



Meeting of East Renfrewshire Health and Social Care Partnership	Performance and Audit Committee
Held on	25 June 2025
Agenda Item	10
Title	HSCP Annual Delivery Plan 2025-26
Summary <p>The purpose of this report is to seek approval of the HSCP Annual Delivery Plan. The Plan sets out key activities to support the delivery of the new HSCP Strategic Plan 2025-28. The plan assigns lead officer responsibilities and lists the key performance indicators that will be used to measure progress towards delivery of the outcomes established in our Strategic Plan.</p>	
Presented by	Steven Reid, Policy, Planning and Performance Manager
Action Required <p>The Performance and Audit Committee is asked to:</p> <ul style="list-style-type: none"> • note and comment on the activities and performance measures given in the plan; and • approve the Annual Delivery Plan for 2025-26. 	

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EAST RENFREWSHIRE PERFORMANCE AND AUDIT COMMITTEE

25 June 2025

Report by Chief Officer

EAST RENFREWSHIRE HSCP ANNUAL DELIVERY PLAN 2025-26

PURPOSE OF REPORT

1. The purpose of this report is to seek approval of the HSCP Annual Delivery Plan. The Plan sets out key activities to support the delivery of the new HSCP Strategic Plan 2025-28.

RECOMMENDATION

2. The Performance and Audit Committee is asked to:
 - note and comment on the activities and performance measures given in the plan; and
 - agree the Annual Delivery Plan for 2025-26.

BACKGROUND

3. The Public Bodies (Joint Working) (Scotland) Act 2014 places a duty on integration authorities to create a strategic plan for the integrated functions that they control. Integration authorities are required to review their strategic plan at least every three years, and may carry out additional reviews from time to time. In carrying out a review of the strategic plan, integration authorities must consider:
 - the national health and wellbeing outcomes;
 - the integration delivery principles;
 - the views of the Strategic Planning Group.
4. There should be a clear recording and measurement framework so that there is an ongoing process to assess whether aims are being achieved.
5. We have developed a comprehensive new Strategic Plan for 2025/26 to 2027/28. The plan is due to receive final approval at the IJB on 25 June 2025.
6. To support the operational delivery of our new strategy, we have developed the Annual Delivery Plan with the support of service managers, planning leads and third sector partners. The process has been overseen by the East Renfrewshire Strategic Planning Group (SPG) who have responsibility for directing the development and implementation of the Strategic Plan.
7. The activities and performance measures set out in the Annual Delivery Plan are the basis for future performance reporting.

REPORT

8. The HSCP Strategic Plan 2025-28 builds on our existing vision and priorities established in previous strategic planning. The plan sets out key areas of focus for the HSCP in the years ahead and emphasises the broad partnership approach we are taking with third and independent sectors partners and our communities to meet the full range of needs in East Renfrewshire. It illustrates how the HSCP will contribute to the priorities and objectives set out in East Renfrewshire's community planning vision *A Place to Grow* and NHS Greater Glasgow and Clyde's clinical strategy *Moving Forward Together* (MFT).
9. The three strategic outcomes established in the Strategic Plan are:
 - **People are enabled to live healthy and fulfilling lives;**
 - **Our communities are resilient and there are better opportunities for health and wellbeing;**
 - **People are safe and protected.**
10. The delivery plan is structured around these three strategic outcomes. The plan sets out key areas for service focus (and leads for each area, to be represented at the Strategic Planning Group). It sets out the priority outcomes to be delivered over the life of the Strategic Plan, and the key activities that will support these. For each service area, the plan gives a full list of performance indicators to be monitored over the next three years.
11. The updated set of performance indicators have been developed in collaboration with service managers and staff, and planning leads at the HSCP. Many of the indicators are continuing from our previous plans and are regularly reported to the Performance and Audit Committee. Some indicators have been reported elsewhere and are now being introduced to our strategic performance reporting. A small number of indicators remain in development and we will be working to confirm recording procedures and baseline data for this during 2025/26.
12. Implementation of the plan will be overseen by the SPG, with regular updates to SPG meeting from planning leads for each area of focus. Reporting for our performance indicators (along with exception reports for areas of specific interest) will continue to be presented to the Performance and Audit Committee every quarter.
13. The activities set out in the delivery plan will be reviewed annually, ahead of each financial year and presented for approval to the Performance and Audit Committee.

