



Clackmannanshire & Stirling Strategic Commissioning Plan 2023-2033

Three Year Review 2023 - 2026

"Plan on a Page" 2023 - 2033



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Our Vision

Enabling people in Clackmannanshire & Stirling to live full and positive lives within supportive communities by working together and promoting wellbeing.



Our aim is to ensure care and support is person-centred, based on fairness, respect, equality, dignity and autonomy.

Foreword

The agreed Strategic Commissioning Plan 2023 - 2033 is an ambitious ten-year plan. This is the third Strategic Commissioning Plan for Clackmannanshire and Stirling Integration Joint Board.

This Strategic Commissioning Plan Review outlines the Integration Joint Board's priorities for the coming three years. These priorities were identified through the review process and reflect the changing environment of the Health and Social Care Partnership (HSCP); need and demand; financial position and the ongoing delivery of care and support for the people of Clackmannanshire and Stirling.

Since 2023, the foundation of strong partnership working has continued to grow. Our Strategic Commissioning Plan continues to set out our objectives based on empowering people and our communities to really make a change to health and social care and, in turn, to the lives of people living in Clackmannanshire and Stirling.

Between 2023 and the start of 2026, there has been an ongoing commitment to the delivery of a programme of transformation and change to meet the needs of our population. This has ensured we focus on the well-being of our staff, carers and providers as well as the needs and demands of our communities, whilst continuing to provide high quality care and support to our citizens.

The delivery of our Strategic Commissioning Plan priorities continues to invite individuals and communities to be truly involved in shaping and delivering health and social care services in Clackmannanshire and Stirling. Focusing on what is important for an individual's health and wellbeing, prevention, early intervention and self-management.

The review was developed by people who use health and social care services, our communities and the people who provide services. These conversations have shaped the delivery of our priorities as well as creating the conditions for continued conversations across our communities, with our staff and in partnership with third and independent sector providers.

The continued delivery of a ten-year Strategic Commissioning Plan demonstrates our commitment to our people and staff and services. We will continue to be proactive and innovative in how we operate within our environment and work to shape the future of health and social care in Clackmannanshire and Stirling, as well as nationally.

Councillor Scott Famer
Chair Integration Joint Board

Our agreed Strategic Themes 2023 - 2033

Our priority is to provide health and social care services that support people to meet their outcomes, high quality services, fulfil the needs of people and help individuals to live independent and fulfilling lives.

Strategic Theme 1 - Prevention, early intervention and harm reduction

Working with partners to improve overall health and wellbeing and prevent ill health. Promoting positive health and wellbeing, prevention, early interventions and harm reduction. Promoting physical activity, reduce exposure to adverse behaviours. Providing the right levels of support and advice at the right time, maintaining independence and improving access to services at times of crisis.

Strategic Theme 2 - Independent Living through choice and control

Supporting people and carers to actively participate in making informed decisions about how they will live their lives and meet their agreed outcomes. Helping people identify what is important to them to live full and positive lives and make decisions that are right for them. Coproducing and design of services alongside people with lived experience who have the insight to shape services of the future.

Strategic Theme 3 - Achieving Care Closer to Home

Shifting delivery of care and support from institutional, hospital-led services towards services that support people in the community and promote recovery and greater independence where possible. Investing in and working in partnership with people, their carers and communities to deliver services. Improving access to care, the way services and agencies work together, working efficiently, improving the customer journey, ensure people are not delayed in hospital unnecessarily, co-design of services, primary care transformation and care closer to home.

Strategic Theme 4 - Supporting empowered people and communities

Working with communities to support and empower people to continue to live healthy, meaningful and satisfying lives as active members of their community. Being innovative and creative in how care and support is provided. Supporting unpaid carers; helping people live in their local communities, access to local support, dealing with isolation and loneliness. Planning community supports with the third sector, independent sector and housing providers. Neighbourhood care, unpaid carers, third sector supports.

Strategic Theme 5 - Reducing loneliness and isolation

Our society is changing, accelerated by the pandemic and there is increasing risk of social isolation and loneliness, both of which can impact a person's physical and mental wellbeing. We will work with communities to support local communities to build connections. Building preventative approaches and early interventions around changing the narrative towards loneliness and social isolation and find new ways for people to ask for help without feeling embarrassed.



Changing Context 2023 - 2026

Although the Strategic Commissioning Plan is a requirement set by the Public Bodies (Joint Working) (Scotland) Act 2014, the focus of our Strategic Commissioning Plan is integrated working, partnership opportunities and co-production with those with lived and living experience to deliver a quality system of care and support. This aligns to the spirit and principles of the legislation, creating the conditions for integrating adult health and social care, to ensure a consistent provision of quality, sustainable care services for the people in Scotland who need joined-up support and care, particularly people with multiple, complex, long-term conditions.

This review of the Strategic Commissioning Plan has ensured that the HSCP is reflecting its priorities with updates in line with to changes to the national and local context, by aligning to refreshed legislation as well as national and local frameworks. There is a need to continue to review the National Health & Wellbeing Outcomes in line with changes over the last three years. Looking ahead to 2026 onwards there is a need to consider the impact of the launch of the new National Social Work Agency and national NHS Operational Priorities for 2026/2027.

National Changes

Care Reform (Scotland) Act 2025

The Care Reform (Scotland) Act was passed on 10 June 2025.

The Scottish Parliament has approved the Care Reform (Scotland) Bill, which aims to transform social care across Scotland. Key changes include:

- Creation of a **National Chief Social Work Adviser** role to provide professional leadership and champion the sector.
- Establishment of a **National Social Work Agency** to oversee social care.
- Enhancement of the **National Care Service** to improve sustainability, efficiency, and quality.
- Introduction of **human rights** into Scots law and improvements to social security payments for disabled people and unpaid carers.
- Focus on **fair funding** for third sector organisations and addressing budget shortfalls in local authorities and Integrated Joint Boards.
- These changes are part of broader efforts to ensure high quality care is delivered consistently across Scotland, addressing the needs of more than 200,000 people accessing care each year. The reforms are being made in the face of challenges such as changes to Employer National Insurance Contributions and migration, which impact care delivery.

