

NHS Shetland

Meeting:	Shetland NHS Board
Meeting date:	29 April 2025
Agenda reference:	Board Paper 2025/26/07
Title:	HSCP Joint Strategic Plan 2025-2028
Responsible Executive/Non-Executive:	Josephine Robinson, CHSC Director Lucy Flaws, Head of Planning
Report Author:	Pam Shead, Planning, Performance and Projects Officer

1 Purpose

This is presented to the Board for:

- Awareness

This report relates to:

- NHS Board/Integration Joint Board Strategy

This aligns to the following NHSScotland quality ambition(s):

- Effective
- Person Centred

2 Report summary

2.1 Situation

- 2.1.1 The HSCP Joint Strategic Plan 2025-2028 (the 'Plan') is being presented to NHS Shetland Board for awareness; this is attached as Appendix 1. This Plan requires the Board's attention, understanding, and commitment, to enable integrated, collaborative and partnership approach which supports effective service delivery, enables a shared vision for health and wellbeing in Shetland, and to work together to achieve the ambitions and goals set out in the Plan. More information on the Plan can be found on the [HSCP webpages](#), with the Strategic Plan information being found on www.shetland.gov/social-care-health/hscp-strategic-plan

2.2 Background

- 2.2.1 The HSCP Joint Strategic Plan provides the roadmap for the next three years for services delegated to the IJB, and outlines the challenges and opportunities, aligns its objectives with both national and local priorities including with NHS priorities, and provides a vision and plan for delivering effective and sustainable integrated health and social care services in Shetland.
- 2.2.2 The Plan provides 3 key ambitions and 9 supporting goals. These ambitions and goals seek to ensure that HSCP services are person and community centred, and that HSCP services are efficient and sustainable to meet current and future health and care needs in Shetland. The plan details how health and care resources will be used for integrated services to ensure they are safe, effective, and of good quality.
- 2.2.3 The Plan places significant emphasis on the importance of partnership working with NHS Shetland, Shetland Islands Council, the Third Sector, and the community. The IJB and HSCP will continue to maintain and develop these collaborations. The Plan provides its vision of a community focused and collaborative approach, including reducing stigma and discrimination, improving communication and feedback, and addressing the wider determinants of health.

2.3 Assessment

- 2.3.1 This Joint Plan provides the overarching vision and plan for the effective and integrated delivery of health and social care services in Shetland. Community Health and Social Care services in Shetland are delegated to Shetland Integration Joint Board (IJB).
- 2.3.2 The Public Bodies (Joint Working) (Scotland) Act 2014 (“the Act”) places a duty on Integration Authorities (the Integration Joint Board (IJB)) to create a “strategic plan” for the integrated functions and budgets that they control. These Plans must be reviewed every three years.
- 2.3.3 A collaborative approach has been used to develop this Plan. The Plan has been developed to align with National Health and Wellbeing Outcomes, and to respond to local needs, priorities, policy and service provision, as well as ongoing improvement activities.

2.3.1 Quality/ Patient Care

Patients and the Shetland community can expect supportive and responsive community health and care services that prioritise their needs while striving for sustainable, cost effective and best value services. The Plan aims to improve accessibility, reduce inequalities, and ensure good quality community health and care services in Shetland. The Plan describes potential changes needed to meet challenges and their anticipated impacts. The Plan has been produced using plain English (Appendix 1), in Easy Read format (Appendix 2), and an Audio version of the Easy Read (Appendix 3), to ensure the community have the Plan in a variety of accessible formats; enabling people the opportunity to access the Plan so that they can understand how services will work together, and what this Plan means for them.

2.3.2 Workforce

Any service change may potentially have an impact on staff. Any changes will be planned and delivered in partnership with staff and through due process.

2.3.3 Financial

The Plan describes services commissioned to be delivered within the budgets delegated to the IJB by NHS Shetland and the Council. The Plan describes how the IJB are looking to support best value principles to enable savings and cost effectiveness within service delivery, and to enable the services to be financially sustainable.

2.3.4 Risk Assessment/Management

The IJB maintains its own Risk register associated with the delivery of Strategic Plan. Risks relating to NHS delivery of services will be registered and actioned as per NHS policy and relevant NHS risk registers. Risk Assessment processes will be used to manage and mitigate identified risks.

2.3.5 Equality and Diversity, including health inequalities

An Equalities Impact Assessment has been carried out, as it is attached, as Appendix 5.

2.3.6 Other impacts

Whilst the IJB does not own any assets or property, NHS Shetland does have assets used for service delivery. NHS Shetland has relevant policies and procedures in place which govern their assets and property.

2.3.7 Communication, involvement, engagement and consultation

This Plan has been developed through partnership working; including input from NHS Shetland, Strategic Planning Group, Shetland Islands Council, Shetland Charitable Trust, third and voluntary sector providers, and the Shetland community. Information on the consultation activity taken in developing this Plan has been given in Appendix 4.

2.3.8 Route to the Meeting

This has been approved at Integration Joint Board (IJB) on 19 March 2025.

2.4 Recommendation

- **Awareness** – For Members' information only.

3 List of appendices

The following appendices are included with this report:

- Appendix 1 - HSCP Joint Strategic Plan
- Appendix 2 - Easy Read - HSCP Joint Strategic Plan
- Appendix 3 - Easy Read HSCP Joint Strategic Plan 2025-2028 – Audio
- Appendix 4 - Consultation activity
- Appendix 5 - Equality Impact Assessment

Shetland Health and Social Care Partnership

Joint Strategic Plan 2025-2028

Working together to provide supportive and sustainable
Community Health and Social Care in Shetland



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Introduction



Natasha Cornick, Chair
Shetland IJB

Welcome to Joint Strategic Plan (the 'Plan') for Shetland Health and Social Care Partnership (HSCP) for the years 2025 to 2028.

The Shetland Integration Joint Board (IJB) works with the Shetland Islands Council (SIC) and NHS Shetland. We work together to make sure health and care services meet the needs of people in Shetland. This partnership is called the Health and Social Care Partnership. The HSCP is responsible for carrying out the Plan for health and care services in the community.



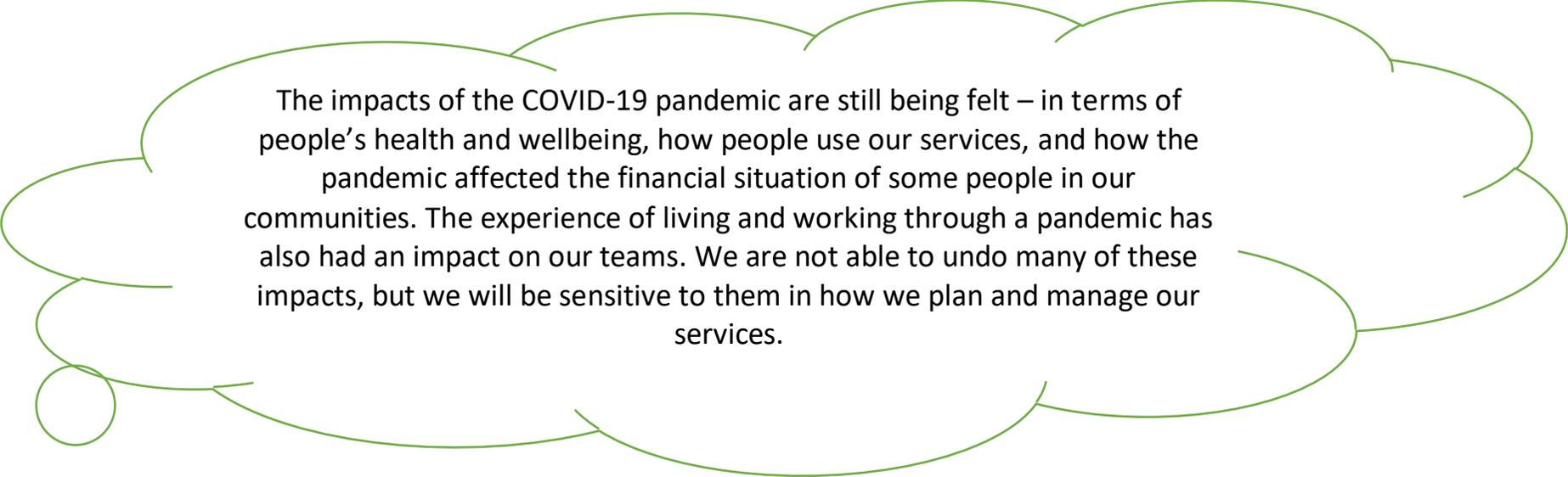
Jo Robinson, Chief Officer
Shetland IJB

This Plan builds on our previous Plan from 2022 to 2025. Many things have changed in the world in recent years, in health and social care, and in Shetland. We've had some successes, but we've also faced challenges. These include ongoing financial challenges, staffing shortages, COVID-19 pandemic, bad weather, and connectivity (internet and phone) outages.

These difficult times have tested our staff and our communities. However, they have also shown us how strong we are as a community. People came together to support each other. We've learned a lot from these experiences.

We face challenges in 2025 to 2028. The HSCP has been under financial pressure, and this is expected to continue. We have an aging population, and increasing number of people with health conditions and disabilities, including Learning Disabilities and complex health needs. These changes are happening sooner in Shetland than in other parts of Scotland, which puts extra pressure on our services. We also know that we can't expect people to consistently go above and beyond. This is not sustainable in the long term for our staff, teams and our services.

We are committed to working together to make sure we are able to maintain our high quality services and where possible, to improve the efficiency and financial sustainability of our health and care services. We will listen to, learn from, and work with our partners, our community, our service users, and our staff. We will develop services sensitively and take into account the needs of our community and staff to ensure that we prioritise the health and care needs of people in Shetland. We are also committed to ensuring fair access to our health and social care services for everyone in our community.



The impacts of the COVID-19 pandemic are still being felt – in terms of people’s health and wellbeing, how people use our services, and how the pandemic affected the financial situation of some people in our communities. The experience of living and working through a pandemic has also had an impact on our teams. We are not able to undo many of these impacts, but we will be sensitive to them in how we plan and manage our services.