CONCLUSION

14. The new Annual Delivery Plan reflects the high-level aims and ambitions for the HSCP and outlines the activities we will take as a wider partnership to meet the health and care needs of people in East Renfrewshire. The performance measure will allow for robust monitoring of our performance as we take forward delivery of the Strategic Plan.

RECOMMENDATION

15. The Performance and Audit Committee is asked to:
 - note and comment on the activities and performance measures given in the plan; and
 - agree the Annual Delivery Plan for 2025-26.

REPORT AUTHOR AND PERSON TO CONTACT

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June 2025

Chief Officer, IJB: Alexis Chappell

BACKGROUND PAPERS

East Renfrewshire HSCP Strategic Plan 2025-28, IJB Paper, 26 March 2025
https://www.eastrenfrewshire.gov.uk/media/11275/IJB-Item-9-26-March-2025/pdf/IJB_Item_9_-_26_March_2025.pdf?m=1741958662233

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East Renfrewshire HSCP Strategic Partnership Plan

Annual Delivery Plan 2025



HSCP Strategic Plan 2025-28 on a page

<div>Drivers and influencers</div> <div><ul style="list-style-type: none">HSCP Vision and ValuesNational, regional and local policyJoint Strategic Needs AssessmentPartnership, stakeholder, service user and public views and prioritiesPerformance data, benchmarking and best practice</div> <div></div>	<div>Challenges and pressures</div> <div><ul style="list-style-type: none">Population and demographic change, particularly children and older peopleFinancial constraints / budgetary pressuresIncreasing volume and complexity of presenting needsPressure on acute hospital in-patient servicesIncreasing pressure on our unpaid carersIncreasing mental health and wellbeing concernsEnsuring choice and controlAchieving the appropriate balance of careAddressing health inequalitiesEnsuring public protectionRevised National Care Service (NCS)Sustaining and supporting our workforce</div> <div></div>	
<div>Our approach</div> <div>Focusing resources where most needed • Working in partnership with communities and 3rd and independent sector partners • Supporting self-management and digital approaches • Collaboration and shared learning on improvement/best practice • Person-centred/trauma-informed practice</div>		
<div>Our strategic outcomes and areas of focus</div>		
<div>People are enabled to live healthy and fulfilling lives</div> <div><ul style="list-style-type: none">Supporting children, young people and their families to improve mental and emotional wellbeingSupporting people to maintain their independence at home and in their local communitySupporting better mental health and wellbeing and reducing harm from alcohol and drugsSupporting people who care for someone, ensuring they are able to exercise choice and controlSupporting staff across the partnership to strengthen resilience and wellbeing</div>	<div>Our communities are resilient and there are better opportunities for health & wellbeing</div> <div><ul style="list-style-type: none">Strengthening links with communities and 3rd sector supportsSupporting individuals and communities to tackle health inequalities and improve life chancesSupporting people's healthcare needs by providing support in the right way, by the right person at the right timeSupporting effective community justice pathways that support people to stop offending and rebuild lives</div>	<div>People are safe and protected</div> <div><ul style="list-style-type: none">Protecting people from harmAddressing violence against womenHealth protection</div>
<div>Enablers for change</div> <div>Service review and redesign • Our workforce • Local people and communities • Local Partners • Our Financial Plan • Data and intelligence • Digital technology • Equalities Outcome Plan • Commissioning Plan • Housing Contribution Statement</div>		

