East Dunbartonshire Strategic Plan 2025 – 2030: Phase 1 Consultation

This document sets out the background to the development of the Health and Social Care Partnership's new Strategic Plan 2025 onwards and invites partners, stakeholders and the general public to participate in the development of this new plan.

The first section of the report provides the background and context. If you would like to jump straight to the proposals and questions, please feel free to proceed to **Section 2: The Conversation.**

Section 1: The Background and Process

1   THE EAST DUNBARTONSHIRE HSCP STRATEGIC PLAN

1.1   Health and Social Care Partnerships (HSCPs) were introduced in 2015 to bring together a range of community health and social care services. The responsibility for organising these services previously lay with Councils and Health Boards, but now sit with HSCP Boards (sometimes called Integration Joint Boards). The idea behind creating these HSCPs was to integrate health and social care services much more closely under a single manager, with a single combined budget, delivering a single plan to meet a single set of national outcomes in a way that best meets local needs. The "single plan" is called the HSCP Strategic Plan. It sets out how HSCP Boards will plan and deliver services for their area over the medium term, using the integrated budgets under their control.

1.2   East Dunbartonshire HSCP has produced three previous Strategic Plans. The new Strategic Plan must be produced by 31 March 2025 and will cover the 5 year period 2025 to 2030.

2   ENGAGEMENT AND PARTICIPATION

2.1   HSCP Boards are collaborative at heart; they include membership from Local Authorities and Health Boards, plus representatives of service users, informal carers, professionals and clinicians, trade unions and third and independent sector service providers. When preparing its Strategic Plan, an HSCP Board must ensure that all of these stakeholders and partners are fully engaged in the process and have regard to the [Health and Social Care Delivery Principles](https://www.gov.scot/publications/guidance-principles-planning-delivering-integrated-health-social-care/)[1]. This ensures that a shared approach is taken to the planning of services to deliver the [National Outcomes for Health and Wellbeing](https://www.gov.scot/publications/national-health-wellbeing-outcomes-framework/)[2] and to achieve the core aims of integration, which are:

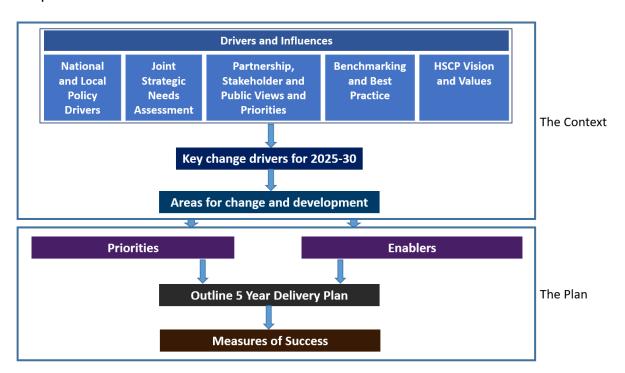[1] https://www.gov.scot/publications/guidance-principles-planning-delivering-integrated-health-social-care/
[2] https://www.gov.scot/publications/national-health-wellbeing-outcomes-framework/

- To improve the quality and consistency of services for patients, carers, service users and their families;

- To provide seamless, integrated, quality health and social care services in order to care for people in their homes, or a homely setting, where it is safe to do so; and

- To ensure resources are used effectively and efficiently to deliver services that meet the needs of the increasing number of people with long term conditions and often complex needs, many of whom are older.

3   WHAT WE HAVE DONE SO FAR

3.1   A lot of what the HSCP needs to do is already set out in national and local policy. But not all HSCPs are the same. Different HSCPs have different pressures and population needs. It is important that we ensure that our Strategic Plan reflects what all HSCPs need to do, but emphasises the priorities that are right for local needs and aspirations.

3.2   The diagram below attempts to illustrate the process that we are undertaking. The blue boxes at the top are the main influences that should inform the context of the new plan. By analysing these we should be able identify what the priorities should be for us.

3.3   The HSCP has carried out initial work by looking at the main pressures (or "drivers") for change and improvement. This has involved an examination of statute, guidance and national and local policy. It is important that the Strategic Plan reflects these national and local policy requirements.