Why we have a Joint Strategic Plan

Our Joint Strategic Plan (the 'Plan') describes our vision for our community health and care services in Shetland. The Plan tells you about our priorities, the goals and outcomes we want to achieve, and how we will plan and provide services to meet the needs of those in Shetland. We regularly review and update our Plan to ensure we work to provide the best possible health and social care services for our community.

This Plan describes our:

- [Ambitions](#) what we want to achieve over the next 3 years
- [Planning](#) how we plan our health and care services and identify gaps
- [Outcomes](#) how our health and care services will support individuals
- [Performance](#) how we will measure how well our health and care services are working

How we will use the Plan

This Plan helps us to work in partnership with the community, so that we make well considered decisions to help us achieve our goals; including how to develop new services and how to use our money and resources wisely, such as time, money, and staff. This Plan helps us to monitor our services to make sure they are working as they should.

This Strategic Plan is useful for many people:

- Health and Care Staff staff can use the Plan to understand our goals and how the work they do helps to contribute to achieving our [ambitions](#)
- Planning and Decision makers the Plan helps us with [planning](#) and making decisions that will help us to achieve our goals and ambitions; such as how to develop new services and how to use our money and resources
- Service Users, Carers and the General Public the Plan provides information on how health and care services are planned, how they will be provided, and the services and [outcomes](#) people can expect
- Third Sector and Voluntary Agency Partners the Plan helps our third sector and voluntary agency partners to understand our goals, resources, roles and responsibilities; helping us to work together to use our strengths to support each other and to achieve long term goals

Our Strategic Plan overview

Our Strategic Plan is our ‘big picture’ strategy, it shows us where we want to go (our goals and ambitions), how we will get there (planning and projects), and how we will know if we have been successful by tracking key results such as using Key Performance Indicators (KPIs). In [Appendix 1](#), we have included further information on how the Strategic Plan is brought together, including legislation and national strategies, along with our structure and governance information.

This Plan is for everyone in the HSCP, including individual teams, to ensure we all work together to achieve our goals and ambitions. The Plan becomes part of the [Community Health and Social Care Directorate Plan, and individual Service Areas Plans](#), to ensure all the teams are working together to achieve the best for our community.



Our Area

In Shetland, although our population may be relatively small, with a current estimate of around 23,000 people, we have a distinct culture and a strong sense of community.

In terms of health, Shetland has an average life expectancy of around 83 years for females, and 80 years for males; this is higher than the Scottish average. The leading causes of death are Cancer, Dementia, Alzheimer’s and Heart related diseases.

We have one hospital in Shetland, the Gilbert Bain, ten Health centres/GP practices, four Dental Clinics, nine Care Centres (one run by Crossreach), Housing and Community Support Services, short break and respite care home, day care services, alongside sheltered and supported living options. Due to our remote location, some people go to mainland Scotland for treatment and specialised care.



The prevalence of Learning Disabilities and Autism Spectrum Disorders is increasing globally, and Shetland also has an increasing population with these conditions, as well as people with more complex health and care needs. This means we are likely to see more demand for health and care services in future.

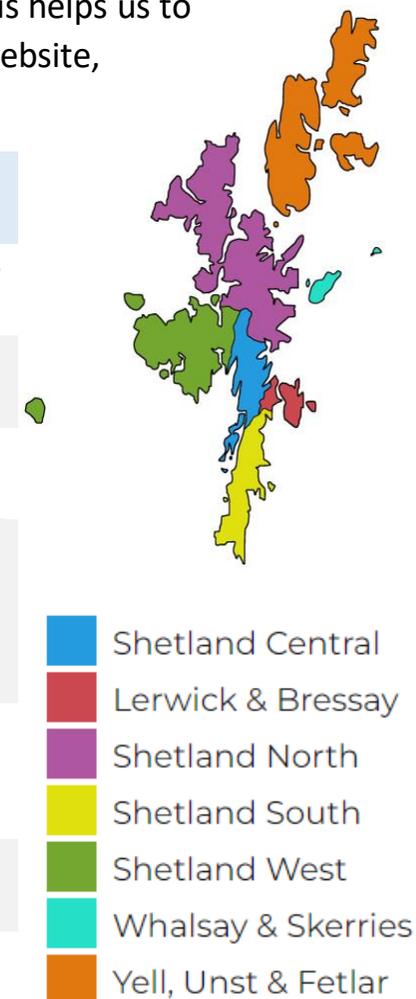
In Shetland we also have an aging population; meaning the number of older people is increasing whilst the number of younger people is decreasing. This may lead to more pressure on our health and care services and a decline in the number of people available locally to join our workforce.

There is no easy solution to the challenges of a population with increasing complex needs or an aging population. However, by working together with our staff, the community and our Third sector and voluntary agency partners, we can look to develop effective ways to address these challenges and to ensure people have the right level of support and care to meet their needs.

Our Localities

We have seven Localities in Shetland with each area working with a locality group, who ensures we work together, as well as working with our communities and partners, including third and independent sector organisations. This helps us to improve health, care and wellbeing for our communities. The map shown is from Shetland Partnership website, www.shetlandpartnership.org. More information on each of the localities can be found on this website.

Localities	Areas they include	Approx. Population	Our services in the community include
Lerwick area	Lerwick and the island of Bressay	7,000 (30%)	Hospital, Health Centre, Care Centre, Wellbeing Hub
Central Mainland	Whiteness and Weisdale, Scalloway, Burra, Trondra, Tingwall and Girlsta	3,500 (15%)	Health Centre, Wellbeing Hub
North Mainland	Delting, Nesting & Lunnasting, Brae and Northmavine	3,250 (14%)	Health Centre, Care Centre, Wellbeing Hub
South Mainland	Gulberwick, Quarff, Cunningsburgh, Sandwick, Levenwick, Bigton, Scousburgh, Dunrossness, Sumburgh and Fair Isle	4,500 (20%)	Health Centre, Care Centre
West Mainland	Tresta, Bixter, Aith, Reawick, Skeld, Walls, Sandness, Foula and Papa Stour	2,250 (10%)	Health Centre, Care Centre
Whalsay & Skerries	The islands of Whalsay and Out Skerries	1,100 (5%)	Health Centre, Care Centre
Yell, Unst & Fetlar	The islands of Yell, Unst and Fetlar	1,500 (7%)	Health Centre, Care Centre, Wellbeing Hub



Our Staff

Our HSCP staff are made up from NHS Shetland and Shetland Islands Council employees (see [Appendix 1](#)), working together in partnership to plan and provide our services, we call this an integrated service. The HSCP staff work within the Community Health and Social Care Directorate; the Directorate is across both the NHS and the Council. It is the excellent joint working of our teams, the good communication, sharing of knowledge and skills and their commitment to work together to provide the best for our community that enables us to meet our ambitions and goals.

As an IJB we will endeavour to provide good communication to staff working in the HSCP, so that they are able to see how their contribution positively impacts on the health and wellbeing of our community, and how it enables us to meet our ambitions.

We couldn't provide our high quality services without our staff and their commitment to providing excellent health and care support. As a HSCP we are committed to ensuring that we will continue to listen to and support our staff, ensuring they are able to work in a safe, respectful, engaging and positive environment. We will work with our partners to ensure that our staff are able to focus on growing their skills and to undertake training opportunities, so that they can develop their careers and have the support and tools they need.

Above all else, we will value the workforce we have.

We will:

- ✓ Communicate well with our staff
- ✓ Support wellbeing of our staff
- ✓ Value our staff
- ✓ Support development of our staff
- ✓ Listen to our staff
- ✓ Support new ways of working

Our Services

The HSCP provides health and care services in the community. We work closely with health care, social care and hospital-based services such as doctors, dentists, nurses, pharmacists, physiotherapists, social workers, care workers, staff at the Gilbert Bain hospital, Grantfield, Health Centres and Care Centres, alongside other staff and services to help people in Shetland. We also commission some Third Sector services to support Health and Care in Shetland.

The [Partnership](#) covers:

Adult Social Work	Justice Social Work	Community Care Resources including: Care@Home, Care Homes, Day services	Adult Services including: Learning Disability, Additional Support, Respite
Allied Health Professionals including: Occupational Therapy, Podiatry, Physiotherapy	Primary Care including: GPs, Community Optometry	Community Nursing including: District Nursing, Intermediate Care Team	Dental/Oral Health
Pharmacy and Prescribing	Mental Health including Substance use services, Dementia services, Talking Therapies	Some aspects of unscheduled care services	Some aspects of renal services
Some aspects of sexual health services	Some aspects of health improvement services	More details on our services and what they include is available online: www.shetland.gov.uk/social-care-health/community-health-social-care-partnership	

Our Ambitions

In 2025 to 2028 we have 3 key ambitions and 9 supporting goals that we are focussing on.

These are:

Fair and accessible support for our communities



Prevention, early intervention and maximised wellbeing



Sustainable models of care

Our 2025 -2028 Ambitions and goals are:

3 Ambitions

What we are looking to achieve

Fair and accessible support for our communities

Prevention, early intervention and maximised wellbeing

Sustainable models of care

9 Goals

How we will achieve our ambitions

1. Reduce inequalities and stigma in health and care
2. Provide fair and accessible care, support and information
3. Work in partnership with our communities to provide best outcomes
4. Provide support to ensure people can lead healthy, independent lives
5. Provide support at an early stage to enable better outcomes
6. Ensure people are supported to manage and improve their wellbeing
7. Ensure people receive health and care in the setting and location that best suits their needs
8. Support our staff to develop in a safe and engaging workplace
9. Make good use of technology and innovations to support progress

Shifting Balance of Care

Our goal with Shifting Balance of Care is to improve health and wellbeing for everyone in Shetland, by ensuring we provide the right care and support in the right place; whether this is at home, in the community, or in hospital. This will help us improve health and wellbeing for everyone in Shetland, while providing good quality health and care in an affordable and sustainable way, so that we can continue to provide our services now and in the future.

The population of Shetland is getting older and there are more care needs; we know that the demand for our services will continue to increase, so we need to find ways to provide them efficiently and effectively. Our Shifting Balance of Care has many aims;

- Make sure our services can continue to run in the future
- Ensure everyone has fair and equal access to health and care services
- Provide care and support in the best possible place for people
- Improve the health and wellbeing of people in Shetland
- Maintain, and where possible, improve the quality of our services
- Provide services in the most cost effective, efficient and sustainable way

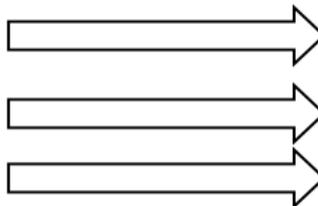
Below you can see the key themes from the 2022-25 strategy, and the key themes for 2025-28.

