

# GLASGOW CITY IJB STRATEGIC PLAN 2023-26: ACCESSIBLE SUMMARY

## 1. Introduction

Welcome to the Integration Joint Board's Strategic Plan for Glasgow City Health and Social Care Partnership for 2023 to 2026.

There has been a range of challenges since the last plan including COVID-19, cost of living crisis, budget pressures, the war in Ukraine and the climate emergency.

## 2. About health and social care integration

The plan needs to be relevant to the needs of the area and the people who live here.

We asked people what they thought should be in this plan.

### **What is health and social care integration?**

Local authorities (also known as councils) and health boards are required to work together to plan and deliver services.

There is a law that tells councils and health boards to work together. The law is called the Public Bodies (Joint Working) (Scotland) Act 2014.

The council and the health board working together is known as *health and social care integration*.

A group called the Integration Joint Board decides how services should be delivered. This is sometimes shortened to IJB.

The Glasgow City Health and Social Care Partnership Deliver the services. This is sometimes shortened to HSCP.

The HSCP has staff from Glasgow City Council and NHS Greater Glasgow and Clyde.

### **What services are integrated in Glasgow?**

The services covered by this Strategic Plan include:

- Alcohol and drug services
- Mental health services
- Carers support services
- Optometry
- Criminal justice services
- Palliative care services
- Dental services
- Pharmaceutical services
- District nursing, school nursing and health visiting services

- Prison healthcare services
- GP services
- Sexual health services
- Health improvement services
- Social care services provided to children and families, adults and older people
- Homelessness services
- Welfare rights services

Glasgow City Health and Social Care Partnership must deliver services within a budget allocation made up of contributions from Glasgow City Council and NHS Greater Glasgow and Clyde. If the budget allocation is not enough to deliver those services the IJB has to agree certain actions to balance the budget. For the 2023/24 budget the IJB has agreed to reduce certain services and use funds that have been saved in previous years to enable services to be provided.

### **3. Glasgow City: Population and needs profile**

There are a range of factors that affect people's health and social care needs. This includes poverty, deprivation, ill health and inequality.

To help us plan what services might be needed we gather a range of information about the people who live in the city.

The population of Glasgow is 635,640 people. The population is expected to get bigger. We think there will be more adults and older adults and less children living in Glasgow City.

People in Glasgow do not live as long as people in the rest of Scotland. The life expectancy for a male is 73.1 years old. The life expectancy for a female is 78.3 years old.

11.5% of the population are from a minority ethnic group. Minority ethnic people are people who live in places where most of the other people are from a different racial or ethnic background.

274,000 people in Glasgow live in a deprived area. A deprived area is somewhere people do not have enough of important things like money or food.

Death rates from drugs, alcohol, smoking and homelessness are higher in Glasgow than Scotland.

Read more about the health and social care needs of Glasgow City here: [Health and social care needs profile](#)

## 4. The Covid- 19 Pandemic

The Covid-19 Pandemic has changed the way we all live our lives. Some of the changes we made included:

- People worked together to come up with ways that support could continue to be delivered.
- Staff were provided with equipment to enable them to work from home and attend online meetings. Some staff were moved to different jobs.
- Staff were also provided with personal protective equipment where appropriate.
- A change in the way people could access services like having telephone or online appointments.
- We opened covid testing sites, vaccination centres, community assessment centres and mental health units.
- We provided information that was accessible to everyone such as information in British Sign Language.
- New ideas were created quickly.
- There was support for staff wellbeing and recruitment of new staff.
- We made sure we kept everyone up to date using briefings, newsletters and video messages.

## 5. Recovering from the pandemic

As we continue to recover from the pandemic the HSCP is looking at which service changes we should keep and which ones are not working. Our Recovery Strategy explains how we are managing the city's recovery from covid.

You can read about the strategy here:

[Strategy- Our Recovery Strategy](#)

## 6. National and local influences

Glasgow City Integration Joint Board has to look at national legislation, plans and policies to make sure the IJB and HSCP's work is consistent.

You can read more about some of the local and national legislation and policies we have to consider here:

## **National**

[Public Bodies \(Scotland\) Act 2014](#)

[The Equalities Act 2010](#)

[Fairer Scotland Duty](#)

[Scottish Government Public Health Strategy](#)

[Health and Social Care Standards](#)

[Getting It Right For Every Child](#)

[Medication Assisted Treatment \(MAT\) standards](#)

## **Local**

[Glasgow's Housing Strategy](#)

[Carers / Young Carers Strategies](#)

[Family Support Strategy](#)

## **7. Vision and Priorities**

### **Our new IJB Vision is:**

We want communities to be empowered to support people to flourish and live healthier, more fulfilled lives. And we want people to have access to the right support, in the right place and at the right time.

### **Strong Communities**

We think people who live in strong communities have healthier lives.

Strong communities are places or environments where people who live, work and contribute in those communities have a say in what happens. They will have the resources, skills and opportunities they need.

Resources include money, good neighbours, volunteering, access to and sharing of information, skills development and opportunities to engage.

Strong communities have physical infrastructure like libraries, community centres and parks. They also have social infrastructure like locally led third sector (voluntary) organisations, local groups like community councils and activities that bring people together.

In a strong community there is connection and empathy between community members. A strong community encourages inclusivity and acknowledges, respects and celebrates diversity.

Strong communities have trust and positive relationships between different groups and people. Organisations such as the council, health board and other groups work closely to support communities, identify challenges and put solutions in place.

There are lots of ways people can influence what happens. It means the community's voice is heard by organisations like the council. People are able, encouraged and supported to take action themselves. It means they are able to make changes and support people who might have been left behind. Taking part and being able to see the difference made gives strong communities a sense of belonging, pride and investment.

