Integration Joint Board: Strategic Plan 2018-2021

Working together for the best possible health and wellbeing of our communities.
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This is the second full Strategic Plan of the South Ayrshire Integration Joint Board. In the three years since the Board was first established significant progress has been made within South Ayrshire on a wide range of health and social care issues.

Comprehensive governance arrangements have been put in place within the IJB and within the service delivery vehicle: – the South Ayrshire Health and Social Care Partnership.

Partnership working is at the heart of operational and planning arrangements and contributions are invited and sought from all stakeholders: patients, service users, carers, staff, professionals, locality planning groups and from partner organisations from across the sectors.

A summary of the key achievements over the 2015-18 planning period is included in this document. The progress made is in large part due to the dedication and commitment of staff within the Partnership and I would like to thank them for their contribution. Many have taken on unfamiliar roles and demonstrated an ability to work collaboratively with colleagues from other disciplines and with partner agencies and the wider public.

The planning period ahead will see a continuing drive for transformational change in services and in the way that support is provided. The emphasis will continue to be to focus on prevention, early intervention and self-care at all stages in the life course. This will mean the further integration of services and different ways of working, not just within the public sector, but across all sectors.

The IJB will support the health and wellbeing of our children and young people as part of an integrated agenda with Community Planning Partners around the delivery of services with a particular focus on child protection, looked after children and care leavers.

Providing choice and control for service users is a key principle for the Integration Joint Board and this will mean changing the culture within our partnership and we will support staff from across the sectors to make this change.

Similarly, we will seek to support the changing role of GPs and Primary Care Services as the role of family doctors changes to be that of expert medical generalist supported by a full multi-disciplinary team of other health and care professionals.

All of the work that will be taken forward continues to be done within the context of a challenging financial and operational environment which will require transformational change in order to achieve the Board’s objectives. The overarching aim will be to ensure a continued focus on what is important to people and their lives in as fulfilling a way as possible. The IJB is committed to assisting people to achieve the personal outcomes to which they aspire. However, the Board is equally realistic in its assessment that statutory service provision can only go so far. Over the next planning period it will seek to engage
further with communities and families to build resilience and a partnership approach to
health and wellbeing.

Tim Eltringham, Director of Health and Social Care
7th March, 2018
EXECUTIVE SUMMARY

This Strategic Plan replaces the first Plan approved by the Integration Joint Board on 2nd April, 2015 for the period 2015-18. It aims to provide a 10-year vision for integrated health and social care services and contains a three-year strategic planning framework for 2018-21 which sets out priorities for the Partnership and how it will use its resources to integrate and transform services in pursuit of National and Local Outcomes.

The Integration Joint Board has agreed the following Vision, Mission and Values for the plan period:

Vision

‘Working together for the best possible health and wellbeing of our communities.’

Mission for Plan Period

The IJB through the Health and Social Care Partnership will express it’s mission in this planning period through an approach rooted in the following principles:

- Support and services will be co-produced – ‘doing with’ not ‘doing to.’
- Partnership with communities - sharing all resources.
- People will be treated as equals and assets and strengths built upon.
- People will have access to good information and advice pre-crisis points.
- The system will be outcome focused, proportionate and responsive.
- Bureaucracy will be the minimum it needs to be.

Values

The following are the key values to which those employed or contracted by the Partnership, or who are stakeholders in it, will be expected to adhere to:

We will be:

Caring
Positive
Respectful
Safe
Supportive

We will demonstrate:

Engagement
Integrity
The Strategic Objectives for the Plan period, designed to deliver the National Outcomes for Adults, Older People and Children, are:

- We will protect vulnerable children and adults from harm.
- We will work to provide the best start in life for children in South Ayrshire.
- We will improve outcomes for children who are looked after in South Ayrshire.
- We will reduce health inequalities.
- We will shift the balance of care from acute hospitals to community settings.
- We will support people to exercise choice and control in the achievement of their personal outcomes.
- We will manage resources effectively, making best use of our integrated capacity.
- We will give all of our stakeholders a voice.

The Integration Joint Board has committed the Integrated Budget of £192,379,000 in 2018-19 and an estimated £573,815,000 over the Plan period to the delivery of these Strategic Objectives. As functions, strategies and services are reviewed and integrated, it is likely that the current pattern of spend will change as steps are taken to shift the balance of care from institutional to community settings. The total figures shown include the cost of those Acute Hospital Services that are within the scope of the Partnership for strategic planning purposes.

In summary, therefore, the direction of travel which has been set by the Integration Joint Board through this Strategic Plan is one where the people of South Ayrshire, across all age ranges, are supported to have the best start in life and where they can live independently, well and safe in their local communities and where they can expect Community Planning Partners to work with them, collaboratively, to address health inequalities and economic and social inequalities, more generally.

The Integration Joint Board will put in place plans and arrangements that will support the growth of community and primary care services and will work with communities and partners to find innovative ways to accomplish this in what are extremely challenging financial circumstances. Through the adoption of this approach and a policy agenda focussed on the needs of the individual; early intervention and prevention; choice and control; and the innovative use of technology, the Partnership’s overarching priorities will be to shift the balance of care from hospitals and other institutions to local communities and to support our children and young people to attain their full potential.

Note:

Final budget figures are yet to be determined. Figures shown above are indicative.
WHO WE ARE

The South Ayrshire Health and Social Care Partnership brings together a wide range of community and primary care health and social work services into a single operational delivery unit. In South Ayrshire the Integrated Partnership includes Adult Services, Children’s Services and Criminal Justice Services. The Partnership is governed by the Integration Joint Board (IJB). The IJB has members from NHS Ayrshire and Arran, South Ayrshire Council, representatives of the 3rd Sector, Independent Sector, staff representatives and others representing the interests of patients, service users and carers.

The IJB is a separate legal entity in its own right and has within its scope, staff from both South Ayrshire Council and NHS Ayrshire and Arran. It is responsible for planning and overseeing the delivery of a full range of community health and social work/ social care services. The IJB is responsible for allocating the integrated revenue budget for health and social care in accordance with the policy priorities set out in its Strategic Plan.

In practice, this means that services will work more closely together to deliver streamlined and effective support to people that need it.

Service details are provided within the South Ayrshire Integration Scheme (available here).
INTRODUCTION

The Public Bodies (Joint Working) (Scotland) Act 1 which established integrated health and social care partnerships came into effect on 2 April 2014. The main purpose of Integration is to improve the wellbeing of people who use health and social care services, particularly those whose needs are complex and require support from both health and social care.

Integration also aims to:
- Improve the quality and consistency of services for patients, carers, service users and their families;
- Provide seamless, joined up, high quality health and social care services to care for people at home, or in a homely setting, where it is safe to do so; and
- Ensure resources are used effectively and efficiently to deliver services that meet the needs of the increasing number of people with longer term and/or complex needs.

Integration Joint Boards with similar functions have been established in the North and East Ayrshire Council areas.

This Strategic Plan replaces the first Plan approved by the Integration Joint Board on 2nd April, 2015 for the period 2015-18. It aims to provide a 10-year vision for integrated health and social care services and contains a three-year strategic planning framework for 2018-21 which sets out priorities for the Partnership and how it will use its resources to integrate services in pursuit of National and Local Outcomes.

Some hospital-based services are within the scope of the Strategic Planning process, particularly those around unplanned emergency admissions. These are central to one of the primary objectives of Integration, which is to shift the balance of care from a hospital or institutional setting to the community.

In addition, where specialist services are managed by a ‘Lead Partnership’ on behalf of all three Ayrshire based Health and Social Care Partnerships, this Plan will include reference to the vision and priorities for those services. Local priorities agreed between this Partnership and the Lead Partnership will be reflected in the respective strategic plans of both bodies.

The South Ayrshire Health and Social Care Partnership is the Lead Partnership for the following delegated functions:
- Allied Health Professions (AHPs)
- Continence
- Technology Enabled Care (TEC)
- Joint Equipment Store
- Falls Prevention
- Sensory Impairment

1 Public Bodies (Joint Working) (Scotland) Act 2014, Scottish Parliament 2014
http://www.scottish.parliament.uk/S4_Acts/Public%20Bodies%20(Joint%20Working)%20(Scotland)%20Act/b32bs4-aspassed.pdf
• Health Visiting Services, FNP, School Health and LAAC

The East Ayrshire Health and Social Care Partnership leads on Primary Care Services across Ayrshire and Arran and the North Ayrshire HSCP is the lead Partnership for Specialist Mental Health Services, including in-patient services.

At the heart of this approach to strategic planning will be the provision of services and support across the sectors, including the Third and Independent Sectors, in a way that meets the needs of particular individuals, communities and localities. To facilitate this, Locality Planning arrangements have been established in six areas of South Ayrshire. More information on this is provided later in this Plan.
PREVIOUS PLAN PROGRESS

In the period 2015-18, the following highlight progress that has been made in improving the development of integrated health and social care supports across the sectors in South Ayrshire and how a number of these have led to changes in the ways that services are delivered or provide examples of good practice:

Children, Young People and Families

- Through a more co-ordinated approach we are identifying and meeting the needs of families who require support during pregnancy, this includes the extension of the Family Nurse Partnership to all young women of 19 years and under.

- We have increased support to the families of children from birth to school age, through the implementation of the Universal Health Visiting Pathway.

- Funding has been secured from The Life Changes Trust to support the development of a South Ayrshire Champions Board, which is a forum that creates a unique space for care experienced young people to influence service design and delivery in areas which directly affect them. A Corporate Parenting Officer and two care experienced Participation Assistants have been appointed. The team has been successful in raising awareness of Corporate Parenting through the sharing of stories, development of a South Ayrshire Looked After Promise, and by signing of the Scottish Care Leavers Covenant.

Child and Adult Protection

- South Ayrshire Sexual Exploitation Joint Action Group has worked with the Multi-Agency Partnership (End Violence Against Women and Children), the Adult Protection Committee, the Child Protection Committee and key services, to develop and deliver resources for staff, to support awareness and responses to child sexual exploitation and produced the South Ayrshire Strategy - Response to Sexual Exploitation and Abuse 2017 – 2022.

- The IJB approved the development of the Concerns Hub based at Kilmarnock Police Station in September 2016. This is provided on a Pan Ayrshire basis. The Hub has allowed timeous information sharing and has impacted favorably on the number of referrals to the Children’s Reporter and Adult Support and Protection.

Health Improvement

- Preventive work is central to ensuring people can live in good health in South Ayrshire. A range of Health Improvement Strategies have been and continue to be delivered on a pan-Ayrshire basis. The Healthy Weight Strategy, Oral Health Strategy, Tobacco Control Strategy, Mental Health and Wellbeing, Oral Health Strategy and Blood-borne virus framework are delivered across each of the Health & Social Care Partnerships (HSCPs), Community Planning Partnerships (CPPs) and
acute services. The pan-Ayrshire children and young people’s Transformational Change Programme provides key links to the South Ayrshire Children’s Services Plan. These were all delivered throughout the time-period of the previous Strategic Plan.

Shifting the Balance of Care

- The Partnership has developed an approach based on four key priorities to manage care for those people most at risk of admission to hospital. These include the following priority areas: Anticipatory Care Planning, Community Rehabilitation and Enablement, Redesign of Services at Biggart Hospital and in 2017-18 the Interface with Combined Assessment Unit at Ayr Hospital which opened in June 2017. These align with the Older People and Unscheduled Care work streams being taken forward on a pan-Ayrshire basis.

- Anticipatory Care Planning has been adopted in the majority of GP Practices in South Ayrshire. The initiative involves regular multi-disciplinary meetings within GP Practices focusing on the development of robust care plans for individual patients. The aim is to develop plans which will help maintain people within their own homes and enable a coordinated response to any deterioration to a person's health and care.

- HARP is an Ayrshire-wide tiered community rehabilitation programme supporting a range of morbidities in a more effective and efficient manner. In the first instance the programme has targeted cardiac, pulmonary, cancer and stroke patients.

- A Care at Home Pharmacy Technician Service has been introduced which is a medication compliance service mainly for elderly patients who have been identified by health and social care professionals, as well as via hospital discharge, as requiring help to manage their medication, to undertake re-enablement and to manage their medicines independently. A home visit can be arranged, and the technician will carry out a comprehensive medicines check referring to a Pharmacist for a medication review, if required; assess the ability of the person to manage medicines independently; organise appropriate aids, if required; and liaise with family and carers, as required.

Mental Health

- The Integration Joint Board has approved an Adult Community Mental Health Strategy for 2017 – 22. This is an outcomes based document and prioritises work designed to deliver against national outcomes and 7 local outcomes over the period of the Strategy.

Learning Disability

- An Adult Learning Disability Strategy has been agreed by the IJB for the period 2017-23 which is based on the National Strategy – “The Keys to Life.” The
development of the Strategy was supported by the Scottish Commission for Learning Disability and the Government’s Centre of Excellence for Learning Disability in Scotland. The Learning Disability Strategy has been designed to deliver against four local outcomes.

