Highland Council/NHS Highland Joint Monitoring Committee

Minutes of the Meeting of the Highland Council/NHS Highland Joint Monitoring Committee held in the Council Chamber, Glenurquhart Road, Inverness, on 27 March 2024 at 10.30am.

Present:

Highland Council

Mr David Fraser (Chair) Mr Raymond Bremner Mr Derek Brown Ms Fiona Duncan Mr Ian Kyle Mr Derek Louden Ms Fiona Malcolm Ms A MacLean (for Mr A Christie) Mr Brian Porter

NHS Highland

Ms Sarah Compton-Bishop (Vice Chair) Dr Tim Allison Mr Alex Anderson (remote) Ms Louise Bussell Ms Ann Clark (remote) Ms Heledd Cooper Ms Pamela Cremin Mr David Park (for Ms P Dudek) Mr Gerry O'Brien (remote)

Staff Representatives

Ms Elspeth Caithness (NHS Highland) (remote)

Third Sector, Carer and Service User Representatives

Ms Roisin Connolly, (Connecting Carers) (remote) Mr Campbell Mair (Scottish Care - Care at Home) (remote) Mr Ian McNamara (Highland Senior Citizen's Network) (remote) Ms Sarah Fowler (for Dr G Rodger) (Inspiring Young Voices)

Officers Present

Mr S Steer, Director of Adult Social Care, NHS Highland Ms R Boydell, Head of Integration, Strategy and Transformation, NHS Highland (remote) Mrs L Dunn, Joint Democratic Services Manager, Highland Council Ms F MacBain, Senior Committee Officer, Highland Council

Mr D Fraser in the Chair

1. Calling of the Roll and Apologies for Absence Gairm a' Chlàir agus Leisgeulan

Apologies were intimated on behalf of Mr A Christie (Highland Council), Mr John Gibson (Highland Council), Ms P Dudek (NHS Highland) and Dr G Rodger (Inspiring Young Voices).

2. Declarations of Interest/Transparency Statement Foillseachaidhean Com-pàirt/Aithris Fhollaiseachd

The Committee **NOTED** the following Declaration of Interest:

Items 7a and 7b - Mrs A MacLean

3. Minutes Geàrr-chunntas

There had been circulated and were **APPROVED** minutes of the meeting of the Joint Monitoring Committee held on 15 December 2023.

4. Future Strategic Planning Reporting to Committee Aithris planaidh Ro-innleachdail San Am Ri Teachd

There had been circulated Report No JMC/01/24 by the Executive Chief Officer Health and Social Care, and Chief Social Work Officer.

It was pointed out the report had been prepared jointly with the NHS Highland Chief Officer.

During discussion, the following issues were raised:

- it was important officers took into consideration the relationship between the Committee and the Community Planning Partnership Board;
- confirmation was sought and provided that a separate delivery plan for the Adult Strategic Plan would be produced;
- attention was drawn to the importance of being outcome focussed, and a development session would be beneficial to develop appropriate metrics, noting that experience, as well as outcomes, were of significance. Reference was made to the first iteration of the annual performance report and the iteration and measurement against national health and wellbeing outcomes;
- support was voiced for quarterly reporting on health and wellbeing outcomes;
- it was suggested there were risk implications arising from the report, such as poverty, equalities, communities etc, and these should be included in future reports;
- information was sought and provided on work being undertaken to tackle transport, with particular reference to hospital transport in remote and rural areas, and to place-based planning;
- with reference to sections 4.5 and 6 of the report, it was requested that the Council's and NHS Highland's statutory responsibilities for areas of the Adult Strategic Plan be recorded in the papers;
- the benefits of effective commissioning were highlighted, and work in this area was summarised, including the aim for a market facilitation plan; and
- it was hoped the Key Performance Indicators would be known soon, and information was sought on the publication date for the next annual performance report to ensure learning from one year was carried forward to the next. This was likely to be in July 2024.

Thereafter, the Committee **NOTED** the update and the recommendations as noted within the report.

5. Integrated Children's Services Annual Report Aithisg Ùrachaidh Sheirbheisean Chloinne Amalaichte

There had been circulated Report No JMC/02/24 by the Chair of the Integrated Children's Services Planning Board.

