North Ayrshire
Health and Social Care Partnership
Strategic Plan Summary 2015–2018

Developed with:

scottishcare
The voice of the independent care sector in Scotland

TSI North Ayrshire

North Ayrshire Council

Governing Statement for North Ayrshire

NHS Ayrshire & Arran
DIRECTOR’S STATEMENT

North Ayrshire Health and Social Care Partnership (the Partnership) has been formed to integrate health and social care services into a single structure, in line with Scottish Government policy. The aim of this policy is to improve these services, and to make them seamless and more responsive to the people who use them.

As Director of the Partnership I am fully committed to working with all stakeholders to provide a range of local services that meet present and future needs. We have taken our first step towards this goal by developing our first strategic plan, which I am delighted to share with you. It sets out a vision for health and social care in North Ayrshire, and it identifies the principles and values that will enable us to deliver that vision. It also describes some priorities for action in our first year. The plan was created through consultation with staff, our partners, service users and the public.

I recognise that in some areas we are already providing innovative services that are highly valued by service users and carers and I know we will continue to build on this.

The formation of the Partnership provides us all with a unique opportunity to design and deliver better, more brought together services for local people. However, we cannot achieve this potential on our own and I am committed to working with the Council, the NHS, the police, Housing, Economic Regeneration, Education and community leaders and groups. I am confident that we can work together to shape a future of which we can all be proud.

My commitment on behalf of the Partnership is that I will report to you at least once a year on the progress we have made, and the impact this is making and to get your views on how we can improve services in future.

Iona Colvin,
Director,
North Ayrshire Health and Social Care Partnership
2 April 2015
General approach

The Strategic Plan is required to take into account the current and future health and well-being needs of the population of North Ayrshire. It seeks to address the increasing health inequalities in North Ayrshire and will focus on improving the efficiency and quality of the services being provided. Individuals, families and communities are at the heart of the Plan and the Partnership is accountable to North Ayrshire Council, The Board of NHS Ayrshire & Arran and to Scottish Government Ministers for its implementation.

The Partnership will adopt a neighbourhood approach with clear arrangements as to how services that are brought together will operate in each area. We need to intervene earlier when someone requires health and social care support and ensure that prevention strategies take into account the needs and strengths of local communities.

In addition, the Plan also describes how children and adults will be protected from harm: if they need support, they will be given it at the earliest opportunity.

Challenges

North Ayrshire provides a number of opportunities for those who live and work here. However, we also face a number of significant challenges. North Ayrshire is one of the most deprived areas of Scotland. We have high levels of unemployment; significant numbers of people on low income and almost a third of our children live in poverty.

We know that the population of North Ayrshire is expected to fall significantly over the next 20 years, and we expect that there will be fewer people aged 65 and under, reducing the number of working age adults. We also expect that the number of people aged 65 to 74 will increase by over 20 per cent, while the number of people aged 75 or over will almost double.

Evidence indicates that the older people become the more long-term health problems they tend to have. Consequently, they are admitted to hospital more often and for longer periods. This is distressing both for them and for their families. We know that many of these admissions could be avoided if care and treatment were available at the right time in their own homes. We also know that we need to prevent avoidable admissions to hospital and rehabilitate more people, more quickly.

A number of increasing demands means that money is tighter than ever before. It is therefore crucial that we focus on early intervention, prevention and recovery if we are to work within the total annual Partnership budget of just under £200m. A full range of our services is provided in appendices 1-3.
The purpose of our Health and Social Care Partnership is that:

“All people who live in North Ayrshire are able to have a safe, healthy and active life”

This means that we will support each person of any age to live safely at home, or in a homely setting, where possible close to family, friends and the local community. We will work with the NHS acute services and the third and independent sectors to deliver high quality, safe and sustainable services that are seamless to the people who use them. We will support people to make their own life choices.

