

**HIGHLAND COUNCIL/NHS HIGHLAND  
JOINT MONITORING COMMITTEE**

Minutes of the Meeting of the Highland Council/NHS Highland Joint Monitoring Committee held REMOTELY on Wednesday 22 October 2020 at 2.00 p.m.

**PRESENT:-**

**Highland Council**

Mrs Linda Munro (Co-Chair)  
Mrs Margaret Davidson  
Mrs Liz Denovan  
Mrs Fiona Malcolm (FM)  
Mrs Donna Manson (DM)  
Ms Karen Ralston

**NHS Highland**

Prof Boyd Robertson (Co-Chair)  
Dr Tim Allison  
Ms Ann Clark  
Ms Pamela Dudek  
Mr Dave Garden  
Ms Heidi May  
Mr David Park (DP)

**Staff Representatives**

Mr Adam Palmer (NHS Highland)

**Third Sector, Carer and Service User Representatives**

Mr Campbell Mair (Highland Home Carers Limited)  
Mr Ian McNamara (Highland Senior Citizen's Network)  
Ms Gillian Newman (Highland Children's Forum)  
Ms Mhairi Wylie (Highland Third Sector Interface)

**Also in attendance:-**

Mrs M Cockburn, Highland Council  
Ms M Smith, Highland Council

**Officers Present:-**

Ms S Amor, NHS Highland (SA)  
Mr S Steer, NHS Highland (SS)  
Mr I Kyle, Children's Planning Manager, Highland Council  
Mr A MacInnes, Administrative Assistant, Highland Council

**Prof Boyd Robertson in the Chair**

<b>Item</b>	<b>Subject/Decision</b>	<b>Action</b>
<b>1.</b>	<b>Apologies for Absence</b>	
	Apologies for absence were intimated on behalf of Mr R Bremner, Ms M Macrae and Ms K Patience.	

## 2. **Declarations of Interest**

Mrs L Munro declared a financial interest in relation to any items which might arise during discussion in regard to Self-Directed Support on the grounds that she was a specialist advisor for Self-Directed Support but, having applied the test outlined in Paragraphs 5.2 and 5.3 of the Councillors' Code of Conduct, concluded that her interest did not preclude her involvement in the meeting.

## 3. **HC/NHS Highland Joint Monitoring Committee Remit**

At the meeting of the Highland Council on 10 September 2020 the Council agreed that the Chair of the Health, Social Care and Wellbeing Committee would replace the Leader of the Council as Co-chair of the HC/NHS Highland Joint Monitoring Committee. This decision was supported by NHS Highland at their Board meeting on 29 September 2020.

The Committee **NOTED** the change and that the remit of the Joint Monitoring Committee has been updated accordingly.

## 4. **Minutes of Previous Meeting**

There had been circulated Minutes of Meeting of the Joint Monitoring Committee held on 22 January, 2020 the terms of which were **APPROVED** subject to the following amendment:-

- Item 3, Minutes of previous meeting – 1<sup>st</sup> bullet point be amended to read “The Minute be amended to denote that Prof B Robertson was in the Chair”.

Arising from the Minutes, the following points were raised:-

- i. Scottish Parliament Adult Social Care Inquiry Call for Views – as a result of the Covid-19 crises the engagement on this matter had not been possible. While some information had been submitted to the Scottish Government it had not been with the same level of consultation as planned. It was **AGREED** that the information submitted be re-circulated to the Committee. **DP**
- ii. International Links with representatives from Holland – due to the Covid-19 crises the visit of representatives from Holland planned in September had not taken place. There was an extensive offer to work with areas in Holland particularly in relation to their experiences with innovation in IT provision in mental health and wellbeing and support packages. This workstream would now continue with an update brought back to a further meeting. **DM**

## **5. Highland Partnership Commission Assurance Reporting**

### **a. Highland Partnership: Adult Services Commission**

There was circulated Report No. JMC/04/20 dated 5 October 2020 by the NHS Highland Director of Adult Social Care.

In discussion, the following main points were raised:-

- The impact of Covid-19 impacted on the various services provided and all services were feeling the pressure particularly in homecare. Tribute was given to all Partners who had been working with the NHS Highland during the very challenging period. Tributes were also extended to the operators of care homes and those in the care at home sector for the bravery and professionalism for continuing to deliver the service through the health crises and their performance was outstanding.
- Social care during the Covid-19 crises had received an enhanced public and political recognition and there was now an opportunity for this Committee to give collective input into the Independent Review of Adult Social Care in Scotland. It was suggested that the Chair of the Review, Mr Derek Feeley be invited to give a presentation on the review to this Committee.
- Appreciation was expressed to the Board and NHS Highland for how much they had listened to the need for future planning of Third Sector commissioning in the next financial year.
- It was requested that an update on mental health services be provided at a future meeting for discussion, particularly in the context of a recovery plan. A report would be submitted to the next NHS Highland Health and Social Care Committee which would outline some of the activity carried out on mental health services and this would be shared with the Committee.
- concern was expressed regarding the suicide rate in the current year and consideration needed to be given on how to respond to preventing suicides. It was explained that the suicide rate in Highland had been high for some time. From analysis undertaken, there were no clear individual causes for this, but there was a wide range of features which related to both mental health services, children services and wider society. An assurance was given that work was being undertaken on suicide prevention and what could be done to improve mental health in Highland.
- The Care Inspectorate report on Shoremill Care Home, Cromarty would suggest that it would be very vulnerable in the event of a Covid-19 outbreak. It was queried if contingency plans were in place in the event of an outbreak. In this respect, the contingencies for supporting care homes were detailed at the meeting. In particular, there was a need for the Partnership

