Renfrewshire
Health & Social Care
Partnership

Shaping our future

Renfrewshire IJB's Strategic Plan 2022-25

Contents

What we cover within our Strategic Plan

Foreword

An introduction from our Chief Officer and the Chair of Renfrewshire IJB

This is Renfrewshire Health and Social Care Partnership's (HSCP) third Strategic Plan since it was established in 2016.

We have made good progress towards delivering on the priorities agreed in our most recent Plan, which covered 2019-2022. In that period, our Plan considered each individual Care Group in detail and identified priority areas which the HSCP would strive to deliver upon, alongside our partners.

However, for over half the duration of our previous Plan, the HSCP and wider society have been responding to the COVID-19 pandemic.

The pandemic has had a significant impact on everyone's lives and in many areas, we have worked flexibly to refocus our priorities to adapt to the needs of the rapidly changing environment.

This Plan looks to continue to progress those priorities which have increased in importance in the last 24 months.

John Matthews OBE
Chair, Renfrewshire
Integration Joint Board

Christine Laverty
Interim Chief Officer,
Renfrewshire HSCP

The following sections provide further information on how we have developed this Plan, and the context in which we have engaged with a range of people, groups and organisations to develop a set of agreed priorities.

We have taken a different approach to identifying our objectives, focusing on a range of themes which underpin how we deliver services, rather than looking at individual service areas themselves. We have also sought to place equalities and lived and living experience at the heart of our Plan.

This Plan is for the health and social care system in Renfrewshire, not just the Partnership. Its wider context remains challenging with the potential for significant future change in how social care services are delivered across Scotland. We also continue to deliver COVID-specific services which were unanticipated only a short time ago.

We would like to thank everyone involved in developing this Plan. Renfrewshire HSCP is a people organisation, providing support for people, by people. We are immensely lucky to have such dedicated staff who more than ever, through the pandemic, have shown their commitment to the people of Renfrewshire they care for and support.

Only by continuing to work together can we realise our vision:

Our vision is for Renfrewshire to be a caring place where people are treated as individuals and are supported to live well.

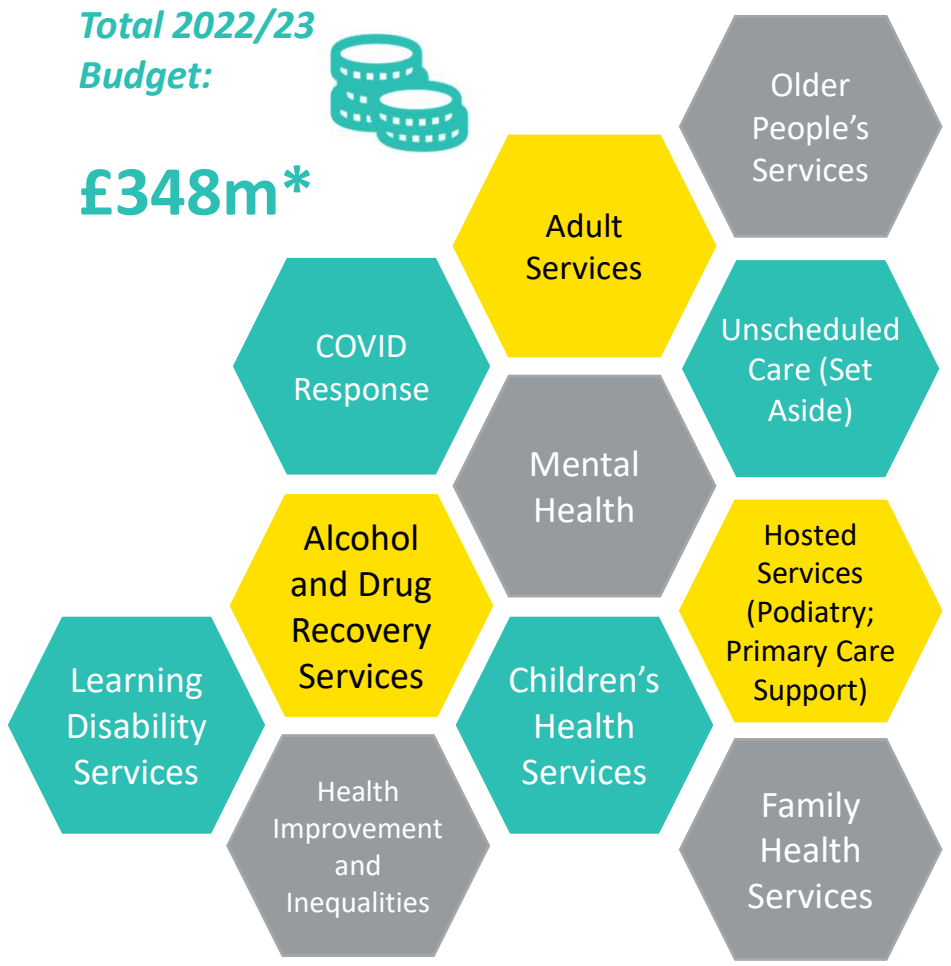
Introduction

Overview of our Services

Overview of the HSCP's Services

Our Strategic Plan covers the breadth of services integrated within Renfrewshire, as agreed by NHS Greater Glasgow and Clyde and Renfrewshire Council. We deliver adult social care services and all community health services for adults and children, with a core objective of shifting the balance of care from acute settings to supporting people in their communities and closer to home wherever possible. Further detail on delegated services can be found within the Integration Scheme.

The HSCP works closely with our partners to ensure that services are planned and delivered collaboratively and on a 'whole system' basis. This includes, for example, the Renfrewshire Alcohol and Drug Partnership, Integrated Children's Partnership and working closely with Housing Services. This helps to ensure that adults and young people are able to access support that is joined up and shaped around them rather than by organisational structures. In addition to our delegated services, the HSCP, since March 2020, also delivered an ongoing response to the pandemic alongside our partners.



*rounded figure - projected at time of writing

Localities

Our services are delivered within two geographical localities (Paisley and West Renfrewshire) and each has a Locality Manager co-ordinating a range of multi-disciplinary teams and services. In addition, our 28 GP practices in Renfrewshire operate within six clusters which each contribute to oversight of the local healthcare system within their geographies.

When planning services we seek to reflect the diverse needs of our communities in how they are delivered and we adapt where it is appropriate to do so. The HSCP is also a key partner within Renfrewshire's Community Planning Partnership.

About this Plan

Our approach to developing the Strategic Plan

Developing this Plan

This Strategic Plan is one element of the very complex landscape in which health and social care is provided to local citizens. In developing this Plan, the HSCP and partners were focused on ensuring that collaboration and engagement were at the heart of co-produced themes and objectives.

This process of engagement has helped us to shape the approach and structure of our Strategic Plan for 2022-25 and we have sought to reflect feedback throughout. This Plan looks very different to our previous Strategic Plan, with a focus on our Strategic Themes rather than a detailed overview of each Care Group the HSCP supports. We believe that this better represents how people utilise health and social care support in Renfrewshire – people are not defined by a diagnosis or the nature of support they access. To provide further detail we will supplement this Plan with an annual Strategic Delivery Plan. This will be informed by annual development plans for each Care Group, setting out objectives for each year of the Plan. These Year 1 plans will be published in June 2022 and will provide further information on specific priorities for each Care Group.

Our annual approach reflects the difficulty many stakeholders have identified in thinking about the next three years while we have been responding to the pandemic. We recognise this challenge and have therefore aimed to set out an overarching direction of travel in this document.

The diagram below sets out the collaborative approach taken to developing this Plan.

About this Plan

Shaping our Plan around consultation and engagement

Developing and testing our Plan through consultation and engagement

The Public Bodies (Joint Working) (Scotland) Act 2014 sets out particular requirements for the development of strategic plans to ensure that stakeholders are fully engaged in the preparation, publication and review of the Strategic Plan. Recognising that this Plan reflects the needs of our communities, and will be jointly delivered with our partners, each stage of the development process has centred on robust consultation to inform the approach taken and objectives identified.

Developing our approach, themes and priorities

5 Sessions with the Strategic Planning Group

2 IJB Development Sessions

18 Sessions with partners and Care Group leads to develop approach

17 Care Group workshops to identify challenges and priorities

Formal Consultation

25,871 Social media views

1,900 Views of the consultation platform

38 Stakeholder engagement sessions

144 Comments analysed

Our Methods of Engagement and Consultation

- Virtual meetings and discussions
- In-person engagement
- Promotion through existing channels and partner networks
- Targeted communications
- Formal consultation with prescribed and extended consultee groups

Our Plan on a Page

How the elements of our Strategic Plan fit together

The context of our Strategic Planning includes…

- National Health and Wellbeing Outcomes
- National legislation, policies and strategies
- Local plans, strategies and change programmes
- Renfrewshire's Population and Demographics
- Independent Review of Adult Social Care and the National Care Service
- **COVID-19 Recovery: Principles**
  - Health and wellbeing
  - Stability
  - Maintaining flexibility
  - Evaluating COVID practice and impact

The objectives of these drivers will be delivered by...

'Shaping our Future' around each person

and focusing activity on our themes...

Care Group Action Plans

Informing:

Sustainable Futures: Effective use of Renfrewshire's resources

- **Healthier Futures:** Prevention and early intervention
- **Connected Futures:** Community Support
- **Enabled Futures:** Clinically Safe and Specialist Services
- **Empowered Futures:** Choice, control and flexibility

SPG Health and Wellbeing Priorities

Which are also enabled, informed and delivered through a range of strategies and plans...

- Workforce & Organisational Development
- Digital & Data
- Property
- Communication
- Governance
- Medium Term Financial Plan

The Strategic Context

Related Strategies

The national and local strategy and policy context for health and social care is increasingly complex and continues to evolve, not least as a result of COVID-19 and the impact that this has had on the way in which services are accessed and delivered. National legislation and policy, aligned with local frameworks and strategies, exist to provide guidance to Partnerships.

As a result, our Plan will not be delivered in isolation, but needs to reflect, interact with, and support the delivery of each of these policies and strategies. We provide an indicative, but not exhaustive, view of related plans and strategies below, and provide further details on the 9 national health and wellbeing outcomes on the following page.

National Context

Legislation and Policy

- Social Work (Scotland) Act 1968
- Community Care and Health (Scotland) Act 2002
- Social Care (Self-directed Support) (Scotland) Act 2013
- Public Bodies (Joint Working) (Scotland) Act 2014
- Children and Young People (Scotland) Act 2014
- Community Empowerment (Scotland) Act 2015
- Carers (Scotland) Act 2016
- Social Security (Scotland) Act 2018
- The 2018 General Medical Services Contract in Scotland

Strategies and Guidance

- A National Clinical Strategy for Scotland
- Realising Realistic Medicine
- Health and Social Care Standards
- Getting it Right for Every Child
- A Fairer Healthier Scotland 2017-2022
- Public Health Scotland's Strategic Plan 2020 to 2023
- Digital Health and Social Care
- SDS Framework of Standards
- IRASC and National Care Service Consultation, 2021
- NHS Recovery Plan, August 2021
- SG Strategic Framework, 2022
- COVID Recovery Strategy, 2021
- National Strategy for Economic Transformation, 2022

9 National Health and Wellbeing Outcomes (set out on the following page)

Local Context

Strategies and Guidance

NHS Greater Glasgow and Clyde

- NHS GGC Remobilisation Plan(s)
- Turning the Tide through Prevention
- Unscheduled Care Commissioning Plan
- Moving Forward Together
- Adult Mental Health Strategy

Renfrewshire Council

- Social Renewal Plan
- Renfrewshire Council Plan
- Local Housing Strategy
- Renfrewshire's Plan for Net Zero
- Renfrewshire's Economic Recovery Plan

Joint Plans

- Integrated Children's Services Plan
- Local Outcome Improvement Plan
- Primary Care Improvement Plan

The Strategic Context

Further details on the national health and wellbeing outcomes

Scotland's national health and wellbeing outcomes aim to ensure that IJBs (and HSCPs), Local Authorities and Health Boards are clear about their shared priorities by bringing together responsibility and accountability for their delivery. They provide a framework for planning health and social care services and for the strategic objectives set out under this Plan's themes. Each objective has been aligned with the national outcomes that it will support to deliver. The nine outcomes are:

Outcome 1: People are able to look after and improve their own health and wellbeing and live in good health for longer.

Outcome 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.

Outcome 3: People who use health and social care services have positive experiences of those services, and have their dignity respected.

Outcome 4: Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.

Outcome 5: Health and social care services contribute to reducing health inequalities.

Outcome 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 wellbeing.

Outcome 7: People who use health and social care services are safe from harm.

Outcome 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.

Outcome 9: Resources are used effectively and efficiently in the provision of health and social care services.

