

Title/Subject: Strategic Outcomes & Local Delivery Plan, 2016 - 2020
Meeting: Integration Joint Board
Date: 3 February 2017
Submitted By: Chief Officer
Action: For Noting

1. INTRODUCTION

- 1.1 The IJB has previously considered the final Strategic Outcomes and Local Delivery Plan (SOLD) 2016-2020 for approval.
- 1.2 The Falkirk Integration Joint Board has a lead role in the delivery of one priority and one outcome and contribution to others. This work is taken forward by the Chief Officer.

2. RECOMMENDATIONS

The Integration Joint Board is asked to:

- 2.1 Note the submission of the SOLD Delivery Plans, developed for the priority and outcome led by the IJB, to the Community Planning Partnership Strategic Board
- 2.2 Note the IJB role as a delivery group and responsibility to provide progress and performance reports to the Community Planning Partnership Strategic Board
- 2.3 Note the development of a locality planning framework for the Community Planning Partnership.

3. BACKGROUND

- 3.1 The SOLD Plan replaces the Community Planning Partnership (CPP) strategic community plan and single outcome agreement. It is the focus of delivery on the CPP priorities and outcomes over four years that partners will work together to deliver. The plan comprises 4 strategic priorities and 6 local outcomes as follows
- 3.2 Strategic priorities are significant issues which local communities face and are proposed for priority attention. These are:

- *improving mental health and wellbeing*
- maximising job creation and employability
- minimising the impact of substance misuse on communities, families & individuals
- addressing the impact of poverty on children.

3.3 Local outcomes represent business as usual for partnership groups. These are the things that the CPP will progress to improve the local area and the lives of local people. The 6 local outcomes are as follows:

- Our area will be a fairer and more equal place to live
- We will grow our local economy to secure successful businesses, investment and employment
- Children will become adults who are successful and confident
- Our population will be healthier
- *People live full, independent and positive lives within supportive communities*
- Our area will be a safer place to live.

4. DELIVERY PLANS

4.1 The CPP Strategic Board asked that the IJB oversee the preparation and submission of a Delivery Plan covering the delivery of outcomes and priorities for its own strategic plan, which should directly contribute to the priorities within the SOLD. In addition the IJB is accountable to the Community Planning Leadership Board for:

- *Improving Mental Health and Wellbeing* strategic priority
- *People live full, independent and positive lives within supportive communities'* local outcome
- a remit with the health and wellbeing outcome
- a remit with the substance misuse priority.

4.2 This work has been taken forward by the Chief Officer as responsible officer on behalf of the IJB for the priority and outcome highlighted. The Delivery Plans were submitted to the Leadership Board meeting on 17 November 2016, and contained more detail on the sub-actions. Further work has been done to provide the relevant success measures. This will be presented to the CPP Executive group on 8 February 2017 and to the CPP Strategic Board in March 2017 to comply with their agreed reporting timescales. The IJB are asked to note these plans at Appendix 1.

4.3 In addition consideration has been given to the whole plan and its contribution to all outcomes not just those particularly relevant. The IJB therefore needs to consider how this will be achieved and then reported back to the Leadership Board once reporting timescales have been agreed.

4.4 The IJB will be aware that the Community Planning Partnership is implementing a new Locality Planning Framework as part of its response to the requirements of the Community Empowerment (Scotland) Act 2015. The framework sets out 3 levels of planning as set out in Appendix 2.

- 4.5 A pilot of locality planning is currently underway at the community level of the framework in Bo'ness and Blackness. This has focused on how to support the introduction of a new model of service delivery for advice services. This process has considered location based issues, as well as potential solutions on how best to support those who most need access to services. This has involved working closely with service providers, Elected Members and community representatives. The process has been divided into the following two workstreams:
- Implementation of the new service delivery model
 - Undertaking a process of participatory budgeting with local community representatives to look at solutions towards the implementation of the new service, as well as other pertinent local issues.
- 4.6 It is anticipated that a report seeking approval for the final Locality Planning Framework will be submitted to the Community Planning Strategic Board in February 2017.
- 4.7 The Community Planning Partnership has recently implemented a new leadership structure, as part of its overall programme to improve its governance arrangements. These changes include:
- The standing down of the Community Planning Leadership Board. This has been replaced by a new more compact Strategic Board. The IJB is still represented by its own Board Member on this new body; and
 - The establishment of a new chief officer Executive Group, also with a compact membership. This group has a key role in supporting the Board in carrying out its functions, and that its decisions are implemented and resourced.