- **New Commissioning Plans** have been developed for Adult Learning Disability Services and Adult Community Mental Health Services to give practical effect to the new strategies. Tenders have been issued in 2017-18 for new 3rd and Independent Sector provided services which will place more emphasis on the delivery of outcomes, innovation and improved opportunities for service users.

**Sensory Impairment**

- A Pan Ayrshire **Community Hearing Service** has been put in place led by the South Ayrshire HSCP. The new Community Hearing Service is based in 10 static locations across the three Ayrshire Council areas. The new service is funded equally by the 3 Ayrshire Health and Social Care Partnerships.

**Building Community Capacity**

- The HSCP has worked hard to develop and enhance community capacity within the six localities that comprise South Ayrshire. For example, a Community Link Practitioner role within Primary Care has been established in a number of GP Practices with a role that includes signposting people to local support and activities available within their localities, with the intention of having a direct impact on loneliness and social isolation. Crucial to the success of this has been the development of real time information on what organisations, services and activities are available within localities and the Partnership has been pleased to support Voluntary Action South Ayrshire in its development of “South Ayrshire Life” an on-line community information system.

- Community capacity has been further enhanced by the work of the **six locality planning groups** and the significant work that they have undertaken to organise a number of Participatory Budgeting Events which has seen a significant sum of money allocated to support local groups and activities and to sustain capacity in each of the six localities.

- The HSCP is one of a number of Partnership’s in Scotland to adopt the **Community Led Support** programme designed to provide the most appropriate support to people, locally, through “front doors” in their own communities by means of a range of agencies and volunteers.

- Following high profile episodes of people in rural South Carrick not being able to get a timely response from the local Scottish Ambulance Service, with support from the Girvan and South Carrick Locality Planning Group and the Scottish Ambulance Service, a **South Carrick Community First Responder Service**, comprising members of the local community, has been developed and became operational in December 2016.
Dementia Friendly Communities

- Given the age profile of the population in South Ayrshire the prevalence of Dementia in South Ayrshire is greater than that for Scotland as a whole. The Partnership has supported the establishment of Dementia Friendly Communities in Prestwick and Troon and Villages and is preparing a Dementia Strategy and Implementation Plan for South Ayrshire.

Addictions

- New recovery groups have been developed in the Carrick area offering peer support, social activities and a way back to mainstream community activities. New Family & Carer support groups have been developed in Ayr offering vital peer-based support for families affected by someone else’s substance use. These activities reduce social isolation and stigma, provide information and advice, and promote self-management.

Carers

- By working in partnership with the South Ayrshire Carers Centre a range of information, advice and support services for carers are now in place in South Ayrshire. These include face to face interviews, telephone contact, peer group support, health interventions, financial inclusion, short breaks, respite provision for young carers and adult carers.

Commissioned Services

- Ayr United Football Academy (AUFA) delivers a Weigh to Go programme which is a healthy lifestyle programme, designed by NHS Ayrshire and Arran. The programme focuses on self-management to achieve 5-10% weight loss and increase physical activity. The programme incorporates group education and support, individualised goal setting, and telehealth such as Apps to monitor progress and encourage self-management.

- Carrick Opportunities Centre is a community hub providing day opportunities for people with learning disabilities. Other partner organisations are also based there, including SAC Community Learning and Development, Job Centre Plus, Ayrshire College and the local driving school. The services offered to people and the classes provided have been requested by people with learning disabilities through consultation. The service has recently been awarded a certificate of excellence by ASDAN for excellent practice in running ASDAN courses particularly in relation to the Inclusive Curriculum.

- Rosie’s Retro is a social enterprise from Turning Point Scotland which provides workplace opportunities for adults with learning disabilities. It comprises a gift shop in Ayr town centre selling a range of unique and quirky products, many made locally,
with studio space which is used for craft, drama and adult learning workshops. Those using the service have noticed improvements in their own health and wellbeing.

- **My Home Life** is a social movement that aims to enhance the quality of life for all who live, die, visit and work in care homes through transformational change and encourages working in partnership through appreciative relationship centered practice. The HSCP has been pleased to support this programme which has been delivered by staff from the University of the West of Scotland and demonstrates a strong partnership arrangement between these bodies and Scottish Care, the representative body for Independent Care Providers.
STRATEGIC CONTEXT AND THE NEED FOR TRANSFORMATIONAL CHANGE

This section summarises the background to current strategic planning in the Health and Social Care Partnership. It explains why, going forward, traditional approaches to the provision of health and social care services, across all sectors and across all age ranges, are not an option for the Integration Joint Board and explains why change is necessary.

Primarily change is necessary as demand is rising significantly whilst, in real terms, available public spending is falling. This makes it extremely challenging to give all children the best start in life and to meet the needs of a population which is ageing significantly and which requires increasing levels of care to keep local people safe, well and content at home in their local communities.

The need for transformational change in South Ayrshire is clearly demonstrated by the established needs of the area. These are set out in the Summary Needs Assessment and Area Profile at Appendix 1. This provides the context for the objectives and policy priorities detailed in this Strategic Plan. The full Needs Assessment and Area Profile is available here.

Updated profiles of each of the six localities in South Ayrshire can be found here.

Key information from the Needs Assessment which will be considered and addressed through this strategic planning process includes the following:

**Population**

The older population is projected to increase markedly by 2039:
- People of pensionable age will increase by 21%.
- Those aged over 75 will increase by 82%.

Based on current patterns of demand, this will have major consequences for older people’s services, including a need for 40 more care at home places and 30 care home places each year over the three year planning period.

The projected change in the South Ayrshire population is not evenly spread and the 0-15 and working age populations will both decrease:
- By 2039 there will be a decrease of 8% in those aged 0-15.
- There will also be an 11% decrease in those of working age.
- South Ayrshire has the highest proportion of those aged 100+ in Scotland. This will change the dependency ratio: i.e. the number of those deemed as dependents (people who are too young or too old to work) compared to those of working age.

The dependency ratio will increase from 67 to 87 between 2016 and 2039, compared with 55 to 67 for same time period across Scotland. This will require all governance groups, including the IJB, to reassess how resources are
Deprivation and Inequality:
1288 people, which is 11.5% of the South Ayrshire population live within the 15% most deprived data zones.
32% of South Ayrshire residents spend more than 10% of their household income on heating costs and are said to be in fuel poverty.
South Ayrshire has the 8th highest level of child poverty in Scotland.
26% of children live in poverty after housing costs compared to 23% across Scotland.
The rate of alcohol related hospital stays (708.5) and drug related hospital stays (232.4) in South Ayrshire are both higher than the national rates (680.8 and 162.2 respectively).
There has been an increase in drug related deaths between 2015 and 2016 from 15 to 22.

The Health and Social Care Partnership is working with the Community Planning Partnership and the Ayr North Locality Planning Group to produce an Area Place Plan for Ayr North. New strategies approved by the IJB will be designed to address inequality and to target resources to where they are needed most. The Adult Learning Disability and Mental Health Strategies approved in 2017 with their emphasis on inclusion and participation are examples of this approach. The IJB will continue to support the Alcohol and Drugs Partnership’s approach of early intervention, prevention and recovery to support individuals, families and communities.

Population Health:
Premature mortality has increased in South Ayrshire from 422 to 451 and is now higher than the national average.
The main causes of death in South Ayrshire are Cancer and Circulatory Disease.
The proportion of adults in South Ayrshire considered to be obese over a rolling three-year period for men was 74% and women 66% compared to the Scottish percentage of 69% and 61% respectively.
The percentage of last 6 months spent at home or in a community setting was 85% in South Ayrshire compared to 87% across Scotland.
The rate of people with learning disability in South Ayrshire Council is 6.4 per 1,000 adults, higher than the national average of 5.2.
South Ayrshire has higher levels of depression at 7.6 compared to 6.3 across Scotland.
Prevalence rates for diagnosis of Dementia in South Ayrshire are 1.03 which is higher than the national rate of 0.8 across Scotland.
20% of the South Ayrshire population is prescribed drugs for anxiety, depression and or psychosis compared to the national rate of 18%.
The Integration Joint Board is supporting the delivery of a range of public health initiatives on tobacco, alcohol and on weight. A strategy on end of life care will be produced in 2018-19 with the aim of ensuring more people are at home when they die. Primary Care is at the heart of much of the work that will be required to address these issues and the new GP Contract, which will be implemented over this planning period, will be a cornerstone of this, as will be
the new Primary Care Improvement Plan. A dementia Strategy for South Ayrshire is in preparation. A review of prescribing led by the Clinical Director is in progress in South Ayrshire.

**Balance of Care:**
The rate of Emergency Admissions to hospital is higher in South Ayrshire than across Scotland. The length of stay in hospital (bed day rates) is also higher in South Ayrshire. Bed Day rates for delayed discharges are also higher than the national average.

The IJB is supporting the Pan-Ayrshire Unscheduled Care Transformation Programme and is pursuing a number of locally based initiatives under this banner. The effectiveness of the current programme is being reviewed in 2018 and the outcome of this, together with any required changes, will be reported to the IJB. Demographic changes as detailed above will require the level of resource that is available to support areas such as delayed discharge to be reviewed and increased through either additional resources, efficiencies or through a shift in the balance of care.

**Carers:**
There are around 11,709 carers in South Ayrshire. This equates to 10.4% of the South Ayrshire population compared to 9.3% across Scotland. Unpaid carers in South Ayrshire are less likely to be employed than in the rest of Scotland and more likely to be aged 65 and over. 

Health and Local Authority responsibilities to support Carers and Young Carers under the provisions of the Carers (Scotland) Act, 2016 are being delegated to the IJB from 1st April, 2018. A new Carers Strategy is in preparation and the IJB will shortly be asked to approve local eligibility criteria and a short breaks statement and short breaks and respite policy for South Ayrshire.

**Adult and Child Protection:**
Adult Protection referrals continue to rise annually Child protection are slightly above the Scottish average. 

Priorities in this planning period will include implementing the recommendations of the review of the Chief Officers Group, early intervention initiatives to identify those at risk of harm, ensuring effective risk assessment and outcomes, and improved performance management and quality assurance procedures.

**Children and Young People:**
There are higher mortality rates for still births, perinatal and neonatal in South Ayrshire than across Scotland. Infant mortality rates are in line with the national average. The percentage of babies exclusively breastfed at the 6-8 week review is considerably below than the national rate at 21.8 in South Ayrshire compared to 30.3 across Scotland. 

The number of children Looked After in South Ayrshire has increased, and is higher
than comparator authorities, however there has been a significant shift in the proportion of those looked after in the community as opposed to residential accommodation. Prevention and Early Intervention, Corporate Parenting, Permanence Planning and Participation and Engagement have been identified as the priorities for action in the planning period by the HSCP.

**Partnership Arrangement and Links to Other Strategic Level Plans**

Through this Strategic Plan the Integration Joint Board will work with other Community Planning Partners to deliver agreed policy priorities across service areas: e.g. for Children and Young People by means of the Children’s Services Plan for South Ayrshire. Where priorities are to:

- ensure South Ayrshire’s children get the best start in life, that South Ayrshire is the best place to grow up, and all children are successful learners, confident individuals, responsible citizens and effective contributors;
- reduce the gap in outcomes between the most deprived and least deprived children and young people in South Ayrshire;
- ensure children and young people who are looked after or are care leavers are cared for and supported to improve their life experiences and life chances;
- ensure young people are supported to achieve and maintain good emotional and physical wellbeing; and
- ensure children and young people have a voice in influencing service delivery that affects their lives.

It will work with the other statutory bodies – South Ayrshire Council and NHS Ayrshire and Arran to deliver their priorities which are:

- **South Ayrshire Council Strategic Objectives from its Programme for Effective Governance 2017-22:**
  - Take direct and sustained actions that reduce poverty and disadvantage; to close the poverty attainment gap by 2030 and adopt the use of schools for community and local use, using these assets to build strong community networks, provide partnership based community services and complement learning and development opportunities for children and families in need.
  - Create a better health and care system to suit local people’s needs; to adopt, support and encourage an approach to aged health that is community based, early interventionist and prevention oriented that encourages participation to overcome social isolation. By 2030, the average healthy age of older men and women will increase by 2 years.

- **NHS Ayrshire and Arran Objectives from its Transformational Change Improvement Plan 2017-20:** Working together to...
  - deliver transformational change in the provision of health and social care through dramatic improvement and use of innovative approaches;
  - protect and improve the health and wellbeing of the population and reduce inequalities, including through advocacy, prevention and anticipatory care;
create compassionate partnerships between patients, their families and those delivering health and care services which respect individual needs and values; and result in the people using our services having a positive experience of care to get the outcome they expect;

- attract, develop, support and retain skilled, committed, adaptable and healthy staff and ensure our workforce is affordable and sustainable; and

- deliver better value through efficient and effective use of all resources.

The IJB will work with its fellow Community Planning Partners to deliver the priorities of the October, 2017 Local Outcomes Improvement Plan to:

- improve outcomes for looked after children and care leavers;
- provide support for young people who are carers;
- reduce social isolation and loneliness; and
- provide support for people living with dementia and their carers.

