

Glasgow City Health & Social Care Partnership South Locality Plan 2016/17

August 2016



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FOREWORD

Health and Social Care Partnerships (HSCPs) were established this year to take forward the integration of health and social care services, improve outcomes for people who use health and social care services, and improve health and well-being.

In the South of Glasgow we are committed to tackling inequalities and improving people's lives. This plan for 2016/17 highlights the challenges we face in the South in taking forward this agenda, the key issues for users and carers, and the actions we are going to take over the course of the year to implement the HSCP's Strategic Plan and respond to local needs. We are committed to exploring the opportunities presented by the new integrated arrangements to improve services for the people we serve, and work closely with our partners, local communities and organisations.

The plan is ambitious but realistic. We will report back on progress as the year progresses and will be keen to hear from users and carers and those we work alongside, about how are doing with what we have set out in this plan.

David Walker
Head of Operations South Locality
Glasgow City HSCP

1. INTRODUCTION

Strategic Plan 2016-19

Glasgow City Integration Joint Board (IJB) came into being in February 2016 and in March the Board endorsed a three year Strategic Plan for the period up to 2019 (see <https://www.glasgow.gov.uk/index.aspx?articleid=19044>). In that Plan the IJB set out its vision for health and social care services - that the City's people can flourish, with access to health and social care support when they need it. The IJB envisaged that this would be achieved by transforming health and social care services for better lives.

HSCP Key Priorities

The biggest priority for the HSCP is delivering transformational change in the way health and social care services are planned, delivered and accessed in the city. We believe that more of the same is not the answer to the challenges facing Glasgow and will strive to deliver on our vision as outlined below:

- early intervention, prevention and harm reduction
- providing greater self-determination and choice
- shifting the balance of care
- enabling independent living for longer
- public protection

In the HSCP localities are an important part of our integration arrangements to improve the delivery of health and social care services for the people of Glasgow. We have agreed three localities in Glasgow – one covering the North East of the city, one covering the North West and one the South of Glasgow. A key responsibility of localities is to produce a locality plan for the area they serve. This document is the locality plan for South Glasgow (a profile of the area is in section 2). Similar plans are also available for the North East and the North West.

The purpose of this plan is to:

- show how we will implement the HSCP's Strategic Plan 2016-2019 in the South of the city, and what this will mean for service users, patients and local communities; and
- how we will respond to local needs and issues.

The plan is a one year plan covering the period April 2016 to March 2017. The plan is based on:

- what we know about health and social care needs and demands (see sections 2 and 4);
- key issues that have been highlighted to us at the engagement events we have undertaken, and other information we have on patient, carer and service user views about our services (see section 3);
- our current performance against key targets (see section 4);
- the key service priorities as defined in the HSCP's Strategic Plan (see section 5), including health improvement and what we are doing to tackle inequalities (see section 6); and,
- the resources we have available including staff and accommodation (see section 7).

We will report later in the year on how we are doing in implementing the plan and identify further areas of improvement for next year's plan. If you have any comments on this plan, let us know.

2. SOUTH LOCALITY

Services

The South Locality is a key part of Glasgow City Health & Social Care Partnership and is responsible for the delivery of health and social care services to the people of South Glasgow. Health and social care services are delivered by a single organisation with services managed by a single management structure. In South Glasgow these services comprise:

Children's Services

- children and families social work services
- health visiting and school nursing services
- specialist children's services
- homelessness services
- criminal justice social work services

Adult Services

- adult mental health services in patient and community services both health and social work service areas
- addiction services health and social work services
- learning disability services health and social work services
- adult social work services

Older People's Services

- adult community nursing services
- older people's social work services
- community rehabilitation services
- older people's mental health services
- AHP services
- physical disability services

Primary Care Independent Contractor Services

- 60 community pharmacies
- 36 optometry practices
- 32 dental practices

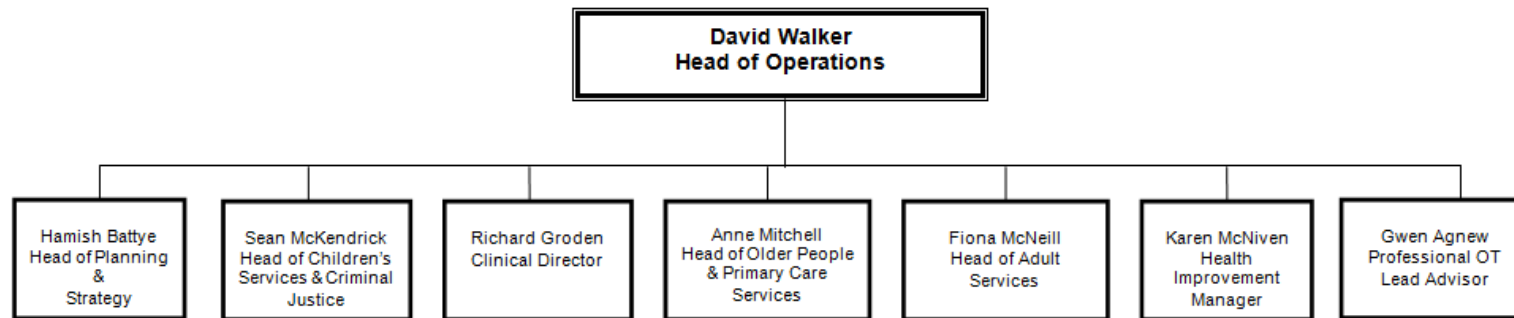
- 51 GP practices that provide services to a registered population of approximately 265,228 (17% more than South’s resident population), and eight main health centres where GP practices and other services are co-located.

Health Improvement Services

- working with communities and planning partners to help address health inequalities
- working with services to promote positive lifestyle choices and access to financial inclusion and employability services
- promoting health improvement to our local population, including the uptake of screening programmes

Management Arrangements

A management structure has been introduced that is consistent with the service responsibilities of the locality as set out above. This is also consistent with the management structure in the North East and the North West and also with the HSCP’s strategic planning functions. The management structure for the South locality is as follows:



The facilities we manage and the resources we have available to deliver health and social care services are detailed in section 7.

In delivering services to the population of South Glasgow we work closely with a range of other partners to improve health and well-being. We give a description of the key areas we intend to focus on with partners in section 8.

