

The Highland Council

Adult and Children's Services Committee – 13 November 2013

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| Agenda Item | 13. |
| Report No | ACS/104/13 |

District Partnerships – Update

Report by Director of Health and Social Care

Summary

This report summarises the key issues that have been raised at District Partnerships in the reporting period April – September 2013 and the key findings of the seminar on 27 September 2013. Members are asked to note progress with District Partnerships in this reporting period, and to agree that a further report comes back to committee once partners have discussed and proposed further changes in light of the seminar and the wider community planning review taking place in Highland.

1. Background

- 1.1 As of 8 March 2013, all nine District Partnerships were operational and a first report on their progress was presented to Committee on 20 March 2013.
- 1.2 The 'Guidance on District Partnerships' document is attached at **Appendix 1** and was agreed by the Adult and Children's Services Committee on 26 September 2012. This guidance will be updated and reported to Committee once the outcomes of the seminar on 27 September have been discussed with partners, and in light of any proposed changes resulting from the review of community planning arrangements in Highland.
- 1.3 The seminar noted that the requirement for locality planning has been included in the Public Bodies (Joint Working) Bill, and that the Scottish Government has circulated a discussion paper, highlighting many of the issues that the Partnerships in Highland have been seeking to progress.
- 1.4 **Appendix 2** summarises the outcomes of a survey monkey consultation with all District Partnerships on progress to date

2. Impact

- 2.1 This is the second report to committee on progress of the District Partnerships following the roll out to all nine. This report will also be presented to NHS Highland's Health and Social Care Committee.
- 2.2 **Appendix 3** shows a summary statement for each District Partnership, indicating the issues that have been raised and progress that has been achieved thus far.

2.3 Recurring themes across District Partnerships in this reporting period include:

- Family Nurse Partnerships;
- Dental visiting service;
- Early years collaborative;
- Establishment of Patient Participation Groups;
- Youth Services, including employability and engagement;
- Integration progress;
- Patient Transport;
- Care at Home Services;
- Adult substance misuse / Drug & alcohol services; and
- Keep Well Service

2.4 Other more specific discussion has included:

- NHS Highland/ Alzheimer Scotland research report;
- Dewar conference feedback;
- Suicide mitigation policy;
- Nutrition of Frail older people;
- Specialist support for Multiple Sclerosis patients;
- Place of safety;
- Mapping of District Services; and
- New schools updates

2.5 District Partnerships have created a strong base of shared understanding and trust that bodes well for the future. However, in this reporting period, there is also a sense of frustration that, in some District Partnerships, the activity being discussed and proposed is not yet fully immersed as part of the 'day job'. This was further discussed at the September seminar.

3. **District Partnership Seminar**

3.1 Initial partner discussion

3.1.1 The first year has seen good progress in the establishment of working relationships and development of understanding between partners. Partnerships are now well placed to start to make a difference to Service delivery. At present, however, whilst lots of information has been shared, few actions that make a tangible difference have arisen from the meetings.

3.1.2 Engagement with the public and other stakeholder groups remains a concern and various aspects of the relationship with the Third Sector were discussed.

3.1.3 Examples of good practice were raised and shared with the meeting. Sharing of information between Partnerships could be improved as could links with other Community Planning topics, such as Community Safety.

