

Report To: Health & Social Care Committee **Date:** 23 February 2017

Report By: Brian Moore, Corporate Director, (Chief Officer), Inverclyde Health and Social Care Partnership **Report No:** SW/20/2017/HW

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Subject: Health and Social Care Partnership Corporate Directorate Improvement Plan Performance Report

1.0 PURPOSE

- 1.1 The purpose of this report is to update the Health & Social Care Committee on the progress on achievement of key objectives in the Health and Social Care Partnership Corporate Directorate Improvement Plan (CDIP) 2016/19.
- 1.2 The report focuses on improvement actions that sit within Health and Social Care Partnership Services.

2.0 SUMMARY

- 2.1 This report advises of progress on the Health and Social Care Partnership CDIP.
- 2.2 The current status of the CDIP improvement actions is

Status	blue - complete	red - significant slippage	amber - slight slippage	green - on track
December 2016	2	0	2	27

3.0 RECOMMENDATIONS

- 3.1 It is recommended that Health & Social Care Committee notes the progress made in implementing the Health and Social Care Partnership CDIP 2016/19; noting that our main plan, as required by the Public Bodies (Joint Working) (Scotland) Act 2014, is our HSCP Strategic Plan. This can be accessed at www.inverclyde.gov.uk/health-and-social-care/health-and-social-care-partnership-strategic-plan

Brian Moore
Corporate Director (Chief Officer), Health and Social Care Partnership

4.0 BACKGROUND

- 4.1 CDIPs are a key component of the Council's Strategic Planning and Performance Management Framework. Although the HSCP is a separate legal entity from both the Council and Health Board, it retains strong functional links with both. The HSCP has responsibility for areas of business that cut across the whole of Inverclyde Council.
- 4.2 The HSCP CDIP 2016/19 aims to distil some key development areas from the Strategic Plan, with a focus on developments that could have an impact on the wider business of the Council.
- 4.3 Improvement actions have been allocated a 'BRAG' status:
blue - complete; red - significant slippage; amber - slight slippage; green - on track.

5.0 PROGRESS

- 5.1 The updates within this report, using BRAG status, indicate overall performance thus:

Status	blue - complete	red – significant slippage	amber - slight slippage	green - on track
December 2016	2	0	2	27

- 5.2 Appendix 1 provides full details of the status of each improvement action, together with commentaries from the appropriate services.
- 5.3 Good progress has been made in delivering most of the improvement actions examples of which include:
- The resettlement of 10 Syrian and 12 Afghan families.
 - The 'New Ways' in Primary Care initiative-tests of change to help transform how primary care is set up and used by patients and
 - The new purpose-build inpatient accommodation for people with complex mental health care needs
- 5.4 There has been slight slippage with only 2 improvement actions, these being the development of a robust monitoring framework for veterans' support, and implementation of Named Person.

6.0 IMPLICATIONS

- 6.1 Financial implications - one-off costs:

Cost centre	Budget heading	Budget year	Proposed spend this report	Virement from	Other comments
n/a	n/a	n/a	n/a	n/a	n/a

Financial implications - annually recurring costs/(savings):

Cost centre	Budget heading	With effect from	Annual net impact	Virement from	Other comments
n/a	n/a	n/a	n/a	n/a	n/a

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- 6.2 Human Resources: There are no direct human resources implications arising from this report.
 - 6.3 Legal: There are no direct legal implications arising from this report.
 - 6.4 Equalities: There are no direct equalities implications arising from this report.
 - 6.5 Repopulation: Provision of Council Services which are subject to close scrutiny with the aim of delivering continuous improvement for current and potential citizens of Inverclyde support the Council's aim of retaining and enhancing the area's population.

7.0 CONSULTATION

- 7.1 Updates on progress with the CDIP's implementation have been provided by the lead officer of each improvement action.

8.0 BACKGROUND PAPERS

- 8.1 Inverclyde Health and Social Care Partnership Corporate Directorate Improvement Plan 2016/19.

9.0 CONCLUSION

- 9.1 This report shows that the new Health and Social Care Partnership is bedding in and beginning to reshape how services are commissioned and delivered.

