

Dundee Health and Social Care Partnership

Delivery Plan October 2024 – March 2026

This is the Dundee Health and Social Care Partnership’s (Partnership)¹ delivery plan for the 18 months from October 2024 to March 2026, which will support the achievement of the ambition, strategic priorities and changes within Dundee Integration Joint Board’s (IJB) [Strategic Commissioning Framework 2023-2033](#). This is a working document that will be monitored by the Partnership and the IJB throughout the year to check that actions are progressing and having the positive impact that has been planned. Where things are not going as planned, or where new risks or challenges emerge the delivery plan will be adjusted in agreement between the Partnership and the IJB.

At the end of each financial year (1 April to 31 March), the delivery plan will be fully reviewed and updated for the next year; the first review will take place in March 2026. The annual review of the delivery plan will include opportunities for people who use health and social care services and supports, unpaid carers, the workforce and providers of health and social care services to contribute their views. Progress made will be reported through the IJB’s Annual Performance Report and the new delivery plan for the coming year will be published. More detail about how progress against the delivery plan will be monitored and reported can be found in the IJB’s performance framework (which is currently being developed).

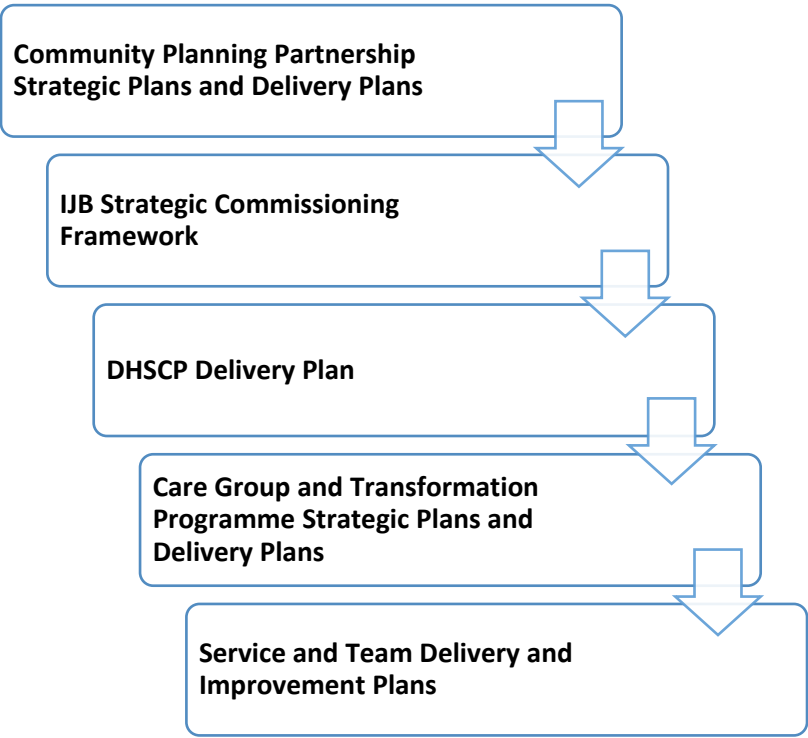
Just over 2,500 people employed by Dundee City Council and NHS Tayside work within the Partnership, delivering health and social care services and supports to meet the health and wellbeing needs of almost 150,000 Dundee citizens. In 2024/25 the IJB has £301 million to spend on adult health and social care services delivered through the Partnership, including from the third and independent sector. This delivery plan identifies the most important actions that the Partnership (including the third and independent sector) will focus on achieving during the next 18 months. These actions have been included because they are the things that will make the biggest difference to delivering the changes the IJB has already agreed need to happen to support everyone in Dundee to have the best possible health and wellbeing. This means that the delivery plan does not cover everything that the Partnership will do during the next 18 months, but instead focuses on the things we must do (our legal duties, including making sure the IJB has a balanced budget) and the critical few actions that will make the biggest contribution to delivering the IJB’s Plan for Excellence.

Ambition for Health and Social Care in Dundee

People in Dundee will have the best possible health and wellbeing.

They will be supported by health and social care services that:

- ✓ Help to reduce **inequalities** in health and wellbeing that exist between different groups of people.
- ✓ Are easy to find out about and get when they need them.
- ✓ Focus on helping people in the way that they need and want.
- ✓ Support people and communities to be healthy and stay healthy throughout their life through **prevention** and **early intervention**.



This delivery plan does not set out plans for every health and social care service and support, there are other more detailed plans that sit below this delivery plan. These include:

- Plans developed through the Community Planning Partnership (known as the Dundee Partnership) for all partner agencies to work together on specific priorities. For example, plans to reduce the harms associated with drug and alcohol use, to improve outcomes for children, young people and families and to reduce the impact of poverty and the cost of living crisis.
- Detailed plans for specific ‘care groups’ and transformation programmes. For example, the IJB has agreed strategic plans for carers, mental health, people with a learning disability and who have autism. There are also plans in place to help to transform primary care services, unscheduled care and non-acute care. Many of these plans already have very detailed delivery plans describing the actions that will be taken to implement them in practice. There are also some areas where the plans developed by Dundee City Council and NHS Tayside are also relevant to the work done by the IJB and the Health and Social Care Partnership, particularly in relation to digital, property and workforce resources.
- Each individual team and service with the Partnership has in place their own service delivery and improvement plans.

