



Eden
Cottage

East Lothian Integration Joint Board Strategic Plan 2025–2030

Approved by East Lothian IJB 26 February 2026

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1: Background

About East Lothian Integration Joint Board

East Lothian Integration Joint Board (IJB) governs the East Lothian Health and Social Care Partnership (ELHSCP) which delivers community health and social care services in East Lothian. The arrangements for the IJB and HSCP are set out in the [IJB's Integration Scheme](#).

The key functions of IJBs are set out in legislation, they are to:

- Prepare a Strategic Plan for all delegated functions.
- Allocate the integrated budget to deliver the aims of the Strategic Plan.
- Oversee the delivery of services.

Functions delegated to IJBs include:

- Adult social care services
- Adult primary and community health care services
- Some elements of adult hospital care

The full list of services delegated to East Lothian IJB are shown at Appendix 3.

Health and Social Care Partnerships (HSCPs) bring together NHS Board and Local Authority staff to develop and deliver integrated adult health and social care services, using a budget allocated by the NHS and Local Authority and in line with nationally agreed outcomes and targets.

More information about the East Lothian Integration Joint Board and Health and Social Care Partnership can be found [here](#).

Developing the East Lothian IJB Strategic Plan

This East Lothian Integration Joint Board (IJB) Strategic Plan outlines the IJB's priorities for the next five years. Importantly, the IJB Strategic Plan provides a framework for IJB decision making, including in relation to the use of financial and other resources. It also ensures that HSCP services are clear about the IJB's priorities and are working towards these, as well as communicating the IJB's priorities to its partners and other stakeholders.

In developing our Strategic Plan, we have reflected the Scottish Government's requirement to plan and commission services to deliver the outcomes set out in the [National Health and Wellbeing Outcomes Framework](#). As with our previous Strategic Plans, we have also applied the [Principles for Planning and Delivering Integrated Health and Social Care](#).

The content of the Strategic Plan reflects our consideration of the following contextual factors:

- The East Lothian context – demography and population health.
- Financial and other Resources.
- The national strategic landscape.
- The local strategic landscape.
- Feedback gathered through consultation and engagement activity (existing feedback and feedback generated by activity specific to the Strategic Plan development).

A summary of the main points related to each of these is included in the Strategic Plan, with links to where further information can be found (including in a number of Supporting Documents developed as part of the IJB Strategic Plan review and development process and included at Appendix 1).

A review will be carried out at the three-year point, in line with the statutory guidance. If required, the Plan may be revised at that stage or at other points before the end date in response to any developments that impact significantly on the IJB's strategic direction and priorities.



Our Vision and Values

Our Vision describes our aspiration to deliver health and social care services to **‘support all people in East Lothian to live healthy lives, to achieve their potential to live independently and exercising choice over the service they use.’**

We do not have a distinct set of values specific to the IJB. Instead, our staff are guided by the values of our partner organisations- NHS Lothian and East Lothian Council – which together employ all HSCP colleagues. These values are set out below.

NHS Lothian Values:

- Care and Compassion.
- Dignity and Respect.
- Quality.
- Teamwork.
- Openness, Honesty and Reliability.

East Lothian Council Values:

- **Enabling** and encouraging everyone we work with to achieve their full potential.
- **Leading** by example and taking responsibility to improve ourselves and others.
- **Caring** for each other, or community and the work we do.

Engagement Feedback

Engagement activity to guide the development of this Strategic Plan took place throughout 2025. An **Engagement Summary Report** providing further detail of the process and how feedback was used is available [here](#).

Engagement activity took place during two stages:

Phase 1 focused on engagement with key stakeholders in IJB strategic planning, including IJB and SPG members, delivery partners, HSCP colleagues, and community organisations. Feedback from this phase informed the development of a Consultation Draft. We also drew on existing engagement insights from previous engagement activities to identify priorities that people had already highlighted.

Phase 2 took place over the summer and into the autumn and involved a broader range of stakeholders as well as more formal consultation with delivery partners. Feedback gathered during Phase 2 was integrated into the final version of the Strategic Plan.

Phase 2 respondents were broadly supportive of the high-level strategic objectives and delivery priorities outlined in the Consultation Draft, though some expressed concerns about the impact of the changes required to implement them. At the same time, respondents suggested ways to strengthen these priorities and offered ideas to help ensure they contribute to better outcomes for groups and individuals. These insights were valuable in terms of refining and strengthening the delivery priorities and will continue to inform and guide the next stage of delivery planning.¹

Analysis of the feedback identified several key themes that have informed the development of a set of Core Principles (outlined on pages 6 and 7). These Core Principles will guide the overall delivery of the Strategic Plan, shaping our conversations, supporting strategic decision-making, and informing the day-to-day delivery of services.



Detailed feedback in relation to specific topics was also shared with colleagues leading existing workstreams—including the Carers Strategy, Dementia Strategy and Workforce Plan – as well as with Community Planning colleagues.

As outlined in the Engagement Summary Report, information gathered through this, and other engagement activity has been added to a newly established, searchable database. This resource will provide a valuable reference resource to inform ongoing service delivery and development, foregrounding community and stakeholders voices in everything we do.

¹ Planned activity to deliver IJB strategic objectives and delivery priorities will be detailed in Annual Delivery Plans for each financial year.

2: Summary of Strategic Objectives & Core Principles

East Lothian IJB's strategic objectives for 2025-2030 are shown below – full details, including the rationale behind each of these, along with related strategic delivery priorities are presented from pages 21-44.

Strategic objectives at a glance

Strategic Objective 1: Transformation and Change

'We will transform, or significantly change, how services are planned and delivered to ensure that population needs can be met as effectively as possible within the resources available, whilst continuing to prioritise the outcomes that matter to individuals.'

Strategic Objective 2: Prevention, Early Intervention, and Self-Management

'We will continue to invest in services and activities that focus on prevention and early intervention and that support people to look after their health and wellbeing.'

Strategic Objective 2: Reducing Health Inequalities

'We will prioritise the delivery of services to improve health and social care outcomes for those most disadvantaged in our communities and will work with partners to address the factors that contribute to health inequalities.'

In mapping out our delivery priorities it became clear that many of them linked to more than one strategic objective, with some aligning to all three. Feedback on the draft plan also highlighted this. We made a choices to retain this approach to ordering the priorities but have tried to indicate where individual priorities link to more than one objective.

Delivering our Strategic Objectives – Core Principles

Our approach to delivering our strategic objectives will be guided by a set of core principles. These principles have been shaped through discussion with partners and feedback from engagement activity. They will help to frame our conversations, guide strategic decision making, and inform the day-to-day delivery of services.

Whole System Working	<p>The need for organisations to work collaboratively to take a whole system approach to the provision of health services has never been more important. Improving population health and reducing health inequalities requires a collective effort, focusing on addressing the wider factors that contribute to poor health outcomes.</p> <p>Collaboration and whole system working are therefore keys themes that run throughout this Strategic Plan. East Lothian has a strong foundation to build on in this respect, with much of the progress achieved by the IJB to date delivered through close partnership working with local and Lothian partners.</p>
Ambitious and Innovative	<p>We need to be ambitious if we are to meet the challenges ahead – this means that we need to be flexible in our thinking and approach and willing to innovate.</p>
Honest and Realistic	<p>The challenges ahead are significant and the changes needed will be difficult. We need to ensure that we are open and honest in our communication and that we work with our communities and stakeholders to hear their concerns and act to address them.</p>
Person-Centred and Outcome Focussed	<p>We will develop and deliver services that meet the needs of individuals, listening to what matters to them most, respecting their choices and supporting them to stay as independent and well as possible.</p>
Community Engagement & Participation	<p>We will engage with local people and communities to understand their needs and priorities and will reflect this in our development and delivery of services. In particular, we will ensure that the voices of people with lived experience are heard, valued, and reflected in our work. We will</p>

	<p>take a coproduction approach to support the active participation of stakeholders in designing and improving services.</p>
<p>Reducing Health Inequalities Through Partnership Working</p>	<p>Health and wellbeing are shaped by many factors. While good health and social care services are essential, wider issues such as housing, employment, the environment and poverty also have a major impact, meaning improving population health requires organisations working together.</p> <p>Through its role in Community Planning, the IJB will contribute to a collaborative approach to addressing these wider factors, helping to improve outcomes for local people.</p>
<p>Universal Proportionality</p>	<p>We will make sure that support is available for everyone who needs it. At the same time, where necessary, we will target resources to meet the needs of people facing the greatest challenges and who are at risk of poorer health and wellbeing outcomes.</p>

3: Local and National Context

The East Lothian Context - Demography and Population Health

East Lothian's population has increased significantly in recent years, growing by 11.6% in the 10 years from 2013 to 2023 – the second highest percentage growth rate in Scotland for that period (behind Midlothian). The most recent estimate puts the population of East Lothian at around 112,300 people.²

It is projected that the East Lothian population will continue to increase over the coming years to around 121,743 people by 2043. Overall, it is estimated that the population will have grown by 15.1% from 2018 to 2043, the equivalent of almost 16,000 additional people³.

Over this period, the only the youngest age group (aged 0-15) is projected to decrease in size, with an estimated reduction of 1.1%. The largest growth will be seen in the older population, with a projected 40.8% increase in the over 65 age group and a 93.4% increase in over 75s. The working age population is set to grow by 11.5%.⁴

Population growth is significant in terms of considering future need for health and social care service provision. An increase in the older population is of particular significance in terms of their higher use of health and social care services. Figures show that 77% of people receiving social care support in Scotland are 65 and over⁵ and that older adults are disproportionate users of health services. This includes having more healthcare appointments, taking a higher number of medications, being admitted to hospital more often, and requiring longer hospital stays. People aged 65 and over also make up 70% of emergency hospital admissions in Scotland⁶.

2022 Census data shows the proportion of the East Lothian population reporting a range of specific health conditions. The most common type of health issue reported was a 'long-term illness, disease, or condition' (21.3%) which included conditions such as arthritis, cancer, diabetes, and epilepsy.

