

## The Highland Council

### Care, Learning and Housing Committee

Minutes of Meeting of the **Adult Services Development and Scrutiny Sub-Committee** held in Committee Room 1, Council Headquarters, Glenurquhart Road, Inverness on Friday 8 February 2019 at 9.00 am.

#### Present:

Mr B Boyd  
Mr A Graham  
Mrs I MacKenzie

Mr R MacWilliam  
Mr C Smith

#### In attendance:

#### Highland Council:

Ms I Murray, Commissioning Officer, Care and Learning Service  
Miss M Murray, Committee Administrator, Chief Executive's Office

#### NHS Highland:

Mr D Park, Chief Officer  
Mr S Steer, Interim Director of Adult Social Care  
Ms G Haire, Head of Community Services, South and Mid  
Ms T Ligema, Head of Community Services, North and West  
Mr G McCaig, Planning and Performance Manager  
Ms A Johnstone, Head of Service, Learning Disabilities and Autism  
Mr J Bain, Transaction and Income Manager

#### Business

##### 1. Apologies for Absence

Apologies for absence were intimated on behalf of Mrs M Cockburn, Mrs M Davidson, Mr J Finlayson, Mr T Heggie, Ms L Munro and Ms N Sinclair.

##### 2. Declarations of Interest

Item 8 – Mr R MacWilliam (non-financial)

##### 3. Minutes and Action Plan

There had been circulated the Minutes of the previous Meeting held on 30 November 2018 and the rolling Action Plan maintained by the Care and Learning Service.

During discussion, the following issues were raised in relation to the Action Plan:-

- on the basis that information on Care at Home providers could be provided to Members as and when required it was suggested that the item in that regard be removed from the Action Plan;

- in relation to Primary Care Modernisation, it was explained that there was a three-year plan that would be implemented in various stages. It was therefore suggested that, rather than it being a standing item on the agenda as had been agreed previously, papers be provided as and when there were significant changes to report. It was added that updates would also be included in the Assurance Report; and
- some Members commented that more reporting and scrutiny was required on key areas of work such as Neighbourhood Teams, care at home provision and Primary Care Modernisation. In response, it was explained that Neighbourhood Teams had been reported to the Sub-Committee on a regular basis while the structure was in the process of being established. That had now taken place and what the teams delivered on was contained within performance reporting. It was therefore suggested that the item on Neighbourhood Teams should be removed from the Action Plan as they were no longer a project. However, as discussed above, Primary Care Modernisation was an ongoing project and would be reported to the Sub-Committee periodically. The Chair requested that a report be presented to the next meeting.

Thereafter, the Sub-Committee:-

- NOTED** the Minutes and Action Plan;
- AGREED** that the item on Care at Home providers be removed from the Action Plan;
- AGREED** that a report on Primary Care Modernisation be presented to the next meeting of the Sub-Committee, and that reports be provided periodically thereafter; and
- AGREED** that the item on Neighbourhood Teams be removed from the Action Plan.

### **Scrutiny**

#### **4. Assurance Report to Commissioner – Adult Services**

There had been circulated Report No ASDS/01/19 by the Chief Officer, NHS Highland.

In introducing the report, the Chief Officer referred to the issues surrounding delayed hospital discharge and explained that people often preferred to be in a hospital rather than go to a care home that was not their first choice. The assistance of Members was sought in educating the public that discharge from hospital was in the best interests of individuals' rehabilitation as well as hospital flow.

In addition, he highlighted that a workshop had taken place during the previous week in relation to the new care homes that would be coming into operation in Inverness in the next few months, and he undertook to provide an update in that regard at the next meeting of the Sub-Committee.

During discussion, the following issues were raised:-

- reference was made to instances of wards in Raigmore being shut down and the associated impact on delayed discharge. Concern was expressed that such wards only had one toilet and Members queried whether consideration had been given to remodelling to reduce cross-contamination amongst susceptible patients. The Chief Officer undertook to look into whether anything could be done in that regard,

and whether there were any intermediate plans in relation to toilet facilities. However, it was explained that Raigmore was an old hospital and there were limitations. It was added that bringing the hospital up to current standards – ie single rooms with en-suite facilities – would significantly reduce the number of available beds, thereby increasing the need to discharge people from hospital timeously to improve flow;

- information having been sought on the reasons for the spikes in delayed discharge, as shown in the chart on page 9 of the papers, it was explained that there were a number of factors that impacted on delayed discharge – eg suspension of admissions to care homes, flu outbreaks or care packages breaking down;
- detailed discussion took place on the recruitment challenges across health and care professions, which it was confirmed were UK-wide. In particular, the need to take a more holistic view of why people might come to live and work in Highland and how to retain young people was emphasised, and it was highlighted that a Notice of Motion had been submitted to the Council calling for better inter-agency working on recruitment and retention, particularly given the potential impact of the vote to leave the European Union. The Chief Officer confirmed that he would be happy to participate in discussions in that regard. It was added that, due to demographic changes, it was necessary to recruit a higher proportion of young people than ever before, and there was a need for joint working in terms of education, commencing in the early years, and promoting careers in health and care. Discussion also took place on the issue of training places being offered to privately funded students rather than local trainees, and the scope for apprenticeship programmes; and
- in relation to mental health staff shortages in particular, information was sought, and provided, on the measures being taken which included training support workers, looking at enhanced roles so there was career progression, and expanding Cognitive Behavioural Therapy provision. It was confirmed that a plan was in place, which Members were welcome to have sight of if they so wished.

