

To: Renfrewshire Integration Joint Board

On: 24 June 2022

Report by: Head of Strategic Planning and Health Improvement

Heading: Strategic Plan 2022-25 – Delivering the strategic objectives

Direction Required to Health Board, Council or Both	Direction to:	
	1. No Direction Required	X
	2. NHS Greater Glasgow & Clyde	
	3. Renfrewshire Council	
	4. NHS Greater Glasgow & Clyde and Renfrewshire Council	

1. Summary

- 1.1. In March 2022 the Integration Joint Board (IJB) approved its Strategic Plan for 2022-25. This report provides further detail on how the strategic objectives set out within the Plan will be achieved in Year 1 (2022-23). The Appendix to this paper provides the identified owners for each strategic objective and the deliverables that have been agreed for achievement by March 2023.
- 1.2. The report also sets out next steps, which will be focused on the finalisation of supporting Year 1 action plans each Care Planning Group. These plans will set out a further level of detail, confirming actions to be taken by each Care Group in Year 1 of the Plan in alignment with the strategic objectives within the IJB's Strategic Plan. These actions will be linked to existing performance indicators where possible. Where necessary, additional measures will be identified to enable progress to be tracked and reported to the IJB through existing performance management processes.

2. Recommendations

It is recommended that the IJB:

- Approve the Strategic Delivery Plan for Year 1 of the Plan; and
- Note the next steps outlined regarding the development of supporting Year 1 Action Plans by each Care Planning Group to further assist the achievement of the strategic objectives set out within the Strategic Plan.

3. Background

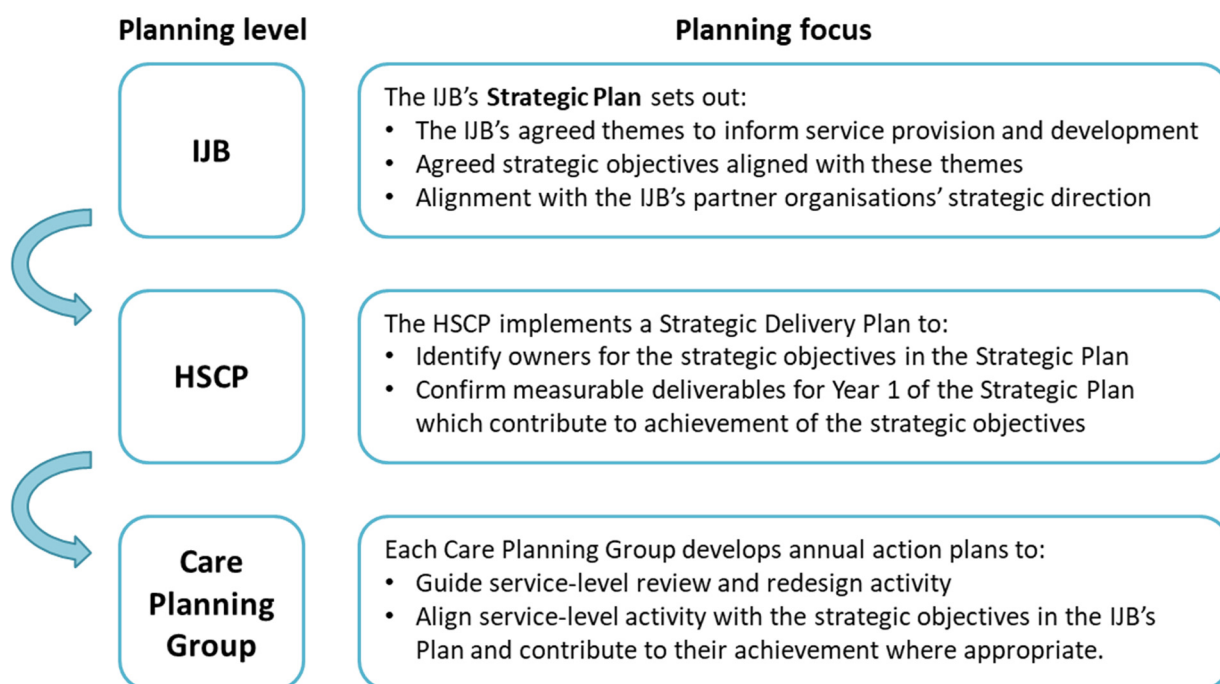
- 3.1. Renfrewshire's Integration Joint Board (IJB) is required by the Public Bodies (Joint Working) (Scotland) Act 2014 (the 'Act') to produce a Strategic Plan on how community health and social care functions delegated to it by

Renfrewshire Council and NHS Greater Glasgow and Clyde (NHSGGC) will be planned and delivered over the medium term (three years).

- 3.2. At the last IJB meeting in March 2022 the Strategic Plan (2022-25) was approved. A further recommendation to present a Strategic Delivery Plan, setting out deliverables for Year 1 of the Plan, was also agreed.