The proportion of people reporting a mental health condition in the Census increased significantly from the previous Census, rising from 3.8% in 2011 to 10.3% in 2022. Although there was a rise in across all age groups, the most significant increase was in the younger age groups, rising from 2.6% to 14.8% for those aged 16-24 and from 5.1% to 18.3% for 25-34 year olds.

The rise in the number of people living with multiple long-term conditions (MLTCs) has been identified as one of the most significant challenges facing health services nationally, both currently

² National Records of Scotland (NRS), 2023.

³ National Records of Scotland (NRS), 2020.

⁴ National Records of Scotland (NRS), 2020. (NRS), 2020.

⁵ People who Access Social Care and Unpaid Carers in Scotland, Scottish Government, 2023.

⁶ Health and social care strategy for older people: consultation analysis, Scottish Government, 2022.

and in the coming decades. The proportion of people with MLTCs increases as people age, so is an issue for East Lothian given the projected growth in the older population.

Burden of disease studies use a single composite measure to show years lost because of early death and years lost in terms of people living with poorer health / disability. The three leading grouped causes of ill-health and early death in East Lothian are cancers, cardiovascular diseases and neurological disorders. The leading individual causes of ill-health are low back and neck pain, depression and headache disorders, while the leading cause of early death are ischaemic heart disease, Alzheimer’s and other dementias, and lung cancers.

The Scottish Burden of Disease Study⁷ indicated that the national annual disease burden will increase by 21% by 2043, despite an overall reduction in the Scottish population over that period, largely as a result of ageing population and the growing number of people living with chronic disease.

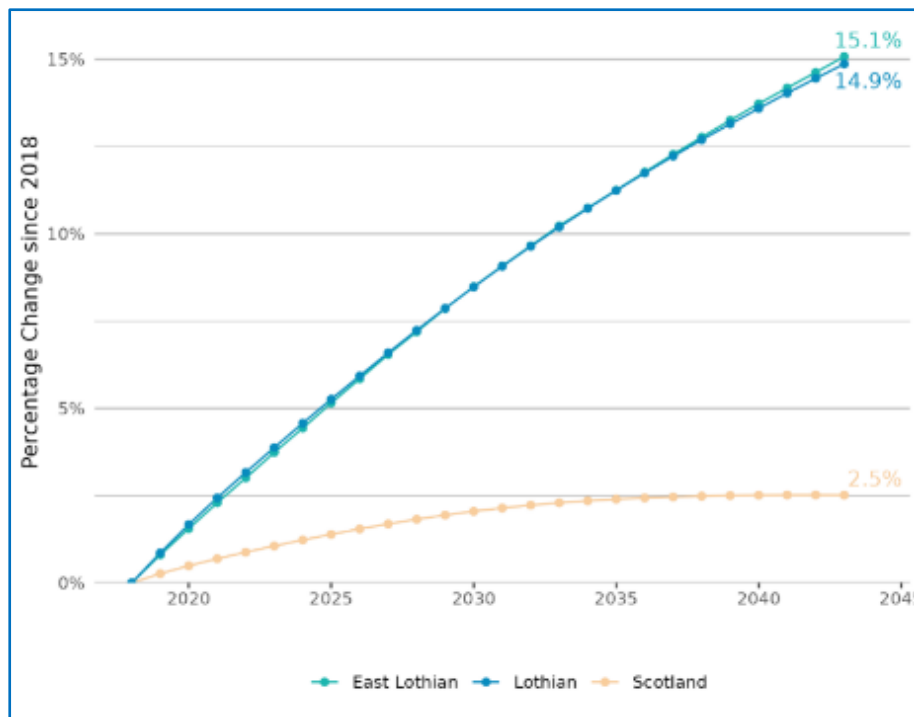
Comprehensive information on the East Lothian population is available in the [East Lothian Joint Strategic Needs Assessment \(JSNA\)](#).

Diagram 2 – Demographic Change

Historic Population Growth		
East Lothian had the 2 nd highest % growth for all Scotland local authority areas between 2013 and 2023	The most recent East Lothian population estimate was 113,740 (2023)	
East Lothian Projected Growth (2018 to 2043)		
It is estimated that overall, the population will grow by 15% from 2018 to 2043	Equals 15,953 more people, bringing the population to 121,743 by 2043	Projected growth of 41% in the 65+ age group
Growth of 93% in the 75+ age group	Growth in working age population of 12%	Projected 1% <u>reduction</u> in the 0-15 age group

⁷ Public Health Scotland, 2022.

Graph 1 – East Lothian Projected Population Growth 2018-2043 (NRS 2020)



Geography, Rurality, and Access to Services

East Lothian local authority area covers 679 square kilometres (km), accounting for 39% of the overall Lothian area. Its population density (167 persons per square km) is considerably lower than the Lothian level (553) but higher than for Scotland (70 persons per square km). Around 66% of the population live in what are classified as ‘large urban areas’ or ‘other urban areas’.

Although no part of East Lothian is officially classified as ‘remote’, the eastern side of the county—including – Haddington and Lammermuir; Dunbar and East Lothian; and North Berwick Coastal—contains extensive rural zones where there is more limited public transport coverage and residents have a higher reliance on private vehicles.

The 2020 Scottish Index of Multiple Deprivation (SIMD) identified multiple rural data zones in East Lothian falling within the most deprived deciles in Scotland (the bottom 30%) for the Access Domain.[1] However, access challenges are not limited to those living in the more rural parts of East Lothian but are also reported by residents of what are categorised as ‘accessible small towns’ and ‘accessible rural areas’.

Transport and travel limitations affect people’s ability to access employment; education; health and social care; and other essential services. Those most affected include older adults, low income households, and young people.

Rurality also presents operational challenges for the HSCP. Delivering home-based services—such as care at home and district nursing—becomes more complex when service users are dispersed across wide geographic areas or live in isolated locations. Recruitment is also more

difficult in the less populated eastern parts of the county, where limited transport options make it harder for staff to travel to work or between visits.

Health Inequalities

Health outcomes are not equal across the East Lothian population, with certain groups consistently experiencing poorer outcomes. These groups include people with ‘protected characteristics’ (under the 2010 Equality Act), but also individuals who are disadvantaged for a range of other reasons, including social and economic factors.

There is a strong relationship between life expectancy and deprivation, with higher deprivation being linked to lower life expectancy. This can be seen through analysis of Scottish Index of Multiple Deprivation (SIMD)⁸ data. Whilst overall life expectancy in East Lothian is higher than the Scottish level, men living in the least deprived areas can expect to live around 8 years longer than those in the most deprived. For women, those in the least deprived areas can expect to live around 6 years longer.⁹

There are a range of ‘drivers’ (shown in the illustration below) that impact on health and wellbeing outcomes. Clearly the provision of good quality, accessible health and social care is important. However, the drivers of population health go beyond health and social care provision, with the social, economic and environmental conditions in which people are born, live, work, and age heavily influencing health outcomes – these are often referred to as ‘the wider determinants of health’.

The [Scottish Government’s Public Health Framework](#) reflects the need to take a whole system approach to improving health. IJBs have a lead role in the strategic planning and commissioning of accessible, good quality local health and social care services, as well as working as part of a wider system approach to improving health and wellbeing. This approach is dependent on partners working collaboratively, both operationally and strategically, including through alignment of their strategic priorities.

⁸ Note that SIMD data only provides insight into area-based deprivation and not people living in less deprived areas who are experiencing deprivation linked to their individual circumstances.

⁹ East Lothian Mean Life Expectancy at Birth by Sex and SIMD Quintile, 2019-2023 (NRS, 2024h)

Drivers of Health and Wellbeing¹⁰



¹⁰ Infographic is adopted from Chief Medical Officer for Scotland Annual Report 2022-23 (Scottish Government, 2023a). Caution is warranted in interpreting the percentage breakdown because the drivers of health variation are not mutually exclusive.

The Financial Context

Integration Joint Boards (IJBs) throughout Scotland have continued to face increasing pressure on budgets, having to achieve savings year on year to deliver balanced budgets. Inflationary pressures; pay settlements; and the rising cost of treatments and prescriptions have added to this challenge. For East Lothian, additional pressure has come from Scottish Government funding not reflecting the population growth in the area.

To date, IJB budget gaps have largely been bridged by non-recurring savings; leaving vacancies unfilled; and making use of reserves – none of which provide a sustainable solution for the longer term.

Whilst the East Lothian IJB financial outlook for 2025/26 improved from the previous year, five-year projections suggest that budget gap will increase in subsequent years, rising to over £31.5 million by 2029/30 if no action is taken.

East Lothian IJB has already carried out a range of efficiency measures and made a number of difficult decisions regarding service provision. However, given the financial projections, further measures will be needed to deliver the significant savings required.

Concerns have been expressed about the impact of further financial recovery measures, including the cumulative impact of having to deliver savings year on year. IJB discussion has focused on the challenge of delivering a balanced budget whilst ensuring that services continue to be delivered at the level needed to reduce harm and keep people safe. The importance of continuing to invest in prevention and early intervention approaches has also been highlighted in terms of helping to mitigate against some of the projected rise in service demand resulting from demographic pressures.



The IJB's Five-Year Financial Plan will continue to be reviewed to ensure that it aligns with the strategic objectives and delivery priorities identified in the Strategic Plan. Consideration of budget positions will be a key part of producing the Annual Delivery Plan (the Annual Delivery Plan sets out how the IJB's strategic objectives will be delivered in each year of the Strategic Plan).

The National Strategic Context

There are **three interconnected frameworks at a national level that outline the strategic approach to health and social care reform in Scotland**. These frameworks have been key in informing the development of the East Lothian IJB Strategic Plan. They are:

- Health and Social Care Service Renewal Framework (2025-2035)
- NHS Scotland Operational Improvement Plan (2025-26)
- Scotland’s Population Health Framework (2025-2035)

The key priorities identified in each of these documents are described in brief below.



It is expected that national strategy will continue to evolve and that the IJB Strategic Plan and / or Annual Delivery Plan may need to be revised in light of any changes, however, any revision would be subject to the required engagement and governance processes.

There are a number of additional national strategic documents that have also been considered in the development the IJB’s Strategic Plan and will continue to be significant as we deliver the Plan – these are listed at **Appendix 2**.