3.2 Summary of agreed actions

3.2.1 Recognition that last year has seen good progress in building relationships between service delivery partners.

- ***Further work needed to fully embed Third Sector in the***

Partnerships and potential role of Third Sector on Assessment Panels

- ***Consideration needed on how to effectively ensure that feedback from Third Sector is coming through***
- 3.2.2 Issues were raised of information flow to and from: NHS; Highland Council and Government. Issues that cannot be resolved within the Partnership need to be escalated as appropriate.
- ***Clarity needed on escalation routes when DPs were seeking a strategic solution to key issues***
- 3.2.3 There was discussion about how wide the remit of the Partnerships should be: Transport and Housing are important in meeting Health & Social Care needs. How far should Partnerships go in addressing these wider needs?
- ***Whilst some DPs were mapping needs in their area, this needs to be shared across all DPs***
- 3.2.4 There would continue to be a bi-annual report to both NHS Board and the Adult & Children's Services Committee summarising the work of the Partnerships.
- ***Second report now due to NHH and HC***
 - ***Need to capture issues that cut across more than one DP;***
 - ***Need to learn from each other***
- 3.2.5 It was felt that there may still be duplication of meetings with additional groups discussing the same issues and that this leads to public confusion. However, some felt that the issues were too important to be left to a single series of quarterly meetings.
- ***Chairs should meet more regularly (perhaps a Networking Forum)***
 - ***DPs should meet once per year through a seminar***
 - ***Clarity needed regarding who does what in communities e.g. Community Development Workers, Community Health Co-ordinators, Networkers, HIE Account managed services, Highland Council's employability agenda, and so on***
 - ***If there is duplication of meetings locally then need to proactively close down meetings that cause/ perpetuate duplication and confusion locally***
- 3.2.6 There was still public confusion about what District Partnerships were for and it was agreed that a new name was needed. Various suggestions were put forward for a name and a strapline but none found broad acceptance.
- ***Use of words 'local', 'integrated', 'improvement', 'partnership', 'joint working' should be used in any title***
 - ***Better and more consistent advertising is needed with budgets set aside for this***
 - ***Further clarity needed on how to get items on the agenda***

4. Implications

- 4.1 There are no known equalities, climate change, carbon clever or resource

implications as a result of this report

Recommendation

Members are invited to:

- (i) note progress with all nine District Partnerships in this reporting period; and
- (ii) agree that a further report comes back to committee once partners have discussed and proposed any changes in light of the District Partnership seminar and any implications as a result of the wider community planning review taking place in Highland.

Designation: Director of Health and Social Care

Date: 5 November 2013

Authors: William Gilfillan, Corporate Manager
Emma Tayler, Professional Assistant

Background Papers:



Highland Council and NHS Highland - The Highland Partnership

Guidance on District Partnerships

August 2012

*Following lessons learned during 2012
from first 2 District Partnerships
in Lochaber and Caithness*

Background

As the Framework for Strategic Governance around the integrated services for Children and Adults has been evolving, the Partnership of the Council and Health Board has recognised the unique responsibility held by elected Councillors.

As well as ensuring the efficient and effective management of services for which they are accountable, they are also general advocates on behalf of their constituents in relation to a wide range of issues impacting on their communities.

The Partnership of the Council and Health Board has recognised this role by proposing the establishment of a series of District Partnerships. These will be action focussed and will provide a clear two-way link between strategic direction and local solutions.

They will involve Councillors, relevant managers, community representatives and representatives of professional groups (Social Work, Nursing, GPs and so on).

The role and remit of these District Partnerships is described in more detail below.

This is likely to also involve some rationalisation of existing local groups who also deal with health and social care issues, to avoid duplication and overlap.

Role and Remit of District Partnerships

The District Partnerships will consider issues relevant to the defined geographic and service delivery area covering both Integrated Children's Services and Adult Services and will be a key element of local engagement. Their role and remit is to:

1. consider issues raised in relation to local service delivery and ensure that these are addressed either by local management or referred to the relevant Chief Executives of the NHS Highland or Highland Council;
2. identify key local issues and priorities in relation to the delivery of strategy and policy in services for children and adults;
3. consider and comment on performance management and monitoring reports on children and adult services outcomes in the local area;
4. consider the development and implementation of initiatives approved by the strategic governance structure;
5. propose new developments and initiatives for the consideration of the strategic governance structure; and
6. provide views on the redesign of local services, as appropriate

Strategic Governance Structure

The responsibility for strategic planning, resourcing and decision making in both children's and adult services lies with the governance committee for each lead agency, as set out in the Partnership Agreement.

