

Agenda Item	6
Report No	HCW-21-24

The Highland Council

Committee: Health, Social Care and Wellbeing

Date: 13 November 2024

Report Title: Health and Social Care - Revenue Monitoring Budget and Performance Report – Quarter 2 2024-2025

Report By: Assistant Chief Executive - People

1. Purpose/Executive Summary

- 1.1 This report provides Members with a revenue monitoring and forecast position in relation to Quarter 2 for 2024/25. Members will recall that there was no reporting in terms of Quarter 1 as the result of the adoption of the new financial system. As such this monitoring report represents the first input for this financial year. **Appendix 1** sets out the details in relation to the Monitoring for Quarter 2. This report also reflects the Quarter 2 budget monitoring and forecast position and is the first reporting to Strategic Committees using the new Corporate Financial System implemented in April. Members will note from **Appendix 2** an example of the style of blended graphical/tabular data available from the new system to budget holders, with further development work over the course of this year to realise further benefits from the new system. This appendix is provided as a work-in-progress illustration given aspects of the reporting dashboards are still being developed.
- 1.2 Members will recall that budget savings for 2023/24 were not achieved in full. As a result, the current forecasts take into account the overall position in terms of unallocated savings from 2023/24 in the sum of £1.9m, together with savings in relation to 2024/25. Those savings amount to a further £1.4m in year. To date, savings of £350 000 can be marked as achieved. Accordingly, Members should note in terms of the current position that an overspend is forecast. That overspend amounts to £2.2m against an annual budget of £188.679m. The position is concerning and work is underway to address this and is expanded upon in the main body of the report.
- 1.3 This report also provides performance information on:
- Corporate Indicators
 - Contribution to the Performance Plan (previously known as the Corporate Plan)
 - Service Plan progress
 - Service updates outwith the Corporate Indicators or Service Plan.

The content and structure is intended to:

- Assist Member scrutiny and performance management
- Inform decision making to aid continuous improvement

- Provide transparency and accessibility.

1.4 For the purpose of this report, details have been provided from the PRMS dashboard showing the latest updates on the HSC Service Plan for 2023/24 where actions have continued into 2024/25. Information is also included in relation to those indicators which are relevant for Adult Care Services. The Committee will be aware of services delivered by NHS Highland that form part of separate assurance reporting.

2. Recommendations

2.1 Members are asked to:

- Consider** and **note** the forecast revenue position as at Q2 of the 2024/25 financial year.
- Note** the progress update provided in relation to budget savings delivery.
- Scrutinise** and **note** the Service's performance and risk information.

3. Implications

3.1 **Resource** - There are no specific recommendations at this time with particular implications to highlight. As noted below in the risk section, there remains ongoing uncertainty and challenge in financial forecasting current. There may also be resource implications in terms of the continuing delivery of adult social care and details in relation to that will be provided. The Committee will be aware too that there are resource requirements as a result of the Delivery Plan which is being implemented and those will be commented upon where appropriate in terms of that reporting process. The forecast overspend is of concern and work is ongoing to address this.

3.2 **Legal** - No particular implications to highlight. This report contributes to the Council's statutory duties to report performance and secure best value in terms of: Section 1(1)(a) of the Local Government Act 1992, and Section 1 of the Local Government in Scotland Act 2003, respectively.

3.3 **Risk** - There remains the risk of changes in circumstance that may have an adverse variance on financial forecasts.

The risk in relation to the adult care service delivered by NHS Highland is ongoing and NHS Highland is currently forecasting an overspend, the terms of which are regularly discussed at the Joint Monitoring Committee.

The Committee will be aware too that a savings target of £12m was set against the delivery of Adult Social Care over three years from 2024/25. There is a risk that savings allocated against year one may not be fully delivered in-year, therefore a review will be taken to consider the profiling of the £12m savings which will be reported back to a future committee. There remains a risk in relation to certain elements of care delivery as referenced within the Council's Corporate Risk Register and that risk remains relevant. The Partnership has also developed its own risk register which has been shared at this Committee and is available online as part of the papers to the JMC.

The risk of an overspend in terms of children's services also requires to be highlighted. This Committee are sighted on the number of vacancies across the Family Teams and whilst these vacancies can be used to address that overspend on a short term basis the Committee are aware that such a risk has an impact on ongoing safe service provision. That risk is reflected in the Council's Corporate Risk Register.

3.4 **Health and Safety (risks arising from changes to plant, equipment, process, or people)** - There are no immediate health and safety implications arising from this report.

3.5 **Gaelic** – No particular implications to highlight.

4. Impacts

4.1 In Highland, all policies, strategies or service changes are subject to an integrated screening for impact for Equalities, Poverty and Human Rights, Children's Rights and Wellbeing, Climate Change, Islands and Mainland Rural Communities, and Data Protection. Where identified as required, a full impact assessment will be undertaken.

4.2 Considering impacts is a core part of the decision-making process and needs to inform the decision-making process. When taking any decision, Members must give due regard to the findings of any assessment.