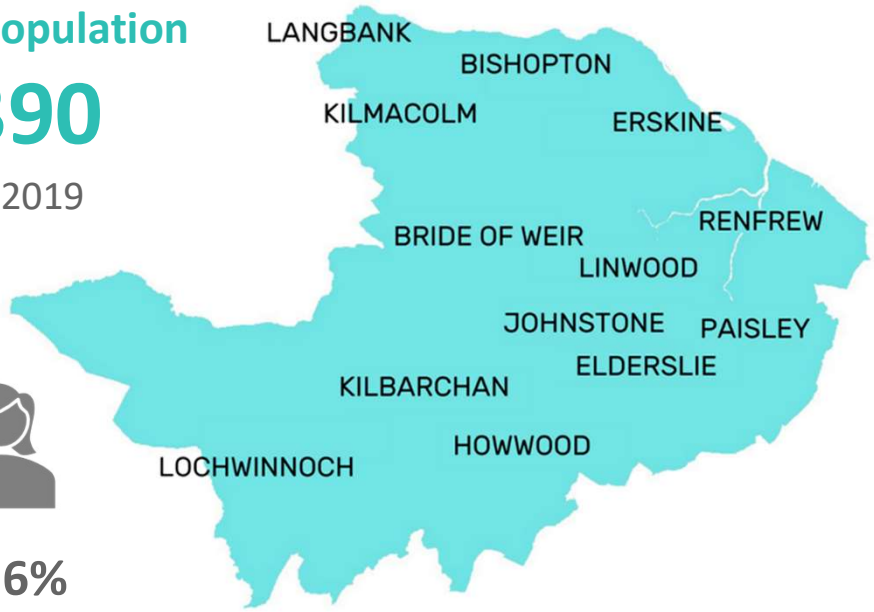
The Strategic Context

Renfrewshire's current demographics; NRS 2020 mid-year estimates

Renfrewshire Population

179,390

0.2% from 2019



48.4% **51.6%**

30,182 (16.8%) **children aged 0-15**

115,055 (64.1%) **adults aged 16-64**

34,153 (19.0%) **adults aged 65 and over**

Ethnicity

National Records of Scotland data in 2020 shows that in Renfrewshire:

The **Black, Asian and Minority Ethnic (BAME)** population accounts for **2.8%** of the overall local population

This equates to **4,781 people**. Of these, **65%** are **Asian**, **17%** are **African**, **9%** are from **multiple ethnic backgrounds**, **2% Caribbean** and **7%** from **other ethnic groups**

The population will increase to **181,091**

0.9% increase on 2020 population

The **75 and over** population will increase to **17,247**

11.6% increase on 2020 75+ population

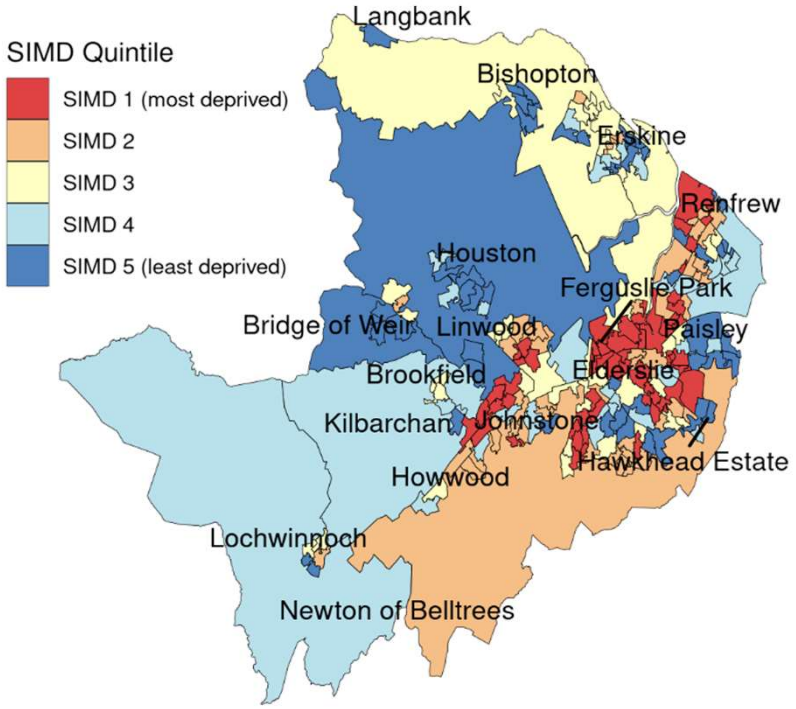
The Strategic Context

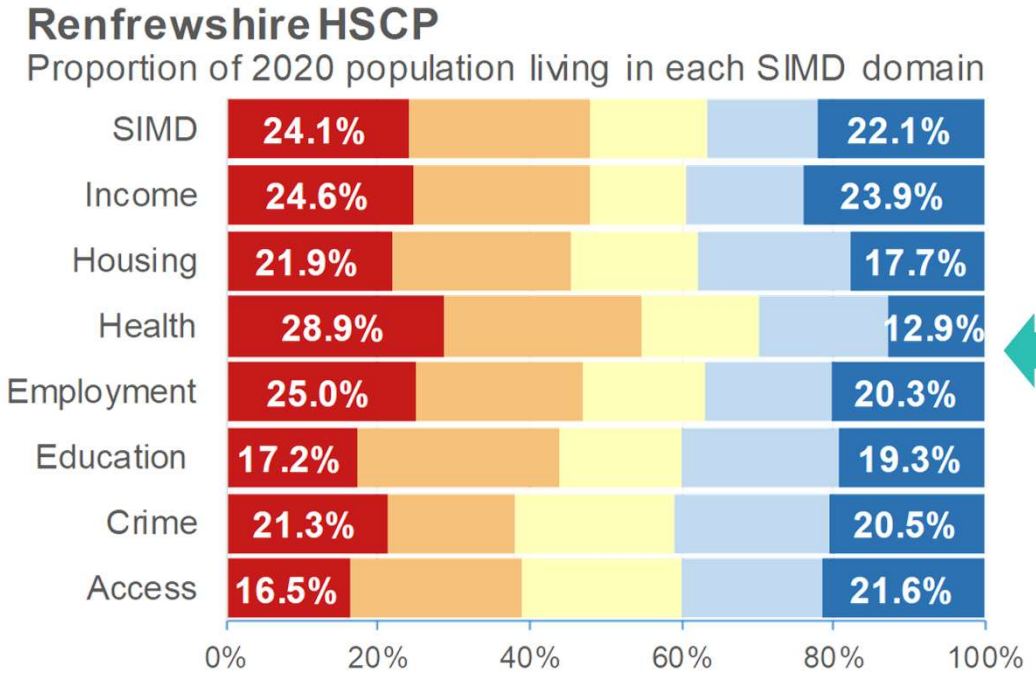
Renfrewshire's current demographics: Social and economic inequalities

Deprivation and Inequalities

The Scottish Index of Multiple Deprivation (SIMD) assesses 6,976 small areas known as 'data zones'. 2020 figures show:

- There **are 2 'data zones'** in Renfrewshire **within the 10 most deprived** zones nationally
- Almost **25% of all data zones** in Renfrewshire are in the **20% most deprived nationally** (24.1% of 2020 population)
- Renfrewshire has the **9th highest share of deprived data zones** nationally (of 32 areas)





Individual SIMD Domains show that Renfrewshire is more deprived compared to the Scotland average for **Employment, Crime, Housing and Income.**

These social and economic inequalities can **impact on self-esteem, happiness and participation in local communities and lead to poorer physical and mental health**. In Renfrewshire, **28.9%** of residents are in the **20% most-deprived areas nationally** within health indicators.

Scottish Government SIMD 2020 v2, National Records of Scotland

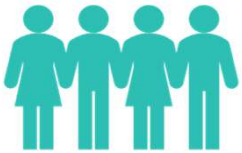
The Strategic Context

Renfrewshire's current demographics: Health Inequalities

As part of the Fairer Scotland Duty, we will assess how our actions can reduce inequalities. We will work with partners to address the socio-economic and health inequalities outlined, including mitigating the negative impacts of the pandemic on our most vulnerable and disadvantaged communities.

People with a disability are **twice as likely to face isolation** and **71% have difficulty taking part in things locally** (Glasgow Disability Alliance Action Research 2018)

It is estimated that in 2019/20 **6,997 (23.1%) children in Renfrewshire were living in poverty** after housing costs. This is **almost 1 in every 4 children.**



Compared with the least deprived areas, in the most deprived communities across Scotland*:

- people are **9 times more likely** to have an alcohol-related admission to hospital.
- people are **18 times more likely** to have a drug-related death
- the rate of **premature deaths (age 15-44)** is almost **five times higher.**
- the rate of probable deaths by suicide is **three times the rate** of least deprived areas.

- **men** are likely to live **19 fewer years** and the gap has increased by 1.3 years since 2008.
- **women** are likely to live **13.9 fewer years** and the gap has increased by 1.6 years since 2008.

**National Records of Scotland, 2021 and ScotPHO indicators*

The Strategic Context

The Impact of COVID

Delivering in unprecedented circumstances

COVID-19 continues to have an unprecedented impact on every aspect of life within Renfrewshire, nationally and globally. We have all had to adapt and respond to the greatest personal and collective challenge many of us have faced in our lifetimes. We recognise the incredible input of staff within healthcare, social care and primary care who have all gone above and beyond throughout the pandemic, adapting their roles and keeping people safe, and also the additional burden placed on unpaid carers and people who received health and social care support.

Many lives have been lost, and Renfrewshire IJB and HSCP extend our sympathies to everyone affected. We also know that the pandemic has exacerbated existing inequalities in our communities and hit the most vulnerable hardest, for example impacting on health and wellbeing, income and employment, and increasing social isolation.

There was an almost 20% increase in referrals to Recovery Across Mental Health (RAMH) services in April-September 2021 compared to same period in 2020.

A Renfrewshire Carers Centre survey found that 95% of unpaid carers felt their emotional health and wellbeing were affected by the pandemic. 78% stated their caring role increased to over 50 hours per week in mostly personal care.

Reflecting COVID-19 in our Strategic Plan 2022-25

Looking to the future, the COVID vaccination programme has had a significant impact on the links between infections, hospitalisations and deaths. However, we know that we must learn to live with COVID and that the emerging recovery will last well into the term of our Strategic Plan. Indeed, at the time of developing this Plan the impact of increasing demand on our A&E services and hospital admissions is clearly evident and is expected to continue. The Scottish Government's Strategic Framework, published in February 2022, along with future strategies will help shape how we and our partners work as organisations.

We have therefore developed a set of principles for this recovery which have informed the priorities we have identified. These are set out below.

COVID-19 Recovery: Our Principles

- Maintaining Health and wellbeing
- Focusing on service stability
- Maintaining flexibility in our pandemic response
- Evaluating COVID practice and impact and building on what works

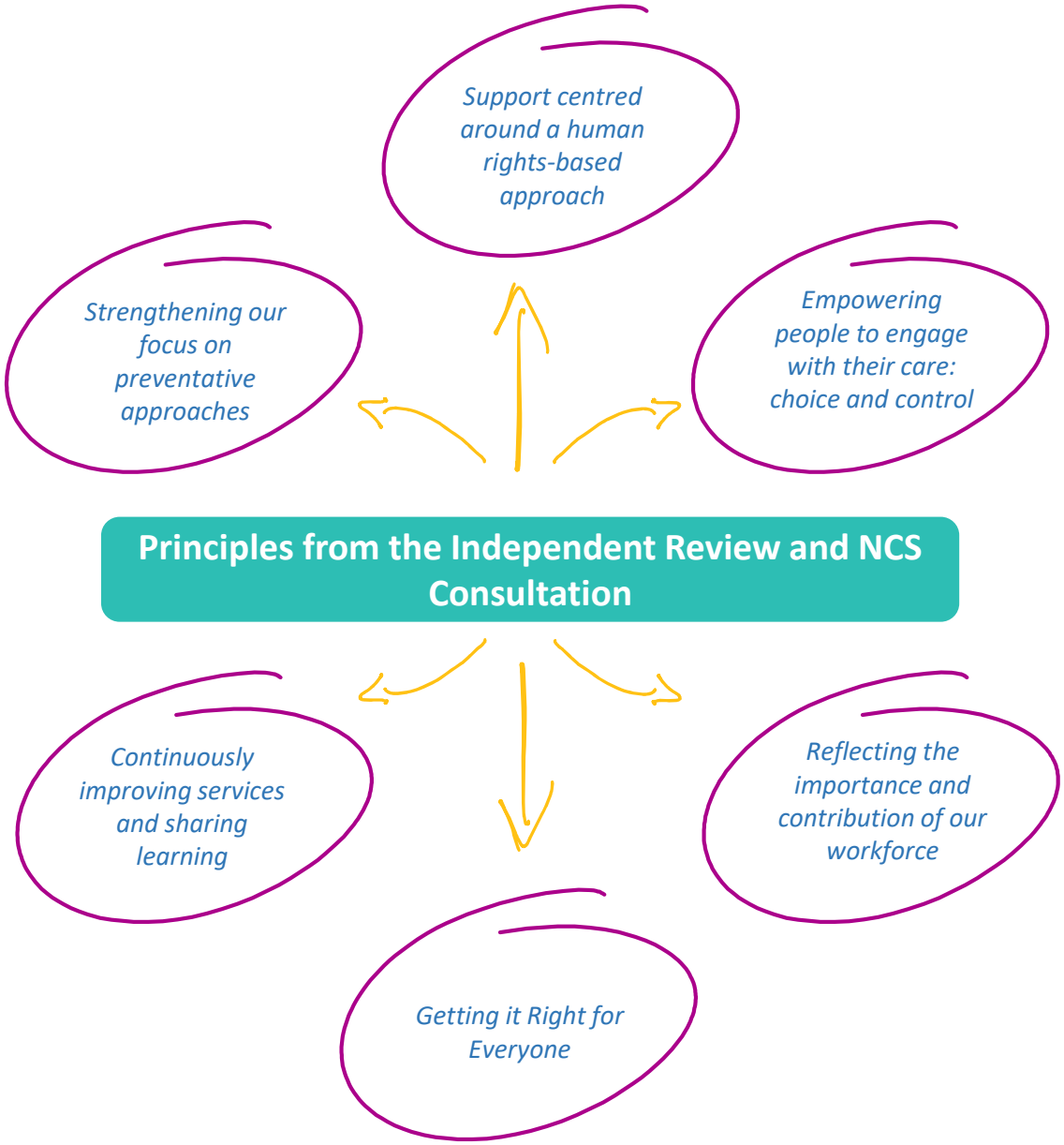
The Strategic Context

The Independent Review of Adult Social Care and the National Care Service (NCS)

The COVID-19 pandemic has shown the incredible strengths of community health and social care, but also the real challenges that face the sector. The Independent Review of Adult Social Care, and the subsequent consultation on proposals to create a National Care Service, were undertaken in response to the pandemic to consider how social care in Scotland can be further developed.

The National Care Service consultation, launched in August 2021, set out proposals for a National Care Service which built upon the recommendations of the Independent Review. These proposals are wide ranging and may lead to significant structural change within the sector over coming years. The extent and nature of this is currently unclear. This means there is a high level of uncertainty over the future structure of health and social care in Scotland at this time. Our Strategic Plan does not aim to address this.

However, the Independent Review and Consultation also set out broad principles for the future of health and social care which in our view all stakeholders will support and wish to progress. We have sought to include these throughout our Plan.



Focusing on equalities and human rights throughout our Plan...

During the last three years, we have demonstrated our commitment to addressing discrimination and delivering services that are fair and equitable to all. Our commitment to ensuring equality and supporting peoples' human rights continues to be central to this Strategic Plan.

Focusing on equalities and human rights in our Plan

Enabling everyone to have equal access to health and social care

During the last three years, Renfrewshire HSCP has demonstrated our commitment to addressing discrimination and delivering services that are fair and equitable to all, in meeting our responsibilities as required by the Equality Act 2010 and the Equality Act (Specific Duties) (Scotland) Regulations 2012. Our commitment to ensuring equality and supporting individuals' human rights continues to be central to this Strategic Plan.

