



South
Lanarkshire
Health and Social Care
Partnership

South Lanarkshire Integration Joint Board Strategic Commissioning Plan | 2022-25



Working together to improve health and wellbeing
in the community – with the community

Foreword

There is an old saying that goes
'no plan survives first contact with reality'...

The core of this Strategic Commissioning Plan ('the Plan') has been forged through the pressures of the COVID-19 pandemic and toughened in the most challenging winter period that health and social care services have faced in living memory. As we move from one period of uncertainty to another, the very idea of setting any kind of medium-to-long term plan with any kind of confidence could easily be dismissed as 'tick-box'. For that reason, a lot of effort and thought has gone into preparing this Plan – because all those involved have been committed to reflecting on, capturing, and applying the hard-won learning of our experience of the pandemic; and because the pandemic has taught us that plans work best when they provide a clear direction - or a 'shared compass' - to navigate uncertainty.

This Plan has been shaped by rich evidence and insights from a range of sources - including a comprehensive engagement process. Three key messages have been communicated to us.



Firstly, our health and social care services make a substantial difference to people's lives - but we are going to have to do more than just more of the same if we really want to improve outcomes and tackle inequalities. Secondly, our communities value their independence and very much see the heart of health and social care provision being – not within NHS or council buildings - but within their own homes. And thirdly, the pandemic has shown that staff and communities can innovate at pace – are much more open to change than we might have thought before. They are challenging us to cast off nostalgia towards traditional models of care - and instead to meet their aspirations with bold solutions.

Three core priority themes have been identified. These will form the compass to guide our work through the South Lanarkshire Health and Social Care Partnership; and with South Lanarkshire Council, NHS Lanarkshire, Community Planning Partners, staff, service users, carers and communities over the next three years:

- We need to ensure that early intervention, prevention and inequalities are much more prominent across all service areas
- We need to increase access to a greater variety of activities and supports that address mental health and addictions
- We need to continuously improve our models of care so everyone is assured that we can sustain our delivery of core functions and statutory responsibilities – and in a manner that delivers for the diverse communities that we serve.

A key area of work will continue to be whole system action to improve unscheduled care (i.e. unplanned health care which is usually urgent or an emergency), including reducing emergency admissions; and the number of people who are waiting to move from hospital wards to more appropriate settings. Preparing this Plan has highlighted that communities and stakeholders appreciate that fundamentally we need to support individuals, families and communities to reduce their level of need and the overall demand for services.

At the time of writing, we are still living with the pandemic – and a host of other challenges that continue to affect our lives and our future, such as the rising cost of living and the climate crisis. Dealing with the impacts of the pandemic and the unavoidable consequences of our earlier COVID-19 responses will cast a long shadow. It is quite right then, that a further strategic priority of this Plan is responding to the ongoing impacts caused by the pandemic through redesign.

As an Anchor Organisation and Community Planning Partner, South Lanarkshire IJB recognises that achieving these ambitions will be dependent on a simple, fundamental factor; that's the quality of our partnerships: how well we enable staff to work together across disciplines and services; how well we develop new approaches with our primary care contractors, independent providers and public sector partners; and how we support, where necessary, third sector and community groups to grow and flourish. A strength of this Plan is that it has benefitted from thoughtful and enthusiastic contributions from across those stakeholders – and that bodes well for us all going forward. Having started with one saying, it feels fitting to end with another one.... 'fortune favours the bold'.



Soumen Sengupta
Chief Officer,
South Lanarkshire
Integration Joint Board



John Bradley
Chair (to March 2022),
South Lanarkshire
Integration Joint Board



Lesley McDonald
Chair (from April 2022),
South Lanarkshire
Integration Joint Board

Contents

Part one: Introduction	6
1.1 Purpose of the Plan	6
1.2 Governance of the Plan	6
1.3 Developing the Plan	7
1.4 Implementing the Plan	8
1.5 A Whole-Systems Approach to Tackle Inequalities: Community Planning	9
Part two: Vision for South Lanarkshire	10
2.1 South Lanarkshire vision	10
Part three: Analysing South Lanarkshire	11
3.1 Engagement	11
3.2 Strategic needs analysis	11
3.3 Legislative and policy context	11
3.4 Insights from local experience	12
Part four: Planning for South Lanarkshire	13
4.1 Strategic priorities	13
4.2 Strategic commissioning intentions	14
Part five: Implementing the Plan across South Lanarkshire	17
5.1 Transformational Change	17
5.2 Workforce planning	17
5.3 Market facilitation	18
5.4 Locality planning	18
5.5 Impact Assessment	19
5.6 Strategic communication	19
5.7 Financial framework	19
5.8 Support services	21
5.9 Prioritising commissioning intentions	21
5.10 IJB Directions	21

Part six: Reviewing progress of the Plan for South Lanarkshire	22
6.1 Demonstrating impact	22
6.2 Performance measurement	22
6.3 Governance and decision making	22
6.4 Strategic Environmental Assessment	22
6.5 Equality Impact Assessment	22
6.6 Climate Change and Sustainability	22
Part seven: Conclusion	23
Appendix 1: Core Suite of Integration Indicators	23

Executive Summary

This Strategic Commissioning Plan sets out South Lanarkshire Integration Joint Board's (IJB) overall strategy for health and social care services to 2025.

Part one - Introduction

Provides information on the purpose of the Plan, its development and the policy context which underpins it, including tackling inequalities and our whole-systems approach.

Part two – Vision for South Lanarkshire

Describes our locally agreed vision for health and social care services in South Lanarkshire; and our duty to deliver the nine National Health and Wellbeing Outcomes set out in the Public Bodies (Joint Working) (Scotland) Act 2014.

Part three – Analysing South Lanarkshire

Sets out the four key suites of information and evidence from which this Plan has been built: our engagement; strategic needs analysis; the policy and legislative context; and our insights from recent experience.

Part four – Planning for South Lanarkshire

Presents our strategic priorities and consequent strategic commissioning intentions.

Part five – Implementing the Plan across South Lanarkshire

Highlights areas for the partners – NHS Lanarkshire and South Lanarkshire Council – to develop and deploy necessary capacity to enable delivery.

Part six – Reviewing progress of the Plan for South Lanarkshire

Explains how we will demonstrate the extent to which the partners are delivering the Plan and the IJB is delivering upon the Vision for South Lanarkshire.

