
Report To: Inverclyde Integration Joint Board **Date:** 21 September 2020

Report By: Louise Long
Chief Officer
Inverclyde Health & Social
Care Partnership **Report No:** IJB/62/2020/LA

Contact Officer: Lesley Aird
Chief Finance Officer **Contact No:** 01475 715381

Subject: HSCP STRATEGIC PLAN – IMPLEMENTATION PROGRESS
REPORT YEAR 1 APRIL 2019-MARCH 2020

1.0 PURPOSE

- 1.1 The purpose of this report is to provide the IJB with an update on progress achieved towards meeting the objectives and driving forward transformational change as outlined in, and in support of, the HSCP Strategic Plan and Big 6 Actions. This report provides an implementation progress report for year 1, to March 2020.

2.0 SUMMARY

- 2.1 The Strategic Plan and Big 6 Actions outline the many commitments we set out to achieve through a programme of transformational change, and how this will be delivered over the next 5 years.
- 2.2 Overall, progress has been positive and achievements have been outlined in the progress report along with specific highlights from the past twelve months.
- 2.3 It should, however, be noted that the outbreak of the Covid-19 pandemic has had an impact on all organisations. This report highlights the process to date and plans to continue transformational change during the forthcoming year, noting that due to Covid-19, progress in some areas will inevitably be slower than planned.
- 2.4 Plans for Strategic Planning Group to review priorities for 2020/21 and reprioritise achievability due to COVID.

3.0 RECOMMENDATIONS

- 3.1 That the IJB notes:
- the progress to date;
 - the efforts of staff and managers to continue effectively the delivery of services and strategic plan outcomes even in the midst of a global pandemic;
 - the uncertain nature of recovery and what the future will look like, and
 - plans to, where possible, continue to deliver transformational change in line with the HSCP Strategic Plan 2019 – 2020 and its Big 6 Actions.

Louise Long
Chief Officer

4.0 BACKGROUND

- 4.1 Inverclyde Health and Social Care Partnership (HSCP) services have been integrated since 2010 as we recognised that the health and care needs of our population are better met by delivering services in a more joined-up way. The benefits of working jointly have been evidenced for a while now with high performance in a number of areas resulting in improved outcomes and lives for our citizens. The Strategic Plan 2019-2024, which is the second Inverclyde IJB Strategic Plan developed in partnership with local people, aims to maintain and build on the high performance levels.
- 4.2 The Strategic Plan and Big 6 Actions outline the many commitments we set out to achieve through a programme of transformational change, and how this will be delivered over the next 5 years.
- 4.3 The Year 1 Progress Report outlines progress against each of the Big 6 Actions, specifically focusing on the key actions which we set out to achieve by March 2020.
- 4.4 Overall, progress in the first year of the plan, 2019/20, has been positive and specific achievements have been outlined in the progress report along with key highlights from the past twelve months.

Status	Blue - Complete	Green – on Track	Amber – slight slippage	Red – significant slippage
As at 31/03/2020	-	4	2	-

- 4.5 The format of the progress report was approved by the Strategic Planning Group (SPG) in February 2020 and supports the Strategic Plan Implementation Plans for each of the Big 6 Actions.
- 4.6 Whilst progress has been generally positive, the outbreak of the Covid-19 pandemic in March 2020 resulted in a range activities being in abeyance as the HSCP initiated its Business Continuity Plan to focus on ensuring we continued to deliver essential services and support our staff and citizens during this unprecedented time.
- 4.7 Covid-19 has meant that it has not been possible to communicate and engage with staff and service users in traditional ways. This has the potential to significantly impact on some of our more vulnerable service users. Services have worked to adapt working practices and communication routes to ensure that effective communication has been maintained but IT issues within the HSCP and digital access inequalities for some service users make that challenging at times.
- 4.8 As it becomes apparent that some element of social distancing is likely to remain in place longer term this potentially impacts on delivery of the strategic plan in both positive and negative ways. For example, the growth in community engagement and support through social prescribing linked to Big Action 6 has been a big positive to come out of the pandemic. On the other hand, across the country we have seen increased incidences of domestic abuse and violence. It is unclear what levels of hidden harm will be uncovered post lockdown that has an impact on Children' & Families, Mental Health and Adult Protection services across the country.
- 4.9 The Year 1 Progress Report highlights plans to pick up the pace of transformational change, where possible, during the forthcoming year however it should be noted that progress will be slower than planned. Once a semblance of normality resumes, the pace of change will continue with the aim of ensuring the Strategic Plan is delivered in full by March 2024.

- 4.10 The year 2 plan is being prioritised in light of COVID. A report will be scrutinised by the Strategic Planning Group.

5.0 IMPLICATIONS

FINANCE

5.1

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

Annually Recurring Costs / (Savings)

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

LEGAL

- 5.2 There are no legal implications from this report.

HUMAN RESOURCES

- 5.3 There are no human resources implications arising from this report.

EQUALITIES

- 5.4 Has an Equality Impact Assessment been carried out?

	YES
X	NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

- 5.4.1 How does this report address our Equality Outcomes?

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	None
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	None
People with protected characteristics feel safe within their communities.	None
People with protected characteristics feel included in the planning and developing of services.	None
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	None

Opportunities to support Learning Disability service users experiencing gender-based violence are maximised.	None
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	None

CLINICAL OR CARE GOVERNANCE IMPLICATIONS

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

5.6 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.	None
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	None
People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None
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.	None
People using health and social care services are safe from harm.	None
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.	None
Resources are used effectively in the provision of health and social care services.	None

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 and the Strategic Planning Group (SPG).

