

## BADENOCH, STRATHSPEY, ARDERSIER & NAIRN DISTRICT PARTNERSHIP

**ACTION NOTE FROM THE MEETING HELD ON: Thursday 5<sup>th</sup> February at 2.15pm at the Court House, Nairn.**

**PRESENT:** Graham Crerar (CG), NHS Highland Board - Chair; Cllr. Jaci Douglas (JD) - Vice Chair; Katrina Beaton (KB) HC; Margaret Kinsella (MK) HC; Margaret Walker (MW) District Manager – NHS Highland; Fraser Morrison (FM) HLH; Andy Jessiman (AJ) HLH; Fraser Nixon (FN) SFRS; Karen Derrick (KD) VABS; Robert Farquhar (RF) SAS; Cllr. Laurie Fraser (LF); Jay Muirhead (JM) Signpost.

**APOLOGIES:** Apologies were received from John Rainy Brown, Cllr. Liz MacDonald, Cllr. Roddy Balfour and Dr Adrian Baker. (A number of apologies were received from the Badenoch & Strathspey area due to the funeral of Michael Hamilton former Area Housing Manager for Badenoch. Condolences to the family were noted.)

**IN ATTENDANCE:** Bill Alexander (BA), Director of Care and Learning, THC; Deborah Jones (DJ) Chief Operating officer, NHS Highland; Joanna MacDonald (JM), Director of Adult Social Care, NHS Highland; Carron McDiarmid (CM) Head of Policy and Reform, THC; John Pierre Sieczkarek (JPS) NHS Highland; Liz Cowie (LC) Ward Manager; Lynne MacLennan, Business Support.

ITEM	SUBJECT	ACTION AGREED	LEAD	TIMESCALE
1	<b>Welcome and Introductions</b>	GC welcomed those present to the meeting and thanked all for the good attendance. GC advised a member of the press was present at the meeting and asked if there were any objections to the meeting being recorded. No objections were raised.		
2	<b>Action Note and matters arising</b>	<p><b>Item 4.</b> Caberfeidh Horizons - JD advised that a full report would be brought to a future DP meeting for update and for discussion.</p> <p><b>Item 5.</b> Care at Home - In Kate MacLean's absence, it was agreed to carry forward the update on Boleskine Care.</p> <p><b>Item 6.</b> Recovery Support - JD advised those in recovery are finding it difficult to get the level of support needed at a local level in the Badenoch &amp; Strathspey area. There are options for taking this forward and these can be considered at a future DP.</p> <p><b>Item 8.</b> Citizens Online - There is a lot of enthusiasm to extend this initiative to other areas. FM advised that the Intergenerational sessions in Kingussie were proving very positive. The same model as Nairn was being used. Pre-training for young people was being given. CMcD advised that the BIG project was going to resources committee.</p> <p><b>Item 11.</b> Dr Boyd Peters, child concern forms – Integrated child protection training will be delivered in B&amp;S in the next few weeks, bringing together the Head teachers collaboratively, this should greatly improve the system.</p>		<b>Ongoing</b> <b>Next DP</b>

