

Agenda Item	11.
Report No	CLH 25/18

HIGHLAND COUNCIL

Committee: Care, Learning and Housing

Date: 22 August 2018

Report Title: **Adult Social Care Update**

Report By: Director of Care and Learning

1. **Purpose/Executive Summary**

- 1.1 The Joint Monitoring Committee, the legal entity which has responsibility for the commissioning arrangements for both Adult and Children's integrated Health and Social Care, has agreed a new approach to the governance and management arrangements across NHS Highland and the Highland Council. This was endorsed by the Highland Council on 10 May 2018 and the NHS Highland Board on 29 May 2018.
- 1.2 One aspect of this is that key items will be identified at the Adult Services Scrutiny and Development Sub-Committee for presentation at the Care, Learning and Housing Committee.
- 1.3 The Adult Services Development and Scrutiny Sub-Committee was held on 7 June 2018 with the following key items having been identified. A further Sub-Committee takes place on 10th August, and a verbal update will be provided at Committee.

2. **Recommendations**

- 2.1 Members are asked to:
 - i. Note the contents of the report, and the highlighted items from the Adult Services Scrutiny and Development Sub-Committee.

3. Care at Home

- 3.1 Significant change has taken place over the past 3 years with the zoning and tariff rates proving successful. Tariff has introduced positive change to the care at home market in Highland, with extensive growth in South and Mid Division urban areas, but only limited expansion in North and West Division. NHS Highland has been reviewing the additional travel time and mileage costs for delivering in remote and rural areas to ensure appropriate recompense and incentive. The direction being progressed is to replace the single tariff with a variable pricing model which addresses the needs of urban, rural and remote areas, and which adequately addresses disparities within the existing model. The new model uses urban, rural and remote classification which has been derived from the Scottish Government Urban Rural Classification 2016 – 8-fold Classification.
- 3.2 A Care at Home workshop was held with NHS Highland with the focus being made on areas where there is little or no resource. The community delivery of home care, often in partnership with the independent sector, has been successful but it is recognised that more requires to be done in this area, with Members having a key role to play in terms of dialogue with their respective communities and supporting the NHS. With clearer frameworks being established, Members of the sub-committee are keen to assist NHS Highland in the development of new models, and assess the costs, savings, outcomes and sustainability of these.

4. Highland Care Home Strategy

- 4.1 There remains a commitment by both Highland Council and NHS Highland to shift the balance of care in order to deal with the implications of an ageing population. Whilst Care at Home will continue to be the default position and work will continue to improve upon this service, Members are keen to better understand the entry points into the various services and the triggers - for example, for entry into a Care Home, Nursing Home or Hospitalisation.
- 4.2 A clear framework has been requested by the sub-committee to assist with local development and to monitor progress. The sub-committee remains keen to see funding focused on community-based models, and workforce planning to support new models of provision – based on improved understanding of the needs of the local populations and the evaluation of new models. In order to achieve this, there has been an expressed need to model how much investment is required in new services and new ways of working, and whether this can be achieved within existing and planned resources.
- 4.3 In terms of rural provision, Members have sought clarity regarding what alternative provision might look like. NHS Highland has identified Dail Mhor in Strontian, which now operates as a respite care facility. There will continue to be dialogue with the community to ensure local need is being met. Members have requested a description of the model and business case for the next meeting of the Adult Service's Scrutiny and Development Sub-committee.

5. Joint Transitions Team

- 5.1 The new transitions model bridges both Children's and Adult Services. The implementation of the Joint Transitions Team has been developed using existing resources from both the Highland Council and NHS Highland. Staffing the team has been achieved through existing children's disability and adult workers noting an interest

to join the team. Both NHS Highland and Highland Council networks are up and running. The Sub-committee will be taking an active interest in how the service continues to develop, what improvements to service delivery have been made, and how these are being evaluated.

- 5.2 To date, the total cost of the team implementation has been £8,080. This has been a cost of £1,080 to install additional network points to enable the full potential of desk space within Kenneth Street, which has been paid for by NHS Highland, and work to be completed by NHS Highland estates. A further cost of £7,000 has been identified to provide new laptops for NHS Highland staff. Highland Council staff will use laptops from existing stock and receive new kit in the planned Highland Council upgrade.

6. Implications

- 6.1 Resource: The aim is to more closely connect joint planning, monitoring and reporting on the financial framework to deliver the strategic plan for integrated services.
- 6.2 Legal: The new arrangements will be incorporated into the formal Integration Scheme, which is the legal document that underpins the lead agency arrangement.
- 6.3 Community: The new arrangements will better support the intended shift towards the delivery of more community based services.
- 6.4 Climate: No implications.
- 6.5 Risk: The Joint Monitoring Committee retains the oversight of continuing implementation of the Integration Scheme and associated risks.
- 6.6 Gaelic: There are no Gaelic, Community (Equality, Poverty and Rural) or Climate Change/Carbon Clever implications arising as a direct result of this report.

Designation: Director of Care and Learning

Date: 13 August 2018

Author: Isobel Murray, Commissioning Officer

Background Papers: