

Edinburgh Health and Social Care Partnership Strategic Framework 2013 - 14



Introduction

Welcome to the Strategic Framework for the Edinburgh Health and Social Care Partnership covering the period April 2013 to March 2014.

The Scottish Government has announced its intention to introduce the Integration of Adult Health and Social Care Bill in order to establish Health and Social Care Partnerships, which will be the joint and equal responsibility of health boards and local authorities, replacing Community Health Partnerships.

In Edinburgh, we are bringing together Adult Social Care from the City of Edinburgh Council with the Community Health Partnership and Royal Edinburgh and Associated Services from NHS Lothian to form the Edinburgh Health and Social Care Partnership. At a governance level, the Partnership has been in place in 'shadow' form since November 2012, and was formally established from 1 April 2013 in order to direct the work required to make the Partnership a reality at strategic and operational levels.

The main purpose of this Strategic Framework is to provide an introduction to the Health and Social Care Partnership for our workforce and enable them to see how their role contributes to the bigger picture. We hope the document will also provide a useful overview of the work of the Partnership for our partners in the statutory, voluntary and independent sectors and for interested members of the public.

Whilst we are in the midst of change, it is more important than ever that we have a clear strategic vision underpinned by realistic delivery plans. This document sets out the strategic

framework within which we will operate during our first year of existence; explaining the role of the Partnership, articulating our strategic vision, objectives and the outcomes we are seeking to achieve and highlighting the challenges we face in the year to come.

In future years we intend to produce a single work plan for the Partnership linked to our strategic framework. However, as the new organisation is still in embryonic form and 2013/14 will be the first year of operation, we have taken the pragmatic step of asking each of the partner agencies (City of Edinburgh Council Adult Social Care, Edinburgh Community Health Partnership and Royal Edinburgh and Associated Services) to produce a separate work plan and related set of performance measures setting out how they plan to make our shared vision a reality. These work plans also provide an opportunity to celebrate the achievements of each agency and their staff during 2012/13. The three separate work plans will form appendices to this document.

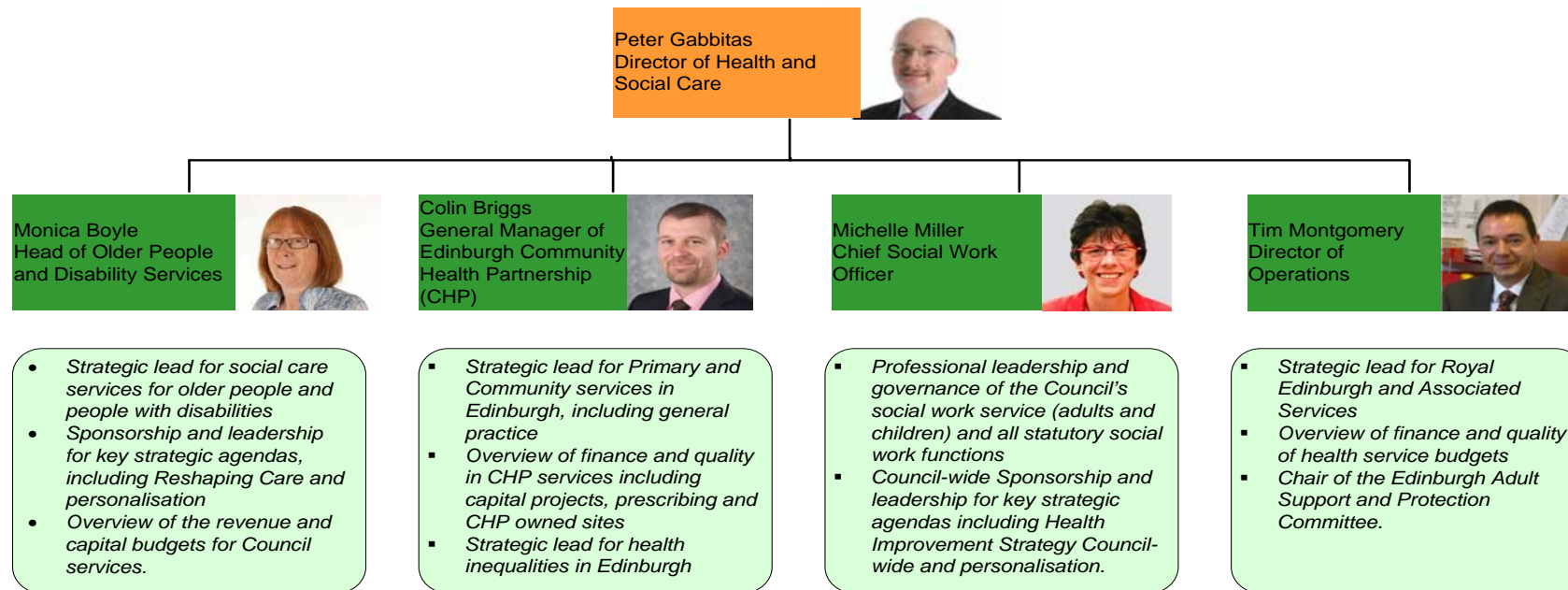
The Edinburgh Health and Social Care Partnership is overseen by the City of Edinburgh Council and NHS Lothian. This Strategic Plan links to both the [City of Edinburgh Council Strategic Plan](#) and NHS Lothian's Strategic Clinical Framework.

We would welcome feedback on ways in which we could improve this document in future.

