

Highland Health and Social Care Partnership



Meeting: Health and Social Care Committee
Meeting date: 15th January 2025
Title: Joint Strategic Plan Implementation
Responsible Executive/Non-Executive: Pamela Stott, Chief Officer
Report Author: Rhiannon Boydell, Head of Integration, Strategy and Transformation, HHSCP.

1 Purpose

Please select one item in each section *and delete the others*.

This is presented to the Board for:

- Assurance

This report relates to a:

- 3 year Strategy – Joint Strategic Plan 2024 -2027

This report will align to the following NHSScotland quality ambition(s):

Safe, Effective and Person Centred

This report relates to the following NHS Highland Strategic Outcome(s)

| | | | |
|--------------|---------------|-----------------|-------------|
| Start Well | Thrive Well | Stay Well | Anchor Well |
| Grow Well | Listen Well | Nurture Well | Plan Well |
| Care Well | Live Well | Respond Well | Treat Well |
| Journey Well | Age Well | End Well | Value Well |
| Perform well | Progress well | All Well Themes | x |

2 Report summary

2.1 Situation

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.

This report provides an update on the progress of implementation of the Joint Strategic Plan 2024-2027 through District Planning Groups in the nine districts in Highland Health and Social Care Partnership and describes the areas of improvement and strategic work being taken forward through various partnership and NHS Highland governance structures.

2.2 Background

The Joint Strategic Plan aims to make a difference to the experience and delivery of Health and Social Care Services in the following ways:

| | |
|--|--|
| <p>Home – First and Last</p> <p>You will receive the care and support that you need to remain at home for as long as possible. You will be informed about the options available to you including intermediate care and supported housing options which make care accessible and sustainable. Informal and community supports will be prioritised before considering paid support. We will promote realistic expectations, choice and control using self directed support and maximising the use of technology.</p> | <p>Communities Working Together</p> <p>We will work with you, your family, informal support networks, and local organisations to help you get the support you need using the assets and resources within the community. We will focus on building local resilience and access to good quality support and services when you need them. We will work as partners to support change to reduce the inequalities in and across our communities.</p> |
| <p>Independence and living an ordinary life</p> <p>We will work with you to enable you to be as independent as possible and to help you reach your goals and desires. We will support communities to ensure they are accessible and open to all, creating opportunities for innovative and creative support options to grow and develop.</p> | <p>Health and Wellbeing</p> <p>We will ensure that support for your health and wellbeing is available in the right place at the right time. You will be supported to be as healthy and well as you can be. You will be signposted to any health and social care services/agencies that can meet your need by the first professional that you see.</p> |
| <p>Supporting Carers</p> <p>Unpaid carers will be supported to look after their own health and wellbeing. A range of options will be available including day care support, planned short breaks, respite and palliative care. Day Care will be enhanced and planned short break services will be available with a clear pathway for access. Respite and palliative care options will make more use of local resources. We will work with carers organisations to ensure they can also provide support to unpaid carers.</p> | <p>Residential and Nursing Care Homes</p> <p>It may be that your care needs in the future are best met in a care home setting. This specialist care will be suitable for individual needs and available in Highland. We will work with you to plan a move to a care home. Care homes that provide nursing care may not always be located in all areas.</p> |

It was designed to effect a transformation in integrated health and social care, away from institutional based care towards more community based care at home solutions, with a greater emphasis on family support, early access and self-directed care and capacity building within communities.

Following approval and publication of the Joint Strategic Plan in early 2024, District Planning Groups (DPGs) were established in April 2024 and had their initial meetings during April and May. The Strategic Planning Group seeks assurance from the District Planning Groups that progress is being made and will advise on issues raised by the District Planning Groups. District Planning Groups are the main engagement vehicle with

local communities and ensure that we work together and listen to people in communities to develop local implementation plans.

Elements of the implementation of the plan are being delivered within NHS Highland programmes, being overseen by the relevant programme boards.

Additionally, to ensure that there was effective support for the social care aspects of the plan, key aspects were included in the Highland Council’s Delivery Plan in May 2024, following the three year budget settlement agreed by Council in February 2024. As part of that, there is a programme of work ongoing with associated investment funding from the Council of £20m over 3 years targeted at supporting the implementation of the Joint Strategic Plan and the necessary associated transformational change. This programme of work is referred to below as the Transformation Programme.