Health & Social Care Partnership Improvement Plan

Corporate Improvement Actions 2016 – 17

Corporate Improvement Actions: Although the HSCP is a separate legal entity from both the Council and Health Board, it retains strong functional links with both. The HSCP has responsibility for areas of business that cut across the whole of Inverclyde Council.

Ref no	Where do we want to be?	How will we get there ?	BRAG Status	Commentary	SOA and National Wellbeing Outcome
CD1	Information Governance: All staff understand their responsibilities for information security; the implications of a security breach; and know what to do if they discover a security breach.	All staff will undergo mandatory information governance training and associated refresher training as required. This will be built into induction training for all new staff.	Green	Information governance training is now available on the Brightwave e-learning platform as part of the mandatory suite of induction training. Safe Information Handling is now a foundation course on Learn pro. These courses are also available as refresher courses and require that key information governance policies are accessed and read. Reports on compliance are included in quarterly service reports.	<ul style="list-style-type: none"> •SOA 8 •NWO 3, 8.
CD2	Complaints: A clear system for complaints handling is in place and is adhered to by all HSCP staff.	Staff will be appropriately trained.	Green	The integrated complaints procedure has become fully embedded. .In 2016, 120 frontline staff trained in Getting Complaints Right. In addition, 90 staff who could potentially act as investigating officers were trained	<ul style="list-style-type: none"> •SOA 8 •NWO 3, 8.
CD3	Refugees and Resettlement: We want to complete our commitment and then review the resettlement programme to identify if there is capacity or sufficient resource to offer resettlement to any other families.	Evaluation of the programme, and feedback from resettled families and their immediate communities.	Green	By the end of December 2016 we will; have completed our original commitment to resettle 10 Syrian families and 12 Afghan families. Resettlement has been successful and the Council has approved extending the original commitment of 22 families to 44 families over the next 4 years.	<ul style="list-style-type: none"> •SOA 1, 6, 8 •NWO 4, 5, 8.
CD4	Veterans: We want to have a documented account of the main supports that are needed to ensure that ex-Armed Forces personnel	The Veterans Advice and Support Officer is working with the HSCP Quality and Development Service to develop a service activity	Amber	The Corporate Management Team agreed to adopt the Defence Employer Recognition scheme in November 2016, and an application will be submitted during 2017. 12 Afghan interpreters for the British Army have been	<ul style="list-style-type: none"> •SOA 1, 4, 8 •NWO 4, 5, 8.

	can continue to resettle in Inverclyde.	monitoring framework that will provide the required information.		resettled In Inverclyde, along with their families. Full monitoring framework still to be developed.	
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Cross-HSPC Improvement Actions 2016 - 17

6.2 Cross-HSCP Improvement Actions:

Ref no	Where do we want to be?	How will we get there (including timescale)?	BRAG Status	Commentary	National Wellbeing Outcome
CD1	Housing issues: To have a clear picture of housing need for now and into the future. The HSCP locus is, with regard to housing needs related to homelessness or particular needs around support or access.	There will be a clear Housing Contribution Statement that defines the role and responsibilities of local Registered Social Landlords (RSLs) in contributing to delivery of the nine national outcomes. There will be a shared approach and policy for designating housing renewal areas and a strategy for improving housing in line with the Council's Scheme of Assistance.	Blue Green	The Housing Contribution Statement has been agreed by the IJB, and the Housing Partnership Group has been set up to oversee its implementation.	2, 4, 5.
CD2	Alcohol and Drugs: Reduced harm done to individuals, families and communities by the inappropriate or excessive use of alcohol and/or drugs.	<ul style="list-style-type: none"> Improved support to individuals, families and communities, with a stronger focus on prevention and early intervention. A positive culture of responsible attitudes towards the use of alcohol and drugs will be fostered. 	Green Green	<p>Drug and Alcohol services continue to develop enhanced services for those who require treatment and support in recovery.</p> <p>Our services continue to develop early intervention in acute and primary care and offer comprehensive alcohol education to all schoolchildren in Inverclyde</p>	1, 4, 5, 7.
CD3	Commissioning: A clear view of what we need to commission and de-commission to enable the HSCP to deliver the National Wellbeing Outcomes, based on our Strategic Needs Assessment, which is a companion document to the HSCP Strategic Plan 2016-19.	Develop a Market Facilitation Statement by March 2017	Green	The Market Facilitation Statement has been drafted and presented to the Strategic Planning Group at its October 2016 meeting. A finalised version will be taken to the IJB for approval by the March 2017 deadline.	4,5,7,9
CD4	Property Assets Management Plan: A plan for the future that allows services to have appropriate presence in each of the three Inverclyde wellbeing localities, but	Complete the current scoping work then use it to develop our Property Assets Management Plan, by March 2017.	Green	Agile working within the HSCP has allowed services/staff to work from a variety of buildings/places which brings the service closer to the service user and reduce Inverclyde's carbon footprint.	3,7,8,9