Who we are and what we do

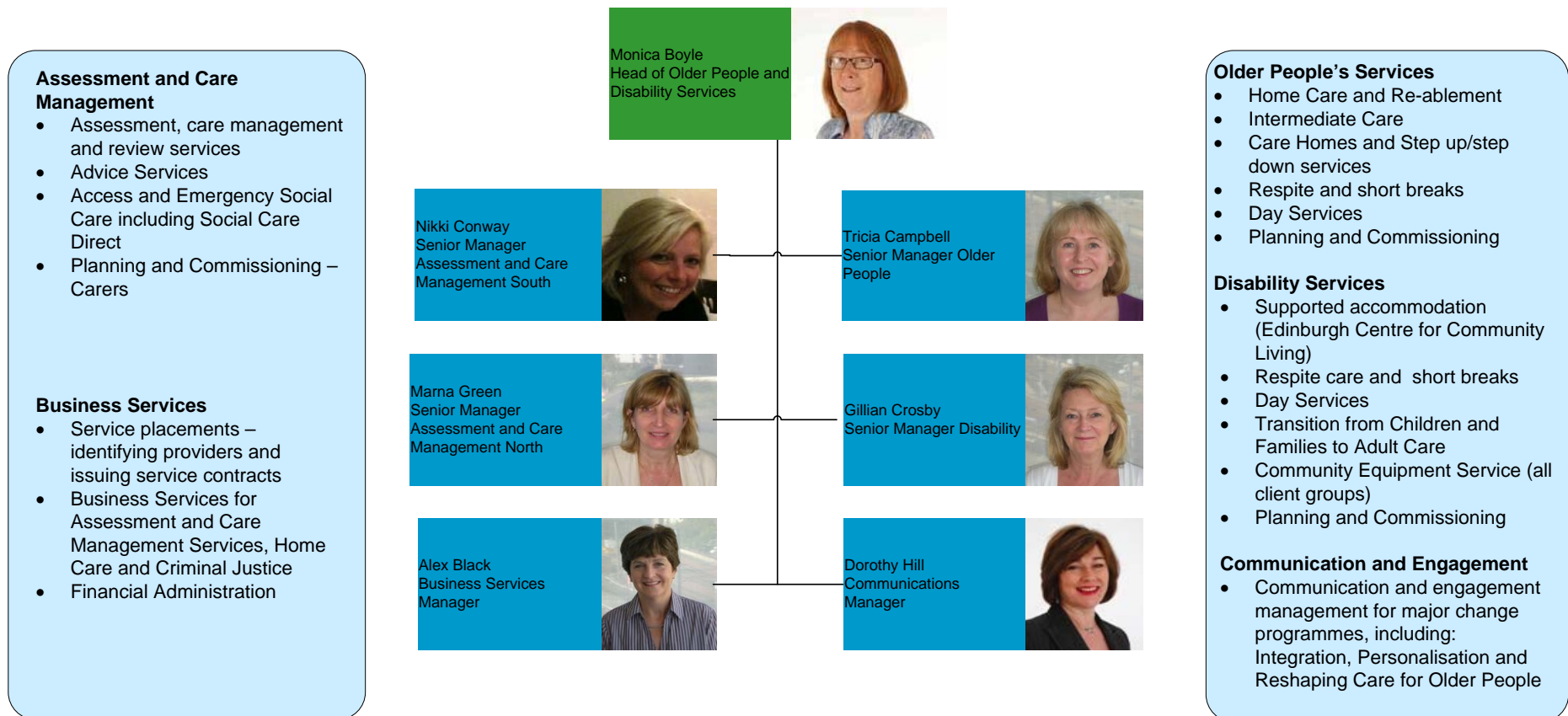
The charts below and on the following pages provide an overview of the functions carried out by the Edinburgh Health and Social Care Partnership and the way in which services are organised.

Edinburgh Health and Social Care Partnership Organisational Structure and Responsibilities

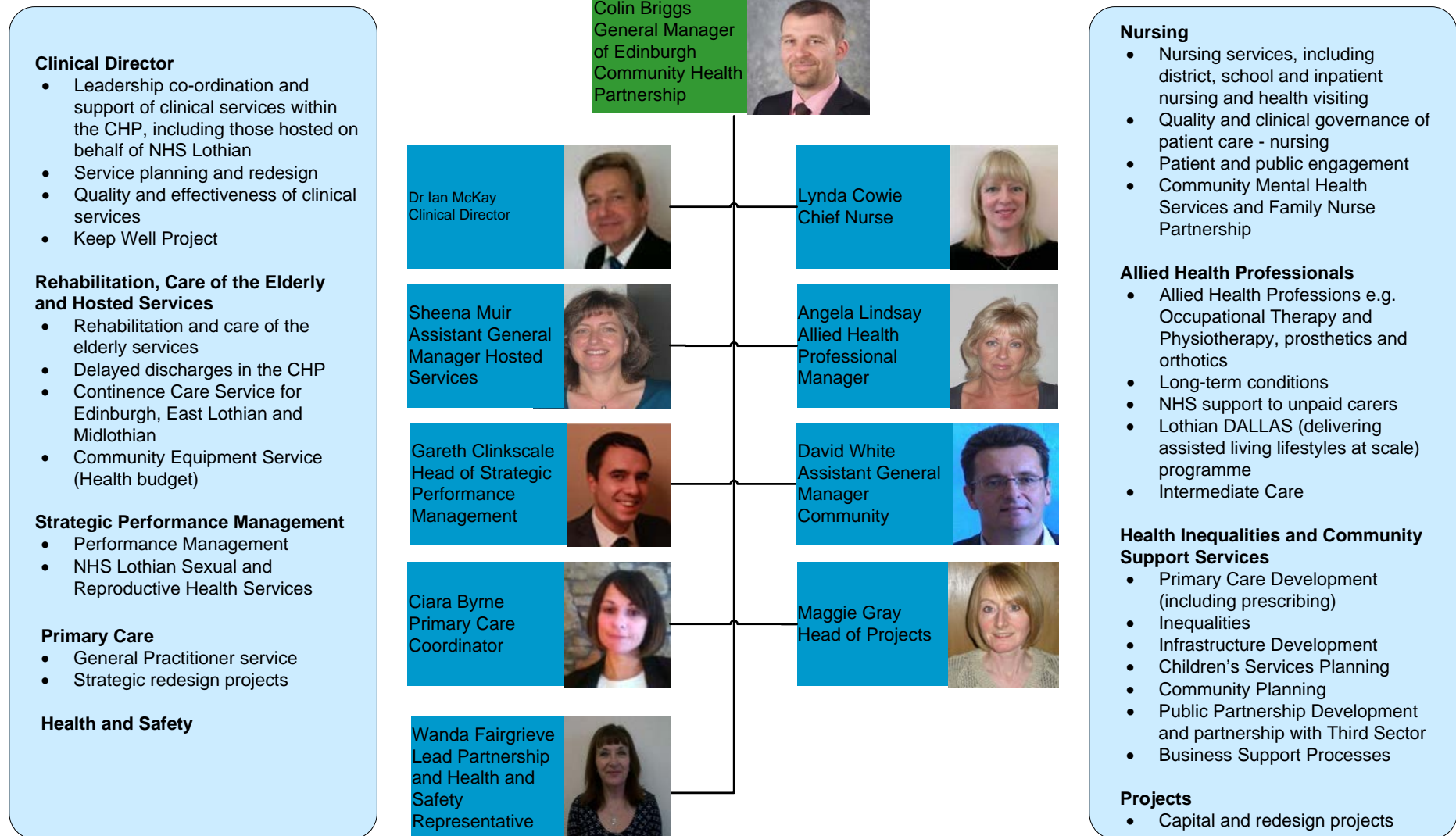


bringing together
Adult Social Care, Community Health Partnership & Royal
Edinburgh and Associated Services

Adult Social Care – Older People and Disabilities



Community Health Partnership (CHP)