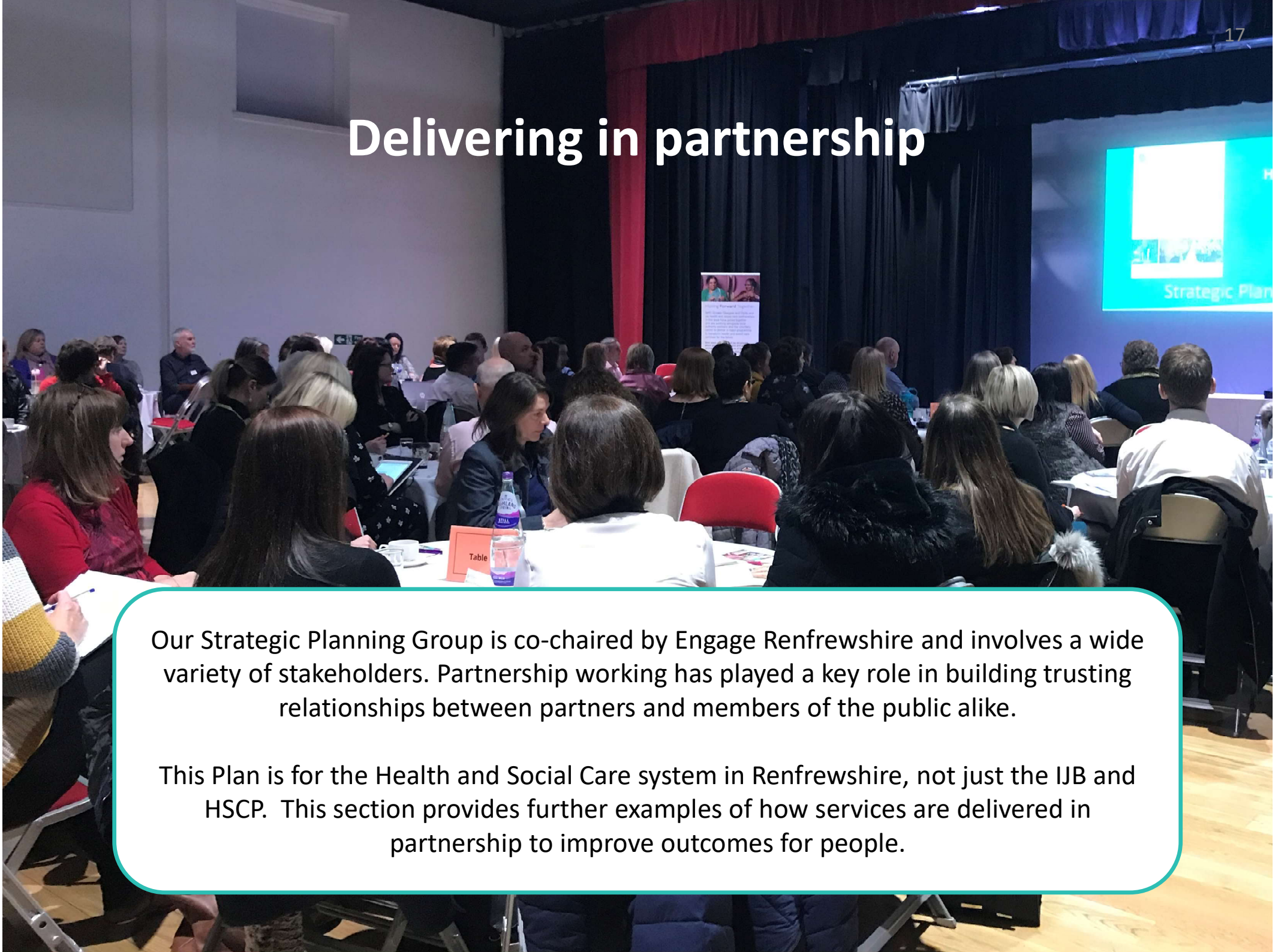
We have outlined actions throughout this Plan to help us deliver on our 2020-2024 Equality Action Plan. We will:

- Build Unpaid Carer friendly communities and increase the number of unpaid carers being identified.
- Work towards the LGBT Youth Scotland Charter of Foundations Award and become a champion of LGBT inclusion through development of an LGBTQ+ charter.
- Continue to co-fund a post to establish an integration network forum (IN-Ren), to co-ordinate and promote partnership across support, resources and services available to people from BAME communities.
- Improve the experience of people with physical disabilities and those with sensory impairments through our Independent Living Care Group.
- Continue to deliver training for staff and partners to raise awareness of Equality and Diversity and Unconscious Bias. Our IJB, SPG and Senior Management Team have already undertaken this Unconscious Bias training.
- Continue to tackle stigma in all its forms.

"The information you shared with our participants will go a long way to encourage improving mental health and wellbeing activities among ethnic minority communities but will be highly appreciated if more resources are provided to support our work."

Chinenye Anameje from Pachedu

Delivering in partnership



Our Strategic Planning Group is co-chaired by Engage Renfrewshire and involves a wide variety of stakeholders. Partnership working has played a key role in building trusting relationships between partners and members of the public alike.

This Plan is for the Health and Social Care system in Renfrewshire, not just the IJB and HSCP. This section provides further examples of how services are delivered in partnership to improve outcomes for people.

Delivering in Partnership: Responding to COVID

Partnership working throughout COVID

A partnership approach to health and wellbeing

The HSCP is committed to collaborative working and has a strong track record of delivering with our partners. So, when the pandemic began to impact upon people's lives across Renfrewshire, we had the infrastructure and relationships already in place to provide a quick, flexible response to address people's rapidly changing needs in this challenging period.

This approach has resulted in a variety of new or enhanced support for individuals. Some examples of these are highlighted below.

> *"In many ways, the crisis has brought Strategic Planning Group members closer than ever; the relationships formed and developed during 2020 are strong. A recognition perhaps, that only in working together can we possibly tackle the aftermath of the pandemic, because we need one another".*
>
> ***Karen McIntyre, Engage Renfrewshire, Co-chair of the Strategic Planning Group***

COVID Assessment Centre (CAC)	The CAC ensured that COVID-19 symptomatic people could be cared for within the community, while also ensuring hospital and GP capacity was used for those with the most serious illnesses.
'Hear for you' helpline	'Hear For You' is a free phone service, managed by RAMH, and designed to provide support for anyone who wants to talk about their feelings around the practical, emotional and financial impact that COVID-19 has had on their lives.
Befriending Support	Befriending gives people who may be lonely or socially isolated the opportunity to talk to someone in person or by phone. Some of our partners, such as Roar - Connections for Life and Active Communities, have volunteers who have been carrying out this vital role during the pandemic.
Carers Centre Practical Support	The Carers Centre ensured that unpaid carers continued to get the support they needed, ensuring they could access practical things like PPE, providing devices to get online and moving support online so unpaid carers could access training, group support and social events.
Neighbourhood Hubs	The Hubs recruited local volunteers to carry out a range of tasks for people who had to shield or self-isolate. This included delivering food packages, befriending, delivering medicines, and dog walking.
Renfrewshire Bereavement Network	A funded collaboration, led by Accord Hospice, the Bereavement Network provides support to people experiencing loss or dealing with grief by offering access to the most appropriate advice, guidance and counselling from a single point of access.

Delivering in partnership: Care Homes

A multi-disciplinary approach to safeguarding residents and staff during COVID

Supporting Care Homes during COVID

A further example of partnership working during COVID is the Renfrewshire Clinical and Care Oversight Group which was established at the beginning of the pandemic. The group was created to support the newly established Multi-Disciplinary Team (MDT) and to strengthen and enhance professional clinical and care oversight of **care homes** and **care at home services.**

This approach builds upon existing good practice, and brings together colleagues from the HSCP, Public Health and the Care Inspectorate. Residents' wellbeing is our primary focus, and this way of working enables faster access to specialist support from a range of sources, such as the HSCP Clinical Director and Senior Clinician, HSCP Chief Nurse, HSCP Contracts and Commissioning Manager, Service Planning and Policy Manager, Chief Social Work Officer and the Chief Executive's Service.

It's great to know we can call and ask for advice. The direction is good and is developing into much more of a team involvement - encouraging for all staff and residents.

Independent Renfrewshire Care Home provider feedback

Building upon success to help shape the future

New collaborative forums created during the pandemic, such as the care home peer group which provides a forum for clinical and care advice and support to all registered homes in Renfrewshire, have brought additional value and we are considering how these may be continued in the long term.

We also recognise the value of investing in our care homes nursing team who have continued to deliver great results, despite being subject to significant pressure and increasing demand. Over the last year, Renfrewshire has funded an additional three Care Home Liaison Nurses and four trainee Advanced Nurse Practitioners to help support the delivery of care within Renfrewshire care homes.

This investment will be enhanced by NHS GGC's Multi-Disciplinary 'Care Homes Collaborative' teams, which will provide access to a range of specialist support for Care Homes, including dietetics and tissue viability.

The HSCP are also strengthening Partnership working with Independent Sector providers through a three-year commitment to support a dedicated Scottish Care, Independent Lead post. This will help us ensure equity of information, shared vision, learning and representation to help achieve a mixed provision of care that is fit for purpose.

Delivering in partnership: C&YP Mental Health

Working together to improve mental health for children and young people (C&YP)

In Renfrewshire a range of services are delivered by the HSCP and partners to support children, young people, families and unpaid carers in relation to children and young people's mental health and wellbeing.

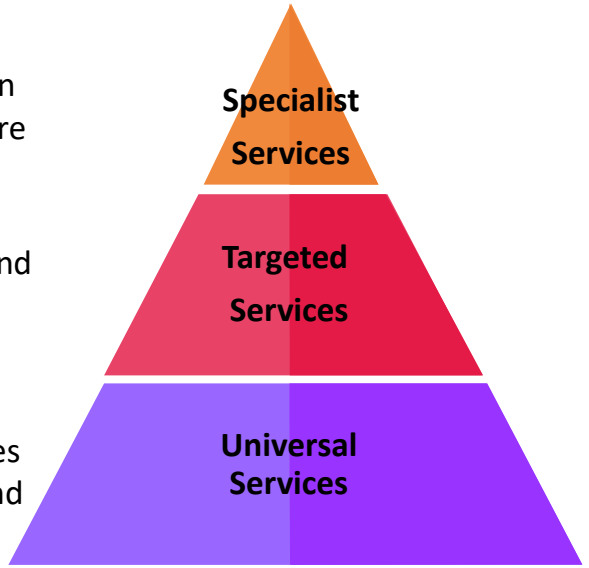
Renfrewshire Integrated Children's Service planning partnership, including third sector organisations, to support the development of the REN 10 service.

Renfrewshire Council and NHS GGC to take forward The Promise, ensuring our care experienced young people are listened to and receive the best possible support.

Renfrewshire Council Children's Services to embed the School-based Counselling Service, and with **Third Sector organisations** to develop evidence-based interventions for children and young people.

Renfrewshire HSCP provides a range of services including:

- **Specialist**: Our CAMHS team, a tier 3 specialist service, works to ensure that children and young people up to age 18 with moderate to severe mental health difficulties are identified and have access to appropriate assessment, interventions and treatment.
- **Targeted**: Introducing the school nursing mental health and wellbeing pathway to quickly identify children experiencing poor mental wellbeing, offering assessment and evidence-based interventions.
- **Universal / Targeted**: Health Visiting teams promote secure attachments to ensure that children grow up in a close and loving environment.
- **Universal**: Health Improvement work with third sector partners who support families in the Perinatal period (the period during pregnancy and up to a year after birth), and with Early Years establishments to deliver protective messages.



Our objective for the next three years is to improve children and young people's experience of services by:

- *Investing in the expansion of the multidisciplinary CAMHS team*
- *Expanding and refocusing the school nursing team*
- *Working with partners to support the development of evidence-based tier 2 services such as REN 10 and School Counselling*
- *Developing a Young Persons' Mental Wellbeing Service as a test of change*

Delivering in partnership: Alcohol & Drug Recovery

How services are working together to reduce harm

Tackling Alcohol and Drug Harm in Renfrewshire

Renfrewshire, like many other areas, has continued to experience a range of issues in relation to alcohol and drugs. Driven by concerns about the levels of harm being experienced by local people, partners established an independent Commission in 2019 to assess the true impact of alcohol and drugs in Renfrewshire. The commission builds on the extensive collaborative work already planned or undertaken by the Alcohol and Drug Partnership:

- Establishment of an **Overdose Response Team** to provide a rapid response to near-fatal overdoses.
- Enhanced access to **residential rehabilitation placements** as part of choice of treatment options.
- Implementing the **Medication Assisted Treatment Standards** established by the National Drug Death Taskforce.
- Recruitment of a dedicated **ADP Drug Death prevention Officer,** to work with partners to reduce drug-related deaths.
- Focus on **Assertive Outreach** supported by a Harm Reduction Mobile Unit to provide health care and harm reduction services in communities.

We are working with the Alcohol and Drugs Programme Board to support delivery of some of the Alcohol and Drug Commission's recommendations, including:

- Developing a programme to ensure services in Renfrewshire are **trauma informed and responsive**.
- Further developing a peer support model to ensure **recovery and lived experience** is valued in Renfrewshire.
- Recruiting a partnership officer to **change alcohol policy.**
- Carrying out an independent **review of existing family support provision** to identify gaps in support for families of people in crisis.
- Aiming to develop **wrap around support for people with complex needs** who potentially need support from different services and organisations.
- Developing a **Language Matters Initiative** to help challenge preconceptions and stigma around alcohol and drug use.

There were 67 drug-related deaths in Renfrewshire during 2020, this is the highest number in a decade and an increase of 49% compared to 2019. These, and recent alcohol-related death statistics, make clear the critical importance of the continued delivery of the above areas to achieve positive outcomes in relation to alcohol and drugs. This is a priority for all Community Planning Partners.

Our Strategic Themes and Health and Wellbeing Priorities

"If care is to be person-centred, then what it looks like will depend on the needs, circumstances and preferences of the individual receiving care. What is important to one person in their health care may be unnecessary, or even undesirable, to another. It may also change over time, as the individual's needs change"

Health Foundation, 2016

'Shaping Our Future' around each person

Developing our objectives around the needs of people and communities

Our communities, third sector and primary care colleagues (e.g. GPs, Pharmacists) have the knowledge, expertise and networks to provide advice and support which can help avoid crises and help people live independently. As needs increase, the HSCP and partners ensure that people have access to the specialist help and housing they need to recover or manage their conditions and maintain independence for as long as possible. In doing this, **we aim to shift the balance of care** from hospital to community settings – an objective which runs through this Plan.

