

The Highland Council

Minutes of Meeting of the **Health, Social Care and Wellbeing Committee** held **remotely** on Thursday 11 November 2021 at 10.30am.

Present:

Mrs J Barclay	Mr D Fraser
Mr B Boyd	Mr A Jarvie
Mrs I Campbell	Mr D Louden
Mrs M Cockburn	Mr W Mackay
Mr A Henderson (substitute)	Mrs L Munro
Mr J Finlayson	Mr D Rixson

Non Members also present:

Mr K Gowans

Participating Officials:

Mrs D Manson, Chief Executive
Ms F Duncan, Executive Chief Officer Health and Social Care and Chief Social Work Officer
Ms F Malcolm, Interim Head of Integration Adult Social Care, Health and Social Care
Ms D Munro, Lead Officer, Child Protection
Mr I Kyle, Head of Improvement and Performance, Health and Social Care
Ms J Park, Interim Head of Health, Health and Social Care
Mr B Porter, Head of Support Services, Health and Social Care
Mr M Mitchell, Service Finance Manager, Resources and Finance
Mrs L Dunn, Principal Administrator, Performance and Governance
Ms F MacBain, Committee Administrator, Performance and Governance
Ms M Zavarella, Committee Administrator, Performance and Governance

Also in Attendance:

Ms L Bussell, Chief Officer, NHS Highland
Mr S Steer, Director of Adult Social Care, NHS Highland
Ms R Connolly, Connecting Carers
Ms G Newman, Highland Children's Forum

**An asterisk in the margin denotes a recommendation to the Council.
All decisions with no marking in the margin are delegated to Committee.**

Linda Munro in the Chair, apart from Item 9, which was chaired by Mr D Fraser

Preliminaries - Statement by the Chief Social Work Officer

Following recent comments in the media alleging a 'crisis in care deepens', the Committee was updated on the processes in place to support children and young people as well as the staff involved in this key area of service delivery.

As detailed in the Performance and Quality Assurance Review Report, there had been an increase in the number of child concern referrals, as well as complexity of needs, across all areas of Highland. Data suggested that the prevalence of county lines and child exploitation had increased, with particular focus on care experienced young people and residential houses. These increases were consistent with experience across Scotland.

When concerns existed, there were a number of options available:

- if there was any suggestion of a child protection issue, contact should be made immediately with either Social Work or the Police. An investigation would be pursued, and any necessary action taken. If there was a potential criminal matter, the Police would investigate;
- individuals could raise complaints within Highland Council or with independent bodies such as the Care Inspectorate or the Scottish Social Services Council (SSSC) about professional practice; and
- anyone presented with concerns should contact Social Work or the Police who could investigate further.

A number of processes had commenced, including whistleblowing (an independent process); the grievance procedure; and the complaints procedure. To provide assurance of current practice, and to help inform future practice, two independent reviews had also commenced. The first involved two external Social Work professionals being commissioned to engage with staff and examine practice within Children's Services. The second was an independent, and experienced senior Social Work manager who was assessing and reviewing residential services over a 6-month period. He would be talking to young people and staff and his report would provide a full assessment of practice within residential services as well as recommendations to inform future models of practice, appropriate to the needs of our population.

In discussion with the independent chair of the Child Protection Committee (CPC), it had been agreed that a report would go to the CPC on completion of the above reviews. The CPC was responsible for multi-agency child protection policy, procedure, guidance and practice. If any action was required to improve practice and service delivery, this would be clearly stated by the CPC. The CPC would have in place mechanisms for deciding whether or not to initiate a Learning Review. This would give the Committee the assurance it required that services were responding appropriately to the issues impacting on, and the needs of, our young people.

The Chair of the Committee explained that she had received a list of allegations suggesting young people had experienced harm and difficulty and at the conclusion of the meeting she would be providing this information to Police Scotland.

The Committee **NOTED** the statements from the Chief Social Work Officer and the Chair.

1. Apologies for Absence Leisgeulan

Apologies were submitted on behalf of Mrs M Davidson (substituted by Mr A Henderson), Mrs D Mackay, Mrs I MacKenzie, Mrs M Paterson, Ms E Roddick, Mr K Rosie and Mr C Smith.

2. **Declarations of Interest** **Foillseachaidhean Com-pàirt**

Mrs L Munro declared a general financial interest (apart from Item 9) as a Specialist SDS Advisor with Carr Gomm Community Contacts Team but, having applied the test outlined in Paragraphs 5.2 and 5.3 of the Councillors' Code of Conduct, concluded that the interest did not preclude her involvement.