HSCP Strategic Plan 2025-26 – Annual Delivery Plan

Strategic outcome 1: People are enabled to live healthy and fulfilling lives				
Delivery area: Supporting children, young people and their families to improve mental and emotional wellbeing				
Leads for priority: Jen McKean / Arlene Cassidy				
Priority outcome	Key activity	Timescale	Lead responsibility	Performance measures
Our most vulnerable children, young people and families are protected	Signs of Safety approach to keeping children safe rolled out across the local children's services partnership.	April 26	Jen McKean / Arlene Cassidy	% of children with child protection plans assessed as having an increase in their level of safety
	Local partners will collaborate with young people to design and deliver diversionary programmes and opportunities that promote inclusion, responsibility, and improve wellbeing.	April 26	Jen McKean / Arlene Cassidy	
	Recovery and mental health services for 16-26 year olds are evaluated to determine options for the best model of delivery for this age group in transition to adulthood.	April 26	Jen McKean / Arlene Cassidy	
Children and young people with complex needs are supported to overcome barriers to inclusion at home, school, and communities	Improve access to inclusive opportunities information to ensure children and their families are aware of what services, programmes, and activities are available to them locally.	April 26	Jen McKean / Arlene Cassidy	% Looked After Children with more than one placement within the last year (Aug-Jul).
	Arrangements for young people with complex needs to achieve and sustain a positive transition into young adulthood will be strengthened to ensure the experience is improved and the outcome in line with young people and families expectations.	April 26	Jen McKean / Arlene Cassidy	% of children looked after away from home who experience 3 or more placement moves
Our Corporate Parenting responsibilities to our looked after and care experienced children and young people are delivered by fully implementing The Promise	Create settled, secure, nurturing and permanent places to live within a family setting for all care experienced children and young people in line with expectations from The Promise Good Childhood.	April 26	Jen McKean / Arlene Cassidy	% Child Protection Re-Registrations within 18 months
	Support young people to remain in a positive care placement until they are ready to move on and/or good quality accommodation with options to support their needs.	April 26	Jen McKean / Arlene Cassidy	Balance of Care for looked after children: % of children being looked after in the Community
	Unaccompanied asylum seeking children and young people are supported by all Corporate Parents to integrate into local communities and access the care and support they need.	April 26	Jen McKean / Arlene Cassidy	Children accessing Healthier Minds Service reporting improvements in their mental wellbeing

We respond to the mental and emotional wellbeing, and physical health needs of children and young people	Improve access to and awareness of the range of mental health supports available, to increase uptake and improve wellbeing.	April 26	Jen McKean / Frankie Robertson	% of individuals on the HV/FNP caseload where an initial GIRFEC assessment to allocate a core or additional health plan indicator has been complete within 56 days of birth. % children and young people offered an assessment of their health and wellbeing needs within 28 days of the referral being received
	Promote the Healthier Minds Resource website for children, families and partner agencies to increase knowledge and skills, and enhance support strategies.	April 26	Frankie Robertson	
	Collaborative work with partner agencies to focus on addressing speech, language and communication concerns in order to decrease the number.	April 26	Morag Ferguson	

Strategic outcome 1: People are enabled to live healthy and fulfilling lives				
Delivery area: Supporting people to maintain their independence at home and in their local community				
Leads for priority: Craig Menzies / Ruth Gallagher				
Priority outcome	Key activity	Timescale	Lead responsibility	Performance measures
People are better able to find good information and access a range of activities and supports	Promote the range of local opportunities and supports available through visible points of access including the Community Hub, Talking Points and SDS Forum.	April 26	Craig Menzies	Number of people engaged through Talking Points events and support
	Promote better collaboration and knowledge between staff and organisations through local networks.	April 26	Craig Menzies / Ruth Gallagher	Referrals to preventative support through Talking Point engagement
	Support various link worker approaches, e.g. through GP practices, supporting dementia, Improving the Cancel Journey (ICJ).	April 26	Craig Menzies	
Individuals and families are better able to self-manage health and wellbeing, and long-term conditions	Expand and promote the uptake of digital solutions for health management and better health and wellbeing – through development of options and wider awareness.	April 26	Lee McLaughlin	No. telecare referrals/digital options
	Promote better 'future proofing' such as Future Care Planning, early establishment of Power of Attorney.	April 26	Lynne Siddiqui	Positive outcomes for individuals supported