3.4   Analysis of East Dunbartonshire's population, its health and wellbeing and its particular needs has also been undertaken to ensure that the Strategic Plan identifies and reflects these local needs in the development of its priorities.

3.5   We have also looked at what has been successfully developed elsewhere, to help to inform our early thoughts. Some of these examples of good practice have been brought together into a report by the Scottish Government called "A Framework for Community Health and Social Care Integrated Services" which we will use to help inform our approach.

Section 2: The Conversation

4   THE CONVERSATION

4.1   Now that this initial work has been completed, we have been able to set out what we believe to be:

- The key challenges that have been identified
- The proposed areas for priority action
- The proposed enablers for change

4.2   At this point we want to pause and share these findings with partners, stakeholders and the general public. We would like this to take the form of a conversation:

> **The Conversation:**
>
> We will share from our early work what we think are the key challenges for the HSCP and the changes and improvements that need to be made to meet those challenges. We will also share what we think will make these changes possible.
>
> We will ask what people think about these ideas and what is most important for them. We will encourage ideas about other changes and improvements that people think are important, as well as things that people would like to keep the way they are.
>
> We will also ask people what they think would be the most important successes for them, if these changes and improvements were to happen.

4.3   We will arrange to engage with a range of existing organisations and groups within the HSCP, including:

- The Health Board and Council
- The HSCP Board members

- The Community Planning Partnership Board
- The Strategic Planning Group
- The Public, Service User and Carer Group
- The Locality Planning Groups
- The HSCP Strategic Leadership Team
- The Third Sector Interface, via East Dunbartonshire Voluntary Action
- The Joint Staff Partnership Forum
- The Council's Health and Social Care Forum
- The Clinical and Care Governance Group

4.4   We will also engage with the general public using a range of approaches. These are set out in more detail in a Communication, Engagement & Participation Plan, which has been approved by the HSCP Board.

Section 3: Our Analysis and Proposals So Far

5   KEY POLICY DRIVERS

5.1   The box below sets out what we consider to be the key policy drivers for the next 5 years. This list does not include everything that the HSCP responds to on a daily basis; that would be a much longer list. Rather, we wanted to identify what we think would be the main drivers for change over the medium term.

Key Policy Drivers: National
➢ A Fairer Healthier Scotland (June 2012)
➢ A Fairer Scotland for Disabled People: Delivery Plan (2016) and Duty (2018)
➢ A Scotland Where Everybody Thrives: Public Health Scotland's Strategic Plan 2022–25
➢ Achieving Excellence in Pharmaceutical Care; a strategy for Scotland (2017)
➢ Article 19 of the UN Convention on the Rights of Persons with Disabilities
➢ Best Value: revised statutory guidance (2020)
➢ Carers (Scotland) Act 2016
➢ Coming Home: complex care needs and out of area placements (2018)
➢ Community Mental Health and Wellbeing Supports and Services Framework (2021)
➢ Creating Hope Together – Scotland's Suicide Prevention Strategy 2022
➢ Dementia in Scotland: Everyone's Story Delivery Plan 2024-26
➢ Digital Strategy For Scotland (2021)
➢ Equality Act 2010
➢ Fairer Scotland Duty: guidance for public bodies (2021)
➢ GP Contract and Memorandum of Understanding (2018)
➢ Guidance on Joint Investigative Interviewing of Child Witnesses in Scotland
➢ Health and Social Care: national workforce strategy (2022)
➢ Human Rights Act 1998
➢ Independent Review of Adult Social Care and the National Care Service Bill

