

Renfrewshire Health and Social Care Partnership (HSCP)

Local Area Committee Update

1.0 Purpose

The purpose of this report is to provide a Health and Social Care Partnership (HSCP) update to the Local Area Committees. There are three sections to this update: Renfrewshire HSCP's vision and aims; Performance Management and a few examples of work that we are doing in the community.

2.0 Health and Social Care – Working Together

2.1 The Public Bodies (Joint Working) (Scotland) Act 2014 is a new law which says that health and social care services must work together to improve people's health and wellbeing. On 1 April 2016 a new organisation was formed – Renfrewshire Health and Social Care Partnership (HSCP).

2.2 Our Vision:

We want Renfrewshire to be a caring place where people are treated as individuals and are supported to live well.

Renfrewshire HSCP is responsible for all adult social work services and all health services within the community. This includes home care, health visitors, district nurses, residential care and day services. In Renfrewshire, we have 29 GP practices, 35 general dental practitioners, 44 community pharmacists and 19 community optometrists.

2.3 The aim of the Partnership is to improve health and to deliver effective health and social care services. This is what we want for the people of Renfrewshire:

- Services in the community to be accessible to all.
- Services working in a joined up way.
- People to have more choice and control.
- Focus on stopping problems before they happen (prevention) and helping people quickly when they first get ill or need support.
- Provide safe, high quality care and protect vulnerable adults and children.
- Move care from large institutions to home and community based services.

- Effective support for carers.
- Make the best use of the money and staff available to us.

2.4 Our first Strategic Plan will be presented to the Integration Joint Board on 25 November. Following its approval, the easy read version will be widely circulated.

3.0 Performance Management

3.1 The Health and Social Care Partnership has developed a performance framework to ensure we operate with informed, effective and efficient management of services and to provide a coherent picture of the outcomes achieved by the Partnership.

Our performance scorecard is structured on the nine National Outcomes and includes measures from the Core Indicators' set, incorporating some high level outcome indicators drawn from the annual Health and Care Experience Survey.

Outcome 1:	People are able to look after and improve their own health and wellbeing and live in good health for longer
Outcome 2:	People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community
Outcome 3:	People who use health and social care services have positive experiences of those services, and have their dignity respected
Outcome 4:	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services
Outcome 5:	Health and social care services contribute to reducing health inequalities
Outcome 6:	People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing
Outcome 7:	People using health and social care services are safe from harm
Outcome 8:	People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide
Outcome 9:	Resources are used effectively and efficiently in the provision of health and social care services

3.2 How are we doing?

Significant improvements have been reported on health issues with regard to increased rates of **physical activity**, and a reduction in levels of **smoking** and adult **obesity**. Progress has been made in reducing the number of hospital bed days lost due to **delays in discharge**. In Scotland, Renfrewshire had the third lowest delayed discharge bed rate per 1,000 population by local authority of residence.



Renfrewshire still has challenges around **addictions** related to alcohol and drugs. Perception of drug dealing in local areas has deteriorated and both alcohol-related and drug-related hospital stays are above the baseline and targets originally set by the Community Planning Partnership.

Although good progress has been made with reducing alcohol related hospital stays, we have not yet achieved our target. At June 2016 the rate was 9.3 per 100,000 against an 8.9 target. While this is the lowest rate in over three years, Renfrewshire is still 46% higher than the Scottish average for alcohol related hospital stays.

Currently 99.6% of people are seen within three weeks from referral to treatment for alcohol and drug services.

Brighter Renfrewshire Alcohol Awareness Week (BRAW) was implemented over the summer. Messages focused on getting the most out of summer - being safe and having fun without excessive use of alcohol. The recent changes in drink driving legislation were also included as a key BRAW message. BRAW aims to raise awareness about alcohol by:

- Promoting sensible drinking messages
- Encouraging people to seek support
- Changing attitudes to alcohol
- Involving communities in tackling alcohol issues
- Preventing or reducing harm caused by alcohol
- Celebrating and supporting recovery from addiction

Renfrewshire's Alcohol and Drug Partnership (ADP) allocated funding to recruit a graduate intern as part of INVEST Renfrewshire's graduate recruitment programme. The intern was recruited to support community engagement around alcohol licensing and enhance community involvement in the licensing process. Since recruitment, the Intern has created an online community alcohol survey which has generated around 150 responses to date. The Intern has also recruited a number of volunteers who will conduct the alcohol survey in community venues including GP surgeries, supermarkets and community centres. The information gathered will be used to

inform future HSCP and ADP responses to alcohol licensing, including future overprovision statements and the Joint Alcohol Policy Statement which will be published in the summer of 2017. If you would like to complete the online survey, please go to - <http://www.renfrewshireadp.co.uk/news-campaigns/alcohol-licensing.aspx> or contact Natasha Lappin if you would like a paper copy of the survey, further information or to get involved with the project.
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The recently published Health and Wellbeing Profile shows **life expectancy** in Renfrewshire at 75.3 years for males and 80.4 years for females. This is lower than the Scottish average of 76.6 years for males and similar to the Scottish female average of 80.8 years.

