



PERTH AND KINROSS INTEGRATION JOINT BOARD

Council Building
2 High Street
Perth
PH1 5PH

23/03/2023

A hybrid meeting of the **Perth and Kinross Integration Joint Board** will be held in the **Council Chamber** on **Wednesday, 29 March 2023** at **13:00**.

If you have any queries please contact Committee Services - Committee@pkc.gov.uk.

Jacquie Pepper
Chief Officer – Health and Social Care Partnership

Please note that the meeting will be streamed live via Microsoft Teams, a link to the Broadcast can be found via the Perth and Kinross Council website. A recording will also be made publicly available on the Integration Joint Board pages of the Perth and Kinross Council website as soon as possible following the meeting.

Voting Members

Councillor Michelle Frampton, Perth and Kinross Council
Councillor David Illingworth, Perth and Kinross Council
Councillor Sheila McCole, Perth and Kinross Council
Councillor Colin Stewart, Perth and Kinross Council (Vice-Chair)
Bob Benson, Tayside NHS Board (Chair)
Martin Black, Tayside NHS Board
Beth Hamilton, Tayside NHS Board
Jacqui Jensen, Tayside NHS Board

Non-Voting Members

Jacquie Pepper, Chief Officer- Health and Social Care Partnership/Chief Social Work Officer, Perth and Kinross Council
Donna Mitchell, Acting Chief Financial Officer, Perth and Kinross Integration Joint Board
Sarah Dickie, NHS Tayside
Dr Sally Peterson, NHS Tayside
Dr Lee Robertson, NHS Tayside
Dr Emma Fletcher, NHS Tayside

Stakeholder Members

Sandra Auld, Service User Public Partner
Bernie Campbell, Carer Public Partner
Lyndsay Glover, Staff Representative, NHS Tayside
Dave Henderson, Scottish Care
Stuart Hope, Staff Representative, Perth and Kinross Council
Ian McCartney, Service User Public Partner
Maureen Summers, Carer Public Partner
Sandy Watts, Third Sector Forum

Perth and Kinross Integration Joint Board

Wednesday, 29 March 2023

AGENDA

- 1 WELCOME AND APOLOGIES/SUBSTITUTES**
- 2 DECLARATIONS OF INTEREST**
Members are reminded of their obligation to declare any financial or non-financial interest which they may have in any item on this agenda in accordance with the [Perth and Kinross Integration Joint Board Code of Conduct](#).
- 3 MINUTE OF MEETING OF THE PERTH AND KINROSS INTEGRATION JOINT BOARD OF 15 FEBRUARY 2023 FOR APPROVAL** **5 - 10**
(copy herewith)
- 4 MATTERS ARISING**
- 5 ACTION POINTS UPDATE** **11 - 12**
(copy herewith G/23/36)
- 6 FINANCE/AUDIT**
- 6.1 2023-26 BUDGET** **13 - 38**
Report by Interim Chief Finance Officer (copy herewith G/23/37)
- 6.2 AUDIT & PERFORMANCE COMMITTEE 13 MARCH 2023**
Verbal Update by Chair of Audit & Performance Committee
- 7 DELIVERING ON STRATEGIC OBJECTIVES**
- 7.1 MENTAL HEALTH AND LEARNING DISABILITY IMPROVEMENT PLAN** **39 - 66**
Report by Chief Officer/Lead Partner for the co-ordination of strategic planning for inpatient mental health and learning disability services (copy herewith G/23/38)
- 7.2 3-YEAR WORKFORCE PLAN UPDATE** **67 - 84**
Report by Chief Officer (copy herewith G/23/39)
- 8 FOR INFORMATION**

8.1 REPORTING FORWARD PLANNER 2023/24
(copy herewith G/23/40)

85 - 88

8.2 FUTURE MEETING DATES 2022/23
Council chambers (1.00pm - 5.00pm)

Wednesday 21 June 2023
Wednesday 20 September 2023
Wednesday 29 November 2023
Wednesday 14 February 2024
Wednesday 27 March 2024

FUTURE IJB DEVELOPMENT SESSIONS 2023/24
Council Chambers (10.00am - 1.00pm)

Friday 5 May 2023
Friday 11 August 2023
Friday 27 October 2023
Friday 26 January 2024
Friday 15 March 2024

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PERTH AND KINROSS INTEGRATION JOINT BOARD

Minute of Meeting of the hybrid meeting of the Perth and Kinross Integration Joint Board (IJB) held in the Council Chambers, 2 High Street, Perth on Wednesday 15 February 2023 at 1.00pm.

Present: Voting Members:

Mr B Benson, Tayside NHS Board (Chair)
 Mr M Black, Tayside NHS Board
 Ms B Hamilton, Tayside NHS Board
 Councillor C Stewart, Perth and Kinross Council (Vice Chair)
 Councillor D Illingworth, Perth and Kinross Council
 Councillor S McCole, Perth and Kinross Council
 Councillor M Frampton, Perth and Kinross Council

Non-Voting Members

Ms J Pepper, Chief Officer / Director – Integrated Health & Social Care, Chief Social Work Officer, Perth and Kinross Council
 Ms D Mitchell, Interim Chief Financial Officer, Perth and Kinross Health and Social Care Partnership
 Ms S Dickie, NHS Tayside
 Dr S Peterson, NHS Tayside
 Dr E Fletcher, NHS Tayside

Stakeholder Members

Ms S Auld, Service User Public Partner
 Mr I McCartney, Service User Public Partner
 Ms B Campbell, Carer Public Partner
 Mr S Hope, Staff Representative, Perth and Kinross Council (from Item 5 onwards)
 Ms L Glover, Staff Representative, NHS Tayside

In Attendance:

C Cramer, I Wilkie, S Hendry, K Molley, A Brown and M Pasternak (all Perth and Kinross Council); K Ogilvy, E Devine, M Grant, C Jolly, A McManus, V Davis and P Jerrard (all Perth and Kinross Health and Social Care Partnership); D Henderson (Scottish Care Sector); and B Atkinson (Independent Chair of Child and Adult Protection Committee)

Apology:

Ms J Jensen, Tayside NHS Board

1. WELCOME AND APOLOGIES

B Benson, Chair, welcomed all those present to the meeting and an apology was noted above.

2. DECLARATIONS OF INTEREST

Both Councillor Sheila McCole and Dave Henderson declared a non-financial interest in item 7.4 on the agenda as members of the Perth and Kinross Adult Protection Committee.

3. MINUTE OF MEETING OF THE PERTH AND KINROSS INTEGRATION JOINT BOARD OF 14 DECEMBER 2022

The minute of the meeting of the Perth and Kinross Integration Joint Board of 14 December 2022 was submitted and approved as a correct record.

4. ACTIONS POINT UPDATE

The Chief Officer provided a verbal update on the status of the various action points.

Resolved:

The action points update (23/46) was submitted and noted.

5. MATTERS ARISING

- (i) Item 6 refers - S Auld and I McCartney both raised concerns on the current engagement process with Public Partners around the reporting and agenda setting process for the IJB. I McCartney referred to a document that he had prepared and shared at a national level on the role of public partners on IJB's. B Benson agreed that this report could be shared with all IJB members for information. J Pepper referred to the Participation and Involvement Strategy referencing the minute of the previous meeting and both B Benson and J Pepper advised that the best route to continue these discussions would be through the Strategic Planning Group.
- (ii) Councillor C Stewart referred to action 140 of Report 23/46 and raised concerns over the recommendation of the report to NHS Tayside Board suggesting that this didn't reflect the IJB's position on the proposed closure of the Branch Surgery in Blair Atholl. J Pepper advised that the report would be circulated to Board members for information.

6. MEMBERSHIP AND REVIEW OF STANDING ORDERS

S Hendry, Acting Democratic Services Manager, advised that there was a current vacancy on the IJB Audit and Performance Committee for an NHS Tayside voting member. The Board agreed for Mr Martin Black to be appointed to the IJB Audit and Performance Committee.

There was submitted a report by the Chief Officer (23/47) presenting proposed changes to the Integration Joint Board's (IJB's) standing orders and decision-making arrangements as part of an annual review.

In response to a question from I McCartney regarding further clarity around voting, S Hendry advised that when a tied vote occurs between voting members, there is not an option of a casting vote from the Chair and Standing Orders advise that the item would come back to the IJB to attempt further resolution. He added that the proposals in the report highlighted the option of an indicative vote from non-voting members of the Board to assist the Board in reaching a consensus at the following meeting.

Resolved:

The proposals set out in Section 3 of Report 23/47, be agreed.

7. DELIVERING ON STRATEGIC OBJECTIVES

7.1 CHIEF OFFICER STRATEGIC UPDATE

There was a verbal report by the Chief Officer providing an update on key strategic matters since the last IJB meeting in December.

B Benson suggested arranging a Members Development Session on the Carers Strategy before the Board meeting in June 2023.

In response to a question from Councillor C Stewart regarding the proposed closure of the Invergowrie GP Practice, J Pepper advised the reasons for the proposed closure are related to a significant number of GP retirements. E Devine added that there has been collaborative working between Primary Care Services and Perth and Dundee Health and Social Care Partnerships as many patients who attend the Invergowrie GP Practice are from Perth and Kinross. She advised that a report would be submitted to ELT at NHS Tayside to get approval to review the options on how to proceed. A project group has been set up to oversee the options appraisal, consultation, and engagement. E Devine confirmed that the strategic options would be brought back to the Board in March 2023 to seek members views.

Resolved:

The Board noted the position.

7.2 REPORT ON MENTAL HEALTH SERVICES

There was submitted a report by the Chief Officer (23/48) (1) providing an update on the work of the Independent Oversight and Assurance Group into Tayside Mental Health Services; the publication of its final report by Scottish Government on 11 January 2023, and the required next steps; (2) outlining NHS Tayside proposals to strengthen care and clinical governance arrangements for mental health and learning disability health services; and (3) updating on the coordination of strategic planning for mental health services across Tayside (which is delegated to the Perth and Kinross IJB as lead partner within the revised Integration Scheme).

S Dickie advised as a point of accuracy that the Angus IJB are due to meet on 22 February 2023 instead of 15 February 2023.

J Pepper confirmed that the submission of the draft plan to the Scottish Government on 28 February 2023 would be circulated to the Board to enable members to make comment on the plan before the Board meeting at the end of March 2023.

Councillor C Stewart suggested amending the terminology of the draft plan to include 'dedicated sites' as well as 'single sites' to give further clarity to Board members.

Resolved:

- (i) The publication of the final report of the Independent Oversight and Assurance Group into Tayside Mental Health Services, the six priority areas for action highlighted in the report; and the requirement to submit a detailed action plan to the Scottish Government by 31 March 2023, be noted.
- (ii) The refined priorities in table one, timeline and the governance route for approving the detailed action plan before submission to Scottish Government, be approved.
- (iii) The Chief Officer, as Lead Partner for the coordination of strategic planning for impatient mental health services and learning disability services be requested to continue to engage with NHS Tayside Executive Directors and other Chief Officers (Dundee and Angus IJBs) to consolidate the leadership arrangements and refine governance and structures and to bring forward a report for IJB approval by 31 March 2023.
- (iv) The strengthening of clinical and care governance arrangements, be noted.
- (v) The intention to hold a workshop for all Perth and Kinross IJB members on 'making integration work', be noted.

7.3 CHIEF SOCIAL WORK OFFICER ANNUAL REPORT

There was submitted a report by the Chief Social Work Officer (23/49) (1) providing the Chief Social Work Officer's overview of social work services in Perth and Kinross during the financial year 2021/22; and (2) setting out how social care and social work services have been delivered up until end of March 2022, and in some instances up to end of July 2022.

Members praised the Chief Social Work Officer and her team for their work.

Resolved:

- (i) The wide range of work being carried out by Perth and Kinross Council to provide effective social work services and the continued efforts by staff to manage the additional needs and demands that are present as a result of the ongoing impact of COVID 19, be noted.
- (ii) It be noted that the report has been submitted to the Scottish Government and the Chief Social Work Adviser's office.
- (iii) The Chief social Work Officer Annual Report for 2021/2022 as set out in Appendix 1 of Report 23/49, be noted.

7.4 PERTH AND KINROSS ADULT PROTECTION COMMITTEE BIENNIAL REPORT 2020/22

There was submitted a report by Chief Social Work Officer (23/50) (1) focusing on the impact of the COVID-19 pandemic on adults at risk, how performance has been maintained and how services and agencies have successfully adapted; and (2) confirming that the multi-agency arrangements for adult support and protection are leading to improved outcomes for vulnerable adults at risk of harm and the APC continues to place a strong emphasis on learning and development and has a programme of evidence-based improvement work underway.

Resolved:

- (i) The wide range of work being carried out by partners through the Adult Protection Committee, to provide high quality services to protect adults at risk and the commitment to continuous improvement, be noted.
- (ii) The Perth and Kinross Adult Protection Committee Biennial Report for 2020/2022, be endorsed.

THERE WAS A 15 MINUTE RECESS AND THE MEETING RECONVENED AT 14.55.

7.5 STRATEGIC PLANNING GROUP MINUTES – 17 JANUARY 2023

The Strategic Planning Group Minutes – 17 January 2023 (23/51) were submitted for Board Members' information.

Resolved:

The contents of Report 23/51, be noted.

7.6 AUTISM / LEARNING DISABILITIES STRATEGIC DELIVERY PLAN UPDATE

There was submitted a report by the Chief Officer (23/52) providing a progress update on the Autism and Learning Disability Strategic Delivery Plan.

Resolved:

- (i) The progress on the Autism and Learning Disability Strategic Delivery Plan, be noted.
- (ii) It be requested for an update to be brought back to the Board in 12 months' time.

7.7 UPDATE ON THE REDESIGN OF SUBSTANCE USE SERVICES IN PERTH AND KINROSS AND IMPLEMENTATION OF MAT STANDARDS

There was submitted a report by the Chief Officer (23/53) updating the Board on progress in the redesign of substance use services including embedding and implementing the Medication-Assisted Treatment (MAT) Standards, work to refresh the current Strategic Delivery Plan 2020-23 and progress with residential rehabilitation and recovery activities.

Resolved:

- (i) The progress on the Autism and Learning Disability Strategic Delivery Plan, be noted.
- (ii) It be requested for an update to be brought back to the Board in 12 months' time.

8. FOR INFORMATION

8.1 INTEGRATION JOINT BOARD REPORTING FORWARD PLANNER 2022/23 (23/54)

Resolved:

The contents of Report 23/54, be noted.

9. FUTURE IJB MEETING DATES 2023/24

Wednesday 29 March 2023 at 1.00pm
Wednesday 21 June 2023 at 1.00pm
Wednesday 20 September 2023 at 1.00pm
Wednesday 29 November 2023 at 1.00pm
Wednesday 14 February 2024 at 1.00pm
Wednesday 27 March 2024 at 1.00pm

Future IJB Development Sessions 2023/24

Venue – Council Chambers (hybrid) unless otherwise stated.

Wednesday 15 March 2023 at 1.00pm (MR410 hybrid)
Wednesday 5 May 2023 at 1.00pm
Friday 11 August 2023 at 1.00pm
Friday 27 October 2023 at 1.00pm
Friday 26 January 2024 at 1.00pm
Friday 15 March 2024 at 1.00pm



ACTION POINTS UPDATE

Perth & Kinross Integration Joint Board
29 March 2023
(Report No. G/23/36)

Ref.	Meeting	Minute Ref	Heading	Action Point	Responsibility	Timescale	Status
131	09 Dec 2020	7.2	Mental Health & Wellbeing Strategy	The Tayside MH Strategy 'Living Life Well' - Financial Framework to be provided.	Director of Finance NHS Tayside/ COs/CFOs	Ongoing	Work on this continues across Tayside with the NHST director of Finance in discussions with the 3 HSCP CFOs and COs.
137	30 Mar 2022	5.	Matters Arising	Review of mechanisms for ongoing IJB Member communication to ensure effectiveness.	Chief Officer	31 Aug 2022	Action Complete. A Communications protocol, developed in partnership with PKC and NHST Communications Teams, has been shared across the IJB.
138	30 Mar 2022	7.1	3 Year Budget	A development session to be held with IJB members around the Inpatient Mental Health overspend and roles and responsibilities.	Chief Officer	31 Aug 2022	Action Complete. Development session held with IJB Members on 15 March 2023.
140	26 Oct 2022	6.5	Consultation on Atholl Medical Practice Application to NHS Tayside Board to Amend Their GMS Contract and to Close the Branch Surgery in Blair Atholl	Paper detailing IJB position to be circulated to IJB Members prior to submission to NHS Tayside for their consideration and decision.	Chief Officer	29 Mar 2023	Action complete. NHS Tayside paper, as considered at the NHS Tayside Board, has been circulated to IJB Members. The application to vary the contract was approved by the NHS Tayside Board on 23 February 2023 and this has been communicated to the Practice, who have informed patients.
141	15 Feb 2023	7.1	Chief Officer Strategic Update	Development Session on Carer's Strategy to be considered	Chief Officer	5 May 2023	Development session planned for 5 May 2023.