4. Delivering the Strategic Plan

- 4.1. The IJB's Strategic Plan for 2022-25 is structured around five key themes, each of which has a supporting set of strategic objectives identified to be delivered over the three-year lifetime of the Plan. These themes are further supported by an overview of the key enablers of the Plan.
- 4.2. Following the agreement at the IJB in March, set out above, further work has been undertaken to develop a set of deliverables which will contribute to the achievement of the Plan's objectives. Given the current levels of uncertainty regarding recovery from the pandemic and expected policy developments, for example with regards the development of a National Care Service, the focus of this work has been on Year 1 of the Plan up to March 2023.
- 4.3. This activity has focused around two strands; (i) the development of a Strategic Delivery Plan identifying deliverables in Year 1 of the Plan against each of the strategic objectives (where applicable); and (ii) the development of supporting Year 1 action plans by each of the Care Planning Groups which have been created to promote and monitor progress within each care group and represent the next tier of detailed planning undertaken. The visual provided below shows how these levels of planning support one another and further detail on the work being undertaken is also provided in the following sections.



Year 1 Strategic Delivery Plan

4.4. The HSCP has developed a first Strategic Delivery Plan for Year 1 of the Strategic Plan. The delivery plan is provided as Appendix 1 to this paper, and reflects:

- Each of the strategic objectives detailed within the Strategic Plan has been discussed with HSCP services and the partnership's Senior Management Team to identify and agree an appropriate owner at Head of Service level, or Lead Officer level where appropriate. Each objective also has an identified lead to regularly monitor progress.
- Subsequent work has also been undertaken to identify measurable deliverables for Year 1 against each of the strategic objectives. These represent a significant breadth of work to be delivered and will predominantly enable progress towards achievement of each objective, to be built on in Years 2 and 3.
- Where the Strategic Plan has included objectives relating to wider plans and strategies including, but not limited to, the Primary Care Improvement Plan, the Joint Unscheduled Care Commissioning Plan (and the reduction of delayed discharges), the Remobilisation Plan and the Social Renewal Plan, this has been identified. Specific targets are set and monitored within the governance arrangements for those plans. This will help avoid duplication whilst ensuring that linkages between the plans are managed effectively.
- Progress on achievement of the deliverables set out will be reported to the IJB through existing performance management arrangements and will be incorporated into the Annual Performance Report (APR) for 2022/23.

Role of Care Planning Groups

- 4.5. Renfrewshire HSCP carries out strategic planning for all services at the Strategic Planning Group (SPG). The SPG has statutory responsibility for Strategic Planning on behalf of the Integration Joint Board. Recognising that this group works at a high level and covers all care groups and services, it has been agreed that Care Planning Groups will support the SPG in carrying out its duties and to enable focus on the needs and services for those within 'care groups' supported by the HSCP.
- 4.6. The purpose of these Care Planning Groups is to facilitate and provide a forum for sharing information and consultation between service users, carers and services; and to oversee the development and implementation of the relevant commitments within the Strategic Plan at a service level.
- 4.7. Specifically, these groups will also oversee service review and redesign, which will be guided by the agreed strategic direction and commitments within the Strategic Plan. They will also link with other Care Planning Groups as necessary to take forward joint planning where appropriate, while supporting the implementation of relevant legislation and guidance.
- 4.8. In undertaking this role, Care Planning Groups were formed across services and with partners to support the development of the Strategic Plan, its themes

and objectives. These Groups, now permanently established, have over the last three months hosted sessions with service managers, key stakeholders, partners, and service users to define related actions required at a service level which guide service development and support delivery, where appropriate, of relevant objectives from the Strategic Plan. These actions are captured within Year 1 action plans which will also support progression of the Strategic Delivery Plan set out above.

5. Measuring the impact of our Strategic Plan

- 5.1. Throughout our Strategic Plan 2022-25, we have aligned our strategic objectives with the National Health and Wellbeing outcomes to ensure a clear link to national policy and priorities. The Strategic Delivery Plan and Care Group action plans will be used to guide the development and day-to-day management of our services, ensuring continued alignment with the Strategic Plan.
- 5.2. In achieving the actions and deliverables set out within the Strategic Delivery Plan and Care Group action plans, we will manage and monitor our performance through Performance Indicators (PIs) to ensure we measure progression and completion of the activities committed to. These will be embedded within the IJB's existing performance management arrangements. Performance dashboards will also be implemented to support each Care Planning Group monitor progress using relevant indicators from the IJB Performance Scorecard.
- 5.3. For each subsequent year of the Plan, the process outlined in section 4 above will be refreshed to identify deliverables and outcomes that are aligned to national, NHSGGC and local priorities and reflect any policy or statutory changes required. Where appropriate, we will set further targets and milestones to monitor the impact of our performance in an effective and transparent way.