It will work with the other two Integration Joint Boards in Ayrshire to deliver lead partnership services.
LOCALITY PLANNING AND LOCAL PRIORITIES

In South Ayrshire six localities based around “natural communities” have been created in which local people and professionals working locally meet to discuss local needs, to prioritise these and to monitor progress in meeting those needs by the Health and Social Care Partnership and by others from across the sectors. The six localities are:

- Troon & Villages
- Prestwick & Villages
- Ayr South and Coyalton
- Ayr North and Former Coalfield Communities
- Maybole and North Carrick Villages
- Girvan and South Carrick Villages

The purpose of locality planning is:

- to jointly assess need, prioritise and plan how all resources, irrespective of their origin, can best be deployed in pursuit of the delivery of the National and Local Outcomes; and
- to be the local focus for service delivery and support by organisations from across the sectors to the population or communities within the area.

Locality Planning Groups have been established in each locality. Each has set its agenda and priorities for the period ahead and these are set out at Appendix 2.

Each Locality Planning Group is also responsible for making decisions on the utilisation of a Small Grants Budget which can be used to build capacity within local communities. Locality Planning Groups have been instrumental in organising successful Participatory Budgeting events across South Ayrshire. These offer support to local voluntary groups to provide activities and supports to the local people living in each area, which amongst other things, is designed to combat loneliness and isolation. Information on these local supports and activities is now available through a locally run website – South Ayrshire Life - which is provided and managed by Voluntary Action South Ayrshire (VASA), the Third Sector Interface.

It will be a priority of the Integration Joint Board in this planning period to work with Locality Planning Groups to further enhance and develop local involvement in planning and decision making on the provision of local supports. It will be a particular priority to extend this engagement to Children and Young People and to jointly explore with them how this can best be achieved.
PARTNERSHIP PROGRAMME

This section sets out the Integration Joint Board’s Vision Statement, Mission, Values and Strategic Objectives for the plan period.

The Measurable Tasks outlined in the Implementation Plan (see page 35) are designed to deliver progress and continuous improvement against the Strategic Objectives and National and Local Outcomes (see Appendix 3) by means of the IJB’s agreed Policy Priorities and Strategies as set out below.

Vision

‘Working together for the best possible health and wellbeing of our communities.’

Mission for Plan Period

The IJB through the Health and Social Care Partnership will express its mission in this planning period through an approach rooted in the following principles:

- Support and services will be co-produced – ‘doing with’ not ‘doing to.’
- Partnership with communities sharing all resources.
- People will be treated as equals and assets and strengths built upon.
- People will have access to good information and advice pre-crisis points.
- The system will be outcome focused, proportionate and responsive.
- Bureaucracy will be the minimum it needs to be.

Values

The following are the values to which those employed or contracted by the Partnership, or who are stakeholders in it, will be expected to adhere to:

We will be:

- Caring
- Positive
- Respectful
- Safe
- Supportive

We will demonstrate:

- Engagement
- Integrity

STRATEGIC OBJECTIVES
The Integration Joint Board’s Strategic Objectives designed to deliver against National and Local Outcomes and against which the Partnership will measure and report on progress in this regard are:

- We will protect vulnerable children and adults from harm.
- We will work to provide the best start in life for children in South Ayrshire.
- We will improve outcomes for children who are looked after in South Ayrshire.
- We will reduce health inequalities.
- We will shift the balance of care from acute hospitals to community settings.
- We will support people to exercise choice and control in the achievement of their personal outcomes.
- We will manage resources effectively, making best use of our integrated capacity.
- We will give all of our stakeholders a voice.

The Board will seek to meet its Strategic Objectives through the policy priorities it has adopted and which are set out below:

### We Will Protect Vulnerable Children and Adults from Harm


The Child Protection Committee is the key local body for developing and implementing child protection policy in South Ayrshire. The Integration Joint Board will support the work of the South Ayrshire Child Protection Committee.

The multi-agency South Ayrshire Adult Protection Committee undertakes a strategic and monitoring function in relation to the implementation of the Adult Support and Protection (Scotland) Act 2007, locally.

The Child Protection Committee and Adult Protection Committee report to the Chief Officers Group (COG), which comprises the Chief Executives of the Council and NHS Ayrshire and Arran and the Divisional Commander, Ayrshire, Police Scotland. The Chief Social Work Officer is the lead officer for the COG. Following a recent review of the COG it was agreed that the following would be priorities to be addressed in this planning period:

- inclusion of a standing item on performance management;
- conduct an annual learning and development session in order to consider COG joint self-evaluation; and
- that the Alcohol and Drugs Partnership present its annual report to the COG.
South Ayrshire HSCP has responsibility for delivering Community Justice Services within South Ayrshire. Community Justice Ayrshire was set up under Scottish Government legislation – The Community Justice (Scotland) Act 2016. It is a pan-Ayrshire partnership involving partners in East, North and South Ayrshire and reports to the three Ayrshire Community Planning Partnership Boards. The aims of the partnership are set out in the Community Justice Outcomes Improvement Plan, *Beginnings, Belonging, Belief - A Community Justice Plan for South Ayrshire 2017-18*.

Within South Ayrshire the priorities will be to work toward improving the assessment of Domestic Abuse and introduce a Risk of Service User Serious Harm Assessment.

### We Will Work to Provide the Best Start In Life for Children in South Ayrshire

The *Children’s Services Plan 2017-20* sets out the South Ayrshire Community Planning Partnerships vision and priorities. The planning, funding and operational oversight of Children’s Community Health and Social Care Services are delegated to the IJB under the terms of the South Ayrshire Integration Scheme. In 2016 the Care Inspectorate carried out an inspection of Joint Children’s Services in South Ayrshire; the recommendations from this have provided a focus in delivering against the priorities contained within the Children’s Services Plan.

The Universal Health Visiting Pathway in Scotland - pre-birth to pre-school - sets out a core home visiting programme to be offered to all families by Health Visitors as a minimum standard. It is based on the following underlying principles:

- promoting, supporting and safeguarding the wellbeing of children;
- person-centred;
- building strong relationships from pregnancy;
- offering support during the early weeks, and planning future contacts with families; and
- focusing on family strengths, while assessing and respectfully responding to their needs.

The HSCP will build on the significant progress that has been made in implementing the pathway and continue to work collaboratively with partners in line with Getting it Right For Every Child (GIRFEC) to improve outcomes for children, as outlined within the Children’s Services Plan.

The IJB will support young carers through its new Carers Strategy.

### We Will Improve Outcomes for Children Who Are Looked After in South Ayrshire

Every child is unique, each with their own personality, needs, experience and aspirations. Looked After Children are clearly no different – the main thing our Looked After Children have in common with each other is that even at young age, life has not been easy for them and many will have experienced some form of trauma in their lives that impacts on their development.
A child may become Looked After for a number of reasons; including neglect, abuse, and complex disabilities which require additional supports and for some, there will be needs of a specialist care nature. South Ayrshire Looked After Children’s Strategy 2013-18 has identified the following priorities:

- early Intervention;
- achieving permanence;
- balance of care;
- children affected by a disability;
- raising achievement and attainment; and
- contracting and commissioning.

In partnership with the Centre for Excellence for Looked After Children in Scotland (CELCIS) a mapping exercise was undertaken to develop a full understanding of the permanence system. This identified both strengths in current practice and areas for improvement, which are being taken forward through an improvement project, in particular to implement revised Permanency Planning protocols.

South Ayrshire Corporate Parenting Plan 2017-20 has been developed in partnership with all corporate parents in South Ayrshire. The focus of the plan demonstrates how as Corporate Parents we intend to raise the expectations on care experienced children and young people in South Ayrshire to achieve their potential.

### We Will Reduce Health Inequalities

Inequalities in health outcomes are directly linked to wider socio-economic inequalities in society. The wider environments in which people live ultimately shape their individual experiences and are more likely to result in people living in poor housing, encountering poor access to health care, living on a low income and being unemployed or undertaking low paid work. This ultimately results in unequal outcomes in health, illness and death across the population.

Despite overall improvements in population health and mortality rates, health inequalities have persisted in South Ayrshire and whilst South Ayrshire, overall, is considered to be a relatively wealthy community, there are areas of significant poverty and deprivation.

Efforts to tackle inequalities will permeate everything the Partnership does – from population public health to community based care and more specialist services. The IJB’s policy focus in this area is on Early Intervention.

The Integration Joint Board will work with the South Ayrshire Alcohol and Drugs Partnership and support it to deliver its Strategic Commissioning and Delivery Plan to achieve its Vision that “The population of South Ayrshire are able to build on their strengths to reduce alcohol and drug misuse to the benefit of individuals, families and communities.”
The Partnership will take steps to ensure that its services are distributed fairly and in proportion to need across its geographical communities and population groups. The Partnership will improve the experience of individuals by exercising non-discriminatory practice on the grounds of protected characteristics. The Integration Joint Board has approved Equalities Outcomes for the period 2017-21 with a focus on 4 outcomes (available here).

The Integration Joint Board will resource and support the implementation of the Pan Ayrshire and Arran Sensory Locality Plan has been developed to implement the Scottish Government Sensory Impairment Strategy “See Hear” published in 2014.

New strategies approved by the IJB will be designed to address inequality and to target resources to where they are needed most.

The IJB will work with the Community Planning Partnership and the Locality Planning Groups to develop Local Place Plans for two of its localities where deprivation is most prevalent – Ayr North and Girvan. This will include giving consideration to outline plans to build a Health and Social Care Centre in Ayr North which will offer a full range of community and primary health and social care services and services provided by the 3rd and Independent Sectors.

We Will Shift the Balance of Care from Acute Hospitals to Community Settings

The prevention of ill health and early intervention through effective and accessible community and primary health and care services is a priority for the Integration Joint Board and will be a cornerstone of its programme to shift the balance of care from acute hospital to the community and people’s homes. “Home First” will be the adopted philosophy as the HSCP seeks to promote personal independence.

As a consequence of current funding constraints social care services will be provided on a targeted basis by means of an assessment process which will see statutory services being provided to those with “critical” or “substantial” needs. People with needs that do not fall into these categories will be signposted to community based services provided by the 3rd Sector. This will be done by means of the Community Led Support programme and in some cases by utilising “South Ayrshire Life” (further information available here).

The South Ayrshire Integration Joint Board is committed to the delivery of a Pan-Ayrshire devised Programme of Transformational Change in the way that Health and Social Care is delivered and it will do this locally through a focus on:

- building community capacity and opportunities for participation;
- flexible and responsive care at home;
- the prevention of falls and fractures;
- Anticipatory Care Planning and Anticipatory Care Plans;
- the provision of suitable housing for people of all ages;
- the provision of a range of intermediate care alternatives to hospital admission;
- access to Telehealthcare;
- the early diagnosis of dementia;
- carer support and respite;
• rapid access to equipment and access to aids and adaptations;
• responsive and flexible palliative care; and
• the innovative recommissioning of services.

The recently approved contract between the NHS in Scotland for GPs, which will be implemented over the period 2018-21, will lead to a fundamental change in the way that Primary Care Services are provided. In South Ayrshire this will be taken forward as part of the established agenda for Primary Care under the banner of “Ambitious for Ayrshire” lead by the East Ayrshire HSCP on behalf of the three Ayrshire Health and Social Care Partnerships. This will see a greater emphasis on the GP as an expert medical generalist supported by a multi-disciplinary team of other professionals, including nurses, allied health professionals, pharmacists, and social workers. This new and exciting agenda will be set out in a Primary Care Improvement Plan which will be developed by the HSCP and its partners across Ayrshire and will be approved by the Integration Joint Board.

The IJB will take steps to continue to reduce the number of delayed discharges at University Hospital Ayr by working through primary and community care services to minimise the numbers of people requiring care in an acute setting and to put in place community based alternative provision. The HSCP will work with colleagues in the acute hospital sector to minimise the number of unscheduled patients being admitted. The IJB through the HSCP will also continue to redesign, modernise and improve homecare and community nursing provision in South Ayrshire in a way that supports rapid discharge for people who are medically fit to go home. Community Nursing Teams will develop and support an Anticipatory Care approach to deliver care in the community through long term conditions management. The Community Nursing Service will provide care in a homely setting preventing hospital admission. The staff will be skilled to deliver care at home as part of the multidisciplinary teams approach to care. This will include the further development of the three community based service hubs for health and social care services and the development of a single point of contact. Where further rehabilitation is required to enable people to regain their independence, Biggart Community Hospital will provide a step down service designed to help them regain the skills and confidence to live at home.

The move towards the greater utilisation of technology in the provision of care (Technology Enabled Care) is an integral part of the Integration Joint Board’s approach to care planning. For example, in some cases, it will be used to replace one to one sleepover services where these have been assessed by providers, carers and social workers as no longer being required and will be replaced by a responder service. The Health and Social Care Partnership will also take positive steps to deliver on TEC by expanding home health monitoring, expanding the use of video conferencing, expanding the take-up of Telecare and by actively promoting the new National Digital Strategy.