The Sub-Committee otherwise **NOTED** the report and the assurance given by the Highland Health and Social Care Committee.

## 5. Update on Commissioned Care at Home Services

There had been circulated Report No ASDS/02/19 dated 31 January 2019 by the Head of Community Services, North and West, and Chair of the Care at Home Project Board, NHS Highland.

Detailed discussion took place, during which information was sought, and provided, on the current number of care at home service users; the range of providers that made up the independent sector and how they were represented in the discussions with NHS Highland; the rate being sought by the sector; the potential risks of an agreement not being reached; and the timescale for decisions being made. In that regard, it was confirmed that a new contract would be in place on 1 April 2019.

In relation to whether more support could be provided in terms of training, maintaining standards, IT etc, it was explained that NHS Highland funded two posts within Scottish Care specifically to support independent sector providers. With regard to potential synergies, it was explained that the way Integrated Teams operated eliminated double-running.

The Sub-Committee otherwise **NOTED** the update provided.

## **6. Adult Social Care – Day Care Charging and Modelling Proposals**

There had been circulated Report No ASDS/03/19 dated 30 January 2019 by the Head of Community Services, South and Mid, and the Transaction and Income Manager, NHS Highland.

Information having been sought, and provided, on the number of service users affected by the new day care charging arrangements and the views of the Highland Senior Citizens Network, the Sub-Committee welcomed the outcome that had been reached and otherwise **NOTED** the report considered and agreed by the Highland Health and Social Care Committee on 15 January 2019.

## **7. Implementation of the Carers (Scotland) Act 2016**

There had been circulated Report No ASDS/04/19 dated 30 January 2019 by the Interim Director of Adult Social Care, NHS Highland.

The Sub-Committee **NOTED** the report considered and agreed by the Highland Health and Social Care Committee on 15 January 2019.

### **Development**

## **8. Third Sector Alignment, Sustainability and Collaborative Commissioning Plan**

**Declaration of Interest: Mr R MacWilliam declared a non-financial interest in this item as a Board Member of Addictions Counselling Inverness, which was funded by NHS Highland but, having applied the test outlined in Paragraphs 5.2 and 5.3 of the Councillors' Code of Conduct, concluded that his interest did not preclude his involvement in the discussion.**

There had been circulated Report No ASDS/05/19 dated 30 January 2019 by the Project Team on behalf of the Project Director, Head of Community Services, South and Mid, NHS Highland.

Detailed discussion took place on Third Sector funding by both the Council and NHS Highland, during which the following main points were raised:-

- the need for equity, to support defined outcomes rather than organisations, and to avoid duplication was emphasised;
- from an NHS Highland perspective, there was no explicit requirement to disinvest but rather it was a matter of funding organisations in a more strategic way going forward. Some organisations would receive less funding that at present but every effort was being made to ensure the process was as fair as possible. As with any change process, there would be some disquiet and Members' support was sought in that regard;
- there had been some discussion within the Council regarding the potential provision of resource in the form of a member of staff to assist Third Sector organisations to leverage in additional external funding, thereby reducing dependency on Council funding, and it was suggested that NHS Highland consider a similar approach; and

- the need for collaborative working to avoid any potential unintended consequences of unilateral decisions on disinvestment was emphasised. In that regard, it was confirmed that the Council's Head of Resources and Commissioning Officer, who were leading on Third Sector funding from a Council perspective, would liaise with the Head of Community Services, South and Mid, NHS Highland.

Thereafter, the Sub-Committee **NOTED**:-

- i. the report considered and agreed by the Highland Health and Social Care Committee on 15 January 2019; and
- ii. that the Council's Head of Resources and Commissioning Officer would liaise with the Head of Community Services, South and Mid, NHS Highland, regarding Third Sector funding.

## **9. Public Consultation into Proposed Major Redesign of Health and Social Care Services Across Caithness**

There had been circulated Report No ASDS/06/19 dated 31 January 2019 by the Area Manager, North/ Redesign Project Director. The full Consultation Report had been circulated separately as Booklet A.

The Chief Officer provided a brief presentation in amplification of the report.

Having welcomed the collaborative working that had taken place and the positive outcome to the consultation process, the Sub-Committee **NOTED** the report considered and agreed by the NHS Highland Board on 29 January 2019, and the presentation.

The meeting ended at 10.40 am.