NHS Scotland Operational Improvement Plan April 2025

The Plan sets out actions to improve aspects of healthcare delivery, focusing on four areas that the Scottish Government have committed to deliver. Helping to protect the quality and safety of care by supporting increased investment for health and social care in the 2025-26.

These key areas are:

- Improving access to treatment
- Shifting the balance of care
- Improving access to health and social care services through digital and technological innovation
- Prevention – ensuring we work with people to prevent illness and more proactively meet their needs.

Scotland's Population Health Framework June 2025

The aim of using the Framework is to improve Scottish life expectancy whilst reducing the life expectancy gap between the most deprived 20% of local areas and the national average by 2035.

There are five key interconnected prevention drivers of health and wellbeing:

- A prevention Focused System
- Social and Economic Factors
- Places and Communities
- Enabling Healthy Living
- Equitable Access to Health and Care

The Framework also identifies two initial evidence-based priorities – embedding prevention in our systems and improving healthy weight.

Core Mental Health Standards September 2023

Scotland established core mental health standards aimed at improving the quality of mental health services, ensuring that individuals receive the support they need in a person centred and trauma informed manner.

The Scottish Government has developed core mental health standards as part of its broader Mental Health and Wellbeing Strategy. These standards are designed to enhance the quality of mental health services across Scotland, ensuring that individuals, families, and carers know what to expect from mental health services. The key aims of these standards include:

- **Person-Centred Care:** ensuring that services are tailored to meet the individual needs of patients, incorporating trauma informed approaches.
- **Quality Assurance:** establishing clear expectations for service delivery to improve experiences and outcomes for those using mental health services.
- **Accessibility:** aiming to reduce unwarranted variations in the quality of care and ensuring that everyone, regardless of their background, can access appropriate support.

National Psychology Standards

Scottish Government's Psychological Therapies and Interventions Specification 2023 is informed by the principles of the Mental Health and Wellbeing Strategy. It outlines:

- What people should expect if they need a psychological therapy or intervention
- What services and teams should do to improve the delivery of psychological therapies and interventions.

Local Changes

Strategic Inspection 2024 - 2025

On 8 April 2024, Clackmannanshire and Stirling IJB received notification from the Care Inspectorate and Health Improvement Scotland that they would be undertaking a joint inspection of Adult Services in the HSCP. There was a focus of the joint inspection on adults living with mental illness (under the age of 65) and their unpaid carers.

Inspection Question: How effectively is the partnership working together, strategically and operationally, to deliver seamless services that achieve good health and well-being outcomes for adults?

Second theme: People living with mental illness

Specific issues for the partnership:

- Unique challenges due to partnership make-up – only partnership in Scotland where there are two local authorities
- Delay in delegating specialist mental health services had an impact on the functioning of the partnership.
- Important weaknesses were identified as part of the inspection process; therefore, inspectors will arrange a follow up review at some point in the next 12 months.

An Improvement Plan was developed with partners and stakeholders in December 2024. A Steering Group was established to oversee the implementation of the Plan to deliver change and modernisation and in preparation of a follow-up visit from the Care Inspectorate in 2026 - 2027.

Healthcare Improvement Scotland December 2025

Healthcare Improvement Scotland undertook an unannounced Inspection on Mental Health Service's Safe Delivery of Care Inspection. The inspection considered the factors that contribute to the safe delivery of care; 1) observe the delivery of care within the clinical areas in line with current standards and best practice; 2) attend hospital safety huddles; 3) engage with staff where possible, being mindful not to impact on the delivery of care; 4) engage with management to understand current pressures and assess the compliance with the NHS board policies and procedures, best practice statements or national standards, and; 5) report on the standards achieved during our inspection and ensure the NHS board produces an action plan to address the areas for improvement identified. An Improvement Plan has been developed.

Forth Valley's Mental Health & Wellbeing Strategic Plan 2025-35

The Strategy represents the shared commitment of partners to work together to improve the mental health and wellbeing of everyone who lives in our communities, across all ages and stages of life. It is a strategy for the whole population, shaped by the voices of those who use our services, and informed by national policy, local needs assessments, and the lived experiences of individuals, families, and carers. We recognise that there is a need for change. Too many people still face barriers to accessing the right support at the right time. This Strategy sets out a clear direction for how we will work together to build a system that is more joined-up, preventative, and person-centred.

Changes in Strategic Context 2026

The Strategic Commissioning Plan links and contributes towards the wider outcomes and priorities. This includes the [United Nations Sustainable Development Goals](#) ; [Scottish Government's National Performance Framework](#) and [National Health and Wellbeing Outcomes](#). We also contribute towards the priorities of Clackmannanshire Council, NHS Forth Valley and Stirling Council and other local Partnerships.

The policy landscape is continually evolving noting below the changes to legislation, strategy and policy.

Delivery of health and social care services in Clackmannanshire and Stirling reflect and align to the national and local policy environment and it is important that we are flexible and open to these changes.

National Context		Local Context
Legislation & Policy	Strategies & Guidance	Strategies & Guidance
Care Reform (Scotland) Act 2025	NHS Scotland Operational Improvement Plan sets out actions to improve aspects of healthcare delivery. 2025	Clackmannanshire Council
New National Living Wage and National Minimum Wage rates 2026	Scotland's Population Health Framework June 2025	Clackmannanshire's Wellbeing Economy Local Outcome Improvement Plan 2024-34
Scottish Government National Performance Framework	New National Drug Mission 2021	Be the Future Corporate Priorities for 2026/27
National Health and Wellbeing Outcomes	Preventing Harm, Promoting Recovery: Scotland's Alcohol & Drugs Strategic Plan 2026 – 2035	NHS Forth Valley
Social Work (Scotland) Act 1968	National Clinical Strategy for Scotland	NHS Forth Valley Anchor Plan 2023 – 2026
Community Care and Health (Scotland) Act 2002	Realising Realistic Medicine	NHS Forth Valley Annual Plan 2025 – 2026
Social Care (Self-directed Support) (Scotland) Act 2013	Health and Social Care Standards	Forth Valley's Mental Health & Wellbeing Strategic Plan 2025-35
Public Bodies (Joint Working) (Scotland) Act 2014	A Fairer Healthier Scotland	NHS Forth Valley Population Health & Care Strategy 2025 – 2035
Community Empowerment (Scotland) Act 2015	Digital Health and Social Care	Stirling Council
Carers (Scotland) Act 2016	SDS Framework of Standards	Thriving Stirling
Social Security (Scotland) Act 2018	Independent Review of Adult Social Care	Community Planning Partnership: The Stirling Plan
2018 General Medical Services Contract in Scotland	Scottish Government Strategic Framework	Third Sector strategic plans
Housing to 2040		Independent Sector
		Falkirk Council