The Integration Joint Board shares the aspirations identified in the 2016 National Clinical Strategy for Scotland. This indicates a change in focus for the NHS away from hospitals to primary care and the corresponding need to strengthen local multi-disciplinary primary care teams and to ensure that these are better integrated with services provided by social care and the Third Sector. In other words, most of the care people need will be provided in local communities and they will be admitted to hospital only when absolutely necessary.
An objective of the Strategy is to review the range of specialties hospitals provide by considering the provision of some complex and many less complex operations in specialist hospitals. This means planning specialist hospital services on a regional basis and in South Ayrshire, where this is appropriate, through West of Scotland Regional Planning arrangements. The IJB will work to establish efficient and effective regional service commissioning arrangements for the people of South Ayrshire and will consider, specifically, how people in rural areas will access these services.

The Integration Joint Board is working locally with partners to give practical effect to the recommendations contained in a report by the Chief Medical Officer on “Realistic Medicine” which it says should be based around:

- shared decision-making;
- a personalised approach to care;
- reducing harm and waste;
- reducing unnecessary variation in practice and outcomes;
- managing risk more effectively, and;
- encouraging improvement and innovation across the system.

From 1st April, 2018 the Integration Joint Board will oversee the implementation of the provisions of the new Carers (Scotland) Act 2016 in South Ayrshire. This is designed to support carers’ health and wellbeing and includes a duty to provide support to carers based on their identified needs. The IJB has approved and published local eligibility criteria and an Adult Carer Support Plan and Young Carer Statement to identify carers’ needs and personal outcomes. The IJB will provide an information and advice service for carers. The IJB will also provide information on the short breaks that are available in line with its eligibility criteria.

A new Carers Strategy for South Ayrshire will be approved and published by the IJB in 2018-19.

The IJB will develop a local strategy to give effect to the Scottish Government’s Strategic Framework for Action on Palliative and End of Life Care (2016-2021). In this the IJB, through the Health and Social Care Partnership and with other Partners from across the sectors, will take steps to ensure that:

- access to palliative and end of life care is available to all who can benefit from it, regardless of age, gender, diagnosis, social group or location;
- people, their families and carers have timely and focussed conversations with appropriately skilled professionals to plan their care and support towards the end of life, and to ensure this accords with their needs and preferences; and
- communities, groups and organisations of many kinds understand the importance of good palliative and end of life care to the well-being of society.

We Will Support People to Exercise Choice and Control in the Achievement of Their Personal Outcomes
The IJB believes that individuals should be supported through the Health and Social Care system to take more control of their own needs and will encourage and support “self-management aided where possible by the utilisation of technology.” In Social Care, the main vehicle for this will be by means of the IJB Self-Directed Support (SDS) policy. This will see all individuals assessed as requiring support being provided with four options for the provision of that support – a direct payment, an individual service fund, partnership arranged and contracted services and/or a mixture of all three of these. The IJB is committed through recently approved strategy documents to the active promotion of choice and control and its new Commissioning Plans for Third and Independent Sector provided services seek the co-operation of provider organisations, appointed, to this approach and to work with it to increase flexibility in a way that better meets people’s outcomes through improved innovation. To this end it has commissioned a review of its current operation of its current SDS policy and it will implement the recommendations from this during this three-year planning period.

The Health and Social Care Partnership is also investing heavily in building capacity within the communities of South Ayrshire as a way of helping people to meet their personal outcomes locally.

It is doing this through its Locality Planning Groups and also through the work that they have all undertaken to support local organisations and community based activities by means of the funds that have been distributed through Participatory Budgeting.

The Partnership will continue to support the 3rd Sector Interface Organisation, VASA, and a number of local third sector organisations to deliver a range of activities within communities designed to improve health, wellbeing and to combat loneliness and social isolation. The Partnership will continue to support the on-going development of South Ayrshire Life.

The Partnership will seek to change the way that social work and social care services are provided through its Community Led Support programme. This will take services closer to communities and will seek to utilise the skills and support available through community based voluntary services, where access to statutory services is not required and where a preventative based approach would be more beneficial.

The HSCP will seek to engage young people more fully in its work during this planning period. It will seek to work with the South Ayrshire Youth Forum to jointly develop proposals in this regard.

**We Will Manage Resources Effectively, Making Best Use of Our Integrated Capacity**

The Integration Joint Board is continuing to integrate health and social care services in a way that is joined up at the point of contact for patients and service users. It is doing this by organising primary and community services around clusters of GP practices and, in conjunction with Locality Planning Groups, will seek to develop service models across the sectors that meet the needs and priorities of local people, within the resources that are available.
The Partnership will take steps to further integrate staff employed in the delivery of health and social care services, thus ensuring a seamless approach to provision. In developing this way of working the Partnership will seek to extend integration beyond those working within the public sector to include personnel from the Third and Independent Sectors. This approach will ensure that Partners, their staff and volunteers are all working in a collegiate manner towards the attainment of National Outcomes and in pursuit of Integration Principles.

The Partnership’s Transformation, Organisational Development and Training Plans will support managers and staff to undertake their roles in new and different ways. The Partnership will also put in place a Workforce Plan during this planning period. The Integration Joint Board will be an important advocate of integrated working within the broader Community Planning Partnership in order to deliver, for example, the vision and objectives of the South Ayrshire Children’s Services Plan.

We Will Give All of Our Stakeholders a Voice.

The Integration Joint Board is committed to the participation and engagement of all of its stakeholders in its work and to this end it has published a Participation and Engagement Strategy (available here) which outlines how it will involve partners across South Ayrshire to develop services that meet the needs and improve outcomes for communities. It has agreed to adopt the National Standards for Community Engagement as part of its approach to participation and engagement.

The Partnership will also seek to communicate clearly with its stakeholders and it has produced a Communications Strategy and Plan (available here). Good communication supports the planning, delivery and transformation of services, promotes effective professional practice and helps increase stakeholder satisfaction.

The Strategic Planning Advisory Group is the Integration Joint Board’s principal stakeholder group on which representatives from communities, professions and organisations from the different sectors sit, along with staff representatives and the Partnership Management Team. The SPAG reviews policy proposals before they are agreed by the IJB and advises on the contents of the Strategic Plan.

Local communities and local professionals have a voice in the development of policy priorities and in reviewing the effectiveness of initiatives and services on the ground through their involvement in Locality Planning Groups.

Looked after young people have a voice through the work of the Champions Board and the IJB will takes steps to further strengthen and develop this during this planning period.

Third and Independent Sector organisations are engaged through a range of Providers Forums in areas such as Older People, Learning Disability and Mental Health. In this
planning period a Providers Forum will be established with organisations that provide services to looked after and vulnerable children and young people in South Ayrshire.

In 2018-19 Stakeholder Forums will be established with service users and carers in three key service areas – Mental Health, Learning Disability and Older People. The purpose of these will be to oversee and advise on strategy implementation, advise on the implementation of commissioning plans, consider future service developments and raise matters of concern.
RESOURCE OVERVIEW

Financial Resources

Total available funding in 2018-19 will be £192,379,000 and over the Plan period is estimated at £573,815,000 (indicative figure for planning purposes and subject to change). A more detailed breakdown is available at Appendix 4. As functions, strategies and services are reviewed and integrated, it is likely that the current pattern of spend will change as the IJB seeks to shift the balance of care from institutional to community settings. The total figures shown include the cost of those Acute Hospital Services which are within the scope of the Partnership for Strategic Planning purposes.

The Integration Joint Board will develop an indicative ten year financial plan using the information set out in the Strategic Needs Assessment and Area Profile.

The three year planning period 2018-21 will be extremely challenging for the Integration Joint Board as it seeks to balance increasing demand against diminishing resources brought about by national financial context. All figures are indicative and subject to future changes in terms of the need for further savings and changes to funding allocations.

Staff

A summary of the Health and Council staff within the scope of the Partnership is provided in the table below.

<table>
<thead>
<tr>
<th>Service Area</th>
<th>Staff Numbers in Full Time Equivalents (FTE's)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Work &amp; Social Care Staff</td>
<td>763.61</td>
</tr>
<tr>
<td>Directorate</td>
<td>8</td>
</tr>
<tr>
<td>Health Care &amp; Support Staff inc. all AHPs and other LP staff</td>
<td>931</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>1702.61</strong></td>
</tr>
</tbody>
</table>

The Integration Joint Board will approve a Workforce Plan for the service areas within the scope of the Partnership during this planning period.

New Ways of Working, Transformational Change and Organisational Development

The Integration Joint Board is overseeing a programme of new ways of working that will see all activity areas, strategies, policies and operational procedures reviewed and appraised. Through this process, decisions will be made on how resources will be deployed in future years. This work will be informed, in part, by the information detailed in the Strategic Needs Assessment and Area Profile.
The Partnership is committed to the use of Self Evaluation to assess how it is performing, examining where there are particular strengths to be built upon and where there is scope for improvement. This approach will form one of the key pillars in the drive for continuous improvement and Best Value along with its service review process which will see a number of service areas reviewed in this planning period. The Partnership recognises that its staff are its key resource and will invest in training and organisational development during this planning period to support its transformational agenda.

**Information Resources**

An Information Sharing Protocol for the Partnership has been agreed by the Council, Health Board and the Integration Joint Board. The Social Work Information System (SWIS) is being replaced and this work will be completed during this planning period, as will the introduction of a work scheduling system and call monitoring system for the Care at Home Service. The Director and the Senior Management Team working with the e-Health Team will seek to identify opportunities for improved information sharing and service user/patient access to information that will aid and support effective frontline service delivery. As a business improvement activity, this will be critical success factor for the Partnership.

**Property and Housing Resources**

Work is on-going to review the location, suitability, condition and operational effectiveness of the combined health and property estate currently used to deliver delegated services. This information will be used to develop a Property Asset Management Plan for the Partnership which will have as one of its objectives the development of an efficient and effective property estate designed to support operational frontline service delivery. This will have as one of its core objectives to deliver the South Ayrshire Council proposal to put schools at the heart of communities and to see the provision of required suitable service access points in deprived areas with an initial focus being on Ayr North.

Working jointly with South Ayrshire Council, the Integration Joint Board will seek to meet the strategic housing needs of the people it supports across a range of functional areas, including Learning Disability, Mental Health, Addictions, Young Care Leavers and Older People. Through the Strategic Housing Investment Plan (SHIP), it will seek the resources necessary to build or acquire additional housing units in the form of supported accommodation, core and cluster developments and specialist accommodation for older people. A Housing Contribution Statement creating a link between this Strategic Plan and the Local Housing Strategy is set out at Appendix 5.

**Commissioning of Services from the Third and Independent Sectors**
Over one third of the IJB Integrated Budget is spent on the commissioning and procurement of work from Third and Independent Sector providers to support service users in South Ayrshire with health and social care needs. The HSCP has established Providers Forums and will use these to collaboratively plan and review services and service areas with commissioned providers. Work has started to recommission social care contracts, many of which require to be updated to provide new and innovative ways of meeting service user outcomes while at the same time, providing a correct balance with the need for the IJB and South Ayrshire Council to demonstrate Best Value in service provision. All contracts requiring to be updated in this way will be replaced and renewed during this strategic planning period.

**Equalities Impact Assessment**

An Equalities Impact Assessment of this Plan is available on the Partnership’s website (include link).

**Performance Management**

Reporting against the Partnership’s Performance Framework will provide information on current performance and explore shifts in performance trends over time. Performance information is available [here](#).

**Risk Management**

Strategic level risks which, if not mitigated, would impact adversely on the implementation of this Strategic Plan are reflected in the IJBs Strategic Risk Register which is available [here](#).

**Clinical and Care Governance**

The Integration Joint Board has put in place structures and processes to support clinical and care governance, thus providing assurance on the quality of health and social care services that have been delegated to it by South Ayrshire Council and the NHS Ayrshire and Arran Board. Further information is available [here](#).

**STRATEGIC PLAN REVIEW**

This Strategic Plan has been written for the period 2018–21. It will be refreshed and rolled-on each year. It will be completely rewritten every three years and a new plan will, therefore, be prepared for the period 2021-24.
# GLOSSARY

Terminology document – available [here](#).

