

## The Highland Council

Minutes of the meeting of the **Health, Social Care and Wellbeing Committee** held in the Council Chamber, Glenurquhart Road, Inverness on Thursday, 16 May 2024 at 10.30am.

### **Present:**

Dr C Birt	Mr A MacDonald
Ms K MacLean (sub for Mrs M Cockburn)	Mrs I Mackenzie
Mr D Fraser	Mrs A MacLean
Mr R Gale	Mr T MacLennan
Mr R Gunn (remote)	Mr J McGillivray (remote)
Mrs B Jarvie (remote)	Mrs M Paterson (remote)
Ms L Johnston	Mrs M Reid
Mr D Louden (sub for Ms E Knox)	Ms M Smith
Ms L Kraft	

### **Non-Members present:**

Mr C Ballance	Mr D McDonald
Mr B Boyd	Mr R Stewart
Mr J Grafton (remote)	

### **NHS Highland representatives:**

Dr T Allison, Director of Public Health, NHS Highland  
Ms L Bussell, Director of Nursing  
Mr S Steer, Director of Adult Social Care

### **Third sector representatives in attendance:**

Ms J Douglas, Care and Learning Alliance  
Mr H Tedstone, Highland Hospice

### **Participating Officials:**

Ms K Lackie, Assistant Chief Executive - People  
Ms F Duncan, Executive Chief Officer Health and Social Care and Chief Social Work Officer  
Ms F Malcolm, Head of Integration Adult Social Care, Health and Social Care  
Ms M McIntyre, Head of Children and Justice Social Work, Health and Social Care  
Ms D Munro, Lead Officer (Child Protection Committee)  
Ms M Cano, Principal Officer (Criminal Justice Services)  
Mr J Maybee, Independent Chair Multi Agency Public Protection Arrangements  
Mrs L Dunn, Joint Democratic Services Manager, Performance and Governance  
Ms F MacBain, Senior Committee Officer, Performance and Governance

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

**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 Mrs M Cockburn, Ms E Knox and Mrs P Munro.

## 2. **Declarations of Interest/Transparency Statement** **Foilseachaidhean Com-pàirt/Aithris Fhollaiseachd**

### **Transparency Statement**

Item 5 - Ms L Johnston

## 3. **Service Achievements** **Coileanaidhean Seirbheis**

The Committee **NOTED** updates on the following topics:

- **My Journey Journal**, which allowed young people aged 12 and above with care experience to record important information about themselves;
- Highland's multi-agency approach to the roll out of the **Safe & Together Model** funded by Scottish Government through the Delivering Equally Safe fund managed by Inspiring Scotland;
- The SASW (the professional association for social work and social workers) **Mental Health Officers Conference – 28 February 2024**, the theme of which had been Embracing the Unknown: Finding Hope. Feedback had been positive; and
- **Mind your Ps and Qs – Language Academy Session – 17 May 2024**, to facilitate organisations with responsibility towards care experience children and young embedding destigmatising language and practices across the way they work.

## 4. **NHS Highland Director of Public Health Annual Report 2023: Medication and Public Health – Do the Right Thing** **Aithisg Bhliadhnail 2023 Stiùiriche Slàinte a' Phobail aig NHS na Gàidhealtachd: Cungaidhean-leighis agus Slàinte a' Phobail – Dèan an Rud Ceart**

There had been circulated Report No HCW/06/24 by the Director of Public Health and Health Policy.