Implications of the Report

1. **Financial** – No implications from this report. However, the IJB's Strategic Plan and updated Medium Term Financial Framework have been developed to align with one another, and to ensure that the strategic objectives set out within the Strategic Plan are also reflected in financial planning.
2. **HR & Organisational Development** – No implications from this report. A Workforce Plan for 2022-25 is being developed and will reflect the key challenges and objectives set out within the Strategic Plan. Scottish Government timelines require finalisation of new Workforce Plans by November 2022.
3. **Community Planning** – The Strategic Plan has been developed in partnership and reflects the IJB's role within the context of Community Planning. It sets out how health and social care will be delivered jointly within Renfrewshire to improve outcomes for local communities.
4. **Legal** – This paper sets out the approach to meeting the statutory strategic planning requirements set out in the Public Bodies (Joint Working) (Scotland) Act 2014.
5. **Property/Assets** – No implications from this report.
6. **Information Technology** – No implications from this report.

7. **Equality and Human Rights** – An Equality Impact Assessment (EQIA) has been undertaken on the final Strategic Plan.
8. **Health & Safety** – No implications from this report.
9. **Procurement** – No implications from this report.
10. **Risk** – No implications from this report.
11. **Privacy Impact** – No implications from this report.

List of Background Papers: N/A

Author: David Fogg, Strategic Lead and Improvement Manager

Any enquiries regarding this paper should be directed to Frances Burns, Head of Strategic Planning and Health Improvement (frances.burns@renfrewshire.gov.uk)

Reference	Strategic Objective	National Outcome Alignment	Owner	Year 1 Deliverables
Healthier.1	Implement a local Strategic Group for suicide prevention and collaboratively develop a Renfrewshire suicide prevention strategy, which should reflect the priorities set out in the new Suicide Prevention Strategy for Scotland (in development).	Outcome 1 Outcome 4 Outcome 5 Outcome 7	Interim Head of Mental Health, Addictions and Learning Disability	<ul style="list-style-type: none"> Establish a local Suicide Prevention Strategic Group and develop an initial plan for a Renfrewshire Strategy.
Healthier.2	Work collaboratively with individuals and families with lived and living experience, as well as frontline workers and partners, to tackle stigma through training and awareness raising (for example around mental health, alcohol and drug use), and encourage early engagement with services and support recovery.	Outcome 1 Outcome 3 Outcome 4 Outcome 5 Outcome 7	Interim Head of Mental Health, Addictions and Learning Disability	<ul style="list-style-type: none"> Establish an ADP lived experience forum will be established. Establish a Mental Health & Wellbeing lived experience/service user reference group will be established as part of the care planning structure. Embed peer support and volunteers in across Mental Health and ADRS CIRCLE.
Healthier.3	Work with partners to review existing information and advice sources for people in Renfrewshire, such as ALISS (A Local Information System for Scotland) to ensure that information on local and national support is available to people when	Outcome 1 Outcome 2 Outcome 6 Outcome 9	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> Revised baseline of Renfrewshire information sources on ALISS Phased review plan agreed with timelines and owners Website feedback mechanism established and monitored Monthly e-bulletins produced and circulated via Chief Officer

	they need it and in the format they need.			updates, Leadership Network and Engage Updates.
Healthier.4	Continue to work with partners to support the health and wellbeing of young people and contribute to the Scottish Government's mission to end child poverty, through (i) supporting delivery of income-based targets within the Child Poverty (Scotland) Act; (ii) delivering Local Child Poverty Action Report actions; (iii) supporting Renfrewshire's Tackling Poverty Programme; (iv) supporting the delivery of actions in the Tackling Child Poverty Delivery Plan 2022-26; and (v) working with the Scottish Government's Family Nurse Partnership (FNP) programme to improve antenatal health and birth outcomes, child health and development and parents' economic self-sufficiency.	Outcome 5 Outcome 9	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Increase referrals to Healthier Wealthier Children programme from BAME families by 50% • All referrals to have appointment set within 5 days of referrals receipt
Healthier.5	Work with Renfrewshire Council and third sector partners to deliver the Whole Family Support Framework 2021, and to meet the priorities identified in The Promise Scotland Plan.	Outcome 1 Outcome 4 Outcome 6 Outcome 7	Head of Health & Social Care (West Ren) & Renfrewshire Council	<ul style="list-style-type: none"> • Children's Health Services to engage with Renfrewshire Council 'The Promise' Ambassador and agree relevant HSCP actions. • Agree local delivery plan with Renfrewshire Council to support delivery of the Whole Family Support Framework, as per

				Scottish Government requirements
Healthier.6	Work with partners within the ADP to prevent alcohol & drug related deaths across Renfrewshire through the ongoing development and implementation of the Drugs Deaths Prevention Action Plan.	Outcome 1 Outcome 4 Outcome 5	Interim Head of Mental Health, Addictions and Learning Disability	<ul style="list-style-type: none"> • Drug Death prevention action plan will be developed in year 1. • A business case will be developed for the creation of a dedicated Alcohol-related Deaths Post.
Healthier.7	Continue to work collaboratively with partners to further develop our joint approach to frailty and falls prevention pathways within communities and acute settings, aiming to maintain / improve health and wellbeing while avoiding harm from frailty.	Outcome 2	Head of Health and Social Care (Paisley)	<ul style="list-style-type: none"> • Agree pathway for Home First Response Service across acute and community services which enhance and compliment current referral pathways • Implement use of frailty ID tool with acute and community to identify individuals who are living with frailty • Agree job description to allow progression of recruitment of service manager, Frailty practitioners, nursing and AHP staff for Home first Response Service. • Establishment of the team within acute (hub) and Spoke (community) • Reduce average Length of Stay (phased from implementation date) • Reduce delayed discharges for people living with frailty (phased from implementation date)