For Highland Council, and with regard to integrated children's services, this is the Adult and Children's Services Committee. For NHS Highland, and with regard to services for adult and health provision (including child health services that are not delegated), this is the Health and Social Care Governance Committee.

Each governance committee has nine members who have the remit of ensuring good links and communication with a District Partnership, also ensuring that strategic decision making is informed by local views and circumstances.

Chairman

The Chair of each District Partnership will come from either the Lead District Partnership Member on the NHS Board or the Lead District Partnership Member on Highland Council's Adult and Children's Services Committee.

It is envisaged that the two Members will determine this between themselves, but failing that, the Chair will be confirmed by the Leader of the Highland Council and Chair of NHS Highland.

Assessment Panel

This Panel will draw from the District Partnership core membership and will consist of the Chairman, Council Ward Manager, Adult Services Manager and Children's Services Manager.

The purpose of the Panel is to consider requested agenda items for meetings and accept, reject or re-direct them as appropriate. Items will be assessed 21 days in advance of the Partnership meeting taking place. A sample of the agenda request form is attached.

If an item is accepted, the Panel may consider that due to its sensitivity it should be discussed either partially or wholly in private.

Attendance

Core membership:

- NHS Board Member or other representative of the Operations Committee (1)
- Adult and Children's Services Committee Member (1)
- Highland Council Elected Member representative of each Council Ward in the areas of the District Partnership (1 from each Ward). (The 9 Members appointed by Adult & Children's Services Committee as District Partnership Lead Members will be the representative from their Ward on the DP)
- Council Ward Manager (facilitation role)
- Nursing representative
- Associated School group representation to include 1 secondary HT, one primary HT and one colleague representing youth services*
- ECS management
- Children's services management (1)
- Adult services management (1)
- Ambulance service (1)
- Voluntary sector (1)
- Independent Sector (1)

*To ensure best use of time ASGs should ensure attendance for items relevant to their area. However ASG's must ensure a minimum presence per district of 1 secondary HT, one primary HT and one colleague representing youth services at all meetings.

Casual attendance:

The assessment panel will extend a meeting invite(s) to appropriate others as and when required dependant on the items being discussed.

Meeting

The District Partnership will meet 4 times per annum, in public. (Whilst District Partnerships are not public meetings, a slot will be scheduled at the end of each agenda to listen to any public views or suggestions). The action points arising from the District Partnership will be considered by the relevant strategic governance body of both NHS Highland and The Highland Council.

The meeting will be facilitated by the local Council Ward Manager, with focussed agendas and action points.

There will be one meeting taken in two sections to deal with Integrated Children's Services and Integrated Adult Services.

Agenda for and Action Points from each meeting will be uploaded onto the following websites as a minimum: For Highlands Children; For Highlands Communities; Highland Life.

The meetings must be promoted to the general public using appropriate means agreed by the District partnership in addition to the above. i.e. through a press release, display of posters etc.

Review

A review of District Partnerships will take place within 18 months.

A flow diagram is encompassed in this guidance to illustrate the intended functioning of the District Partnership.

A worked example for illustrative purposes only is attached at the end of the guidance

DISTRICT PARTNERSHIP

AGENDA item request

This form is to be used when requesting items to be placed on the _____ District Partnership agenda. Forms must be submitted at least **21 days** prior to the partnership meeting taking place.