PERTH & KINROSS INTEGRATION JOINT BOARD

29 MARCH 2023

2023-26 BUDGET

Report by Interim Chief Finance Officer
(Report No. G/23/37)

PURPOSE OF REPORT

The purpose of this report is to present the Perth and Kinross Integration Joint Board's proposed 2023/24 Budget and 2024/25 and 2025/26 Provisional Budgets.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board:

- (i) Approves the proposed 2023/24 Budget as set out in Appendix 1.
- (ii) Approves the expenditure pressures set out in Appendix 2.
- (iii) Approves the savings and funding proposals set out in Appendix 2.
- (iv) Notes the 2024/25 and 2025/26 Provisional Budgets and the additional work required to bring these years into balance.
- (v) Approves the deferral of the implementation of the Review of Contributions Policy.
- (vi) Approves the non-recurring expenditure set out in Section 6, to be funded from general reserves.
- (vii) Issues directions as set out in Section 10 and Appendix 4 of this report.

2. BACKGROUND

2.1 The Integration Joint Board (IJB) Strategic Commissioning Plan 2020 – 2025 sets out the vision for the Health and Social Care Partnership for Perth and Kinross. The Strategic Delivery Plans, approved throughout 2021 and 2022, set out the actions being taken to deliver and connects these actions to the financial plan. The approved plans are:

- Older People – IJB March 2022 (Report G/22/54) [link](#)
- Autism / Learning Disability – IJB February 2022 (Report G/22/8) [link](#)

- Community Mental Health and Wellbeing – IJB December 2021 (Report G/21/146) [link](#)

- 2.2 The IJB is faced with significant financial challenges due to inflation, a growing ageing population, increasing demand and complexities, and funding uncertainty. The IJB is committed to supporting the Strategic Plan and Delivery Plans by prioritising and ensuring best use of available resources. Although several assumptions have been made and risks remain, this budget ensures that the Strategic Plan intentions are retained.
- 2.3 The proposed 2023/24 Budget has been developed and considered with IJB members at Budget Development Sessions. Four sessions have been held, commencing in November 2022 through to March 2023.

3. BUDGET

3.1 Scottish Government

- 3.1.1 The Scottish Government's budget for 2023/24 was published on 15 December 2022. This confirmed £100m of funding to support adult social care pay uplift in commissioned services and £15m for an inflationary uplift on Free Personal Care rates. This funding is additional and not substitutional to each Council's 2022/23 recurring budgets for services delegated to IJBs. The detail of the funding allocation for Perth & Kinross IJB is provided in Appendix 1.

3.2 Perth & Kinross Council

- 3.2.1 The Perth & Kinross Council 2023/24 Revenue Budget is in line with the Scottish Government direction above, therefore the budget is equal to the 2022/23 recurring budget plus the additional funding for adult social care pay uplift in commissioned services and inflationary uplift for Free Personal Care.
- 3.2.2 The IJBs 2022/23 budget was also uplifted in year to reflect the Local Government Pay Settlement. Perth & Kinross Council passed through the relevant share for Council employees within the services delegated to the IJB and this funding was provided on a recurring basis.
- 3.2.3 The detail of the budget requisition to Perth & Kinross Council for 2023/24 is provided in Appendix 1. This is in line with the 2023/24 Revenue Budget approved by the Council for the IJB on 1 March 2023.

3.3 NHS Tayside

- 3.3.1 The Scottish Government budget proposal for 2023/24 sets out that NHS Scotland Health Boards will receive a funding uplift of 2%. The proposal adds that NHS payments to Integration Authorities for delegated health functions must deliver an uplift of 2% above the 2022/23 recurring budget and make appropriate provision for 2022/23 pay.

- 3.3.2 The Scottish Government budget proposal noted that it has not set out a public sector pay policy alongside the 2023/24 budget. The Government will make a further announcement on the 2023/24 pay, covering Agenda for Change, at an appropriate point in the new year. The IJB assumption is the impact of any pay uplift above 2% will be fully funded by the Scottish Government, as per previous years.
- 3.3.3 The NHS Tayside budget for 2023/24 will be set in April 2023 and the current intention is for NHS Tayside to pass on the 2% uplift to IJBs. The detail of the indicative budget requisition to NHS Tayside for 2023/24 is provided in Appendix 1. The figure at present only includes uplift related to recurring budgets that have been baselined and added to core budget. The Scottish Government is working through allocations and uplifts for budgets that have not yet been baselined. The IJB is assuming any uplift provided for these budgets will also be passed through to the IJB.

4. PRESSURES

- 4.1 In preparing the 2023/24 Budget the IJB has considered pressures relating to pay, cost, demand, and investment to support strategic plans. The detailed recurring expenditure pressures are set out in Appendix 2.
- 4.2 The 2023/24 pressures total £13.182m. This is made up of £6.106m within Health Services and £7.076m within Social Care. The table below provides the summarised allocation of pressures.

Table 1

	Health £m	Social Care £m	Total £m
Pay	1.246	1.008	2.254
Cost	-	4.013	4.013
Demand / Investment	1.320	1.147	2.467
Sub- Total Recurring Pressures	2.566	6.168	8.734
Prescribing	2.800	-	2.800
Other Non-Recurring Expenditure	0.740	0.908	1.648
Total Pressures	6.106	7.076	13.182

- 4.3 Further detail on Prescribing and Other Non-Recurring Expenditure is provided in Section 6 below.
- 4.4 The 2023/24 Budget is based upon information currently available, both in terms of costs and anticipated demand pressures. However, there is significant risk that assumptions may require to be revised as part of the ongoing monitoring throughout the financial year.
- 4.5 Further detail on assumptions and risks is provided in Section 8 below.

5. SAVINGS / REALLOCATION OF BUDGETS

- 5.1 To set a balanced budget for 2023/24, the IJB has considered funding solutions including Scottish Government funding, reductions in service, reinvestment of uncommitted budgets and other savings proposals. These have been reviewed alongside Strategic Delivery Plans to ensure the budget remains sufficient and allows the plans to be financially supported.
- 5.2 Appendix 2 provides further detail on proposed savings and reallocation of uncommitted budgets.
- 5.3 A summary of recurring funding and savings proposals is as follows:

Table 2

	2023/24 £m
NHS Uplift 2% (Recurring Baseline Budgets) *	1.295
NHS Uplift 2% Prescribing	0.548
Adult Social Care Pay Uplift	2.930
Free Personal Care uplift	1.002
Savings & Reallocation of Uncommitted Budget	3.565
Total Funding	9.340

* This figure excludes the expected uplift for General Medical or Family Health Services as this has not yet been confirmed. The uplift is anticipated to be c£1m.

6. OTHER EXPENDITURE

6.1 Prescribing (£2.230m)

- 6.1.1 The Prescribing Financial Plan for 2023/24 identifies a net pressure of £2.230m. The main issue being considerable and unprecedented price pressures. These are driven by inflation, rising interest rates, weak exchange rates in sterling and short supply issues. At this stage it is unknown whether the increased prices will be sustained.
- 6.1.2 The Prescribing Financial Plan also includes a brought forward budget deficit, intended to be met by a refreshed Quality, Safety and Efficiency in Prescribing (QSEP) programme. However, this improvement work has been delayed due to the impact of Covid-19 and the departure of the QSEP postholders. This, along with pressures in primary care due to workforce shortages and increased demand, means that capacity for pro-active prescribing quality work has been limited. The programme is now expected to recommence and the IJB will be updated on progress throughout 2023/24.
- 6.1.3 The Scottish Government is leading a financial Improvement group and prescribing data has been identified as a key area of improvement. The aim is to bring together various prescribing data sources and create a single data comparison tool. This should allow areas to analyse prescribing activity and

compare against their peers with a focus on financial opportunity. This will also consider off patent drugs, low value prescribing and short supply.

- 6.1.4 Due to the level of uncertainty on price, supply and demand, the IJB is asked to approve non-recurring resources for 2023/24. This will allow time to assess for any long term nature of the issues, before developing a recurring prescribing financial plan for 2024/25.
- 6.1.5 A report analysing the cost pressures and exploring further mitigations will be brought to the IJB in September 2023.

6.2 Non-Recurring Expenditure

- 6.2.1 The 2023/24 Budget includes the following non-recurring expenditure proposals:
- **Delay in delivery of approved savings (£0.904m)** - Delays in progressing approved savings mainly due to the impact of Covid-19 on capacity, but also due to system pressures over the last few months. It is still the intention to deliver these savings in future years.
 - **Review of Contributions Policy (£0.708m)** – A review of the Contributions Policy was approved by Perth & Kinross Council in February 2016. The implementation of the review has been delayed due to Covid-19 and then deferred due to the Scottish Government commitment to remove charges for non-residential social care. The national timescale for implementation is not yet known. The loss of income due to the delay has been funded by the Council until the end of 2022/23. A full Equalities and Fairness Impact Assessment has also been carried out and the negative financial impact on service users with learning disabilities was identified. The IJB is recommended to support the cost to defer the implementation by a further year.

6.3 Non-Recurring Funding

- 6.3.1 The IJB is asked to approve £3.842m of general reserves to meet the above expenditure pressures in 2023/24.

Table 3

	2023/24 £m
Total Pressures	13.182
Recurring Funding and Savings	(9.340)
Use of General Reserves	(3.842)
Balance	-

7. RESERVES

- 7.1 The IJB holds earmarked and un-earmarked (general) reserves. The projected balance of reserves at 1 April 2023 is provided in detail in Appendix 3.

- 7.2 Most IJB ear-marked reserves are linked to Scottish Government ring-fenced allocations and the IJB is required to retain unspent funds for specific purposes in future years.
- 7.3 The IJB's Reserves Policy aims to maintain general reserves equivalent to 2% of net budget (c£4.7m for 2023/24). The projected balance of IJB General Reserves is marginally below this level, at 1.8% (£4.3m).

Table 4

2023/24 Budget Proposal	£m
Projected General Reserve 1 April 2023	8.178
2023/24 Budget – Use of General Reserves	(3.842)
Balance of Reserve Remaining	4.336
Balance as % of Net Expenditure	1.8%

8. ASSUMPTIONS AND FURTHER RISK

- 8.1 The 2023/24: 2025/26 Budget is based on several assumptions including demand levels, costs, pay and funding. Further details on the assumptions are provided in Appendix 2. The material risks related to these are:
- **Local Government Pay Settlement** – the 2023/24 pay settlement for Local Authority employed staff has not yet been finalised. The IJB Budget plans for an unfunded 3% pay uplift, this is in line with the assumption made in the Perth & Kinross Council Budget approved 1 March 2023. An unfunded uplift above 3% would result in a significant financial pressure for the IJB.
 - **Prescribing** – An increase on volume and price above the level noted in Section 6 would result in significant additional financial pressure for the IJB.
 - **National Care Home Contract** – The Care Home Contract rate is negotiated nationally each year. The uplift for 2023/24 has not yet been finalised and negotiations are still underway. The Scottish Government funding for 2023/24 supports Living Wage elements of the uplift with any additional pay or non-pay uplift to be met by the IJB.
 - **In Patient Mental Health** – Agreement has not yet been reached with NHS Tayside and the 3 Tayside IJBs for any overspend within In Patient Mental Health Services. Discussions are underway and progress is being made, but at this time the issue has not yet been resolved. It is anticipated that any overspend in 2023/24 will not impact the IJB.

9. PROVISIONAL BUDGET 2024/25:2025/26

- 9.1 The 2024/25 and 2025/26 Provisional Budgets have been prepared on the same basis as the proposed 2023/24 Budget. However, several uncertainties remain over funding, demand, and impact from investment. This will be closely monitored throughout 2023/24 to further refine the budget for approval in March 2024.

- 9.2 A balanced budget is presented for 2023/24 but the provisional budget identifies a gap in 2024/25 and 2025/26. This is a result of identified pressures across all care groups and primarily Learning Disability Services. The IJB will need to consider additional funding solutions and reductions in overall expenditure to ensure the budget can be balanced in future years.

The table below summarises the recurring budget position over the 3 years:

Table 5

	2023/24 £m	2024/25 £m	2025/26 £m	Total £m
Pressures	13.182	7.299	6.947	27.428
Funding	(5.775)	(5.242)	(5.268)	(16.285)
Savings/Reallocation	(3.565)	(1.080)	(0.210)	(4.855)
Use of General Reserves	(3.842)	-	-	(3.842)
Gap	-	0.977	1.469	2.446

10. DIRECTIONS

- 10.1 The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Perth & Kinross Council and NHS Tayside.
- 10.2 The IJB is asked to issue the directions within Appendix 4 to Perth & Kinross Council and NHS Tayside, for the 2023/24 Budget.

Author(s)

Name	Designation	Contact Details
Donna Mitchell	Interim Chief Finance Officer	dmitchell@pkc.gov.uk

NOTE: No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information), were relied on to any material extent in preparing this report.

1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

Strategic Implications	Yes / None
HSCP Strategic Commissioning Plan	Yes
Transformation Programme	Yes
Resource Implications	
Financial	Yes
Workforce	Yes
Assessments	
Equality Impact Assessment	Yes
Risk	Yes
Other assessments (enter here from para 3.3)	
Consultation	
External	Yes
Internal	Yes
Legal & Governance	
Legal	None
Clinical/Care/Professional Governance	None
Corporate Governance	None
Directions	Yes
Communication	
Communications Plan	None

1. Strategic Implications

1.1 Strategic Commissioning Plan

The development of the 3 Year Budget 2023: 2026 has been underpinned by detailed financial frameworks included in IJB Strategic Plans for Older People, Learning Disabilities/Autism and Community Mental Health & Wellbeing.

2. Resource Implications

2.1 Financial

The report sets out the overall financial implications of identified pressures and proposed funding over the 3 year period.

2.2 Workforce

The workforce implications of proposed savings have been considered and are included within the impact assessment within Appendix 2.

3. Assessments

3.1 Equability Impact Assessments

The necessary equality impact assessments underpinning proposed pressures and savings have been completed and are contained within Appendix 2.

3.2 Risk

The IJB's Strategic Risk Register identifies availability of sufficient financial resources as a significant risk to the delivery of the IJB's strategic objectives.

The Budget proposed for 2023/24 is balanced but makes several assumptions and carries risk mainly related to unknown inflation costs and uncertainty on funding. These risks will be monitored, assessed and reported on throughout the financial year.

4. Consultation

4.1 External

The Strategic Delivery Plans that underpin the Budget 2023:2026 have been considered by the representatives on relevant strategy groups and by the IJB Strategic Planning Group.

An update on the development of the Budget 2023:2026 was provided to IJB members in January 2023.

4.2 Internal

The Perth & Kinross HSCP Executive Management Team have provided oversight of the development of the budget proposals.

The proposed budget has been considered as part of both NHS Tayside and Perth & Kinross Council budget process for 2023/24. IJB Budget Development Sessions have been held to which all IJB Members were invited.

5. Directions

Directions are required to be issued to NHS Tayside and Perth & Kinross Council in respect of the 2023/24 Budget.

2. Appendices

Appendix 1 IJB Budget 2023/24
Appendix 2 Executive Summaries
Appendix 3 Summary of Reserves
Appendix 4 Directions

IJB Budget 2023/24

	2023/24 £m
Budget NHS Tayside	
Recurring Budget 2022/23	143.478
2% Uplift on Recurring Budgets*	1.295
2% Uplift Prescribing*	0.548
2% Uplift General Medical and Family Health Services*	1.026
Additional Agenda for Change Funding 2022/23	tbc
2% Uplift on Additional 2022/23 Agenda for Change Funding	tbc
Total 2023/24 Recurring Budget	146.347
Additional Areas Funded Via Scottish Government Budget - Anticipated in 2023/24 **	
Multi Disciplinary Funding	1.271
Band 2-4 Funding	0.324
Primary Care Improvement Funding	4.515
District Nursing Funding (Year 4)	0.258
Alcohol & Drug Partnership	1.355
Mental Health Action 15	1.320
Total Additional Scottish Government Budget via NHS Tayside	9.043

*All uplifts are indicative until the 2023/24 Scottish Government and NHS Budget is finalised.