Healthier.8	Our new Sexual Health Planning Group will co-ordinate efforts to address teenage pregnancy and STI rates in Renfrewshire and to undertake a range of work focussed on helping children and young people have positive, healthy and mutually respectful relationships. This includes continued delivery of: (i) the Early Protective Messages (EPM) programme in early years settings; and (ii) the Mentors in Violence Prevention (MVP) programme to staff supporting young people.	Outcome 4 Outcome 5	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Complete the review of Relationships and Sexual Health (RSHP) policy for education establishments • Evaluate the Early Protective Messages (EPM) Programme in early years settings • Share key findings from EPM evaluation with key partners • Work with key partners in order to identify key priorities and action plan for planning group • Complete co-produced development of online practice guidance on relationships and sexual health for staff and carers of care experience young people (CEYP)
Healthier.9	Through our CAHSC (Culture, Arts, Health and Social Care) group, we will lead work with colleagues and partners involved in the Future Paisley programme, to develop a range of arts and culture-based activities in a variety of settings to improve health and wellbeing.	Outcome 1 Outcome 4 Outcome 5 Outcome 6	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Recruit CAHSC coordinator • Agree programme evaluation model
Healthier.10	As part of Renfrewshire's ongoing commitment to tackling Gender Based Violence (GBV), ensure that Sensitive Routine Enquiry is embedded in key HSCP services (or settings).	Outcome 3 Outcome 7	Head of Health & Social Care (West Ren)	<ul style="list-style-type: none"> • Work is currently underway to confirm deliverables

Connected.1	Develop and implement a Renfrewshire Dementia Strategy, reflecting the objectives and priorities of the forthcoming National Dementia Strategy.	Outcome 2 Outcome 3 Outcome 6	Interim Head of Mental Health, Addictions and Learning Disability	<ul style="list-style-type: none"> • A Renfrewshire Dementia Strategy will be progressed in Year 2 of the Strategic Plan, to align with the National Dementia Strategy once published.
Connected.2	Support people to live well by strengthening links between community resources and primary care, through testing and evaluation of new roles in several GP practices (Mental Health and Wellbeing Workers and Welfare Rights Workers) and maximising the impact of Community Link Workers	Outcome 1 Outcome 2 Outcome 4 Outcome 5	Clinical Director & Interim Head of Mental Health, Addictions and Learning Disability	<ul style="list-style-type: none"> • Increase Community Link Worker resource within Renfrewshire. Target to increase this by 3 WTE subject to recruitment. • Align Community Wellbeing Workers to a further 3 GP Practices.
Connected.3	Build unpaid carer-friendly communities across Renfrewshire so that unpaid carers can access the support they need to continue to care. This will increase the number of unpaid carers being identified by a wide-reaching awareness and development programme with our services, acute and community health partners, the voluntary sector and communities, and run campaigns targeting communities of unpaid carers less well known to us	Outcome 6	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Design and deliver a programme of unpaid carer awareness and engagement sessions, to our services, acute and community health partners, the voluntary sector, and communities, • Run campaigns targeting communities of unpaid carers less well known to us. Seek to achieve a target of identifying 840 new unpaid carers (against baseline of 830 - four-year average).
Connected.4	Embed the Recovery Orientated System of Care (ROSC) in Alcohol and Drug Recovery Services	Outcome 1 Outcome 3 Outcome 4	Interim Head of Mental Health,	<ul style="list-style-type: none"> • Establish an ADP Lived Experience Forum (as per ADP

	(ADRS) to promote individuals' recovery through access to, and benefit from, effective, integrated person-centred support. This includes delivery of the new Mental Health and Addictions Recovery Hub (CIRCLE) and increasing Peer Support Worker capacity.	Outcome 5	Addictions and Learning Disability	Care Planning Group Year 1 Action Plan) <ul style="list-style-type: none"> • (Re)establish a Renfrewshire Recovery Forum/Group • Evaluate the impact of CIRCLE, and Peer Recovery Worker development
Connected.5	Work with our partners to help children and young people and their families get appropriate and timely support to improve their mental wellbeing through a multi-agency community-based family support service.	Outcome 4 Outcome 5 Outcome 6	Head of Health & Social Care (West Ren) (& Integrated Children's Partnership)	<ul style="list-style-type: none"> • Development of shared local delivery plan ensuring service specification integrated into CAMHS services by March 2023.
Enabled.1	Work with NHS Greater Glasgow and Clyde (NHS GGC) and other HSCPs to continue activity to reduce unnecessary attendance at A&E, reduce hospital admissions and lengths of stay in hospital. This includes working to implement (i) opportunities to shift the balance of care; and (ii) joint commissioning plans for Unscheduled Care.	Outcome 1 Outcome 2 Outcome 3 Outcome 4 Outcome 9	Head of Health & Social Care (Paisley)	<ul style="list-style-type: none"> • Launch the pilot phase of the Home First Response Service, taking a GGC whole system approach to the management and assessment of frailty in line with an integrated primary and secondary care frailty pathway.
Enabled.2	Work with partners in NHS GGC and other HSCPs to build on and further coordinate the positive developments achieved in reforming urgent care	Outcome 1 Outcome 2 Outcome 3 Outcome 9	Head of Health & Social Care (Paisley)	<ul style="list-style-type: none"> • This strategic objective will be delivered through the Reform of Urgent Care and Unscheduled Care Commissioning Planning governance structures. Plans and

