Scottish Borders Health & Social Care Partnership

Changing Health & Social Care for You

Working with communities in the Scottish Borders for the best possible health and wellbeing

Draft Revised Strategic Plan 2018 – 2021

Scottish Borders Health & Social Care Partnership
Strategic Plan 2018-2021

Contents

Foreword 3

Executive Summary 4

Local Strategic Objectives 5

Key Priorities 9

Case for Change: Why we need to change 10

Key Challenges 11

Commissioning 12

Partnership Spending 16

Appendix 1: National Health and Wellbeing Outcomes

Appendix 2: Services that are Integrated

Appendix 3: Implementation Plan

Appendix 4: Housing Contribution Statement 2018-2021

Appendix 5: Equalities

Appendix 6: The Scottish Borders – Profile and Key Challenges

Appendix 7: Partnership Governance - Summary of Role and Function

Appendix 8: Health & Social Care Spending

Foreword

Whilst we should celebrate the fact that we are all living longer, we know we will all be putting more pressure on the services that look after us and our families.

Here in the Borders our over 65yr old population is due to increase by 47% in the next 14 years, and 121% for our over 85 year olds, hugely increasing demand on our health and social care services. We need to change the way in which we operate our services and help our citizens to help keep themselves in good health.

I am delighted to introduce this revision to our existing strategic plan. We have sought to offer a vision of a future where our health and social care services will be working in a new partnership with our communities and residents.

Joining NHS services with Council and third sector providers will eliminate duplication and support much more efficient use of resources for which demand is increasing. There is a great deal such a closer partnership can provide.

The bigger prize however is in the partnership between services and our citizens. We have a responsibility for ourselves, our children and our neighbours. To help create a healthier population, we all need to engage in improving health outcomes for our communities as well as ourselves. We can achieve this through good diet, exercise, early diagnosis and swift access to services all increases our likelihood of living longer and living well.

The Scottish Borders offers great opportunities for involvement in the widest ranges of activities which directly improve our health and the quality of our lives. This plan seeks to help everyone to gain access to these resources and in so doing reduce the strain on our services from an ageing population.

Type 2 Diabetes can be prevented through a healthy lifestyle. At present over 10% of NHS resource is spent on treating the symptoms that equates to more than £20,000,000 just here in the Borders. There is a great deal we can all do as individual citizens, to improve our own health outcomes. Working together and in partnership with our services, citizens can create a whole new health economy and promote healthier outcomes for the whole of the Border's population.

I look forward to joining with you in our challenge to create the Healthiest Region in Scotland.

Robert McCulloch-Graham
Chief Officer, Health and Social Care Integration
May 2018

Executive Summary

Working with communities in the Scottish Borders for the best possible health and wellbeing

The Scottish Borders Health and Social Care Partnership first published its Strategic Plan in April 2016 following extensive consultation with people and communities across the geographical area to identify key priorities for health and social care in the Borders.

Following consultation nine local objectives were identified which reflected the health and social care priorities of the population in the Borders as well as supporting the delivery of the nine national health and well-being outcomes (Appendix 1).

Since then work has been underway to transform and target those health and social care services delegated to the Integration Joint Board (Appendix 2) to deliver on the local objectives within the context of a growing demand for services and increasing financial constraints.

Following the publication of the five Health and Social Care Locality Plans in April 2018 it was identified that the Scottish Borders Health and Social Care Strategic Plan would benefit from a refresh to ensure that the strategic objectives were fit for purpose and continued to reflect the priorities of the population and communities of the Scottish Borders.

This refreshed Strategic Plan outlines three refocused local strategic objectives and the key challenges on delivering these. The strategy also presents a high level summary of the continued case for transforming the way in which health and social care services are delivered in the Scottish Borders before outlining a plan for the resource and delivery of the strategic objectives (Appendix 3).

The Local Housing Strategy and The Housing Contribution Statement (Appendix 4) sets out the significant role of housing partners across the Borders in supporting the delivery of the Strategic Plan priorities.