** Any uplift from Scottish Government on budgets not yet recurring is expected to be passed through to the IJB and in addition to the above.

	2023/24 £m
Budget Perth & Kinross Council	
Recurring Budget 2022/23	77.715
Local Government Pay Settlement	0.920
Total Recurring Budget 2022/23	78.635
Scottish Government Funding:	
Adult Social Care Pay Uplift in Commissioned Services	2.930
Free Personal Care Uplift	1.002
Reversal of Interim Care Funding	(0.638)
Total Scottish Government Funding	3.294
Total 2023/24 Recurring Budget	81.929

**PERTH & KINROSS INTEGRATION JOINT BOARD
REVENUE BUDGET 2023/24 TO 2025/26**

	23/24 £'000	24/25 £'000	25/26 £'000
EXPENDITURE PRESSURES - Health			
1 Pay - Core Health			
Additional costs from a pay increase to NHS Tayside employed staff, based on a planning uplift assumption of 2% per year, in line with the latest NHS financial planning assumptions.	769	784	800
2 Pay - Prison/Podiatry/Dental			
Additional costs from a pay increase to NHS Tayside employed staff, based on a planning uplift assumption of 2% per year, in line with the latest NHS financial planning assumptions. Year 1 pressure includes brought forward unfunded deficit.	477	233	238
Sub-Total Pay & Cost Pressures Health	1,246	1,017	1,038
3 Psychiatry of Old Age			
Following a review of the workforce in line with the Health and Care (Staffing) (Scotland) Act 2019, and recognised safe staffing tools, the inpatient Psychiatry of Old Age wards (x 3) at Murray Royal Hospital were shown to be significantly under establishment. This pressure relates to the cost of additional staffing to meet legislative duties ensuring safe and financially sustainable service delivery.	850	0	0
4 Hospital at Home			
Hospital at Home is a key Scottish Government strategy currently being implemented across Scotland. The purpose of the service is to reduce hospital admissions for elderly patients by providing treatments in the comfort and familiarity of their own home. This pressure relates to year 2 of the first phase of Hospital at Home investment, approved as part of the Older People Strategic Delivery Plan and financial plan in 2022/23.	175	0	0
5 Frailty Interim Care			

		23/24 £'000	24/25 £'000	25/26 £'000
EXPENDITURE PRESSURES - Health				
Frailty at the front door is an essential part of the discharge without delay programme. It ensures the co-ordinated and integrated response, rapidly assessing and discharging patients back to their own homes or a homely setting. This prevents delay in discharge, hospital acquired infection and delirium for older people. This team is currently in place, however current funding will cease in March 2024.		0	228	0
Sub-Total Older People Pressures Health		1,025	228	0
6 Integrated Management Learning Disabilities				
Through the integration of Autism / Learning Disability services, this pressure provides a team leader post for the new integrated team.		75	0	0
Sub-Total Learning Disabilities Pressures Health		75	0	0
7 Advanced Nurse Practitioners (ANPs) - Community Mental Health				
These posts (3 wte) are essential to deliver a safe and advanced practice service. This will strengthen the role of the community mental health teams in improving patient outcomes and reduce waiting times for specialist clinics. The role will deliver advanced skills relating to Mental Illness including assessment, diagnosis and prescribing. The ANPs are autonomously skilled practitioners that will compliment the overall medical and nursing workforce within mental health services. The ANPs were approved as part of the Community Mental Health Strategic Delivery Plan in 2022.		195	0	0
8 Primary Care Lead GP for Community Mental Health				
The lead GP enables appropriate access to mental health services from primary care, and is key to the redesign of Perth & Kinross community mental health teams. This role was approved as part of the Community Mental Health Strategic Delivery Plan, approved by the IJB in 2022.		25	0	0
Sub-Total Community Mental Health Pressures Health		220	0	0
Total Pressures Health		2,566	1,245	1,038

PERTH & KINROSS INTEGRATION JOINT BOARD
REVENUE BUDGET 2023/24 TO 2025/26

	23/24 £'000	24/25 £'000	25/26 £'000
EXPENDITURE PRESSURES - Social Care			
1 Pay			
Additional costs from a pay increase to Perth and Kinross Council employed staff, based on a planning uplift assumption of 3% per year, in line with the latest Council financial planning assumptions.	1,008	1,038	1,069
2 Care Home Contract Rates			
The uplift to the national care home contract is negotiated annually on a national basis, negotiations have not yet concluded and an assumption has been used to calculate this pressure. The uplift for 2022/23 was 5.6% for residential and 6.14% for nursing. This pressure assumes the rate for 2023/24 is increased at a similar level and for years 2 and 3, the assumed rate is lowered to 3.8%.	1,935	1,345	1,393
3 Real Living Wage for Adult Social Care			
A pay uplift for Adult Social Care workers in the third and independent sector has increased the hourly rate from £10.50 to a minimum of £10.90. This represents a 3.81% uplift. This pressure assumes 3.81% uplift for pay in all 3 years and also applies this uplift rate to non-pay elements of these contracts.	1,417	1,488	1,561
4 Free Personal Care Increase			
The uplift for Free Personal Care in 2023/24 has been set and confirmed by the Scottish Government at 9.51%. This increases the weekly free personal care residential rate to £233.10 and the nursing rate to £338.	596	631	684
5 External Transport Cost Increase			
The Public Transport Unit have advised they expect inflationary pressures to reach 9.4% for 2023/24.	65	0	0
Sub-Total Pay & Cost Pressures Social Care	5,021	4,502	4,707

		23/24 £'000	24/25 £'000	25/26 £'000
EXPENDITURE PRESSURES - Social Care				
6 Care at Home Demand				
The Older People population in Perth & Kinross is increasing, therefore the Older People Strategic Delivery Plan has recognised that additional funding will be required in future years to meet demand.	0	250	250	
7 Enhancing Capacity in Dementia Services				
The number of people with dementia in Perth & Kinross is predicted to increase by 23% over the next 10 years. Extra capacity is required in both inpatient and community services to meet increasing demand. Community services also need to be redesigned to support people with dementia who have complex needs. In 2023/24, we will work with partners to co-design the new model.	150	350	0	
Sub-Total Older People Pressures Social Care	150	600	250	
8 Learning Disabilities Demand				
The pressure reflects the full cost of new clients and increase in cost of existing clients. It is difficult to predict need in future years, therefore years 2 and 3 are based on the year 1 pressure.	386	386	386	
9 Learning Disabilities Transition				
Every year a predictable number of young people with a Learning Disability and/or Autism will transition from Education & Children's Services to Adult Social Work and Social Care. Despite early intervention the cost of many individuals' care packages is significant when they move to adult services.	611	566	566	
Sub-Total Learning Disabilities Pressures Social Care	997	952	952	
Total Pressures Social Care	6,168	6,054	5,909	

PERTH & KINROSS INTEGRATION JOINT BOARD
REVENUE BUDGET 2023/24 TO 2025/26

23/24 24/25 25/26
£'000 £'000 £'000

BUDGET REDUCTIONS AND SAVINGS - Health

<p>1 Vacancy Factor</p> <p>Proposal to increase the vacancy factor within non-inpatient health services to 5%, in line with the existing vacancy factor budget within Social Care. The vacancy factor being proposed is already being achieved through natural recruitment and turnover. The saving formally recognises this as available.</p> <p>Impact Analysis and Risk Assessment Promote Fairness/Reduce Inequality/Address Socio Economic Disadvantage: No significant impact identified Workforce: Front line regulated services protected Customer: No direct impact on patient experience Equalities/Diversity: No significant impact identified Outcome and Performance: No significant impact identified Strategic Commissioning Plan: No significant impact identified</p>	586	0	0
Sub-Total Central Reduction and Savings Health	586	0	0
<p>2 Vacancy Factor - Prison / Podiatry / Dental</p> <p>Proposal to increase the vacancy factor within Prison, Podiatry and Dental to 3%. The vacancy factor being proposed is already being achieved through natural recruitment and turnover. The saving formally recognises this as available.</p> <p>Impact Analysis and Risk Assessment Promote Fairness/Reduce Inequality/Address Socio Economic Disadvantage: No significant impact identified Workforce: Front line regulated services protected Customer: No direct impact on patient experience Equalities/Diversity: No significant impact identified Outcome and Performance: No significant impact identified Strategic Commissioning Plan: No significant impact identified</p>	291	0	0
Sub-Total Pay and Cost Reduction and Savings Health	291	0	0

23/24	24/25	25/26
£'000	£'000	£'000

BUDGET REDUCTIONS AND SAVINGS - Health

FUNDING - Health

3 Phase 3 of Older People Strategic Delivery Plan (OPSDP)			
The Older People Strategic Delivery Plan, approved by the IJB in March 2022, identified funding to be allocated in the next phase of implementation. This proposal utilises and allocates this funding to the pressures for Older People including Hospital at Home, Frailty Interim Care, Psychiatry of Old Age and enhanced capacity in dementia services. The funding originally identified within the OPSDP financial framework can now be allocated to meet these costs.	560	0	0
4 Scottish Government Uplift Funding			
Assumption of 2% pay and non pay uplift per year, in line with NHS financial planning assumptions. The uplift for Family Health and General Medical Services is not yet included in this figure but is expected to be c£1m per year. The uplift assumption for years 2 and 3 excludes Prescribing at this stage pending a revised financial plan.	1,462	921	940
Sub-Total Funding Health	2,022	921	940
Total Reduction, Savings and Funding Health	2,899	921	940

PERTH & KINROSS INTEGRATION JOINT BOARD
REVENUE BUDGET 2023/24 TO 2025/26

23/24 24/25 25/26
£'000 £'000 £'000

BUDGET REDUCTIONS AND SAVINGS - Social Care

<p>1 Care Home Placements Since 2019 there has been a downward trend in the number of people choosing a residential care/nursing home placement in Perth & Kinross. This can be partly attributed to improved community services and supports which enable people to live at home for longer. This saving removes the associated underspend. Impact Analysis and Risk Assessment Promote Fairness/Reduce Inequality/Address Socio Economic Disadvantage: No negative impact. Workforce: No impact. Customer: No significant impact. Each person assessed as requiring a care home placement will be awarded funding as required. Equalities/Diversity: No impact Outcome and Performance: The ongoing demand for care home placements will be monitored closely. Climate Change: No significant impact. Strategic Commissioning Plan: This proposal is in line with HSCP strategic direction to shift the balance of care.</p>	500	500	0
Sub-Total Older People Reductions and Savings Social Care	500	500	0
2 Transformation of Complex Care			

		23/24 £'000	24/25 £'000	25/26 £'000
BUDGET REDUCTIONS AND SAVINGS - Social Care				
<p>Investment was approved in 2022/23 supporting a transformation programme to develop a model of care providing high quality, financially sustainable support for people with complex care requirements. This included the creation of a specialist multi-disciplinary SCOPE team, a Technology Enabled Care (TEC) Overnight Responder Service, Positive Behavioural Support resources and the implementation of Core and Cluster Models. As a result, this will deliver savings associated with high cost and out of authority residential placements.</p> <p>Impact Analysis and Risk Assessment</p> <p>Promote Fairness/Reduce Inequality/Address Socio Economic Disadvantage: This will have a positive impact on people with a disability who are more likely to experience socio-economic inequalities due to factors such as reduced likelihood of being in employment.</p> <p>Workforce: None</p> <p>Customer: Improved range of community support for people with Learning Disabilities, their carers and families</p> <p>Equalities/Diversity: Will have a positive impact for people who have a disability in providing inclusive, increased community options for their care and support. People will reside closer to family and the communities of choice</p> <p>Outcome and Performance: Improved performance in shifting the balance of care towards community options</p> <p>Strategic Commissioning Plan: This is inline with the Strategic Deliver Plan for Learning Disabilities and Autism</p>		405	405	210
3	<p>Integrated Management Learning Disabilities</p> <p>Through the integration of Autism / Learning Disability services, this funding has been identified to create a team leader post for the new integrated team.</p> <p>Impact Analysis and Risk Assessment</p> <p>Promote Fairness/Reduce Inequality/Address Socio Economic Disadvantage: None</p> <p>Workforce: None</p> <p>Customer: None</p> <p>Equalities/Diversity: None</p> <p>Outcome and Performance: None</p> <p>Strategic Commissioning Plan: This supports the strategic plan in delivering integrated services.</p>	75	0	0
Sub-Total Learning Disabilities Reduction and Savings Social Care		480	405	210
4	Procurement and Commissioning Efficiencies			

		23/24 £'000	24/25 £'000	25/26 £'000
BUDGET REDUCTIONS AND SAVINGS - Social Care				
<p>In line with the strategic commissioning plan ensure there is a rolling programme of efficient procurement and commissioning to deliver best value and higher quality outcomes. Total budget £25million.</p> <p>Impact Analysis and Risk Assessment</p> <p>Promote Fairness/Reduce Inequality/Address Socio Economic Disadvantage: The HSCP strategic needs analysis will enable outcomes focussed commissioning and minimise any negative impact.</p> <p>Workforce: No impact</p> <p>Customer: Improved quality of services in social care.</p> <p>Equalities/Diversity: No negative impact</p> <p>Strategic Commissioning Plan: No significant impact.</p>		154	0	0
<p>5 Deletion of Vacant Posts</p> <p>In preparation for a challenging budget position from April 2023, the HSCP has applied vacancy management to all non-frontline posts. Posts that fell vacant between September 2022 and March 2023 were subject to assessment against an approved criteria. The criteria prioritised the recruitment of frontline roles in health care and social care and paused recruitment in some other areas. In addition, a review of posts which had remained vacant for more than 12 months was carried out. It is proposed that a small number of non-frontline posts are removed.</p> <p>Impact Analysis and Risk Assessment</p> <p>Promote Fairness/Reduce Inequality/Address Socio Economic Disadvantage: No impact.</p> <p>Workforce: Deletion of 5.23wte vacant posts from 1st April 2023 to achieve savings in year 1 and to bring forward a similar proposal to achieve savings in year 2.</p> <p>Customer: No impact on recipients of health and social care services delivered by HSCP.</p> <p>Equalities/Diversity: No impact.</p> <p>Outcome and Performance: Statutory requirements will be fulfilled. The impact on staff and managers will be minimal as these are mostly new posts that have never been recruited to or unfilled posts spread across different teams. Workloads will be re-assessed where required and staff will be provided with continued support.</p> <p>Strategic Commissioning Plan: No significant impact.</p>		325	175	0
Sub-Total Central Services Reductions and Savings Social Care		479	175	0

FUNDING - Social Care

6 Phase 3 of Older People Strategic Delivery Plan (OPSDP)			
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		23/24 £'000	24/25 £'000	25/26 £'000
BUDGET REDUCTIONS AND SAVINGS - Social Care				
	The Older People Strategic Delivery Plan, approved by the IJB in March 2022, identified funding to be allocated in the next phase of implementation. This proposal utilises and allocates this funding to the pressures for Older People including Hospital at Home, Frailty Interim Care, Psychiatry of Old Age and enhanced capacity in dementia services. The funding originally identified within the OPSDP financial framework can now be allocated to meet these costs.	668	0	0
7	Scottish Government Funding Allocation			
	Scottish Government funding allocated to support Real Living Wage costs for Adult Social Care and the uplift for Free Personal Care . The year 1 allocation has been confirmed by the Scottish Government. The year 2 and 3 allocations are assumed to remain at a similar level.	3,932	3,932	3,932
8	Scottish Government Uplift Funding			
	Assumption of 2% pay and non pay uplift per year, in line with NHS financial planning assumptions, for budgets that are transferred from NHS to support expenditure incurred in Social Care.	381	389	396
Sub-Total Funding Social Care		4,981	4,321	4,328
Total Reduction, Savings and Funding Social Care		6,440	5,401	4,538

Appendix 3

	Projected Balance 1 April 2023	Projected Expenditure 2023/24	Projected Balance 31 March 2024
	£m	£m	£m
<u>Earmarked Reserves</u>			
Alcohol and Drug Partnership	0.928	0.928	-
Community Living Change Fund	0.448	0.228	0.220
Mental Health Recovery & Renewal	0.264	0.264	-
Primary Care	0.289	0.289	-
Winter Resilience Reserve	0.464	0.464	-
Service Specific Reserve	1.492	1.172	0.320
	3.885	3.345	0.540
Health Reserves Fund- NHS Tayside	1.400	-	1.400
	5.285	3.345	1.940
<u>Unearmarked Reserves</u>			
General Reserve - Social Care	6.766	2.430	4.336
General Reserve - Health	1.412	1.412	-
Total General Reserves	8.178	3.842	4.336
Total IJB Reserves	13.463	7.187	6.276

PERTH AND KINROSS INTEGRATION JOINT BOARD**DIRECTION ISSUED UNDER S26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014**

1	Direction reference Number	G/23/37/2023	Direction reference to be superseded (if relevant)	n/a
2	Date of IJB	29 March 2023	IJB report reference	G/23/37
3	Report Title	2023-26 Budget		
4	Date from which direction takes effect	1 April 2023		
5	Direction to	NHS Tayside and Perth & Kinross Council		
6	Functions covered by Direction	All health and adult social care services covered by the Perth and Kinross Integration Scheme		
7	Reference to Strategic Plan	<p>Strategic Commissioning Plan Aims:</p> <ul style="list-style-type: none"> • Working Together with our Communities – people will have the health and care services they need within their local communities and be empowered to have greater control over their lives and stronger connections in their community. • Prevention and Early Intervention - support people to remain healthy, active and connected in order to prevent later issues and problems arising. • Person-Centred Health, Care and Support - put people at the heart of what we do. • Reducing Inequalities and Unequal Health Outcomes and Promoting Healthy Living - reduce health inequalities, increase life expectancy, increase people's health and wellbeing and reduce the personal and social impact of poverty and inequality. • Making Best Use of Available Facilities, People and Other Resources - use our combined health and social care resources efficiently, economically and effectively to improve health and wellbeing outcomes for the people of Perth and Kinross. 		