4.3 This is a monitoring report and therefore an impact assessment is not required.

5. Quarter 2 Monitoring Position 2024/25

5.1 **Appendix 1** sets out the Q2 monitoring position for the current financial year. An overspend is forecast of £2.268m against a budget for the year of £188.679m. This is contributed to by the need to deliver savings in 24/25 of £1.408m, together with unallocated savings from 23/24 of £1.9m. As such the service is required to deliver savings in year of £3.308m. At the time of writing this report savings of £350 000 have been marked as achieved and more are anticipated which will reduce the current forecasted overspend

Officers have not yet been able to consider current financial information in sufficient detail in order to allocate savings which have been identified for 24/25 against the appropriate budget lines. The figures are being considered in relation, in particular, to the Families First initiative and the associated Home to Highland programme. Savings of £600 000 are required in terms of that programme and at present those are showing as unallocated. The Service is, however, confident that savings at this level can be delivered. Further work will be required to achieve balance overall and that work is ongoing.

The Committee is aware that historically the Service has had reliance on vacancies to balance the budget and it is likely that this will be also be the case this year. It must however be noted that whilst they contribute to the delivery of a balanced budget, the vacancies do not represent a saving. Accordingly there is work to be completed to seek to complete the realignment of budgets for Looked After Children to show the work that the service has done in terms of the Families First approach.

It should be noted that at the time of writing there is no final information from NHS Highland in terms of the budget which is passported over for the delivery of the Child Health Service and as such it is expected that once confirmed, it will have a positive impact on the figures before the Committee given that the monitoring statement as currently drafted is based on the income for 23/24.

Savings to be delivered by NHS Highland in relation to the delivery of adult social care are not part of this narrative and are referenced in para 5.3 below.

- 5.2 Members will recall from previous reports, the positive trends being shown in Looked After Children, with the relevant forecast showing that the number of children in out of authority residential provision is consistently at the lowest level it had been at for some years. Home to Highland, which forms part of the broader Families First initiative, continues and produced savings last year of £1m in terms of the looked after children elements of the budget. Those are lines where historically the service has shown significant overspends. That work will require to continue going into 24/25 in order to achieve the required saving (£600 000) and it is hoped that improved performance may also allow the legacy savings to be addressed. It must however be noted that there do remain significant challenges in terms of the Looked After Children spend and associated challenges in predicting future spend.
- 5.3 Members will be aware of the significant challenges which exist in terms of the delivery of those adult care services by NHS Highland. At the present time delayed hospital discharges and the availability of care have been a significant focus for the Scottish Government as well as the Health & Social Care Partnership. The delivery of adult social care and the associated funding is discussed at the Joint Monitoring Committee, and there remain regular and ongoing discussions on financial matters between Senior Officials within both organisations. Due to current significant pressures within adult social care, close partnership working is necessary to seek to deal with potential budget pressures.

Members will recall that the Council has adjusted the funding provided to NHSH by the £7m saving target for 24/25, and officers from both organisations are working jointly regarding change and transformation and saving measures in terms of both this target and the wider target which extends over 3 years. Members will also be aware that sitting alongside the savings target is the allocation of reserves of up to £20m over the next 3 years to support changes in the current care model, consistent with the Partnership's Strategic Plan and progressed through the operational Delivery Plan. This investment, and the concomitant improvements it should help realise, will lead to reduced costs and take the pressure of the current bed based care model.

At the present time NHS Highland are reporting savings of £1.55m against this target with further savings to be achieved by cost reduction.

6. Service Performance – Corporate Indicators

- 6.1 Service performance in relation to Absence, Complaints, FOIs, and Invoice Payments are set out in the following sub-sections.

6.2 Service Attendance Management

Staff absence is a nationally benchmarked indicator. Effective absence management supports staff, maintains productivity, and contributes to the Council's benchmarked performance. In Q1 2024/25, the Service lost an average of 3.41 days per employee compared to an average of 3.24 for the Council as a whole.

Health and Social Care

Average number working days per employee lost through sickness absence

Average Days Lost	Q3 22/23	Q4 22/23	Q1 23/24	Q2 23/24	Q3 23/24	Q4 23/24	Q1 24/25	Q2 24/25
Health and Social Care	2.27	2.87	2.82	2.56	2.87	3.24	3.41	
Highland Council	1.89	2.88	2.48	2.08	3.35	3.48	3.24	

Please note that Qtr. 2 data was not yet available at the time of writing this report.

6.3 Service Complaints Response Times

Monitoring complaints provides important feedback which can facilitate decision making and service design. Services are responsible for responding to complaints which are issued on their behalf by the Customer and Resolution Improvement Team ('CRIT').

Performance for complaints during Q1 against a corporate target of 80% was as follows:

Complaints - Health and Social Care

Number of closed complaints and the % compliant with the legislative timescale

Frontline Resolution within 5 days

	Q3 22/23		Q4 22/23		Q1 23/24		Q2 23/24		Q3 23/24		Q4 23/24		Q1 24/25		Q2 24/25	
Health and Social Care	2	100 %	3	67 %	2	100 %	3	100 %	3	67 %	7	71 %	2	50 %		
Highland Council	137	93 %	101	90 %	159	92 %	132	78 %	150	80 %	189	76 %	223	84 %		