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>ADP</td>
<td>Alcohol and Drugs Partnership</td>
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<tr>
<td>APC</td>
<td>Adult Protection Committee</td>
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<tr>
<td>CLS</td>
<td>Community Led Support</td>
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<tr>
<td>COG</td>
<td>Chief officers Group</td>
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<tr>
<td>CPC</td>
<td>Child Protection Committee</td>
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<tr>
<td>EQIA</td>
<td>Equalities Impact Assessment</td>
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<tr>
<td>GP</td>
<td>General Practitioner</td>
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<tr>
<td>HARP</td>
<td>Healthy and Active Rehabilitation Programme</td>
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<tr>
<td>HSCP</td>
<td>Health and Social Care Partnership</td>
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<tr>
<td>IJB</td>
<td>Integration Joint Board</td>
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<tr>
<td>LHS</td>
<td>Local Housing Strategy</td>
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<tr>
<td>SG</td>
<td>Scottish Government</td>
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<tr>
<td>SHIP</td>
<td>Strategic Housing Investment Plan</td>
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<td>SPAG</td>
<td>Strategic Planning Advisory Group</td>
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<tr>
<td>SWIS</td>
<td>Social Work Information System</td>
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<tr>
<td>TEC</td>
<td>Technology Enabled Care</td>
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<tr>
<td>VASA</td>
<td>Voluntary Action South Ayrshire</td>
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</table>
# IMPLEMENTATION PLAN

## STRATEGIC OBJECTIVE:

<table>
<thead>
<tr>
<th>Objective Number</th>
<th>Action</th>
<th>Responsible Officer</th>
<th>Target Date(s)</th>
<th>National Outcomes Delivered (p25/26)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Continued implementation of the Health Visitors Pathway and identified outcomes.</td>
<td>Head of Children’s Health, Care and Criminal Justice.</td>
<td>31.03.19 with six monthly progress updates</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Implementation of the High Risk Pregnancy Protocol which will support Health Visitors and Social Workers to be involved with families at an earlier stage and provide pre and post pregnancy help when required.</td>
<td>Head of Children’s Health, Care and Criminal Justice.</td>
<td>31.03.19 with six monthly progress updates</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Work with partners on the CPC to develop robust systems for providing routine performance and impact information on child protection.</td>
<td>Head of Children’s Health, Care and Criminal Justice.</td>
<td>31.03.19 with six monthly progress updates</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Continued development of GIRFEC Practice and Principles through activity in line with South Ayrshire Children’s Services Planning Group priorities.</td>
<td>Head of Children’s Health, Care and Criminal Justice.</td>
<td>31.03.19 with six monthly progress updates</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Continue to develop the capacity and talents of care experienced young people, and raise awareness of Corporate Parenting through the Champions Board.</td>
<td>Head of Children’s Health, Care and Criminal Justice.</td>
<td>31.03.19 with six monthly progress updates</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Continue to improve outcomes for Looked After children, through a range of interventions working in partnership with Health and Education.</td>
<td>Head of Children’s Health, Care and Criminal Justice.</td>
<td>31.03.19 with six monthly progress updates</td>
<td></td>
</tr>
<tr>
<td>Objective Number</td>
<td>Action</td>
<td>Responsible Officer</td>
<td>Target Date(s)</td>
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<td>7</td>
<td>Implement the recommendations of the CELCIS report on Permanency Planning to improve processes and practice</td>
<td>Head of Children’s Health, Care and Criminal Justice</td>
<td>31.03.19 with six monthly progress updates</td>
<td></td>
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<tr>
<td>8</td>
<td>Implement the IJB Adult Learning Disability Strategy for 2017-23 and associated Commissioning Plan designed to deliver four Strategic Outcomes: (1) A Healthy Life; (2) Choice and Control; (3) Independence; and (4) Active Citizenship.</td>
<td>Head of Community Care &amp; Health</td>
<td>31.03.23 with six monthly progress updates</td>
<td></td>
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<tr>
<td>9</td>
<td>Implement the IJB Community Adult Mental Health Strategy for 2017-22 and associated Commissioning Plan designed to deliver seven Strategic Outcomes: (1) Flexible, tailored and Co-ordinated Approaches; (2) Prevention; (3) Recovery; (4) Addressing Social Stigma; Choice and Control; (6) Safety; and (7) Carers Needs.</td>
<td>Head of Community Care and Health</td>
<td>31.03.22 with six monthly progress updates</td>
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<tr>
<td>10</td>
<td>Implement the ADP Alcohol and Drug Strategic Plan 2018-21.</td>
<td>Head of Community Health and Care</td>
<td>31.03.22 with six monthly progress updates</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Implement the Pan Ayrshire and Arran Sensory Locality Plan.</td>
<td>Head of Community Care and Health</td>
<td>31.03.21 with six monthly progress updates</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Develop a South Ayrshire Dementia Strategy and Implementation Plan and seek IJB approval. Following this, implement strategy and report on progress six monthly to IJB Performance and Audit Committee.</td>
<td>Head of Community Care and Health</td>
<td>30.06.18 and six monthly thereafter</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Develop a Palliative and End of Life Care Strategy and Implementation Plan</td>
<td>Director of Health and Care</td>
<td>31.03.19 and</td>
<td></td>
</tr>
<tr>
<td>Objective Number</td>
<td>Action</td>
<td>Responsible Officer</td>
<td>Target Date(s)</td>
<td>National Outcomes Delivered (p25/26)</td>
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<td>for South Ayrshire and seek IJB approval. Following this, implement strategy and report on progress six monthly to IJB Performance and Audit Committee.</td>
<td>Social Care</td>
<td>six monthly thereafter</td>
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</tr>
<tr>
<td>14</td>
<td>Develop a South Ayrshire Older People’s Strategy and Implementation Plan and seek IJB approval. Following this, implement strategy and report on progress six monthly to IJB Performance and Audit Committee.</td>
<td>Director of Health and Social Care</td>
<td>31.10.18 and six monthly thereafter</td>
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<tr>
<td>15</td>
<td>Develop a Carers and Young Carers Strategy and Implementation Plan for South Ayrshire and seek IJB approval. Following this, implement strategy and report on progress six monthly to IJB Performance and Audit Committee.</td>
<td>Director of Health and Social Care</td>
<td>30.06.18 and six monthly thereafter</td>
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<tr>
<td>16</td>
<td>Develop and implement new commissioning plans for all services purchased from the Third and Independent Sectors during the period of this Strategic Plan.</td>
<td>Director of Health and Social Care</td>
<td>31.03.21 with six monthly progress updates.</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Develop and implement with Partners, a Primary Care Improvement Plan for South Ayrshire and Implement.</td>
<td>Clinical Director</td>
<td>01.07.18 and six monthly thereafter</td>
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<tr>
<td>18</td>
<td>Implement a transformational strategy designed to minimise unscheduled hospital admissions, reduce delayed discharges and transform care at home services with the ultimate aim of shifting the balance of care.</td>
<td>Director of Health and Social Care</td>
<td>31.03.21 with six monthly progress updates.</td>
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<tr>
<td>19</td>
<td>Develop and implement a new TEC strategy for the planning period based on the new National Digital Strategy.</td>
<td>Director of Health and Social Care</td>
<td>31.03.19 with six monthly progress updates.</td>
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<tr>
<td>20</td>
<td>Put in place arrangement to commission regionally provided acute hospital services as appropriate for the people of South Ayrshire.</td>
<td>Director of Health and Social Care</td>
<td>31.03.19 with six monthly</td>
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<td>Objective Number</td>
<td>Action</td>
<td>Responsible Officer</td>
<td>Target Date(s)</td>
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<tr>
<td>21</td>
<td>Review prescribing arrangement generally in South Ayrshire and specifically consider the development of alternatives to anti-depressant prescribing and implement through an agreed action plan.</td>
<td>Clinical Director</td>
<td>31.03.20 with six monthly progress updates.</td>
<td></td>
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<tr>
<td>22</td>
<td>Consider the findings of the “In Control” Review of the Implementation of SDS in South Ayrshire and produce a plan to take forward agreed recommendations and implement.</td>
<td>Director of Health and Social Care</td>
<td>30.09.18 with six monthly progress updates.</td>
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<tr>
<td>23</td>
<td>The HSCP will continue to implement its Community Led Support Programme which will see more people receive the correct level of support that they need close to their homes.</td>
<td>Head of Community Health and Care</td>
<td>31.03.19 with six monthly progress updates.</td>
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<tr>
<td>24</td>
<td>The IJB will seek to engage more with young people across South Ayrshire and to involve them in its work.</td>
<td>Head of Children’s Health and Care Services</td>
<td>31.03.19 with six monthly progress updates.</td>
<td></td>
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<tr>
<td>25</td>
<td>The HSCP will develop a Workforce Plan and implement agreed action items.</td>
<td>Director of Health and Social Care</td>
<td>31.03.19 with six monthly progress updates.</td>
<td></td>
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<tr>
<td>26</td>
<td>The HSCP will produce updated Organisational Development and Training Plans and implement these.</td>
<td>Director of Health and Social Care</td>
<td>30.09.18 with six monthly progress updates.</td>
<td></td>
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<tr>
<td>27</td>
<td>The HSCP will implement the agreed Participation and Engagement and</td>
<td>Director of Health and Social Care</td>
<td>01.04.18 with six monthly progress updates.</td>
<td></td>
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<tr>
<td>Objective Number</td>
<td>Action</td>
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<tr>
<td>28</td>
<td>Communication Strategies agreed by the IJB.</td>
<td>Social Care</td>
<td>six monthly progress updates.</td>
<td></td>
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<tr>
<td>29</td>
<td>The Integration Joint Board will develop an indicative ten year financial plan using the information set out in the Strategic Needs Assessment and Area Profile.</td>
<td>Director of Health and Social Care</td>
<td>31.03.19 with annual progress updates.</td>
<td></td>
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<tr>
<td>29</td>
<td>The HSCP will implement a programme of self-evaluation across all of its service areas based on the EFQM model.</td>
<td>Director of Health and Social Care</td>
<td>31.03.19 with six monthly progress updates.</td>
<td></td>
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<tr>
<td>30</td>
<td>The IJB Performance and Audit Committee will agree an annual programme of Best Value Service reviews.</td>
<td>Director of Health and Social Care</td>
<td>Annually with six monthly progress updates.</td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>The HSCP will develop and implement a Property Asset Management Plan.</td>
<td>Director of Health and Social Care</td>
<td>31.03.19 with six monthly progress updates.</td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>The IJB and South Ayrshire Council and their partners will work to deliver the proposals set out in the Housing Contribution Statement at Appendix 5.</td>
<td>Director of Health and Social Care</td>
<td>31.03.21 with six monthly progress updates.</td>
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</tr>
</tbody>
</table>
**1. DEMOGRAPHIC OVERVIEW**

**112,470**
South Ayrshire Population 2016

**52%**

**1.4%** ETHNIC MINORITY POPULATION
Scotland = 4.1% 2011

**DEPENDENCY RATIO**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2039</th>
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</thead>
<tbody>
<tr>
<td>Aged 0-15</td>
<td>67 - South Ayrshire</td>
<td>87 - South Ayrshire</td>
</tr>
<tr>
<td>Aged 16-64</td>
<td>55 - Scotland</td>
<td>67 - Scotland</td>
</tr>
</tbody>
</table>

**Age Structure 2016**

- South Ayrshire: 16% Aged 0-15, 60% Aged 16-64, 24% Aged 65+
- Scotland: 17% Aged 0-15, 65% Aged 16-64, 18% Aged 65+


South Ayrshire has the highest proportion of people aged over 100 in Scotland.

By 2025 the older age groups will increase by the following:-

- 35% + aged 75-79
- 25% + aged 80-84
- 34% + aged 85-90
- 38% + aged 90 plus
Households headed by those **aged 75+** will increase in number by **78%** (between 2014 and 2039).

Households containing just **one adult with children** are projected to increase by **+30%** (between 2014 and 2039).
3. DEPRIVATION OVERVIEW

12,888 people (11.5%) live within 15% most overall deprived data zones 2016

32% fuel poor
Scotland = 34%
2016

19 (12.4%) of 153 data zones in 15% most deprived data zones of Scotland 2016

- South Ayrshire has the 8th highest level of child poverty in Scotland.
- 26% of children live in poverty after housing costs compared to 23% across Scotland (2015).
- 38% of children in Ayr North live in poverty after housing costs compared to 18% in Troon and Prestwick.
4. GENERAL POPULATION HEALTH OVERVIEW

**Life Expectancy (2013-2015)**

- **77.7**
- **81.0**

**Premature mortality in South Ayrshire** has increased from 422 (2015) to 451 (2016) and is now higher than the national average.

**Main cause of death**
- Females: 27% Circulatory Disease/ 26% Cancer
- Males: 30% Circulatory Disease/ 30% Cancer

**18% People Smoke**
- Scotland – 21%
  (SHeS 2013-16)

**74% Males**
- Assess their health as good or very good
  Scotland = 74%

**66% Females**
- Scotland = 61%

**ADULTS OVERWEIGHT or OBESE**
- **74% Males**
  Scotland = 69%

**Scotland**
- 66% Females
5. SPECIFIC HEALTH CONDITIONS OVERVIEW

6.4 people per 1,000 adult population in South Ayrshire have a Learning Disability. Scotland = 5.2 (2017)

93 people with an Autism Spectrum Diagnosis were known to the Health and Social Care Partnership (2017)

DEMENTIA
Prevalence Rate for diagnosis
1.03 South Ayrshire
0.8 Scotland (2015/16)

HIGHER LEVELS OF DEPRESSION IN SOUTH AYRSHIRE AT 7.6 COMPARED TO 6.3 ACROSS SCOTLAND

20% of South Ayrshire population prescribed drugs for anxiety, depression, and psychosis. Scotland = 18% (2015/16).

South Ayrshire has higher levels of alcohol related hospital stays than nationally.

Increase in drug related deaths between 2015 and 2016 from 15 to 22.
6. UNSCHEDULED CARE OVERVIEW

Conversion rates are improving following the opening of the CAU.