Part seven – Conclusion

Summarises the transformational agenda that the IJB needs to respond to and contribute its leadership to delivering with stakeholders and with communities.

Part one: Introduction

1.1 Purpose of the Plan

This Strategic Commissioning Plan (to be known as “the Plan”) sets out the Integration Joint Board’s (IJB) overall strategy for health and social care services in South Lanarkshire to 2025. It also looks beyond to the longer term, as changes in the population’s health and social care will continue to evolve - particularly considering the ongoing demands of responding to the impact of the COVID-19 pandemic; and the challenges of addressing inequalities.

1.2 Governance of the Plan

As required by the Public Bodies (Joint Working) (Scotland) Act 2014, South Lanarkshire IJB assumed responsibility for the strategic direction of those health and social care services delegated to it (within the approved Integration Scheme) on 1 April 2016.

The composition of South Lanarkshire IJB is as follows:

Voting members

- 4 members who are Non-Executive Directors of NHS Lanarkshire
- 4 members who are Elected Members with South Lanarkshire Council

Non-voting members

- IJB Chief Officer
- IJB Chief Financial Officer
- Professional advisers from South Lanarkshire Council and NHS Lanarkshire
- A member from the third sector – from Voluntary Action South Lanarkshire (VASLan)
- A member from the independent care sector – from Scottish Care
- A member drawn from service users and the community – from South Lanarkshire Health and Social Care Forum
- A member drawn from Carers - from South Lanarkshire Carers Connected
- Two members from trade unions/staff-side: one from South Lanarkshire Council trade unions; and one from NHS Lanarkshire staff-side
- Other co-opted representatives as the IJB deems necessary

There are eight voting members of the Integration Joint Board (four local authority/four NHS Lanarkshire) these are:

Voting members

NHS Lanarkshire Non Executive Directors



Lesley Thomson



Lesley McDonald
(Vice Chair)



Lilian Macer



Donald Reid

South Lanarkshire Council Councillors



John Bradley
(Chair)



Richard Lockhart



Allan Falconer



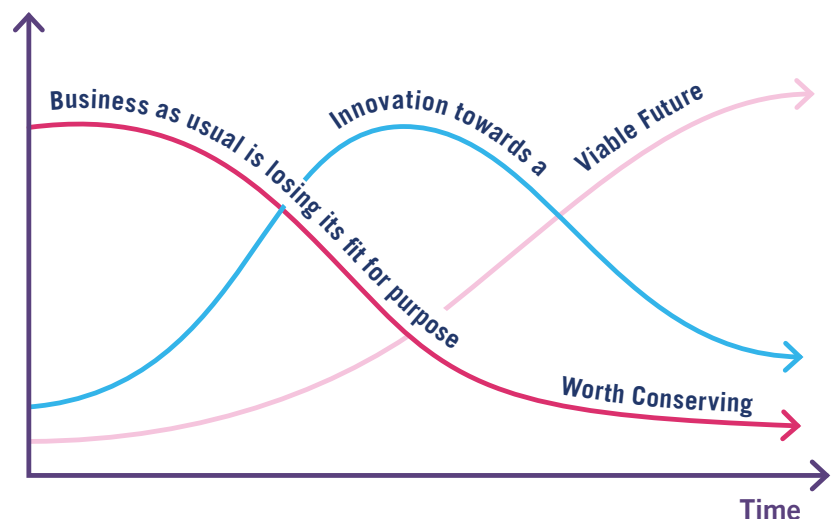
Jim McGuigan

1.3 Developing the Plan

The Plan has been developed through a recognised four step strategic commissioning process. The Plan follows the steps to describe how we have developed our strategic priorities and strategic commissioning intentions to improve health and social care services.



In refining the Plan, particular care has been taken to think and plan for the longer term - to avoid being so focused on the here-and-now that decisions do not stand the test of time. Our thinking on this has been assisted by applying the 3 Horizons Model (as promoted by the International Future Forum), which has been particularly helpful in ensuring that our strategic priorities and strategic aims have a good balance between short-term actions and the longer-term plans that will support sustainability.



1.4 Implementing the Plan

Integration Joint Board (Strategic)

- Formal public body
- Develops and leads the strategy for Health and Social Care through the Strategic Commissioning Plan
- Issues 'Directions' to SLC and NHSL

Health and Social Care Partnership (Operational)

- Takes forward the operational implementation of the plan on behalf of the parties – SLC and NHSL
- Provides assurance to the IJB and the parties on progress with the implementation of the plan

As per the Public Bodies (Joint Working) (Scotland) Act 2014 (the Act) the IJB actions the intentions outlined in the Plan via binding Directions issued to NHS Lanarkshire and South Lanarkshire Council. The Health and Social Care Partnership (HSCP) is the joint delivery vehicle by which NHS Lanarkshire and South Lanarkshire Council operationalise the functions and services delegated to the IJB; and progress the majority of Directions that flow from the Plan.

The HSCP convenes a Strategic Commissioning Group that supports this work, alongside a number of other structures - including our locality planning arrangements - with representation from across stakeholders (including the independent sector, voluntary organisations, carers and the Health and Social Care Forum). There are four localities: Hamilton, East Kilbride, Clydesdale and Rutherglen/Cambuslang. The Local Housing Strategy (LHS) Steering Group is the main partnership body responsible for overseeing the strategic direction for housing. A Homelessness Strategy Group has been established to take forward actions to address homelessness (and which aligns with South Lanarkshire's Rapid Rehousing Transition Plan 2019-24).

The Plan has a mutually reinforcing relationship with other key strategies and plans – notably the South Lanarkshire Community Plan and its Neighbourhood Plans; the South Lanarkshire Council Plan; the Local Housing Strategy; the local Children's Services Plan; and NHS Lanarkshire's new strategy 'Our health together: Living our best lives in Lanarkshire' (currently under development).





1.5 A Whole Systems Approach to Tackle Inequalities: Community Planning

It is now widely accepted that inequalities in health are inextricably linked with wider social and economic inequalities. Not only is there a gap in health status and outcomes between more and less economically deprived populations, but there is evidence of a gradient in health and wealth whereby the more social and economic resources a person commands, the more likely they are to experience a longer, healthier life.