➢ Medication Assisted Treatment (MAT) standards (2021)
➢ National Health and Wellbeing Outcomes
➢ National Mental Health Strategy 2017-2027
➢ National public protection statute & guidance
➢ National Strategy for Dementia in Scotland 2023
➢ Public Bodies (Joint Working) (Scotland) Act 2014
➢ Public Health Scotland's Strategic Plan
➢ Realising Realistic Medicine (2017)
➢ Rights, Respect and Recovery: Alcohol and Drug Treatment Strategy (2018)
➢ Scottish Government Equality, Opportunity, Community - Our Programme for Government 2023
➢ Scottish Government: Framework for Community Health and Social Care Integrated Services (Nov 2019)
➢ Social Work Scotland Act (1968)
➢ The National Perinatal and Infant Mental Health Policy Framework
➢ The Promise: action to take forward the findings of the independent care review for care experienced children and young people (Oct 2020)
➢ The Vision for Justice in Scotland (2022)
➢ United Nations Convention on the Rights of the Child
➢ Universal Health Visiting Pathway in Scotland: pre-birth to pre-school (2015)
➢ Verity House Agreement (2023)
Key Policy Drivers; Local
➢ East Dunbartonshire Alcohol and Drug Partnership Strategy 2023-25
➢ East Dunbartonshire Carers Strategy 2023-26
➢ East Dunbartonshire Children's Services Plan 2023-26
➢ East Dunbartonshire HSCP Adult Learning Disability Strategy 2024–29
➢ NHSGG&C Board-wide strategies: Mental Health, Learning Disability, Unscheduled Care, Health Visiting, School Nursing, District Nursing, Rehabilitation
➢ NHSGG&C Health and Social Care Strategy: Moving Forward Together (2019)
➢ NHSGGC Climate Change & Sustainability Strategy 2023-28
➢ NHSGGC Primary Care Strategy 2022-26
➢ NHSGGC Public Protection Strategy 2023-2026
➢ The East Dunbartonshire Local Outcome Improvement Plan 2017-27
➢ Turning the Tide through Prevention: NHSGG&C Public Health Strategy 2018-28

6   OUR LOCAL NEEDS

6.1   Most of our health and wellbeing needs will be common to most other HSCP areas, but there are particular issues for every area. It is important that we understand what our population needs and priorities are. We have recently updated our Joint Strategic Needs Assessments, which provide a detailed analysis of our population's health and social care circumstances. The box below sets out some of the headlines from this work.

Children and Young People	Adults and Older People
• Looked after and accommodated children who	• Healthy life expectancy is decreasing, this means more people are living longer in ill-

are looked after in the community is continuing to decrease.

- Increase in the number of unaccompanied asylum seeking children and the number of children being trafficked who require care and support in East Dunbartonshire
- Mental health in younger people is a growing area of concern with high numbers of CAMHS referrals
- Increase in the number of children being diagnosed as neurodivergent.
- Higher levels of A&E attendance than other HSCP areas for children and young people: less than 1 in 5 required hospital admission in the last 5 years.

health and who therefore may rely more on services for longer.
- The percentage of East Dunbartonshire's population prescribed drugs for anxiety, depression or psychosis is still increasing.
- The rate of emergency admissions from falls in East Dunbartonshire is slowly rising since 2020/21.
- Lifestyle and Risk Factors:
  - Recorded death rates due to suicide are increasing but still below the Scottish average.
  - Increase in the rate of drug related deaths but is still below the Scottish average.
  - Increase in the rate of alcohol related deaths but is still below the Scottish average.
- Hospital Related Pressures:
  - Emergency admissions rates are increasing
  - Delayed discharges are increasing with high numbers of those delays due to patients being assessed as lacking capacity (known as AWI delays).
  - Acute delayed discharge bed days have more than doubled since 2017/18
- The 2022/23 East Dunbartonshire Health and Wellbeing Survey reported:
  - since 2017/18 residents have reported a decrease in positive views of general health, physical wellbeing, mental wellbeing and quality of life.
  - 19% of respondents said that they had felt lonely at least some of the time in the previous two weeks
  - 1 in 4 (27%) had caring responsibilities.
  - 20% had difficulty meeting the cost of food and/or energy.
  - 17% of those aged 16-34 had used e-cigarettes in the last year.
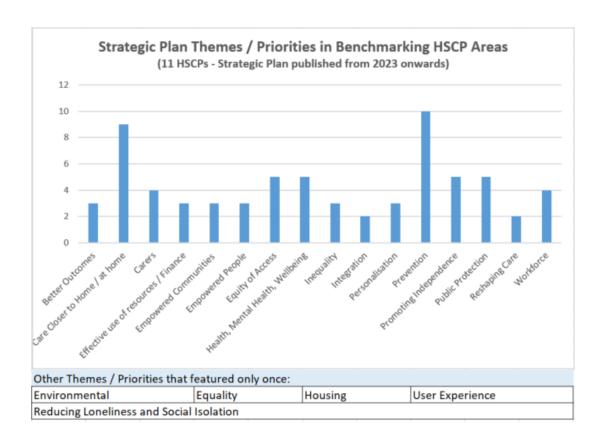
7 BENCHMARKING WITH OTHER HSCP AREAS