Bed Day Rates for Delayed Discharges are higher in South Ayrshire than the national average.
11,709 Carers in South Ayrshire. 10.4% of South Ayrshire Population compared to 9.3% across Scotland.
(Census 2011)

By 2027 it is also estimated that there will be a requirement for an ADDITIONAL 306 Care Home Places.

Adult Support and Protection

Referrals increased from 845 in 2015/16 to 885 in 2016/17
8. CHILDREN AND YOUNG PEOPLE OVERVIEW

Low Breast feeding rates at 21.8% compared to Scottish rate of 30.3%

75.2% of Children are reaching Developmental Milestones at 27 – 30 month review
Scotland = 72.4%

3.2 per 1000 Children in South Ayrshire on Child Protection Register.
(3.0 per 1000 Children in Scotland).

370 Children in South Ayrshire are Looked After. Increased numbers are being looked after in their own homes.

Children in South Ayrshire have higher than average levels of NO dental caries. P1 (76.7% SA /69.4% Scotland) and P7( 85.5% SA/77.1% Scotland)
9. CRIMINAL JUSTICE

South Ayrshire has a higher than average prisoner population than the national average.

18% of people feel a bit or very unsafe when walking alone in their neighbourhoods after dark.

Crime levels in South Ayrshire have fallen over the past two years and are lower than the national average across Scotland.

The rate of dangerous and careless driving offences has been increasing in South Ayrshire over recent years, however at 20 was below the Scottish average of 22.

Domestic abuse incidents in South Ayrshire have reduced by 22% in the past two years are below the Scottish rate.
APPENDIX 2 - LOCALITY PLANNING GROUPS: PRIORITIES FOR THE PLAN PERIOD

TROON AND VILLAGES

Supporting people who are isolated or lonely to be better connected to wider community networks

- Create opportunities to engage with local people, staff and services to establish the extent and impact of social isolation and loneliness across the locality.
- Ensure strong local referral pathways - supporting individuals, connecting communities and facilitating change.
- Ensure South Ayrshire Life is supported, utilised and developed locally.
- Support the development of activities, services, projects and local assets; particularly in more rural areas.
  - Sustainable, co-produced solutions.
  - ‘Decision Day’ projects and groups.
  - Development of social spaces.
  - Raise awareness and address stigma.

Promote positive mental wellbeing across the locality; with particular focus on, dementia, depression, anxiety and recovery

- Create opportunities to engage with local people, staff and services to better understand the needs of the locality in relation to mental health.
- Continue to work in partnership with the local Dementia Friendly Troon and Villages group to work towards becoming a dementia friendly community.
  - Develop training and awareness raising within local area.
  - Involve schools and community groups in awareness raising/ training.
  - Improve local environments.
  - Develop/ promote local inclusive activities, e.g. dementia friendly allotment and relaxed golf.
- Support the development of training opportunities and supports across the locality and increase uptake - e.g. mental health awareness, anti-stigma, Keep Safe, First Aid, suicide prevention, and peer support.
- Ensure support and information is available to families and carers of those experiencing poorer mental wellbeing.
- Identify existing groups, services & activities and ensure links to South Ayrshire Life - raise awareness and promote services.

Ensure Health and social care services are accessible for all residents within Troon and surrounding villages (particularly older people and those living with long term conditions)

- Facilitate opportunities to engage with local people, staff and services to identify transport/access needs and issues.
- Working with local stakeholders to improve local transport provision.
  - Explore opportunities to develop community based transport, e.g. volunteer led schemes and patient transport.
- Facilitate a series of marketplace events/drop-in’s with local providers and community groups, particularly in more rural areas.

**Connecting Troon and villages through community led conversations**

- Support the launch of ‘Troon Connect’ and continue to develop ‘new front doors’ within Troon and surrounding villages.
- Establish information points across the locality, in partnership with South Ayrshire Life and key partners.
- Raise the profile of locality planning throughout Troon and surrounding areas and increase engagement with local people, staff and services.
  - Promote through social media, Health & Social Care Partnership website, local notice boards and media, quarterly newsletter and South Ayrshire Life.

**Supporting opportunities and resources for children, young people and families**

- Increase engagement with young people through schools, youth clubs/groups, community organisations, Learning Community Partnership and representative bodies.
- Establish mechanisms to meaningfully involve young people in locality planning.
- Support and develop intergenerational opportunities within the locality, in partnership with local schools, community groups and statutory services, e.g. Troon Allotment Society and Sheltered Housing.

**PRESTWICK AND VILLAGES**

**Supporting the development of opportunities, services and activities to enable local people to be independent and well - particularly those experiencing dementia, social isolation, poor mental health and caring responsibilities**

- Create opportunities to engage with local people, staff and services to better understand the needs of the locality and share information, e.g. ‘conversation cafes’ and marketplace events.
- Ensure strong local referral pathways and signposting.
  - Promote and share information through social media, Health and Social Care Partnership website, South Ayrshire Life and local information points.
- Continue to work towards becoming a dementia friendly locality, in partnership with local dementia friendly group.
  - Training and awareness raising within local area.
  - Support local activities and initiatives.
  - Improve local environments.
- Ensure support and information is available to unpaid carers and families of those experiencing dementia, poor health and other vulnerability.
- Ensure South Ayrshire Life is supported, utilised and developed locally.
Support ongoing development of Biggart Hospital as a centre for health and wellbeing; supported by the community for the community.

- Developing opportunities within Biggart to create spaces for community use, in partnership with volunteers and the local community.
- Establish Prestwick Connect ‘new front door’ and information hub within Biggart.
- Promote information on the Biggart across the locality and encourage local people to become involved in shaping developments and ideas.

Improve knowledge and understanding of the resources, services, assets and opportunities available in the local community

- Establish information points across the locality, in partnership with South Ayrshire Life and key partners.
- Promote and share information through social media, Health and Social Care Partnership website, local information points and media, quarterly newsletter and South Ayrshire Life.
- Raise the profile of locality planning across the locality and increase engagement with local people, staff and services.
  - Facilitate ‘conversation cafes’ and marketplace events across the locality.
  - Strengthen links with Primary Care providers and other health related services.

Prestwick Connect - Community led Conversations

- Support the launch of ‘Prestwick Connect’ in the Biggart and continue to develop ‘new front doors’ within Prestwick and surrounding areas.

Supporting opportunities and resources for children, young people and families

- Increase engagement with young people through schools, youth clubs/groups, community organisations, Learning Community Partnership and representative bodies.
- Establish mechanisms to meaningfully involve young people in locality planning.
- Support and develop intergenerational opportunities within the locality, in partnership with local schools, community groups and statutory services.

MAYBOLE AND NORTH CARRICK VILLAGES

Social Isolation

- Identify those most isolated within Maybole and surrounding villages.
  - School Networks.
  - Community Learning Partnership.
  - Recovery Carrick (ADP) – Rural Village Drop In’s.
  - Men’s Shed.
o MOF’s.
o Sheltered Housing.
o Existing community groups/ members - local intelligence.

- Support the CLS ‘Front Door’ in Maybole.
o Develop ‘Front Door’ activity – programme of services on specific dates.
o Ensure that there is good access for WiFi in order for people to use internet and access relevant provision for their needs.
o Telephone or web-based responses – local form of ‘Good Morning’ service.
o Further explore and extend existing listening services – build local capacity to develop this service.
o Promote all activity through social media/ Health and Social Care Partnership website/ South Ayrshire Life.

Alcohol and Drugs

- Support the consolidation of Recovery Carrick work and seek to identify sustainable resource for future (working with ADP and Recovery).

Mental Health - Developing Maybole (and subsequently, villages) as a Dementia Friendly Community with inclusive access/ support

- Establish a local steering group to lead development of North Carrick as a Dementia Friendly and accessible community.
- Develop training and awareness raising within local area.
  o Liaise with Alzheimer Scotland for training provision.
  o Increase local training capacity (Train the trainer).
  o Involve VASA in promotion of local opportunities.
  o Target HSCP staff and partners/ local faith communities with training initially.
- Develop/ Promote local inclusive activities.
  o Men’s Shed.
  o MOF’s.
  o Walking Football/ Football Memories.
  o Sheltered Housing.
  o Daycare (Carers Respite).
- Integrate with Keep Safe work.
  o Encouraging local businesses and community venues to become Safe Place (Inform/ Train and Support).
  o Involve schools and community groups in awareness raising/ training in becoming a dementia friendly community.

Access to Services and Information - Addressing local transport issues and access to services

- Working with local stakeholders (including Community Councils) to improve local transport provision including:
  o Improving local SPT, timetabled services.
  o Improving My Bus response.
  o Supporting better Community Transport arrangements.
  o Exploring very local volunteer led transport (e.g. GP visits).
• Development of the North Carrick Cares event.
  o Providing transport opportunity to and from these events to encourage participation.
  o Although primary aim of the event is to network and share practise from community groups, consultation on issues such as transport and access to services and provision could happen at these events which in turn will inform the work of the LPG.

Development of One-Stop Shop

• Support the CLS ‘Front Door’ in Maybole.
  o Develop ‘Front Door’ activity – programme of services on specific dates.
  o Ensure that there is good access for WiFi in order for people to use internet and access relevant provision for their needs.
  o Telephone or web-based responses – local form of ‘Good Morning’ service.
  o Further explore and extend existing listening services – build local capacity to develop this service.
  o Promote all activity through social media/ Health and Social Care Partnership website/ South Ayrshire LIFE.
  o Possible development of additional village ‘Front Door’.
• Development of Maybole Health Centre as Community Hub.
  o Access to a wide range of health and social care professionals relevant to an individual’s needs – ‘Local Services for local people’.
  o Promotion of this work through social media/ information sharing/ through schools and community venues.

Ensuring good public knowledge of how to utilise health and social care resources

• Encourage the use of South Ayrshire Life to access local opportunities/ information.
  o Ensure that all groups link to South Ayrshire Life and keep information current and relevant.
• Ensure strong/ visible local referral pathway for those require further support/help – signposting to appropriate services.
  o Development of more promotion materials within information to ensure people make use of the most appropriate access points for health and social care.
  o Encourage awareness raising about Self-Directed Support (SDS).

Day Services and support in the local community

• This will be addressed as part of the Health and Social Care Partnership review of Day Services – so more a need to link to this process.

Other issues/areas for consideration:

• It was felt that the mapping of groups/activities had been carried out through VASA South Ayrshire Life process.
• Including recovery work into our priorities.
• It was thought that children/youth related issues might be best addressed through the Learning Community Partnership Group. It was thought that some joint information sharing session between both groups should take place to ensure good knowledge of mutual agendas and opportunities for joint working. These might include:
  o Opportunities for young people.
  o Deprivation and Child Poverty.

GIRVAN AND SOUTH CARRICK VILLAGES

Social Isolation

• Identify those most isolated within Girvan and surrounding villages:
  o Milestone
  o School Networks
  o Community Learning Partnership
  o Families ‘affect by’
  o Girvan living with leisure
  o Recovery Carrick (ADP) – Rural Village Drop In’s
  o Men’s Shed
  o HOPE – locally
  o Letterbox Project
  o Meal Assist
  o Holiday Lunches Programme (Glendoune)
  o Age Concern
  o Existing community groups/ members - local intelligence.

• Support the CLS new ‘Front Door’ in Girvan (and then Ballantrae):
  o Develop ‘Front Door’ activity – programme of services on specific dates
  o Ensure that there is good access for WiFi in order for people to use internet and access relevant provision for their needs
  o Telephone or web-based responses – local form of ‘Good Morning’ service
  o Promote all activity through social media/ Health and Social Care Partnership website/ South Ayrshire Life.

• Encourage the use of South Ayrshire Life to access local opportunities/information:
  o Ensure that all groups link to South Ayrshire Life and keep information current and relevant
  o Ensure strong/ visible local referral pathway for those require further support/help – signposting to appropriate services.

• Extend ‘Listening service’ volunteer base
  o Townhouse/ Front Door Service
  o Peer Support (MHP to develop)
  o Explore extending Maybole churches Bereavement support to South Carrick/ CRUISE.

Alcohol and Drugs

• Support the consolidation of Recovery Carrick work and seek to identify sustainable resource for future (working with ADP and Recovery).
Support, Develop and influence work among young people in the community

- Development of inter-generational work:
  - Establish formal arrangement with local youth representative structures and LPG re raising young people’s issues
  - Befriending service whereby older people are paired with young people to help develop life skills (Girvan Youth Trust – Life’s A Journey Project) for example young people assisting older people with technology skills
  - Encourage regular participation within LPG of local young people
  - Establish Youth Bank.

Support, Develop and influence work among older people in the community

- Supporting Hillcrest & other elderly provision in the area:
  - Actively supporting and influencing the long term developments associated with Hillcrest and other care providers.

- Supporting wider development of Girvan Community Hospital:
  - Negotiate and support wider community use
  - Negotiate information dissemination/promotion at GCH
  - Celebrate and disseminate information on existing local GCH services.

