## PERTH AND KINROSS COUNCIL

# **Housing and Health Committee**

# 25 May 2016

# **Health and Social Care Strategic Commissioning Plan**

Report by Director (Housing and Social Work) and Depute Chief Executive, HCC (Corporate and Community Development Services)

# **PURPOSE OF REPORT**

This report asks Committee to note the establishment of the Perth and Kinross Integrated Joint Board from 1<sup>st</sup> April and the publication of its Strategic Commissioning Plan 2016-2019. The plan, the first of its kind, sets out the vision, priorities and funding of £191m health and social care services in Perth and Kinross and the transformation needed for services deliver ambitious outcomes to meet future needs and challenges.

# 1. BACKGROUND

- 1.1 The Public Bodies (Joint Working) (Scotland) Act requires integration authorities to prepare strategic plans which set out their integration arrangements to achieve or contribute to national health and well-being outcomes. These plans should divide the area into at least two localities.
- 1.2 Strategic plans should reflect the important role of informal community capacity building to deliver more effective preventive and early interventions. They should also deliver improved outcomes through better aligning investment to what we know about the needs of people in local communities, available resources and support, and what is working to deliver better outcomes.
- 1.3 The Integration Joint Board (IJB) approved the draft strategic plan for formal consultation in November 2015 and this was presented to Housing and Health Committee in January (Report 16/23 Revised). It was based around 5 key themes and agreed actions and priorities to be delivered through localities, with local management teams developing and implementing their local strategic plans.
- 1.4 Strategic plans are to be reviewed annually and an annual performance report submitted to the Government on progress in achieving the aims and actions within the plan.

## 2. RESULTS OF FORMAL CONSULTATION

2.1 The strategic plan was widely circulated for a period of formal consultation from November to the end of January 2016, with a summary and an easy read version also being made available. The following methods were used:

- NHS Staff: online consultation survey via the NHS Website
- Perth and Kinross Council (PKC) Elected Members
- PKC staff online consultation survey via the Council Website
- Strategic Plan Group 27 members
- 3<sup>rd</sup> Sector Forum 45 organisations invited to take part and an email links to the survey sent to 387 contacts (distribution network)
- PKAVS Minority Communities Hub
- PKAVS Community Engagement Team feedback gathered from engagement activities
- Perth and Kinross Association of Voluntary Services
- Community Councils all sent letters inviting them to take part
- General Practitioners all sent letters inviting them to take part
- The general public invited to take part via press releases, the Council's Website and NHS Website in an online survey with accompanying copy of the draft plan, summary document and easy-read version
- 2.2 A total of 111 responses were submitted from members of the public (39%); Health and Council employees (30.5%); service providers (17%); and users and carers (14%). 93% agreed with the plan's strategic priorities; 87% found the plan very/helpful; 85% agreed/strongly agreed with the plan's actions and principles; and 75% agreed with the plans to deliver services locally.
- 2.3 Many detailed comments were included, some of which are summarised below:
  - Need more on black & ethnic minority issues, including health inequalities, access, housing, and Gypsy Travellers
  - Welcomed recognition of the third sector but some concern that third and independent sector contribution not fully recognised (involvement and impact)
  - Transport key issue for many communities
  - Need clarity on how the new arrangements will work, e.g. GP health hubs
  - Information from Join the Conversation shouldn't be lost
  - Words fine, but will funding to deliver and how will issues be measured?
  - Need to explain what is meant by working with communities
  - Need clarity about meaning of 'engaging with communities' and need to recognise the diversity of opportunities within communities for people – not just traditional health and social care services. More emphasis on community assets and personal resources
  - Very positive ambitions
  - · Lack of financial plan referred to in relation to what resources available
  - Some concern about raising public expectations
  - Other gaps identified: end of life care, death and dying; role of pharmacy and recognition of carer role
  - Suggestion for improvements in technology text messages for appointments
  - Acknowledged role for locality planning but plea not to ignore those who
    may not identify with specific localities e.g. gypsy traveller

These and other comments and feedback were incorporated in the final version of the plan.