1st April 2022 – 31st March 2025

Developing ways of working

Enhancing Person Centred Care

Putting Community First



1st April 2025 – 31st March 2028

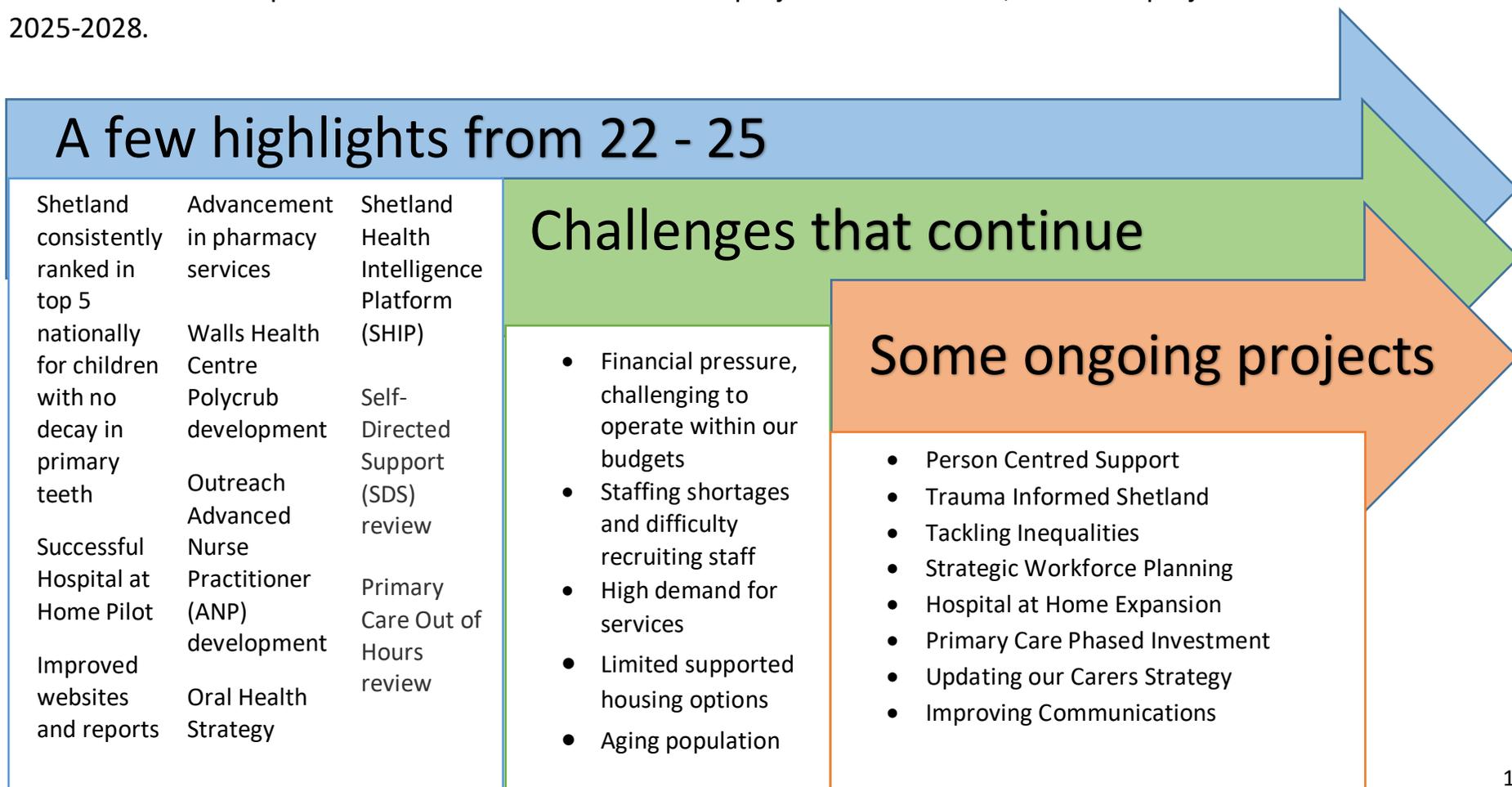
Sustainable models of care

Maximising wellbeing

Support for our communities

Our Projects

The projects within our Shifting Balance of Care programme continue to support our community. Our teams have completed a number of key projects in our 2022 – 2025 Plan, whilst other projects will continue in this Plan. We have listed below an example of some of the achievements and projects in 2022-2025, and some projects that will continue in 2025-2028.



A few highlights from 22 - 25

Shetland consistently ranked in top 5 nationally for children with no decay in primary teeth	Advancement in pharmacy services	Shetland Health Intelligence Platform (SHIP)
Successful Hospital at Home Pilot	Walls Health Centre Polycrub development	Self-Directed Support (SDS) review
Improved websites and reports	Outreach Advanced Nurse Practitioner (ANP) development	Primary Care Out of Hours review
	Oral Health Strategy	

Challenges that continue

- Financial pressure, challenging to operate within our budgets
- Staffing shortages and difficulty recruiting staff
- High demand for services
- Limited supported housing options
- Aging population

Some ongoing projects

- Person Centred Support
- Trauma Informed Shetland
- Tackling Inequalities
- Strategic Workforce Planning
- Hospital at Home Expansion
- Primary Care Phased Investment
- Updating our Carers Strategy
- Improving Communications

Where we are now

We are proud of the high quality services we provide for our community, but we also recognise we have some challenges. These include financial constraints, staff shortages and recruitment difficulties, and there are unfair and avoidable differences in health in our communities (health inequalities). Some of our buildings and systems are aging, which means we cannot continue to provide our services in the same way in the future.



To address the challenges we have, we will continue to review and where we can, develop our ways of working to improve the efficiency of our services, systems and buildings. This will help us continue to provide high quality services, make access to services easier, reduce inequalities, and improve the overall efficiency of health and care in Shetland.

We have already made a lot of changes to our services to improve efficiency, but we will keep looking for ways to do things better.

However, there are some things we can't change. This might be because:

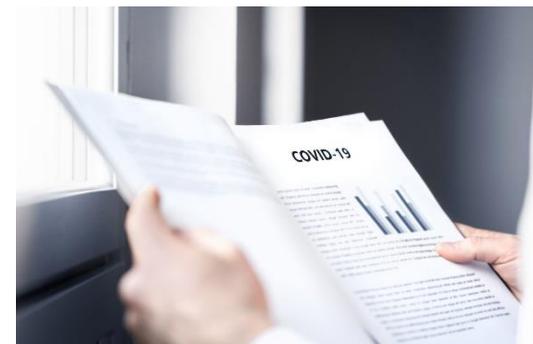
- We have to provide a particular type of service
- There are rules about how we must provide a service
- We need a specific number of staff to do the job
- We've already made all the improvements we can

We will:

- ✓ Maintain existing good practice
- ✓ Look for cost effective and sustainable solutions
- ✓ Reduce inequality and improve access to services

COVID-19 Pandemic Impact

In Shetland, we felt the impact of the pandemic early on. Our remote location and reliance on travel links to the Scottish mainland presented additional challenges. During the pandemic our health and care teams faced challenges in managing outbreaks, ensuring adequate staffing levels, and providing timely access to specialist care. People in Shetland experienced disruptions to routine services, reduced access to their loved ones in care homes and limitations on personal freedom during the COVID restrictions and social distancing measures.



We know that the restrictions and social distancing measures also increased feelings of isolation and loneliness for some people, particularly among our more vulnerable communities. The pandemic also had an impact on people's mental health. People waiting for some services experienced longer waiting times, and our teams and services have needed time to recover after the pandemic disrupted services.

The pandemic, along with other recent events, such as the connectivity issues, snow and power outages, show how vulnerable we can be in Shetland. We face challenges in maintaining the infrastructure we need to support our health and care services. These events have also shown us the importance of our teams working well together, the need for strong and adaptable systems that can handle unexpected challenges, and the importance of community support networks. However these events also remind us how strong our community is; there is amazing strength and resilience within our communities, who come together to support each other during difficult times.

We will:

- ✓ Reflect and learn from the COVID-19 pandemic
- ✓ Address the impacts on our services from COVID-19
- ✓ Support people living with the impacts of COVID-19

Our Finance

Shetland IJB is responsible for the strategic planning and arranging (commissioning) of health and social care services. The funding for the IJB comes from contributions made by NHS Shetland and SIC, showing that they work together to provide a partnership approach to delivering these important services. In the 2024/25 financial year, the total IJB budget was £68 million, with NHS Shetland and SIC each paying a share of the contributions.

Funding Challenges

Shetland IJB is facing tough financial times. Over the next few years (2025-2028) we need to find ways to save money to stay financially sustainable. To help us become sustainable we aim to find a minimum of 3% savings each year. This means we must be very careful with our finances and look for ways to do things more efficiently, while still making sure our services remain accessible and of a high quality.

Cost Pressures

One of the biggest costs for the IJB is relying on temporary workers (such as locums and agency staff) to provide our essential, frontline services. This challenge is bigger in Shetland because we are a remote and rural area, making hiring and keeping permanent staff more difficult. Even if we have enough money, finding enough staff to provide our services is a major challenge.



