



Perth and Kinross
Health and Social
Care Partnership

Supporting
healthy and
independent
lives

JSNA and Strategic Commissioning Plan Consultation



"Planning a Better Future Together" – Perth and Kinross Health and Social Care Partnership

Strategic Commissioning Plan

Each Integration Authority must produce a strategic commissioning plan that sets out how they will plan and deliver services for their area over the medium term, using the integrated budgets under their control.

Stakeholders must be fully engaged in the preparation, publication, and review of the strategic commissioning plan, in order to establish a meaningful co-productive approach, to enable Integration Authorities to deliver the national outcomes for health and wellbeing, and achieve the core aims of integration:

- To improve the quality and consistency of services for patients, carers, service users and their families.
- To provide seamless, integrated, quality health and social care services in order to care for people in their homes, or a homely setting, where it is safe to do so; and
- To ensure resources are used effectively and efficiently to deliver services that meet the needs of the increasing number of people with long term conditions and often complex needs, many of whom are older.

Review

An Integration Authority is required to review its strategic commissioning plan at least every three years and may carry out additional reviews from time to time. In carrying out a review of the strategic commissioning plan, Integration Authorities must consider:

The national health and wellbeing outcomes

The indicators associated with the national outcomes

The integration delivery principles

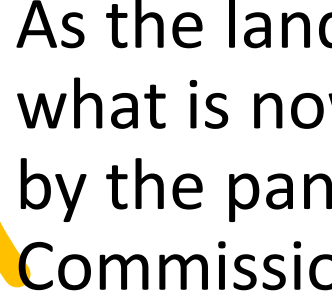
The views of the Strategic Planning Group

A review may result in the integration authority making any necessary changes by replacing its strategic commissioning plan.




Review continued...

Perth and Kinross HSCP have an existing Strategic Commissioning Plan 2020 -2025, developed during 2019, pre-pandemic, prior to the Feeley Review and before the announcement of proposals for a National Care Service.



As the landscape has changed markedly since 2019 and so much of what is now being delivered by the HSCP has been heavily influenced by the pandemic it was proposed that we revise the Strategic Commissioning Plan.



Joint Strategic Needs Assessment

The purpose of this Joint Strategic Needs Assessment (JSNA) is to provide a clear understanding of the health and social care needs of our local population.

It brings together qualitative and quantitative data on the health and care needs of the adult population of Perth & Kinross.

This creates a picture of service needs now and, in the future, and supports strategic planning decision-making within the Partnership.

JSNA Findings

The majority of Perth and Kinross population live predominantly in a rural area 67.8% with 32.4% living in urban areas.

Dependency ratios (the number of people over the age of 65 per 100 people below the age of 65) are higher across the North locality followed by the South locality and with Perth City having the lowest dependency ratio.

Dependency ratios give us a good indication of the likely need for health and social care services to support people across the local authority area.

Perth and Kinross have a higher proportion of people over 65 than the Scottish Average, the North and South localities face greater challenges in relation to an ageing population.

Perth and Kinross have a smaller proportion of people of working age compared to Scotland as a whole, and this is likely to continue.

JSNA Findings

In P&K council, the split in registered carers is generally a third in each locality, with both the North and South having slightly higher numbers than Perth City. The highest proportion of carers across all localities are in the 66+ age group.

The life expectancy of people with learning disabilities is increasing, however it remains shorter than the general population. The more complex the condition the lower the median age of death (this is National data; local data is not available).

People with autism experience poorer mental and physical health and may be more likely to die younger than their peers without autism

Perth City Locality hosts the majority of deprivation within Perth and Kinross with five areas' being within most deprived Quintile (SIMD1) equating to 16.1% an increase of 2.6% since 2016

Perth City also hosts the most affluent proportion of the population with 27% of people living in the least deprived Quintile (SIMD5) an increase of 1.3%.

JSNA Findings

When the SIMD is broken down by domain over of 40% of the population are in the most deprived Quintile for access to services. In the North and South localities, accessibility is the biggest issue with over half of the population in the top two most deprived quintiles.

The ageing population will change demand for housing. They are also more likely to live alone and to be under-occupying homes, increasing the risk of isolation and loneliness.

Perth City Locality has more people suffering alcohol and drug related harms and ill health than the other PKHSCP localities.

