

# Integrated Strategic Plan – Glossary of Terms

## **2020 Vision**

The 2020 Vision is the Scottish Government’s strategic vision for achieving sustainable quality in the delivery of healthcare services across Scotland, in the face of the significant challenges of Scotland’s public health record, our changing demography and the economic environment.

The Scottish Government's 2020 Vision is that by 2020 everyone is able to live longer healthier lives at home, or in a homely setting.

## **A**

### **Acute Care**

Acute Care is a branch of health care where people receive active but short-term treatment for a severe injury or episode or illness, an urgent medical condition, or during recovery from surgery. Acute care services are generally provided in a formal hospital setting.

### **Adult Support and Protection**

The Adult Support and Protection (Scotland) Act 2007 (The Act) seeks to protect and benefit adults at risk of being harmed. The Act requires councils and a range of public bodies to work together to support and protect adults who are unable to safeguard themselves, their property and their rights.

### **Aids and Adaptations**

Aids and adaptations can help older people and people with disability to live independently in their own homes. They can reduce the risk of falls and other accidents in the home and also reduce the need for home care or long term admission to a care home. A wide variety of aids and equipment is available to help with daily living tasks. This ranges from simple adapted cutlery, to telecare alarms, specialist seating and beds. Common examples of adaptations include replacing a bath with a level access shower, or making it easier to get in and out of the home by widening doors or installing a ramp.

### **Anticipatory Care /Plans**

Anticipatory care / plans can take many forms. However it is expected to help reduce avoidable and unscheduled acute admissions for people with pre-existing conditions. The purpose of Anticipatory Care Planning is to support the individual to have greater choice and control of care preferences through communication across the support team, across agencies and across care settings.

### **Avoidable Admissions**

An admission to a bed that may be regarded as unnecessary had other more appropriate services been available

## **B**

### **Body Corporate Model**

The body corporate model is a model of integration where a Health Board and Local Authority both delegate the responsibility for planning and resourcing service provision for health and social care services to an Integration Joint Board. This is established as a separate legal entity.

## C

<b>Care Journey / Plan</b>	A Care Plan is the plan of treatment or actions agreed with a service user, their carer and family, following an assessment of need by a health or care agency.
<b>Carers</b>	A carer is a person of any age, who looks after family, partners or friends in need of help, because they are ill, frail or have a disability and need support to live independently. This care is unpaid, however the carer may be in receipt of carers allowance but this is not considered to be payment.
<b>Chief Officer</b>	Where the body corporate model is adopted, a Chief Officer of the Integration Joint Board will be appointed to provide a single point of management for the integrated budget and integrated service delivery. They are accountable to the Integration Joint Board and to the Chief Executives of their Health Board and Local Authority for the delivery of the integrated services.
<b>Choice and Control</b>	Choice and control is about shaping services to meet people's needs, rather than allocating people to fit around services.
<b>Community Based Support</b>	Services that are delivered within community settings, sometimes within a person's home. Community based support is provided by the Health Board, Local Authority and also by voluntary and community organisations.
<b>Community Care Assessment</b>	A community care assessment is a review of someone's personal circumstances and needs, carried out by Adult Social Care Services, and will look at how the person copes with day-to-day living, and recommend help or equipment that might make day-to-day life easier.
<b>Community Care Services</b>	Community care services entail social care services helping people live full and independent lives. They are intended to help people overcome particular difficulties, and to assist people to live as close to home for as long as possible.
<b>Co-morbidities</b>	The presence of two or more co-existing conditions or diseases which potentially complicates the treatment of the patient. These can include behavioural, mental disorders, diabetes, cancer, etc.
<b>Complex needs</b>	The affect an illness or disease may have on a person can result in them needing a number of different types of care and support from different agencies and organisations. This could be medical support or a practical or social support, for example to dress or a befriending service.
<b>Co-production</b>	Co-production is about combining our mutual strengths and capacities so that we can work with one another on an equal basis to achieve positive change.

## D

### **Day Care**

Day care offers personal care during the day for those who are assessed as needing it. It is usually provided in a day care centre run by trained staff or volunteers for those with complex physical and social care needs. Attending day care allows people to get out of their home to meet and socialise with others, receive personal care, take part in activities and in some cases receive meals.

