

East Lothian Health & Social Care Partnership



STRATEGIC PLAN

A quick guide to plans for the integration of health and social care in East Lothian. We want to hear what you think.

2015-2025

Summary version

**East Lothian
Integration Joint Board**

Best Health, Best Care,
Best Value across our Communities

This is a shorter version of the second draft of East Lothian Health and Social Care Partnership Strategic Plan. The first draft was published earlier in 2015. We have taken the feedback on that plan and combined that with feedback from other engagement events and used it to inform this draft. At the end of this document, we have included some consultation questions that you might find useful if you want to give us your views on health and social care integration in East Lothian.

In this document, we look at how integrated working can help us to achieve our key aims for health and social care in East Lothian, which are:

- delivering more care closer to home
- addressing variations in how health and social care services are used and delivered and tackling inequalities

- developing a strong focus on prevention and low level support
- making sure that we achieve best value for public money by working together in partnership.

If you would like detailed information about anything here, please see the full draft strategic plan. You will be able to find this online at on the East Lothian Consultation Hub at http://www.eastlothian.gov.uk/homepage/231/have_your_say

East Lothian Health and Social Care Partnership

The introduction of the Public Bodies (Joint Working) (Scotland) Act 2014 means that across Scotland Health and Social Care Partnerships will replace Community Healthcare Partnerships. They will join together adult health and social care budgets. In East Lothian, this work has been under way since 2013. In 2015, an East Lothian Integration Joint Board was established. This body 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 we are responsible for.

Integration Joint Board (IJB) Membership

The East Lothian IJB has eight voting members:

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

It has other non-voting members who represent:

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

The IJB is advised by a range of officers, including the Joint Accountable Officer, its Chief Finance Officer, Chief Social Worker, Clinical Director and Chief Nurse.

The Strategic Plan sets out the East Lothian Health and Social Care Partnerships priorities for the next 10 years.

Strategic planning process and principles

Integration planning principles

We are 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 strive to encourage 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 are committed to being open and accountable. As well as engagement, 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 would like to divide East Lothian into two localities:

- West – Musselburgh, Fa'side and Preston, and Seton and Gosford wards – population 60,000
- East – Haddington and Lammermuir, North Berwick Coastal, and Dunbar and East Linton wards – population 39,000.

Scope and delegated functions of the East Lothian Health and Social Care Partnership (ELHSCP)

The Public Bodies (Joint Working) (Scotland) Act 2014 comes with regulations that set out which health and social care services that are to be delegated to health and social care partnerships.

Children's health and social care services do not have to be integrated but in East Lothian we have decided that children's health service (for example, school nursing and health visiting) will be delegated to ELHSCP from the start. This is because we intend to integrate children's wellbeing social care services. Our initial focus will be on adult services, though, and this plan deals only with services for adults. The scope of this plan is:

- adult social care
- adult primary and community health care services.

It will also look at some areas of adult hospital care that offer the best opportunities for development, for example, acute hospital services associated with emergency care. It will look at ways of preventing unplanned hospital care.

This plan is based on the principle that things have to change. If we continue as we are, the health and social care system will be unable to continue to deliver the high quality services that we all expect. We need to change to be able to better address:

- health inequalities
- increasing demand
- rising costs and challenging budgets
- poor outcomes
- the need to make better use of our resources – financial and human
- the demand for quality
- policy shifts.

Some background

We need to change the way we plan and deliver health and social care services to address the widening gap in outcomes for the more affluent in our society and those who are disadvantaged. This is a major challenge.

There are over 101,000 people living East Lothian just now and our population is expected to grow by a further 23% by 2037. Our older population will be living longer but there is likely to be a smaller population of working-age people to provide care for them. A growing ageing population has places greater pressures on hospital and institutional care and health and social care spending.

At the same time as demand is rising, public services are coping with continuing constraints on spending. This period of financial constraint is set to last for some time to come. The cost of delivering and purchasing services is also rising.

For more detailed information on the challenges we face, please see the full draft consultation at http://www.eastlothian.gov.uk/homepage/231/have_your_say

Our vision

People in East Lothian to live the lives they want as well as possible, achieving their potential to live independently and exercising choice over the services they use.