	during the pandemic, including Mental Health Assessment Units, GP Out of Hours, Urgent Care Resource Hubs and the flow navigation centre.			related actions have been defined and agreed through these structures. Future updates on progress will be brought to the IJB.
Enabled.3	Continue to embed multidisciplinary team working across HSCP services to enhance person-centred care, including but not limited to (i) progression of Renfrewshire's Primary Care Improvement Plan objectives; (ii) delivery of the Care Home Hub model developed during the COVID pandemic; and (iii) implementation of service changes identified through the 'winter funding' process.	Outcome 1 Outcome 2 Outcome 4 Outcome 8 Outcome 9	Head of Health & Social Care (Paisley) & Clinical Director	<p>PCIP:</p> <ul style="list-style-type: none"> • Roll out 4 pharmacy hubs across Renfrewshire • Treatment room access rolled out across Renfrewshire in line with PCIP targets (11 treatment rooms in total) <p>Care Home Hub model:</p> <ul style="list-style-type: none"> • Formal launch of the Care Home Hub (working with partners across NHSGGC) <p>Winter Funding:</p> <ul style="list-style-type: none"> • Deliver 76.8 WTE additional posts identified through winter funding proposals (subject to availability of candidates and recruitment)
Enabled.4	Work with NHS GGC and HSCP partners within the board area to deliver the Strategic Pharmacy Framework with (i) an empowered pharmacy workforce enabled to work at the highest level of practice and (ii)	Outcome 1 Outcome 4 Outcome 7 Outcome 8 Outcome 9	Pharmacy Lead	<ul style="list-style-type: none"> • The objectives of the Strategic Pharmacy Framework have been agreed through NHSGGC-wide governance. Delivery against agreed actions and deliverables will be monitored through this process. Local updates will be brought to the IJB as appropriate.

	enhanced public awareness of the community pharmacy options available to them.			
Enabled.5	Seek to minimise delayed discharges through the HSCP's programme of work to support prompt discharge from hospital. Within this we will continue to support the aim of discharging people for assessment through Renfrewshire's Home First approach.	Outcome 2 Outcome 3 Outcome 4 Outcome 9	Head of Health & Social Care (Paisley)	<ul style="list-style-type: none"> Continue to meet local delayed discharge targets as agreed through NHSGGC delayed discharge planning discussions Seek to maintain Renfrewshire's positive position and remain within the top 3 nationally for the Standard DD bed days rate
Enabled.6	Work in partnership with Renfrewshire Council's Children's Services to implement the National Neurodevelopmental Pathway (NDP) and ensure linkages are developed to support transition across services.	Outcome 1 Outcome 4	Head of Health & Social Care (West Ren)	<ul style="list-style-type: none"> Development of a local shared delivery plan Effective planning and identification of children aged 17 ½ years who will require transition from CAMHS to adult mental health services
Enabled.7	Improve patient experience of our services by reducing the waiting times for access to CAMHS. We will do this by investing in the expansion of the multidisciplinary team and streamlining patient pathways within Children and Adolescent Mental Health Services (CAMHS) to identify and eliminate delays.	Outcome 1 Outcome 3 Outcome 7 Outcome 9	Head of Health & Social Care (West Ren)	<ul style="list-style-type: none"> Seek to make incremental progress towards 90% of children and young people beginning treatment within 18 weeks of referral, in line with national target by March 2023 (Baseline as of March 22 was 58.8% of patients of seen within the 18-week target).
Enabled.8	Continue to modernise the (i) nursing, midwifery and (ii) allied health professions (AHP) workforce to be fit for the future and maximise	Outcome 1 Outcome 2 Outcome 8 Outcome 9	All Heads of Service	<p>Continue to modernise nursing and midwifery workforce:</p> <ul style="list-style-type: none"> Develop Band 5 roles within the Care Home Advanced Nurse