Provide me with timely access to the specialist clinical support I need to help with my recovery and rehabilitation, manage my condition or to support me when I have a life-limiting illness or need end of life care

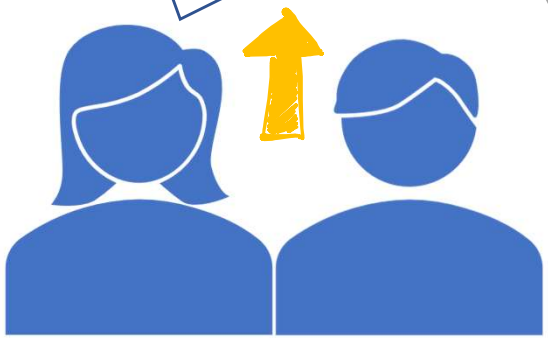
When my needs increase

Give me choice and flexibility to do the things, and build relationships, that are meaningful to me

If I am able to recover my support can change too

Give me advice to manage my own health and wellbeing and understand what help is available in my community as soon as I need it to maintain my independence

Support for those who care for me is also essential



I want my support to…

Everyone's health is influenced by a range of factors known as 'social determinants'. These include our childhood experiences, social support, income and employment, education, healthcare, housing, and the communities we live in.

These have informed our the objectives set out throughout our Plan.

'Shaping Our Future' around each person

Focusing our activity around themes which reflect our support to people

The previous page outlines how we aim to shape our services around individuals, unpaid carers and communities to support everyone in Renfrewshire to live meaningful lives and achieve their hopes and aspirations. This underpins our Strategic Plan, through which we are ***'Shaping Our Future'.*** We will do this through a focus on delivering the following outcomes within our **five key themes**:

People experience reduced inequalities and improved health and wellbeing through early action and prevention of more complex need.

People are supported to recover, or manage disabilities and long-term conditions, and to live as safely and independently in their own home or community as possible.

Our services are clinically safe and people have access to the appropriate specialist support to aid them in their recovery and rehabilitation, where possible.

People access the right care at the right time and place and are empowered to shape their support at every stage of life.

We maximise the impact of our people and resources by working collaboratively across sectors to deliver integrated services.

Shaping services through people's voices and experience

Embedding lived and living experience in how we plan and deliver services

We are committed to listening to the voices of people with lived and living experience at every stage of the development and delivery of our services. Their ideas and insight can help us to tailor services to ensure they meet the range of needs and challenges that people face every day.

We recognise though that while we have good examples of how we do this working with a number of our care groups, we have not progressed as far in some areas. This is a key area of focus in this Plan and we have refreshed our Care Planning Groups to help develop and deliver this Plan (more detail is provided on the next page).

We will continue to learn from where we do this well, for example in the development of the CIRCLE Recovery Hub and through our implementation of peer support models to support people to recover from addictions or mental ill-health. We will also continue to work with our partners to identify opportunities to improve. This commitment is embedded in many of the strategic objectives outlined in this Plan.

"It's amazing. This place is a complete blank canvas and it's all about what the service users want to see. Being in recovery, we know that you can feel invisible, but CIRCLE aims to reiterate that our service users are here and they're contributing to society again."

CIRCLE (Continuing in Recovery Changes Lives Entirely) has been developed to provide enhanced recovery-focused and trauma-informed support to local people who are on an addictions and/or mental health recovery journey. CIRCLE will provide people with improved recovery opportunities and improved links to and from other related services, ensuring individuals feel sufficiently supported throughout their journey. This will increase opportunities for people to have more independence and choice on how they manage their own recovery.

The development of our themes

Determining strategic objectives for our Plan

The Role of Care Planning Groups in defining our objectives

Our five themes represent a different approach from our 2019-22 Plan, which was structured around each care group. While this Plan does not focus on individual care groups, our themes have been agreed with our refreshed Care Planning Groups and our strategic objectives have been identified through engagement and discussion with them and a range of partnership forums.

In addition to supporting the definition of the objectives described in this Plan, our Care Planning Groups will also lead the delivery and monitoring of supporting actions within our services over the lifetime of our Plan. We will develop an Annual Strategic Delivery Plan, outlining how we will deliver the strategic objectives identified and this will be informed by annual development plans for each care group. These will be published for Year 1 in June 2022.

Linking our Strategic Planning to our Workforce Plan

As we developed our Plan, many conversations with our Care Groups and partners highlighted the impact of the pandemic on our workforce and a number of significant challenges. These include recruitment and retention, staff wellbeing, training and development, and an ageing workforce. We recognise that this Plan will only succeed if these challenges can be addressed and have referenced them throughout our themes. However, we have not gone into detail in this Plan.

In later 2022, we will publish a 2022-25 Workforce Plan, setting out our plans to address these issues in the next 3 years. This will be aligned with our Strategic Plan and the new National Health and Social Care Workforce Strategy.

Our Care Planning Groups (HSCP-led)

- Learning Disabilities
- Autism
- Older People
- Unpaid Carers Strategy Group
- Independent Living
- Palliative Care Strategy Group
- Mental Health & Wellbeing

Our Partnership Planning Groups

- Primary Care
- Adult and Child Protection Committees
- ADP and Alcohol and Drugs Commission
- Community Planning Partnership
- NHS GGC Mental Health Steering Group
- Integrated Children's Partnership
- NHS GGC Unscheduled Care Group
- Future Paisley

Healthier Futures…

For every care group, and our wider population, there are things that can help prevent ill-health, both physical and mental. These can also enable people to remain at home for longer, delay the need for medical intervention and ultimately achieve better outcomes for people.

Healthier Futures

Prevention and Early Intervention

What do we mean by Prevention and Early Intervention?

For every care group, and our wider population, there are things that can help prevent ill-health, both physical and mental, enable people to remain at home for longer, delay the need for medical intervention and ultimately achieve better outcomes for people. However, preventative factors can be challenged by deep-rooted inequalities which impact on the health and wellbeing of our local residents.

Early intervention can include providing people with information about services and resources in their local areas, promoting active and healthy lifestyles and providing training on specific topics. We can also look to intervene at the earliest stages in life to support our children to have the best start possible.

Community-led support and joint working with our partners, the third sector and community groups is vital to tackling these challenges, as well as encouraging people to ask for help or advice at an early stage before they feel they are at crisis point. If we intervene early we can build on the breadth of skills and experience of people in Renfrewshire to create capacity within our communities and help people maintain their health and independence.

"Social Care should be a springboard not a safety net"

Quote from the Independent Review of Adult Social Care

The outcome we want to achieve:

People experience reduced inequalities and improved health and wellbeing through early action and prevention of more complex need.

Key Challenges

- Whilst the importance of prevention and early intervention is fully recognised, it can sometimes be difficult to measure the impact of prevention when it causes something *not* to happen.
- Many benefits of preventative and early intervention activity are more likely to be visible in the medium- to long-term. They need to be delivered alongside actions which meet short-term priorities.
- Moving towards a preventative focus requires changes to the HSCP's existing models of care and continued development of links between Health Improvement and frontline services.
- Tackling deep-rooted health inequalities is complex and can only be effectively achieved through partnership-working over a long period. In addition, Renfrewshire has high levels of health inequality, as is set out in the demographics section of this plan.

Healthier Futures

Strategic Objectives

Reference	Description	National Outcomes
Healthier.1 New activity	Implement a local Strategic Group for suicide prevention and collaboratively develop a Renfrewshire suicide prevention strategy, which should reflect the priorities set out in the new Suicide Prevention Strategy for Scotland (in development).	• Outcome 1 • Outcome 4 • Outcome 5 • Outcome 7
Healthier.2 Continuing activity	Work collaboratively with individuals and families with lived and living experience, as well as frontline workers and partners, to tackle stigma through training and awareness raising (for example around mental health, alcohol and drug use), and encourage early engagement with services and support recovery.	• Outcome 1 • Outcome 3 • Outcome 4 • Outcome 5 • Outcome 7
Healthier.3 Continuing activity	Work with partners to review existing information and advice sources for people in Renfrewshire, such as ALISS (A Local Information System for Scotland) to ensure that information on local and national support is available to people when they need it and in the format they need.	• Outcome 1 • Outcome 2 • Outcome 6 • Outcome 9
Healthier.4 Continuing activity	Continue to work with partners to support the health and wellbeing of young people and contribute to the Scottish Government's mission to end child poverty, through (i) supporting delivery of income-based targets within the Child Poverty (Scotland) Act; (ii) delivering Local Child Poverty Action Report actions; (iii) supporting Renfrewshire's Tackling Poverty Programme; (iv) supporting the delivery of actions in the Tackling Child Poverty Delivery Plan 2022-26; and (v) working with the Scottish Government's Family Nurse Partnership (FNP) programme to improve antenatal health and birth outcomes, child health and development and parents' economic self-sufficiency.	• Outcome 5 • Outcome 9
Healthier.5 New activity	Work with Renfrewshire Council and third sector partners to deliver the Whole Family Support Framework 2021, and to meet the priorities identified in The Promise Scotland Plan.	• Outcome 1 • Outcome 4 • Outcome 6 • Outcome 7

Healthier Futures

Strategic Objectives

Reference	Description	National Outcomes
Healthier.6 Continuing activity	Work with partners within the Alcohol and Drug Partnership (ADP) to prevent alcohol & drug related deaths across Renfrewshire through the ongoing development and implementation of the Drugs Deaths Prevention Action Plan.	• Outcome 1 • Outcome 4 • Outcome 5
Healthier.7 Continuing activity	Continue to work collaboratively with partners to further develop our joint approach to frailty and falls prevention pathways within communities and acute settings, aiming to maintain/improve health and wellbeing while avoiding harm from frailty.	• Outcome 2
Healthier.8 New activity	Our new Sexual Health Planning Group will co-ordinate efforts to address teenage pregnancy and STI rates in Renfrewshire and to undertake a range of work focussed on helping children and young people have positive, healthy and mutually respectful relationships. This includes continued delivery of: (i) the Early Protective Messages (EPM) programme in early years settings; and (ii) the Mentors in Violence Prevention (MVP) programme to staff supporting young people.	• Outcome 4 • Outcome 5
Healthier.9 Continuing activity	Through our CAHSC (Culture, Arts, Health and Social Care) group, we will lead work with colleagues and partners involved in the Future Paisley programme, to develop a range of arts and culture-based activities in a variety of settings to improve health and wellbeing.	• Outcome 1 • Outcome 4 • Outcome 5 • Outcome 6
Healthier.10 Continuing activity	As part of Renfrewshire's ongoing commitment to tackling Gender Based Violence (GBV), ensure that Sensitive Routine Enquiry is embedded in key HSCP services (or settings).	• Outcome 3 • Outcome 7

Healthier Futures: Some Examples

Prevention and Early Intervention

Falls Prevention

'80andUp' is a new funded project in Renfrewshire, including Roar - Connections for Life, HSCP and GP practices. It aims to help stop the active elderly from falling and uses evidence-based advice and exercises to prevent falls.

Between December 2020 and March 2021, 81 patients who were 80 or older, consented to take part in this initiative. Early feedback has been positive and suggests that with help from Roar – Connections for Life, it has allowed them to walk more and walk with more confidence. Evidence suggests this simple intervention will reduce falls and fractures, preventing hospital admissions as well as improving quality of life for those taking part.

"I fell in the shower while on holiday and if I had not received the training from Roar – Connections for Life on how to get myself back up I dread to think what would have happened. I remembered all the trainer had told us and eventually managed to get back on my feet. I'm so thankful I had done the training!"

***Betty, 75**, commenting on Falls training provide by Roar – Connections for Life.*

Perinatal work – Home Start

Home Start Renfrewshire received funding from the HSCP to develop a programme which offers parents who have, or are at risk of developing, mental ill health during the period of pregnancy and up to a year after birth, the chance to take part in a peer support and parenting support model which also offers active 'hand-holding' for parents who need to access specialist counselling. The parenting support programme element increases attachment between parents and child.

The HSCP Health Improvement Team have devised a package of support for the Home Start team ranging from provision of health resources to sourcing and delivering robust training when gaps or areas for development have been identified, such as delivery of the Understanding Dads Perinatal Mental Health Training (Fathers Network / NHS GGC).

Connected Futures…

Supporting people in their communities can ultimately lead to better outcomes for people – keeping people safe, preventing ill-health and ultimately helping people to live as independently as possible, for as long as possible.

Connected Futures

Community Support

What do we mean by Community Support?

A vibrant community-led approach to supporting people, alongside the services provided by the HSCP and partners, can make a significant contribution to prevention and early intervention and improve the health and wellbeing of our citizens.

Where people have long-term conditions or are recovering from more intensive health and care interventions, the provision of support focusing on individuals' strengths and abilities within a community setting can lead to better outcomes. The benefits of community-led support have also been clear throughout the COVID-19 response.

As we move through recovery and further transformation of our services, the HSCP and partners will work to further strengthen the thriving ecosystem of advice, support and care already provided in our local communities.

"We must shift beyond the mindset of existing systems and services to embrace individual and community capacities, and collaborative opportunities to enable innovative support mechanisms"

Quote from the Independent Review of Adult Social Care

The outcome we want to achieve:

People are supported to recover, or manage disabilities and long-term conditions, and to live as safely and independently in their own home or community as possible.

Key Challenges

- People, families and unpaid carers can find it difficult to access information about services and support available to them, and to know what questions to ask.
- Ensuring all parts of the health and care system, (e.g. HSCP services, primary care and the third sector) are fully aware of community support available.
- Support to unpaid carers is a key element of community support however many people don't always recognise themselves as such, and the HSCP may not be able to identify everyone with caring responsibilities.
- Working with partners, ensuring people (including but not limited to older people, children with additional needs, the care experienced, and those in kinship care) have access to suitable accommodation which enables them to live as independently as possible.

