCI gateway referral route is has been implemented.</p> <p>Training: A total of 68 Inverclyde staff who have completed the DBI level 1 online LearnPro level 1 training. Police Scotland have trained 61 staff in Inverclyde (K division). We are in the process of procuring DBI from 1st April onwards.</p>	Green	BA1

EKP Ref	Relate to big action	Key Deliverable	Target Date	Progress (Details of progress / useful information / barriers, etc.)	RAG	FUTURE ACTION STRATEGIC PLAN
1.12	BA5	We will continue to build recovery communities across Inverclyde and deliver key actions of the Inverclyde Drug Related Death Prevention Strategy.		<p>Recovery contract in place for six months and recovery hub has been successful in reaching and offering support to the wider community. We hope to build on this model of delivery, using larger premises going forward. Inverclyde saw the largest reduction in drug related deaths in 2021 across Scotland, with a reduction of 52%.</p> <p>Our focus is now on reducing the number of drug related deaths where people are not known to services. The recovery hub has a vital role in this. In addition MAT funding is being used to support a test of change in relation to MAT 3 and assertive outreach.</p> <p>The Lived Experience Network have been involved in developing the recovery hub and will have a key role in co-designing our assertive outreach model, including replicating WAND with a mobile harm reduction unit. We have extended the Naloxone Link Worker post to widen the access of Naloxone training across key sectors in our communities.</p>	Green	BA5
1.13	BA 5.2/5.7	We will implement the Alcohol & Drug Recovery Service workforce redesign and implementation by March 2021	March 2023	REVIEW COMPLETE	Complete Blue	Complete
1.14.a	BA 4.2 1	We will prioritise and develop Key Housing and Homelessness services that will offer community support and will reduce homelessness.	Jan 2023	<p>Change Lead and Wellbeing coordinator in post. Three Rapid Rehousing Support Workers in post and re-advertising for an additional five posts. Sub groups established and progressing well.</p> <p>Roll out of new website imminent.</p>	Green	BA4
1.14.b	BA 4.2 0/ 4.2 1	We will work towards delivering the 5 year Rapid rehousing Transition Plan		<p>Housing First training was held up. 10 clients have been resettled through Housing First approaches We are undertaking a Change Programme to modernise the homeless service which incorporates the Rapid Rehousing Transition Plan. This will update the Homeless Prevention and Housing Options work and accelerate the Housing First model as we roll out our new in house Rapid Rehousing Support Team. A detailed work plan is in development.</p>	Green	BA4

EKP Ref	Relate to big action	Key Deliverable	Target Date	Progress (Details of progress / useful information / barriers, etc.)	RAG	FUTURE ACTION STRATEGIC PLAN
1.15	BA 2.1 3	We will review and develop Key Children and Families Services that are critical to the sustained delivery and improvement of services.	March 2023	<p>Currently delivering I Promise to staff in all 26 schools. Ongoing consultation with children, young people and families has included four children's houses, Home start focus groups, children/young people sharing their views regarding what and how services need to change. Proud2Care have filmed a Language matters film which runs alongside the Jargon Buster completed by everyone I Promise speak with. This highlights what words need to change. The establishment of Promise Practitioner forum, Promise Board and I Promise in Hearings will ensure Inverclyde is committed to keeping the promise and meeting the key priority areas within Plan 21-24 including a good childhood, whole family support, planning, supporting the workforce and building capacity. Session are planned with elected members and young people and a refresh of corporate parenting strategy. Discussion and funding bids are being explored for a Whole Family support intensive service and to expand the supports to children and families on the edge of care and in line with the 10 support principles listed within The Promise. Supporting the workforce continues with our Trauma Lead in place and STILT training. Furthermore, paperwork working groups will help to reduce the paperwork for Social Workers and have our wellbeing assessments in line with the views of our children and young people. A refresh and launch of Voice of the child/young person incorporates our Mind of My Own Digital app which will ensure we empower our families to share their views with choice.</p> <p>The work in relation to a National Care Allowance Scheme by COSLA and Scottish Government was paused in 2020. This complex area of work resumed February 2021 and will further consider the financial challenges along with the findings of the Independent Care Review and the incorporation of UNCRC into law. We are still awaiting the national strategy to be developed however local preparatory work continues.</p> <p>Discussions have taken place with a 3rd sector provider to augment the front door, in particular to provide effective early help to families seeking assistance with the aim of providing support and reducing the number of families requiring a statutory or child protection response. A test of change is being planned and will should be in place in 2023. Anti-poverty posts in place, external evaluation and review on the effectiveness of posts to be completed, this will be led by the Child poverty strategic group. Evaluation / outcomes on effectiveness of posts will feed in to the HSCP strategic plan.</p>	Amber	BA2
1.15b		<p>Request For assistance</p> <p>The front door access into the HSCP children and families service continues to see increased levels of referrals</p>				

EKP Ref	Relate to big action	Key Deliverable	Target Date	Progress (Details of progress / useful information / barriers, etc.)	RAG	FUTURE ACTION STRATEGIC PLAN
1.17	BA 2	We will use newly secured funds to establish a Wellbeing service for children in Inverclyde.	March 2023	Action for Children - Established in schools and progressing to year 3.	Green	BA2
1.18	BA 1.6 / 6.1 2	We will continue to progress the Big Lottery funded project, engaging women in the justice system in communities.	March 2023	The Programme Manager commenced role in January 2022 and is presently confirming a project timeline in respect of STILT training and staff trauma informed training during the reporting period until 31st August 2022. Key actions include: <ul style="list-style-type: none"> • Leaders within HSCP to attend STILT Training Programme • Relevant Operational Managers within HSCP, Your Voice and CVS Inverclyde to commence trauma informed training • Identified staff from HSCP, Your Voice and CVS Inverclyde to attend trauma informed training. 	Green	BA3
1.19	BA 3.1 1	We will develop Key Clinical and Care Governance Action Plan to support delivery and improvement of services.	March 2023	Clinical and Care Governance Action plan is reported in to the meetings and an updated report went to IJB In June as planned. Actions are all in progress.	Green	BA3
1.20	BA 6.1 0	We will continue to develop Capital Investments that are critical to the sustained delivery and improvement of services.	March 2023	New Greenock Health and Care Hub has now been delivered on budget and on timescale. Facility opened on Monday 17th May 2021. Both staff and patients have provided very positive feedback. Post completion meetings are ongoing with Hub West and Capital Planning for any snagging issues. Operational Group established for staff to feed into. Primary Care estates strategy now complete. Ongoing work with capital planning to prioritise future investments, it is hoped this will include a new build for Port Glasgow Health Centre. Property Asset Management Group to consider future direction of property within our estate taking into account Moving Forward Together and Digital Strategies.	Green	BA6