Investigation Resolution within 20 days

	Q3 22/23		Q4 22/23		Q1 23/24		Q2 23/24		Q3 23/24		Q4 23/24		Q1 24/25		Q2 24/25	
Health and Social Care	9	33 %	8	13 %	6	67 %	9	44 %	12	17 %	6	0 %	4	25 %		
Highland Council	49	47 %	63	41 %	97	63 %	85	49 %	67	48 %	98	46 %	87	46 %		

Escalated Resolution within 20 days

	Q3 22/23		Q4 22/23		Q1 23/24		Q2 23/24		Q3 23/24		Q4 23/24		Q1 24/25		Q2 24/25	
Health and Social Care	1	0 %	1	0 %	3	0 %	3	33 %	1	100 %	0		1	100 %		
Highland Council	22	36 %	15	33 %	32	50 %	32	41 %	28	57 %	34	35 %	47	32 %		

It should be noted that many Social Work complaints are by their very nature complex, and the time needed to thoroughly investigate and respond to these complaints in an appropriate manner is often significantly longer than 20 days. In many instances, an extension of time is agreed in advance with the complainant who is entitled to receive a fully investigated report rather than one which is compiled to meet the 20 day timescale. In cases where this happens, the agreed extension to time **is not** taken into account in the figures shown above. It should also be noted that the total number of formal complaints is very small and so any failure to meet the deadlines has a disproportionate impact on the percentage figure.

Please note that Qtr. 2 was not yet available at the time of writing this report.

6.4 Service Freedom of Information ('FOI') Response Times

FOI requests are co-ordinated by CRIT in collaboration with the Service teams which may hold information relevant to the request.

The performance for FOI response times during Q1 against a corporate target of 90% was as follows:

Freedom of Information Requests - Health and Social Care																
% of FOIs closed compliant with the legislative timescale																
% FOIs Compliant - Health and Social Care	Q3 22/23		Q4 22/23		Q1 23/24		Q2 23/24		Q3 23/24		Q4 23/24		Q1 24/25		Q2 24/25	
		34	76 %	40	83 %	25	92 %	25	80 %	24	92 %	35	74 %	40	90 %	
% FOIs Compliant - Highland Council	Q3 22/23		Q4 22/23		Q1 23/24		Q2 23/24		Q3 23/24		Q4 23/24		Q1 24/25		Q2 24/25	
	478	81 %	536	75 %	399	84 %	333	88 %	338	89 %	548	77 %	511	81 %		

Tables display the number of FOIs closed within the quarter and % of those that were compliant with the legislative timescale (20 working days) for the service and the Highland Council overall. The Scottish Information Commissioner requires the Council to achieve a minimum compliance rate of 90%.

Please note that Q2 was not yet available at the time of writing this report.

6.5 Service Invoice Payment Times

Payment of invoices within 30 days of receipt is a Council Statutory Performance Indicator. The Council also monitors the number of invoices paid within 10 days of receipt.

The performance for invoice payment times within 30 and 10 days during Q1 against a target of 95% and 77%, respectively, was as follows:

Health and Social Care - Invoice Payments

Invoice Payment within 30 days	Q3 22/23	Q4 22/23	Q1 23/24	Q2 23/24	Q3 23/24	Q4 23/24	Q1 24/25	Q2 24/25
Health and Social Care	97.5 %	96.3 %	98.6 %	97.9 %	98.5 %	97.5 %	96.4 %	
Highland Council	95.1 %	94.9 %	95.1 %	96.7 %	95.6 %	93.6 %	87.7 %	
Invoice Payment less than 10 days	Q3 22/23	Q4 22/23	Q1 23/24	Q2 23/24	Q3 23/24	Q4 23/24	Q1 24/25	Q2 24/25
Health and Social Care	85.8 %	83.2 %	93.5 %	90.0 %	93.0 %	89.0 %	86.2 %	
Highland Council	70.4 %	71.6 %	72.8 %	80.9 %	75.3 %	69.7 %	57.0 %	

Please note that Q2 was not yet available at the time of writing this report.

7. **Service Contribution to the Performance Plan (Corporate Plan)**

7.1 The full Performance Plan, "Our Future Highland", can be viewed on the Highland Council website. It sets out how the Council will achieve the Council programme for

2022-27 and is reviewed annually. The Service's contribution to the Performance Plan is set out below.

Health and Social Care - PIs in Corporate Plan

PIs/Actions in the Corporate Plan	Period	Data	Period	Data	Period	Data
% of Children and Young People in formal kinship care CP1.08	FY 21/22	19.1 %	FY 22/23	18.4 %	FY 23/24	19.2 %
% of Children and Young People in care in the community CP1.08 CHN09	AY 21/22	83.83 %	AY 22/23	87.50 %	AY 23/24	
Establish a pilot funded by Whole Family Wellbeing Fund in Lochaber CP1.08	Q4 23/24	Completed	Q1 24/25		Q2 24/25	
No. of H&SC staff trained in Solihull Approach - begins 2023/24 CP1.08	FY 21/22		FY 22/23		FY 23/24	25
The average number of children and young people accommodated outwith Highland - Annual CP1.08	FY 21/22	24	FY 22/23	20	FY 23/24	13
The number of foster carer approvals - annual CP1.08	FY 21/22	13	FY 22/23	8	FY 23/24	10
Establish 4-yr pilot project re Non-Fatal Overdoses in Inverness CP1.09	Q4 23/24	Some Slippage	Q1 24/25	Completed	Q2 24/25	
Direct payments spend on 18+ adults CP2.05 SW02	FY 21/22	7.46 %	FY 22/23	7.25 %	FY 23/24	
% of people aged 65+ with long-term care needs receiving personal care at home CP2.05 SW03a	FY 21/22	55.76 %	FY 22/23	52.92 %	FY 23/24	
HC and NHS develop strategic proposal to reduce no. residents in Residential Care Homes CP3.05 COMPLETED	Q4 23/24		Q1 24/25		Q2 24/25	
ERDs being completed - HSC CP5.01	Q4 23/24	Some Slippage	Q1 24/25	On Target	Q2 24/25	On Target