2.3 Assessment

District Planning Groups

The District Planning groups have been supported by a standard Terms of Reference, Agenda, Action Plan and Action Note format. Meetings have been held for every District as per the following schedule:

| District | Date 1st Meeting | Date 2nd Meeting | Date 3rd Meeting |
|--------------------------------|------------------------------------|--|------------------------------------|
| Caithness | 08/04/2024 | 23/08/2024 | 06/11/2024 |
| Nairn | 16/04/2024 | 27/08/2024 | 05/11/2024 |
| Mid Ross | 16/04/2024 | 13/08/2024 | 08/11/2024 |
| Sutherland | 26/04/2024 | 10/12/2024 | |
| Lochaber | 29/04/2024 | 01/08/2024 | 04/11/2024 |
| Skye, Lochalsh, Wester Ross | 01/05/2024 | 12/09/2024 | 13/12/2024 |
| East Ross | 09/05/2024 | 30/07/2024 (People Thematic Group) | 05/11/2024 |
| Badenoch and Strathspey | 13/05/2024 | 28/08/2024 | 11/11/2024 |
| Inverness | 14/05/2024 | 22/08/2024 | 05/11/2024 |

Groups are now discussing the detail of their plans and how they fit with the wider health and social care environment.

Key priority areas emerging from the development of plans are diverse and include:

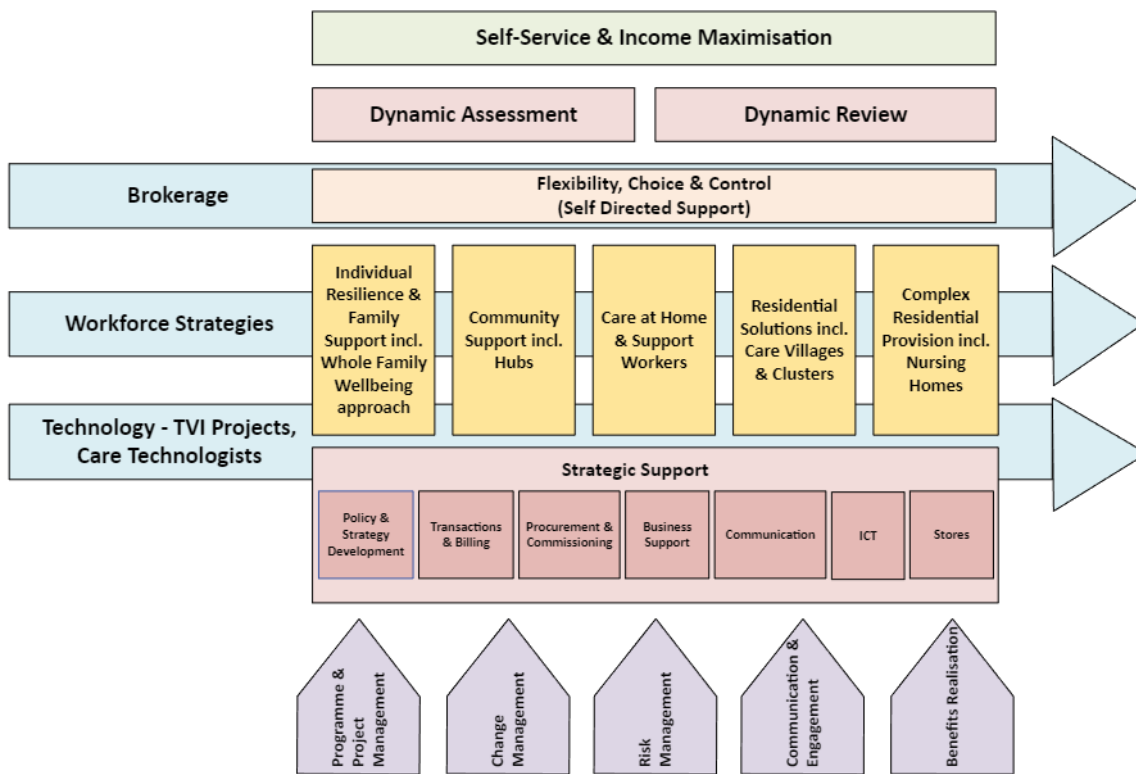
- Workforce challenges
- Housing adaptations

- Integrating care provision.
- Prevention-focused work streams
- Expanding membership
- Establishing the defined role of the group within community and strategic planning
- Care at Home and Care Home provision
- Mental Health and DARS demand and capacity
- Addressing Delayed Discharges
- Frailty Management
- Opportunities to work differently with the communities to share plans and work together across the age ranges from cradle to grave
- Addressing geographic barrier's, giving people access to their locality services
- Suicide prevention

Transformation Programme and Adult Social Care

The Transformation Programme is being managed via the council’s Person Centred Solutions Portfolio Board. Both the Chief Officer and the Director of Adult Social Care for NHS Highland sit on the Portfolio Board.

The following Target Operating Model (TOM) has been developed:-



Note: This Model applies to Transitions and Younger Adults as well as for Older Adults.