5. CONCLUSIONS

Resource Implications

The priorities set out in the SOLD Plan will require specific focus over the coming years if outcomes are to be achieved and priorities addressed. Integrating activity on locality planning should ensure that IJB resources are optimised when added to those of the CPP.

Impact on IJB Outcomes and Priorities

The IJB has a key role on the delivery of priorities and outcomes within the SOLD plan as noted at section 4.1.

Legal and Risk Implications

The CPP and its constituent partners are required to be compliant with the Community Empowerment (Scotland) Act 2015.

Consultation

Priorities and outcomes have been the subject of public and in-partnership consultation. There is therefore no requirement on the IJB to undertake further consultation.

Equalities Assessment

The SOLD is designed to be inclusive and give priority to those experiencing the greatest level of inequality in society. One of the outcomes within the SOLD specifically focuses on equality issues. The CPP should therefore have a positive impact on addressing inequality and comply with the requirements of the Equality Act 2010.

Approved for submission by: Patricia Cassidy, Chief Officer

Author: Suzanne Thomson, Falkirk HSCP Programme Manager

Date: 20 January 2017

List of Background Papers:

IJB Report – 5 August 2016: Strategic Outcomes & Local Delivery Plan, 2016 - 2020

Strategic Priority / Local Outcome (please detail): To enable people to live full, independent and positive lives within supportive communities

How will you measure the priority / outcome? Please note that the Success Measures noted below are the national health and well-being indicators. These will be used in the interim and will be subject to further development on local indicators.

SOLD Outcomes	SOLD Key Actions	Sub Actions	Success Measures	Timescale	Lead Organisation
Recognise the importance of encouraging independence by focusing on reablement, rehabilitation and recovery Ensure that education and information is accessible to enable people to make informed lifestyle choices and manage their own conditions	Self-Management: Individuals, carers and families are enabled to manage their own health, care and wellbeing	We will lead the cultural change required across agencies and communities to support the change necessary to deliver integrated care We will redesign services so they are flexible and responsive, ensure feedback drives continuous improvement and are aligned to our outcomes We will continue to develop the ways in which we support carers We will implement our Integrated Workforce Plan to support our staff and partners through training and organisational development We will provide information that enables people to manage their condition and is accessible and delivered consistently	1) % of adults able to look after their health well / quite well 11) Premature mortality rate	2016 - 2019	IJB
Put individuals, their carers and families at the centre of their own care by prioritising the provision of support which	Autonomy And Decision Making: Where formal support is needed people are able to exercise as much control and choice	We will develop a single point of contact for people and their carers to support access to a wide range of information on services across all sectors	7) % of adults who agree support has impacted on improving / maintaining quality of life	2016 - 2019	IJB

SOLD Outcomes	SOLD Key Actions	Sub Actions	Success Measures	Timescale	Lead Organisation
meets the personal outcomes they have identified as most important to them	as possible over what is provided	We will develop one Single Shared Assessment as standard across the Partnership We will promote the uptake of Anticipatory Care Plans that reflect the current views of people and their carers. We will ensure this information is shared where appropriate We will continue to design community based models of care, such as Closer to Home and Advice Line For You (ALFY)	12) Rate of emergency admissions for adults 17) % of care services graded 'good' (4) or better by Care Inspectorate		
Provide timely access to services, based on assessed need and best use of available resources	Safe: Health and social care support systems are in place, to help keep people safe and live well for longer.	We will ensure there is a greater focus given to individual case management, enhanced by the provision of advocacy support, where required We will continue to work across the partnership to ensure adults at risk of harm are supported and protected We will implement our Clinical Care Governance framework We will continue to invest in Technology Enabled Care as an effective and appropriate way to support care	9) % of adults supported at home who felt safe 13) Emergency bed day rate for adults 14) Readmission to hospital within 28 days rate 16) Falls rate per 1000 population 65+yrs	2016 - 2019	IJB
Identify and address inequalities	Service User Experience: People have a fair and positive experience of health and social care.	We will ensure consistent high quality services are delivered, informed by a robust service evaluation framework We will implement our Participation	3) % of adults who agree that they had a say in how their help/care was provided 4) % of adults supported at	2016 - 2019	IJB

SOLD Outcomes	SOLD Key Actions	Sub Actions	Success Measures	Timescale	Lead Organisation
		and Engagement Strategy	<p>home who agree their health and care services are coordinated</p> <p>5) % of adults receiving care and support rated as excellent or good</p> <p>6) % of people with positive GP experiences</p> <p>10) % of staff who recommend their place of work as good</p> <p>19) Rate of days people aged 75+ spend in hospital when they are ready to be discharged</p> <p>20) % of total health and care spend on hospital stays where the patient admitted as an emergency</p> <p>22) % people discharged from hospital within 72 hours of being ready</p> <p>23) Expenditure on end of life care</p>		
Involve people at a local level to help review and design services through effective participation and engagement	Community Based Supports: Informal supports are in place, which enable people, where possible, to live well for longer at home or in	We will establish locality planning structures within the three local areas agreed which will align with the Community Planning Partnership	2) % of adults supported at home who agree they are supported to be independent	2016 - 2019	IJB
		We will adopt a consistent	21) % of people admitted to		

