

# Minute

Perth & Kinross Health & Social Care Partnership

## P & K HSCP Strategic Planning Group Minute

Minute of the above meeting held on 17 January 2023 at 1pm via Microsoft Teams

(Recorded for Minute purposes only)



### Present

Jacquie Pepper	Chief Officer, P&K Health & Social Care Partnership (Chair)
Zoe Robertson	Interim Head of ASWSC/Commissioning (Vice Chair)
Kenny Ogilvy	Interim Head of ASWSC/Operations
Evelyn Devine	Head of Health
Angela Milne	North Locality Manager
Angie McManus	AHP Lead
Christopher Lamont	Senior Service Manager - Mental Health services
Anna Cunningham	Locality Integration Programme Manager
Sandra Auld	Service User Representative
Rhona Pollok	Team Leader, Planning & Commissioning
Christopher Jolly	Service Manager Business Planning & Performance
Angie Ferguson	Perth Autism Support CEO/Autism Rep
Dave Henderson	Scottish Care – Independent Sector Lead
Jillian Milne	Chief Executive, Mindspace/Third Sector Forum
Julie Hutton	Chief Executive of Independent Advocacy
Amanda Taylor	Senior Service Manager for Older People, Palliative and Urgent Care
Melvyn Gibson	Carers' Representative
Ingrid Hainey	Hillcrest Futures/Substance Use Rep
Danny Smith	GP Clinical Lead
Raymond Jamieson	Young Carers' Rep (PKAVS)
Shara Lumsden	(Minutes)

### Apologies

David Stokoe	CPP
Karyn Sharp	Service Manager
Ian McCartney	Service User Representative
Sandra Young	Tayside Services Manager, Supporting Mind Scotland
Maureen Taggart	Alzheimer Scotland/Older People
Bernie Campbell	Carer Representative
Maureen Summers	Chair of Carers' Voice & Carers'
Donna Mitchell	Interim Chief Finance Officer

### In Attendance

Eleanor McCallum	Scottish Government
------------------	---------------------

## 1. WELCOME AND APOLOGIES

JP welcomed everyone to the meeting.

## 2. CO-CHAIRING ROLE FOR STRATEGIC PLANNING GROUP

JP discussed the proposed changes to the involvement of Public Partners in the Integrated Joint Board (IJB). Proposal to invite notes of interest for people to take on co-chairing role of this group. A report will be presented to the IJB as an opportunity to expand engagement, roles, and the different sectors involved in Health & Social Care.

Today's SPG is focussing on providing some baseline information to ensure as we progress with the refresh of the Strategic Commissioning plan that the membership of the SPG understand the need, performance and improvement approach required to design and implement a successful plan.

## 3. FRAMEWORK FOR COMMUNITY HEALTH AND SOCIAL CARE INTEGRATED SERVICES (ELEANOR McCALLUM (SCOTTISH GOVERNMENT))

EM is currently seconded in the Scottish Government to lead a piece of work around supporting Health & Social Care Partnerships, to consider implementing the framework for Community Health & Social Care Integrated Services. See Appendix 1

The framework was designed to assist in identifying and promoting best practice in local systems to clearly illustrate what good looks like in community settings, which is firmly focused on improving outcomes for people. The work to develop the Framework was led by Scottish Government and COSLA, involving Chief Officers and other key partnership staff.

The Framework aims:

- Specialist assessment, treatment, care and support at home
- Supporting and caring, and developing skills / competencies as need changes
- Early engagement to support prevention and early intervention with well-established anticipatory care planning
- Understanding a person's strengths and resources, their needs and preferences while adopting an ethos of co-production
- Outcomes based model of strategic and service commissioning
- Informing the development of local Transformation plans
- Drawing on good practice to inform responses to identified local priorities

It is an improvement tool specifically for integrated Partnerships and is an enabler that can inform the development of service transformation which is based on evidence and existing good practice.

EM discussed the good practice portal [Embedded and emerging good practice | Health & Social Care Scotland \(hscscotland.scot\)](https://hscscotland.scot) which has been populated by examples from other HSCPs. The content on the site can be filtered according

to client group, setting, service area etc, and the examples downloaded / used to inform local transformation. See Appendix 1

EM will meet with the Business Planning and Performance Manager for the Partnership to discuss how the framework can support our existing and planned Delivery Plans/Strategy implementation/Improvement activity.

AT discussed ongoing work with the Older Peoples' Strategy for locality integrated working to develop the evidence base using the framework. AT thinks the tool will be beneficial for the new workforce.

There followed a discussion regarding the importance of the third sector being involved in the use of the Framework and from the outset, that improvement activity was a system wide role. The group reflected on historical practice, and it was recognised that earlier more full involvement of all partners was an area for improvement, a commitment was made to the group that our work to refresh our Strategic Commissioning Plan would be fully inclusive and adopt a co-design methodology.