8	Full Text of Direction	Perth and Kinross Integration Joint Board directs Perth & Kinross Council and NHS Tayside to provide health and social care services, as commissioned by Perth and Kinross Integration Joint Board in line with the Perth and Kinross Strategic Commissioning Plan 2020-2025 , within the resources allocated as set out in this report, subject to formal notification from NHS Tayside as to the level of budget offer.
9	Budget allocated for the implementation of the Direction	Perth & Kinross Council - £81.929m NHS Tayside - To be confirmed after the NHS Tayside budget is set in April 2023.
10	Intended Outcomes to be delivered by this Direction	Progress in fulfilling the strategic ambitions contained within Perth and Kinross Integration Joint Board's Strategic Commissioning Plan 2020-2025 .
11	Performance monitoring requirements for this Direction	Performance will be monitored in accordance with the regular financial monitoring to the IJB and Audit and Performance Committee.
12	Review date	June 2023 (following receipt of NHS Tayside's formal budget offer)



PERTH & KINROSS INTEGRATED JOINT BOARD

29 March 2023

MENTAL HEALTH AND LEARNING DISABILITY IMPROVEMENT PLAN

**Jacquie Pepper Chief Officer/
Lead Partner for the co-ordination of strategic planning for inpatient mental
health and learning disability services
(Report No. G/23/38)**

PURPOSE OF REPORT

The purpose of this report is to bring forward a detailed Mental Health and Learning Disability Services Improvement plan for approval.

This plan was prepared in response to six recommendations set out in the final report of the Independent Oversight and Assurance Group into Tayside Mental Health Services published in January 2023. It is set in the context of a revised governance structure and work to refine the priorities which had been identified in the Living Life Well Strategy.

In line with section 6.6 of the Integration Schemes for Angus, Dundee and Perth and Kinross Integration Joint Boards, this report is submitted by the Lead Partner Chief Officer to each Integration Joint Board for approval, and, subsequently to NHS Tayside Board, before submitting the plan to Scottish Government by end of March 2023.

1. RECOMMENDATIONS

It is recommended that the IJB:

- (i) Approves the Mental Health and Learning Disability Services Improvement Plan;
- (ii) Authorises the Chief Officer for Perth and Kinross IJB as Lead Partner to submit the Mental Health and Learning Disability Services Improvement Plan to Scottish Government by 31 March 2023 following approval by the three Tayside Integration Joint Boards and consideration by NHS Tayside Board;

- (iii) Requests that the Chief Officer brings forward a further iteration of the Mental Health and Learning Disability Services Improvement Plan for approval by end of June 2023 which includes detailed plans for implementation in relation to the additional four priorities; and
- (iv) Notes the revised governance arrangements for the Tayside Mental Health and Learning Disability Whole System Change Programme.

2. SITUATION/BACKGROUND / MAIN ISSUES

- 2.1 The final report of the Independent Oversight and Assurance Group (IOAG) on Tayside's Mental Health Services was published on Wednesday 11 January 2023. The final report followed a 12-month period of engagement with a range of key stakeholders across Tayside. The IOAG's remit was to provide independent assurance to the Minister for Mental Wellbeing and Social Care about progress being made in relation to 49 recommendations made within Trust and Respect, the report of the Independent Inquiry into Mental Health Services in Tayside, Dr David Strang, published in February 2020.
- 2.2 The IOAG reflect positively within the report that, whilst there remain areas where the respective RAG assessments differ, there is now more of a shared view about some of the fundamental areas that require further improvement/attention. The IOAG met many individuals and groups across Angus, Dundee, and Perth and Kinross and NHS Tayside within the course of their work. Their discussions with the workforce, local organisations and people with lived experience was commented upon positively in terms of their keenness to listen and understand, offer constructive challenge and share experience. A number of local services and developments are highlighted as demonstrating good practice.
- 2.3 There are six areas of priority laid out in the report. The six priorities are set out in table 1 below.

Table 1 IOAG priorities

IOAG Priorities	
1	Progress on "single site"; Strathmartine; and delayed discharges <ul style="list-style-type: none"> Progressing the decision around single site provision in Tayside for inpatient mental health care The physical environment in Strathmartine which raised concerns for both patients and staff Addressing the issue of significant delayed discharges, meaning patients are kept in inpatients beds longer than they need to
2	Streamline and prioritise the change programme in support of Living Life Well <ul style="list-style-type: none"> Simplify governance arrangements Prioritise areas for improvement Put in place clear resource framework to support delivery
3	Making integration work <ul style="list-style-type: none"> Collaborative working to make the new arrangements work in practise A clear understanding of the role of each partner The role of TEP in providing leadership to ensure innovation flourishes and sustainable change can take place

4	Engaging the workforce <ul style="list-style-type: none"> • Resources, support, and leadership • Effective engagement in major decisions
5	Engaging with patients, families, partners, and communities <ul style="list-style-type: none"> • Build relationships • Meaningful engagement • Third sector as partners
6	Continued focus on patient safety <ul style="list-style-type: none"> • Systems, processes, and physical infrastructure to ensure patient safety across partners

- 2.4 A detailed improvement plan has been prepared which addresses these six priorities and this is provided at Appendix 1. Priority 1 seeks progress on the issue of dedicated site provision for inpatient adult mental health services and this is encompassed within a programme of work to redesign adult inpatient mental health services. Priorities 2 – 6 relate to actions which are already being taken forward and for which progress has been reported in previous reports to the IJBs and NHS Tayside Board.
- 2.5 In advance of the publication of the IOAG, the recently formed Executive Leadership Group and Programme Board for Tayside Mental Health Services had already begun to refine the priorities for a refreshed Mental Health and Learning Disability Whole System Change Programme. It is positive to see that there is significant overlap and agreement about the focus for a revised improvement programme and the areas identified by the IOAG.
- 2.6 The Executive Leadership Group and the Programme Board are in agreement that the improvement programme should also address four of additional key areas as priorities and that these should be developed in a similar format to set out key milestones and deliverables. It is proposed that these will be developed and presented as additions to the Mental Health and Learning Disability Services Improvement Plan improvement plan by end of June 2023. Together this will form the Mental Health and Learning Disability Whole System Change Programme for Tayside, our whole-system strategic plan for the next 2 years.
- 2.7 The additional priorities for the Mental Health and Learning Disability Whole System Change Programme which will be set out in a detailed improvement plan are:
- Whole Systems re-design of Learning Disability Services
 - Specialist Community Mental Health re-design
 - Crisis and Urgent Care Pathway
 - Integrated Substance Misuse and Mental Health Services
- 2.8 The development of the improvement plan set out in Appendix 1 has been underpinned by a series of engagements and opportunities to comment and influence the content of the plan. This has ensured that it has been prepared in the spirit of openness, transparency and with appropriate engagement on its content. The development of the plan has included discussion and commentary as follows:

- Executive Leadership Group 8 Feb and 15 March
- Programme Board 15 Feb and 9 March
- Tayside Executive Partners 28 Feb and 24 March

A series of opportunities to consult and engage has included:

- Members of Integrated Joint Boards
- Local Strategic Planning Groups in the three HSCPs
- Area Clinical Forum
- Stakeholder Participation Group
- Area Partnership Forum
- Workstream workshops which included stakeholder and health staff partnership representation

In addition, fortnightly engagement has taken place with the Lead Partner Chief Officer, members of the Programme Team, and Scottish Government Mental Health Directorate officials which has enabled external support and challenge in the process.

- 2.9 The table below is a reminder of the timeline previously approved for the development of a the plan.

Table 2 Timeline for the development and approval of a detailed action plan

8 Feb 2023	Strategic Leadership Group (now renamed the Executive Leadership Group)	Comment on draft plan & agree workstream leads
8 Feb – 7 Mar 2023	Workstream Leads	Develop <u>final</u> draft plan
15 Feb 2023	Programme Board Perth and Kinross IJB Angus IJB	Comment on draft plan Asked to approve refined priorities and timeline
23 Feb 2023	NHS Tayside Board	Asked to approve refined priorities and timeline
24-27 Feb 2023	Tayside Executive Partners	Asked to comment on draft plan
28 Feb 2023	Submit high level draft plan to Scottish Government	
15 Mar 2023	Executive Leadership Group	Comment on draft plan
w/b 20 Mar 2023	Programme Board Stakeholder Participation Group Tayside Executive Partners	Comment on <u>final</u> draft plan
27-30 Mar 2023	Perth and Kinross IJB Angus IJB Dundee IJB NHS Tayside Board	Approve <u>final</u> plan
31 Mar 2023	Submit <u>final</u> plan to Scottish Government	

2.10 Update on strengthening governance

In response to feedback from the IOAG, the Lead Partner Chief Officer has worked in collaboration with the Chief Officers for Angus and Dundee, the Executive Nurse Director as Lead for Mental Health and Learning Disability Services in NHS Tayside, the Medical Director for NHS Tayside, senior officers across partners and the programme team to:

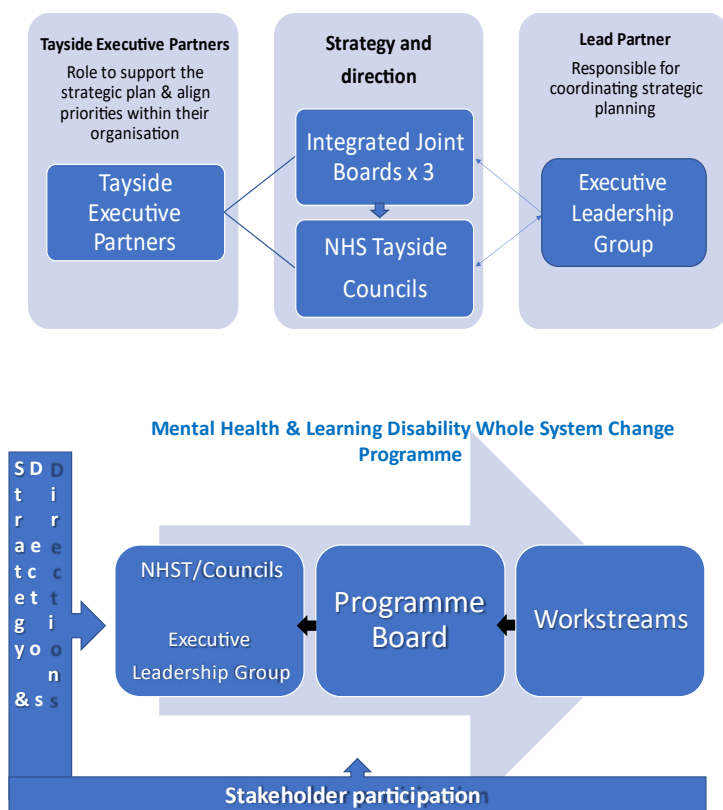
- Revise the governance arrangements, using existing structures and streamlining wherever possible;
- Take account of responsibilities set out in the revised Integration Schemes;
- Clarify decision-making & use of Directions by IJBs;
- Provide a forum to enable collaboration across the three IJBs;
- Resource a permanent programme team;
- Refine and clarify priorities for the 31 workstreams for Living Life Well;
- Provide leadership to increase pace of change and transformation and to focus on new models of care;
- Give prominence to developing a financial and resourcing framework to deliver the programme; and
- Ensure that meaningful engagement & co-production with people with lived experience and across the whole workforce are central to the work.

2.11 The Integration Scheme approved in June 2022 clarifies that operational management responsibilities for mental health and learning disability inpatient services rests with NHS Tayside and the Executive Lead for Mental Health and Learning Disabilities. The Scheme states that they will have in place appropriate reporting structures which provide adequate and effective oversight and assurance to the Integration Joint Board in relation to performance, professional, clinical and care governance. It also clarifies that the coordination of strategic planning for Inpatient Mental Health Services and Learning Disability Services is delegated to the Integration Joint Boards.

2.12 As previously reported, a review of the governance structures has been underway for Listen Learn Change and Living Life Well and soundings taken from the Tayside Executive Partners, the Strategic Leadership Group, members of the Integrated Leadership Group and the Programme Board.

2.13 A new streamlined arrangement takes account of the roles and responsibilities of the parties and delegated functions set out in the Integration Schemes. It also includes the introduction of an Executive Leadership Group (ELG) to bring together senior leaders and provide collective leadership of the whole-system change programme. This includes the introduction of Executive Sponsors for each element of the action plan/change programme. The Terms of Reference for the ELG are agreed and produced at Appendix 2. The Programme Board now reports to the ELG and the Terms of Reference are being refreshed to include a broader membership. These changes are designed to better support transformational change and strengthen reporting on progress to the Integration Joint Boards and NHS Tayside Board. The diagrams below illustrate the relationship and reporting lines.

Mental Health & Learning Disability Whole System Change Programme



2.14 A productive workshop took place on 30 January 2023 which involved the IJB Chairs, Vice Charis and Chief Officers supported by senior officers who led on the development of the revised integration schemes. The aims were to:

- To gain a deeper understanding of the Integration Scheme
- To explore the role and responsibilities of the Integration Joint Board
- To consider the role of the Chief Officer and Lead Partner arrangements
- To highlight the operation of Directions
- To have an open discussion on cooperation and collaboration across the three Tayside IJBs and opportunities for improving governance

This has provided a platform for cooperation across the IJBs and for integration to succeed. This is bringing about confidence in the authority of the IJBs to direct the strategic planning for mental health and learning disability inpatient services and new mechanisms for working together on shared aspirations for these services. The workshop will be of interest for all IJB members, and it was agreed that further sessions will be arranged.

2.15 The first of a series of relationship-building experiences involving senior managers and people with lived experience of mental health services and their carers took place on 30 November 2022. This was attended by 10 people and supported by Norman Drummond and Calum MacSween of Columba 1400 who gave their time and experience voluntarily. The Gannochy Trust have also provided a neutral venue free of charge. The experience was entitled *Leading*

Through Relationships and was extremely successful in building positive relationships, shared purpose, and values. This was followed by a second event on 12 December 2022. Participants felt listened to, safe and respected. This successful approach has now been considered by the Programme Board and viewed as a productive way to build relationships, involve people with lived experience, and to move from engagement to co-production. A proposal to resource this approach and embed this across the Mental Health and Learning Disability Whole System Change Programme will be brought forward.

3. CONCLUSION

- 3.1 This report updates the IJB on the current position in relation to mental health services across Tayside and steps being taken by the IJBs to strengthen cooperation and in making integration work in this complex area. The work of the Independent Oversight and Assurance Group into Tayside's Mental Health Services has concluded culminating in a final report published on 11 January 2023. The IOAG report sets out six priority areas for improvement and it is reassuring that these correspond closely to the reprioritisation of the Living Life Well workstreams which has been carried out. The Minister for Mental Health and Social Care has requested a detailed action plan which sets out how these six priorities will be addressed. The Mental Health and Learning Disability Improvement Plan has been developed in response to the Minister's request. A draft was prepared by end of February 2023 and over the last few weeks been considered by a number of important groups and stakeholders. This plan is presented to the each of the three Tayside IJBs for approval.