Connected Futures

Strategic Objectives

Reference	Description	National Outcomes
Connected.1 Continuing activity	Develop and implement a Renfrewshire Dementia Strategy, reflecting the objectives and priorities of the forthcoming National Dementia Strategy.	• Outcome 2 • Outcome 3 • Outcome 6
Connected.2 Continuing activity	Support people to live well by strengthening links between community resources and primary care, through the testing and evaluation of new roles in several GP practices (Mental Health and Wellbeing Workers and Welfare Rights Workers) and maximising the impact of Community Link Workers.	• Outcome 1 • Outcome 2 • Outcome 4 • Outcome 5
Connected.3 New activity	Build unpaid carer-friendly communities across Renfrewshire so that unpaid carers can access the support they need to continue to care. This will increase the number of unpaid carers being identified by a wide-reaching awareness and development programme with our services, acute and community health partners, the voluntary sector and communities, and run campaigns targeting communities of unpaid carers less well known to us.	• Outcome 6
Connected.4 Continuing activity	Embed the Recovery Orientated System of Care (ROSC) in Alcohol and Drug Recovery Services (ADRS) to promote individuals' recovery through access to, and benefit from, effective, integrated person-centred support. This includes delivery of the new Mental Health and Addictions Recovery Hub (CIRCLE) and increasing Peer Support Worker capacity.	• Outcome 1 • Outcome 3 • Outcome 4 • Outcome 5
Connected.5 New activity	Work with our partners to help children and young people and their families get appropriate and timely support to improve their mental wellbeing through a multi-agency community-based family support service.	• Outcome 4 • Outcome 5 • Outcome 6

Connected Futures: Some Examples

Community Support

Social Prescribing

We have commissioned 'We Are With You' to place a Community Link Worker in every Renfrewshire GP practice. These workers support people who might otherwise visit their GP with non-medical issues such as loneliness, isolation or financial worries. They do this by delivering 1-1 supportive sessions and / or signposting people to an appropriate activity or service to meet their specific needs. This relieves some of the pressure on GPs and means that people with non-medical issues can access help in a more holistic way.

"The creation and enjoyment of the arts helps promote holistic wellness and can be a motivating factor in recovery. Including the arts in healthcare delivery has been shown to increase positive clinical outcomes for patients while also supporting other stakeholders, including healthcare providers, the patient's loved ones and the wider community."

World Health Organisation

Culture, Arts, Health and Social Care

The Culture, Arts, Health and Social Care (CAHSC) Group was established during the City of Culture bid process, recognising the positive impact that arts and culture can have on health and wellbeing. Part of the Future Paisley programme, the group co-ordinates a range of activities, from the Renfrewshire strand of the Scottish Mental Health Arts Festival to arts in hospitals initiatives. Over the next 2 years the group aims to increase the range of arts and culture-based opportunities in health and care settings, and for people at risk of health inequalities, and the Mental Health Arts Festival will be further developed to reach even more people.

Enabled Futures…

At different times we will all need to access specialist support to help us recover from illness, to manage long-term conditions, and to keep us safe. This could include access to primary care services, support with our mental health, or support to recover from alcohol or drug-related addictions. Helping people to get back on their feet and supported at home and in their community is essential.

Enabled Futures

Clinically Safe and Specialist Services

What do we mean by clinically safe and specialist services?

At different times we will all need to access this specialist support to help us recover from illness, to manage long-term conditions, and to keep us safe. This could include access to primary care services, support with our mental health, timely access to rehabilitation services, or support to recover from alcohol or drug-related addictions.

We will help people to access appropriate specialist support in the most suitable setting. This could be in a hospital, but we are focused on shifting the balance of care and preferably people will be able to access such support in our communities. Care will be provided as close to home as possible and should help avoid unnecessary attendance and admissions to hospital. We will also continuously improve service quality, supported by Clinical and Care Governance.

In doing so, we also want to ensure that we do not over-medicalise the treatment and care we provide for people. Working with partners, we will build on individuals' strengths, skills and abilities to aid their recovery.

"Keep no patient in hospital a day longer than is absolutely necessary. The patient may have to recover not only from illness or injury but from hospital"

Florence Nightingale, 1878

The outcome we want to achieve:

Our services are clinically safe and people have access to the appropriate specialist support to aid them in their recovery and rehabilitation, where possible.

Key Challenges

- Wait times across services have increased as a result of the pandemic and demand increasing following the easing of restrictions. We expect that some people will need more intensive support.
- Maintaining low levels of delayed discharges within a pressurised system.
- Primary Care services are facing unprecedented levels of demand with a significant increase in mental health problems and people suffering deterioration in chronic diseases because of the impact of COVID-19.
- Tackling all forms of stigma around accessing specialist services.
- Specialist skills across services, including but not limited to Primary Care, CAMHS, Psychotherapies and Mental Health, are in short supply nationally.
- Expectations of what specialist services provide can differ from clinical opinion and the aim of preventing over-medicalisation.

Enabled Futures

Strategic Objectives

Reference	Description	National Outcomes
Enabled.1 Continuing activity	Work with NHS Greater Glasgow and Clyde (NHS GGC) and other HSCPs to continue activity to reduce unnecessary attendance at A&E, reduce hospital admissions and lengths of stay in hospital. This includes working to implement (i) opportunities to shift the balance of care; and (ii) joint commissioning plans for Unscheduled Care.	• Outcome 1 • Outcome 2 • Outcome 3 • Outcome 4 • Outcome 9
Enabled.2 New activity	Work with partners in NHS GGC and other HSCPs to build on and further coordinate the positive developments achieved in reforming urgent care during the pandemic, including Mental Health Assessment Units, GP Out of Hours, Urgent Care Resource Hubs and the flow navigation centre.	• Outcome 1 • Outcome 2 • Outcome 3 • Outcome 9
Enabled.3 Continuing activity	Continue to embed multidisciplinary team working across HSCP services to enhance person-centred care, including but not limited to (i) progression of Renfrewshire's Primary Care Improvement Plan objectives; (ii) delivery of the Care Home Hub model developed during the COVID pandemic; and (iii) implementation of service changes identified through the 'winter funding' process.	• Outcome 1 • Outcome 2 • Outcome 4 • Outcome 8 • Outcome 9
Enabled.4 New activity	Work with NHS GGC and HSCP partners within the board area to deliver the Strategic Pharmacy Framework with (i) an empowered pharmacy workforce enabled to work at the highest level of practice and (ii) enhanced public awareness of the community pharmacy options available to them.	• Outcome 1 • Outcome 4 • Outcome 7 • Outcome 8 • Outcome 9
Enabled.5 Continuing activity	Seek to minimise delayed discharges through the HSCP's programme of work to support prompt discharge from hospital. Within this we will continue to support the aim of discharging people for assessment through Renfrewshire's Home First approach.	• Outcome 2 • Outcome 3 • Outcome 4 • Outcome 9

Enabled Futures

Strategic Objectives

Reference	Description	National Outcomes
Enabled.6 New activity	Work in partnership with Renfrewshire Council's Children's Services to implement the National Neurodevelopmental Pathway (NDP) and ensure linkages are developed to support transition across services.	• Outcome 1 • Outcome 4
Enabled.7 New activity	Improve patient experience of our services by reducing the waiting times for access to CAMHS. We will do this by investing in the expansion of the multidisciplinary team and streamlining patient pathways within Children and Adolescent Mental Health Services (CAMHS) to identify and eliminate delays.	• Outcome 1 • Outcome 3 • Outcome 7 • Outcome 9
Enabled.8 Continuing activity	Continue to modernise the nursing, midwifery and allied health professions (AHP) workforce to be fit for the future and maximise their contribution to shifting the balance of care to community and primary care settings. This includes the continued development of Advanced Practice Roles across Mental Health, Addictions and Children's Health Services and we will evaluate emerging evidence to influence future delivery models.	• Outcome 1 • Outcome 2 • Outcome 8 • Outcome 9

Enabled Futures: Some Examples

Clinically Safe and Specialist Services

Mental Health Assessment Units (MHAUs)

MHAUs are a specialist service which provide assessment, diagnosis and management to patients who are in Mental Health crisis or distress and would have sought assistance at an Emergency Department or via Police Scotland and the Scottish Ambulance Service. MHAUs offer a single point of access for emergency mental health assessment 24/7.

Clearer ways to access the Units have been agreed with Acute Hospitals to reduce footfall within Emergency Departments due to the impact of the pandemic. This has reduced the number of people who need to attend the Royal Alexandra Hospital Emergency Department.

Advanced Nurse Practitioners (ANP)

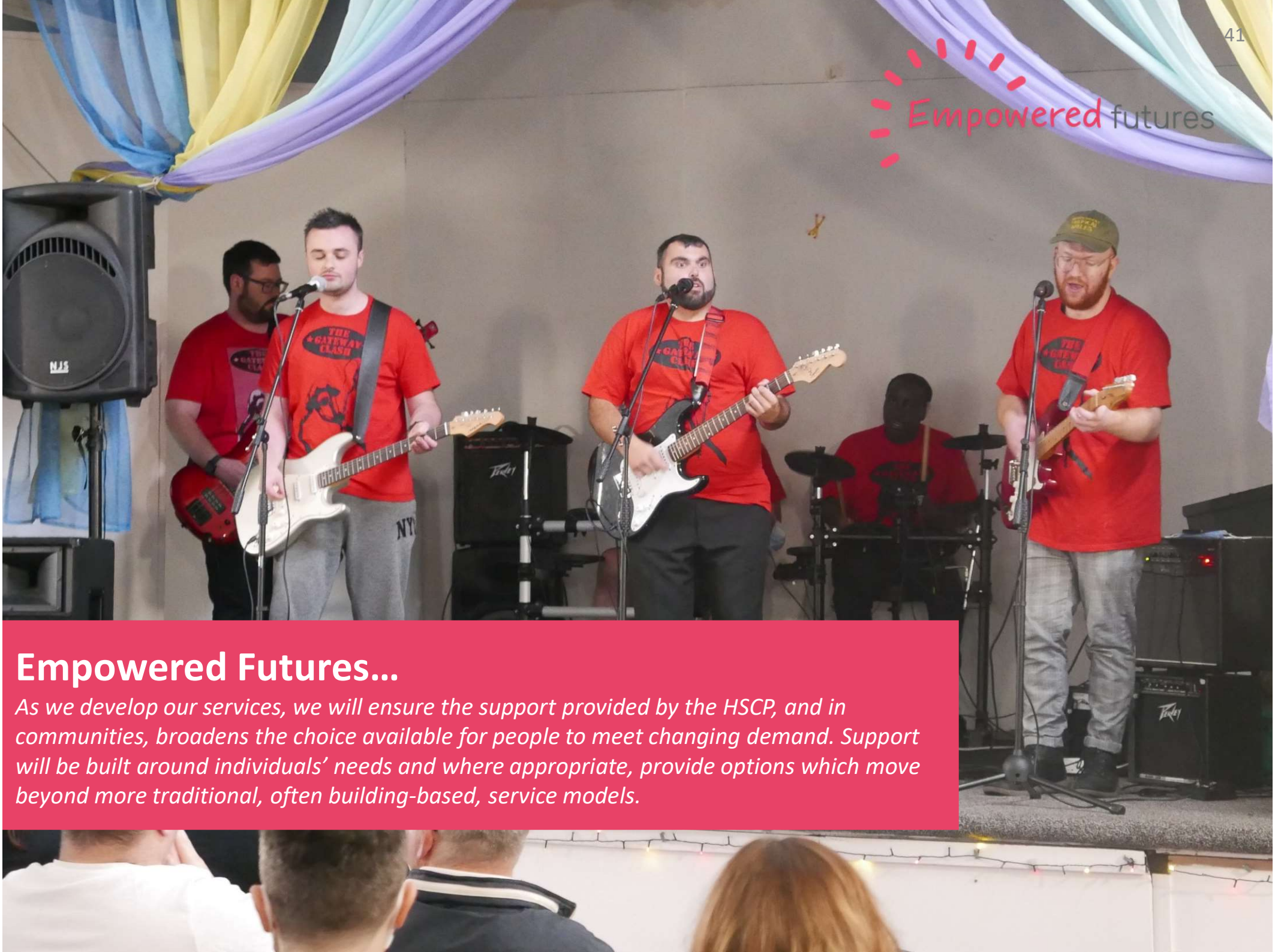
Our Advanced Nurse Practitioners (ANPs) work across multi-disciplinary teams and are clinical leaders who manage the care of their patients. They aim to improve the patient's experience, whilst relieving some of the pressures on GPs.

Our ANPs have supported 75% of GPs so far in Renfrewshire and data between 2019 and March 2021 suggests 89% of consultations with ANPs were completed independently (i.e., did not require onward GP referral), contributing to avoidance of admission and unnecessary appointments where appropriate.

My Diabetes My Way

The local diabetes interface group aims to improve care for people with diabetes. The group promotes the use of My Diabetes My Way (MDMW) which gives people access to information to help them understand their diabetes, see their blood results and follow their blood pressure readings. Patients are also supported by Multi-Disciplinary Teams (MDTs) to access care in a seamless way, improving the care they receive.

Together, these support people to better control their diabetes with fewer complications. This leads to fewer admissions to hospital and longer and healthier lives.



Empowered Futures…

As we develop our services, we will ensure the support provided by the HSCP, and in communities, broadens the choice available for people to meet changing demand. Support will be built around individuals' needs and where appropriate, provide options which move beyond more traditional, often building-based, service models.

Empowered Futures

Choice, Control and Flexibility

What do we mean by choice, control and flexibility?

Enabling people to exercise choice control and flexibility over the services they access, and when and where, has been at the heart of national policy for several years. It was embedded in the Social Care (Self-directed Support) (Scotland) Act 2013 and was a central theme within the Independent Review of Adult Social Care (and subsequent consultation).

Over the course of our previous Strategic Plans, Renfrewshire HSCP has supported increasing numbers of people to have control over their budget. We recognise, though, that we have further to go in improving the choice and flexibility available to people locally.

As we develop our services we will ensure that the support provided by the HSCP and in communities broadens the choice available for people to meet changing demand. Support will be built around individuals' needs and where appropriate, provide options which move beyond existing service models.

"A person-centred approach to social care support must be premised on ensuring citizens are able to fully exercise autonomy and choice in the supports available to them"

Quote from the Independent Review of Adult Social Care

The outcome we want to achieve:

People access the right care at the right time and place and are empowered to shape their support at every stage of life.

Key Challenges

- Maximising opportunities for people to share their lived experience.
- Centre-based services remain highly valued however they do not meet the changing demands and choices of many people supported by the HSCP – this requires us to consider how to develop care to provide greater flexibility and choice.
- Shaping services to enable greater choice, control and flexibility which reflects the broad range of needs and experiences of people who use services and unpaid carers can bring uncertainty and requires ongoing engagement and support for people.
- The transition between services for examples between Children's Services and Adult Services, and transitions to CAMHS can be difficult for young people and their families.
- Increasing digital participation and inclusion and ensuring support is accessible for all, whilst ensuring this does not inadvertently exclude people.
- Developing person-centred employability approaches and supporting people into employment.