## 3. PROPOSALS

- 3.1 A radical approach is needed to transform the health and social care system to prevent the avoidable use of health and social care and respond flexibly and appropriately to people who are vulnerable and need care and support. It is also needed to target the partnerships challenging finances on the areas that will meet our priorities. It is vital that our limited budgets are targeted at agreed priorities, transforming services to shift the balance of care to prevention and early intervention.
- 3.2 There are already many strong, effective, person-centred services and support which need to be built on to continue to shift the balance of care towards local, community based services, adapting to the specific needs of communities in the different areas of Perth and Kinross. Based on the Perth and Kinross vision for health and social care, knowledge and understanding of population, themes identified from community and stakeholder engagement and lessons learned from local initiatives and elsewhere, 5 priority themes were identified:
  - 1. Prevention and early intervention
  - 2. Person centred health, care and support
  - 3. Work together with communities
  - 4. Inequality, unequal health outcomes and healthy living
  - 5. Making the best use of available facilities, people and resources
- 3.3 As outlined in the plan, attached in the appendix, over the next three years the partnership and the IJB is committed to:
  - Developing an integrated health and social care system which focuses on prevention, anticipation and supporting people to manage their care and support
  - Developing integrated locality teams so that all staff and people who use services, as well as communities can work together to improve access, care and the quality of services.
  - Ensuring people, including carers, are at the centre of all decisions, with staff supported and enabled to achieve this through the organisational development plan
  - Improving the health of people and communities through wider partnership working to identify their needs, focus on health promoting, addressing health and care inequalities
  - Overseeing a programme of transformation to achieve the challenges, focusing on change and new and creative ways of working
- 3.4 The financial challenges facing the partnership are significant, reflecting those of Perth and Kinross Council and NHS Tayside. In this environment achieving financial balance will require a focus on service redesign within the overall resources available.

- 3.5 Although the plan describes the IJB's strategic priorities, it needs work to identify and agree future commissioning arrangements to meet its vision and aspirations. Resources will have to be shifted to support the commitment to prevention and early intervention, to prevent later, costly interventions. Some key things need to be addressed, including:
  - What the partnership budget will be spent on in future what will be commissioned and decommissioned to meet the strategic plan's priorities?
  - Supporting people and culture to ensure new ways of working
  - Clarity as to how managers, communities, providers will be supported to do this
  - Establishment of robust project management and accountability arrangements so that services are transformed.
- 3.6 The legislation (Public Bodies (Joint Working)) includes details on the performance information to be submitted annually to the Scottish Government. This includes a description of the extent to which arrangements in the strategic plan have achieved or contributed to achieving the national health and well-being outcomes and information on the way arrangements set out in the strategic plan have contributed to providing integrated services. The performance information also needs to include an assessment of the extent to which the planning and delivery of integrated services achieves best value, emphasising the importance of robust and sound commissioning and decommissioning arrangements.

# 4. COUNCIL AND COMMUNITY PLANNING

- 4.1 The health and social care Integration Joint Board (IJB) was formally established on 1<sup>st</sup> April 2016. It has responsibility for £191m health and social care services and a staff group of around 3,000 and a Chief Officer with operational responsibility for leading and delivering these services. The Board is part of the Community Planning Partnership and will work particularly closely with the Children and Young People Strategic Partnership and the Community Safety Partnership. Many of the strategic priorities focus on individuals and families who are also targeted and supported by these partnerships.
- 4.2 The role and function of health and social care will continue to be an integral part of the Council's structure and focus. The IJB's Chief Officer is part of the Council's directorate, being a member of the Executive Officer Team and working closely with the Chief Executive and Depute Chief Executive (Corporate and Community Development Services) and Director of Housing and Social Work. In addition, his Chief Officer Group includes health, Council and Third Sector Heads of Service to lead and deliver integration and the priorities of the strategic plan.
- 4.3 The strategic plan is strongly focused on delivering locally based services to support people to remain at home in their communities. The capacity and resources (assets) of local people and communities is a strong feature of the plan as a necessary and important part of future health and social care as

services transform and adapt in order to be able meet future needs and challenges.