Local Strategic Objectives

This document describes some of the actions we will take to start to make the shift towards more community-based NHS and social care services, the outcomes we will seek to achieve and the steps we will take to deliver our local objectives. We will describe some of the performance measures we will use to assess the progress we are making.

We have identified 3 Strategic Objectives:

- We will improve the health of the population and reduce the number of hospital admissions;
- We will improve the flow of patients into, through and out of hospital;
- We will improve the capacity within the community for people who have been in receipt of health and social care services to better manage their own conditions and support those who care for them.

These three high level strategic objectives are underpinned by the following seven Partnership Principles which feed into and inform the local objectives:

1. Prevention & early intervention
2. Accessible services
3. Care close to home
4. Delivery of services with an integrated care model
5. Greater choice & control
6. Optimise efficiency & effectiveness
7. Reduce health inequalities

The Partnership's local strategic objectives are shown in detail below and the information is not exhaustive. They are also aligned and contribute to the delivery of the nine National Health and Wellbeing Outcomes listed in Appendix 1.

Details of the Partnership's duties under the Equality Act 2010 can be seen in Appendix 5.

This high-level Plan will be supported by the implementation of Strategies related to specific themes such as Dementia, Mental Health, Carers and Locality Plans that reflect differing patterns of need across the Scottish Borders. The full Implementation Plan ("Plan and "Do" components of the Commissioning Cycle) is shown as Appendix 3.

OBJECTIVE 1: We will improve health of the population and reduce the number of hospital admissions

How?
• By supporting individuals to improve their health • By improving the range and quality of community based services and reducing demand for hospital care • Ensuring appropriate supply of good quality and suitable housing

We are committed to	Your part
• Helping older people manage their own health better, improve fitness and reducing social isolation • Supporting positive changes in health behaviour and lifestyle, such as smoking, diet, alcohol consumption and physical activity. • Adopting preventative and early intervention approaches where possible • Ensuring staff and carers have the necessary knowledge, skills and equipment to provide care at home. • Through patient education, encouraging the appropriate use of services and promote personal responsibility through public information and signposting. (Patient Education) • Continue to promote uptake of screening opportunities and immunisation programmes and raise awareness of signs and symptoms of health conditions • Implementing the Integrated Strategic Plan for Older People's Housing, Care and Support 2018-28	✓ Find out about health improvement programmes and initiatives in your area ✓ Use our Lifestyle Advisory Support Service ✓ Use our What Matters Hubs ✓ Comment on our draft Physical Disability Strategy ✓ Consider whether or not simple equipment could help a family member remain at home. Find out how to purchase or hire equipment. ✓ Get a copy of our Pocket Guide ✓ When offered ensure you take up Screening opportunities

What will success look like?

More adults say that they can look after their health very well or quite well	We see a reduced premature mortality rate per 100,000	We will see more projects that are funded through the integrated care fund evaluate positively and become mainstreamed
Less people are admitted to hospital as an emergency	Less people attend A&E	We spend more of our resources in the community (as opposed to on hospital stays)

OBJECTIVE 2: We will improve the flow of patients into, through and out of hospital

How?
• By reducing the time that people are delayed in hospital • By improving care/patient pathways to ensure a more co-ordinated, timely and person-centred experience/approach • By ensuring people have a greater choice of different housing options which meet their long-term housing, care and support needs

We are committed to	Your part
• Ensuring that people are admitted to acute services only when required and embedding the Rapid Assessment and Discharge (RAD) Team to ensure patients can return home quickly • Ensuring that those requiring hospital stays have a seamless and timely patient experience/journey • Providing short-term care and reablement to facilitate a safe and timely transition • Caring for and assessing people in the most appropriate setting • Providing an integrated approach to facilitating discharge • Review approach to housing adaptations to ensure a holistic approach is taken to meeting longer term needs of older people • Ensuring the reablement and hospital to home service development aligns with housing providers and care and repair services.	✓ Use our Pocket Guide to find out when to go to the Pharmacist, when to contact a GP and when to go to A&E ✓ Use the Voluntary Sector support that is available within your community ✓ Use our Hospital to Home service to get help and the support you need to regain your independence following a stay of hospital or a period of ill health ✓ Use the resources listed above to keep as fit, healthy and active as you can within your own community

What will success look like?