The financial and social consequences of the pandemic are likely to fall disproportionately upon those who were either experiencing poverty, marginalisation and/or discrimination prior to the pandemic – thus widening inequalities. The reality is that Scotland was struggling to address inequalities prior to the pandemic and the task will be even harder going forward. Focusing on the structural determinants of inequalities – economic, environmental and social - in a co-ordinated manner across stakeholders is fundamental.

A whole system approach involves applying systems thinking, methods and practice to better understand

challenges and identify collective actions across stakeholders. Community Planning is a process which helps public agencies to work together with the community to plan and deliver better services which make a real difference to people's lives. The statutory framework for Community Planning is set out in the Community Empowerment (Scotland) Act 2015. The South Lanarkshire Partnership Board is the Community Planning Partnership (CPP) for South Lanarkshire. It has a single, overarching objective to tackle poverty, deprivation and inequalities and sees sustainable inclusive economic growth as being the key to helping reduce this. It recognises that the efforts to deliver sustainable inclusive economic growth will only begin to deliver real benefits in the medium to longer term and that there is a need to mitigate the current impact of poverty, deprivation and inequality on residents and communities and to support their efforts to change their situation and prospects. The HSCP is one of the CPP's four thematic partnerships through which stakeholders work whole systems to do this.

Part two: Vision for South Lanarkshire

2.1 South Lanarkshire vision

“Working together to improve health and wellbeing in the community – with the community”.

The IJB has a duty to deliver the nine national Health and Wellbeing Outcomes.

<p>Outcome 1</p> <p>People are able to look after and improve their own health and wellbeing and live in good health for longer.</p> 	<p>Outcome 2</p> <p>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.</p> 	<p>Outcome 3</p> <p>People who use health and social care services have positive experiences of those services and have their dignity respected.</p> 
<p>Outcome 4</p> <p>Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.</p> 	<p>Outcome 5</p> <p>Health and social care services contribute to reducing health inequalities.</p> 	<p>Outcome 6</p> <p>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.</p> 
<p>Outcome 7</p> <p>People using health and social care services are safe from harm.</p> 	<p>Outcome 8</p> <p>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.</p> 	<p>Outcome 9</p> <p>Resources are used effectively and efficiently in the provision of health and social care services.</p> 

In working to deliver the above, the IJB will also develop its role as an Anchor Organisation - to direct and influence the use of resources and working with communities and partners to effect change to the social, economic and environmental conditions that determine the health and wellbeing of local people.

Part three: Analysing South Lanarkshire

This section sets out the four key suites of information and evidence from which this Plan has been built: our engagement; strategic needs analysis; the policy and legislative context; and our understanding of what has worked well locally.

3.1 Engagement

In accordance with the national Planning with People Guidance, a comprehensive engagement and communications programme was undertaken to ensure that the Plan reflects the needs and aspirations of our communities and stakeholders. A full report setting out this exhaustive process and its findings in detail is available on the South Lanarkshire HSCP website under key documents.

www.southlanarkshire.gov.uk/slhscp

The key themes that emerged from this substantial process were:

- The necessity of ensuring services and supports are fit-for-the-future to sustain core/statutory functions
- The need for greater emphasis on early intervention, prevention and addressing inequalities
- The imperative for developing and better joining-up activities and supports to improve mental health and wellbeing, and address addictions
- The importance of increasing personal choice for individuals in their own care – and maximising independence in people’s own homes and communities as far as possible.

3.2 Strategic Needs Analysis

A comprehensive needs analysis was completed, with expert support from the Local Intelligence Support Team (Public Health Scotland). A full report setting out this exhaustive process and its findings in detail is available on the South Lanarkshire HSCP website under key documents.

www.southlanarkshire.gov.uk/slhscp

Key messages from this detailed work include the following:

- Between now and 2043, the population of South Lanarkshire is projected to increase. In particular, the section of the population aged 75+ is projected to increase substantially

- In 2018-2020 the average life expectancy in South Lanarkshire HSCP was 76.4 years old for men, and 80.5 years old for women - both below the average life expectancy for Scotland overall. Improvements in life expectancy have also begun to slow
- The vast majority (90%) of the South Lanarkshire population reside in urban areas. There is variation across the four localities, with Clydesdale having the largest proportion of its population living in rural areas (42%)
- South Lanarkshire is more deprived than Scotland as a whole. There is variation across the four localities in terms of deprivation: Rutherglen/Cambuslang has the highest proportion of the population living in most deprived areas (quintile 1) and East Kilbride has the lowest
- The number of South Lanarkshire care at home users has continually increased over the 5-year period 2016/17 to 2020/21
- In 2020/21, 14% of the South Lanarkshire population had three or more long-term health conditions (LTCs). The rate of people with 3+LTCs is projected to increase steadily between 2022 and 2025 across most 18+ age groups.

3.3 Legislative and Policy Context

Since 2019, a raft of new policy/legislative requirements have emerged that need to be factored into strategic planning and commissioning. A full list is included in the supplementary reference document available on the South Lanarkshire HSCP website under key documents.

www.southlanarkshire.gov.uk/slhscp

Two recent (2022) Audit Scotland publications have highlighted key messages that we were already sighted on when preparing this Plan; and resonate strongly with the final publication:

NHS in Scotland 2021

- The NHS in Scotland remains on emergency footing and is under severe pressure
- The importance of NHS and social care workforce planning
- A lack of key data limits informed decision-making
- The NHS was not financially sustainable before the pandemic and the COVID-19 response has increased financial pressures.

Social Care in Scotland

- Service users and carers do not always have a say or choice about what support works best for them
- The social care workforce is under immense pressure
- Commissioning tends to focus on cost rather than quality or outcomes
- Capacity and cultural differences are affecting leadership
- A lack of key data limits informed decision-making
- Pressure on social care spending is increasing

Taken together, these Audit Scotland reports reinforce the processes undertaken to prepare this Plan; the necessity for transformation; and the importance of strong leadership as part of a whole system approach to delivering for the future.

3.4 Insights from Local Experience

The IJB has an obligation to and does publish an Annual Performance Report. The IJB also receives regular performance reports and shares updates on its progress with stakeholders. This has provided considerable local learning that informs ongoing delivery and development; and generated insights that have informed the preparation of this Plan.

