



ANGUS
Health & Social Care
Partnership

Locality Improvement Plan | 2023-2026

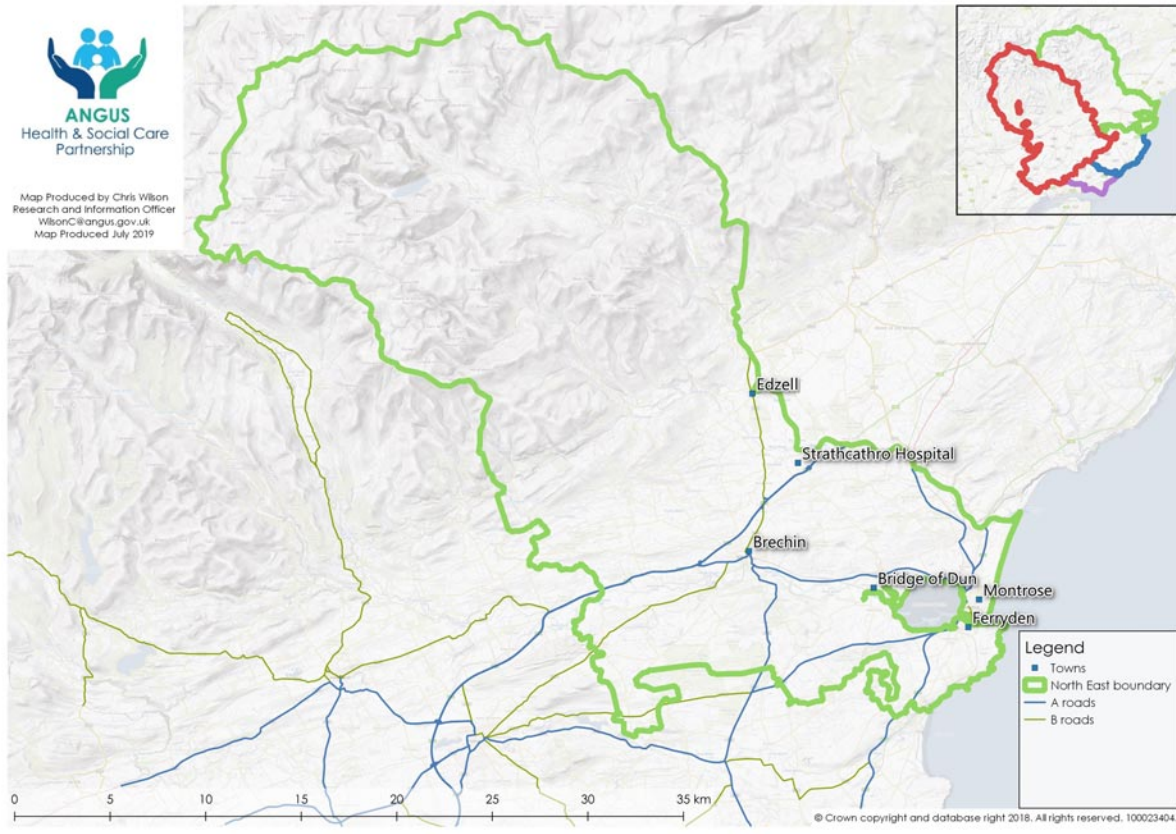
North East





ANGUS
Health & Social Care
Partnership

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Map Produced July 2019



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Introduction

About this plan

We are pleased to present the third North East Locality Improvement Plan (LIP). This plan is one of four LIPs (one for each locality) for Angus Health and Social Care Partnership (AHSCP). It supports delivery of the vision, strategic ambitions and strategic priorities as set out in the **AHSCP Strategic Commissioning Plan 2023-2026 (SCP)**. Figure 1 on page 4 details all the key components of the SCP on one page. Figure 2 on page 5 illustrates how health and social care is being delivered across our communities.

This LIP sets out the improvements that have been identified and will be progressed by the North East Locality Improvement Group (NE LIG) to enhance health and wellbeing outcomes for people living in the Montrose, Brechin and Edzell areas, which will contribute to the delivery of the AHSCP SCP.

This plan considers how communities and individuals can help themselves and help each other to take control of their own health and wellbeing.

This is a live working document and will continue to evolve throughout its lifetime.

Who is this plan for?

This plan is for everyone 16 years and over who live and work in the North East locality of Angus. It is for people who currently access health and social care services and for those who may require care and support in the future. It is also for people who are well and who wish to maintain or improve their current level of independence, health and wellbeing.

What is a locality?

The Public Bodies (Joint Working) (Scotland) Act 2014 puts in place the legislative framework to integrate health and social care services in Scotland. The Act requires each Integration Authority to establish at least two localities within its area.

Localities provide a way to influence local service planning, to inform the AHSCP SCP and to deliver the strategic priorities for Angus. It is important that localities are large enough to offer scope for service improvement but small enough to feel local and real for those people who live there.

In Angus there are four localities:

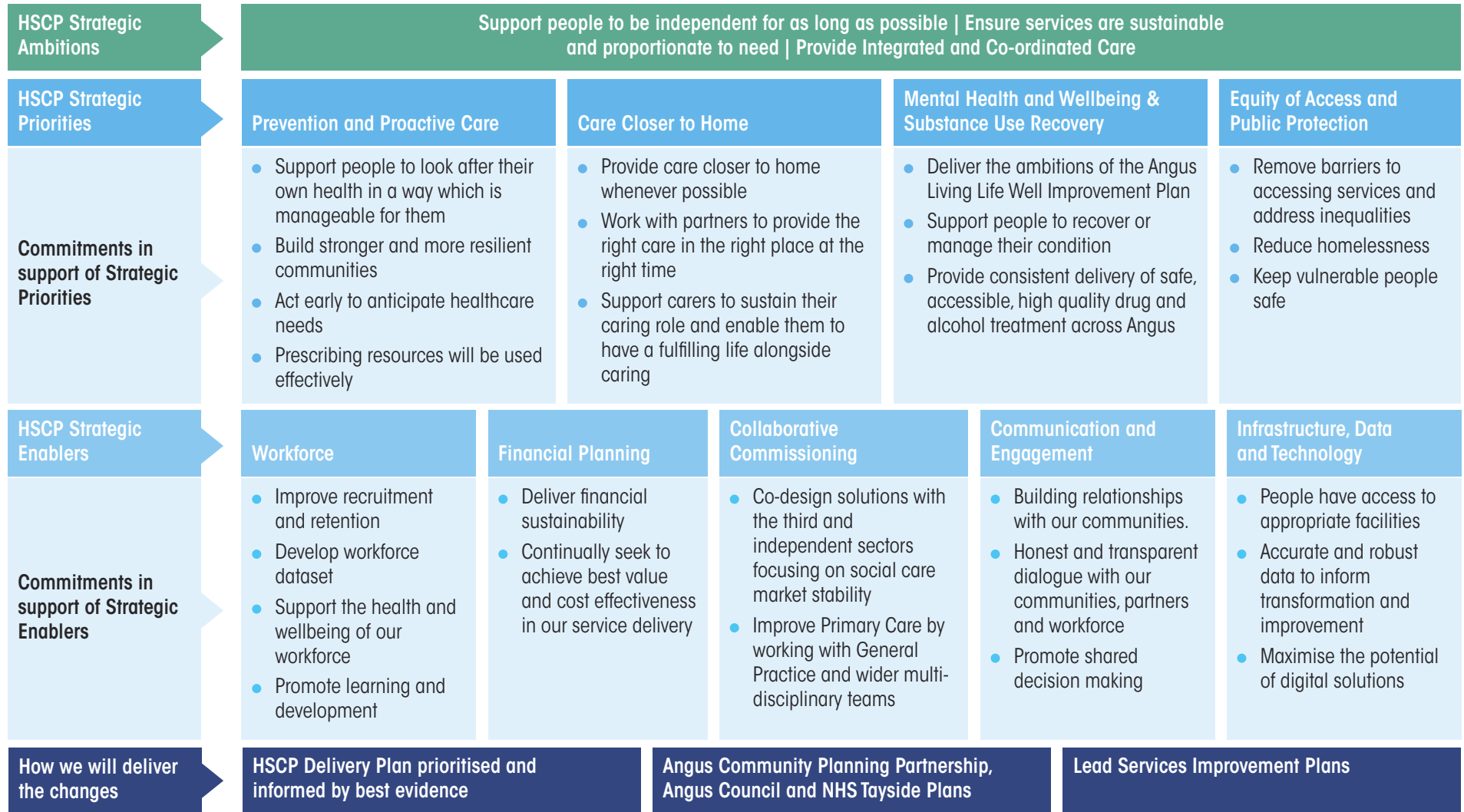
1. **North West:** Forfar/Kirriemuir/SW Angus
2. **North East:** Brechin/Edzell/Montrose
3. **South West:** Monifieth/Carnoustie
4. **South East:** Arbroath/Friockheim

Figure 1: AHSCP SCP Plan on a Page

Our Vision - People in Angus receive the best services possible and enjoy physical and mental health to their full potential.

Our Values - We are caring, compassionate, person-centred, honest and respectful.

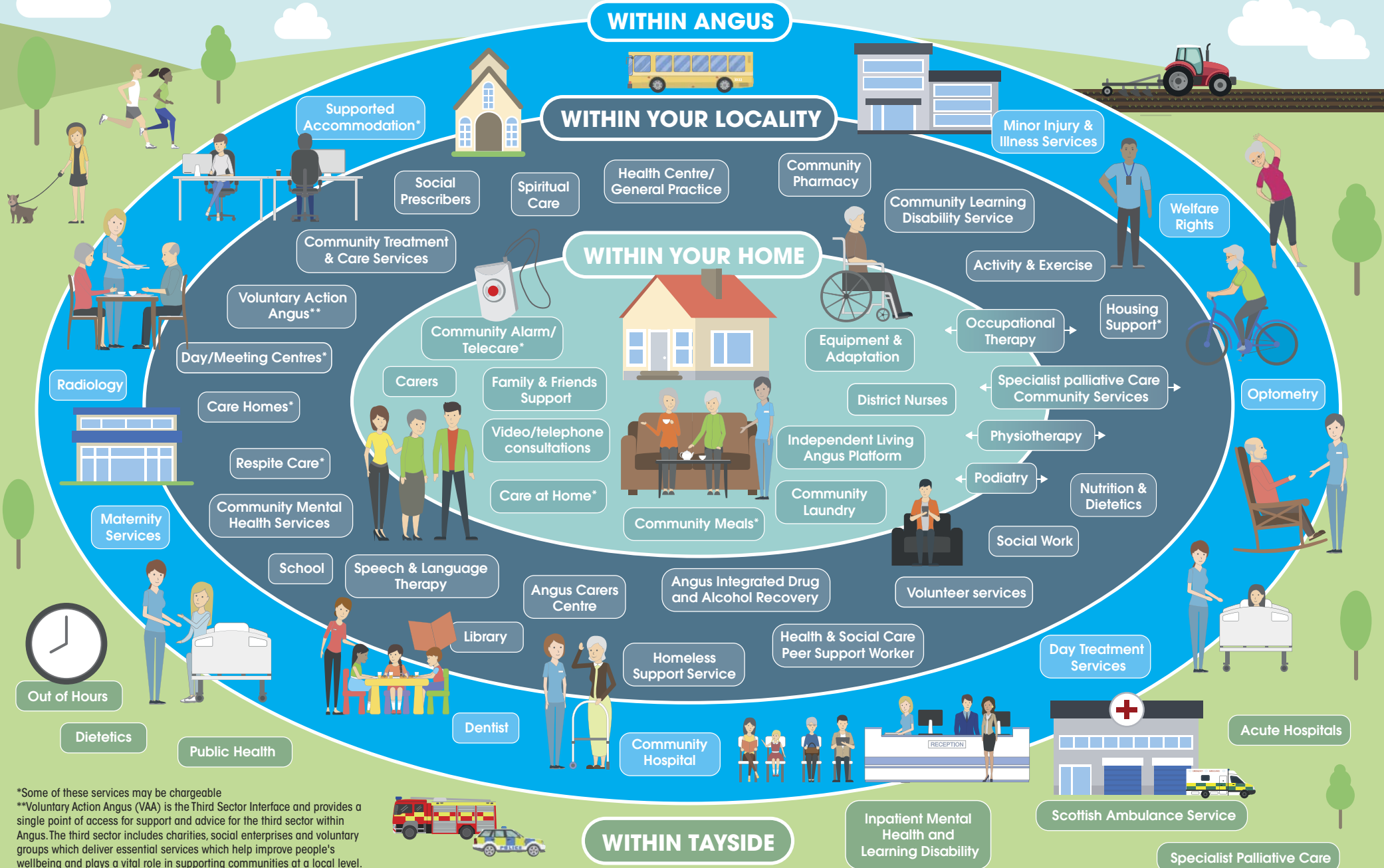
Our Mission - Working together, being courageous and innovative, always aiming to provide safe, effective high-quality health and social care.