More people are seen within 4 hours at A&E	There are less unplanned admissions to hospital	More patients are satisfied with care and treatment, felt that staff understood what mattered and felt they had the information they needed to make decisions
Delayed Discharges		
Less people wait • over 72 hours • over 2 weeks	We analysed the reasons for delay to make improvements	The rate of occupied bed days (associated with delayed discharge) will reduce

OBJECTIVE 3: We will improve the capacity within the community for people who have been in receipt of health and social care services to better manage their own conditions and support those who care for them

How?

- By supporting people to manage their own conditions
- By improving access to health & social care services in local communities
- By improving support to carers
- Building extra care homes, including amenity and mixed tenure provision

We are committed to	Your part
• Piloting and evaluating the Buurtzorg Neighbourhood Care Model in Coldstream and extending it to other areas • Providing locally based Hubs which can be easily accessed by the community as the first point of contact for health and social care services • Develop integrated accessible transport • Use technology where appropriate to provide better home based health care services • Develop community based mental health care • Ensuring people have choice of control over the support they need and are supported to live independently in their own homes • Supporting carers and implementing the requirements of the Carers (Scotland) Act 2016 • Invest in social infrastructure, looking to harness the strengths of our own communities in developing capacity in care and support for family member and friends • Supporting an outcome-focussed approach across all areas • Improve access and signposting to services and information	✓ Use our What Matters Hubs as the first point of contact for health and social care services ✓ Community Transport Hub and SBC Community Transport ✓ As we develop the use of technology could you help us pilot new equipment within your own home ✓ Community Mental Health ✓ Use the Care and Repair Service provided in partnership with Eildon Housing Association to create a safer living environment ✓ Comment on our draft Physical Disability Strategy ✓ Borders Learning Disability Service ✓ Carers

What will success look like?

More people • are satisfied with the services they receive at home • have a positive experience of the care provided by their GP	More carers • feel supported • have a carers support plan	Increased proportion of care services will receive graded good (4) or better in Care Inspectorate Inspections
The rate of people readmitted to hospital within 28 days of discharge reduces	A high proportion of the last 6 months of life is spent at home or in a homely setting	The percentage of overall health and social care resource spent on community based services is maintained or increased

Key Priorities

Below are the Partnership priorities identified so far for 2018-21

- Promote healthy living and active ageing
- Improve communication and access to information
- Work with communities to develop local solutions
- Improve support for Carers within our communities
- Integrate services at a local level
- Promote support for independence and reablement so that all adults can live as independent lives as possible
- Provide alternatives to hospital care
- Improve the efficiency of the hospital experience
- Improve the use of technology enabled care