#### **4. JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) OVERVIEW**

RP discussed the Joint Strategic Needs Assessment (JSNA). The purpose of the JSNA is to ensure that the Perth & Kinross Integration Joint Board's strategic plans are based on robust understanding of the current and predicted future needs of local populations.

The information from the JSNA will inform and guide the commissioning and delivery of health, wellbeing, and social care services – leading to better outcomes for people and use of resources.

The JSNA focussed on the North Locality so far and used a collaborative approach to bring together staff from different backgrounds and organisations to get a full picture of service need, delivery, and priorities.

The JSNA activity will continue and cover all user groups and localities and assist in the development of the refreshed Strategic Commissioning Plan.

#### **5. ANNUAL PERFORMANCE REPORT (APR) OVERVIEW AND KEY MESSAGES**

The Business Planning and Performance Manager for the Partnership gave a high-level overview of the Annual Performance Report.

IJB Feedback:

- Approved the report and were content with progress in respect to delivery of our services and the feedback that we had been able to gather from service users.
- This provided a good oversight of the difference that our services are making to individuals
- Less clear however about the strategic impact of what we have delivered. Keen to ensure that we have key strategic performance indicators at the forefront of the report in way that describes the progress made in the delivery of IJB objectives.

Performance:

- It's clear that we are still recovering from the impact of the pandemic and the medium to longer term effects that this has had on our population.
- Performance against key national indicators:
  - Compared to previous year was mixed
  - Compared to Scotland overall was good
  - Trend over the previous 5 years is down which is a similar trend seen across Scotland

#### **Areas of significant difficulty:**

- % of adults who agree their health and care services seemed well coordinated (down 7.9% from previous year and down 9.5% over 5 years)
- % people with positive experience of care at their GP practice (down 12.3% from previous year and down 14.3% over 5 years) - there followed a discussion regards user access and the impact of this area of performance.
- Emergency bed days per 100K population (up 13.5% from previous year but trend down over 5 years)
- DD's up over 200%
- A&E attendance up almost 19%

These performance figures describe a system which is under pressure.

Where people are not as satisfied as they were pre pandemic, demand has increased for emergency care and where it's been difficulty to get people back out of hospital. This is a pattern repeated across Scotland - evidence of growing elderly populations means this is acutely felt in P&K.

#### **Care Group reporting**

##### **CMHWB**

- Delivering the early stages of new strategy which followed consultation
- Need to now follow through on ambitions to support people at the earliest opportunity with a blend of support mechanisms that meet needs.
- The support provided to be easily accessible within community settings.
- The challenge is in how we do that and what do we anticipate being the impact/benefit.

##### **Substance Use**

- Prevalence of harm from substance use is high in Scotland when compared to elsewhere.
- Having high quality integrated services with lots of choice for service users is needed.
- iDART Team and approach has key aim to improve effectiveness and efficiency of support for people who need our services.
- Looking forward more is required on links with Mental Health Services criminal justice services.

##### **Primary Care**

- Continuing to transition into next phase of pandemic recovery - true of all services
- Pre-pandemic Primary Care services were transforming and continues
- Need to maximise capacity for GPs by creating and delivering wider Primary Care services in support of GPs workload.
- GPs remain at the heart of Primary Care but with a changing role
- Significant challenges remain in terms of workforce availability

### Carers

- Demand for carer services grows each year
- The pandemic restricted the available support and so particularly affected carers as well as the cared for.
- Need to ensure Carers are part any decision-making process when it comes to service change/design
- Joint Strategic Needs Assessment set out the need for wider staff training on obligations to carers

### LD Autism

- Strategic Delivery Plan approved by IJB last year with a 12-month update report due at the next IJB in Feb
- Recognised that further service design work is needed to ensure those most in need are supported in the way that best meets their needs.
- Overall goal to support people to live independently as much as possible

### Older People Services

- Overall goal is to improve outcomes by ensuring that people see the right professional in the right setting at the right time, reducing the need for unplanned admissions and supporting people to receive care in their own home wherever possible
- Demands for services are rising significantly post pandemic and causing increases in traffic to inpatient settings
- Need to continue to integrate services and approach to service delivery to ensure people can move seamlessly through the system/pathway.

### Workforce

- The demands on services are rising and its challenging to maintain the size scale and proficiency of the workforce required.
- Recruitment remains a key problem
- Using new technologies and service innovations to support this increase in demand and relative reduction in capacity.
- Workforce Plan has been developed to set out the ways in which we will seek to tackle the issues faced.

ZR thanked everyone for their contributions and good conversations.

### 6. A.O.C.B.

No items discussed.