There are links to some of these more detail plans throughout this delivery plan.

¹ The Public Bodies (Joint Working) (Scotland) Act 2014 (the Act) required Local Authorities (Councils) and Health Boards to integrate the planning of some health services and functions and most social care functions. Dundee City Council and NHS Tayside deliver integrated services as Dundee Health and Social Care Partnership. The Health and Social Care Partnership is a way for both organisations, along with the Independent and Third Sector, to deliver the services planned by the IJB

The IJB has agreed 6 **strategic priorities** that will be the focus for the next 10 years to help to achieve the ambition for health and social care. These priorities will also help to achieve Scotland's **National Health and Wellbeing Outcomes**.³



Inequalities

Support where and when it is needed most.

Targeting **resources** to people and communities who need it most, increase **life expectancy** and reduce differences in health and wellbeing.



Self Care

Supporting people to look after their wellbeing.

Helping everyone in Dundee look after their health and wellbeing, including through **early intervention** and **prevention**.



Open Door

Improving ways to access services and supports.

Making it easier for people to get the health and social care supports that they need.



Planning together

Planning services to meet local need.

Working with communities to design the health and social care supports that they need.



Workforce

Valuing the workforce.

Supporting the health and social care workforce to keep well, learn and develop.



Working together

Working together to support families.

Working with other organisations in Dundee to prevent poor health and wellbeing, create healthy environments, and support families, including **unpaid carers**.

These priorities reflect the health and social care needs of people who live in Dundee, people who provide unpaid care and the health and social care workforce. Detailed information about health and social care needs can be found in the [Strategic Commissioning Framework 2023-2033](#).



Life expectancy at birth is decreasing for males and females in Dundee.

Between 2012-14 and 2019-2021 it decreased by almost 2 whole years for males and by around 18 months for females.



Dundee has the 2nd lowest **life expectancy** in Scotland. **Life expectancy** in the most **deprived** areas of Dundee is about ten years less than in the most affluent areas.

Dundee is a city that has high levels of poverty and other social issues that impact on people's health and wellbeing. Life expectancy for people in Dundee is getting shorter. There are also big differences between how healthy and well people are because of where they live in the city, how much money they have and due to who they are (for example, their ethnic origin, sexual orientation, disability or age).

Strategic Priority – INEQUALITIES



Inequalities

Support where and when it is needed most.

Targeting **resources** to people and communities who need it most, increase **life expectancy** and reduce differences in health and wellbeing.

What big changes are needed?

Over the next 10 years the IJB will invest its money and other resources to make these changes:

Short-term (2023-2026)	Medium-term (2026-2029)	Long-term (2029-2033)
Disadvantaged communities (geographic and shared characteristics) are benefitting from more targeted investment to support self-care and prevention.	More disadvantaged people and communities are accessing the health and social care services and supports that they need.	People living in deprivation or who are part of protected equality groups have improved health and wellbeing outcomes. These outcomes are closer to those achieved by the wider population of Dundee (reduced inequality gap).
People who have a sensory impairment or learning disability, whose first language is not English and who are older are better able to find and understand Information published by the IJB and Health and Social Care Partnership.	There are fewer drug and alcohol related deaths.	Everyone in Dundee is living longer (increased life expectancy and increased healthy life expectancy).
Adults who have multiple and complex needs, including adults at risk of harm are more quickly identified and services work well together to provide an initial response to their needs.	Peoples' mental health and wellbeing is better.	People living in the most deprived communities are living longer (increased life expectancy and increased healthy life expectancy).
People who have mental health and wellbeing needs, and for people who use drugs and alcohol have a wider choice of easily accessible community-based supports.	Older people feel less isolated and lonely. This is helping to improve their physical and mental health and wellbeing.	People are protected from harm and supported to recover from the impact of trauma.
People who experience challenges in relation to mental health and drug and alcohol use experience a co-ordinated response from services.	There are fewer deaths by suicide.	Health and social care services are provided from premises that create environments that support trauma informed ways of working and reduce inequalities.
More health and social care services and supports demonstrate a trauma informed response to meeting needs.	People from disadvantaged groups are getting the support, treatment and care they require without fear of discrimination or stigma.	People accessing health and social care services experience a culture and practice that is rights-based.
More health and social care services and supports demonstrate a gendered approach to service delivery.		
There is a clear strategic plan for how the IJB will invest its resources to better meet the needs of people with a physical disability or sensory impairment.		
The health and social care workforce has a better understanding of equality and fairness, including how their practice can help to better meet people's needs.		

To deliver these strategic shifts Dundee Health and Social Care Partnership will:

CONTINUE TO PROGRESS AND SUPPORT THE FOLLOWING PROGRAMMES OF WORK....

