

East Lothian Health & Social Care Partnership



East Lothian Integration Joint Board

Best Health, Best Care,
Best Value for our Communities

STRATEGIC PLAN

How did we do in delivering the priorities of
the 2016-2019 Strategic Plan and
what should we focus on between 2019-2022?

The Draft 2019-22 East Lothian Strategic Plan

The draft Strategic Plan will set out the next stage of development for East Lothian Health and Social Care Partnership in the delivery of all of its services to improve quality and client outcomes and to reflect local need, local priorities and national and local policies, strategies and action plans. The plan also needs to be flexible enough to make necessary changes, including reprioritisation to reflect changes in local and national policy and in local demand and need.

As in previous years, the Strategic Plan and work that flows from it needs to comply with Scottish Government integration planning and delivery principles. These require that all the services Health and Social Care Partnerships (HSCPs) are responsible for:

- are integrated from the point of view of our service-users
- take account of the particular needs, characteristics and circumstances of different service-users in different parts of the county
- respect the rights of our service-users
- take account of the dignity of our service-users
- take account of the participation by our service-users in the community in which they live
- protect and improve the safety of our service-users
- improve the quality of our services
- are planned and led locally in a way which is engaged with our communities
- best anticipates needs and prevents them arising
- make the best use of the available facilities, people and other resources.

East Lothian Integration Joint Board and East Lothian Health and Social Care Partnership

The introduction of the Public Bodies (Joint Working) (Scotland) Act 2014 meant that across Scotland Integration Joint Boards replaced Community Health Partnerships and brought together adult health and social care budgets. In East Lothian, this work began in 2013. In 2015, the East Lothian Integration Joint Board (IJB) was established to direct the work of the East Lothian Health and Social Care Partnership (ELHSCP).

The IJB is a separate legal entity from both NHS Lothian and East Lothian Council. Its key responsibilities are to:

- prepare a Strategic Plan
- allocate the integrated budget in line with the Strategic Plan
- oversee the delivery of services that are delegated to it.

Integration Joint Board Membership

The East Lothian IJB has eight voting members:

- four East Lothian councillors
- four non-executive NHS Lothian Directors.

It also has other non-voting members who represent:

- service-users
- carers
- third-sector organisations
- independent sector organisations
- health staff and social care staff.

The IJB is advised by a range of officers, including:

- The Joint Accountable Officer (Director of Health and Social Care)
- The Chief Finance Officer
- The Chief Social Worker
- The Clinical Director
- The Chief Nurse.

Governance

The Integration Joint Board is responsible for ensuring all national outcomes, improvement measures and performance functions associated with the delegated functions are delivered in a safe and effective way. This involves:

- risk management
- monitoring and performance processes
- monitoring of the delivery of the Strategic Change Programmes
- Strategic Plan review
- clinical and care governance.
- data-sharing and information governance.

In support of these principles the Audit and Risk Committee and Clinical and Care Governance Group play key roles.

Strategic planning process and principles

We remain committed to planning services that:

- are joined-up for service-users
- take account of the particular needs of individual service-users and their circumstances in different parts of the county
- respect our service-users' rights and take account of their dignity
- take account of the way that our service-users participate in their communities
- protect and improve our service-users' safety
- improve the quality of our services and ensure that they are planned and delivered locally in a way that is engaged with our communities
- anticipate needs and prevent them from happening
- make the best use of the available facilities, people and other resources.

Equality and diversity

All our partners will continue to strive to ensure equal opportunities and respond to the different needs and service requirements of people, regardless of their gender, race, disability, age, belief or sexual orientation.

Transparency and accountability

We remain committed to being open and accountable. As well as engaging with communities, we will regularly publish updates on our progress and continue to consult on our plans.

Locality planning

There are six local area partnerships in East Lothian, based on the six main towns. For the purposes of planning and delivering joined-up health and social care, we have divided East Lothian into two localities:

- West – Musselburgh, Fa'side and Preston, and Seton and Gosford wards
- East – Haddington and Lammermuir, North Berwick Coastal, and Dunbar and East Linton wards.

The case for change

The challenges we were faced with in the 2016-2019 strategic plan are still with us. Actions in the new plan therefore still need to focus on addressing:

- health inequalities
- increasing demand
- rising costs and challenging budgets
- poor outcomes.

East Lothian still has a marked gap in health outcomes between disadvantaged and affluent communities. We need to redouble efforts to reduce this gap and in doing so to respond appropriately to the rising and ageing population through provision of a range of services designed to support people at home or to provide homely settings for care.