### **Delayed Discharge**

Delayed discharges occur when a patient who is ready to be discharged cannot leave the hospital, because the necessary care, support or accommodation is not available.

### **Delegation**

Delegation is the process used to integrate functions, by giving responsibility for health and social care functions to a single body.

### **Direct Payments**

Option 1 of the self-directed support act allows a person to take their full (or part of) care-funding allocation in the form of a direct payment. This allows them to coordinate support to their own needs, rather than receive the services as provided by the council. People who choose to receive a direct payment may decide to recruit a personal assistant carer, buy support from a service provider, buy a short break or respite care, or equipment/adaptations for their home.

### **Diversity**

The concept of diversity means understanding that each individual is unique, and recognises individual differences, in order to provide appropriate care.

## E

### **Early intervention and prevention**

Early intervention and prevention include an action or set of actions that are planned and put in place to prevent a situation happening or escalating. In the context of health and social care, examples are education and information that will help people make positive lifestyle choices to help them stay healthy, or supporting a person to remain in their own home by providing specialist equipment and support.

### **Engagement**

Developing and sustaining a working relationship between one or more public bodies and one or more community groups to help them both understand and act on the needs or issues that the community experiences. It is now accepted that public services, that involve their users, are likely to be of higher quality and more relevant to the communities they serve. Within the context of health and social care integration, involving staff is also critical.

## F

### **Fuel Poverty (& Extreme Fuel Poverty)**

A person is living in fuel poverty if, in order to maintain a satisfactory heating regime, they would need to spend more than 10% of their household income (including Housing Benefit or Income Support for Mortgage Interest) on all household fuel use. If the spend on heating is greater than 20% then the person is considered to be in Extreme fuel poverty.

# H

## **Health and Social Care Integration**

In the UK, Health and Social Care (often abbreviated to HSC or H&SC) is a term that relates to services that are available from health and social care providers. This is a generic term used to refer to integrating/brining together the whole of the health and social care provision infrastructure, public and private sector, including the third sector.

## **Health Inequalities**

Health inequalities are the unfair and avoidable differences in people's health across social groups and between different population groups. Health Inequalities do not occur randomly or by chance, but are socially determined by circumstances largely beyond an individual's control. These circumstances disadvantage people and limit their chance to live a longer, healthier life.

## **Healthy Life Expectancy (HLE)**

HLE is an estimate of how long the average person might be expected to live in a 'healthy' state. Like Life Expectancy (LE), it is most often expressed for an entire lifetime from the time of birth. HLE at birth is the number of years that a newborn baby would live in 'healthy' health if they experienced the death rates and levels of general health of the local population at the time of their birth, throughout their life. HLE is calculated by combining LE and a measure of 'healthy' health: in these HLE analyses the measure used is self-assessed general health.

## **HEAT Targets**

The HEAT performance management system sets out the targets and measures against which NHS Boards are publicly monitored and evaluated. HEAT is an acronym for Health Improvement, Efficiency and Governance, Access and Treatment. These are the four areas being targeted.

## **High Resource Individuals (HRI's)**

HRI's are the highest resource users who collectively account for 50% total health expenditure in the financial year, they do not necessarily account for 50% of the population.

## **Home Care**

Home care is an umbrella term used for a range of care services provided by care workers in a person's home. Home care can involve personal care (such as help with dressing or washing), non-personal care (such as cleaning or shopping services), provision of meals or nursing and health care. Home care services are flexible and delivered when required, either on a long or short-term basis.

## **Housing Contribution Statement (HCS)**

The HCS sets out the arrangements for carrying out the housing functions delegated to the Integration Authority under the Public Bodies (Joint Working) (Scotland) Act 2014.

## **Housing with Care**

Housing with care is housing that gives a person support and security without taking away their independence. Sheltered Housing is available from the Council and some housing associations and is generally one bedroom properties. Each property comes with a built in alarm system and some are adapted for people with disabilities.

## **Independent Living**

Independent living means having the same freedom, choice, dignity and control as other citizens at home, at work and in the community. It does not necessarily mean living by yourself or fending for yourself. It means rights to practical assistance and support to participate in society and live an ordinary life.

