

COMMUNITY HEALTH AND CARE SERVICE

TEAM PLANNING PROCESS – GUIDANCE 2020/21

1. Introduction

1.1 Community Health and Care Team Plans set out how we intend to deliver the Key Performance Measures and Actions outlined in the Service's key strategic documents, namely:

- Adult and Older People's Service and Improvement Plan 2019-2023
- Adult Community Mental Health Strategy 2017-2022
- Adult Learning Disability Strategy 2017-2023
- Dementia Strategy 2018-2023

2. Strategic Planning Overview

2.1 South Ayrshire's Local Outcome Improvement Plan and the Health and Social Care Partnership's Strategic Plan are supported by Service Improvement Strategies and Plans and Team Plans to ensure that a 'golden thread' is in place to support delivery of Community and Partnership visions, strategic objectives and strategic outcomes.

2.2 The following illustrates the 'golden thread' of key planning documents and how these link strategic high level plans to each Team and valued member of staff:



2.3 As a Partnership we are committed to our vision of “**working together for the best possible health and wellbeing of our communities**”. This links to the outcomes identified by our Community Planning Partners and is at the heart of our Local Outcome Improvement Plan, which combines and focuses our joint resources towards achieving this.

2.4 The Partnership's Strategic Plan Implementation Plan 2018-2021 details high level, strategic actions which will be undertaken over the period to deliver on the strategic objectives and which are the responsibility of and assigned to either the Director, or a specific Head of Service.

2.5 Service Strategies and Improvement Plans have been developed for Adults and Older People Services, Adult Mental Health Services, Adult Learning Disability Services and Dementia Services which break down each of the actions from the Strategic Plan Implementation Plan into operational, service level activity which will be undertaken to support delivery of the actions within the Strategic Plan Implementation Plan.

2.6 In turn, Team Plans detail specific operational activity being undertaken by frontline services and individuals to support delivery of the Service Strategies and Improvement Plans and therefore deliver against Community, Partnership and Service priorities.

3. Self-Evaluation

3.1 As outlined above, Team Plans are critical to ensuring operational implementation of strategic priorities however they must also support the delivery of continuous improvement.

3.2 Self-evaluation is central to continuous improvement. It is a reflective process which allows services to understand how well they are doing and to identify the best way to improve the services they deliver. It is forward looking; and is about change and improvement, leading to well considered innovation in service delivery. It is based on professional reflection, challenge and support and involves taking informed decisions about actions which result in clear benefits to service users. It should not be viewed as a one-off activity but instead should be a dynamic process, undertaken on an on-going basis. It establishes a baseline from which to plan to improve outcomes and promotes a collective commitment to set priorities for improvement. Used effectively, continuous self-evaluation helps us to monitor progress and measure the impact that changes have made on outcomes – the differences made – for people.

3.3 Self-evaluation is at the heart of improving services and outcomes for people and communities. It helps us determine:

- What we need to keep doing because it is working well and delivering better outcomes
- What we need to do differently because it is not working well
- What we need to start doing to deliver better outcomes
- What we need to stop doing because it is not working well nor delivering the outcomes we want.

3.4 It is one of the three essential parts of the cycle of activities for improving outcomes:



3.5 Self-evaluation is based on 3 key questions:

- How are we doing? This question should help to identify strengths within and across service delivery and begin to consider areas for improvement.
- How do we know that? In considering this question, services should be gathering evidence such as performance measures, outcomes and processes and the views of people experiencing the service, and their families.
- What do we plan to do next? The question should help to take forward what has been identified and to develop a set of clear and tangible priorities for improvement for inclusion in Team Plans.

3.6 Within the team plan, there is a section for self-evaluation to support teams to identify areas for improvement and inform team planning. Within the Community Health and Care team planning template, the Care Inspectorate's framework for Joint Inspections for Adult Services has been used to support self-evaluation and improvement however where the Care Inspectorate has published a quality framework for your service type, you might want to use the quality indicators for your service as a basis for your self-evaluation. The Quality Indicators within their frameworks provide a toolkit to help with evaluating and improving the quality of services, and their Quality Illustrations provide examples of

strengths and areas for improvement for each quality indicator. Not all quality indicators will be relevant to all teams – focus on those that are when completing your self-evaluation.

- 3.7 It is expected that all Teams will give reasonable consideration to adult support and protection, as covered within quality indicator 5.3, “Shared approach to protecting individuals who are at risk of harm, assessing risk and managing and mitigating risks”.
- 3.8 Further guidance on self-evaluation for improvement can be found on the Care Inspectorate’s website or by clicking [here](#).