Budget Context

The delivery of this Plan has been influenced by the following challenges we face within our operating environment and how we will work to resolve them:

- Budget pressures and impact of the cost of living crisis
- Flexibility of care and support
- Service modernisation and transforming care
- Predicted demographic changes & burden of disease, Place based activity and environmental impacts
- Resilience of communities and workforce
- Engagement, participation and empowerment
- Supporting change with partners and stakeholders

The financial outlook for resources to public services is challenging and the HSCP must continue to deliver the best services possible within constrained resources and significant financial pressures. To be financially sustainable, we need to carefully examine, transform and modernise the services we deliver. The aim is to continue to provide safe, effective and financially sustainable services against the backdrop of increasing demand and costs to deliver improved outcomes for the partnership population. We need to focus investment of our resources on local and national priorities while achieving Best Value.

The agreed Delivery Plan 2024 - 2027 lays out the detail of our service modernisation, change and transformation to meet changing need and demand across communities.

The overarching priority for the HSCP continues to be to support people to live in their own homes or homely settings, independently for as long as possible. Achieving this means we need to transform through codesign and coproduction, putting people and outcomes first and thinking in new ways will lead this.

Functions delegated to Clackmannanshire & Stirling IJB and Hosted Services

The Health and Social Care Partnership is responsible for planning and commissioning integrated services and overseeing their delivery. These services cover adult social care, adult primary and community health care services and elements of adult hospital care.

We have a strong relationship with acute health services and wider Community Planning Partnerships, the third sector and independent sector to jointly deliver flexible locality based services. Planning and designing outcome focused care and support in collaboration with communities and people with lived and living experience.

NHS services delegated to HSCP

- District Nursing
- Substance addiction or dependence services
- Allied Health Professional services in outpatient clinics/out of hospital
- Public dental services/Primary medical services including out of hours, general dental, Ophthalmic & Pharmaceutical services
- Geriatric medicine and palliative care out with hospital settings
- Community Mental Health & Learning Disability services
- Continence and kidney dialysis out with hospital
- Health Improvement Services

Clackmannanshire & Stirling Council services delegated to HSCP

- Social work services for adults aged 16+
- Services and support for adults with physical disabilities
- Services and support for adults with learning disabilities
- Mental health services
- Drug and alcohol services
- Adult Protection
- Carers support services
- Community Care assessment teams
- Support services
- Care home services
- Adult Placement services
- Health improvement services
- Aspects of housing support and assistance including aids and adaptations
- Day services
- Respite provision
- Occupational therapy, equipment and telecare

Hosted Arrangements

Hosted Services refers to an arrangement where one Integration Joint Board (IJB), through its Chief Officer and HSCP, assumes operational management responsibility for a specific service on behalf of all Parties across NHS Forth Valley. This arrangement is agreed within the Integration Schemes and formalised through Directions agreed by the IJB. Hosted Services in a health and social care context are rooted in the Public Bodies (Joint Working) (Scotland) Act 2014, which established Integration Authorities (which we refer to as our IJB) to bring together health and social care services.

The 2014 Act aimed to improve outcomes by integrating health and social care services, reducing duplication, and ensuring seamless care for people across Scotland. Within Forth Valley, the following hosted arrangements are in place and specifically articulated in the current draft Integration Schemes:

Clackmannanshire & Stirling IJB (Lead HSCP for)	Falkirk IJB (Lead HSCP for)
<ul style="list-style-type: none"> Specialist Mental Health Services 	<ul style="list-style-type: none"> Prison Healthcare Services
<ul style="list-style-type: none"> Learning Disability Services 	<ul style="list-style-type: none"> Primary Care Services, including: <ul style="list-style-type: none"> GP contract management Out of Hours services Community pharmacy, optometry, and dental services (via NHS Board contracting).

The initial Clackmannanshire and Stirling Integration Scheme presented to Scottish Ministers for approval in 2015/16 did not include those services now delegated as Hosted and so made no specific reference to the agreed principles and governance for Hosting. However, since then, these indicated Services have been delegated and there is currently a process in place where both IJB's are submitting revised Integration Schemes with the Hosted Services being reflected within these.

The Clackmannanshire & Stirling's Integration Scheme is still being finalised before submission to Scottish Ministers. The consequence of the staged implementation of hosted arrangements meant that whilst the broad principles intended by the legislation were incorporated in practical terms into the arrangements, there was not a consistent set of operational principles and consistency of governance arrangements established across all parties. At present there is no formal arrangement in place for Hosted Services which will offer oversight and assurance across all partners, nor a consistent escalation and/or participation in the planning and delivery of hosted services. The proposals within this report reflect the intended operational principles and governance arrangements for the existing and future arrangements for Hosted Services.

November 2025 saw Integration Joint Boards agree an approach to group the principles of approach to hosted services into four themes. This will be developed further in 2026 - 2027 focused on Governance & Accountability; Operational Clarity; Finance & Risk and Strategic Alignment & Engagement.



Our Priorities

Our priorities were identified through analysis of locally available intelligence, data and conversations with communities, individuals and partners. As part of our review process, we asked if these continued to be the right priorities and we have aligned these with five overarching strategic themes that describe our intentions, these are aligned to the National Health and Wellbeing Outcomes. For each of the themes, as part of the review process, we have outlined achievements linked to what we intend to achieve. We have also provided links to relevant strategies and work that is underway.