Partnership led activity:

- [Mental Health and Wellbeing Strategy \(2019-2024\)](#)
- [Living Life Well and Living Life Your Way in Dundee \(A Strategic Plan for Supporting Adults with a Learning Disability and Adults with a Learning Disability and Autism\) \(2022-2027\)](#)
- [Tayside Mental Health and Wellbeing Whole System Change Programme](#)
- [Primary Care Mental Health and Wellbeing Framework](#)
- [IJB's Equality Outcomes](#)
- Dundee Health and Social Care Partnership Protecting People Improvement Plan

Wider multi-agency activity:

- [Alcohol and Drug Partnership Delivery Plan](#)
- Adults at Risk Committee Delivery Plan, including the development of a multi-agency pathway for responding to adults at risk.
- Trauma Informed Leadership and Practice Implementation Plan
- Gendered Services Project
- [Community Learning and Development Plan \(2024-2027\)](#)
- [Fairness and Child Poverty Action Plan](#)

HAVE A SPECIFIC FOCUS ON.....

Transformation and improvement of services and supports:

- Further develop our wellbeing hub model, with a focus on preventative services and targeted investment to support disadvantaged communities.
- Establish a Primary Care prevention project to engage people at higher risk of health inequalities around their health, to promote self-care and self-management, and clinical management where required.
- Establish an operational leadership post of public protection, and accelerate implementation of the Partnership's protecting people improvement plan.
- Develop pathways of care and support for people who use alcohol and non-opioid drugs.
- Progress project to establish mental health hubs, including co-location of Partnership services.
- Expand malnutrition screening to targeted groups, including older people and with a cancer diagnosis.
- Deliver targeted Type 1 Diabetes Management services within adult services.
- Develop a programme of work to improve public information about services, supports and self-care resources.
- Develop and implement a programme of work to prevent and respond to race discrimination within Partnership workplaces and services.
- Develop and implement a programme of work to improve responses to transgender and non-binary people from Partnership services and supports.

Planning activity:

- Review and update the Mental Health and Wellbeing Strategy (2019-2024).
- Lead the development and implementation of a multi-agency Suicide Prevention Delivery Plan, as part of an integrated protecting people approach.
- Review and update Living Life Well and Living Life Your Way in Dundee (A Strategic Plan for Supporting Adults with a Learning Disability and Adults with a Learning Disability and Autism) (2022-2027)
- Progress the development of a physical disability and sensory impairment delivery plan for Dundee.

Strategic Priority - SELF-CARE



Self Care

Supporting people to look after their wellbeing.

Helping everyone in Dundee look after their health and wellbeing, including through **early intervention** and **prevention**.

What big changes are needed?

Over the next 10 years the IJB will invest its money and other resources to make these changes:

Short-term (2023-2026)	Medium-term (2026-2029)	Long-term (2029-2033)
People find self-care and self-management information and opportunities easier to find and understand.	More people are supported to achieve their personal outcomes through low level, early interventions provided by community-based care and support services.	More people feel motivated to make lifestyle choices that positively enhance their health and wellbeing.
There are more prevention, self-care and self-management resources available for: Fall; Stroke; Long-term conditions; End of life and bereavement; Managing key life changes; Healthy weight; and, Mental health and wellbeing.	More carers say that they want to and are able to continue in their caring role.	People are more physically active and mentally well.
More people, especially disadvantaged groups, are accessing a wider range of health, wellbeing and healthy lifestyle activities across the city.	More people are in drug, alcohol and mental health recovery.	A smaller number of people need hospital-based acute services; people who do need them less often.
People are being helped to connect with the service and supports that they need at an earlier stage through the use of a social prescribing approach by everyone in the health and social care workforce.	Fewer people experience side effects and deterioration of long-term conditions because they are better supported to comply with their medication.	Fewer people in Dundee have a limiting long-term physical or mental health condition.
More people are participating in adult health screening programmes, especially within areas of deprivation and groups with protected characteristics.		Everyone in Dundee is living longer (increased life expectancy and increased healthy life expectancy).
There are more opportunities for people with mental health challenges to look after their physical health and for people with chronic physical health conditions to improve their mental health.		People living in the most deprived communities are living longer (increased life expectancy and increased healthy life expectancy).
More Carers are accessing opportunities to lead a fulfilled and healthy life, and to have a good balance between caring and other things in their life.		
Peer recovery services and supports have a greater role in meeting people's needs at an early stage.		
The health and wellbeing needs of people who have been bereaved, including unpaid carers, are recognised and responded to. There are specific resources in place to support people who have been bereaved in traumatic circumstances (for example, by suicide).		

To deliver these strategic shifts Dundee Health and Social Care Partnership will:

CONTINUE TO PROGRESS AND SUPPORT THE FOLLOWING PROGRAMMES OF WORK....