8.0 BACKGROUND PAPERS

8.1 Inverclyde HSCP Strategic Plan 2019 - 2024

STRATEGIC PLAN 2019 – 24

IMPLEMENTATION PROGRESS REPORT

Year 1 April 2019 – March 2020



R.A.G. Progress Status

Red = significant slippage


Amber = slight slippage

Green = on track

Grey = future work

Blue = complete

Principal Author	Caroline Champion Service Development Manager
Responsible Head of Service	Lesley Aird Chief Finance Officer
Report Date	28 th May 2020

BIG ACTION 1: REDUCING INEQUALITIES BY BUILDING STRONGER COMMUNITIES AND IMPROVING PHYSICAL AND MENTAL HEALTH		RAG STATUS 
Objective	We will promote health and wellbeing by reducing inequalities through supporting people, including carers to have more choice and control	
Progress Achieved	<p>Progress towards achieving the outcomes for Big Action 1 has been steady during the first year. There are a number of key deliverables identified for completion in the first year of the HSCP Strategic Plan.</p> <p>Health Learning (BA1.2, BA1.3) The HSCP has a key role in educating the public to understand their own health needs, the services available to them, and our collective responsibility on how to use our services appropriately and effectively, and to support our vision to assist everyone to live active, healthy and fulfilling lives. Promotion of ‘Choose the Right Service’ has seen positive progress, with 450 primary school children engaged in various workshops, however further work is required to achieve the target of 90% of primary care and reception staff trained in ‘sign post and care navigation’. Locality Planning Communications and Engagement Groups have now being established, and they can have a role in promoting and developing Choose the Right Service.</p> <p>One key deliverable where progress had been less positive is the plan to reduce demand on A&E services by supporting people to understand the available care pathways they can use. The target 3% reduction during 2019 / 20 was ambitious and has not been achieved. The number of A&E attendances across Greater Glasgow & Clyde HB area has seen little improvement in meeting national target reduction and the trend has been no different in Inverclyde. Work will continue to target this key area for improvement including stepping up the ‘Choose the Right Service’ campaign. Additional funding for alcohol/drug liaison nurse as part of CORRA project have seen a reduction in alcohol related admissions to hospital Since March 2020 Covid 19 has had an impact nationwide and A&E attendances have dramatically dropped. It will be important to consider this as part of the longer term recovery to see if there are any potential lessons to keep numbers down.</p> <p>Digital Platforms (BA1.8 – 1.10) From 2019, we set out to explore the benefits and opportunities that technology will offer our local citizens. The HSCP is developing a Digital Strategy which will include self-management of long term conditions (FLORENCE), Technology Enabled Care (TEC), Webchat advice model and new social care case recording system. To date we now have TEC being used by several people, despite being at an early stage 22 people are using FLORENCE, 17 Docobo have been deployed and installed in 17 patient homes with a further 13 planned in the near future. The HSCP Digital Strategy is</p>	

being developed with implementation originally due in 2021. Covid-19 has meant that some of this digital strategy work has been accelerated to support home and agile working across the HSCP. To enhance information access the Inverclyde aspects of the Scottish Services Directory are still being developed. Near Me technology was expedited with all primary care practice now using Near me the roll out of this technology in mental Health and alcohol and drug services is being progressed as part of the recovery agenda.

Access (BA1.11, BA1.12)

Educating the public is an ongoing process and apart from Choose the Right Service, the HSCP aims to ensure people have easy access to information, advice and support when they need it. Our aim is to build on current models that connect people with a range of services when they need them, or point them to less formal support that might be more effective for them. Six Locality Communications and Engagement Groups will give us the opportunity to build on our existing resources and engage with wider communities and other partners to explore ways to improve access to information and support for local people, including options on supporting education, health literacy and self-management. Recruitment of community members to join their local Locality Communications and Engagement Groups has commenced and all six groups are now established – these Groups will support Locality Planning Groups (LPGs) to develop and implement Locality Action Plans driving forward transformational change in support of the HSCP Strategic Plan 2019 – 24. Resources have been identified to refresh the HSCP website which was one of the key deliverables, and to date 1,010 contacts to Access 1st have been made. Covid 19 has meant that a number of services are now being delivered virtually through phone, video conferencing and text reminders. Nearly 4000 keeping in touch calls made by Your Voice and Compassionate Inverclyde during the COVID19 crisis. Services like Near Me are being rolled out across Social Care services as well as Health to support this.

Social Prescribing to Improve Physical and Mental Wellbeing (BA1.16 – BA1.18)

By 2019 / 20, the HSCP aimed to have developed its approach to social prescribing. Community Connectors and Community Link Workers are now in place and making a positive impact on people's lives. The tender process was delayed due to COVID19

Community Connectors

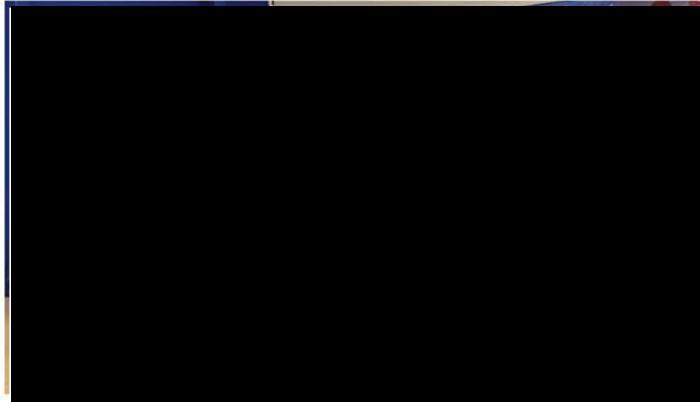
Community Connectors have been well established within the community for the past 4 years, working across the community they have developed good relationships with a variety to local assets, and assist with the various health hubs and 'pop ups' within the community. A total of 3,186 people have been referred to the project, enabling local people to develop meaningful social support networks through person centred conversations and one to one support. Community Connectors work with individuals for an average of 12 weeks – 1,909 people were supported for 1 – 6 weeks, 631 for 6 – 8 weeks, and 646 for 8 – 12 weeks. The type of 'connections' included access to physical support groups (435 people),

	<p>social / peer support groups (875), training / education (145), church groups (176), volunteering opportunities (133), and helping agencies (582). A Community Champion programme has also been developed through Your Voice.</p> <p>The Community Link Workers programme was established in 2017 as a partnership between the HSCP and CVS Inverclyde. Community Link Workers initially worked within 6 GP practices, this increased to 11 practices in 2018 / 19, and by the end of 2019 a CLW was based in every GP practice. A total of 1,823 people were referred to the programme, the top 6 main reasons for referral were finance (30.5%), stress (23.1%), mental health and wellbeing (22.2%), housing (14.6%), employability (14.3%) and carer issues (9.9%). Clear pathways have been developed between the Community Link Workers, Social Prescribing Co-Ordinators and Community Connectors.</p>
Next Steps	<p>Progress on some of the key deliverables was initially slower than hoped but steps are now in place to pick up the pace of change and continue towards achieving the key deliverables within agreed timescales. Regular implementation plan progress updates will continue to be discussed at Strategic planning Group (SPG). The template for monitoring implementation has been amended to focus more on progress since the last update and now includes planned next steps, this will support continuation of driving forward transformational change in support of the HSCP Strategic Plan.</p> <p>The two areas where particular focus is required are :</p> <ul style="list-style-type: none"> • to achieve the target of 90% of primary care and reception staff trained in 'sign post and care navigation' • to continue to look at proactive ways to reduce demand on A&E services by supporting people to understand the available care pathways they can use, this will include stepping up / refreshing the Choose the Right Service campaign • Promote Community Champion approach with communities one current restriction on social distancing have been lifted
Issues / Risks	<p>Whilst some key deliverables are progressing slower than planned, there are no significant risks / issues to report. This position will continue to be monitored by SPG.</p>
Highlights	<p>The following extracts have been taken from the Social Prescribing Update Report, October 2019</p>

Billy

SPRING Case Study

One of our biggest social prescribing success stories, Billy has been coming to Your Voice since the project began and has been connected to the Recovery Music Jam. Billy suffers from depression and low mood, he has found a real sense of purpose and direction in his day to day life. Billy's mood has improved and he looks forward to getting out of the house, whereas before he couldn't face even doing simple things like picking up the telephone. Billy has even gained the confidence to perform on stage with the Recovery Band at several events!