National Health & Wellbeing Outcomes

All themes and priorities are linked to the Health and Wellbeing Outcomes. Each theme will demonstrate improvement for people and communities, how we are embedding a human rights based approach, consideration for equalities and evidencing improvement across the services we deliver.

Health and Wellbeing Outcome

1. People are able to look after and improve their own health and wellbeing and live in good health for longer.
2. People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.
3. People who use health and social care services have positive experiences of those services, and have their dignity respected
4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
5. Health and social care services contribute to reducing health inequalities
6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact on their caring role on their own health and wellbeing.
7. People who use health and social care services are safe from harm

8. People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.

9. Resources are used effectively and efficiently in the provision of health and social care services

	Prevention, early intervention & harm reduction	Independent living through choice and control	Care Closer to Home	Supporting empowered people & communities	Loneliness & isolation
1. People are able to look after and improve their own health and wellbeing and live in good health for longer.	✓	✓	✓	✓	✓
2. People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.	✓	✓	✓	✓	✓
3. People who use health and social care services have positive experiences of those services, and have their dignity respected	✓	✓	✓	✓	
4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	✓	✓	✓	✓	✓
5. Health and social care services contribute to reducing health inequalities	✓	✓	✓	✓	✓
6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact on their caring role on their own health and wellbeing.		✓	✓		
7. People who use health and social care services are safe from harm	✓	✓	✓		
8. People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	Enabling Activities				
9. Resources are used effectively and efficiently in the provision of health and social care services					

Strategic Theme 1 - Prevention, early intervention & harm reduction



Prevention is about helping people stay healthy and independent for as long as possible and reducing the chances of issues arising, and if they do, supporting people and their carers to manage them as effectively as possible.

Early intervention identifies and provides effective early support to those at risk of poor outcomes. Harm reduction is used to decrease any negative consequences and recognises where someone is unable to stop, they can still make positive change to protect themselves and others.

While our services are needs led, we are also resource bound, to improve outcomes for people, we need to prevent and avoid crisis and help people improve their health and wellbeing.

Promoting positive health and wellbeing, providing early support and information to help people make informed lifestyle choices. Reducing negative consequences of health behaviours.

Priority 1 Mental Health & Wellbeing (including the impact of COVID-19)

Priority 2 Drug and alcohol care and support capacity across communities.

Links to Strategies and Plans

Mental Health
Suicide Prevention
Health Improvement
Alcohol Framework

Alcohol & Drug Partnership (ADP)
Delivery Plan 2020-2023 Rights, Respect & Recovery
Improving support for Mental Health

We have delivered the following between 2023 - 2026:

- A new Mental Health and Well-being Strategy developed, agreed and in place.
- Strategic Improvement Plan, following inspection process; focused on outcomes-based assessments across community mental health services.
- Facilitated the collective redesign of the substance use model of care through the ADP Commissioning Consortium.
- Coordinated the strategic implementation of the Medication Assisted Treatment (MAT) Standards across our whole Forth Valley system.
- Supporting the development of community-led early intervention and harm reduction approaches for people at risk of substance use harms.
- Continued delivery of intensive coordination of a whole system harm reduction response by ADP Support Team and partners.
- Lived Experience Panels have been developed for those affected by substance use and mental health issues in partnership with the third sector.

Strategic Theme 2 - Independent living through choice and control



Independence can boost self-esteem and confidence, improve someone's sense of purpose and quality of life and in turn, boost their physical and mental health and wellbeing.

It is important people are aware of their rights and how they should access the support they want to achieve their agreed outcomes. People who have lived or living experience of accessing services are best placed to help us design them. It is also important people know what is available, and what choices they have.

Conversations with our communities, service users and staff have highlighted this as important and integral to our principles of human rights, equality and realistic medicine.

Building confidence, maintaining independence. Helping people make the right decisions for them and providing the right level of support at the right time.

Priority 3 Self-Directed Support information and advice promoted across all communities

Priority 4 Support those affected by dementia at all stages of their journey

Links to Strategies and Plans

Self-Directed Support

Care Closer to Home

Supporting People living with Dementia

Carers Strategy

Learning Disabilities

Frailty

Falls

Palliative Care & End of life

We have delivered the following between 2023 - 2026:

- A joint Transitions Policy agreed by Clackmannanshire Council and IJB.
- Learning and development sessions have been delivered to HSCP social work and social care staff in partnership with Self Directed Support Forth Valley.
- A Housing Contribution Statement has been developed with the housing sector.
- Best Value Review of Supported Accommodation is complete along with a Delivery Plan.
- A Review of Adaptations has been completed and a Delivery Plan approved.
- An asset-based assessment tool has been developed and is being rolled out across HSCP services.
- A Self-Directed Support Lived Experience Panel has been convened to support development and implementation of policies and operating procedures.
- Self-Directed Support Steering Group has increased representation from those with lived experience. Clackmannanshire and Stirling HSCP will host a local event in partnership with national partners to reflect and plan next steps for delivery.
- Agreed Model of Care for people with dementia following our Commissioning Consortium approach.

Strategic Theme 3 - Achieving care closer to home



There is a growing demand across our communities for health and social care, while public services face increasing pressure on resources. We cannot continue to deliver care and support in the same way; we need to work with partners to transform how we deliver outcomes based services.

We know people want to be supported to stay in their own homes and communities for as long as possible. Achieving care closer to home, is about changing how services are accessed, making them fit for purpose and modernising our approach. Technology can deliver so many benefits and improve the way we communicate with people.

Overall, this is about increasing effectiveness and capacity and ensuring we are using our resources to make the biggest impact across our communities.

Transforming services that are needs led, resource bound and modern. Supporting people to live in their homes and communities for as long as possible.

