

---

<b>Report To:</b>	<b>Inverclyde Integration Joint Board</b>	<b>Date:</b>	<b>12 May 2025</b>
<b>Report By:</b>	<b>Kate Rocks Chief Officer Inverclyde Health &amp; Social Care Partnership</b>	<b>Report No:</b>	<b>IJB/76/2025/KR</b>
<b>Contact Officer:</b>	<b>Kate Rocks Chief Officer Inverclyde Health &amp; Social Care Partnership</b>	<b>Contact No:</b>	<b>01475 715365</b>
<b>Subject:</b>	<b>Chief Officer's Report</b>		

---

## **1.0 PURPOSE AND SUMMARY**

1.1  For Decision  For Information/Noting

1.2 The purpose of this report is to update the Integration Joint Board (IJB) on service developments which are not subject to the Integration Joint Board's (IJB's) agenda of the 12 May 2025.

1.3 The report details updates on work underway across the Health and Social Care Partnership in relation to:

- **Delayed Discharge**
- **Home from Home (Lens Project)**
- **Housing Options and Housing Advice Service (HOHAS) – Person Centred Support**
- **Platinum Digital Telecare Implementation Award**

## **2.0 RECOMMENDATIONS**

2.1 The Integration Joint Board (IJB) is asked to note the HSCP service updates and that future papers may be brought forward to the Integration Joint Board (IJB) as substantive agenda items.