From a GP:

"A huge success from Community Connectors with a patient of mine who is now engaged with Stepwell training programme. In the past 6 months I have seen more and more uptake of this resource."

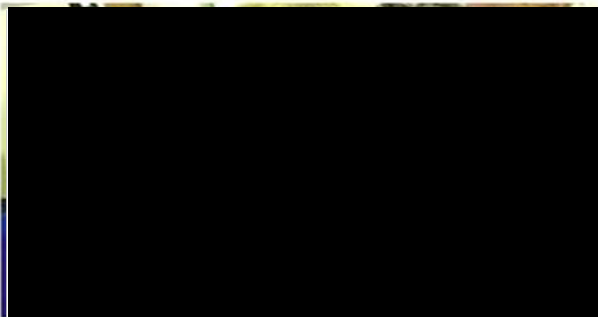
– **Dr Luty**
Dorema Surgery


Case Study - Pearl

Pearl is a lady who receives HSCP services including Homecare and as a victim of crime, was reluctant to get out and about - she was feeling particularly isolated and vulnerable.

Together we discussed various opportunities available within the community and Pearl expressed she would like to access somewhere to learn how to use her recently purchased iPad.

Pearl decided she would like to come along to the Your Voice Digital Peer Support Group, and hasn't looked back since - she attends every week and has made lots of new friends, and learned new digital skills.



BIG ACTION 2: A NURTURING INVERCLYDE WILL GIVE OUR CHILDREN AND YOUNG PEOPLE THE BEST START IN LIFE		RAG STATUS 
Objective	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	
Progress Achieved	<p>Progress towards achieving the outcomes for Big Action 2 has been steady during the first year. There are a number of key deliverables identified for completion in the first year of the HSCP Strategic Plan.</p> <p>Access to early help and support – enhancing and further embedding the Inverclyde GIRFEC Pathway (BA2.1, BA2.2)</p> <p>The health visiting workforce is now at the Scottish Government end point of 25 Whole Time equivalent HVs in post. This has facilitated the reduction of caseloads in line with weighting tool in order to support assessment and planning for children in their early years, and provide greater capacity to support families with additional needs and child protection concerns. The Revised Universal Pathway for pre-5 children is almost at full implementation, hindered only by a delay at a Board level in relation to the antenatal contact. All families are now supported with a minimum to 10 (11 including A/N contact when introduced) face to face home contacts which provide the opportunity to develop therapeutic relationships and enhance health and wellbeing at an individual and population level. Getting it Right for Every Child is well embedded in practice and improvement work in relation to effective team around the child meetings, assessment and planning in relation to child neglect and building collaborative and facilitative relationships across the Partnership are progressing well. There are a number of projects that serve to create streamlined pathways between Children’s and Specialist Children services including a test of a joint speech and language (SLT) assessment process to support early access to SLT following the 27-30 month assessment (Child Health Surveillance) and a new nursery nurse post to work across both service areas designed to support pre-5 children and their parents with additional needs relating to autism for example. In School Nursing, the Scottish Government commitment to increasing the number of Public Health Nurses (SCPHN) for School age children has facilitated an increase in SCPHN from 0.69 to 1.6 whole time equivalent with another 1.0 SCPHN due to return to Inverclyde early next year. This facilitates an increased ability to support children and young people in relation to child protection needs, emotional and mild mental health difficulties using LIAMs (an anxiety management intervention) and in supporting effective transitions. This increased capacity feeds directly into an ability to offer early interventions.</p>	

Improved health and wellbeing – support and improve children and young people’s mental health (BA2.8, BA2.9)

It is crucial that our staff are skilled and confidently equipped to recognise and support young people’s mental health and wellbeing, and we stated that by 2019 we would have directed investment to up-skilling our workforce. The HSCP is developing a training needs analysis to identify specific specialised training requirements for staff.

Discussions are currently ongoing and aligned to the HSCP People Plan and implementation on the HSCPs Training Board programme. Inverclyde Mental Health Program Board has developed and help to deliver train to schools throughout Inverclyde

Work has been progressing towards developing support for families affected by parental mental illness and substance misuse which we said we would achieve by 2020. Available data suggests that January – June 2019, 123 children were on Kinship placement with 82% of primary concern of substance misuse or parental mental health. The Kinship Through Family Ties Group have identified the need for specific support around bereavement and in response a bereavement group is being established for kinship carers, and young people will have the opportunity of support through the Seasons for Growth programme. Further work is being undertaken to identify young carers who are known to education and health but not known to social work services so that appropriate support can be offered. Further work is required to deliver on this action and this will be taken forward during 2020.

There has been a delay in deliver the tender for a tier 2 wellbeing services for school age children due to COVID19.A joint initiative between Education and the HSCP it will deliver wellbeing service from September 2020.During 2019/20 in the absences in the teir2 additional temporary investment in Child and Adolescent Mental Health services to cope with additional demands. The capacity for this services will need to be reviewed within the HSCP recovery plan.


Opportunities to maximize learning, achievements and skills for life (BA2.11)

In order to support maximizing opportunities for learning, maximize achievements and attain skills for life, by 2020 we set out to increase the availability of high quality support for families supported on a voluntary basis. The HSCP commissions Barnardos to provide a range of services to vulnerable children and families, many of whom are supported on a voluntary basis. Barnardos offer a wide range of interventions to promote whole family wellbeing, using a range of individual and group work supports at the service base, within the family and in school or nursery. Barnardos have developed bespoke support in line with children’s developmental needs and key transition stages. The range and scope of delivery has grown over the years and development in line with the needs of commissioners and families. We will continue to explore more opportunities and look to evaluate provision to ensure we provide safe, sustainable, effective and high quality parenting support for all our families.