ITEM	SUBJECT	ACTION AGREED	LEAD	TIMESCALE
3	<p><b>Bill Alexander, Director of Care and Learning, Highland Council - District Partnerships, Community Development and Community Planning</b></p>	<p>Bill Alexander, Director of Care and Learning, Highland Council, provided a comprehensive overview of District Partnerships, Community Development and Community Planning.</p> <ul style="list-style-type: none"> <li>• The Scottish Parliament has introduced the Public Bodies (Joint Working) Act.</li> <li>• District Partnerships were set up and have been running for two years. DP's are still going through a process of development. Set up to improve outcomes for adults, children and families in communities. Now to link Community Planning.</li> <li>• Sir Harry Burns, Professor of Global Public Health, states if we are going to make life different we need to do two things: 1. Address early years and boost attachment behaviour with parents. 2. Create a social context for productive, well lived lives and build on Community assets and the strengths of communities.</li> <li>• The Christie Commission was established to develop recommendations for the future delivery of public services. In Scotland public services are in need of urgent and substantial reform to meet unprecedented change. Public services have to be built around people and communities.</li> <li>• Community Empowerment Bill is now going through Parliament. It becomes bring significant change in how The Highland Council (THC) and NHS work with local communities to deliver services. There is a new duty for local authorities to publish a 3 year CLD (Community Learning and Development) plan by 1<sup>st</sup> September 2015 and 3 yearly thereafter.</li> <li>• More resources are being put into Community Development Strategic Partnership working, which will bring together all aspects of partnership working. The group would like a representative from each district to be a part of this, so that all districts are working together on community engagement.</li> <li>• Topics discussed at the DP's could include: Community Safety, Community Learning, Highland Children's District Delivery Plan, NHS Highland Change and Improvement Plan.</li> <li>• Concept of Community Plan for the 'District'. Could include transport, employability, environment, land reform, social enterprise. Community Development Strategic Partnership believe that these topics should also be included with the DP's. Not prescribed and will be what fits and works for each area. Welfare and poverty agendas should also be added to future agendas.</li> <li>• BSNA DP to look at how change can be effected at a local level.</li> </ul> <p><b>Action: BSNA DP to progress at local level following review outcomes</b></p>	<p><b>BSNA Chair</b></p>	<p><b>Ongoing</b></p>

ITEM	SUBJECT	ACTION AGREED	LEAD	TIMESCALE
4	<b>Integrated Adult Services - Overview of Adult Social Care Initiatives - Deborah Jones, Chief Operating Officer, NHS Highland &amp; Joanna Macdonald, Director of Adult Social Care</b>	<p>Deborah Jones, Chief Operating Officer, NHS Highland</p> <ul style="list-style-type: none"> <li>Importance stressed of engaging with and listening to local people to find out what they want to see happen in the future and thus creating a sensible strategic plan for the health board to look at when deciding where and how to spend resources. Communities are taking over some elements of local care but more is needed which is a large part of local engagement. What will work in Nairn may not be suitable for other areas, which is why going round each local community is essential. <p>Joanna MacDonald, Director of Adult Social Care, NHS Highland</p> <ul style="list-style-type: none"> <li>JM provided a brief overview of some of the initiatives that have been put in place regarding adult social care.</li> <li>JD also advised that the Highland Children's District Delivery Plan is pivotal for how services are delivered. Work is required on the transition from children to adult's services in relation to social care. Social Workers key responsibility is how to support the person in the community. New legislation is coming into effect and people needing care now go straight to the NHS. Also supporting people to live in the way they want to live. Developments and opportunities are being brought to the DP's for discussion.</li> </ul> </li></ul>		
5	<b>Change and Improvement plan for Nairn, Ardersier, Badenoch &amp; Strathspey - Margaret Walker, District Manager, NHS Highland</b>	<ul style="list-style-type: none"> <li>The document covers key areas for delivery and shows how far things have come and what needs to be progressed.</li> <li>NABS area has the highest percentage of over 90's in the Highlands. However although people are living longer, they are not living healthier longer. A local audit is looking at what can be done to improve this. A study of inpatients is being undertaken to look at reason for stay in hospital, length of stay and home support available. The study is also looking at District Nursing case load, length of stay for the case load, challenges and re-admissions.</li> <li>Physical frailty adds to the burden to those over 90's who are socially isolated with no other visits than those from services. A visual ward has been set up; the GP will meet weekly or twice weekly and bring details of those that have been in contact. The Care at Home team will look at those that have been in contact and the task force will go to the home to identify and address any issues.</li> <li>The steps that are being taken will hopefully impact positively on individuals and keep them out of hospital - or if a hospital stay is needed, the stay will be shorter. The DP could be very useful as social isolation is very prevalent in the over 90's age group. These pieces of work are brought to the DP to identify what can be done tackle the issues.</li> </ul> <p><b>Action: Document to be circulated. Outcomes of study to be reported back to the DP</b></p>	MW	Ongoing