Case for Change: Why we need to change

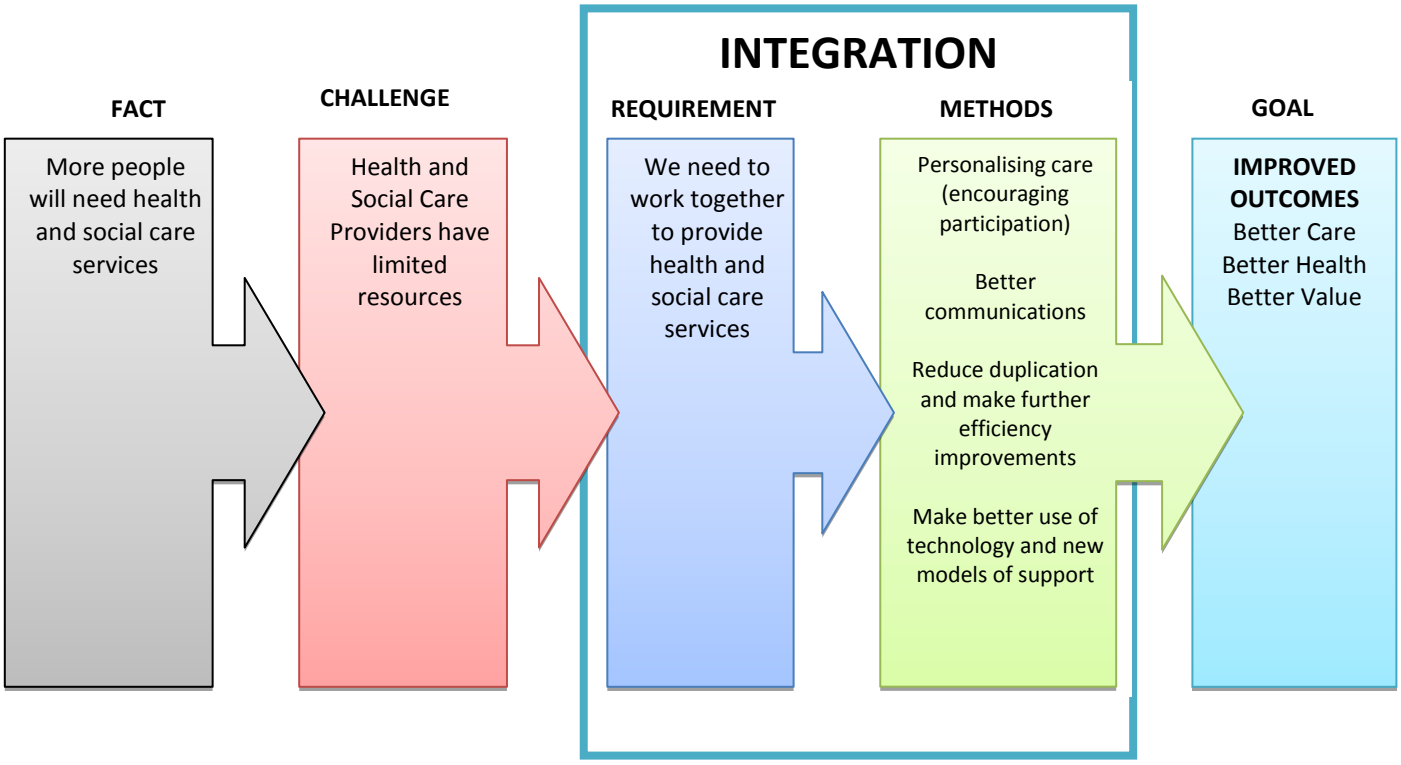
There are a number of reasons why we need to change the way health and social care services are delivered.

These are illustrated in Figure 1 below and include:

- **Increasing Demand for Services** – with a growing ageing population, more people need our health and social care services and will continue to do so.
- **Increasing Pressure on Limited Resources** – the rise in demand puts pressure on our limited resources and this is happening at a time of constraint on public sector funding and rising costs of health and social care services.
- **Improving Services and Outcomes** – service users expect – and we want to provide – a better experience and better results.

We need to make better use of the people and resources we have by working more effectively together. If we do not change we will not be able to continue the high quality services the people of the Borders expect to meet their needs.

Figure 1 – The Case for Change



Key Challenges

In order to meet the challenges we face in terms of a growing population and greater demands on health and social care services the Partnership wish to support the people of the Scottish Borders to play their own part in staying healthy and well for as long as possible. Table 1 below outlines some of the ways in which individuals can take responsibility for their own health and wellbeing and support others to do the same.