Access to high quality care, accommodation and housing that will meet the needs of looked after children,

	<p>corporate parenting (BA2.14 – BA2.15)</p> <p>In order to support access to high quality care, accommodation and housing that will meet the needs of looked after children (Corporate Parenting), as part of the revised Learning Disability Services model, we stated technology and support would be available to help young people with disabilities and support them to live as independently as possible. As part of the learning disabilities service redesign, an independent travel training pilot commenced and following the pilot, an evaluation will take place to support development of the travel training programme which will be available to young people transitioning between children and adult services. The pilot and evaluation will continue into 2020 and further developmental work will follow.</p> <p>The development of Proud2Care, a group for young people who are looked after by the local authority or extended family has been a triumph. Engaging young people in a meaningful way to help to develop and shape services. The group will lead aspects of Inverclyde’s response to the national care review</p> <p>We also set out to implement an accessible model of service to meet the housing and support needs of young people entitled to continuing care, in particular the development of 4 supported tenancies. The service is supported by existing staff plus the addition of two Grade E posts through the family support model, and underpinned by an Outcome Star Assessment based on health and wellbeing. The Core and Cluster accommodation model has been delivers with two flats ready for any young adult wishing to move.</p>
<p>Next Steps</p>	<p>Progress on some of the key deliverables has been slower than hoped but steps are now in place to pick up the pace of change and continue towards achieving the key deliverables within agreed timescales. Regular implementation plan progress updates will continue to be discussed at Strategic planning Group (SPG). The template for monitoring implementation has been amended to focus more on progress since the last update and now includes planned next steps, this will support continuation of driving forward transformational change in support of the HSCP Strategic Plan and Big Action 2.</p> <p>The five areas where particular focus is required are :</p> <ul style="list-style-type: none"> • whilst progress is already being made, continued implementation of the Universal Pathway will be pushed forward to ensure all 0 – 5 year olds receive Core Up provision by the end of 2020 • progress development of support for families affected by parental mental illness and substance misuse • completion of the independent travel training pilot and evaluation in support of the development of the travel training programme which will be available to young people transitioning between children and adult services • progress towards local implementation of the recommendations outlined in the national review of the care system

Issues / Risks	Whilst some key deliverables are progressing slower than planned, there are no significant risks / issues to report. This position will continue to be monitored by SPG.
Highlights	<ul style="list-style-type: none"> • Proud 2 Care • TAG report • Fostering & Adoption Inspection Report • Children's Houses Inspection Reports • Home Start Report • Bardardos report

BIG ACTION 3: TOGETHER WE WILL PROTECT OUR POPULATION		RAG STATUS 
Objective	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	
Progress Achieved	<p>Progress towards achieving the outcomes for Big Action 3 has been steady during the first year. There are a number of key deliverables identified for completion in the first year of the HSCP Strategic Plan.</p> <p>Raising Awareness (BA3.1, BA3.2) From 2019 onwards, the intention was to develop a plan to raise awareness about topics such as protection of children, vulnerable adults and those affected by serious and violent crime. The main focus of our engagement activities in 2019 were around locality planning and child poverty, however there are now plans in place to start a new round of social media activity in relation to key themes concerning adult support and protection and the many forms of abuse that can affect vulnerable adults.</p> <p>An initial joint Alliance and HSCP Communications and Engagement Strategy and related Action Plan has been drafted setting out standards for all communications and engagement activities, and guidance for the locality planning Communications and Engagement Groups. The Action Plan provides clear objectives including the need to raise the profile of the HSCP and the Integration Joint Board (IJB), this will provide focus for specific activities required to bridge the gap in people's knowledge and understanding of the organisation and support the crucial work of the Locality Planning Groups (LPS). The draft joint Alliance and HSCP Communications and Engagement Plan was approved by the Strategic Planning Group (SPG) on 21st February 2020. This is now sitting with Corporate Communications at the Council for further development and the plan needs to link to locality planning for the Alliance Board prior to being presented to the Integration Joint Board (IJB) for approval in May 2020 this has been delayed due to COVID19</p> <p>Within the Strategic Plan, the HSCP, working in partnership with the Alliance, agreed to establish six Locality Planning Groups (LPGs) and their respective Locality Communications and Engagement Groups. The proposed framework to establish six Locality Planning Groups (LPGs) was approved by the Integration Joint Board (IJB) in June 2019. The Port Glasgow Locality Planning Group (LPG) was established on 1st April 2020 as the pilot site prior with the five remaining groups due to become operational by the end of May 2020. The Communications and Engagement Groups have now been established in all six localities, these Groups will support Locality Planning Groups (LPGs) to develop and</p>	

implement Locality Action Plans driving forward transformational change in support of the HSCP Strategic Plan 2019 – 24 and ensure the voice of local people is taken into account when planning service redesign and improvements for local communities.

All 6 local plans have been developed however there are no locality groups in place yet to progress them

Planning (BA3.4, BA3.5)

We stated that by 2019 and thereafter the duration of the Strategic Plan, we will have in place an annual business plan to deliver consistently high quality child and adult protection and MAPPA (Multi-Agency Public Protection Arrangements) services. A MAPPA business plan is currently in place for North Strathclyde and covers Inverclyde area. The Adult Protection Committee (APC) business plan accompanies the Biennial Report, the next being due to be submitted to the Scottish Government in October 2020.

We also stated that by 2020, the Alcohol and Drug Partnership (ADP) and Violence Against Women Partnership planning process would be aligned with existing public protection process, under the governance of the Public Protection Chief Officers Group (PPCOG). The review of alcohol and drug services and governance arrangements is underway and due to be completed in 2020.


Interventions (BA3.7 - BA3.9)

By 2020, we said we would have in place a new model for women involved in offending and over the course of the last twelve months, positive progress has been made. The Women's Project aims to achieve a change in the response to women in the criminal justice system, with proposals developed by women themselves focusing on a fundamental shift towards effective early intervention. Since funding was awarded in 2019, project staff have been appointed and a one year milestones document produced and agreed with the funder. A review of existing literature on women involved in the criminal justice system, gendered approaches to service provision and methods of analyzing interventions has been completed. Methodology for assessing financial viability of potential service change has also been completed drawing on a framework for calculating the costs and benefits of potential interventions or service change from basic data and applying government – calculated estimates of the unit costs and benefits of interventions to public sector budgets, to the economy, and to the wellbeing of society generally. Initial mapping of the current service provision and engagement by women through discussion with service providers has been completed and such engagement will continue throughout the duration of the project. A co-production group of women with lived experience of the criminal justice system is being established to inform the project, with recruitment is due to commence in April 2020. The qualitative data gathering process in relation to women with lived experience is on track to commence from April 2020 and will continue throughout this phase of the project.