**Kate Rocks**  
**Chief Officer**  
**Inverclyde Health and Social Care Partnership**

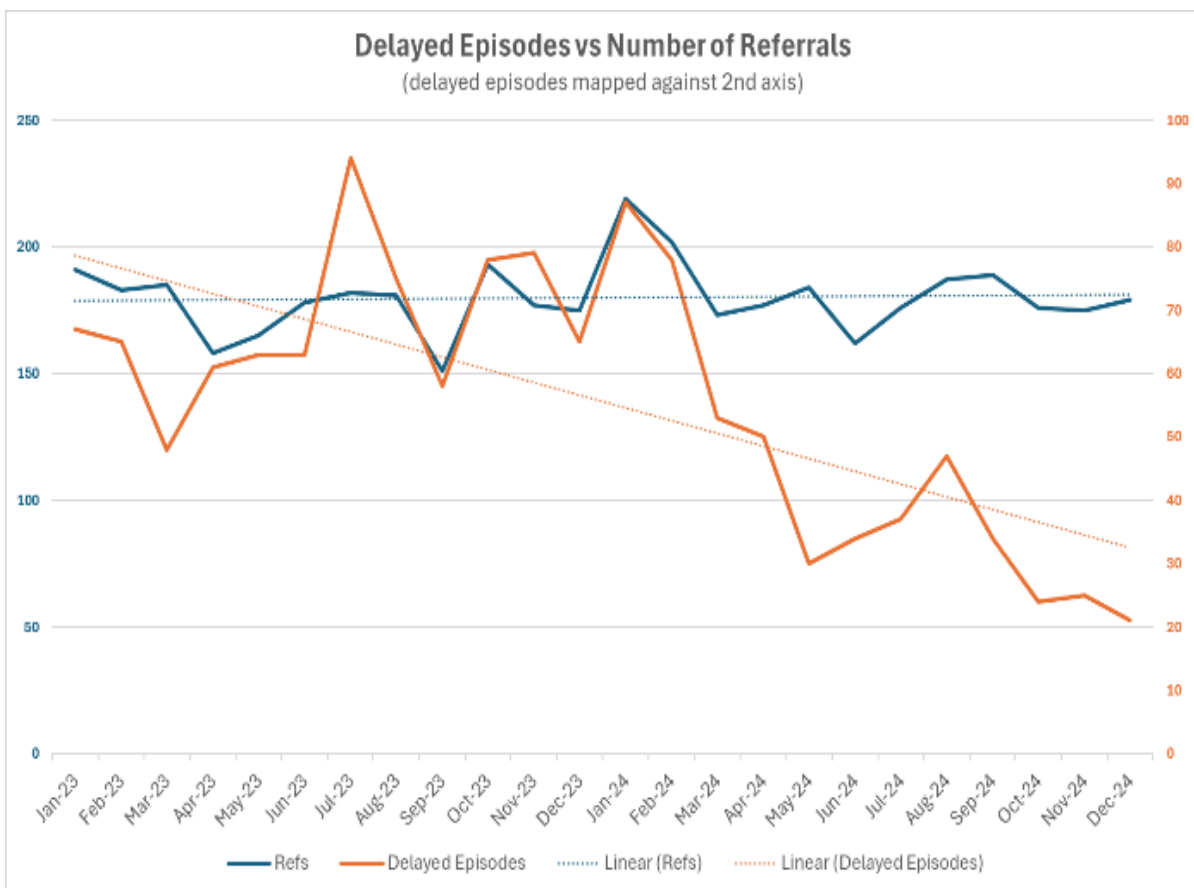
### 3.0 BUSINESS ITEMS

#### 3.1 Delayed Discharge

As part of the work of the teams within the HSCP to providing high quality and impactful services, delayed discharge performance continues to be a key priority, to strive to eliminate any citizen remaining in hospital once they are well enough to leave. To achieve this, HSCP and Acute colleagues have worked to develop new pathways and reinvigorate existing pathways to support people to return home.

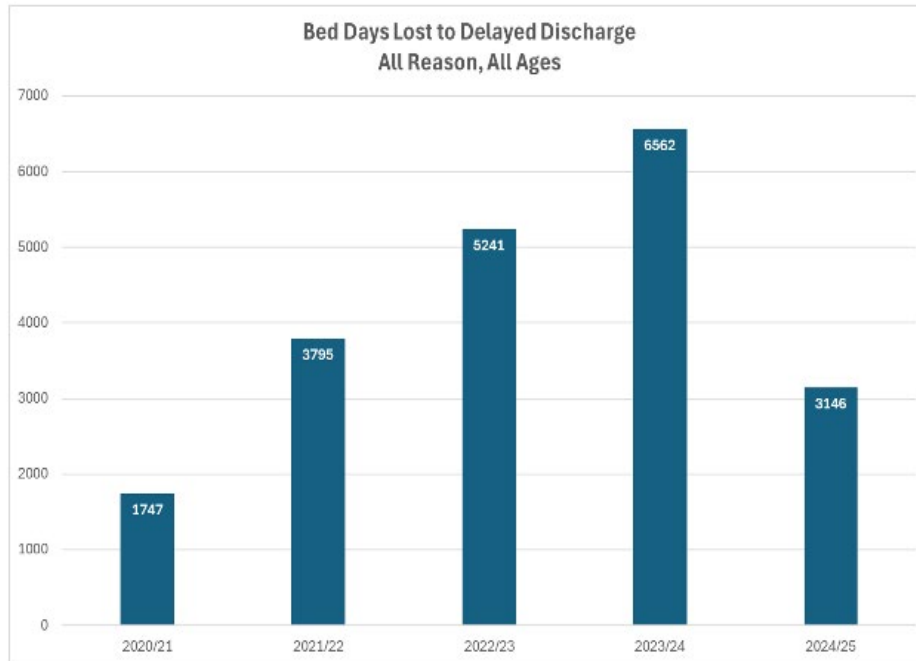
This includes a pathway for those who have attended the local Emergency Department and do not need to be admitted to hospital but require support to return home. Working collaboratively, supports can be put in place immediately to prevent an unnecessary admission. While this work is in its early stages, it is being used successfully and will continue to be reviewed and improved.

Discharge options have also been enhanced to include people moving into a care home for a short stay to enable ongoing assessment and, when needed, rehabilitation, to enable a safe transfer back home within a few weeks. The graph below illustrates a sustained level of referral for support to return home. Despite the ongoing high volume of referrals for support, we have reduced the number of people becoming unnecessarily delayed in hospital.