Table 1

CHALLENGES	YOUR PART
We know the number of older people in the Borders is increasing therefore we need to promote active ageing.	You could you take up more gentle exercise in your local community.
The population of the Scottish Borders is spread over a large geographical area with many people living in rural locations therefore services need to be provided locally and accessible transport arrangements put in place.	You could find out about services at a local What Matters Hub.
Housing has an important role to play in the delivery of our integrated health and social care services.	You could choose to live in a house which meets your future needs and will help you to live independently for longer.
Many older people in Scottish Borders report poor health therefore we must promote healthier lifestyles, earlier detection of disease and support to recover and manage their conditions.	You could you eat healthier food, exercise more and reduce the amount of alcohol you drink in order to improve your health.
People with a disability need flexible support arrangements to maintain and improve their quality of life.	You could volunteer to help support someone with a disability.
We need to provide a range of support for people with dementia and their Carers, with appropriate training for all involved.	You could help to raise awareness of dementia within your local community.
We need to ensure there is high quality support available for the12,500 people aged 16 and over who are providing unpaid care in the Scottish Borders.	You could offer some support to an unpaid carer.
We need to continue to listen, involve, plan and deliver services across the 5 localities.	You could attend a local area partnership and participate in discussions on issues that affect you and your family.

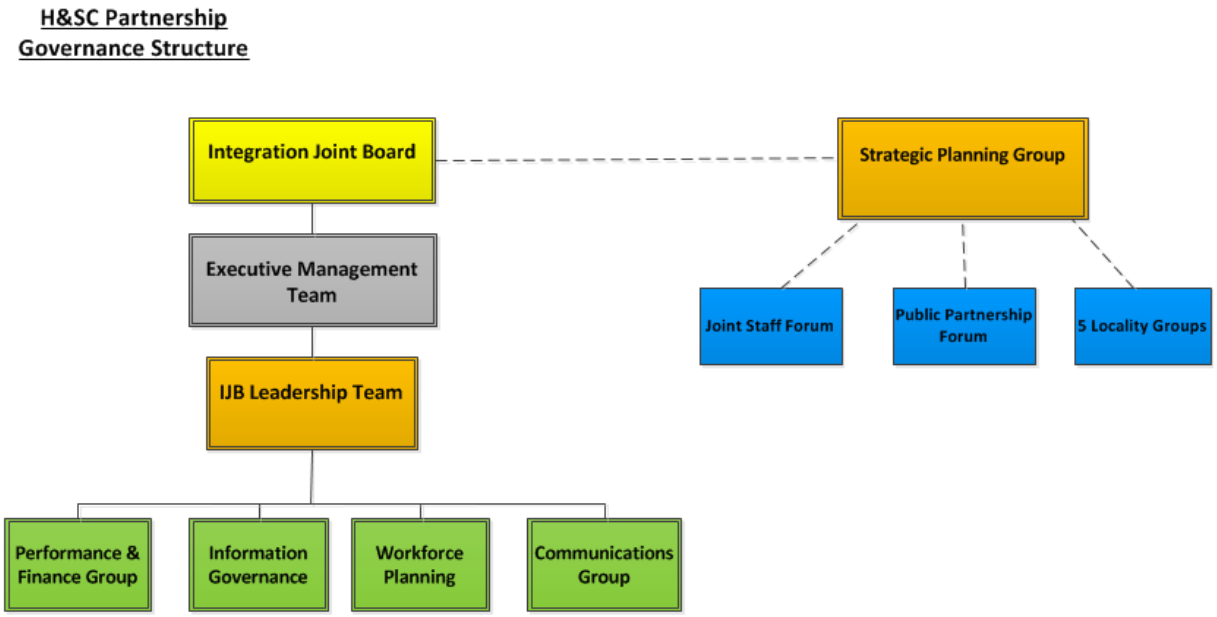
These challenges are supported by evidence related to the Scottish Borders area profile and key challenges presented in **Appendix 6.**

Commissioning

In order to successfully deliver the objectives of the Strategic Plan it is critical that required conditions for change are in place.

Leadership and Governance

Leadership and effective governance with the Integration Joint Board (IJB) and across the partner organisations is an essential factor in the successful integration of health and social care services. In the Scottish Borders the work of the IJB is informed by, and in turn informs, the strategic priorities of the two partnership bodies – Scottish Borders Council and NHS Borders.