Partnership led activity:

- [Mental Health and Wellbeing Strategy \(2019-2024\)](#)
- Falls Improvement Plan
- [Dundee GP Strategy \(2024-2029\)](#)
- Primary Care Improvement Plan
- [Tayside Primary Care Strategy \(2024-2029\)](#)
- [Primary Care Mental Health and Wellbeing Framework](#)
- [A Caring Dundee 2: A Strategic Plan for Working Alongside, and Improving the Lives of Carers in Dundee \(2021-2024\)](#)
- Palliative and End of Life Care Whole System Pathway of Care

Wider multi-agency activity:

- [Alcohol and Drug Partnership Delivery Plan](#)
- Trauma Informed Leadership and Practice Implementation Plan
- [Community Learning and Development Plan \(2024-2027\)](#)

HAVE A SPECIFIC FOCUS ON.....

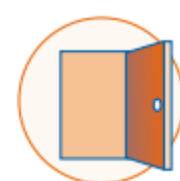
Transformation and improvement of services and supports:

- Further develop our wellbeing hub model, with a focus on preventative services and targeted investment to support disadvantaged communities.
- Develop a programme of work to improve public information about services, supports and self-care resources.
- Establish a Primary Care prevention project to engage people at higher risk of health inequalities around their health, to promote self-care and self-management, and clinical management where required.
- Progress further implementation of Learning Disability Health Checks.
- Further develop and implement weight management programmes of work.
- Expand malnutrition screening to targeted groups, including older people and with a cancer diagnosis.
- Support the mainstreaming of social prescribing approach and principles across community-based Partnership services.
- Further develop the role of Advanced Nurse Practitioners and other roles across relevant Partnership service.
- Review of Homeopathy Service.
- Progress the development of an approach to enhancing support for people with Long-Term Conditions.

Planning activity:

- Review Caring Dundee 2, including engagement with unpaid carers and the health and social care workforce.

Strategic Priority – OPEN DOOR



Open Door

Improving ways to access services and supports.

Making it easier for people to get the health and social care supports that they need.

What big changes are needed?

Over the next 10 years the IJB will invest its money and other resources to make these changes:

Short-term (2023-2026)	Medium-term (2026-2029)	Long-term (2029-2033)
People find information about health and social care services and supports easy to find and to understand.	Fewer people experience a sudden deterioration of long-terms conditions requiring crisis intervention, including hospital admission.	Care and support is easily accessible, flexible and available at the right time to respond to people's changing needs.
People connected quickly to the right type of support for them through a supported referral approach (rather than signposting). The use of a social prescribing approach by everyone in the health and social care workforce is helping to support this.	More people are supported to achieve their personal outcomes through low level, early interventions provided by community-based care and local support services.	Fewer people need help and support from formal health and social care services. More people get the help and support they need from the third sector (voluntary and community organisations).
People can access social care and social work assessment and support more easily through an joined-up Health and Social Care Partnership 'front door'.	More carers say that they want to and are able to continue in their caring role.	People experience integrated care and support that is smooth and seamless from their own, and their families and carers, point of view.
There is a quick and high-quality response to people who are experiencing distress and/or at risk of harm, including in the evenings and at weekends.	Services purchased from the third and independent sector are focused on supporting people to achieve their personal outcomes, rather than on hours of service delivered.	People accessing health and social care services experience a culture and practice that is rights-based.
More services and supports have options for digital access to services and services delivery. There are good alternatives in place for people who do not have digital access.	Joined up IT systems are supporting the workforce to share information quickly and easily.	
Assessments of need and support planning are person centred and focused on helping people to achieve their unique person outcomes.	People have easy and equitable access to primary care services delivered from General Practices or other locations local to them.	
Better information sharing between services means that people do not have to share the same information multiple times.		
Carers are identified, respected and involved. They are equal partners in planning and shaping services and supports.		
More people are accessing Self-Directed Support to support them to choose and access the services and supports that they need.		
People can get the community-based help and support that they need in the evenings, overnight and at weekends.		

To deliver these strategic shifts Dundee Health and Social Care Partnership will:

CONTINUE TO PROGRESS AND SUPPORT THE FOLLOWING PROGRAMMES OF WORK....

Partnership led activity:

- [Mental Health and Wellbeing Strategy \(2019-2024\)](#)
- [Tayside Mental Health and Wellbeing Whole System Change Programme](#)
- Re-design of Social Work and Social Care 'front door' and assessment to include the wider multi-disciplinary team
- [Dundee GP Strategy \(2024-2029\)](#)
- [GP Premises Strategy](#)
- Primary Care Improvement Plan
- [Primary Care Mental Health and Wellbeing Framework](#)
- [A Caring Dundee 2: A Strategic Plan for Working Alongside, and Improving the Lives of Carers in Dundee \(2021-2024\)](#)

Wider multi-agency activity:

- Adults at Risk Committee Delivery Plan, including the development of a multi-agency pathway for responding to adults at risk.
- [Alcohol and Drug Partnership Delivery Plan](#)
- Trauma Informed Leadership and Practice Implementation Plan
- [Community Learning and Development Plan \(2024-2027\)](#)

HAVE A SPECIFIC FOCUS ON.....