Health and Social Care Service Renewal Framework

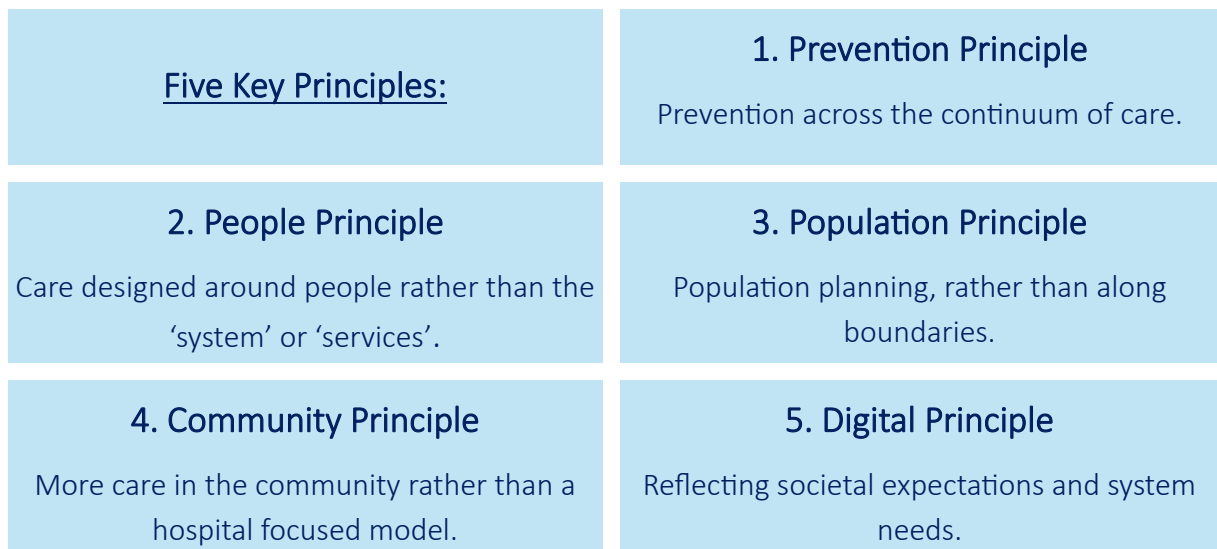
The Health and Social Care Service Renewal Framework (SRF) identifies the Scottish Government’s vision for health and social care as:

‘a Scotland where people live longer, healthier, and more fulfilling lives’.

The SRF is described as a ‘high level guide’ for change and notes that NHS Boards and IJBs will be held accountable for collaborating on the planning and delivery of services within the principles of the Framework – making this a key document in the development of East Lothian IJB’s Strategic Plan.

The SRF identifies five key principles for change, along with a number of major areas for change – these are shown in **Diagram 3** below. The East Lothian IJB Strategic Plan strategic objectives and delivery priorities can be mapped directly to each of these principles / major areas for change.

Diagram 3- Health and Social Care Service Renewal Framework (SRF)



Major Areas of Change:

- Enhancing services that prevent disease, enable early detection and effectively manage long-term conditions.
- Delivering health and social care that is people-led and 'Value Based'.
- Strengthening integration across the system.
- Redesigning our hospitals as we deliver more care within communities.
- Improving access to services and treatments in the community
- Delivering services which are accessible through digital technologies, with people and our workforce able to access and make use of the right information.

Source : [Health and Social Care Service Renewal Framework \(2025-2035\)](#)

NHS Scotland Operational Improvement Plan 2025-26

The NHS Scotland Operational Improvement Plan identifies a number of **short-term improvements to NHS service delivery across Scotland** in line with the broader health and social care renewal agenda.

Although the objectives set out in the Operational Improvement Plan are specific to the year covered (2025-26), they link directly to the SRF principles and are reflective of the direction of travel – they include:

- Improving access to treatment and reducing waiting times.
- Shifting the balance of care from acute services to community-based care.
- Improving access to health and social care services through digital and technological innovation.
- Prioritising prevention to ensure we work with people to prevent illness and more proactively meet their needs.

This and subsequent NHS Operational Improvement Plans has a direct impact on East Lothian HSCP services through their involvement in the improvements outlined. Working with partners through the Lothian Health and Care System¹¹ will be key to delivering improvements.

Scottish Government Population Health Framework 2025-2035

The Scottish Government Population Health Framework outlines **a whole-system approach to improving population health and tackling health inequalities**. The need to work across sectors is identified, with the involvement of national and local governments, public sector partners, community organisations and businesses. The Framework emphasises the requirement to address the root causes of poor health and to focus on prevention and early intervention.

The Framework is built around five overlapping drivers of health and wellbeing, these are:

- Building a prevention-focused system.
- Addressing the social and economic determinants of health.
- Supporting healthy places and communities.
- Enabling health living.
- Ensuring equitable access to health and social care.

Addressing health inequalities is a theme across the IJB Strategic Plan, as well as being directly reflected in the strategic objective 'Reducing Health Inequalities'.



¹¹ Lothian Health and Care System includes NHS Lothian and the 4 Lothian Integration Joint Boards – Edinburgh, East Lothian, Midlothian, and West Lothian.

The Local Strategic Context

Partnership working at a Lothian and East Lothian level is, and will continue to be, key to the effective delivery of health and social care services. As identified in the national strategies outlined above, **a whole-system approach, with strong partnership working and collaboration** is essential if we are to meet the challenges ahead and be successful in improving population health and tackling health inequalities.

Working in Partnership at an East Lothian Level

IJB delegated functions are delivered operationally by our delivery partners, East Lothian Council and NHS Lothian, with services collectively described as the East Lothian Health and Social Care Partnership (ELHSCP). Both the Council and NHS Lothian also deliver further services that, whilst not delegated to the IJB, are key to the health and wellbeing of the local population (for example, scheduled hospital care and housing).

This interconnectedness means that effective partnership working between NHS Lothian, East Lothian Council and the IJB is required to support a whole-system approach. Strong leadership is a key element of this, and progress continues to be made in developing collaborative, tripartite working at a senior level between the IJB Chief Officer; East Lothian Council Chief Executive; and NHS Lothian Chief Executive.

Our Third Sector partners also play a key role in relation to health and social care and are represented by VCEL (Volunteer Centre East Lothian) on IJB governance structures. The sector provides a wide range of services related to health and social care, including services commissioned on behalf of the IJB, and has particular strength in relation to innovation and coproduction and in delivering early intervention and prevention activities.

Community Planning brings together a wider range of local partners to form the East Lothian Partnership (ELP). ELP partners include:

- East Lothian Council
- NHS Lothian
- Police Scotland
- The Scottish Fire and Rescue Service
- Scottish Enterprise
- VCEL (Volunteer Centre East Lothian)
- Edinburgh College

ELP is required to produce a **Local Outcome Improvement Plan (LOIP)** defining a shared vision and local priorities agreed by partners.

Although IJBs are not statutory partners in Community Planning Partnerships, the alignment of IJB Strategic Plans and Local Outcome Improvement Plans is recognised as important in terms of harnessing the collective resources of local partners to deliver optimal outcomes, particularly in terms of improving population health and reducing health inequalities through a whole-system approach¹².

The East Lothian LOIP is currently undergoing review, with the expectation that a revised LOIP will be agreed in 2026. HSCP officers will continue to feed into the review process to help ensure alignment.

Working in Partnership at a Lothian Level

At a Lothian level, East Lothian IJB is a part of the Lothian Health and Care System (LHCS), along with NHS Lothian and the other three Lothian IJBs (Edinburgh, Midlothian, and West Lothian).

The Lothian Strategic Development Framework (LSDF) outlines the strategic direction for the Lothian Health and Care System (LHCS) over a five-year period from 2022 up to and including the 2027-28 financial year. The LHCS includes the five bodies with responsibility for the planning, commissioning, and delivery of health and social care services in the Lothians:

- NHS Lothian Board
- East Lothian IJB
- Edinburgh IJB
- Midlothian IJB
- West Lothian IJB

THE LSDF has 6 'pillars', 3 of which relate to service areas delegated to the IJB – **Unscheduled Care; Primary Care; and Mental Health, Illness and Wellbeing**. A Programme Board is in place to oversee delivery of each of these pillars and includes senior representation from the four Lothian IJBs and NHS Board. As such, this provides an effective mechanism for strategic planning at a pan Lothian level.



East Lothian IJB will continue to explore opportunities to work collaboratively with Lothian neighbours, including in relation to areas of activity outwith the current LSDF, for example, in relation to social work and social care.

Again, strong links and collaboration at leadership level across organisations is key to harnessing the signification potential of partnership working at a Lothian level.

¹² This is a central tenet of the Scottish Government Population Framework 2025-35.

Commissioning of Services

The East Lothian HSCP Commissioning Strategy and Market Facilitation Statement (2025-30) sets out the guiding principles for the commissioning of health and social care services. This provides a framework to help ensure that the planning and delivery of commissioned services reflects the priorities outlined in the IJB's Strategic Plan.

The key principles that will underpin our commissioning activity over the lifetime of the IJB Strategic Plan include:

- **Collaboration** – we will work with communities, providers, advocacy organisations, carers, supported people, and staff when designing, developing, and commissioning services. We will explore opportunities for collaborative commissioning.
- **Prevention and early intervention** – we will focus our commissioning on early intervention and preventative approaches that promote independence, participation, and self-management.
- **Community-based** – we will actively develop, support, and promote community-based service provision.
- **Right care, right place, right time** – we will aim to commission services that provide support within an individual's home, local community or in a homely setting.
- **Outcome-focussed** – we will promote an outcome focussed approach to commissioning, moving away from high scale and low-cost delivery models which are primarily driven by profit margins.
- **Innovation** – we will promote innovation, including in relation to the use of digital technology to enhance and transform service delivery.
- **Ethical commissioning** – we are committed to ethical commissioning, considering factors beyond price, including fair work, terms and conditions, career pathways, trade union representation, and sustainability of services and environment.
- **Equity of provision** – we will commission services that are widely accessible, regardless of where people live or their individual circumstances.