Values

Our values will provide a framework for the implementation of our vision and for the context in which we will work with you. Our values will be evident in the way we speak with you, and in how we behave. Our values are:

- Person-centred
- Respect
- Efficiency
- Care
- Inclusiveness
- Honesty
- Innovation
Service principles

Our values will be evident through our service principles. These principles will ensure that each service we deliver:

- Is brought together from the point of view of service users
- Takes account of the particular needs of individual service users
- Takes account of the particular characteristics and circumstances of individual service users
- Respects the rights of service users
- Respects the dignity of service users
- Takes account of the participation by service users in the community in which they live
- Protects and improves the safety of service users
- Improves the quality of the service
- Is planned and led locally in a way that engages with the community
- Best anticipates needs
- Helps to prevent needs arising
- Makes best use of the available facilities, people’s abilities and other resources
Stepping stones to change

We are aware that these changes won’t happen overnight. We aim to move away from a situation where specialist treatment is only provided by professionals in hospitals to a more community-focused approach, where individuals are experts in their own health and wellbeing. We envisage change happening over the three key stages outlined below. These stages may not necessarily be reached at the same time.

<table>
<thead>
<tr>
<th>Historical</th>
<th>Transitional</th>
<th>Future</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialist health care needs are dealt with by hospitals only</td>
<td>Community services are recognised as offering high quality, safe, effective care</td>
<td>Specialist support is provided in communities with access to hospital when people need it</td>
</tr>
<tr>
<td>Care provided is disjointed, with handover of individuals between services</td>
<td>Bringing community health and social care services together to offer seamless service</td>
<td>Health and social care services are brought together</td>
</tr>
<tr>
<td>The care delivered to meet acute needs is reactive</td>
<td>There is a strategy of proactive care and early intervention to meet ongoing needs</td>
<td>The emphasis is on a preventative approach, with ease of access to availability of information</td>
</tr>
<tr>
<td>Statutory Agencies are responsible for planning and delivery of services and prioritisation of resources</td>
<td>Health and social care and the third and independent sectors operate as partners in the planning and delivery of services and prioritisation of resources</td>
<td>Communities plan, drive and deliver change and prioritise resources</td>
</tr>
<tr>
<td>Self-care is infrequent</td>
<td>Self-care is encouraged, supported and facilitated by Health and Social Care and the third and independent sector</td>
<td>Self-care is encouraged, supported and facilitated by communities</td>
</tr>
<tr>
<td>Individuals are passive recipients of care</td>
<td>The individual is engaged in decisions about their care</td>
<td>Individuals determine how their needs are best met supported with professional advice and support</td>
</tr>
<tr>
<td>Carers are largely undervalued</td>
<td>Carers are valued and involved</td>
<td>The value of carers is recognised by local communities, and proactive help is given to support their role</td>
</tr>
<tr>
<td>Care and support is risk averse</td>
<td>Personalised care and support packages are developed with the goals of the individual in mind</td>
<td>Development of a new approach to managing risk, which ensures the delivery of safe, effective and innovative services</td>
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Our strategic priorities

Having analysed where we are and where we want to go, we now propose the following five strategic priorities for action. These are:

- Tackling inequalities
- Engaging communities
- Bringing services together
- Prevention and early intervention
- Improving mental health and wellbeing

These are long-term priorities and we recognise that we will need to have long-term goals as well as short-term actions to ensure we can deliver our vision.
Priority 1 – tackling inequalities

We aim to reduce poverty and the gap between the richest and the poorest by supporting increased economic participation, improved social cohesion and the building of stronger communities.

We will work to reduce the impact of health inequalities on you and your family
• We will engage with local communities to understand how we can make our health and social care services responsive to all
• We will ensure we make the changes necessary to meet the requirements of our Inequalities Strategy
• We will ensure our approaches to engaging communities reflect equality and diversity within neighbourhoods
• We will work to ensure services are responsive and sensitive to people who are covered by equalities legislation: protected characteristics are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation.

We will work with partners to help people who use our services to identify and deal with their financial difficulties
• We will offer advice to all people who use our services to ensure they are in receipt of their full entitlement of benefits

We will work with partners to offer financial guidance to people who use our services

We will maximise the potential for you to work
• We will embrace opportunities created by the North Ayrshire Economic Development & Regeneration Strategy
• We will support people to gain skills and confidence in readiness for work
• We will set targets for securing employment opportunities for our young people who have been ‘Looked After’

We will provide support to help keep you safe from harm
• We will work to ensure the most vulnerable members of our communities are safe and protected and receive the support they need
• We will ensure that the Partnership is ready to undertake the Named Person responsibilities of the Children and Young People (Scotland) Act 2014
• Criminal Justice and Youth Justice services will work together to reduce re-offending in our communities
Priority 2 – engaging communities

We know that people in communities have a critical role to play in supporting each other and in designing services to meet local needs.