**Date of Next Meeting: 7 March 2023 1pm-4pm**

# A Framework for Community Health and Social Care Integrated Services



- Promoting healthy independent living
- Improving outcomes by working more effectively
- Making services more accessible and responsive
- Sharing good practice <https://goodpractice.hscscotland.scot>



Scottish Government  
Riaghaltas na h-Alba  
gov.scot

## The Framework – background

### Ministerial Strategic Group (MSG) for Health and Community Care

*Review of progress with integration of health and social care* (published February 2019) – 25 proposals across six areas, as identified by Audit Scotland (November 2018)

*‘the pace and effectiveness of integration need to increase’*



Source: Audit Scotland

5. (iii) **A framework for community based health and social care integrated services will be developed. The framework will be key in identifying and promoting best practice in local systems to clearly illustrate what good looks like in community settings, which is firmly focused on improving outcomes for people.** This work will be led by Scottish Government and COSLA, involving Chief Officers and other key partnership staff to inform the framework.



Scottish Government  
Riaghaltas na h-Alba  
gov.scot



# The Framework – aims

- **Focussed on people, staff and care in the community**

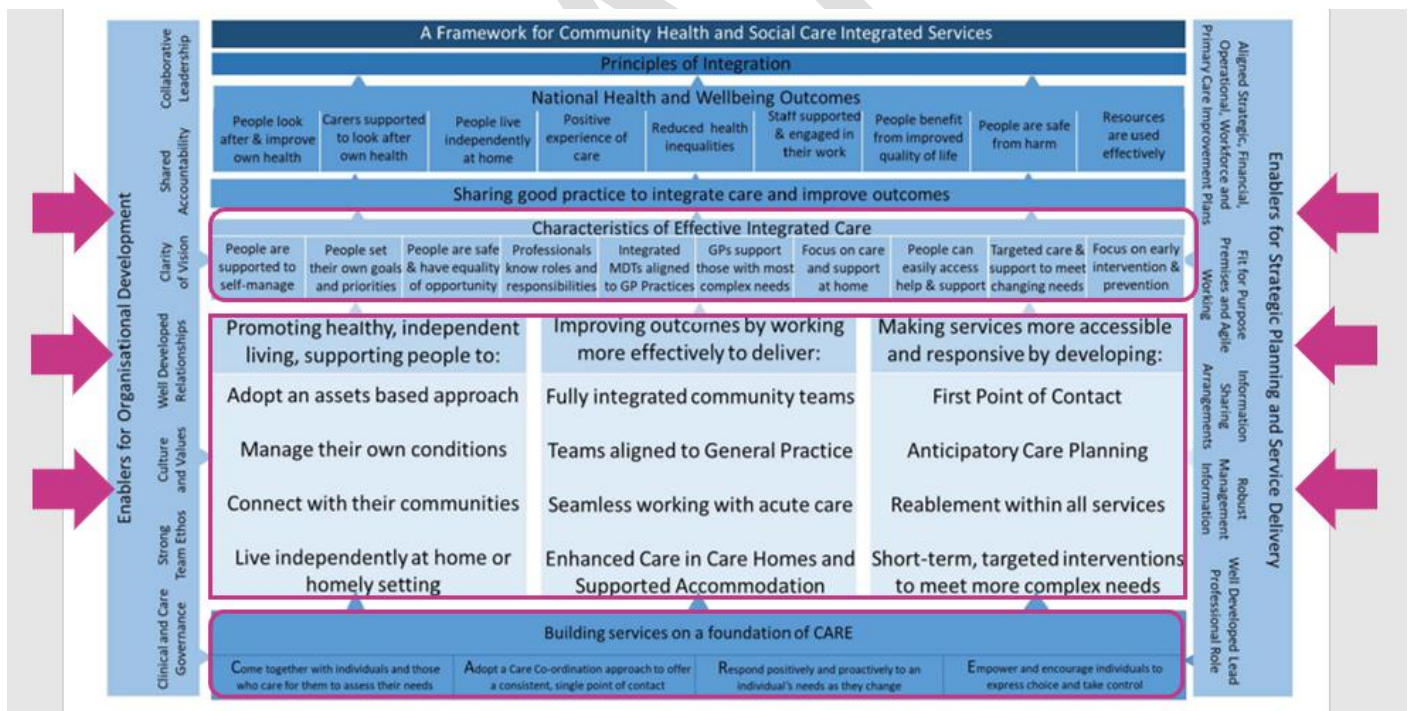
- Specialist assessment, treatment, care and support **at home**
- **Supporting and caring**, and developing skills / competencies as need changes
- Early engagement to support **prevention and early intervention** with well-established **anticipatory care planning**
- Understanding a **person's strengths and resources, their needs and preferences** while adopting an **ethos of co-production**
- **Outcomes based model of strategic and service commissioning**