You can read the **Commissioning Strategy and Market Facilitation Statement (2025-2030)** in full [here](#).

Housing, Health and Social Care

There is a clear link between housing and health and wellbeing. Housing condition, security of tenure and suitability in relation to individual needs can have a direct impact on health and wellbeing. Factors such as affordability, location, and access to local services and supports may also impact. The planning and delivery of quality, affordable, and appropriate housing is considered to be a public health tool, and essential in reducing health inequalities.

In recognition of this, Housing Contribution Statements were introduced by the Scottish Government in 2013 to strengthen formal links between housing, planning and health and social care strategic planning and commissioning. Housing Contribution Statements are intended to provide a bridge between the Local Housing Strategy and the IJB Strategic Plan.



An East Lothian Housing Contribution Statement was agreed by the IJB in December 2024 and has been updated to reflect the priorities in the new IJB Strategic Plan (this document). The Statement outlines the IJB's and East Lothian Council's shared priorities in relation to housing, health and wellbeing and outlines the housing contribution to the delivery of IJB strategic objectives.

A Housing Delivery Group has been established to support collaborative working to deliver these shared priorities – this includes representation from the HSCP and the East Lothian Council Housing Service.

You can view the current **East Lothian Housing Contribution Statement for 2024-29** [here](#).

4. Strategic Objectives & Delivery Priorities

This section outlines East Lothian IJB's Strategic Objectives up to 2030. There are three high-level Strategic Objectives:

Strategic Objective 1: Transformation and Change

'We will transform, or significantly change, how services are planned and delivered to ensure that population needs can be met as effectively as possible within the resources available, whilst continuing to prioritise the outcomes that matter to individuals.'

Strategic Objective 2: Prevention, Early Intervention, and Self-Management

'We will continue to invest in services and activities that focus on prevention and early intervention and that support people to look after their health and wellbeing.'

Strategic Objective 2: Reducing Health Inequalities

'We will prioritise the delivery of services to improve health and social care outcomes for those most disadvantaged in our communities and will work with partners to address the factors that contribute to health inequalities.'

These objectives have been developed through analysis of both the local and national context.

This has included consideration of current and projected population data; the financial context; partners' strategic priorities; and relevant national strategy. Feedback gathered via engagement activity, including formal consultation with partners has also shaped these objectives.

Strategic Objective 1: Transformation and Change

We will transform, or significantly change, how services are planned and delivered to ensure that population needs can be met as effectively as possible within the resources available, whilst continuing to prioritise delivery of the outcomes that matter to individuals.

Why is this a strategic objective for the IJB?

The need for health and social care services in East Lothian will continue to grow over the lifetime of the Strategic Plan...

- East Lothian's population has increased significantly in recent years and continued growth is projected.
- Population growth will result in a continued rise in pressure on public services, including health and social care services.
- For East Lothian, the largest growth is in the older population (65+), with an even higher percentage growth in the over 75s age group.
- People typically need more support from health and social care services as they age, so growth in the older population is particularly significant for the IJB when developing its Strategic Plan.

Meeting growing need within the resources available will be increasingly challenging, meaning that we need to make significant changes to how we plan and deliver services....

- In common with IJBs across Scotland, East Lothian has faced increasing financial pressure in recent years, and this is set to become even more challenging.
- Financial recovery measures have already been implemented and difficult decisions made.
- Significant changes are now needed in relation to how we plan and deliver health and social care services to meet growing demand within available resources.
- In some cases, further transformational change will be required.
- The challenge is how we continue to improve outcomes for individuals whilst reducing costs.
- Taking a whole system approach, working collaboratively with our partners, will be essential in delivering the change needed. This includes partnership working at an East Lothian level, as well as with Lothian partners within the Lothian Health and Care System.

We need to engage with the public and other stakeholders to ensure that services continue to meet need effectively and that changes do not cause unfair disadvantage.

- The level of service change needed will require further difficult decisions to be made and a shift in culture and expectations.
- Changes will potentially be unpalatable, and this adds to the challenge.
- Engagement with communities and other stakeholders will be important as new approaches are developed.
- We need to ensure that we assess the impact of any changes, including the impact on people with protected characteristics and on those more vulnerable as a result of social, economic, or other life circumstances. Where we discover negative impacts, we will take steps to mitigate them and monitor these impacts. Where we discover positive impacts, we will work with the community and partners to ensure that we maximise the opportunity to improve equality and fairness.
- The rural nature of parts of East Lothian must also be considered when planning service developments to ensure that transport issues do not create a barrier to accessing health and social care services.

This objective reflects the Scottish Government strategic direction....

- The Health and Social Care Service Renewal Framework (SRF) outlines a comprehensive transformation agenda for the delivery of health and care in Scotland.
- The SRF describes the significant challenges faced by and suggests- *'we must respond strongly to these challenges and see them as introducing both necessities and opportunities to transform how the health and social care system works for the people of Scotland. We are grasping this opportunity through bold reform to health and social care.'*
- National strategy also emphasises the need to take a whole system approach to improving population health and reducing health inequalities.

Reflecting views gathered through engagement activity....

Our engagement activity generated valuable insights into stakeholders' views on service transformation and change. This included both suggestions for service development reflecting stakeholder priorities, as well as concerns about the potential impact of transformation and change on people accessing services.

While some respondents welcomed the 'aspirational' nature of the draft Strategic Plan, the need to balance ambition with 'realism' was also noted, particularly given the significant challenges faced.

People raised concerns regarding barriers to delivering the level of transformation and change needed. These included the financial constraints faced by the wider public sector, as well as challenges in recruiting and retaining enough staff and with the skills required. Public expectations and resistance to change was also noted.

Feedback emphasised the importance of robust and meaningful engagement when making service changes. People noted that close collaboration with communities is essential to ensure that stakeholders play a meaningful role in shaping change. They also highlighted the need to be open and honest about the challenges faced by health and social care services, as well as ensuring clear communication regarding the rationale behind service change.

People highlighted the vital role played by the third sector in delivering new service models and approaches and stressed the importance of continuing to strengthen the partnership between the sector and the IJB. It was specifically suggested that the IJB work with third sector partners to co-produce a 'Compact'¹³ to help underpin and support this relationship.

There was strong support for the continued shift of care from hospital to community-based settings. However, concerns were expressed regarding the need to ensure that the necessary infrastructure and resources are in place to support this shift. Again, the key role of the third sector in providing community-based support was highlighted here and the requirement for sufficient funding and support for the sector to enable it to play this role effectively.

People recognised the potential opportunities for using technology to support care, although some highlighted the need to ensure this is used appropriately to enhance existing provision and not as an alternative. Digital exclusion was also highlighted as an issue that needs to be taken in account when looking at opportunities.

Where appropriate, the feedback gathered has further informed and strengthened the strategic priorities outlined below. Some of the more detailed feedback will be important in guiding the next phase of delivery planning and will also inform specific workstreams.

¹³ A 'Compact' is a mutually agreed framework that sets out shared principles, expectations and ways of working between the statutory sector and the third sector, providing clarity on roles, responsibilities and commitments to support effective partnership working.

Strategic delivery priorities- what do we need to prioritise to deliver this strategic objective?

Focusing on the strategic delivery priorities below will help us to achieve this strategic objective. Further details will be included in Annual Delivery Plans developed for each year of the Strategic Plan. In addition, there are a number of strategies / programmes already in place, or planned for development, that will provide direction (highlighted in ***bold italics*** below).

1.1 Continuing to shift the balance of care from hospital to community settings.

Shifting the balance of care from hospital to community settings has been a key strategic objective for the IJB since its introduction.

Significant progress has been made in developing 'Intermediate Care Services' that provide support to people at home as opposed to hospital inpatient provision. These services deliver better outcomes for individuals; reduce pressure on hospital beds; and make more efficient use of resources. 'Intermediate Care Services' in East Lothian include Care at Home; Hospital to Home; Discharge to Assess; Enhanced Discharge to Assess; Day Services; the Emergency Care Service; and the Falls Service. The range of commissioned services delivered by third sector partners are also crucial, including, for example, Day Centres for older people and Community First, an early intervention community provider.

Activity to support the Lothian wide Unscheduled Care Programme and ongoing development of the 'Home First' model in East Lothian will help further progress the shift in the balance of care from hospital to community. The challenge will be to continue to move service provision in this direction and to ensure that this is reflected in the allocation of budgets.

The reallocation of financial and other resources will be required to support this ongoing shift from hospital to community. This will include the review of set-aside and hosted services arrangements and associated budgets.

Specific activity required over the lifetime of the Strategic Plan will include:

- Ongoing participation in the pan Lothian ***Unscheduled Care Performance Improvement Programme***, supporting a whole system approach to reducing pressure on acute services and bed based care.
- Continued development of the East Lothian 'Home First' model approach and the Single Point of Access supporting both hospital discharge and prevention of admission.
- Ongoing investment in and development of Intermediate Care Services, including delivery of the recommendations from the Planning for Older People Services programme report.

- Implementation of the *Care at Home Strategy* priorities – to include improving the efficiency and effectiveness of care at home allocation and ensuring that care at home is no longer treated as the default option for care.
- Working with partners to move to an integrated budget for the IJB to help progress flexible use and reallocation of resources from acute to community (reflecting shifts in service provision). This will include working with NHS Lothian colleagues and the wider Lothian Health and Care System to review the use of set-aside budgets.

1.2 Delivering services that are ‘outcome focused’ – planned around individual’s needs and reflecting what is important to them.

Developing services that are ‘outcome focused’ means that services are planned around individual need and what is important to the person receiving the service. Outcome focussed approaches help to ensure that services are appropriate and proportionate, promoting independence and, where appropriate, reducing reliance on formal services.

This principle already underpins much of HSCP service delivery and commissioning of services, and will continue to underpin service development, including in relation to the transformation agenda.

Revisiting and improving our approach to the implementation of Self Directed Support (SDS)¹⁴ in East Lothian will be a key area of focus going forward. The overall aim of this work will be to support and enable people to achieve the outcomes that are important to them to lead full and meaningful lives.