(Source: AHSCP Strategic Commissioning Plan)

Figure 2: AHSCP SCP - Angus Care Model (Source: AHSCP Strategic Commissioning Plan)

Angus Care Model - Working together, making a difference for you, with you



*Some of these services may be chargeable

**Voluntary Action Angus (VAA) is the Third Sector Interface and provides a single point of access for support and advice for the third sector within Angus. The third sector includes charities, social enterprises and voluntary groups which deliver essential services which help improve people's wellbeing and plays a vital role in supporting communities at a local level.

Locality Improvement Group (LIG)

A LIG has been established in each of the four Angus localities. The purpose of each LIG is to provide a strong, effective integrated partnership forum in order to improve provision, opportunity & health and wellbeing outcomes for all adults and young people in the locality and support the delivery of the **AHSCP SCP 2023-2026**.

The LIGs are the engine room of delivery and improvement at locality level to improve the health and wellbeing of the local population and reduce health inequalities. They should utilise the appropriate connections and partnerships to make the most of what is available in each local area. Each LIG will develop and implement their LIP, building on local knowledge and experience to ensure services are tailored to community needs and build on the considerable community assets that exist across each locality.

Where does this plan fit into the bigger picture?

This LIP is aligned to both the strategic priorities outlined within the **AHSCP SCP 2023-2026** and the **Angus Local Outcomes Improvement Plan 2017-2030** for Angus Community Planning Partnership.

Strengthening links between the Angus Community Planning Locality Partnership Group and the LIGs are important to ensure people within communities are at the heart of decision making. Working better together will help us ensure people are supported to live a healthy, active and safe life.

As our progress continues to identify priorities, the LIP will help to inform the future strategic direction of AHSCP.

Equality and Diversity

Equality and diversity will be central to improvement work in the North East locality. The Public Sector Equality Duty sets out an obligation that due regard is given to the need to eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act 2010; and foster good relations between persons who share a "protected characteristic" and those who do not. Protected characteristics include age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race and ethnicity, religion and belief, sex/gender and sexual orientation. The Equality Duty also states that equality of opportunity should be advanced for people who share a protected characteristic by removing or minimising disadvantage, meeting the needs of groups that are different from the needs of others and encouraging participation in public life.

How will we know that we are making a difference?

To help us monitor the progress of this plan and the wider **AHSCP SCP**, we will set out measures and improvement targets which will ensure a consistent approach across all four localities and the wider Partnership.

AHSCP continues to make progress to extract meaningful qualitative and quantitative data at locality level. Over time, this information, together with

feedback from service users, carers and staff, will allow us to see the impact that the improvements have made.

Regular updates will be reported to the AHSCP Strategic Planning Group (SPG). Figure 3 below illustrates the governance and reporting structure from the Angus Integration Joint Board (IJB) to LIG.

Figure 3: Governance Structure





Strategic Priorities for 2023-2026

The AHSCP SCP 2023-2026 sets out four priorities for services across Angus:

PRIORITY 1: Prevention and Proactive Care

- Promote ways to keep people healthy.
- Build stronger and more resilient communities.
- Act early to anticipate needs.

PRIORITY 2: Care Closer to Home

- Provide care closer to home wherever possible.
- Continue to work with partners to provide the right care, in the right place, at the right time.
- Support carers to sustain their caring role and enable them to have a fulfilling life alongside caring.

PRIORITY 3: Mental Health & Wellbeing and Substance Use Recovery

- Deliver the ambitions of the Angus Living Life Well Improvement Plan.
- Support people to recover or manage their condition.
- Provide consistent delivery of safe, accessible, high-quality drug and alcohol treatment across Angus.

PRIORITY 4: Equity of Access and Public Protection

- Remove barriers to accessing services.
- Reduce homelessness.
- Keep vulnerable people safe.

Further details of how we plan to achieve our priorities are contained in the action plan **appendix 1**.

What We've Done Through the Previous Plan

There have been several achievements which continue to benefit all four localities. As a result of the Covid-19 pandemic, progress was significantly impacted when all non-essential work projects and activities were put on hold and LIGs could no longer meet. Each LIG was able to reinstate meetings virtually via Microsoft Teams however projects and activities were slower to remobilise.

Members of the LIGs have contributed to the:

- development of the AHSCP SCP
- development of the Angus Carers Strategy 2023-2026
- development of the Joint Angus Advocacy Strategic Framework 2023-2026
- approval funding bids in the North East to support:
 - Funding the role of a Community Food Project Officer placed within Montrose Playhouse, to deliver community food projects offering healthy eating low or no cost initiatives to support the whole community. The Project Officer connects with activities, services and people by providing sustainable solutions to improve health and social outcomes.

To help support projects and activities in the future, AHSCP have revised the supporting guidance document for LIGs as well as clearly defined the process for consideration and approval of funding applications.

Finance

AHSCP’s financial planning environment will be challenging for the duration of this LIP. This is consistent with the environment faced by the public sector generally and Angus Council and NHS Tayside specifically. Both organisations face significant financial challenges and require AHSCP to live within agreed devolved resources.

The Angus IJB has an ambitious **AHSCP SCP** for 2023-2026 which is also realistic about what can be achieved within the resources available.

Currently, each LIG is responsible for a small budget which is to be used to support projects or activities which will respond to local health and social care priorities within that locality. These projects or activities must directly support the delivery of one or more of the four strategic priorities listed within the **AHSCP SCP**. Projects or activities should encourage collaborative approaches to improvement and deliver value for money.

