



West Lothian
Council

West Lothian Integration Strategic Planning Group

Working group that sits below the Integrated Joint Board

West Lothian Civic Centre
Howden South Road
LIVINGSTON
EH54 6FF

30 September 2016

A meeting of the **West Lothian Integration Strategic Planning Group** of West Lothian Council will be held within the **Strathbrock Partnership Centre, 189(a) West Main Street, Broxburn EH52 5LH** on **Thursday 6 October 2016 at 2:00pm**.

For Chief Executive

BUSINESS

Public Session

1. Apologies for Absence
2. Order of Business, including notice of urgent business
3. Declarations of Interest - Members should declare any financial and non-financial interests they have in the items of business for consideration at the meeting, identifying the relevant agenda item and the nature of their interest.
4. Confirm Draft Minutes of Meeting of West Lothian Integration Strategic Planning Group held on Thursday 11 August 2016 (herewith).
5. Adults' Mental Health Commissioning Plan - Report by Director (herewith)
6. Learning Disability Commissioning Plan - Report by Director (herewith)
7. Performance Report - Report by Director (herewith)
8. Workplan (herewith)

NOTE **For further information please contact Val Johnston, Tel No.01506**

DATA LABEL: Public

281604 or email val.johnston@westlothian.gov.uk

MINUTE of MEETING of the WEST LOTHIAN INTEGRATION STRATEGIC PLANNING GROUP of WEST LOTHIAN COUNCIL held within STRATHBROCK PARTNERSHIP CENTRE, 189(A) WEST MAIN STREET, BROXBURN EH52 5LH, on 11 AUGUST 2016.

Present – Jane Kellock (Chair, Health Professional), Alan Bell (Social Care Professional), Ian Buchanan (User of Social Care), Colin Briggs (Health Care Professional) Elaine Duncan (Health Professional), Steve Field (Professional), James McCallum (Health Professional), Mary-Denise McKernan (Carer of Users of Health Care) and Patrick Welsh (Chief Finance Officer)

Apologies – Marion Barton, Jim Forrest, Margaret Douglas, Jane Houston, Carol Mitchell, Robert Telfer and Charles Swan

1. MINUTE

The Group confirmed the Minute of its meeting held on 30 June 2016. The Minute was thereafter signed by the Chair.

2. OLDER PEOPLES COMMISSIONING PLAN - NEEDS ASSESSMENT

A report had been circulated by the Director providing an update on the needs assessment that would inform the Older Peoples Commissioning Plan.

The report recalled that at the meeting on 24 March 2016 the Integration Joint Board (IJB) approved its Strategic Plan which included details of how high level outcomes were to be achieved through a process of strategic commissioning. The Strategic Plan also included a commitment to develop a series of care group based commissioning plans.

Attached to the report at Appendix 1 was the scheduled and current progress for the development of the plan for Older People. The first phase of this had now been completed in respect of the analytical phase – the needs assessment; a copy of which was circulated at the meeting.

Recommendations from the needs assessment were derived from evidence gathered and analysed from the review of literature, surveys and field work including study informants; these had been grouped under six key themes. The group were advised that the emerging recommendations were as to be expected.

The recommendations had been developed to match the level of commitment and desire demonstrated and a focus on the recommendations would lead to a comprehensive programme of change and improvement in the communities in which they lived.

It was proposed that following engagement with the Strategic Planning Group, a final draft would thereafter be presented to the Integrated Joint Board for approval and any comments before going to the IJB meeting would be welcome.

Decision

- 1) Noted the contents of the report;
- 2) Noted the contents of the summary of the emerging recommendations;
- 3) Noted that the final version of the report would be presented to the next meeting of the IJB taking place on 23 August 2016 for approval; and
- 4) Agreed that prior to submission to the IJB for approval members of the Strategic Planning Group were to submit comments on the document to Alan Bell for consideration.

3. MENTAL HEALTH COMMISSIONING PLAN - NEEDS ASSESSMENT

A report had been circulated by the Director providing an update on the needs assessment that would inform the Mental Health Commissioning Plan.

The report recalled that at the meeting on 24 March 2016 the Integration Joint Board (IJB) approved its Strategic Plan which included details of how high level outcomes were to be achieved through a process of strategic commissioning. The Strategic Plan also included a commitment to develop a series of care group based commissioning plans.

Attached to the report at Appendix 1 was the schedule and current progress for the development of the plan for Mental Health services. The first phase of this had now been completed in respect of the analytical phase – the needs assessment; a copy of which was circulated at the meeting.

Recommendations from the needs assessment were derived from evidence gathered and analysed from the review of literature, surveys and field work including study informants; these had been grouped under six key themes. The group were advised that the emerging recommendations were few in number at this stage but it was expected that these would increase in due course as the needs assessment reached its full conclusion.

The recommendations had been developed to match the level of commitment and desire demonstrated and a focus on the recommendations would lead to a comprehensive programme of change and improvement in the communities in which they lived.

It was proposed that the following engagement with the Strategic Planning Group, a final draft would thereafter be presented to the Integrated Joint Board for approval and any comments before going to the IJB meeting would be welcome.

Decision

- 1) Noted the contents of the report;
- 2) Noted the contents of the summary of the emerging recommendations;
- 3) Noted that the final version of the report would be presented to the next meeting of the IJB taking place on 23 August 2016 for approval; and
- 4) Agreed that prior to submission to the IJB for approval members of the Strategic Planning Group were to submit comments on the document to Alan Bell for consideration.

4. PHYSICAL DISABILITY COMMISSIONING PLAN

A report had been circulated by the Director in respect of the strategic commissioning plan for Adults with a Physical Disability.

The report recalled that at the meeting on 24 March 2016 the Integration Joint Board (IJB) approved its Strategic Plan which included details of how high level outcomes were to be achieved through a process of strategic commissioning. The Strategic Plan also included a commitment to develop a series of care group based commissioning plans.

Attached to the report at Appendix 1 was the final draft of the plan and it was proposed that this would be presented to the IJB on 23 August 2016 for approval.

The group were advised that this particular commissioning plan was the least complex to produce and that the needs assessment was largely in keeping with what was already being carried out in West Lothian.

In relation to a question concerning peer support it was confirmed that this was included in the Engagement Strategy but an understanding was provided that this would be strengthened in that particular document which was subject to a separate report on the agenda.

It was recommended to invite comments from members of the Strategic Planning Group on the commissioning plan for Adults with a Physical Disability before it was presented to the IJB on 23 August 2016 for approval.

Decision

- 1) To note the contents of the commissioning plan for Adults with a Physical Disability;
- 2) To note that reference within the Participation & Engagement Plan in relation to Peer Support would be reviewed and re-forced if necessary; and
- 3) To note that the plan would be presented to the IJB on 23 August

2016 for approval.

5. TECHNOLOGY ENABLE CARE PROGRAMME

A report had been circulated by the Director providing details of the West Lothian Technology Enabled Care Programme (WL TEC Programme).

The group were advised that Technology-Enabled Care was defined as *“where outcomes for individuals in homes or community settings were improved through the application of technology as an integral part of quality cost-effective care and support”*. This included, but was not limited to, the use of telecare, telehealth, teleconsultation, video conferencing and mobile health & wellbeing.

West Lothian had recently been awarded £515,000 by the Scottish Government TEC Fund to participate in the 2 year national TEC programme. This would enable West Lothian to build upon its original investment in telecare technology and accelerate commitments in line with emerging national and local priorities and technological developments.

The funding would allow West Lothian to expand the range of services offered and provide greater opportunities to meet an increased number of service users, in particular :-

- Meet the increase in demand for services from the growing elderly population and people with dementia to enable them to live as independently as possible within their own home;
- Rebalancing the health inequalities in West Lothian; and
- Expand and integrate the routine use of TEC and ensure TEC became sustainable and an embedded feature within health, housing and care support services.

As part of the programme West Lothian would be delivering the use of TEC in the following three areas :-

1. Expansion of home health monitoring as part of integrated care plans;
2. Expand the range and extent of Telecare use with a particular focus on upstream prevention to support hospital discharge and reduce the rate of re-admissions; and
3. Expand the use of video conferencing to support teleconsultations and training and reduce the need for face-to-face consultations.

The group continued to be advised that it was intended that over 600 users throughout West Lothian would benefit from the programme and those users would be selected from a large client group including elderly groups and Care @ Home.

Attached to the report were a series of appendices providing further guidance on the bid and the proposed outcomes of the programme noting that it was very important to have a structured approach to the programme and the use of the funding to ensure that the right outcomes were achieved. It was also intended that regular six monthly updates would be provided to the IJB.

A discussion ensued noting that the use of technology in such care programmes was becoming more acceptable particularly as the aging population were more knowledgeable about the use of technology. It was however important to remember that some clients would continue to prefer personal contact and that the use of technology would not suit all clients.

Additionally the financing of such future technological advances was discussed. It was important to note that any funding set aside for such projects was spent in the right areas with discernible outcomes and benefits for all parties concerned and that quality of care remained at the heart of the project.

It was recommended that the Strategic Planning Group note and consider the information in relation to the future provision of technology enabled care in West Lothian.

Decision

- 1) To note the contents of the report;
- 2) To welcome the further use of technology enabled care, being mindful of the costs involved;
- 3) To note that the report would be presented to the IJB meeting on 23 August 2016 for approval; and
- 4) To note that 6 monthly updates would be provided to the IJB.

6. PARTICIPATION AND ENGAGEMENT STRATEGY

A report had been circulated by the Director which presented a draft West Lothian Integration Joint Board Participation and Engagement Strategy, a copy of which was attached to report at Appendix 1.

The report recalled that on 7 April the Strategic Planning Group (SPG) noted that the Integration Scheme committed NHS Lothian and the council to develop a Participation and Engagement Strategy and which was to be approved by the Integrated Joint Board (IJB) within one year of the establishment of the IJB and reviewed regularly thereafter.

The draft strategy considered by the SPG on 7 April 2016 had been reviewed and following further input from health and social care officers and members of the SPG, a number of revisions were proposed and these were summarised in the report and included the establishment of a

health and social network, engagement with the third sector to be reviewed and development of the internet as a further key means of informing and engaging with communities and staff.