EKP Ref	Relate to big action	Key Deliverable	Target Date	Progress (Details of progress / useful information / barriers, etc.)	RAG	FUTURE ACTION STRATEGIC PLAN
1.21	N/A	We will consider and review report from national review adult care.	March 2023	National Care Service Bill has been published. Response collated from our IJB and response submitted	Complete Blue	
1.22	N/A	Strategic Commissioning Team will continue to provide support and enhanced monitoring to the care home sector for the duration of the pandemic.	March 2023	Older Peoples Care Home Quality Assurance meetings now established and will continue for the foreseeable. Adult Care Home quality assurance meetings completed by end October. Commissioning team continue to provide ongoing support to all care home establishments.	Complete Blue	
1.23	BA 1	Community outreach will be supported through enhanced virtual/remote inclusion where feasible	March 2023	COMPLETE	Complete Blue	
1.24	BA 1.1 0	Technology enabled care & record-management will be prioritized. This will include roll out of remote technology 'and developing a preferred option for the SWIFT replacement recording	March 2023	Replacement of the Social Care Records Management System (SWIFT) Development: Tender process complete. OLM for their product ECLIPSE Project implementation is now underway. Initial scoping meetings being arranged to arrive at the final agreed PID. Change in deadline for this project – now looking to a deadline of December 2023 (with possible 6 month contingency).	Amber	BA6

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1.25	BA 1.1 2	system in Social Care Digital Support programme to secure agile working for staff will be accelerated.	March 2023	Attend Anywhere (AA) - usage has decreased as the COVID restrictions ease. PCMHHT and CAMHS continue to utilise the facility. There is a need to do a refresh of AA and establish which services would benefit from delivering their service more effectively and efficiently using this facility. There are a number of small pieces of digital work ongoing including the implementation of an online referral for TEC services. We will continue to work collaboratively with services to scope out best value / use of Digital including the possibility of a dedicated Digital Support post.	Amber	BA6
1.26	BA1.1 BA1.11 BA6.14	Progress programme of Localities Planning work, establishing virtual structures to support 6 Localities.	March 2023	The Localities work has not progressed as quickly as hoped. Agreed to move forward with Two HSCP Locality Groups (East and West). Terms of Reference developed and agreed members of our SMT will chair each Locality. Planning underway to establish locality groups by mid-February.	Green	BA6
1.27	BA 6.1	Develop Inverclyde Cares – a social movement based on being neighbourly and kind, engaging communities and connecting people.	March 2023	Bereavement work is well underway and eight local organisations have now achieved the Bereavement Charter mark. Rig Arts were appointed to carry out the co-production. Community consultation and engagement has been ongoing and Phase 1 is due to conclude in December 2022. Phase 2, which starts in early 2023 will see the proposals developed by the community, implemented. Three Challenge Stigma events have taken place. Funding has been approved to develop a stigma training programme. Inverclyde Cares logo has been developed and Kindness Awards have been launched. An event to formally launch this took place on 13th November 2022 at Waterfront Cinema.	Green	BA6

INVERCLYDE HEALTH & SOCIAL CARE STRATEGIC PLAN 2019 – 2024

REFRESH (2023-2024)

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

“Improving Lives”

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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



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Welcome from Alan Cowan

Chair Inverclyde IJB



We are pleased to present the refresh of our second Strategic Plan (2019-2024) for Inverclyde Integrated Joint Board (IJB) which has been developed by the Health and Social Care Partnership (HSCP) and the Strategic Planning Group (SPG), 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 our 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 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 (2021/2022) 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 (2020-2023).

This refreshed plan brings together the actions from the original Strategic Plan; the Transition Plan; and sets out our key priorities, focused around our Six Big Actions, for the remaining year 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 (NHSGGC), 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 Five year Plan (2019-2024)

Inverclyde IJB initially set out through its Five year Strategic Plan (2019-2024), and in particular the Six 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 2022-2023 with a revised plan in place for the remaining two year term focussed on our future challenges.

1.2 Our Transition Plan (2020/2022)

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 (2019-2024) were paused and a more streamlined Transition Plan for 2020/2022 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 YourVoice to gain a community view in ensuring Inverclyde HSCP were prioritising the right themes and services for 2020/2022.

1.3 Our refreshed Plan (2023-2024)

As previously stated, it was always the intention to refresh the original strategic plan in year three to ensure a continued focus on the key priorities for Inverclyde. This refreshed plan will set out our priorities for 2023-2024 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

2. Our Vision and Priorities for 2023-2024

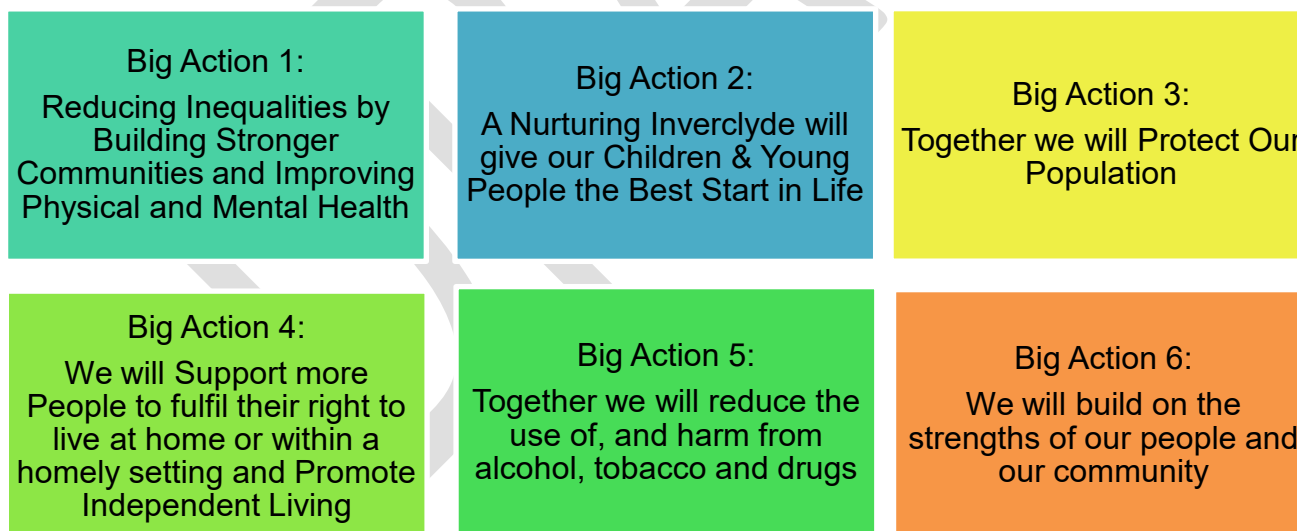
Inverclyde HSCP is built on our established integration arrangements and our vision, values and six ‘Big Actions’ set out in our original strategic plan were shaped through a wide range of mechanisms of engagement, to reach as many local people, staff and carers as possible. As part of that we also undertook 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 third 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