Item 9 – Mrs L Munro (financial)

3. **Good News** **Deagh Naidheachdan**

- Valerie and Reg Tait, Foster Carers in Alness, were thanked for 40 years of fostering with Highland Council; and
- a summary was provided of the work of the Covid Response Team (CRT) which was set up by NHS Highland to support care homes during the pandemic when it became clear that social care providers would be significantly impacted by the pandemic and would have a challenge to deliver care and provide staff at times when staff were shielding and, more latterly, when staff had tested positive. A YouTube clip of an NHS Highland Board meeting was played, showing members of the CRT who described the challenges they faced and the sacrifices they had made in delivering care to – principally – the elderly population in care homes where there had been outbreaks, and now also offering support to Care at Home services.

During discussion, Members thanked the foster carers, Valerie and Reg Tait, and everyone involved in the CRT. In response to an anecdote about care providers travelling in remote areas with no phone reception, it was hoped an innovative solution would be found for this.

The Committee **NOTED** the Good News, including recordings of the Covid Response Team, and **AGREED** a letter and card be sent to Valerie and Reg Tait to thank them for their 40 years' service to fostering.

4. **Chief Social Work Officer – Presentation** **Àrd-Oifigear Obrach Sòisealta – Taisbeanadh**

A presentation was provided by the Executive Chief Officer Health and Social Care and Chief Social Work Officer, updating the Committee on the Annual Chief Social Work Officer report for 2020-2021 which would be going to Council on 9 December 2021. Issues covered included mental health officers, guardianship orders, criminal justice, child protection, fostering placements, adoption matches, adult protection, care home residents (in-house and independent sector), and care at home data.

The impact of Covid-19 was becoming increasingly apparent and effective joint working with statutory partners and the third sector would be vital to address increasingly complex needs.

During discussion, the following issues were considered:

- with particular reference to winter pressure and staff shortages, assurance was sought and provided that the corporate and service risk registers were being regularly reviewed and actioned, by the Council and by NHS Highland; and

- information was sought and provided on actions being taken to recruit and train mental health officers, noting the significant numbers who were due to retire soon. A process was in place to recruit three mental health officers per year for three years.

The Committee **NOTED** the presentation.

5. Performance and Quality Assurance Review Report Aithisg Sgrùdaidh Coileanaidh is Barantais Chàileachd

There had been circulated Report No HCW/21/21 dated 1 November 2021 by the Executive Chief Officer Health and Social Care.

During discussion, the following issues were considered:

- paragraph 3.1 of the report stated there was no specific resource issues arising out of the contents of this report. However, there were a significant number of vacant posts which might require to recruit people who needed to be trained, and there were a number of young people who had to be placed in out of area placements. More detail on costs would be provided to the Committee in February 2022;
- 70 staff had been interviewed as part of the small scale review, some 1:1, some in groups;
- assurance was provided that social work managers were communicating with front line care workers to build sustainable teams with good two-way engagement, especially in relation to redesign of services;
- it was acknowledged that some care staff had a preference for working with children or with adults, or in a particular sector, while others welcomed variation. Discussion took place on the extent to which all care services were trying to recruit from the same group of people and an outline was provided of some of the measures being undertaken to make a career in care work more attractive, for example limiting split shifts where possible, ensuring adequate equipment, and offering variation if desired. It was suggested the Scottish Government should be lobbied to increase pay rates for care workers and to improve opportunities to recruit from abroad. The need to value care workers and raise the profile of caring as a career was emphasised;
- dual-skilling could be useful and beneficial for the individuals and their employers and communities, especially in remote and rural locations;
- a bank for care workers from all sectors was suggested, as was a Highland-wide care passport, which would allow skills or training gained in one sector to be accepted by others if someone moved post. In particular, a passport system for PVG checks would be helpful to reduce duplication, and a meeting should be held to further discuss this and to consider lobbying the Scottish Government. Attention was drawn to the NHS Highland integrated bank and to the Covid Response Team, which had been presented under Item 3, which had functioned as a type of bank for emergency care staff during the Covid-19 crisis; and
- the Council, NHS Highland, and third sector teams were working closely together in anticipation of a challenging winter, and information was due to be issued shortly about a briefing for Members on a people mobilisation strategy.