The percentage of people prescribed medication for **anxiety, depression or psychosis** in 2014/15 was 19%, higher than the Scottish average of 17%. The rate for psychiatric hospitalisations in 2011-2013 was 254, which was lower than the Scottish rate of 292. The **suicide rate** 2009-2013 was 16, which was similar to the Scottish rate of 15.

Some early years issues in relation to health remain challenging. The percentage of babies with a **low birth weight** and the number of children **exclusively breastfed** at 6-8 weeks both showed slight deterioration throughout 2015.



Low birth weight target: 6%. The rate at March 2016 was 7.3%.

Exclusive breastfeeding at 6-8 weeks target 21.4%. The rate at December 2015 was 20.8%.

From the Adult Health and Wellbeing Survey carried out in 2014, 92% of people in Renfrewshire indicated they have a positive perception of their **quality of life** against a target of 75%. This is an improvement on the baseline figure of 71% in 2011.

There was a substantial increase in the number of people in Renfrewshire participating in 30 minutes of moderate **physical activity** 5 or more times a week from 30.1% in 2011 to 53% in 2014. There was also a reduction in the percentage of adults who are **overweight or obese** from 55% in 2011 to 49% in 2014.

There has been a notable reduction in the number of adults who **smoke** from 24% in 2011 to 19% in 2014.

We hope to see further improvement with these indicators when the next Health and Wellbeing Survey is carried out in 2017.

4.0 What are we doing in the community?

During this last year the HSCP has developed and supported new developments to improve health. Some examples of the work in the community include:

4.1 Stop Smoking Shared Care Pharmacy Clinic:



We introduced a new way of offering support to anyone wishing to stop smoking. Ferguslie Park was selected to test the service as an area which has one of the highest smoking prevalence rates in Scotland (55%). The shared care model offers clients who attend the Lloyds Tannahill Pharmacy stop smoking scheme additional intensive support from a Community Smokefree Service advisor.

This model of delivering the Smokefree Service has resulted in better outcomes. Prior to introducing this model data showed that only 14 clients successfully quit for 4 weeks and 1 client for 12 weeks within the pharmacy direct service. In total 101 clients from Ferguslie quit smoking by 4 weeks and 65 clients by 12 weeks as a result of joint working between Pharmacy and Community Smoking Cessation Service. Evidence has shown that this service has been more accessible and attractive to clients living in more deprived areas. 96% of clients accessing this shared-care support were from SIMD 1. This model will be replicated in the Broomlands area of Paisley.

4.2 Eat Better Feel Better Cookery Course:

We have supported the National Eat Better Feel Better programme by training staff and volunteers from local agencies in Renfrewshire to deliver a cookery programme for the public. The programme is a six week practical cooking course and includes healthy cooking on a budget, food safety, understanding food labelling and the Eat Well plate. We have trained 39 staff and volunteers to deliver Eat Better Feel Better in community settings. To date 48 courses have been delivered, with 239 people attending. Over a third of attendees were from SIMD 1 and 2 areas. The programme is now self-sustaining via partner agencies with the HSCP providing support and training.

4.3 Healthy Weight and Physical Activity:

We have introduced two new programmes to promote healthy eating and physical activity; New Mum New You and Mini Active in Renfrewshire.

New Mum, New You is a post natal weight loss programme which runs for 10 weeks. The programme includes fun exercise sessions, nutrition, and health and well being activities to enable new mums to achieve their pre baby weight. Weekly sessions are run by trained coaches who support the women to achieve their individual goals. Twenty local mums have attended the programme.

Mini Active is a healthy lifestyle programme for all families living in Renfrewshire with children aged between 2-4 years. This programme runs once a week over an eight-week period and aims to promote healthy eating and activity habits from an early age, through fun play and workshops. At least one parent or carer must attend each session with their child. Ten children have attended the first programme.

If you would like more details on the content of this report, please contact Renfrewshire HSCP via –

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