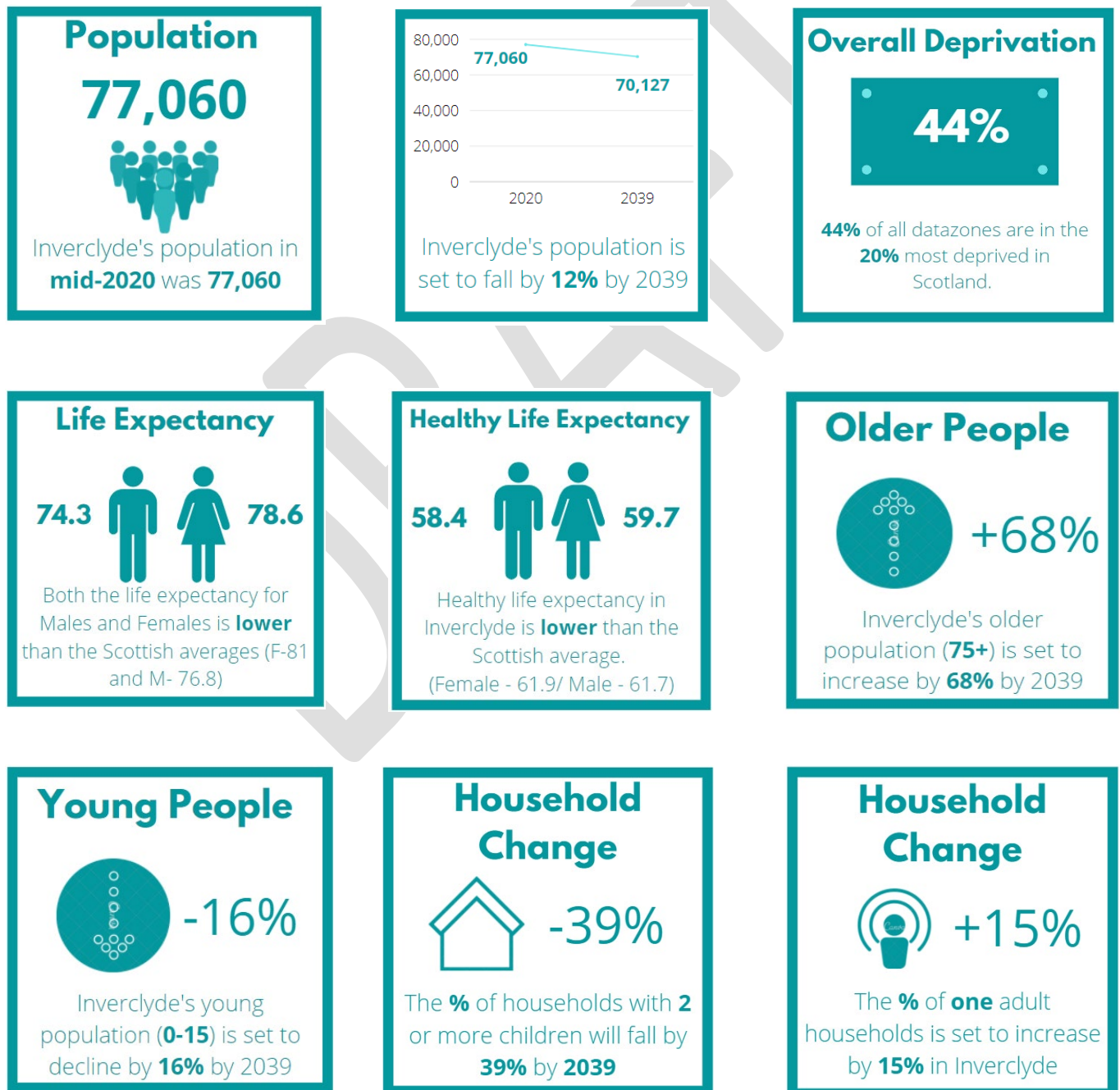
Our Six Big actions link clearly with the nine National Outcomes for Scotland and also the national outcome framework Children, Young People and Community Justice. Appendix 2 provides an overview of how our Big Actions align with the National Outcomes and Appendix 3, the links to national Public Health 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. [Inverclyde HSCP Strategic Needs Assessment 2022](#)

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-19 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 (APR) and the next SNA which will be refreshed in line with the next strategic plan.



Our SNA 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 (2020-2023) 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 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 in 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 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; 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, 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; 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
Children and Young People (Scotland) Act 2014	Getting it Right for Every Child (GIRFEC)	Moving Forward Together	Rapid Rehousing Transition Plan
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	
National Care Service (Scotland) Bill 2022		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 seven 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

The National Care Service (Scotland) Bill 2022 was introduced to parliament in June 2022. The Bill establishes the National Care Service. The Bill allows Scottish Ministers to transfer social care responsibility from local authorities to a new, national service. This could include adult and children’s services, as well as areas such as justice social work. Scottish Ministers will also be able to transfer healthcare functions from the NHS to the National Care Service. At time of writing the Bill is at Stage 1 with the commitment to establish a functioning National Care Service by the end of the parliamentary term in 2026. The introduction of a National Care Service will fundamentally change the delivery of health and care services locally and we await further information and detail as to new delivery and governance models.