Author(s)

Name	Designation	Contact Details
Jacquie Pepper	Chief Officer	jpepper@pkc.gov.uk

NOTE: No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information), were relied on to any material extent in preparing this report.

1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

Strategic Implications	Yes / None
HSCP Strategic Commissioning Plan	None
Transformation Programme	None
Resource Implications	
Financial	Yes
Workforce	None
Assessments	
Equality Impact Assessment	None
Risk	None
Other assessments (enter here from para 3.3)	None
Consultation	
External	Yes
Internal	Yes
Legal & Governance	
Legal	None
Clinical/Care/Professional Governance	None
Corporate Governance	None
Directions	None
Communication	
Communications Plan	None

1. Strategic Implications

1.1 Strategic Commissioning Plan

There are no implications for the Perth and Kinross IJB Strategic Commissioning Plan at this stage.

2. Resource Implications

2.1 Financial

The Mental Health and Learning Disability Improvement Programme will require a financial framework which takes account of the budgets for the entire service landscape in order to support new models of care and a rebalancing towards community provision. This is now contained within the improvement plan as a key deliverable.

2.2 Workforce

There are no additional implications for the workforce at this stage.

3. Assessments

3.1 Equality Impact Assessment

Assessed as **not relevant** for the purposes of EqlA at this stage as this will be completed when the additional priorities for the Mental Health and Learning Disability Whole System Change Programme are developed.

3.2 Risk

The risks associated with a lack of clarity in relation to roles and responsibilities for mental health services are reduced as a result of the publication and approval of the revised integration scheme for 2022. The strategic risks relating to the Mental Health and Learning Disability Whole System Change Programme will be identified and reported in programme updates to the Integration Joint Boards.

3.3 Other assessments

Not applicable

4. Consultation – Patient/Service User first priority

4.1 External

This is described in section 2.8 of the report.

4.2 Internal

This is described in section 2.8 of the report.

5. Legal and Governance

Not applicable

6. Directions

Directions will be issued to NHS Tayside to deliver on the milestones set out in the Mental Health and Learning Disability Improvement Plan.

7. Communication

A communications plan has been prepared and will be initiated when the Scottish Government provides a response to the Mental Health and Learning Disability Improvement Plan.

2. APPENDICES

Appendix 1. The Mental Health and Learning Disability Improvement Plan
Appendix 2. The Terms of Reference of the Executive Leadership Group for the Mental Health and Learning Disability Whole System Change Programme

Tayside Mental Health and Learning Disabilities Improvement Plan

March 2023



Tayside Mental Health and Learning Disabilities Improvement Plan Mar23

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#	Recommendation Descriptor	Page
1	Adult Inpatient Redesign	3
2	Strathmartine Physical Environment	5
3	Address Significant Delayed Discharges	6
4	Streamline & Prioritise Change Programme	8
5	Make Integration Work	9
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	Appendix One: Map to National Indicators	14

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Priority 1:		Intended Outcome:	
Progress the decision about Adult Inpatient Redesign		Excellent care and treatment for people for whom inpatient treatment is the best option through a redesigned service model with a strong evidence base.	
Executive Sponsor:	Workstream Lead(s):	Responsible Officer(s):	
<ul style="list-style-type: none">Chief Officer, P&K HSCP (Lead Partner)	<ul style="list-style-type: none">General Manager, Inpatient Mental Health, Crisis, IHTT and Liaison, NHS TaysideClinical Lead, GAP Inpatients, NHS Tayside	<ul style="list-style-type: none">Chief OfficersMedical DirectorExecutive Nurse Director	
Delivery Timeline:		Route to Delivery:	
<ul style="list-style-type: none">Phase 1: July-2023Phase 2: Decision March 2026,Implementation Jul26-onwards		<ul style="list-style-type: none">Phase 1: Operational LinePhase 2: Programme	
Milestones:			
Phase 1: Plan to support sustainability of safe Inpatient care. The aim of this phase is to understand the current pressures on the system and develop a short term plan to support sustaining safe delivery of Inpatient care			
#	Timeline	Activity	
1	By 31Mar2023	Analysis of immediate pressures completed and shared with stakeholders which assists in decision-making about what actions may be required to maintain stable service in short term.	
2	By 30Apr2023	Appraisal and costing of estate options is completed alongside stakeholders, to include consideration of wider estate to support short term service continuity.	
3	By 31May2023	Equality Impact Assessment to be undertaken to assess the impact of all options. Approval of a plan for rapid whole-system engagement on short-term stability and continuity options. Communication and engagement with wider group of internal and external stakeholders, prior to submitting a plan for a rapid short term contingency for approval by NHS Tayside.	
4	By 30June2023	Options paper presented to NHS Tayside which aligns with progress of other work streams to support change.	
5	By 31Jul2023	Clarity on timescale for Implementation of short-term contingency alongside ongoing engagement with people using the service.	
Phase 2: Mental Health Needs Analysis, Option appraisal and development of an implementation and evaluation plan with timelines. The aim of this phase is to understand the current and future mental health service needs of the population of Tayside and come to an agreed plan for redesigning MH services to best meet that need both now and for the next 20 years. This phase includes ongoing engagement with our communities, through analysis, development and scoring of options.			
Definition of a health needs analysis A health needs assessment is ‘a systematic method of identifying unmet health and healthcare needs of a population and making changes to meet these unmet needs.’* It includes a quantitative approach to enumerate the size and scale of the problem alongside a			

Tayside Mental Health and Learning Disabilities Improvement Plan Mar23

<p>qualitative assessment of the nature and meaning of the problem from the perspective of those who experience it. It typically has three parallel assessments: Epidemiological analysis, Comparative analysis and Corporate analysis</p>		
#	Timeline	Activity
6	By 31Mar2024	Epidemiological analysis and prepare data plan in order to describe the mental health needs of people in Tayside, to inform future service provision and planning.
7	By 30Sep2024	Implement data plan
8	By 30Nov2023	Workforce and recruitment analysis completed
9	By 31Jan2024	Review of existing service (Inpatients, Outpatients, Emergency Dept, community including crisis hub, primary care i.e. all MH services) is completed. This will include an equality impact assessment.
10	By 30Jul2024	Comparative analysis completed – review of best practice models via literature search and also by learning from and about Mental Health services in other Health Boards and other parts of the UK. This may include a site visit and time with service leads. This would then allow a gap analysis to be undertaken – identifying areas where NHS Tayside could learn from/improve.
11	By 31Jan2025	Corporate analysis completed – stakeholder engagement – review/consider findings alongside on the ground expertise and experience to help shape option appraisal
12	By 31Mar2025	Modelling of options incorporating cost analysis, with forecasted projections by working with Whole System Modelling Team. Model existing service using historical trends and then use Scottish Burden of Disease analysis and epidemiological analysis of service pressures to both assess existing pressures and project forwards to assess what impact that will have on the service. Future projections can then be translated across to other scenarios (as identified from the options appraisal to assess impact of different service models. Incorporate an economic analysis and generate a modelled costed options appraisal alongside the rest of the Needs analysis.
13	By 30Jun2025	Option appraisal development - Pull together all the information gathered to develop a fully costed options appraisal. This would include equality impact assessments of each option.
15	By 31Dec2025	Consultation with our communities on the results of the option appraisal
14	By 31Mar2026	The 3 x IJBs and NHS Tayside Board will consider the Options Appraisal and will make a decision about which option to pursue, including agreement on the resourcing for the preferred option and considering both service needs now and potential service needs over the next 20 years
16	By 30Jun2026	Agree a detailed implementation plan, governance, evaluation plan and timelines which clearly sets out the involvement of staff, service users and providers in the design and implementation of the new inpatient model. Alongside this review the data/intelligence plan to ensure fit for purpose and adapt as appropriate.
17	July2026 onwards	Implementation - preferred option is fully enacted and evaluated using performance, safety, financial and health intelligence data.

*(Wright J, Williams R, Wilkinson JR. Development and importance of health needs assessment. BMJ 1998;316 (7140):1310-13. doi: 10.1136/bmj.316.7140.1310)



Priority 2: Improve Strathmartine Physical Environment		Intended Outcomes: <ul style="list-style-type: none">• Significant reduction in volume of environment-related incidents,• Improved experience for people receiving care in Strathmartine	
Executive Sponsor: <ul style="list-style-type: none">• Director of Facilities	Workstream Lead(s): <ul style="list-style-type: none">• General Manager, Inpatient Learning Disability Service, NHS Tayside		Responsible Officer(s): <ul style="list-style-type: none">• General Manager, Inpatient Learning Disability Service
Delivery Timeline: Aug 2023		Route to Delivery: Operational Line	
Milestones:			
#	Timeline	Activity	
1	By 28Feb2023	Analysis of current environment has been completed.	
2	By 30Jun2023	Plans are brought forward for a whole system redesign of Learning Disability Services, including consideration of the whole available estate.	
3	By 31Aug2023	Environmental concerns that can be resolved within current provision have been attended to, with the appropriate maintenance agreements in place.	
4	By 31Aug2023	Re-evaluation of the current LD Inpatient environment has taken place, including the views of people who need and use this service. If satisfactory, moves to Business as Usual. If not, repeat steps 1, 3 and 4.	

Tayside Mental Health and Learning Disabilities Improvement Plan Mar23



Priority 3: Address significant delayed discharges		Intended Outcome: People are able to leave hospital without delay, to home or community with the support they need.	
Executive Sponsor: <ul style="list-style-type: none">Chief Officer, Angus HSCPChief Officer, Dundee HSCPChief Officer, P&K HSCP	Workstream Lead(s): <ul style="list-style-type: none">Head of Community Health and Care Services, Angus HSCPMH&LD Strategic Commissioning Lead/ Locality Manager, Dundee HSCPMental Health Strategic Lead, P&K HSCP		Responsible Officer(s): <ul style="list-style-type: none">General Managers and Inpatients, Strategic Commissioning Leads
Delivery Timeline: March 2024		Route to Delivery: Programme	
Milestones:			
#	Timeline	Activity	
1	By 30April2023	Reasons for significant delay are understood and acted upon. Other relevant services including housing and welfare rights are active participants. Improvement work is underpinned by accurate delayed discharge reports to enable improved tracking of performance.	
2	By 31July2023	There is a personalised planning process for discharge in place, and information is available on progress and plans for all Inpatients	
3	By 31July2023	Effective joint and multi-agency/ disciplinary working between Inpatients and Community is embedded into ways of working. This should include relevant agencies and organisations who are involved in discharge planning process.	
4	By 31Oct2023	Mental Health Planned date of discharge is reliably embedded within GAP Inpatient pathways, underpinned by inclusive approaches to patient involvement.	
	By 31Oct2023	Learning Disabilities Planned date of discharge is reliably embedded within LD Inpatient pathways, underpinned by inclusive approaches to patient involvement.	
5	By 30Nov2023	Mental Health A strategic needs assessment in relation to the factors influencing delayed discharges has been completed to support future commissioning of care and support to reduce delays in hospital for people with mental health needs.	
	By 31Dec2023	Learning Disabilities A strategic needs assessment in relation to the factors influencing delayed discharges has been completed to support future commissioning of care and support to reduce delays in hospital for people with learning disability needs.	
6	By 31March2024	Mental Health A commissioning plan is in place to support people with learning disabilities and which will; reduce the likelihood of unnecessary admissions to hospital; reduce the likely hood of unnecessary delays once people are ready for discharge; ensure that community health and	

Tayside Mental Health and Learning Disabilities Improvement Plan Mar23

	By 31March2024	social care resources are increased to avoid admission to, and support timely discharge from, hospital wherever possible. Learning Disabilities A commissioning plan is in place to support people with mental health needs and which will; reduce the likelihood of unnecessary admissions to hospital; reduce the likelihood of unnecessary delays once people are ready for discharge; ensure that community health and social care resources are increased to avoid admission to, and support timely discharge from, hospital wherever possible.
7		Moves to Business as Usual.

This work will be underpinned by ongoing conversation with people who use and need our services, as well as with carers and third sector delivery partners, to ensure people understand the processes being put in place as well as seeking their views as part of how we evaluate revisions to the service.

Tayside Mental Health and Learning Disabilities Improvement Plan Mar23



Priority 4:		Intended Outcome:	
Streamline and Prioritise the LLW Change Programme		Streamlined programme, clear governance, appropriate resources for the changes needed.	
Executive Sponsor: <ul style="list-style-type: none">Chief Officer, P&K HSCP (Lead Partner)	Workstream Lead(s): <ul style="list-style-type: none">Programme Manager, Mental Health Whole System Change Programme		Responsible Officer(s): <ul style="list-style-type: none">Chief Officers, Medical Director, Executive Nurse Director
Delivery Timeline: <ul style="list-style-type: none">Implement June23Review June24		Route to Delivery: Executive Leads and Programme	
Milestones:			
#	Timeline	Activity	
1	By 31Mar2023	The governance arrangements for the Whole-System LLW Change Programme are agreed by all Parties through a formal report to NHS Tayside Board and the three Integration Joint Boards. By end of March 2023 the priorities for a refreshed Programme are reviewed and agreed. Completed for Perth and Kinross IJB 15 Feb 2023.	
2	By 30Apr2023	Revised governance structures for the Whole System Change Programme will be approved across all parties with revised terms of reference and membership of the Mental Health and Wellbeing Programme Board. The role of each partner in the Integration Scheme, the priorities, roles and responsibilities will be set out in easy to understand Governance diagrams.	
3	By 30Jun2023	The resourcing framework to support delivery of a Whole System Change Programme is agreed and in place, including an outline financial plan.	
4	By 30Jun2023	The Executive Leadership Group is providing collaborative leadership across the whole system change programme. and the Strategic Programme Board is taking responsibility for the delivery of the revised and refined Whole System Change Programme - the system "to be". The role of the Integrated Leadership Group is clarified as working together to manage the system "as is".	
	By 30Sep2023	Detailed Financial Framework including agreed financial recovery actions for inpatient services will be reported to IJBs and NHS Tayside	
5	By 30Apr2024	There will be a review and evaluation completed of the effectiveness of how we are making integration work and improvements identified and actioned.	
6		Moves to Business as Usual.	

Tayside Mental Health and Learning Disabilities Improvement Plan Mar23



Priority 5: Make Integration work		Intended Outcome: Clear and effective arrangements for integration in place, which supports collaborative leadership across partners and sustainable strategic change and innovation. Clarity for staff and the general public with regards to the roles and responsibilities of each organisation across Tayside. Clear governance and decision-making structures.
Executive Sponsor: Chief Officer, Angus HSCP	Workstream Lead(s): <ul style="list-style-type: none"> Chief Officer Angus HSCP Chief Officer Dundee HSCP Chief Officer Perth & Kinross HSCP 	Responsible Officer(s): <ul style="list-style-type: none"> Chief Officers, Medical Director, Executive Nurse Director
Delivery Timeline: June 2023, review April 2024		Route to Delivery: Executive Leads and IJB Chairs
Milestones:		
#	Timeline	Activity
1	By 30Jun2022	Revised Integration Schemes (IS) drafted, consulted upon with communities, updated based on feedback, and approved. The IS include the delegation of responsibility for the strategic planning and coordination for inpatient mental health and inpatient learning disability services to IJBs and to the Chief Officer of Perth and Kinross IJB as lead partner. - Complete.
	By 30Jun2023	Approval of revised Directions Policy for each IJB which sets out how decisions and directions in relation to strategic planning for inpatient services will work in practice through approval by all IJBs, ensuring effective consultation at a local level, and therefore have regard to the needs of all communities in Tayside.
2	By 30Jun2023	Collaborative working arrangements in place to make the new integration arrangements work in practice.
3	By 31Oct2022	Programme support team appointed on a permanent basis, funded by all partner organisations to support change programme.
4	By 30Nov2022	Integration Schemes approved by 3 IJBs and Scottish Government. - Complete
5	By 30Apr2023	Revised governance structures for a Whole System Change Programme will be approved across all parties with revised terms of reference and membership of the Mental Health and Wellbeing Programme Board. The role of each partner in the Integration Scheme, the priorities, roles and responsibilities will be set out in easy to understand Governance diagrams.
6	By 30Apr2023	There will be agreed re-prioritisation for the whole-system change programme work for 2023-2025, taking cognisance of the work progressing within each of the HSCP areas related to their Strategic Commissioning Plans and respective Mental Health and Wellbeing Plans.
7	By 30Jun2023	Staff, service users, and their careers, and the general public will have clear information about what is going to change, what will be different for them, who will be responsible for making the change and how they can take part.