Priority 5 Good public information across all care and support working

Priority 6 Workforce capacity and recruitment

Links to Strategies and Plans

Primary Care Improvement Plan

Integrated Workforce Plan

Primary Care and Mental Health Plan

Care Closer to Home

Intermediate Care

We have delivered the following between 2023 - 2026:

- Increased capacity with GP Clinical Leadership to support quality programmes, value-based health and care & clinical capacity across community health care services, including mental health and substance use services.
- Multi-disciplinary team working across our localities through our Right Care, Right Time programme to manage need and demand & support effective signposting.
- Established a Commissioning Consortium focused on delivery of mental health community supports.
- Developed an integrated approach with the third sector to promote the voice of communities across Locality Planning Networks and the wider community sector.
- Developed a Health Improvement Delivery Plan to focus on communities in Clackmannanshire & Stirling as part of continued development across localities to address smoking, obesity and harmful behaviours.
- Delivering Discharge without Delay including bed modelling and early assessment & discharge protocols.
- Developing modelling of workforce requirements across HSCP including recruitment gaps and opportunities for HSCP in line with our Integrated Workforce Plan.

Strategic Theme 4 - Supporting empowered people and communities



Coordination of effort for partners and communities. Empowering people to design and deliver services. Supporting unpaid carers and people delivering services in their role.

Priority 7 Support for Carers

Priority 8 Early intervention linking people with third sector and community supports

Priority 9 Develop locally based multiagency working across communities

Priority 10 Ethical Commissioning

Links to Strategies and Plans

Carer's Strategy

Carers' Eligibility Criteria

Third Sector in Communities

Self-Management & Self-Care

Empowerment is the process of becoming stronger and more confident, especially in controlling one's life and claiming one's rights. In health and social care, empowerment is defined as a process through which people gain greater control over the decisions and actions that affect their lives. Empowerment is important for everyone involved in care, including the service users, their families, loved ones and care workers.

Bringing the knowledge, skills and experience of people and communities together and working in co-production to improve access and outcomes.

We have delivered the following between 2023 - 2026:

- Integration Joint Board approved the Carers Short Breaks Statement.
- Commissioned third sector to offer early advice and support including in person and on-line signposting, information and opportunities for short breaks for carers.
- Consulted with carers across communities on key priorities for carers in preparation and to support the development of the Carers Strategy 2026 - 2029.
- Commissioned third sector support for those impacted by functional impact disability; with access to advice and specialist equipment to support self-management and self-care.
- Continued delivery of early intervention for those at risk of falls across services and communities.
- Endorsed PANEL (Participation, Accountability, Non-Discrimination and equality and Empowerment and Legality) and FAIR (Facts, Analyse, Identify and Review) practice, in line with Scottish Human Rights Consortium guidance.
- Continued support for local groups to empower people to continue to live healthy, meaningful and satisfying lives as active members of their community.
- Embedded Rights-based approaches across the HSCP's commissioning consortia work.

Strategic Theme 5 - Reducing Loneliness & Isolation



Loneliness and social isolation are not the same. Not everyone who is socially isolated feels lonely; and those who are not socially isolated may experience a sense of loneliness. Loneliness is a feeling associated with a lack or loss of companionship. It happens when we have a mismatch between the quantity and quality of existing social relationships, and those that we want.

Social isolation refers to the number of relationship and social interactions someone has, which can be measured. Being lonely or socially isolated can have long-lasting and negative impacts on physical and mental health, in addition to wellbeing. Social relationships and networks can promote health and wellbeing for people at any age.

Connecting people to their communities, reducing loneliness and isolation and the impact on people's health and wellbeing.

Priority 11 Reducing levels of loneliness and isolation

Links to Strategies and Plans

Link to Third Sector Interfaces
Locality Plans in Communities
Locality Planning

We delivered the following between 2023 - 2026:

- Refreshed our Partnership Agreement and commissioning arrangements with Third Sector Interfaces to support them to help us to tackle loneliness and isolation in communities as part of community engagement and ongoing Locality Planning.
- Commissioned third sector partners to provide learning opportunities for those affected by trauma, to offer opportunities to influence policy and service delivery as paid peer workers.
- The national Recovery Walk was hosted in Stirling in September 2025 where 3,000 people walked through Stirling to remember those that have passed and imagine a brighter future for people with substance use issues, and their families.
- Continue to work with both Community Planning Partners on issues linked to community wellbeing across communities.
- Refresh delivery of health improvement support in line with Locality Planning priorities in partnership with Third Sector Interface.

Priorities 2026 - 2029

Feedback from the review and engagement process as part of the Review of the Strategic Commissioning Plan, we were asked to continue to focus on delivery of care and support for those with assessed need, with a particular focus on the areas outlined below:

	Current Priorities 2023 - 2033	Focus on Priority areas into 2026 - 2030
Strategic Theme 1	Prevention, early intervention & harm reduction	Focus on early intervention and prevention across wider service areas including mental well-being and neurodiversity through delivery of commissioned services.
Strategic Theme 2	Independent living through choice and control	Focus on delivery of the use of TEC including support to people based on opportunities provided by AI, robotics and technology enabled care.
Strategic Theme 3	Achieving care closer to home	Continued commitment and focus on carers' support including access to short breaks and respite. Joint commissioning with Falkirk of palliative and end of life care within the community as well as within bed-based services.
Strategic Theme 4	Supporting empowered people and communities	Improved and ongoing communication with staff and communities to empower individuals and communities linked to available community resources, impact of spending decisions and access to consistent information and data.
Strategic Theme 5	Reducing Loneliness & Isolation	A focus on self-care & self-management, community and peer support in partnership with third sector and communities.



Enabling Activities – How we do this

Enabling activities describe the practical and organisational actions that create the conditions that help the delivery of services. There is a need to understand the resources (budget, staff, equipment and systems), who are our partners and stakeholders (service users, their families and carers, third sector and independent providers, communities), how we are performing and if we need to change the way we deliver services. Each of these are part of the technical process we carry out to plan our services alongside engagement with people and communities. Following the review process, key delivery actions have been identified to help progress the agreed strategic priorities.

Risk Management

The Integration Joint Board continues to monitor and seeks to mitigate significant risk through its Risk Management Framework and corporate Strategic Risk Register.

The Finance, Audit & Performance Committee provides a scrutiny role for the Integration Joint Board by reviewing, scrutinising and approving the Strategic Risk Register, in addition risks are routinely reported to the IJB through Quarterly and Annual Performance Reports.