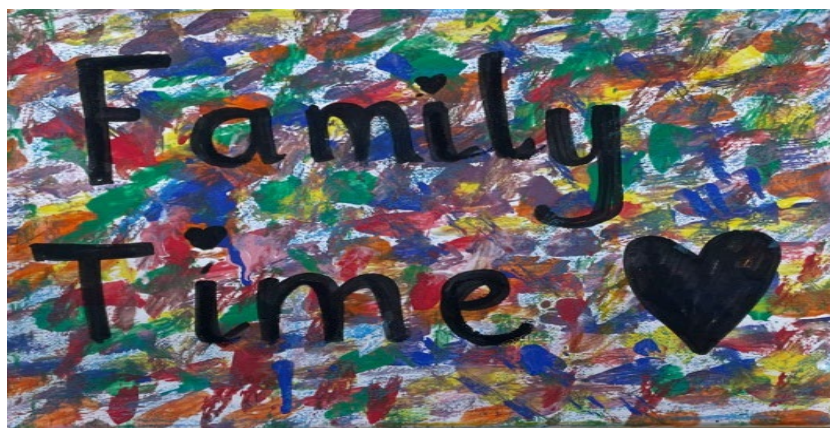


The chart below, demonstrates how this improvement has impacted on the number of bed days lost. Bed days lost increased through the Covid pandemic and continued to rise, peaking in 2023-2024. In 2024-2025 the number of bed days lost has been halved, increasing local hospital capacity. It is important to recognise this positive impact, alongside the continuing commitment to further reducing unnecessary delays.

Classification : Official



### 3.2 Home from Home (Lens Project)



As part of the Lens Project Ideas to Action Programme, supporting Inverclyde's ambition to deliver The Promise and improve outcomes for children and young people, Home from Home was one of the ideas which was funded, to provide improved family time space for families, particularly where children do not currently live at home.

Young people helped to identify what a family time venue needed to be, they helped to choose the furniture and décor, and the venue also includes a baby room, a sensory room and a kitchen for families to cook meals, bake and spend time together.

The house provides an improved opportunity to enjoy family time in a nurturing environment and at times to be part of rehabilitation plans and parenting assessments.

Young people created a video of the Home from Home which will be shared with families to help children know in advance where they will be able to spend time with family members.

The house has now been launched and initial feedback from staff, families and children has been very positive:

One family fed back that 'using home from home was a really positive experience for them, mum enjoyed being able to follow an afterschool routine and make dinner for the children like she used to do previously and children said it felt like being at home again which made them happy.'

A parent shared that 'it is a space to be a mum again without confusing the kids about coming home' but also enables her to do things 'like making their favourite tea, which cannot be done in an office. There are less interruptions and less anxiety about banging into people who then know your business and that your kids are in care'.

Another young person shared that 'it is instantly calming and meant I could plan normal stuff that meant it didn't feel like I am in care'.

### **3.3 Housing Options and Housing Advice Service (HOHAS) – Person Centred Support**

The redesign of the Housing Options and Housing Advice Service is nearing completion, and this will include strengthening our pro-active support to prioritise early intervention and prevention and support for people to sustain their tenancies in the longer term.

Below is a case study that exemplifies the compassionate and person-centred support provided by the teams:

Client A has experienced homelessness over a number of years, as well as being involved with the criminal justice system including periods in custody, during which he was not able to keep in contact with homelessness services. He talked about "taking panic attacks because I knew I was getting out of the jail and I didn't know what was happening", adding that "people would rather be in the jail than be running about the streets homeless".

Client A has a long history of substance use and has been known to local substance use teams and lives with significant underlying health problems. In June 2023, A was identified as a potential Housing First candidate and put forward to the team for support. He currently receives support for four hours per week and this will increase when he moves to his own tenancy. Client A has been able to actively engage with services, reflecting that the new help he receives has supported him to attend doctors' appointments, community groups, resolve his benefits and "simple run of the mill things you would get complacent in", saying that he often struggled to stay on top of general housekeeping but that he has "noticed a big difference" in the support received from the service.