Red RAG Comment The first round of training of the trainers was completed and the training team was starting to develop by June 2023. The training programme planning, preparation and practice and administrative support were in place/completed by October 2023. Training courses started after this time with two courses run between October 2023 and the end of March 2024.

Comment on Kinship Care - The lack of increase in overall figures underlies the service's plans to develop a specific Kinship Team to find family members, assess potential carers and offer support thereafter. Proposal have been submitted in respect of this and agreed but funding still needs to be secured. Whilst the number of children looked after in kinship has not risen in line with the target, there has been an increase of children living in kinship arrangements under a residence order. In June 2024 there were 135 children across 100 households that had residence orders, an increase of 12 from the previous year. These children are cared for by friends & family, but they are not officially classed as looked after children by the Scottish Government in data returns.

Where data for 2023/24 has not been provided this is because it will not be available until later in the year once the information has been processed and verified by the Improvement Service.

8. Service Plan Progress

8.1 In terms of the Service Plan for the Health and Social Care Service there are several actions and indicators which are considered regularly by officers to monitor service performance. Members will note that these indicators relate to the delivery of children's services (both social work services and the commissioned Child Health Service) as well as the Justice Service and the Mental Health Officer Service which sit within the Highland Council. Further indicators in relation to the service's workforce development and quality assurance are also included. This detail which is recorded on the Council's Performance and Risk Management System (PRMS) is included as **Appendix 3** to this Report.

- 8.2 Adult Care Services are delivered by NHS Highland and there are 3 specific SPIs which are formally reported upon. Details in relation to those are included at **Appendix 3**.
- 8.3 As the main focus of work this year has been establishing the programmes and projects within the Council's new Delivery Plan and the development of meaningful measures of success and milestones, there is no updated Service Plan for 2024/25. This report therefore contains progress on actions within the 2023/24 Service Plan which are on-going.

9. Service Risks Mitigation

- 9.1 The Service maintains a Service Risk Register. Following a review of existing Service Risks to bring these into line with the Council's new Risk Management Strategy and procedure, these will be uploaded onto PRMS for monitoring and scrutiny once work on the Delivery Plan is completed. The list of Service Risks is outlined in **Appendix 4**.

Designation: Assistant Chief Executive - People

Date: 16 October 2024

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Background Papers:

Appendices: Appendix 1 – Quarter 2 Monitoring statement
Appendix 2 - Extract from CIA system
Appendix 3 – Service Plan and Adult Social Care SPIs
Appendix 4 – Service Risks

HEALTH, WELLBEING AND SOCIAL CARE MONITORING STATEMENT 2024-25 APPENDIX 1A

03/10/2024	£'000 Actual YTD	£'000 Annual Budget	£'000 Year End Estimate	£'000 Year End Variance
BY ACTIVITY				
Service Management and Support				
Management Team	465	961	933	-28
Business Support	689	1,554	1,418	-136
COVID-19 Response	-99	0	1	1
Adult Services				
Delegated Adult Social Care	47,328	141,522	141,522	0
Mental Health Teams	709	1,700	1,596	-104
Criminal Justice Service	-274	62	62	0
Other Services for Vulnerable Adults	777	1,427	1,383	-45
Children's Services				
Looked After Children	12,922	27,251	28,653	1,402
Family Teams	9,567	19,659	17,995	-1,664
Other Services for Children	4,853	6,105	8,947	2,842
Delegated Child Health	0	-11,562	-11,562	0
Grand Total Health, Wellbeing and Social Care	76,938	188,679	190,947	2,268

BY SUBJECTIVE				
Staff Costs	20,882	43,295	42,774	-522
Other Expenditure	60,119	164,990	167,780	2,789
Gross Expenditure	81,001	208,286	210,553	2,268
Grant Income	-4,098	-19,588	-19,588	0
Other Income	35	-18	-18	0
Total Income	-4,063	-19,607	-19,607	0
NET TOTAL	76,938	188,679	190,947	2,268