Empowered Futures

Strategic Objectives

Reference	Description	National Outcomes
Empowered.1 New activity	Recover and develop day opportunities and explore wider flexible community-based models which, where appropriate for each person, provide additional choice beyond existing services and support innovative use of our buildings.	• Outcome 2 • Outcome 3 • Outcome 4 • Outcome 6 • Outcome 9
Empowered.2 Continuing activity	Develop the HSCP's approaches and mechanisms for supporting and enabling people with lived experience to contribute to the improvement of existing services and development of new forms of support, including ensuring 'The Promise' commitments are embedded for young people with lived experience.	• Outcome 3 • Outcome 4
Empowered.3 New activity	Work with Renfrewshire Council to improve the experience of young people with autism or with a learning disability making the transition to adult services through review of existing pathways and information available for individuals and their families to exercise choice and control. These pathways will meet the specific educational, employment and housing needs of each individual.	• Outcome 4 • Outcome 5 • Outcome 6
Empowered.4 New activity	Deliver a Renfrewshire autism action plan to improve opportunities and outcomes for people with autism, with an initial focus on practical community-based support around life skills, reducing social isolation, benefits, housing and employment.	• Outcome 4 • Outcome 5 • Outcome 6
Empowered.5 Continuing activity	Continue to prioritise equalities and human rights to ensure our services are inclusive and provide equality of access to information, support and involvement. We will aim for our services are fully accessible to people with a physical disability or sensory impairment by engaging and communicating in the most appropriate and effective way. This will include refreshing and building on our BSL (British Sign Language) action plan.	• Outcome 3 • Outcome 4 • Outcome 5

Empowered Futures

Strategic Objectives

Reference	Description	National Outcomes
Empowered.6 New activity	As part of mainstreaming equalities, we will develop an LGBTQ+ charter, continue to co-fund the IN-Ren Network Officer post hosted by our partner Engage, and deliver training for our staff.	• Outcome 3 • Outcome 4 • Outcome 5
Empowered.7 Continuing activity	Anticipatory Care Planning (ACP) is a priority. We will work with staff groups across all sectors to promote planning conversations that can be recorded in a shareable format via clinical portal, supported by staff attending training to have the competence and skill to have sensitive discussions with patients. This will also contribute to our objective to achieve year on year increases in our use of Anticipatory Care Plans that are reflective of people's individual wishes, inclusive of times where the individual does not wish to have this conversation. We will work with primary care governance groups to enhance the quality of Anticipatory Care Planning and increase the number of people with an eKIS (electronic key information summary).	• Outcome 3 • Outcome 7
Empowered.8 Continuing activity	In Renfrewshire, palliative care is everybody's business. We will deliver Renfrewshire's updated Palliative Care and End of Life Care Strategy in partnership, with a particular focus on (i) improving access for all; (ii) improving pathways between services; and (iii) providing training and information across services to broaden understanding of generalist and specialist forms of palliative and end of life care. We will do this with the aim of meeting the emotional support needs of families and unpaid carers and supporting the wellbeing of staff.	• Outcome 3 • Outcome 6 • Outcome 7 • Outcome 8

Empowered Futures: Some Examples

Choice, Control and Flexibility

Autism Reference Group

We have been engaging with the autistic community in Renfrewshire to better understand their priorities and how we can work together to achieve the best outcomes for individuals. In our most recent 'in-person' event, the group worked together to develop a 'mind map' diagram as a basis for how we might work better together in future. We are encouraging additional work with the Autism Lived Experience Group to agree our strategy implementation plan.

Carers' Passport Scheme trial: feedback

"What a wonderful, life changing experience the Carers' Passport scheme trial has been for me. Due to my daughter's illness, I picked up a lot of weight being isolated at home and stress eating. I became unwell myself and my mental health was in a very bad state. I now really understand the positive effect exercise has on mental health and have found that elusive fitness bug that I never understood before. The potential for healing is quite amazing."

Sustainable Futures…

Our aim is to work collaboratively across sectors to deliver integrated services and maximise the impact of our people and resources.

Sustainable Futures

Effective Use of Renfrewshire's Resources

What do we mean by effective use of our resources?

As we have outlined in previous Strategic Plans, the medium-term financial outlook for public services continues to be very challenging. Increasing demands such as an ageing population place greater pressure on the Partnership's available budgets and people. COVID has also significantly impacted on our staff and we recognise the immeasurable contribution and effort of unpaid carers, which has increased during the pandemic and supports the overall sustainability of our services.

We need to ensure that the services we provide are financially and environmentally sustainable and provide value for money. This will require us to make difficult decisions to ensure that resources are effectively targeted.

Further service transformation will be essential. This will consider how services are delivered and how our workforce is supported to deliver in changing circumstances. There is also an opportunity to consider how Renfrewshire's resources, as a whole, can contribute to improving outcomes, and partnership working with providers and public and third sector partners will be an essential strand of the health and care system in Renfrewshire.

"We recognise the financial sustainability challenges of the pre-COVID health and care system. We will design a new sustainable system, focused on reducing inequality and improving health and wellbeing outcomes, and sustainable communities."

Quote from the NHS Recovery Plan, 2021

The outcome we want to achieve:

We maximise the impact of our people and resources by working collaboratively across sectors to deliver integrated services.

Key Challenges

- Remobilising services, using a consistent approach and pace, whilst maintaining flexibility and supporting staff with their health and wellbeing.
- Ongoing financial and demand pressures meaning savings continue to be required.
- Recruitment and retention challenges, including a shortage of care workers and specialist skills nationally and fixed term funding for posts, continues to stretch our workforce and impact on options for staff peer support and development opportunities.
- The HSCP's proposed transformation programme was paused due to the pandemic – the need for service redesign remains essential.
- Quantifying the full extent of health and social care support provided across Renfrewshire as part of efforts to utilise our combined resources.
- Shifting the balance of care and investment in prevention and early intervention needs to happen alongside ongoing service provision.

Sustainable Futures

Strategic Objectives

Reference	Description	National Outcomes
Sustainable.1 New activity	Prioritise recovery from COVID at a consistent pace and develop transformation plans to reflect (i) national and local plans; (ii) staff wellbeing (iii) the themes and objectives set out in this Plan; (iv) the complexity of need arising from the pandemic's impact such as increased mental ill-health and prevalence of long COVID; and (v) the requirements for a National Care Service. This will also link with any programme of work for the National Centre for Sustainable Development.	• All outcomes
Sustainable.2 Continuing activity	Work with partners, providers and the third sector to gather available data on health and social care demand and provision in Renfrewshire and develop a refreshed Market Facilitation Plan which sets out how service provision will be shaped in line with the themes set out in this Plan.	• Outcome 2 • Outcome 4 • Outcome 5 • Outcome 9
Sustainable.3 New activity	Develop a Climate Change (Net Zero) action plan for HSCP services to reflect and support Renfrewshire Council's Plan for Net Zero, working with the Council's Climate Change Sub-committee, and taking into account the Scottish Government's commitments in the 2021-22 Programme for Government.	• Outcome 9
Sustainable.4 Continuing activity	Further develop how the HSCP works in partnership with the third sector, partners and providers, building on the positive developments achieved during COVID. We will embed coproduction in service design to ensure Renfrewshire's resources are structured around supporting people in the most meaningful way to them.	• All outcomes

Sustainable Futures

Strategic Objectives

Reference	Description	National Outcomes
Sustainable.5 Continuing activity	Work with our partners to deliver joint strategic objectives and plans, including (but not limited to) Moving Forward Together, Renfrewshire's Social Renewal Plan (developed with the Community Planning Partnership), and the Children's Integrated Partnership Plan.	• Outcome 9
Sustainable.6 Continuing activity	Review the Unpaid Carer Short Breaks Services Statement and strengthen the partnership approach to supporting unpaid carers to access personalised breaks from caring, using innovative ways to achieve positive outcomes and sustain carers in the essential support they provide.	• Outcome 6
Sustainable.7 New activity	Work with partners to develop and implement a Workforce Plan for 2022-25, considering both the HSCP and wider health and social care system and with a focus on enhancing recruitment and retention, training and development, career pathways and employability opportunities.	• Outcome 8 • Outcome 9

Sustainable Futures: Some Examples

Effective Use of Renfrewshire's Resources

Sustainable futures

RLDS: Using Digital to stay in touch during COVID

Amidst the challenges of the pandemic, Renfrewshire Learning Disabilities Service (RLDS) worked hard to find alternative ways to connect with and support people.

Through crisis we identified an opportunity and worked collectively across the service to find ways to digitally include and engage with as many individuals as possible, source equipment, upskill / develop and most importantly build real and meaningful content.

Staff, supported by people and unpaid carers, came together to develop this new approach and the online groups and support have been highly valued. A video created to showcase the changes made can be found online.

Zoom music marvels

Community In-Reach Service: A recent case study

The Community In-Reach service aims to prevent unnecessary admissions and re-admissions to hospital.

As a recent example, the service supported an individual with a diagnosis of Bi-Polar Effective Disorder following admission to hospital. Over the course of several discussions, a therapeutic relationship was established, and the individual was supported to agree a comprehensive package of care to help sustain a safe and supported discharge plan. With consent, the individual's referrals were implemented, and family were kept in regular contact.

This person has since had the longest period without readmission being needed due to the coordinated discharge planning in place.

Improving Health and Wellbeing in our Communities

Renfrewshire Strategic Planning Group's Health and Wellbeing Priorities

The Development of Health and Wellbeing Priorities for Renfrewshire

Renfrewshire HSCP has agreed with Community Planning partners that it will coordinate Renfrewshire's approach to improving health and wellbeing in our communities. In response, our Strategic Planning Group (SPG) has agreed six health and wellbeing priorities, which are described below. We also feature some examples of projects funded to deliver against these priorities on the following pages. These priorities support the delivery of the themes set out in this Strategic Plan and in particular align with the focus of the HSCP and our partners on prevention and early intervention and the development of support within our communities to improve the wellbeing of local citizens.

Healthy and Active Living
Making healthy choices easy choices by ensuring that being active and eating well are accessible, affordable, enjoyable and local. Building resilience and capacity within local communities in a scalable and sustainable way.

Place and Connectedness
Helping people feel connected to their communities and addressing loneliness and social isolation by raising awareness, promoting access to information and engaging with the most at risk through neighbourhood initiatives.

Mental Health
Addressing the low-level mental health issues that affect people on a daily basis by providing accessible information on, and developing, appropriate supports.

Inequalities
Reducing the health inequalities currently present in Renfrewshire and subsequently improving health outcomes in particularly affected groups e.g., BAME (Black and Minority Ethnic); people in lower socio-economic groups.

Early Years and Vulnerable Families
Developing support for children in their early years up to 5 years of age, or pre-school; and vulnerable families disadvantaged by adverse circumstances or inequalities that can lead to poorer health, developmental and educational outcomes.

Housing as a Health Issue
Recognising the importance that housing plays in people's health and wellbeing and working together to prevent homelessness, support older people, and recover from the COVID-19 pandemic.

Improving Health and Wellbeing in our Communities

Examples of some of our funded projects

Place and Connectedness

We are working alongside Roar – Connections for Life to improve connectedness and reduce loneliness and isolation, focussing initially on the East End of Paisley. A community fun day took place in August 2021 to begin the conversation about what would help and a number of local groups and organisations are now involved in a Connectedness Network.

Mental Health

RAMH received funding from us to create information about what supports are available to people in a range of languages, and to circulate them in hard copy as well as digitally. This was in recognition of the fact that lots of people, particularly people from black and ethnic minority communities, often don't have access to online resources.

Improving Health and Wellbeing in our Communities

Examples of some of our funded projects

Healthy and Active Living

Active Communities and Renfrewshire Leisure have been working together with a number of other local organisations to make healthy choices easy choices by ensuring that being active and eating well are accessible, affordable, enjoyable and local. They have trained local people to become community health champions and aim to develop a network of local tutors who can train people in the likes of physical activity, healthy eating and positive mental health.

Inequalities

We are providing funding to Renfrewshire's new Integration Network. 'IN-Ren', to enable the co-ordinator to focus on health inequalities. IN-Ren is a forum for people from minority ethnic backgrounds which will allow them to become more involved in all aspects of community planning. Our aim is to work with the Network to ensure more diversity in all of our groups so that we can address the significant inequalities that exist for people from minority ethnic communities.

we are all... Renfrewshire IN

Integration Network Renfrewshire

Improving Health and Wellbeing in our Communities

Examples of some of our funded projects

Children and Vulnerable Families

Families Together is an HSCP funded projected, delivered by Home Start and other partners, to support families with the transitional experiences in early years to nursery and school. The focus is on families who have not previously engaged with pre-school establishments for many reasons, including lack of confidence and trust. Groups meet in a range of locations and provide face to face interaction and family time outwith the family home.

Future Focus

As well as continuing to build on and embed the work currently underway, we will also focus on the following over the next 3 years:

Priority	What we will do	National Outcomes
Housing as a Health issue	• Develop a peer led approach to prevent homelessness. • Work with housing colleagues across sectors to meet objectives outlined in the Housing Contribution Statement.	Outcome 2
Poverty	Work with Community Planning partners to alleviate the health issues caused by poverty, including for people with disabilities.	Outcome 5

The Role of Housing in Improving Health and Wellbeing

A Summary of our Housing Contribution Statement

Good housing is central to tackling some of the most pressing health challenges and plays a critical role in improving health, wellbeing and social care outcomes for people in Renfrewshire.

Our aim is to ensure that people have access to the right home; one that is accessible, warm, safe, secure and affordable, in the right place, with the right support, to ensure that people live longer, healthy lives in their own community.

The Housing Contribution Statement is the 'bridge' between strategic housing planning and the Strategic Plan. It identifies the contribution of the housing sector in meeting our agreed outcomes.

The two key themes that interlink these plans are:

1. ***Housing as a health issue; and***
2. ***Supporting people to live independently in their own home***

These themes are woven throughout the Strategic Plan and Housing Contribution Statement. However, these commitments should not be viewed in isolation but as key elements of delivering effective health and social care to the people of Renfrewshire.

"The right to an adequate standard of housing is inextricably linked to the right to the highest attainable standard of health. We can't have one without the other. The right to health is an inclusive right. This means that it is not just the health service that should meet these standards, everything that influences our health should be accessible, available, appropriate and high quality if we are to have a healthier Scotland"

Matt Lowther, Blog on Public Health Scotland website, 2019

The National and Local Housing Policy Context

A Summary of our Housing Contribution Statement

Housing to 2040: National Strategy

In March 2021, the Scottish Government set out the first ever long-term National Housing Strategy (LNHS), which set out a clear vision for housing and a supporting route map. This route map includes four key elements:

(i) More homes at the heart of great places.
(ii) Affordability and choice.
(iii) Affordable warmth and zero emissions homes.
(iv) Improving the quality of all homes.