Delivery Action 1- The ongoing risks in relation to finance and workforce, these are multi-factorial and pose significant risk to the achievement of the Integration Joint Board's strategic priorities. There is ongoing and focused work to understand and identify mitigating strategies and actions which need to be a focus into 2026 - 2030, this is reflected within the HSCP Delivery Plan.

Transformation - The Delivery Plan 2025- 2028

The HSCP is committed to the delivery of safe, high-quality services, however, there continues to be significant and ongoing system and delivery pressures within the context of a challenging financial envelope. This is compounded by an increasingly ageing population many of whom have significant ill health and issues of co-morbidity. Public expectations continue to grow for flexible and person-centred services.

Delivery Action 2- There is a need to review the delivery of care and support across communities, there continues to be a desire to transform services to meet individual outcomes and public expectations within the context of financial responsibility. As outlined above, the delivery of all services must be done in the context of Best Value; ensuring there is good governance and effective management of resources, to deliver the best possible outcomes for the public. The delivery of care and support is needs led but also resource bound therefore we cannot continue to do what has always been done; there is a need to innovate and transform.

The Delivery Plan outlines the changes to be made where there are two main categories of change:

- **Transformations** - distinct changes to the way an organisation conducts business and usually requires temporary additional staff and financial resource to enable delivery. This demonstrates a step change in the way a service is structured or delivered and are justified by the benefits they create. Benefits can range from improved service user experience to numbers of people receiving preventative/early interventions, or costs avoided.
- **Continuous improvement** - refers to the gradual process of evolution, which is usually delivered by existing staff within current budgets.

Best Value

Best Value is a duty that applies to all public bodies in Scotland. It is a statutory duty (a law that must be followed) for Local Authorities and a formal duty for other public bodies such as the NHS. To achieve Best Value, we must demonstrate good governance and effective management of resources to deliver the best possible outcomes for the public. This means we must identify and define our outcomes and priorities, plan how we will achieve these and monitor and report progress.

It is based on the values of openness and transparency, allowing the public to understand decisions made, how resources are being utilised and how we are working to deliver services and improve outcomes. This means having balanced conversations, reporting on decisions, progress, collecting and publishing relevant and accurate performance information to demonstrate Best Value. This allows for effective scrutiny and accountability.

Delivery Action 3 - Engagement with the public and communities is a significant part of Best Value in that we must continue to involve people and communities in the work we do, the decisions we make and the services we design. This can only work if we provide information, analysis and reports which give the public opportunities to be involved. This Plan has been developed with the principles of Best Value and engagement woven throughout the priorities as well as within the accompanying Performance Management Framework.

Integrated Performance Management Framework

To ensure performance is open and accountable, the Public Bodies Act (2014) obliges Integration Joint Boards to publish an Annual Performance Report setting out an assessment of performance in planning and carrying out the integration functions for which they are responsible. The purpose of performance reporting is to provide an overview of performance in planning and carrying out integrated functions, which are produced for the benefit of Integration Joint Boards and their communities.

Delivery Action 4 - The HSCP has an established integrated performance framework which is based on the key priorities outlined within the Strategic Commissioning Plan as well as part of the Winter Plan, Integrated Workforce Plan, Unscheduled Care planning, Intermediate Care planning and Locality Planning Networks. This framework supports a robust reporting schedule, reporting on key performance indicators, national and local targets as well as the opportunity to benchmark.

The purpose of the Integrated Performance Framework is to be able to demonstrate continuous improvement, promote accountability and transparency, deliver governance and provide assurance to the people who use our services and the people who provide our services, including where there are hosted arrangements and/or Forth Valley wide services.

Integrated Workforce Planning

The Integrated Workforce Plan 2022-2025 is currently under review in line with expected Scottish Government guidance. The review of the Plan is based on the continuous improvement cycle 'Plan, Do, Study & Act', to ensure that we are a dynamic and flexible organisation, capable of responding to system changes. The Plan was developed using the Skills for Care model of self-assessment and guidance produced by the Improvement Service. The Integrated Workforce Plan was designed using the five pillars of the workforce journey; Plan, Attract, Train, Employ and Nurture. This approach is described within the National Workforce Strategy for Health and Social Care published by the Scottish Government in April 2022.

We recognise that our workforce and strategic partnerships are our most valuable resources; this includes the care and support delivered across our communities. The dedication of our own staff, providers, communities and partners ensures high quality services are provided. However, as part of reviewing the Plan, there is a recognition of the current financial pressures, recruitment and retention issues which includes the impact of leadership change across the HSCP. There continues to be a number of workforce challenges across the whole sector, such as the recruitment of specialist health and social care / social work staff, which continues to be problematic. Where there are vacancies, existing staff can experience stress and additional pressure; as such the wellbeing of all staff is a key priority. Succession planning, learning and development and working with partners, third sector, independent sector, school, colleges and universities are ways we are exploring and developing to help mitigate system pressures.

Delivery action 5 - The Integrated Workforce Plan needs to continue to reflect the need to re-design and modernise alongside the community health and care workforce, in addition to supporting the ambitious programme of work within the agreed Delivery Plan.

Engagement

The Public Bodies (Joint Working) (Scotland) Act 2014 requires full consultation and engagement with stakeholders in the development of Strategic Commissioning Plans. Stakeholders include the public, supported people (who are also referred to as service users), unpaid carers, staff, providers, third sector and independent sector. This Plan reflects the output from the engagement as described by community voices; the Locality Planning Networks create the opportunity for continuous engagement and conversation around health and social care in Clackmannanshire and Stirling, focused on coproduction, codesign and codelivery of health and social care. Communities are being impacted by an everchanging landscape and as such we need to continue to base decisions on ongoing engagement throughout the lifetime of this Plan.

Delivery action 6 - The Plan is not limited to a short period of engagement with people about priorities and how services should be provided, this Strategic Commissioning Plan sets out how we will continue to engage with stakeholders through Locality Planning Networks, Commissioning Consortia, Providers Fora and lived experience networks. These groups and networks facilitate ongoing engagement by maintaining close links with organisations and groups throughout Clackmannanshire and Stirling.