HEALTH, WELLBEING AND SOCIAL CARE MONITORING STATEMENT 2024-25

Appendix 1B

	STAFF COSTS				OTHER COSTS				GRANT INCOME				OTHER INCOME				NET TOTAL			
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	
	Annual Budget	Actual YTD	Year End Estimate	Year End Variance	Annual Budget	Actual YTD	Year End Estimate	Year End Variance	Annual Budget	Actual YTD	Year End Estimate	Year End Variance	Annual Budget	Actual YTD	Year End Estimate	Year End Variance	Annual Budget	Actual YTD	Year End Estimate	Year End Variance
03/10/2024																				
BY ACTIVITY																				
Service Management and Support																				
Management Team	958	460	928	-30	3	5	5	2	0	0	0	0	0	0	0	0	961	465	933	-28
Business Support	1,522	686	1,416	-107	31	2	2	-29	0	0	0	0	0	1	0	0	1,554	689	1,418	-136
COVID-19 Response	0	0	0	0	0	1	1	1	0	-100	0	0	0	0	0	0	0	-99	1	1
Adult Services																				
Delegated Adult Social Care	0	13	0	0	141,522	47,316	141,522	0	0	0	0	0	0	0	0	0	141,522	47,328	141,522	0
Mental Health Teams	1,638	760	1,550	-88	62	23	46	-16	0	-73	0	0	0	0	0	0	1,700	709	1,596	-104
Criminal Justice Service	4,366	1,808	4,366	0	1,086	181	1,086	0	-5,390	-2,263	-5,390	0	0	0	0	0	62	-274	62	0
Other Services for Vulnerable Adults	649	298	593	-56	789	479	800	11	-11	-1	-11	0	0	0	0	0	1,427	777	1,383	-45
Looked After Children																				
Fostering & Adoption	1,131	512	1,069	-62	6,447	3,083	6,190	-257	0	0	0	0	0	21	0	0	7,578	3,615	7,259	-319
Residential, In house	2,211	1,114	2,360	149	1,181	562	1,225	44	-1,374	-622	-1,374	0	0	1	0	0	2,018	1,055	2,211	193
Respite, In house	1,791	851	1,721	-71	129	18	130	1	0	0	0	0	0	0	0	0	1,920	869	1,851	-69
Independent and 3rd Sector placement	0	0	0	0	7,893	3,559	9,622	1,730	0	0	0	0	0	0	0	0	7,893	3,559	9,622	1,730
Through care & aftercare	198	79	181	-17	1,562	705	1,408	-154	0	0	0	0	0	2	0	0	1,760	786	1,589	-171
Home to Highland	4,696	2,351	4,414	-282	1,092	588	1,562	470	-401	-160	-401	0	0	0	0	0	5,387	2,779	5,575	188
LAC Management and Support	688	253	538	-150	7	5	6	0	0	0	0	0	0	0	0	0	695	258	545	-150
Family Teams																				
Family Teams - North	2,881	1,258	2,518	-363	294	272	543	250	0	-1	0	0	0	1	0	0	3,175	1,530	3,061	-113
Family Teams - Mid	3,270	1,366	2,956	-314	392	343	686	294	0	-12	0	0	0	6	0	0	3,662	1,703	3,642	-20
Family Teams - West	2,975	1,240	2,487	-488	318	204	408	90	0	0	0	0	0	1	0	0	3,293	1,444	2,894	-399
Family Teams - South	7,565	3,221	6,637	-928	849	851	935	86	-15	-1	-15	0	0	3	0	0	8,399	4,075	7,557	-842
Self Directed Support (Direct Payments)	75	38	77	1	1,055	777	764	-291	0	0	0	0	0	0	0	0	1,131	816	841	-290
Other Services for Children																				
Child Protection	877	363	749	-127	41	174	27	-14	-124	-291	-124	0	0	0	0	0	794	247	652	-142
Health and Health Improvement	1,390	584	1,544	154	161	61	157	-3	-710	-452	-710	0	0	0	0	0	840	193	991	151
Allied Health Professionals	3,712	1,756	3,540	-172	161	137	263	102	0	-119	0	0	-11	0	-11	0	3,862	1,774	3,792	-70
Primary Mental Health Workers	630	283	566	-64	10	4	9	-1	0	0	0	0	0	0	0	0	640	287	575	-65
Specialist Services	129	31	88	-41	24	183	426	402	0	0	0	0	0	0	0	0	153	214	515	362
Youth Action Services	1,302	480	969	-333	386	210	395	9	0	-8	0	0	0	0	0	0	1,687	682	1,364	-323
Other Services for Children	1,374	1,015	1,277	-97	-503	395	-442	61	0	0	0	0	-7	-1	-7	0	864	1,409	828	-36
Staff Training	228	60	228	0	0	2	2	2	0	6	0	0	0	0	0	0	228	67	229	2
Independent Funds	0	0	0	0	0	-20	0	0	0	0	0	0	0	0	0	0	0	-20	0	0
Unallocated Savings	-2,963	0	0	2,963	0	0	0	0	0	0	0	0	0	0	0	0	-2,963	0	0	2,963
Delegated Child Health																				
Delegated Child Health	0	0	0	0	0	0	0	0	-11,562	0	-11,562	0	0	0	0	0	-11,562	0	-11,562	0
Grand Total Health, Wellbeing and	43,295	20,882	42,774	-522	164,990	60,119	167,780	2,789	-19,588	-4,098	-19,588	0	-18	35	-18	0	188,679	76,938	190,947	2,268