Health and Social Care – Chief Social Work Officer

Mental Health, Criminal Justice, Substance Misuse and Homelessness

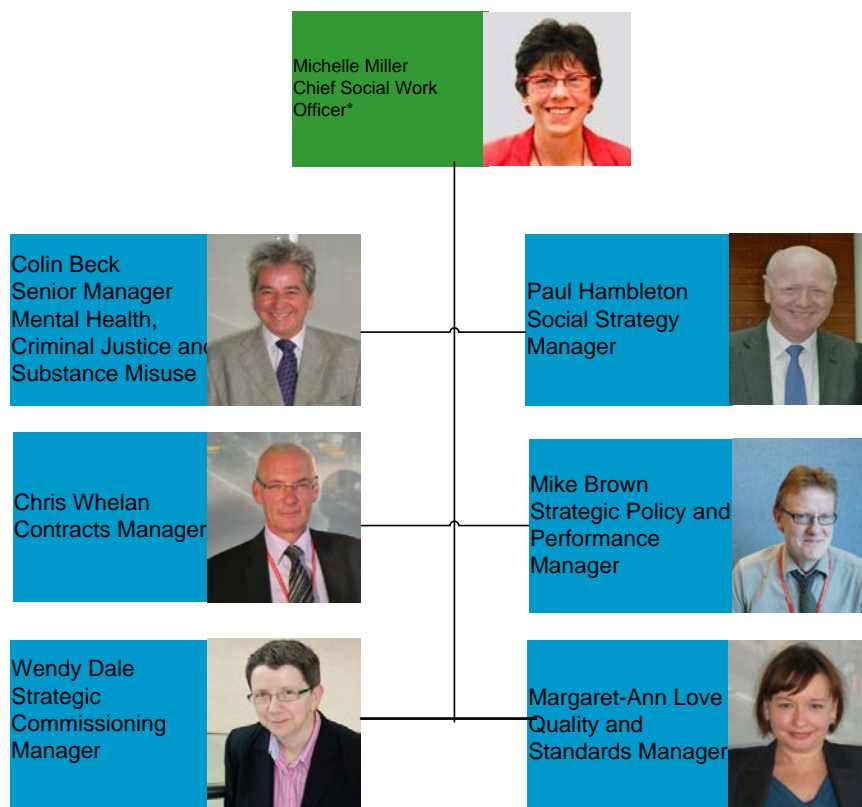
- Assessing needs and risks for individuals
- Providing care and support to help reablement and recovery
- Supported accommodation for adults with complex care needs
- Planning and Commissioning
- Statutory interventions to manage risks that people represent to themselves and others

Contracts

- Third party relationship and investments
- Contract and risk management (value £146million)
- Social care market shaping

Strategic Commissioning

- Strategic Commissioning
- Personalisation Programme (for both adults and children)
- Service Planning



* Each local authority is required by law to appoint a Chief Social Work Officer to provide professional advice regarding the discharge of its social work and social care responsibilities, whether provided directly by the local authority or in partnership with other agencies.

Social Strategy

- Social Strategy and Partnership links
- Social Inclusion and Health Inequality
- Managing preventive action for Health Inequality

Strategic Policy and Performance

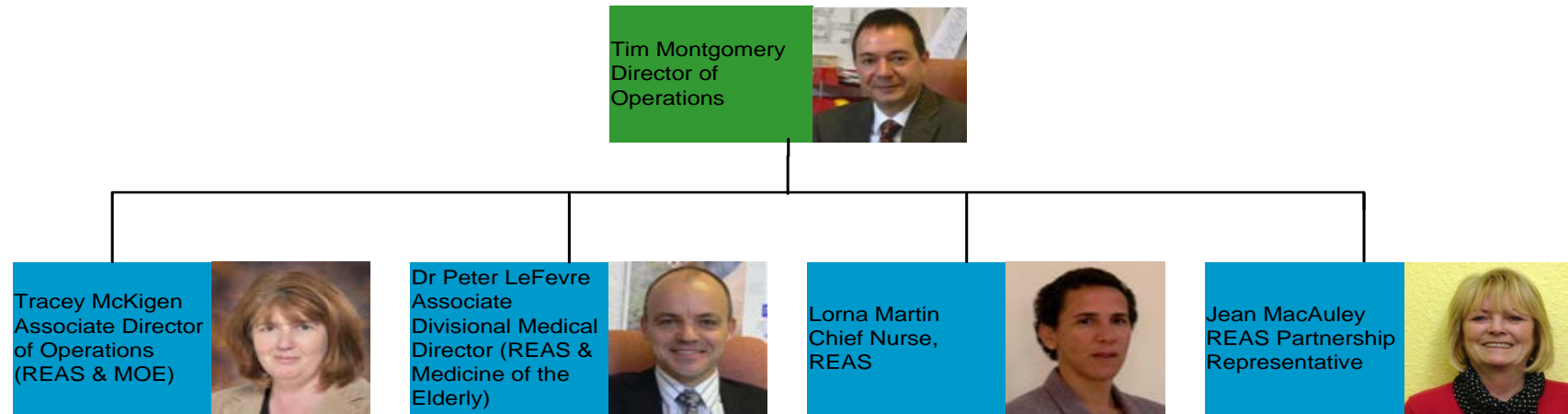
- Research and Information
- IT and Operational Assets (SWIFT, property etc.)
- Best Value

Quality and Standards

- Learning and Development
- Quality Assurance including Regulation of Care*
- Procedures and Records*
- Complaints*

* For both adults and children

Royal Edinburgh and Associated Services



- Finance and performance
- Admin and clerical services
- Forensic contracts

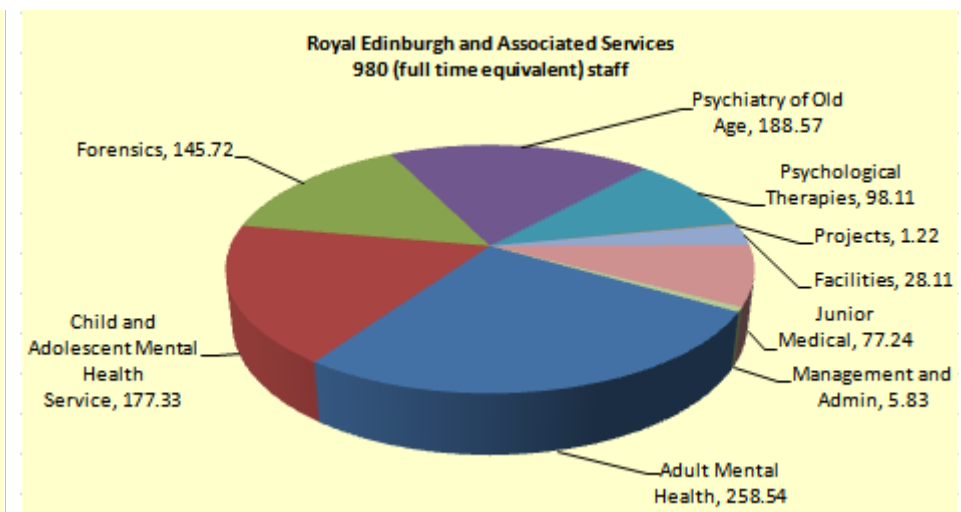
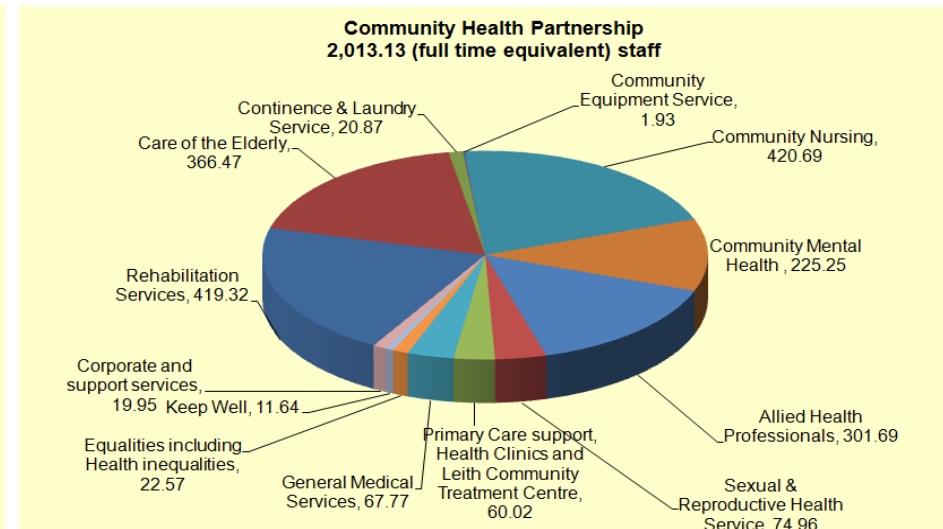
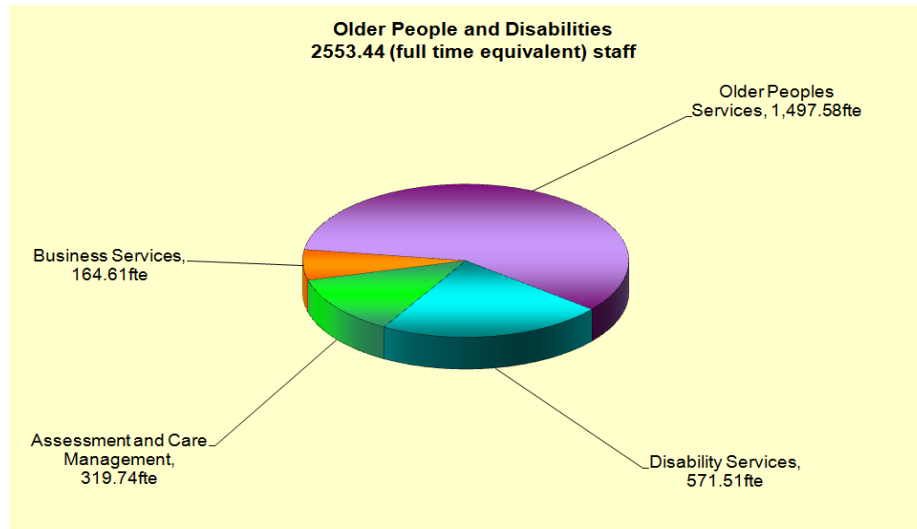
- Psychiatric services
- Medical services
- Quality and clinical governance of patient care - medicine