	<p>their contribution to shifting the balance of care to community and primary care settings. This includes the continued development of Advanced Practice Roles across Mental Health, Addictions and (iii) Children's Health Services and we will evaluate emerging evidence to influence future delivery models.</p>			<p>Practitioner Team to support succession planning</p> <ul style="list-style-type: none"> • Implement and evaluate the enhanced MDT Respiratory Team <p>Modernise the AHP workforce</p> <ul style="list-style-type: none"> • Implementation of the AHP Learning & Development Plan <p>Children's Health Services</p> <ul style="list-style-type: none"> • Confirm ANP role requirements • Recruit additional ANPs in line with requirements (subject to candidate availability)
Empowered.1	<p>Recover and develop day opportunities and explore wider flexible community-based models which, where appropriate for each person, provide additional choice beyond existing services and support innovative use of our buildings.</p>	<p>Outcome 2 Outcome 3 Outcome 4 Outcome 6 Outcome 9</p>	<p>Head of Health & Social Care (Paisley) & Interim Head of Mental Health, Addictions and Learning Disability</p>	<ul style="list-style-type: none"> • Maintain continued delivery of day and respite services, increasing capacities in line with priority need as local and national guidance and legislation permit. • Explore and document other service models across Scotland to inform and shape future service delivery locally. • Establish and progress a rolling programme of care package reviews
Empowered.2	<p>Develop the HSCP's approaches and mechanisms for supporting and enabling people with lived experience to contribute to the improvement of existing services</p>	<p>Outcome 3 Outcome 4</p>	<p>Interim Head of Mental Health, Addictions and</p>	<ul style="list-style-type: none"> • Confirm strategic care planning groups for LD and Autism, including representatives for people with lived experience and unpaid carers.

	and development of new forms of support.		Learning Disability	<ul style="list-style-type: none"> • Establish lived experience reference groups for people with LD and Autism • Establish lived experience reference groups for carers, supported by The Carers Centre.
Empowered.3	Work with Renfrewshire Council to improve the experience of young people with autism or with a learning disability making the transition to adult services through review of existing pathways and information available for individuals and their families to exercise choice and control. These pathways will meet the specific educational, employment and housing needs of each individual.	Outcome 4 Outcome 5 Outcome 6	Interim Head of Mental Health, Addictions and Learning Disability	<ul style="list-style-type: none"> • Review existing pathways for young people and agree opportunities for improvement • Confirm partnership working arrangements with key stakeholders in education, housing, and employment. • Review and develop pathways with key partners in relation to complex cases and delayed hospital discharge.
Empowered.4	Deliver a Renfrewshire autism action plan to improve opportunities and outcomes for people with autism, with an initial focus on practical community-based support around life skills, reducing social isolation, benefits, housing and employment.	Outcome 4 Outcome 5 Outcome 6	Interim Head of Mental Health, Addictions and Learning Disability	<ul style="list-style-type: none"> • Develop and agree Autism action plan • Prioritise and develop clear care pathways to support and/or signpost Autistic Adults to services inclusive of Life skills, benefits, employment, housing, social isolation.
Empowered.5	Continue to prioritise equalities and human rights to ensure our services are inclusive and provide equality of access to information, support and involvement. We will aim for our services are fully accessible to	Outcome 3 Outcome 4 Outcome 5	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Establish short life working group to develop and publish a Communication Toolkit for all staff

	people with a physical disability or sensory impairment by engaging and communicating in the most appropriate and effective way. This will include refreshing and building on our BSL (British Sign Language) action plan.			
Empowered.6	As part of mainstreaming equalities, we will develop an LGBTQ+ charter, continue to co-fund the IN-Ren Network Officer post hosted by our partner Engage and deliver training for our staff.	Outcome 3 Outcome 4 Outcome 5	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Progress LGBT Charter Award • Develop and publish a Race Equality Toolkit • Provide Race Equality Champions Training
Empowered.7	Anticipatory Care Planning (ACP) is a priority. We will work with staff groups across all sectors to promote planning conversations that can be recorded in a shareable format via clinical portal, supported by staff attending training to have the competence and skill to have sensitive discussions with patients. This will also contribute to our objective to achieve year on year increases in our use of Anticipatory Care Plans that are reflective of people's individual wishes, inclusive of times where the individual does not wish to have this conversation. We will work with primary care governance groups to enhance	Outcome 3 Outcome 7	Head of Strategic Planning and Health Improvement & Head of Health & Social Care (Paisley)	<ul style="list-style-type: none"> • Develop and ACP evaluation tool • Develop ACP training programme for staff • Deliver Anticipatory Care Plan target of 221 in line with 21/22 objectives • Develop a quality audit approach and apply this to a sample of ACPs