Health & Social Care Service Plan 2023/24 – Actions and Measures

Health and Wellbeing Q2 24/25						
Actions PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/ Update Date
% referrals to Family Nurse Partnership programme	M5 24/25	84.1 %	M6 24/25	82.7 %	85.0 %	
Develop and deliver early health protection, prevention and promotion initiatives for Early Years [Health]	Q1 24/25	Completed	Q2 24/25			Completed Q1 24/25
Transform the role of school nurses with 80% of our workforce qualified to Advance Practitioner level	Q1 24/25	Completed	Q2 24/25			Completed Q1 24/25
Increase Health Behaviour Change Activity in line with Public Health Data	Q1 24/25		Q2 24/25			Completed Q4 23/24

Highland Health and Social Care Partnership Q1 24/25						
Actions PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/ Update Date
Direct payments spend on 18+ adults CP2.05 SW02	FY 22/23	7.25 %	FY 23/24			annual update December
% of people aged 65+ with long-term care needs receiving personal care at home CP2.05 SW03a	FY 22/23	52.92 %	FY 23/24			annual update December
HC and NHS develop strategic proposal to reduce no. residents in Residential Care Homes CP3.05	Q4 23/24		Q1 24/25			Plan approved Q3 23/24
Highland HSCP: supporting delivery of future Adult Social Care	Q4 23/24		Q1 24/25			Plan approved Q3 23/24

Integrated Children's Services Plan [ICSP] Q2 24/25						
Actions being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/ Update Date
Develop a performance matrix to evaluate the Whole Family Wellbeing Programme	Q1 24/25	Some Slippage	Q2 24/25	Some Slippage		Due to complete Q4 23/24
Develop early intervention and preventative services with 3rd sector	Q1 24/25	On Target	Q2 24/25	Completed		Due to complete Q4 23/24
Establish the Children's Rights and Participation Team	Q1 24/25	On Target	Q2 24/25	Completed		Due to complete Q4 23/24
Improvement measured against the ICS Planning Board's Performance Management Framework	Q1 24/25	On Target	Q2 24/25	On Target		Reported Annually
Introduce Family Group Conferencing - due to start Q3 22/23	Q1 24/25	On Target	Q2 24/25	Completed		Due to complete Q3 23/24
Provide leadership and support to the Whole Family Wellbeing Programme	Q1 24/25	On Target	Q2 24/25	Completed		Due to complete Q4 23/24
Shift the balance of care to promote family-based care	Q1 24/25	On Target	Q2 24/25	On Target		Due to complete Q4 27/28
Report on changing the language of care across Highland Council	Q1 24/25	Completed	Q2 24/25			Completed Q1 24/25
Establish a pilot funded by Whole Family Wellbeing Fund in Lochaber CP1.08	Q1 24/25		Q2 24/25			Completed Q4 23/24
Guidelines for changing the language of care	Q1 24/25		Q2 24/25			Completed Q4 23/24
Listen to the Voices of Families through the evaluation of annual family feedback	Q1 24/25		Q2 24/25			Completed Q4 23/24
Listen to the Voice of Families involved with Tier 3 Acute Medical Dietetic Services	Q1 24/25		Q2 24/25			Completed Q4 23/24

Integrated Children's Services Plan [ICSP] Q2 24/25						
PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/ Update Date
% of Children and Young People in care in the community CP1.08 CHN09	AY 22/23	87.50 %	AY 23/24			annual update January
No. of accommodated children and young people	M5 24/25	322	M6 24/25	331	301	
No. children needing to live away from the family home but supported in kinship care increases - Monthly	M5 24/25	19.6 %	M6 24/25	19.4 %	23.0 %	
Home to Highland: No. of accommodated children and young people - residential	M5 24/25	51	M6 24/25	52	58	
Home to Highland: No. Children in secure accommodation	M5 24/25	3	M6 24/25	4	3	
No. 'Promise Conversation Cafes' held each year - due to start reporting FY23/24	FY 22/23		FY 23/24	5	6	
% Spend on Out of Authority accommodation	FY 22/23	40 %	FY 23/24	28 %	30 %	changed from quarterly to annual reporting Oct24
The number of children and young people accommodated outwith Highland will decrease - Monthly	M5 24/25	17	M6 24/25	16	17	
The number of foster carer approvals - quarterly	Q1 24/25	0	Q2 24/25	0	3	

Protection Q2 24/25						
Actions PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/Update Date
% Adult Support Protection Referrals/Inquiries completed within 7 days	FY 22/23		FY 23/24			
Analysis of core themes from Highland Child Protection Dataset	Q1 24/25	On Target	Q2 24/25	On Target		Due to complete Q1 24/25
% of child protection re-registrations within 18 months CHN22	FY 22/23	3.75 %	FY 23/24			annual update January
Increase training opportunities offered - due to start Q4 22/23	Q1 24/25	On Target	Q2 24/25	On Target		Ongoing
No. assessments for Bail Supervision	Q1 24/25	175	Q2 24/25	175	1	
Uptake of specialist CP advice and guidance to health staff Qtr	Q1 24/25	440	Q2 24/25	337		
Establish 4-yr pilot project re Non-Fatal Overdoses in Inverness CP1.09	Q1 24/25	Completed	Q2 24/25			Completed Q1 24/25
Implement the Scottish Child Interview Model in Highland	Q1 24/25		Q2 24/25			Completed Q4 23/24