5.3 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 5th 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 approach is enabling Inverclyde to identify and design system changes that are informed from our current learning and will reach out further across the community. Paramount to

this is 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 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 updated Equality Impact Assessment has been undertaken of this plan and can be accessed here. <https://www.inverclyde.gov.uk/health-and-social-care/equalities>

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 (2023-2024), has been developed following feedback from a range of partners involved in the Strategic Planning Group and consultations undertaken previously by our third sector and community partners. 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. To support this, two Health and Social Care Locality Planning Groups have been established (West and East Inverclyde) which will meet both the Public Bodies (Joint Working) Scotland Act 2014 and the Community Empowerment Act 2015 legislation

The two localities will cover as follows:

East Inverclyde

- Kilmacolm and Quarriers Village
- Port Glasgow
- Greenock East and Central

West Inverclyde

- Greenock South and South West
- Greenock West and Gourock
- Inverkip and Wemyss Bay

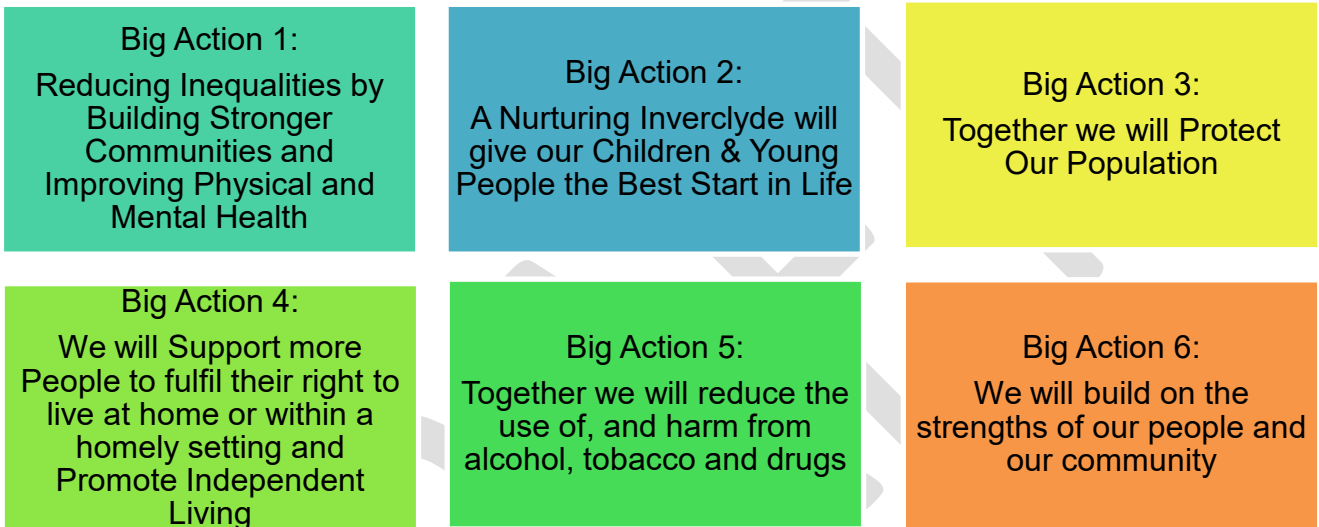
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Section 2

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 year.



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



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.

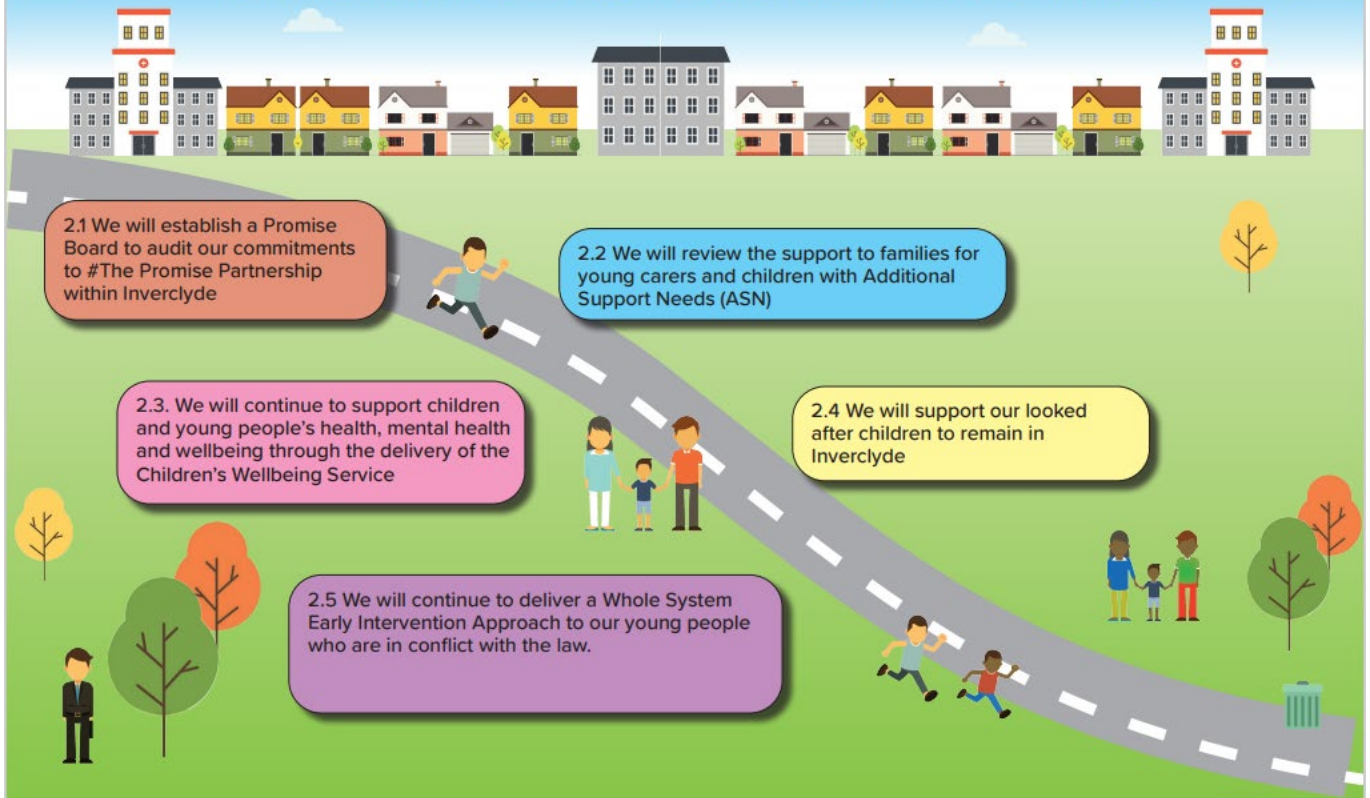
Inverclyde is a beautiful place to live and grow up, however we know that some children growing up in Inverclyde face deep rooted and intergenerational challenges. We have become increasingly attuned to the nature and impact of these challenges. Poverty and the impact of poverty on people's life chances 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



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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

3.1 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

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

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

3.5 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 range 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 NHSGGC Moving Forward Together (MFT) 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 deliver 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 undertake and complete the Review of our internal and external Care at Home Services

4.2 We will continue to deliver the range of work related to Unscheduled Care with a focus on prevention of admission and improving discharges.