Locality Profile

The South locality comprises the following areas:

- Arden and Carnwadric
- Bellahouston, Craigton and Mosspark
- Carmunnock
- Castlemilk

- Cathcart and Simshill
- Corkerhill and North Pollok
- Croftfoot
- Crookston and South Cardonald
- Govanhill
- Greater Gorbals
- Greater Govan
- Ibrox and Kingston
- King's Park and Mount Florida
- Langside and Battlefield
- Newlands and Cathcart
- North Cardonald and Penilee
- Pollok
- Pollokshaws and Mansewood
- Pollokshields East
- Pollokshields West
- Priesthill and Househillwood
- Shawlands and Strathbungo
- South Nitshill and Darnley
- Toryglen

The health and well-being profiles for these areas can be found at: http://www.understandingglasgow.com/profiles/2_south_sector
 The total population for the South Locality is 220,216 (2012 data based on 2011 census). The age break down of the population is as follows:

Age	Number	% of population
0-15	38,531	17.5
16-64	150,411	68.3
65-74	16,199	7.4
75+	15,075	6.8

Key population facts

- compared to Scotland as a whole and to Glasgow City, the South locality has the highest percentage of Black, Asian and Minority Ethnic (BAME) people at 14.2% of the total population of the area (Census 2011) and with some areas, such as East Pollokshields (52.7%), with a significantly higher proportion.
- male life expectancy is noted at 72.9 years (4% lower than Scottish average), and female life expectancy is 78.8 years (2% lower than Scottish average).
- 22.2% of the population state that they are limited by disability.
- in the South there are also pockets of significant deprivation, with 20.7% of the population noted as being income deprived and 29.2% of children identified as living in poverty. (Scottish Index of Multiple Deprivation 2012). 59.3% of the population is deemed to be in employment, with 24.2% claiming either employment support or out of work benefits. (Significantly higher than the Scottish average).
- 16% of households are noted as being overcrowded.
- 36.8% of households are noted as single parent – significantly higher than the Scottish average.

Housing

There are 24 Registered Social Landlords (RSLs) in South Glasgow, the largest of which is the Wheatley Group comprising Glasgow Housing Association, Loretto Care and Cube Housing. All of them manage 34,886 social rented properties and factor many more bought homes. There are 51,350 owner occupied and 21,925 private rented homes in the South.

The role of housing is important if we are to achieve the priorities set out in the HSCP Strategic Plan e.g. prevention and supporting older people to live longer in their own homes.

3. WHAT PEOPLE HAVE TOLD US

In developing this plan we have held a number of engagement events with users and carers, GPs, staff, voluntary organisations and key partners including local housing associations, all of whom have told us about some of the key issues in the South, and in particular about health and social care services. These events have been written up in separate reports to record what people have said. The key issues to emerge from these events are summarised below, showing what we plan to do in response.

The outcome of these events has influenced this plan. It is our intention to report annually on both how we are progressing with the actions in this plan and responding to the point people have raised at the events we have held.

What people have told us – summary of key points		
Issue	Key points	What we will do
Older People	<ul style="list-style-type: none"> The outcomes within the National Dementia Strategy 2016-19 should be a local priority 	<ul style="list-style-type: none"> The HSCP launched a city-wide dementia strategy in June that outlines how we are taking forward the national outcomes. We will also be bringing forward a local action plan once the strategy is agreed
Carers	<ul style="list-style-type: none"> There should be explicit outcomes for carers within the Locality Plan 	<ul style="list-style-type: none"> We will ensure that the outcomes contained in the National Carers Strategy are reflected in the Locality plan We will ensure that the views of, including young carers are represented in our Participation and Engagement Plan
Services for Adults incl. Mental Health, Addictions and	<ul style="list-style-type: none"> Mental Health services should offer a wider range of non-medical interventions such as talking therapies and referrals for physical 	<ul style="list-style-type: none"> Primary care mental health services and community mental health services offer a range of services or referral onwards to these services as appropriate for patients as part a wider

What people have told us – summary of key points		
Issue	Key points	What we will do
Learning Disability	<p>activity</p> <ul style="list-style-type: none"> • Early intervention, harm reduction and education should be a priority for Addiction services in the Locality Plan • Provide opportunities for people to be involved in care planning at the point of accessing the service 	<p>programme of treatment / therapy. Access to psychological therapies and primary care mental health services is the best in the city</p> <ul style="list-style-type: none"> • Early intervention and harm reduction are a priority for Alcohol and Drug services. Community Addictions Teams are responsible for the assessment and delivery of generic and specialist targeted harm reduction interventions and where appropriate onward referral for specialist core alcohol/drug treatment/care and assertively managed engagement with external partner services for individuals requiring education and diversionary input. • The involvement of users and carers is a key part of the care planning process in adult services and we continue to review and learn from good practice else where
Children and Young People	<ul style="list-style-type: none"> • It is difficult to navigate the transition from Children's to Adults services • It is harder for young people to have a voice when it comes to their health and social care needs 	<ul style="list-style-type: none"> • Alongside colleagues in adult services we will review the transition protocol to ensure its effectiveness. We will establish a forum to establish the impact of this review • We will make it easier for young people to tell us what they think about our services. We will ensure that we have appropriate methods for getting involved in decision making and seeking feedback from young people.
Housing and Homelessness	<ul style="list-style-type: none"> • Improve partnership working between health, social care, housing and relevant others 	<ul style="list-style-type: none"> • The Essential Connections Forum will be promoted as a vehicle for multi-agency partnership working on housing issues • We will continue to support the roll out of the Housing Options model across South Glasgow • The Vulnerable Household Forum will be promoted as a vehicle for multi-agency partnership working on homelessness issues
Health Improvement and	<ul style="list-style-type: none"> • Data from the health and wellbeing survey 	<ul style="list-style-type: none"> • We will continue to support the current Thriving Places

What people have told us – summary of key points		
Issue	Key points	What we will do
Inequalities	<p>shows that poverty, lower life expectancy and financial instability are still having a negative impact on health and well being</p> <ul style="list-style-type: none"> Physical activity should be a priority as it impacts on a wide range of health and wellbeing outcomes 	<p>initiatives, bringing key agencies and the local community together to address inequalities</p> <ul style="list-style-type: none"> We will support a third Thriving Places initiative for Govan East, Ibrox and Cessnock We have a number of physical activity programmes that we are taking forward within the resources we have available
Primary Care Services	<ul style="list-style-type: none"> Improve co-ordination between GPs and locally provided health and wellbeing services GPs would like to be more involved in the governance and decision making process 	<ul style="list-style-type: none"> We will continue to develop the Pollokshields Community Oriented Primary Care (COPC) and Govan SHIP projects and identify learning that can be shared with others The development of GP Clusters and the important role of the South GP Committee all provide crucial opportunities for GPs to influence decision making, and we will work with GPs to develop these further
Working With Our Partners	<ul style="list-style-type: none"> The Plan should make a strong case for better communication and partnership working, especially with the third sector 	<ul style="list-style-type: none"> We will set out our arrangements for working with key partners, including the Community Planning Partnership, housing organisations, registered care providers and the third sector We will continue to support the Thriving Places initiatives as multi agency platforms for addressing inequalities in targeted areas
Communication, Participation and Engagement	<ul style="list-style-type: none"> There hasn't been a lot of public facing information about health and social care integration therefore the public is largely unaware of it and unsure how to get involved Provide information for residents and the wider community on progress with the New 	<ul style="list-style-type: none"> We will produce a local Communications Plan that sets out how we will share information across a range of formats and platforms, including social media We will produce a local Participation and Engagement Plan that describes our patient feedback and public involvement arrangements We will produce a series of newsletters providing regular