The people we work with have choice and control over their lives and the support they receive	People with dementia and their families are better supported through the delivery of the East Renfrewshire Dementia Action Plan.	<i>April 26</i>	<i>Craig Menzies</i>	through link worker interventions
	There is a sustained focus on promoting positive health behaviours.	<i>April 26</i>	<i>Gillian Phillips</i>	% people referred for dementia care support
	Patients prescribed medicines are supported to manage their medicines appropriately.	<i>April 26</i>	<i>Susan Galbraith</i>	% of people whose care need has reduced following reablement / rehabilitation
	Ensure that the principles and opportunities of Self-directed Support continue to be promoted	<i>April 26</i>	<i>Noleen McCormick</i>	
	As a partnership, establish greater choice and innovation by developing the range of local opportunities and types of support	<i>April 26</i>	<i>Ruth Gallagher / Margaret Phelps</i>	Number of people self-directing their care through receiving direct payments and other forms of self-directed support.
	Work with housing providers to ensure housing needs are met and consider future housing opportunities	<i>April 26</i>	<i>Margaret Phelps / Siobhan Ferrie</i>	Direct payments spend on adults 18+ as a % of total social work spend on adults 18+
	Work in partnership to support the delivery of the Local Housing Strategy (LHS), particularly activities under the priority "Homes that Meet a Lifetime of Needs, Supporting Residents to Live Independently".	<i>April 26</i>	<i>Margaret Phelps / Siobhan Ferrie / Steven Reid</i>	Percentage of people reporting 'living where you want to live' needs fully met. (Talking Points PI) % of people aged 65+ with intensive needs receiving care at home Percentage of people aged 65+ who live in housing rather than a care home or hospital

Strategic outcome 1: People are enabled to live healthy and fulfilling lives				
Delivery area: Supporting better mental health and wellbeing and reducing harm from alcohol and drugs				
Leads for priority: Tom Kelly / Tracy Butler / 3rd sector rep				
Priority outcome	Key activity	Timescale	Lead responsibility	Performance measures
People are supported to self-manage their mental health and can access a range of supports on their journey to recovery from mental ill health and alcohol and drug harms	Support people to self-manage the impact that mental ill health has on their life.	<i>April 26</i>	<i>Sheena Smith / Tracy Butler / Claire Blair</i>	% of people waiting no longer than 18 weeks for access to psychological therapies Mental health hospital admissions (standardised rate per 1,000 population)
	Enhance access to mental health and recovery services	<i>April 26</i>		
	Ensure people with complex mental health conditions and substance use harms are fully involved in the design and delivery of their own care plans.	<i>April 26</i>		
The risks and harms caused by alcohol and drugs are reduced for people, their families and wider communities	Develop the provision of peer support within services	<i>April 26</i>	<i>Tom Kelly / Sheena Smith</i>	% of people waiting no longer than three weeks from referral to alcohol / drug treatment % of service users on caseload moving from treatment to recovery service (<i>n.b. new reporting method for this PI</i>)
	Grow the recovery community, including the design and implementation of a recovery hub.	<i>April 26</i>		
	Ensure whole family support and recovery by working jointly across Alcohol and Drugs Recovery Service, children and families social work and third sector partners.	<i>April 26</i>		
	Continuing to deliver rapid access to alcohol and drugs services and enhance the assertive outreach approach for people at high risk of harm.	<i>April 26</i>		
Wellbeing is enhanced through a strong partnership approach to prevention and early intervention	Work with our communities to promote positive mental health and wellbeing.	<i>April 26</i>	<i>Tracy Butler / Claire Blair</i>	Alcohol brief interventions delivered
	Support and promote mental health and wellbeing initiatives delivered through third sector and community-led activity.	<i>April 26</i>	<i>Ruth Gallagher / Gillian Phillips</i>	
Staff and volunteers have the skills, knowledge and resilience to support individuals and communities	Maximise opportunities for skills development in relation to mental health, recovery and suicide awareness and prevention across services and the wider partnership.	<i>April 26</i>	<i>Tom Kelly / Sheena Smith / Claire Blair</i>	Alcohol-related hospital admissions
	Ensure effective and efficient frontline staffing and service design across mental health and recovery to ensure fast, appropriate access to treatment.	<i>April 26</i>		

Create a Suicide Safe East Renfrewshire, free of stigma through awareness raising, education and community based partnership working.	Deliver the commitments in the East Renfrewshire Suicide Prevention Strategy and Action Plan 2024 – 2027, focusing on the priority areas: Establish Local Suicide Prevention Network; Education / Training; Communications; Community Development / Lived Experience; Data Collection / Analysis	<i>April 26</i>	<i>Claire Blair</i>	MAT standards RAG status Positive outcomes for individuals receiving peer support
Mental health supports and services are accessible and inclusive of the needs of people with relevant protected characteristics (Equality outcome)	Identify potential gaps in mental health and wellbeing interventions relevant to particular protected characteristics	<i>April 26 ongoing</i>	<i>Sheena Smith / Claire Blair</i>	Suicide prevention measures
	Increase visibility and promotion of mental health and wellbeing supports within particular equality groups through grassroots engagement	<i>April 26 ongoing</i>	<i>Ruth Gallagher / Gillian Phillips</i>	Staff who have completed appropriate modules in trauma skills, safety and stabilization ADRS
	Ensure there is appropriate focus on groups with protected characteristics in mental health and trauma awareness training.	<i>April 26 ongoing</i>	<i>Tom Kelly / Sheena Smith / Claire Blair</i>	