We further stated that in 2020, we will have commissioned an evidence-based approach to reducing gender based

	<p>violence and domestic abuse in our community, and we are on track to deliver against this key objective. Eighteen (18) staff have now been trained in the UP2U programme. This is a trauma informed approach that has been commissioned by the HSCP to work with perpetrators of domestic abuse and support victims in order to reduce gender based violence and abuse. The programme can be adapted to the individual circumstances of perpetrators. Ten (10) staff from criminal justice team and eight (8) from children and families team have now been trained in the programme. There are nine (9) interventions currently underway with nine (9) people. Current focus is on establishing quality assurance mechanisms and setting up support mechanisms for victims and children involved.</p> <p>Ensuring Quality (BA3.11 – BA3.13)</p> <p>The HSCP Clinical and Care Governance Strategy was due to be completed by the end of 2019, but this along with an implementation Action Plan has now been drafted and will be presented to the Strategic Planning Group (SPG) in June then submitted to the Integration Joint Board (IJB) for approval. Once ratified, the Strategy and Action Plan will be implemented. Members of the Your Voice Advisory Group contributed to its development to help us adopt the person – centered culture which is one of the key domains of clinical and care governance.</p> <p>The Ministerial Strategic Group for Health and Community Care, Review of Progress with Integration of Health and Social Care - Final Report was published in February 2019 with a commitment to produce revised statutory guidance to ensure “effective, coherent and joined up clinical and care governance arrangements” to be available in August 2019. Work is underway to take this forward nationally which includes background analysis of the current clinical and care governance systems and processes within IJBs and HSCPs as well as considering local and international best practice. Whilst this guidance was further anticipated earlier this year work has progressed locally to develop the HSCP Clinical and Care Governance Strategy which had been due to be completed at the end of 2019.</p> <p>To support the implementation of the Clinical and Care Governance Strategy, an Action Plan will be developed to ensure delivery against the clearly defined domains as outlined in the Strategy and within agreed timeframes. A short life working group has recently been established to develop the Action Plan. The plan will ensure continued support from key stakeholders including members of the Your Voice Advisory Group who contributed to the development of the strategy helping us adopt the person – centered culture which is one of the key domains of clinical and care governance.</p>
<p>Next Steps</p>	<p>Progress on some of the key deliverables has been delayed due to COVID19. Regular implementation plan progress updates will continue to be discussed at Strategic Planning Group (SPG). The template for monitoring implementation has been amended to focus more on progress since the last update and now includes planned next steps, this will support continuation of driving forward transformational change in support of the HSCP Strategic Plan and Big Action 3.</p> <p>The areas where particular focus is required are :</p>

	<ul style="list-style-type: none"> • continue focus on establishing quality assurance mechanisms in relation to reducing gender based violence and domestic abuse, and setting up support mechanisms for victims and children involved • continue to ensure staff working in public protection are supported and equipped to provide appropriate relationship-based and trauma informed support to victims and perpetrators of abuse • work will continue to ensure we have in place appropriate support for young people involved in offending • further develop a self-evaluation framework with agreed minimum standards applied across public protection services and implementation of the HSCP Quality Assurance Framework • Clinical Care Governance Strategy
Issues / Risks	Whilst some key deliverables are progressing slower than planned, there are no significant risks / issues to report. This position will continue to be monitored by SPG.
Highlights	<div data-bbox="443 651 719 863" data-label="Image"> </div> <div data-bbox="443 914 864 967" data-label="Section-Header"> <h2>Leadership Award</h2> </div> <div data-bbox="443 991 1084 1059" data-label="Text"> <p>Derek Flood Inverclyde Health & Social Care Partnership</p> </div> <div data-bbox="1196 651 1957 1082" data-label="Image"> </div> <div data-bbox="427 1098 2011 1230" data-label="Text"> <p>Derek has brought 3 separate teams together under a single vision of improving the lives of our most vulnerable citizens, inspiring confidence and a passion for the possible. The team still carries out the three elements of Social Security advice and information; Welfare Rights representation, and Specialist Money Advise, however this is done in a joined up way that minimises duplication and maximises long-term and sustainable gain for the citizen</p> </div>

BIG ACTION 4: TOGETHER WE WILL SUPPORT MORE PEOPLE TO FULFILL 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		RAG STATUS 
Objective	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	
Progress Achieved	<p>Progress towards achieving the outcomes for Big Action 4 has been steady during the first year. There are a number of key deliverables identified for completion in the first year of the HSCP Strategic Plan.</p> <p>Access (BA4.2, BA4.4) The review of NHS Greater Glasgow and Clyde wide Out of Hours (OOHs) service and future development was underway as planned however early 2020, the difficult and contentious decision was made to temporarily withdraw OOHs service for Inverclyde. This was due to a number of operational challenges but ultimately the inability to maintain a safe and sustainable service for our local community was the primary reason. Patients are currently receiving OOHs support via NHS 24 and Royal Alexandra Hospital in Paisley. This position will be subject to ongoing review.</p> <p>The HSCP undertook to complete the full business case for a new Learning Disability Hub to be based in Greenock. The service model and business case was completed after an options appraisal was carried out, this included input from Property Services, architect and other key stakeholders. Two locations were fully evaluated and one identified as the preferred site. In March 2020, full approval was granted and capital funding approved by the Council for the new £7.4 million state of the art Hub for adults with learning disabilities on the site of the former Hector McNeil Baths.</p> <p>By 2020, the HSCP set out to define the role of Allied Health Professionals (AHPs) in relation to how they support independent living. The first part of the review has been undertaken (Occupational Therapy), an implementation plan approved and the service is now moving towards implementing proposed changes. The next phase of the review will focus on Speech and Language Therapy, Physiotherapy and Dietetics, this is due to be completed by the end of the year.</p> <p>In our Strategic Plan, we stated we would ensure health and social care services will have a single point of access through Access 1st. During the last twelve months, the Access 1st Team has been recruited to and more referrals are</p>	

being made to the team. This will be subject to ongoing review and progress towards the HSCP having a single point of access for adults ensuring they have the right help and the right advice when they need it. The current pandemic pressures has tested the robustness of the current process and despite the increased difficulties has shown to be able to maintain performance around hospital discharges and Adult Protection and Welfare. It was also key as a frontline response to enquiries by the people of Inverclyde.