Following a presentation of the Public Health Annual Report 2023, the theme of which was medication and public health, Members raised the following issues during discussion:

- the statistics for deaths from suicide and drugs were concerning and it was hoped strategies would be put in place to tackle health inequalities;
- the improvements in treatment for Hepatitis C were welcomed and assurance was sought and provided that treatment was provided equitably, with a summary provided of the testing and treatment programme across the Highlands;
- depression and isolation were key health issues, especially since the pandemic, and attention was drawn to the benefits of social prescribing, including working with the third sector, community groups and the community planning partnerships;
- it was important to encourage people to eat a better diet and to address the increasing use of food banks;

- the ageing population, and the increasing population, were concerning, and the importance of maintaining a good quality of life when approaching and passing retirement age was emphasised;
- in relation to life expectancy, especially in areas of poverty, the Council was urged to consider all the determinants of health that could be affected by their policies. Particular reference was made to efforts that were required to tackle rising levels of obesity, including recent pharmaceutical treatment, and current health promotion policies to improve diets;
- it was disappointing that the gaps between various health indicators for deprived areas versus the average were widening and a key challenge for the future was how to avoid this situation worsening;
- accessibility to nature and transport were key challenges in areas of deprivation and reinstating wellbeing funding would be useful in this regard. The Executive Chief Officer, Health and Social Care would provide more detail to the Committee on whole family wellbeing funding outwith the meeting;
- equitable access to healthcare in remote and rural areas, including transport services, required signposting;
- attention was drawn to recent healthcare challenges on the Isle of Skye and it was queried when 24/7 urgent care would be resumed; and
- social prescribing required appropriate structuring to be an effective measure in tackling deprivation-led issues, including mental health problems. The value of arts therapy and nature was highlighted.

Thereafter, the Committee **NOTED** the 2023 Director of Public Health Annual Report.

## **5. Adult Social Care Assurance Report and Strategic Update Aithisg Barantais agus Cunntas Ro-innleachdail air Cùram Sòisealta Inbheach**

**Transparency Statement: Ms L Johnston declared a connection to this item as an employee of Connecting Carers but, having applied the objective test, did not consider that she had an interest to declare.**

There had been circulated Report No HCW/07/24 by the Executive Chief Officer Health and Social Care.

Attention was drawn to a recent Care Inspectorate report, which had not been available at the time of writing the report, and which was available on the Care Inspectorate website. The workforce competency risk, which was ragged red, was expected to be downgraded shortly.

During discussion, Members raised the following issues:

- attention was drawn to the amount of care at home being undertaken by families and unpaid carers and the impact this could have on their lives. Many complex issues fed into the challenges in the care sector including staff shortages, residential home closures, and social work recruitment and retention. Carers should be involved in the hospital discharge process;
- families and Members were not always aware of the various Self Directed Support (SDS) options and a Members workshop and report on SDS was requested;

- the Head of Integration Adult Social Care would check that the funding for the Well-being Fund for Unpaid Carers had not been reduced;
- attention was drawn to two examples of social care transformational change in remote and rural areas of Wester Ross. The Howard Doris Centre in Lochcarron was highlighted as an example of a good practice model;
- the care sector was the biggest threat to wellbeing in the Highlands, and one of the key issues was the relatively low salaries, especially in comparison to the hospitality sector. Attention was drawn to the high cost of keeping someone in an acute hospital, compared to them being cared for at home or in a care home, but as the Council lacked funds to address the shortage of beds and staff, it was vital the Scottish Government provided further funding to address the looming crisis. This had been raised at CoSLA;
- in relation to chronic staff shortages in the Dail Mhor and Macintosh care homes, Members would be kept informed of decisions;
- information was sought and provided on reference in paragraph 5.2.2 of the report to unmet mutual aid requests, and unmet in-house service demands, and on the use of battery operated wheelchairs and mobility scooters. It was queried how much of unmet need was the result of delayed discharges;
- in response to concern about young carers transitioning to adult services, more detail on this would be included in a future report;
- the marketing and rewards for social care careers required more work, and carers required more recognition for the essential and excellent work they undertook, as well as full employment rights. Housing provision was a key challenge;
- assurance was sought and provided that policy was moving away from having fixed time limits on care visits, for example 15 minutes four times per day. However, the pressure on staff meant that they were often not able to stay for additional time with service users, and it was hoped communities would be able to assist with alleviating loneliness and isolation for people receiving care at home. Ideally care should be tailored to meet individual's needs;
- the value of handyperson schemes to help to keep people out of hospital and to facilitate their discharge and return to their home was emphasised. Investment in such schemes would save money as they could reduce the number of people having avoidable stays in acute hospitals. A handyperson scheme champion, ideally within NHS Highland, would be helpful. It was acknowledged that handyperson schemes and telecare were key early intervention measures and a summary of the funding model was provided;
- the third sector was keen to assist in providing support to unpaid carers and questions on how this could be achieved would be emailed to officers. The urban model of care delivery did not meet the needs of remote and rural Highlands;
- some Members considered that immigration restrictions were exacerbating workforce shortages, while others pointed out that Brexit and immigration were not the root causes of the workforce challenges, and salaries needed to improve to attract people into care careers;
- it was important to bust myths around social care, especially those circulating on social media that were inaccurate. This would be further explored offline;