<b>Independent Sector</b>	The independent sector encompasses those traditionally referred to as the 'private sector'. It includes organisations of varying types and sizes, amongst them single providers, small and medium sized groups and national providers.
<b>Integrated Care</b>	Integrated Care focuses on improving services in relation to access, quality, user satisfaction and efficiency. The aim is to enable better coordinated, joined-up and more continuous care, resulting in improved patient experience whilst achieving greater efficiency and value from health and social care delivery systems.
<b>Integration Authority</b>	The Integration Authority is the body that is responsible for planning integrated care. It will decide which integrated services will be provided, how they will be funded and what they should look like. It can (and in many cases must) direct the Health Board and Local Authority to deliver those services. The body that acts as the Integration Authority for a particular area will be determined by reference to the model of integration used in that area.
<b>Integration Functions</b>	The services that Integration Authorities will be responsible for planning are described in the Act as integration functions. The legislation sets out which NHS and social care services must, may and cannot be delegated as part of the integration arrangements.
<b>Integration Joint Board</b>	Where the body corporate model is adopted, the NHS Board and Local Authority will create an Integration Joint Board. This Board consists of representatives from the Health Board, the Local Authority, the Third and Independent Sectors and people who use health and social care services and carers. The Integration Joint Board, through its Chief Officer, will have the responsibility for the planning, resourcing and the operational oversight of integrated services within the strategic plan.
<b>Integrated Resource Framework</b>	The Integrated Resource Framework (IRF) for Health and Social Care is a framework within which Health Boards and Local Authorities can better understand the patterns of care they provide, particularly to their shared populations of people and service users.
<b>Integration Scheme</b>	The Integration Scheme is a legally binding agreement between Councils and Health Board who are known as 'the parties' in the Integration Scheme. The scheme describes what the parties will do to enable the Integration Joint Board (IJB) to meet its responsibilities (or 'delegated functions'). It does not describe what the IJB will do in detail. The IJB will become responsible for adult and older peoples services in April 2016. The scheme contains high level statements of commitment to ensure flexibility and accommodate future changes. Integration Schemes must be reviewed by the Health Board and Local Authority at least every five years.
<b>Intermediate Care</b>	Intermediate Care services support people to improve their independence and aim to provide a range of enabling, rehabilitative and treatment services in community and residential settings. The term has been defined as a "range of integrated services to promote faster recovery from illness, prevent unnecessary acute hospital admission, support timely discharge and maximise independent living". (NSF for Older People, DOH, June 2002).

## J

### **Joint Strategic Needs Assessment (JSNA)**

The JSNA is an analysis of the current and future health and social care needs of the local community to inform and guide service planning. The aim is to accurately assess the health and care needs of a local population in order to improve the physical and mental health and wellbeing of individuals and communities. The intention is to also consider wider factors that impact on their communities' health and wellbeing, and local assets that can help to improve outcomes and reduce inequalities.

## L

### **Lead Agency Model**

The Lead Agency Model is a model of integration where the Health Board or the Local Authority takes the lead responsibility for planning, resourcing and delivering integrated adult health and social care services.

### **Life Expectancy (LE)**

LE is an estimate of how long the average person might be expected to live. LE is most often quoted for an entire lifetime; LE at birth is the number of years that a newborn baby would live if they experienced the death rates of the local population at the time of their birth, throughout their life. It is a theoretical measure rather than a true prediction of life expectancy, since death rates may increase or decrease during a person's lifetime, and people may move to areas with different mortality risks.

### **Long-term conditions**

Long-term conditions are conditions that last a year or longer, impact on many aspects of a person's life, and may require ongoing care and support. The definition does not relate to any one condition, care group or age category. It covers adults and older people as well as children and those with physical and mental health issues. Common long-term conditions include epilepsy, diabetes, some mental health problems, heart disease, chronic pain, arthritis, inflammatory bowel disease, asthma and chronic obstructive pulmonary disease.