4. Developing a Team Plan

- 4.1 Team Plans should use the Team Plan Template attached at Appendix 1. Team Plans should include detail on the actions that each Team intends to take forward, associated performance measures and targets that will be used to evaluate progress.
- 4.2 The content of Team Plans should be drawn from 2 different activities:
 - 1. A review of the relevant Community Health and Care Strategy and Improvement Plan to identify operational activity being undertaken by the team which will deliver against the Strategy and Improvement Plan.
 - 2. Areas for improvement identified through self-evaluation. The team plan template has been developed in such a way as to allow identified areas for improvement to form the basis of the Team Plan.
- 4.3 Each Team Action identified should help to deliver an action within the Adult and Older People’s Service and Improvement Plan 2019-2023, Adult Community Mental Health Strategy 2017-2022, Adult Learning Disability Strategy 2017-2023 or Dementia Strategy 2018-2023. Where it is not possible to assign a team action to an action within these Strategies and Improvement Plans, the Service Manager should be advised to allow them to determine the value of the planned activity, and whether or not the relevant Strategy or Service Improvement Plan requires to be updated.
- 4.4 Further guidance on completing the Team Plan template is included within the Template itself. The Partnership’s Planning and Performance Team are also available to provide support and answer any questions.

5. Governance

- 5.1 Team Plans will be subject to approval and regular monitoring by Community Health and Care Service Managers and will support them in prioritising and monitoring the service’s overall work plan and the progress being made against delivery of the Service’s Strategy and Service Improvement Plans and ultimately the Partnership’s Strategic Plan.
- 5.2 While it is expected that self-evaluation is undertaken on an annual basis, Team Plans can and should be reviewed and revised on an on-going basis as part of on-going team development. Team Plans should form the agenda of regular team meetings to ensure actions are delivered and key performance measures are monitored.

Appendices:

- 1. Team Plan Template

APPENDIX1: TEAM PLAN TEMPLATE
COMMUNITY HEALTH AND CARE SERVICE
<<TEAM NAME>> TEAM PLAN 2020-21

1. Introduction

- 1.1 The <<Team Name>> Team Plan covers the period 2020-21 and sets out how we intend to deliver the Key Performance Measures and Actions outlined in the **Adult and Older People's Service and Improvement Plan 2019-2023 / Adult Community Mental Health Strategy 2017-2022/ Adult Learning Disability Strategy 2017-2023** ** Delete as appropriate.
- 1.2 The Plan includes areas for improvement identified through self-evaluation exercise using the Care Inspectorate's Framework for Joint Inspections for Adult Services (***where a different Framework has been used, update accordingly**).

2. Profile

- 2.1 <<Team Name>> provides <<insert narrative detailing the areas the team is responsible for>>

3. Detailed Plan

- 3.1 How <<Team Name>> intends to contribute to the Partnership's Strategic Objectives is detailed in tabular form below, where we set out the key actions that we intend to take forward and the performance measures and targets that we will use to evaluate our progress. Actions include the improvement activity that have been prioritised through self-evaluation and the activity that we are committed to as part of our working programme of change.

6. Governance

- 6.1 This Team Plan will be subject to approval and regular monitoring by Community Health and Care Service Managers and will support them in prioritising and monitoring the service's overall work plan and the progress being made against delivery of the Service and Improvement Plan and ultimately the Partnership's Strategic Plan.
- 6.2 This Team Plan will form the agenda of regular team meetings to ensure actions are delivered and key performance measures are monitored.