Given the growing pressure on formal health and social care services, we need to help facilitate the use of alternative support to help people achieve their outcomes where appropriate (for example, through services delivered by third sector and community partners).

Specific activity required over the lifetime of the Strategic Plan will include:

- Ongoing development of strengths / asset-based assessments by Adult Social Work teams.
- Redevelopment of the *East Lothian Self-Directed Support (SDS) Plan* to guide improvement work in relation to the use of SDS in East Lothian. This will be driven by an SDS Delivery Group, with oversight by the Intermediate and Social Care Programme Board.
- Continuing to take an outcome focused approach to health and social care commissioning (as outlined in the *East Lothian HSCP Commissioning Strategy*).

¹⁴ Self-Directed Support (SDS) gives people choice and control over how their social care is planned and delivered. The Social Care SDS (Scotland) Act 2023 defines values and principles in relation to SDS.

1.3 Developing a Primary and Community Health Care Programme reflecting current and projected demand and identifying key priorities for development and investment.

For the vast majority of people, their main contact with healthcare services will be through primary care, with dentist and GP appointments accounting for the highest proportion of contacts.

In East Lothian, primary care services include those provided by GPs, dentists, opticians, and pharmacy, along with a range of services managed and delivered directly by the Health and Social Care Partnership (HSCP).¹⁵

Given what we know regarding the anticipated increase in demand across all services, future pressure on primary care is clearly an area of concern. Activity is needed to look at current and projected demand to inform the strategic planning and delivery of primary care services that are able to meet future population needs. Supporting General Practice sustainability and resilience must be a key priority within this, alongside the ongoing development of HSCP managed primary care services.

Specific activity required over the lifetime of the Strategic Plan will include:

- Development of a ***Primary and Community Health Care Programme*** covering all primary care services, based on analysis of current and projected demand and identifying key priorities for development and investment.
- Establishment of a Delivery Group to deliver the Primary and Community Health Care Programme, with oversight from the Primary Care Programme Board.
- Ongoing participation in work to deliver HSCP priorities within the ***Pan Lothian Primary Care Programme*** as part of the Lothian Strategic Development Framework.

¹⁵ Often referred to as 'Primary Care Improvement Plan' or 'PCIP' services.

1.4 Developing Community Mental Health Services to support the shift of mental health provision from acute to community settings.

Shifting the balance of care from acute to community settings is also a priority in relation to mental health service provision. Operationally, HSCP services continue to deliver activity to prevent unnecessary hospital admission; reduce the length of stay and preventing delayed discharge for patients in mental health inpatient settings. However, ongoing service development and resource allocation will be required to ensure there is sufficient capacity within community mental health services to continue to support this shift, as well as to meet any increase in demand resulting from demographic or other factors.

Specific activity required over the lifetime of the Strategic Plan will include:

- Development of a **Community Mental Health Strategy** to support the planning and delivery of community mental health services to meet current and projected demand and to support the ongoing shift of provision from acute to community settings.
- Working with partners and potentially neighbouring IJBs to develop supported housing options for people in the community as an alternative to or following hospital admission.
- Ongoing participation in Pan Lothian Improvement Programmes as part of the **Lothian Strategic Development Framework** (including programmes relating to Adult Mental Health Discharge Without Delay; Older People Mental Health Discharge Without Delay; and Redesign of Mental Health Unscheduled Care Improvement Programmes).
- Participation in Lothian Adult Neurodiversity Pathways Group to develop whole system patient pathway discussions.

1.5 Working with third sector partners to deliver new and innovative services, including through collaborative and coproduction approaches.

Third sector organisations in East Lothian have a strong track record of delivering new and innovative service models and are well placed to work with communities to deliver collaborative and coproduction approaches. Development of third sector provision also makes a valuable contribution in terms of promoting community cohesion and resilience, reducing social isolation, and supporting inclusion.

We will continue to strengthen our relationship with our third sector partners, including through exploring further opportunities to work with the sector to develop new and innovative approaches to service delivery.

Specific activity required over the lifetime of the Strategic Plan will include:

- Working with the third sector to coproduce a ‘Compact’ setting out the principles underpinning the relationship between the sector and the IJB and recognising the sector’s key role.
- Implementing the *East Lothian HSCP Commissioning Strategy and Market Facilitation Statement*, updating these as required to ensure that they fully reflect the IJB’s commitment to the third sector.
- Reviewing and updating the *East Lothian HSCP Engagement and Participation Strategy* to strengthen the approach to community engagement and participation in line with Health Improvement Scotland’s Quality Framework for Community Engagement and Participation and Planning with People Guidance.

1.6 Developing the use of digital technology to enhance and transform services.

The use of digital technology offers significant opportunities to enhance and transform how we deliver health and social care in East Lothian. Digital options can help make better use of available resources, as well as supporting self-management and playing a role in prevention and early intervention.

This includes the use of digital technology in people's homes, but also by health and social care services in a range of other settings. Technology can include things like alarms, monitoring devices, and telecare equipment, but also the development of online / digital options for accessing services and online resources providing information and advice.

Digital technology is already used by HSCP services, most notably by the East Lothian Rehabilitation Service (ELRS), including, for example, in relation to the Technology Enabled Care (TEC) Service. We now need to explore and develop opportunities to expand the use of technology across all of our service areas.

An increase in the use of digital technology to provide alternatives to 'in-person' appointments and other contacts has not been seen to the extent anticipated in the wake of the Covid pandemic, with face-to-face contact remaining the default for most services. However, providing more appointments remotely has the potential to improve access; increase efficiency; and maximise use of staff capacity.

When developing digital opportunities, it is essential to ensure that services remain person-centred, aligned with individuals' needs and priorities, and designed to enhance—rather than replace—the care and support provided through traditional face-to-face approaches.

Specific activity required over the lifetime of the Strategic Plan will include:

- Development of an *East Lothian HSCP Digital Innovation Strategy* to identify, develop, and deliver opportunities to use digital solutions to support the delivery of health and social care (with oversight by the Digital and Data Programme Board).
- Ongoing work to increase the proportion of appointments and other patient / service user contacts taking place remotely with the use of digital technology.
- Ensuring that any developments under this priority consider the risk of 'digital exclusion' and take steps to mitigate against this risk, including through retaining non digital options if needed.

1.7 Developing services to meet the projected demand for palliative and end of life care, including in people's homes and community settings.

National projections indicate that the number of people requiring palliative and end of life care will increase significantly as the population ages. We need to ensure that we have services in place to respond to this growth in need, particularly in terms of providing palliative and end of life care and support to people at home or in community settings.

The Planning for Older People's Services (POPS) project's [Final Report](#) recommended that palliative and end of life care should remain a key strategic priority in the revised IJB Strategic Plan and that a Palliative and End of Life Care Strategy / Delivery Group be formed within the IJB Programme Board structure.

Specific activity required over the lifetime of the Strategic Plan will include:

- Development and delivery of an *East Lothian Palliative and End of Life Care Strategy*, including reflecting the recommendations in the Planning for Older People's Services (POPS) project's [final report](#). This work will be led by a Delivery Group with oversight by the Intermediate and Social Care Programme Board.

1.8 Working with partners in the Lothian Health and Social Care System to deliver shared priorities and identify opportunities for collaboration.

East Lothian IJB, along with the three other Lothian IJBs and NHS Lothian form the Lothian Health and Care System (LHCS). The Lothian Strategic Development Framework (LSDF) sets out LHCS priorities for the next five years up to 2027-28.

Specific activity required over the lifetime of the Strategic Plan will include:

- Continuing to work with Lothian Health and Care System (LHCS) partners through a range of forums to deliver the *Lothian Strategic Development Framework* (LSDF) and other shared priorities.
- Exploring further opportunities for collaborative working with other Lothian IJBs to deliver efficiencies and develop service provision (including work already under discussion with Midlothian HSCP on Community Mental Health Pathways).
- Taking forward discussion with LHCS partners to review current arrangements for set-aside and hosted services (including with regard to budget arrangements) and to look at opportunities for efficiencies and potential budget reconfiguration.



Strategic Objective 2: Prevention, Early Intervention, and Self-Management

We will continue to invest in services and activities that focus on prevention and early intervention and that support people to look after their health and wellbeing.

Why is this a strategic objective for the IJB?

Investing in prevention and early intervention reduces the need for health and social care support in the longer term and delivers better outcomes for individuals....

- We know that projected population growth and demographic change will lead to an increase in demand for health and social care services over the lifetime of this Strategic Plan.
- Investing in prevention and early intervention will help to mitigate against some of this increase in demand by improving the overall health and wellbeing of the East Lothian population at all life stages.
- Investment will also help to keep people well for longer; maintaining their independence into older age; and reducing or delaying their need for more intensive, and potentially more expensive care and support.
- There are a wide range of other activities and interventions that focus on early intervention and prevention that are not within the direct remit of the IJB (for example, wider NHS Lothian and Public Health Scotland activities) – however, the importance of involvement in a wider system approach is recognised (see also Strategic Objective 3 below).

This objective aligns with national and local strategy....

- The Scottish Government Health and Care Service Renewal Framework sets out five key principles for renewal – one of these being the ‘Prevention Principle’ which is described as shifting the focus from reactive treatment to early intervention and prevention.
- The Framework also identifies a major area for change as ‘enhancing services that prevent disease, enable early detection and effectively manage long-term conditions’.
- The Scottish Government’s Physical Activity for Health Framework calls for a whole-system approach to increasing physical activity, including in relation to infrastructure, places, active travel, sport, and recreation. While the IJB isn’t responsible for these wider factors, its role in community planning allows HSCP services to contribute to the broader whole-system effort. In terms of the IJB’s direct remit, the framework identifies that physical activity should be integrated into health and social care practice.



- NHS Lothian’s prioritisation of prevention is set out in its strategic document – ‘A strengthened approach to prevention across the Lothian Health and Care System’. This approach was formally endorsed by East Lothian IJB.

Reflecting views gathered through engagement activity....

The need to prioritise prevention and early intervention came out strongly through the engagement process. People highlighted the importance of providing care and support at an early stage to keep people well and to avoid their situation deteriorating. This was highlighted in relation to specific groups.