Our values

Best health, best care, best value for our communities

Strategic objectives and immediate priorities

We want to:

- make universal services more accessible and develop our communities
- improve prevention and early intervention
- reduce unscheduled care
- provide care closer to home
- deliver services within an integrated care model

- enable people to have more choice and control
- further optimise efficiency and effectiveness
- reduce inequalities
- build and support partnership working.

Immediate priorities

How will we achieve this – the model of care

We want to achieve:

- healthy active ageing and support for independence across people's lifespan
- support for people to live well with long-term conditions
- accessible and effective support at times of crisis
- excellent post-crisis support
- person-centred dignified long-term care.

The first step in achieving this is to carry out a Joint Strategic Needs Assessment. This looks at the underlying demographic, health and social care needs of people in East Lothian. This will help us to make informed decisions. The assessment will consider:

- life expectancy
- disease prevalence
- lifestyle factors
- current use of services
- demands that are likely to be made on services in future.

Legal, regulatory, national and local policy context

Our needs assessment has to take account of other high level plans and policies at a national, regional and local level.

National strategic context

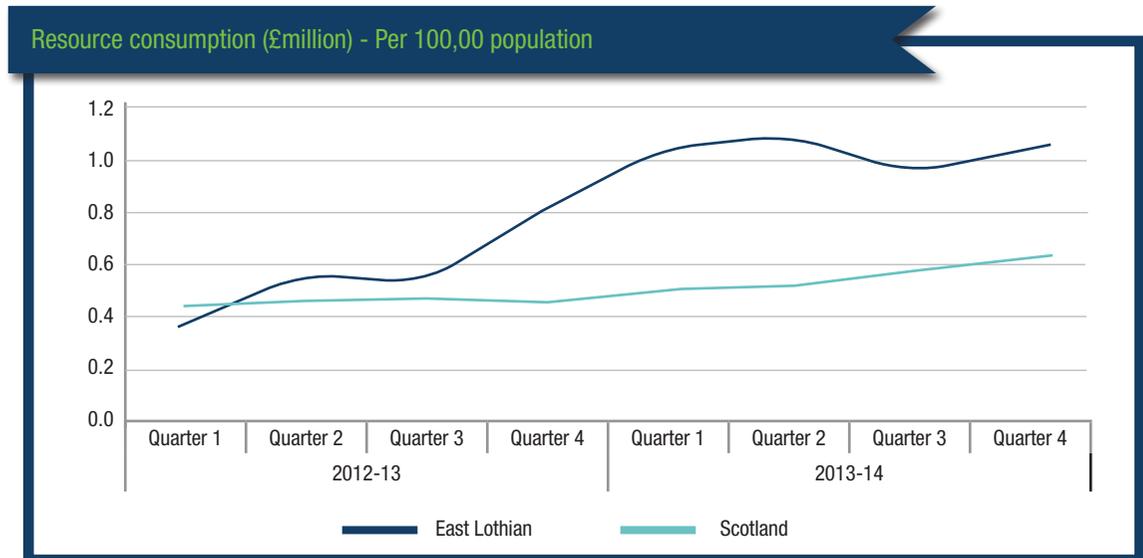
The Scottish Government has set out its goals and policy framework for improving health and social care. Priorities include:

- maximising scarce resources by using all available resources from the public, private, third and independent sectors, individuals, groups and communities
- concentrating the efforts of all services on delivering integrated services that deliver results
- prioritising preventative measures to reduce demand and lessen inequalities.

Regional strategic context

There are a number of regional and area plans that share a vision of services designed around people – these should be community-focused, co-ordinated and integrated, with an emphasis on early intervention. They also promote sustainability and quality. These plans include:

- NHS Lothian’s Strategic Plan
- The East Lothian Single Outcome Agreement 2013-2023.



Current East Lothian Joint Strategies

A range of local health and social care strategies influence our strategic plan:

- Adults with Learning Disabilities Strategy
- East Lothian Autism Strategy – Adults
- Adults with Physical Disability
- Mental Health Strategy
- Substance Misuse Strategy
- Carers Strategy
- Older People's Strategy – under revision
- Criminal Justice Social Work
- Public Protection
- Sexual Health
- Palliative and end-of-life care.