Tayside Mental Health and Learning Disabilities Improvement Plan Mar23

8	By 30Jun2023	The Executive Leadership Group is providing collaborative leadership across the whole system change programme to ensure innovation flourishes and sustainable change can take place in line with the integration scheme and revised governance structures.
	By 30Jun2023	The Integrated Joint Boards and NHS Tayside Board have clear systems in place to ensure appropriate directions are provided and decisions made.
9	By 30Apr2024	There will be a review and evaluation of the effectiveness of how we are making integration work and improvements identified and actioned.
10		Moves to Business as Usual

Tayside Mental Health and Learning Disabilities Improvement Plan Mar23



Priority 6: Engage the Workforce		Intended Outcome: An engaged workforce who feel listened to, involved and engaged in service design, evidenced through feedback and participation in major decisions.	
Executive Sponsor: Executive Nurse Director, NHS Tayside		Workstream Lead(s): <ul style="list-style-type: none">Operational Medical Director Mental Health & Learning Disability Services, NHS TaysideNurse Director Mental Health & Learning Disability Services, NHS TaysideHSCP Chief Officers x 3	
		Responsible Officer(s): <ul style="list-style-type: none">General Managers and Strategic Commissioning LeadsClinical Leaders	
Delivery Timeline: Dec 2023		Route to Delivery: Programme	
Milestones:			
#	Timeline	Activity	
1	By 30Jun2023	A workforce development and engagement plan and work at a system-wide level around culture, is agreed.	
2	By 31Aug2023	A review and refresh of leadership training, for key staff groups (Senior Nurses test), which includes how to engage staff and service users in service design, is in place.	
3	By 31Jul2023	The arrangements for monitoring progress against the workforce development plan are agreed and in place.	
4	By 30Sep2023	A Codesign and Coproduction Plan is agreed and implemented.	
5	By 31Dec2023	An evaluation of the extent to which change is being coproduced by people who work in our services has been completed and used to inform the next cycle of planning.	
6		Moves to Business as Usual.	


Priority 7:

Engage with patients, families, partners and communities

Intended Outcome:

Patients, family, friends, carers and the wider community are partners in the change programme and in redesigning new models of care. Stakeholder consultation will be a core element throughout the Whole System Change Programme. Leading through relationships - started in December 2022 will be expanded to all of the workstreams to build a broad platform of working in equal partnership throughout the programme. Appropriate systems will be in place throughout the whole system of care to enable co-production, meaningful engagement and feedback, and relationship building.

Executive Sponsor:

Chief Officer, Angus HSCP

Workstream Lead(s):

- Head of Community Health and Care Services, Angus HSCP
- MH&LD Strategic Commissioning Lead/Locality Manager, Dundee HSCP
- Mental Health Strategic Lead, P&K HSCP

Responsible Officer(s):

- General Managers and Strategic Commissioning Leads

Delivery Timeline:

Aug 2024

Route to Delivery:

Programme

Milestones:

#	Timeline	Activity
1	By 31May2023	There will be a shared understanding across the whole system of care regarding current approaches to leading together and co-production. Good practice will be shared and new mechanisms for supporting meaningful engagement, collating views and experiences will involve all relevant stakeholders/groups who support the engagement, building relationships; with the Third Sector as partners in this work.
2	By 30Jun2023	Data about current engagement methods/stakeholders/groups will be analysed and any gaps identified. With good practice highlighted.
3	By 30Sep2023	A co-design and co-production Plan will be agreed and implemented across the whole system of care, with independent support provided from Healthcare Improvement Scotland to support this work. Patients, carers, family, friends and the wider community will be supported to meaningfully engage in planning. Key performance and quality indicators will be established and monitoring systems put in place.
4	By 31Jan2024	A co-evaluation tool will be developed and tested which measures the impact of the change that will be undertaken.
5	By 30Jun2024	A co-produced evaluation of the impact of the change will be completed. The outcomes will inform the effectiveness of the processes, highlight good practice and identify areas for improvement.
6	By 31Aug2024	Learning will be shared with all stakeholders. This will inform the next cycle of planning and improvement.
7		Moves to Business as Usual.

Tayside Mental Health and Learning Disabilities Improvement Plan Mar23



Priority 8: Continue to focus on Patient Safety		Intended Outcome: All patients will experience high quality, safe and person centred care every time.																								
Executive Sponsor: Medical Director, NHS Tayside	Workstream Lead(s): <ul style="list-style-type: none"> Operational Medical Director, Mental Health & Learning Disability Services, NHS Tayside Director of Nursing, Mental Health & Learning Disability Services, NHS Tayside 	Responsible Officer(s): <ul style="list-style-type: none"> Heads of Service/Strategic Commissioning Leads, General Managers, Clinical Leads, Clinical Directors 																								
Delivery Timeline: Sep 2023 with the arrangements to monitor the outcome transferred into an ongoing programme centred on Least Restrictive Practice, reviewed in Sep2024		Route to Delivery: Clinical Governance arrangement and reporting																								
Milestones: <table border="1"> <thead> <tr> <th>#</th><th>Timeline</th><th>Activity</th></tr> </thead> <tbody> <tr> <td>1</td><td>By 31Jul2023</td><td>The required scope of the continued focus on patient safety work will be developed in collaboration with stakeholders.</td></tr> <tr> <td>2</td><td>By 31Jul2023</td><td>The draft Terms of Reference for a patient safety collaborative/group will be developed to include: <ul style="list-style-type: none"> scope and focus role and remit governance reporting chair and deputy chair membership </td></tr> <tr> <td>3</td><td>By 31Aug2023</td><td>The draft Terms of Reference is agreed and ratified through the Programme Board</td></tr> <tr> <td>4</td><td>By 30Sep2023</td><td>The revised Tayside Mental Health Patient Safety Collaborative will have had its first meeting</td></tr> <tr> <td>5</td><td>By 30Sep2024</td><td>A 1-year review of the Patient Safety Collaborative against the Terms of Reference will be completed to inform any required developments/changes.</td></tr> <tr> <td>6</td><td></td><td>Moves to Business as Usual.</td></tr> <tr> <td></td><td></td><td></td></tr> </tbody> </table>			#	Timeline	Activity	1	By 31Jul2023	The required scope of the continued focus on patient safety work will be developed in collaboration with stakeholders.	2	By 31Jul2023	The draft Terms of Reference for a patient safety collaborative/group will be developed to include: <ul style="list-style-type: none"> scope and focus role and remit governance reporting chair and deputy chair membership 	3	By 31Aug2023	The draft Terms of Reference is agreed and ratified through the Programme Board	4	By 30Sep2023	The revised Tayside Mental Health Patient Safety Collaborative will have had its first meeting	5	By 30Sep2024	A 1-year review of the Patient Safety Collaborative against the Terms of Reference will be completed to inform any required developments/changes.	6		Moves to Business as Usual.			
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Tayside Mental Health and Learning Disabilities Improvement Plan Mar23

Appendix One: Mapping of work streams to draft National Mental Health Indicators

Measurement plans are in the process of being prepared for all work streams, in order to ensure that progress and achievement of outcomes is well evidenced. There is a connection to the work elsewhere to develop national Mental Health indicators. An initial mapping of work streams to the indicators in development has been undertaken and is summarised in figure 1. Descriptions of the indicators and a link to the source publication are also provided.



Glossary of Indicator Descriptions

Timely –

T1 % of people who commence Psychological therapy-based treatment within 18 weeks of referral.

T2 % of young people who commence treatment by specialist Child and Adolescent Mental Health services within 18 weeks of referral.

T3 % of people who wait less than three weeks from referral received to appropriate drug or alcohol treatment that supports recovery.

Safe –

S1 suicide rates per 100,000 population.

S2 % of all discharged psychiatric inpatients followed-up by community mental health services within 7 calendar days.

S5 incidents of physical violence per 1,000 occupied psychiatric bed days.

Effective –

E1 number of days people spend in hospital when they are clinically ready to be discharged per 1,000

Reference

[Quality Indicator Profile for Mental Health \(publichealthscotland.scot/\)](https://publichealthscotland.scot/)

APPENDIX 2

Executive Leadership Group**Mental Health & Learning Disabilities Whole System Change Programme****TERMS OF REFERENCE**

Author:	Jacque Pepper, Chief Officer/Lead Partner
Executive Director Responsible:	Jacque Pepper, Chief Officer/Lead Partner
Governance or Assurance Committee	Reporting to <ul style="list-style-type: none"> • NHS Tayside Board • Angus Integrated Joint Board • Dundee Integration Joint Board • Perth & Kinross Integration Joint Board
Version Number Date	1 21 February 2023
Review Date	End of March 2024
Responsible Person	Jacque Pepper, Chief Officer/Lead Partner

Executive Leadership Group: Mental Health & Learning Disabilities Whole System Change Programme**1. Purpose: Strategic Leadership, Direction & Scrutiny**

Provide a whole-system strategic leadership forum to provide leadership and direction to the Mental Health & Learning Disabilities Whole System Change Programme Board;

Provide collective and collaborative leadership for the delivery of the **Mental Health & Learning Whole System Change Programme** and for achieving the best possible care and treatment for the people of Tayside;

Oversee progress and successful implementation of the Mental Health & Learning Disabilities Whole System Change Programme ensuring appropriate priority and pace to the delivery of the **detailed improvement plan** to deliver on the recommendations set out in the final report of the Independent Oversight and Assurance Group (January 2023) and additional priorities approved through the governance route;

Ensure a coherent approach to the coordination and interface of whole system change activity with business-as-usual activity, including the resolution of competing demands;

Jointly scrutinize, support and challenge progress and provide overall assurance that the change programme is delivering the expected benefits at the required pace;

Providing strategic direction for a whole system model of care with optimal resourcing at each tier of care driven by need, and, where possible supports a shift in the balance of care from acute inpatient services to high quality prevention and early intervention at a community level;

Devise and deliver a Mental Health Property Strategy for inpatient mental health and learning disability services and community services;

Ensure a Financial Framework to support the delivery of the programme;

Provide strategic direction for whole system communications, engagement and co-production/design activity;

Provide strategic direction for managing whole system risks and dependencies for the programme;

Provide strategic direction on deployment of resources to ensure programme support, project prioritization and support for delivery; and

Promote an energized culture focused on transformation and whole-system collaborative working.

2. Membership

The membership will be:

1. Chief Officer for Perth and Kinross IJB/Lead Partner Coordination of Strategic Planning (CHAIR)
2. Chief Officer for Angus IJB
3. Chief Officer for Dundee IJB
4. NHST Medical Director
5. NHST Employee Director
6. NHST Executive Nursing Director
7. NHST Director of Facilities
8. NHST Director of Finance
9. NHST Director of Corporate Communications & Engagement

Also attending in support:

- Senior Responsible Officer for Programme Board
- Associate Director Improvement
- Operational Medical Director Mental Health and Learning Disabilities
- Nurse Director Mental Health and Learning Disabilities
- Members of the Programme Team, Workstream leads as required

3. Quorum

A quorum will exist when FOUR members are present at the meeting.

4. Frequency of meetings

The group will meet monthly until April 2024 and at this point the TOR will be reviewed.

Timing of meetings will be scheduled to ensure a timely flow of information from the Mental Health & Learning Disabilities Whole System Change Programme Board and reporting through the governance routes to NHS Tayside Board and the Integration Joint Boards.

Ad-hoc meetings can be called as required.

5. Agenda and Papers

The agenda and supporting papers will be relevant to the business of the day and sent out at least 5 working days in advance of the meeting.

The target day for distribution of minutes will be 1 working week following each meeting.

Secretariat support will be arranged through the Programme Team.



PERTH AND KINROSS INTEGRATION JOINT BOARD

29 MARCH 2023

3-YEAR WORKFORCE PLAN UPDATE

Report by Chief Officer
(Report No. G/23/39)

PURPOSE OF REPORT

This report provides an update on progress against the actions within the 3-Year Workforce Plan for health and social care in Perth and Kinross.

1. RECOMMENDATIONS

It is recommended that the IJB:

- (i) Notes the progress towards the achievement of actions within the 3-Year Workforce Plan

2. BACKGROUND

The 3-year Workforce Plan for Health and Social Care was approved by the IJB in June 2022. The plan sets out what is required to have a workforce of the right size, with the right skills, in the right place, at the right time. The workforce challenges are immense and are not only being experienced locally but in health and social care across the country.

The plan sets out Partnership-wide strategic actions as well as actions required at staff group level. It should be noted that there are several actions which are not directly within our control. Where this is the case, we have set out an intention to raise issues to the appropriate arena.

Feedback from the Scottish Government on the 3-year plan was positive, '*...a well organised and reasonably detailed description of main challenges...*' with a small number of areas for further development; these focus on improving data, demonstrating the links with other partnerships across Tayside and further consideration of the impact that digital solutions could have on future workforce requirements.

3. GOVERNANCE ARRANGEMENTS

A Steering Group has been established, consisting of Service Leads for staff groupings. The Group meets monthly to review the action plan, resolve problems as they arise and consider whether any revisions to the plan are required. The Terms of Reference ensure regular updates to the health and Social Care Management Team and the Perth and Kinross Partnership Forum. Six-monthly updates will be provided to the IJB in March and September each year.

Following review of the actions it is proposed that five actions are removed or amended as they overlap, and four actions will be amended as follows:

- To provide equity for all staff, work with partners to address the gender pay gap in Perth & Kinross changes to *'to provide equity for all staff, we will work with partners to address any unequal pay gaps'*,
- Understand and evaluate learning requirements to identify areas for growth changes to *'enabling learning to support skilled and confident workers who flourish'*,
- Work with PKC, schools, colleges, higher education and Third/Independent Sector partners in a training academy approach to address supply changes to *'working collaboratively with PKC, schools, colleges, Higher Education and across the HSCP to enable, inspire and motivate people to aspire towards careers in care'*,
- Create a Partnership wide framework to improve flexibility across the Partnership, ensuring we have the right people in the right place with the right skills at the right time changes to *'create a Partnership wide framework to improve flexibility and passporting of skills across the Partnership, ensuring we have the right people in the right place with the right skills at the right time'*.

4. PROGRESS UPDATE

Progress on partnership-wide strategic actions are included at Appendix 1, progress on staff group level actions are at Appendix 2. Overall, positive progress is being made and this update shows those areas where we are making steady progress and those where a further layer of challenge in progressing actions has been experienced, such as where this year's winter pressures have got in the way.

Key highlights in this 6-month update include:

Recruitment

Social care was identified as being a particularly challenging area for recruitment with consistently high numbers of vacancies. A specific plan for social care has been implemented. Actions which have been taken include:

- enhancing the use of social media – using Facebook, Twitter etc to circulate vacancies together with blogs and videos of positive stories of people currently working in social care
- advertising on billboards, buses, bus stops, bin lorries
- stalls at community events
- social care stall at the Job Centre
- information sessions at local schools and colleges

This has contributed to over 80 people applying for HSCP social care posts, which is considerably more people than we would normally have applying for these posts.

The Nursing Directorate and Allied Health Professions Directorate of NHS Tayside have been actively supporting International Recruitment and have successfully appointed employees from outwith the UK to posts locally. NHS Tayside HR have supported all aspects of this approach and our Professional Education teams have created a range of resources to support new employees.

NHS Tayside is in the process of establishing an Agenda for Change Generic Template Job Description Library. NHS Tayside holds over 5,000 job descriptions in the Job Evaluation TURAS system and, this includes health posts within the Health & Social Care Partnerships. The creation of the library is to streamline and consolidate many existing job descriptions into a suite of generic template job descriptions to assist with ongoing recruitment. There has been a call out for nominations from professional groups representatives to support this piece of work by participating in a short life working group and this will include Nursing and Allied Health Professional representation.

Developing roles

Psychiatry of Old Age in-patients have commenced the employment of Associate Practitioners. These staff have skills and experience in specific areas of clinical practice. Although they are not registered practitioners, they have a high level of skill through their experience and training.

The NHS Tayside Nursing Directorate and AHP Directorate have been actively supporting the creation of Advanced Practitioner opportunities across all services and are developing Competency Frameworks. This provides both opportunities to support development of new roles and attract applicants to these highly attractive emerging posts. There is also scope to develop in-house Academy Models, offering the opportunity to develop from within our existing workforce.

The opportunity to develop within the existing ASWSC workforce continues. For example, there are currently 5 people in the HSCP undergoing training for the professional Social Work qualification.