During discussion, the following issues were raised:

- attention was drawn to the 5% achievement of the Neuro Developmental Assessment Service (NDAS) target of less than 18 weeks, and a summary was provided of the context of the figures and actions being undertaken by NHS Highland and by the Council's Education Service to address the situation. Many of the young people who were waiting for assessment were having their needs fulfilled in an education setting, with some of the information gathered by teaching and other school staff forming part of the NDAS assessment process. It was also pointed out that performance was 24%, not 5%, and a multi-disciplinary meeting had been held in December 2023 to consider issues and improve clarity on actions. Child Health Services and Education Services had undertaken improvement work on waiting lists between January and March 2024, and continued collaboration was planned;
- the improved report format was welcomed, and it was queried whether the baseline and variation levels had changed;
- with reference to Indicators 8, 9 and 10 in the report, attention was drawn to the value of both organisations working closely on recruitment, with particular reference to Allied Health Professionals (AHPs) for both Adult Social Care and Health. In response to it being queried whether particular geographic areas were being affected, it was suggested that, while there were pressure points, there were no specifics in relation to location. A summary was provided of the commitment to producing a regional Workforce for the Future strategy, which would cover care and health professionals, and would involve a wide range of public and private sector organisations, and close working with schools and the UHI;
- the governance structure referred to in section 4.1 of the report would be useful to have articulated in the accompanying graphic;
- information was sought and provided on how to improve engagement with children and young people, with particular reference to seldom heard voices, such as care experienced young people and those with special needs. The importance of listening to young people and involving them in decisions was vital, and reference was made to the recent Rights of the Child bill. The monitoring of homeschooling was also queried. A summary was provided of the various ways in which children and young people were involved in decision-making, including the Children Services Plan, with reference to Getting it Right for Every Child, and the need to provide training for staff at all levels. The participation strategy would provide tools to facilitate participation;
- the sharing of information and resources across partner organisations to maximise resources was welcomed. The NHS Board had recently held a development session at which the use of data had been considered, and some of the issues raised might be helpful for the JMC and partners. An emphasis of this work had been the need to look at the impact of variation;
- it was queried whether there were other means of measuring performance in relation to child obesity, noting that it was increasing. Attention was drawn to the need to focus on nutrition and healthy relationships with food, and to consider indicators and baseline measures. Attention was drawn to the overrepresentation of some children and adults in reported data and the work that was required to address this;
- in relation to AHP challenges, it was important not to lose sight of waiting times; and

• assurance was sought and provided that the system/process/reporting issues referenced in the report, which had been impacting on the data in relation to child health surveillance for children aged 6-8 weeks, had been resolved.

Thereafter, the Committee **NOTED** the:

- i. work undertaken by the children's services planning partnership over the last few months in delivering the Highland Integrated Children's Services Plan 2023 2026; and
- ii. Integrated Children's Services Boards Performance management framework.

6. Adult Services Update Report Cunntas às Ùr mu Sheirbheisean Inbheach

There had been circulated Report No JMC/03/24 by the Chief Officer, Highland Health and Social Care Partnership.

During discussion, the following issues were raised:

- in response to earlier discussions on quarterly reported health and wellbeing outcomes, this would be further considered outwith the meeting;
- implementation of the Adult Strategic Plan, including joint working with the third sector partners, was vital, as was a focus on growth and innovation;
- in relation to SDS Option 1 (direct payments), concern was expressed at the lack of regulation and governance. Information was sought on the amount of data that was available to measure the impact of the use of SDS Option 1, with some anecdotally positive evidence provided. It was important to understand how success in this area could be measured. This issue would be considered in more detail by the Highland Health and Social Care Committee;
- information was sought on the wide variation (from 1 to 274) for the Carer Break Scheme Applications detailed in the section 7.5 of the report. This could be the result of provider collapse in particular localities. Further detail on this would be provided to the Highland Health and Social Care Committee;
- people experiencing delay in hospital was a national problem and exacerbated waiting times for Highland citizens awaiting elective operations;
- it was queried whether information was collated on the physical activity levels of patients delayed in acute hospitals, with reference to the possible decrease in their mobility as a result of delays. Information was sought on what could be done to encourage people to consider their future, and make arrangements for their discharge for hospital, including arranging power of attorney. In this regard, work could be undertaken with Citizen's Advice Bureaux and other organisations. Prioritising care at home adaptations could also help to avoid some people being delayed in hospital;
- in relation to SDS Option1 (direct payments), it was queried how much time providers had to spent on travel versus time with clients in remote and rural areas. Reference was made to the need to consider the provision of respite for partner-carers, to consider people in community settings, whether that be rural or urban, and to ensure fairness for the service providers;
- a paper had been co-presented to the Highlands and Islands Convention, chaired by the Depute First Minister, on the delivery of care in rural areas, with attention drawn to particular areas such as Highland's low balance of care, and the need for sustainability in a time of shrinking budgets and an