For example:

- The expectation of staff and the public that public bodies prioritise resources to meet core obligations and deliver essential services - e.g. child protection and adult support and protection
- The importance of supporting more people to live independently at home and be cared for in their communities for as long as possible - e.g. through our commitment to Discharge Without Delay; increased utilisation of Self-directed Support (SDS); provision of intermediate care beds in the community; promoting carer support plans; and more collaborative working to shape local housing provision
- The reality that inequalities continue to blight communities across South Lanarkshire - and that while traditional service models have served some individuals and groups well, there are many for whom access, experience and outcomes needs to be fairer and better

- The need to promote a wider range of mental health supports within the community. A new Mental Health and Wellbeing Strategy has sought to improve access to mental health support in primary care; challenge stigma; prevent suicides and raise awareness about the relationships between mental health and poverty, addiction, homelessness, and social isolation
- The continuing requirement to smooth transition from child to adult services. The HSCP has responded to feedback that the transition from child services to adult services can be problematic and difficult to navigate, with an updated approach. While there is further work to be done, this has already had a positive impact on young people and their carers/families
- The opportunity to accelerate the use of technology-enabled care. In 2020-21, over 85,000 consultations were carried out using 'Near Me' technology. The Florence Text Messaging Service has now been readily adopted by staff and patients alike to safely and reliably monitor long-term conditions
- The value of the Third Sector and community supports. During the pandemic, the HSCP worked with local community partners to provide more holistic support, including the creation of a community meals service which delivered over 14,000 meals to those in need
- The imperative of meeting the aspirations expressed across our communities. This Plan has been prepared through the midst of the pandemic, and though it has been very clear that there is both a need to provide, and a growing public appetite for, supports and services that are more tailored to the needs and capabilities of individuals – rather than 'fitting them in' to traditional models of care delivery; and of increasing the ease with which people can access services and support throughout the week
- The continuing challenge of responding to the impact of the pandemic. Services and supports will have to embed many of the new ways of working that they have already had to adopt and embrace further redesign in order to contend with the long-term consequences that the pandemic will have on the health and wellbeing of local people.

Part four: Planning for South Lanarkshire

4.1 Strategic Priorities

Having considered all of the intelligence summarised in Part 3, the following twelve strategic priorities for this Plan have been identified.

No	Theme
1	Sustaining statutory social care and core health care functions
2	Greater emphasis on early intervention, prevention and inequalities
3	Addressing mental health and addictions
4	Improving unscheduled care and optimising intermediate care
5	Supporting carers
6	Promoting self-care and self-management including technology enabled care
7	Improving transitional arrangements
8	Facilitating single point of access and increasing access to seven-day services
9	Investing in enablers to support integration
10	Promoting suitable and sustainable housing
11	Contributing to homelessness prevention and reduction
12	Responding to the impact of the COVID-19 pandemic



*Working together to improve health and wellbeing
in the community – **with** the community*

4.2 Strategic Commissioning Intentions

The above strategic priorities have generated a suite of high-level commissioning intentions which the IJB will progress with the partners.

Commissioning Intention	Strategic Priorities
Implement Discharge Without Delay to return people to their home or community safely.	<ul style="list-style-type: none"> • Greater emphasis on early intervention, prevention and inequalities • Supporting carers
Deliver all services in line with statutory requirements to ensure people are safe and healthy and encouraged to meet their personal outcomes.	<ul style="list-style-type: none"> • Sustaining statutory social care and core health care functions
Modernise and transform Primary Care services so provision is sustainable in and out of hours providing accessible and flexible health care for people in their communities.	<ul style="list-style-type: none"> • Sustaining statutory social care and core health care functions • Facilitating a single point of access and increasing access to seven-day services • Improving unscheduled care and increasing intermediate care
Further develop mental health services to support more people to recover or manage their condition successfully and live as happy, healthy and productive lives as possible.	<ul style="list-style-type: none"> • Addressing mental health and addictions • Greater emphasis on early intervention, prevention and inequalities • Promoting self-care and self-management • Improving unscheduled care and increasing intermediate care • Sustaining statutory social care and core health care functions
Work with South Lanarkshire Alcohol and Drug Partnership to reduce the impact of addictions within our communities through early intervention/prevention and a focus on recovery.	<ul style="list-style-type: none"> • Addressing mental health and addictions • Greater emphasis on early intervention, prevention and inequalities
Work with Community Planning partners to mitigate against the impact of inequalities across our communities.	<ul style="list-style-type: none"> • Greater emphasis on early intervention, prevention and inequalities
Implement consistent approach for all key stages of transitions (Children's Services, Adult Services and Older People's Services).	<ul style="list-style-type: none"> • Sustaining statutory social care and core health care functions • Greater emphasis on early intervention, prevention and inequalities
Work with communities to build resilience through the promotion of alternative social and community-based supports.	<ul style="list-style-type: none"> • Supporting Carers • Addressing mental health and addictions • Greater emphasis on early intervention, prevention and inequalities
Support carers to maintain their caring role through a personal outcome approach.	<ul style="list-style-type: none"> • Supporting Carers • Sustaining statutory social care and core health care functions

Commissioning Intention	Strategic Priorities
Support the enhancement of Self-Directed Support (SDS) to increase choice and flexibility for people accessing services.	<ul style="list-style-type: none"> • Sustaining statutory social care and core health care functions
Support early intervention improvement activity to improve outcomes for children and young people.	<ul style="list-style-type: none"> • Greater emphasis on early intervention, prevention and inequalities
Promote opportunities in localities to streamline how people receive health and social care support.	<ul style="list-style-type: none"> • Facilitating a single point of access and increasing access to seven-day services • Investing in enablers to support integration
Implement a model of day service which increases choice and supports.	<ul style="list-style-type: none"> • Facilitating a single point of access and increasing access to seven-day services • Supporting Carers
Promote the extension of Technology Enabled Care to support people to manage their own health and wellbeing.	<ul style="list-style-type: none"> • Promoting self-care and self-management including technology enabled care
Ensure health and social care supports align to improving access to and choice of housing options available which suit people's needs and which they are able to sustain.	<ul style="list-style-type: none"> • Promoting suitable and sustainable Housing
Support older people and those with particular needs to live independently within the community in a suitable and sustainable home, reducing the requirement for institutional care and risks of homelessness.	<ul style="list-style-type: none"> • Promoting suitable and sustainable Housing • Promoting self-care, self-management including technology enable care
Prevent homelessness and its impact by improving access to health and support services.	<ul style="list-style-type: none"> • Contributing to homelessness prevention and reduction • Addressing mental health and addictions
Ensure that health and social care services are effectively engaged in providing an integrated response to meet the needs of households with multiple and complex needs, including Housing First.	<ul style="list-style-type: none"> • Contributing to homelessness prevention and reduction • Addressing mental health and addictions

The above strategic priorities and attendant strategic commissioning intentions will frame a range of 'Directions' to South Lanarkshire Council and/or NHS Lanarkshire for delivery - principally, although not exclusively, for progressing through the HSCP.