SOLD Outcomes	SOLD Key Actions	Sub Actions	Success Measures	Timescale	Lead Organisation
Reduce avoidable admissions to hospital by ensuring that priority is given to strengthening community based supports	homely settings within their community.	framework when commissioning services that will build sustainable capacity within all sectors	hospital from home then discharged to care home 15) % of last 6 months of life spent at home or in the community		
		We will build on existing strengths within local communities	18) % of adults 18+yrs receiving intensive support at home 8) % of carers who feel supported in their role		
		We will provide information about community based support that is accessible and presented in a consistent manner	<i>Note linkage to 'Experience'</i> 19) Rate of days people aged 75+ spend in hospital when they are ready to be discharged		
			22) % of people discharged from hospital within 72 hours of being ready		

Name of Lead Officer: Patricia Cassidy	Signature:	Organisation: Falkirk Health and Social Care Partnership
Designation: Chief Officer		Date: 24 January 2017

Falkirk Community Planning Partnership Strategic Outcomes & Local Delivery Plan 2016 – 2020: Mental Health and Well-being Delivery Plan

Strategic Priority / Local Outcome (please detail): Improving Mental Health and Wellbeing

How will you measure the priority / outcome? Please note that the Success Measures noted below are subject to further development and are included as indicative measures at this stage. Work is ongoing to finalise the lead organisations and timescales for the Key Actions identified in the Delivery Plan.

Outcomes	Key Action	Sub Actions	Success Measures	Timescale	Lead Organisation
Local people, including carers, are aware of and have access to good clear pathways of support and treatment and access them	Provide local support for individuals, and their carers, with a wide range of mental health problems across the lifespan	<p>Develop and maintain a Falkirk Mental Health Services Directory that includes service information for universal provision, early intervention and specialist services for children, young people, adults and older adults</p> <p>Complete a mapping exercise of existing services and community assets - this will include information on demand, flow and capacity</p> <p>Review and refine pathways across all providers to improve inter-connectedness of services so seamless experience for service users and carers, particularly at points of transition</p> <p>Ensure evidence-based interventions are available as close to the communities that need them as possible</p> <p>Audit evidence-based interventions for conditions</p> <p>Develop and apply quality control procedures to all recommended information or services</p> <p>Develop a strategic approach to the use of technology and social media eg use of apps to support people and staff</p>	<p>Adult in-patient service user experience</p> <p>Reduction in waiting times for referral to :</p> <ul style="list-style-type: none"> • Adult Psychological Services • CAMHS <p>Number of individuals receiving evidence based interventions:</p> <ul style="list-style-type: none"> • Psychological Positive Parenting • Post-diagnostic Support • CAMHS <p>Reduce number of completed suicides</p> <p>Falkirk Mental Health Services Directory</p>		

Appendix 1b

Outcomes	Key Action	Sub Actions	Success Measures	Timescale	Lead Organisation
		Support adults, in particular hard to reach groups, to gain knowledge and life-skills training to enable them to manage their own mental health and wellbeing and build their resilience.			
Clear leadership is established which addresses stigma, isolation and loneliness in relation to mental health and wellbeing throughout the life course.	Provide opportunities for social interactions which aim to reduce stigma by raising awareness of mental health issues in the wider community.	<p>Identify key leads at CPP level to ensure strategic influence and to apply a corporate approach to enable the cultural shift required</p> <p>Develop a clear and coordinated approach across the CPP to improve awareness and communication</p> <p>Develop a communication plan including a review and change of language in marketing materials across services</p> <p>Prioritise early intervention and individual and community resilience practice which tackles stigma and enables people with mental health issues to connect with their community</p> <p>Ensure an evidence based person-centred recovery approach is available to individuals</p> <p>Develop a partnership engagement approach with the community</p> <p>Consider expansion of Stress Control Training Programme and other forms of beneficial training, including in the workplace</p> <p>Improve equality of access to social prescribing across all areas with evidence-based measure on the impact and effectiveness</p>	<p>Number of Falkirk attendees who completed awareness and training sessions:</p> <ul style="list-style-type: none"> • MH First Aid • Stress Control • Self Harm 		
Organisations are clear on individual roles and		Review existing structures for mental health and well-being strategic and operational groups			