## M

### **Market Facilitation**

Market Facilitation is a key aspect of the strategic commissioning cycle. Integration Authorities will undertake a range of activities to promote the successful development of services to meet the needs of the local population effectively. These activities should include the development of an accurate picture of local need and markets, published as a Market Facilitation Plan.

### **Multiple conditions**

This term is used interchangeably with the terms 'Co-morbidities' and 'Multi-morbidities'.

*See Definition for Co-morbidities*

## N

### **National Care Standards**

The national care standards have been published by Scottish Ministers to help people understand what to expect from a wide range of care services. They are in place to ensure that people get the right quality of care when they need it most.

**National Health and Wellbeing Outcomes**

The nine national health and wellbeing outcomes provide a national framework for measuring the effect of integrated health and social care services on the health and wellbeing of individuals.

<http://www.gov.scot/Topics/Health/Policy/Adult-Health-SocialCare-Integration/Outcomes>

**National Records of Scotland (NRS)**

NRS is a non-ministerial department of the Scottish Government. Their purpose is to collect, preserve and produce information about Scotland's people and history and make it available to inform current and future generations.

**P****Partnership**

A partnership refers to two or more individuals or organisations working together to achieve a shared aim. Within the context of health and social care integration, the Partnership consists of the Local Authority, NHS Forth Valley, Third and Independent sectors working together to provide effective, joined up services.

**Person-Centred Care**

Person-centred is an approach to working with people which respects and values the uniqueness of the individual and puts the individual's needs and aspirations firmly at the centre of the process.

**Personalisation**

Personalisation means starting with the individual as a person with strengths and preferences who may have a network of support and resources, which may include family and friends. Personalisation reinforces the idea that the individual is best placed to know what they need and how those needs can be best met. It means that people can be responsible for themselves and can make their own decisions about what they require, but that they should also have information and support to enable them to do so.

**Population Estimate**

Population estimates are based on the 2011 Census and updated annually by 'ageing on' the population and applying information on births, deaths and migration. Births and deaths are estimated using data from the civil registration system, which is considered to be virtually complete. Migration is derived from the National Health Service Central Register (NHSCR) and Community Health Index (CHI) for migration within the UK, and from the International Passenger Survey (IPS) for international migration.

**Planning and Delivery Principles**

The principles that underpin the making of arrangements for integration, and the strategic planning of integrated services, will inform how services are planned and delivered. They explain what people using services and their carers can expect from integrated services and the behaviours and priorities expected of organisations and people planning and delivering care and support.

**Premature Mortality**

Premature mortality is a measure of the number of deaths that occur under the age of 75.

**Public Bodies**

The Health Board and Local Authority are both public bodies. A public body is democratically accountable at either national or local level. They have specific functions and requirements generally driven by legislation, which they must undertake. The Public Bodies (Joint Working) (Scotland) Act requires the integration of health and social care, and is an example of legislation.

**Public Bodies Reform**

Public bodies' reform relates to Scottish Government legislation set out within The Public Bodies Act, which enables the government to push on with its plans to simplify the public bodies landscape. Reforms using the powers in the new Public Bodies Act are under way. The Act builds on reforms that are already removing duplication and waste in public bodies and, along with simultaneous reductions in spending, which will reduce the administrative costs of public bodies.

**Q****Quality Ambitions**

The three quality ambitions of 'person-centred', 'safe' and 'effective' are part of the Healthcare Quality Strategy for Scotland. These ambitions provide the focus for all our activity to support our aim of delivering the best quality healthcare to the people of Scotland and through this making NHS Scotland a world leader in healthcare quality. They explicitly reflect what people have told us they want and need.

**Quality Strategy**

The Healthcare Quality Strategy for Scotland is the approach and shared focus for all work to realise the 2020 Vision. It aims to deliver the highest quality healthcare to the people of Scotland to ensure that the NHS, Local Authorities and the Third Sector work together, and with people, carers and the public, towards a shared goal of world leading healthcare.

**R****Reablement**

Reablement is about giving people the opportunity and the confidence to relearn/regain some of the skills they may have lost as a result of poor health, disability/impairment or entry into hospital or residential care. As well as regaining skill, reablement supports service-users to gain new skills to help them maintain their independence.