Part five: Implementing the Plan across South Lanarkshire

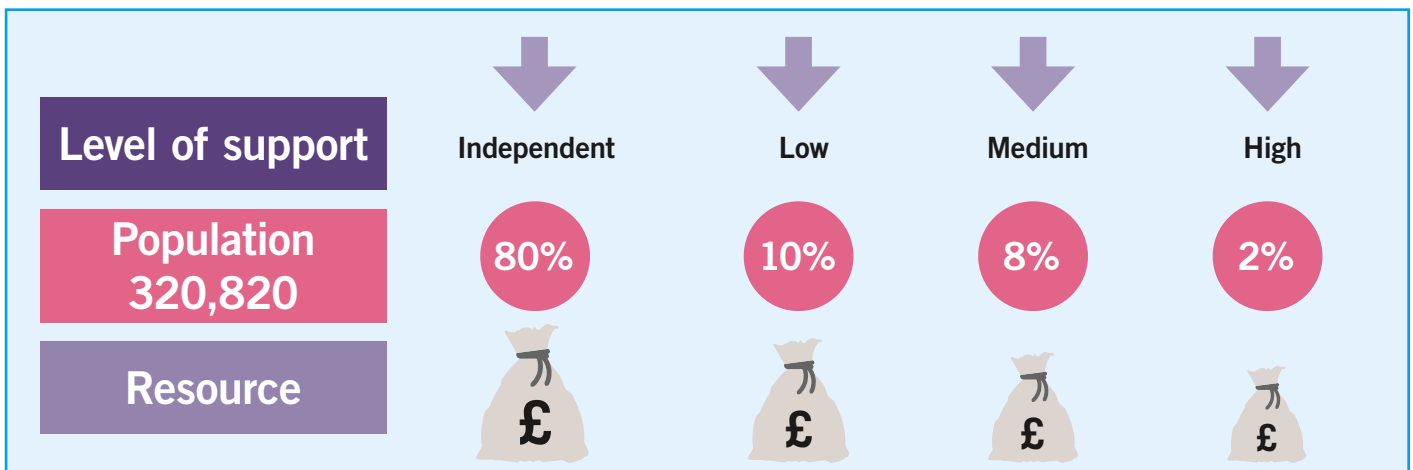
To implement the vision, strategic direction and planned intentions the IJB will work closely with South Lanarkshire Council and NHS Lanarkshire, as well as Community Planning Partners. In a wider context, staff and local communities will be crucial to realising the vision set out in the Plan.

Delivering against our strategic priorities will require a degree of transformational change to allow services to react flexibly to demand and continue to modernise into the future. Audit Scotland has highlighted the need to work more collaboratively to improve current integration arrangements. The findings and recommendations of the Independent Review of Adult Social Care in Scotland and the Scottish Government’s proposals for a National Care Service will also have a significant bearing on the provision of social care and the nature of integration arrangements going forward.

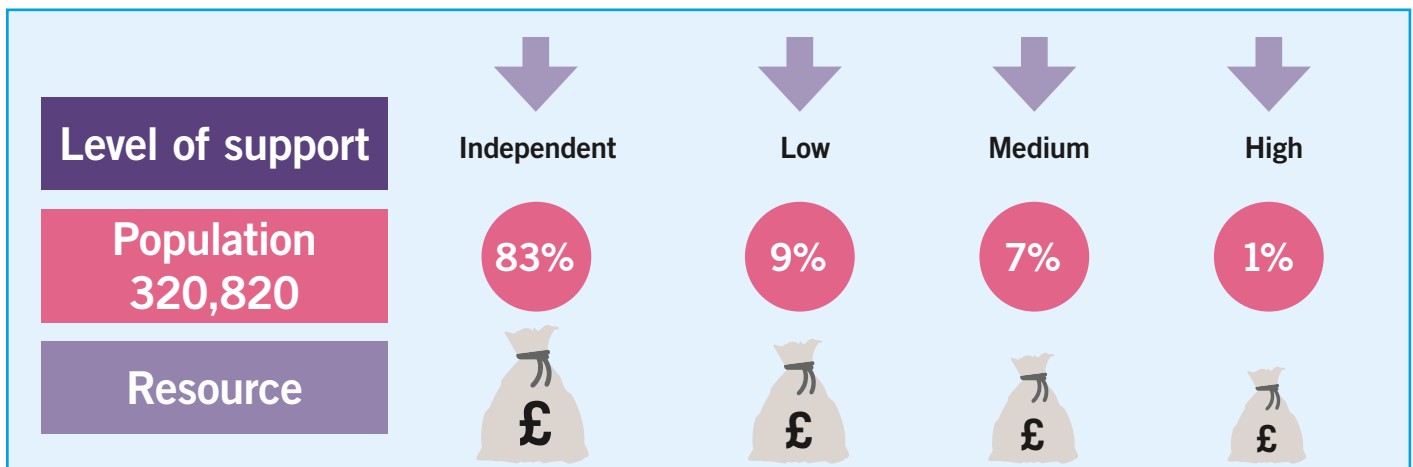
The challenge for the IJB will be the way it directs its resources, given that these are already under significant pressure in terms of their spread and reach. If current trends in demand are to be contained - and to an extent reversed - through earlier intervention and prevention, there requires to be a paradigm shift from the current way in which resources are deployed to a new way of thinking based on a longer-term strategy and whole systems approach.

The diagram below illustrates the current position and a proposed re-positioning of where resources should be re-invested. Currently most of the population are independent or require access to low level supports. A small proportion of the population require a high level of support which utilises a disproportionate use of resources and funding. Preventative approaches will direct more resources to lower-level supports to prevent higher support needs occurring in the future.