What people have told us – summary of key points		
Issue	Key points	What we will do
	Gorbals Health and Care Centre development	<p>updates on progress with the development</p> <ul style="list-style-type: none"> We will attend community events, groups and meetings to provide information, seek feedback and answer questions We will continue to explore other means of communication to share information such as social media
Budgets and Finance	<ul style="list-style-type: none"> Partners should use their resources more effectively 	<ul style="list-style-type: none"> We will work closely with our partners in community planning and the third sector to ensure we have a joined up approach to our respective decisions about the use of resources including accommodation and staff
Scrutiny and Performance	<ul style="list-style-type: none"> Service priorities need to be based on data that is accurate, current and with common agreement on interpretation The data for South Glasgow within the Locality Plan should be presented in a format that enables benchmarking against the rest of Glasgow 	<ul style="list-style-type: none"> The draft service priorities will be shared for a further round of feedback prior to being finalised in the Locality Plan Our Participation and Engagement Plan will describe a range of opportunities for scrutinising our performance
Other Issues	<ul style="list-style-type: none"> Transport to the new QEUH is not available from certain parts of the South Locality Govanhill should be a priority area as there are significant issues affecting health and wellbeing The third sector is experiencing a high level of budget cuts and this will impact on the capacity of the sector to deliver services 	<ul style="list-style-type: none"> We will work with our colleagues in the Community Engagement Team to provide information on transport options to the new hospital We are working closely with local partners, GPs and others to respond to the specific needs in the Govanhill area. We are aware of the pressures on the third sector and will take this into account when working with local groups and organisations

4. PERFORMANCE INFORMATION

This section summaries our performance against key targets and indicators

Where we are performing well
Psychological Therapies – number of people starting treatment within 18 weeks
Primary Care Mental Health Team – referral to 1 st appointment - % within 28 days
Primary Care Mental Health Team – referral to 1 st treatment - % within 63 days
Addiction - Percentage of Parental Assessments completed within 30 days (new indicator for 2015/16)
Looked After Children - recording of the employment status of young people leaving care
Looked After Children - Percentage of children looked after at home with family/friends (LAC) with a primary worker.
Reducing Smoking in Pregnancy
Primary Care - percentage able to book an appointment with a doctor in advance
Breast Screening uptake – more to do but performing best across the City
No of carers who have started an assessment in last quarter
Access to specialist CAMHS – longest wait in weeks
Young people leaving care who are in employment, education or training
Number of open OT activities at assessment stage assigned to a worker or team
% of Community Payback Orders with a case management plan in place within 20 days

Where improvement is required
Older people - Review of people in purchased homes
Older people - Review of people in home care
Further improvement to Occupational Therapy assessments and activities
Improvement to direct payments
Reduction in delayed discharges
Reduction in acute bed days lost due to delayed discharge – including Adults With Incapacity (AWI)
Alcohol Related Emergency Admissions (per 100,000)
Waiting times for Child and Adolescent Mental Health
Looked After Children - percentage of children looked after at home (% of the total looked after)
Criminal Justice — percentage commenced within 7 days
Community Payback Orders - 3 month reviews
Alcohol brief interventions
Smoking Cessation Quit rates in the 40% most deprived areas
Bowel Screening uptake rates
Breastfeeding at 6-8 weeks in 15% most deprived areas (exclusive)
Numbers reported on dementia register
Cervical Screening uptake rates

5. SERVICE PRIORITIES

In this section we describe the key priorities and actions for each service / care group we will be taking forward in 2016/17 to implement the HSCP Strategic Plan, and how we intend to respond to local needs and demands. We will be reporting back on progress towards the end of the year.

Shared priorities – taking forward integration

There are a number of key actions and priorities that are shared across all services, and we will be taking forward as a team:

- taking forward the priorities set out in the HSCP's strategic plan, including the nine national health and wellbeing outcomes that support integration;
- working with partners to take forward the three community planning priorities set out in the Single Outcome Agreement i.e. addressing alcohol misuse, improving youth employment, and achieving better outcomes for vulnerable people, including taking forward the Thriving Places initiative in Gorbals, Greater Govan and Priesthill Househillwood;
- improve the experience and outcomes for people as they move between our services, including the transition between children's to adult services, and adult to older people's services;
- ensuring service users and carers are fully engaged, and involved in decisions affecting their care;
- ensuring our services are sensitive to the needs of people from different equality groups;
- continuing the implementation of personalisation to give people more choice and control over how they access certain elements of their care;
- implementation of the patient centred care programme, including review of care assessment, care planning and care review systems;
- improving our interface with secondary care, the third sector and registered social landlords;
- ensuring robust governance arrangements are in place for child protection and adult support and protection;
- supporting our staff to deliver the standards of care required for our service users; and,
- ensuring services are delivered in the most efficient and effective way to help meet the financial challenges, including making best use of our accommodation.

In addition we will:

- establish integrated management teams across all our care groups;
- establish integrated local care group planning arrangements with partners to take forward the HSCP Strategic Plan in the South, and implementation of the actions in this locality plan, including reporting on progress;

- agree a programme of work to better understand the needs of our local population including the black, Asian and minority ethnic community; and,
- take forward local care governance arrangements within the framework for the HSCP.

Primary Care

Priority	Action	Delivery	Target
Improving GP Premises	While considerable progress has been made in improving GP surgery premises there remain some significant issues that require resolution.	We will work with the GP practices concerned to agree plans for improvement.	All GP surgery premises assessed as being compliant with agreed standards.
New GP Contract	Taking forward the formation of GP clusters using a “bottom up” approach, and identifying GP Practice Quality Leads and GP Cluster Quality Leads.	Continued support and facilitation to agree GP clusters and quality leads	GP clusters in place by late 2016, and quality leads identified.
Oxygen	Each GP practice to have oxygen supplied as per the national guidance.	As per national agenda	By March 2017.
Anticipatory Care Plans	Introduction of anticipatory care plans within GP practices to support management of patients at risk of admission.	Work with practices to support continual improvement of anticipatory care plans	All GP clusters to have discussed ACP quality improvement by end of March 2017.
Primary/Secondary Care Interface	Develop a local clinical interface between primary and secondary care to support the HSCP’s plans for unscheduled care and implementation of the Clinical Services Strategy. Continue to monitor rates of new accident & emergency attendances by GP referral to improve management of unscheduled care.	Discuss with clinical leads, the most appropriate interface mechanism. Rates to be monitored via Practice Activity Report and GP clusters	Mechanism to be in place by March 2017. No target set.
Improved Healthy Life Expectancy for Men & Women	Support the delivery and development of Community Orientated Primary Care within East Pollokshields.	Continued discussion with East Pollokshields practices to support introduction of COPC	COPC to be introduced in East Pollokshields by December 2016.
EU Care and Support to Govanhill GP Practices	Continue to support GPs in Govanhill, and other areas, in registering patients where there is a need for specific support such as interpreting services through agreed action plan.	Continued discussion with GPs and others to address issues as they arise, and implement an agreed action plan.	All action plan actions implemented by March 2017.