Gap analysis

Our joint needs assessment includes an analysis of the key gaps in service planning and service delivery. This has shown that we need to address:

- the need for a community hospital
- dementia care
- primary care
- respite care
- reablement
- care at home

- transitions of care
- buildings and bed use
- shifting the balance of care
- health and social care strategic planning and housing supply and demand.

Strategic partnerships

Partnership working is central to the integration of health and social care services in East Lothian. Key partnerships include those with:

- 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.

Sharing budgets

We need to identify and develop a way of aligning the budgets of NHS Lothian and East Lothian Council and produce a clear financial framework to be able to deliver integrated health and social care effectively.

Using resources better

We need to look at 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 the way that we deliver services currently across East Lothian to ensure that we focus our combined resources on the areas that need it most.

Integrated Care Fund

The Scottish Government is supporting integration for a period of three years through the Integrated Care Fund. Its focus is on the integration of services for adults and East Lothian has been allocated £1.76 million a year between 2015/16 and 2017/18.

We will use this money to support:

- prevention and early intervention
- providing care closer to home.

All Integrated Care Fund projects will be monitored and evaluated throughout the year as part of the strategic planning process

Resource analysis

We need to understand the resources we have on hand to be able to plan effectively for the future so we will be analysing how we use the key resources listed below.

Workforce and services

People involved delivering health and adult social care:

- Adult Wellbeing workforce
- NHS workforce
- Independent contractors
- Third-sector provision.

We have also mapped community groups across the county that make a contribution to wellbeing in their area as they play a very important role.

Estates

The people of East Lothian have access to:

- three large acute hospitals
- rehabilitation and continuing care beds in a number of Edinburgh hospitals
- three local hospitals and community hospital facilities in East Lothian
- residential care homes
- residential nursing homes
- day centres
- health centres.

Bed base

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

- the repatriation of East Lothian residents from Liberton Community Hospital and Midlothian Community hospital within the next 10 years

- enhanced local provision and the use of intermediate care facilities to prevent unplanned admissions and cut down 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. The role of housing and extra-care housing will be a key component of the Housing Contribution Statement, to be produced next year. It will set out more specifically and clearly the role of the housing sector in helping to meet the priorities in our Strategic Plan and its contribution to improving the health and wellbeing of our communities.

Good governance

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

- 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.

Sound governance and robust performance and scrutiny arrangements are very important.

National health and wellbeing outcomes

The Scottish Government's National Health and Wellbeing Outcomes are high-level statements of what health and social care partners are attempting to achieve through integration and ultimately through the pursuit of quality improvement across health and social care. By working with individuals and local communities, the East Lothian Health and Social Care Partnership will support people to achieve the following 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

An associated Core Suite of Integration Indicators has been developed in partnership with NHS Scotland, COSLA and the third and independent sectors, drawing together measures that are appropriate for the whole system under integration.

Performance framework

However, to provide a full picture we also need to collect and understand a wide range of data and feedback that helps 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.

Locality planning

We want to plan local services with local people to make the best use of the assets available in our area.

Identifying and defining localities

ELHSCP will take a staged approach to localities in the initial stages of the Strategic Plan. We will consult and engage with the six local areas but base the Strategic Plan on the West and East localities. As Area Partnerships mature and begin to develop more plans at a local level, these too will be reflected in future versions of the Strategic Plan.

Locality leadership

We will need to identify people who are willing to lead at a local level to enable us to have effective locality planning. Their roles should be enabling and supportive, assisting professional and community leaders to develop and deliver change and improvement in health and social care.

Managing change

The route map to transformation involves moving from the current state into the transformation stage and then on to the future state

Current state:

- reactive care delivered to meet acute needs
- distinct and fragmented care between providers
- statutory agencies lead decision-making
- individuals are passive recipients of care
- over-reliance on hospital services
- self-care infrequent
- carers undervalued
- inequality gradient across communities.