An evaluation was planned for Spring 2020 but this has been partially completed and will be finalized as part of the HSCP recovery plan.

Inverclyde Home 1st Plan is the Unscheduled Care Plan for Inverclyde in collaboration of colleagues from Inverclyde Royal hospital. It is also the HSCP Health & community Care development plan tying directly into Inverclyde HSCP 6 Big Actions Strategic Plan. The Home 1st incorporates the special measures required to meet the challenges of seasonal variance in particular Winter and these measures are clearly identified (Winter Plan)

Inverclyde Home 1st plan has been in place for 3 years and up to now has focused correctly on managing the length of time people spend in hospital when they are physically fit for discharge. For 2020/21 Inverclyde will increase emphasis on the community

Over past 12 months Inverclyde has continued to develop and improve services with a clear emphasis on preventing hospital attendance and admissions whilst facilitating fast safe discharge.

- Develop Home1st team bringing together ACM, Enablement, in reach team and discharge team to move the emphasis of discharge planning from hospital to community provision. Discharge planning begins in the community and assessments completed in the service users home.
- Discharge to assess approach, when an individual is medically fit to be discharged they return home when assessment for future needs is completed by the new Home 1st (Enablement) Team.
- Reviewed the partnership staff involved in Discharge to ensure a smooth patient pathway, early referral for social care assessment and reduce duplication develops and expands the 7 day service. Include development of the Discharge Hub at the IRH.
- Care Home Liaison Nurses including CPN support involvement in supporting care homes to maintain residents in community and avoid hospital admission

The continuing focus is on the Home1st Plan _ Getting it Right First Time 7 Essential Actions

	<ol style="list-style-type: none"> 1. Support improved 7 day Service 2. Communication – cultural change in Inverclyde 3. Distress support to people at times of crisis to remain in own home and engage services to reduce frequency of episodes 4. Assess to Admit (Acute) Discharge to assess (HSCP) 5. Frequent Attenders (Flow 1&2 – attendances at IRH (frequent attendees by flows)Evaluate the Winter Plan initiative in identifying frequent attenders and developing ACP 6. Alcohol, drug, Recovery CMHT address individual frequent attenders 7. Frequent Attendees – HSCP GP utilising Primary Care Link Workers <p>Housing (BA4.19, BA4.20)</p> <p>A Housing Contribution Statement was developed in 2019 as planned. A comprehensive review of specialist housing demand is now underway, looking into future demand for specialist housing provision which will influence allocations and future builds in Inverclyde. The draft report was circulated in March 2020 for comment by the Housing Partnership Group and once comments have been received, the report will be finalized and recommendations implemented.</p> <p>In addition, by 2020 we set out to ensure housing providers were supported to provide a re-ablement model of care across Inverclyde. Following the Supporting People review, the recommendation was to recruit to a temporary post to support the change in approach within sheltered housing. Part of the work plan is to implement a re-ablement approach within sheltered housing across Inverclyde. Training is currently being developed to support implementation.</p> <p>By 2020, we set out to have in place community support to reduce homelessness across Inverclyde. A Rapid Rehousing Transition Plan (RRTP) has been developed and a Partnership Officer recruited to support this work. The intention now is to implement Housing First approach working with Registered Social Landlords (RSLs) and Third Sector commissioned partners. Housing First Sub Group was established in March and the inaugural meeting due to take place in later that month.</p>
<p>Next Steps</p>	<p>Progress on some of the key deliverables has been slower than hoped but steps are now in place to pick up the pace of change and continue towards achieving the key deliverables within agreed timescales. Regular implementation plan progress updates will continue to be discussed at Strategic planning Group (SPG). The template for monitoring implementation has been amended to focus more on progress since the last update and now includes planned next steps, this will support continuation of driving forward transformational change in support of the HSCP Strategic Plan and Big Action 4.</p>

	<p>The areas where particular focus is required are :</p> <ul style="list-style-type: none"> • continue implementation of free personal care for under 65s • continue to review and update existing and new Anticipatory Care Plans (ACPs) to support improved information sharing across health and social care • review of care and support at home service including commissioned provision commenced late 2019 and will be completed during 2020 • further work is required to develop pathways for people with long term conditions (LTCs) including use of technology • continue to develop and monitor single point of contact through Access 1st • work to reduce activity at hospital including delayed discharges throughout the remainder of the Strategic Plan • work to continue the review of community transport & a new Transport Policy within the Learning Disability and Older People services • continue to develop community support to reduce homelessness
Issues / Risks	<p>Whilst some key deliverables are progressing slower than planned, there are no significant risks / issues to report. This position will continue to be monitored by SPG.</p>
Highlights	<div data-bbox="488 901 763 1114" data-label="Image"> </div> <p data-bbox="878 906 1854 944">The Campbell Christie Public Service Reform Award Finalists</p> <ul style="list-style-type: none"> • Mental Health Hub, NHS 24 • Home 1st, Inverclyde Health & Social Care Partnership • The Borderlands Deal, UK & Scottish Governments, Dumfries & Galloway, Cumbria, Carlisle, Northumberland and Scottish Borders Councils

£7.4m set aside for new community hub

Thursday 19 March 2020

People with learning disabilities and autism in Inverclyde are set to benefit from a new, £7.4m, state-of-the-art daytime activity hub.

Pictured, from left, support worker James Haggerty, service users Steven Sweeney and Allan Pace, Senior Day Care Officer Debbie Taggart, and Learning Disability Operations Officer Heather Simpson, with Councillor Robert Moran, Convener of Inverclyde Council's Health & Social Care Committee.



Proposals for the new community hub were included in Inverclyde Council's 2020-2021 capital budget, which councillors approved on Thursday 12 March.

The Community hub will replace the McPherson Centre in Gourrock, which has already closed, and the Fitzgerald Centre in Greenock.

Councillor Robert Moran, Convener of Inverclyde Council's Health & Social Care Committee, said, "We are delivering on the promise we made to people with learning disability who use the centre and their families. It's been our long term goal to provide people with learning disabilities with a centrally-located, daytime activity hub. Now that the money has been allocated for the project we can forge ahead and make this important, new facility a reality.

"Our intention is for the hub to be housed in a community building, which can also be used by the wider community. The ethos will be to provide a space where people with additional needs and the wider community can come together in a modern, open environment which has room for everyone.

"The hub will make sure that people with a learning disability get the support they need to achieve their ambitions to be as independent as possible and to be included in their community."

