

### LOCALITY PLANNING PROGRESS REPORT

#### Aim

- 1.1 The aim of this report is to update the Integration Joint Board (IJB) on work progressed by the Locality Co-ordinators on the development of locality plans and to propose the next steps for consultation and engagement.
- 1.2 Following consultation with frontline staff this report also proposes options for colocation of staff across the five localities to enable closer joint working and future options for Integrated Teams.

#### Background

- 2.1 In line with the requirements of the Public Bodies (Joint Working) (Scotland) Act 2014 and subsequent Localities Guidance the Scottish Borders Partnership is committed to establishing a joint responsibility at a local level to improve the health and well-being of the residents of the Scottish Borders.
- 2.2 In May 2016 three Locality Co-ordinators were recruited with responsibility for developing locality plans across the five localities as well as supporting the redesign of locality based health and social care services.

#### Progress Report

- 3.1 <u>Locality Mapping</u> locality data and information has been collated for each of the five localities and has been used to develop a summarised locality action plan for each locality. The action plans offer a summary of the demographics of each locality as well as highlighting what currently exists in terms of health and social care, third sector and independent sector services.
- 3.2 Locality Plans in line with the principles of co-production five local working groups were established with the primary function of developing a locality plan for each locality. Led by the Locality Co-ordinators the working groups have been meeting monthly since September 2016 and comprise of local representatives from the following stakeholder groups: Service user, Carer, Community Nursing, Social Work, Pharmacy, Third Sector, Housing, Community Hospital Ward Manager and AHP. Despite ongoing attempts to secure GP representation on all five working groups, this has not been achieved to date and remains a significant issue. The Locality Working Groups have successfully contributed to the development of the summary action plans and are in the process of developing draft Locality Plans for all five localities for presentation to the IJB 27 March 2017. An example of a summary action plan can be seen in **Appendix One.**

3.3 <u>Co-location</u> – work has already been progressed to determine the feasibility of colocated integrated teams within each locality taking into consideration the required professional mix of teams and the opportunities for co-location within existing buildings. A number of workshops led by the Locality Co-ordinators and involving senior operational managers from across the partnership have been held to identify any practical issues related to the implementation of co-location of staff. Key groups of frontline staff across the partnership have been consulted regarding proposals for co-location and the following options have been identified:

### **Berwickshire Locality**

- Base 1: Knoll Hospital/Health Centre, Duns
- Base 2: Health Centre, Eyemouth

#### **Cheviot Locality**

- Base 1: Community Hospital/Health Centre, Kelso
- Base 2: Health Centre, Jedburgh

#### **Eildon Locality**

- Base 1: Currie Road Health Centre, Galashiels
- Base 2: Health Centre, Selkirk
- Base 3: Health Centre, Melrose

#### **Teviot Locality**

• Base 1: Community Hospital/Teviot Medical Practice, Hawick

#### Tweeddale Locality

• Base1: Haylodge Hospital/Health Centre, Peebles

It should be noted that not all staff can be fully co-located in one site locality. Further work will be needed to consider IT requirements and address any practical arrangements to support any moves along with ongoing engagement with staff.

3.4 **Communication and Engagement** – since April 2016 the Locality Co-ordinators have engaged in extensive engagement activities with all key stakeholders. A key component has been the establishment of the five Locality Working Groups which provide a local forum for updating on progress and seeking views and comment from a wide range of local stakeholders - including social care and health staff, service users, carers, members of the public and third and independent sector representatives - to inform the development of local planning and service redesign. In addition to this the Locality Co-ordinators are due to attend Local Area Forums and the Patient Participation Forum between February and September 2017 to ensure stakeholders are fully updated on progress and have the opportunity to comment on developments to date. It should be noted that it has been difficult to secure formal GP representation on Locality Working Groups apart from an informal arrangement via one local GP who attends the Cheviot Group bi-monthly. The Locality Co-ordinators continue to try and engage with GP's through informal networks however this presents a risk to future locality planning and engagement.

#### Work Plan for Locality Co-ordinators Feb-Sept 2017

4.1 **Feb-March 2017:** Produce drafts of all five Locality Plans – fully populate with information, agree graphics and consult with all key stakeholders including Local

Area Forums. Present draft plans to the IJB on 27 March 2017. Secure venue and date for launch of plans. Present more detailed options for integrated teams to the Executive Management Team on 17 March and the IJB on the 27 March.

- 4.2 **April May 2017:** Finalise all five Locality Plans for approval at the IJB on 29 May 2017. Plan and prepare for launch event. Consult with frontline staff on more detailed proposals for integrated teams and collate and analyse feedback received. Develop detailed implementation and communication plans for actions identified within Locality Plans as well as all options for integrated teams across the five localities.
- 4.3 **May Sept 2017:** Support and co-ordinate the delivery of local implementation plans reporting on progress and issues arising to the EMT and IJB as required. It is worth noting that there is no current dedicated resource identified to support implementation beyond September 2017.

#### Summary

- 5.1 During the last 3 months the Locality Co-ordinators have produced summary action plans for all five localities as well as drafted an outline Locality Plan for Berwickshire, with a view to finalising drafts of all five Locality Plans by end of March 2017.
- 5.2 In consultation with key stakeholders options for co-location in all five localities have been developed and key actions in order to progress options have been identified. Future work will include progress on options for Integrated Teams at locality level.
- 5.3 A detailed work plan for the Locality Co-ordinators has been developed which outlines their priorities between February and September 2017.

#### Recommendation

The Health & Social Care Integration Joint Board is asked to <u>note</u> the progress made by Locality Co-ordinators in relation to Locality Plans, integrated teams and communication and engagement.

The Health & Social Care Integration Joint Board is asked to <u>note and comment on</u> the summary Locality Action Plan.

The Health & Social Care Integration Joint Board is asked to **<u>endorse</u>** the proposal to hold a launch event following final approval of the Locality Plans.

The Health & Social Care Integration Joint Board is asked to <u>note</u> the Locality Coordinators work plan and timescales for implementation.

Policy/Strategy Implications	As detailed within the report.
Consultation	As detailed within the report.
Risk Assessment	N/A
Compliance with requirements on Equality and Diversity	Compliant

Resource/Staffing Implications	As detailed within the report	

# Approved by

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