Transformation and improvement of services and supports:

- Further develop our wellbeing hub model, with a focus on preventative services and targeted investment to support disadvantaged communities.
- Develop a programme of work to improve public information about services, supports and self-care resources.
- Support the mainstreaming of social prescribing approach and principles across community-based Partnership services.
- Develop pathways of care and support for people who use alcohol and non-opioid drugs.
- Realign operational process to meet national Self-Directed Support Standards, including financial processes.
- Contribute to transformation of out-of-hours service provision on a Tayside wide basis.
- Develop and implement transition pathways, including between children's and adult services.
- Further develop our approach to Fair Work and commissioning for outcomes, in collaboration with the third and independent sectors.
- Develop and implement a programme of work to improve GP sustainability.

Planning activity:

- Review Caring Dundee 2, including engagement with unpaid carers and the health and social care workforce.
- Develop and publish a Dundee Health and Social Care Partnership Digital Strategy.
- Review and update the Partnership's Personalisation Delivery Plan and related governance and delivery arrangements.

Strategic Priority – PLANNING TOGETHER



Planning together

Planning services to meet local need.

Working with communities to design the health and social care supports that they need.

What big changes are needed?

Over the next 10 years the IJB will invest its money and other resources to make these changes:

Short-term (2023-2026)		
People and communities can find and understand information about health and social care needs and performance in the area they live in.	Fewer people are supported in residential care homes. Those who are receive highly personalised care and support.	Fewer people who require residential based care and support have to leave the Dundee area to receive this.
More people from local communities are involved in developing future plans for health and social care services. This includes, plans for specific service areas as well as the overall strategic plan for health and social care.	People are making the best possible use of the full range of primary care services. They are well supported to directly access the specific services that best meet their needs and don't have to be referred by their GP.	There is better co-ordination of people's housing options with available health and social care supports. This helps people to be able to stay in their home successfully.
More Carers say that they have positive experience of supports and services designed to support them and the person they care for.		People's homes provide the best possible environment to support their care and their overall health and wellbeing.
There are a wider range of community-based services to help meet the recovery needs of people with poor mental health or who use drugs and alcohol.		Communities are directly influencing how health and social care resources are invested through participatory budgeting.
People who are admitted to hospital are safely discharged without delay back to their home or another community setting.		
People are able to access the right community-based social care supports at the right time, delivered by joined-up multi-disciplinary teams. This is helping to reduce hospital admissions.		
People are supported through a Home First approach to access the services and supports that they need to support them to live well and independently in their own home.		
Older people are supported to live well and independently in the community by co-ordinated prehabilitation and rehabilitation services and supports.		
People who have experienced a stroke have access to high quality hospital-based care as well as community-based recovery supports.		
People are supported to experience a good death at the end of their life. Most people die at home and unpaid carers are well supported to be part of end of life care. Services enable timely, effective admissions to hospital where this is the best option for the people.		
	Medium-term (2026-2029)	
	More people with health conditions or disabilities get the care and support they need in their own home or in other places local to them.	
	People with a learning disability and autism get the help they need to live well, be part of their community and share their talents.	
	Significant harms linked to drug and alcohol use have been reduced by delivering the right care in the right place at the right time. This is also helping to improve people's quality of life.	
	People experience seamless transitions between community, primary and hospital-based services.	
	The third and independent sector have increased capacity to contribute to modern ways of delivering services and supports, alongside public sector health and social care services.	
	People have greater access to and control over their health and social care data, where appropriate and safe to do so.	
	The HSCP has access to the right balance of clinical and community base spaces from which to deliver services.	
	People who need support and unpaid carers experience services that are highly personalised to meet their unique needs and support them to achieve their individual personal outcomes.	
		Long-term (2029-2033)
		People receive the support they need, in the locations they want, at the time they need it.
		People say that they are firmly at the centre, understand the choices available to them and are supported to make informed decisions about their own care and support.
		A smaller number of people need hospital-based acute services; people who do need them less often. Resources have been reinvested in improving care at home or in community settings.
		Fewer people need help and support from formal health and social care services. More people get the help and support they need from the third sector (voluntary and community organisations).
		Health and social care services are provided in and from accessible, sustainable and fit-for-purpose, modern buildings.
		People, including unpaid carers, have a higher level of overall satisfaction with the health and social care services and supports they receive.

To deliver these strategic shifts Dundee Health and Social Care Partnership will:

CONTINUE TO PROGRESS AND SUPPORT THE FOLLOWING PROGRAMMES OF WORK....

Partnership led activity:

- [Mental Health and Wellbeing Strategy \(2019-2024\)](#)
- [Tayside Mental Health and Wellbeing Whole System Change Programme](#)
- [Dundee GP Strategy \(2024-2029\)](#)
- Primary Care Improvement Plan
- [Primary Care Mental Health and Wellbeing Framework](#)
- [Tayside Primary Care Strategy \(2024-2029\)](#)
- Unscheduled Care Board Improvement Programmes
- Community Nursing – Locality Working Programme
- Re-design of Social Work and Social Care ‘front door’ and assessment to include the wider multi-disciplinary team
- [A Caring Dundee 2: A Strategic Plan for Working Alongside, and Improving the Lives of Carers in Dundee \(2021-2024\)](#)
- Winter Plan – NHS Tayside and Partner Organisations 2024/25 and 2025/26
- [Dundee Health and Social Care Partnership Property Strategy](#)
- Allied Health Professional Stroke Plan

Wider multi-agency activity:

- Authentic Voice Project
- Dundee Volunteer and Voluntary Action Lived Experience Programme, including a focus on mental health and wellbeing and drugs and alcohol
- [Alcohol and Drug Partnership Delivery Plan](#)

HAVE A SPECIFIC FOCUS ON.....