Priority	Action	Delivery	Target
Govan SHIP	The HSCP will continue to support this Scottish Government funded project. It is seen as a successful model of health to date, but is waiting further evaluation	Continue Senior Management support to Govan SHIP project board.	Evaluation due by March 2017.
Social Care Residential Unit	We have built good links and communication with new unit Orchard Grove. We will continue this relationship to ensure good care for residents and good relationships between the unit, the south locality and General Practices in its catchment area and use learning experience for new unit in 2017.	Set up an operational group to look at opportunities to improve service delivery	End March 2017.
Immunisations	There are specifications regarding immigrant communities and immunisation uptake rates in the Govanhill area. We will work with Public Health, Social Work and local practices to attempt to improve the rate of uptake	This becomes part of the Govanhill Action Plan.	End March 2017.
Screening	We will work with GPs to improve screening uptake rates for cervical screening and bowel screening	Cervical and bowel screening sessions delivered within GP practices with low uptake by HI team	Increase in uptake in key practices by end March 2017
Prescribing	We will continue to work with Prescribers and local community Pharmacists to deliver the safe, cost effective patient centred use of medicines in Primary Care.	Delivery of Prescribing action plan in conjunction with GP Clusters, the prescribing forum and individual GP practices.	A balanced prescribing budget and improvement in prescribing indicators. Secured Primary Care investment in GP Practices by end March 2017.

Carers

Priority	Action	Delivery	Target
Continue to raise awareness of adult carers and promote the single point of access within the health and social care teams	<ul style="list-style-type: none"> • Build increased links with all older people, primary care and adult teams to promote carer pathways • Ensure all staff are aware of their roles and responsibilities in identifying and supporting carers. 	<ul style="list-style-type: none"> • Identification of new Carers • Training and awareness raising to staff 	300 new adult carers by March 17 Asset and outcome based training to be delivered by September 2016 Staff training and awareness raising ongoing
Continue to identify and support young carers through a family based approach	<ul style="list-style-type: none"> • Ensure all staff are aware of their roles and responsibilities in identifying and supporting young carers. • Continue to work in partnership with Education Services to develop pathway from schools to young carers' services • Support education services to develop a schools pack for identifying young carers 	<ul style="list-style-type: none"> • Training around Young Carers • Links with Education partners 	100 young carers by March 2017. Outcome Star Training August 2016 Further training on Family based approaches to supporting YC is being sourced. Recruitment exercise for CIS Education worker in progress

Children and Families and Criminal Justice Services

Priority	Action	Delivery	Target
<p>Match local service delivery against agreed priorities</p>	<p>Develop an understanding of the diverse needs of the population in the locality.</p> <p>We will publish information on health and care needs of the population of the health and care needs of the south agree priorities areas</p> <p>We will report on the success and uptake of JST referrals and ensure we increase our HV referrals to these structures by of a minimum of 5%</p> <p>We will produce an analysis of the gap between provided family support and estimates of anticipated need</p> <p>Alongside Centre of excellence for looked after children in Scotland we will through two teams look at easing the work pressure on children and family social workers and ensure we</p> <ul style="list-style-type: none"> • Engage and influence the structural change process that will impact on Criminal Justice services from April 2017 by engaging in the planning associated with the shadow. • Community Planning engagement up to end March 2017 – new arrangements in place to manage criminal justice. • % of unpaid work (UPW) requirements completed within timescale 	<p>Work underway and are due for pilot in South.</p> <p>Our planning team will provide the report by end of December 2016</p> <p>Ongoing management of referrals and uptake of support</p> <p>Two social work teams in South to look at transforming way services delivered - pilot</p> <p>Community Planning at a city level.</p>	<p>Report prepared by December 2016</p> <p>5% increase in family support from baseline numbers as at May 2016</p> <p>Efficiencies and system change report available April 2017</p> <p>Locality launch event January/February 2017</p>

Priority	Action	Delivery	Target
<p>Focus on and develop service capacity particularly in relation to prevention and early support</p>	<p>Ensure education colleagues, adult services, mid-wives and health visitors are appropriately identifying children and families at risk.</p> <p>Maximise opportunities for the children’s services planning structure to influence spend in the locality by improving engagement with partners internal and external to the HSCP including Community Planning, Education, the third sector, health promotion and addictions.</p>	<p>Roll out of named person policy procedures and process.</p> <p>Locality planning structure</p>	<p>Information to HSCP children’s staff Roll out of communications to all staff by March 2017</p> <p>Increased availability of family resource from 678 places</p>
<p>Deliver services that are safe, efficient, effective and value for money</p>	<p>Deliver services within budget; identify areas of further efficiency and areas requiring development, investment or disinvestment with reference to the Quality Strategy.</p> <p>Roll out the universal health visiting pathway</p> <p>Establish Locality Governance structures for Children and Families and Criminal Justice services that mirror city-wide for and connect to wider Health Board and Glasgow City Council arrangements.</p>	<p>Attendance at city wide Children and families core management team. Connecting with city wide transformation projects. Ongoing review process and attention to management information</p> <p>Engagement with central team ongoing training recruitment and supervision</p> <p>Meeting to consider membership and establish terms of reference on 24th April first meeting scheduled mid-May.</p>	<p>Monthly review through senior management team</p> <p>Commence implementation process from October 2016</p> <p>Locality children and families governance structures agreed and implemented by August 2016</p>

Priority	Action	Delivery	Target
	<p>Establish mechanisms for monitoring and reviewing performance against agreed KPIs and ensure mechanisms are present to address performance.</p> <p>Increase the number of people on unpaid work orders getting into unpaid work within 7 days by 10%</p> <p>Reduce the cost of high cost placements by 10% compared to last financial years</p>	<p>South to pilot Children and Families/CJ Key Performance indicators. Identify key supporting factors.</p> <p>Implement new process for oversight</p>	<p>Key children and families data dashboard developed by August 216</p> <p>Using criminal justice as a baseline 10% increase from previous year</p> <p>10% expenditure decrease On previous year spend</p>

Adult Services

Priority	Action	Delivery	Target
<p>Match local service delivery against agreed priorities</p>	<p>Develop our understanding of and relationship with registered social landlords, third and independent sector providers and identify opportunities to develop community capacity.</p>	<p>For housing progress through the Essential Connections Forum, for the third sector explore this through the south east and south west voluntary sector networks, and for the independent sector explore through locality links with Scottish Care</p>	<p>Options / proposals to develop community capacity produced by March 2017</p>
<p>Focus on and develop service capacity particularly in relation to prevention and early support</p>	<p>Implement the changes to Learning Disability Out of Hours Service in line with GG&C strategy recommendations.</p> <p>Review adult mental health patient pathway between hospital and community with health and social work interventions to optimise admission and discharge planning, including improving delayed discharge performance for adult mental health and learning disability.</p> <p>Complete a self-assessment against the Adult Mental Health Community Services Framework requirements for all community mental health services across South Glasgow.</p> <p>Review links between Primary care Mental Health Teams and Community Mental Health Teams with GP practices</p>	<p>To be progress through the learning disability planning group.</p> <p>Review pathway at locality planning groups. Scrutiny of delayed discharges at operational management level on weekly basis</p> <p>All Community mental health services across the South will carry out a benchmarking exercise against the Mental Health Community Services Framework and identify action plans to achieve any unmet standards.</p> <p>Implementation through on-going monitoring and review</p>	<p>Changes to be implemented by March 2017</p> <p>Pathway reviewed by December 2016 and opportunities for improvements identified. Delayed discharges targets achieved by March 2017</p> <p>Completed by January 2017.</p> <p>Review completed by March 2017.</p>