Thomas Arthur, 24, is looking forward to using the new Hub. Thomas moved to Fitzgerald Centre from McPherson Centre in Gourrock when the building closed in 2018. Thomas has a learning disability with complex health needs which means he needs full and constant support.


Mrs Arthur, Thomas' mother, said, "I was devastated when the McPherson Centre closed and was worried that the new Hub wouldn't happen. Now, I am over the moon that this has been given to go ahead and money invested in it, it has exceeded my expectations and I'm just on a high. Hats off to everyone who made this happen. Thomas will continue to get the support he needs but will have access to much better facilities and therapies and will get outdoor. He loves watching traffic go by so it's a great location."

The building will also accommodate the Integrated Learning Disability Team of specialist learning disability health and social Care staff, creating a new service which meets all the needs of people who have a learning disability along with day opportunities under one roof.

The new hub is intended to support people who have complex needs including autism, and to provide accessible therapeutic and personal care facilities.


Proposals for the new facility envisage a building:

- With a capacity for 50-plus service users
- That can be used as a drop-in base for any service user or member of the community who needs accessible personal care facilities, help with eating or specific therapies not accessible elsewhere
- With a café style facility that offers a service all day and is run as either as a social enterprise by service users or is set up to offer employment training to anyone who requires a supported employment service
- With a therapeutic, learning and development model to meet personal health and social outcomes for a number of people with physical and learning disabilities and/or autism
- With flexible space and zoning to allow peer activities, therapies, quiet spaces and an attractive large area that can be used by community groups and day/evening adult education.


BIG ACTION 5: TOGETHER WE WILL REDUCE THE USE OF AND HARM FROM ALCOHOL < TOBACCO AND DRUGS		RAG STATUS 
Objective	<p>We will promote early intervention, treatment and recovery from alcohol, drugs and tobacco and help support ill health. We will support those affected to become more involved in their local community</p>	
Progress Achieved	<p>Progress towards achieving the outcomes for Big Action 5 has been steady during the first year. There are a number of key deliverables identified for completion in the first year of the HSCP Strategic Plan.</p> <p>Working with the Wider System (BA5.1, BA5.2) The HSCP set out to ensure it works with partners to facilitate a focus on alcohol, drug and tobacco prevention across all life stages, and developing digital support for people. Work is continuing through the Alcohol and Drugs Partnership (ADP) with a focus on recovery, education and prevention, especially establishing a pathway of support for young people.</p> <p>As planned, during 2019 the alcohol and drug service was reviewed with a view to developing an integration service located at Wellpark Centre. This review was completed, the new integrated alcohol and drug recovery service implemented and staff co-located at the Centre by autumn. A recovery lead was appointed and further work is ongoing with 3rd Sector partners. The review implementation has been delayed due COVID19.</p> <p>Ensure Appropriate Treatment (BA5.5, BA5.6) In 2019, we said we would develop further the addictions primary care model and other community based interventions. The CORRA project was implemented, a steering group established to take forward the delivery plan, outcomes and indicators for the project, and currently the CORRA project lead post is going through the recruitment process. Specialist drug treatment service staff have been working with GPs to enhance their primary care drug treatment provision, and Shared Care capacity for drug treatment has been extended to an additional practice in Inverclyde. There has been a delay in tendering for recovery family support service due to COVID19</p> <p>By the end of 2019, we set out to develop a pathway for those with long term conditions (COPD) including supported use of technology, with the aim of reducing unplanned hospital admissions relating to COPD. To support this, two Long Term Conditions district nurses have been appointed to work with adults with related conditions and aim to support these people at home. Telehealth Doc@Home Audit was carried out based on 32 patients using this technology to</p>	

	<p>monitor their conditions. Before being monitored with Doc@Home, there were 41 admissions to hospital, 87 occupied bed days and standby medication used 49 times. Once these patients moved onto Doc@Home, there was a significant reduction in activity with 8 hospital admissions, 34 occupied bed days, 5 GP visits, and standby medication used 31 times. This equates to 80% reduction in hospital admissions, 61% reduction in occupied bed days, and 89% reduction in GP visits. As at February 2020, there were 33 patients (21 using the Hub, 12 using the App) enrolled to use Doc@Home and it is anticipated further roll out will continue during the year with positive benefits for people who choose to enroll.</p> <p>Focus on Recovery (BA5.9 - BA5.11) It was agreed to develop a Recovery Strategy that outlines the HSCP vision to support people on the road to recovery, and this would be done in partnership with the 3rd Sector. Development of the Alcohol and Drug Recovery Strategy (ADRS) is underway with a focus on embedding recovery from initial engagement between the service and patients. By the end of 2020, all adults will have a recovery plan in place to ensure an individual focused approach is at the forefront of each persons' journey to recovery. A Recovery Development Group has been established, this Group will be responsible for furthering the work plan and commissioning support co-ordination and the development of peer support. There has been in a delay in tendering due to responding to COVID19.</p>
<p>Next Steps</p>	<p>Progress on some of the key deliverables has been slower than hoped but steps are now in place to pick up the pace of change and continue towards achieving the key deliverables within agreed timescales. Regular implementation plan progress updates will continue to be discussed at Strategic planning Group (SPG). The template for monitoring implementation has been amended to focus more on progress since the last update and now includes planned next steps, this will support continuation of driving forward transformational change in support of the HSCP Strategic Plan and Big Action 5.</p> <p>The areas where particular focus is required are :</p> <ul style="list-style-type: none"> • develop additional support to families with caring responsibilities for those with alcohol and drug problems through third sector • continue working with the recovery lead and 3rd Sector partners to further develop the integrated alcohol and drug recovery service • evaluation of the CORRA project and continue to develop further the shared care model within primary care and other community based interventions • continue to develop a pathway for those with long term conditions (COPD) including supported use of technology, with the aim of reducing unplanned hospital admissions relating to COPD • during 2020, we will continue to develop a seven (7) day service to support people with alcohol and drugs problems

	<ul style="list-style-type: none"> Implement the Alcohol & Drugs Recovery Service Review once NHS policies allow restructuring.
Issues / Risks	Whilst some key deliverables are progressing due to COVID19 this has impacted more on implementing the review of the Alcohol and Drugs services. The tendering process for recovery and family support were delayed are now being progressed.
Highlights	Stories