Budget vs Actual Spend

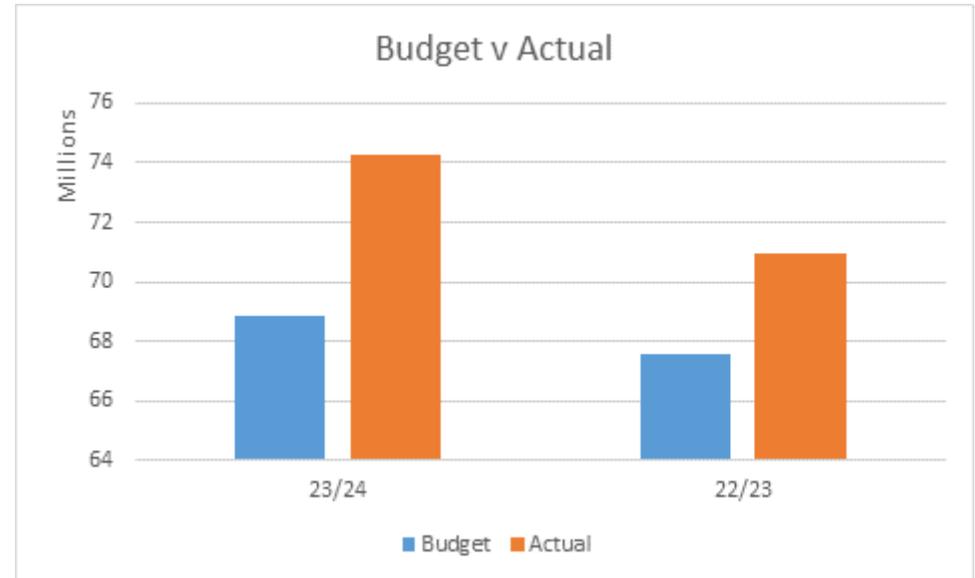
This graph shows how much more money was actually spent in previous years, compared to what was originally planned to be spent.

Even though we have made some progress in making savings, our spending is still higher than our budget.

This means we are spending more money than we have available, so we have a deficit. To cover this deficit, the NHS and Council have given more money to 'top up' and balance IJB finances, but we can't be sure they can keep doing this in future.

To avoid financial problems in the future, we need to continue finding ways to save money and reduce costs.

We need to reduce overspending and look at ways we can provide services differently to ensure we can continue to provide them within our financial means.



Whilst our Plan is 2025-2028, the work towards achieving sustainability will continue past 2028, and will be reflected in our future Plans.

Projects, recruitment work and reducing financial costs will take time.

Our aim is to set a solid foundation to enable us to continue our work on achieving these goals.

The Need for Transformation

To overcome these challenges, we need to come up with new and creative ways of providing care that are affordable and work well for our community. These new ways should:



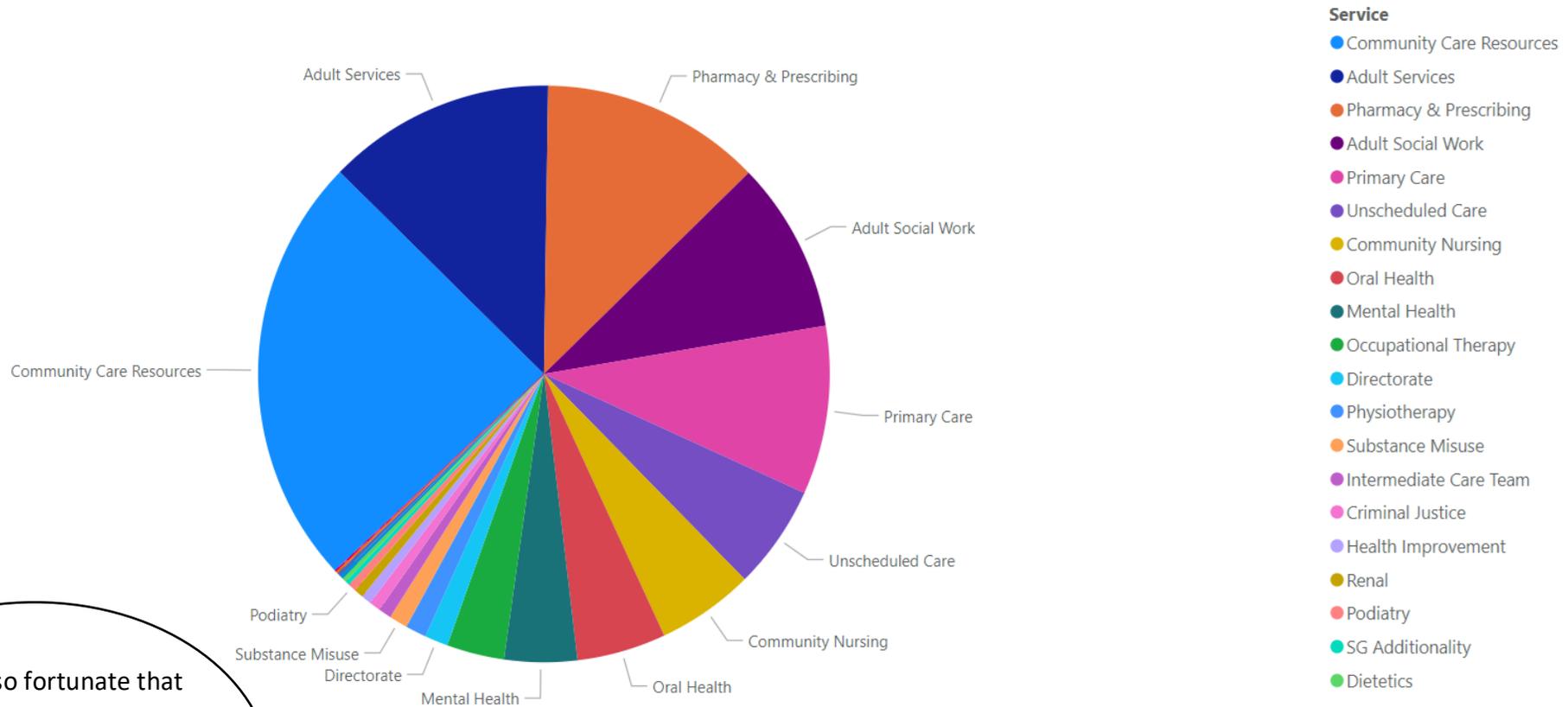
Achieving these changes will take time, but by working together, we can help manage the financial pressures and ensure that the HSCP continues to provide high quality, sustainable health and social care services in Shetland.

We will:

- ✓ Work to achieve a minimum of 3% savings each year
- ✓ Look at ways we can reduce our overspending
- ✓ Look at ways we can recruit to our local workforce

How the budget is spent

Our financial planning will continue to be challenging in 2025 – 2028. This graph shows how we currently divide our budget between our service areas:



We are also fortunate that we continue to receive ongoing funding from Shetland Charitable Trust to support some of our care services.

Our Outcomes

We set specific outcomes we want to achieve, aligning them with our goals and national targets like the National Health and Wellbeing Outcomes.

These outcomes help us to:

- **Measure effectiveness:** We use outcomes to see if our services are making a real difference in people's lives
- **Improve quality of care:** Outcomes help us identify areas for improvement and make necessary adjustments to our services
- **Be accountable:** We produce performance reports to show our progress against our goals
- **Make informed decisions:** Our outcome data helps us make informed decisions about how to use our resources and where to develop new services
- **Focus our teams:** Outcomes help our teams focus on the most important work and share best practices

What matters to you

We value the feedback we received from our community during this planning process. We heard concerns about the rate of alcohol consumption, substance use, mental health, financial hardship and loneliness in our communities. We were also encouraged to hear that people generally feel our services are good quality, with helpful and friendly staff.

Some people also expressed concern about the use of agency and locum staff, and how this may impact the consistency of care for service users and patients. While we may need to use temporary staffing solutions in some cases, we will continue to focus on recruiting, retaining, and training local staff.

Some of the suggestions and comments given to us are below;

You said: “There needs to be more NHS Dentistry”

We will: Work to improve the number of staff and capacity of our Public Dental Service

You said: “Teams should talk to each other”

We will: Ensure that our staff meet to provide handovers and share useful information

You said: “There could be more emphasis on respite to help carers”

We will: Look at opportunities to support carers including respite care

You said: “I don’t want to have to keep repeating my story”

We will: Ensure that our staff are able to share relevant information, where permission is granted.

You said: “We need a new hospital”

We will: Although we are unable to assist with this, we will support our NHS colleagues to look at how we use buildings and space.

You said: “We need to future-proof the care homes”

We will: Look at how we can ensure our care homes are able to meet needs now, and in the future.

You said: “The waiting lists are too long”

We will: Work to reduce waiting lists, and improve resources and advice you get while you wait.

Fair and accessible support for our communities



1. Fair and accessible support for our communities

Our aim is to ensure that that everyone has the opportunity to access the support they need to maintain and improve their health and wellbeing, regardless of their individual circumstances or background. We will advocate for our island community on the particular challenges we have, to help inform central Government understanding.

Reduce inequalities and stigma in health and care



We will:

- ✓ Ensure everyone in our community has fair and equal access to health and care services that meets their individual needs and desired outcomes.
- ✓ We will keep working to make sure everyone's rights are respected and protected when we provide our services.
- ✓ Use Equality Impact Assessments (EIAs) and other good equality practices to ensure our services and workplaces are inclusive and welcoming.
- ✓ We will work to reduce stigma and ensure our services are free from discrimination.

This will help:

- Reduce health inequalities
- Reduce stigma
- Improve communication
- Support unpaid carers

Provide fair and accessible care, support and information



Priority Areas

- Unpaid Carers
- Substance use
- Poverty
- Accessible communication
- Community engagement

We will:

- ✓ Ensure that everyone has access to the health, care, and wellbeing services they need including when moving between services, or when their needs change.
- ✓ Ensure our services are easy to find and use. Our services will provide clear communication so that everyone can have a say in their care and share their needs and preferences.
- ✓ Continue to develop our use of plain language without jargon in communication, this includes leaflets and reports.
- ✓ We will look to expand the information we offer in accessible formats like Easy Read and British Sign Language (BSL).
- ✓ Identify unpaid carers early on and provide them with the support and advice they need to maintain their own wellbeing while caring for others.

Unpaid Carers

Unpaid carers play a vital role in our community by providing essential care to family, friends, and neighbours who need support. We recognise the importance of supporting these carers.

As part of our commitment, we will prioritise a review and update of our Carers Strategy to ensure it continues to meet the needs of carers in our community.

Work in partnership with our communities to provide best outcomes



We will:

- ✓ Value the different perspectives within our communities, and ensure they can contribute towards our understanding of communities, local needs and the impact our services have.
- ✓ Work with our communities to build and support community led initiatives and strong networks that support local care, resilience, opportunities and address social factors.
- ✓ Engage with the Scottish Government to advocate and highlight the challenges and opportunities our island community has.
- ✓ Share our expertise with our partners, and learn from our partners, so that we can improve the health and wellbeing in our community.