Priority	Action	Delivery	Target
	<p>Maintain psychological therapies 18 weeks performance, and improve percentage of first referrals seen within 28 days.</p> <p>Implement new alcohol and drug access team arrangements in line with the geographical realignment of team locations across South Glasgow.</p> <p>Roll out Recovery training for all alcohol and drug service staff to ensure service is recovery orientated in line with review recommendations and ADP outcomes measures.</p>	<p>Implement through addictions management team arrangements</p> <p>Roll out to be over seen by locality addictions group.</p>	<p>18 weeks target 90%. Percentage seen within 28 days target 100%</p> <p>Implementation complete by March 2017</p> <p>Roll out completed by March 2017</p>
<p>Deliver services that are safe, efficient, effective and value for money</p>	<p>Increase numbers of staff trained in adult support and protection and strengthen joint approach across health and social care staff.</p> <p>Implement the recommendations of the Community Addiction Team review across south Glasgow.</p> <p>Participate in the work of the Learning Disability Tier 4 redesign process.</p> <p>Consider options for learning disability day care provision for the South.</p> <p>Work with third sector care providers, Commissioning and Finance to meet the challenges of rising costs of social care particularly in 24 hour services.</p>	<p>Progress through adult services management team meetings.</p> <p>Implementation to be taken forward by addictions management team</p> <p>To be taken forward by city-wide learning disability planning group.</p> <p>To be taken forward by city-wide learning disability planning group.</p> <p>To be processed through the adult services management team</p>	<p>Increase by 10% By March 2017</p> <p>Implementation complete by March 2017.</p> <p>Redesign to be completed by March 2017.</p> <p>Options to be identified by September 2016.</p> <p>Initial agreements by October 2016</p>

Priority	Action	Delivery	Target
Planning for the Future	Ensure a shared understanding of the approach, process and inputs, delivery and outcomes of the roll out of personalisation within adult services, including increased numbers taking support in form of direct payment.	To be progressed through adult services management team meeting, locality planning groups and forums.	Evidence of shared understanding demonstrated by March 2017. Increase in direct payments to achieve target of 15% by quarter 2.
	Develop a contingency response procedure for replacement care if a Provider exits the social care market – all care groups	To be processed through service modernisation and commissioning	Draft required by October 2016
Recovery programme	Rebalanced relationship with alcohol and reduced drug use: Support the implementation of the Single Outcome Agreement for Alcohol and the Alcohol & Drug Partnership Strategy	Contribute to community recovery within South Locality and further develop & deliver South Locality 'Recovery with Rangers' and 'Recovery with the Citizens' programmes.	Implementation of Single Outcome Agreement actions by March 2017.
Reduce poverty and build aspirations	Deliver financial inclusion services including income maximisation, financial capability and debt management.	Deliver Peer Support and Advocacy for people with poor mental health at risk of adverse sanctions.	Implementation of programmes ongoing.
Build mental wellbeing and resilience	Develop staff to extend programmes and increase capacity to deliver on the prevention and early intervention agenda for early years targeting interventions to the local BAME and vulnerable population's (NHWO 1,3,5,8)	Support staff who work directly with vulnerable families to include health improvement to their practice by providing training and support to staff working directly with BAME, homeless clients and families in supported accommodation.	Implementation of programmes ongoing

Priority	Action	Delivery	Target
<p>Improve mental wellbeing and resilience</p>	<p>Implement the recommendations in the Mental Health Framework</p>	<p>Delivery of community based stress service for adults and young people through the Lifelink Contracts.</p> <p>Build capacity for Peer Mentoring approaches in the south through local Mental Health Support networks.</p> <p>Build capacity of staff and third sector organisations through the delivery of MH Training i.e. Seasons for Growth (young people specific, Assist, Safe Talk and Suicide Prevention. Consideration will be given to the potential for in depth training for our contracted third sector organisations engaging with patients who have severe and enduring mental health issues.</p>	<p>Delivery on-going.</p> <p>Completed by March 2017</p> <p>Completed by March 2017</p> <p>Undertaken by December 2016.</p>

Older People’s Services (including Older People’s Mental Health, physical disability and long term conditions)

Priority	Action	Delivery	Target
<p>Putting in place the architecture of Integration</p>	<p>Establish an Integrated Management Team for OPPC ensuring that there is appropriate time and exposure of all components within OPPC agenda including physical disability and long term conditions</p> <p>Establish Locality Planning for older people and physical disability services that links to Community Planning and HSCP strategic planning arrangements.</p> <p>Establish Locality Governance structures for OPPC that connect to wider HSCP, Health Board and Glasgow City Council arrangements.</p>	<p>Set up and agree TORs for schedule of meetings and agree arrangements for cascade of information to and from all staff</p> <p>Ensure we have effective governance including for ASP, escalation of concerns, Datix reporting, complaints, outcomes of LMRs and Significant Clinical Incidents and audits. Encourage an increase in NHS input and presence at ASP meetings.</p> <p>Develop training and awareness arrangements for NHS staff on ASP</p>	<p>Integrated Management Team Established March 2017</p> <p>Older People Locality Planning Group meeting four times by March 2017 with formal reviews of locality plan progress</p> <p>Confirm increased NHS input/ attendance at ASP meetings</p> <p>Increase in referral numbers / AP1s from baseline by March 2017</p>
<p>Match local service delivery against agreed priorities</p>	<p>Test our service provision against</p> <ul style="list-style-type: none"> • National priorities (e.g. the 9 Health and Wellbeing Outcomes and HEAT targets) • Outcomes and key actions described in the HSCP Strategic Plan 2016-19 (Strategy Maps). 	<p>Specific local actions to deliver these to feature on the agenda of the OPPC planning group and management group.</p> <p>Report on progress against agreed outcome measures/targets at the OPPC planning meetings and locality and HSCP management structures</p>	<p>Review of OP progress - through agreed action plan and performance measures against outcomes / HEAT.</p>

Priority	Action	Delivery	Target
<p>Focus on and develop service capacity particularly in relation to prevention and early support</p>	<p>Develop services that are in line with the National Clinical Strategy (2015) http://www.gov.scot/Resource/0049/00494144.pdf and the NHSGGC Clinical Services Review.</p>	<p>We will promote anticipatory care approaches throughout our services</p>	<p>Numbers of anticipatory care plans against target of Anticipatory Care Group</p>
		<p>We will support early discharge from hospital, contributing to the ongoing development of Intermediate Care and the accommodation based strategy</p>	<p>Delivery of process changes with Anticipatory Care.</p>
	<p>Agree Falls pathways and models of care to reduce falls</p>	<p>Develop, test and evaluate effectiveness of level one and two falls assessment tools</p>	<p>Delivery of outputs of Fall project Falls referrals to pharmacy. Reviews against 2015/16 baseline</p>
	<p>Support residential and care homes to have easy and appropriate access to primary care services and routes for escalation.</p>	<p>Develop a co-ordinated approach to District Nursing and treatment room services for residential care homes population</p>	<p>Delivery of agreed process for care homes re access to DN & Treatment Room</p>
	<p>Focus on reducing the number of hospital admissions from care homes</p>	<p>Work with Acute and care homes re admissions and support provided to Care Homes</p>	<p>Reduction in number of care home admissions</p>
	<p>Implement the Dementia Strategy locally</p>	<p>Disseminate information re 8 pillars pilot and contribute to evaluation</p>	<p>Numbers of staff trained / given information</p>
<p>Deliver on early intervention and person centred approaches to care for those with a mental health diagnosis</p>	<p>We will raise awareness and understanding of dementia amongst our staff and the general public and to promote timely access to dementia diagnosis</p>	<p>Information on Dementia Strategy shared via South Locality Engagement Network (300 contacts)</p>	