Respondents identified opportunities such as social prescribing, community link workers, and health promotion initiatives. They also highlighted the importance of accessible, affordable activities and amenities to support people to be physically active. In addition, community activities to help people stay socially connected and reduce social isolation were emphasised.

People stressed that prevention and early intervention services need to be quick and easy to access to ensure people can benefit fully. Specific reference was made to this in relation to people living in rural areas and carers.

The importance of multi-disciplinary teams and approaches was highlighted, along with continuity of care (in terms of people seeing the same professional on an ongoing basis). Particular mention was made of the need for a multi-disciplinary approach to the management of frailty.

People expressed concern that growing pressure on services would mean that less money is invested in prevention and early intervention. It was suggested that financial planning should include ‘spend to save’ approaches, investing additional monies in prevention and early intervention to reduce pressure on health and social care services in the longer term.

The delivery of health promotion initiatives was a recurring theme, particularly at an early age. Along similar lines, it was suggested that communication campaigns in relation to health, social care, and wellbeing would be helpful.

As with Objective 1 (above), feedback gathered has informed and strengthened the strategic priorities outlined below. Some of the more detailed feedback will be important in guiding the next phase of delivery planning and feeding into other strategic and service planning.¹⁶

¹⁶ As detailed in the Engagement Summary Report (add link), feedback gathered through this and other engagement activity has been added to a newly established, searchable database will provide an invaluable reference resource to inform ongoing service delivery and development.



Strategic delivery priorities- what do we need to prioritise to deliver this strategic objective?

Focusing on the strategic delivery priorities below will help us to achieve this strategic objective. Further details, including timescales and targets, will be included in Annual Delivery Plans developed for each year of the Strategic Plan. In addition, there are a number of strategies / programmes already in place, or planned for development, that will provide direction (these are highlighted in *bold italics* below).

As well as the priorities below, the operational delivery of HSCP services will continue to contribute to achieving this Strategic Objective through existing activities and approaches that focus on prevention, early intervention and self-management.

2.1 Delivering services that support people to remain active and independent.

Services delivered by Allied Health Professionals (AHPs)¹⁷ are key in supporting people to remain active and independent so they can live independently, in their own home, for as long as possible. In East Lothian, these services are delivered by the East Lothian Rehabilitation Service and include physiotherapy, occupational therapy, falls prevention, telecare, and pain management.

Alongside directly provided services, ELRS staff have developed a range of self-help guides and interactive online tools providing information and advice. ELRS also provides information and advice specifically on the use of consumer technology (Smart TEC) to support independence and keep people safe, and this is an area of potential development as technology continues to develop and improve.

Third sector and community organisations play a key role in delivering services that support people to be active, engaged and independent and to connect with their local community. As noted above, one of the strengths of the sector is organisations' ability to innovate and respond flexibly, as well as to work collaboratively with communities to develop services that reflect what people want and need.

¹⁷ Allied Health Professionals (AHPs) are a group of clinicians who provide care to people across a range of care pathways and in a variety of settings, including Occupational Therapists and Physiotherapists.

Specific activity required over the lifetime of the Strategic Plan will include:

- Continuing to ensure appropriate levels of investment in ELRS and other HSCP delivered services that support people to remain active and independent.
- Ongoing development of activity to support 'self-management' of health issues to enable people to remain active and independent.
- Development of Early Intervention and Prevention MDT Polyclinics providing clinic-based assessment and rehabilitation involving a range of disciplines.
- Ongoing work to ensure that promoting physical activity is an integral part of health and social care practice.
- Further development of opportunities for the use of consumer and other technology to support independence and self-management (as part of the delivery of an *East Lothian HSCP Digital Innovation Strategy* – see priority 1.6 above).
- Commissioning services focused on preventative and early intervention approaches that are outcome / recovery focussed and promote independence, participation and self-management (as laid out in the *East Lothian HSCP Commissioning Strategy*).
- Continued collaboration with third and community sector partners to develop and deliver activities supporting prevention, early intervention, and self-management, including exploring opportunities for innovation and coproduction with communities.
- Working with partners through Community Planning to support the delivery of prevention and early intervention activities, including initiatives related to increasing levels of physical activity to help improve population health (see also Strategic Objective 3 below).

2.2 Right care, in the right place, at the right time

Ensuring services are quick and easy to access is key to delivering prevention and early intervention approaches. Accessible services mean people are more likely to engage at an early stage and to continue to access and benefit fully from the care and support available. For the HSCP, this includes continuing to develop services that are as local as possible and that can be accessed directly, and, where appropriate, via alternatives to 'in-person' appointments.



Primary care plays an important role in relation to prevention, early intervention and self-management of conditions, so we need to continue to ensure that people are able to access the primary care services they need as quickly and easily- both services delivered by General Practices and those managed and delivered by the HSCP.¹⁸

We have already made a number of changes to the primary care services delivered directly by the HSCP to make them quicker and easier to access through the development of new delivery models and pathways. We have also improved information on primary care services (including an online directory), helping to guide people to the service best placed to meet their needs.

As noted above (delivery priority 1.1) we have developed a Single Point of Access to streamline hospital discharge through an integrated Multi-Disciplinary Team (MDT) approach. The next phase will focus on creating a prevention of admission pathway, bringing together a wide range of community-based services to support primary care and individuals at high risk of admission.

We know that more people are reporting issues related to mental health and recognise the importance of interventions that provide support as early as possible to help address these issues and to prevent them from becoming more serious or debilitating. The same is true in relation to services that provide early intervention for people experiencing difficulties related to drug and alcohol use.

¹⁸ HSCP managed primary care services include CWIC, CTAC, Vaccinations, and Pharmacotherapy teams.

Specific activity required over the lifetime of the Strategic Plan will include:

- Delivery of priorities within the *Primary and Community Health Care Programme* that focus on further improving the accessibility of primary care services.
- Implementation of Phase 2 of the Single Point of Access to develop an admission prevention pathway that brings together a wide range of community-based services to support primary care and individuals at high risk of admission.
- Ongoing development of the Mental Health Single Point of Access model to improve access to mental health services 'at the front door'.
- Continued investment in Mental Health services providing early intervention – including the CWIC Mental Health and Distress Brief Intervention services.
- Continuing to develop and deliver substance use services that provide quick and easy access to information, advice, and support- including access to treatment where appropriate¹⁹.
- Continue working with the Lothian Sexual and Reproductive Health Service (LSRHS) to develop and deliver a comprehensive range of services that support sexual and reproductive health including women's health, ensuring these are easy to access and available in a timely manner.

¹⁹ Including through ongoing delivery of the national Medication Assisted Treatment (MAT) Standards.



2.3 Responding to the increase in people living with multiple long-term conditions.

The number of the people in East Lothian living with one or more long-term condition²⁰ continues to increase. National figures and projections on the proportion of the population living with multiple long-term conditions (MLTCs), also known as multimorbidity, is of particular concern and is considered to be one of the most significant challenges facing health and social care services now and in the future. In general, the prevalence of MLTCs increases as people get older, but also tends to increase with higher levels of deprivation.

Planning and delivery of healthcare services that meet the needs of people with long-term conditions, including support with self-management, needs to be a key delivery priority for the IJB.

Specific activity required over the lifetime of the Strategic Plan will include:

- The identification and delivery of priorities related to the management of long-term conditions (as part of the development of the *Primary and Community Health Care Programme*).
- These priorities should include multi-disciplinary approaches; early intervention to prevent or slow down the progression of conditions; and activity to support self-management.

²⁰ 'Long term conditions' are defined as those that persist over an extended period and may require lifelong management – for example, diabetes, arthritis, heart disease, and respiratory conditions such as COPD.



2.4 Developing a multi-disciplinary approach to the management of frailty.

The growth in the older population will be of particular significance as this demographic group has the highest use of health and social care services. As the older population increases, so will number of people living with one or more long term health condition and / or with challenges related to ageing, including frailty.

Falls continue to be the most common cause of emergency hospital admission for adults in Scotland. Falls put pressure on hospital beds and often lead to people requiring new or additional social care and rehabilitation services. Falls can result in reduced confidence and increased frailty for older people, significantly reducing their health, wellbeing, and independence.

Specific activity required over the lifetime of the Strategic Plan will include:

- Development and delivery of *East Lothian Frailty Programme* to implement a multi-disciplinary approach to the management of frailty across primary and community care services in line with Health Improvement Scotland (HIS) Frailty Standards.
- Linking in with other Lothian IJBs and NHS Lothian as part of pan Lothian work on frailty.
- Further development of the local approach to the prevention and management of falls in East Lothian, including involvement in the pan Lothian multidisciplinary group delivering the *Lothian Falls Framework*.
- Creation of an early intervention Vestibular Pathway targeting those at risk of falls as a result of vestibular dysfunction.



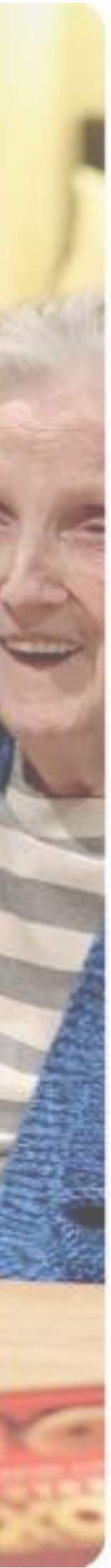
2.5 Improving health and wellbeing from an early age.

Prevention and early intervention from pregnancy, through to early years, and on into childhood and adolescence is important in terms of improving overall population health, leading to better health outcomes throughout adulthood and reducing the need for health and social care support.

Although children's social work services are not delegated to the IJB in East Lothian, there are a number of HSCP healthcare services provided to children and families (including, for example, primary care services; health visiting; and school nursing). HSCP services also work with parents and other adults within families, so are part of the multi-disciplinary approach to supporting the whole family.

Specific activity required over the lifetime of the Strategic Plan will include:

- Continuing to strengthen partnership working through active involvement in the East Lothian Children's Strategic Partnership to deliver the priorities identified in the *Children's Services Plan*.
- Ongoing development of HSCP teams involvement in multi-disciplinary working across services and organisations to identify and respond to needs within families.
- Involvement the development of 'whole family support services' to provide families with effective, early help.
- Working with the Lothian Sexual and Reproductive Health Service (LSRHS) to deliver accessible services that meet the needs of young people living in East Lothian.