	the quality of Anticipatory Care Planning and increase the number of people with an eKIS (electronic key information summary).			
Empowered.8	In Renfrewshire, palliative care is everybody's business. We will deliver Renfrewshire's updated Palliative Care and End of Life Care Strategy in partnership, with a particular focus on (i) improving access for all; (ii) improving pathways between services; and (iii) providing training and information across services to broaden understanding of generalist and specialist forms of palliative and end of life care. We will do this with the aim of meeting the emotional support needs of families and unpaid carers and supporting the wellbeing of staff.	Outcome 3 Outcome 6 Outcome 7 Outcome 8	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Agree Palliative Care Strategy with IJB • Deliver actions for Year 1 in Palliative Care Strategy (note that Year 1 of the Strategy will cover approximately 6 months of Year 2 of the IJB's Strategic Plan)
Sustainable.1	Prioritise recovery from COVID at a consistent pace and develop transformation plans to reflect (i) national and local plans; (ii) staff wellbeing (iii) the themes and objectives set out in this Plan; (iv) the complexity of need arising from the pandemic's impact such as increased mental ill-health and	All outcomes	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Confirm and prioritise scope for HSCP transformation programme, incorporating recovery objectives • Workforce Plan for 2022-25 approved by IJB with supporting actions, including those with a focus on staff health and wellbeing

	prevalence of long COVID; and (v) the requirements for a National Care Service. This will also link with any programme of work for the National Centre for Sustainable Development.			<ul style="list-style-type: none"> • HSCP governance and resourcing plan to respond to National Care Service proposals (subject to details released by Scottish Government and aligned with transformation programme)
Sustainable.2	Work with partners, providers and the third sector to gather available data on health and social care demand and provision in Renfrewshire and develop a refreshed Market Facilitation Plan which sets out how service provision will be shaped in line with the themes set out in this Plan.	Outcome 2 Outcome 4 Outcome 5 Outcome 9	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Updated demand baseline and projections • Market Facilitation Plan approved by IJB
Sustainable.3	Develop a Climate Change (Net Zero) action plan for HSCP services to reflect and support Renfrewshire Council's Plan for Net Zero, working with the Council's Climate Change Sub-committee, and taking into account the Scottish Government's commitments in the 2021-22 Programme for Government.	Outcome 9	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Develop an action plan to support Renfrewshire's Plan for Net Zero
Sustainable.4	Further develop how the HSCP works in partnership with the third sector, partners and providers, building on the positive developments achieved during COVID. We will embed coproduction in service design to ensure Renfrewshire's resources are	All outcomes	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Evaluate SPG progress against priorities • Agree next phase of Health and Wellbeing initiatives

	structured around supporting people in the most meaningful way to them.			
Sustainable.5	Work with our partners to deliver joint strategic objectives and plans, including (but not limited to) Moving Forward Together, Renfrewshire's Social Renewal Plan, and the Children's Integrated Partnership Plan.	Outcome 9	Head of Strategic Planning and Health Improvement	<p>The key deliverables from these plans have been captured within other objectives within the Strategic Plan and are managed through existing governances and reporting structures within NHS GGC, Renfrewshire Council and on a partnership basis.</p> <p>Any additional commitments or actions which arise will be added to our Delivery Plan and highlighted to the IJB.</p>
Sustainable.6	Review the Unpaid Carer Short Breaks Services Statement and strengthen the partnership approach to supporting unpaid carers to access personalised breaks from caring, using innovative ways to achieve positive outcomes and sustain carers in the essential support they provide.	Outcome 6	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Agree Unpaid Carer Short Breaks Services Statement to IJB September 2022. The Statement will help unpaid carers understand what short breaks are available, how they can be accessed and any eligibility criteria that apply. • Increase total of community based short breaks hours to 3,000 (Baseline: 1,992hrs 2021/22)
Sustainable.7	Work with partners to develop and implement a Workforce Plan for 2022-25, considering both the HSCP and wider health and social care system and with a focus on	Outcome 8 Outcome 9	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Final workforce plan approved by IJB • Action plan with owners and measures (progress will be

	enhancing recruitment and retention, training and development, career pathways and employability opportunities.			<p>monitored through Workforce Planning governance)</p> <ul style="list-style-type: none"> • Year 1 progress assessment submitted to Scottish Government
HCS 001	<p>Support the development of the Council's innovative Regeneration and Renewal Programme to:</p> <ul style="list-style-type: none"> • Deliver energy efficient and digitally enabled homes in sustainable locations which reflect Renfrewshire Council's commitment to net zero carbon emissions, which will reduce poor energy efficiency as a driver for fuel poverty. • Develop and implement a multi-disciplinary approach to neighbourhood renewal plans and investing in our communities 	Outcome 1	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Progress Phase 1 investment in Auchentorlie and Seedhill areas in line with agreed plans (Phase 1 includes 8 regeneration and renewal areas and is targeted for completion in 2029) • Progress establishment of Neighbourhood Renewal Groups for 8 Housing regeneration Areas (in line with plans and target date of 2029)
HCS 002	Support the delivery of energy improvements to existing social housing stock across all tenures and support owners to undertake energy efficiency improvements through area-based schemes	Outcome 1	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Progress housing investment programmes to improve energy efficiency of social rented and privately rented housing stock and increase % of Council and Housing Association homes meeting the Energy Efficiency Standard for Social Housing (EESH)