In Perth and Kinross, 21% of the population who had contact with NHS Services had at least one physical long-term condition (LTC). Of this population group, 17% of those under the age of 65 were living with more than one LTC compared to 50% of those aged over 65.

JSNA Findings

Falls are the most common reason for admission to hospital.

In Perth and Kinross, the leading cause of death for females in 2021 was Dementia and Alzheimer's disease (11.1% of all female deaths) and was the second leading cause for males (7.7%). Projections estimate an extra hundred cases year in year.

Perth city locality have the highest number of unscheduled bed days. Most of the unscheduled beds are for the over 65 age group, but Perth City has the lowest over 65 demographics in comparison to the North and South locality.

Post Covid there has been an increase in Delayed Discharge across all localities with Perth City returning to pre-2017 levels.

Psychiatric hospitalisation admissions in all localities have seen a steady decline, there is a significant disparity between Perth City and the North and South localities.

Projections indicate a requirement for an increase in Care Home placements year on year.

Consultation

Active involvement of the community plays a pivotal role in driving the transformation of health and social care and improving outcomes for communities.

Perth and Kinross Health and Social Care Partnership is committed to fostering collaborative relationships with individuals and communities.

We place significant importance on actively seeking the input and feedback from those who access our services to co-create and shape future service delivery.

In undertaking the consultation on the Strategic Commissioning Plan (SCP) for Perth and Kinross HSCP, we applied the 7 National Standards for Community Engagement (2016)

<https://www.scdc.org.uk/what/national-standards> and were guided by 'Planning with People' (Community engagement and participation guidance).

<https://www.gov.scot/publications/planning-people/>

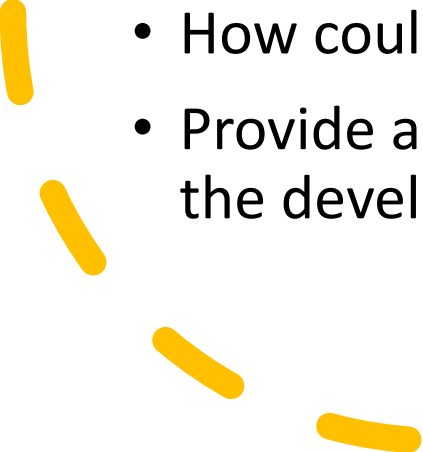


Aims of the Consultation

To involve people in shaping the future of health and social care services.

To develop a better understanding of what matters to people.

To inform people of the challenges facing the HSCP and seek their views on:

- What did they feel, think, and want?
 - What needs to be changed or improved?
 - How could things be done differently?
 - Provide a range of opportunities for people to engage with the consultation on the development of the strategic plan.
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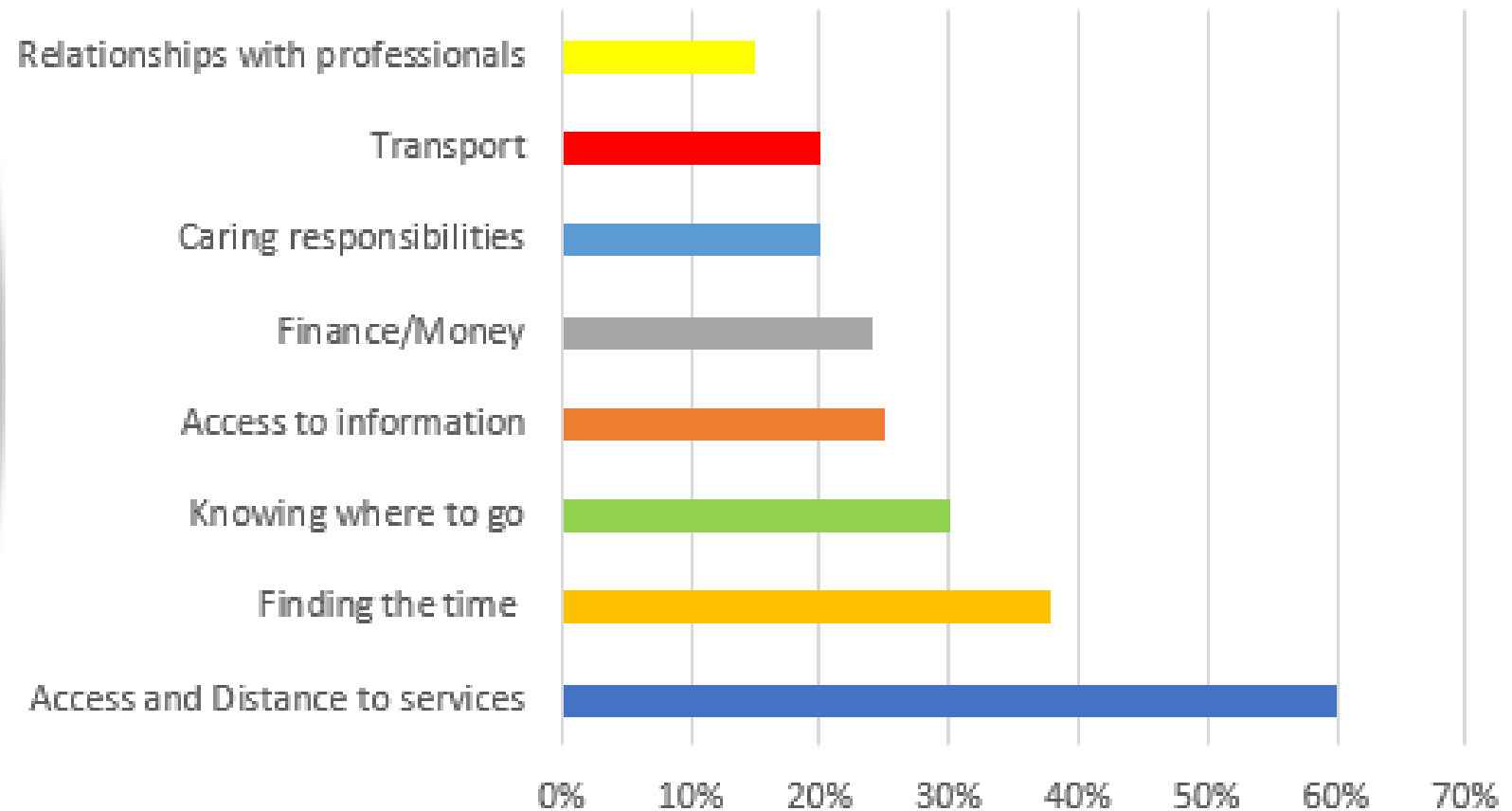
Survey Feedback

We specifically asked people via our survey to rate how important specific aspects of health and social care were to them, the underlying details this is in order of importance:

- I can access all health and social care support in one place, close to home (89%)
- Clearer and accessible information about the range of support and services available and who to contact for help (87%)
- More opportunities to support health and wellbeing in my local community (83%)
- Provide opportunities for local communities to influence how health and social care budgets should be spent (77%)
- People should get out of hospital more quickly to be supported at home (76%)
- Support more people to stay at home through better use of technology (73%)
- More consistent and regular opportunities that support carers' health and wellbeing (73%)
- Quicker access to health and social care support through use of telecare/internet (67%)
- Support for more volunteering/peer support as safe alternatives to services (55%)