The ambitions of the new strategic plan need to be developed within a funding climate for public services that has limited investment for several years. This limited funding is likely to continue into the foreseeable future.

Strategic vision, values and objectives

Strategic objectives for 2019-2022

The IJB wants to get your views on whether it should continue with the following strategic objectives which have been in place for the past three years, but which have been updated.

A. To make universal services more accessible and proportionate to need and to develop our communities

We want to improve access to our services, but equally to help people and communities to help and support themselves too. We will explore new models of community provision which involve local communities and support less reliance on health and social care services. Building capacity in communities through a series of partnerships.

B. To improve prevention and early intervention

We want to shift and focus services towards the prevention of ill health, to anticipate at an early stage the need for support and to react where possible to prevent crises. We will achieve this through strengthened links with the community and the community planning structures and partnerships. We will

continue to commission service which support early intervention and prevention.

C. To reduce unscheduled care

We want to reduce unnecessary demand for services including hospital care. We are committed to keeping the numbers of people delayed in hospital as low as possible as well as exploring other means to reduce reliance on hospitals.

D. To provide care closer to home

We want to deliver safe and effective care as close to home as possible, allowing people to remain in their homes and communities for as long as they can. We will review how people are supported in the community closely linked to any local housing strategy and exploration of new models of housing with care. We will remain committed to providing good quality care at home services.

E. To deliver services within an integrated care model

We recognise the need to make people's journeys through all our services smoother and more efficient. We will develop a

range of means of integrated working, not necessarily through the integrating of a team but often through other means such as integrated approaches or pathways.

F. To enable people to have more choice and control

We recognise the importance of person-centred and outcomes-focused care planning. Positive Personal Outcomes will increasingly be the focus of what we aim to achieve.

G. To further optimise efficiency and effectiveness

We want to improve the quality of our services whilst recognising and addressing the challenging financial constraints we face. This should include appropriate transfer of resources from one side of the Partnership to the other in order to reflect evidenced shifting in the balance of care.

H. To reduce health inequalities

We want to reduce inequalities, break the cycle and impact of deprivation and support and protect the vulnerable in our communities. We want to support positive health promotion in order to support physical and mental wellbeing.

I. To build and support partnership working

We recognise the importance of developing effective and wide ranging strategic partnerships in delivering our ambition, vision and values. This should include strengthening links with community planning partnerships as well as others.

Delivery of Local Priorities

The Integration Joint Board also wants your views on how it can best deliver a number of other priorities which have resulted from local assessment of need, government policy and targets and the need to modernise services. These priorities are:

- Reprovision of Abbey and Eskgreen Care homes and Edington and Belhaven hospitals and provision of extra care housing
- review of Community Services for Adults with complex needs to develop a transformation programme
- implementation of the Carers Strategy
- delivery of the Primary Care Strategy/New GP Contract Implementation Plan
- review of actions to deliver Delayed Discharges/Emergency Admissions/A&E improvements.

Strategic partnerships

Partnership working is central to the integration of health and social care services in East Lothian. Partners include:

- our workforce
- our service-users and carers
- localities and communities
- the third/voluntary sector
- independent contractors
- general practice
- community pharmacy
- dentistry
- optometry
- community planning
- other health and social care partnerships
- hosted services
- NHS acute sector
- housing.
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East Lothian Health and Social Care Partnership Change Boards