- Nursing services
- Quality and clinical governance of patient care - nursing
- Operational and strategic planning for new services

- Forensic medical examiner service and care in custody service
 - Adult mental health,
 - Older people mental health,
 - Regional medium secure unit,
 - Lothian Child and adolescent mental health (CAMHS),
 - Eating Disorder services,
 - Traumatic stress services,
 - Veteran's service

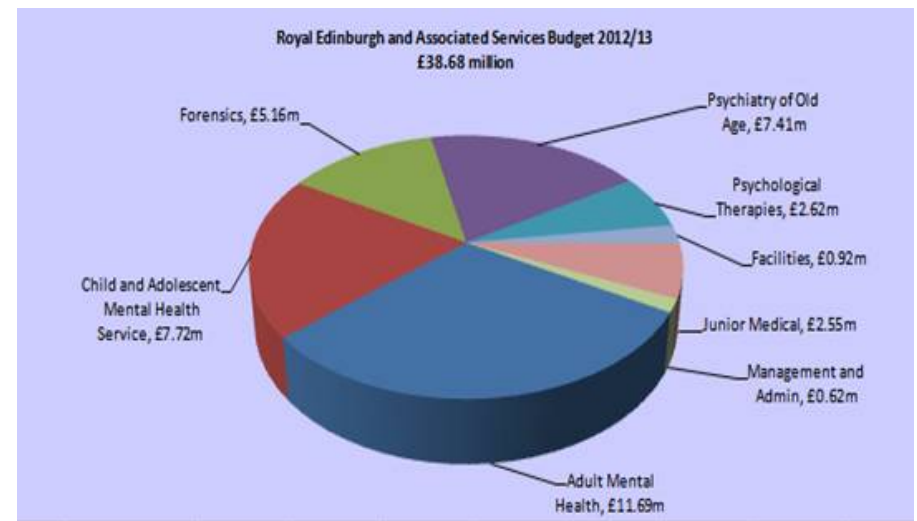
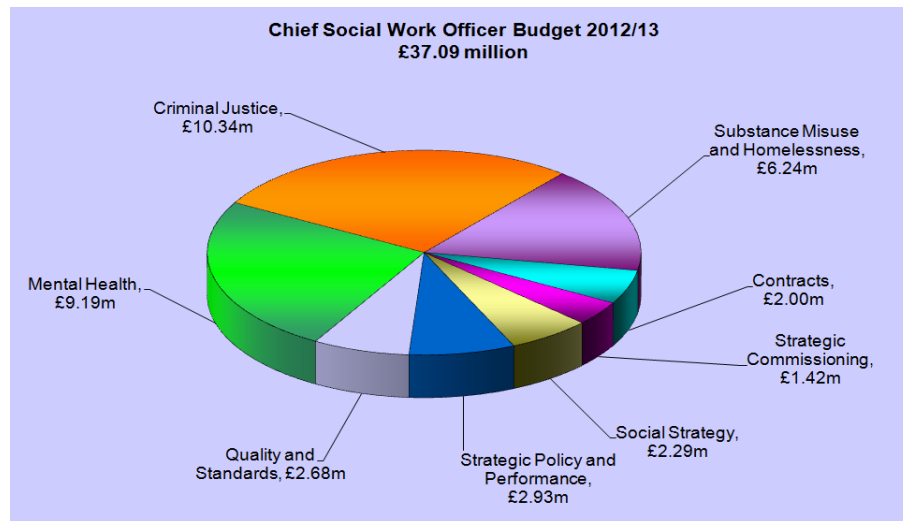
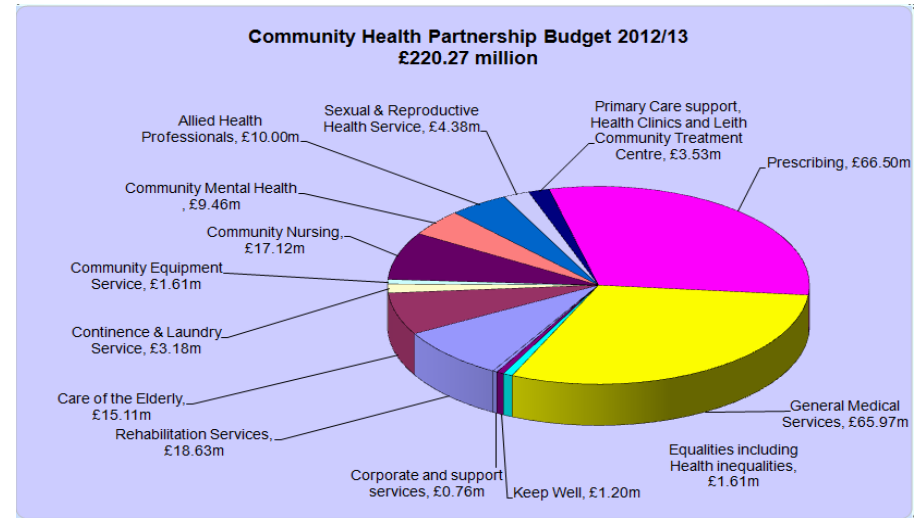
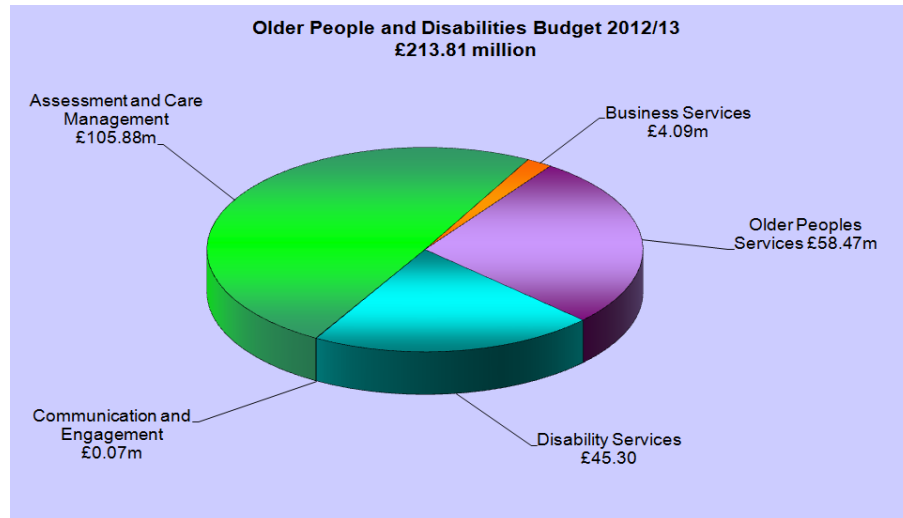
Our staff