Current use of resources



Ambition to shift resources in a different way



The following areas have been identified for the partners – NHS Lanarkshire and South Lanarkshire Council – to develop and deploy necessary capacity in order to progress this.

5.1 Transformational Change

There is a significant transformational change process required to take forward to achieve the vision of this Plan. Ensuring that the HSCP and both partners are equipped to meet this challenge requires organisational development, knowledge and expertise. It demands the necessary capacity and capability in the following areas:

- Collaborative leadership and resilient management
- Continuous quality improvement
- Continuing professional development
- Coaching, mentoring and succession planning
- Evaluation and audit
- Innovation

Recognising the maturity of local integration arrangements, the “building-blocks” that are already in place and the relationship of the partners, a refreshed approach to organisational development would add pace and confidence to realising the necessary transformation in a supportive and constructive manner.

Action

- Organisational Development Strategy to be developed in first year of this plan and aligned to the Plan’s strategic priorities and strategic commissioning intentions



5.2 Workforce Planning

As Anchor Organisations, NHS Lanarkshire and South Lanarkshire Council employ a large workforce committed to improving the health and care of local people. In addition, there are a significant number of people who are engaged in health and care in relation to primary care external contractors; independent providers of care; and the third and independent sector. Our people are our most important “resource” in delivering the transformation needed across health and social care services.

Key developments - such as the extension of Home First and managing increased complexity in the community - require integrated approaches to care. Whilst progress has been made in terms of the co-location of teams where there is a natural fit to do so (such as alcohol and drug services), further work is required to support the wider integration of multi-disciplinary teams at locality level.

Demographic change, changing expectations and the pandemic have brought huge challenges for our workforce. Pressures on staff and teams over the pandemic have been significantly beyond anything experienced previously in a health and social care context. Investing and paying attention to staff wellbeing will continue to be crucial - as will ensuring that staff across all services are valued and respected for what they contribute.

Action

- Council and NHS Lanarkshire to develop their roles at Anchor Organisations
- Workforce Plan to be developed aligned to the Plan’s strategic priorities and strategic commissioning intentions

5.3 Market Facilitation

South Lanarkshire has a mixed economy of social care delivery - our commissioning arrangements need to be flexible and responsive in order for care and support to be designed and delivered to optimise the success of a personal outcomes approach.

A fresh approach to commissioning will be essential if all areas are to be able to contribute to the overall need and subsequent opportunities created to allow local communities to flourish. This requirement is underpinned by a legal framework outlined in the Social Care (Self-directed Support) (Scotland) Act 2014. Having this choice and control will empower people to make informed choices on what their support looks like and how it is delivered, making it possible to meet agreed personal outcomes.

As part of the Fair Work agreement, South Lanarkshire Council has committed to the full implementation of the Ethical Care Charter for all their employees; and to progress the objectives of stages 1, 2 and 3 for home care contracts procured by the Council.

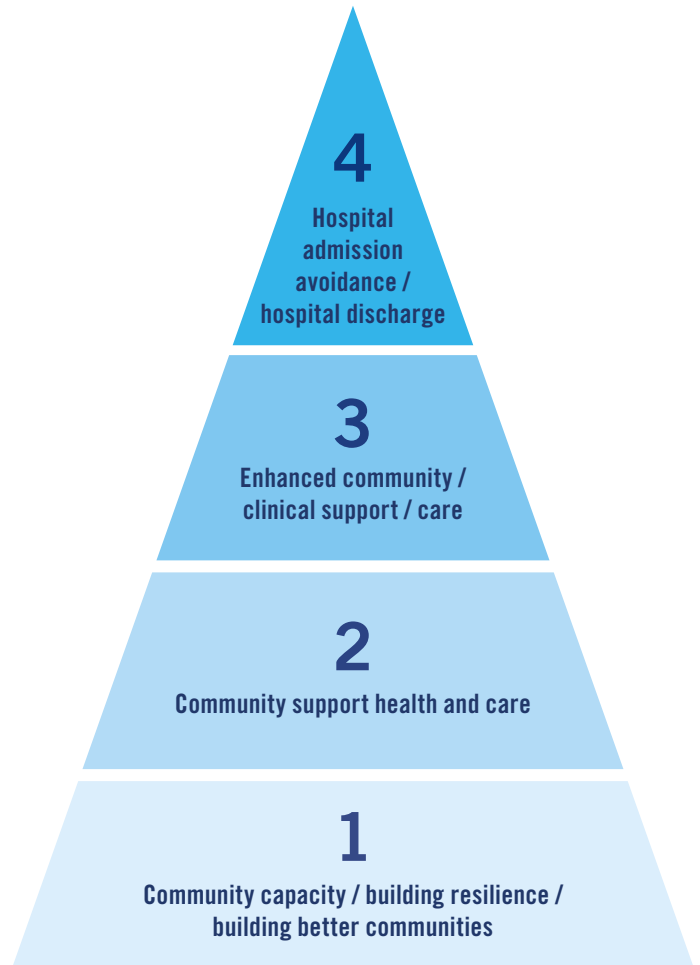
Action

- Ensure effective market facilitation, working with independent providers of social care to ensure provision and choice available to meet emerging and future needs and deliver quality services
- Work with community planning partners to encourage greater capacity within communities and the Third and voluntary sectors
- Encourage adoption of the Fair Work Framework by providers



5.4 Locality planning

The strength, contribution and influence of the locality planning agenda has grown. A key area for development is the commitment to the locality 'Community First' Tiered Model (see below), which essentially outlines the levels of proportionate support which health and social care services will work to provide.



Embedding this approach fully across the four localities will be a key enabler to supporting the overall delivery of the Plan.

Action

- Agree a standard/minimum locality model across the four localities
- Developing and implementing four Locality Plans that reflect the particular characteristics of each geographical area and its communities in delivering the Plan in a coherent manner

5.5 Impact Assessment

A number of impact assessments aligned to the Fairer Scotland duties were undertaken as part of developing the Plan - for example, a Strategic Environmental Assessment and Equality Impact Assessment. The outputs from these assessments – and perspectives gained through the process of undertaking them – has improved the quality of and our confidence in the Plan. This underlines the importance and the value of ensuring that all such relevant impact assessments are properly completed as and when required – not just because there is an obligation to do so, but because doing so will better enable the delivery of this Plan and its vision.