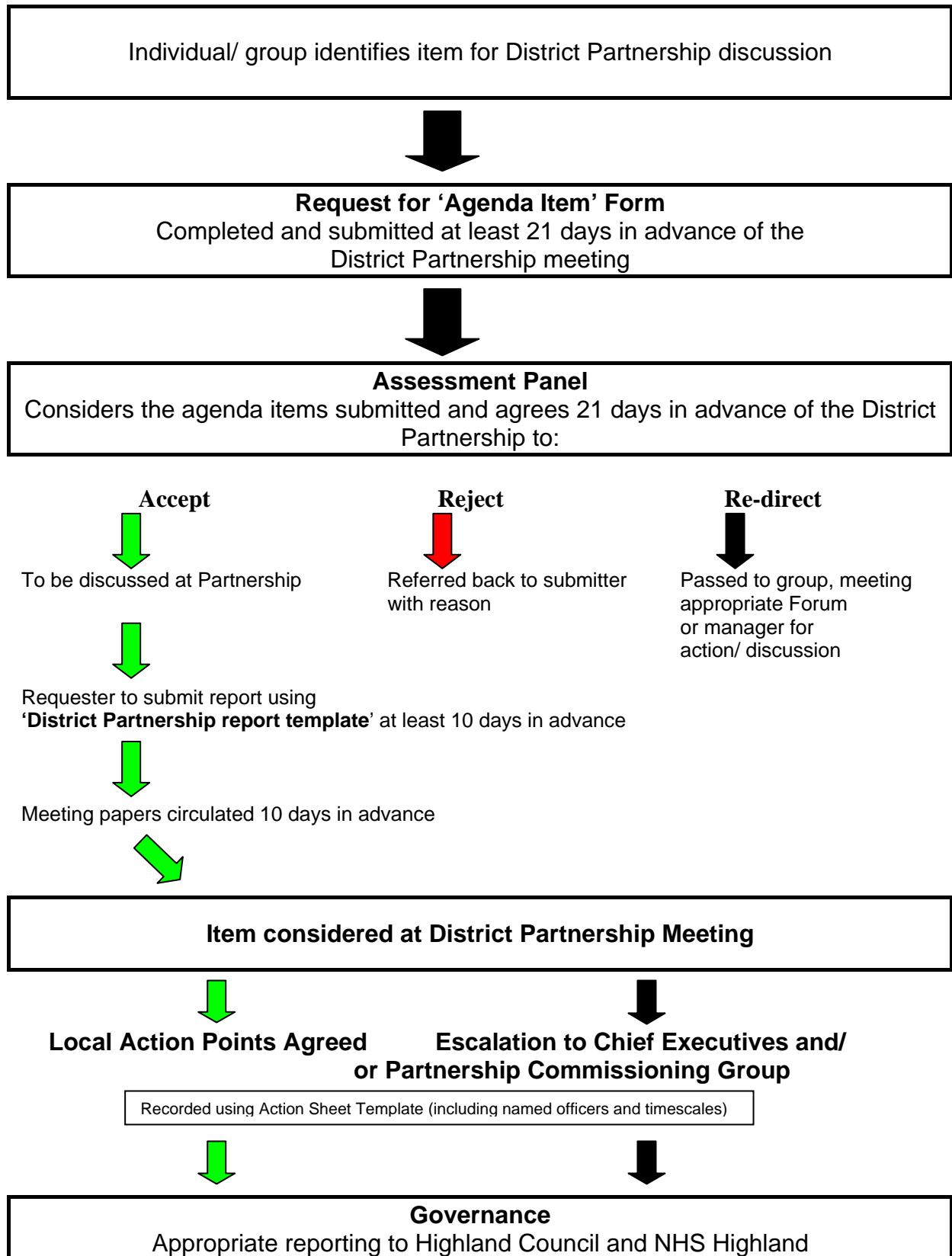
Persons requesting the item will be notified by email if it has been accepted. At this stage supporting documentation will need to be forwarded at least 10 days in advance of the meeting (see report template). Please email your completed form back to: ward.manager@highland.gov.uk. Contact tel:_____. Requests should be no longer than 2 A4 sides (12pt font).