**Redesign**

Redesign within the context of health and social care integration, relates to services may be changed and improved. Redesign is based on evaluation and review of existing services and will often include listening to service users, their carers and families about what services are important to them.

**Rehabilitation**

Rehabilitation entails restoring someone to health or normal life through guidance and therapy after addiction, or illness.

**Respite Care**

Respite Care is care that is temporarily provided by service providers/local authorities. It is intended to benefit a carer and the person he or she cares for by providing a short break from caring tasks.

**Risk Assessment**

Risk assessment is the assessment of a person's health, their safety, well-being and their ability to manage essential daily routines and the impact this has on the individual, their carers and staff.

## S

<b>Self-Directed Support (SDS)</b>	SDS is the new form of social care where the service-user can arrange some or all of their own support. This is instead of receiving services directly from Local Authority social work or equivalent. SDS allows people more flexibility, choice and control over their own care so that they can live more independent lives with the right support.
<b>Self-management</b>	Self-management encourages people with health and social care needs to stay well, learn about their condition and their care and support needs, and remain in control of their own health.
<b>Service users</b>	Service users are people who receive health and/or social care services. They may be individuals who live in their own home, are staying in care or are being cared for in hospital.
<b>Scottish Index of Multiple Deprivation (SIMD)</b>	The SIMD identifies small area concentrations of multiple deprivation across all of Scotland in a fair way. It provides a relative measure of deprivation, which means that it can be used to assess the level of deprivation of one data zone relative to the most deprived (ranked 1) and the least deprived (rank 6,505). The SIMD 2012 combines 38 indicators across 7 domains, namely: income, employment, health, education, skills and training, housing, geographic access and crime and the overall index score is a weighted sum of the seven domain scores.
<b>Staff Partnership</b>	Staff Partnership (NHS) describes the process of engaging staff and their representatives at all levels in the early stages of the decision-making process. This enables improved and informed decision making, through achieving and maintaining a positive and stable employee relations culture and gaining commitment, ownership and consensus to decisions through joint problem solving. The emphasis is therefore placed on working collaboratively at all levels and becoming an exemplary employer, both to the benefit of staff but also to the benefit of patient care.
<b>Stakeholders</b>	Stakeholders include any person or group with a vested interest in the outcome of a project or plan.
<b>Strategic Commissioning</b>	<p>Strategic Commissioning is a way to describe all the activities involved in:</p> <ul style="list-style-type: none"><li>• assessing and forecasting needs</li><li>• links investment to agreed desired outcomes</li><li>• planning the nature, range and quality of future services; and</li><li>• working in partnership to put these in place</li></ul> <p>This is the process that informs the Integration Authorities Strategic Plan</p>

## **T**

### **Telecare**

Telecare is a service mainly used as an emergency contact service by people who live alone but can also support people who have serious mobility and/or medical problems. There are a variety of Telecare devices available which ensure that people are able to live safely and independently in their own homes. The most common system (generally referred to as a community alarm) consists of a pendant alarm, an alarm unit and a smoke detector. More advanced Telecare systems can include technology such as flood detectors, pill dispensers or heat sensors.

### **Third Sector**

Third Sector Organisations is a term used to describe the range of organisations that are neither public sector nor private sector. It includes voluntary and community organisations (both registered charities and other organisations such as associations, self-help groups and community groups), social enterprises, mutuals and co-operatives. It also includes local intermediary organisations (Third Sector Interfaces), and third sector strategic intermediaries, for example Voluntary Action Scotland (who represent Scotland's 32 Third Sector Interfaces) and the Health and Social Care Alliance Scotland.

### **Transformational Leadership**

As opposed to the management of the delivery of services, Transformational Leadership relates to the ability to inspire, motivate and engage. These qualities are seen as being particularly important for times when organisations are being challenged by significant external changes.

## **V**

### **Voluntary Organisations**

A voluntary organisation is one whose main focus is to deliver social benefit in a variety of forms, rather than to generate profit for distribution to its members. It will usually be governed by volunteers and be independent of government. Voluntary organisations are also referred to as Third Sector organisations.

## **W**

### **Whole system approach**

Whole systems approaches involve identifying the various components of a system and assessing the nature of the links and relationships between each of them.