Through the AHSCP Joint Commitments shown in Figure 4 below, we can work together to empower those in our localities to maintain and improve their own health and wellbeing.

Figure 4: AHSCP SCP – Joint Commitments

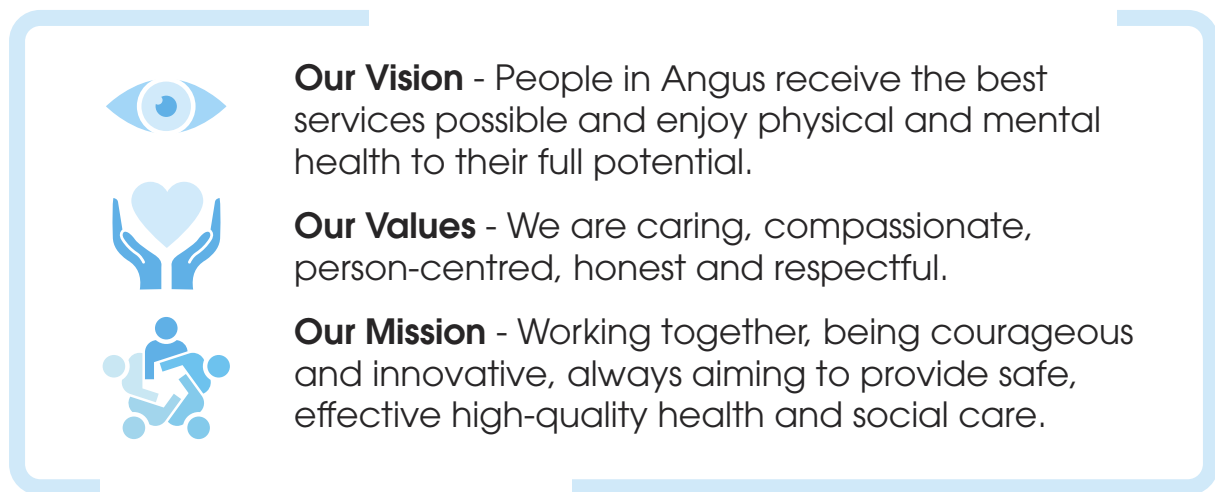



(Source: AHSCP Strategic Commissioning Plan)


Vision and Values


The localities are supporting AHSCP to deliver on its mission and vision as detailed in Figure 5 below:

Figure 5: AHSCP SCP – Vision, Values and Mission



 **Our Vision** - People in Angus receive the best services possible and enjoy physical and mental health to their full potential.

 **Our Values** - We are caring, compassionate, person-centred, honest and respectful.

 **Our Mission** - Working together, being courageous and innovative, always aiming to provide safe, effective high-quality health and social care.

(Source: AHSCP Strategic Commissioning Plan)

What WE will do to make a difference

- Work with communities
- Focus on prevention and enablement
- Be realistic: provide safe and effective services in an increasingly challenging financial environment
- Be more creative, courageous and innovative
- Build for a future where digital technologies are more integrated in our work and used more widely by the population

What YOU can do to make a difference

- Take control of your own health and wellbeing
- Keep active whatever your stage in life
- Maintain a healthy weight
- Be informed about how to best address your health concerns
- Be mindful of the wellbeing of others in your community
- Get involved in your local community
- Join our conversations to help shape health and social care services for the future

About Your Locality


Public Health for Scotland published their **Locality Profile** data for the North East of Angus in December 2022. This contains further information on several different areas across the locality including:

- Population
- Deprivation
- Services
- Housing
- General health
- Lifestyle and risk factors
- Hospital and community care

Population

The North East locality covers an area of 722 square kilometres; it consists of the distinct areas of Montrose, Brechin and Edzell. Details of the population of the North East are illustrated in figures 6 and 7 below.

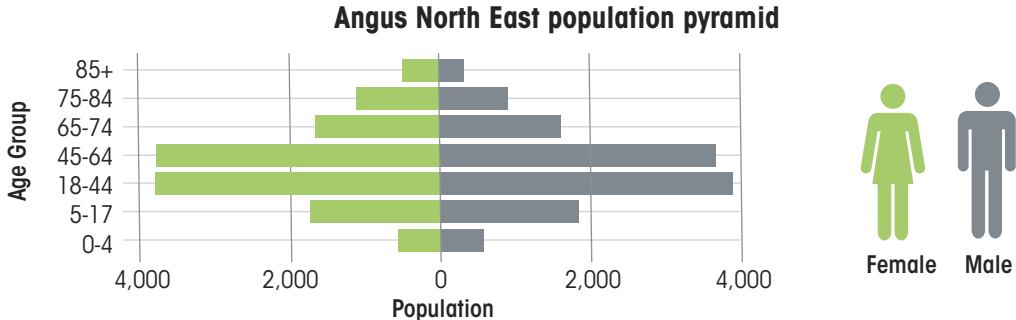
Figure 6: Our Population



Age Range	Angus Wide	North East
Age under 18	21,172	4,734
Age 18-64	66,484	15,058
Age 65-74	15,410	3,265
Age 75-84	9,433	2,041
Age 85+	3,621	830
All people	116,120	25,928

(Source National Records Scotland)

Figure 7: Population breakdown by gender and age band (2021)



(Source Public Health Scotland Locality Profile)

The North East is the second least populated locality with 25,928 people and a density of 36 people per square kilometre. National Records for Scotland projections show the population of the North West is predicted to decrease by 0.5% from 2021 to 2026. The North East population has the second lowest proportion of older people aged 65+ years (23.7%) in Angus. It is projected that the 65+ population in the North East and other localities will experience an 8% increase by 2028 and a 18% increase by 2038.

The data found in the **Locality Profile** shows that in comparison to the other localities across Angus, the population of North West has:

- the second lowest uptake of bowel screening at 68.1%
- the lowest percentage of the population diagnosed with a long-term physical health condition at 22.2%
- the highest number of cancer registrations at 634 per 100,000
- the second lowest percentage of the population prescribed medications for anxiety, depression or psychosis at 19.9%
- the second highest rate of drug-related hospital admissions at 142 per 100,000
- the highest rate of alcohol-related deaths at 21.3 per 100,000

The average household income was estimated as £25,198 in 2018, which was the second lowest across the four Angus localities.