	without an over-reliance on buildings and premises.				
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HSCP Service Improvement Actions 2016 - 17

6.3 HSCP Improvement Actions

Ref no	Where do we want to be?	How will we get there?	BRAG Status	Commentary	National Wellbeing Outcome
01	Children & Families and Community Justice Strategy actions implemented to promote the wellbeing of children and young people who are looked after, and care leavers up to the age of 26 years.	<ul style="list-style-type: none"> Implement the Strategy actions, overseen by the Steering Group. Looked after children and care leavers voices and views will be at the heart of policy and decision-making. 	<p>Green</p> <p>Blue</p>	<p>A young person's participation group has been established "Proud2Care (which links directly to the Corporate Parenting Strategy). This will provide a means for consulting and engaging young people to influence policy & decision making.</p> <p>Young People's Advocacy workers are now in post (Who Care's, a national voluntary organisation and Barnados)</p>	1, 3, 4, 5, 7.
02	Children and young people are equipped to overcome the negative aspects of key social problems.	<p>Deliver an action plan to improve outcomes in the following key priority areas:</p> <ul style="list-style-type: none"> Children affected by parental substance misuse; Children affected by parental mental health problems; Children affected by domestic abuse; Child sexual exploitation; Participation in child protection. 	Green	There are a number of strategies in place to support families where domestic abuse is a concern. Social workers have been trained in delivery of the "Safe Lives Risk Indicator checklist" which specifically assesses risk in these circumstances. Direct work is also being undertaken with the victim and the perpetrator using a prescribed programme of work devised for Inverclyde. There has been a steady decrease in the number of referrals with the stated issue of domestic abuse. This suggests that these strategies are beginning to deliver results.	3, 4, 5, 7.
03	Improved children's wellbeing from a much earlier stage, from birth to their 18th birthday.	Implement the Named Person Service, overseen by the Steering Group. Named persons identify children's needs at an early stage, and these are addressed appropriately.	Amber	Due to Supreme Court Hearing, Scottish Government has delayed the implementation of parts 4 and 5 of the Children & Young People Act 2014 as it relates to Named Person Service and child's plan. Across Inverclyde children's services there has been a decision to continue to implement the Inverclyde GIRFEC pathway with a focus on early help and support through the assessment of wellbeing at the earliest point. EMIS (electronic record for children) health has been implemented as part of this programme to provide an electronic tool for health visitors to support early	3, 4, 5, 9.