ageing population. The Highland Council Chief Executive intended to send a letter from himself and the new NHS Highland Chief Executive, after she took up her post on 1 April 2024, to the Scottish Government seeking greater flexibility in relation to the use of SDS Option 1. He also planned to write to the COSLA Chief Executive on the subject of national care home contracts and what could be done to achieve a more sustainable model and assist care providers;

- in relation to housing, while the Council had the lowest balance of care in Scotland, it had the highest level of home adaptations, with more communityled solutions being worked on. Housing waiting lists were lengthy, and around 42% of all Housing Revenue Account income was being used to service debt to the UK Treasury;
- in relation to recruitment, it was unlikely the pool of available staff would expand to meet need, and this situation would require challenging decisions to be made on the use of resources across the partnership, some of which might be unpopular with communities. It was suggested that in relation to tackling these problems in Adult Social Care, Highland was ahead of the rest of Scotland; and
- an independent sector ethical commissioning event was being held in the afternoon of 27 March 2024, which would include care provision from a rural perspective.

Thereafter, the Committee **NOTED** the work undertaken in implementing the HHSCP Joint Strategic Plan and assurance performance information as supplied.

7. Highland Health & Social Care Partnership Finance Reports Aithisgean Ionmhais Com-pàirteachas Slàinte & Cùraim Shòisealta na Gàidhealtachd

Declaration of Interest: Mrs Angela Maclean, as a Board Member of Sight Action Sensory Services, formally Sight Action, which was coming to the end of its present contracts with Highland Council for Children Services and NHS Highlands for supporting clients with Sight impairment, declared an interest in this item. Ms MacLean was also a Board Member of Sight Action, formally Highlands and Islands Society for Blind People, and left the chamber for the duration of Items 7a and 7b.

a. Highland Health & Social Care Partnership Finance Report Aithisg Ionmhais Com-pàirteachas Slàinte & Cùraim Shòisealta na Gàidhealtachd

There had been circulated Report No JMC/04/24 by the Director of Finance, NHS Highland.

During discussion, attention was drawn to the growth in younger adults requiring significant care packages, and the challenging decisions that were required to be made on how to best use resources and find innovative solutions to delivering services. An action plan was being developed to support those with disabilities transitioning from children's to adult services. It was important to build relationships across teams, with delivery of the Adult Strategic Plan being the key to success.

The Committee **NOTED** the:

- i. financial position at the end of Month 9 2023/2024; and
- ii. Adult Social Care estimate for 2024/2025 which had been built into NHS Highland's financial plan submission to Scottish Government.
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b. Highland Council Finance Report Aithisg Ionmhais Chomhairle na Gàidhealtachd

There had been circulated Report No JMC/05/24 by the Head of Corporate Finance, Highland Council.

During discussion, attention was drawn to the ongoing financial challenges all public sector organisations were facing. The Council's budget and delivery plan required the redesign of services, as the current model was unsustainable, and continued service delivery without change was impossible. With joint working and effective dialogue being key, it was important to share the message that service redesign was about making services sustainable during financial challenges. Reference was also made to the vital role of the third sector and the need for inclusive language.

The Committee NOTED the:

- i. report and financial forecast for Quarter 3 of 2023/24;
- ii. update provided regarding savings delivery for Integrated Children's Services; and
- iii. update provided regarding outlook for 2024/25 and beyond.

Closing Remarks

Mr David Fraser summarised the improvements in children's services and the aims of the adult strategy to improve outcomes for communities. With his year as Chair ending on 31 March 2024, he welcomed Ms Sarah Compton-Bishop as Chair from 1 April 2024 for 12 months, with Mr Fraser taking on the role of Vice Chair.

The meeting finished at 12.30pm