An Action Plan has also been devised and this was attached to the report at Appendix 1. This set out the main activities which the IJB would carry out in 2016-17 to support the commitments set out in the strategy. It was proposed to report on progress to both the SPG and the IJB early on in 2017-18 with a new one year action plan to be agreed at the same time.

The report then provided details of the organisations that would be contacted as part of the consultation exercise noting that any additions to this list would be welcome. It was intended that the consultation would take place over a three week period before proceeding to the IJB for approval.

There then ensued a discussion in which a number of points were raised by Ian Buchanan and included the promotion of ALISS, being mindful of how the Health and Social Care Network connected with members of the public, feedback from other IJB's, consideration of where the St John's Patient Forum fitted into the bigger picture and noting that the Association of Community Councils no longer existed so an alternative organisation needed to be considered. A number of other suggestions were also made and included consulting with the Equality Human Rights Commission, consulting with the appropriate trade unions, expansion of Section 15 of the strategy and a review of the format of the Action Plan before it went out for consultation.

The group also explored the manner in which the consultation would be carried out and included use of the council web site and also making direct contact with those organisations that had previously made comment on the strategy. It was also suggested that officers investigate the use of Survey Monkey (or alternative) for carrying out the consultation.

It was recommended that the Strategic Planning Group :-

1. Note the draft Participation and Engagement Strategy;
2. Provide guidance on any revisions required to the draft strategy; and
3. Agree to make the draft available for consultation prior to approval by the Integrated Joint Board.

Decision

1. To note the contents of the draft Participation and Engagement Strategy;
2. To note the various suggestions made in relation to the content of the draft strategy;
3. To note the various suggestions in relation to whom should be consulted on the draft strategy and the best methods to be used

including exploring the use of Survey Monkey (or alternative); and

4. To note that following the consultation period the draft strategy would be presented to a meeting of the IJB for approval.

7. WORKPLAN

A workplan had been circulated which provided details of the work of the Strategic Planning Group over the coming months.

Decision

To note the contents of the workplan

WEST LOTHIAN STRATEGIC PLANNING GROUP

Date: 6/10/2016

Agenda Item: 5

ADULTS' MENTAL HEALTH COMMISSIONING PLAN**REPORT BY DIRECTOR****A PURPOSE OF REPORT**

To seek comments from the Strategic Planning Group in respect of the strategic commissioning plan for Adults' Mental Health.

B RECOMMENDATION

To invite comments on the details of the strategic commissioning plan for Adults' Mental Health (Appendix 1). A report on the strategic commissioning plan for Adults' Mental Health will be presented to the IJB meeting on 18 October 2016 for approval.

C TERMS OF REPORT

At the meeting of 24 March 2016 the Integration Joint Board (IJB) approved its strategic plan which includes details of how high level outcomes are to be achieved through a process of strategic commissioning. The Strategic Plan also includes a commitment to develop a series of care group based commissioning plans.

These plans are based on an ANALYSE, PLAN, DO and REVIEW approach:

- Analyse: the process of needs assessment intended to identify the priority needs associated with the relevant care group
- Plan: the planning process that is informed by the needs assessment and identifies how priority needs are to be addressed including the deployment of resources and the performance management approach to be used to monitor progress
- Do: the implementation phase of the plan
- Review: the review of progress based on the agreed performance measures of the plan in conjunction with any significant changes in the environment.

Recommendations from the needs assessment are derived from evidence gathered and analysed from the review of literature, surveys and fieldwork including study informants.

A short life Working Group was established to develop the three year commissioning plan. A draft plan has now been prepared and the Strategic Planning Group is invited to comment on this.

The intention is to present a final draft of the strategic commissioning plan for Adults' Mental Health to the IJB meeting on 18 October 2016 for approval.

D CONSULTATION

- Strategic Planning Group.

E REFERENCES/BACKGROUND

- West Lothian Integration Joint Board meeting - 05 April 2016.
- Scottish Government Guidance and Advice - <http://www.gov.scot/Topics/Health/Policy/Adult-Health-SocialCare-Integration/Implementation/ImplementationGuidance>

F APPENDICES

1. Draft of Adults' Mental Health Commissioning Plan.

G SUMMARY OF IMPLICATIONS

Equality/Health

In developing its Strategic Plan, the IJB took account of the requirements for mainstreaming equality by aligning its strategic outcomes with the equality outcomes. The plan was subject to an integrated equalities impact assessment and this commissioning plan is covered by that assessment.

National Health and Wellbeing Outcomes

The commissioning plan addresses the relevant National Health and Well-Being Outcomes in accordance with the IJB Strategic Plan.

Strategic Plan Outcomes

The commissioning plan is aligned to relevant Strategic Plan outcomes and will incorporate detailed performance indicators.

Single Outcome Agreement

The Strategic Plan outcomes are aligned to the Single Outcome Agreement outcomes related to health and social care.

Impact on other Lothian IJBs

None.

Resource/finance

None.

Policy/Legal

Public Bodies (Joint Working) (Scotland) Act 2014 and statutory regulations and guidance.

Risk

None.

H CONTACT

Contact Person:

Alan Bell, Senior Manager Community Care Support & Services

<mailto:Alan.bell@westlothian.gov.uk>

Tel 01506 281937

6 October 2016

DRAFT

Adults' Mental Health Commissioning Plan

2016/17- 2018/19

The West Lothian Strategic Commissioning Plan for Adults' Mental Health sets out our strategic ambitions, priorities and next steps required to deliver integrated health and social care support and services for adults with mental health problems, their families and carers in West Lothian for the next three years.

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

FOREWORD

The West Lothian Strategic Commissioning Plan for Adults’ Mental Health (hereafter the ‘Adults’ Mental Health Plan’) sets out our strategic ambitions, priorities and next steps required to deliver integrated health and social care support and services for adults with mental health problems¹, their families and carers in West Lothian for the three-year period to 2018/19.

The Adults’ Mental Health Plan has been developed within the context of national and local policy direction taking into account the key principles and values which underpin the planning, commissioning and provision of services and support for people with mental health problems, and has been informed through consultation with key partners, service users and carers.

The Adults’ Mental Health Plan should be read in conjunction with:-

- West Lothian Integration Joint Board Strategic Plan 2016-26
- West Lothian Adults’ Mental Health Needs Assessment 2016.

It is acknowledged that it is difficult to view services and commissioning for care groups as distinct or isolated from one another. Consequently the Adults’ Mental Health Plan acknowledges the crossover with other health and social care groups:

- Adults with learning disabilities
- Adults with physical disabilities
- Child & Adolescent Mental Health Services
- Older people
- Substance misuse.

Ensuring our services are well positioned to meet the needs of residents in West Lothian is key to achieving the outcomes we have set, and I will be reviewing progress against this Adults’ Mental Health Plan on an annual basis refining where necessary as the Integration Board matures in our local ownership of the resources we have to spend on health and social care services.

COUNCILLOR FRANK TONER

CHAIR OF THE WEST LOTHIAN INTEGRATION JOINT BOARD

¹ Refers to any condition, temporary or otherwise, which may affect a person’s mental wellbeing.
SPICE Briefing http://www.parliament.scot/ResearchBriefingsAndFactsheets/S4/SB_14-36.pdf

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

CONTENTS

Foreword.....	1
Section 1: Overview	3
Section 2: Needs Assessment Recommendations.....	5
Section 3: Commissioning Priority Activities	9
Section 4: Next Steps	15
Appendix 1 - National Health & Wellbeing Outcomes & Integration Outcomes	19
Appendix 2 – Performance Indicators	20

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

SECTION 1: OVERVIEW

Who we are

The Public Bodies (Joint Working) (Scotland) Act 2014 requires arrangements to be put in place for the delivery of integrated health and social care. Local and joint commissioning of health and social care services will be built around the needs of patients and service users and managed through the West Lothian Integration Joint Board (IJB) who will in turn direct West Lothian Council or NHS Lothian to deliver services on its behalf.

Vision, values, aims and outcomes

The vision of the IJB Strategic Plan 2016-26 for West Lothian (Strategic Plan) is “to increase wellbeing and reduce health inequalities across all communities in West Lothian”. The plan describes the values and aims and commits the IJB to deliver the nine national and wellbeing outcomes for health and social care as required by the Scottish Government.

The strategic plan covers the geographical area of West Lothian and in accordance with the legislation defines two localities across which health and social care services will be planned and delivered, the East and the West. The localities will provide a key mechanism for strong local, clinical, professional and community leadership, ensuring that services are planned and led locally in a way that is engaged with the community and contributing to effective strategic commissioning.

The case for change

- It is recognised nationally and locally that whilst the health and care needs of individuals are closely intertwined, the services put in place to meet these needs can be disjointed and not as co-ordinated as they could be.
- Combining the resources of both agencies within the integrated partnership will allow for greater exploration of efficiencies to ensure we can meet the main health and wellbeing challenges at a time when we also need to reduce costs.
- West Lothian has a faster than average population growth, an ageing population and growing numbers of people living longer with mental health problems, long term conditions and complex needs, all of which require us to ensure we have commissioned our health and social care services to meet our duty of Best Value, but also to ensure our resources are targeted to achieve the greatest impact on those most in need.

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

OUR APPROACH

The IJB has committed to develop strategic commissioning plans for all adult care groups. These plans will aim over time to incorporate the important role of informal, community capacity building and asset based approaches, to deliver more effective preventative and anticipatory interventions, in order to optimise wellbeing and the potential to reduce unnecessary demand at the ‘front door’ of the formal health and social care system. Each commissioning plan will confirm the total resources available across health and social care and relate this information to the needs of the care group population as determined by a local needs assessment and other relevant local or national strategies.

As a first stage in the development of a commissioning plan for adults’ mental health, independent specialists in research and evaluation of the health and social care sector were commissioned to carry out a comprehensive local needs assessment. The needs assessment process involved:

- analysis of data based on the population, including demographic trends, health status and risk
- a wide consultation with the public through surveys, focus groups, etc.
- consideration of the views of professionals or experts
- benchmarking with other areas in Scotland.