| | | |
|--|----------|--|
| Organisation/service/agency /Strategic Board requesting item | | |
| Named contact | | |
| Email address | | |
| Phone contact | Landline | |
| | mobile | |
| Address | | |

| | |
|---|--|
| Item subject heading | |
| Brief descriptor of item (no more than 750 characters with spaces) | |
| | |
| Has this item been presented to the LDP before or any other partnership/forum/grouping for discussion or action? (If so, please indicate grouping and meeting date(s)) | |
| What action/outcome(s) are you seeking from the Partnership? | |
| - | |
| - | |
| - | |
| Does anyone else need to be invited to participate in the discussion (beyond the core membership of the Partnership)? If so please provide the organisation(s) name, individual's name, e-mail and phone contact: | |
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| How much time do you estimate you require to present your item (include discussion time) | |

DISTRICT PARTNERSHIP

DISCUSSION FLOW



HIGHLAND DISTRICT PARTNERSHIPS REVIEW – SEPTEMBER 2013

SUMMARY OF SURVEY MONKEY RESULTS

Number of survey returns = 47

1. Which District partnership do you belong to?

| | |
|---|--------|
| Badenoch, Strathspey, Nairn and Ardersier | 6.38% |
| Inverness East | 8.51% |
| Inverness West | 8.51% |
| Mid Ross | 8.51% |
| Skye, Lochalsh, Wester Ross & Assynt | 14.89% |
| East Ross | 6.38% |
| Sutherland | 6.38% |
| Caithness | 19.15% |
| Lochaber | 21.28% |

2. What organisation or sector are you representing?

| | |
|----------------------------|--------|
| Local Authority | 53.19% |
| NHS | 23.40% |
| Voluntary / not for profit | 19.15% |
| Private sector | 4.26% |

3. Do you feel meetings are well publicised?

| | |
|-----|--------|
| Yes | 80.85% |
| No | 19.15% |

Comments show there is a range of methods being used to publicise meetings however some concern is raised as to how effective DPs are at getting issues/questions on the table from the public. One comment stated 'It would be good to find ways of encouraging individuals to approach either their local District manager, ward manager or elected members with issues they'd like to raise'. Posters need to be brighter, more eye catching.

4. Are the venue facilities and timings of meetings suitable?

| | |
|-----|--------|
| Yes | 85.11% |
| No | 14.89% |

Most DPs are rotating venues to give a geographical spread. A few suggestions of DPs to meet in evenings if there is demand to allow the general public to attend. Elected members want to attend but some DP meeting clashes with Highland Council Strategic committees.

5. Do you feel the core membership of the district partnership is correct?

| | |
|-----|--------|
| Yes | 82.98% |
| No | 17.02% |

Would like to see more private and voluntary sector involvement.

6. Are you familiar with and understand the guidance?

Yes 95.74%
No 4.26%

7. Do you receive meeting papers and notifications in adequate time?

Yes 100%
No 0%

8. Do you consider on the whole the agenda items discussed to be of value in helping identify solutions/improvements to issues raised?

Yes 76.60%
No 23.40%

On the whole comments suggest that although discussion may be interesting it might be 'old news'. Comments include some DPs lacking focus and outcomes. A few suggestions that DPs may need to be more 'topic' focussed 'to give time to fully explore the topic and possible solutions'. Some DP members still feeling there is a lack of understanding of the purpose and 'potential' for DPs – reporting that some DP members lack commitment to attend or participate in meetings.

9. Do you have any suggestions that you feel would improve the operation of the partnership and/or aid discussion?

Comments include;

- Less items on the agenda to enable topics to be adequately covered
- Issue with capacity and resourcing of third sector organisations
- More action focussed
- Need to be more open and honest
- Need simpler way of getting items on the agenda
- 'All members of the group have a role in taking forward solutions' – some seeing that only a few partnership members are taking on actions

10. Comments from chairs and/or assessment panel members

- Processes for managing DPs is going well

- Positioning of third sector to bring 'well constructed strategic business' to the table needs some work / thinking
- Agenda and contents evolving with time
- Need to become 'the bridge to the public and hence be in the community more frequently'