The Nursing Directorate and AHP Directorate have been actively supporting the principles of supporting our Healthcare Support Workers using the

opportunities that the NES Development and Education Framework for Healthcare Support Workers brings, such as developing new Assistant Practitioners roles, Fast Track into Nursing Opportunities.

Our P&K Trauma Approach Co-ordinator started in the role in February.

The Scottish Government, COSLA and partners have a shared ambition for a trauma informed workforce and services across Scotland and have invested in the development of the National Trauma Training Programme led by NHS Education for Scotland (NES). The P&K Trauma Approach Co-ordinator will work collaboratively to co-produce, develop and implement a local strategy and action plan that embeds the principles of Trauma Informed Practice across all staff and services within Perth & Kinross.

Data

A pan-Tayside data group has been established to co-ordinate and collate workforce information to meet the requirements of the Workforce Planning Groups and the local Workforce Strategies. This will ensure that data, analysis and benchmarks are available to support workforce planning by employers.

Monthly vacancy update data sheets are completed by all services in P&K HSCP and used to generate a monthly report that enables us to monitor the nurse vacancy factors across the HSCP. This is enabling us to highlight hotspots and monitor the trend over a period of time.

Agency and bank nursing usage is monitored and shared weekly with Locality and service managers. This data is cross referenced against out vacancies, again to highlight hotspots in our services and provide mitigation in those areas that require high usage of bank and agency coverage.

Most clinical nursing areas have tested workforce tools as a lead-in to this going live. Allied Health Professions have also been involved in supporting workforce template activity, based on the Common Staffing Method, and have been supported in running test activity by Healthcare Improvement Scotland. Part of this approach involves a data collection "snapshot" task which assists in producing a data informed report about that service and its workforce status, which can be utilised to support service provision discussions.

5. CONCLUSION

We continue to experience increasing demand and the consequent challenges to capacity across the Partnership. The Workforce Plan and progressing the actions are crucial to ensuring that we can deliver our Strategic Plan priorities and support the people of Perth & Kinross.

Overall, good progress is being made across the plan.

Author(s)

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NOTE: No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information), were relied on to any material extent in preparing this report.

1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

Strategic Implications	Yes / None
HSCP Strategic Commissioning Plan	Yes
Transformation Programme	Yes
Resource Implications	
Financial	Yes
Workforce	Yes
Assessments	
Equality Impact Assessment	Yes
Risk	Yes
Other assessments (enter here from para 3.3)	None
Consultation	
External	None
Internal	Yes
Legal & Governance	
Legal	None
Clinical/Care/Professional Governance	Yes
Corporate Governance	None
Directions	None
Communication	
Communications Plan	None

1. Strategic Implications

1.1 Strategic Commissioning Plan

The development of the 3 Year Workforce Plan 2022: 2025 has been underpinned by the IJB Strategic Plans for Older People, Learning Disabilities/Autism, Community Mental Health & Wellbeing and the Primary Care Improvement Plan.

2. Resource Implications

2.1 Financial

A review is underway of the strategic and operational actions set out in the plan to determine where it may be necessary to provide investment in the short term to increase the sustainability of the workforce for the longer term.

2.2 Workforce

The report sets out the workforce challenges over the next 3 years and the plans to be implemented to maximize workforce sustainability.

3. Assessments

3.1 Equality Impact Assessment

Our Workforce Plan was prepared taking account of our duties to promote equalities and human rights. It includes action to promote our public sector equality duties and to provide appropriate support for people who are protected under the Equality Act. This includes people with protected characteristics within our current workforce and also to attract people with protected characteristics to take up work in health and social care who might not otherwise consider or be able to pursue a career in this sector. The following are some of the actions which have been assessed as relevant with positive outcomes expected following implementation:

- Improving our equalities data
- advancing equality of opportunity and inclusive workplaces
- developing non-registered roles and career pathways to support people into a career in health and social care,
- developing young workforce initiatives to make working in health and social care an attractive career option for young people,
- considering flexible working opportunities,
- ensuring competitive rates of pay for social carers employed in the Third and Independent sector.

3.2 Risk

The IJBs Strategic Risk Register identifies insufficient workforce as a high red risk. The implementation of our 3 Year Workforce Plan is the key improvement action required to mitigate this.

2. CONSULTATION

Internal

The Workforce Plan has been developed through several working groups representing the range of professions in the HSCP. The plan has been discussed and commented on in a range of locality and professional fora including the HSCP Staff Partnership Forum. Trade Unions have also had the opportunity to comment.

3. APPENDICES

- Appendix 1 PKHSCP Workforce Plan Partnership Actions - progress update
Appendix 2 PKHSCP Workforce Plan Staff Group Actions - progress update

PKHSCP 3 YEAR WORKFORCE PLAN - update as at December 2022

Priority Levels:
 1. Critical
 2. Necessary
 3. Dependent on Others

Red	Not on track with major issues	Amber	On track with minor issues
Green	On track	Blue	Complete

	Action	Update as at December 2022	Priority	Area	Responsible Officer	Original Deadline	Revised Deadline	RAG
Plan	With support from partners, improve available workforce data for planning and monitoring purposes	Pan Tayside group looking at improving and standardising workforce data	1	Partnership	Head of Adult Social Work & Social Care	31/03/23	30/09/2023	Amber
Plan	Consider the appointment of a dedicated partnership workforce strategy lead to support workforce planning and to develop and implement workforce solutions	The job requirements for the workforce lead are being considered with partners	1	Partnership	Head of Adult Social Work & Social Care	31/03/23	31/12/2023	Amber
Plan	Develop and implement a Joint Working Agreement to enable integration of services	Framework is in place and being used in IDART and SCOPE teams. Lower level plans are in place for front line teams.	2	Partnership	Chief Officer	31/03/24		Green
Plan	Using workforce tools and performance information monitor and review demand capacity	District Nurses and Community Hospital wards have completed the Workforce Tool, which supports work to assess whether there are adequate staff on the ground to manage capacity.	2	Partnership	Heads of Service	31/03/24		Amber
Plan	With partners, understand the emerging workforce implications of the new National Care Service as the scope and operating model are determined	HSCP represented at range of national meetings re National Care Service.	3	Partnership	Chief Officer	31/03/25		Green
Plan	To increase focus on sustainable workforce solutions, all PKHSCP strategic plans/business cases will include a standard section on workforce implications that sets out the impact on staffing of planned changes and the steps that will be taken to ATTRACT, EMPLOY, TRAIN, NURTURE staff to support sustainable delivery.	Templates are being updated to include the workforce pillars in the workforce implications section for strategic plans/business cases.	2	Partnership	Head of Adult Social Work & Social Care	30/06/22	30/06/2023	Green
Plan	Support professions to undertake the necessary preparation to introduce real time staffing data collection and workforce tools that will be required to support implementation of the Health & Care (Staffing) (Scotland) Act 2019 when enacted	1. Monthly vacancy update data sheets are sent out to all services in HSCP. This data is used to generate a report that enables us to monitor the nurse vacancy factors across P&K. This allows us to highlight hotspots in our services and monitor the trend over a period of time. 2. Agency and back nursing usage is monitored and shared weekly with Locality and service manager at the managers huddle. This data is cross referenced against out vaccines again to highlight hotspots in our services and provided mitigation for services that are require high usage of Bank an Agency coverage. 3. Bank and Agency escalations are being drafted and nearly completed, this will help staff understand via RAG statuses what is required the most for that service. 4. Most clinical nursing areas have run test Workforce tools or are about to over the next 4 to 6 weeks. 5. Over the next 6 months NHST will create its own AFC Generic Template Job Description Library. The creation of the generic template job description library is to streamline and consolidate many existing job descriptions into a suite of generic template job descriptions to assist with on-going recruitment.	1	Partnership	Professional Leads	31/03/24		Green
	Work with partners to provide robust age profile data to support effective planning and to enable a supplementary update to be provided to the Scottish Government in relation to the emerging workforce gap over the planning period	It is proposed to remove this action as it is substantially covered by another action within the plan	1	Partnership	Head of Adult Social Work & Social Care	31/12/22		Yellow
Plan	Conduct a needs analysis through engagement with staff, service users, and their families to identify opportunities for Digital/TEC to enhance service delivery and training requirements	Needs analyses are undertaken on an ongoing basis, led by the TEC Strategy Group, PKC and NHST Digital Groups and linking with care group strategies/localities.	1	TEC	Head of Adult Social Work & Social Care	31/03/24		Blue
Attract	Proactive succession planning with staff being nurtured to grow in readiness for career development. We will create career pathways and work with schools, colleges and universities to attract candidates to hard to fill roles	Individual Personal Development Plans are being implemented to support individual career development. Work continues to support HCSWs to move into nursing routes. HART/CAH providers work closely with local schools and colleges to encourage people into careers in social care. Beyond that, work to support adequate succession planning has been hampered by the severity of this year's winter pressures.	1	Partnership	Heads of Service	31/03/24		Red

Attract	Promote Perth and Kinross as an employer of choice through agile, flexible and modern recruitment practices that includes positive experiences of service users and staff in recruitment campaigns	Further work to achieve this action will need to be taken forward. PKC have been working on actions to support this with a focus on website content, social media use/presence and additional information associated with specific vacancies such as Sway documents including the role managers and employees can play in the promotion of opportunities	1	Partnership	HR Lead PKC/HR Lead NHST	31/03/24		
Attract	Advertise posts permanently instead of fixed term, wherever possible as we are not attracting applicants for short term employment	Posts are advertised permanently where possible. However ongoing budget constraints means that it can be difficult	1	Partnership	Heads of Service	30/06/22		
Attract	Review the removal and relocation policy to attract suitably qualified candidates for hard to fill roles	NHST has an active Relocation policy, which is due for review in April 2024. This supports expenses associated with the need to relocate for employment purposes, for all health staff except doctors in training. PKC also has a Relocation and Removal Policy for use where recruitment difficulties are experienced. This is currently scheduled for review in 2023	2	Partnership	HR Lead PKC/HR Lead NHST	31/03/24		
Attract	Use National and international recruitment campaigns to bridge skills gaps and create a more diverse workforce that promotes diverse ideas and perspectives	HSCP will monitor any national and international recruitment campaigns and take necessary actions to ensure they have an impact in Perth & Kinross.	3	Partnership	Chief Officer	31/03/24		
Attract	Engage closely with developing the young workforce initiatives such as participating in school work experience week/university open days	It is proposed to remove this action as it is substantively covered by another action within the plan	2	Partnership	Heads of Service	31/03/23		
Attract	Review options to attract staff who may be considering returning after retirement	Retire, Return policy is now in place for NHS and has helped services to bring staff back at their pre-retirement substantive role pay band. This has facilitated increased recruitment and retention via this pathway.	2	Partnership	Head of Health/Head of ASWSC	31/03/23		
Attract	Work with partners to increase housing options for staff working and living in hard to recruit to rural areas in Perth & Kinross	HSCP represented on Local Housing Strategy. Chief Officer has agreed thematic reporting on key issues affecting health and social care to the Council's Housing and Social Wellbeing Committee.	3	Partnership	Chief Officer	31/03/24		
	Collaborative and reciprocal arrangements with Local Higher Education Institutions to promote working in Perth & Kinross	It is proposed to remove this action as it is substantively covered by another action within the plan	3	Partnership	Chief Officer	31/03/24		
Attract	Ensure the valuable contribution of armed forces leavers within the local workforce is recognised, ensuring we are an employer of choice for those wishing to transfer skills or develop new skills in health and social care	There are a number of workstreams that are being taken forward both locally and nationally to ensure NHS Tayside is an employer of choice for Armed Forces Leavers. 1. NHS Tayside engages with the Career Transition Partnership and advertises posts on Forces Friendly Job Portal 2. NHS Tayside encourages clinical and non clinical placements from the Armed Forces 3. NHS Tayside has a policy on reservists and mobilisation 4. A new Military Access Programme is being developed by NES which will develop career pathways for Armed Forces Leavers	3	Partnership	Associate Nurse Director	31/03/23		
Attract	Work with PKC over the period of their 5-year transformation programme to provide opportunities for staff to retrain and develop new skills to transfer to roles in health and social care	HSCP represented on PKC Transformation Board and relevant workstreams to ensure any displaced staff have opportunity to transfer to health and social care.	3	Partnership	Chief Officer	31/03/25		

Attract	Working collaboratively with PKC, schools, colleges, Higher Education and across the HSCP to enable, inspire and motivate people to aspire towards careers in care (changed from 'Work with PKC, schools, colleges, higher education and Third/Independent Sector partners in a training academy approach to address supply')	Development of Pathways into care programme - This is a programme with levels to support learners who are very new to the work, through to those with a more developed understanding. This programme has been collaboratively developed and is collaboratively implemented with H&SC and council colleagues. The programme offers a range of learning supported in partnership. Digital development of learning to support learning in relation to care. Work with Perth College supporting an annual session for National Certificate Health and Social Care students, and with Dundee University around Communities of Practice with Social Work students. Sessions have been developed and delivered for Talking to Schools about care. This is being reviewed and a programme being prepared for 2023		Partnership	Head of ASWSC/Team Leader L&D	31/03/23	31/03/24	
Attract	Advocate at national level for specific measures to attract key roles into remote and rural areas	Chief Officer represented on national networks and has established communication with Scottish Government, NHS NES and HIS	3	Partnership	Chief Officer	31/03/25		
Attract	Explore new models of employment/student apprenticeships	NHST is involved in conversations with Scottish Government to scope out employment/student apprenticeships. PKC are currently reviewing the delivery model of MAs, Graduate Apprenticeships, Graduate Work Experience and Professional Trainees.	3	Partnership	HR Lead PKC/HR Lead NHST	31/03/24		
Attract	Work with partners to provide support to people in Perth & Kinross who have been long term unemployed back to work in health & social care roles	Initial engagement has commenced in NHST to scope out how to progress this topic. PKC has led care recruitment initiatives and has recently worked with our employability team to deliver Long Term Unemployed placements but more work is required to develop a longer term plan	3	Partnership	HR Lead PKC/HR Lead NHST	31/03/24		
Employ	Work creatively with Community Planning Partners and local employability partnerships to identify creative solutions to support recruitment and retention of health & social care staff	Work ongoing with wider CPP to make social care more attractive and accessible to marginalised groups such as the long term unemployed. The HSCP are now members of the LEP	3	Partnership	Chief Officer	31/03/25		
	Support partners to encourage staff to update their personal details to increase equalities information	It is proposed to remove this action as it is substantively covered by another action within the plan	2	Partnership	Chief Officer	31/03/24		
Employ	To provide equity for all staff, work with partners to address any unequal pay gaps (changed from 'to provide equity for all staff, work with partners to address the gender pay gap in Perth & Kinross')	We are compliant with Fair Work First and expect suppliers delivering public contracts to adopt and demonstrate appropriate fair work practices, for all workers engaged in delivering the public contract.	3	Partnership	Head of Adult Social Work & Social Care	31/03/25		

Train	Provide/promote training and qualifications for advanced professional practice roles	<p>1.Qualified nurses have the opportunity to do further High Education and choose a career pathway that suits them in advanced practice. Work is currently being progressed to establish an Advanced Practice Academy to further develop access to this career pathway for nurses. Nurses who take on the advanced practice role and education can further develop enabling them to move across to nurse consultant roles.</p> <p>2.Due to the redesign of Nursing education to fit with NMC's further nurse vision our NQP are now qualifying with more clinical skills. To enable us to offer our current band 5 work force an opportunity to upskill we are currently looking at a module run by RGU to enable current band 5's the chance to match the skill set of our NQP and feel that this investment will enable all our workforce to be unskilled if they choice to do so or be the first step into an advanced practice pathway. We feel this could be a key aspect in enabling investment in our band 5 nurses as well as interested nurses to work within P&K and improve staff retention</p>	2	Partnership	Lead Nurse	31/03/23		
Train	Build and develop future leaders through leadership programmes, secondment opportunities and reciprocal learning arrangements	<p>A range of leadership training is available to staff across HSCP. Secondment process in PKC recently updated.</p> <p>Chief Officer will take forward an integrated senior management structure in 2023.</p>	2	Partnership	Chief Officer	31/03/24		
Train	Building on the Allied Health Professions approach to promote responsive and flexible workforce, consider the roll out of rotational roles across other staff groups	<p>Review and work continues to look at ways a rotational model could be used for Newly Graduated Practitioner (NGP). This would allow a natural setting to define how nursing roles could develop across existing specialties and could be supported by (NGP) pathways into community nursing.</p> <p>The graduate diploma in integrated community nursing is aimed at nurses working within district nursing, GP nursing (including CTAC services), care homes and prison healthcare. A review into looking at a programme that could be developed to support NGPs to undertake a 2 year supported development programme by undertaking the graduate diploma, alongside Flying Start supported by the NHS Tayside Practice Education Facilitation (PEF) team. This would allow completion of a competency framework for Primary Care Nurse role within 2 years. A potential rotational model would appear to be the best approach.</p>	2	Partnership	Lead Nurse	31/03/24		
Train	Consider the training and support required for managers to ensure pro-active vacancy management	Managers are, in general, well able to manage vacancies pro-actively. Peer support is good, with shared learning and knowledge bases; however, HR processes can be time consuming and prolonged	2	Partnership	Heads of Service	31/03/23		