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

4.4. We will deliver the new Community Learning Disability model to provide transformational support for our learning disabled clients

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

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

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

4.8 We will continue to work towards a strategic approach to end of life care in Inverclyde.

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

4.10 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 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 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 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 our community to find ways of tackling stigma, felt most by some of our most vulnerable people.

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

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

6.7 We will continue to develop initiatives and campaigns to support our communities through COVID-19 recovery



6.9 We will review and deliver the HSCP Digital strategy which encompasses all aspects of staff, service and user delivery

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

6.10 We will deliver the replacement recording system to support health and social care delivery

Section 3

Health & Social Care Spend

Financial Performance to Date

Financial Year 2020/2021

The financial year 2020/2021 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 2022/2023.
- Underspend in Prescribing £0.454m
- Underspend in ADRS £0.499m mainly due to vacancies

Financial Year 2021/22

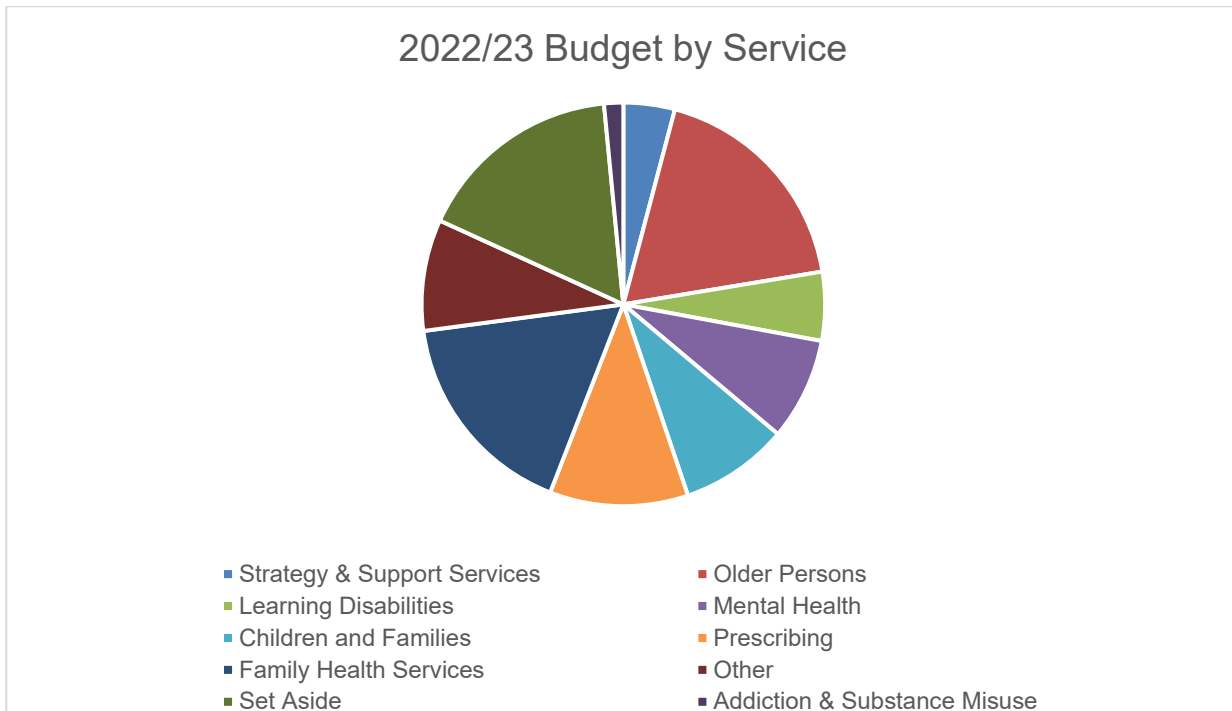
The financial year 2021/2022 resulted in an overall surplus of £13.393m. The main reasons for this were as follows:

- Covid funding received towards the year end and not utilised in year of £8.1m which was added to reserves and carried forward for use in 2022/23
- Underspends in employee costs across the HSCP of £1.5m and a contribution from Inverclyde Council towards the 2022/23 pay award of £0.5m
- Winter pressures additional funding carried forward for use in 2022/23 of £1.1m
- Underspend in Prescribing £0.4m
- Underspend in external homecare provision of £0.5m due to ongoing difficulties with recruitment
- Mental Health Recovery and Renewal funds received but not utilised in year of £0.9m, carried forward for use in 2022/23
- Overspend of £0.8m against Children and families residential and kinship placements.
- Residential and nursing placements underspend of £0.5m
- Various smaller variances throughout services totalling £0.7m

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



IJB Budget 2022/2023 to 2023/2024

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 balanced budget over this period mainly through the use of efficiency savings and temporary use of reserves.

The IJB recognises that there are existing core funding pressures in Children and Families and Learning Disabilities. As such the relevant services developed 2 spend to save initiatives which delivered a total of £0.500m recurring savings.

Key Budget Assumptions

Partner Contributions

- **Health** – in 2022/2023 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 2022/2023 The Government announced extra funding for councils for onward transmission to IJBs of £554m as part of winter planning commitments. A condition of the local authority grant settlement is that the 2022/2023 contribution by councils to their IJBs should be no less than the recurring 2021/2022 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 2022/2023. The IJB's share of this would be an additional £0.360m and an additional £40m for Multi Discipline teams (MDTS) in 2022/2023. 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 2023/24, Council funding equates to its share of the £95m additional Scottish Government funding announced in December 2022.