Ethical Commissioning

Much of the care and support services delivered across Clackmannanshire and Stirling are provided by the Third Sector (charities, social enterprises, community anchor organisations, housing associations and further education) and the Independent Sector (care homes, social care providers). The commissioning of care and support services is a significant element of the budget spend across Clackmannanshire and Stirling.

To ensure ethical and person-centred commissioning is at the heart of delivery; the HSCP, in partnership with the Third Sector Interfaces, continues to plan and commission services through a Commissioning Consortium approach; based on collaborative analysis, ethical commissioning and commissioning for the public good, rather than competition. This approach is based on the Commissioning Cycle – analyse, plan, review and deliver – ensuring that there is a constant process of quality improvement and market analysis. The approach continues to develop a commissioning process focused on co-operation and joint ownership of risk across and among all stakeholders. Rather than being treated as the passive recipients of services designed elsewhere, supported people are able to actively shape their own future, trusted to codesign services, to direct commissioning decisions, and to play their part in making services work. This approach is aligned to both the new National Social Work Agency and the Preventing Harm, Promoting Recovery: Scotland's Alcohol & Drugs Strategic Plan 2026.

The Commissioning Consortium model is based on the principles of a comprehensive partnership approach with Third Sector Interfaces, focused across all sectors providing health and social care services; there is a commitment to provide enhanced delivery of services to individuals and communities and a desire to create diversity within the marketplace based on population needs.

The purpose of the Commissioning Consortium is to:-

- Create, develop, maintain and grow high quality service delivery in and around Clackmannanshire & Stirling in order to service the needs of local people and communities; especially those who are most disadvantaged;
- To create and deliver flexible and holistic service packages which are joined up and responsive to need and demand;
- To augment provision through the ability of service providers to maximise resource efficiency and support the development of sustainable community capacity.

The HSCP works with strategic Third Sector partners, independent sector, partner authorities and citizens, particularly those with lived experience of health and care to gather insight, develop integrated strategies for delivering common outcomes, including to; codesign and commission appropriate services, make decisions about who provides what and how; and review and evaluate how well these providers are performing/ achieving.

Delivery action 7 - Market intelligence and data analytics provide local insight to support the development of commissioning strategies and plans. This approach will deliver improved outcomes for supported people as well as deliver a financially sustainable HSCP. Services continue to be provided by a mixed economy of service providers, utilising a mix of internal and external service delivery, who are “contracted” on a performance and quality basis to deliver outcomes for people and commissioning outcomes for the HSCP.

Public Protection

Adult Support and Protection (ASP) seeks to support and protect adults unable to protect their own wellbeing, property, rights or interests; who are at risk of harm or abuse. This may be due to a physical disability, mental disorder, illness or infirmity that makes them more vulnerable. Harm can be physical, psychological (feeling fear, alarm or distress), harm to property, rights or interest such as theft, fraud, embezzlement or extortion or where someone is self-harming. We all have a responsibility to report where we know or believe an adult to be at risk of harm.

The Adult Support and Protection (Scotland) Act 2007 has brought about significant changes in the way adults considered to be at risk of harm are supported and protected. Our new [Adult Support Protection Strategic Improvement plan](#) sets out our priority areas, success measures and aims.

The plan builds on achievements from the previous Improvement Plan and draws on learning from the 2022 ASP Thematic Inspection by the Care Inspectorate ([Clackmannanshire](#)) ([Stirling](#)) which includes; self-evaluation, audit activity, performance data, sub-groups, short life working groups, stakeholder feedback and Learning Reviews. The Adult Support and Protection Committee oversees delivery and the respective sub-groups report to the Chief Officers Group (COG) which offers further scrutiny and oversight of the Plan.

The ASP Strategic Improvement Plan has been devised to deliver on national and local policies and is based on five key priority areas:

- Leadership & Governance
- Proactive Improvement
- Workforce Development
- Improving outcomes for individuals with lived experience and carers
- Promoting Adult Support and Protection Awareness

The Strategic Improvement Plan reflects the themes within the Strategic Commissioning Plan by putting the rights of adults at risk of harm first which ensures they shape the services they need. It commits to working with others to put trauma informed and responsive practice in place across our workforce and services. We work with each individual based around their abilities, background and characteristics (including age, sex, sexual orientation, religious persuasion, racial origin, ethnic group, cultural and linguistic heritage) towards achieving their outcomes through informed choice and control.

Delivery action 8 - We continue to aim to deliver services that, wherever possible, are actively informed by people with lived experience. We will ensure people with lived experience are heard, valued and supported; enabling them to discover their potential and realise their ambitions. We will recognise the importance of meaningful relationships that offer collaboration, choice, empowerment, safety and trust as part of a trauma informed approach.



Our Data and Intelligence

There is a requirement within a robust model of strategic commissioning to have a range of intelligence sources including nationally published data, live local information and access to community intelligence. Sources can range from national and Scottish Government published data, local social work and health recording systems as well as community-based statistics of prevalence. Each of these build a picture to better understand the needs of people living in Clackmannanshire and Stirling.

The following information provides an overview of some of the in-depth work carried out in the Strategic Needs Assessment and the Scottish Burden of Disease work.

Data and Performance

In the current climate, the way we live our lives is changing at an unprecedented rate. There is a need to operate as a whole system strategic partnership and to fundamentally change the model of delivering local care and support. We need to better understand the needs of people within our communities, plan for future demand of services and achieve value for money. Information and intelligence is vital in supporting the delivery of services in this way. How we use our data impacts how we provide the best possible services for local people.

Over the next ten years, we commit to improving how we access and use the data available to us, to better understand, analyse and communicate the findings of our analysis. We will improve data sharing where appropriate, improve our digital maturity and skills between partners, communities and the workforce.

Our aim will be to:

- improve access to the data we hold;
- improve data sharing where it is appropriate and safe to do so;
- improve our analysis and communication of the analysis;
- understand gaps and weaknesses to help plan for the future;
- improve data maturity and skills;
- uphold information governance, ethics and security.