The resultant commissioning plan for adults’ mental health will:

- reflect needs and plans as articulated at a local level for West Lothian
- confirm the desired outcomes and link investment to them
- detail what services will be delivered against outcomes and the associated performance indicators
- prioritise investment and disinvestment in line with assessed needs
- ensure that resource deployment and performance is consistent with the duty of best value
- ensure that sound clinical and care governance is fully considered.

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

SECTION 2: NEEDS ASSESSMENT RECOMMENDATIONS

The Needs Assessment made 16 recommendations structured around 7 key themes. The recommendations have been mapped against the National Health and Wellbeing Outcomes (detailed in Appendix 1) and then referenced against other strategic plans in order to evaluate whether the recommendation will be delivered through other routes or included for delivery as part of our commissioning cycle in this plan.

Ref	Recommendation	National Health & Wellbeing Outcomes									In scope	Out of scope	Existing Strategies / Policies					
		1	2	3	4	5	6	7	8	9			IJB Strategic Plan	IJB Workforce Plan	WL Engagement Strategy	Local Housing Strategy		
1	Theme - Joint Strategic Priorities: In future, these priorities should be needs-led and not service-led.	√	√			√				√		√	√			√		
2	Theme - Joint Strategic Priorities: Consideration should be given to strengthening the contribution of the Third Sector; particularly in areas of lower speciality community based supports.				√	√				√		√	√		√			
3	Theme - Joint Strategic Priorities: Inclusion of 'support for carers' in future priorities.						√					√	√					
4	Theme - Joint Strategic Priorities: Taking cognisance of the recent NHS National Clinical Strategy and accepting issues of resource constraint and growing demand, the Integrated Joint Board to reassess the current balance of regionally and locally delivered mental health services to ensure the most beneficial and sustainable arrangements are put in place to deliver quality care as close as practicable for service users and carers; such a review to include consideration of opportunities arising from GP clusters.				√					√		√	√					

DATA LABEL: OFFICIAL INTERNAL

5

STRATEGIC COMMISSIONING PLAN – ADULTS' MENTAL HEALTH

Ref	Recommendation	National Health & Wellbeing Outcomes									In scope	Out of scope	Existing Strategies / Policies					
		1	2	3	4	5	6	7	8	9			IJB Strategic Plan	IJB Workforce Plan	WL Engagement Strategy	Local Housing Strategy		
5	Theme - Current Configuration of Services: A comprehensive review is required, to address issues of capacity, capability and flow across the Acute, Rehab and Community Support services.									√		√	√			√		
6	Theme - Current Configuration of Services: A review of management arrangements for Mental Health services in light of the evidence provided in this study. For example, consideration could be given to whether Addictions services and CAMHS should be incorporated under one structure.									√		√	√					
7	Theme - Current Configuration of Services: A review of services for the 'Distressed' with the aim of delivering an expanded range of services and enhanced early intervention. It would seem appropriate that future services are based on a Stepped Model of Care.	√			√	√				√		√	√					
8	Theme - Current Configuration of Services: An immediate review should be undertaken of Adult Psychology Services with consideration being given to developing an enhanced psychological therapies service; although we recognise that this should be a long-term plan given the current financial constraints. It would need to be considered against the backdrop of a comprehensive review of the current configuration of services (see Recommendation 5). In order to develop a long-term ('fit-for-purpose') psychological									√		√	√					

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

Ref	Recommendation	National Health & Wellbeing Outcomes									In scope	Out of scope	Existing Strategies / Policies					
		1	2	3	4	5	6	7	8	9			IJB Strategic Plan	IJB Workforce Plan	WL Engagement Strategy	Local Housing Strategy		
	service, consideration needs to be given to current NHS Education for Scotland guidance ('The Matrix - A Guide to Delivering Evidence Based Psychological Therapies in Scotland' NHS Education for Scotland, 2014). A review should be conducted as to whether the implementation of a robust and well-resourced Stepped Model of Care, where a broader range of non-specialist staff and organisations (including the third sector) deliver psychological therapies, would be the appropriate model for West Lothian; or whether another model would best suit local needs.																	
9	Theme - Current Configuration of Services: The statutory Mental Health Officer service should be reviewed to ensure it is fit for purpose.								√			√	√					
10	Theme - Current Configuration of Services: Consideration should be given to the development of an integrated Community Mental Health Team model.								√			√	√					
11	Theme - Ethos: The Integrated Joint Board to develop a statement of Vision and Values to which all Mental Health services should subscribe; this to emphasise the centrality of Recovery and the benefits of engagement and co-production with service users and carers.			√		√	√		√			√	√			√		

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

Ref	Recommendation	National Health & Wellbeing Outcomes									In scope	Out of scope	Existing Strategies / Policies					
		1	2	3	4	5	6	7	8	9			IJB Strategic Plan	IJB Workforce Plan	WL Engagement Strategy	Local Housing Strategy		
12	Theme - Joint Working Arrangements: Given the evidence of variable joint working between agencies and disciplines, we would recommend consideration of strengthened multidisciplinary teams across both in-patient and community settings.								√	√		√	√			√		
13	Theme - Joint Working Arrangements: Consideration be given to a single point of referral for Adult services.			√					√			√	√					
14	Theme - Service User & Carer Involvement: Given this study has noted variable engagement with, and empowerment of, service users and carers, we would recommend consideration of developing a Service User and Carer Involvement Framework and Strategy.			√	√	√	√					√	√		√	√		
15	Theme - Staffing: Development of a workforce strategy for Mental Health services to address identified issues of recruitment, retention, sickness absence and an ageing workforce.								√			√		√				
16	Theme - Transitions: A review is required of transition arrangements between CAMHS and Adult Services given the evidence supplied in this study.			√	√	√			√			√	√					

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

SECTION 3: COMMISSIONING PRIORITY ACTIVITIES

This section details the specific commissioning commitments which have been informed by the needs assessment and provides information on the planned spend to meet these commitments. In addition to these commitments, all other existing services and resources which are allocated to provide health and care for the adults’ mental health care group will continue to be provided as is, and finally, the whole population universal health services, which all residents of West Lothian have access to, are provided to show the full picture of the resources available.

None of the recommendations from the West Lothian Adults’ Mental Health Needs Assessment are in the scope of this commissioning plan. The recommendations are principally about management strategies and arrangements; not service commissioning strategies. The recommendations have been allocated to existing strategies and policies for action and delivery as shown in Section 2.

The IJB’s Strategic Plan made reference to seven commissioning priorities for the period 2012-2015. These have been reviewed and revised as part of the commissioning plan process.

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

Ref	Needs Assessment Recommendation / Commissioning Priority(CP)	Integration Outcomes (Appendix 1)	Activity Name	Description	Indicators (Appendix 2)	Planned 2016 / 17 spend (£)	Provider
West Lothian Adults’ Mental Health Needs Assessment (2016)							
Rec	No recommendations in scope.						
West Lothian IJB Strategic Plan - Adults’ Mental Health Commissioning Priorities (CP)							
CP 1	Develop a range of supported accommodation housing models to enable adults with mental health problems to live within local communities.	1, 2, 4	Mental Health Supported Accommodation	Mental Health Supported Accommodation normally involves people with more complex needs living in individual flats or houses within a block which are overseen by residential or visiting support staff.	2, 7	£1,679,505	Various providers: Barony, Places for People, Scottish Association for Mental Health, The Richmond Fellowship Scotland. Contract in place until 30/09/17.
CP 2	Acute Care and Support Team - Phase 3 Implementation.	2, 4	Acute Care & Support Team (ACAST)	ACAST is a nursing team based in St John’s Hospital and who work with junior medical staff in the urgent assessment of patients presenting to the Accident and Emergency Department. ACAST also provide time-limited intensive home treatment for patients with acute or relapsing psychiatric illness.	3, 5, 7, 10	Within existing allocated resources.	NHS Lothian.

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

Activity Name	Activity Description	Indicators (Appendix 2)	Planned 2016/ 17 spend £	Provider
Summary of Expenditure on Services and Support for Adults’ Mental Health				
Adult Mental Health Social Care Assessment & Care Management	The Social Policy Adults’ Mental Health Assessment and Care Management Team is responsible for conducting needs-led assessments for adults with mental health problems and for developing appropriate care and support plans in response to identified eligible need. This includes community supports and residential / rehabilitation services.	2, 3, 4, 5, 7, 8.	309,797	WLC Mental Health Assessment & Care Management Team.
Barony	Barony Mental Health West Lothian Cluster Supported accommodation (core) for those unable to care for themselves by virtue of mental disorder.	2, 3, 4, 5, 7, 8.	756,565	Barony Housing Association. Contract in place until 30/09/17.
Bathgate House	Day Services in the form of groups and community outreach to people suffering from severe and enduring mental health problems and who no longer need intensive support from the Community Outreach Team, but require ongoing involvement with services.	2, 3, 4, 5, 7, 8.	329,464	WLC Community Mental Health Team.
Community Based Care	Care at home framework (non-specialist). The Care at Home service is provided by independent sector agencies in a Framework and covers all aspects of care and support for adults with mental health problems such as personal care, medication management and personal assistance	1,4,5.	285,563	Various providers as per the Care at Home Framework. The contract is in place until 31/12/18.
	Care at home framework (specialist). Care and support delivered to adults with mental health problems in a way that promotes and maximises independence. The specialist support includes assistance with personal care and support, daily living, domestic tasks and activities to support social inclusion.	1,4,5.	322,871	Various specialist providers as per the Specialist Care Framework. The contract is in place until 31/12/18.
Community Mental Health Team	Provide an intensive, community-based service for adults with severe and enduring mental health illness.	2, 3, 4, 5, 7, 8.	265,230	WLC Community Mental Health Team.
Sub Total			2,269,490	

