
Report To:	Inverclyde Integration Joint Board	Date:	18 November 2024
Report By:	Kate Rocks Chief Officer Inverclyde Health & Social Care Partnership	Report No:	IJB/48/2024/KR
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Subject:	Chief Officer's Report		

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 on service developments which are not subject to the IJB's agenda of 18th November 2024.

2.0 RECOMMENDATIONS

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

- Delayed Discharge
- Unscheduled Care Home First Design & Delivery Plan 24-27 update
- Mental Health Public Engagement Sessions
- Inverclyde Recovery Month 2024
- Children & Families: Mind of My Own
- TEC Smart Pad Innovation

Kate Rocks
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3.0 BACKGROUND AND CONTEXT

3.1 The IJB is asked to note the HSCP service updates and that future papers may be brought forward to the IJB as substantive agenda items.

4.0 BUSINESS ITEMS

4.1 Delayed Discharge

Inverclyde HSCP continues to demonstrate sustained improvement in reducing the number of individuals becoming delayed in hospital and the number of bed days lost. Over the last month our delayed discharges range from 6 days to 11 days, averaging 7 days, and within this 50% of the delays constitute adults with incapacity processes. As we move towards another challenging winter, we strive to continue to prevent people becoming unnecessarily delayed in hospital.

An exciting development is the test of change we will be conducting throughout winter trialling a new approach to Assessment, Discharge to Assess. This approach will focus on a multi-disciplinary assessment and support starting in hospital, continuing to a local care home and will promote most individuals returning home when ready to do so. This flexible approach to assessment will benefit those with the most complex needs and circumstances. An update on this test of change will be provided in spring.

4.2 Unscheduled Care Home First Design & Delivery Plan 24-27 update

The Unscheduled Care Design and Delivery plan for 2024-2027 will build on the significant progress made and is aligned with the Board's "Moving Forward Together" clinical strategy programme and our Strategic Partnership Plan and Strategic Priorities, Inverclyde HSCP is committed to the three key themes of the unscheduled care delivery plan;

- **Prevention and early intervention with the aim of better support people receive the care and treatment they need at or close to home and to avoid hospital admission where possible.**
- **Improving the primary and secondary care interface by providing GPs with better access to clinical advice and designing integrated patient pathways for specific conditions.**
- **Improving hospital discharge and better supporting people to transfer from acute care to appropriate support in the community.**

Our strategic partnership plan sets out that we need to address the drivers of demand and invest well in our services i.e. education programmes/roadshows to have a shared understanding of the services in the HSCP and third sector, for the benefit of this group that would be working in partnership with our 3rd sector to better help people understand the definition of unscheduled care and what it is and isn't suitable for.

We identified in the partnership plan the need to widen the role that the third, community and independent sectors play in a system wide approach to bring them proactively around the table to discuss and address upstream drivers, we need to understand why people are accessing unscheduled care and develop that shared understanding of what successfully supporting them further upstream looks like and reduce the need and demand for unscheduled care.

4.3 Mental Health Public Engagement Sessions

We have recently held both face-to-face and online sessions to invite people across Inverclyde to have their say on how future mental health services are delivered.

We have also planned specific mental health staff engagement sessions to ensure our staff also have the opportunity to contribute their views.

This is the second phase of public engagement on the NHS GGC refreshed Mental Health Strategy. It follows a survey earlier this year which found people want to see an increase in community-based mental health services and resources, and more support for people to self-manage their conditions.

As part of its refreshed Mental Health Strategy for 2023-28, NHS GGC is looking at how it can deliver this, and how it currently provides inpatient mental health services. Feedback gathered during this engagement phase will be used to help plan services for patients and carers, and to improve the way these are delivered.

Shifting the balance of care towards a community-based model will allow services to be delivered earlier and reduce the need for inpatient care. It will help us to better meet the needs of patients by allowing us to support them and provide care closer to home, while also being more cost-effective.

4.4 Inverclyde Recovery Month 2024

To celebrate recovery month Inverclyde Alcohol and Drug Partnership (ADP) partners hosted a number of events to recognise the importance of supports and the power of recovery. This year's recovery theme is 'Together we can', highlighting the power of our community when we all stand together. Below is a brief overview of this year's recovery events which all partners have contributed to and attended;

- Hope in the Square
- International Overdose Awareness Day
- Candlelit Vigil Sunday
- Stories of Hope - every Monday throughout September
- Recovery Walk Scotland
- Jericho Football Match
- Recovery Gala Games Day
- Recovery Art's Day
- Lighting up Purple

4.5 Children & Families: Mind of My Own

HSCP children and families teams have been continuing work to offer our children and young people a digital platform to share their voice and views, using the 'Mind of my Own' app, in line with The Promise.