				assessment of wellbeing at universal level.	
04	We will have a plan in place that will support prevention of offending and reduce re-offending.	The new model of Community Justice will be developed under the auspices of the steering group and will be effective from 1st April 2017.	Green	The Community Justice Implementation plan is out for consultation with a closing date of 6 th January 2017	3, 5, 9.
05	MAPPA arrangements extended to Category 3 Offenders.	Category 3 offenders will have a co-ordinated approach to their supervision in the community.	Green	Multi-agency arrangements are in place to manage Category 3 offenders in the community, which are supported by NSCJA MAPPA Unit, hosted by Inverclyde HSCP. These arrangements were effective from 1.4.16 and are targeted at a critical few high risk offenders.	6, 9.
06	Mental Health, Addictions and Homelessness (MHAH) The existing inpatient facility will be closed, to be replaced by a new-build facility The old Ravenscraig Hospital site will close completely.	New build will proceed in May 2016, and conclude early in 2017.	Green	Work commenced on schedule. Build due for completion in May 2017 with a 6 week lead- in period and patients transferring August 2017.	3, 4.
07	The Dementia Strategy aims to create a better understanding and awareness of dementia in Inverclyde.	<ul style="list-style-type: none"> •There will be better respect and promotion of rights in all settings. •Communities will be more dementia-aware and dementia-friendly. •Stigma will be reduced. 	Green	Extensive co-produced learning and development, communication and community development programmes delivered in achieving this aim across Inverclyde. Community learning and development programmes have effectively complemented integrated staff training programmes at various levels in line with national learning programmes. A wide range of learners have made specific pledges to reducing stigma by actively promoting and working towards a dementia friendly Inverclyde.	1, 2, 3, 4, 5, 6, 7.
08	Health and Community Care To have a clear picture of the full range of supports that older people are likely to need, and how these should be commissioned and organised in light of projected future need.	Support to individuals, families and communities will be improved, with a stronger focus on prevention and early intervention. Access to services will be organised in a way that is responsive to how older people and their carers would like to use them.	Green	As part of a local partnership between the HSCP and the third sector Your Voice is hosting a community connector service on a pilot 12 month basis. Community Connectors will: <ul style="list-style-type: none"> • Meet and assist people to increase social Interaction • Connect people to local community services, support and activities of their choice. 	2,3,4,5

09	People with autism have improved outcomes in line with the National Wellbeing Outcomes.	<ul style="list-style-type: none"> •We will develop clearer and more co-ordinated information and advice. •There will be more support to children in mainstream schools. •Best practice and minimum standards will be developed through evaluation and learning. 	Green Green	<p>Inverclyde HSCP has an Autism strategy which is supported by the Scottish Government. The local implementation group, with all key stakeholders, meets every six weeks to promote development of services for people with Autism.</p> <p>Within Specialist Community Children’s services a redesign of the Autism pathway within the disability pathway will improve access and streamline service provision. The implementation of the service specification and guidance will improve equity and access.</p> <p>Support for children in schools is established and requested via the Additional support Needs forum. This is across all establishments nursery, primary and secondary with good links to health. This will be reviewed via the newly established Transitions and ASN sub group.</p> <p>The Post diagnosis clinics have been trialled on south Glasgow and rolled out in Inverclyde since September 2016.</p>	2, 4, 5, 6.
10	Complete the local review focusing on improved outcomes rather than service outputs.	<p>The 52 recommendations of the national report have been grouped into four broad headings, to support an outcomes focus:</p> <ul style="list-style-type: none"> •My health •Where I live •My community •My safety and relationships 	Green	<p>Overseen by the learning disability strategic implementation group, a draft strategy and implementation plan is being taken forward to review all LD services (day opportunities and supported living services). Engagement with service users, carers and third sector organisations is a key element in this process.</p>	2, 3, 4, 5, 6.
11	<p>“New Ways” in Primary Care</p> <p>Agree a small suite of tests of change, to help transform how primary care is set up and used by patients.</p>	<p>The work will consider the full range of expertise in primary care, to ensure that professionals are enabled to work to their full potential, i.e. patients do not always need to see a GP – there will be times when another professional will be more appropriate.</p>	Green	<p>Current tests of change are beginning to consider new ideas related to Home Visits, the roles of nurses and allied health professionals taking on extended roles in support of GPs, a community phlebotomy service and work to look at direct access to physiotherapists in GP surgeries allowing patients to see a physiotherapist instead of a GP if this is more appropriate.</p> <p>Process also begun to support GPs to work in Clusters with participation in a national Collaborative Leadership Initiative</p>	1, 2, 5, 8, 9.