7.1 We looked at the most recently prepared Strategic Plans in other HSCP areas, to find out the priority areas for improvement and development identified by them. Of the 11 plans we looked at, the most common priorities are set out in the table below. These were:

- Care closer to home / at home
- Carers
- Equity of access

- Health, Mental Health, Wellbeing
- Prevention
- Promoting independence
- Public protection
- Workforce

Priorities appearing 3 times were:
- Better outcomes
- Effective use of resources / Finance
- Empowered Communities
- Empowered People
- Inequality
- Personalisation

Strategic Plan Themes / Priorities in Benchmarking HSCP Areas
(11 HSCPs - Strategic Plan published from 2023 onwards)

Other Themes / Priorities that featured only once:			
Environmental	Equality	Housing	User Experience
Reducing Loneliness and Social Isolation			

8   WHAT WE THINK ARE THE MAIN CHALLENGES

8.1   After analysing the main policy drivers, the local needs analysis and the priority work being taken elsewhere, we think that the main challenges for the HSCP over the next few years will be:

The Main Challenges
• Public protection concerns

- Impact of cost of living crisis
- Increasing complexity of presenting needs
- Financial constraints, rising costs and increasing demand in the context of real terms reductions in budgets
- Recruitment and retention challenges within the workforce
- Preventing avoidable hospital admissions and supporting people to be cared for as close as home as possible
- Building capacity to enable social wellbeing and community wellbeing
- Demand for personalisation and choice
- Importance of adopting human rights-based approaches
- Increasing mental health and wellbeing concerns
- Increasing pressure on informal carers
- Increasing pressures and demand on services in terms of service usage and complexity of care required
- Need for improved outcomes for care experienced young people
- Self-reported perceptions of health and wellbeing
- Social and Health inequalities
- Uncertainties of the National Care Service
- Influence of environmental and climate impacts
- Impact of war and conflict across different continents

9　SUGGESTED PRIORITIES TO MEET THESE CHALLENGES

9.1　The box below sets out how we think we could and should meet these challenges. We have divided the list into 6 priorities:

Suggested Improvement and Development Priorities
Empowering People
People are enabled to have power and control over their own lives, ensuring that they can get the support they need that is right for them at that time.
Empowering and Connecting Communities
Community members will be empowered to support their communities and be involved, and participate in, the ongoing sustainable development of their community, and have access to information, advice and resources to enable them to live independently and without formal intervention.
Prevention and Early Intervention
Services will facilitate and enable prevention, and the identification and provision of early support, to improve outcomes for individuals and prevent, stop or slow the progression of need, to safely enable risk and to minimise harm.
Public Protection
Addressing key public protection statutory duties will be prioritised.

Supporting Carers and Families
Carers and their families will be supported and valued in their caring roles.
Improving Mental Health and Recovery
The mental health services people receive will meet national requirements, support local needs and continue to help people with their mental health and recovery.

10   PROPOSED ENABLERS OF CHANGE

10.1   We know from experience that improvement and development of services does not happen on its own. It often needs other factors to permit, allow or empower a change to happen. We think it is important to give higher profile to these enablers. If we can invest in the enablers then it is more likely that service improvement and development can happen.   The key enablers for change that we have identified so far, are set out in the box below:

Suggested Enablers of Change
Workforce and Organisational Development
Strengthen our focus on supporting our staff's mental health and wellbeing, the recruitment and retention of staff and ensure that our staff have the necessary skills and training to carry out their job.
Medium Term Financial and Strategic Planning
Develop and implement a medium term financial plan which ensures financial sustainability for the IJB and the delivery of strategic planning priorities within the financial envelope available, in the context of demand and cost pressures and challenging financial settlements.
Collaborative Commissioning
Increase the opportunities for collaborative working across our commissioned service providers with the aim of improving services, outcomes for service users, processes and efficiency.
Infrastructure and Technology
Maximise the use and development of our infrastructure and technology to help people to self-manage their own health and social wellbeing, as well as supporting our staff in the delivery of services.
Maximising Operational Integration
Strengthen collaboration, and encourage continuous improvement, amongst staff groups from both partner organisations.