The Edinburgh Health and Social Care Partnership employs 5,891.5 full time equivalent staff, the charts below provide an overview of where they work.



Our budget

The charts below provide a summary of the way in which the Partnership's total budget of £509.85 million is distributed across the services and functions shown in the structure charts on pages 4 – 7 above.



The people we support

This section of the Strategic Framework provides an overview of the types and volume of services and support delivered by the three partner agencies in 2011/12, the last year for which full figures are available. The population of Edinburgh for this year is estimated to be 495,360 of which 411,970 people (83%)¹ were aged 18 or over.

Adult Social Care

During the year April 2011 to March 2012, almost 25,000 people had their social care needs assessed or reviewed, and care and support services were either provided or purchased for around 26,000 people. The table below provides a high level summary of the groups of people supported and the types of support provided.

Service Type	Older People	Physical Disabilities	Learning Disabilities	Mental Health	Addictions/ Substance misuse	Other	Criminal Justice	Total
Residential Care	4408	155	400	130	58	27		5,178
Home Care and Care at Home	5,913	429	239	132	26	115		6,854
Day Care - In-house and external	2245	180	597	20	1	4		3,047
Direct Payments	274	202	292	57	3	0		828
Community Equipment and Adaptations	6,194	1,950	0	0	0	0		8,144
Respite and Short Breaks	3,009	255	1,034	36	9	9		4,352
Intermediate Care	1,956	224	0	0	0	0		2,180
Criminal Justice Social Work Reports written							4,988	4,988
Offenders in community with open Criminal Justice orders							2,345	2,345

Some individuals would have received more than one service so the total number of people receiving specific services is greater than the total number of people supported.

In addition to the provision of direct services to individuals, Adult Social Care also invests in a number of services, which people can access directly in order to improve their health and wellbeing and avoid any deterioration in their circumstances to the point where they need to access formal care and support services.

¹ 2011 mid-year estimates, published by National Records Scotland

Support to carers to enable them to continue in their caring role is provided through short breaks and the Council also funds a number of organisations in the third sector to provide direct support to carers. During 2012/13, a number of new services for carers have been developed, including one-off direct payments and the Emergency Card Scheme.

Edinburgh Community Health Partnership (CHP)

The CHP provides a range of community, primary, and specialist healthcare services across the city, as well as playing a key role in reducing health inequalities. The following table details the range of healthcare services provided by the CHP.

Service Type	Service Description	Annual Activity
Rehabilitation Services	Hospital inpatient rehabilitation services including Orthopaedic Rehab, Neurorehabilitation, Stroke Rehab and Amputee Rehabilitation. Outpatient rehabilitation services including the Wheelchair and Mobility Services, Scottish Driving Assessment Service, Prosthetic Service and Orthotic Service	48,438 bed days and over 18,000 patient contacts (2012)
Care of the Elderly	Hospital inpatient care for older people, including Continuing Care, Psychiatry of Old Age and Respite beds	89,991 bed days (2012)
Community Nursing	Nursing services in the community including District Nursing, Health Visiting, School Nursing, the IMPACT Team (working with patients who have Long Term Conditions) and the Family Nurse Partnership	Over 415,000 patient contacts (varied 12 month period)
Allied Health Professionals	Allied Health Professionals provide a range of community and community hospital services including Physiotherapy (Domiciliary and Outpatient), Occupational Therapy, the Intermediate Care Team, Carer Support and Telehealth	157,042 patient contacts (varied 12 month period)
Community Mental Health	A range of community mental health support services including Adult Community Mental Health Teams, Primary Care and Older People's liaison teams, the Intensive Home Treatment Team (IHTT), Behavioural Support Services and Mental Health Assessment Service at the Royal Infirmary and Royal Edinburgh	Over 63,000 face to face patient contacts
Primary Care support, Health Clinics and Leith Community Treatment Centre (LCTC)	The CHP works with primary care providers to support and improve services, and provides health clinic administration. Leith Community Treatment Centre provide a range of services including the Minor Surgery Service and Cryotherapy	71 GP practices supported; 1,824 patients treated at LCTC (2012/13 activity - based on Jun-Nov12)
Sexual & Reproductive Health Service	Provision of the full range of sexual and reproductive health services across Lothian, including contraception, Sexually Transmissible Infection testing / treatment, HIV testing and disease management, medical abortion and community gynaecology services	50,030 face to face patient contacts (2012)
Continence, Community Equipment and Laundry Services	Delivery of continence products to patients and healthcare professionals. Provision of community healthcare equipment to patients and a community laundry service for those people cared at home who require regular bed changes	116,753 continence and health products deliveries (varied 12 month period)

Equalities including Health inequalities	The CHP provides a range of equalities projects and services, such as the Willow Project, Health Flats, MEHIS (linking vulnerable populations to healthcare) and Keep Well's inequalities targeted health checks	5,315 Keep Well health checks (2012/13)
Primary Care Pharmacists	Team of pharmacists who support local GPs to achieve quality and cost effective prescribing	71 GP practices supported
Other community services	The CHP provides a number of other smaller services and programmes such as the Chronic Pain service, Public Involvement Workers, the Lymphodema Team and Long Term Conditions programme, including the Community Respiratory Service and Community Pulmonary Rehabilitation Service	

Royal Edinburgh and Associated Services

The Royal Edinburgh Hospital and Associated Services provides and manages a range of mental health services across Lothian. Many of these services are provided on the Royal Edinburgh Hospital site. Details of these services can be seen below.