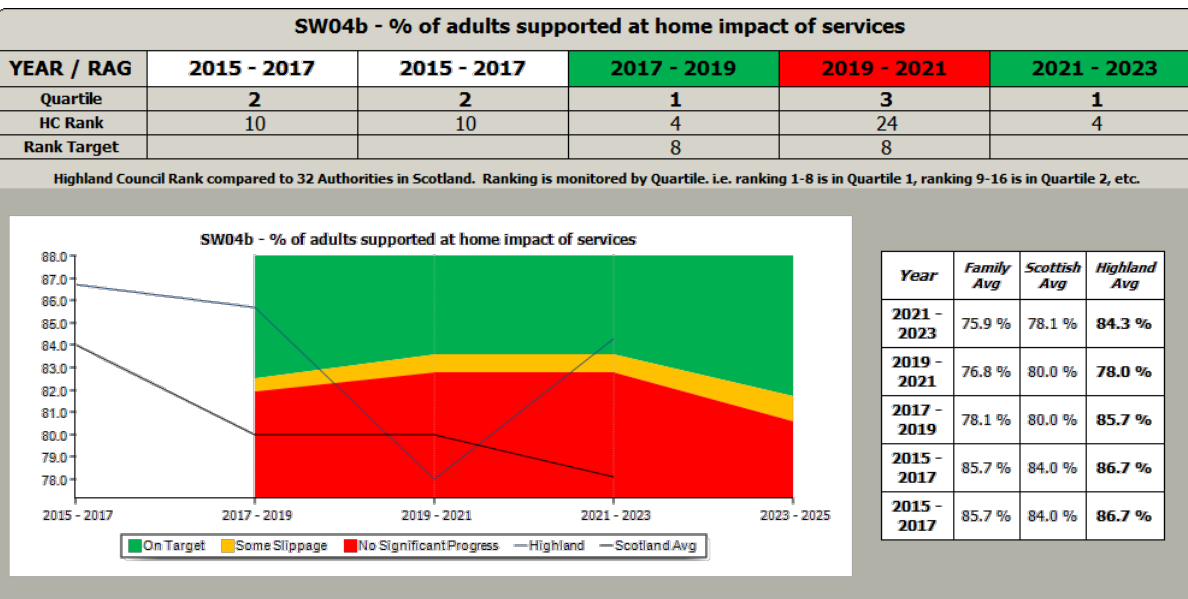
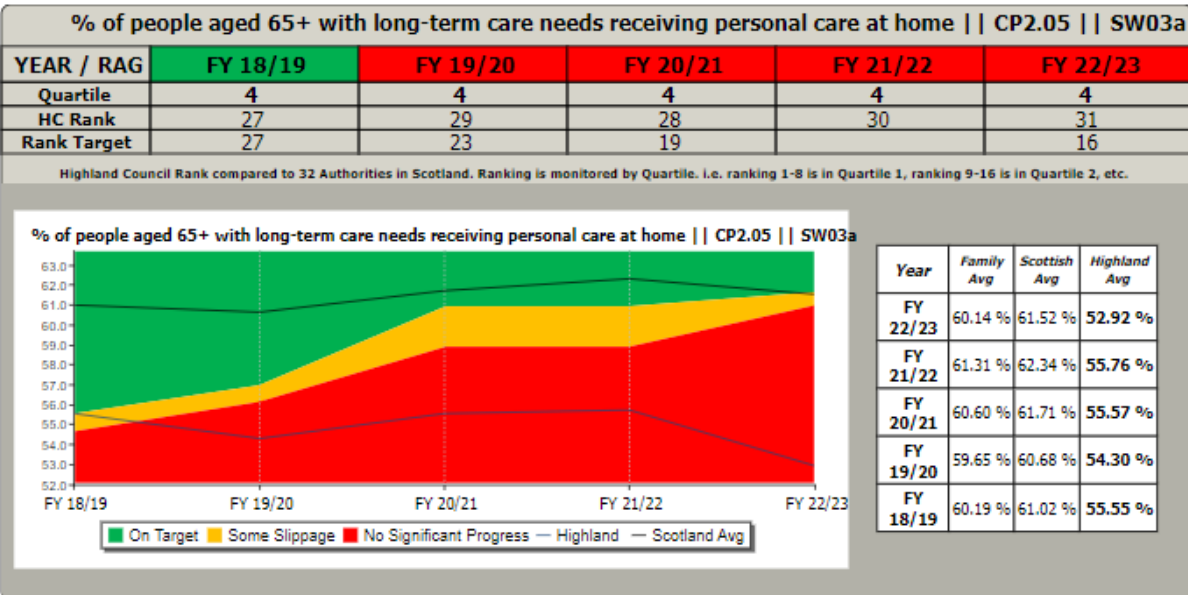
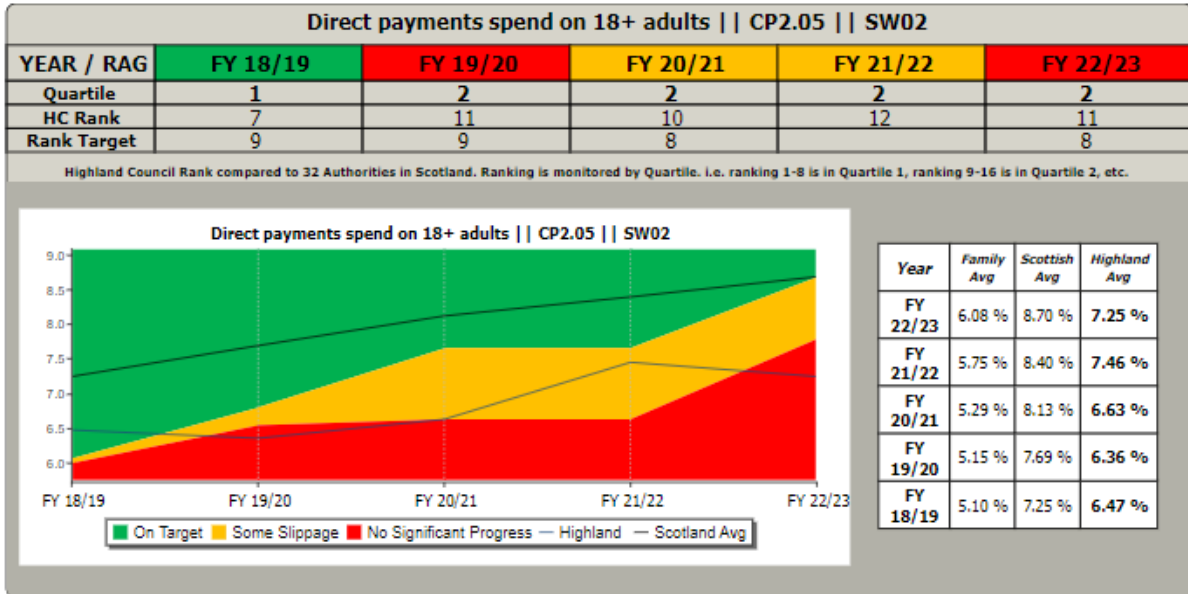
Quality Assurance Q2 24/25						
Actions PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/Update Date
Build business intelligence approach in HSC	Q1 24/25	Some Slippage	Q2 24/25	Completed		Due to complete Q2 24/25
Monitor the progress of the registered Service Improvement Plans and ensure the timelines are met	Q1 24/25	On Target	Q2 24/25	On Target		Ongoing
Utilise the PMF and business intelligence to support improvement - due to start Q3 22/23	Q1 24/25	On Target	Q2 24/25	On Target		Ongoing