Priority	Action	Delivery	Target
		<p>We will evaluate the outcomes of the '8 Pillars' approach, centred on a Dementia Practice Co-ordinator role and implement good practise across all services.</p> <p>Progress a consistent model of Dementia Post Diagnosis support and progress to tender and implementation. Continue to monitor and review waiting times</p> <p>CMHT Framework to be implemented</p> <p>Continue to develop the quality of environment to meet the needs of people with dementia in hospital settings in accordance with the 10 Point National Action Plan described in the National Dementia Strategy,</p> <p>Glasgow City Dementia Strategy and Integrated Dementia Services Framework for Residential and Day care services and with Commitment 11 of the Strategy.</p>	<p>/ newsletters x 3 / specific Twitter activity around dementia Public event on Older People and Primary Care Services featuring input on Dementia Strategy (Spring 2017) Review agreed performance targets / progress at OP planning Group</p> <p>Delivery of agreed measures for waiting times through dashboard measures.</p> <p>CMHT Operational Framework implementation by Mar 2017</p> <p>Delivery of agreed environment targets for March 2017</p>

Priority	Action	Delivery	Target
	Continue to lead and implement on the polypharmacy / mindful prescribing agenda to ensure safe, effective and patient centred use of medicines in OP as per South Sector Prescribing action plan	<p>Deliver access to Psychological Therapies in accordance with the HEAT target.</p> <p>Reshape current prescribing support team commitment to focus on polypharmacy reviews</p> <p>Continue to engage with GPs on 'mindful prescribing agenda' through ongoing engagement</p>	<p>Performance against agreed target</p> <p>Prescribing support reviewed and changes implemented by March 2017</p>
Deliver services that are safe, efficient, effective and value for money	<p>Deliver services within budget; identify areas of further efficiency and areas requiring development, investment or disinvestment with reference to the Quality Strategy.</p> <p>Establish mechanisms for monitoring and reviewing performance against agreed KPIs across health and social care</p>	<p>Ensure close budget monitoring to address any financial challenges</p> <p>Included on the agenda of the OPPC planning group and Management Team agenda quarterly</p>	<p>Budget targets – savings or achieving balanced budget at specific service level</p> <p>Agreed performance monitoring framework by March 2017 for locality</p>
Planning for the Future	Ensure that staff within OPPC are well informed about policy, strategy and emerging issues and are given opportunities to contribute to contribute to the shape of future services	<p>Locality events being planned May/June and autumn 2016</p> <p>Organise shared learning events, briefings and developmental opportunities throughout the year</p> <p>Consider other models of service including</p>	<p>Events completed – reviewed by March 2017</p> <p>Evaluation of learning events undertaken by march 2017</p> <p>Review of models</p>

Priority	Action	Delivery	Target
		for treatment room provision as part of the city wide review	considered by OP group and agreed by March 2017

Homelessness

Priority	Action	Delivery	Target
Putting in place the architecture of Integration	Embed the community homeless service in the locality	<ul style="list-style-type: none"> work to improve the interface with all care groups. Provide shadowing opportunities for staff and Community Homeless Team Managers to attend Management Meetings for all care groups. increase access to preventive services undertake a review of the Housing Options approach. Monitor the number of referrals and the outcome of these referrals to preventative services, welfare rights and mediation. Review outcomes for Service users that are dealt with through a Housing Options Approach, measure repeat homelessness. All information is recorded on I world. 	<p>January 2017</p> <p>September 2016</p>
Match local service delivery against agreed priorities	<p>Homelessness prevention mediation service</p> <p>Improve provision for those leaving prison We are introducing this to the Prison Casework Team, this is a service that is currently available through housing options.</p> <p>Improve the quality of accommodation available to homeless service users.</p> <p>Improve our arrangements for service user involvement</p>	<ul style="list-style-type: none"> Monitor implementation Examine ways of reducing homelessness on leaving prison. Work with SPS to monitor and collate appropriate information to measure outcomes. Prison Casework Team to work more closely with Community Homeless Teams to improve the service provided for prisoners on release. continue to reduce the length of time that service users spend in bed and breakfast accommodation. Monitored weekly through B and B monitor meeting. Agree a new service user involvement framework to ensure service users views are fed into planning and service delivery Ensure services to refugees continue to be 	<p>Ongoing</p> <p>March 2017</p> <p>March 2017</p> <p>Ongoing</p> <p>December 2016</p>

Priority	Action	Delivery	Target
	Support the development of services to refugees and new communities	<p>effective</p> <ul style="list-style-type: none"> • Continue to ensure access to cost effective interpreting services • Ensure staff have access to up to date guidance for homeless applicants with no recourse to public funds • Community Homeless Team to work closely with Children and Families Roma Team to support Roma families to secure appropriate accommodation to meet their needs • Continue to examine opportunities to develop access to private rented sector. 	<p>Ongoing</p> <p>April 2017</p> <p>Ongoing</p> <p>Ongoing</p>
Focus on and develop service capacity particularly in relation to prevention and early support	<p>Strengthen the focus on homelessness prevention</p> <p>Mitigate the effects of welfare reform</p>	<ul style="list-style-type: none"> • Continue to support the Housing Options approach, work closely with the Registered Social Landlords to prevent homelessness. • Attempt to improve links with the private rented service in conjunction with DRS to improve private rented accommodation. (This is connected to the above in relation to this is the approach that the Scottish Government are guiding us to use) • Improve joint work with law centres • Support delivery of the single outcome agreement Housing and Homelessness work stream • Continue to monitor the impact of welfare reform • Continue to ensure staff can signpost 	<p>Ongoing</p> <p>April 2017</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>
Deliver services that are safe, efficient, effective and value for money	<p>Strengthen tenancy sustainment activity</p> <p>Improve outcomes for multiply</p>	<ul style="list-style-type: none"> • Work with housing associations to ensure effective referral pathways to all HSCP and other services • Develop innovative approaches to accessing 	<p>October 2016</p> <p>April 2017</p>

Priority	Action	Delivery	Target
	excluded homeless service users Ensure effective service pathways for vulnerable people	housing support services <ul style="list-style-type: none"> • Improve access to homeless prevention services to tenants in private rented sector • Review and develop pathways for vulnerable adults and children 	August 2016 April 2017
Planning for the future	Ensure commissioned services continue to be strategically relevant, meet the needs of service users and the wider community. Access to employment, health and education Support implementation of self-directed support	<ul style="list-style-type: none"> • Work with GCC Commissioning Team on a review of commissioned services, including housing support and Bed and Breakfast accommodation. • Improve homelessness service links with Bridging Service • Monitor progress of the self-directed support pilot 	October 2017 October 2017 May 2017