Accessibility

This information can be made available, on request, in braille, large print or audio formats and can be translated into a range of languages.

If you have any comments please contact:

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Appendix 1: Key Performance Indicators

Health and social care integration core indicators

The Public Bodies (Joint Working) (National Health and Wellbeing Outcomes) (Scotland) Regulations 2014 establish core indicators that all Integrations Authorities must report on. They help us monitor progress towards the National Health and Wellbeing Outcomes.

Outcome indicators

1. Percentage of adults able to look after their health very well or quite well.
2. Percentage of adults supported at home who agree that they are supported to live as independently as possible.
3. Percentage of adults supported at home who agreed that they has a say in how their help, care, or support was provided.
4. Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated.
5. Percentage of adults receiving care or support who rate it as excellent or good.
6. Percentage of people with positive experience of care at their GP practice.
7. Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life.
8. Percentage of carers who feel supported to continue in their caring role.
9. Percentage of adults supported at home who agreed they felt safe.
10. Percentage of staff who say they would recommend their workplace as a good place to work.

These indicators focus on the person, their experience and outcomes and where we can improve.

Service Indicators

11. Premature mortality rate per 100,000 persons
12. Emergency admission rate per 100,000 persons
13. Emergency bed day rate per 100,000 persons
14. Emergency readmissions to hospital within 28 days of discharge (rate per 1,000 discharges)
15. Proportion of last 6 months of life spent at home or in a community setting
16. Falls per 1,000 population aged 65+
17. Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections
18. Percentage of adults with intensive care needs receiving care at home.
19. Number of days people spend in hospital when they are ready to be discharged (per 1,000 population)
20. Percentage of health and care resource spend on hospital stays where the patient was admitted in an emergency
21. Percentage of people admitted to hospital from home during the year, who are discharged to a care home.
22. Percentage of people who are discharged from hospital within 72 hours of being ready
23. Expenditure on end of life care, cost in the last 6 months.

These indicators help us monitor how our service are performing and where we can improve

Proposed Outcomes and Key Performance Indicators

Strategic Theme 1 - Prevention, early intervention and harm reduction

How do we define this?

Promoting positive health and wellbeing, providing early support and information to help people make informed lifestyle choices. Reducing negative consequences of health behaviours.

Proposed Outcomes:

- I will receive early support tailored to my needs, in order to prevent the escalation of my health / wellbeing issues and improve my overall wellbeing.
- I have access to clear, timely information throughout my lifetime that enables me to make informed lifestyle choices which help maintain or improve my health and wellbeing.
- I am supported to adopt and be aware of healthier behaviours.

Proposed KPIs:

- Number of Anticipatory Care Plans completed
- Number of people accessing MECS or assistive technology
- Number of hospital admissions due to falls
- Equipment
- Psychological Services:
 - Number of new patients seen compared to those who have started treatment
 - Completed referral to treatment (18 week target)
- ADP data
- Commissioned services data & activity

Strategic Theme 2 - Independent Living through choice and control

How do we define this?

Building confidence, maintaining independence. Helping people make the right decisions for them and providing the right level of support at the right time.

Proposed Outcomes:

- I am able to build my confidence and resilience by accessing clear, relevant information and personalised (statutory) support that builds on my strengths whilst complementing community and informal supports.
- I am supported to maintain independence by making informed decisions, that take into account changing circumstances, and a recognition of when my care and support may change due to my needs.
- I receive the right level of support at the right time which helps sustain my wellbeing.

Proposed KPIs:

- Percentage of people completing reablement who do not require ongoing care
- Number of people accessing advice through Advocacy services
- Number of people accessing information through SDS Forth Valley.
- Number of delayed discharges:
 - Longest wait for a package of care
 - % of people discharged home from hospital under the Discharge without Delay programme.
- Number of people who accessed their preferred SDS option
- Number of Support Plans completed:
 - % of individuals supported to set and achieve their personal outcomes

Strategic Theme 3 - Achieving Care Closer to Home

How do we define this?

Transforming services that are needs led, resource bound and modern. Supporting people to live in their homes and communities for as long as possible.

Proposed Outcomes:

- I receive support that is tailored to my needs and helps me live the life I choose.
- Services are flexible and responsive, helping me navigate changes in my health or circumstances.
- I am supported to remain in my home or community, and to stay connected and independent for as long as possible.

Proposed KPIs:

- Percentage of people with positive experiences of the care provided by their GP practice
- Number of people with a care package delivered in their own home compared to number of people residing within a care home.
- Average length of wait for a package of care to start
- District Nurses:
 - Number of calls
 - Number of home visits
 - Number of people supported to die at home

Strategic Theme 4 - Supporting empowered people and communities

How do we define this?

Coordination of effort for partners and communities. Empowering people to design and deliver services. Supporting unpaid carers and people delivering services in their role.

Proposed Outcomes:

- Communities and partners collaborate to provide coordinated services that respond to a broad range of needs.
- I am empowered to actively shape services that matter to me.
- As an unpaid carer I feel valued and supported to maintain my wellbeing and resilience.

Proposed KPIs:

- Number of Adult Carer Support Plans completed
- Percentage of unpaid carers receiving support or respite services, based on those with an Adult Carer Support Plan
- Number of people accessing Mobilise:
 - % of carers who self-report being new to caring compared to those who aren't
 - % of when Mobilise is accessed out with core working hours (9-5 weekdays)

Strategic Theme 5 - Reducing loneliness and isolation

How do we define this?

Connecting people to their communities, reducing loneliness and isolation and the impact on people's health and wellbeing.

Proposed outcomes

- I am able to connect to my communities through inclusive and meaningful opportunities.
- I feel able to identify when I experience loneliness or isolation; and am supported to reconnect in ways that improve my wellbeing.
- I can choose from a range of social connection opportunities that support my health and emotional wellbeing.

Proposed KPIs:

- Number of volunteers recruited and active in outreach roles.
- Number of third sector organisations involved in loneliness reduction initiatives.
- Number of people referred to Community Link workers:
 - The difference in initial wellbeing score compared to the wellbeing score recorded after input from a Community Link Worker