Mental Health - Developing Girvan (and subsequently, villages) as a Dementia Friendly Community/Town

- Establish a local steering group to encourage a joined up partnership approach.
- Build on local needs assessment (Town Team/UWS) work re dementia.
- Develop training and awareness raising within local area
  - Liaise with Alzheimer Scotland for training provision
  - Increase local training capacity (Train the trainer)
  - Involve VASA in promotion of local opportunities
  - Target HSCP staff and partners/ local faith communities with training initially.
- Develop/ Promote local inclusive activities:
  - Men’s Shed
  - Age Concern
  - Walking Football/ Football Memories
  - SWRI
  - Sheltered Housing
  - Daycare (Carers Respite)
  - Local Crossroads (Befriending Service)
  - Quay Zone Walking Group.
- Integrate with Keep Safe work:
  - Encouraging local businesses and community venues to become Safe Place (Inform/ Train and Support)
  - Involve schools and community groups in awareness raising/ training in becoming a dementia friendly community.
- Support local churches particularly as dementia friendly places and ‘Playlist for Life’ Hubs.
• Increase local numbers of people receiving MH training (SAMH as potential training facilitator):
  o Safe Talk
  o STORM
  o ASIST
  o Keep Safe Work
  o Dyslexia Awareness Training
  o Lunch and Learn Programme (SAMH).
• Building on existing provision within the area:
  o Recovery Carrick (ADP)
  o Carrick Opportunities Centre (Learning Disabilities)
  o Make more use of WRAP trained facilitators in the area.

Access to Services and Information - Addressing local transport issues

• Working with local stakeholders (including Community Councils) to improve local transport provision including:
  o Improving local SPT, timetabled services
  o Improving My Bus response
  o Supporting better Community Transport arrangements
  o Exploring very local volunteer led transport (e.g. GP visits).

Communication

• Revisit existing local Communication Strategy and arrangements for implementation.

Ensuring good public knowledge of how to utilise health and social care resources

• Encourage the use of South Ayrshire Life to access local opportunities/information:
  o Ensure that all groups link to South Ayrshire Life and keep information current and relevant.
• Ensure strong/visible local referral pathway for those require further support/help – signposting to appropriate services:
  o Development of more promotion materials within information to ensure people make use of the most appropriate access points for health and social care
  o Encourage awareness raising about Self-Directed Support (SDS).

AYR SOUTH AND COYLTON

Social Isolation

• Library and Sheltered Housing based activity.

Communication and Access to Information

• Community Led Support.
• Support for initial Newmarket Street front door.
• Identify and support ‘new front door’ in additional site:
  o South Ayrshire Life activity mapping and web-site
  o Developing clearer information for local residents re using health and care services.

**Dementia**

• Establish local group to lead Dementia Friendly Ayr activity.
• Support VASA to create Dementia Friendly New Market Street as part of wider dementia programme.

**Mental Health**

• Mental Health/Suicide Prevention training.
• Provision of peer support opportunities.
• Promote Breathing Space 365 Brighter Days campaign.

**Young People’s Issues**

• Participate in SAC priority area of ensuring schools are at the heart of the community.
• Develop and nurture local children, young people and families in activities.
• Enhance linkages with young people’s networks.

**AYR NORTH AND VILLAGES**

**Better Connected and Resilient Communities**

• Continue to support new front door at Lochside Community Centre.
• New front door at Ayrshire Action for Mental Health at Strathyre House.
• Promote South Ayrshire LIFE services within locality and across wider area.

**Developing Community Spaces and Hubs**

• Supporting and contributing the Making Places work.
• Supporting AUFA Men’s Shed work.
• Supporting the early discussions re new Health and Care Centre.
• Making more extended use of North Ayr Health Centre

**Supporting Employability, Volunteering and Training Opportunities**

• Stage 1 of two stage process delivering community led solutions to tackle identified local priorities.
• Promote volunteering opportunities through South Ayrshire Life web portal.
• Promote learning opportunities through core CLD provision and third sector partners.

**Reducing the impact of Alcohol and Drug Misuse**

• Support local recovery programmes to continue reducing impact.
• Raise awareness of A&D issues through educational partnerships.

Supporting People to improve their Mental Wellbeing

• Mental Health/Suicide Prevention training.
• Provision of peer support opportunities.
• Promote Breathing Space 365 Brighter Days campaign.

Reducing the Effects of Poverty and Deprivation

• Awareness raising re Universal Credit and Mental Health.
• Empowering local people to access services in their local area.
• Support community green space projects and community allotment programmes.

Supporting Resources for Children, Young People and Families

• Participate in SAC priority activity of putting schools at heart of the community.
• Development and nurturing of local children, young people and family activities potential prioritisation as PB theme.
• Ensure linkage to young people’s representative bodies (e.g. Youth Forum and Pupil Council).
APPENDIX 3 - NATIONAL OUTCOMES FOR INTEGRATION

a) **Healthier Living**
   People are able to look after and improve their own health and wellbeing and live in good health for longer.

b) **Independent Living**
   People, including those with disabilities, long-term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.

c) **Positive Experiences and Outcomes**
   People who use health and social care services have positive experiences of those services, and have their dignity respected.

d) **Quality of Life**
   Health and social care services are centred on helping to maintain or improve the quality of life of service users.

e) **Reduce Health Inequality**
   Health and social care services contribute to reducing health inequalities.

f) **Carers are Supported**
   People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and wellbeing.

g) **People are Safe**
   People who use health and social care services are safe from harm.

h) **Engaged Workforce**
   People who work in health and social care services are supported to continuously improve the information, support, care and treatment they provide and feel engaged with the work they do.

i) **Effective Resource Use**
   Resources are used effectively in the provision of health and social care services, without waste.

**National Outcomes for Integrated Children’s Service Planning**

j) Our young people are successful learners, confident individuals, effective contributors and responsible citizens.

k) Our children have the best start in life and are ready to succeed.

l) We have improved the life chances for children, young people and families at risk.

**National Outcomes and Standards for Social Work Services in the Criminal Justice System are:-**

m) Community safety and public protection.

n) The reduction of re-offending.

o) Social inclusion to support desistance from offending.
## APPENDIX 4 – INDICATIVE INTEGRATED PARTNERSHIP REVENUE BUDGET – DELEGATED FUNCTIONS: 2018-2021

<table>
<thead>
<tr>
<th>BUDGET AREA</th>
<th>2017-18 Base</th>
<th>2018-19</th>
<th>2019-20</th>
<th>2020-21</th>
<th>Total for Plan Period</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Community Health and Care</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Older People’s Services</td>
<td>37,788,000</td>
<td>37,788,000</td>
<td>37,788,000</td>
<td>37,788,000</td>
<td></td>
</tr>
<tr>
<td>Adult Learning Disability Services</td>
<td>18,770,000</td>
<td>18,770,000</td>
<td>18,770,000</td>
<td>18,770,000</td>
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</tr>
<tr>
<td>Adult Physical Disability Services</td>
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<td>3,659,000</td>
<td>3,659,000</td>
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<tr>
<td>Community Nursing</td>
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<td>4,310,000</td>
<td>4,310,000</td>
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<tr>
<td>Adult Community Mental Health Services</td>
<td>6,044,000</td>
<td>6,044,000</td>
<td>6,044,000</td>
<td>6,044,000</td>
<td></td>
</tr>
<tr>
<td>Addictions Services</td>
<td>1,679,000</td>
<td>1,679,000</td>
<td>1,679,000</td>
<td>1,679,000</td>
<td></td>
</tr>
<tr>
<td>Biggart Hospital, Prestwick</td>
<td>4,759,000</td>
<td>4,759,000</td>
<td>4,759,000</td>
<td>4,759,000</td>
<td></td>
</tr>
<tr>
<td>Girvan Community Hospital</td>
<td>1,160,000</td>
<td>1,160,000</td>
<td>1,160,000</td>
<td>1,160,000</td>
<td></td>
</tr>
<tr>
<td>Additional SG funding for Social Care</td>
<td></td>
<td>1,661,000</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL COMMUNITY HEALTH &amp; CARE</strong></td>
<td>78,169,000</td>
<td>78,169,000</td>
<td>78,169,000</td>
<td>78,169,000</td>
<td></td>
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<tr>
<td><strong>Primary Care</strong></td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Prescribing</td>
<td>24,148,000</td>
<td>24,148,000</td>
<td>24,148,000</td>
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</tr>
<tr>
<td>General Medical Services</td>
<td>14,479,000</td>
<td>14,479,000</td>
<td>14,479,000</td>
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<tr>
<td><strong>TOTAL PRIMARY CARE</strong></td>
<td>38,627,000</td>
<td>38,627,000</td>
<td>38,627,000</td>
<td>38,627,000</td>
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<tr>
<td><strong>Children’s Health &amp; Care &amp; Justice Services</strong></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Children &amp; Families Social Work</td>
<td>20,270,000</td>
<td>20,270,000</td>
<td>20,270,000</td>
<td>20,270,000</td>
<td></td>
</tr>
<tr>
<td>Criminal Justice Social Work</td>
<td>1,775,000</td>
<td>1,775,000</td>
<td>1,775,000</td>
<td>1,775,000</td>
<td></td>
</tr>
<tr>
<td>Health Visiting Services</td>
<td>1,695,000</td>
<td>1,695,000</td>
<td>1,695,000</td>
<td>1,695,000</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL CHILDREN’S HEALTH &amp; CARE &amp; JUSTICE</strong></td>
<td>23,740,000</td>
<td>23,740,000</td>
<td>23,740,000</td>
<td>23,740,000</td>
<td></td>
</tr>
<tr>
<td>Directorate and Support Services</td>
<td>4,329,000</td>
<td>4,329,000</td>
<td>4,329,000</td>
<td>4,329,000</td>
<td></td>
</tr>
<tr>
<td>Scheme of Assistance Housing Adaptations</td>
<td>742,000</td>
<td>742,000</td>
<td>742,000</td>
<td>742,000</td>
<td></td>
</tr>
<tr>
<td>Integrated Care Fund</td>
<td>1,701,000</td>
<td>1,701,000</td>
<td>1,701,000</td>
<td>1,701,000</td>
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<tr>
<td>Lead Partnership Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service</td>
<td>2018-19</td>
<td>2019-20</td>
<td>2020-21</td>
<td>2021-22</td>
<td></td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
<td></td>
</tr>
<tr>
<td>Allied Health Professionals</td>
<td>19,878,000</td>
<td>19,878,000</td>
<td>19,878,000</td>
<td>19,878,000</td>
<td></td>
</tr>
<tr>
<td>Continence and Community Store</td>
<td>634,000</td>
<td>634,000</td>
<td>634,000</td>
<td>634,000</td>
<td></td>
</tr>
<tr>
<td>Technology Enabled Care</td>
<td>482,000</td>
<td>482,000</td>
<td>482,000</td>
<td>482,000</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL LEAD PARTNERSHIP SERVICES</strong></td>
<td><strong>20,994,000</strong></td>
<td><strong>20,994,000</strong></td>
<td><strong>20,994,000</strong></td>
<td><strong>20,994,000</strong></td>
<td></td>
</tr>
<tr>
<td>South Ayrshire IJB Funding for Acute Hospitals</td>
<td>22,416,000</td>
<td>22,416,000</td>
<td>22,416,000</td>
<td>22,416,000</td>
<td></td>
</tr>
<tr>
<td><strong>OVERALL TOTAL INTEGRATED BUDGET</strong></td>
<td><strong>190,718,000</strong></td>
<td><strong>192,379,000</strong></td>
<td><strong>190,718,000</strong></td>
<td><strong>190,718,000</strong></td>
<td></td>
</tr>
</tbody>
</table>

Financial Plan is still under development and these figures will be subject to change before final Strategic Plan approval is given.
APPENDIX 5 - HOUSING CONTRIBUTION STATEMENT

Introduction

Having a suitable and affordable place to stay is at the very core of addressing individuals’ health and social care needs. Moreover, ensuring our communities are sustainable and have an adequate supply of good quality, affordable housing to meet various needs will contribute significantly to reducing health inequalities locally.

This Housing Contribution Statement sets out how the Housing Service and Health and Social Care Partnership will work together to achieve our common goals over the duration of the Strategic Plan.

Housing’s role in the Partnership

South Ayrshire Council’s Housing Service works in partnership with Health and Social Care services both to deliver services to help individuals live independently now and to plan ahead to meet changing and emerging needs in the future. On a day-to-day basis, Housing and Health and Social Care staff work together to ensure individuals’ needs are met. This includes:

- The delivery of adaptations to support independent living.
- The provision of advice and assistance to older people and people with disabilities about their housing options.
- Intensive support for individuals in recovery from drug and alcohol addiction.
- A dedicated Health and Homelessness nurse working to meet the needs of people experiencing homelessness.

At a strategic level, senior officers from Housing contribute to the Integration Joint Board (IJB)’s Strategic Planning Advisory Group. This group involves the main stakeholders working in the area and has overall responsibility for delivering and advising on the development of the Strategic Plan. Senior housing staff also contribute to locality planning groups and work together with colleagues in Health and Social Care to respond to issues which arise in these areas. Over the last year officers from the Housing Service have also contributed to the development and implementation of the Adult Learning Disability Strategy, the Adult Community Mental Health Strategy, the Integrated Children’s Services Plan and the Corporate Parenting Plan.