Life Expectancy

We know from the National Records of Scotland data 2021 that the average life expectancy for males in Scotland is 76 and for females is 81. The average life expectancy for males in Angus is 78 and for females is 82, with the North East data telling us that for males it is 78 and for females it is 82.1.

Deprivation

The Scottish Index of Multiple Deprivation (SIMD) is the Scottish Government's official tool for identifying those places in Scotland suffering from deprivation. It incorporates several different aspects of deprivation, combining them into a single index. The most recent version of the deprivation index, SIMD 2020, combines 37 indicators across 7 domains:

- income
- employment
- health
- education skills and training
- housing
- geographic access and
- crime

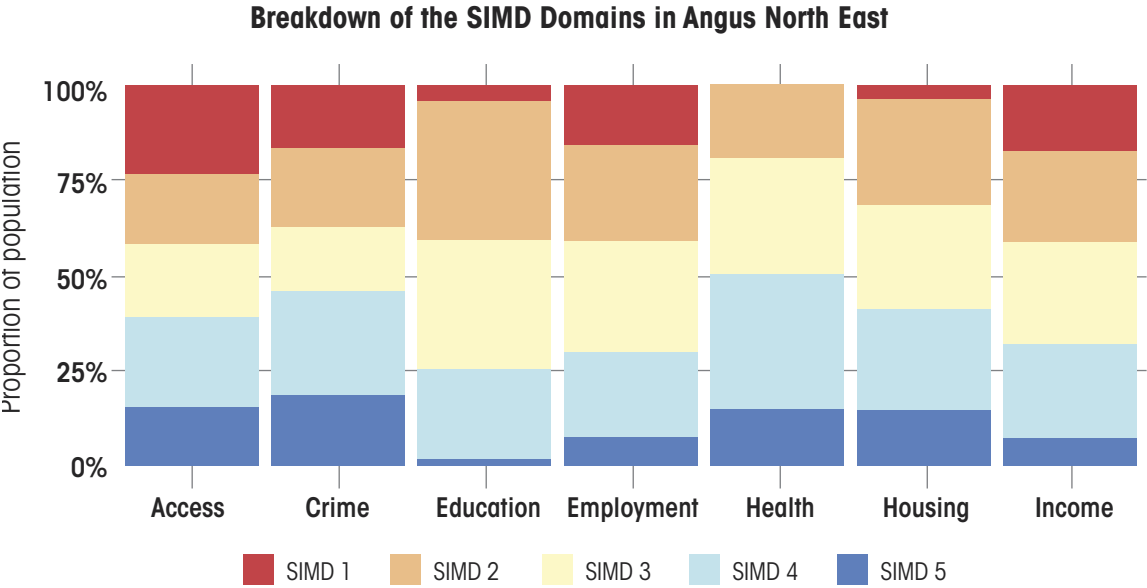
Of the 2021 population in the North East, 5.2% live in the most deprived quintile (SIMD 1) and 5.2% live in the least deprived Quintile (SIMD 5). Further information can be found in the **Locality Profile**. Figures 8 and 9 on page 15 show the percentage of the North East population living in each SIMD quintile in 2021.

Figure 8: Percentage of Angus North East population living in the 2016 and 2020 SIMD data zone Quintiles

Quintile	Percent of 2016 Population (SIMD 2016 Ranking)	Percent of 2021 Population (SIMD 2020 Ranking)	Difference
SIMD 1	2.6%	5.2%	2.6%
SIMD 2	27.5%	32.6%	5.1%
SIMD 3	37.1%	29.4%	-7.7%
SIMD 4	17.4%	27.6%	10.2%
SIMD 5	15.4%	5.2%	-10.2%

(Source: Scottish Government, Public Health Scotland, National Records Scotland)

Figure 9: Proportion of the population that reside in each 2020 SIMD Quintile by domain in 2021



(Source PHS Locality Profile – December 2022)

Long Term Conditions

Advances in health care mean that people are living longer than ever before. This is good news but also creates a challenge because as people get older the likelihood of having one or more long-term condition increases and this puts pressure on health and social care services.

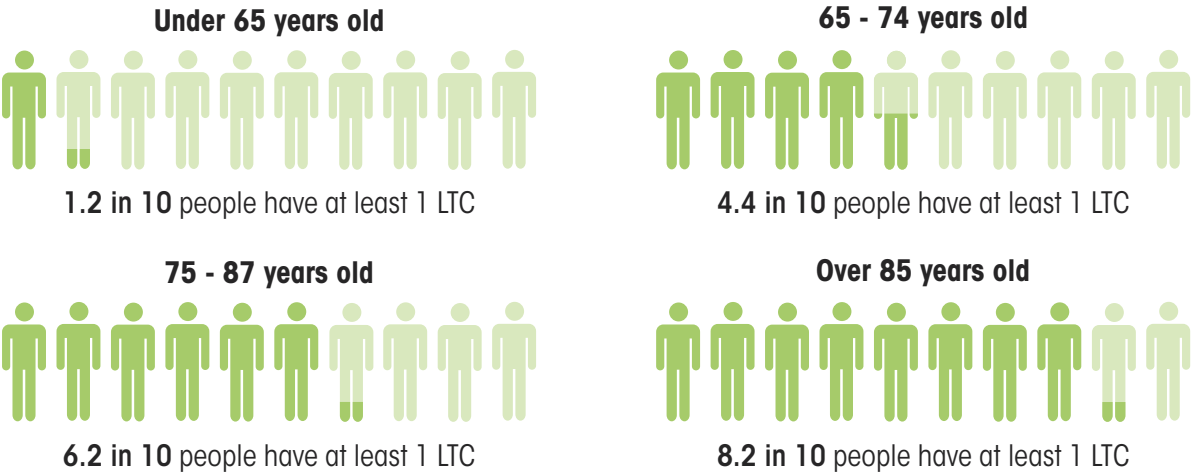
Figure 10 on page 16 shows the prevalence of the five most common physical long-term conditions as a percentage of the population across geographical areas (where 1 = most prevalent). Figure 11 shows the ratio of the population living with long term conditions in the North East by age group.