6. HEALTH IMPROVEMENT AND INEQUALITIES

Priority	Action	Delivery	Target
<p>Less difference in healthy life expectancy between neighbourhoods and groups</p> <p>Thriving Places:</p>	<p>Contribute to the development of a place based approach to community capacity building and neighbourhood regeneration through partnership working in Gorbals; Priesthill; Househillwood and Govan.</p>	<p>Using co-production approaches support and enable communities to influence service delivery and develop responses to locally identified priorities and needs.</p> <p>Contribute to and support the role of Anchor Organisations in each of the Thriving Neighbourhoods.</p> <p>Specific focus on proposals to extend the Govan Thriving Places boundary thereby increasing the neighbourhood demographic.</p>	<p>A number of community engagement ‘creating conversations’ activities undertaken with local communities in Gorbals and Priesthill/Househillwood thriving places.</p> <p>Resources allocated to ensure the appointment of Community Connector to anchor organisation in Priesthill/Househillwood.</p> <p>Support the selection process to ensure the appointment of anchor organisation for Priesthill/Househillwood.</p>
<p>Govanhill Neighbourhood:</p>	<p>Responding to the diverse needs of Govanhill community</p>	<p>To support the implementation of the Govanhill Action Plan in conjunction with local partners.</p> <p>Using co-production approaches support and enable communities to influence services and develop plans that support community engagement and deliver initiatives that respond to locally identified priorities and the needs of the diverse community.</p>	<p>Recruitment of additional peer educators for Roma Peer Education Programme and implementation of capacity building programme for peer educators.</p>

Priority	Action	Delivery	Target
		<p>Deliver in partnership with Govanhill Community Development Trust the second phase of the Roma Peer Education Programme and to support the development of the ESOL Café. To support and develop work emerging from the RomaNet Multi Agency Working Group.</p> <p>To further develop and enhance Health Improvement links with Primary Care and wider services to improve the health and well-being of the local community. Explore the potential to develop the Community Orientated Primary Care Model as a vehicle to respond to diverse needs.</p>	<p>COPC model established within Govanhill Health Centre.</p>
<p>Reduced exposure and use of tobacco Smoke:</p>	<p>Support the Implementation of the Glasgow Tobacco strategy</p>	<p>Ensure the on-going delivery of preventative tobacco work with young people & adults. Support the implementation of NHS&GGC smoke-free policy and smoke free places and events within South Locality. Promote & deliver smoking cessation services and increase referrals from a range of providers & services including Primary Care, Pharmacy, Addictions, Mental Health, and Criminal Justice & Housing Associations.</p>	<p>Target our smoke free services to patients in SIMD 1 & 2 to ensure new HEAT Target is reached.</p>
<p>Rebalanced relationship with alcohol and reduced drug use:</p>	<p>Support the implementation of the Single Outcome Agreement for Alcohol and the Alcohol & Drug</p>	<p>Work towards reducing the availability & acceptability of alcohol with adults & young people through partnership delivery of local Community Alcohol Campaigns, utilisation of</p>	<p>Train local partners in ABI. Increase the number of</p>

Priority	Action	Delivery	Target
	Partnership Strategy	<p>the 'Ripple Effect' Findings and strengthening the community role in the alcohol licensing process.</p> <p>Contribute to community recovery within South Locality and further develop & deliver South Locality 'Recovery with Rangers' and 'Recovery with the Citizens' programmes.</p>	people participating in 'Recovery with Rangers' and other recovery programmes.
Reduce Poverty and Build Aspirations	<p>Deliver financial inclusion services including income maximisation, financial capability and debt management.</p> <p>Deliver employability services through the Bridging Service.</p> <p>Deliver actions to address poverty including food poverty and the stigma of living in poverty for our patients and communities.</p>	<p>Work to increase referrals to financial inclusion services across the south sector.</p> <p>Deliver Peer Support and Advocacy for people with poor mental health at risk of adverse sanctions.</p> <p>Work with local residents to develop training and awareness materials for partners to raise awareness of the issue of poverty and stigma.</p> <p>Deliver a range of food & nutrition programmes across South.</p>	<p>Increased referrals to financial inclusion services.</p> <p>Peer support group established.</p> <p>Community engagement group established to develop materials, and number of staff trained in resource.</p> <p>8 food and nutrition programmes delivered.</p>
Creating a Culture For health in the city (alcohol drugs smoking and obesity)	Promote breast feeding and healthy early years (NHWO 1,2,3,5,7,9)	Support the Organisations re-accreditation of UNICEF baby friendly standards across all staff groups and partner organisations. Promote and help support breastfeeding mums/families targeting BME	UNICEF baby accreditation awarded.

Priority	Action	Delivery	Target
		Deliver oral health improvement programmes based on local population need targeting BAME and vulnerable communities, within budget; identify areas for further efficiency and areas requiring development, investment or disinvestment with reference to the SHANARRI indicators. (NHWO 1,2,3,5,7,9)	Number of programmes/ local residents involved in BME early years programmes.

Gender Based Violence

Priority	Action	Delivery	Target
Match local service delivery against agreed priorities	<ul style="list-style-type: none"> Concentrate effort in 'hot spots' 	<ul style="list-style-type: none"> Work with partners such as the Police to target activity where required Embed the work of the South GBV Implementation Group in the locality 	March 2017
Focus on and develop service capacity particularly in relation to prevention and early support	<ul style="list-style-type: none"> Promote attendance at multi-agency, multi-disciplinary awareness raising training 	<ul style="list-style-type: none"> Advertise dates as speedily as possible 	7 training sessions by March 2017
Deliver services that are safe, efficient, effective and value for money	<ul style="list-style-type: none"> Advertise availability of local and city-wide services 	<ul style="list-style-type: none"> Annual diary of events, particularly 16 Days of Action Continue to deliver annual programme with £6k IGF and 'in kind' input Locality staff continue to participate in MARAC 	Review of programme by March 2017 Review of sub-group activity by March 2017 Review of attendance December 2017

7. RESOURCES

Accommodation

Services are delivered across a range of locations in the South locality.

We continue to keep our accommodation portfolio under review, and are undertaking a major project to assess the scope for increasing clinical space, making better use of our non-clinical areas through the introduction of agile working and improving facilities for staff and patients. We will have a property and accommodation plan to support integration developed by March 2017, including our contribution to regeneration plans in the South.

Recent developments include the Shields Centre, a £2.7 million health and care centre in East Pollokshields that opened in January 2015. This has won significant awards around design and sustainability and has on-going community engagement and development through a community garden project.

We are also well advanced in developing a new health and care centre in the Gorbals to replace the existing Gorbals Health Centre, the Two Max building and the South Bank Centre for Specialist Children's services and which is due to start on site in October 2016.

Human Resources

We have a total of 1,858 staff working in the South – 1,353 NHS staff and 505 social work staff.