12	<p>Planning, Health Improvement and Commissioning Develop a clear overview of the skills and leaning that will be needed so that our staff are equipped to support the delivery of outcomes, rather than focusing on systems' outputs and the previous associated targets.</p>	<p>Targets culture will be replaced by an outcomes-focused culture. Carers and third sector providers will have access to our staff training and development programmes, recognising that they are equal partners in care.</p>	Green	<p>Adopting an inclusive approach to 'workforce planning.' with a multi- agency People Planning Working Group established. Stakeholder Engagement event held on 21st November 2016 to assist in scoping out needs/direction of travel moving forward.</p>	4, 6, 8, 9.
13	<p>The Strategic Plan sets out our approach to commissioning for outcomes, and the five strategic commissioning themes that will guide our future commissioning. We aim to embed the required shift in staff and managers' thinking, away from systems outputs and targets, towards what actually makes a difference in the lives of the people who need our services.</p>	<p>Staff will be trained and supported to think in terms of outcomes, and develop ways to evidence this beyond the nine national outcomes and their 23 associated indicators. The range of services and support available from the HSCP will change, in line with what is needed to deliver the outcomes that service users and carers tell us are most important to them.</p>	Green	<p>Outcomes focussed training is being delivered by Quality & Learning section A review of the Strategic Plan is being undertaken with supportive development sessions for SPG members.</p>	1, 2, 3, 4, 5, 8, 9.
14	<p>'Making Wellbeing Matter' - the Inverclyde Mental Health Improvement Strategy All our staff should recognise that early mental health intervention can make a real difference in outcomes, such as keeping people in work, or reducing the need for more complex care if mental illness worsens.</p>	<ul style="list-style-type: none"> •Mentally healthy environments will be created. •Stigma and discrimination will be tackled. •The health inequalities gap will be reduced. 	Green	<p>This Strategy is due for renewal which will be done within the wider umbrella of recovery, anti-stigma, and with a human rights approach.</p>	3, 4, 5.
15	<p>The Active Living Strategy aims to put in place supports to make the Inverclyde population the most active population in Scotland by 2022.</p>	<p>Inverclyde employers will have programmes in place to support an active workforce. All Inverclyde residents and visitors will have opportunities to access green space.</p>	Green	<p>The Active Living Strategy group continues to meet and is currently reviewing the outcomes initially set.</p>	1, 4, 5.

Capital Projects 2016-17

6.3 Capital Projects

Ref no	Where do we want to be?	How will we get there?	BRAG Status	Commentary	National Wellbeing Outcome
01	MHAH Current inpatient accommodation is of poor quality and in need of replacement .New, purpose-build inpatient accommodation is required for people with complex mental health care needs.	Agreement for new-build has been secured and building is due to commence in May 2016, with an anticipated occupation date of August 2017.	Green	Work commenced on schedule. Build due for completion in May 2017 with a 6 week lead -in period and patients transferring August 2017.	3, 7, 8.
02	Current Greenock Health Centre is no longer fit for purpose in terms of size; layout and fabric of the building. New, purpose-built Health & Care Centre is required.	Initial Agreement approved by SG (March 2016). OBC due by October 2016; FBC 2017; Financial Close December 2017; construction begins March 2018; Completion July 2019.	Green	OBC due February 2017.FBC November 2017. Completion November 2019. Design options discussed and approved with stakeholders.	3, 7, 8.
03	Two Children's Units are no longer fit for purpose. New, purpose-built Children's Units are required.	Replacement approved April 2014; design phase commenced March 2015; completion due March 2017.	Green	Work has commenced on the replacement build for Neil St Children's Unit. The build is to the same specification as Kylemore Children's Unit and is scheduled to open June 2017. That will be followed by Crosshill Children's Unit decanting to Neil St whilst Crosshill is demolished and rebuilt at the original site with completion due summer 2018.	3, 5, 7

Corporate Governance Improvement Actions 2016-17

6.4 Governance Improvement Actions

Ref no	Where do we want to be?	How will we get there (including timescale)?	BRAG Status	Commentary	National Wellbeing Outcome
01	<p>Governance and Accountability Full clarity amongst all partners (IJB/ Council/ Health Board) as to their inter-relationships, authority and accountabilities.</p>	<p>Board Seminars and IJB Development Seminars focused on accountability and governance.</p> <p>However we still need to clarify roles and responsibilities around saving issues and the respective roles of council versus IJB.</p>	Green	Scheduled sessions have taken place throughout 2016. A new plan has been scoped out for 2017	4, 8