Pressures and Savings 2023/2024

- Pay award pressures - £1.5m Council staffing based on shortfall for 2022/23 agreed uplift and estimated pay uplift for 23/24. We are assuming all Health pay awards are funded from Scottish Government funding.
- Inflationary uplifts - £2.393m based on estimates for provider uplifts and National Care Home Contract for 2023/24
- Demographic Changes – smoothing reserves are available in the service areas most likely to experience demographic pressures for 2023/24
- Loss of Council Pay recurring funding - £0.600m assumed reduction in 2023/24.
- Drug Inflation Pressure - £0.400m assumed increase in 2023/2024 which equates to approximately 2%. We expect this to be covered as part of the overall 2% Health budget increase.
- Further indicative pressures and settlement adjustments totalling £0.7m
- Savings – it is anticipated that savings of £1.3m and the temporary use of reserves £0.603m will be used to offset any funding gap in 2023/24.

IJB Budget 2021/2022 to 2023/2024

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	Outturn 2021/22 £000	Budget 2022/23 £000	Indicative 2023/24 £000
NHS Contribution to the IJB	111,569	94,659	97,472
NHS set aside (notional)	35,960	29,350	29,350
Council Contribution to the IJB	59,629	66,071	68,156
IJB Net Income	207,158	190,080	194,978
Social Care Expenditure	59,408	66,071	68,156
Health Expenditure	147,529	124,009	126,822
Savings Adjustments			
Transfer to General reserves	221	0	0
HSCP SURPLUS/(DEFICIT)	0	0	0

Section 4

What will success look like and how will we know

The refreshed Inverclyde Health and Social Care Partnership Strategic Plan (2023-2024) lays out our vision, our ambitions, and our aspirations for the next year. 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

A local Outcomes Framework to measure progress against the six big actions has been developed. Throughout the lifetime of this plan the HSCP will implement Pentana a performance management information system which will allow better monitoring of this plan with 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 2021/22 Annual Performance Report can be found [here](#)

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 deliver the HSCP projects funded through the Council/HSCP Anti-poverty/Cost of Living Support fund which aims to support the most vulnerable in our communities
1.3	We will develop mental health inpatient and community advanced clinical practice roles to sustain and improve service delivery
1.4	We will deliver the new Inverclyde Financial Inclusion Partnership Strategy and outcomes
1.5	We will contribute to the delivery of the NHSGGC mental health strategy and deliver on specific areas for Inverclyde
1.6	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 establish a Promise Board to audit our commitments to #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 children and young people's health, mental health and wellbeing through the delivery of the Children's Wellbeing Service
2.4	We will support our looked after children to remain in Inverclyde
2.5	We will continue to deliver a Whole System Early Intervention Approach to our young people who are in conflict with the law.

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 undertake and complete the Review of our internal and external Care at Home Services
4.2	We will continue to deliver the range of work related to Unscheduled Care with a focus on prevention of admission and improving discharges.
4.3	We will continue to support the development of the Care Home Collaborative Team for NHSGGC through the hosting agreements for Hub 5.
4.4	We will deliver the new Community Learning Disability model to provide transformational support for our learning disabled clients
4.5	We will continue to work to ensure appropriate Out of Hours services are available for the Inverclyde community
4.6	We will continue to work with our wider primary care partners to implement the Primary Care Improvement Plan
4.7	We will continue to support and ensure carer engagement to help develop and shape services
4.8	We will continue to work towards a strategic approach to end of life care in Inverclyde.

4.9	We will implement a new model for homeless services within Inverclyde to support people where possible in their own tenancies
4.10	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 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 develop our HSCP workforce plan with a key focus on supporting the health and wellbeing of our staff and our commissioned partners' staff
6.7	We will continue to develop initiatives and campaigns to support our communities through COVID-19 recovery
6.8	We will continue to develop Capital investments to support sustained delivery and improvement of services
6.9	We will review and deliver the HSCP Digital strategy which encompasses all aspects of staff, service and user delivery
6.10	We will deliver the replacement recording system to support health and social care delivery

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	

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

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 three 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 and 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 refresh. The progress made will be reviewed, any gaps identified and an updated action plan to reflect priorities for the remaining period. The refreshed Housing Contribution Statement will be available here once completed. [Housing Contribution Statement](#)

Inverclyde HSCP Outcomes Framework

March 2023

The HSCP is required to monitor progress in line with both national and local outcomes, specifically the nine national outcomes and the six local big actions.

The performance measures set out against each of our six Big Actions/outcomes, along with the National Integration Indicators; the Ministerial Strategic Group (MSG) Indicators, and the Local Government Benchmarking Framework indicators (LGBF), together, provide our Outcome Framework.

Big Action 1

BIG ACTION / OUTCOME 1 - REDUCING INEQUALITIES BY BUILDING STRONGER COMMUNITIES AND IMPROVING PHYSICAL AND MENTAL HEALTH		
Contribution to delivering the Big Action / Outcome	Link to National Outcome(s)	How will we measure progress
<p>1) Mental health and wellbeing is enhanced through a partnership approach</p> <p>2) Health inequalities will be reduced by working with partners and communities</p> <p>3) Access to prevention and early prevention is available</p>	<p>National Health and Wellbeing Outcomes 1 & 5</p>	<p>Indicator 1: Number of referrals to Primary Care Community Link Workers.</p> <p>Indicator 2: Psychological Therapies: - Waiting for Treatment from Referral (18 week target).</p> <p>Indicator 3: Number of referrals to PDS (Post Diagnosis Support Dementia).</p> <p>Indicator 4: Number of referrals to Distress Brief Interventions (DBI) programme.</p> <p>Indicator 5: Number of new and returning service users to Advice Services.</p> <p>Indicator 6: Number of cost of living support payments made (broken down by SIMD area).</p>
KEY DELIVERABLES / ACTIVITIES		
<p>1.1 We will continue to respond to the proactive and reactive needs of the COVID-19 Pandemic as per Scottish Government guidelines.</p> <p>1.2 We will deliver the HSCP projects funded through the Council/HSCP Anti-poverty/Cost of Living Support fund which aims to support the most vulnerable in our communities.</p> <p>1.3 We will develop mental health inpatient and community advanced clinical practice roles to sustain and improve service delivery.</p> <p>1.4 We will deliver the new Inverclyde Financial Inclusion Partnership Strategy and outcomes.</p> <p>1.5 We will contribute to the delivery of the NHSGGC mental health strategy and deliver on specific areas for Inverclyde.</p> <p>1.6 We will deliver the health improvement plan which is focussed on delivering the national and NHSGGC public health priorities.</p>		