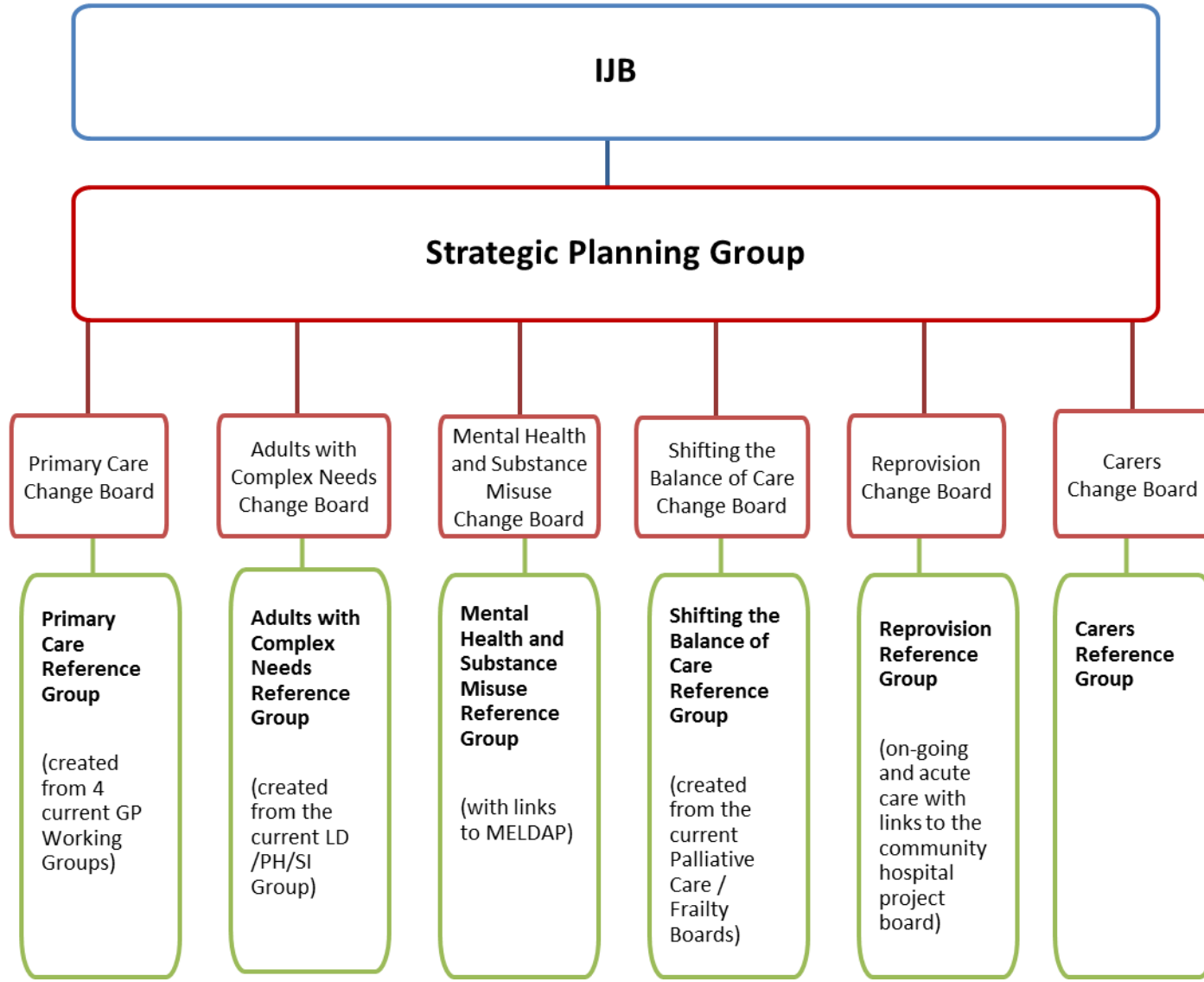
A new planning structure has been established, which includes a number of Change Boards. These Change Boards will oversee a range of transformation change projects and programmes arising from six strategic priorities, IJB and operational priorities and Directions to deliver transformational change across six work areas:

- Primary Care
- Adults with Complex Needs
- Mental Health and Addictions
- Shifting the Balance of Care
- Reprovision Programmes
- Carers.

Each Change Board is chaired by a senior HSCP Officer and co-chaired by an IJB member. There are also Reference Groups that feed into the Change Boards include NHS and East Lothian Council partners, service-user and third sector representatives.

Golden threads

As well as the six strategic priority areas, we have what we call 'golden threads'. These are cross-cutting themes that fall into every Change Board's remit, including early intervention and prevention; carers needs, SDS rights; tackling health inequalities; re-ablement/recovery; needs of people with dementia; health promotion; community justice; tackling social isolation.



Sharing budgets

Much work has been done around aligning the budgets of NHS Lothian and East Lothian Council to produce a clear financial framework to support delivery of integrated health and social care. This will continue.

Using resources better

We need to continue to roll out new ways of working that will help us to move away from reliance on expensive bed-based services, when safe and appropriate, to community-based services. We also need to look at how we deliver services currently across East Lothian to ensure that we focus our combined resources on the areas that need it most.

Delivering in a financially challenging environment

East Lothian Council has to save around £39 million over five years (2018-23). Part of that saving has to come from the adult social care budget.

We have to make savings of £7.25 million in the adult social care budget over the next five years. This means that the

council and East Lothian Health and Social Care Partnership have to consider how they can:

- reduce costs
- increase income streams
- do more with less
- change the way in which we currently deliver our local services.