- it was suggested that autism and other neuro-divergent issues were included in the implications section of future reports, as they could be relevant to the recruitment and retention of social care staff. The Chair pointed out that this was not within the remit of the Committee;
- in relation to SDS, consideration should be given to people struggling to provide care while working in full time employment;
- it was important to keep people in familiar communities where they were more likely to have a support system; and
- it was suggested that research into how other areas and countries were handling the Adult Social Care crisis would be helpful, as might the possibility of enticing retired people back to work with a flexible work pattern.

Thereafter, the Committee:

- NOTED** the contents of the report;
- AGREED** to hold a workshop for Members and bring a report to a future committee on Self Directed Support; and
- NOTED** that more detail on transitions would be provided in a future report.

## 6. **Justice Service Update and Community Payback Order Annual Review Cunntas mun t-Seirbheis Cheartais agus Ath-sgrùdadh Bliadhnaì Òrdugh Pàigheadh Air Ais Coimhearsnachd**

There had been circulated Report No HCW/08/24 by the Executive Chief Officer Health and Social Care.

During discussion, Members raised the following issues:

- the review was welcomed and demonstrated the huge amount of work that had been undertaken. It was requested that the report be shared to ensure all Members and the public were made aware;
- information was sought and provided on rehabilitation and intervention, on projects on hold due to lack of staff or funding, on the activities that might previously have been undertaken by the Council, on whether males and females worked together, and whether vacancies had resulted in a budget underspend;
- it was queried whether Smart Recovery and Decider Skills could be delivered remotely, for example in pharmacies or police stations, to remote and rural areas;
- the work was exemplary as it benefited not only the community but the people themselves;
- the percentage of male versus female beneficiaries was queried; and
- the type of work that could be undertaken was queried, with suggestions including tackling Japanese knotweed and cutting back greenery from roadsides, both of which would require training but would provide people with employability skills for the future.

Thereafter, the Committee **NOTED** the report and that the positive outcomes of the work of the payback group be circulated to Members and communicated to the public.

**7. Multi-Agency Public Protection Arrangements Annual Report 2022-23  
Aithisg Bhliadhnail Ullachaidhean Dìon Poblach Ioma-Bhuidhneach 2022-23**

There had been circulated Report No HCW/09/24 by the Executive Chief Officer Health and Social Care.

The Committee **NOTED** the contents of the report.

**8. Health and Social Care Budget Assurance and Performance Reporting for Q4 2023/24 – 1 January 2024 to 31 March 2024  
Barantas Buidseit agus Aithris Coileanaidh Slàinte agus Cùraim Shòisealta airson R4 2023/24 – 1 Faoilleach 2024 gu 31 Màrt 2024**

There had been circulated Report No HCW/10/24 by the Executive Chief Officer Health and Social Care.

During discussion, Dr Birt sought additional information that was not included in the performance reporting, such as the specific health problems facing children in Highland, and the Head of Integration Adult Social Care offered to discuss this further outwith the meeting. In response to a question, it was explained that the Solihull approach was an evidence-based parenting programme.