Figure 10: Top 5 Physical Long-Term Conditions

	Long-Term Condition	Angus North East Locality	Angus HSCP	Scotland
1	Arthritis	5.70%	6.04%	5.75%
2	Cancer	5.32%	5.64%	5.32%
3	Coronary Heart Disease	5.14%	5.26%	4.93%
4	Asthma	3.85%	3.86%	4.72%
5	Diabetes	3.72%	3.79%	3.38%

(Source PHS Locality Profile – December 2022)

Figure 11: Ratio of Long-Term Conditions by Age Group

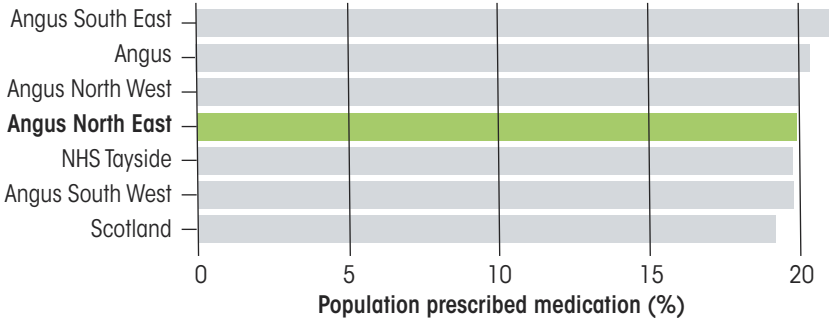


(Source PHS Locality Profile – December 2022)

In 2020/2021, Angus North East had a larger proportion of the population being prescribed medication for anxiety, depression and psychosis compared to the rest of Scotland (19.9% compared to 19.3%). Figure 12 below illustrates a comparison across all Angus localities.

Figure 12: Percentage of population prescribed medication for anxiety, depression and psychosis by area for the latest time period available.

Anxiety, Depression and Psychosis Prescriptions, 2020/21



Falls

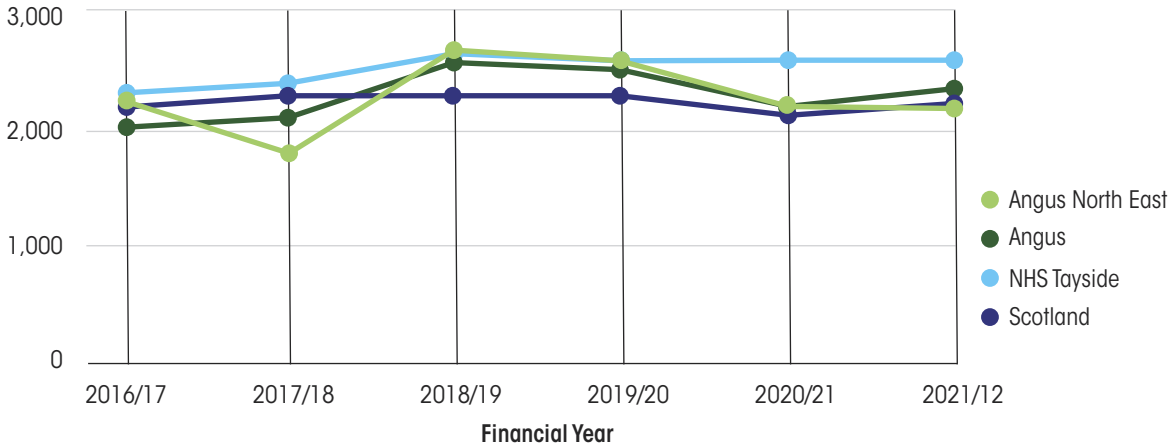
Falls admission rates for people aged over 65 in Angus are increasing. In Scotland falls admission rates are falling. In Angus 39% of all fall admissions for people aged over 65 are people aged over 85 who account for 13% of the over 65 population. The percentage of people aged over 85 in our over 65 population is higher than Scotland as a whole.

AHSCP has had great success in looking after people at home rather than them remaining unnecessarily in hospital, particularly around end-of-life care. It is important to recognise that as we manage people in their own homes for longer, we have a greater proportion of frailer people living in our communities. Unfortunately, in frailer, older people, falls are not uncommon. Falls have many possible causes and often there are several reasons for why a person has fallen such as being on lots of medicines, having various medical conditions, eyesight problems and poor mobility. Our focus is how we prevent falls in the older population and encouraging good balance and mobility is the key to this. Falls have been identified as an area for further assessment and improvement in Angus, with a comprehensive falls action plan to be implemented.

Figure 13 below details the emergency admission from falls for those aged 65+ in the North East Locality.

Figure 13: Falls in population aged 65+ by geography area

Emergency admissions from falls per 100,000 population aged over 65 over time by residence



More information around hospital and community care can be found in the **Locality Profile**.

Carers

A proportion of people in the North East locality look after someone because they can't manage on their own, due to illness, frailty, disability or other factors. People of all ages take on this unpaid role but for several reasons might not necessarily see themselves as a carer. Caring can be a hugely rewarding experience, but it can also

lead to financial hardship and social isolation and impact on the carer’s own health and wellbeing.

The Carers (Scotland) Act 2016 recognised the vital contribution that unpaid carers make to their families, communities, and the social care system in Scotland and introduced new rights for carers and people who are considering taking on the role. The legislation was introduced in April 2018 to ensure that carers are better and more consistently supported and can continue to care (if they are willing and able to) and have a fulfilling life alongside their caring role.

As the population ages and people are increasingly cared for in the community, the number of unpaid carers is likely to continue to rise. Only a proportion of carers will ever need formal support, but the Carers (Scotland) Act 2016 recognises that preventative support at an early stage can lessen the risk of carers coming to crisis.

AHSCP is committed to ensuring that all carers are aware of the range of resources available to support and sustain them in their role. Its strategic outcomes for carers are that:

- Carers are identified.
- Carers are supported and empowered to manage their caring role.
- Carers are enabled to have a life outside of caring.
- Carers are fully engaged in the planning and shaping of services.
- Carers are free from disadvantage and discrimination related to their caring role.
- Carers are recognised and valued as equal partners in care.