Strategic outcome 1: People are enabled to live healthy and fulfilling lives				
Delivery area: Supporting people who care for someone, ensuring they are able to exercise choice and control				
Leads for priority: Mark Mulhern / Lorraine Nelson				
Priority outcome	Key activity	Timescale	Lead responsibility	Performance measures
Carers are identified at the earliest opportunity and are offered support in their own right.	Identify carers at an earlier stage in their caring role.	<i>April 26</i>	<i>Mark Mulhern / Lorraine Nelson</i>	Percentage of carers who feel supported to continue in their caring role. (NI8)
	Increase awareness of carers, their rights and the impact of caring.	<i>April 26</i>		
Carers can easily access the advice, information and support they need at the time they need it.	Ensure people caring for someone living in East Renfrewshire know where to go to find up to date advice, information and the right support.	<i>April 26</i>	<i>Mark Mulhern / Lorraine Nelson</i>	Carers supported to continue in their caring role (ACSP recording – engaged through Carers Centre/HSCP)
Improve the process and uptake of Adult Carer Support Plans	Support carers to identify and achieve the outcomes that matter to them (through the promotion of adult carers support plans).	<i>April 26</i>	<i>Mark Mulhern / Lorraine Nelson</i>	
Carers get a break from and are able to maintain their own health and wellbeing	Increase awareness of the different options available to carers for short breaks and promote opportunities to increase these options.	<i>April 26</i>	<i>Mark Mulhern / Lorraine Nelson</i>	

We will work with partners to mitigate any negative impact caring has on carers' finances.	Work with partners to ensure supports are available to carers to minimise the impact of financial hardship as a result of caring and rising living costs.	April 26	Mark Mulhern / Lorraine Nelson	People reporting 'quality of life for carers' needs fully met (%) (Talking Points PI)
Unpaid carers are recognised and valued as equal partners in care and involved in decision making relating to their caring role.	Involve carers as equal and valued partners in planning support and in the planning of services that affect them or the person they care for.	April 26	Mark Mulhern / Lorraine Nelson	Number of Adult Carer Support Plans – interim and full (ACSP)
Staff who are carers are supported in the workplace	Deliver Carers Strategy actions including peer support sessions, awareness raising, promotion of flexible work and carer leave policies.	April 26	Mark Mulhern / Lorraine Nelson	% of carers accessing support for short breaks (baseline to be established 25/26)
The needs of unpaid carers with protected characteristics are understood and support is accessible and person-centred (Equality outcome)	Improve local data collection in relation to caring responsibilities and the protected characteristics	April 26	Mark Mulhern / Lorraine Nelson	Uptake of supports/services by people with specific protected characteristics (equalities monitoring) Participation in Carers Centre information and awareness sessions
	Deliver programme of awareness raising and information sessions - gender, disability, ethnicity and sexual orientation.	April 26		
	Development of support to ethnic minority carers	April 26 ongoing		
	Ensure Adult Carer Support Plan (ACSP) process reflects needs of carers with protected characteristics	April 26		

Strategic outcome 1: People are enabled to live healthy and fulfilling lives				
Delivery area: Supporting staff across the partnership to strengthen resilience and wellbeing				
Leads for priority: Louise Brown / Julie Tomlinson				
Priority outcome	Key activity	Timescale	Lead responsibility	Performance measures
Staff have access to resources and information that can improve their wellbeing	Ensure that all staff have access to universal information with regard to health and wellbeing across the partnership's services.	April 26	Louise Brown / Julie Tomlinson	iMatter feedback from staff, including: "My manager cares about my health and well-being"
Staff feel connected to their team or service and we embed a health and wellbeing culture across the partnership	Develop leadership competencies across management in order to focus on resilience across the partnership.	April 26	Louise Brown/ Catriona Reid	"I am given the time and resources to support my learning growth"
	Ensure regular wellbeing conversations with staff and teams.	April 26		