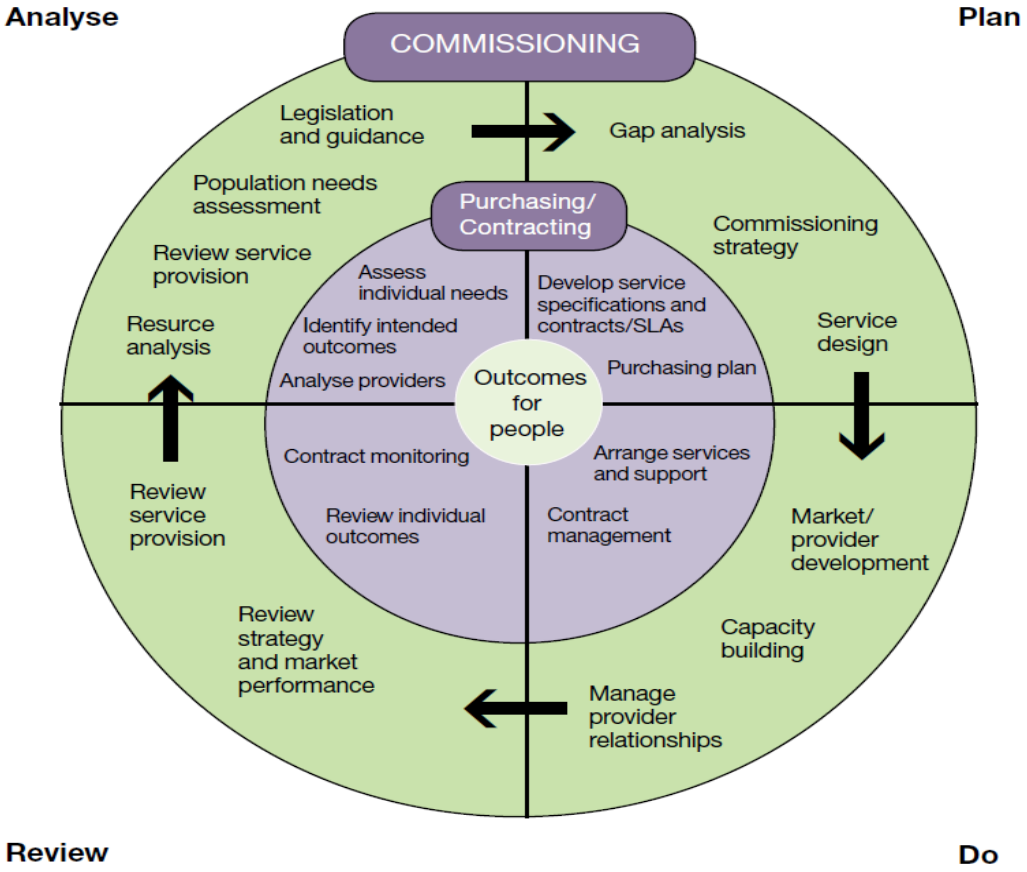


A summary of the role and function of each group can be seen in Appendix 7.

Strategic Procurement of Commissioned Services

Strategic procurement will support the delivery of commissioned services where delivery will be provided by a third party. In the Scottish Borders a clear emphasis will be placed on a number of key procurement ambitions including:

- procuring sustainbable, quality and affordable services through innovative approaches;
- engaging service users and providers in related activities and opportunities;
- building strong relationships with existing and new service providers;
- using available resources from partners and associated Centres of Expertise.



Strategic Commissioning Cycle

Locality Planning

Locality planning is a key tool in the delivery of change required to meet new and existing demands in the Borders. The IJB is required by the Scottish Government to undertake this activity through the development of locality forum arrangements, where professionals, communities and individuals can inform locality planning and redesign of services to meet local need in the best way. In the Borders we co-produced Locality Plans and established Locality Working Groups in each of the five localities.