The Committee **NOTED**:

- i. that the Q4 outturn position would be reported to Members at the next meeting on 29 August 2024;
- ii. that savings for 2024/27 were being developed and would be delivered under the People Centred Solutions Portfolio as part of the Council's new Delivery Plan programme; and
- iii. the Service's performance, improvement and risk information.

**9. Children's Service Joint Inspection Improvement Update  
Cunntas mu Leasachadh Co-sgrùdadh Seirbheis na Cloinne**

There had been circulated Report No HCW/11/24 by the Executive Chief Officer Health and Social Care.

- the successful multi-agency support to bringing teams together was welcomed and information was sought on plans for a repeat event, noting that some education staff struggled to take time away from work to attend events. The balance between the need for face to face versus online meetings was highlighted, with advantages to both;
- the refresh of the Getting it Right For Every Child approach was welcomed, as were the improvements, although it was noted there was much work still to be undertaken;
- Child Protection training should be rolled out to anyone who came into contact with children or vulnerable people, and Members were urged to complete the appropriate model on Traineasy, or attend any of the training awareness sessions listed on the Child Protection website;
- more detail on transition issues for children with disabilities was sought;

- the change in language use was welcomed, as was the involvement of young people in that change process. Information on the language guide would be circulated to Members;
- Members sought and received confirmation they could attend a Bairn's Hoose - a transformational, whole-system approach to delivering child protection, justice, and health support and services to child victims and witnesses of abuse and harm - in Inverness or Wick; and
- the level of child exploitation in the Highlands was concerning, and information was sought and provided on how this was being tackled.

Thereafter, the Committee:

- NOTED** the progress to date;
- NOTED** and scrutinise the inspection improvements and developments noted in the report; and
- AGREED** to continue to support the work of Child Protection in Highland.

#### **10. Registered Services Inspection and Improvement Update Cunntas mu Sgrùdadh agus Leasachadh nan Seirbheisean Clàraichte**

There had been circulated Report No HCW/12/24 by the Executive Chief Officer Health and Social Care.

Members welcomed the work and improvements, and the Committee:

- NOTED** the contents of the report;
- NOTED** and comment/scrutinise improvements across services, including those areas where improvement needed to accelerate to enable sustained progress across all areas of service delivery; and
- AGREED** an annual Registered Services report came back to committee covering 2024/25 inspection outcomes.

#### **11. Champions Updates Cunntasan nan Curaidhean**

The following updates were provided:

##### **Trauma – Cllr Liz Kraft**

- the embedding of trauma in committee reports was welcomed;
- on 20 March 2024 there had been an event for the Network of Trauma Champions and Leads, which had included how to embed a trauma-informed approach. Quarterly workshops were planned to bring champions and leads together, to ease access and avoid duplication; and
- in Highland, plans for a Trauma Summit were being progressed, with an aim for August or September 2024. This event would support Highland achieve its aspiration to become a Trauma Informed council. Agreement had been reached that the Trauma Lead Officer role would progress and would be hosted by NHS, but it would be a partnership post. Various training events had taken place for staff across the Highlands, including Newly Qualified Social Workers, and there was upcoming training Level 3 training for Criminal Justice.

### **Older Adults – Cllr Bill Boyd**

The Scottish Older People's Assembly, which focused on the needs and aspirations so older people was introduced. The eight domains of the WHO Age-friendly Communities Framework were summarised and would be circulated to the Committee. Examples of projects under each domain were provided.

### **Children – Cllr Pauline Munro**

This was postponed to a future meeting.

The Committee **NOTED** the updates.

## **12. Minutes Geàrr-chunntas**

The following Minutes had been circulated and were **NOTED**:-

- i. Highland Child Protection Committee held on 23 November 2023;
- ii. Highland Council / NHS Highland Joint Monitoring Committee held on 15 December 2023; and
- iii. Highland Violence Against Women Partnership Group held on 8 November 2023.

The meeting ended at 3.10pm.