In addition to the survey monkey questionnaire, the follow points/comments have been made through Chairs and partnership members

- Name – questions whether 'District partnership' in descriptive enough
- Assessment panel membership – should include Voluntary sector representative
- Partnership membership – should include association of community councils representative & patient participation forum representative

Appendix 3

Highland District Partnerships

Bi-Annual reporting

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|---|--|--|-------------------|------|----------|
| District | <i>Caithness</i> | | | | |
| Reporting period | March – August 2013 inclusive | Number of meetings held during this period | 1 | | |
| | | Dates held | 28.6.13 | | |
| Key issues & themes discussed | <ol style="list-style-type: none"> 1. Caithness Redesign update 2. Delayed Discharge 3. Integrated Teams update 4. Early Years Collaborative 5. Family Teams Development 6. Family Nursing Partnership 7. Dental School visiting Service 8. Membership of partnership 9. District Partnerships review due | | | | |
| Outcomes achieved during reporting period | <ol style="list-style-type: none"> 1. Further Stakeholders event held 2. New Caithness District Manager (Adult Services) appointed 3. New Member of Partnership representing Caithness Community Councils | | | | |
| Issues escalated to Highland Council and/or NHS governance committee(s) for action/response | <ul style="list-style-type: none"> - Request to NHS for new Chair of partnership to replace Colin Punler - - | | | | |
| Report approved by | | Designation | Partnership Chair | Date | 06/08/13 |

Highland District Partnerships
Bi-Annual reporting

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|--|--|---|-------------------|------|---------|
| District | East Ross | | | | |
| Reporting period | March – August 2013 inclusive | Number of meetings held during this period | | | 1 |
| | | Dates held | | | 14/6/13 |
| Key issues & themes discussed | <ul style="list-style-type: none"> 10. Youth employability 11. Family Nurse Partnership 12. Keep Well 13. Communications | | | | |
| Outcomes achieved during reporting period | <ul style="list-style-type: none"> 4. Improved understanding of the links between education, health and employability. 5. Improved links between Family Nurse Partnership and Secondary schools 6. Keep Well service now offered to clients at Work Clubs and promoted in ambulances 7. Communications strategy agreed and implemented | | | | |
| Issues escalated to Highland Council and/or NHS governance committee(s) for action/response | <ul style="list-style-type: none"> - - | | | | |
| Report approved by | Okain McLennan | Designation | Partnership Chair | Date | 2/9/13 |

Highland District Partnerships
Bi-Annual reporting

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|---|--|--|------------------------------|------|---------|
| District | Lochaber | | | | |
| Reporting period | March – August 2013 inclusive | Number of meetings held during this period | 2 | | |
| | | Dates held | 23/4/13 18/6/13 | | |
| Key issues & themes discussed | <ul style="list-style-type: none"> 14. Small Isles & Salen GP provision and emergency out of hours cover for West Ardnamurhan 15. Belhaven – future 16. Lochaber Drug & Alcohol Forum – future 17. Older adults change plan – post/staff mapping for development posts 18. Place of Safety 19. Summer Activity programme review 20. Young people’s engagement, review of ward forum actions 21. Paediatric services 22. New schools (update) 23. Dental visiting service, family nurse partnership, early years collaborative (for information) 24. Suicide mitigation policy 25. Dewar conference (feedback) 26. Integration – 1 year on (NHS) | | | | |
| Outcomes achieved during reporting period | <ul style="list-style-type: none"> 8. Summer activity programme review completed 9. Place of safety agenda prioritised, actions in place to revisit 10. Lochaber community plan – healthier section fully reviewed | | | | |
| Issues escalated to Highland Council and/or NHS governance committee(s) for action/response | <ul style="list-style-type: none"> - Belhaven disposal - Obstetric scanning (Lochaber services) - Family nurse partnership (relevance to Lochaber/lack of coverage) | | | | |
| Report approved by | Michael Foxley Cllr Bren Gormley | Designation | (joint) Partnership Chair | Date | 26.8.13 |