Service	Inpatients	Inpatient Admissions 2011/12
Adult Mental Health	5 acute inpatient wards for patients from Edinburgh, East Lothian and Midlothian totalling 100 beds. In addition, the Intensive Psychiatric Care Unit has 12 beds.	813
Psychiatry of Old Age	4 acute inpatient wards totalling 70 beds. In addition, there is 1 rehab ward with 14 beds, 33 continuing care beds across 2 wards and 1 ward with 10 early onset dementia beds	369
Psychiatric Rehabilitation Services	There are 4 inpatient wards with 65 beds for patients from Edinburgh, East Lothian and Midlothian.	63
Forensic Services	There are 2 rehab wards and 1 admission ward totalling 45 beds. The inpatient unit is a medium secure facility and admits patients from a variety of NHS Boards.	59
Child and Adolescent Mental Health	The Child and Adolescent Mental Health Service (CAMHS) Inpatient Unit has 12 beds for adolescents and teenagers less than 18 years of age. As CAMHS is a regional service, patients can be admitted from other NHS Boards.	107

Data Source: PiMS

In addition to the above, the Royal Edinburgh Hospital hosts the following:

- Brain Injury service – 19 beds across two wards
- Substance Misuse service - 12 inpatient beds in one ward
- Learning Disability Service – 24 beds on the Royal Edinburgh Hospital site and 54 beds outwith the Royal Edinburgh Hospital

From the 1st April 2013, managerial responsibility for the Learning Disability Service and Substance Misuse will transfer to Royal Edinburgh and Associated Services.

The Royal Edinburgh Hospital is deemed a place of safety and hosts the Mental Health Assessment Service (MHAS). Managerial responsibility for this service is held by Edinburgh Community Health Partnership.

A brief summary of Mental Health outpatient services can be seen in the table below.

Service	Outpatients	Number of Referrals	Direct face to face contacts 2011/12
Adult Mental Health	Outpatient adult mental health services are provided and managed currently by Edinburgh Community Health Partnership.	5808	63308
Psychiatry of Old Age	Psychiatry of Old Age outpatient services are managed across Royal Edinburgh and Associated Services and Edinburgh Community Health Partnership. The Royal Edinburgh and Associated Services component incorporates the Consultant Psychogeriatrician workload. Other services including Memory, Behavioural Support and Day Services are currently managed by Edinburgh Community Health Partnership.	2039	19407
Psychiatric Rehabilitation Services	Community rehab patients can be reviewed by Consultant Psychiatrists within the Rehabilitation service and/or case managers from CRT	22	2785
Forensic Services	A small number of patients are seen on an outpatient basis. The managerial responsibility for the Forensic Medical Examiners Service is held by the Forensic Service management team and their activity is included in the data.	529	1343
Child and Adolescent Mental Health	Child and Adolescent Mental Health outpatient services span Lothian and work with children and young people with and their families or carers.	3659	29283
Cullen Centre	Outpatient services for patients with eating disorders are provided at the Royal Edinburgh Hospital. The regional inpatient eating disorder unit is located at St John's Hospital and is managed by West Lothian Community Health Partnership	295	2971
Anorexia Nervosa Intensive Treatment Team	The outpatient psychological therapy service for patients with Anorexia Nervosa is held at the Royal Edinburgh Hospital.	8	2064
Rivers Centre	The Rivers Centre provides psychological therapy for patients with Post Traumatic Stress Disorder and is on the Royal Edinburgh Hospital site.	192	1503
Veterans First Point	Veterans First Point provides psychological support for Veterans and is based off-site.	142	1327
Psychotherapy	Psychotherapy services are based at Royal Edinburgh Hospital	299	2762

Clinical Psychology	Clinical psychology services are provided both at Royal Edinburgh Hospital and in other services across NHS Lothian.	47	279
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Data Source: PiMS

Mental health care within Royal Edinburgh and Associated Services is multi-professional and relies on a variety of disciplines who strive for excellence in all aspects of care delivery.

National strategic drivers

There are a number of national drivers, which the Council and NHS Lothian need to respond to and therefore shape the strategic framework adopted by the Edinburgh Health and Social Care Partnership. The key policies are:

- Achieving Our Potential
- Assets and Co-production Programme
- Caring Together – Carers Strategy for Scotland 2010-15
- Commission on the Future Delivery of Public Services
- Dementia Strategy
- Equal Communities in a Fairer Scotland
- Equally Well
- Health Inequalities Programme
- Health Works (National Strategy)
- Healthcare Quality Strategy for NHS Scotland
- Integration of Health and Social Care
- Leading Better Care
- Managing long-term health conditions
- Mental Health Strategy for Scotland 2012-15
- National Delivery Plan for Allied Health Professionals in Scotland 2012-15
- National Telehealth and Telecare Delivery Plan for Scotland to 2015
- National Self-directed Support Strategy

- NHS 20:20 Vision – Achieving Sustainable Quality in Scotland's Healthcare
- Reducing delayed hospital discharge
- Reducing Re-offending Strategy
- Reshaping Care for Older People
- Scotland's Relationship with Alcohol
- Scottish Patient Safety Programme
- Shifting the Balance of Care
- The Road to Recovery (national drugs strategy)
- Welfare Reform Act 2012

Overarching strategic programmes and initiatives

The Health and Social Care Partnership is engaged in delivering a number of major strategic programmes and initiatives at a local level, which will contribute to the delivery of national policy and the achievement of our strategic vision. The most significant of these are listed below together with a hyperlink to the relevant strategy document.

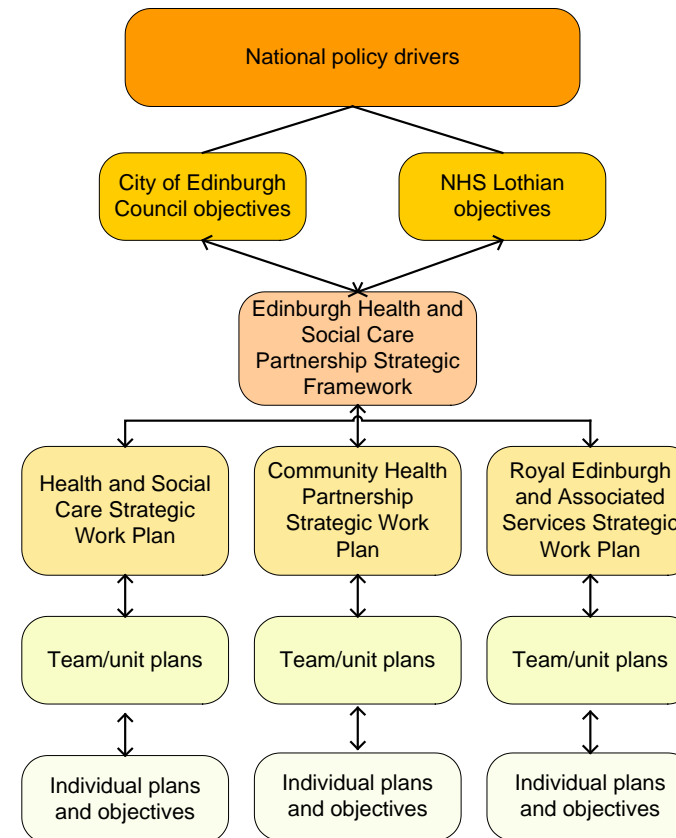
- ["A Sense of Belonging"](#)
- [Choose Life](#)
- [Commissioning Strategy for Care and Support](#)
- [Community Engagement Plan](#)
- [Edinburgh Alcohol and Drug Strategy](#)
- [Edinburgh Joint Learning Disability Capacity Plan](#)