We will work with local communities
- We will improve links with local communities in Kilwinning, Irvine, North Coast, Three Towns, Garnock Valley and Arran
- We will listen to local people, service users and carers to understand the needs of geographical communities as well as of communities of interest

We will improve how we involve and engage with local communities
- We will develop innovative ways of listening to local people
- We will improve the ways we communicate and engage with service users, carers and local communities
- We will consult with parents and young people on the results of the Improving Children’s Outcomes survey
- We will find new ways to engage with people that we have not successfully involved before
- We will create a contact point for local communities to directly communicate with the Partnership and services

We will build on the strengths of local communities
- We will jointly identify the facilities, resources and networks available
- We will work together to resolve gaps in these facilities, resources and networks
- We will work together to support communities to be more active and keep well
Priority 3 – bringing services together

The Partnership provides a significant opportunity to integrate services and to enhance the experience of the people and the carers who use these services.

We will work together to provide better services
• We will bring together health and social care teams to ensure seamless services, including those of the third and independent sectors
• We will work together to ensure that those who are at risk of harm receive the shared response they need to keep them safe
• We will work with acute hospital services to create emergency care pathways that are effective, safe and good value for money
• We will introduce a named person who will work with carers and service users to co-ordinate care

We will develop services around local communities
• We will develop a single point of contact to improve access to health and social care services

We will work more closely with GPs and primary care
• We will work with GPs/NHS 24 and Out of Hours services to deliver proactive local services around practices
• We will develop a greater role for pharmacists, through Prescription for Excellence, in supporting those who are successfully self-managing

We will improve the quality of the services we provide
• We will invest in joint staff training across the statutory, third and independent sectors to improve service delivery, joint working and personal choice for service users
• We will work with our staff, including those of the third and independent sectors, local communities, service users and carers to develop clear and visible service standards
• We will improve the way information is shared
Dealing with problems at an early stage can increase the chances of positive outcomes for people, reduce costs and prevent issues from becoming much more serious and difficult to address.

**We will promote good health and wellbeing**
- We will work together to promote healthy and active lifestyles
- We will provide access to information about health and wellbeing
- We will improve signposting to appropriate services and facilities

**We will identify target groups through research and screening**
- We will use the Improving Children’s Outcomes surveys to identify local needs, and will design services accordingly
- We will work to prevent the onset of chronic disease by ensuring early diagnosis and proactive treatment

**We will support individual needs**
- We will ensure the right level of support is available to meet individual needs, and so reduce avoidable emergency admissions to hospital

**We will support people who care for others**
- We will listen to you and support you to keep you healthy
- We will provide opportunities for you to have a break if you need one
**Priority 5 – improving mental health and wellbeing**

Good mental health impacts positively on individuals, families and communities.

**We will improve the services available to support mental health and wellbeing**

- We will deliver high quality services that focus on recovery and that support improved mental health and wellbeing for individuals, families, carers and local communities.
- We will work with our partners to develop responses that support people to stay mentally well.
- We will develop clear diagnostic processes and greater support and service provision for people with autism spectrum disorders and their families.
- We will work together to improve support, care and treatment for people living with dementia, their families and carers.
- We will work alongside other partners to reduce the harmful effects associated with alcohol and drug use.