Highland District Partnerships
Bi-Annual reporting

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|--|--|---|-------------------|------|---------|
| District | <i>Sutherland District Partnership</i> | | | | |
| Reporting period | March – August 2013 inclusive | Number of meetings held during this period | 1 | | |
| | | Dates held | 31/5/13 | | |
| Key issues & themes discussed | 27. Lawson Memorial/Cambusavie Review and IT compatibility issues. 28. Youth Conference for Sutherland 29. Communication Strategy 30. Ambulance PAS Transport to Raigmore 31. First responders and Red Cross First Aid Pilot in Dornoch Academy 32. Dementia Friendly Communities and Telecare Services 33. Early Years structure and provision for Sutherland 34. OTAGO Falls Prevention Programme 35. Specialist Support for Multiple Sclerosis Patients 36. Single Point of Access Pilot | | | | |
| Outcomes achieved during reporting period | 11. Awareness raised of members of the District Partnership, roles and responsibilities, the new structures for services being put in place. 12. New Red Cross Pilot between Dornoch Academy, YDO and Red Cross has begun to develop First Aid programme for secondary school pupils. | | | | |
| Issues escalated to Highland Council and/or NHS governance committee(s) for action/response | - None at this stage - - | | | | |
| Report approved by | Deidre Mackay | Designation | Partnership Chair | Date | 30.8.13 |

Highland District Partnerships
Bi-Annual reporting

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|---|---|--|-------------------|------|--------|
| District | <i>Inverness West District Partnership</i> | | | | |
| Reporting period | March – August 2013 inclusive | Number of meetings held during this period | | | 1 |
| | | Dates held | | | 21/6 |
| Key issues & themes discussed | 37. Local services in Merkinch 38. Health inequalities 39. Mapping of services in the District 40. Childrens Services Care Inspection Reports 41. Family Nurse Partnerships 42. Adult substance misuse 43. Home care packages 44. Patient Participation Groups | | | | |
| Outcomes achieved during reporting period | 13. School to work on links to employers for the area of Merkinch to ensure maximum benefit for school leavers 14. Need to join up all services. Community Health Co-ordinator for the area should be working to the IWDP. 15. Need to get the public sector agencies investing in jobs/staff in the area 16. Youth Action Team to put together Youth Action Group Report. Presentation by Youth Action Team on locations and activities of youth services. 17. Training support for home carers to help them while services are arranged for clients. This needs to be part of discharge plans with referrals to Connecting Carers and, where relevant, Alzheimer's Scotland 18. mapping of PPG's in Inverness 19. | | | | |
| Issues escalated to Highland Council and/or NHS governance committee(s) for action/response | <ul style="list-style-type: none"> - Need to get the public sector agencies investing in jobs/staff/offices in the area - Need for services (Housing/Service Point) to be located in Merkinch - Family Centre – need for more space or a new build | | | | |
| Report approved by | Cllr Margaret Davidson | Designation | Partnership Chair | Date | 8/7/13 |

Highland District Partnerships
Bi-Annual reporting

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|---|--|--|-------------------|------|------------------------|
| District | <i>Inverness East</i> | | | | |
| Reporting period | <i>September 2013</i> | Number of meetings held during this period | | | 2 |
| | | Dates held | | | <i>31.5 & 30.8</i> |
| Key issues & themes discussed | <ol style="list-style-type: none"> 1. Recruitment to Social Care Sector 2. Encouraging Doctors Surgeries to set up Patient Participation Groups 3. Joint Meeting with Inverness West District Partnership 4. Representation from Community Councils 5. NHS Highland/ Alzheimer Scotland Research Report 6. Nutrition of Frail Older People | | | | |
| Outcomes achieved during reporting period | <ol style="list-style-type: none"> 1. <i>A recruitment fair on 19th September in Inverness Town Hall focused entirely on home care.</i> 2. <i>Partners agreed that to work towards a "Dementia-Friendly Inverness"; the first step is to take forward the idea of a "Dementia-Friendly Eastgate".</i> | | | | |
| Issues escalated to Highland Council and/or NHS governance committee(s) for action/response | <i>None</i> | | | | |
| Report approved by | Gillian McCreath | Designation | Partnership Chair | Date | 2.9.13 |