Appendix 1b

Outcomes	Key Action	Sub Actions	Success Measures	Timescale	Lead Organisation
collective responsibilities		<p>and ensure there is a clear governance structure for all groups</p> <p>Ensure commissioning, governance and clinical supervision of services is of a high quality, safe, effective and efficient</p> <p>Review the role of Clinical and Care Governance Frameworks for the oversight of commissioned services</p>			
Staff are skilled, competent and confident to raise the issue and increase awareness of mental health and wellbeing, as well as refer and signpost as appropriate.	Build the capacity of the workforce, who work with children, young people, adults and older adults, to support individuals who experience a range of mental health problems.	<p>Develop a multi-agency training and learning framework. This should:</p> <ul style="list-style-type: none"> Map existing training and development provided across services, identify gaps and offer universal and specialist opportunities, including wellbeing and crisis interventions be accessible and include community involvement and engagement link to service delivery and improvement build relationships and encourages good communication across services 'to break down barriers' ensure practitioners have the confidence and skills for early identification of needs and early intervention. Ensure practitioners have the skills and knowledge to deal with individuals in distress and appropriately support and signpost align universal and specialist opportunities to role and service plan facilitate annual practitioner network events Where appropriate ensure training is delivered and promoted on a multi-agency 	<p>Number of Falkirk attendees who completed awareness and training sessions:</p> <ul style="list-style-type: none"> MH First Aid Stress Control Self Harm 		

Appendix 1b

Outcomes	Key Action	Sub Actions	Success Measures	Timescale	Lead Organisation
		<p>basis</p> <p>Develop measures relating to the impact of training on service delivery / service user experience</p> <p>Implement a joint leadership programme across the CPP partners to ensure we are all working to the same standards</p> <p>Ensure managers have the knowledge, skills and support to respond to, and support staff, who are absent from work due to stress and mental health problems with the availability of coaching and counselling</p> <p>Ensure all staff / volunteers are aware of strategic priorities, priority populations and how best to support them</p>			
Children and young people will become resilient, socially competent and successful adults.	Children and young people are supported to develop knowledge and understanding, skills, capabilities and attributes they need to develop and maintain positive mental, emotional and social wellbeing now and across the lifespan.	<p>Ensure all CPP partners exercise their responsibilities as Corporate Parents</p> <p>Ensure early assessment of needs and use of the Falkirk Child's Plan including high quality Team Around the Child ((TAC) processes are in place and are given suitable support</p> <p>Increase the uptake of evidenced based parenting programmes, currently Psychology of Positive Parenting (POPP)</p> <p>Agree evidence based approaches/strategies are to be used by all partners in Falkirk</p> <p>Ensure high quality Team Around the Child are in place as early as possible</p>	<p>Children and young people receive timely service according to individual need (Casefile Audit)</p> <p>The % of HOLAC children who receive a mental health assessment when they become looked after (in accordance with CEL 16.)</p> <p>Reduced waiting times for CAMHS services</p> <p>%age of children and young people on the Child Protection register indicating through the</p>		

Appendix 1b

Outcomes	Key Action	Sub Actions	Success Measures	Timescale	Lead Organisation
		<p>Review service provision and communication around transition periods e.g. from to adult services</p> <p>Develop Children's Commission MH and wellbeing group and action plan and link to other outcome plans as appropriate</p> <p>Expand perinatal and infant mental health support</p> <p>Develop a model using a tiered approach to mental health provision in schools including PSHE curriculum, support to children and young people and support to staff</p> <p>Develop a common approach around attachment</p>	<p>Falkirk Outcomes Framework that they have improved mental health and wellbeing</p> <p>100% of Named persons will be trained in Five to Thrive</p>		
Name of Lead Officer: Patricia Cassidy	Signature:		Organisation: Falkirk Health and Social Care Partnership		
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CPP Locality Planning Framework

SOLD Priorities and Outcomes with underpinning suite of delivery plans

**Integrated Children's
Service Plan**

**Poverty and
Inequalities Strategy**

Health Improvement

**Economic Development
Strategy**

**Public Protection and
Community Justice
Strategy**

**Strategic Delivery Plan
IJB**

Intermediate Planning Level – profile the area, identify communities that are not achieving outcomes, identify areas for community action plans etc

EAST

WEST

CENTRAL

Local Community Actions Plans – communities and neighbourhoods – examples only

**Bo'ness,
Slammannan,
Grangemouth,
Maddiston**

**Camelon,
High Flats,
Westquarter,**

**Denny,
Carronshore,
Stenhousemuir**