Replace Social Work Case Management System Q2 24/25						
Actions PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/Update Date
Define the Target Operating Model [TOM] for SW case management system	Q1 24/25	On Target	Q2 24/25	On Target		Due to complete Q3 23/24
Establish the programme to deliver the TOM for SW case management system	Q1 24/25	On Target	Q2 24/25	On Target		Due to complete Q2 24/25
Replace the current Case Management System for Social Work	Q1 24/25	On Target	Q2 24/25	On Target		Due to complete Q4 24/25

Workforce Development Q2 24/25

Actions PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/ Update Date
No. of H&SC staff trained in Solihull Approach - begins 2023/24 CP1.08	FY 22/23		FY 23/24	25	40	
ERDs being completed - HSC CP5.01	Q1 24/25	On Target	Q2 24/25	On Target		
Ensure all new Criminal Justice staff are vetted to Level 2	Q1 24/25	No Significant Progress	Q2 24/25	No Significant Progress		Due to complete Q4 23/24
Incentivise staff to become mentors and practice assessors	Q1 24/25	On Target	Q2 24/25	Completed		Ongoing
Mental Health Officer Posts Total FTE	Q1 24/25	22.00	Q2 24/25	22.00	22.00	
The AWI Waiting List - month	M5 24/25	6	M6 24/25	16	0	
Develop the Grow Your Own Scheme to increase trainee opportunities	Q1 24/25	Completed	Q2 24/25			Completed Q1 24/25
Embed and grow the Social Work relief pool to cover all areas of Highland	Q1 24/25		Q2 24/25			Completed Q4 23/24
Create an implementation group for "Safe and Together"	Q1 24/25		Q2 24/25			Completed Q2 23/24

Adult Social Care SPIs



Appendix 4

Health and Social Care Service Risk Register

Ref.	Risk Title	Inherent Risk Score	Residual Risk Score	Response Type
HSCO1	NHS Integration Scheme	12	9	Treat
HSC02	HSC Staffing Levels	16	9	Treat
HSC03	Young People's Transitions	9	6	Treat
HSC04	Covid 19 Inquiry	9	9	Tolerate
HSC06	Replacement Case Management System	12	9	Treat
HSC07	LSCMI Assessments	6	6	Treat
HSC08	ViSOR	6	3	Treat
HSC09	Delivering Services to Nationally agreed standards	12	6	Treat
HSC11	Lack of availability of S22 Doctors leaving vulnerable adults at risk.	9	9	Treat
HSC12	Lack of connectivity to NHH Systems	12	6	Treat
HSC13	Failure to deliver the National Neurodiversity Specification	12	9	Treat

The following Risks have been reviewed and a decision taken to archive them...

HSC05 Historic Child Abuse Inquiry

HSC10 Lack of Out of Hours Care at Home Delivery

HSC14 Failure to deliver Justice Services to nationally agreed standards

Response Types

Treat – mitigating actions have been developed and are being delivered and regularly monitored.

Tolerate – the risk will be monitored but no specific mitigating actions have been developed.