Highland District Partnerships
Bi-Annual reporting

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|---|---|--|-------------------|------|------------------|
| District | Badenoch, Strathspey, Nairn & Ardersier | | | | |
| Reporting period | March – August 2013 inclusive | Number of meetings held during this period | | | 2 |
| | | Dates held | | | 8/3/13 7/6/13 |
| Key issues & themes discussed | <ul style="list-style-type: none"> 45. Nairn healthcare group, new appointment system 46. Physiotherapy services review 47. Care at Home services 48. Youth services integration 49. Future health provision in Badenoch & Strathspey 50. Integration of Children's services 51. Drug & Alcohol local services 52. Specialist Support for Multiple Sclerosis Patients 53. Single Point of Access Pilot | | | | |
| Outcomes achieved during reporting period | 20. Physiotherapy services review undertaken | | | | |
| Issues escalated to Highland Council and/or NHS governance committee(s) for action/response | - None at this stage (partnership in it's infancy) | | | | |
| Report approved by | Liz MacDonald | Designation | Partnership Chair | Date | 9.9.13 |

Highland District Partnerships
Bi-Annual reporting

| | | | |
|---|--|--|-------------------|
| District | Skye, Lochalsh, Wester Ross & Assynt | | |
| Reporting period | <i>March to September '13</i> | Number of meetings held during this period | 1 |
| | | Dates held | 13 May 2013 |
| Key issues & themes discussed | 54. Mental Health 55. Single Hospital Provision 56. Patient Transport 57. Respite Care at Home 58. Communication & Engagement 59. School Dental visits 60. Family Nurse Partnerships 61. Highland Early Years Collaborative | | |
| Outcomes achieved during reporting period | <ul style="list-style-type: none"> Adoption of Communications Strategy | | |
| Issues escalated to Highland Council and/or NHS governance committee(s) for action/response | <p>Concern over 63% reduction in Respite Care budget and request for allocation criteria to be reviewed.</p> <p>Concerns regarding the change in service level since the redesign of the Mental Health Officer Service and dedicated Mental Health Social Work resources have been lost. Agreed that these should be taken forward to the NHS Mental Health Strategy Group.</p> <p>Travelling expenses for voluntary sector members of DP.</p> | | |
| Report approved by | Myra Duncan | Designation | Partnership Chair |
| | | Date | 1 Sep 13 |

Highland District Partnerships
Bi-Annual reporting

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|---|--|--|--------------------|------|----------|
| District | <i>Mid Ross</i> | | | | |
| Reporting period | March to August 2013 inclusive | Number of meetings held during this period | 2 | | |
| | | Dates held | 10/5/13 23/8/13 | | |
| Key issues & themes discussed | 62. Benefits Reform 63. Family Nurse partnerships 64. Progress with Integration 65. Patient Transport 66. Transitions 67. Communication & Engagement 68. Keep Well Health Checks 69. Review of District Partnerships 70. Developments at Ross Memorial Hospital 71. After School Provision 72. GP Practice Waiting Times | | | | |
| Outcomes achieved during reporting period | <ul style="list-style-type: none"> • Good working relationships established between partners with improved understanding of roles and responsibilities. • Discussions at Partnership meetings have resulted in task-focussed collaboration outwith the meetings. • Communications strategy agreed. | | | | |
| Issues escalated to Highland Council and/or NHS governance committee(s) for action/response | None | | | | |
| Report approved by | Sarah Wedgwood | Designation | Partnership Chair | Date | 1 Sep 13 |