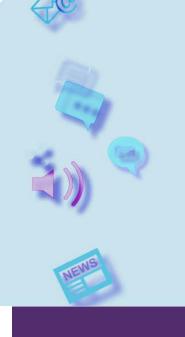


Flourishing Communities, Healthier Lives

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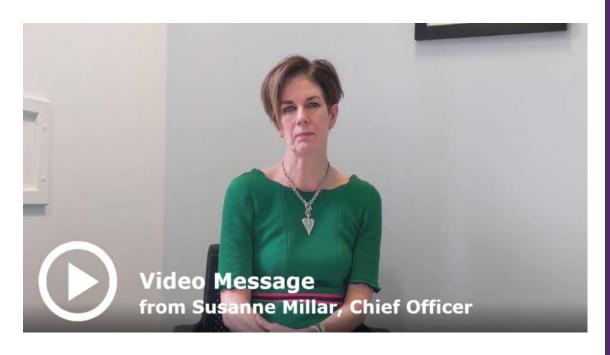


March/April 2022

Welcome to Glasgow City HSCP's 'Partnership Matters' briefing, to keep you more up to date with some of what's happening across our HSCP with partners. <u>Current and past briefings</u> continue to be available on our HSCP's website, and they can be accessed from work and personal ICT devices. We hope that you find our briefing useful. Any comments or suggestions for future topics are welcome, and they can be shared by contacting us at <u>GCHSCP_Communications@glasgow.gov.uk</u>.

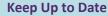
Video Message from Susanne Millar

In this issue of the Partnership Matters Briefing, our HSCP's Chief Officer Susanne Millar catches up with us in a video. Susanne marks the two-year anniversary of the first COVID-19 lockdown in 2020 and talks about the easing of COVID-19 restrictions in Scotland. She also thanks staff for their efforts and resilience during these challenging times and encourages them to take time to reflect and reach out if they're struggling. View Susanne's video message.



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Visit our website **glasgowcity.hscp.scot** or follow us on Twitter **@GCHSCP** to find out more about what we're doing for health and social care in Glasgow City.



HSCP Complex Needs Service Launched in Glasgow

Glasgow City Health and Social Care Partnership (HSCP) launched its innovative Complex Needs Service on 14 March 2022. Complex Needs is a brand new model that will provide a specialist, highly personalised service for individuals presenting with multiple and complex health and social care needs who aren't able to engage with mainstream services in Glasgow. The Complex Needs Service will be the interface between Homelessness, Alcohol and Drug Recovery Services, Mental Health and Justice Services in Glasgow City.

The move to the Complex Needs Service comes after the Homeless and Asylum Health Service were required to quickly adapt to the challenges from the Coronavirus (COVID-19) pandemic.

An assertive outreach model was established within the Homeless and Asylum Health Services; moving away from the clinic-based approach and significantly reducing the footfall through Hunter Street. Due to the level of risk and complexity of the client group, face-to-face contact was increased during the COVID-19 pandemic and a Red Amber Green (RAG) system was established to ensure that appropriate assessment and response time were in place in relation to level of individual risk.

In addition, in 2020 over 600 newly homeless people were accommodated in hotels while dealing with ongoing pressures in finding homes for asylum seekers. The team also established a daily health care clinic including a response to complex wound care and a new patient clinic offering same-day access to assessment and treatment. The team delivered over 200 flu vaccinations, over 300 Naloxone supplies and 300 pay as you go mobile phones to service users.

A COVID-19 vaccination programme was also delivered, in conjunction with commissioned services, across 50 homelessness and asylum accommodation sites. This resulted in over 550 first dose vaccinations with a further schedule of over 370 second doses vaccinations administered equating to over 70% second doses captured.

Throughout the pandemic, it was recognised that the response by the Homeless and Asylum Health Services to this high-risk population achieved positive and sustainable outcomes with increased engagement, service retention and a significant decrease in risk.

The Complex Needs Service will now replace the Homeless Health Service model, including criteria, and moving forward the service will focus on complexity and risk rather than homelessness status alone. The new model has been complimented with increased resource resulting in a team of around 55 highly dedicated and committed staff.

The new complex needs service model will continue to listen to the views and experience from individuals with lived experience, which will help shape supports and future developments.

A workforce implementation plan has already been completed, which has amalgamated the separate teams into a single intradisciplinary team, offering improved wrap-around care for service users.

Pat Togher, Assistant Chief Officer Public Protection and Complex Needs, said: "The new Complex Needs Service has evolved during a period of unprecedented challenges associated with the Public Health emergency. The team have demonstrated resilience, commitment and the skill set necessary to support those presenting with multiple and complex care needs. This service will remain under



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review with key partners participation including those with lived experience ensuring a culture of continuous improvement. We look forward to reporting on the impact of this service and would like to thank the team for all their efforts ensuring complex care support remain accessible to those who require it."