Feedback from a social worker included how the app is a useful, interactive way to get the views of younger children during child protection investigations. Young people have fed back that they can navigate the app to find topics they want to answer. The views of children and young people are then emailed directly to their social worker, as a positive example of technology supporting engagement and relationship-building.

Inverclyde was nominated as one of the most Improved Organisations for Mind of My Own. This reflected increased use by our children and our workforce. In addition, our iPromise Lead, won an award for going that extra mile in supporting the Mind of My Own app, including updating the language used to reflect language used in Scotland which reflects the ambition of the Promise and the revised national child protection guidance.

We continue to promote Mind of My Own in Inverclyde, including training the additional support needs team to ensure we hear from children and young people with disabilities and complex needs, as well as to the New to Scotland team.

4.6 TEC Smart Pad Innovation

The Technology Enabled Care (TEC) Smart Pad is an innovative initiative that launched on September 23, 2024, at Hillend House, Greenock. This facility serves as a dynamic showcase for the latest advancements in telecare and consumer technologies, providing a hands-on demonstration of how these tools can enhance health outcomes and care delivery. The TEC Smart Pad aims to bridge the gap between technology and practical application, allowing stakeholders to experience the benefits of TEC devices in a real-life, home-like setting.

Telecare and consumer technologies can enhance Care at Home packages and support planning for an individual by enabling remote monitoring, and immediate response to emergencies, reducing the need for in-person support. Devices like fall detectors, medication reminders and wearable health trackers provide continuous care, empowering individuals to manage their health independently. By promoting early intervention and supporting self-management, these technologies can reduce hospital admissions and ease the demand on care services.

Key Points:

1. **Hands-On Demonstration:**
 - The TEC Smart Pad offers visitors the opportunity to interact with TEC devices directly, facilitating a deeper understanding of their functionality and user interface.
 - This real-life experience is crucial for stakeholders and colleagues, as it conveys information that is often challenging to communicate through traditional brochures or presentations.
2. **Enhanced Understanding:**
 - By engaging with the technology in a simulated home environment, visitors can observe how TEC devices integrate into daily care routines.
 - This immersive experience helps to clarify the practical benefits of the technology for service users, showcasing its ease of use and reliability.
3. **Building Confidence:**
 - The TEC Smart Pad serves as a platform to build confidence among stakeholders regarding the effectiveness of the tools being implemented.
 - Demonstrating the technology in action reinforces its value and reliability, encouraging broader acceptance and integration into care practices.
4. **Support and Guidance:**
 - A dedicated TEC team member will be present during visits to provide support, answer questions, and guide visitors through the various technologies on display.
 - This personalised interaction enhances the learning experience and provides collaboration among participants.

Future Consideration for Development:

As we look to the future of Technology Enabled Care (TEC), it is essential to consider the deeper embedding of Sensor Based Care Assessment within our service offerings. The integration of a temporary 'plug & go' Sensor Based Monitoring System can significantly enhance our ability to provide personalised and effective care solutions. This system, comprising activity, movement, and door sensors connected to a central hub, will allow for real-time monitoring of individuals in their home environments.

The data collected from this monitoring system will be invaluable in generating detailed activity charts that reflect a person's day-to-day capabilities. By analysing this data, practitioners can make informed decisions regarding the level of support required, thereby improving person-centered

care. This approach not only maximises safety and independence for individuals but also respects their choices, allowing them to maintain control over their care.

Moreover, the implementation of Sensor Based Care Assessment will facilitate objective, evidence-based social care assessments for adults. This capability is crucial in addressing the increasing demand for social care services, as it enables practitioners to assess needs accurately

and efficiently. By empowering individuals to live independently for as long as possible, we can alleviate pressure on social care resources while aligning with the Health and Social Care Partnership's (HSCP) strategic objectives. These objectives focus on enabling individuals to stay well, safe, and independent at home, ensuring they receive the right care in the right place at the right time.

In conclusion, the development of Sensor Based Care Assessment represents a significant opportunity to enhance the TEC framework, driving innovation in care delivery and improving outcomes for individuals within

our community. As we move forward, it is imperative to prioritise this initiative to fully realise the potential of technology in supporting independent living and effective care management.

The TEC Smart Pad represents a significant step forward in the adoption of technology within health and social care. By providing a hands-on, immersive experience, it allows stakeholders to fully appreciate the capabilities and benefits of TEC devices. This initiative not only enhances understanding and confidence in the technology but also promotes its integration into everyday care practices.

5.0 IMPLICATIONS

5.1 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

5.2 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					

5.3 Legal/Risk

There are no legal implications within this report.

5.4 Human Resources

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

5.5 Strategic Plan Priorities

5.6 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?

Equalities Outcome	Implications
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.

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.	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.

5.9 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.

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.

5.10 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.

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.