Transformational Planning

Transformational change and a short, medium and longer term view is needed to meet the increasing pressures on health and social care services due to unprecedented and escalating demand within the context of financial constraints and legislative change. In the Borders we are delivering a Partnership Transformation Programme which outlines the transformation required across health and social care services now and in the future. The key identified areas for transformation currently include:

- out of hospital care programme focussing on
- community hospitals
- enablement
- allied health professionals and
- dementia
- strategic planning for older people housing, care and support

Also included in the transformation programme are:

- mental health redesign
- reimagining day services
- carers strategy
- redesign of alcohol and drugs services,
- ICT and telehealthcare
- localities and workforce planning

The Programme is currently under review to ensure that it is aligned not only to the revised Strategic Plan 2018 – 2021 and the delivery of the associated Financial Plan, but also with emerging ICF-funded projects and the Transformation Programmes of both NHSB and SBC.

Workforce Planning and Development

Improvements are dependent upon best workforce planning. Staff must be deployed in the right places, with the correct skills and in appropriate numbers. Importantly, there must be a shared vision across the partnership organisations of what integration will look like and why it is important. In the Scottish Borders we have developed a draft Joint Workforce Plan.

Evidencing Improvement

A robust appraisal process is essential to ensure services are efficient and cost effective and that resource decisions are equitable and justifiable. A key component of this is an evidence based review programme. In the Scottish Borders we have developed an Integrated Performance Management Reporting process, which continues to evolve and develop over time.

Communication and Engagement

Sustainable change requires robust communication within and outside of the key organisations. In the Scottish Borders, our aproach to communication is clearly described within our Health and Social Care Partnership Communication Strategy with meaningful engagement and consultation with people living and working in the Scottish Borders underpinning the approach to communication.