The Committee:-

- i. **NOTED** the review processes being undertaken in the different services;

- ii. **NOTED** planned use of these findings to help inform practice, service delivery and re-design of services; and
- i. **AGREED** to hold an informal meeting, ideally before Christmas 2021, to discuss lobbying the Scottish Government in relation to the development of a cross-service and cross-agency Highland-wide PVG passport system.

6. **Sutherland Pathfinder Project** **Pròiseact Lorgair-Slighe Chataibh**

There had been circulated Report No HCW/22/21 dated 1 November 2021 by the Executive Chief Officer Health and Social Care.

During discussion, the following issues were considered:

- progress with the project was welcomed and it was hoped best practice from the project would be disseminated to other rural communities; and
- ‘and their families’ should have been added to the end of the following sentence in paragraph 5.1 of the report: ‘Previous funding has been allocated by the Scottish Government (grants of £178k and £534k) for supporting the mental health and emotional wellbeing of children and young people’.

The Committee:-

- i. **NOTED** a Sutherland wide engagement process with communities working in collaboration with Sutherland Community Partnership, Third Sector Organisations and Statutory services;
- ii. **NOTED** an engagement process for working collaboratively with children and young people across Sutherland to enable them to have an active role in shaping the Sutherland Youth Action Plan and the Childs Plan; and
- iii. **APPROVED** the creation of a Sutherland Pathfinder signed up to by Young People, Highland Council, Community Planning Partners and Third Sector Organisations.

7. **Commissioned Health Service Assurance Report** **Aithisg Bharantais Seirbheis Slàinte Choimiseanaichte**

There had been circulated Report No HCW/23/21 dated 1 November 2021 by the Executive Chief Officer Health and Social Care.

During discussion, the following issues were considered:

- the fact that there were 250 health professionals demonstrated the scope of the service and support the Council was seeking to offer;
- in response to a question, it was explained that the training for the 10 trainee advanced nurses would be a one-year advanced practice course and this was based on feedback from the Service;
- confirmation was sought, and provided, that school nurses qualified to the advanced practitioner level were able to offer advice and guidance to Education staff as well as being the Named Person of the school if there were questions about health and wellbeing for young people;
- in response to a question about Allied Health Professionals (AHP), it was confirmed that there were no recruitment difficulties at the present time;

- Members echoed the concern that there were no electronic Child Health Records used in Highland and in response the Chief Executive explained that there was a Transformation project underway on Digitalisation and there had been agreement with the Digital Office Scotland to complete a digital maturity assessment across the Council as a result of staff feedback. An update on the Transformation work would be taken to a meeting of the Committee in February 2022;
- the positivity and progress outlined in the report was important to highlight and a credit to the staff involved;
- information was sought, and provided, on the role of Child and Adolescent Mental Health Services (CAMHS) and how this was being managed;
- the 11% Health Visitor vacancy rate was worrying and everything that could be done to reduce this was important;
- clarification was sought on school nursing and immunisations and it was explained that over two thirds of the school workforce was advanced nurse qualified and spending 70% of their time on vaccinations which were clinical duties they were overqualified for and this would be examined to ensure their skills were being used appropriately;
- the percentage of children reaching their developmental milestones at their 27 – 30-month health review had not had new data since 2019 and explanation around this was provided;
- it was concerning that there was a long way to go regarding the reduction in the percentage gap between the most and least deprived parts of Highland for low birthweight babies;
- 18 weeks from referral to treatment was a long time to wait for AHP services; and
- regarding comments made about mental health and wellbeing, the Head of Integrated Children’s Services explained that there had been a significant development in this area as a decision had been taken at the Community Planning Partnership Board to establish a whole system mental health strategy as there was a strong need for a reinforced focus from a partnership perspective around mental health and wellbeing. A Stakeholder workshop had been tabled for late November 2021 and the key work was how to produce a strategy taking a keen interest on improving the amount and quality of data for mental health in communities.

The Committee **NOTED** the:

- i. update on service delivery, including measures put in place across the Covid pandemic;
- ii. context of Integrated Children’s Service Planning; and
- iii. update on future plans for service improvement, clinical and professional governance and performance reporting.

8. Adult Social Care Assurance Report Aithisg Bharantais Cùram Sòisealta Inbheach

There had been circulated Report No HCW/24/21 dated 7 October 2021 by the Executive Chief Officer Health and Social Care.