The Scottish Health Survey (2022) indicates that 13% of the Angus population are unpaid carers, or around 15,000 people. Angus Carers Centre currently supports around 2,000 carers across Angus (March 2023) indicating that around 13,000 carers are not known to services. COVID-19 has had an unprecedented impact on people with the most recent national study indicating that 1 in 5 adults provide some form of unpaid care to family, friends or neighbours.

Figure 14 illustrates the number of carers in each locality who are actively supported by the AHSCP and/or Angus Carers Centre as of 21 September 2023. Other specialist services and organisations also provide vital support to carers across Angus.

Figure 14

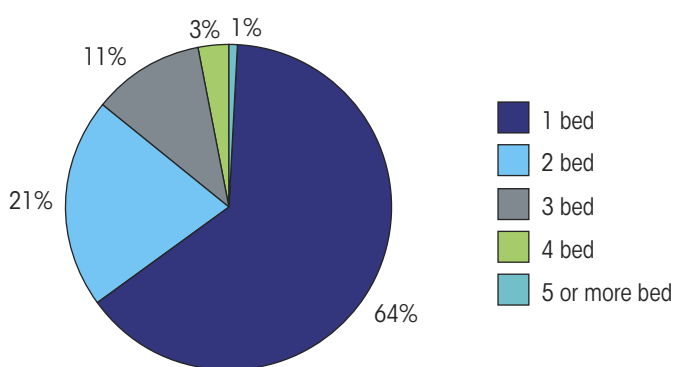
Locality	Adult Carers	YC (under 16 only)
South East	510	17
North East	429	17
South West	340	8
North West	657	27
SW/NW	103	2
	2039	71

Accommodation and Housing

Angus Council have responsibility for delivery of housing services across Angus. They have recently published the Angus Local Housing Strategy 2023-2028 supported by the Angus Housing Need and Demand Assessment.

Evidence from the Common Housing Register (CHR) shows significant demand for smaller social housing properties across Angus with 64% of waiting list applicants requiring a one-bedroom home and 21% requiring two bedrooms. Figure 15 below illustrates the waiting list by bedroom requirement across Angus as a whole.

Figure 15: CHR Waiting List Requirements



Source: Angus Common Housing Register, Report (2021)

Waiting list data also highlights the location where applicants would prefer to live, and unsurprisingly the larger settlements are more popular as show in figure 16 below.

Figure 16

The East and West HMAs account for around two-thirds of all applications. Whilst the South just 10%, and the North just under a quarter of applications.

Area	Live Applicants (excluding 'Choice')	As %age of total
Brechin	182	9%
Montrose	241	12%
Arbroath	747	36%
Carnoustie	151	7%
Monifieth	126	6%
Forfar	498	25%
Kirriemuir	81	4%
	2026	100%

Source: Angus Common Housing Register, Report (2021)

More housing information across Angus can be viewed in **Angus Housing Market Profiles**. Examples of assets in the North East can be found in appendix 2.

A snapshot of the North East Locality



HYPERTENSION rates are **above the average** for Angus



CORONARY HEART DISEASE rates are the **highest** in Angus



Second lowest rate of **DIABETES** in Angus



The percentage registered as having **DEMENTIA** is **below the average** for Angus



1 in every 7 people aged over 65 has a **Community Alarm Service** in 2022/23



1 in every 75 people over 65 received **Community Meals** in 2022/23

1 in every 34 people over 65 have been admitted to hospital after a fall in 2022/23



The average length of hospital stays for adults in 2022/2023

8 days



269 adult carers are supported by **Angus HSCP Adult Services Teams**

In 2020/2021 had the **highest rate of alcohol-related A&E attendance** of the whole of Angus



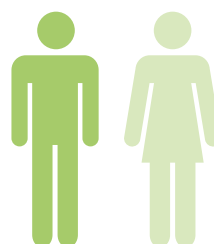
In 2022/23, **123 people over 65** lived in a care home and **112** in a nursing home



Angus Carers Centre supports **446 adult and young carers**



1 in every 46 adults receives a personal care service at home
7,457 hours of personal care per **1,000 adults** have been delivered in 2022/2023



Life expectancy in the North East locality is **below the Angus** and **above the Scottish** average

Communication and Engagement

Engagement and participation with those who live and work in each locality is essential to developing a good understanding of health and wellbeing in the area and what challenges and opportunities there are.

Several different mechanisms are used to encourage local people, service users, the workforce and other stakeholders to come forward to express their views and experiences. This informs future priorities and influences the planning and design of services. Examples include:

- Sharing of information within the locality through the LIGs.
- Each locality also has a GP Cluster Group at which all GP Practices in the locality are represented and where issues pertinent to primary care are discussed.
- The Carer Influencers Network provides a forum for carers to contribute their views and ideas.
- Engagement and feedback events with communities in relation to:
 - Supported accommodation review
 - The Gables option appraisal
- Feedback questionnaires in relation to:
 - Strategic Commissioning Plan 2023-2026
 - Carers Strategy 2023-2026
 - Joint Angus Advocacy Strategic Framework 2023-2026
 - Angus Living Life Well Plan

It is important to continue to dedicate time and resources to meaningful engagement in each locality, building on the good work done so far.

Useful Online Resources

AHSCP has developed a website where you can find out more www.angushscp.scot. You can also follow us on Facebook at www.facebook.com/ahscp and Twitter at [AngusHSCP](#).

Appendix 1

This Improvement Plan is about making decisions at a local level that will lead to improvements and deliver outcomes that are important to the people of the North East locality. It’s about empowering local communities, enabling professionals to do their best work and making best use of the resources in the locality by everyone working together. It focusses on recognising the assets which develop naturally in the community, looking at solutions based on local resources to meet the needs of the local population and tackling inequalities.

This Improvement Plan is a working document and will be used by the North East Locality Improvement Group to monitor progress against actions.

The Angus Health and Social Care Strategic Plan Strategic Commissioning Plan 2023-2026 has four strategic priority areas which this improvement Plan will contribute to delivering;




- PRIORITY 1: Promote ways to keep people healthy.**
- PRIORITY 2: Care closer to home.**
- PRIORITY 3: Mental health & wellbeing and substance use recovery.**
- PRIORITY 4: Equity of access to high quality health and social care.**

Angus wide actions are identified in the Strategic Delivery Plan in relation to the four strategic priority areas.