Outcomes we will measure (KPI's) include:

- Carers Support Plans
- Equality Impact Assessments

Fair and accessible support for our communities projects

Person Centred Support

Taking a personal approach to care, understanding what someone needs and working together as services with them and their families to support them.

Trauma Informed Shetland

Providing support and services in a way that is sensitive to how trauma can impact an individual and their experiences. This helps to decrease some of the challenges people have in accessing help and support.

Models of care

Adapting how we deliver our services to make the most of our strengths, skills and time - including our staff and our partner agencies; so that we are effective and efficient, and can manage the demand on our services.

Carers Strategy

People who provide unpaid or informal care do an incredible job in looking after people in our communities – we will review and develop our strategy to support carers to have positive experiences, good health and wellbeing.

Improving communication

Our improving communication project looks at making communication clearer and more accessible, such as providing Easy Read versions.



2. Prevention, early intervention and maximised wellbeing

Our aim to help people to improve their lives by providing support that works for them as early as possible, to prevent future ill health.

Provide support to ensure people can lead healthy, independent lives



We will:

- ✓ Provide and support access to reliable information and helpful resources, to help people to manage their health and wellbeing in a way that works for them.
- ✓ Provide clear information about how to access support.
- ✓ Help people find the right support and services.
- ✓ Help people return home safely and quickly after leaving hospital.
- ✓ Continue to improve community mental health, alcohol and drugs use support.
- ✓ Focus on preventing problems so people don't reach a crisis.

This will help:

- Improve community health and wellbeing
- Understanding of population and risk
- Coordinate support and resources

Provide support at an early stage to enable better outcomes



We will:

- ✓ Work in partnership with third sector, charities, communities and the housing sector, to focus on prevention and early intervention.
- ✓ Recognise the valuable work of our third sector, charity and voluntary providers, and work with them to broaden support, making finding and accessing support easier.
- ✓ Work with care homes and the community to help people avoid falls and reduce injuries.
- ✓ Have open and honest conversations with people about their care needs and wishes, including end-of-life care.
- ✓ Support individuals, and their caregivers, when they are receiving end-of-life care.

Priority Areas

- Falls prevention
- Pain Management
- Self-Management
- Palliative Care
- Mental Health

Ensure people are supported to manage and improve their wellbeing



We will:

- ✓ Support people to self-manage, so that they can independently manage their own wellbeing.
- ✓ Support people in making choices about their care, and we will respect their choices.
- ✓ Listen to people and their families about their needs and preferences.
- ✓ Help people to understand their options and make informed decisions about the support they want to receive, when it is safe and appropriate.
- ✓ Help people stay healthy and safe, and help them to reduce risks.
- ✓ Use technology to improve people's ability to self-manage their wellbeing.

Outcomes we will measure (KPI's) include:

- Learning Disability Annual Health checks
- Distress Brief Interventions
- Alcohol Brief Interventions
- FAST alcohol screenings
- Drug treatment referrals
- Dementia Support referrals

Commissioning Services

It is our priority to ensure people in our community get the support and help they need. This assistance may be through our Health and Social Care Partnership services, but it may also be from Third Sector (voluntary) organisations.

We commission (contract) Third sector organisations to provide some services as they may have unique and special skill or services, specific knowledge and understanding, or may be able to better adapt a service to help someone.

We will continue to work closely with our Third sector partners to find valuable solutions for our community.

Such as;

Mind Your Head works with Shetland HSCP to provide Distress Brief Interventions (DBI), these help people who are feeling really upset or overwhelmed to feel better in the short and long term. This is quick, friendly support to help figure things out.

Shetland Care Attendant Scheme (SCAS), in partnership with Shetland HSCP, provides trained care workers to help unpaid carers by taking over some of their duties. This gives the carers a break and some time for themselves.

Shetland Community Connections and Shared Lives work in partnership with HSCP. Offering independent advice and guidance for people accessing support and innovative alternative long term support for Unpaid Carers and individuals.

Shetland Recovery Hub & Community Network and Shetland HSCP work together to provide comprehensive support for individuals and families affected by alcohol or substance use, such as providing drop in and one-to-one support, support groups and Naloxone availability.

Prevention, early intervention and maximised wellbeing projects

Healthy Lifestyle Support

Supporting people to improve their health, and avoid ill-health or complications wherever possible.
For example by becoming more active, eating better and managing stress.

Falls Prevention

Helping to decrease the risk of falls by supporting people to be stronger, more active, confident and independent in their daily lives.

Chronic Pain Management

Improve management of Chronic Pain to help improve the lives of those living with Chronic Pain.

Good Conversations

Involving people properly in their support – understanding what is important to them, and what they need to thrive.

Realistic Medicine

Fully involving people in decisions about their care and treatment. Making sure we are not wasteful, and our treatments and interventions are worthwhile and effective.

Sustainable models of care



3. Sustainable models of care

Our aim is that we use our resources efficiently to achieve the best outcomes – this includes how we use our budgets, our workforce, and our attention or time. We will work closely with our Partners, Third sector and voluntary sector so that we can find opportunities, share knowledge and skills, and develop support in our communities.

Ensure people receive health and care in the setting and location that best suits their needs



We will:

- ✓ Aim to provide timely and effective care in the most suitable location to meet individual's needs
- ✓ Ensure there is a variety of support available to accommodate different needs in the community.
- ✓ Provide support for individuals leaving hospital, including access (where appropriate) to supported living, reablement, respite, assistive technology and other services.
- ✓ Work together with hospitals to look at ways we can reduce unnecessary hospital admissions and lengthy hospital stays (delayed discharges).

This will help:

- Improve and ensure sustainable workload
- Longevity of health and care system in Shetland
- Provide information, support and care timeously
- Ensure financially sustainable services
- Reduce travel and increase accessibility of health and care



Accommodation options for people with learning disabilities, complex needs, and older adults in Shetland.

We need to look at the way we can meet the growing need for supported accommodation.

From 2025 to 2028, one of our key projects is to review a range of accommodation options. We'll look at:

- **Our current accommodation:** How it's used to support people
- **Future needs:** How we can best support people in the future

This project will help us to explore the different options, so we can:

- Understand what is possible for the future
- Make decisions in how to provide cost-effective supportive accommodation options
- Continue to support people with learning disabilities, complex needs, and older adults who can't live safely at home

Project

Look at different accommodation options

To meet demands and future needs of service users and staff.

Considerations

Sustainability and quality

Project will look at needs, costs, staffing, engagement and feedback, community, quality.

Benefits

Improved quality of life

Wellbeing, independence, reduced costs, sustainable service, staff satisfaction.

Support our staff to develop in a safe and engaging workplace



We will:

- ✓ Ensure our staff have safe and supportive work environments. Providing a space where our staff can feel comfortable in raising any concerns they have.
- ✓ Recognise excellent work, leadership, and teamwork.
- ✓ Ensure our services are informed by data and feedback.
- ✓ Support our staff to access training and development opportunities. This will help them grow their skills and knowledge.

Empower our teams so they can feel confident to make decisions and improvements.

We'll follow the human rights laws, and we will always try to learn and improve.

Priority Areas

- Social Care
- Primary Care
- Mental Health

Make good use of technology and innovations to support progress



Technology and Apps we are developing

- Improving our digital forms
- New digital App for Musculoskeletal
- Improving digital systems in our Health Care centres

We will:

- ✓ Use technology and innovation to provide excellent health and care services and improve people's outcomes.
- ✓ Offer digital ways to access services, such as remote appointments, online consultations and Apps.
- ✓ Simplify processes and reduce paperwork.
- ✓ Use data to better predict and manage demand for our services, such as improving staff scheduling and resource allocation.
- ✓ Reduce energy consumption, waste and unnecessary resource use, by improving our processes and technology use.

Outcomes we will measure (KPI's) include:

- Delayed discharges
- Technology enabled care use
- Wait lists and referrals times
- Occupancy of care homes
- Use of short breaks and respite
- Case and resource management

Sustainable models of care projects

Primary Care Redesign

Develop a Primary Care strategy for Shetland that builds on improvement work and supports workforce planning.

Accommodation Review

This project will help us develop buildings that meet the needs of our community in future.

Social Care Sustainability Review

To improve our Social Care staffing model and enhance our recruitment.

Risk Stratification

To help us understand needs, ensure our focus is on the right place, and to help us manage our service demand.

Health Intelligence

This project will provide additional data to help us understand our work, demands and future requirements.

Our Performance

We will regularly track our progress towards the goals in this Plan. This helps us see what's working well and identify any areas for improvement. We will share our findings with the IJB, the Scottish Government, and with the public through regular reports. You can find out about our IJB meetings, and watch online on our website:

<https://www.shetland.gov.uk/integration-partnership/ijb-meetings>

We measure our performance using a variety of methods, including Key Performance Indicators (KPIs). These KPIs track how well our services are improving the health and wellbeing of our community. We regularly review and update these indicators to ensure they reflect the changing needs in Shetland.

We will produce quarterly performance reports, these include both quantitative (numerical) and qualitative (descriptive) data. This allows us to understand the impact of our services and make necessary adjustments. We use this information to Plan for the future needs of our community and ensure we are providing the best possible care for everyone in Shetland.

We will also publish annual reports, showing how well we are meeting the goals set out in our Strategic Plan. They will look at our performance over the past year and compare our results to national targets for improving health and wellbeing; this includes a Core Suite of National Integration Indicators, which have been published by the Scottish Government to measure progress in relation to the National Health and Wellbeing Outcomes. These outcomes are high level statements of what health and social care partners are looking to achieve through integration.

We also produce reports on specific areas, such as equality, to monitor progress and compare our performance with other areas of Scotland. Our overall priority is to support the health, care, and wellbeing for everyone in Shetland.

Key Words and Abbreviations

Assistive technology	Technology that helps people live independently (like wheelchair ramps or special equipment).
Clinical Care Governance	This governance group focuses on continuous improvement and patient safety, helping to ensure that our patients receive the best possible care.
Commissioned services	Organisations that have been given a contract or hired to provide a specific service.
Equity and accessibility	Making sure everyone has fair and equal access to health and care services.
IJB Audit Committee	Our IJB Audit Committee helps make sure that our Health and Social Care Partnership is managed responsibly and transparently, with good financial practices and governance.
Performance	How well our health and care services are working, and if they are meeting the goals set.
Reablement	Support to help people regain skills and confidence to live independently.
Respite care	Short term care, which gives unpaid carers a break from caring for someone.