2.6 Supporting people living with dementia to remain active, socially connected, and supported in their local community.

Rates of dementia are expected to increase significantly over the next 25 years. The impact of a dementia diagnosis is wide ranging, not only for the person with dementia, but also for families and carers. The East Lothian Dementia Strategy outlines the IJB's commitment to ensuring that people living with dementia remain active, socially connected, and supported within their local communities.

Specific activity required over the lifetime of the Strategic Plan will include:

- Delivery of related priorities within the *East Lothian Dementia Strategy*- including expansion of Post Diagnostic Support (PDS), as well as broader services across the entire dementia care pathway.
- (Note- the IJB has an existing commitment to the delivery of these and other priorities within the East Lothian Dementia Strategy – the Strategy can be viewed in full [here](#).)

2.7 Supporting carers' health and wellbeing to enable them to continue in their caring role.

The number of people providing unpaid care will continue to grow as the population ages and the percentage of people living with a limiting health condition or disability increases. Unpaid carers play a crucial role, supporting people to live at home and often avoiding or reducing their need for support from formal social care services.

Providing support to carers is important in terms of promoting their health and wellbeing and enabling them to continue to in their caring role.

The need to ensure effective and sustained support for carers came out very strongly through our engagement process – the insights generated from this feedback have been shared with the Carers Programme Board and will help to shape ongoing work.

Specific activity required over the lifetime of the Strategic Plan will include:

- Delivery of priorities within the *East Lothian Carers Strategy* related to supporting carers' health and wellbeing to enable them to continue in their caring roles.
- (Note- the IJB has an existing commitment to the delivery of these and other priorities within the East Lothian Carers Strategy – the Strategy can be viewed in full [here](#).)



Strategic Objective 3: Reducing Health Inequalities

We will prioritise the delivery of services to improve health and social care outcomes for those most disadvantaged in our communities and will work with partners to address the factors that contribute to health inequalities.

Why is this a strategic objective for the IJB?

We know that there are health inequalities in East Lothian....

- Evidence shows that people living in parts of East Lothian with higher levels of deprivation and/or with other disadvantageous living circumstances, have significantly poorer health outcomes.
- There are a range of socio-economic and other factors, often described as the 'wider determinants of health', that impact on health outcomes – these include, poverty, education, housing, employment, and access to services. It is suggested that as much as 80% of what effects health is out with the health and social care system.²¹

The IJB must ensure that the services it is responsible for contribute to improved outcomes for all, and that it contributes to a whole system approach to addressing health inequalities....

- The IJB has responsibility to ensure that health and social care services delegated to it are resourced, planned, and delivered in a way that ensures they are accessible to everyone.
- Importantly, a number of services delivered by the HSCP meet the specific needs of the most disadvantaged groups in our communities- for example, Substance Use Services; Justice Social Work; Adult Protection; and Learning Disability Services.
- The IJB needs to ensure that these key services continue to be prioritised and adequately resourced in order to keep people safe; to prevent harm; and to reduce disadvantage.
- Many of the services that directly impact on socio-economic outcomes do not fall within the IJB remit. However, the IJB has a role to play in the whole system approach needed to address health inequalities.

Health inequalities need to be addressed by working with partners as part of a 'whole system approach'....

- Because of the range of contributory factors, health inequalities need to be addressed by community planning partners working collaboratively, both strategically and operationally.

²¹ Scotland's Population Health Framework 2025-35.

- The Scottish Government Population Health Framework identifies that partners must work collaboratively ‘through a whole system approach’ to address the social and economic determinants of health and to support health places and communities.
- The Framework also identifies ‘ensuring equitable access to health and social care’ as a priority.

Reflecting views gathered through engagement activity....

Engagement feedback underlined the need to ensure that health and social care services meet the needs of people who are potentially disadvantaged for a range of reasons. Specific groups identified included rural communities, minority ethnic groups, disabled people, and carers. People also spoke about ‘targeted support for vulnerable groups’ and the need for a proactive approach to engaging vulnerable groups in services.



Accessing health and social care services was reported as often being more difficult for people living in more rural areas and small towns, largely due to more limited public transport provision. As a result, people often need to rely on private transport to attend appointments. This was identified as a particular issue for older people who no longer drive, and for low-income households.

People also spoke about the wider factors influencing health and wellbeing. Specific reference was made to housing, including the impact of poor housing on health and the need to provide housing options that meet a range of different needs, including appropriate and accessible housing for people as they age and their needs change.

Ensuring that the voices of people with lived experience are heard and used to shape service provision was identified as a key priority. It was noted that this involvement can help to reduce barriers to engagement with services, for example by promoting the adoption of trauma-informed approaches.

Feedback emphasised the need for services to adopt person-centred, trauma-informed approaches. Stakeholders also highlighted the importance of ensuring cultural appropriateness across all aspects of service provision, including the need for practitioners to demonstrate cultural humility²² when working with individuals and communities.

Again, this stakeholder feedback has informed and strengthened the strategic priorities outlined below. Some of the more detailed feedback will be important in guiding the next phase of delivery

²² Cultural humility refers to approaches that respect people’s cultural background, with an openness to learn and reflect what is important to them culturally.

planning. Feedback related to services outwith the IJB's direct remit – such as housing, education, financial inclusion, and access to leisure- has been fed into the Community Planning process. ²³

²³ As detailed in the Engagement Summary Report (add link), feedback gathered through this and other engagement activity has been added to a newly established, searchable database that will provide an invaluable reference resource to inform ongoing service delivery and development.

Strategic delivery priorities- what do we need to prioritise to deliver this strategic objective?

Focusing on the strategic delivery priorities below will help us to achieve this strategic objective. Further details, including timescales and targets, will be included in Annual Delivery Plans developed for each year of the Strategic Plan. In addition, there are a number of strategies / programmes already in place, or planned for development, that will provide direction (these are highlighted in ***bold italics*** below).

As well as the priorities set out below, the operational delivery of HSCP services will continue to contribute to achieving this Strategic Objective through existing activities and approaches that focus on achieving better outcomes for all service users.

3.1 Working with partners to support a whole system approach to tackling health inequalities.

As noted above, health inequalities are the result of a wide range of socio-economic factors collectively known as ‘social determinants of health’. Many of these factors are influenced by services that sit outside the direct responsibility of the IJB – such as education, housing, welfare, planning, sport and leisure, and employability services. However, because addressing health inequalities requires a whole system approach, it is essential that we work closely with partners at both strategic and operational levels to tackle the underlying issues that contribute to poorer health outcomes.

Specific activity required over the lifetime of the Strategic Plan will include:

- Developing IJB / HSCP participation in Community Planning and other Strategic Partnerships to develop a whole system, collaborative response to the issues that negatively impact on health outcomes (including through involvement in the development and delivery of the ***East Lothian Partnership’s Local Outcome Improvement Plan***).
- Working with partners through the Housing, Health, and Social Care Strategy Group to drive collaborative working in relation to the ***Housing Contribution Statement***.
- Working with the public health East Lothian Partnership and Place Team to further develop our understanding of population health data to help inform service development and prioritise the use of resources (including through the ongoing development Strategic Needs Assessment work).

3.2 Delivering services that contribute to reducing inequality.

We have a direct responsibility to ensure that the health and social care services we deliver are appropriate and sensitive and that they have effective arrangements in place to ensure that the most vulnerable and potentially excluded groups in our communities are able to fully benefit from them.

Specific activity required over the lifetime of the Strategic Plan includes:

- Carrying out robust Integrated Impact Assessments (IIAs) to identify potential adverse impacts of service changes or developments on people with protected characteristics or those potentially disadvantaged due to other factors. This should include considering barriers to access related to where people live within East Lothian and the transport limitations they may experience.
- Delivering the equalities outcomes detailed in the *East Lothian IJB's Equalities Outcomes for 2025-29* and reporting on progress through publication of annual Equality Mainstreaming Report.
- Continuing to develop service models and approaches that increase the accessibility of services for the whole population (see 2.2 above).
- Working with the Lothian Sexual and Reproductive Health Service (LSRHS) to ensure that service developments meet the needs of people who may experience barriers to access, including younger people, LGBTQ+ people, and others facing disadvantage.
- Continuing to strengthen partnership working at an operational level, working with colleagues from across organisations to develop and deliver collaborative approaches to identifying and responding to individual need.
- Ongoing development of HSCP teams involvement in multi-disciplinary working across services and organisations to deliver 'whole family support', providing families with effective, early help.
- Ongoing activity, including staff training and development to ensure that our services are Trauma Informed.²⁴

²⁴ Trauma Informed services 'recognise where people are affected by trauma and adversity, and that respond in ways that prevent further harm, support recovery, address inequalities and improve life chances' - more information can be found [here](#).



3.3 Prioritising service delivery at the level needed to keep people safe and to reduce the risk of harm.

As noted above, continuing to ensure that key frontline services can be delivered at the level needed to keep people safe and reduce the risk of harm must be an overarching priority for the IJB. This includes the provision of statutory social work functions which are crucial in meeting the needs of some of the most vulnerable and disadvantaged groups in our communities.

Specific activity required over the lifetime of the Strategic Plan will include:

- Ongoing monitoring and oversight to ensure that service provision can effectively meet demand.
- Continued development of services to keep people safe and reduce harm, including in relation to prevention and early intervention approaches (see Strategic Objective 2 above).
- Strengthening of collaborative and multidisciplinary working to identify and address individual needs.

5. Delivering the IJB Strategic Plan

The activity required to deliver the IJB Strategic Plan objectives is detailed in an **Annual Delivery Plan (ADP)**. The ADP is reviewed and updated every 6 months, allowing revisions to be made in response to local or national developments (for example, changes to national strategy or the introduction of new legislation). This review process also ensures alignment with the IJB's budget position, so that planned activity reflects available resources.

