

Agenda Item	15.
Report No	CLH 52/19

HIGHLAND COUNCIL

Committee: Care, Learning and Housing

Date: 21 August 2019

Report Title: Adult Social Care Update

Report By: Chief Executive

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, agreed a new approach to the governance and management arrangements across NHS Highland and the Highland Council. This was further 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 13 June 2019 with the key items as set out in this report having been identified.

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. Implications

- 3.1 Resource: there are no resource implications associated with this report, the Services provided by NHS Highland in relation to Adult Health and Social Care are met from funding provided by the Council and NHS resources.

- 3.2 Legal: There are no legal implications associated with this report at this time. The review of the partnership agreement as referred to below will, in due course, require legal input for any changes made to the agreement.
- 3.3 Community (Equality, Poverty and Rural): No implications to highlight.
- 3.4 Climate: No implications.
- 3.5 Risk: The Joint Monitoring Committee retains the oversight of continuing implementation of the Integration Scheme and associated risks.
- 3.6 Gaelic: There are no Gaelic implications arising from this report.

4. Development of Highland Partnership Agreement 2019-2020

- 4.1 Following the decision to explore a Lead Agency model of integration, a programme of work was initiated and in June 2011 the decision taken at a joint meeting of the Council and the Health Board, to progress to implementation in April 2012.
- 4.2 The agreed model involved Single Lead Agency arrangements leaving both organisations jointly accountable for determining outcomes and the resource to be committed. The Lead Agency would assume responsibility for all aspects of business delivery, strategy, internal governance and operational delivery or commissioning of services and would be fully accountable for the delivery of the agreed outcomes.
- 4.3 These details were subsequently set out in a 400 page Partnership Agreement, agreed by the Highland Council and NHS respectively in March 2012 and implemented from April 2012. These arrangements were reviewed for the purposes of implementing the requirements of the Public Bodies (Scotland) Act 2014.
- 4.4 As previously reported to the Council, it is proposed a new Partnership Agreement is developed for implementation from 1 April 2020. The indicative delivery timescale would be for the final revised Partnership Agreement to be signed off by the NHS Highland Board on 26 November 2019 and the Highland Council by 12 December 2019, with a backstop of sign off by the NHS Board in January 2020 and the Highland Council in February 2020.
- 4.5 Applications for the fixed term post of Head of Health funded by the Council's Change Fund have been received with interviews scheduled to take place by August 2019. This 6-9 months post is to review current arrangements with a focus on joint strategic planning, improved financial governance and a renewed commitment to shifting the balance of care for both adult and children's services to community-led approaches.
- 4.6 Further updates on progress will be considered by the Sub-Committee and in turn key aspects highlighted to this Committee as the year progresses.

5. Care at Home

- 5.1 As has previously been reported, there has been an ongoing discussion with the Care at Home Sector regarding fees. NHS Highland had agreed to implement the providers' alternative tariff, subject to contract conditions that this approach would deliver, flow, cost containment, savings and sector collaboration. The tariff entails a single rate model of £19.88 per hour which provides an efficiency rebate/discount for care at home clients pre 2 July 2018, and is a complex arrangement.

- 5.2 Reports from NHS Highland advise that the intended outcomes have not been fully achieved and the current model is complex to understand and challenging to administer. The view of NHS Highland is that the model is not actually sustainable for the sector, with some providers passing on the efficiency saving as per the agreed terms of the contract, but not altering their approach to service delivery and therefore not operating in a manner sustainable in the longer term. The sector was invited to consider the options for new arrangements from April 2019. Proposals were received, considered in full and deemed unaffordable, with projected costs of an additional £1.5m - £1.8m p.a.
- 5.3 NHS Highland are therefore progressing the following. The relevant rate to apply will be as per the Scottish Government Urban Rural classification 2016. The urban, rural and remote rates are matched to this classification data and this is then matched to postcode. Rates are automatically specified based on the postcode of the supported person.
- 5.4 The urban rate has travel time and mileage consistent with an urban area and for rural and remote areas, mileage and travel time has been increased.
- 5.5 A variation to contract has been sent to providers extending all current terms and conditions to 30 June 2019. All current terms will continue as is, for the 3 month transition period. This includes fee levels and a requirement to pay Living Wage, rising by £0.25 to £9.00 from 1 May 2019.
- 5.6 Individual provider capacity discussions took place with providers during April 2019 to discuss planned activity and future intentions. A new contract was issued in April 2019, for commencement from 1 July 2019 for the period to 31 March 2021, with provision for a further 12 month period to 31 March 2022, subject to review.

6. Implementation of the Carers (Scotland) Act 2016

- 6.1 The Carers (Scotland) Act 2016 introduces new rights for unpaid Carers and new duties for local councils and the NHS to provide support to Carers. Work is now underway to seek to ensure that NHS Highland is in a position to meet those new statutory duties as they relate to Adult Carers.
- 6.2 The latest iteration of the Carers Implementation Plan was considered at the recent Carers Improvement Group (CIG). The CIG is seeking to ensure that there is regular representation from the Highland Council in its work. The Group is keen to ensure that it can work to ensure there is appropriate support provided to all the Carers covered by the Act.
- 6.3 With the use of Highland Adult Carer Support Plans (ACSP) and the National Eligibility Framework for Carers agreed for Adult Carers, Connecting Carers are now undertaking the completion of these plans with carers when a referral has been made. Carer Link Workers are in situ across most of the Highland Districts to effect this.
- 6.4 At this point the use of the ACSP is new and level of demand (referrals) is low – but it is already reported to be rising sharply. The CIG is exploring the feasibility of enlisting a wider variety of third sector organisations to complete the ACSP. This will have costs in terms of time and training.
- 6.5 Where Adult Carers are assessed to be in Critical or Substantial need they may be

entitled to Self-Directed Support. At this point work is underway with NHS District Teams, Adult Social Workers and Connecting Carers Link Workers to relay the steps necessary to access statutory provision.

- 6.6 Understanding carers' needs and supporting these are seen as critical to managing demand in the social care sector. To this end there is a proposal that a 'Carers Practice Support Officer' role, or similar, is created to support practice in the multi-agency environment. Resource would come from Carers Act implementation monies. A key component of this post will be to bring together a comprehensive training plan for all of those working with carers.

7. Performance Measures

- 7.1 NHS Highland reports performance to each Adult Services Development and Scrutiny Sub-Committee, using a balanced scorecard approach and reflecting performance against a range of key indicators. A recent development is that the Balanced Scorecard is now accessible online via the Council website at the link below:

https://www.highland.gov.uk/downloads/download/1189/care_and_learning_service_performance_and_planning

- 7.2 Highland Council are in the process of reviewing all performance measures and targets. For Adult Services the intention is to discuss and review jointly with the NHS.

Designation: Chief Executive

Date: 29 July 2019

Author: Isobel Murray, Commissioning Officer

Background Papers: Adult Services Development and Scrutiny Sub-Committee