- Informing the development of **local transformation plans**

- Drawing on **good practice** to inform responses to identified local priorities



Scottish Government  
Riaghaltas na h-Alba  
gov.scot



## Using the Framework – an improvement tool



## Using the Framework – summary

### Improving health and social care approaches at home and in the community

- People experience improving and more seamless service provision

### Supporting improved outcomes for people

- Person centred and human rights / co production / home first / strengths based / prevention and early intervention
- Whole life journey, across all services

### Enabling consistency of approach, both locally and nationally

- Improves the health and care system – more effective, more efficient, more sustainable

### Utilising an evidence based approach, informed by engagement across the sector, including carers and people with lived experience





## Using the Framework – other HSCPs

### Clackmannanshire & Stirling

Service transformation and ensuring consistency across services

### South Ayrshire

Locality planning and ensuring identified Framework components are in place

### Midlothian

Service specs, team plans align with strategic planning and outcome reporting

### Orkney

Review of all strategies/plans to ensure strategic intent fits with the Framework

### Moray

Review to ensure ethos of care / inclusion of carers in service design



Scottish Government  
Riaghaltas na h-Alba  
gov.scot

Thank you

Examples of **service planning, engagement and delivery of community based services**, aligned to the **Framework for Community Health and Social Care Integrated Services**, along with self-evaluation and continuous improvement planning toolkits, available at: **EMBEDDED AND EMERGING GOOD PRACTICE** <https://goodpractice.hscscotland.scot>



HEALTH AND SOCIAL CARE  
SCOTLAND

Eleanor McCallum ([Eleanor.McCallum@gov.scot](mailto:Eleanor.McCallum@gov.scot))



Scottish Government  
Riaghaltas na h-Alba  
gov.scot

# Embedded and emerging good practice in health and social care

Aligned to the [Framework for Community Health and Social Care Integrated Services](#)

<b>Health and Social Care Partnership:</b>				
<b>Author and contact details:</b>				
<b>Name of good practice:</b>				
<i>Select (x) all areas that apply to your good practice (select more than one if applicable)</i>				
CLIENT GROUP	Children and young people		Older adults	
	Younger adults			
SETTING	City		Remote & rural (incl islands)	
	Corporate		Urban	
SERVICE AREA	Addictions		Management team	
	Admission avoidance		Mental health	
	Community care services incl care at home/care homes		Physical disabilities	
	Day services		Physical health	
	Housing incl Homelessness		Primary care	
	Intermediate Care incl Hospital at Home		Rehabilitation	
	Justice services		Social care services	
	Learning disabilities		Supported discharge	
	Other – please specify			
ELEMENTS of FRAMEWORK	Anticipatory care planning		Live independently at home or in a homely setting	
	Assets based approach		Manage own care	
	Connect with communities		Reablement	
	First point of contact		Seamless working with acute	
	Enhanced care in care homes / supported accom		Short term targeted interv to meet more complex needs	
	Fully integrated community teams		Teams aligned with general practice	
	Other – please specify			
ENABLERS	Agile working		Information sharing	
	Aligned plans		Infrastructure	
	Clarity of vision		Management information	
	Clinical and care governance		Shared accountability	
	Collaborative leadership		Strong team ethos	
	Culture and values		Technology	
	Fit for purpose premises		Well-developed lead professional roles	
	Improvement capacity		Well-developed relationships	
	Other – please specify			

HSCP	
Name of good practice	
Summary of situation	
Actions taken	
Outcomes / impact	
Measures / indicators of success	
<b>Even better if ...</b> (enablers to further the principles of integration and result in 'even better outcomes if ...')	
<a href="#">NATIONAL HEALTH AND WELLBEING OUTCOMES</a>	
1. People are able to look after and improve their own health and wellbeing and live in good health for longer.	
2. People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.	
3. People who use health and social care services have positive experiences of those services, and have their dignity respected.	
4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	
5. Health and social care services contribute to reducing health inequalities.	
6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.	

7.	People who use health and social care services are safe from harm.	
8.	People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	
9.	Resources are used effectively and efficiently in the provision of health and social care services.	
<a href="#">Health and Social Care Scotland's 5 Essential Elements (click link to listen to statement of intent)</a>		
1.	Transforming the approach to improving health, wellbeing and independence	
2.	Building stronger community care systems and primary care services	
3.	Establishing a new focus on mental health	
4.	Securing a sustainable acute hospital service and specialist care service	
5.	Strengthening future partnerships to ensure a modern sustainable workforce	
Links to any published reviews/evaluations		
Before submitting this example of good practice please ensure approval and sign-off by your head of service / chief officer.		
Author and contact details:		
Approved for online publication (signature and position)		
Date of online publication		