Shifting balance of care	Look at how and where we provide care; so that we ensure that people receive the right support in the right place, whether that's at home, in the community, or in hospital.
Strategic Planning Group	The Strategic Planning Group (SPG) supports the IJB with strategic planning, monitors the delivery of our ambitions and goals, as well as reviewing and providing views on new policies and strategies.
Supported living	Help with daily living in a home setting.
Sustainable/sustainability	In this Plan we use these words to mean to ensure that our services can continue to run in the future.
Third sector	Non-business and non-governmental organisations that help people and communities; such as charities, volunteer organisations and community groups.
HSCP	Shetland Health and Social Care Partnership
IJB	Shetland Integration Joint Board
KPIs	Key Performance Indicators, the way we measure our performance. These are measurable data, such as the number of people seen.
SIC	Shetland Islands Council

the 'Plan'

Shetland Integration Joint Board's Joint Strategic Plan. The Plan is also known as the Joint Strategic Commissioning Plan.

Section 42 of the Public Bodies (Joint Working) (Scotland) Act 2014

This legislation states that integration authorities (IJB's) must provide an annual performance report.

Thank you

We would like to say a big thank you to everyone who has worked with us and helped us to develop our Joint Strategic Plan. We have had a great level of support, feedback and input throughout the creation of this Plan. Thank you to our health and social care services partners, Strategic Planning Group, service users, staff, care providers and carers.



Contact Details

Visit website: www.shetland.gov.uk/social-care-health

Email: community.care@shetland.gov.uk

Write: CHSC, NHS Montfield, Burgh Road, Lerwick, ZE1 0LA

Call: 01595 74 4308

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Appendix 1

Local and National Factors

Our priority is to create the best possible community health and social care system for Shetland.

To achieve this, we work within national guidelines and legislation to ensure our services are safe, effective, and meet the highest standards. When planning our health and social care services, we carefully consider local and national strategies, alongside the legislation that we must adhere to. We also listen to the expectations of our communities, as well as the Scottish Government. We will work in collaboration with our communities, partners and other local organisations, to ensure everyone has access to the right support for their health and wellbeing.

We currently have a number of Strategies, projects and Plans in place, and more will come during 2025 – 2028, including an updated Carers Strategy. Some of these will be developed to meet local needs, others will be to meet national priorities and expectations.

To develop our Plans and projects we carefully consider all this information to ensure we are including everything that is required. We will ensure our planning looks at how to provide the best possible care while using Shetland's resources wisely.

National and Local Strategies includes:

- The Independent Review of Adult Social Care 2021
- Scotland's Digital Health and Care Strategy
- Primary Care Improvement Programme
- Getting It Right For Everyone (GIRFE)
- Alcohol and Drug Partnership Plans
- Children's services
- Housing strategies
- NHS Shetland Plans and Strategies
- Medication Assisted Treatment (MAT) standards

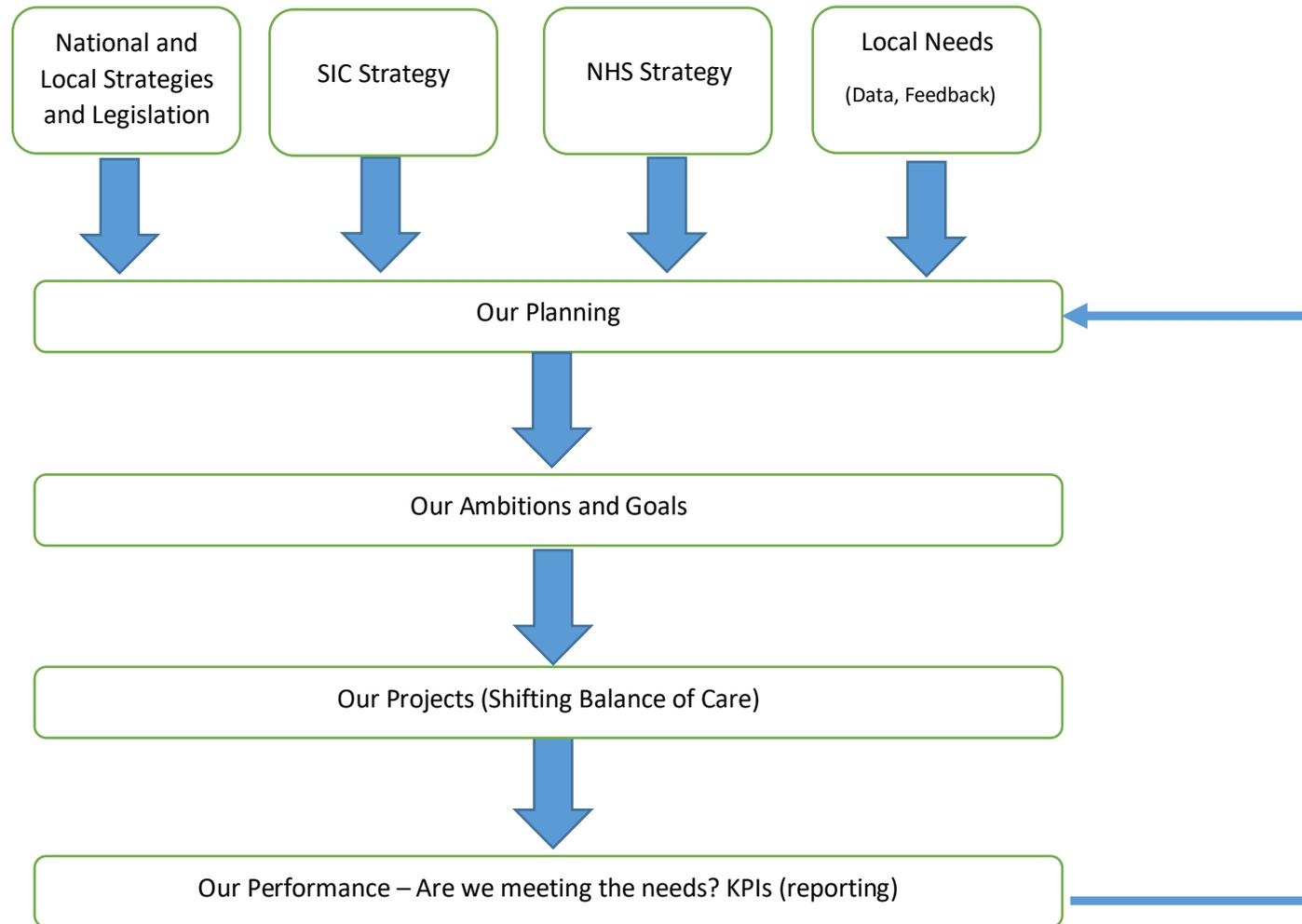
We will sensitively plan our services looking at all the available data we have, taking into consideration ways that we may be able to increase efficiencies. We will make sure that our services work well in supporting the needs of individuals, their families, unpaid carers, volunteers, staff and communities.

We will continue to look at ways to maintain the quality of our services, and to learn from lived experiences to develop and improve our services, so that they meet the changing needs of our community. Our Plans and projects will help us to ensure we have a strong and responsive health and social care system in Shetland.

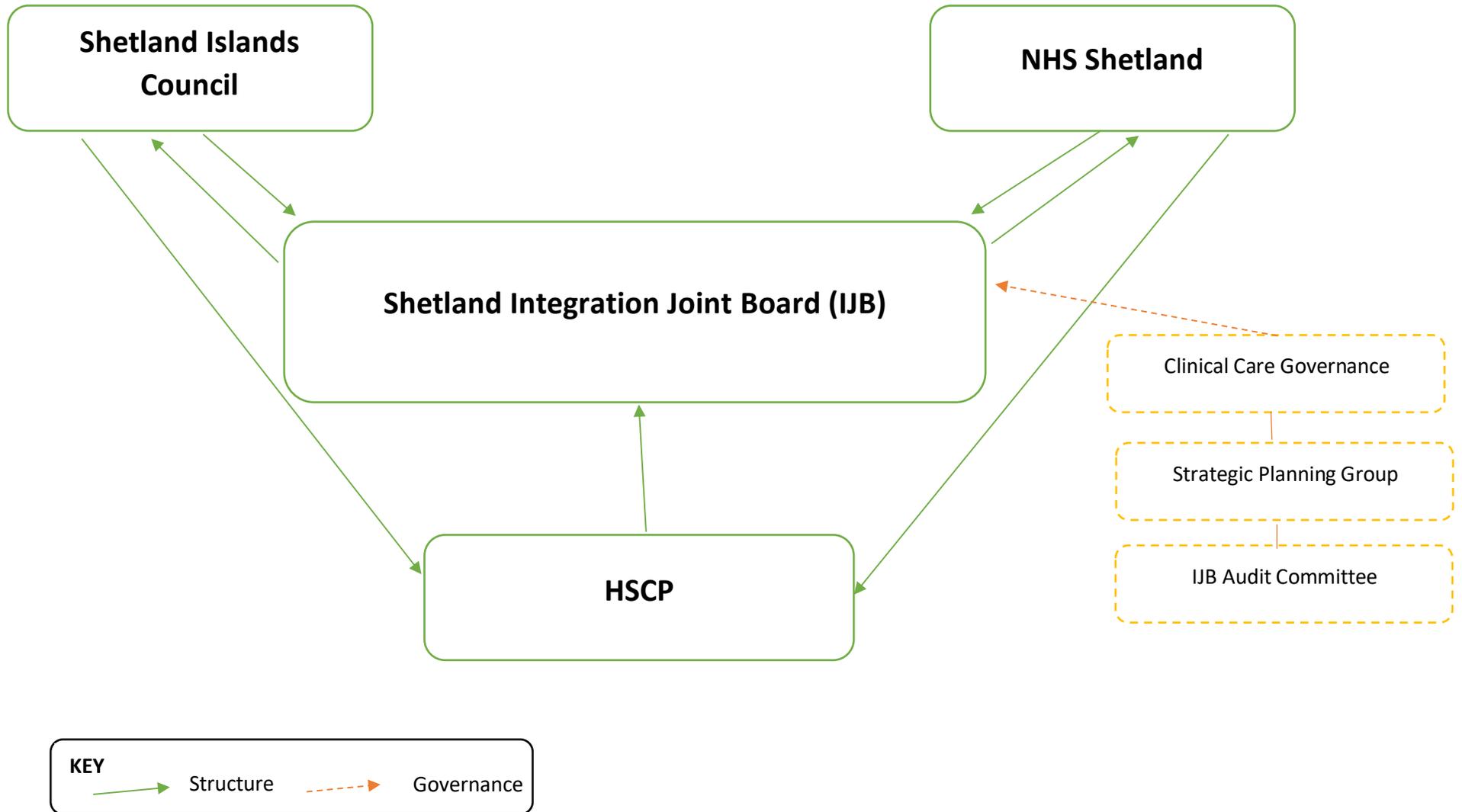
Legislation includes:

- Fairer Duty Scotland
- Equalities (Scotland) Act 2010
- Public Sector Equalities Duty
- Human Rights Act 2006
- Equalities & Islands Impact Assessment
- Community Empowerment (Scotland) Act 2015
- National Performance Framework
- Carers (Scotland) Act 2016
- Self-Directed Support) (Scotland) Act 2013

How we develop our Strategic Plan



Our structure and governance routes





Shetland Health and Social Care Partnership Joint Strategic Plan

2025-2028



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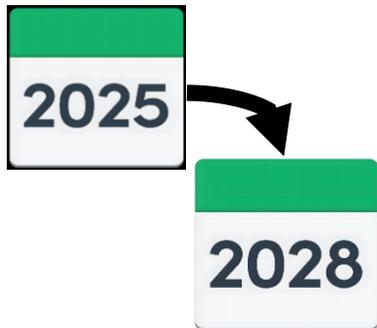
Introduction



This is a plan about community health and social care services in Shetland and what we will do:

- to provide health and care
- to work with the community
- to support our staff
- to make best use of the money we spend
- to improve access to our services
- to provide services in the future

This Plan is from April 2025 to March 2028.



Who we are



We call this the Shetland Health and Care Partnership. This is sometimes shortened to Shetland HSCP.

The Partnership provides community health and care services, this includes:



- Social Work
- Social Care
- Mental Health
- Doctors
- Dental
- Community Nursing
- Physiotherapy

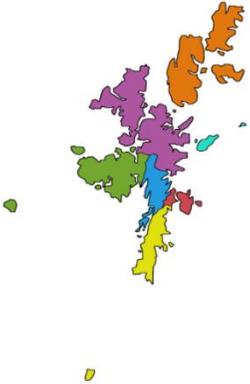
What we have



Shetland has a small population of around 23,000 people.



Shetland has one hospital, several health centres, dental clinics, care centres, and other support services.



Our services are mainly provided in local areas, we call this localities.

We divide Shetland into 7 localities.

Each has its own group who work together to help with health, care and wellbeing in the local area.

Health and Care in Shetland



People are living longer.

There are now more older people than before, and fewer young people.



Older people often need more health and social care.

They may need help from doctors, nurses, and other health and care staff.



There are more people with conditions like learning disabilities and autism.

Some people have health and care needs that are becoming more complex.



Because of the COVID-19, some health and care services had to change.

Some services reduced or stopped, and people may have had to wait longer for the care they needed.



Some people became very unwell with COVID.



We need to support people and our teams that have been affected by the COVID-19 pandemic.

The difficulties we have

Our budget shows the money we have and the things that we need to buy.



We have less in our budget than we need to keep providing the services as we currently do.

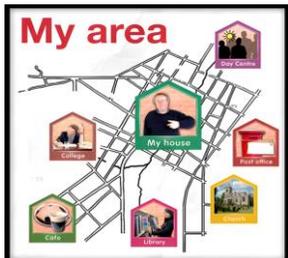
This means we have less money to spend on the things we need.

We need to save money and use it in the best way that we can.

We find it hard to get new staff for our jobs.



We pay a lot of money for staff including temporary staff.



We will look at how we can get more local and permanent staff.

What we want to do



We have 3 big things we are working to achieve.

These are called our ambitions.



To achieve those 3 big ambitions, we have broken them down into smaller goals.

These smaller goals are like steps we need to take to reach the bigger ones.



Our teams will work together to help us to achieve our goals and ambitions.

Our ambitions



Accessible

Ambition 1: **Fair and accessible support for our communities.**

We will make sure everyone in our community can get the health and care support they need.



Ambition 2: **Prevention, early intervention and maximised wellbeing.**

We will focus on finding ways to help people to prevent ill health or worsening health.



Ambition 3: **Sustainable models of care.**

We will find ways to provide care now and for the future.

Fair and accessible support for our communities



We will help to make sure that everyone can get the support they need.

We will make our services helpful, so no-one needs to be worried to ask for help.



We will work to make our health and care services easy to find and easy to use.

We will work to make our communication, such as leaflets and website, easy to understand.



We will help carers by providing them with support and information.

We will listen to people in our community so we understand what people need.

Prevention, early intervention and maximised wellbeing



We will help people to find the right information or service they need.

We will help people to understand their options and make plans.



We will support people to live healthy and safely at home.

We will support people to take control of their health and wellbeing.



We will support people to stop or reduce ill health.

We will support people who want help with mental health, alcohol or drug use.

Sustainable models of care



We will work to provide care in the right place. This could be at home or in another homely place.

We will look at different places and ways we can provide care.



We will work to help people so they don't have to stay extra time in hospital.

We will support our staff so they can learn and work in a positive work place.



We will use technology, such as computers, tablets and mobile phone apps, to improve our services.

We will work to reduce waste and be more environmentally friendly.

What happens next



Our teams will work hard to make sure our services work well and support everyone.



We will write reports to tell people how things are going.

We will ask people to tell us if things went well or if they had a problem.



If you want to learn more or see our full Strategic Plan

- Visit our website: www.shetland.gov.uk/social-care-health
- Email us: community.care@shetland.gov.uk
- Write to us: CHSC, NHS HQ Montfield, Burgh Road, Lerwick, ZE1 0LA
- Call us: 01595 74 4308

Engagement activity for Joint Strategic Plan 2025-2028

1 The approach taken

- 1.1 A collaborative approach was taken towards the engagement and consultation for the development of the Strategic Plan 2025-2028. There has been involvement by key stakeholders in the stages throughout the process, a summary of activity and the stages are shown in the table on page 2.
- 1.2 During the process of drafting the Plan, information was gathered from a variety of sources as well as feedback from our stakeholders. This information was collected to enable the Health and Social Care Partnership Plan to understand the local needs, the impact of population change and Covid-19, to hear the lived experience of our service users, and to understand the community and our Partners priorities.
- 1.3 The development of this Plan, and the collection of information to support its development, came at a time of high consultation activity, with a number of local and national consultations already being undertaken, particularly using online and paper formats. Also at this time, the Equalities Monitoring and Outcome work was underway, which also required consultation work. To enable sufficient useful information to be provided and reduce the possibility of consultation fatigue, a variety of approaches were adopted to collect feedback including working closely with our Community Planning Partners, on some independent and joint information gathering activities, which was of benefit to both processes.

2 The role of the Strategic Planning Group

The Strategic Planning Group (SPG) meet regularly to monitor and review progress of the HSCP against the Joint Strategic Plan and measurable outcomes, and they hold a central role in the development and finalising of the Joint Strategic (commissioning) Plans. During phase 1 a review was undertaken of the SPG and other stakeholder email distribution lists to ensure that these were up-to-date and that the contacts were able to participate in the engagement activities for the Plan. The SPG reviewed the current Strategic Plan, and they contributed via various meetings to the development of the draft and final drafts of the Plan.

3 Bringing the expertise together

A MS Teams group was created to act as a strategic work engagement channel to enable staff to contribute to the work, as an online Working Group. This supported the planning by enabling key officers within the HSCP a forum for them to provide essential information to help develop the Plan. This approach was taken to make best use of Officers time, as they could input information when they had capacity, and reduced duplication of effort.

4 Hearing from the Public

Engagement sessions were held in the Library, in a local care home, in a Community Hall, and in the premises of some local organisations. In

In addition to these engagement sessions, an email survey was sent by email to a number of contacts using key stakeholder distribution lists, and the Plan was discussed at a number of Team meetings. Information was gathered in various formats including; by group and individual discussions, using a feedback form and box, emails, and meeting agenda/minutes. Some of the feedback sessions specifically focussed on gathering information from people who use the Health and Social Care services but for whom providing information using traditional means may be a barrier. These sessions were tailored to suit the individual's needs, including speaking on individual basis in a comfortable surrounding or using a more visual approach. Other sessions were held in a more public space, allowing a wide range of participant's to provide information, such as meetings, and having a stall in the main section of Lerwick library.

5 Summary of the activity information table

The development of the Joint Strategic Plan was broken down into 3 phases, with a timeline created to enable sufficient time to be given for engagement work;

Phase	Some key dates and actions within each phase	
1) Review of current and Planning of new Joint Strategic Commissioning Plan	07/11/2023	Project started, timeline and project outline created
	09/01/2024	Teams reviewing Plan and guidance
	25/01/2024	Strategic work group engagement channel created
	11/04/2024	Review of Strategic Plan with Strategic Planning Group (SPG)
November 2023 – April 2024		
2) Engagement and development of first draft for Joint Strategic Plan	20/06/2024	Planning and Strategic Priorities discussed with SPG
	10/09/2024 to 18/12/2028	Community focus engagement groups held (some held jointly with Community Partnership) – groups included Library, care home, COPE, Ability Shetland
	26/09/2024	Engagement with IJB (IJB Seminar)
	03/10/2024	Strategic Plan engagement with Strategic Planning Group
April 2024 – December 2024	28/10/2024	Started work on Easy Read (engage/learn)
3) Refining and final development of new Joint Strategic Plan	22/01/2025	Engagement with SPG on Plan progress
	07/02/2025	Engagement with IJB (IJB Seminar) on Plan progress
	12/02/2025 to 28/02/2025	Wider engagement of draft Plan, including Members, NHS Board, Third Sector, IJB, SPG, and staff.
	03/03/2025 to 07/03/2025	Report and final draft of Plan being prepared for IJB board meeting on 19 th March 2025.
January 2025 – March 2025		

Equality Impact Assessment (EIA)

Joint Strategic Plan 2025-2028



Date EIA completed: 24/02/2025



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Introduction



We have completed this Equality Impact Assessment or EIA, to consider how our work might affect different people.