Opportunities are promoted for staff to take part in physical activity, rest and relaxation	Promote relaxation and physical activity opportunities across the partnership	April 26	Claire Blair	"I feel involved in decisions in relation to my job" No. of HWB bulletins Activities offered to staff
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Strategic outcome 2: Our communities are resilient and there are better opportunities for health & wellbeing				
Delivery area: Strengthening links with communities and 3rd sector supports				
Leads for priority: Ruth Gallagher / Craig Menzies				
Priority outcome	Key activity	Timescale	Lead responsibility	Performance measures
Gaps in community resources for health and wellbeing are identified and addressed	Partners work together to map and understand local support and identify gaps.	April 26	Ruth Gallagher / Craig Menzies	Number of people engaged through Talking Points events and support
	Community-based groups are supported to strengthen their response to address identified gaps in support.	April 26	Ruth Gallagher / Craig Menzies	Number of organisations supported to access funding opportunities via Vol Action
	Work in partnership to build the capacity of community organisations, groups and individuals to deliver their own solutions.	April 26		
Residents are clear on the role of the HSCP, statutory providers and the support available from third/community sector organisations	The partnership communicates its holistic, 'tiered' approach to help people find support that is appropriate to different levels of need.	April 26	Ruth Gallagher / Craig Menzies	% Residents engaged in volunteering & community groups (GGC NHS survey)
We are a genuinely 'listening' partnership with ongoing, transparent engagement.	Continue to develop the scope and activities of our Participation and Engagement Network (PEN), involving more views from people with lived experience.	April 26	Craig Menzies	Proportion aged 65+ belonging to Social Clubs, Associations, Church Groups or Similar (GGC NHS Survey)
	Introduction of organisation wide 'planning with people' guidance, which will ensure appropriate governance around engagement activity	April 26		
There is equitable access to information and meaningful participation for all (Equality outcome)	Take a more pro-active and consistent approach to engagement aligned to decision-making	April 26 ongoing	Craig Menzies	'I feel supported to get involved in public life' rating (Citizens Panel)
	Enhance inclusive and accessible communications, taking steps to meet specific needs	April 26 ongoing		

	Increase employee awareness of the needs of different minority groups through training, community engagement and a robust equality impact assessment process.	<i>April 26 ongoing</i>		Rating of communication with ERC/HSCP (Citizens Panel)
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Strategic outcome 2: Our communities are resilient and there are better opportunities for health & wellbeing				
Delivery area: Supporting individuals and communities to tackle health inequalities and improve life chances				
Leads for priority: Gillian Phillips / Julie Breslin				
Priority outcome	Key activity	Timescale	Lead responsibility	Performance measures
Health inequalities will be reduced by working with communities and through co-produced targeted interventions	Deliver tailored health improvement programmes and activities in communities with greater health inequalities.	<i>April 26</i>	<i>Gillian Phillips</i>	NI-1: Percentage of adults able to look after their health very well or quite well
	Work to ensure people in our most disadvantaged community are able to access digital opportunities that support independence and wellbeing.	<i>April 26</i>	<i>Gillian Phillips / Julie Breslin</i>	
	Continue to support local activity to tackle Child Poverty and mitigate its effects.	<i>April 26</i>	<i>Gillian Phillips / Julie Breslin</i>	NI-11: Premature mortality rate per 100,000 persons Male life expectancy at birth in 20% most deprived communities
	Develop and support infant feeding groups across East Renfrewshire in collaboration with partner agencies.	<i>April 26</i>	<i>Morag Ferguson</i>	
Activity to address health inequalities is informed by data, intelligence and the experiences of our communities	We use Health and Wellbeing Survey data to direct our targeted work in local neighbourhoods to address health inequalities.	<i>April 26</i>	<i>Gillian Phillips</i>	Female life expectancy at birth in 20% most deprived communities
	Community involvement in service development is sustained (through approaches like Recovery Hub).	<i>April 26</i>	<i>Craig Menzies</i>	
	The needs of individuals and groups are identified early – before crisis.	<i>April 26</i>	<i>Gillian Phillips</i>	
People understand their own responsibility for health and wellbeing.	There is a sustained focus on encouraging positive health behaviours (reflecting the national public health priorities).	<i>April 26</i>	<i>Gillian Phillips</i>	Breastfeeding at 6-8 weeks in 20% most deprived SIMD data zones.
	Promote information that raises awareness of self-management and self-care.	<i>April 26</i>		% of 65+ who meet the Target of 150 Minutes of Exercise Per Week (GGCNHS Survey)