Renfrewshire's Local Housing Strategy

The Local Housing Strategy (LHS) sets out the strategic approach of the Council and its partners in delivering high quality housing and housing-related services across all tenures to meet identified need across Renfrewshire. The development of the LHS is undertaken in consultation with key partners and stakeholders with local communities, housing associations and Renfrewshire's Health and Social Care Partnership all actively involved in the process and reviewed annually.

The strategic priorities outlined in the LHS ensure provision and access to a home as well as preventing and addressing homelessness. With appropriate structures in place to deliver the right support for people, be that through physical assets or having the right people in place to deliver support within our communities, we can support those at risk of homelessness and enable people to live at home for longer as their needs change.

**The Local Housing Strategy 2022-27 will be submitted to Renfrewshire Council later in 2022 for final approval*

Partnership Working and Local Governance

A Summary of our Housing Contribution Statement

Effective partnership working enhances levels of openness and engagement and allows us to maximise the contribution that each partner can make to the quality of service delivery, and to the health and wellbeing of individuals, families and communities.

The social housing sector plays a pivotal role in our joined-up collaborative approach in Renfrewshire which enables us to improve the outcomes for local people. Their continued involvement provides them with an opportunity to directly influence local policy.

There are several elements of governance which support delivery of the Housing Contribution Statement and ensure clear alignment between all elements of local housing strategy:

- Integration Joint Board
- Strategic Planning Group
- Housing as a Health Issue Subgroup
- HSCP and Communities and Housing Liaison Group
- Housing Providers' Forum
- Rapid Rehousing Transition Plan Steering Group
- Housing-led Regeneration Partnership Board

FLAIR is The Federation of Local Housing Associations in Renfrewshire and East Renfrewshire and is a partnership of six housing associations including: Bridgewater, Ferguslie, Linstone, Paisley, Williamsburgh and Barrhead.

FLAIR is a key strategic partner in Renfrewshire and plays an active role in the Strategic Planning Group and chairs the Housing as a Health Issue Subgroup. In addition, each of the local housing associations is a member of the Rapid Rehousing Transition Plan Steering Group and the Housing Providers' Forum.

Therefore, the shared outcomes, priorities and actions that are set out in the following sections have been influenced and agreed by the wider partnership.

Shared Outcomes – Renfrewshire Local Housing Strategy 2022-27

A Summary of our Housing Contribution Statement

Strategic Priorities

Strategic Priority 1: The supply and delivery of housing is increased across all tenures to meet the housing needs of different groups and create attractive and sustainable places.

Strategic Priority 2: People live in high quality, well managed homes in sustainable neighbourhoods.

Strategic Priority 3: Address the challenges of the climate emergency, delivering homes that are warm and energy efficient, and ensure fuel poverty is minimised.

Strategic Priority 4: Preventing and addressing homelessness with vulnerable people getting the advice and support they need.

Strategic Priority 5: People can live independently for as long as possible in their own home and the different housing needs of people across Renfrewshire are being met.

Theme 1: Housing as a Health Issue

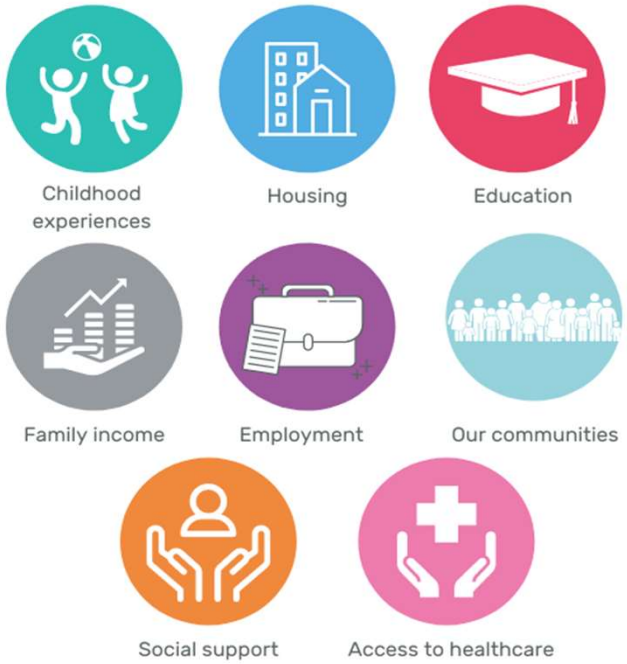
A Summary of our Housing Contribution Statement

There is a fundamental relationship between housing, health and wellbeing and it is widely accepted that health is largely shaped by factors beyond access to healthcare. The factors that influence health are also known as the social determinants of health.

To improve health and wellbeing and tackle health inequalities everyone should have access to a warm, dry, safe, affordable home which meets their needs. We recognise that housing can influence health through condition, overcrowding, security of tenure and matching people's housing needs with an appropriate home.

It is therefore essential that new and existing housing supply recognises these factors.

Social Determinants of Health



What we know:

It is important to ensure that there is an increased supply of affordable housing which is made available to meet identified housing need

Low-income households are more likely to be impacted by fuel poverty

Living in cold and damp homes is associated with higher mortality rates and cold-related ill health

A proportion of people experiencing homelessness have poor health outcomes which may cause premature mortality

Place-based approaches can improve the quality of homes and neighbourhoods and support the health and wellbeing of communities

Theme 1: Priorities and Actions

A Summary of our Housing Contribution Statement

Priorities

Tackling deep-rooted health inequalities in our most deprived communities
Tackling fuel poverty
Supporting Renfrewshire's ambition to be net zero by 2030
Support the implementation of the recommendations from Renfrewshire's Alcohol and Drugs Commission
Provision of appropriate services and accommodation for homeless clients with complex needs and support a 'No wrong door approach' to the prevention of homelessness.

Reference	Action	National Outcomes
HCS 001	Support the development of the Council's innovative Regeneration and Renewal Programme to: • Deliver energy efficient and digitally enabled homes in sustainable locations which reflect Renfrewshire Council's commitment to net zero carbon emissions, which will reduce poor energy efficiency as a driver for fuel poverty. • Develop and implement a multi-disciplinary approach to neighbourhood renewal plans and investing in our communities.	National Outcome 1. People are able to look after and improve their own health and wellbeing and live in good health for longer.
HCS 002	Support the delivery of energy improvements to existing social housing stock across all tenures and support owners to undertake energy efficiency improvements through area-based schemes.	
HCS 003	Building on the rapid rehousing approach to ensure access to specialist services is readily available via robust pathways for homeless people with complex needs, including mental health and harmful alcohol and/or drugs use.	
HCS 004	Continue to strengthen our approach to prevention and repeat homelessness by providing holistic wraparound support to households in Renfrewshire, regardless of tenure, whose life is being affected by alcohol and/or drugs. This will be enhanced by the fuller programme of work which has been developed in response to the recommendations of the independent Alcohol and Drugs Commission.	
HCS 005	Developing an integrated approach to housing advice across Renfrewshire, building on existing offerings from the Council and the Linstone Housing Hub funded by the HSCP.	

Theme 2: Supporting People to Live Independently at Home

A Summary of our Housing Contribution Statement

We will support people to live independently in a home of their own that meets their needs. In order to achieve this, we will ensure that person-centred services are provided at the point of when required.

We will continue to focus on prevention, early intervention, and enablement which will include the provision of adaptations and technology enabled care.

We will also continue to provide lower-level preventative services which will keep the home hazard free and enable people to maintain their independence and remain in their homes comfortably, safely and securely.

What we know…

The number of people in the 65 to 74 year old age group will increase by 20% and the proportion of those aged 75 years and over is expected to increase by 21%

Poor accessibility puts disabled people and older people at risk of injury, stress and isolation

People with learning disabilities are sometimes living outwith their local authority area in institutional settings which may impact negatively on quality of life and outcomes for them and their families

A 2018 report by the Equality and Human Rights Commission on housing issues affecting disabled people highlighted that in Scotland:

61,000 people need adaptations to their home

approximately **1%** of housing is fully accessible for wheelchair users

10,000 disabled people are on housing waiting lists

Theme 2: Priorities and Actions

A Summary of our Housing Contribution Statement

Priorities

Provision of appropriate housing and support that meets people's individual needs including: older people; those with a physical or learning disability; and patients being discharged from long term mental health wards.

Improve delayed discharge and reduce inappropriate out of area placements for people with learning disabilities and complex needs.

We will achieve this by providing:

- Appropriate and affordable housing to meet their needs.
- Lower-level preventative services, including aids and adaptations.
- Support the provision of a Care and Repair Service, including a small repairs service for older and disabled people.

Reference	Description	National Outcomes
HCS 006	Across all care groups, build on our existing intelligence and assess future demand for specialist accommodation in light of the COVID-19 pandemic and the Scottish Government's proposal to introduce a new Accessible Standard by 2025/26.	National Outcome 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.
HCS 007	Ensure the transition pathway for young people with a learning disability includes early engagement with them and their carers regarding supported living requirements.	
HCS 008	Developing pathways for long-term mental health inpatients to be discharged from hospital to appropriate supported accommodation.	
HCS 009	Increase our capability for technology-enabled care and undertake an analogue to digital transition programme for community/ group alarms.	
HCS 010	Work in partnership with care providers to undertake joint recruitment drives to ensure we can have the capability to meet future service needs and demands.	
HCS 011	Build upon our existing work to develop models of creative and innovative supported living opportunities for people with learning disabilities of all ages, which ensures anticipatory care planning with a focus on the needs of older carers.	
HCS 012	Support the implementation of the recommendations from "Coming Home Implementation: A report from the working group on complex care and delayed discharge" to improve delayed discharge and reduce inappropriate out-of-area placements for people with learning disabilities and complex needs.	

Occupational Therapists New Build Council Houses

Occupational Therapists adhere to housing legislation, ensuring good practice where houses are allocated to support people with current and long-term needs, thus ensuring best use of stock. Between 2018 and 2021, Housing Occupational Therapists completed approximately 1361 housing and/or property assessments. Approximately 20% of newly built council houses in Dargavel Village were allocated to mobility applicants, along with 15% of new build council properties in Johnstone.

"The property I was living in was not suitable for my physical health and mobility needs, as I was unable to access essential rooms and my local community. I received an assessment from housing occupational therapist who supported me with re-housing suitable to my needs, this support has been lifechanging. As I have now moved into my new home, which is fully accessible, I have regained my independence. I am now able to complete my shopping, attend health appointments and social activities. If I wasn't allocated this property, I would have been relying on statutory services and informal support. Moving into this house has drastically changed my life for the better. I can now access all the rooms in my home, use my electric wheelchair to go shopping or meet family and friends independently." ***Mr McCarry***

Our 'Enabling' Plans and Strategies

We have a range of critical enabling policies and plans which provide the foundations for us as an organisation to deliver on our objectives and priorities. They inform our Strategic Plan and also help us to deliver on our priorities. Central to this is workforce planning because our staff are our greatest asset, and we are committed to supporting them through access to development opportunities and empowering individuals to maximise the contribution they are able to make.

The 'Enablers' of our Strategic Plan

Common foundations which help us to deliver our Plan

As our 'Plan on a Page' sets out, the HSCP has identified several key 'enablers', which are those areas of activity which apply across all of the services provided and activity undertaken by the Partnership. These enablers inform this Strategic Plan and are the foundations which ensure that we are equipped as an organisation to deliver on our objectives and priorities. We set out on this and the following page why they are important for us and how we will take forward activity in these areas.

	Why this enabler is important	Key Challenges
 ***Workforce and Organisational Development***	Supporting our workforce beyond the pandemic is critical to our success. Alongside this we need to ensure that we address emerging working challenges such as recruitment and retention whilst providing access to development opportunities and empowering our staff to maximise the contribution they are able to make.	• Ongoing recruitment and retention challenges in several services (Care at Home, District Nursing, CAMHS, Psychotherapies). • Our Staff are exhausted due to demands of the pandemic on our services. • Our workforce is ageing, a challenge faced nationally. • Ensuring staff have access to the training and development they want and need to develop their careers. **Enabler 1: We will develop a Workforce Plan for 2022-25 setting out how we will address these challenges.**
 ***Digital & Data***	Digital technology has been a crucial element of our pandemic response. It provides us with the opportunity, where appropriate, to broaden how people are informed about, and access, services. It can also help people to maintain their independence for longer.	• The HSCP's technology infrastructure is provided by our partner organisations and our systems are not all fully integrated. Our partners also maintain separate digital strategies and governance. • Enhancing digital participation whilst recognising that digital technology is not appropriate in all circumstances – it must be part of a mixed approach to service provision. • Maximising our use of data to inform service development. **Enabler 2: We will agree digital priorities with our partners, reflecting the updated national Digital Health and Care Strategy and local needs.**

The 'Enablers' of our Strategic Plan

Common foundations which help us to deliver our Plan

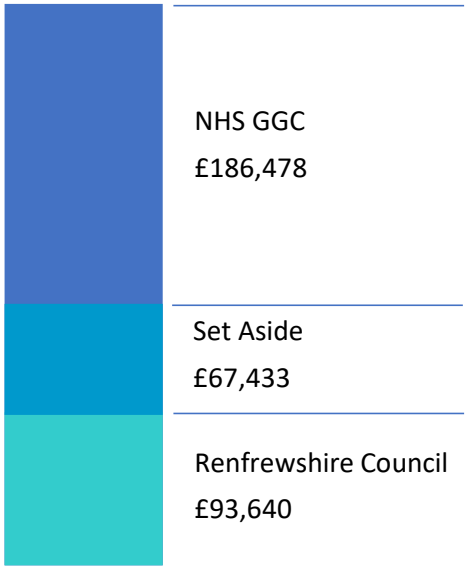
	Why this enabler is important	Key Challenges
 ***Property***	The HSCP utilises a broad property portfolio which is collectively owned or leased by NHS GGC and Renfrewshire Council. This property needs to help us deliver services in changing ways, reflecting new ways of working. We work closely with our partners to ensure our buildings match our needs into the future.	• Shaping our estate to reflect the changes and impact of COVID will take time, ensuring that our use of property works for services and staff. • Creating a coherent property strategy across the NHS and Council estate is inherently complex. **Enabler 3: We will work with NHS GGC and Renfrewshire Council to agree joint property priorities.**
 ***Communication and Engagement***	Communicating and engaging well is at the heart of providing effective services. Our approach, developed during the pandemic, gives us a range of tools for involving people in conversation around our services during this Plan. We will continue to develop our approach to involve communities and those with lived and living experience.	• Communicating digitally where face to face is not possible extends our reach but does not meet everyone's needs. • Every individual and group will have communication preferences which can differ from others. **Enabler 4: We will refresh our Participation, Engagement and Communication (PEC) Strategy and implement through a supporting PEC group.**
 ***Clinical and Care Governance***	Clinical and care governance is our system that ensures our care and outcomes are of a high standard for users of services. This governance does not exist in isolation but overlaps with our themes and other enablers	• Service capacity and increasing demand as we move through and out of the pandemic. • Recruitment and retention (as noted under workforce) which is required to continuously improve the quality of care. **Enabler 5: We will maintain and refine our Clinical and Care Governance monitoring and reporting arrangements.**

The Financial Context

Medium-Term Financial Planning

Our Current Use of Resources

In 2022/23 the resources available to Renfrewshire IJB are projected as follows:



Total 2022/23 resources available (£000s):

£347,551

Resources available (£000s)

A Refreshed Financial Plan

The Medium Term Financial Plan 2020/21 – 2025/26 outlined the anticipated financial challenges and opportunities the Health and Social Care Partnership expected over that five-year period, and provided a framework which would support the HSCP to remain financially sustainable. It was designed to complement the HSCP's Strategic Plan, highlighting how the HSCP's financial planning principles would support the delivery of the IJB's strategic objectives and priorities.