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

Direct Payments	SDS Option 1. For adults with mental health problems assessed as eligible for social care services and support and who have chosen SDS Option 1; cash payment as an alternative to direct service provision.	1, 2, 3, 4, 5, 7.	66,508	Individual service users receive payment.
Incapacity & Mental Health	Statutory Mental Health Officer service to adults with mental health problems.	4, 5, 7, 9.	423,261	Adults With Incapacity Team.
Mental Health Grants Day	Grants to voluntary organisations: Specialist legal advice, assistance and representation to people with mental ill health, their relatives and carers.	2, 3, 4, 5, 7, 8.	13,385	Various providers as follows: Legal Services Agency.
Mental Health Residential & Nursing Care	If an individual’s assessed care and support needs cannot be safely and appropriately met within their own home, then a long-term residential placement with 24 hour care services and support may be appropriate. Residential and Nursing Care Home placements are provided by the independent sector.	4, 5, 7, 9.	1,021,099	Various providers. Mainly residential or nursing homes commissioned as individual placements following assessment.
Mental Health & Substance Misuse Outreach Framework	Framework arrangement. 750 hours per week maximum. Self-directed support Option 3.	2, 3, 4, 5, 7, 8.	702,000	Various providers. Barony, Places for People, Lanarkshire Association For Mental Health (LAMH), Penumbra, The Richmond Fellowship Scotland (TRFS).
Mental Health Supported Accommodation	Block contracts. Various arrangements in place i.e. supported accommodation and outreach. Self-directed support Option 3.	2, 3, 4, 5, 7, 8.	922,964	Various providers. Barony, Places for People, Scottish Association for Mental Health (SAMH), TRFS. Contract in place until 30/09/17.
Mental Health Support	Support delivered to adults with mental health problems via SDS Option 2.	2, 3, 4, 5, 7, 8.	£159,122	Various providers. LAMH, Penumbra, SAMH. Not contracted provision. Private arrangements between clients and provider. Funded by individual budgets.
Sub Total			3,308,339	

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

Miscellaneous Voluntary Organisations	Voluntary organisations, non-profit support and voluntary organisations service contracts:			Various providers as follows:
	Therapy support service for people experiencing enduring mental ill health to develop meaningful opportunities to pursue their creative interests.	2, 3, 4, 5, 7.	23,090	Artlink. Contract to be put in place.
	Dementia Early Onset Support Service (onset before the age of 65 years). Advice and support, and care at home and in the community.	2, 3, 4, 5, 7, 8.	24,360	Alzheimer Scotland. Contract in place until 31/03/19.
	Mental Health Advocacy. An independent advocacy service for people with mental health and/or addiction problems who are resident or in hospital in West Lothian or in HMP Addiewell.	2, 3, 4, 5, 7.	184,850	Mental Health Advocacy Project. Contract in place until 31/03/18.
		Sub Total	232,300	
Total			5,810,129	
NHS Contribution			-1,826,033	
DEDICATED NET BUDGET FOR ADULTS’ MENTAL HEALTH			3,984,096	

STRATEGIC COMMISSIONING PLAN – ADULTS' MENTAL HEALTH

Universal Health Services available (Total budget)				
Core Health Services	Adults with mental health problems have access to Core Health Services including Community Hospitals, District Nursing, Community AHP's and Prescribing.	1, 5, 6, 7, 9.	69,271,000	West Lothian GPs, District and Community nurses and Allied Health Professionals and Prescribing.
Hosted Health Services	Adults with mental health problems have access to Hosted Health Services e.g. Sexual Health, Oral Health Services, and Public Health services.	1, 5.	11,737,000	NHS Lothian on behalf of West Lothian IJB.
Acute Services	Adults with mental health problems have access to Acute Services e.g. A & E, Cardiology, General Medicine, Rehabilitation and Respiratory Medicine.		29,191,000	St John's Hospital.

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

SECTION 4: NEXT STEPS

The Adults’ Mental Health Commissioning Plan is designed to run for 3 years from 2016 /17 to 2018/19, at a time of considerable change in the commissioning environment within health and within social care. Decisions on the investment and disinvestment of resources will require to be made as the actions outlined below are progressed.

The Adults’ Mental Health Commissioning Plan will be reviewed annually and commissioning intentions developed each year in the form of an annual report which will summarise activity, progress and performance for the year.

DRAFT

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

	Area of Development	Actions	Timescale	Lead Officer
1.	Mental Health Redesign			
	Work Streams: 1. Psychiatry Input 2. Psychological Therapies 3. Transition Acute to Community 4. Development of Community Mental Health Team.	<ul style="list-style-type: none"> Psychiatry Input: <ul style="list-style-type: none"> How delivered Unscheduled care Balance psychiatrists / nurse-led practitioner. Psychological Therapies Talking Therapies: <ul style="list-style-type: none"> Talking Therapies - potential alternative prescribing Much more blended approach needed in West Lothian. Transition Acute to Community: <ul style="list-style-type: none"> Is balance right between in-patient and rehabilitation / community services? Pentland Court Community Outreach Team Acute Care and Support Team Day Services Lack of housing support. Development of a Community Mental Health Team: <ul style="list-style-type: none"> Based around - <ul style="list-style-type: none"> East / West clusters General practice clusters. 	09/2017	N Clater
2.	Stepped Model of Care			
	Briefer ‘Minimal Interventions’.	<ul style="list-style-type: none"> Embed distress relief in a wider group of staff Model in which distress becomes part of core work. 	09/2017	J McLean
3.	Housing , Supported Accommodation, Homelessness			
	Develop a range of supported accommodation housing models to enable adults with mental health problems to live within local communities.	<ul style="list-style-type: none"> Further develop the Joint Accommodation Strategy to ensure the need for supported accommodation developments is reflected Conduct a needs analysis of the housing needs of adults with mental health problems Map current housing provision for adults with mental health problems 	09/2017	D Murray

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

	Area of Development	Actions	Timescale	Lead Officer
		<ul style="list-style-type: none"> Identify gaps in current provision and how future housing needs might be delivered. Identify what support is required to help adults with mental health problems sustain tenancies. Conduct a needs analysis of homeless people with multiple and complex needs, who recycle through service provision at considerable costs, and where homelessness is a symptom of their mental health problems, rather than a root cause, thus requiring focussed mental health intervention to stop this cycle. 		
4.	Access to Information			
	Provide information about services and support for adults with mental health problems.	<ul style="list-style-type: none"> Provide a knowledge base resource that assists and enhances publics’ and staffs’ knowledge and awareness of adults’ mental health services and support. Structure the knowledge base according to customer needs, rather than internally driven schema. 	09/2017	D Murray
5.	Peer Support & Natural Networks			
	Adults with mental health problems are able to access their local community and have opportunities for socialisation and building friendships.	<ul style="list-style-type: none"> Maximise opportunities for people to integrate within their local communities Consult service users 	09/2017	D Murray
6.	Transitions Young People			
	Build on existing work to develop the transition experience of young people with mental health problems based on the ‘Principles of Good Transition’.	<ul style="list-style-type: none"> Understand the population demographics to inform planning Continue work between Social Work and Children’s Social Work services to ensure transition planning is commenced as early as possible to aid smooth transition Work with families as early as possible to raise awareness of opportunities and services at transition from children’s services Work with colleagues in Education and other areas to ensure co-ordinated transition 	09/2017	1 Lead TBC by AB

STRATEGIC COMMISSIONING PLAN – ADULTS' MENTAL HEALTH

	Area of Development	Actions	Timescale	Lead Officer
		<ul style="list-style-type: none"> Consider transition planning in terms of housing Consider a range of different transition models and approaches to support. 		
7.	Transition Adult to Older People's Services			
	Mental Health provision at the age of 65.	<ul style="list-style-type: none"> The following recommendation from the Older People's Commissioning Plan is considered to be in scope of this Adults' Mental Health Commissioning Plan: <ul style="list-style-type: none"> OP Rec 13- <i>The study has highlighted a significant gap in relation to specialist service provision (e.g. Depo Clinics) for older people (65+) who have severe and enduring mental health problems, since Mental Health provision stops at the age of 65. This requires urgent attention given increasing life expectancy of this particular demographic, as it will inevitably become an increasing demand on resources in the coming years.</i> <p>In relation to clients over the age of 65years who need depot medication or clozapine medication monitoring, there is a case for this being provided by Adult Mental Health Services. The volume of this demand, for over 65s, is unlikely to reach a critical mass level such as to justify old age psychiatry services allocating sufficient time and resource to deliver on the standards required, i.e. on long term condition monitoring, high dose monitoring, side effect monitoring or health checks, specific to this client group's needs. As these standards are being provided and developed in adult mental health services (due to the critical mass of need) it would be prudent for practical reasons to deliver this service for over 65s who need it through adult services. This being said, it does raise the wider question of differentiating service access by age rather than presenting need. For mental health services to be developed along a "needs led approach" this issue should be more fully explored and a policy decision reached. In this context, consideration should be given to issues of patients who are under 65years presenting with dementia and patients over 65years presenting with functional mental illnesses as well as those in need of depot or clozapine medication monitoring.</p>	09/2017	1 Lead TBC by AB

STRATEGIC COMMISSIONING PLAN – ADULTS’ MENTAL HEALTH

APPENDIX 1 - NATIONAL HEALTH & WELLBEING OUTCOMES & INTEGRATION OUTCOMES

Ref	Outcome
1	People are able to look after and improve their own health and wellbeing and live in good health for longer
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
3	People who use health and social care services have positive experiences of those services, and have their dignity respected
4	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services
5	Health and social care services contribute to reducing health inequalities
6	People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing
7	People who use health and social care services are safe from harm
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
9	Resources are used effectively and efficiently in the provision of health and social care Services

Integration Outcomes

Ref	Outcome
1	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
2	Resources are used effectively and efficiently in the provision of health and social care Services
3	People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing
4	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services

STRATEGIC COMMISSIONING PLAN – ADULTS' MENTAL HEALTH

APPENDIX 2 - PERFORMANCE INDICATORS

- 1 % of adults able to look after their health very well or quite well.
- 2 % of adults supported at home who agree that they are supported to live as independently as possible.
- 3 % of adults supported at home who agree that they had a say in how their help, care or support was provided.
- 4 % of adults supported at home who agree that their health and care services seemed to be well co-ordinated.
- 5 % of adults receiving any care or support who rate it as excellent or good
- 6 % of people with positive experience of care at their GP practice.
- 7 % of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life
- 8 % of carers who feel supported to continue in their caring role.
- 9 % of adults supported at home who agree they felt safe
- 10 % of staff who say they would recommend their workplace as a good place to work.