Big Action 2

BIG ACTION / OUTCOME 2 - A NURTURING INVERCLYDE WILL GIVE OUR CHILDREN AND YOUNG PEOPLE THE BEST START IN LIFE		
Contribution to delivering the Big Action / Outcome	Link to National Outcome(s)	How will we measure progress
<p>1) Deliver on our corporate parenting responsibilities to our Children and Young People ensuring a seamless transition from birth to adulthood</p> <p>2) Respond to the physical, mental and emotional health and wellbeing of our children and young people</p> <p>3) Deliver on our corporate parenting responsibilities to our accommodated and care experienced young people have safe, secure, stable and nurturing homes</p>	<p>National Health and Wellbeing Outcomes 1 & 7 / Children and Criminal Justice Outcomes 1, 2 & 3</p>	<p>Indicator 1: Number of LAC Medicals carried (access of 6 weeks referral to treatment).</p> <p>Indicator 2: Number of young people in receipt of continuing care.</p> <p>Indicator 3: Percentage of referral to treatment time target met for Children & Young People in Inverclyde, Children and Adolescent Mental Health services (CAMHS).</p> <p>Indicator 4: Percentage of looked after children and young people who require to be cared away from home, who continue to reside in Inverclyde.</p> <p>Indicator 5: Percentage of children vaccinated for MMR.</p> <p>Indicator 6: Percentage of women breastfeeding in Inverclyde.</p>
KEY DELIVERABLES / ACTIVITIES		
<p>2.1 We will set up a Promise Board to audit our commitments to #The Promise Partnership within Inverclyde.</p> <p>2.2 We will review the support to families for young carers and children with Additional Support Needs (ASN).</p> <p>2.3 We will continue to support children and young people's health, mental health and wellbeing through the delivery of the Children's Wellbeing Service.</p> <p>2.4 We will support our looked after children to remain in Inverclyde.</p> <p>2.5 We will continue to deliver a whole system early intervention approach to our young people who are in conflict with the law.</p>		

Big Action 3

BIG ACTION / OUTCOME 3 - TOGETHER WE WILL PROTECT OUR POPULATION		
Contribution to delivering the Big Action / Outcome	Link to National Outcome(s)	How will we measure progress
<p>1) Protect our most vulnerable adults, children and families</p> <p>2) Trauma informed practice embedded across services</p>	<p>National Health and Wellbeing Outcomes 3 & 7 / Children and Criminal Justice Outcomes 4 & 6</p>	<p>Indicator 1: Number of referrals received by Children's Social Work that progress to a child protection investigation.</p> <p>Indicator 2: Percentage of initial Child Protection Case Conferences held within 21 days from notification of concern.</p> <p>Indicator 3: Number of Adult Protection Case Conferences that convert to an Adult Protection Plan.</p> <p>Indicator 4: Number of Adult Protection Investigations completed within 10 days of referral.</p> <p>Indicator 5: Number of staff and partner organisations trained in trauma informed practice.</p> <p>Indicator 6: Number of unpaid work hours completed.</p> <p>Indicator 7: Percentage of Community Payback Orders (CPOs) successfully completed.</p> <p>Indicator 8: Percentage of Integrated case management (ICM) Case Conferences attended by community justice social workers for offenders in SPS custody.</p> <p>Indicator 9: Percentage of MAPPA level 2 and 3 meetings convened within timescales (as specified in national guidance).</p>
KEY DELIVERABLES / ACTIVITIES		
<p>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).</p> <p>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.</p> <p>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.</p> <p>3.4 We will continue to support the national Child Abuse Enquiry as required and implement learning and recommendations once available.</p> <p>3.5 We will roll out trauma informed approaches across all HSCP staff and commissioned services to ensure delivery of trauma informed services.</p> <p>3.6 We will continue to progress the Woman in Criminal Justice System Project.</p>		

Big Action 4

BIG ACTION / OUTCOME 4 - WE WILL SUPPORT MORE PEOPLE TO LIVE AT HOME OR WITHIN A HOMELY SETTING AND PROMOTE INDEPENDENT LIVING		
Contribution to delivering the Big Action / Outcome	Link to National Outcome(s)	How will we measure progress
<p>1) Support more people to live independently</p> <p>2) Early intervention and prevention of admission and improve discharge</p> <p>3) Improved primary/secondary interface to managed care</p> <p>4) Carers can access accurate information to develop their own support plan</p>	<p>National Health and Wellbeing Outcomes 1, 2, 4, 6 & 7 / Children and Criminal Justice Outcome 4</p>	<p>Indicator 1: Number of referrals for Early Intervention Support (Access 1st).</p> <p>Indicator 2: Number of community alarm activations.</p> <p>Indicator 3: Number of people self-directing their care through receiving direct payments and other forms of SDS.</p> <p>Indicator 4: Percentage people of adults with intensive care needs receiving care at home.</p> <p>Indicator 5: Number of completed specialist housing reports.</p> <p>Indicator 6: Number of new adult carer support plan completed.</p> <p>Indicator 7: Number of delayed discharge bed days 18+</p> <p>Indicator 8: Number of Anticipatory Care Plans (ACPs) completed.</p> <p>Indicator 9: Number of advice enquiries that support and maintain tenancy sustainability.</p> <p>Indicator 10: Number of housing 1st tenancies supported.</p> <p>Indicator 11: Percentage reduction in external placement for adults with learning disabilities.</p>
KEY DELIVERABLES / ACTIVITIES		
<p>4.1 We will undertake and complete the Review of our internal and external Care at Home Services.</p> <p>4.2 We will continue to deliver the range of work related to Unscheduled Care with a focus on prevention of admission and improving discharges.</p> <p>4.3 We will continue to support the development of the Care Home Collaborative Team for NHSGGC through the hosting agreements for Hub 5.</p> <p>4.4 We will deliver the new Community Learning Disability Model to provide transformational support for our learning disabled clients.</p> <p>4.5 We will continue to work to ensure appropriate Out of Hours services are available for the Inverclyde community.</p> <p>4.6 We will continue to work with our wider primary care partners to implement the Primary Care Improvement Plan (PCIP).</p> <p>4.7 We will continue to support and ensure carer engagement to help develop and shape services.</p> <p>4.8 We will continue to work towards a strategic approach to end of life care in Inverclyde.</p> <p>4.9 We will implement a new model for homeless services within Inverclyde to support people where possible in their own tenancies.</p> <p>4.10 We will continue to work toward delivering Inverclyde's Rapid Rehousing Transition Plan.</p>		