Transformation and improvement of services and supports:

- Develop a programme of work to improve public information about services, supports and self-care resources.
- Implement Care Opinion across all Partnership services.
- Review the Partnership approach to Participatory Budgeting, including alignment to existing approaches used by Dundee City Council and NHS Tayside.
- Develop and implement Enhanced Community Care Model within Specialist Palliative Care Services.
- Review of Homeopathy Service.
- Develop and implement Neurodiversity pathways.

- Review of Learning Disability and Mental Health physical resources / environmental quality and of contracted services and supports.
- Develop pathways of care and support for people who use alcohol and non-opioid drugs.
- Review of Care at Home contracts to enhance outcomes through more efficient use of available resources and focus on preventative approaches.
- Develop and implement a programme of work to improve GP sustainability.
- Develop and implement transition pathways, including between children’s and adult services.
- Further develop the role of Advanced Nurse Practitioners and other roles across relevant Partnership service.
- Enhance input from Nutrition and Dietetics within prehabilitation pathways.
- Embed Dementia Strategy, including Post Diagnostic Support standards, across relevant Partnership services.
- Progress polypharmacy reviews and medicines optimisation within Medicine for the Elderly, including enhancing communication with general practice.
- Implement Unscheduled Care Board improvement programmes for Optimising Access and Optimising Flow.
- Realign operational process to meet national Self-Directed Support Standards, including financial processes.
- Review transport provision across Partnership services, the Partnership’s Practical Support Service and the Partnership’s Meals Service.
- Review of social care assessment and supports for people with complex health and social care needs and for people with very low-level needs to ensure modern approaches are embedded in long-term support packages.
- Review of day services and opportunities for older adults.
- Review models of care for physiotherapy and occupational therapy enhancing care across patient pathways and transitions between community and hospital care.
- Implement revised model of care at MacKinnon Centre to enhance accommodation and step-down services.
- Implement programme of work to further reduce care home placements, with a focus on use of Partnership operated care homes and supported accommodation for people with the most complex health and social care needs.
- Develop model of care for all mental health services, based on place-based and personalised approach.

Planning activity:

- Develop and publish a Dundee Health and Social Care Partnership Digital Strategy.
- Develop a Partnership Performance Framework and related reporting arrangements.
- Develop a Partnership framework to support a consistent approach to public engagement and involvement.
- Review Caring Dundee 2, including engagement with unpaid carers and the health and social care workforce.
- Review and update Living Life Well and Living Life Your Way in Dundee (A Strategic Plan for Supporting Adults with a Learning Disability and Adults with a Learning Disability and Autism) (2022-2027)
- Review and update the Partnership’s Personalisation Strategy and related governance and delivery arrangements.
- Re-establish the Frailty Strategic Planning Group.

Strategic Priority - WORKFORCE



Workforce

Valuing the workforce.

Supporting the health and social care workforce to keep well, learn and develop.

What big changes are needed?

Over the next 10 years the IJB will invest its money and other resources to make these changes:

Short-term (2023-2026)	Medium-term (2026-2029)	Long-term (2029-2033)
The workforce is benefiting from having a wider range of more easily accessible mental health and wellbeing supports available to them. This includes supports for bereaved staff members.	All providers who are contracted to deliver health and social care services are fully complying with Fair Work practices.	The health and social care workforce has the right number of staff, in the right place, doing the right things to meet the needs of people in Dundee.
Enhanced workforce wellbeing supports have helped to reduce overall levels of staff absence and turnover.	All health and social care services are delivered by a workforce working in fully integrated teams.	Health and social care services are provided from environments that ensure the wellbeing of the workforce.
There are clear local routes for the young workforce to enter a career in health and social care. More young people are accessing these.	Staff who are unpaid carers say they want to and are well supported by their employers to continue in their caring role.	The diversity of the health and social care workforce reflects the overall population of Dundee, particularly in terms of protected characteristics.
The IJB has a fuller understanding of health and social care workforce needs and has agreed a plan to address gaps and challenges. This plan is being implemented in practice.	Staff within the health and social care workforce have improved levels of confidence and competence with a range of relevant digital technologies.	The health and social care workforce has a more diverse range of ages, supporting more effective succession planning.
Recruitment and retention has improved in key areas, including Primary Care, Social Care, Mental Health and Drug and Alcohol services.	Staff are active participants in self-evaluation and quality assurance approaches that enable them to reflect, learn and plan for improvement.	
People working within the health and social care workforce have benefitted from opportunities to develop their leadership skills and confidence.	Staff working in health and social care services say they feel valued, well supported and would recommend their place of work.	
People working within the health and social care workforce receive clear and understandable information about the work of the IJB and Health and Social Care Partnership.		
People working within the health and social care workforce have better opportunities to influence the work of the IJB.		