A said he would previously have struggled to accept this support but that he built trust with his worker and is also being supported by the 'Inverclyde Faith in Throughcare' charity who are helping him to avoid offending. Client A has now managed to stay out of prison for three years, compared to previously being returned to custody within months of returning to the community and has now started a college course. Without support A said, "I don't think college would have happened". and his girlfriend are currently in temporary accommodation, however work is ongoing to see if this could become his permanent tenancy. A has talked about having a set routine to care for his home and there has been a real improvement from the previous temporary accommodation.

### 3.4 Platinum Digital Telecare Implementation Award

Inverclyde HSCP have embraced the journey from initial test stage to complete full digitization of the Community Alarm provision. Building on previous recognition, Digital Telecare for Scottish Local Government recently confirmed that Inverclyde HSCP has been awarded the Platinum Digital Telecare Implementation Award in recognition of this recent completion of full analogue to digital telecare transition project. Platinum Accreditation was awarded on the 4 April 2025.

This is a remarkable achievement and the final major milestone in the transition to digital telecare. Next steps include further integration with commissioned providers, continuous improvement and upskilling of staff, robust monitoring and evaluation frameworks to track the performance of digital systems and identify areas for further, sustained improvement.

Congratulations and well done to everyone involved!

### 4.0 IMPLICATIONS

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

SUBJECT	YES	NO
Financial		X
Legal/Risk		X
Human Resources		X
Strategic Plan Priorities		X
Equalities, Fairer Scotland Duty & Children and Young People		X
Clinical or Care Governance		X
National Wellbeing Outcomes		X
Environmental & Sustainability		X
Data Protection		X

### 4.2 Finance

One off Costs

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

Annually Recurring Costs/ (Savings)

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

### 4.3 Legal/Risk

There are no legal implications within this report.

### 4.4 Human Resources

There are no specific human resources implications arising from this report.

#### 4.5 Strategic Plan Priorities

#### 4.6 Equalities

##### (a) Equalities

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

	YES – Assessed as relevant and an EqIA is required.
x	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?

<b>Equalities Outcome</b>	<b>Implications</b>
We have improved our knowledge of the local population who identify as belonging to protected groups and have a better understanding of the challenges they face.	Strategic Plan covers this.
Children and Young People who are at risk due to local inequalities, are identified early and supported to achieve positive health outcomes.	Strategic Plan covers this.
Inverclyde's most vulnerable and often excluded people are supported to be active and respected members of their community.	Strategic Plan covers this.
People that are New to Scotland, through resettlement or asylum, who make Inverclyde their home, feel welcomed, are safe, and able to access the HSCP services they may need.	Strategic Plan covers this.

##### (c) Fairer Scotland Duty

If this report affects or proposes any major strategic decision: -

Has there been active consideration of how this report's recommendations reduce inequalities of outcome?

	YES – A written statement showing how this report's recommendations reduce inequalities of outcome caused by socio-economic disadvantage has been completed.
x	NO – Assessed as not relevant under the Fairer Scotland Duty for the following reasons: Provide reasons why the report has been assessed as not relevant.

(d) **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.

4.7 **Clinical or Care Governance**

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

4.8 **National Wellbeing Outcomes**

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

<b>National Wellbeing Outcome</b>	<b>Implications</b>
People are able to look after and improve their own health and wellbeing and live in good health for longer.	Strategic plan covers this.
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.	Strategic plan covers this.
People who use health and social care services have positive experiences of those services, and have their dignity respected.	Strategic plan covers this.
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	Strategic plan covers this.
Health and social care services contribute to reducing health inequalities.	Strategic plan covers this.
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.	Strategic plan covers this.
People using health and social care services are safe from harm.	Strategic plan covers this.
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.	Strategic plan covers this.
Resources are used effectively in the provision of health and social care services.	Strategic plan covers this.

#### 4.9 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.

#### 4.10 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.

#### 5.0 DIRECTIONS

5.1	<b>Direction Required to Council, Health Board or Both</b>	Direction to:	
		1. No Direction Required	X
		2. Inverclyde Council	
		3. NHS Greater Glasgow & Clyde (GG&C)	
		4. Inverclyde Council and NHS GG&C	

#### 6.0 CONSULTATION

6.1 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.

#### 7.0 BACKGROUND PAPERS

7.1 None.