Big Action 5

BIG ACTION / OUTCOME 5 - TOGETHER WE WILL REDUCE THE USE OF, AND HARM FROM ALCOHOL, TOBACCO AND DRUGS		
Contribution to delivering the Big Action / Outcome	Link to National Outcome(s)	How will we measure progress
<p>1) People have access to a range of supports on their recovery from drug and alcohol related harms</p> <p>2) Support access to prevention and early intervention of smoking cessation</p>	<p>National Health and Wellbeing Outcomes 1, 2, 4 & 7</p>	<p>Indicator 1: Percentage increase of people beginning alcohol and drug recovery treatment within 3 weeks of referral.</p> <p>Indicator 2: Number of people who started on MAT treatment within the reporting period.</p> <p>Indicator 3: Current MAT Caseload, as at reporting date (Total number of people currently receiving MAT treatment)</p> <p>Indicator 4: Total number of people identified as being at high risk of drug-related harm who are assessed within reporting period.</p> <p>Indicator 5: Number of people funded for residential rehabilitation.</p> <p>Indicator 6: Number of smokers supported to successfully stop smoking in most deprived SIMD data zones.</p>
KEY DELIVERABLES / ACTIVITIES		
<p>5.1 We will continue to commission and expand recovery and support communities for those affected by drugs and alcohol.</p> <p>5.2 We will deliver on the Medication Assisted Treatment (MAT) standards across all services within the Alcohol and Drug Partnership.</p> <p>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.</p> <p>5.4 We will continue to work with our NHS GGC partners to deliver smoking prevention and cessation within Inverclyde.</p>		

Big Action 6

BIG ACTION / OUTCOME 6 - WE WILL BUILD ON THE STRENGTHS OF OUR PEOPLE AND OUR COMMUNITY		
Contribution to delivering the Big Action / Outcome	Link to National Outcome(s)	How will we measure progress
<p>1) Staff have access to information and resources, which sustains and improves their wellbeing</p> <p>2) Staff maintain a sense of connectedness to their team, line manager and organisation</p> <p>3) Third and independent sector are key partners in delivery of services</p> <p>4) Opportunities are promoted in our community to be active in health & wellbeing</p>	<p>National Health and Wellbeing Outcomes 3, 4, 8 & 9/ Children and Criminal Justice Outcomes 1, 2 & 3</p>	<p>Indicator 1: Number of Wellbeing Activities promoted to staff.</p> <p>Indicator 2: Number of registered feedback reports on Care Opinion.</p> <p>Indicator 3: Number of staff completing iMatter feedback,</p> <p>Indicator 4: Percentage of HSCP complaints received and responded to within timescale.</p> <p>Indicator 5: Number of new 3rd Sector commissioned contracts.</p> <p>Indicator 6: Percentage of adults able to look after their health very well or quite well.</p>
KEY DELIVERABLES / ACTIVITIES		
<p>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.</p> <p>6.2 We will use our complaints process to ensure continuous learning and development of quality services.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>6.6 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.</p> <p>6.7 We will continue to develop initiatives and campaigns to support our communities through COVID-19 recovery.</p> <p>6.8 We will continue to develop Capital investments to support sustained delivery and improvement of services.</p> <p>6.9 We will review and deliver the HSCP Digital strategy which encompasses all aspects of staff, service and user delivery.</p> <p>6.10 We will deliver the replacement recording system to support health and social care delivery.</p>		

National Integration Indicators

1	Percentage of adults able to look after their health very well or quite well
2	Percentage of adults supported at home who agreed that they are supported to live as independently as possible
3	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided
4	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated
5	Total % of adults receiving any care or support who rated it as excellent or good
6	Percentage of people with positive experience of the care provided by their GP practice
7	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life
8	Total combined percentage of carers who feel supported to continue in their caring role
9	Percentage of adults supported at home who agreed they felt safe
11	Premature mortality rate per 100,000 persons
12	Emergency admission rate (per 100,000 population)
13	Emergency bed day rate (per 100,000 population)
14	Readmission to hospital within 28 days (per 1,000 population)

National Integration Indicator	
15	Proportion of last 6 months of life spent at home or in a community setting
16	Falls rate per 1,000 population aged 65+
17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections
18	Percentage of adults with intensive care needs receiving care at home
19	Number of days people spend in hospital when they are ready to be discharged (per 1,000 population) (age 75+)
20	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency

PHS are still developing 4 of the 23 National Integration Indicators, therefore No 10. 21. 22 and 23 are not included in this report.

MSG Indicators

1	Emergency admissions (age 18+)
2a	Unplanned bed days – Acute (all ages)
2b	Unplanned bed days – Geriatric Long Stay (all ages)
2c	Unplanned bed days – Mental Health (all ages)
3a	Accident and Emergency Attendance (All ages)
3b	Accident and Emergency - % seen within 4 hours*
4	Delayed discharge bed days (Age18+)
5	% of Last Six Months of Life by Setting (all ages)
6	Balance of Care: Percentage of population in community or institutional settings (age 65+)

Local Government Benchmarking Framework Indicators (LGBF)

CHN8a	The Gross Cost of "Children Looked After" in Residential Based Services per Child per Week
CHN8b	The gross cost of "children looked after" in a community setting per child per week
CHN9	% of children being looked after in the community
CHN17	Percentage of children meeting developmental milestones
CHN22	Percentage of child protection re-registrations within 18 months
CHN23	Percentage LAC with more than 1 placement in the last year (Aug-July)
CHN24	% of children living in poverty (after housing costs)
SW1	Home care costs per hour for people aged 65 or over
SW2	Direct Payments + Managed Personalised Budgets spend on adults 18+ as a percentage of total social work spend on adults 18+
SW3a	Percentage of people aged 65 or over with long-term care needs receiving personal care at home
SW4b	Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life
SW4c	Percentage of adults supported at home who agree that they are supported to live as independently as possible
SW4d	Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided

SW4e	Percentage of carers who feel supported to continue in their caring role
SW5	Residential costs per week per resident for people aged 65 or over
SW6	Rate of readmission to hospital within 28 days per 1,000 discharges
SW7	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections
SW8	Number of days people spend in hospital when they are ready to be discharged, per 1,000 population (75+)