To deliver these strategic shifts Dundee Health and Social Care Partnership will:

CONTINUE TO PROGRESS AND SUPPORT THE FOLLOWING PROGRAMMES OF WORK....

Partnership led activity:

- [Dundee Health and Social Care Partnership Workforce Plan](#) (2022-25)
- [NHS Tayside Workforce Plan \(2022-25\)](#)
- NHS Tayside Staff Wellbeing Framework
- [Dundee City Council People Strategy \(2022-27\)](#)
- [Dundee City Council Employee Health and Wellbeing Framework](#) (2023-27)
- [A Caring Dundee 2: A Strategic Plan for Working Alongside, and Improving the Lives of Carers in Dundee](#) (2021-2024)
- [IJB's Equality Outcomes](#)
- [Dundee GP Strategy \(2024-2029\)](#)
- [Dundee Health and Social Care Partnership Property Strategy](#)
- [Dundee City Council Digital Strategy](#) (2023-27)
- [NHS Tayside Digital Health and Social Care Strategy](#) (2022-27)

Wider multi-agency activity:

- Trauma Informed Leadership and Practice Implementation Plan

HAVE A SPECIFIC FOCUS ON.....

Transformation and improvement of services and supports:

- Implement the new NHS Tayside Staff Wellbeing Framework within Partnership services, including a joined-up approach with the existing Dundee City Council framework.
- Develop and implement a programme of work to prevent and respond to race discrimination within Partnership workplaces and services.
- Implement Partnership approach to vacancy management and use of supplementary staffing.
- Implement response to the Health and Social Care (Staffing) (Scotland) Act 2019 across relevant Partnership services.
- Review the availability and deployment of administrative and clerical resources across the Partnership.
- Develop and implement an action plan to stabilise the social work, including Mental Health Officer, workforce.
- Further develop the role of Advanced Nurse Practitioners, Advanced AHP roles and other roles across relevant Partnership service.
- Complete restructure of Partnership's Senior Leadership Team, Operational Services and Strategic Services.
- Develop and implement a programme of work to improve GP sustainability.
- Review and enhance approach to workforce communication within the Partnership.
- Strengthen the Staff Partnership Forum and related governance arrangements within the Partnership.

Planning activity:

- Review the Partnership's Workforce Plan, including engagement with the workforce.
- Continue to progress the development of an integrated workforce dataset for the Partnership.
- Review Caring Dundee 2, including engagement with unpaid carers and the health and social care workforce.
- Analyse absence and 'time-out' information for the Partnership workforce and develop a related action plan.
- Development of Partnership Resource Framework, including market facilitation approach.
- Develop and publish a Dundee Health and Social Care Partnership Digital Strategy.
- Review the Dundee Health and Social Care Partnership Property Strategy.

Strategic Priority - WORKING TOGETHER



Working together

Working together to support families.

Working with other organisations in Dundee to prevent poor health and wellbeing, create healthy environments, and support families, including **unpaid carers**.

What big changes are needed?

Over the next 10 years the IJB will invest its money and other resources to support work in partnership with other community planning partners that will make these changes:

Short-term (2023-2026)	Medium-term (2026-2029)	Long-term (2029-2033)
Families with multiple and complex needs receive co-ordinated, whole family support at an early stage.	Services have worked together to understand and manage the local impacts of the transition to the National Care Service.	All Carers are confident that they are listened to, valued and supported. They feel well and are able to live a life alongside caring.
Children and young people are supported into adulthood by services that work together to meet their needs.	The enduring impact of drug and alcohol use has been decreased through a focus on prevention.	Everyone in Dundee is living (increased life expectancy and increased healthy life expectancy).
People at risk of harm are effectively identified at an early stage and are effectively supported by services who work in partnership to help them be safe and well.	The enduring impact of poor mental health and wellbeing has been decreased through a focus on prevention.	People living in the most deprived communities are living longer (increased life expectancy and increased healthy life expectancy).
People are receiving the information and support they need to help them to cope with the cost of living crisis, including to help to stay safe and be well.	There are fewer drug and alcohol related deaths.	People are protected from harm and supported to recover from the impact of trauma.
People and communities affected by poverty are getting more targeted support at an earlier stage to prevent this leading to poor outcomes for health, social care and other aspects of their life.	There are fewer deaths by suicide.	People and communities are confident that their views and ideas are listened to, valued and used effectively across the whole community planning partnership to improve outcomes.
People are receiving the help they need to live a healthy lifestyle, including eating well and staying active. There is a specific focus on supporting children and young people.	The IJB and other organisations have better evidence about the impact their services and supports have on people's health and wellbeing outcomes.	More people are a healthy weight and regularly participate in physical activity.
There is a partnership approach to identifying and supporting unpaid carers of all ages. Services who support unpaid carers work closely with services who provide care and support.	Planning for improvements to health and social care outcomes is better co-ordinated across all members of the Dundee Partnership. There is a whole-system approach to improving health and wellbeing outcomes.	
Services work well together to collect, understand and use information about health and social care to improve services for people.		
Health and social care services in Dundee have actively contributed to the co-design process for the National Care Service.		
Communities experience a co-ordinated approach to gathering information about their needs and priorities for health and social care and related services.		