Challenges

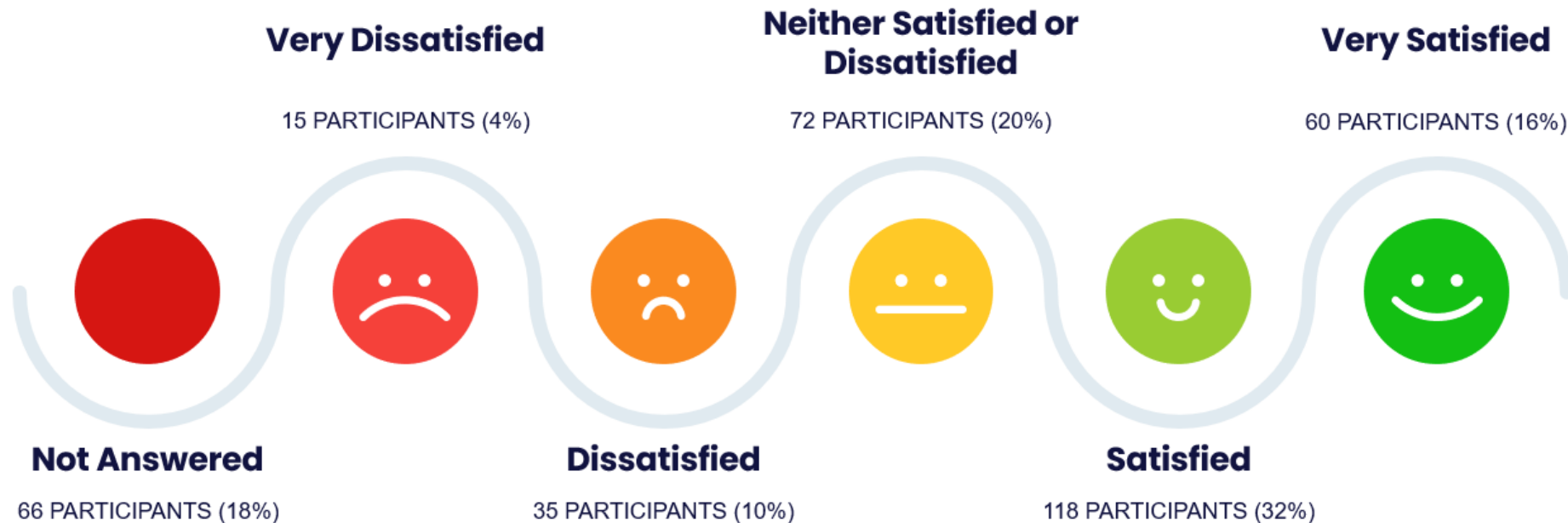
We asked people to tell us what challenges they faced when looking after their Health and Wellbeing.



Satisfaction Levels

We asked how you feel about the support or service you accessed in the last 12 months, and then further if you were dissatisfied, what were the reasons.

- 49% of participants said they were either satisfied or very satisfied.
- 20% saying they were neither satisfied nor dissatisfied.
- 14% specifically commented that they were dissatisfied or very dissatisfied.
- 18% didn't answer.





Workforce Feedback

- Their main wishes related to improvements in service design, partnership working and systems, being valued and the need to increase resources.
- The lack of staff and resources was identified as their main worry along with communication, how we deliver services and uncertainty around the impact of national care service.
- Primary Care conversations identified positive progress in relation to partnership working and opportunities for how this could be strengthened.
- A lack of information and understanding about services and roles was highlighted as a significant barrier to early intervention and working with communities was viewed as essential for future planning.
- Unscheduled care conversations raised concerns in relation to discharge planning and inconsistencies in approach which staff felt was due to lack of understanding about key roles and services.
- There was agreement that a hospital setting is not always the right environment for people and the workforce indicated a need for a range of different community approaches with well trained staff as key to supporting people to remain or return home.

Workforce

The workforce identified 6 key themes when they were asked to consider “What Matters to You”.

1. Increased integration of services to support partnership working leading to improved service delivery.
2. Ensure we have the right services, in the right place and people know how to access them.
3. We need to consider a range of approaches to improve time efficiency for social care workers moving between appointments.
4. We need to promote and value volunteering within communities.
5. People value continuous feedback.
6. Create an environment where people’s contribution is valued.

Joint SPG/IJB consultation (Priorities of preference)

Inequalities - Support where and when it is needed most: Targeting resources to people and communities who need it most, increase life expectancy and reduce differences in health and wellbeing.

Open Door - Improving ways to access services and supports: Making it easier for people to get the health and social care supports that they need.

Working and planning together - Planning services to meet local need: Working with communities to design the health and social care supports that they need.

Workforce - Valuing the workforce: Supporting the health and social care workforce to keep well, learn and develop.

Local – we will enable people and communities to thrive.

Sustainable – we will ensure services are inclusive and viable.

Wellbeing – we will support early intervention and prevention.

Outcomes – we will promote dignity, equality, and Independence.

Integration - we will strengthen collaboration and encourage continuous improvement.

Joint SPG/IJB consultation

This meeting confirmed that it is important we establish an outcome focussed approach, an approach that is measurable and that delivers results.

To do so we need to consider the timeframe of the plan, we need to think long term and that although this is a three-year Strategic Plan its priorities will continue beyond.

We need to use language that isn't deficit based and that is focussed on improvement and that a co-productive approach with our communities is essential to achieving a shared understanding of where we are now and where we want to be moving forwards.

A first draft will come to our February 2024 IJB meeting.