Strategic Priorities

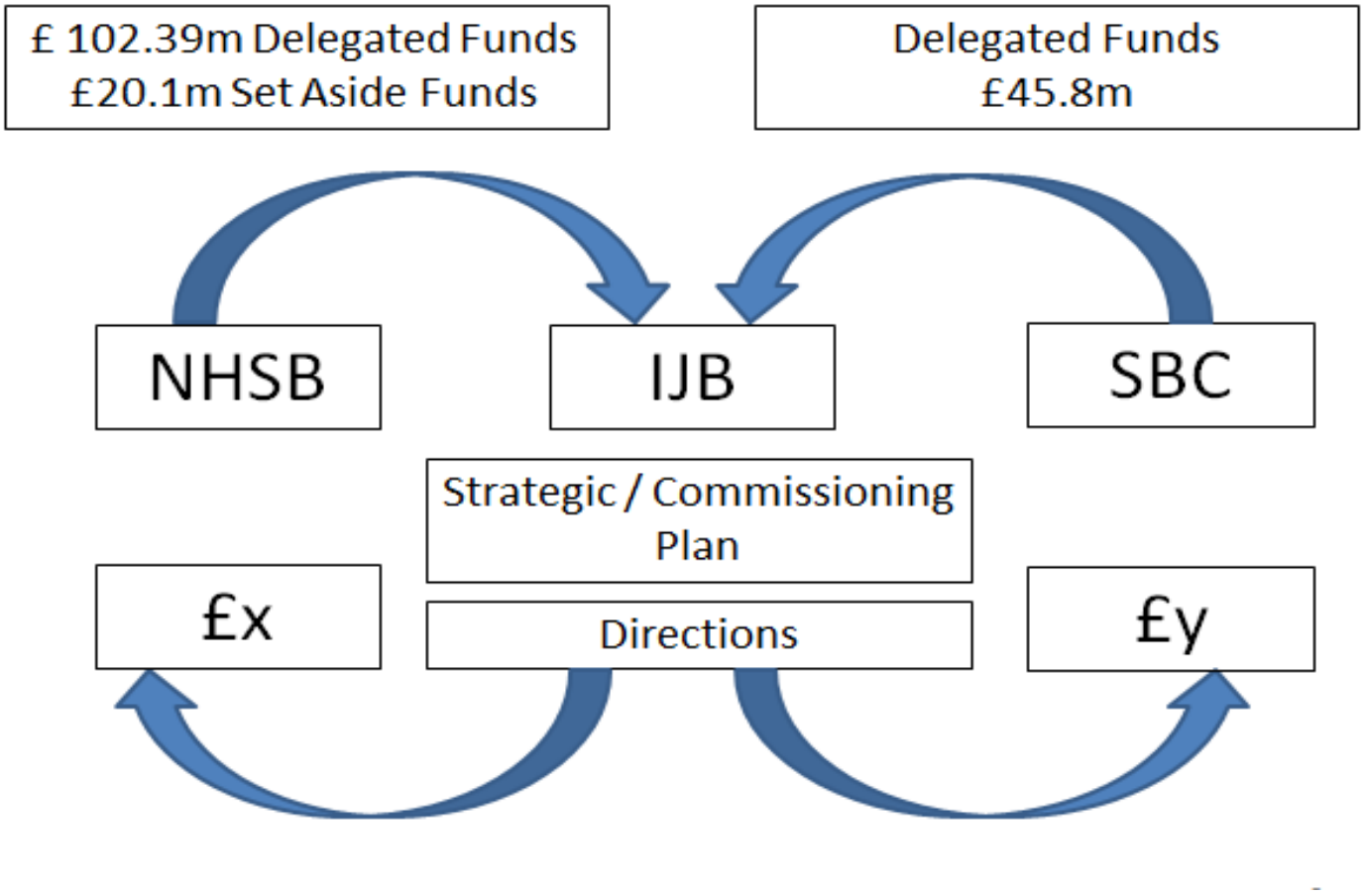
Strategic priorities - or areas for action to achieve sustainable quality in service delivery - do not sit independently and improvement in one area will positively impact upon another. Whilst there is no material increase in main stream budgets over the life of the plan additional investment has been enabled by the Scottish Government Integrated Care Fund Allocation. The overarching goal of the IJB is to create a single system for the planning and delivery of services with a locality focus in order to drive home change across identified priority areas.

Partnership Spending

In April 2018 the Scottish Borders Health and Social Care Partnership agreed its Financial Plan for 2018/19 comprising of:

- The Delegated Budget i.e. the sum of payments to the Integration Joint Board from (IJB) partners (SBC £45.8m, NHSB £102.39m)
- The amount set aside by NHS Borders for large hospital services used by the IJB population (£20.1m Set Aside Funds)

The IJB agrees its Strategic Commissioning Plan and decides how it should allocate funds to NHS Borders and SBC. Where there is significant change the IJB will issue a new Direction alongside a budgetary allocation to either or both NHSB and SBC. The diagram below illustrates this:



Whilst the IJB budget of £168m has increased by almost £1m from 2016/17, a significant increase in demand and pressures will mean efficiencies are required to be delivered in 2017/18 to live within the delegated resource.

Based on the known demographics of the Scottish Borders, the estimated future need for health and social care services, the expressed local ambitions for health and social care services and the knowledge of available resources, funding for the following strategic objectives for the Scottish Borders Health and Social Care Partnership have been identified:

Local Strategic Objectives	Planned Spend 2018/19
1. **We will improve the health of the population and reduce the number of hospital admissions**	
2. **We will improve patient flow within and out with hospital**	
3. **We will improve the capacity within the community for people who have been in receipt of health and social care services to better manage their own conditions and support those who care for them**	
	**Integrated Care Fund**

The integrated Care Fund (ICF) has been used to enable the shift in health and social care services from hospital to community and outreach. This has resulted in a decrease in hospital admissions and increase in alternatives to hospital care. A detailed on plan on how the partnership will deliver on its strategic objectives within agreed resource can be seen in Appendix 8.