During a verbal update, the Interim Head of Integration Adult Social Care highlighted that in reference to Section 4.3 of the report, all care homes had had a third rollout of the Covid-19 vaccine since the publishing of the report.

During discussion, the following issues were considered:

- it had been proven how quickly the Council, NHS and communities could mobilise although this could not be done on a regular basis and it was important to establish a way to mobilise by replicating the teams that were put together in Highland. It was explained that the medium and long-term approach for enhancing response teams was underway;
- regarding the data on Adult Support and Protection (ASP) referrals and the investigations chart at Section 9.4 of the report, it was queried what the 'Other' category comprised of and the Director of Adult Social Care, NHS Highland agreed to gather details around this and circulate it to the Committee;
- the report was timely, well thought out, and challenging and the question would be how the Council and communities would respond to the challenge that was presented;
- information was sought, and provided, on the requirement for NHS workers and independent providers to be double vaccinated and it was agreed that Members would be kept apprised of government decision-making around this issue by way of a Members briefing note as information became available.;
- it was emphasised that both the challenges and solutions were to be found in communities; and
- the Council had the funding but required the appropriate staff in order to mobilise; and
- it was agreed that a Committee meeting with a one item agenda should be scheduled on the subject of the Provision of Adult Social Care in Communities and the purpose would be to bring forward solutions and ideas with the invite to include all Members, Third Sector partners and the NHS.

The Committee:

- i. **NOTED** the contents of the report;
- ii. **NOTED** the continued commitment and collaborative actions to sustain service provision, whilst responding to the ongoing pandemic and associated operational pressures;
- iv. **AGREED** that a breakdown be provided to the Committee on the 'Other' category at Section 9.4 of the report relating to ASP Referrals and Investigations;
- v. **AGREED** that a briefing note be provided to the Committee in the event that national decision making occurred around double vaccination requirements for Health workers; and
- vi. **AGREED** that a meeting be convened, with the invitation to include Third Sector partners and NHS Highland, to discuss the single issue of Provision of Adult Social Care in Communities in the coming months.

**9. Revenue Budget Monitoring – Quarter 2 for 2021/22
Sgrùdadh Buidseat Teachd-a-steach – Cairteal 2 airson 2021/22**

Declaration of Interest: Ms L Munro declared a financial interest in this item as a Specialist SDS Advisor with Carr Gomm Community Contacts Team and left the meeting during discussion. Mr D Fraser took the Chair in her absence.

There had been circulated Report No HCW/25/21 dated 1 November 2021 by the Executive Chief Officer Health and Social Care.

During discussion, the following issues were considered:

- tribute was paid to Mike Mitchell on his forthcoming retirement for his many years of service to the Council;
- information was sought and provided on the overspends in out of authority placements, fostering and adoption, which reflected some of the challenges faced during the preceding 18 months;
- while the underspend in Self-Directed Support (SDS) was understandable during the Covid-19 crisis, due to services being unavailable, assurance was sought and provided that the available funds would now be able to be fully utilised. Assurance was also sought that appropriate feedback had been provided to young carers in relation to SDS concerns. A report on SDS would be presented to the Committee in February 2022;
- information was sought and provided on the reported figures for commissioned children's services income from NHS Highland;
- in response to a query on the management team overspend, this related to carry forward of management structure savings and would be rectified when the budgets were realigned;
- assurance was provided that the cessation of £60k funding for infant feeding was to be resourced elsewhere;
- underspends in the core Looked After Children budget were partly as a result of additional Covid-19 funding received; and
- information was sought on action being taken to address county lines and child exploitation issues, and a summary was provided of the activities governed by the Child Protection Committee, and of joint work being undertaken with Police Scotland and other agencies. Child exploitation had been identified as a key priority of the Child Protection Committee over the coming three years and a bid was being prepared to the Scottish Government for funding to support this work. Barnardo's had produced a report on county lines that could be shared with the Committee.

The Committee:

- i. **NOTED** forecast revenue position as at Quarter 2 of the 2021/22 financial year, including the management action being taken and the risks and uncertainties set out within the report;
- ii. **NOTED** progress update provided in relation to budget savings delivery; and
- iii. **AGREED** a report by Barnardo's on county lines and exploitation would be shared with the Committee.

10. Minutes Geàrr-chunntas

The minutes of the Joint Monitoring Committee held on 7 October 2021 were **NOTED**.

The meeting ended at 2.25pm.