To find out more about Complex Needs please email lisa.ross@ggc.scot.nhs.uk

Single Point of Access (SPoA)

Glasgow City Health and Social Care Partnership (HSCP) provides a range of health and social work services which have their own processes for how people access them. We have acknowledged that it can be confusing for the public and other agencies, and even staff, to know how to access individual services.

One of the main routes into the HSCP is via Social Care Direct.

We carried out a review of Social Care Direct in 2019 and identified ways of improving these arrangements. We also held a range of consultation sessions with health and social care managers to identify all the different ways people access a service. Both the consultation and review confirmed that we needed to make it easier for people to contact us, access our services and that our assessment process should be standardised wherever possible.

To help people get the right help at the right time, the HSCP agreed to look at setting up a Single Point of Access (SPoA).

A SPoA will provide a more efficient 'first contact' model and will provide:

- improved advice, information and signposting
- more effective accessibility to services
- enable earlier assessment, intervention and
- reduce demands on local services.

Members of the public, staff, and agencies will be able to use the SPoA to obtain further information, request help, or get a service.

Setting up a SPoA will involve many different factors and we will be doing this in phases. Phase One will include the following Social Care Services:

- children & families
- homelessness, and
- adults & older people services.

Work is underway to determine Phase Two which will also include Alcohol Drug Recovery Services.

The first phase of these new arrangements will replace our current Social Care Direct system. It will consist of a multi-disciplinary team with a mix of staff including Qualified Social Workers, Social Care Workers, Occupational Therapists and Admin staff. To allow for different social care needs there may be different ways to contact the SPoA, for example:



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- completing an online form
- making a phone call or
- sending an email message

The SPoA will also ensure that anyone contacting us will have has the same experience, using the same assessment process and reduced duplication for services.

We are currently working on the first phase of the SPoA, agreeing exactly which social care services will be included, how many staff and the different roles and tasks to be included. Further work is underway to review some of our community health services and whether access to them could be improved via these arrangements.

Pat Togher, Assistant Chief Officer Public Protection & Complex Needs, said, "We remain committed to the development of our first contact arrangements – which will be known as 'Single Point of Access' for the HSCP. The new approach will deploy a model of earlier intervention/prevention and will serve most care groups reducing steps in the system for our patients and service users while reducing demand on local area teams."

We will keep you updated on when we are ready to launch the SPoA.

Health Improvement Annual Report 2020 – 21 Now Available

The latest <u>annual report</u> highlighting the work of Glasgow City Health and Social Care Partnership's (HSCP) Health Improvement Team is now available.

The report provides an insight into the progress made by Health Improvement around improving health and reducing health inequalities during 2020 - 21.

Progress is captured in relation to our Integration Joint Board's (IJB) strategic priorities for health and social care including mental health, sexual health, financial inclusion, alcohol and drugs and much more.

The report also highlights work that our Health Improvement staff have progressed in partnership with our local communities and our key partners in response to the Coronavirus (COVID-19) pandemic.

Fiona Moss, our HSCP's Head of Health Improvement and Equality, said: "This report captures the broad range of our business with others in the HSCP, partners and communities, and the programmes delivered for the wider health board area and gives us much to be proud of. COVID-19 has fundamentally affected what we have been able to do this year and has required us to work innovatively and responsively to meet the needs of local communities.

"Our Health Improvement staff have worked exceptionally hard to adapt and sustain as many of these programmes as possible. We have dedicated this annual report to our two colleagues who died in service last year. Linda and Hazel-ann were fantastic colleagues and the report includes their work. We miss them."



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Highlights include:

- the Glasgow City Youth Health Service (YHS) offers a range of clinical and non-clinical support for young people aged 12-19 years of age to secure positive outcomes for those engaging with the service. From 1 April 2020 31 March 2021 the total number referrals to the service was 739 compared with 508 the previous year.
- the Core Financial Inclusion Service supports community-based NHS staff to make direct referral for patients who have money worries to a range of dedicated Money Advice providers. NHS staff across the financial inclusion partnership made 4,610 referrals and 3,617 individual clients engaged with the service. Financial gains of almost £6.5 million were achieved for clients in 2020/21.
- the Compassionate Response Distress Service (CDRS) commenced with the in-hours service (supporting primary care referrals) opening in September 2020. Operated by Glasgow Association for Mental Health, the service provides a non-clinical, holistic response to people experiencing acute emotional distress. In the period to 31 March 2021, the in-hours service responded to 1,174 people with support provided up to one month.