West Lothian Strategic Planning Group

Date:

Agenda Item: 6

LEARNING DISABILITY COMMISSIONING PLAN

REPORT BY DIRECTOR

A PURPOSE OF REPORT

To seek comments from the Strategic Planning Group in respect of the strategic commissioning plan for adults with a learning disability.

B RECOMMENDATION

To invite comments on the details of the strategic commissioning plan for adults with a learning disability (Appendix 1). A report on the strategic commissioning plan for adults with a learning disability will be presented to the IJB meeting on 18 October 2016 for approval.

C TERMS OF REPORT

At the meeting of 24 March 2016 the Integration Joint Board (IJB) approved its strategic plan which includes details of how high level outcomes are to be achieved through a process of strategic commissioning. The Strategic Plan also includes a commitment to develop a series of care group based commissioning plans.

These plans are based on an ANALYSE, PLAN, DO and REVIEW approach:

- Analyse: the process of needs assessment intended to identify the priority needs associated with the relevant care group
- Plan: the planning process that is informed by the needs assessment and identifies how priority needs are to be addressed including the deployment of resources and the performance management approach to be used to monitor progress
- Do: the implementation phase of the plan
- Review: the review of progress based on the agreed performance measures of the plan in conjunction with any significant changes in the environment

Recommendations from the needs assessment are derived from evidence gathered and analysed from the review of literature, surveys and fieldwork including study informants.

A short life Working Group was established to develop the three year commissioning plan. A draft plan has now been prepared and the Strategic Planning Group is invited to comment on this.

The intention is to present a final draft of the strategic commissioning plan for adults with a learning disability to the IJB meeting on 18 October 2016 for approval.

D CONSULTATION

- Strategic Planning Group
- Learning Disability Commissioning Plan Working Group with multi-agency representation
- Learning Disability Forum

E REFERENCES/BACKGROUND

- West Lothian Integration Joint Board meeting - 05 April 2016
- Scottish Government Guidance and Advice - <http://www.gov.scot/Topics/Health/Policy/Adult-Health-SocialCare-Integration/Implementation/ImplementationGuidance>

F APPENDICES

Draft of Learning Disability Commissioning Plan

G SUMMARY OF IMPLICATIONS

Equality/Health	The West Lothian Integration Joint Board Strategic Plan 2016-2026 was assessed as relevant to equality and the Public Sector Equality Duty. An equality impact assessment was conducted and reported to the IJB. The Strategic Plan provided direction for the development of the LD Commissioning Plan.
National Health and Wellbeing Outcomes	The commissioning plan addresses the relevant National Health and Well-Being Outcomes in accordance with the IJB Strategic Plan.
Strategic Plan Outcomes	The commissioning plan is aligned to relevant Strategic Plan outcomes and incorporates detailed performance indicators.
Single Outcome Agreement	The Strategic Plan outcomes are aligned to the Single Outcome Agreement outcomes related to health and social care.

Impact on other Lothian IJBs	The plan includes priorities identified for the redesign and modernisation of learning disability health services across Lothian. The redesign programme has implications for community delivery of LD services by each of the IJBs across Lothian.
Resource/finance	None
Policy/Legal	Public Bodies (Joint Working) (Scotland) Act 2014 and statutory regulations and guidance
Risk	<p>There is risk that resources associated with shifting the balance of care through the modernisation and redesign programme will be insufficient to enable full development of community provision by the IJB.</p> <p>There is risk of delay in developing community provision which would impact the number of people occupying hospital beds when they no longer need hospital care.</p> <p>The dependence of aspects of community development on agreement between NHS Lothian and other IJBs also presents risk.</p>

H CONTACT

Alan Bell, Senior Manager Community Care Support & Services
Alan.bell@westlothian.gov.uk
 Tel: 01506 281937

6 October 2016

Learning Disability Commissioning Plan

2016/17- 2018/19

The West Lothian Strategic Commissioning Plans for Adults with a Learning Disability sets out our strategic ambitions, priorities and next steps required for delivering integrated health and social care support and services for people with a learning disability and autism, their families and carers in West Lothian for the next three years.

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

FOREWORD

The West Lothian Strategic Commissioning Plans for Adults with Learning Disability and Autism (the **LD Plan**) sets out our strategic ambitions, priorities and next steps required to deliver integrated health and social care support and services for people, their families and carers in West Lothian for the three year period to 2018/19.

The Keys to Life 2013 explains that people with learning disabilities have ‘a significant, lifelong condition that started before adulthood, which affected their development and which means they need help to understand information; learn skills and cope independently’.

The West Lothian Autism Strategy 2015 – 25 describes Autism Spectrum Disorder (ASD) as a lifelong developmental condition. People with Autism usually have problems with social interaction, communication and may require repetitive or restrictive routines. Some people with ASD also have learning disabilities and need specialist support but others do not. The focus of this strategy is on people who have learning disability and ASD.

The LD Plan has been developed within the context of national and local policy taking into account the key principles and values which underpin the planning, commissioning and provision of services and support for people with a disability, and has been informed through consultation with key partners, service users and carers.

The LD Plan should be read in conjunction with:-

- West Lothian Integration Joint Board Strategic Plan 2016-26 (**Strategic Plan**)
- West Lothian Learning Disability and Autism Needs Assessment (**LD Needs Assessment**)
- West Lothian Autism Strategy 2015-25

It is acknowledged that it is difficult to view services and commissioning for care groups as distinct or isolated from one another. Consequently the LD Plan acknowledges crossover with other health and social care groups:

- Adults with physical disability
- Mental health
- Older people
- Substance misuse

Ensuring our services are well positioned to meet the needs of residents in West Lothian is key to achieving the outcomes we have set, and I will be reviewing progress against this LD plan on an annual basis, refining where necessary, as the Integration Board matures in our local ownership of the resources we have to spend on health and social care services.

COUNCILLOR FRANK TONER

CHAIR OF THE WEST LOTHIAN INTEGRATION JOINT BOARD

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

CONTENTS

Foreword	1
CONTENTS	2
Section 1: Overview	3
Section 2: Needs assessment recommendations	5
Section 3: Commissioning Priority Activities	8
Section 4: Next steps	14
Appendix 1 - National Health & Wellbeing Outcomes and integration Outcomes	18
Appendix 2 – Performance Indicators	19

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

SECTION 1: OVERVIEW

Who we are

The Public Bodies (Joint Working) (Scotland) Act 2014 requires arrangements to be put in place for the delivery of integrated health and social care. Local and joint commissioning of health and social care services will be built around the needs of patients and service users and managed through the West Lothian Integration Joint Board (IJB) who will in turn direct West Lothian Council or NHS Lothian to deliver services on its behalf.

Vision, values, aims and outcomes

The vision of the IJB Strategic Plan 2016-26 for West Lothian (Strategic Plan) is “to increase wellbeing and reduce health inequalities across all communities in West Lothian”. The plan describes the values and aims and commits the IJB to the delivery of the nine national and wellbeing outcomes for health and social as required by the Scottish Government.

The strategic plan covers the geographical area of West Lothian and in accordance with the legislation defines two localities across which health and social care services will be planned and delivered, the East and the West. The localities will provide a key mechanism for strong local, clinical, professional and community leadership, ensuring that services are planned and led locally in a way that is engaged with the community and contributing to effective strategic commissioning.

The case for change

- It is recognised nationally and locally that whilst the health and care needs of individuals are closely intertwined, the services put in place to meet these needs can be disjointed and not as co-ordinated as they could be.
- Combining the resources of both agencies within the integrated partnership will allow for greater exploration of efficiencies to ensure we can meet the main health and wellbeing challenges at a time when we also need to reduce costs.
- West Lothian has a faster than average population growth, an aging population and growing numbers of people living longer with disabilities, long term conditions and complex needs, all of which require us to ensure we have commissioned our health and social care services to meet our duty of Best Value but also to ensure our resources are targeted to achieve the greatest impact on those most in need.
- There is a programme of modernisation and redesign of learning disability services being led by the Lothian Learning Disability Collaboration will see a shift in care from hospital settings to the community across the Lothian IJBs.

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

OUR APPROACH

The IJB has committed to developing strategic commissioning plans for all adult care groups. These plans aim, over time, to incorporate the important role of informal, community capacity building and asset based approaches with the delivery of more effective preventative and anticipatory interventions, in order to optimise wellbeing and reduce unnecessary demand at the 'front door' of the formal health and social care system. Each commissioning plan will confirm the total resources available across health and social care and relate this information to the needs of the care group as determined by a local needs assessment and other relevant local or national strategies.

As a first stage in the development of a commissioning plan for adults with learning disability, independent specialists in research and evaluation of the health and social care sector were commissioned to carry out a comprehensive local needs assessment. The needs assessment process involved:

- analysis of data based on the population, including demographic trends, health status and risk
- wide consultation with the public through surveys, focus groups, etc.
- consideration of the views of professionals or experts
- benchmarking with other areas in Scotland

Following consultation through the Learning Disability Commissioning Working Group and the Learning Disability Forum, the resultant commissioning plan for adults with learning disability will:

- reflect needs and plans as articulated at a local level for West Lothian
- confirm the desired outcomes and link investment to them
- detail what services will be delivered against outcomes and the associated performance indicators
- prioritise investment and disinvestment in line with assessed needs
- ensure that resource deployment and performance is consistent with the duty of best value
- ensure that sound clinical and care governance is delivered

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

SECTION 2: NEEDS ASSESSMENT RECOMMENDATIONS

The Needs Assessment made 17 recommendations. The recommendations have been mapped against the National Health and Wellbeing Outcomes (detailed in Appendix 1) and then referenced against other strategic plans in order to evaluate whether the recommendation will be delivered through other routes or included for delivery as part of our commissioning cycle in this LD plan.