APPENDIX 1: COMMUNITY HEALTH AND CARE TEAM PLAN TEMPLATE

TEAM NAME: <INSERT SERVICE/ TEAM NAME>

KEY QUESTION 1: WHAT KEY OUTCOMES HAVE WE ACHIEVED?				
1. Key performance outcomes				
Q11.1 Improvements in partnership performance in both healthcare and social care				
Q11.2 Improvements in the health and wellbeing and outcomes for people, carers and families				
HOW ARE WE DOING? <i>Bullet pointed statements which highlight key strengths about the work of the team and the difference it has made.</i>			HOW DO WE KNOW? <i>Supporting evidence based on performance data, documentation, stakeholder feedback, direct observation of practice.</i>	
<ul style="list-style-type: none"> • <<KEY STRENGTH>> • <<ETC>> • <<ETC>> 			<ul style="list-style-type: none"> • <<EVIDENCE>> • <<ETC>> • <<ETC>> 	
WHAT ARE WE GOING TO DO NOW? <i>Areas for improvement written as high level outcome focussed improvement actions, organised under the most relevant strategic objective, and which are measurable and time bound.</i>				
Service and Improvement Plan Action	Team Improvement Action	Individual Responsible	Target Completion Date	Performance Measure (& Target)
Strategic Objective (A): We will protect vulnerable children and adults from harm				
<<Add relevant Action from relevant Strategy and/ or Service and Improvement Plan>>	<<Add relevant Action here. Actions should be identified through on-going activity, self-evaluation and other learning opportunities such as external scrutiny.>>			<<Where appropriate Performance Measures linked to the Team Action should be added. Where appropriate Targets can also be included>>
(Each Team Action identified should help to deliver an action within the A&OP's SIP Plan 2019-2023/ Adult Community MH Strategy 2017-2022/ Adult LD Strategy 2017-2023 / Dementia Strategy 2018-23. If a gap is identified, the Service Manager should be advised to allow them to determine the value of the planned activity and whether or not the relevant Strategy or Service Improvement Plan requires to be updated).				
	<<There can be more than one Team Action identified to deliver against an Action from a Strategy/ Improvement Plan>>			
Strategic Objective (D): We will reduce health inequalities				
Strategic Objective (E): We will shift the balance of care from acute hospitals to community settings				
Strategic Objective (F): We will support people to exercise choice and control in the achievement of their personal outcomes				

Strategic Objective (G): We will manage resources effectively, making best use of our integrated capacity				
Strategic Objective (H): We will give all of our stakeholders a voice				
EVALUATION Use the following scale to evaluate performance in this area: (6) Excellent: Outstanding/ sector leading; (5) Very Good: Major strengths; (4) Good: Important strengths, some areas for improvement; (3) Adequate: Strengths just outweigh weaknesses; (2) Weak: Important weaknesses, priority action required; (1) Unsatisfactory: Major weaknesses, urgent remedial action required.				

KEY QUESTION 2: HOW WELL DO WE JOINTLY MEET THE NEEDS OF OUR STAKEHOLDERS THROUGH PERSON CENTRED APPROACHES?

2. Getting help at the right time
 QI2.1 Experience of individuals and carers of improved health, wellbeing, care and support
 QI2.2 Prevention, early identification and intervention at the right time
 QI2.3 Access to information about support options including self-directed support

3. Impact on staff
 QI3.1 Staff motivation and support

4. Impact on community
 QI4.1 Public confidence in community services and community services and community engagement

HOW ARE WE DOING? <i>Bullet pointed statements which highlight key strengths about the work of the team and the difference it has made.</i>	HOW DO WE KNOW? <i>Supporting evidence based on performance data, documentation, stakeholder feedback, direct observation of practice.</i>
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KEY QUESTION 3: HOW GOOD IS OUR JOINT DELIVERY OF SERVICES?				
5. Delivery of key processes				
QI5.1 Access to support				
QI5.2 Assessing need, planning for individuals and delivering care and support				
QI5.3 Shared approach to protecting individuals who are at risk of harm, assessing risk and managing and mitigating risks				
QI5.4 Involvement of individuals and carers in directing their own support				
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KEY QUESTION 4: HOW GOOD IS OUR ORGANISATIONAL MANAGEMENT IN PARTNERSHIP?				
6. Policy development and plans to support improvement in service				
QI6.1 Operational and strategic planning arrangements				
QI6.2 Partnership development of a range of early intervention and support services				
QI6.3 Quality assurance, self-evaluation and improvement				
QI6.4 Involving individuals who use services, carers and other stakeholders				
QI6.5 Commissioning arrangements				
7. Management and support of staff				
QI7.1 Recruitment and retention				
QI7.2 Deployment, joint working and team work				
QI7.3 Training, development and support				
8. Partnership working				
QI8.1 Management of resources				
QI8.2 Information systems				
QI8.3 Partnership arrangements				
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KEY QUESTION 5: HOW GOOD IS OUR LEADERSHIP?				
9. Leadership and direction that promotes leadership				
Q19.1 Vision, values and culture across the partnerships				
Q19.2 Leadership of strategy and direction				
Q19.3 Leadership of people across the partnership				
Q19.4 Leadership of change and improvement				
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