Action

- Ensure the necessary and relevant impact assessments are undertaken and inform the development and delivery of actions in support of the Plan

5.6 Strategic Communication

Recent times have elicited a need for health and social care services to adapt, innovate and in many cases transform. Effective communication is and will be crucial to that transformation agenda and will be vital to supporting the delivery of the Plan. The HSCP has developed a rich variety of high-quality channels and effective methods to reach target audiences. This provides a strong foundation for ensuring that a strategic approach to communication is implemented that focuses on encouraging dialogue with communities, staff and stakeholders. It also ensures that messaging is clear and resonates with those it is being communicated to.

A full refresh of the HSCP Communication and Engagement Strategy will be undertaken to ensure it supports the delivery of the Plan. This will be built around an approach that emphasises the principles of ABC - accuracy, brevity and clarity - and seek to reinforce awareness, confidence and ownership in the fit-for-the-future supports and services.

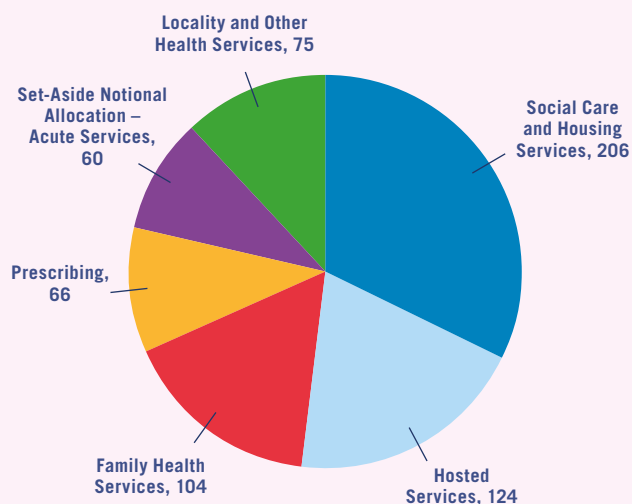
Action

- A refreshed Communication and Engagement Strategy to be developed in the first year of this plan and aligned to the Plan's vision and transformational agenda

5.7 Financial framework

The financial envelope available to the IJB in 2021/2022 totalled £633.837m. The South Lanarkshire Council partner contribution was £146.735m. The NHS Lanarkshire partner contribution was £487.102m and included resource transfer funding and social care funding which was transferred to the South Lanarkshire Council partner to support expenditure across Social Care and Housing Services. The financial allocations across the services are graphically depicted as follows:

2021/22 Financial allocations (£m)



Service	Colour in chart	Financial allocation (£)
Social Care and Housing Services	Dark blue	£206 million
Hosted Services	Light blue	£124 million
Family Health Services	Red	£104 million
Prescribing	Yellow	£66 million
Set-Aside Notional Allocation – Acute Services	Purple	£60 million
Locality and Other Health Services	Green	£75 million

In 2022/2023, additional funding of £554m nationally is being transferred to Local Government from the Health and Social Care Portfolio to support social care and integration. Additional funding of £92m nationally is also being made available to the NHS to increase workforce capacity across health and social care services. The allocation for the South Lanarkshire IJB is summarised as follows:

Scottish Government Allocation	Status	Total (£m)
Scottish Living Wage Funding	Recurring	18.077
Unringfenced Funding	Recurring	4.153
Care At Home Capacity Expansion	Recurring	7.281
Carers Act (Scotland) Act 2016	Recurring	1.162
Free Personal Care Funding	Recurring	0.686
Social Care Workforce	Recurring	1.292
Multi-Disciplinary Team Expansion	Recurring	2.349
Additional Health Support Workers	Recurring	1.168
Interim Care Funding	Non-recurring	1.174
Total		37.342

Non-recurring funding is also expected to be received in-year. Expenditure incurred in relation to non-recurring funding is managed on a year-to-year basis, as appropriate.

The IJB has an agreed Financial Plan for 2022/2023, which has been developed to support the delivery of the 12 strategic commissioning priorities within a balanced budget. This is available on the SLHSCP Website at the following link:

www.southlanarkshire.gov.uk/slhscp/downloads/file/295/sl_ijb_meeting_papers_29_march_2022

In 2018, before the pandemic, it was projected that UK spending on healthcare would require to increase by 3.3% per annum over the next 15 years to 2033 to maintain NHS provision at current levels and if maintaining current service models. Maintaining social care provision and current service models was similarly recognised as requiring an increase of 3.9% per annum to meet the needs of the population living longer and

an increasing number of younger adults living with disabilities. These projections did not take into account the impact of the COVID-19 pandemic, including long-COVID. The rate of inflation also rose to 5% in the winter of 2021 and is expected to increase further to 6%. The reality is that the IJB must meet the challenge of increasing demand within resources which are effectively reducing in real terms. This will require new ways of working across a range of areas.

Looking forward, the Financial Plan needs to be further developed for the short to medium term to galvanise the delivery of the 12 strategic commissioning priorities within a balanced budget. That would include responding to the ongoing consequences of the pandemic, and the significant challenges and opportunities - operational, financial and workforce - for the Health and Social Care Partnership, South Lanarkshire Council and NHS Lanarkshire.

Efficient, effective and affordable services fit for the future need to be developed as part of the integration and transformational change activities. Progressive redesign is necessary if we are to contend with the long-term impact of the pandemic, tackle inequalities, tailor supports and services to the needs and capabilities of individuals, navigate the uncertainty ahead and improve outcomes. This will build on our commitment to implement a modern approach and embed the new ways of working (building on what has been reiterated to us as part of the engagement process which helped shape this Plan and also embracing the changed service provision during the pandemic). Work will continue with both partners to review and agree the allocation of resources in order to progress transformational change.

As highlighted during the comprehensive engagement process, the onus is on the IJB and the partners to do more than just “more of the same”. Financial and operational sustainability, which underpins the plan to shift the balance of spend towards early intervention and prevention and community-based delivery over the medium to longer term, is a fundamental strategic ambition.