Activity outlined in the ADP is delivered by HSCP services and reflected within individual Service Plans which are reviewed every 6 months. Where activity is more complex or spans multiple service areas, it is planned and managed through a Change / Transformation Programme overseen by one of the IJB's Programme Boards.

Performance indicators relating to the delivery of the Strategic Plan are included in the **East Lothian HSCP Performance Framework**. Progress is reported every 6 months through a mid-year on delivery of the ADP and a year-end Annual Performance Report covering the full financial year.

The Diagram below illustrates the relationship between these elements.



IJB Strategic Plan – Approach and Delivery

East Lothian IJB Strategic Plan:

- Provides the framework for IJB decision making, including in relation to the use of financial and other resources.
- Ensures that HSCP services are clear about the IJB's priorities and are working towards these (and that individual Service Plans are aligned).
- Communicates the IJB's priorities to its partners and other stakeholders.



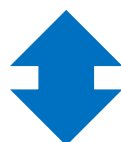
Annual Delivery Plan:

- Provides details of planned activity in relation to delivery of IJB Strategic Plan objectives / priorities for the current year.
- Reviewed every 6 months and updated to reflect new developments or changes to the local or national context (e.g., legislative / changes to national strategy) and to align with financial position.
- May also be reviewed and updated in response to consultation / engagement feedback.
- Actions then incorporated in Transformation / Change Programmes; Service Plans; other Strategies / Actions Plans (see below).



Transformation / Change Programmes:

- Programmes focused on key areas of development, transformation, or change.
- Overseen by individual Programme Boards.



HSCP Service Plans:

- Identify service level activity needed in relation to the Annual Delivery Plan (alongside wider Service priorities).



Other Strategies / Action Plans:

- Examples include the Carers, Dementia, Independent Advocacy, and Commissioning Strategies.

6. Appendices

Appendix 1- Strategic Plan Development- Supporting Documents

The Supporting Documents listed below (links to be added once documents are complete) have been produced as part of the development of the East Lothian IJB Strategic Plan for 2025-2030.

- [East Lothian Joint Strategic Needs Assessment \(2025\)](#)
- [Development of the East Lothian IJB Strategic Plan- Consultation and Engagement Report](#)
- [East Lothian IJB Strategic Plan - Integrated Impact Assessment](#)

Appendix 2 – Locality Planning

The Public Bodies Act requires that each Integration Authority area is split into at least two localities for the purposes of strategic planning and commissioning. However, the geographical nature of East Lothian and the distribution of the East Lothian population make this requirement challenging to implement in any effective or meaningful way.

A broad split between the East and West of the county has been adopted previously. Whilst this provided two population groups large enough to provide planning data, these areas- made up of a range of towns, semi-rural and rural areas- did not reflect natural communities and provided ineffective as units for planning and commissioning.

In East Lothian, we have found it more effective to work with local areas through involvement in Local Area Partnerships. There are 6 such partnerships in East Lothian, established through the Community Planning Partnership. Local Area Partnerships have set up Health and Wellbeing Sub-Groups in most areas, which provide an effective mechanism for engagement and discussion on local needs and service provision.

We remain committed to strengthening collaboration with Local Area Partnerships, including further developing their engagement in strategic planning through involvement in the Strategic Planning Group.

Appendix 3 – Functions Delegated to East Lothian IJB

This Strategic Plan does not cover children’s services, following a decision in January 2019 to remove children’s wellbeing services from the East Lothian IJB responsibilities.

NHS Lothian services delegated to East Lothian IJB

- Accident and Emergency and Combined Assessment *
- General Medicine *
- Geriatric Medicine *
- Rehabilitation Medicine *
- Respiratory Medicine *
- Palliative Care *
- Community Hospitals (East Lothian Community Hospital)
- Mental health inpatient services ³
- Community nursing (inc. children’s community health services- district nursing, health visiting and school nursing)
- Community mental health services
- Community learning disability services
- Substance Misuse Services
- Allied Health Professionals
- Primary Care- General Medical Services, General
- Dental Services, General Ophthalmic services and
- Community Pharmacy
- Lothian Unscheduled Care Service ¹
- Public Dental Service ²
- Palliative care provided out with a hospital
- Psychology services ²
- Kidney dialysis services provided out with a hospital
- Community Complex Care
- Sexual Health⁴

* East Lothian works with NHS Lothian, Midlothian, West Lothian, and the City of Edinburgh to progress the Lothian Strategic Development Framework.

1- Management of unscheduled care service transferred to NHS Lothian, which manages on behalf of all 4 the Lothian IJBs.

2- West Lothian HSCP hosts clinical psychology, the public dental service, podiatry and orthotics on behalf of all 4 Lothian IJBs.

3- Operational management of mental health inpatient services transferred to NHS Lothian.

4- Most sexual health services are delivered in primary care. Specialist sexual and reproductive health services in Lothian are hosted by East Lothian HSCP on behalf of the 4 IJBs.

East Lothian Council services delegated to East Lothian IJB

- Social work services and support for adults including for older people and in relation to physical disabilities and learning disabilities.
- Services/supports for adults with physical disabilities
- Services/supports for adults with learning disabilities
- Day services
- Mental health services
- Criminal Justice Social Work
- Drug and alcohol services
- Adult protection and domestic abuse
- Carers support services
- Community care assessment teams
- Care Home Services
- Adult Placement Services
- Housing support services: aids and adaptations
- Local area coordination
- Breaks from caring (respite)
- Occupational therapy services
- Reablement services
- Telecare

Appendix 4 - National Strategies, Frameworks, and Legislation

The three frameworks setting the national strategic context for health and social care development and delivery are detailed above – these are:

- Health and Social Care Service Renewal Framework (2025-2035)
- NHS Scotland Operational Improvement Plan (2025-26)
- Scotland’s Population Health Framework (2025-2035)

In addition, there are a number of other strategies and frameworks that are also significant in the development and delivery of health and social care functions delegated to IJBs.

These include:

- Ageing and Frailty Standards
- Carers (Scotland) Act 2016
- Dementia Strategy
- Digital and Health Care Strategy
- Framework for Community Health and Social Care Integrated Services
- Health and Social Care Data Strategy
- Health and Social Care National Workforce Strategy
- Housing (Scotland) Act 2021
- Learning Disabilities, Autism, and Neurodivergence Bill *
- Mental Health and Wellbeing Strategy
- National Care Service Bill *
- National Health and Wellbeing Outcomes Framework
- National Mental Health Strategy
- Palliative Care Strategy: Palliative Care Matters for All
- Preventative and Proactive Care Programme
- Public Bodies (Joint Working) (Scotland) Act 2014
- Physical Activity for Health Framework
- Statutory Guidance on Health and Social Care Integration

* Denotes Bills going through the legislative process.

Appendix 5 - Local Strategies and Frameworks

There are a range of local strategies and frameworks alongside the IJB Strategic Plan. These have been considered in the review of the Strategic Plan and will continue to be significant in the development and delivery of health and social care services in East Lothian.

- East Lothian Council Plan 2022-27 (East Lothian Council)
- East Lothian Local Development Plan 2028 (East Lothian Council)
- East Lothian Local Housing Strategy 2024-29 (East Lothian Council)
- East Lothian Local Transport Strategy 2018-24 (East Lothian Council)
- Lothian Strategic Development Framework (NHS Lothian)
- NHS Lothian Annual Delivery Plan (NHS Lothian)
- NHS Lothian Work Well Strategy (NHS Lothian)
- NHS Lothian Falls Strategy (NHS Lothian)
- East Lothian Poverty Plan 2024-28 (East Lothian Community Planning Partnership)
- The East Lothian Plan 2017-27 (East Lothian Community Planning Partnership)
- East Lothian Children's Services Plan 2023-26 (East Lothian Community Planning Partnership)
- Community Justice Local Outcome Improvement Plan

Appendix 6 - East Lothian IJB / HSCP Strategic and Plans

There are a number of additional IJB and HSCP strategies and plans in place that align with the IJB Strategic Plan, these include:

- East Lothian Carers Strategy 2023-2026
- East Lothian Dementia Strategy 2023-2028
- East Lothian HSCP Commissioning Strategy and Market Facilitation Statement 2025-2030
- East Lothian IJB Equality Outcomes 2025-2029
- East Lothian IJB Communications and Engagement Strategy 2026-2030
- East Lothian IJB Five Year Financial Plan
- East Lothian IJB Workforce Plan 2025-2028
- East Lothian Independent Advocacy Strategy 2024-2028

Appendix 7 - Glossary of Acronyms Used

ADP	Annual Delivery Plan
AHP	Allied Health Professional
ELHSCP	East Lothian Health and Social Care Partnership
ELP	East Lothian Partnership
ELRS	East Lothian Rehabilitation Service
GP	General Practitioner
HSCP	Health and Social Care Partnership
IIA	Integrated Impact Assessment
IJB	Integration Joint Board
JSNA	Joint Strategic Needs Assessment
LGBTQ+	Lesbian, Gay, Bisexual, Transgender and Queer – ‘+’ is included to recognise all non-cisgender identities
LHCS	Lothian Health and Care System
LOIP	Local Outcome Improvement Plan
LSDF	Lothian Strategic Development Framework
LSRHS	Lothian Sexual and Reproductive Health Service
MDT	Multi Disciplinary Team
MLTC	Multiple Long Term Condition
NHS	National Health Service
NHSL	National Health Service Lothian
NRS	National Records of Scotland
PDS	Post Diagnostic Support
POPS	Planning for Older People’s Services
SDS	Self Directed Support
SIMD	Scottish Index of Multiple Deprivation
SPG	Strategic Planning Group
SRF	Service Renewal Framework
TEC	Technology Enabled Care
USC	Unscheduled Care
VCEL	Volunteer Centre East Lothian

Accessibility

Versions of this strategy can be provided in Braille, large print, audiotape, or your own language.

For assistance please call: 01620 827827.

British Sign Language (BSL) users can contact us via www.contactscotland-bsl.org

**East Lothian Health Integration Joint Board
John Muir House, Brewery Park
Haddington**

T: 01875 824309

E: elhscp@eastlothian.gov.uk

W: www.eastlothian.gov.uk/elhscp