				<ul style="list-style-type: none"> • Secure funding from Scottish Government EES:ABS programme • Increase number of private sector homes that receive energy efficiency improvements via Council supported schemes
HCS 003	Building on the rapid rehousing approach to ensure access to specialist services is readily available via robust pathways for homeless people with complex needs, including mental health and harmful alcohol and/or drugs use.	Outcome 1	Interim Head of Mental Health, Addictions and Learning Disability	<ul style="list-style-type: none"> • Establish Housing First Monitoring and Review Group chaired by Housing Support Services Manager • Establish joint working and referral arrangements with CIRCLE • Increase use of Housing First Approach from March 22 baseline of 57 service users • Increase number / % of social rented lets to homeless from 21/22 baseline (note that this may be impacted by Homes for Ukraine programme)
HCS 004	Continue to strengthen our approach to prevention and repeat homelessness by providing holistic wraparound support to households in Renfrewshire, regardless of tenure, whose life is being affected by alcohol and/or drugs. This will be enhanced by the fuller programme of work which has been developed in response to the recommendations of	Outcome 1	Interim Head of Mental Health, Addictions and Learning Disability	<ul style="list-style-type: none"> • Launch Myla project with Turning Point Scotland • Establish Myla Steering Group • Confirm target number of service users and timescales

	the independent Alcohol and Drugs Commission.			
HCS 005	Developing an integrated approach to housing advice across Renfrewshire, building on existing offerings from the Council and the Linstone Housing Hub funded by the HSCP	Outcome 1	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Undertake a review of advice services across Renfrewshire • Evaluate the social prescribing model of housing support
Equalities	Implement Fairer Scotland Duty within HSCP ways of working	All outcomes	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Train HSCP SMT in Fairer Scotland Duty • Fairer Scotland Duty incorporated in EQIAs
Enabler.1	Supporting our workforce beyond the pandemic is critical to our success. Alongside this we need to ensure that we address emerging working challenges such as recruitment and retention whilst providing access to development opportunities and empowering our staff to maximise the contribution they are able to make. We will develop a Workforce Plan for 2022-25 setting out how we will address these challenges.	Outcome 8	Head of Strategic Planning and Health Improvement	Deliverables as above against Sustainable.7
Enabler.2	Digital technology has been a crucial element of our pandemic response. It provides us with the opportunity, where appropriate, to broaden how people are informed about, and	Outcome 2 Outcome 9	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • HSCP Digital and Data Oversight Group established with agreed Terms of Reference

	access, services. It can also help people to maintain their independence for longer.			<ul style="list-style-type: none"> • HSCP Digital Vision, objectives and priorities agreed with partners
Enabler.3	The HSCP utilises a broad property portfolio which is collectively owned or leased by NHS GGC and Renfrewshire Council. This property needs to help us deliver services in changing ways, reflecting new ways of working. We work closely with our partners to ensure our buildings match our needs into the future.	Outcome 9	Chief Finance Officer	<p>Deliverables as noted against Enabled.3:</p> <ul style="list-style-type: none"> • Roll out 4 pharmacy hubs across Renfrewshire • Treatment room access rolled out across Renfrewshire in line with PCIP targets (11 treatment rooms in total) <p>Plus:</p> <ul style="list-style-type: none"> • Establish HSCP Property Strategy Group with partners • Agree HSCP strategic property objectives and priorities • Deliver targeted improvements in line with recovery and remobilisation plans
Enabler.4	Communicating and engaging well is at the heart of providing effective services. Our approach, developed during the pandemic, gives us a range of tools for involving people in conversation around our services during this Plan. We will continue to develop our approach to involve communities and those with lived and living experience.	Outcome 3 Outcome 8	Head of Strategic Planning and Health Improvement	<ul style="list-style-type: none"> • Refresh the HSCP's Participation, Engagement and Communication (PEC) Strategy • Implement a supporting PEC group

Enabler.5	Clinical and care governance is our system that ensures our care and outcomes are of a high standard for users of services. This governance does not exist in isolation but overlaps with our themes and other enablers.	Outcome 7	Heads of Health & Social Care	<ul style="list-style-type: none"> Produce an Annual HSCP Clinical and Care Governance Report for the preceding year for the IJB and NHS GGC.
Podiatry	Delivering on our lead partnership responsibilities.	Outcome 1 Outcome 3 Outcome 7 Outcome 9	Head of Podiatry	<ul style="list-style-type: none"> Achieve QI target for positive patient experience of Podiatry (70% target) Reduce pressure ulcers and avoidable pressure damage (30% target) Improve longest waiting times for Tier 1 new patient appointment in line with NHSGGC targets (90%)
Primary Care Support	Delivering on our lead partnership responsibilities.	Outcome 2 Outcome 9	Clinical Director (for local deliverables - note that PCS responsibilities also sit with NHS GGC)	<ul style="list-style-type: none"> Increase Care Home ANP Resource by 3.4 WTE by 2022/2023 to deliver Urgent Care Services with aims to reduce clinical work of GPs within care homes and to potentially reduce avoidable hospital admissions. Ensure each GP Cluster (x6) have a quality improvement plan in place to support quality improvement initiatives.