You can also watch our short film, which explains more about the annual report.

Review of the Glasgow City HSCP Strategic Plan – Update

Health and social care integration is about ensuring that people who use health and social care services get the right care and support whatever their needs, at the right time and in the most appropriate place.

Glasgow City Health and Social Care Partnership (the Partnership) delivers health and social care services in Glasgow City. The Integration Joint Board tell us how to deliver these services and they provide details on this in their <u>Strategic Plan</u>. The Plan is the key way the Partnership defines how it aims to achieve the outcomes our citizens desire.

As a Partnership we are now reviewing the current Plan to understand whether the priorities we set out in 2019 are still relevant and to understand what the people we work with and on behalf of, would like to see in the next Plan.

If the Partnership's next Plan is going to properly reflect the views and priorities of people within the city we need to hear from them. So we are working with a range of organisations, networks and groups that represent and deliver services to people across the city, to give them a chance to be part of the conversation on the future of health and social care in Glasgow City. We hope to gather the views of a wide range of people, communities, organisations, groups and networks. The feedback we get will shape the next Plan and the work the Partnership takes forward during the life of the next Plan.

To make this happen we are planning a whole range of engagement activity to try to enable as many people as possible to be part of the conversation if they want to, in ways that they are comfortable with. We have been asking partners and colleagues from across the city who we should be engaging with and how we should do it. We're using the learning from during the pandemic to update what we know about engaging with different groups and individuals and to help us provide those opportunities for people to get involved.



This will include large scale surveys (electronic and paper versions) and a range of face to face and virtual activities including:

- focus groups
- interviews
- meetings and
- presentations.

Whatever the method, the feedback will influence what the new Plan for health and social care looks like. We're also encouraging our partners and groups across the city to carry out their own conversations with the people they work with and are providing support to and doing what we can to enable them to do that.

Our first major piece of engagement was a public survey which was open throughout the month of March 2022 to staff and the general public, and the feedback from that wide-ranging survey is currently being reviewed. Other more targeted and planned engagement is ongoing. Much of this engagement is being carried out by our partners with our support or on our behalf in a coproduction approach that is designed to ensure people can engage in ways that they are familiar with and using established engagement approaches.

A draft Strategic Plan will be prepared for the Integration Joint Board in June and subject to approval, that draft Plan will then go out to consultation in the second half of this year. There will then be further opportunities to be part of the conversation for the remainder of the year.

For more information on what we're doing and how to get involved, or to provide any comments on our Strategic Plan visit https://glasgowcity.hscp.scot/strategic-plan-2023 or contact us by email at gchscpstrategicplan@glasgow.gov.uk

This is your opportunity. Be part of the conversation!

COVID-19 Update

Keep up to date on how we're managing and responding to the impact of COVID-19 across our health and social care services with the most recent COVID-19 briefing available on our <u>HSCP's COVID-19 webpage</u>. The webpage also includes useful links to national and local COVID-19 information and resources.

News

We also regularly publish <u>news articles</u> and <u>briefings / bulletins</u> on our website about specific topics or work happening across our HSCP with partners – whether it be about current services, service developments or achievements to celebrate. If you would like to have something featured, please email <u>GCHSCP_Communications@glasgow.gov.uk</u>. Some recent news items include:

- GlasgGOw Get Tested HIV Campaign Launched
- Glasgow City HSCP Nurses Chosen for Prestigious QNIS Development Programme
- Housing First and the Dogs Trust
- Raising Awareness of Cancer Screening
 Programmes with BME Residents/Patients
- HSCP Staff Recognised at Recent Awards

- Quit Your Way on No Smoking Day
- <u>Professional Governance Framework and</u>
 Corporate Nursing Plans Now Available
- Work Set to Begin on New £72 Million Health and Care Hub for Glasgow's East End
- Primary Care Improvement Plan Bulletin -March 2022

Meetings & Events

We have regular meetings and events to discuss and / or make decisions about health and social care in Glasgow. More information about them with upcoming dates is available below:

- Glasgow City Integration Joint Board (IJB)
- IJB Finance and Audit Scrutiny Committee
- IJB Public Engagement Committee
- North East Locality Engagement Forum
- North West Locality Engagement Forum
- South Locality Engagement Forum

Our Vision & Priorities

The City's people can flourish, with access to health and social care support when they need it. This will be done by transforming health and social care services for better lives.

We believe that stronger communities make healthier lives.



Prevention, early intervention & harm reduction



Providing greater self-determination & choice



Shifting the balance of care



Enabling independent living for longer



Public protection

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