To deliver these strategic shifts Dundee Health and Social Care Partnership will:

CONTINUE TO PROGRESS AND SUPPORT THE FOLLOWING PROGRAMMES OF WORK....

Partnership led activity:

- [A Caring Dundee 2: A Strategic Plan for Working Alongside, and Improving the Lives of Carers in Dundee](#) (2021-2024)
- [Mental Health and Wellbeing Strategy \(2019-2024\)](#)
- [Primary Care Mental Health and Wellbeing Framework](#)
- Dundee Health and Social Care Partnership Protecting People Improvement Plan

Wider multi-agency activity:

- [Tayside Plan for Children, Young People and Families](#) (2023-26)
- Adults at Risk Committee Delivery Plan, including the development of a multi-agency pathway for responding to adults at risk.
- [Alcohol and Drug Partnership Delivery Plan](#)
- Children at Risk Committee Delivery Plan
- Trauma Informed Leadership and Practice Implementation Plan
- [The Dundee Partnership Promise to You, our Care Experienced Children and Young People](#)
- [City Plan for Dundee 2022-2032](#)
- [Community Learning and Development Plan](#) (2024-2027)
- [Fairness and Child Poverty Action Plan](#)
- Linlathen and Stobswell West Fairness Initiative Pathfinder
- Linlathen Employability Pathfinder
- [Dundee Climate Action Plan](#)
- Whole Family Wellbeing Fund
- [Tayside Child Healthy Weight Strategy](#) (2020-2030)

HAVE A SPECIFIC FOCUS ON.....

Transformation and improvement of services and supports:

- Develop and implement transition pathways between children's and adult services.
- Establish an operational leadership post of public protection, and accelerate implementation of the Partnership's protecting people improvement plan.
- Develop transformation programme around whole family approaches in partnership with Dundee City Council Children and Families Service.
- Develop a programme of work to improve public information about services, supports and self-care resources.
- Further develop and implement weight management programmes of work.
- Contribute to whole system approach to prevention of unhealthy weight.
- Implement Care Opinion across all Partnership services.

Planning activity:

- Enhance the planning interface between the Partnership and relevant children and families services in Dundee City Council and NHS Tayside.
- Lead the development and implementation of a multi-agency Suicide Prevention Delivery Plan, as part of an integrated protecting people approach.
- Review Caring Dundee 2, including engagement with unpaid carers and the health and social care workforce.
- Develop a Partnership approach to capturing evidence of the impact of services on outcomes for people.
- Develop a Partnership framework to support a consistent approach to public engagement and involvement.
- Develop and publish a Dundee Health and Social Care Partnership Digital Strategy.
- Engage in the legislative process for the National Care Service and develop local transition plans as needed.
- Develop a Net Zero Action Plan for the Partnership.

Making the Best Use off our Resources and Managing Strategic Risks

<i>In 204/25 the IJB has £301 million to spend on adult health and social care services.</i>	<i>Dundee Health and Social Care Partnership has 2,455 people working within it (employed by Dundee City Council and NHS Tayside).</i>	<i>Partnership services are delivered from over 90 different sites, including:</i> <ul style="list-style-type: none"><i>• 22 General Practices</i><i>• 4 Hospitals</i><i>• 4 Care Homes</i><i>• 4 Day Centres</i><i>• 1 Palliative Care Unit</i><i>• 2 Respite Units</i>
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As well as support the achievement of the strategic priorities and changes within the IJB’s Plan for Excellence, the Health and Social Care Partnership has a responsibility to ensure that services and supports are delivered in the most effective and efficient way possible, and within the budget that is set by the IJB. During the next 18 months the Partnership has identified a small number of actions that will make the most significant contribution to ensuring that the Partnership continue to make the best use of the resources available to them and manages strategic risks that have been identified by the IJB:

- Improve the quality and availability of data regarding health and social care services to support more effective performance management and improvement.
- Develop and implement a Partnership Performance Framework including quality assurance mechanisms and clear reporting mechanisms linked to improvement planning.
- Identify and respond to risks associated with ongoing pay and terms and condition negotiations within NHS and local government, as well as the third and independent sector.
- Review and implement a consistent approach to business continuity and resilience planning across the Partnership, including providing relevant workforce learning and development opportunities.
- Continue to collaborate with Dundee City Council and NHS Tayside to streamline governance arrangements and reduce duplication across organisational interfaces.
- Enhance Senior Leadership Team overview of service performance to inform decisions about prioritisation of budget resources and financial recovery.
- Review the Partnership’s approach to income recovery and service user billing, including exploring the potential role of an end-to-end financial processes team.
- Review the Partnership’s arrangements for strategic planning, delivery planning and service / team planning.