Ref	Recommendation	National Health & Wellbeing Outcomes									In Scope LD Plan	Out of Scope LD Plan	Existing Strategies/Policies						
		1	2	3	4	5	6	7	8	9			IJB Strategic Plan	WL Engagement Strategy	WL Autism Strategy	Transport Strategy	Reshaping Children's Services	Housing Strategy	Workforce Development Plan
1	An integrated Health & Social Care Learning Disability Strategy should be developed with a broad range of stakeholders. The strategy should be inclusive of people who have both autism and a learning disability, and should be cross-referenced to the existing 2015 Autism Strategy for West Lothian				✓							✓	✓	✓	✓				
2	An integrated Health and Social Care Autism Implementation/Action Plan should be developed, in order to fully operationalise the existing 2015 Strategy				✓							✓			✓				
3	A full Communications Strategy, with one work stream targeted at professionals and one work stream targeted at service users and their families/carers to be developed to support the strategy				✓							✓	✓	✓					
4	The development of strategy must include transport provision to and from services, as well as access to community activity and work				✓							✓				✓			

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

Ref	Recommendation	National Health & Wellbeing Outcomes									In Scope LD Plan	Out of Scope LD Plan	Existing Strategies/Policies						
		1	2	3	4	5	6	7	8	9			IJB Strategic Plan	WL Engagement Strategy	WL Autism Strategy	Transport Strategy	Reshaping Children's Services	Housing Strategy	Workforce Development Plan
5	Commissioners are encouraged to consider reviewing and strengthening the availability and profile of transition services within West Lothian		✓	✓	✓						Part	Part			✓		✓		
6	Commissioners should review the pattern of service provision and contracting for people with learning disability aged 55+ to ensure that it strengthens the co-ordination of care and effective partnership working and communication and provides appropriate care and end of life provision		✓								✓								
7	Future joint planning for services needs to take account of research into prevalence, the local knowledge of each known person, whilst at the same time seeking as much information about 'hidden' populations					✓						✓	✓						
8	A housing strategy for people with a learning disability is developed in collaboration with housing strategy and community planning partners		✓									✓						✓	
9	The West Lothian Partnership should work with the local Housing Strategy Group to seek opportunities which will provide core and cluster for permanent living and a resource for short breaks which can be purchased on a flexible basis for others (for example, older people, people with sensory needs)		✓								✓								
10	Commissioning strategies and plans should be reviewed in respect of daytime opportunities				✓	✓					✓								
11	Construct an integrated working guide involving learning disability and autism services and mainstream service provision in housing, health care and other relevant services (e.g. criminal justice)								✓	✓		✓	✓						

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

Ref	Recommendation	National Health & Wellbeing Outcomes									In Scope LD Plan	Out of Scope LD Plan	Existing Strategies/Policies						
		1	2	3	4	5	6	7	8	9			IJB Strategic Plan	WL Engagement Strategy	WL Autism Strategy	Transport Strategy	Reshaping Children's Services	Housing Strategy	Workforce Development Plan
12	Respite services and short break opportunities need to be further developed to be more responsive to the needs of an ever changing population including ensuring that staff and parents/carers understand what services are available and how to appropriately refer and access						✓		✓		✓								
13	Support for all staff in SDS development is essential to progress. A stronger message of the SDS approach being the mainstream approach and there being no choice in its use would be beneficial. Commissioning plan should focus on the market development aspect of SDS					✓			✓		Part	Part							✓
14	West Lothian CHCP needs to continue being a full partner in the pan-Lothian plan regarding provision for those people with a learning disability who have complex needs		✓					✓			✓								
15	Enhance the role and availability of the third sector and peer support services and networks to support integrated care and outcomes for people.				✓	✓					✓								
16	Consideration should be given to developing a clear framework for how service users and their families/carers could and should be involved in the delivery, development and commissioning of learning disability services				✓	✓						✓		✓					
17	There is a clear need for a comprehensive training needs analysis to inform the development of a long-term programme of workforce development opportunities								✓			✓							✓

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

SECTION 3: COMMISSIONING PRIORITY ACTIVITIES

This section details the specific recommendations which have been captured from the needs assessment and the strategic plan, and provides information on the current or planned spend to meet these priorities in relation to the integration outcomes. In addition to these recommendations, all other existing services and resources which are allocated to provide health and care for the learning disability and autism care groups will continue to be provided as is, and finally, the whole population universal health services which all residents of West Lothian have access to are provided to show the full picture of the resources available.

Ref	Needs Assessment Recommendation / Commissioning Priority(CP)	Integration Outcomes (Appendix 1)	Activity Name	Description	Indicators (Appendix 2)	Planned 2016 / 17 spend (£)	Provider
West Lothian Learning Disabilities Needs Assessment (2015)							
5	Commissioners are encouraged to consider reviewing and strengthening the availability and profile of transition services within West Lothian	1, 2, 4	Transition	Support from a range of partners to enable young people and their families to make choices about the future. The focus of the plan is on ensuring good planning when moving from children's to adults' social work services, especially for children with complex needs.	2,3	Expenditure crosses over a number of the services costed in the sections below	HSCP Assessment and Care Management Team, Residential & Nursing Care Providers (internal & external) and external providers of community support and care (Note, there is £2,054,000 planned expenditure from children's to adult services over the next 4 years).
6	Commissioners should review the pattern of service provision and contracting for those with learning disabilities who are over 55 to ensure that it strengthens the co-ordination of care and effective partnership working and communication and provides appropriate care and end of life provision	1,4	Services for older adults	Supporting people with learning disability and autism to live well through old age with support appropriate to their needs.	2,3,4	Review will consider existing patterns of expenditure within adult health and social care budgets	A range of residential and nursing care providers and community support providers mainly from the third and independent sectors

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

Ref	Needs Assessment Recommendation / Commissioning Priority(CP)	Integration Outcomes (Appendix 1)	Activity Name	Description	Indicators (Appendix 2)	Planned 2016 / 17 spend (£)	Provider
9	The West Lothian Partnership should work with the local Housing Strategy Group to seek opportunities which will provide core and cluster accommodation for permanent living	1	Core and Cluster	Core and cluster living normally involves people with more complex needs living in individual flats or houses within a block which are overseen by residential or visiting support staff.	2,7	Planned development with budget to be determined	WLC Housing Stock. New developments in Blackburn and Kirkhill with further opportunities being explored.
10	Commissioning strategies and plans should be reviewed in respect of daytime opportunities	2,4	Daytime Opportunities	The provision of a range of day time opportunities which are community based to enable people to take part in meaningful activities and have an opportunity to socialise.	5,7	£2,385,793	Community Inclusion Team, Pathways, Eliburn, An Carina Day Centre contract with RLO, Enable Club
12	Respite services and short break opportunities need to be further developed to be more responsive to the needs of an ever changing population including ensuring that staff and parents/carers understand what services are available and how to appropriately refer and access	3	Respite and Short Breaks	Enables carers caring for a family member, partner or friend to take a break in a variety of ways giving both the carer, and person cared for, positive outcomes	3,7,8	£439,428	Leonard Cheshire, Letham Court, and other individual respite arrangements including out of area.
13	Support for all staff in SDS development is essential to progress. A stronger message of the SDS approach being the mainstream approach and there being no choice in its use would be beneficial. Commissioning plan should focus on market development	4	Self-Directed Support	Self-directed Support allows people, their carers and their families to make informed choices on what their support looks like and how it is delivered, making it possible to meet agreed personal outcomes.	10	Expenditure is currently included within a range of budgets	HSCP

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

Ref	Needs Assessment Recommendation / Commissioning Priority(CP)	Integration Outcomes (Appendix 1)	Activity Name	Description	Indicators (Appendix 2)	Planned 2016 / 17 spend (£)	Provider
14	West Lothian HSCP need to continue being a full partner in the pan-Lothian plan regarding provision for those people with a learning disability who have complex needs	1,2,3	Complex Care Provision	Development of a Lothian-wide community housing resource with integrated support for people with complex needs associated with challenging behaviour. Consider an additional resource for West Lothian for people with slightly less complex needs.	2,3,4,5,7	Future development with budget to be determined	NHS/Lothian IJBs
15	Enhance the role and availability of the third sector and peer support services and networks to support integrated care and outcomes for people.	4	Natural networks and supports	A range of services which enable people to engage with and feel part of their local community with the same opportunities as everyone else	7	£60,000	Voluntary Sector Gateway West Lothian Befriending Service
West Lothian IJB Strategic Plan – Learning Disability Commissioning Priorities (CP)							
CP 1	Revised programme to ensure that screening and management of long term conditions is delivered for patients on the Learning Disability register to the same standards, quality and accessibility as the rest of the general practice population	4	Scottish Enhanced Services Programme (GP Contracts)	National screening programme supported by joint annual reviews with the West Lothian Community Learning Disability Team	1,5	National Screening Programme budget	HSCP/NHS Lothian
CP 2	Through a Lothians based partnership, explore the most effective arrangements for meeting the growing needs of individuals with learning disability and complex care needs (see Recommendation 14 in section above)	1,2,3	Complex Care	See recommendation 14 above	2,3,4,5,7	Future development with budget to be determined	To be determined

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

Ref	Needs Assessment Recommendation / Commissioning Priority(CP)	Integration Outcomes (Appendix 1)	Activity Name	Description	Indicators (Appendix 2)	Planned 2016 / 17 spend (£)	Provider
CP 3	Development of Information Sharing Protocol with Carers' of West Lothian to facilitate early provision of information, advice and support.	3	Support for Carers	Information and advice support service for carers	8	See Physical Disability Commissioning Plan	Carers of West Lothian Capability Scotland Disability Information and Advice Service for West Lothian
CP 4	Future development of services for people with ASD based on a partnership approach, which is systematic, evidence based and sustainable.	1,2,3,4	Services for Autism Spectrum Disorders (ASD)	Development of support services and community capacity to support people with ASD	1,2,3,4,5,7,9	£1,174,788	Autism Assessment Team and Autism Support, Autism Initiatives, One Stop Shop Funding
CP 5	Explore the development of a Social Enterprise to develop people's employability with the potential to develop employment opportunities within the project itself	4	Employability and Lifelong Learning	A social enterprise is a business whose main objective is to achieve social impact rather than generate profit. Any surplus made is normally reinvested in the enterprise to meet social goals.	2,7	£495,400	LD Independence Team and Project Search are included in the Independence Team