- [Edinburgh Partnership Single Outcome Agreement 2012-15](#)
- [Homelessness Strategy](#)
- Integrated Action Plan for Tackling Health Inequalities (2012-15)
- [“Live Well in Later Life”](#)
- [Lothian and Borders Criminal Justice Authority Area Plan](#)
- [Multi-agency Strategy for Public Protection in Edinburgh](#)
- [Personalisation Strategy](#)
- [Towards 2012 – An Action Plan for Carers](#)

The joint response of the City of Edinburgh Council and NHS Lothian to the Scottish Government’s consultation on the integration of health and social care can be accessed here:

http://www.edinburgh.gov.uk/download/meetings/id/36308/item_no_13-scottish_government_consultation_on_the_integration_of_health_and_social_care_services

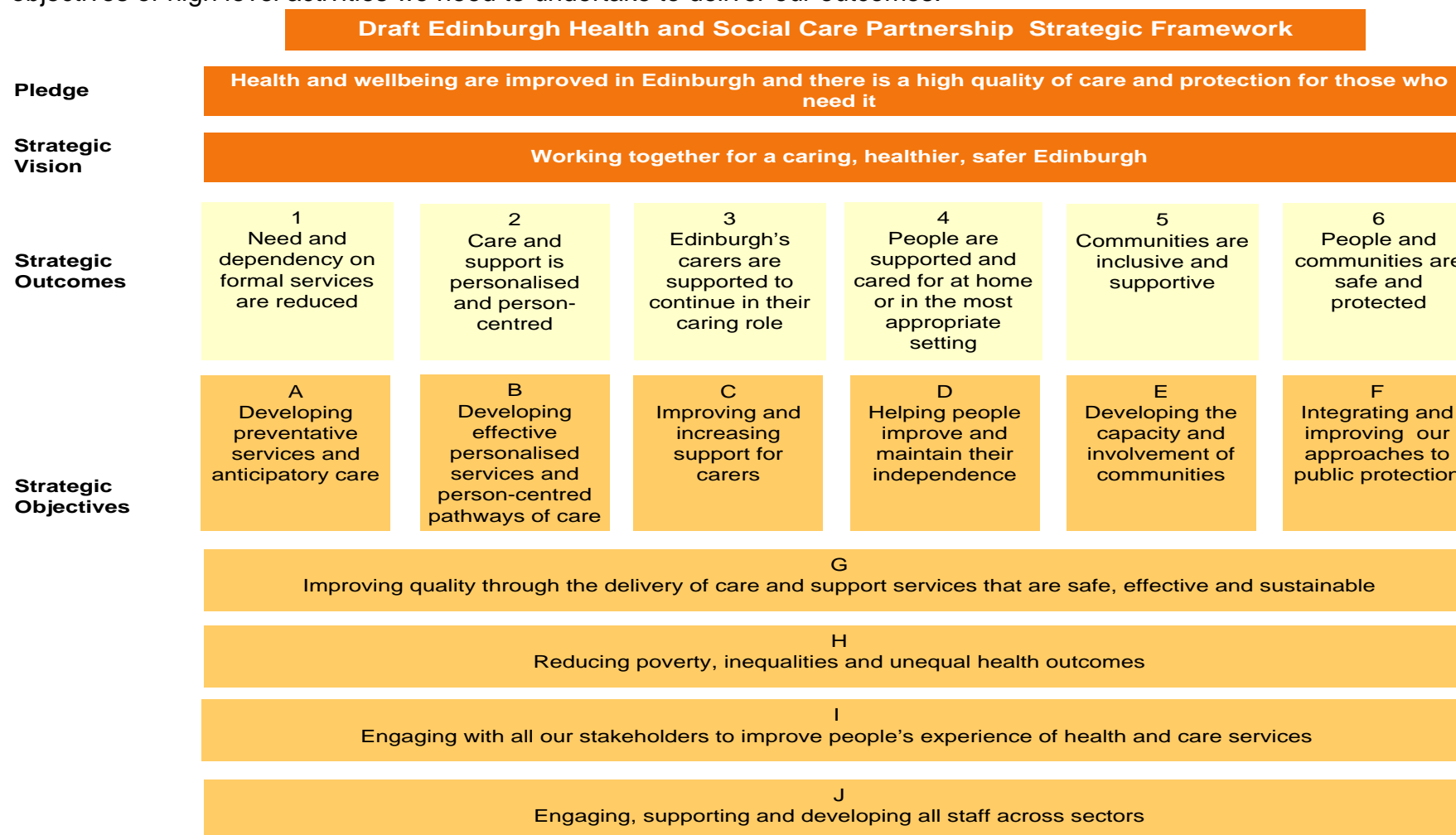
The strategic framework provides a link between national policy and the performance objectives and work plans of individual members of staff.



The Golden Thread

Our strategic vision, outcomes and objectives

The diagram below illustrates the links between the Partnership's strategic vision, the outcomes we are seeking to achieve and the objectives or high level activities we need to undertake to deliver our outcomes.



Our objectives in more detail

The following table explains each of our objectives in more detail and links these to aims and objectives in other key documents.

Ref	Objective	Links
	Key to links: EPP = Edinburgh Partnership Priority; HCIO = National Health and Care Integration Outcomes; NHSL(SCF) = NHS Lothian Strategic Clinical Framework; SOA = Single Outcome Agreement;	
A	<p>Developing preventative services and anticipatory care Developing services and providing information and support to encourage people to improve their health, wellbeing and quality of life, retain their independence, engage with their community and prevent any deterioration in their situation.</p> <ul style="list-style-type: none"> • Primary prevention/promoting wellbeing - aimed at people who have little or no health or social care needs; or symptoms of illness; the focus is therefore on maintaining independence and good health, and promoting wellbeing. • Secondary prevention/early intervention - to identify people at risk and to halt or slow down any deterioration, and actively seek to improve their situation; including working more effectively with primary care to identify those at greatest risk of ill health. • Tertiary prevention - aimed at minimising disability or deterioration from established health conditions or complex social care needs; the focus here is on maximising people's functioning and independence, and on preventing inappropriate use of more intensive services for people with given levels of need, which could be met by lower cost services or interventions. 	<ul style="list-style-type: none"> - NHSL(SCF) Aim 1 - HCIO 1 - HCIO 2 - EPP (SOA3)
B	<p>Developing effective personalised services and person-centred pathways of care Ensuring that:</p> <ul style="list-style-type: none"> • a person-centred approach to the provision of health care and support services is embedded across statutory, voluntary and private sector. • people assessed as having eligible social care needs are supported to exercise as much choice and control as they wish in planning and organising the way in which those needs are met, enabling them to live their life in ways that suit them and meet their agreed personal outcomes. • there is a diverse range of services and support available to provide real choice for those who wish to direct their own care and support. • our health and social care systems reliably and efficiently deliver the right care at the right time in the most appropriate place. 	<ul style="list-style-type: none"> - NHSL(SCF) Aim 2 - NHSL(SCF) Aim 3 - HCIO 2 - HCIO 3