This Improvement Plan focuses on actions identified by the LIG to support locality led priorities.

This is an annual Improvement Plan that will be renewed every year. Therefore, within this 12-month period there may not be actions identified under each of the four strategic priority areas.

Timescale for completion/completed actions

-  Complete
-  Activity / In progress
-  Overdue

Improvement Action	Intended Outcome	Link to national outcome
PRIORITY 1: Prevention and proactive care		
Promote ways to keep people healthy		
Relaunch of Be Active, Live Well programme: <ul style="list-style-type: none"> Professional referrals Self-referrals 	Support and increase activity of those with long term conditions	1, 2, 4, 5
Support the identification of programmes and pathways across the NE for people to be active	Support VAA with the development of the Community Connector app by providing updates on activities available across the locality	1, 2, 4, 5, 9
Promotion of Health Walks in the NE	Share information across the NE with details of health walks Support further developments and improvements, including capacity building	1, 2, 5
'Planning for the Future' events	Collaborative events with representation from different organisations – information to help people prepare for the future	1, 2, 4, 5, 9
Understand the needs of individuals in the NE with regards to cooking provision and information	Gather local information in relation to health eating/cooking skills. Engage with local partners to respond to any identified need	1, 2, 5
Well Living workshops in the NE area	1 year – monthly events over 12 months Promote the Well Living events	1, 2, 5
Build stronger and more resilient communities		
Promotion of NE LIG through community groups	Raise the profile of the LIG, it's role and responsibility and how people can participate	3, 4, 5, 9
Act early to anticipate needs		
PRIORITY 2: Care closer to home		
Provide care closer to home wherever possible		
Explore availability of support for those with gambling issues and their families	Promote local and national support available for those facing issues with gambling and for their families	1, 5, 7
Continue to work with partners to provide the right care, in the right place, at the right time		
Support a co-production model in the NE by ensuring that the NE LIG identifies the needs and demands of the locality.	Support local engagement and involvement with community groups in the NE to ensure key issues and local needs are addressed	1, 2, 4, 5

Improvement Action	Intended Outcome	Link to national outcome
PRIORITY 2: Care closer to home <i>continued</i>		
Support carers to sustain their caring role and enable them to have a fulfilling live alongside caring		
Invite Carer representation to join the LIG	Improve connections with carers in community	2, 4, 5, 6
PRIORITY 3: Mental health & wellbeing and substance use recovery		
Deliver the ambitions of the Angus Living Life Well Improvement Plan		
Support people to recover or manage their condition		
Invite Citizens Advice to join the LIG	Improve connections with people in community who access CA servicers	1, 2, 4, 5
Invite Angus Drug and Alcohol Recovery Services to join the LIG	Representation for those with drug and alcohol issues on the LIG (Community Mental Health are represented)	1, 4, 5, 8
Provide consistent delivery of safe, accessible, high quality drug & alcohol treatment across Angus		
PRIORITY 4: Equity of access to high quality health and social care		
Remove barriers to accessing services		
Reduce homelessness		
Keep vulnerable people safe		

Appendix 2

Examples of Assets in the North East Locality

Asset	Total No.	Location
Health & Social Care		
Health Centres	5	Brechin x 1 / Montrose x 3 / Edzell x 1
Community Pharmacies	7	Brechin x 1 / Montrose x 3 / Edzell x 1
Minor Injury & Illness Services	-	Cover from Arbroath or Whitehills
Opticians	5	Brechin x 2 / Montrose x 3
Dental Surgeries	5	Brechin x 2 / Montrose x 3
Community Treatment & Care (CTAC) Services	2	Stracathro Hospital & Links Health Centre, Montrose
Community Mental Health Teams	2	Adult & Over 65s teams based at Gowanlea, Arbroath
Mental Health Officers Team		Covers all of Angus – based at Whitehills HCCC, Forfar
Dementia Liaison Team	1	Both cover all of Angus – based in Susan Carnegie Centre, Stracathro
Post Diagnostic Dementia Support Team	1	
Community Maternity Unit	1	Montrose
Allied Health Professionals:		
Occupational Therapy	-	Whitehills Health & Community Care Centre
Physiotherapy	-	Montrose
Speech & Language Therapy	-	Montrose
Podiatry	-	Montrose
Nutrition & Dietetics	-	Montrose
Older Peoples Care Management Team	1	Town House, Montrose
Enablement & Response Team	-	Broomfield Resource Centre, Montrose
Learning Disabilities Team	-	Bruce House, Arbroath
Physical Disabilities Team	-	Bruce House, Arbroath
AIDARs Team	-	Cover all of Angus – based at Gowanlea & Bruce House, Arbroath
No of Care Homes	5	Brechin x 2 / Montrose x 2 / Edzell x 1
No of Residential Beds	194	
Elderly Mentally Ill (EMI) beds	0	
Intermediate care beds	2	

Asset	Total No.	Location
Housing		
Commissioned Supported Accommodation	4	
Community & Learning		
Day Centres: Older People	2	Montrose x 1 / Brechin x 1
Adults with Learning Disabilities	1	Montrose
Leisure Facilities	2	Brechin x 1 / Montrose x 1
Libraries	2	Brechin x 1 / Montrose x 1
ACCESS Office	2	Brechin x 1 / Montrose x 1
Angus Independent Advocacy	-	Arbroath - covers all of Angus
Citizen's Advice Bureau	1	Montrose
Angus Carers Centre	-	Arbroath - covers all of Angus
Angus Young Carers	-	Arbroath - covers all of Angus
Job Centre Plus	1	Montrose
Alzheimer Scotland	-	Covered by High St, Arbroath
Voluntary Action Angus	1	Forfar - covers all of Angus
Police Station	2	Brechin x 1 / Montrose x 1
Fire Station	2	Brechin x 1 / Montrose x 1
Churches & Places of Worship	4	Brechin x 3 / Montrose x 1
Primary Schools	10	Brechin x 3 / Montrose x 6 / Edzell x 1
Secondary Schools	2	Brechin x 1 / Montrose x 1
Further Education	-	Dundee & Angus College