The unforeseen events of the COVID-19 pandemic created considerable unanticipated pressures for the IJB and prompted a shift in the focus of the HSCP and our partners' activities. As noted previously in this Plan, the pandemic has accelerated the delivery of some of our objectives, made others increasingly important, and lowered the priority of some of our previously agreed actions. Alongside the development of this Strategic Plan, it is consequently necessary to update our supporting Medium Term Financial Plan.

The new Medium Term Financial Plan 2022/23 – 2025/26 reflects the impact of COVID-19 and other emerging issues facing the HSCP. The Plan is intended to outline, in broad terms, the specific service and funding issues over the next three-year period and how the IJB will work towards achieving financial sustainability and resilience, and delivering its priorities. The IJB's financial planning arrangements remain subject to active review, to enable us to continue to plan for a range of potential outcomes and scenarios. This helps us to manage emerging financial risks and challenges and the likely impact these could have on the financial position of the IJB.

The Financial Context

Medium-Term Financial Planning

National Context & Planning Uncertainties

As with this Plan, the Medium Term Financial Plan must be cognisant of, and responsive to, the national context. This includes both considerations around policy but also the public health emergency caused by the COVID-19 pandemic. The impact of such issues on our ability to deliver services, how we deliver them, and on the budgets available with which to fund those services, has been acutely felt over the past 18 months and shows little sign of abating.

Examples of these contextual factors include, but are not limited to:

COVID-19 & NHS Recovery

The pandemic has had far-reaching consequences for Scotland's public services and finances, and it will continue to have an impact in the future. The Scottish Government's NHS Recovery Plan, published in August 2021, states its intention to increase NHS capacity by at least 10% in order to address the backlog in care and meet ongoing healthcare needs. The Plan identifies required investment of more than £1 billion to deliver improvements over the next five years, and sustainable services for the future.

National Care Service

As previously covered, the result of the consultation on the establishment of a National Care Service in Scotland may lead to significant structural change in the sector, impacting service providers and HSCPs alike.

Whilst such change is not expected imminently, the Medium Term Financial Plan will focus on the delivery of the priorities of the Strategic Plan and the principles set out in the Independent Review and NCS Consultation which can be delivered upon in advance of any necessary legislation and structural changes.

Supply Chain and workforce challenges

The impact of Brexit on the health and social care sector continues to emerge. Supply chain issues are being experienced nationally and globally, and health and care services continue to face shortages across the workforce in key services. These issues are dovetailing with the impacts of the pandemic, compounding already challenging circumstances. The MTFP will consider how the IJB's resources can be best targeted to address the ongoing effect of this.

Other Challenges

The examples highlighted within the national context are not exhaustive. The complexities here also extend, but are not limited to, the planning uncertainties facing the IJB in terms of national environmental policy and the commitment that Scotland will be a net-zero society by 2045.

The Scottish Government's Programme for Government also states the intention to hold a new independence referendum in the first half of the parliamentary term should the COVID crisis have passed.

The Financial Context

Medium-Term Financial Planning

Local Context

The local context also remains very uncertain. Health inequalities, made more challenging and exacerbated by the pandemic, are expected to continue to increase demand on health and social care services in Renfrewshire. The full extent of this is still be determined however, evidence suggests that demand for mental health support in particular will rise, along with the potential impacts of long COVID. Our local response to these issues will require a targeted approach.

In addition, Renfrewshire's own target to be carbon neutral by 2030 will require consideration of how we invest in goods and services in the future to ensure the IJB is operating to support delivery of these targets.

Ongoing Financial Challenges

The Scottish Government published the 2022-23 Scottish Budget and the Medium Term Financial Strategy on Thursday 9 December 2021. Despite hopes for a return to multi-year settlements, the 2022-23 budget was for one year only, with a commitment from the Scottish Government for a full Resource Spending Review in May 2022. The Review will aim to set out the government's long-term funding plans and the roadmap for delivering key commitments, such as the establishment of the National Care Service. Nevertheless, the continuation of single-year settlements at this time is challenging for the HSCP and continues the uncertainty for our future medium term financial planning, and that of our funding partners.

Even with the commitment of the Scottish Government to increase spend in health and social care, we anticipate the challenge to the IJB to deliver a balanced budget over the next three-year period will be considerable. Future pay settlements, contractual commitments, and rising prescribing costs are expected to continue to add to the challenge facing the IJB in the medium term.

The volatility of UK inflation, impacted by record global energy cost rises, will also present a considerable challenge. Currently at 5.5% - its highest level in almost 30 years - latest predictions from the Bank of England at the time of writing this Plan are that inflation will peak at 7.25% in April 2022, far exceeding the Bank's 2% target. Such pressure will impact both the sustainability of our external providers, who will struggle to cope with the rising cost of goods and services, and the HSCP directly, as our providers will have little choice but to pass on those rising costs to us.

Adding to these challenges is the aforementioned issue of recruitment and retention, intensified by the high levels of non-recurring monies; fixed term funding making roles less attractive and diminishing our candidate pool.

The IJB's Risk Framework will help address risks to delivery of the MTFP and the reshaping of our transformation programme will help to meet these challenges. However, a significant budget gap is still expected.

In this context, the HSCP's Senior Management Team has implemented a rolling process to identify savings proposals which can contribute to financial sustainability and ensure the continued delivery of best value. Each proposal is subject to rigorous risk and impact assessment of possible risks and, where necessary, equality impact assessments (EQIAs) are also carried out to determine and manage any potential unintended negative impact on the different groups covered under the Equality Act 2010.

Market Facilitation

Setting out our principles for future commissioning

The Current Context for Market Facilitation

The development of Market Facilitation Plans or Statements is a requirement under the Public Bodies (Joint Working) (Scotland) Act 2014. These plans aim to inform, influence and adapt service delivery to ensure that the right services are available at the right time.

Renfrewshire HSCP published a Market Facilitation Plan in 2019. This Plan set out the key drivers which would shape local health and social care services, the HSCP's priorities and how we would focus our activity to deliver them, and the interdependencies with our financial plans.

The direction of travel that we have set out in this Strategic Plan, described through our strategic themes and health and wellbeing priorities, represent in many ways a progression of the objectives we set out in our 2019 Market Facilitation Plan. This Plan can help our third sector and providers consider how their services can develop.

Many of the challenges we face now, and will face in the future, remain the same. However, we also recognise that this Strategic Plan has been developed at a time of uncertainty and taking this into consideration, we do not think that it is appropriate to set out a revised Market Facilitation Plan at this time. We will take the opportunity to evaluate the impact of the pandemic on the nature of demand for our services and will use this to inform the development of an updated plan during 2022/23.

The Role of the Strategic Commissioning Process in shaping the future of our services

Strategic Commissioning is a core component of the HSCP's approach to understanding how the needs of our population is changing, and how health and social care services in Renfrewshire need to respond. We recognise that this process cannot be carried out in isolation but must be delivered collaboratively. We are also committed to delivering commissioning effectively and have created an expanded commissioning team to support our work.

Consideration of current approaches to commissioning has been a key strand of the Independent Review of Adult Social Care. The HSCP is highly supportive of identifying ways to improve how we commission and will work to adopt agreed recommendations.

Market Facilitation Principles

In summary, our future Market Facilitation Plan will reflect:

- Available data on projected drivers of demand
- The importance of collaboration and co-production in market shaping
- Our themes, with a focus on investing in 'Healthier Futures' and 'Connected Futures'
- Our financial plan and continued financial constraints

Lead Partnership Responsibility

Services hosted by Renfrewshire HSCP

Podiatry

Renfrewshire HSCP is responsible for the strategic planning and operational budget of all issues relating to Podiatry across the six Health and Social Care Partnerships within NHS GGC. Podiatrists are health care specialists in treating problems affecting the feet and lower limbs. They also play a key role in keeping people mobile and active, relieving chronic pain and treating acute infections.

NHS Greater Glasgow and Clyde employs approximately 180 podiatrists (excluding vacancies) in around 60 clinical locations spread across the six Health and Social Care Partnerships.

The Podiatry Service currently (Nov 2021) provides care to around 22,000 patients across the NHSGGC Board area.

Key priorities for the Podiatry service include:

- Supporting person-centred care through development of feedback mechanisms.
- Delivering a new virtual patient management approach.
- Delivering efficient and value management through service analytics and quality, and ensuring the right shape for the team.
- Reducing the incidence of avoidable pressure damage by 20% by December 2022.

Primary Care Support

Primary Care Support (PCS) is also hosted by Renfrewshire HSCP. The team works across NHS GGC to support GP and Community Optometry primary care contractors. This includes managing contracts and payments, any changes to practices, linking with eHealth and Premises on support to contractors, and working with HSCPs on future planning and the Primary Care Improvement Plans (PCIPs).

The PCS team works with over 1300 GPs and over 700 Optometrists and their staff, across 234 GP Practices and 181 Optometry practices.

Priorities for the period 2022-25 include:

- Supporting COVID recovery.
- Implementation of significant new national IT systems.
- Ongoing support to practices with Transforming Nursing Roles and General Practice Nurse and Advanced Nurse Practitioner development.
- Supporting GP Clusters and Quality Improvement.
- Improving data on outcomes, workforce and activity.
- Continued redesign across the six PCIPs and implementing current and future national GP contract changes.
- Further development of shared care and interface approaches between Community Optometry and Ophthalmology.

Monitoring and evaluating our progress

Measuring the impact of our Plan

Measuring the impact of our Strategic Plan

We manage our performance using our Strategic Plan and Performance Indicators (PIs) to ensure we complete the priority activities we have committed to. Each year we will produce a Strategic Delivery Plan that defines our objectives and outcomes that are aligned to National, NHS GGC and Local priorities. Where appropriate, we will set targets and milestones to monitor the impact of our performance in an effective and transparent way.

Our Care Groups will create Annual Development Plans to inform the Delivery Plan and will use these as part of the day-to-day management of our services, aligning tasks and activities to the strategic objectives in the Strategic Plan.

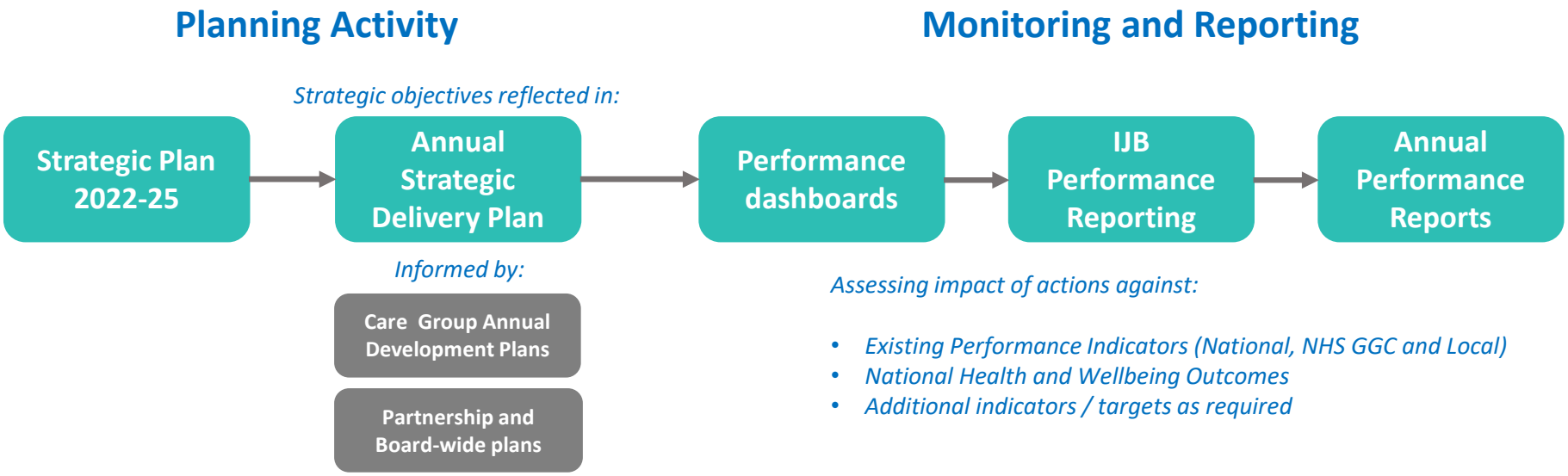
The HSCP has created Care Planning Groups to provide a consistent approach across all service areas and the Strategic Planning and Health Improvement Team will work closely with the groups to evidence the impact of the ongoing activity.

Monitoring and reporting our performance

Our approach to performance monitoring includes the steps set out in the diagram below. Performance is presented at all Integration Joint Board meetings and our Annual Performance Reports are published each year at the end of July. These reports look back on each financial year, reflecting Renfrewshire HSCP's performance against agreed local and national performance indicators and in delivering the commitments set out within the IJB's Strategic Plan.

As can be seen throughout this Plan, we have aligned our priorities with the National Health and Wellbeing outcomes to ensure a clear link to national policy.

In addition, performance dashboards will be implemented to support each Care Planning Group monitor progress using relevant indicators from the IJB Performance Scorecard.



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