Finance

The budget for the locality is in terms of net expenditure in 2016/17 is £234.9m, and includes taking into account savings in 2016/17 in social work budgets. For the NHS component it should be noted that there is currently a financial gap in the NHS Board's budget for 2016/17

South Locality Budget by care group 2016/17

Net Expenditure	South		
	NHS GGC (£000s)	SWS (£000s)	Combined (£000s)
Children and Families	£5,167	£8,886	£14,053
Prisons Healthcare and Criminal Justice	£0	£2,376	£2,376
Older People/Dementia	£13,268	£23,204	£36,472
Addictions	£1,641	£1,932	£3,573
Carers	£0	£576	£576
Elderly Mental Health	£8,588	£0	£8,588
Learning Disability/Physical Disability	£919	£23,025	£23,944
Mental Health	£26,414	£3,254	£29,668
Homelessness	£0	£1,137	£1,137
GP Prescribing	£47,523	£0	£47,523
FHS	£58,497	£0	£58,497
Hosted Services	£0	£0	£0
Support Services	£5,896	£2,609	£8,505
Resource Transfer	£0	£0	£0
Total	£167,912	£66,999	£234,911

8. PARTNERSHIP WORKING

In this section we outline the priorities we are taking forward with our key partners in the South.

Housing

There are significant links with housing providers in the South locality through:

- Essential Connections Forum– a joint forum between the HSCP and housing providers / Registered Social Landlords.
- Vulnerable Household Forum – a joint forum between third sector providers and the HSCP to support tenants, especially those identified as vulnerable and those affected by homelessness
- Housing Options – the HSCP plays a key role in supporting the roll out of Housing Options. Housing Options is a model which offers those seeking social housing a full assessment of their options including a private rent, buying a property and mediating with parents for a young person to remain at home. It also aims to support vulnerable tenants to maintain that tenancy and prevent homelessness/crises
- Single Point of Contact – a key role of the Housing, Health & Homelessness lead for the locality, escalating concerns and co-ordinating support for vulnerable individuals.
- Community Casework Team (CCT) –assessing homelessness and identifying housing for those deemed homeless, exploring potential for making full use of the new Local Letting Communities comprising clusters of Social Landlords. There is a need to develop a shared understanding of the new CCT model and ensure successful implementation of planned devolved responsibilities
- Project around 415 Nitshill Road with the Wheatley Group – a project which seeks to support older people in their homes to prevent admission to hospital or long term care. The project covers a population of around 12,500 people, 17% of whom are of pensionable age, in the Nitshill, Priesthill and Househillwood area. .

Priorities for housing and homelessness include working with partners on:

- Essential Connections Forum to be re-invigorated and re-launched: where does it fit in with other forums e.g. Vulnerable Household Forum;
- Using resources more effectively: sharing good practice e.g. Housing Options and the 415 App;
- Improving partnership working between housing, social care, health and relevant others: capacity of officers in partner agencies; and clarity of roles; and,
- Integration of the homelessness function with the Health and Social Care Partnership South Locality

Community Planning

In South there are strong connections with partners through community planning arrangements, and clear agreement about the key priorities for statutory agencies in taking forward the Single Outcome Agreement for the City. This is evident in the work underway to take forward the Thriving Places programme in Gorbals, Priesthill / Househillwood and Govan, and the partnership working in Govanhill.

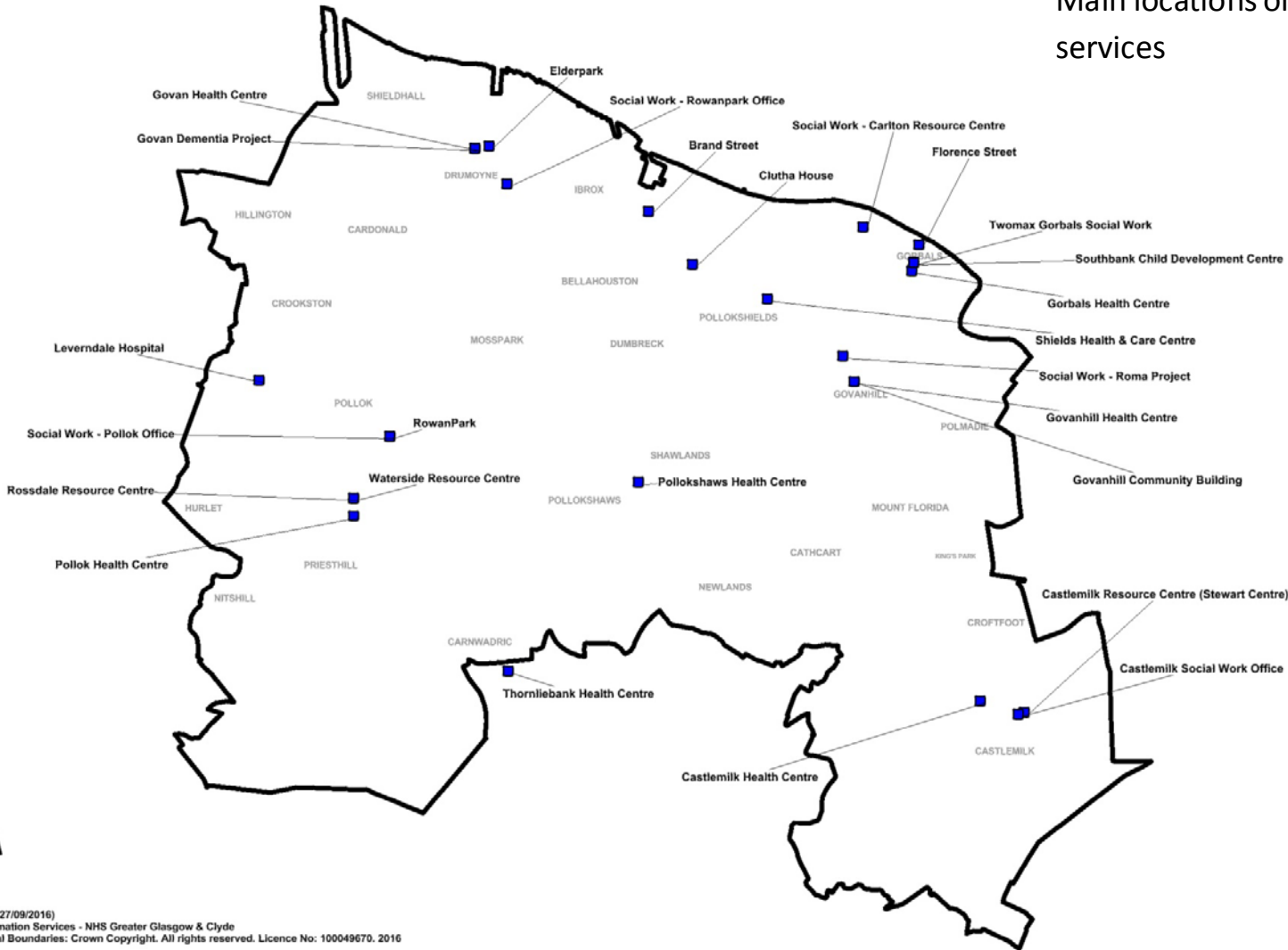
Third Sector

Interface arrangements with the third sector are in development with a South East voluntary sector network established last year and a network in South West set up recently. The HSCP has supported both networks and will continue to contribute to developing positive working relationship across the voluntary sector in South Glasgow. Examples of areas of joint working include the community connectors programme based with Southside Housing, and work with Nan MacKay Hall on personal foot care.

Annex A – Map of South Locality

Glasgow HSCP

Main locations of health and social work services



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