Transition objectives:

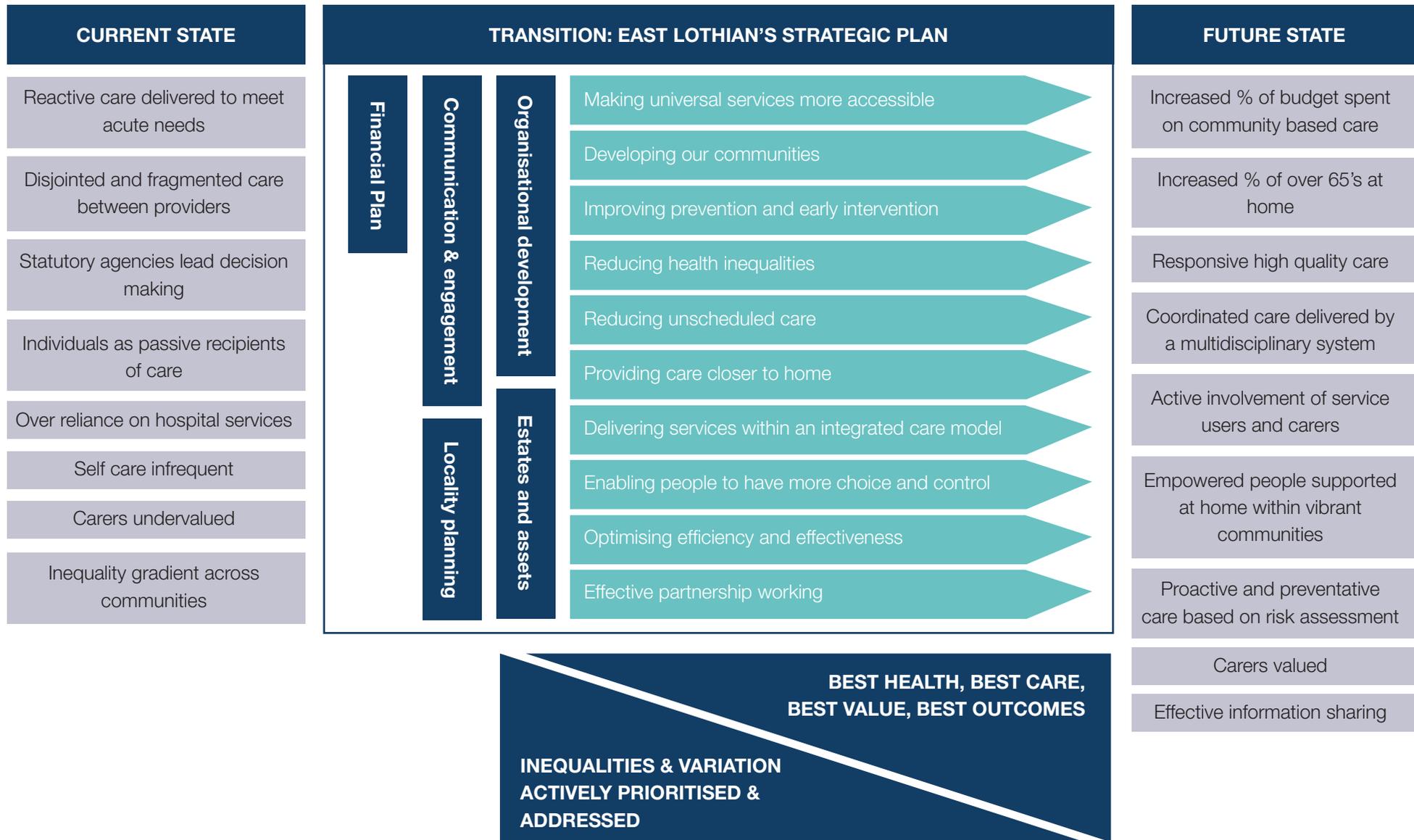
- making universal services more accessible and develop our communities
- developing our communities
- improving early intervention
- reducing health inequalities

- reducing unscheduled care
- providing care closer to home
- delivering services within an integrated care model
- enabling people to have more choice and control
- optimising efficiency and effectiveness
- effective partnership working.

Future service will:

- increased budget spent on community-based care
- increased percentage of over-65s at home
- responsive high quality care
- co-ordinated care delivered by a multi-disciplinary system
- proactive and preventative care, based on risk assessment
- carers valued
- effective information sharing.

The strategy for planning and delivering this change is set out in our strategic change programme – 'Fit for the Future'. You can find more detailed information about this in the full consultation draft on the East Lothian Consultation Hub.



As we've already stated, we will have a robust monitoring and performance frame work 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
- less spend of integrated budget on institutional care as opposed to community
- more years of life in conditions amenable to healthcare.

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.