## **Partnership Priorities**

There are six partnership priorities. There is a list of actions we will do to deliver each of the priorities. All of the priorities will help the Partnership to change how health and social care is delivered and received. The priorities will help promote people to live safely in their communities for as long as they want to and reduce the need for people to require formal services from the Partnership if they don't require them.

The partnership priorities are the changes we want to make. They are based on what you told us was important, how we will measure success and the population profile of the city.

### **Partnership Priority 1: Prevention, early intervention and well-being**

We want to improve people's health and wellbeing and to prevent social isolation.

To do this we will improve overall health and wellbeing by preventing ill health and social isolation. Social isolation is when people have little or no contact with other people. Supporting people to make positive choices to live well in their own communities.

We will support communities to shape and deliver services where they are needed most and where they will make most impact. We want people get the advice and support they need at the right time to be independent so that people do not need to use services until they have tried their preferred options first.

We have introduced a Complex Needs Service for people with multiple health and social care needs. This is a good example of work to promote early intervention and prevention.

You can find out more about the service here:

[Video- Our Complex Needs Short Film](#)

[Article- Complex Needs Service launched in Glasgow](#)

## **Partnership Priority 2: Supporting greater self-determination and informed choice**

We will support people to identify and understand the options available to them. We will support people to take part and take responsibility for decisions about how they will live their lives. We will support people to make decisions about the support they would like.

A good example of this is the Research Project. This is a joint project between Police Scotland and the HSCP for children and young adults who are being looked after and in the care of the city's residential units.

You can find out more about the project here:

[Video- Respect Project Short Film](#)

## **Partnership Priority 3: Supporting people in their communities**

We will work with other organisations to provide the right support so that people can live safely at home for as long as possible. We will encourage and support people to live healthy, independent, meaningful and more satisfying lives as active members of their communities.

One of the ways we will do this includes our new Specialist Mental Health Assessment Units (MAHU) and the Compassionate Distress Response service. Both of these services were set up in April 2020 as a new way to assess and support people who are experiencing a mental health crisis.

You can find out more about the MAHU service here:

[Video- MAHU Short Film](#)

## **Partnership Priority 4: Strengthening communities to reduce harm**

We will work with communities and other services to ensure that people, particularly the most vulnerable children, adults and older people, are kept safe from harm.

We will identify and manage the risks to individuals or groups. By developing stronger communities, we aim to reduce harm and protect vulnerable people and communities.

One of the ways we will do this is through introduction of The Herbert Protocol. The Herbert Protocol allows organisations to share information about vulnerable people and help find them if they go missing. This can help reassure people who have a loved one who has a diagnosis of dementia or other cognitive impairment.

You can find out more about The Herbert Protocol here:

[Video- The Herbert Protocol Short Film](#)

### **Priority 5: A healthy, valued and supported workforce**

We will have a workforce that is highly skilled, trained and supported to deliver the highest standard of service to the city's people. By having a workforce that feels engaged, valued and highly trained, staff will be ready to meet the challenges and opportunities of delivering health and social care services. Staff will be confident in the value placed on their own health and well-being.

This will include projects like our Older People's Residential Services Legacy Art Project. The project will give staff a reflective space as well as creating an art piece that will benefit residents and staff.

You can find out more about the project here:

Video- [Legacy Art Project](#)

### **Priority 6: Building a sustainable future**

We will work with our partners to meet the challenges of delivering a service that is sustainable. The challenges include the money available, an increase in demand and having enough staff. We will use our resources in a cost-effective way to make sure that health and social care services suit the needs of everyone in the city.

We will do this in line with the NHS Greater Glasgow and & Clyde and Glasgow City Council's plans for having a sustainable city.

[Article- Glasgow City Council Climate Plan](#)

[Website- Sustainable Glasgow Partnership](#)

## **8. Monitoring performance and measuring progress**

Glasgow City IJB and HSCP have established ways to monitor and report on how health and social care services are working. This is known as our performance framework which allows us to monitor how aims of the strategic plan are being met. Progress is regularly reported in Quarterly and Annual Performance Reports, which can be accessed on the HSCP website.

## **9. Finance and resources**

Our services budget for 2022-2023 is £1.4 billion. This money comes from the Glasgow City Council and NHS Greater Glasgow and Clyde. The funding available has not increased at the same rate as the demand for services. We need to be realistic about what can be delivered with the funding available.



## 10. Partnership and involving others

There are a lot of people, organisations, professionals and groups that work together to plan and deliver services.

We have developed a set of principles that are important to make sure people are meaningfully involved:

- A commitment to joint working and participation by the HSCP and partners.
- Meaningful involvement is a two-way process.
- Services should be co-produced and people should be able to influence changes.
- We will gather and review feedback to inform future plans.
- Involvement needs to happen at an appropriate time so that people can have maximum influence.
- Decisions about the services should be informed by the people who receive or deliver the service.
- Barriers will be identified and overcome and will be informed by equality and human rights.
- Involvement should start with the community and not senior management.
- Communication must be effective, targeted and proportionate.
- There should be transparency about what we hope to do. Feedback should be given people who took part about what we have done.

### **Mainstreaming Equalities**

The Equality Act 2010 means that Integration Joint Boards need to:

- Eliminate unlawful discrimination
- Advance equal opportunities
- Promote good relations

Scottish legislation also means that we have to:

- Report our progress on how we have embedded equality into our day to day work
- Publish equality outcomes and report on progress
- Assess and review policies and practices
- Publish information about equality that is accessible

You can read the most recent report here:

[Website- Equalities](#)