Action

- Develop the short to medium term financial plan
- Align financial plan to the strategic commissioning intentions and ‘Directions’

5.8 Support Services

In delivering the Plan and its business, the IJB relies on a variety of important support services from the partners - e.g. support and advice from human resources; planning and performance; legal support; estates and facilities management; communication; information technology; and finance. All of these are key enablers, particularly with regards to ensuring that services work to the principle of seamless delivery and single system working as far as possible. These corporate services and supports are provided as an 'in - kind' contribution from the partners. Given the key role that they do play, it continues to be important that the IJB, South Lanarkshire Council and NHS Lanarkshire work collaboratively to ensure that these services support the delivery of the Plan and the further strengthening of integration locally.

Action

- Develop a property strategy which maximises opportunities to co-locate services and disciplines where it makes strategic sense to do so; and addresses environmental sustainability
- Realise the full potential of digital technology to increase the ways in which people can be supported with care to remain in their own home and to promote an increased level of agile/flexible working across services
- Continue to scale - up the use of Telehealth and Telecare to enable more people to self-care and self-manage and provide alternatives to traditional forms of service delivery to enable people to remain in their home and prevent the need for traditional care settings
- Maximise the opportunities to share information across health and social care information systems to reduce bureaucracy, improve communication and seamless working
- Streamline and simplify governance and reporting arrangements across the IJB, council and NHS Board
- Work with human resources colleagues to support the development of new roles and responsibilities to deliver new models of care
- Undertake further and more detailed needs profiling to determine how to increase our investment in early intervention, prevention and reducing inequalities

5.9 Prioritising Commissioning Intentions

Critical to the success of the Plan will be understanding the co-dependencies across each of its strategic commissioning intentions. For example, the work to modernise and transform Primary Care services will have read across with commissioning intentions related to residential and day services, and the development of the locality model. Consequently, the programme planning and change management across the whole system with regards to the timings of proposed changes needs to be fully understood in order to achieve the smoothest transition. Effective programme planning will be critical to support this.

Action

- Develop programme plan to support the implementation of the strategic commissioning intentions associated with the twelve strategic priorities

5.10 IJB 'Directions'

The IJB has a mechanism in place through which it can action the strategic commissioning intentions set out in the Plan (see Part 4). The IJB uses 'Directions' to agree and communicate with the partners - NHS Lanarkshire and South Lanarkshire Council - the expectations of its strategic commissioning intentions. In turn the partners work to operationally implement each of the Directions issued. A key part of this process is that the IJB confirm to the partners the budget assigned to support implementation.

Action

- Directions to be confirmed and issued to the partners in support of the Plan, with necessary budget and financial information

Part six: Reviewing progress of the Plan for South Lanarkshire

6.1 Demonstrating Impact

Evaluating health and social care integration is a complex process and requires a method that can incorporate the scope and variety of provision. The complexity and level of ongoing change involved with integration makes it impossible to directly link cause and effect, which makes it difficult to know if what is being done is right. The HSCP now has a track record of using an evaluation approach known as Contribution Analysis. This demonstrates the contributory factors and subsequent level of achievement against the nine national health and wellbeing outcomes. It has been used to gather evidence around how change happens (which will continue to be refined over time). When the evidence comes together to tell the same story, it can be reasonably suggested that the activities evaluated have contributed to the observed results. This provides a level of confidence that what has been done is influencing what we know is happening in practice.

6.2 Performance Measurement

Supplementing evaluation activity and contribution analysis are more formal national and local performance measures which are reported to the IJB on a quarterly and annual basis. The HSCP already has a wealth of needs assessment, performance and evaluation-based information. This has evolved and matured since the establishment of local integration arrangements - and it is the intention to continue to develop this.

The IJB currently oversees the performance of health and social care services through a suite of performance measures - against each of the six Ministerial Strategic Group targets for integration (www.gov.scot/publications/health-social-care-integration-core-suite-indicators). For example, measures with regards to reducing hospital emergency activity, emergency admissions and reduced reliance on inpatient care are used as a proxy for this. A range of qualitative measures are also reported, which capture the perceptions and views of the public with regards to the quality of services; and the extent to which they are supporting people to improve their agreed personal outcomes.

6.3 Governance and Decision Making

The IJB has well established recognised governance and decision-making arrangements in place to support the development of the Plan and oversight of the implementation of the Plan by the partners and through the HSCP. Building on the positive feedback and constructive recommendations from the IJB's Auditors (internal and external), work will continue to further refine these governance and decision-making arrangements.

6.4 Strategic Environmental Assessment

In accordance with the requirements of Section 7 (1) of the Environmental Assessment (Scotland) Act, 2005 a Strategic Environmental Assessment pre-screening exemption on the Plan was submitted to the Scottish Government. The Plan is exempt from Strategic Environmental Assessment as its implementation will have minimal effect in relation to the environment. Nonetheless, the IJB recognises that the quality of the environment is an important determinant for health, wellbeing and inequalities – and hence recognised here.

6.5 Equality Impact Assessment

An Equality Impact Assessment was undertaken and informed the development the Plan.

6.6 Climate Change and Sustainability

The IJB works alongside South Lanarkshire Council and NHS Lanarkshire in relation to complying with its and their Climate Change Duties.



Part seven: Conclusion

Through the development of this Plan - and in particular the needs analysis, engagement, policy context and insights from local experience - there is a clear transformational agenda that the IJB needs to respond to and contribute its leadership to delivering.

- The demography of South Lanarkshire and each of its four localities is continuing to change - as are the needs and expectations of its communities
- There is increased recognition of the need to better meet the needs - and do right by - the diverse communities for whom South Lanarkshire is home, especially those who continue to suffer inequalities of experience and of outcomes
- The pandemic has exacerbated existing pressures and brought additional demands - for communities, amongst staff and across all services
- A consistent message from the people of South Lanarkshire is that they wish to have as much control over their health and care as possible; and to live as independently as possible within their own homes and as part of their own communities
- The community response to the pandemic showed that there is considerable capacity - and appetite - for communities to care for themselves and each other
- The workforce response to the pandemic was exceptional and shows their continuing commitment to community and their drive to do things differently
- New ways of working and new technologies - including those adopted and embraced by staff and communities alike - opening up opportunities for greater early intervention and prevention across services, and fairer access to and provision of support
- The IJB - alongside NHS Lanarkshire and South Lanarkshire Council - can grasp these opportunities best by working with communities and stakeholders to look forward with ambition.



“Working together to improve health and wellbeing in the community – with the community”.



If you need this information in another language or format, please contact us to discuss how we can best meet your needs.

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