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

Activity Name	Activity Description	Indicators (Appendix 2)	Planned 2016/ 17 spend (£)	Provider
Summary of Expenditure of Services and Support for People with LD and/or Autism				
Social care assessment and care management	The Social Policy Learning Disability and ASD Assessment and Care Management Teams are responsible for conducting needs-led assessments for adults with learning disability/ASD and for developing appropriate care and support plans in response to identified eligible need. This includes palliative care.	2,3,4,5,7,8	£409,965	WLC Social Work Assessment and Care Management Team
Residential and Nursing Care	If an individual's assessed care and support needs cannot be safely and appropriately met within their own home, then a long-term residential placement with 24 hour care services and support may be appropriate. Residential and Nursing Care Home placements are provided mainly by the third sector.	4,5,7,9	£4,055,775	Residential or nursing homes commissioned as individual placements following assessment from independent providers. Includes Deans House Transition Service and small element of respite at Burnside Block contracts with Community Integrated Care and Real Life Options
Direct Payments	For people assessed as eligible for social care services and support and who have chosen SDS Option 1 (Cash payment as an alternative to direct service) provision	1,2,3,4,5,7	£646,119	Individual service users received payment
Specialist Care and Support in the Community	The aim of our specialist framework is for care and support to be delivered to adults with a disability in a way that promotes and maximises independence. The providers will provide specialist support to assist with personal care and support, with daily living, domestic tasks and activities to support social inclusion.	2,3,5,7	£4,080,082	Various specialist providers as per the Specialist Care Framework. The contract is in place until 31 December 2018. Also includes community autism support
External Transport	Payment of transport costs enabling people to access services and support	2,4,5,7,9	£840,000	Contribution towards WLC fleet and transport costs
Independent Advocacy	Independent Advocacy Services	3	£35,000	EARS Advocacy contract from 1/12/15 for 3 years Additional funding through NHS Hosted Services (£29,948)

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

Activity Name	Activity Description	Indicators (Appendix 2)	Planned 2016/ 17 spend (£)	Provider
General Income	Income from a variety of sources offset against expenditure		-£134,374	
DEDICATED BUDGET FOR LEARNING DISABILITIES			£14,487,976	
Universal Health Services Available to All Residents in West Lothian (Total budget)				
Core Health Services	People with learning disability have access to Core Health Services including Community Hospitals, District Nursing, Community AHP's and Prescribing	1,5,6,7,9	69,271,000	West Lothian GPs, District and Community nurses and Allied Health Professionals (AHPs) and Prescribing
Hosted LD Health Services	Health services hosted on behalf of the West Lothian Integration Joint Board and specifically for people with a learning disability	1,5	3,290,000	NHS Lothian on behalf of West Lothian IJB
Hosted Health Services	People with a learning disability have access to Hosted Health Services e.g. Sexual Health, Oral Health Services, and Public Health services	1,5	11,737,000	NHS Lothian on behalf of West Lothian IJB
Acute Services	People with a learning disability have access to Acute Services e.g. A & E, Cardiology, General Medicine, Rehabilitation and Respiratory Medicine		29,191,000	St John's Hospital

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

SECTION 4: NEXT STEPS

The LD Commissioning Plan is designed to run for 3 years from 2016 /17 to 2018/19, at a time of considerable change in the commissioning environment within health and within social care. Some of the priorities outlined in the plan have an end date beyond the life of the commissioning plan as they are linked to developments with a longer timescale. Decision on the investment and disinvestment of resources will require to be made as the actions outlined below are progressed.

A comprehensive action plan will support the development of services for people with learning disability and autism and will incorporate the priorities contained in this commissioning plan, recommendations outlined in the Keys to Life and developments arising from the Lothian Modernisation and Redesign Programme. Progress will be monitored via the West Lothian Learning Disability Joint Management Group.

The LD Commissioning Plan will be reviewed annually, and commissioning intentions developed each year in the form of an annual report which will summarise activity, progress and performance for the year.

	Area of Development	Actions	Timescale	Lead Officer
1.	Transition			
	Build on existing work to develop the transition experience of people with a learning disability and autism based on the 'Principles of Good Transition'	<ul style="list-style-type: none"> • Understand the population demographics to inform planning • Continue work between Social Work and Children's Social Work services to ensure transition planning is commenced as early as possible to aid smooth transition • Work with families as early as possible to raise awareness of opportunities and services at transition from children's services • Work with colleagues in Education and other areas to ensure co-ordinated transition • Consider transition planning in terms of housing • Consider a range of different transition models and approaches to support • Link with the Autism Strategy Group on transition developments • Consider the Graduate Work Experience programme to assist with research 	2016 to 2018	Tim Ward/Pamela Main

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

	Area of Development	Actions	Timescale	Lead Officer
2.	Service Provision for People aged 55+			
	Conduct a review of service provision for people for people aged 55+ with a learning disability	<ul style="list-style-type: none"> Identify current population aged 55+ and map the services received Have regard to housing and day provision for those aged 55+ Consider transition planning Identify gaps in provision Map end of life provision and how it is delivered Identify proposals for service development where appropriate based on the review Consider the recommendations of NHS Health Scotland's National Group on Dementia and Equality 	2016	Yvonne Lawton
3.	Develop 'core' housing models			
	Develop a range of 'core' housing models to enable people with learning disability to live within local communities	<ul style="list-style-type: none"> Complete 'core' developments at Blackburn and Kirkhill Ensure future demand for 'core' housing is reflected in the Housing Strategy Contribute to the WL Joint Accommodation Strategy to ensure the need for 'core' developments is reflected Identify gaps in current provision and how future housing needs might be delivered 	2016	Pamela Main
4.	Review Day Time Activities			
	Conduct a review of day time activities for adults with a learning disability	<ul style="list-style-type: none"> Review provision and uptake of day services Consider impact of SDS on day provision and the options people have for greater choice over how individual budgets are utilised Use the findings of the review to inform future developments 	2016 – 2018	Pamela Main
5.	Respite			
	Review respite and short break provision	<ul style="list-style-type: none"> Review Letham Court contract Incorporate views of people with PMLD currently using Murraypark in the planning process Identify an alternative to Murraypark for people with Profound and Multiple Learning Disability Ensure respite and short break opportunities meet the needs of service users, families and carers Ensure information is available to families and carers and that referral routes are clear Ensure plans incorporate a vision for future respite arrangements 	2016 -2019	Pamela Main
6.	Self-directed Support			
	Focus on market development to ensure people have access to opportunities which enable personal outcomes to be met	<ul style="list-style-type: none"> Ensure assessment and care managers are involved in shaping market development Ensure service users and carers have a say in how future provision should be developed and the opportunities they would like to see available Consider community capacity building and how barriers to mainstream opportunities can be removed 	2016 -2019	Pamela Main/Jill Derby

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

	Area of Development	Actions	Timescale	Lead Officer
7.	Complex Needs Related to Challenging Behaviour			
	Development of resources for people from West Lothian whose needs require a high level of support	<ul style="list-style-type: none"> Continue to engage with NHS Lothian and IJBs regarding the development of a Lothian-wide resource for people with very complex care needs related to challenging behaviour Consider the development of a West Lothian resource to allow people with care needs related to challenging behaviour to remain in West Lothian Ensure that the vision for LD accommodation includes provision for people with complex needs related to challenging behaviour and is reflected in the WL Joint Accommodation Strategy Consider how enhanced local support for people with challenging behaviour might be delivered 	2016 - 2020	Rona Laskowski
8.	Peer Support and Natural Networks			
	People with a learning disability are able to access their local community and have opportunities for socialisation and building friendships	<ul style="list-style-type: none"> Review the Service Level Agreement with the Voluntary Sector Gateway for the West Lothian Befriending Service Use the outcome of the review to inform future planning and consult service users Maximise opportunities for people to integrate within their local communities 	2016 - 2017	Yvonne Lawton
9.	Health Screening			
	Promote the uptake of population wide health screening	<ul style="list-style-type: none"> Evaluate 'Strengthening the Commitment' project which delivered training on the national screening programme for support workers to encourage uptake Link with the West Lothian LD Health Inequality Planning Group to determine future actions required to promote the screening programme Develop screening tracking system for individuals Use learning from the Health Equality Framework to improve uptake of screening and to inform service development more generally 	2016-2017	Mairead Hughes/Martha Knox
10.	Access to Information			
	People have access to the information they need, when they need it and in an appropriate format.	<ul style="list-style-type: none"> Ensure appropriate arrangements are in place for carers of people with a learning disability to access information from Carers of West Lothian and the Capability Scotland Information and Advice Service for West Lothian Link with developments being pursued through the Physical Disability Commissioning Plan 	2016 - 2018	Yvonne Lawton/Lesley Broadley
11.	Development of Services for People with ASD			
	Services are developed for people with ASD as set out in the Community Planning Partnership's Autism Strategy	<ul style="list-style-type: none"> Ensure appropriate links are in place to the Autism Strategy Steering Group Ensure planning for future accommodation based services takes account of the needs of people with ASD and needs are incorporated into the WL Joint Accommodation Strategy 	2016 to 2025	Robin Allen

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

	Area of Development	Actions	Timescale	Lead Officer
12.	Social Enterprise and Employment Opportunities			
	People with learning disability and ASD have access to a range of employment opportunities and are supported by clear routes of progression	<ul style="list-style-type: none"> • Explore the possibility of developing a local social enterprise • Review the learning from the implementation of Project Search to assess impact on employment opportunities • Further explore the opportunity to enhance employment opportunities through a combined approach to employment support services whilst considering the wide range of supports available 	2016 -2018	Pamela Main

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

APPENDIX 1 - NATIONAL HEALTH & WELLBEING OUTCOMES AND INTEGRATION OUTCOMES

Ref	Outcome
1	People are able to look after and improve their own health and wellbeing and live in good health for longer
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
3	People who use health and social care services have positive experiences of those services, and have their dignity respected
4	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services
5	Health and social care services contribute to reducing health inequalities
6	People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing
7	People who use health and social care services are safe from harm
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
9	Resources are used effectively and efficiently in the provision of health and social care Services

Integration Outcomes

Ref	Outcome
1	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
2	Resources are used effectively and efficiently in the provision of health and social care Services
3	People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing
4	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services

STRATEGIC COMMISSIONING PLAN – ADULTS WITH LEARNING DISABILITY

APPENDIX 2 - PERFORMANCE INDICATORS

- 1** % of adults able to look after their health very well or quite well.
- 2** % of adults supported at home who agree that they are supported to live as independently as possible.
- 3** % of adults supported at home who agree that they had a say in how their help, care or support was provided.
- 4** % of adults supported at home who agree that their health and care services seemed to be well co-ordinated.
- 5** % of adults receiving any care or support who rate it as excellent or good
- 6** % of people with positive experience of care at their GP practice.
- 7** % of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life
- 8** % of carers who feel supported to continue in their caring role.
- 9** % of adults supported at home who agree they felt safe
- 10** % of staff who say they would recommend their workplace as a good place to work.