				<p>Healthy weight - % of P1 children at risk of overweight and obesity</p> <p>Smoking cessation –No of smoking quits in the 40% most deprived SIMD areas at 12 weeks</p> <p>Breast cancer screening - % uptake of eligible women (aged 50 -70)</p> <p>Bowel cancer screening - % uptake in SIMD 1 & 2 areas</p> <p>Cervical cancer screening - % uptake of cervical screening programme</p>
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Strategic outcome 2: Our communities are resilient and there are better opportunities for health & wellbeing				
Delivery area: Supporting people's healthcare needs by providing support in the right way, by the right person at the right time				
Leads for priority: Lynne Siddiqui / Claire Fisher				
Priority outcome	Key activity	Timescale	Lead responsibility	Performance measures for development and closer alignment to outcomes/activities
Early intervention and prevention of admission to hospital to better support people in the community	Continue to develop our community pathways to reduce patient conveyance to Emergency Department (ED) and manage individuals within the community; when appropriate	April 26	Lynne Siddiqui	No. of A & E Attendances
	Develop pathways for individuals diagnosed and living with long-term conditions to improve self-management and support them within the community	April 26		<p>Number of Emergency Admissions</p> <p>A & E Attendances from Care Homes</p>

	Focused MDT support across care homes to optimise the health of residents and support individuals to be maintained within the home environment and avoid emergency/ acute attendance where possible	April 26		Emergency Admissions from Care Homes
	Optimise the use of community beds for proactive assessment, reablement and rehabilitation	April 26		Occupied Bed Days (Adult – non-elective)
	Further develop and deliver a person-centred approach to Future Care Planning	April 26		People waiting more than 3 days to be discharged from hospital
	Polypharmacy Medication Reviews by pharmacists to ensure prescribed medicines are taken safely and are effective.	April 26	Susan Galbraith	
Improved hospital discharge and better support for people to transfer from acute care to community supports	Collaborative working including multi-disciplinary team (MDT) weekly huddle with hospitals to support discharge planning for all East Renfrewshire inpatients	April 26	Lynne Siddiqui	Bed days lost to delayed discharge
	Hospital to Home Social Work in-reach across to all acute sites for complex cases to support early discharge	April 26		% of last six months of life spent in community setting
	Daily reporting, monitoring and review of delays	April 26		Number of clients supported into intermediate care
	Bonnyton unit available for interim care although Home First approach with community rehabilitation/ reablement input preferred pathway where appropriate.	April 26		
	Medication Support Service to support patients with medicines compliance issues and medicines changes on hospital discharge	April 26	Susan Galbraith	
	Pharmacy Service undertakes medicines reconciliation after hospital discharge.	April 26		
	Pharmacy Service processes medicine requests on clinic letters.	April 26		
Resources are utilised optimally and waste is minimised, ensuring best value is achieved.	HSCP-managed Pharmacy service promotes safe, effective and cost-effective prescribing. Realistic medicines principles are applied.	April 26	Susan Galbraith	Number of polypharmacy reviews completed
	Pharmacy support and training provided to social care services, such as care homes and Care at Home, to ensure medicines are managed safely and efficiently in these settings.	April 26		
	Support provided in GP practices when medicine shortages occur, products are discontinued, and when there are product recalls.	April 26	Susan Galbraith	