Ref	Objective	Links
	Key to links: EPP = Edinburgh Partnership Priority; HCIO = National Health and Care Integration Outcomes; NHSL(SCF) = NHS Lothian Strategic Clinical Framework; SOA = Single Outcome Agreement;	
C	Improving and increasing support for carers Involving carers as equal partners and ensuring that carers receive the information and support (practical, emotional and social) they need to maintain their caring role and their own health and wellbeing.	<ul style="list-style-type: none"> - NHSL(SCF) Aim 5 - HCIO 4 - EPP (SOA3)
D	Helping people improve and maintain their independence Supporting people with health and social care needs to live as safely and independently as possible in the community, through to end of life; taking control over how their care and support needs are met and actively engaging in their community. Ensuring that people get back to their home or community environment as soon as appropriate after inpatient care, with minimal risk of readmission to hospital.	<ul style="list-style-type: none"> - NHSL(SCF) Aim 2 - NHSL(SCF) Aim 4 - HCIO 2 - EPP (SOA3)
E	Developing the capacity and involvement of communities Treating individuals, groups and communities as partners with the potential to engage in the planning and delivery of care and support services to meet wider community needs and supporting them to develop this potential wherever possible.	<ul style="list-style-type: none"> - NHSL(SCF) Aim 1 - NHSL(SCF) Aim 4 - HCIO 2
F	Integrating and improving our approaches to public protection Working with partners to identify, assess and manage proactively the risk of harm to the public from crime, substance misuse and physical, emotional or financial abuse.	<ul style="list-style-type: none"> - NHSL(SCF) Aim 2 - HCIO 5 - EPP (SOA3)
G	Improving quality through the delivery of services and support that are safe, effective and sustainable Ensuring that: <ul style="list-style-type: none"> • services across the statutory, voluntary and private sectors, are designed and delivered to be safe, effective and sustainable; building high quality services which improve health and wellbeing across the city. • care is evidence-based, incorporates best practice and fosters innovation, achieving seamless and sustainable pathways of care. 	<ul style="list-style-type: none"> - NHSL(SCF) Aim 1 - NHSL(SCF) Aim 3 - NHSL(SCF) Aim 4

Ref	Objective	Links
	Key to links: EPP = Edinburgh Partnership Priority; HCIO = National Health and Care Integration Outcomes; NHSL(SCF) = NHS Lothian Strategic Clinical Framework; SOA = Single Outcome Agreement;	
H	Reducing poverty, inequalities and unequal health outcomes Enabling people on low incomes to maximise their income, promoting equality of opportunity, health, and social participation, regardless of income, social class, age, disability, gender identity, marital or civil partnership status, pregnancy and maternity, race, religion or belief, sex or sexual orientation. Tailoring services and health interventions to people who are at the highest risk of ill health, to prevent illness and reduce health inequalities. Recognising and working with the third sector as key partners to reduce poverty, inequalities and unequal health outcomes.	<ul style="list-style-type: none"> - NHSL(SCF) Aim 1 - HCIO 1 - HCIO 2 - EPP (SOA3)
I	Engaging with all our stakeholders to improve people's experience of health and social care services Working with all partners, including patients, service users, carers, the third and independent sector staff to improve the quality of our services, give people a positive experience and enable their personal outcomes to be achieved.	<ul style="list-style-type: none"> - NHSL(SCF) Aim 5 - NHSL(SCF) Aim 6
J	Engaging, supporting and developing staff across sectors <ul style="list-style-type: none"> • Staff employed across the statutory, voluntary and private sector are supported to take person-centred approaches to working with people who use services and improving the care they provide. • Promoting health and social care as a positive career choice. • Working with staff to improve our health and social care services. 	<ul style="list-style-type: none"> - NHSL(SCF) Aim 6

Underlying principles

In working to achieve our strategic objectives we will:

- strive to make the best use of the resources available to us
- ensure our services are safe and effective
- take a whole systems approach to planning and managing integrated pathways of care, with the person at the centre
- maximise opportunities for co-production, treating people who use our services, carers and other members of the community as partners and involving them in the planning and delivery of services
- maximise opportunities to work in partnership and progress the integration of health and social care
- prioritise the care, protection and support of those most at risk
- align our individual behaviour to ensure that the public, partners and colleagues are treated with respect, courtesy and humanity
- support people to achieve their personal outcomes by adopting positive approaches to managing risks.

Future challenges

There are a number of high level challenges, which are common to all public sector organisations in Scotland and beyond:

- increasing demand for services due to demographic pressures, such as a growing elderly population, people with complex conditions living longer and the increasing prevalence of dementia
- increasing public health challenges such as obesity, poor diet and excessive consumption of alcohol
- increasing public expectations about the type, quality and flexibility of services and support available to them
- continuing social inequalities in health and wellbeing
- welfare reform potentially resulting in a rise in homelessness and increased pressure on social care emergency support in particular
- significant financial pressures.

It is clear that a different approach is needed if we are to meet these challenges and put simply, more of the same will not work.

The integration of health and social care is part of the solution; however, bringing together three different organisations with shared aims but different cultures will be a challenge in itself.

A number of other significant changes in policy need to be implemented alongside integration, which will present both challenges and opportunities, in particular:

- the personalisation of services, leading to the adoption of more person-centred pathways of care
- the implementation of the Social Care (Self-directed Support) (Scotland) Act 2013 enabling both adults and children and their families to exercise as much choice and control as they wish and is appropriate over how their care and support needs are met

- the likely impact of the introduction of the welfare reform proposals on levels of poverty and health inequalities, and a possible increase in demand for services
- the shift in the balance of care from acute hospitals to community services, and the need to move from reactive service provision to prevention and anticipatory care
- the shift from a focus on measuring performance in terms of outputs to an outcomes based approach

There are also a number of existing practical challenges, which will need to be addressed, including:

- reducing the number of unscheduled hospital admissions where care in the community would have been more appropriate
- the volume of delays in discharge from hospital, and the need to develop better pathways of care that move patients to the most appropriate setting, at the right time
- the need to better engage with primary care services, ensuring robust and high quality pathways of care
- difficulties in recruiting staff to provide hands on support with personal care needs
- the changing shape of our workforce, with fewer doctors overall, and the need for more effective use of other staff group skills.

Work plans and performance measures

As the Edinburgh Health and Social Care Partnership matures over the next year, the Strategic Framework put in place for the first year of operation will be reviewed to ensure that it fully reflects the shared vision, outcomes and objectives of the new Partnership. This will provide the opportunity for the development of a single shared work plan, harnessing the combined skills and expertise of colleagues from both health and social care backgrounds.

Although there is already a great deal of joined up working taking place, services are currently organised within the existing structures of the three partner agencies. For the financial year April 2013 to March 2014, it has therefore been agreed that each agency will produce its own strategic work plan and related set of performance indicators. These documents set out the actions the agency will take to achieve the jointly agreed strategic vision, outcomes and objectives for the Edinburgh Health and Social Care Partnership over the next year.

The three strategic work plans form separate appendices to this overarching Strategic Framework and should be seen as an integral part of the Framework.

- Adult Social Care Strategic Work Plan (Appendix 1)
- Community Health Partnership Strategic Work Plan (Appendix 2)
- Royal Edinburgh and Associated Services Strategic Work Plan (Appendix 3)

Tell us what you think

This is the first Strategic Framework produced by the Edinburgh Health and Social Care Partnership. We would really welcome feedback on whether or not you have found the document useful and any changes that you would like to see in future versions.

If you would like to share your views with us please send them by email to:

healthsocialcareintegration@edinburgh.gov.uk