Nurture	Create an agile, efficient, and modern recruitment experience that supports managers to attract, recruit and retain the right talent through utilisation of digital technologies, promotion of employer benefits and through employer branding ensuring that Perth and Kinross is an employer of choice	NHST is fully digital with the job train platform. If requested jobs are also advertised on social media, twitter, linked in and facebook. Hybrid working is under discussion at present. Work needs to commence on employer branding for the partnership. PKC recruitment is processed through MyJobScotland and the Talentlink platform. PKC information on MyJobScotland has been updated to make benefit information clearer and additional material such as Sway documents used for specific vacancies. Managers have guidance on how to maximise the use of Talentlink. A SLWG is reviewing how use of Talentlink can be further developed to increase automation and, where possible, move more control of the process to managers. The resourcing content of the PKC website has been updated to include specific BSL content and is being reviewed to simplify the structure of information and therefore accessibility for potential candidates.	1	Partnership	HR Lead PKC/HR Lead NHST	31/03/24		
Nurture	Create a Partnership wide framework to improve flexibility and passporting of skills across the Partnership, ensuring we have the right people in the right place with the right skills at the right time <i>(changed from 'create a Partnership wide framework to improve flexibility across the Partnership, ensuring we have the right people in the right place with the right skills at the right time')</i>	Integrated management structure implemented in two teams and planned for further teams in near future. Job families being used to support movement across service areas.	1	Partnership	Chief Officer	31/03/23	31/03/24	
Nurture	Ensure all staff operate in a working environment that enables them to adhere to Professional and Clinical guidance	Appropriate risk assessments and professional codes of conduct are in place, with robust processes in place to manage breaches and issues. Ongoing monitoring of workload by line managers is in place. Training needs are identified through supervision and annual appraisal	1	Partnership	Head of Health/Head of ASWSC	31/03/23		
Nurture	Provide trained staff protected time to complete relevant clinical and leadership functions of their roles and increase healthcare workers to fill the gaps	Limited by clinical demand and availability of backfill; however staff are openly and regularly encouraged to participate in these functions. Participation in clinical and leadership functions is further monitored via supervision. Nurses are calculated at 22.5% over what's needed to support this on an ongoing basis, although this has yet to be implemented for AHP colleagues.	2	Partnership	Head of Health/Head of ASWSC	31/03/23		
Nurture	Celebrate achievements and contributions for existing staff and services, not just new initiatives	Good news stories and staff achievements are shared across HSCP and acknowledged by senior management. We continue to roll out Care Opinion to gather people's experiences which allows us to celebrate good practice	2	Partnership	Chief Officer	31/03/23		
Nurture	Developing a Trauma Informed workforce supported through the Expert advisory group and implementation of 'Transforming Psychological Trauma: A knowledge and skills Framework for the Scottish workforce', and the Scottish Psychological training plan and Trauma informed Toolkit	Newly appointed Trauma Approach Coordinator, commences 20th February - who will have a lead role in developing a Trauma Informed Workforce.	2	Partnership	Heads of Service	31/03/23		
Nurture	Ensure menopause policies of PKC and NHS Tayside are widely understood and used across the workforce to support staff	NHST has launched a Menopause policy for all health employees. A communication highlighting the Menopause policy to raise wider awareness and understanding among all employees and to outline support and reasonable adjustments that are available; and subsequently reduce peri-menopause, menopause and related sickness by supporting employees to remain in work and retaining their valuable skills and experience, will be launched shortly. PKC has published menopause guidance which has been updated. We have also recently held menopause awareness sessions with plans to hold more with specific sessions for managers and men.	3	Partnership	HR Lead PKC/HR Lead NHST	31/03/23		
Nurture	Consider the flexible working options that can be offered to both existing and new staff to support recruitment and	Flexible working options offered where appropriate.	2	Partnership	Heads of Service	31/03/24		

Nurture	Implement the Equality and Human Rights Commission Report 9 June 2022 recommendations to improve staff experience of ethnic minority workers.	A separate action plan is under development.	2	Partnership	Chief Officer	31/03/24		
Nurture	Introduce a systematic approach to understand the reasons why people change or leave roles to improve retention	Exit interviews and process for monitoring themes in place across HSCP services.	2	Partnership	Chief Officer	31/03/23		
Nurture	We will take forward leadership development and commit to the fundamental components of compassionate leadership in our staff engagement including: - attending - through active listening and communication - understanding - through engagement and discovery - empathising - through connection, trust and emotional support, and - helping - through intelligent and thoughtful action	A series of five Perth and Kinross Offer Sessions led by the Chief Officer have taken place in exploring our values and behaviours and being developed into a rolling programme of local staff engagement sessions. What Matters to You? and Locality Integrated Working sessions have also completed. PKC Leadership Framework which includes core competencies being rolled out across HSCP	2	Wellbeing	Chief Officer	31/03/24		
Nurture	Promote the wellbeing framework and continue to adopt a people first approach to wellbeing, empowering staff to be proactive in managing their own health and wellbeing.	HSCP and Partners Wellbeing Group now established and meeting monthly. Driver diagram and action plan created. Wellbeing Champions connections made with National Lead and also NHST roles.	2	Wellbeing	Lead AHP	31/03/23		
Nurture	Encourage employees to take on the role of wellbeing champion to promote health and wellbeing across the Partnership.	Actively pursued and business of the Wellbeing Group. Growing more Wellbeing Champions is on the Action Plan of the P&K Wellbeing Group. The current Wellbeing Champion Training offered to NHST staff is only open to NHST staff at present and conversations are occurring regarding this. We have detail of who all the current NHST Wellbeing Champions are within P&K and therefore know which areas to target for uptake, workloads allowing, as there is an active expectation to these roles. There is currently an NHST waiting List for the courses.	2	Wellbeing	Lead AHP	31/03/23		
Nurture	Employ specific resources to enable a targeted approach to health and wellbeing to promote the wellbeing resources available and to work with managers to reduce sickness absence levels.	All resources (nationally and locally) promoted via the Wellbeing Group activity	2	Wellbeing	Lead AHP	31/03/23		
Nurture	Enabling learning to support skilled and confident workers who flourish (changed from 'understand and evaluate learning requirements to identify areas for growth')	Working with partners, teams and services on understanding and supporting learning - continuing to develop frameworks in service areas - SCOPE, Drug and Alcohol, Suicide Prevention, Carers, ASP etc. Review being undertaken to consider the collection of learning needs and wants from conversations with the workforce and survey	2	Skills & Knowledge	Head of ASWSC/Team Leader L&D	31/03/24		
Nurture	Provide the requisite learning and development for new roles	Working collaboratively in supporting development of Care pathways, Learning frameworks, LWC. NQSW Pilot	2	Skills & Knowledge	Head of ASWSC/Team Leader L&D	31/03/23		
Nurture	Provide and encourage learning and development for new ways of working across the partnership	There is a range of learning opportunities on www.pklearning.co.uk. Working with specialities to develop learning frameworks is ongoing. Locality learning in relation to culture and in support of WMTY ethos. Supporting continuous evaluation of learning sessions. Development of collaborative learning spaces - Carers, forums. Working in collaboration across P&K and beyond	2	Skills & Knowledge	Head of ASWSC/Team Leader L&D	31/03/23		
Nurture	Embed collective and compassionate leadership at all levels and ensure access to learning and development to develop leadership.	Leadership, and leadership development is encouraged at all levels. Work is ongoing to mitigate the constraints effected by ongoing workforce recruitment issues and service demand to enable access to training and promote an open and supportive culture.	2	Skills & Knowledge	Heads of Service	31/03/24		
Nurture	Grow our commitment to support wellbeing and engagement using learning and development	On going work to support wellbeing - reflections, emotional agility sessions, offer of debriefing, development of our partnership spaces for listening, connecting with listening service, coaching. Supporting and facilitating partnership collaboration, workshops, service development - e.g. Complex care - PBS framework	1	Skills & Knowledge	Head of ASWSC/Team Leader L&D	31/03/24		

Nurture	Work with partners, including Schools, Universities, Professional bodies, SQA, to enhance our learning offer and create learning spaces fit for the purpose of the learner and stage of development	On going with Dundee, Stirling, RGU, OU, Edinburgh in relation to SW practice, communities of practice, shared learning spaces. SSSC - NQSW Pilot, Healthcare improvement Scotland - Day Opportunities Collaborative, Perth College supporting learning for NQ level in Social care, Careers in Care - sharing across schools in Perth, Improvement Service partnership to support Trauma Informed Practice Approach, SQA in supporting SVQ, next External verification in April 2023. DJCAD and V&A discussions re support for learning in relation to transformative learning, Scottish Drugs Forum in the support of the development of a learning framework to support P&K workforce.	1	Partnership	Head of ASWSC/Team Leader L&D	31/03/24		
Nurture	Enabling workforce development through team working and development, reflective practice, supervision, yearly appraisal and development discussion. Engage fully with the Perth and Kinross Offer employee experience programme	Regular supervision and annual appraisals are in place across services. Perth and Kinross Offer sessions were rolled out in each locality and specifically for HSCP staff in the latter part of 2022, these were well received with particular comment on the attendance of senior management.	1	Skills & Knowledge	Heads of Service/Organisational Development	31/03/23		

PKHSCP 3 YEAR WORKFORCE PLAN - update as at December 2022

Priority Levels:
1. Critical
2. Necessary
3. Dependent on Others



Pillar	Action	Update as at December 2022	Priority	Area	Responsible Officer	Deadline
ADULT SOCIAL WORK & SOCIAL CARE						
Attract	Review model of CAH provision for rural areas in Perth and Kinross and amend to improve recruitment and retention	The CAH Resiliency Project was completed as planned in October 2022. further work is ongoing such as: - The Living Well Care Team has commenced in the North locality but further recruitment is required for the South. - Avenue Care Project has started in both the North and South localities - Additional recruitment to HART has commenced - increased hourly rate for providers - New Alliance Model of contracting is underway These developments require time to embed and have had to contend with wider challenges around the Cost of Living crisis and recruitment competition from other sectors. Further evaluation and transformation work is required to continually review our model of care at home to ensure it meets the needs of our population	1	ASWSC	Head of Adult Social Work & Social Care	31/10/22
Attract	Review opportunities to enhance our benefits package to improve recruitment & retention in social care	Independent sector already offer a variety of incentives for example a £1000 golden hello in some areas. Ongoing discussion about internal services around the realms of equity and possibility.	2	ASWSC	Head of Adult Social Work & Social Care	31/03/23
Attract	Promoting Social Care as a rewarding career	National and local campaign running. P & K campaign for 3 months (digital boards, bus sides, bus stops, bin lorries and social media)	3	ASWSC	Head of Adult Social Work & Social Care	31/03/24
Attract	Use digital marketing techniques to increase response to vacancies	Online recruitment events have taken place and more planned. A mixed response in attendee numbers.	2	ASWSC	Head of Adult Social Work & Social Care	31/07/22
Attract	Implement a learn to work in Adult Care programme	This has not been taken forward in the current period due to low level of interest. This will be kept under review and promoted across partners where the requirement to redeploy staff arises.	3	ASWSC	Head of Adult Social Work & Social Care	31/03/24
Attract	Develop recruitment and retention pathways into care EG, work placements for students and shadowing programmes, developing the young workforce through secondary schools, Perth College UHI and Youth Services, offer more work placements through foundation apprenticeships and work experience.	Established links and pathways with employability, Youth Services, School Coordinators and college. Three earning levels of care have been developed, including pre learning.	3	ASWSC	Head of Adult Social Work & Social Care	31/03/24
Attract	Develop and roll out local recruitment campaigns in line with national campaigns	National and local campaign running. P&K campaign for 3 months (digital boards, bus sides, bus stops, bin lorries and social media)	2	ASWSC	Head of Adult Social Work & Social Care	31/03/23



PERTH & KINROSS INTEGRATION JOINT BOARD REPORTING FORWARD PLANNER 2023/24 (Version 3) (Report No. G/23/40)

This work plan outlines the major items the Integration Joint Board has to consider as part of its schedule of work for the year. This plan will continue to be kept under review throughout the year.

Item	Responsibility	21 June	20 Sept	29 Nov 2023	14 Feb 2024	27 Mar 2024	Comments (for decision/information)
Chief Officer Strategic Update	Chief Officer	✓	✓	✓	✓	✓	<i>Standing Item</i>
Mental Health Services Update	Chief Officer		✓	✓	✓	✓	<i>Standing Item</i>
Adult Support & Protection Annual Report 2022/23	Chair P&K Adult Support & Protection				✓		For information
Audit & Performance Committee Update & Minutes	APC Chair/ Chief Finance Officer		✓				Standing item
Audit & Performance Committee Annual Report	APC Chair/Chief Finance Officer		✓				
Strategic Planning Group – updates & Minutes	Head of ASWSC – Commissioning (ZR)	✓	✓	✓	✓	✓	<i>Standing Item</i>
IJB Direction Policy	Chief Officer/Sarah Rodgers	✓					
P&K HSCP Annual Performance Report 2021/22	Chief Finance Officer		✓				For information only
Strategic Risk Management Update	Phil Jerrard/Chris Jolly	✓					
Annual Update on Community Adult Mental Health Service	Senior Service Manager (CL)			✓			
Primary Care Strategic Delivery Plan	Associate Medical Director	✓					
Strategy for Improving participation and engagement	Chief Officer	✓					

General Practice Premises P&K	Associate Medical Director	✓					
Care at Home Review Update	Head of Adult Social Work & Social Care	✓					
3 year Workforce Plan	Head of Adult Social Work & Social Care (KO/FL)		✓				6 monthly update (June -Dec) Last update submitted March 2023
Tayside Winter Planning Report 2022/23	Head of Health			✓			
Update on Older Peoples Strategy	Head of Health	✓					
Strategic Delivery Plan – Learning Disabilities & Autism	Head of Adult Social Work & Social Care (KO)				✓		Last update submitted Feb 2023
Update on the Redesign of Substance use Services in P&K	Chair of the Alcohol & Drug Partnership		✓				Last update submitted Feb 2023 (6 mthly update)
IJB Membership Update	Standards Officer						AS REQUIRED
Review of Standing Orders	Standards Officer	✓			✓		
Chief Social Work Officer Report	Chief Social Work Officer				✓		
Revised Carers Strategy 2023-26	Chief Officer	✓					



PERTH & KINROSS INTEGRATION JOINT BOARD DEVELOPMENT SESSION WORK PLAN 2023-24

This development sessions work plan outlines the major items the Integration Joint Board has to consider as part of its schedule of work for the year. This plan will continue to be kept under review throughout the year.

IJB Development Sessions Item	Responsibility	05 May 2023	11 Aug 2023	27 Oct 2023	26 Jan 2024	15 Mar 2024		Comments
Finance	Chief Finance Officer				✓	✓		
Digital Innovation/Technology	Interim Head of ASWSC (Operational)		✓					Date to be confirmed
Equality & Diversity	Sarah Rodger/David McPhee/Scott Hendry	✓						Date to be confirmed
Carers Strategy	Interim Head of ASWSC (Commissioning)	✓						As requested at IJB Pre Agenda Meeting Feb 2023
Participation & Engagement Strategy	Chief Officer	✓						
Care Home Activity & Partnership Working	Interim Head of ASWSC (Commissioning)		✓					Date to be confirmed
Social Prescribing	Consultant Public Health Pharmacy/Associate MD			✓				Date to be confirmed
Clinical Care Governance		✓						Date to be confirmed Action point from APC 26/09/22
Mental Health & Wellbeing Update				✓				Date to be confirmed
P&K HSCP Quality Safety & Efficiency in Prescribing	Associate Medical Director			✓				Defer to June 2023 – progress delayed due to covid pandemic
IJB MEMBERS INDUCTION								Date to be confirmed ? June