The five orange boxes in the TOM represent the key pillars of future care delivery, illustrating how services will be structured to support individuals to remain at home longer and reduce reliance on residential care. The intention is for these changes to be underpinned by relevant technology, community brokerage for SDS, and workforce strategies designed to ensure the sustainability of the model over time. The Strategic Support and triangles at the base of the model depict the essential infrastructure needed to facilitate this transformation and to ensure successful implementation of the new operating model.

The TOM is intended to outline the strategic vision, structure, processes, and technology needed to deliver high-quality, person-centred services; to show how care should be integrated across different settings — such as home care, residential services, and community-based support; to reflect and support the individual needs of service users; and be, as far as possible, equitable and affordable.

Work is being taken forward on the Transformation Programme by a dedicated project management team and in conjunction with members of the NHS Highland Adult Social Care Professional Leadership Team

The team’s focus is particularly on:-

- Care at Home and Support Workers
- Residential Solutions including care villages and clusters
- Complex residential provision including nursing homes

A business case has also been developed to support a model for care, building on relationships with the third sector to support increased use of SDS Option 1 and 2.

There is also ongoing work in relation to the “self-service and income maximisation” element of the model. This requires the partnership to consider how service users access a social care service and indeed if they require to do so. The intention is that the partnership adopt a “one front door type approach” such that the first contact should not necessarily be a request for an assessment. This element of the model will also include work with the Council’s Welfare Team to ensure that all approaches for service are considered in terms of benefits entitlement.

This work is supported by the following work being led by Adult Social Care Professional Leadership:

- A practice and service model which promotes worker autonomy and underpins professional standards and frameworks
- A Workforce Plan
- A Supporting Unpaid Carers plan

Collaborative work is ongoing with our independent partners in care delivery in both the Care Home and Care at Home sectors to coproduce the future shape of service provision in Highland to ensure the aims of care closer to home and maximising independence are met. Coproduced Care at Home improvement proposals are being implemented with the sector and a commissioning strategy is being developed to be informed by a Joint Strategic Needs Assessment, which is in current production.

Annual Service Planning

Integrated Health and Social Care Services are participating in NHS Highland Annual Service Planning. The process is in it’s early stages and will enable us to plan services to the future model outlined by the Joint Strategic Plan through modelling which includes workforce, finance and performance impacts.

The process will entail annual service reviews identifying key drivers, such as the Joint Strategic Plan, and will involve scenario planning and modelling.

Strategic Accountability Transformation Group (STAG)

Additional oversight and accountability will be given to additional strategic elements of the implementation of the plan including HSCP Strategic Transformation, Mental Health and Learning Difficulties Strategic Transformation and Primary Care Strategy. Full commissions for these are being developed for STAG agreement at the time of writing.

2.4 Proposed level of Assurance

This report proposes the following level of assurance:

| | | | |
|-------------|--------------------------|----------|-------------------------------------|
| Substantial | <input type="checkbox"/> | Moderate | <input checked="" type="checkbox"/> |
| Limited | <input type="checkbox"/> | None | <input type="checkbox"/> |

Comment on the level of assurance

The report provides moderate assurance that the Joint Strategic Plan is being implemented through the District Planning Groups. Transformation programmes are in early stages.

3 Impact Analysis

3.1 Quality/ Patient Care

The plan seeks to improve quality and the experience of care.

3.2 Workforce

The plan recognises that the workforce is key to delivering quality and sustainable person centred services. The plan seeks to develop the workforce and enable flexibility and adaptability.

3.3 Financial

There are no specific resource issues arising from this report. It is expected that the Joint Strategic Plan will be implemented within resource envelope and that any associated resource risks and issues are escalated to the HSCP and advised to the Strategic Planning Group. It is accepted that in general there are

significant resource issues in terms of the on-going and future affordability of adult social care and resource issues such as sustainability of the independent care home sector and the availability of care at home services which are underpinned by recruitment challenges across a number of workforce groups and professions, both in Highland and wider across Scotland and the UK.

3.4 Risk Assessment/Management

Highland Health and Social Care Partnership has agreed a partnership risk register to enable an overall understanding of the risks that require to be considered in terms of planning and service delivery and sustainability forward.

3.5 Data Protection

There are no data protection implications.

3.6 Equality and Diversity, including health inequalities

The Joint Strategic Plan is supported by an Equalities Impact Assessment.

3.7 Other impacts

None.

3.8 Communication, involvement, engagement and consultation

The Joint Strategic Plan was developed by a stakeholder group and included a public consultation.

3.9 Route to the Meeting

Various elements of this report have been shared in various forums in both NHS Highland and the Highland Council however the report has been prepared specifically for the Health and Social Care Committee

4 Recommendation

The report is presented to the Health and Social Care Committee for:

- **Assurance** that implementation of the Joint Strategic Plan is being progressed.
- **Discussion** regarding further detail required for future meetings prompted by this high level overview report of the implementation of the Joint Strategic Plan.

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