ITEM	SUBJECT	ACTION AGREED	LEAD	TIMESCALE
6	Integrated Children Services - Family Team Developments	<p>Update provided on 600 hours nursery provision.</p> <ul style="list-style-type: none"> <li>• Working to ensure everyone knows about the extra hours for nursery provision. It has been recognised the most effective way for people to find out about the changes has been by word of mouth, people being told by a friend, neighbour or colleague.</li> <li>• From August 2014 2 year olds were entitled to 600 hours of nursery provision if their parents/guardians were classed as workless.</li> <li>• All 2 year olds will be entitled to 600 hours of nursery provision from 2016.</li> <li>• There has been increasing success with the 600 hours of nursery provision which has given many parents/guardians better access to employment.</li> <li>• Family resource partnership, working with DWP, are looking at the issues and links around employability.</li> <li>• B&amp;S staff now in one office and provide universal provision including health workers, disability workers, and support workers.</li> <li>• Parenting support is a vital part of the universal provision. There are a number of foster carers in B&amp;S and we are looking at how to increase the numbers of foster carers and work on how they can be supported.</li> </ul>		
7	AOB	<p>JD – Winter Weather response. Are there lists of people identified as vulnerable?</p> <p>MW - a list of vulnerable people is produced for the Emergency Liaison Group (agency group that is convened in the event of emergency/severe weather situations). List is sent to Police Scotland when weather warnings are issued. Those on the list are then contacted to make sure they are safe.</p> <p>JPS – The list is updated weekly, throughout winter, and more people have been identified recently. Social Care needs are also identified. MW – The NBS Emergency Liaison Group works well. DP's could be supportive and there could be opportunities for a links between DP's and Emergency Planning.</p> <p>LC to monitor as key lead for Emergency Planning.</p>	LC	Ongoing
		<p>Carrie Bates, Health &amp; Happiness</p> <ul style="list-style-type: none"> <li>• Link up Highland is run by volunteers, NHS staff and THC staff. Meeting are held monthly to discuss more ways of helping and supporting people locally.</li> <li>• 'Men's Shed' for Nairn is being progressed locally by Roy Anderson (RCOP)</li> <li>• Key funding ends in May 2015.</li> </ul>		

ITEM	SUBJECT	ACTION AGREED	LEAD	TIMESCALE
		<ul style="list-style-type: none"> <li>• Would be beneficial if some of those involved with the DP's would attend a meeting to find out what work goes on. Members of the DP could also be added to the email distribution list so they would receive all the information that was being circulated.</li> </ul> <p>GC asked CB to return to the DP and deliver a presentation on Health &amp; Happiness. CB to liaise with LC.</p>	<p><b>CB</b></p> <p><b>CB/LC</b></p>	<p><b>Ongoing</b></p>
<p><b>8</b></p>	<p><b>Public Views/Suggestions</b></p>	<p>Dick Youngson, Nairn Suburban CC Chair</p> <ul style="list-style-type: none"> <li>• Delighted to hear from BA, DJ and JM. Community Empowerment Bill is important for local communities. Community Councils look forward to closer working.</li> <li>• Locality Planning and model for care – there is a great commitment from local Community Councils to work towards producing a good model.</li> </ul> <p>Simon Noble,</p> <ul style="list-style-type: none"> <li>• Involved with many groups in the local community 1. Nairn &amp; Ardersier Patients Group 2. Nairn River Community Council 3. Social Enterprise (which has had Deprived Area funding) 4. Transport Group.</li> <li>• Is the DP focussed on the right district, how do you engage with local groups? More of the public in attendance are recognised as being local than the Members of the DP.</li> <li>• Concerned that what is described often turns out to be a box ticking process. Not genuinely engaging with local communities and not finding out exactly what they want.</li> <li>• How many transfers of service, from THC to local communities, have taken place through the Community Challenge Fund? Local communities are keen to take on these services but can't as THC services can't work out what to hand over.</li> </ul> <p>GC - The problems that the DP's face have been well articulated. The need to review and improve the DP's has been recognised and this is the intention moving forward. However to do so, local people need to attend meetings to tell us what is wrong so it can be improved.</p> <p>CM – Community Challenge Fund to come under her remit. (SN to speak to CM post meeting.)</p>	<p><b>CM/SN</b></p>	
<p><b>9</b></p>	<p><b>Next District Partnership meeting</b></p>	<p>Date of next meeting provisionally proposed as Thursday 21<sup>st</sup> May in Aviemore. GC advised the chairmanship of the DP meetings will rotate to THC with JD taking over the Chair.</p>		