WEST LOTHIAN STRATEGIC PLANNING GROUP

Date: October 2016

Agenda Item: 7

PERFORMANCE REPORT

REPORT BY DIRECTOR

A PURPOSE OF REPORT

The purpose of this report is to provide the current performance report to the Strategic Planning Group on the indicators supporting the National Health and Wellbeing Outcomes

B RECOMMENDATION

. The Strategic Planning Group is asked to

- 1. Note the contents of the report*
- 2. Note the current performance report for the National Health and Wellbeing Outcomes*
- 3. Discuss the usefulness of the indicators to report progress and in identifying areas for improvement*
- 4. Discuss the data requirements to support local performance and to provide a broader picture and context for West Lothian which will support the development of the Annual Report*

C TERMS OF REPORT

The national health and wellbeing outcomes apply across all integrated health and social care services, ensuring that Health Boards, Local Authorities and Integration Authorities are clear about their shared priorities by bringing together responsibility and accountability for their delivery.

The National Health and Well Being Framework states health and social care services should focus on the needs of the individual to promote their health and wellbeing, and in particular, to enable people to live healthier lives in their community.

Key to this is that people's experience of health and social care services and their impact is positive; that they are able to shape the care and support that they receive; and that people using services, whether health or social care, can expect a quality service regardless of where they live.

Each Integration Authority will be required to publish an annual performance Report, which will set out how the national health and wellbeing outcomes are being improved. This will include reports on a core suite of indicators and measures, identified by the integration authority in line with guidance from the Scottish Government, and contextualising data to provide a broader picture and a rationale of local performance.

The core suite of indicators developed to support integration of health and social care has been designed to allow comparison between areas and to look at improvement over time. They are based on both administrative data and survey feedback. Although the indicators will not be subject to national set targets it is anticipated that improvement aims will be set at a local level where appropriate.

The current West Lothian performance is summarised in Appendix 1. The performance as reported is currently provisional as some of the datasets are still in development and will improve over time and that some of them still require data development. It is also noted that there is variance in the hospital admission and end of life care information from that previously published which is due to the inclusion of mental health data.

Whilst there has been a lot of work in agreeing the current set of indicators nationally consideration needs to be given to how useful they are for reporting progress and identifying areas for improvement to support strategic planning.

As outlined in the Strategic Plan the framework for our strategic measurement and management system will be based on a balanced scorecard approach. The scorecard will measure organisational performance across four balanced perspectives:

- Financial & Business: effective resource use
- Customer: Positive experiences and outcomes; carers are supported
- Internal Processes: Healthier Living; Independent living; Services are safe
- Learning and Growth: Engaged and developed workforce

Consideration needs to be given to the additional local measures which will form the basis of the scorecard.

Benchmarking is an important aspect of monitoring performance and defining improvement activity. In line with the current Local Government Benchmarking Network it is proposed that the IJB adopt the same benchmarking family of Clackmannan; Dumfries & Galloway; Falkirk; Fife; Renfrewshire; South Ayrshire and South Lanarkshire.

Better data sharing across health and social care will play a key role in the integration agenda. As an IJB we will need to be able to assess and forecast need, link investment to outcomes, consider options for alternative interventions and plan for the range, nature and quality of future services. Work is underway with the Local Intelligence Support Team to complete detailed analysis and assessment of current service impacts and to forecast future needs which will in turn help to inform both the locality and strategic plans.

Areas for Improvement

The results from the Health and Care Experience Survey 2015 suggest areas for improvement with regard to:

- Experience of care provided by General Practice,
- Impact of services and support on improving or maintaining quality of life
- Support for carers to continue in their caring role.

Further analysis of the survey results is in progress to provide a better understanding of the issues and where interventions should be targeted to improve on these outcomes.

Whilst the provisional data demonstrates that West Lothian is on par or better than Scottish average there are known challenges with regards to unscheduled care and reducing delayed discharge for which there is focussed improvement work in progress.

D CONSULTATION

The core suite of indicators are defined against the National Health and Wellbeing Outcomes

The indicators have been discussed and agreed with the Lothian Dataset Group with representation from the four Lothian IJBs.

E REFERENCES/BACKGROUND

- Public Bodies (Joint Working) (Scotland) Act 2014, and related statutory instruments and guidance
- Scottish Government Guidance and Advice - National Health and Wellbeing Outcomes: A framework for improving the planning and delivery of integrated health and social care services (February 2015)
- [West Lothian IJB Strategic Plan 2016-2026](#)

F APPENDICES

1. Summary Performance National Health and Wellbeing Indicators September 2016

G SUMMARY OF IMPLICATIONS

Equality/Health	The report has been assessed as having little or no relevance with regard to equality or the Public Sector Equality Duty. As a result, equality impact assessment has not been conducted.
National Health and Wellbeing Outcomes	All National Health and Well Being Outcomes
Strategic Plan Outcomes	Underpins all Strategic Plan Outcomes
Single Outcome Agreement	We live longer healthier lives and have reduced health inequalities Older people are able to live independently in the community with an improved quality of life
Impact on other Lothian IJBs	Development of core Lothian Dataset
Resource/finance	Within available resources
Policy/Legal	Public Bodies (Joint Working) (Scotland) Act 2014 and statutory regulations and guidance
Risk	None

H CONTACT

Contact Person:
Carol Bebbington, Senior Manager Primary Care & Business Support
<mailto:carol.bebbington@nhslothian.scot.nhs.uk>

Tel 01506 281017

28th September 2016

Appendix 1: Health and Social Care Integration - Core Suite of Integration Indicators

Outcome Indicators

	Indicator	Title	Current score	Scotland
Outcome indicators	NI - 1	Percentage of adults able to look after their health very well or quite well (Health and Care experience Survey 2015)	94%	94%
	NI - 2	Percentage of adults supported at home who agreed that they are supported to live as independently as possible (Health and Care experience Survey 2015)	85%	84%
	NI - 3	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided (Health and Care experience Survey 2015)	79%	79%
	NI - 4	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated (Health and Care experience Survey 2015)	81%	76%
	NI - 5	Total % of adults receiving any care or support who rated it as excellent or good (Health and Care experience Survey 2015)	83%	82%
	NI - 6	Percentage of people with positive experience of the care provided by their GP practice (Health and Care experience Survey 2015)	80%	87%
	NI - 7	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life (Health and Care experience Survey 2015)	80%	85%
	NI - 8	Total combined % carers who feel supported to continue in their caring role (Health and Care experience Survey 2015)	38%	43%
	NI - 9	Percentage of adults supported at home who agreed they felt safe (Health and Care experience Survey 2015)	85%	85%
	NI - 10	Percentage of staff who say they would recommend their workplace as a good place to work	NA	NA

The results from the Health and Care Experience Survey 2015 suggest areas for improvement with regard to:

- Experience of care provided by General Practice,
- Impact of services and support on improving or maintaining quality of life
- Support for carers to continue in their caring role.

Further analysis of the survey results is in progress to provide a better understanding of the issues and where interventions should be targeted to improve on these outcomes.

Indicator 10 is in development and local staff surveys will now incorporate this question.

Data Indicators: Provisional

Data indicators	NI - 11	Premature mortality rate per 100,000 persons	402	441
	NI - 12	Emergency admission rate (per 100,000 population)	11,712	11,865
	NI - 13	Emergency bed day rate (per 100,000 population)	89,283	112,091
	NI - 14	Readmission to hospital within 28 days (per 1,000 population)	93	94
	NI - 15	Proportion of last 6 months of life spent at home or in a community setting	86%	86%
	NI - 16	Falls rate per 1,000 population aged 65+	21	20
	NI - 17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections (WLC Information)	100%	NA
	NI - 18	Percentage of adults with intensive care needs receiving care at home	70%	61%
	NI - 19	Number of days people spend in hospital when they are ready to be discharged (per 1,000 population)	624	1,044
	NI - 20	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency	20%	22%
	NI - 21	Percentage of people admitted to hospital from home during the year, who are discharged to a care home	NA	NA
	NI - 22	Percentage of people who are discharged from hospital within 72 hours of being ready	NA	NA
	NI - 23	Expenditure on end of life care, cost in last 6 months per death	NA	NA

- Mortality data is up to calendar year ending 31 December 2015.
- Hospital data is up to 2014/15.
- Care Inspectorate data is local information only

Time lines for future data releases include

- Hospital based data for 2015/16 and will be available by the end of November 2016.
- Quarterly data for 2016/17 will be available from January/February 2017 this will present the first quarter only, for hospital based data.

Outputs will be produced with information at locality level in due course.

Date of SPG meeting	Title of Report	Lead Officer	Action
6 October 2016			
	Commissioning Plans for Adults with Learning Disabilities	Alan Bell	
	Commissioning Plans for Adults with Mental Health Problems	Alan Bell	
	Six monthly review of performance	Alan Bell	
17 November 2016			
	Lothian's Hospital Plan	Colin Briggs/Jacqui Campbell	
	Commissioning Plan for Older People	Alan Bell	
	Risk Register Review	Alan Bell	
	Locality Group Update	Jane Kellock/Marion Barton	
	NHS Lothian Oral Health Strategy	Robert Naysmith	Work on the Oral Health Strategy is being led by the South East and Tayside (SEAT) Dental Public Health Network. RN will advise if paper will be available for this meeting.
19 January 2017			
2 March 2017			

WORKPLAN FOR WEST LoTHIAN STRATEGIC PLANNING GROUP 2016-17

	Strategic Plan Annual Review		
	Annual review of performance		