	Pro-active polypharmacy reviews are offered for patients living with frailty and on multiple medicines to ensure optimal treatment and reduced risk of harms caused by medicines.	April 26	Susan Galbraith	
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Strategic outcome 2: Our communities are resilient and there are better opportunities for health & wellbeing				
Delivery area: Supporting effective community justice pathways that support people to stop offending and rebuild lives				
Leads for priority: Craig Stevenson / Janice Thompson				
Priority outcome	Key activity	Timescale	Lead responsibility	Performance measures
Optimise the use of diversion and intervention at the earliest opportunity	Use appropriate risk assessment tools to identify need and reduce the risk of further offending.	April 26	Craig Stevenson	% of people reporting community payback order helped to reduce their offending
	Deliver accredited programmes aimed at reducing reoffending	April 26		
Ensure that robust and high quality community interventions and public protection arrangements are available	Deliver multi-agency public protection arrangements with police, health and prisons which assess and manage sex offenders, serious and violent offenders	April 26	Craig Stevenson	% of people completing unpaid work requirements % of unpaid work placements commencing within 7 days where no delay has occurred in receiving Order
	Enhance skills and knowledge in trauma informed practice across justice services	April 26		
	Increase effective use of structured deferred sentence, bail supervision electronic monitoring	April 26		
Ensure that services are accessible and available to address the needs of individuals accused or convicted of an offence	Deliver a whole systems approach to diverting both young people and women from custody	April 26	Craig Stevenson	% of unpaid work placement completions within Court timescale. Positive employability and volunteering outcomes for people with convictions
	Ensure people subject to statutory and voluntary supervision including licence have early access to community mental health, alcohol and drug recovery services	April 26		
	Working with local partners to ensure a range of beneficial unpaid work placements are taken up	April 26		
	Actively participate in the East Renfrewshire Employability Partnership to develop pathway and employability support	April 26		

Strategic outcome 3: People are safe and protected				
Leads for priority: Raymond Prior / Robert Price / Janice Thomson				
Priority outcome	Key activity	Timescale	Lead responsibility	Performance measures
Individuals and their carers are active participants in shaping their support and the way in which Adult Support and Protection (ASP) activity is undertaken in East Renfrewshire.	We will ensure that the views of adults at risk, their families and carers are heard and help shape the way we deliver services.	April 26	Raymond Prior / Robert Price	<p>People agreed to be at risk of harm and requiring a protection plan have one in place</p> <p>% people supported where advocacy has been considered</p> <p>Number of HSCP staff supported with ASP training and awareness sessions</p> <p>% people feeling safer following ASP support (reporting on new client system to be developed 25/26)</p> <p>Achievement of ASP prescribed timescales (improved reporting on new client system to be developed 25/26)</p>
	We will ensure that adults are offered independent advocacy at the earliest opportunity, in the way that is most appropriate for them.	April 26		
	We will make best use of all our opportunities for the prevention and identification of harm	April 26		
	We will continue to strengthen the way in which we work together and share responsibility with our partners, providers and the third sector in order to provide consistency and continuity to adults at risk of harm	April 26		
	We will continue to develop awareness of ASP with our partners, providers and the public.	April 26		
	We will work with HSCP staff, partner agencies, providers and adults at risk to identify and address stumbling blocks (barriers) that impact on how we move forward in a collaborative fashion.	April 26		
	We will ensure that adult's strengths, assets and trauma contribute to our understanding of risk and their circumstances.	April 26		
	We will continue to learn and improve each time we carry out a Large Scale Investigation.	April 26		
	We will take steps to ensure the full involvement of all key partners in relevant aspects of adult support and protection practice going forward.	April 26		
	We will include partners as we continue to check the quality of ASP activity, ensuring our risk assessments are robust and supported by appropriate evidence including chronologies.	April 26		

Domestic abuse survivors are protected from further harm and abuse. (Equality outcome)	Provide domestic abuse support services for women and children.	<i>April 26</i>	<i>Janice Thomson</i>	% Change in women's domestic abuse outcomes % change in children's domestic abuse outcomes Participation in domestic abuse training and programmes Number of referrals to domestic abuse support services
	Deliver awareness raising campaigns on gender-based violence, and ensure women are aware of the referral pathways and supports available	<i>April 26</i>		
	Provide domestic abuse training to all staff.	<i>April 26</i>		
	Make domestic abuse resource tools available to all staff.	<i>April 26</i>		
	Ensure staff are aware of the referral pathways and supports available	<i>April 26</i>		
	Implement a domestic abuse perpetrator programme and implement gender-based violence prevention programme in schools.	<i>April 26</i>		
Children are kept safe in their families and communities.	Deliver the commitments in the East Renfrewshire Child Protection Committee Business Improvement Plan 2025-2028	<i>April 26</i>	<i>Jen McKean</i>	Vaccination update rates
The health of East Renfrewshire's population is protected from major incidents and other threats	Deliver health protection measures including successful uptake of locally-delivered vaccination programmes.	<i>April 26</i>	<i>Julie Tomlinson</i>	

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