**We will follow the mental health strategy for Scotland**

- We are the lead partnership for mental health, learning disability and addictions services across Ayrshire and Arran, and in this role we will be responsible for delivering government targets, standards and commitments.
- As part of our strategy, we will:
  - work more effectively with families and carers
  - increase the support for self-management and self-help approaches
  - extend and develop existing initiatives to tackle discrimination
  - focus on the rights of people with mental illness
  - develop our approach to include personal, social and clinical outcomes
  - ensure that we use new technology effectively as a mechanism for providing information and delivering evidence based services

**We will develop new services to meet local needs**

- We will build a new Mental Health and Community Hospital in Irvine which will provide modern, purpose-built facilities to meet local needs.
- We will work with primary care professionals to develop a substitute prescribing strategy as part of a range of recovery focussed services for people with addictions.
- We will work with education and paediatric services to improve Child and Adolescent Mental Health Services (CAMHS).
- We will develop a range of supported accommodation options.
In addition to statutory requirements of the Act, North Ayrshire Council will be including the following services:

- Criminal justice social work services
- Children and families social work services

Appendices

Appendix 1 – Services to be included (North Ayrshire Council)

- Social work services for adults and older people
- Services and support for adults with physical disabilities and learning disabilities
- Mental health services
- Drug and alcohol services
- Adult protection and domestic abuse
- Carers’ support services
- Community care assessment teams
- Support services
- Care home services
- Adult placement services
- Health improvement services
- Housing support services, aids and adaptions
- Day services
- Local area co-ordination
- Respite provision
- Occupational therapy services
- Re-ablement services, equipment and telecare
Appendix 2 – Services to be included (NHS Ayrshire & Arran)

- Palliative care
- Arran and Lady Margaret Community Hospitals and Continuing care wards at Ayrshire Central Hospital
- All mental health inpatients services (including Addictions); Psychiatric medical services; Eating disorders; Forensic; Crisis resolution and home treatment team; Liaison (Adult, Elderly learning disabilities and Alcohol, Advanced nurse practitioner services)
- Community nursing (district nursing)
- Community mental health; Addictions and Learning disabilities (Community mental health teams; Primary care mental health teams; Elderly; Community learning disability teams; Addictions community teams)
- Allied health professionals
- Public dental services
- Primary care (General medical services; General dental services; General ophthalmic services; Community pharmacy)
- NHS Ayrshire Doctors on Call (ADOC)
- Older people
- Palliative care provided out with a hospital
- Learning disabilities assessment and treatment services
- Psychology services
- Community continence team
- Kidney dialysis service provided out with a hospital
- Services provided by health professionals that aim to promote public health
- Community children’s service (School nursing; Health visiting; Looked After children’s service) [non-medical]
- Community infant feeding service
- Child and adolescent mental health services
- Child health administration team
- Area-wide evening service (Nursing)
- Prison service and Policy custody services
- Family nurse partnership
- Immunisation service
- Telehealth, United4Health and Smartcare European programme and workstreams
Appendix 3 – Lead partnership services

North Ayrshire Health and Social Care Partnership will lead the following services on behalf of the East and South Ayrshire Health and Social Care Partnerships:

Health
• All Mental health inpatients services (including Addictions); Psychiatric medical services; Eating disorders; Forensic; Crisis resolution and home treatment team; Liaison (Adult; Elderly learning disabilities and Alcohol; Advanced nurse practitioner services)
• Learning disabilities assessment and treatment services
• Child and adolescent mental health services
• Psychology services
• Community infant feeding service
• Family nurse partnership
• Child health administration team
• Immunisation team

South Ayrshire Health and Social Care Partnership will lead the following services on behalf of the East and North Ayrshire Health and Social Care Partnerships:

Health
• Allied health professionals
• Community continence team
• Telehealth, United4Health and Smartcare European programme and workstreams

East Ayrshire Health and Social Care Partnership will lead the following services on behalf of the North and South Ayrshire Health and Social Care Partnerships:

Health
• Primary care (General medical Services; General dental services; General ophthalmic services; Community pharmacy)
• Public dental services
• NHS Ayrshire Doctors on Call (ADOC)
• Area-wide evening service (Nursing)
• Prison service and Policy custody services

Council
• Out-of-hours social work services
This is our Strategic Plan Summary. We have also created a full Strategic Plan. You can request further copies of the strategic plan or summary plan in one of the following ways:

write to: Annie Weir, North Ayrshire Health and Social Care Partnership, Cunningham House, Irvine, KA12 8EE
email: annieweir@north-ayrshire.gov.uk
Accessibility
This document is available in other formats such as audio tape, CD, Braille and in large print. It can also be made available in other languages on request.

Further Information
Comments or questions about this strategy, including requests for support information or documentation, should be made to:

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