Section 4: Your Thoughts and Comments

11   HOW TO SHARE YOUR VIEWS

11.1   As has been outlined above, the proposals set out in this report are suggestions only at this point. We have tried to explain why we have arrived at the proposed themes and enablers that are set out above. But we are very conscious that there will be other views and priorities. We want to open the process up to a fuller debate at this point. Quite soon we will have to settle on what our Strategic Plan priorities are and then do more work to build the plan around these. So this is the opportunity to influence the foundations of the plan that will take forward the work of the HSCP over the next 5 years.

11.2   You are welcome to share your views in a number of ways. There will be a number of virtual meetings held over the summer, as explained at 4.3 above. In addition, we have set up a survey online which can be accessed by clicking this link:

https://arcg.is/15fSmX0

The questions in the survey are set out on the next page. You might find these useful in preparing your response.

If you would like to engage in another way, please email in the first instance to ggc.edhscpconsultation@ggc.scot.nhs.uk and we will get back in touch to discuss your needs.

East Dunbartonshire Strategic Plan 2025-2030: Phase 1 Consultation

Survey Questions

1. Please can you tell us about your interest in Health and Social Care Services? You can select more than one.

   ☐ Service user / patient
   ☐ Carer
   ☐ Volunteer
   ☐ Council employee
   ☐ Health Board employee
   ☐ Care provider / employee
   ☐ Board member / partner representative
   ☐ Member of the public
   ☐ Other (please specify):

2. Please can you tell us what health and social care services in your area work well for you?

3. Please can you tell us where you think health and social care services in your area could do better?

4. Do you think that the **main challenges** identified in the consultation report are the right ones?

   ☐ Fully agree
   ☐ Partly agree
   ☐ Undecided
   ☐ Disagree

Please can you tell us more about your answer and any suggestions you may have?

5. Do you think that the **improvement and development themes** identified in the consultation report are the right ones?

☐ Fully agree
☐ Partly agree
☐ Undecided
☐ Disagree

Please can you tell us more about your answer and any suggestions you may have?

6. Do you think that the **enablers for change** identified in the consultation report are the right ones?

☐ Fully agree
☐ Partly agree
☐ Undecided
☐ Disagree

Please can you tell us more about your answer and any suggestions you may have?

7. Do you have any other comments that you'd like to provide on the development of the Strategic Plan and what it means for you? Please tell us in the space below:

This document can be provided in large print, Braille or on CD and can be translated into other community languages. Please contact the Council's Communications Team at:

本文件可按要求翻譯成中文，如有此需要，請電 0300 123 4510。

اس دستاویز کا درخواست کرنے پر (اردو) زبان میں ترجمہ کیا جاسکتا ہے۔ براہ مہربانی فون نمبر 0300 123 4510 پر رابطہ کریں۔

ਇਸ ਦਸਤਾਵੇਜ਼ ਦਾ ਮੰਗ ਕਰਨ ਤੇ ਪੰਜਾਬੀ ਵਿੱਚ ਅਨੁਵਾਦ ਕੀਤਾ ਜਾ ਸਕਦਾ ਹੈ। ਕਿਰਪਾ ਕਰਕੇ 0300 123 4510 ਫੋਨ ਕਰੋ।

Gabhaidh an sgrìobhainn seo cur gu Gàidhlig ma tha sin a dhìth oirbh. Cuiribh fòin gu 0300 123 4510

अनुरोध करने पर यह दस्तावेज हिन्दी में भाषांतरित किया जा सकता है। कृपया 0300 123 4510 पर फोन कीजिए।

Alternatively, you can request a paper copy of our survey by calling 0141 232 8237 or by emailing ggc.edhscpconsultation@ggc.scot.nhs.uk

If you prefer to give your feedback verbally, please email ggc.edhscpconsultation@ggc.scot.nhs.uk to arrange a convenient time.