Resource analysis

We need to understand the resources we have on hand to plan effectively for the future so work will continue to analyse how we use the key resources listed below.

Workforce and services

We will develop the first Joint Workforce Plan for East Lothian. People involved delivering health and adult social care:

- Social care workforce
- NHS workforce
- independent contractors
- third-sector provision.

Estates

Reproviding The Abbey and Eskgreen Care Homes and Belhaven and the Edington Hospitals

In 2017, East Lothian Health and Social Care Partnership was asked to develop a vision for the reprovision of Belhaven and Edington Community Hospitals and Abbey and Eskgreen Care Homes. These facilities provide a range of services including NHS community beds (step-down care, palliative care, NHS short-stay provision, day treatments), residential care beds, nursing home beds, residential short-stay provision, palliative care and minor injuries (not all the facilities provide all these services). The Edington site also accommodates North Berwick Medical Practice. In December 2018, the IJB voted to progress this work to a business case, to be developed in conjunction with the communities of Dunbar, Musselburgh and North Berwick.

New East Lothian Community Hospital

The new East Lothian Community Hospital is being built on the site of the current Roodlands Hospital in Haddington and is

scheduled to fully open in 2019. The project brings together services from Roodlands and Herdmanflat Hospitals on to the same site in a purpose-built facility. It is also 'bringing home' services from Edinburgh hospitals, for example, more gastroenterology services, orthopaedics, urology, ear, nose and throat services and, for the first time, will offer locally available plastic surgery and phototherapy services.

Bed base

We need to continue to take account of the impact of the NHS Lothian Strategic Plan and our local needs assessment on bed provision. Therefore, we need to plan for:

- enhanced local provision and the use of intermediate care facilities to prevent unplanned admissions and reduce delayed discharge from acute hospitals
- enhanced local provision for respite care
- increased local provision and service redesign for end-of-life care at home or close to home.

Housing

Housing has an important role to play in helping people to live independently and provide suitable and cost-effective housing and services. This has implications for aids and adaptations services. We are working with the council's housing team on future extra-care housing and supported housing models, based on housing with care needs assessment, incorporated within the East Lothian Local Housing Strategy. Some of this work is aligned to our planned re-provision work.

The East Lothian Health and Social Care Partnership will continue to develop and deliver its services to support delivery of all the national health and wellbeing outcomes:

- **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 well-being

- **Outcome 7.** People using 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.

In addition, there are [23 Integration Indicators](#) that allow us to assess how these outcomes are being met.

Monitoring progress

However, to provide a full picture of improvements, we also need to collect and understand a wide range of data and service -user/service feedback to help us to understand what's

happening at a local level and what we need to do to improve.

Our performance framework will show:

- progress on the delivery of national outcomes and indicators
- how the strategic planning arrangements have contributed to delivering services which reflect the integration principles
- transformation of individual outcomes and experience
- transformation of local health, care and support systems.

Local partnership working

We are working wherever possible with local area partnerships on issues like re-provisioning. We also engage and consult with local interest groups and communities in planning service change. The work of partners, such as the Poverty Commission's recent report, highlights issues for consideration in such service planning. The Commission underlines the importance of addressing health inequalities if health is to be improved across communities.

How we will know that we are succeeding

As we've already stated, we will have a robust monitoring and performance framework in place, with a wide range of indicators. However, if we can show that we have achieved the following things, we will be a long way down the road to best health, best care and best value for our communities:

- more over 65s living safely at home
- decrease spend of the integrated budget on institutional care and increase spend on community care
- more years of life in conditions amenable to healthcare.

Consultation and engagement

Engagement is key to everything that we do and ELHSCP's consultation and engagement strategy is committed to ensuring that:

- we have a clear and effective participation and engagement approach which is at the heart of reforming health and social care services locally
- it enables the Partnership's vision and how it works to become a reality
- it informs decision making processes that drive strategy

and inform the carrying out of delegated functions.

In 2017-18, we completed a year-long engagement that informed the redesign of the new Care at Home Framework. Our active consultations at the moment include:

- reprovisioning
- transforming community supports for adults with complex need
- primary care improvement
- East Lothian IJB Strategic Plan.

We will engage further on this strategic plan further in early 2019.

Contact us

For more information about integration of health and social care:

- email us at elshcp@eastlothian.gov.uk
- follow @elhscp on Twitter
- like East Lothian Health and Social Care Partnership on Facebook.