

The Highland Council / NHS Highland

Agenda Item	8
Report No	JMC-27-23

Committee: Joint Monitoring Committee

Date: 15 December 2023

Report Title: Integrated Adult Services
Strategic Plan and Strategic Planning Group Update Report

Report By: Highland Council Executive Chief Officer – Health and Social Care
and NHS Chief Officer

1. Purpose/Executive Summary

- 1.1 This report provides an update on the development of the Adult Strategic Plan which has been out for consultation and has been updated following the engagement process.

2. Recommendations

Members are asked to:

- i. **Note** and **Approve** the Strategic Plan for the Partnership in the terms appended to this report at Appendix 1
- ii. **Agree** that the Adult Strategic Plan be published as representing the Strategic Plan for Health and Social Care Services for Adults for 2024 - 2027

3. Implications

- 3.1 **Resource** – There are no specific resource issues arising from this report, although it is recognised that the content of the Strategic Plan, once finalised, will require to consider this area.
- 3.2 **Legal** – The content of this report is to seek to ensure the Partnership’s compliance with The Public Bodies (Joint Working) (Scotland) Act 2014.
- 3.3 **Community (Equality, Poverty, Rural and Island)** – There are no such implications as a result of this report although it is recognised that the content of the Strategic Plan will have an impact on service delivery across Highland’s communities.
- 3.4 **Climate Change/Carbon Clever** – There are no climate change implications as a result of this report.
- 3.5 **Risk** – There are no specific risks arising from this report, although it is recognised that the content of the Strategic Plan, once finalised, will require to consider this area.
- 3.6 **Health and Safety (risks arising from changes to plant, equipment, process, or people)** – There are no Health and Safety implications as a result of this report.
- 3.7 **Gaelic** – There are no Gaelic implications as a result of this report.

4. Background

- 4.1 The Public Bodies (Joint Working) (Scotland) Act 2014 requires the Partnership to have in place a **Strategic Plan** which sets out the arrangements for the carrying out of the integration functions for the area over the period of the plan and which also sets out how these arrangements are intended to achieve, or contribute to achieving, the national health and wellbeing outcomes.
- 4.2 This same Act also directs that a **Strategic Planning Group** requires to be established and in place in to support the development of this Strategic Plan. That group has been established and has supported the Partnership to prepare a draft strategic plan which was approved by the Joint Monitoring Committee in June and has been issued for a 3 month period of engagement and consultation which ended on the 30 September 2023. The plan has been updated following the engagement process and reviewed further by the Strategic Planning Group on 6th November 2023 and 4th December 2023. The plan attached to the report at Appendix 1 reflects the draft plan having been amended as a result of the consultation process and takes into account subsequent comment made by the Strategic Planning Group.

5. Strategic Plan

- 5.1 The legislative requirements mandate that the draft plan is prepared and that this is consulted upon with a prescribed list of stakeholders, along with anyone else that the Partnership consider may have an interest.
- 5.2 Following an equality impact assessment (EQIA), an engagement process took place over July, August and September 2023, ending on 30th September 2023. Engagement materials were issued to internal and external networks and in addition, the engagement materials were issued through social media, and were placed on both the NHS Highland and Highland Council websites. Three virtual “open to all” sessions were

held on September 5th, September 8th and September 28th 2023.

- 5.3 The Partnership welcomes the generally positive feedback but is of course mindful of the commentary provided by the respondents. In seeking to bring together those comments the conclusion is such that the Strategic Plan whilst generally considered as positive was also viewed as aspirational. In terms of those challenges in relation to the perceived aspiration of the Strategic Plan those were broadly in relation to resource in terms of both workforce to deliver upon the plan and the financial resource to pay for it. The Partnership recognises that and is committed to working with communities, the third sector and those with lived experience to deliver upon these aspirations. The commentary received endorsed the need for this level of collaborative working and also referenced the key role of unpaid carers.

Another issue which arose was the perception that some services delivered by the Partnership are centred in Inverness and not available consistently throughout Highland. Linked to that was the need to ensure “geographical parity” where possible and to seek to maintain and build upon smaller rural care homes and community hospitals. The Partnership recognises these challenges and acknowledges that there will require to be work with communities at a local level to sustain services locally or deliver them differently with a view to supporting people to stay in their own homes/communities. The need to make more reference to mental health services has also been noted and will require to form a key part of the envisaged local delivery plans.

The final point raised which ought to be addressed is in relation to performance and how this will be measured by the Partnership. It is recognised that this will be key to monitoring how the Partnership is performing in relation to the delivery of the Strategic Plan. It is anticipated that in terms of the Plan, and in order to provide services, a number of key strategies will be required and include; a performance management framework, a digital strategy and a workforce strategy. It is also anticipated that in terms of service delivery, locality plans will be closely linked to the community planning framework.

The work associated with that will be reported to Committee on a regular basis.

- 5.4 On the basis that this Committee is able to approve the terms of the draft Plan, it is intended that it be published on the NHS Highland and Highland Council websites. Once the plan is in place it is intended to proceed to delivery and local engagement events as anticipated by the terms of the draft Plan.

6. Implementation of the Strategic Plan

- 6.1 In terms of delivery of the plan it is recognised in the Plan that “one size does not fit all” and as such there will be a need for local engagement as outlined in paragraph 6.3 below.

6.2 However, it is also recognised that the Partnership will require to build upon and develop strategies on a pan Highland basis which will inform local plans. Those pan Highland strategies are broadly as follows:-

- Workforce Strategy
- Housing Strategy
- Telecare and Digital Strategy
- Self-Directed Support
- Handyperson Scheme
- Care at Home and Care Home future strategy
- Managing Complex Cases
- Shared Lives

Much of the work in relation to these strategies has already commenced but it is important to set those out within the context of this report as they will all contribute to the vision set out in the Strategic Plan in terms of supporting local communities and enabling people where possible to stay in their homes and communities for as long as they are able to do so. Those work streams identified above also sit alongside some of those areas recognised as risks for the Partnership (as set out in another report to Committee today) and it is important that work is taken forward to not only deliver on the intentions set out in the Plan but also address some of those identified risks. Future reports to this Committee will provide updates in relation to progress in terms of delivery and implementation of those work streams.

6.3 It is essential that implementation of the plan is taken forward with an understanding of local communities, that fairness and equity is ensured and that we work together and listen to people in communities to develop local plans. In order to achieve this, we will establish District Locality Planning Groups which will include community, carer, health and social care services, independent and third sector members as their core. They will have the ability to include additional members including elected members, community councillors, GPs, and other sectors such as housing.

6.4 It is intended that District Locality Planning Groups will be in place in all Districts by April 2024 and will build on plans and activity already in place in Districts.

Designation: Executive Chief Officer, Health and Social Care THC and
Chief Officer, NHS Highland

Date: December 2023

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Appendix:

1 Final Draft Joint Strategic Plan