In terms of longer-term planning to meet a variety of needs, a housing working group has been established involving senior staff from both the Housing Service and the Health and Social Care Partnership. This group’s focus is on ensuring the health and housing needs of people living locally are communicated effectively between partners, in order that these needs can be considered in long-term resource planning. This partnership approach will help deliver specialist housing provision including bespoke housing solutions for individuals with particular needs as well as new models of accommodation to meet the wider identified needs of particular groups.
Senior Health and Social Care officers have also contributed to the development of a number of housing-led strategies, including the Local Housing Strategy (LHS), the Housing Need and Demand Assessment (HNDA) and the Strategic Housing and Investment Plan (SHIP). This commitment to partnership working has resulted in improvements and innovations in the services we provide and led to a more joined-up approach to the way we deliver these services.

**Shared evidence base and key issues**

The primary evidence base for housing need locally is the HNDA. This document is produced every five years and provides a detailed analysis of trends in housing demand and need, as well as identifying the key drivers of change in South Ayrshire’s housing market. The last HNDA was completed in 2015, and was assessed by the Scottish Government to be robust and credible. This document is used to inform both the Council’s LHS and its Local Development Plan.

The primary source of evidence on needs around Health and Social Care is the Joint Strategic Needs Assessment. The most recent Assessment was completed in 2018, and highlighted a number of similar issues to those identified by the HNDA. This document is the main evidence base for the Strategic Plan.

These two evidence bases saw considerable overlap in the housing-related issues they identified, and how these would impact on health and well-being. The table which follows summarises these issues and provides a brief explanation of implications requiring a housing contribution.

<table>
<thead>
<tr>
<th>Identified issue</th>
<th>Implications for housing</th>
</tr>
</thead>
<tbody>
<tr>
<td>An ageing population</td>
<td></td>
</tr>
<tr>
<td>Fuel Poverty and poor housing conditions common amongst older households</td>
<td></td>
</tr>
<tr>
<td>Reducing average household size</td>
<td></td>
</tr>
<tr>
<td>About a tenth our population live in the 15% most deprived SIMD data zones.</td>
<td></td>
</tr>
<tr>
<td>South Ayrshire has the 8th</td>
<td></td>
</tr>
<tr>
<td><strong>Identified issue</strong></td>
<td><strong>Implications for housing</strong></td>
</tr>
<tr>
<td>An ageing population</td>
<td></td>
</tr>
<tr>
<td>Fuel Poverty and poor housing conditions common amongst older households</td>
<td></td>
</tr>
<tr>
<td>Reducing average household size</td>
<td></td>
</tr>
<tr>
<td>About a tenth our population live in the 15% most deprived SIMD data zones.</td>
<td></td>
</tr>
<tr>
<td>South Ayrshire has the 8th</td>
<td></td>
</tr>
<tr>
<td>An ageing population</td>
<td></td>
</tr>
<tr>
<td>Fuel Poverty and poor housing conditions common amongst older households</td>
<td></td>
</tr>
<tr>
<td>Reducing average household size</td>
<td></td>
</tr>
<tr>
<td>About a tenth our population live in the 15% most deprived SIMD data zones.</td>
<td></td>
</tr>
<tr>
<td>South Ayrshire has the 8th</td>
<td></td>
</tr>
<tr>
<td>Limited housing options for older people</td>
<td></td>
</tr>
<tr>
<td>Lack of specialist housing provision in some areas</td>
<td></td>
</tr>
<tr>
<td>Need to make best use of existing stock to meet physical needs</td>
<td></td>
</tr>
<tr>
<td>Additional pressure on Scheme of Assistance budget with regard to improving private property condition and offering advice to homeowners</td>
<td></td>
</tr>
<tr>
<td>Need to improve energy efficiency of properties in private and social sectors</td>
<td></td>
</tr>
<tr>
<td>Need for smaller property sizes</td>
<td></td>
</tr>
<tr>
<td>Reduced demand for three bedroom properties</td>
<td></td>
</tr>
<tr>
<td>Possible long-term impact on provision of informal support for older people</td>
<td></td>
</tr>
<tr>
<td>Many residents would be unable to afford to buy a property on the open market</td>
<td></td>
</tr>
<tr>
<td>Private Rented Sector (PRS) is unaffordable for many, particularly single people under the age of 35</td>
<td></td>
</tr>
<tr>
<td>Need for good quality accommodation in social</td>
<td></td>
</tr>
</tbody>
</table>

About a tenth of our population live in the 15% most deprived SIMD data zones. South Ayrshire has the 8th.
| highest levels of Child Poverty in Scotland. | and private sectors for families  
| | • Ensuring the needs of young people leaving care are met  
| Meeting the housing needs of people with disabilities | • Further accommodation required to meet needs of households with physical disabilities  
| | • Core and cluster accommodation required to provide support for households with learning disabilities  
| | • Increased demand for aids and adaptations to existing social and private stock  
| Homelessness has reduced but disproportionately affects people aged 16-25.  
| Relatively high levels of repeat homelessness.  
| A high proportion of people presenting as homeless have mental health or addiction issues | • Need to review temporary accommodation in the context of welfare reform agenda  
| | • Intensive housing support required by some, particularly at points of transition  
| | • Provision of mediation and housing options  
| | • Alternative housing options for people with experience of repeat homelessness  
| | • Take steps to address the particular health needs of homeless households and help people link in with specialist and mainstream services  
| While the prevalence of severe mental ill-health is consistent with the Scottish average, there is a need to resettle people currently accommodated in hospital and residential settings. | • Planned resettlement of individuals in the community  
| | • Need for appropriate accommodation in the community  
| | • Core and cluster accommodation  

The main strategic plans looking to address these issues are:
- South Ayrshire Council LHS 2017-22
- South Ayrshire Council SHIP 2018-23
- South Ayrshire IJB Strategic Plan 2018-21

**Shared outcomes**

There can be seen to be clear links between the outcomes identified in the Strategic Plan and those of the LHS. The Strategic Objectives set out in the Plan are as follows:
- We will protect vulnerable children and adults from harm
- We will work to provide the best start in life for children in South Ayrshire
- We will improve outcomes for children who are looked after in South Ayrshire
- We will reduce health inequalities
- We will shift the balance of care from acute hospitals to community settings
• We will support people to exercise choice and control in the achievement of their personal outcomes
• We will manage resources effectively, making best use of our integrated capacity
• We will give all our stakeholders a voice.

Many of these objectives are reiterated by the two overarching themes of the Local Outcomes Improvement Plan (LOIP):
• Closing the outcomes gap for children and young people in South Ayrshire and,
• Supporting older people to live in good health.

Our LHS supports these outcomes in a number of ways.

At the core of the LHS is the outcome to ensure “People across South Ayrshire can find a suitable place to stay”. This outcome is about making sure there is an adequate supply of good quality housing to meet a variety of needs through new build development, the purchase of properties on the open market and making best use of existing stock. Achievement of this LHS outcome would have a positive impact on helping people exercise choice by increasing the options open to them, and will help reduce health inequalities by making good quality accommodation more available locally. Our approach to development utilises Lifetime Homes and Housing for Varying Needs standards, and as such also ensures we make best use of our resources by building accommodation that can be easily adapted in the future.

Similarly, the LHS is committed to ensuring “People across South Ayrshire are able to access advice and support that helps them to meet their housing needs and aspirations”. Achieving this outcome would help people make informed decisions about their accommodation. This includes advice for older people and people with disabilities around housing options for accessible living. Taken together, these approaches support the agenda towards shifting the balance of care by making sure accessible accommodation is available in a community setting.

In terms of the existing housing stock, the LHS seeks to achieve the outcome that “People across South Ayrshire live in well-maintained, energy efficient homes and are proud of their neighbourhoods”. Improvements in both public and private sectors would be likely to have a positive impact on reducing health inequalities and could also have a positive impact across a range of other measures including social isolation and educational attainment, due to the close links between poor housing, poor health and other social outcomes. The provision of aids and adaptations to existing stock in both the public and private sectors further supports the aims of shifting the balance of care, and is identified as a key element of our Scheme of Assistance.

The LHS is also concerned with ensuring “Homelessness is prevented where possible, and suitable accommodation, advice and support are available where it cannot be avoided”. If achieved, this outcome would be likely to help protect the most vulnerable people in South Ayrshire from harm by supporting them to make positive accommodation choices. Helping people avoid the uncertainties and disadvantages that can accompany homelessness may also have a positive impact on reducing health inequalities and giving young people – as individuals or as members of a family experiencing housing need - the
best start in life. Specific actions relating to helping children and young people are also set out in the LHS. These include the provision of education programmes in schools, targeted housing options advice for care leavers, and support for young people experiencing homelessness.

**Overview of housing contribution**

Taking the issues identified in both the Joint Strategic Needs Assessment and HNDA into account, the Health and Social Care Partnership have highlighted specific future housing requirements based on current and projected housing need.

A brief outline of identified required housing contributions relating to specific groups is provided in the table below.

<table>
<thead>
<tr>
<th>Group</th>
<th>Required Housing Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>People with learning disabilities</td>
<td>• New core and cluster unit comprising 7 housing units</td>
</tr>
<tr>
<td></td>
<td>• Further 8 unit core and cluster development required for those unable to live in their community</td>
</tr>
<tr>
<td></td>
<td>• Small communal accommodation as a transitional step towards independent tenancies.</td>
</tr>
<tr>
<td>People with poor mental health and dual diagnosis of mental health issues and addiction</td>
<td>• A need for two core and cluster units</td>
</tr>
<tr>
<td></td>
<td>• Accommodation for people to be resettled from hospital</td>
</tr>
<tr>
<td></td>
<td>• Supported accommodation for a number of people currently living in the community</td>
</tr>
<tr>
<td></td>
<td>• Mainstream accommodation for households who would benefit from more appropriate housing</td>
</tr>
<tr>
<td>Older people</td>
<td>• Additional very sheltered housing to meet particular needs</td>
</tr>
<tr>
<td></td>
<td>• Small base within new build bungalow developments to offer care to older households</td>
</tr>
<tr>
<td></td>
<td>• Consideration of older people’s needs in allocations policy review</td>
</tr>
<tr>
<td>Children and Young People</td>
<td>• Need for a range of suitable accommodation for care leavers and young people currently accommodated in unsuitable placements</td>
</tr>
<tr>
<td></td>
<td>• Reducing the number of young care leavers experiencing homelessness to improve their overall health and well-being</td>
</tr>
</tbody>
</table>

The LHS gives a full description of the actions that the Housing Service intends to take over the next five years to achieve our shared outcomes and how we will work to address these requirements, while our most recent SHIP identifies opportunities to address some of these needs. The Housing Service and the Partnership will work together to ensure future investment in new build and buyback properties takes these requirements into account, but there remain a number of barriers to new-build development - including the availability of suitable sites and funding constraints. As such, the Partnership will prioritise
these requirements based on the need for the resource in order that as many priority projects can be delivered as possible.

**Current and future resources required**

Investment in new affordable housing over the next five years is set out in our SHIP. Funding for new build developments, buybacks and acquisitions are funded through the Housing Revenue Account and supported by Scottish Government funding. The table below provides a summary of the total investment currently noted and planned in the SHIP from all sources.

<table>
<thead>
<tr>
<th>Affordable Housing Supply Programme</th>
<th>PRE-SHIP PERIOD</th>
<th>SHIP PERIOD – 2017/18 to 2021/22</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commuted Sums</td>
<td>£0.665 M</td>
<td>-</td>
</tr>
<tr>
<td>Prudential Borrowing</td>
<td>£0.151 M</td>
<td>-</td>
</tr>
</tbody>
</table>

Advice and assistance provided to homeowners is funded through our Scheme of Assistance budget, allocated from General Services. Actions relating to the Private Sector are funded variously from proceeds raised through Landlord Registration fees and General Services.

Aids and adaptations funding is provided by the Health and Social Care Partnership. Funding is made available to adapt both Council-owned and privately owned properties to support independent living. The table below highlights the proposed funding to be made available for the duration of the plan.

<table>
<thead>
<tr>
<th></th>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Privately-owned</td>
<td>£614,294</td>
<td>£614,294</td>
<td>£614,294</td>
<td>£614,294</td>
<td>£614,294</td>
<td>£614,294</td>
<td>£614,294</td>
</tr>
<tr>
<td>Privately-owned</td>
<td>£500,000</td>
<td>£600,000</td>
<td>£600,000</td>
<td>£500,000</td>
<td>£500,000</td>
<td>£500,000</td>
<td>£500,000</td>
</tr>
</tbody>
</table>
This information can be made available, on request, in braille, large print or audio formats and can be translated into a range of languages. Contact details are provided below.

Dr customerId 01292 612419
sahscp@south-ayrshire.gov.uk

South Ayrshire Health and Social Care Partnership

01292 612419
sahscp@south-ayrshire.gov.uk