# 5. FUTURE HEALTH AND SOCIAL CARE SERVICES

- 5.1 The strategic plan describes the IJB's commitment to change the way health and social care services are delivered in order to meet the many challenges facing individuals and local communities. It outlines the positive experiences that people have when services and support connect effectively, putting each person and their situation at the heart of the decisions and choices that are made. Importantly, the plan focuses on the role of communities, the Third and Independent Sector in supporting and enabling people to live healthy, independent lives at home or in a homely setting.
- 5.2 The plan emphasises the need for services and support to intervene early to prevent later, longer term issues arising, and enabling people to manage their own care and support by taking control and being empowered to manage their situation. Where this is not possible, services need to be able to target resources where they are needed most, reducing ill health and deterioration and ultimately reducing health inequalities. This means looking and the whole system:
  - ✓ Locality based planning and commissioning
  - ✓ Allocating resources to support prevention and early intervention.
  - ✓ More effective planning with acute (hospital services) to support new ways of working
  - Citizen and community empowerment and capacity building
  - ✓ Workforce planning and development
  - ✓ Partnership with the voluntary and independent sectors
  - ✓ Developing locally based integrated teams to drive and manage health and social care locally
  - ✓ Bringing GP practices together in locality based clusters
  - ✓ Working with primary care colleagues to integrate community health services that work with GP practices, community pharmacists, dental practitioners and optometrists
  - ✓ Expanding technology, particularly in rural areas
  - ✓ Using local community hospitals to provide planned care
  - ✓ Tackling the rise in unplanned hospital admissions.
  - ✓ Reducing delayed discharges from hospital

## 6. CONCLUSION AND RECOMMENDATIONS

- 6.1 The strategic plan in the appendix has a clear vision and an aspiration to transform services to meet future needs and challenges. It is about working together, with people, communities, the third and private sectors, to deliver innovative ways of meeting people's needs and enabling them to live healthy lives at home or in a homely setting.
- 6.2 The plan emphasises the need for services and support to intervene early to prevent later, longer term issues arising, and enabling people to manage their

own care and support by taking control and being empowered to manage their situation. Where this is not possible, resources should be targeted where they are needed most, reducing ill health and deterioration and ultimately reducing health inequalities.

6.3 The Integration Joint Board has responsibility for ensuring the strategic plan is delivered and its vision and outcomes achieved. However, it doesn't do this in isolation. The Housing and Health Committee will inform the IJB about the delivery of its community care elements, retaining a core competence for prioritising the strategic direction of housing and community care services as they help the Council deliver key elements of the Corporate and Community Plans.

# 6.4 Committee is asked to:

- (i) Note the publication of the first strategic plan for health and social care which was approved by the Integration Joint Board on 23<sup>rd</sup> March 2016.
- (ii) Require the Depute Chief Executive, HCC, (Corporate and Community Development Services) and the Director of Housing and Social Work to provide regular updates on progress.

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**Approved** 

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# 1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

Strategic Implications	Yes / None
Community Plan / Single Outcome Agreement	Yes
Corporate Plan	Yes
Resource Implications	
Financial	None
Workforce	None
Asset Management (land, property, IST)	None
Assessments	
Equality Impact Assessment	Yes
Strategic Environmental Assessment	None
Sustainability (community, economic, environmental)	None
Legal and Governance	Yes
Risk	None
Consultation	
Internal	Yes
External	Yes
Communication	
Communications Plan	None

# 1. Strategic Implications

# Community Plan / Single Outcome Agreement

1.1 This report supports the delivery of the outcomes of the Community Plan/Single Outcome Agreement.

# Corporate Plan

1.2 This report supports the delivery of the outcomes of the Corporate Plan.

# 2. Resource Implications

# <u>Financial</u>

2.1 As indicated in the Strategic Joint Commissioning Plan.

# 3. Assessments

# **Equality Impact Assessment**

3.1 Under the Equality Act 2010, the Council is required to eliminate discrimination, advance equality of opportunity, and foster good relations between equality groups. Carrying out Equality Impact Assessments for plans and policies allows the Council to demonstrate that it is meeting these duties.

• The proposals have been considered under the Corporate Equalities Impact Assessment process (EqIA) and are not relevant

# Strategic Environmental Assessment

3.2 The Environmental Assessment (Scotland) Act 2005 places a duty on the Council to identify and assess the environmental consequences of its proposals.

No further action is required as it does not qualify as a PPS as defined by the Act and is therefore exempt.

# Legal and Governance

3.3 The Head of Legal Services has been consulted and commented on this report.

#### 4. Consultation

<u>Internal</u>

4.1 The Heads of Legal and Finance have been consulted on this report.

## 5. Communication

5.1 None

## 6. BACKGROUND PAPERS

None

## 7. APPENDICES

Health and Social Care Strategic Commissioning Plan 2016-2019