BIG ACTION 6: WE WILL BUILD ON THE STRENGTH OF OUR PEOPLE AND OUR COMMUNITY		RAG STATUS 
Objective	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	
Progress Achieved	<p>Progress towards achieving the outcomes for Big Action 6 has been steady during the first year. There are a number of key deliverables identified for completion in the first year of the HSCP Strategic Plan.</p> <p>Building up Capacity in the Community (BA6.1) A nurturing Inverclyde has been key to our HSCP success, whether that is our staff, carers or communities.</p> <p>Inverclyde Cares Programme Board has been constituted and Terms of Reference have been drafted for review and agreement by the Programme Board at its first meeting to take place mid-June 2020. The Board will be chaired by Louise Long, HSCP Chief Officer and Corporate Director and Vice Chaired by Charlene Elliott, CVS Inverclyde Chief Executive and Sponsor of Big Action 6 of the HSCP Strategic Plan. The programme board will meet fortnightly to guide, develop and implement plans to achieve our ambition of Improving Lives through a vision to ensure that “Inverclyde is a caring, compassionate community working together to address inequalities and assist everyone to live active, healthy and fulfilling lives”. The group is responsible for developing a proposed framework which will be share with the Strategic Planning Group (SPG) prior to implementation. The proposed framework will include policy intentions and connections and incorporate Autism Friendly, Dementia Friendly, Compassionate Inverclyde, and Recovery Friendly Inverclyde and Carer Friendly.</p> <p>Inverclyde Cares is a social movement and Inverclyde’s response to the Covid-19 pandemic embodies all 3 of the guiding principles of engaging communities, connecting people and built on neighbourliness and kindness.</p> <p>Compassionate Inverclyde continues to develop supporting people in the community and those in hospital who are at end of life, or those who are isolated and lonely. In recognition of their support to Compassionate Inverclyde, Inverclyde HSCP and Ardgowan Hospice were finalists for the Colin Mair Award for Policy in Practice, and at the awards ceremony in December 2019, won the coveted award. A steering group is being established to develop an accreditation scheme for Compassionate Inverclyde.</p>	

	<p>We stated that in 2019, we would evaluate our approach to Community Champions and consider extending this to all communities across Inverclyde. Community Champions are volunteers who engage with people in their community, raise awareness of support available to them within their communities, and signpost people to access opportunities to suit their needs. Community Connector Community Champions already work across Inverclyde with a particular focus on isolation and those living with health issues. Community Champions will continue to be developed and extended. Big Action 1 includes a full update on Community Connectors and Social Prescribing.</p> <p>We stated that throughout 2019, we would build on the work of Proud2Care to develop and embed principles of co-production into all service planning, review, redesign and development. Co-production is very much at the heart of the joint Alliance and HSCP Communications and Engagement Strategy, once approved we will ensure the foundations and principles of Proud2Care are embedded into all our service planning and development practice.</p> <p>Community Strengths (BA6.10)</p> <p>By Spring 2019, we aimed to have scoped all community assets across Inverclyde. Locality profiles have been developed for the six Locality Planning Groups (LPGs) which were approved by the Strategic Planning Group (SPG) in November 2019, these were developed in line with the Strategic needs Assessment (SNA) and includes community assets for each locality. Locality Action Plans were approved prior to COVID19.</p> <p>Work has been progressing to build the new Greenock Health and Care Centre which will create a modern, state of the art community asset. Completion was due in Autumn 2020 however due to the impact of Covid- 19 with most building work ceased to comply with Government advice, it is anticipated the opening date will be pushed back.</p> <p>The HSCP, in partnership with the Alliance, carried out a series of locality planning community engagement events in August / September 2019. Over 750 people attended the six events. A feedback report was approved by the Inequalities Strategic Implementation Group in September 2019 which highlights key themes following discussion with local people. These themes are now the focus of the locality Communications and Engagement Groups who will be responsible for developing and implementing a robust, comprehensive involvement, engagement and where necessary formal consultation framework in support of their Locality Planning Group (LPG), and this will include further engagement within their own communities.</p>
<p>Next Steps</p>	<p>Progress on some of the key deliverables has been slower than hoped but steps are now in place to pick up the pace of change and continue towards achieving the key deliverables within agreed timescales. Regular implementation plan progress updates will continue to be discussed at Strategic planning Group (SPG). The template for monitoring implementation has been amended to focus more on progress since the last update and now includes planned next steps, this will support continuation of driving forward transformational change in support of the HSCP Strategic Plan</p>

	<p>and Big Action 6.</p> <p>The areas where particular focus is required are :</p> <ul style="list-style-type: none"> • Inverclyde Cares Working Group to developing a proposed framework for approval by the HSCP Strategic Planning Group (SPG) and thereafter implementation • continue to implement Inverclyde's Carer and Young Carer Strategy 2017 - 2022 • carry out an evaluation of current models of peer support to address stigma • work will continue to ensure we develop models of care for local people and choice for end of life • completion of the HSCP People Plan and approval by Strategic Planning Group (SPG) • we will continue to develop promotional material to support recruitment and training • progress further development of the SVQ Centre
Issues / Risks	<p>Whilst some key deliverables have been more significantly impacted by COVID19 the locality groups will need to be reinstated which will take time.</p>
Highlights	

Colin Mair Award for Policy in Practice Inverclyde HSCP
and Ardgowan Hospice for support to Compassionate
Inverclyde
Inverclyde HSCP and Ardgowan Hospice



HSCP and Ardgowan hospice fund and support Compassionate Inverclyde a social movement that is helping to transform attitudes and everyday practices around loneliness, social isolation, death and bereavement across Inverclyde. The ethos about local people working alongside existing formal services enabling ordinary people to do ordinary things, tapping into our desire to be kind, helpful and neighbourly.

APPENDIX 1

HSCP Strategic Plan 2019 – 2024

6 Big Actions Corporate Sponsors

Big Action	Description	Corporate Sponsor
1	Reducing Inequalities By Building Stronger Communities & Improving Physical & Mental Health	Lesley Aird Chief Finance Officer
2	A Nurturing Inverclyde Will Give Our Children & Young People The Best Start In Life	Sharon McAlees Head of Children & Families & Criminal Justice / Chief Social Work Officer
3	Together We Will Protect Our Population	Sharon McAlees Head of Children & Families & Criminal Justice Allen Stevenson Head of Health & Community Care
4	We Will Support More People To Fulfil Their Right To Live At Home Or Within A Homely Setting & Promote Independent Living	Allen Stevenson Head of Health & Community Care
5	Together We Will Reduce The Use Of & Harm From Alcohol, Tobacco & Drugs	TBC Head of Mental Health, Addictions & Homelessness
6	We Will Build On The Strengths Of Our People & Our Community	Charlene Elliot Chief Executive, Inverclyde CVS