We want to make sure everyone is included and treated equally, and that we are following the law.



We use an EIA to help us check for fairness before we make any final decisions.

An EIA helps us to find any problems this work may cause for equality.



We use the EIA to help us to look at any solutions we can use to help to make our work fairer.

We want to make sure no one is left out or treated unfairly because of who they are.



In an EIA we must look at 9 Protected Characteristics. These are different ways people can be grouped:

Age, Disability, Gender Reassignment, Marriage and Civil Partnership, Pregnancy and Maternity, Race, Religion or Belief, Sex, Sexual Orientation.

The work being looked at



Title of the work being looked at:

Shetland Health and Social Care Partnership Joint Strategic Plan ('the Plan') 2025-2028.

Brief description of the work, its goals and purpose:

The Plan aims to ensure that health and care services in Shetland work well for everyone; providing fair access to care, delivering the right care in the right place, and improving overall health and wellbeing. This includes providing services in a cost-effective and sustainable way.



People who have been involved or consulted with:

Our community and community groups (including COPE, Ability Shetland, Shetland Library), Strategic Planning Group, HSCP Staff, Shetland Community Planning, NHS Board Members and Elected members.



Information that has been used to assess the impact of the policy:

Equalities Mainstreaming report, Equality Data, Health and Care Experience data, Strategic Plans and Strategic Needs Assessments, Legislation and guidance documents.



Opportunity to improve equality



Does this work help to stop discrimination?

The Plan discusses how services will make sure that people, regardless of their background, have equal access to services.

Teams will work to reduce stigma and ensuring that health and care services are free from discrimination.



Does this work help to ensure everyone has fair and equal chance (advancing equality of opportunity)?

One of the main ambitions of the Plan is to ensure services are fair and accessible to everyone. The Plan discusses ways this will be achieved including access to information, improving communications and working with communities.



Does this work help people get along and work well together (affect good relations)?

A main focus throughout the Plan is 'working together'. The Plan discusses working together, as a team, with Third sector, with Partner organisations, and with the community.

During the creation of the Plan, people from the community, and from health and care services, came together to provide their suggestions for the Plan.

The impacts for Age



Protected Characteristic – AGE

A person belonging to a particular age (for example 32 year olds) or range of ages (for example 18 to 30 year olds)



Any identified positive impacts:

The Plan focuses on improving health and wellbeing across all ages.

Services will be planned and reviewed taking into consideration local needs to ensure services are accessible and fair for all age groups.



Any identified negative impacts:

Some services that may be based in Lerwick can be more difficult for some age groups (such as those over 65 years old) to get to if they live in other areas, as transport options may be limited.



Things we will do or changes we will make to ensure fairness:

Use new technology to improve accessibility, where appropriate.

Work with other organisations (such as Charities and Third Sector) and the community to look at ways we can improve accessibility.

The impacts for Disability

Protected Characteristic – Disability

If someone has a physical or mental challenge.

A person has a disability if she or he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.



Any identified positive impacts:

The Plan discusses support that will be given to improve health and ensure good accessibility to services; such as providing information in Easy Read and British Sign Language, and providing Learning Disability Annual Health Checks.



The Plan provides information on the care accommodation project, to support a wide variety of people who may need this assistance.

Any identified negative impacts:

None identified.



Things we will do or changes we will make to ensure fairness:

Provide the Strategic Plan in an accessible format, such as Easy Read, and provide opportunity to have the Plan or parts of it made available in other formats if required.



The impacts for Gender Reassignment

Protected Characteristic – Gender Reassignment



If someone is changing or has changed their gender.

Where a person undergoes, or proposes to undergo, a process for the purpose of reassigning their sex.

Any identified positive impacts:

The Plan focusses on improving equality, ensuring fairness, reducing stigma and discrimination. The Plan also discusses how Trauma Informed approach will be taken. This may provide a positive impact. For people who have concerns about experiencing, or who have previously experienced, discrimination.



Any identified negative impacts:

None identified.



Things we will do or changes we will make to ensure fairness:

Ensure staff have access to appropriate training opportunities to support understanding of stigma and discrimination, and Trauma Informed approach.



The right to be treated fairly

The impacts for Marriage and Civil Partnership

Protected Characteristic – Marriage and Civil Partnership



If someone is married or is in a similar legal relationship.

Marriage is a union between a man and a woman or between a same-sex couple. Same-sex couples can also have their relationships legally recognised as Civil Partnerships.



Any identified positive impacts:

The Plan focusses on improving equality and ensuring fairness for everyone, regardless of marital or partnership status.



Any identified negative impacts:

None identified.



Things we will do or changes we will make to ensure fairness:

None identified.



The impacts for Pregnancy and Maternity



Protected Characteristic – Pregnancy and Maternity

If someone is pregnant or has just had a baby.

Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth



Any identified positive impacts:

The Plan discusses improving health and wellbeing, including support with alcohol and drug use, early intervention and prevention work. There is a focus on improve accessibility to health services. By improving access to health services and providing support for improving overall health, this can have a positive impact in reducing risks during pregnancy and maternity.



Any identified negative impacts:

None identified.



Things we will do or changes we will make to ensure fairness:

None identified.



The impacts for Race

Protected Characteristic - Race

A race is a group of people defined by their colour, nationality (including citizenship) ethnicity or national origins.



Any identified positive impacts:

The Plan focusses on improving inclusivity, equality, ensuring fairness, reducing stigma and discrimination. This means everyone should receive fair and respectful treatment, regardless of their racial background.



Any identified negative impacts:

None identified.



Things we will do or changes we will make to ensure fairness:

Ensure staff have access to appropriate training opportunities to support understanding of different cultural backgrounds and ways to reduce discrimination.



The impacts for Religion or Belief



Protected Characteristic - Religion or Belief

Religion refers to any religion, including a lack of religion.

Belief refers to any religious or philosophical belief and includes a lack of belief.



Any identified positive impacts:

The Plan focusses on improving equality, ensuring fairness, reducing stigma and discrimination.

The development of information with use of more everyday language and pictures may be useful where English is a second language.



Any identified negative impacts:

None identified.



Things we will do or changes we will make to ensure fairness:

None identified.



The impacts for Sex

Protected Characteristic - Sex

If someone is male or female.



Any identified positive impacts:

Planning of services will be taken in a sensitive manner and will consider fairness and equality.



Any identified negative impacts:

None identified.



Things we will do or changes we will make to ensure fairness:

Will look at opportunities to provide information and support to improve understanding of health topics that may affect women or men. This will help provide better understanding within the community.

The impacts for Sexual Orientation



Protected Characteristic – Sexual Orientation

Who someone is attracted to.

Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.



Any identified positive impacts:

The Plan focusses on improving equality, inclusion, ensuring fairness, reducing stigma and discrimination.



Any identified negative impacts:

None identified.



Things we will do or changes we will make to ensure fairness:

Ensure staff have access to appropriate training opportunities to look at ways to reduce discrimination.

Impacts for Low income households



Low income / income poverty

Those who cannot afford to maintain regular payments such as bills, food, clothing payments



Any identified positive impacts:

The Plan aims to ensure services are accessible to everyone.



Any identified negative impacts:

Some decisions may be needed to ensure services remain sustainable. This could mean some services could change.



Things we will do or changes we will make to ensure fairness:

Plan services in a sensitive manner, ensuring information is provided to enable understanding of any changes made to services.

Impacts for Low and/or no wealth



Low and/or no wealth

Those who can meet basic living costs but have no savings for unexpected spend or provision for the future



Any identified positive impacts:

The Plan aims to ensure services are accessible to everyone.



Any identified negative impacts:

Some decisions may be needed to ensure services remain sustainable. This could mean some services could change.



Things we will do or changes we will make to ensure fairness:

Plan services in a sensitive manner, ensuring information is provided to enable understanding of any changes made to services.



Impacts for Material deprivation



Material deprivation

Those who cannot access basic goods and services, such as repair/replace broken electrical goods, heat their homes or access to leisure or hobbies.



Any identified positive impacts:

Services will work together with other organisations and communities; this could mean people who speak with a health or care professional may be referred or provided information about how to access other services that may be able to assist them with these concerns.



Any identified negative impacts:

None identified.



Things we will do or changes we will make to ensure fairness:

None identified.



Impacts for Area deprivation



Area deprivation

Areas with a lack of resources, such as;

- financial (low income, poverty, unemployment)
- access to services (limited access to healthcare, education, transportation)
- poor living environment and safety (poor housing, pollution, high crime).



Any identified positive impacts:

The Plan discusses working with communities and ensuring services are in the best location. This helps access, especially for those who live in areas with less transport options. Options such as digital appointments, may reduce travel and pollution.



Any identified negative impacts:

The Plan discusses use of digital Apps and other technology, this may be more difficult for people in some areas where there is poor internet connectivity.



Things we will do or changes we will make to ensure fairness:

Some areas have less transport options and poor internet or phone connections. When planning services, access for people who are struggle or can't use these options will be considered, and suitable alternatives will be offered to ensure everyone can access the services they need.

Impacts for Socio-economic



Socio-economic background

Social class, such as parents' education, employment and income.



Any identified positive impacts:

The Plan discusses support for staff wellbeing and an aim to have a strong, stable and resilient local workforce.

The Plan considers support for Carers, wellbeing, mental health, alcohol and drug use, which may enable people to improve their financial and employment factors, and to reduce stress.



Any identified negative impacts:

Some decisions may be needed to ensure services remain sustainable. This could mean some services could change.



Things we will do or changes we will make to ensure fairness:

None identified.



What happens next



How work and any impacts will be monitored and reviewed:

The HSCP will plan and monitor services, work in partnership with the community, and use resources wisely



Who will be responsible for monitoring, reviewing and making any changes:
Planning and Performance Team



Decision:

Continue - Work is to continue without making change.



Decision authorised and approved by
(name, job title and date of approval):

Josephine Robinson,
Chief Officer Shetland IJB.
27/02/2025

Contact details

If you want to learn more or to speak with us



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