to consider the potential sustainability issues around some of the care homes.

- It would be helpful to have service user input into the care home oversight team
- It was suggested that the positive partnership and community work in Highland during the health crises be captured and celebrated as it was something to be proud of. The more success stories that could be shared the better and would give the opportunity to give recognition to all the Groups that had supported our communities through the Covid period.
- There was also a need to give communities a level of support to allow them to continue with what they have been doing.

Thereafter, the Committee **NOTED** the report and **AGREED**:-

- |      |  |              |
|------|--|--------------|
| i.   | that the Committee would request that it be permitted to provide input to the Independent Review of Adult Social Care in Scotland;   | <b>DP</b>    |
| ii.  | that a report to be submitted to the next NHS Highland Health and Social Care Committee on mental health services would be shared with the Committee;  | <b>DP/SS</b> |
| iii. | to invite Mr Derek Feeley, Chair of the Review of Adult Social Care in Scotland to the next meeting of the Committee;  | <b>DP</b>    |
| iv.  | to invite representatives from all organisations represented on the Committee to a meeting to share their experiences of positive partnership and community work during the Covid-19 period and discuss ongoing support for communities. | <b>DM/DP</b> |

**b. Highland Partnership: Children and Young People's Services Commission**

There was circulated Report No. JMC/05/20 dated 14 October 2020 by the Highland Council Interim Executive Chief Officer Health & Social Care.

In discussion, the following main points were raised:-

- The development of an integrated children service plan was underway and this would be reported to the next meeting of the Committee;
- The Childhood immunisation rate across Highland was meeting the national target, but there were particular issues for care experience children and young people. There was a general vulnerability for this group of their general health and wellbeing. There was national data on the impact of Covid-19 on the uptake of child health surveillance and immunisation that would be analysed and commentary provided in the next report to Committee;

**SA**

- The newly established Infant, Children and Young People Clinical Governance Committee would consider the issues around vaccinations of children and young people;
- The Highland Council was holding a number of events in November. It had access to 30,000 homes through its IT strategy and there was engagement with Children and families during lockdown. Therefore, there was an opportunity to ask questions and get feedback on any health matters, such as vaccinations;
- There had been a range of concerns since lockdown around unintended consequences of the health protection and public health message on children and young people and pregnant young women and this was being addressed. A briefing paper would be issued to the Committee on this; and
- There was a commitment by Highland Council to appoint a senior role in health in the new organisational structure. Further, the formation of the Health and Social Care Committee within the Council had been well received and was working very effectively.

SA

The Committee **NOTED**:-

- i. the measures put in place across the Covid-19 pandemic to support the commissioned child health service;
- ii. service delivery arrangements and plans for service improvement, clinical and professional governance; and
- iii. the progress made in progressing the latest integrated children's services plan.

## 6. Partnership Agreement Update

FM

There was circulated Joint Report No. JMC/06/20 dated 7 October 2020 by the NHS Highland Depute Chief Executive and Highland Council Interim Executive Chief Officer Health and Social Care.

In discussion, it was advised that due to the Covid-19 health crisis the timetable for the review of the Integration Scheme between The Highland Council and NHS Highland had been extended by the Scottish Government by 6 months. The review was now to be completed by end of December, 2020. Work was ongoing on the review and it was felt that the new deadline for completion would be challenging to meet. This Committee, Highland Council, NHS Highland and The Scottish Government would be kept up to date on progress and with the exact timescale it was anticipated that the review could be concluded and an agreement signed off by both organisations.

Reference was made to the national care strategy development and it was recognised that there would be changes in service delivery, particularly in adult social care and there was a need to be mindful of

this in terms of the budget management approach.

The Committee **NOTED** the current position and the proposed approach to the review of the Integration Scheme.

## **7. Financial Update**

### **a. Highland Council**

There was circulated Report No. JMC/07/20 dated 15 October 2020 by the Highland Council Executive Chief Officer Resources and Finance.

In discussion, in terms of specific pressures within delegated budgets that the Council was facing, these were highlighted as Looked after Children, Fostering and Adoption.

In terms of the impact of the projected overspend in the Council's budget on adult social care, it was advised that discussions had not yet taken place on how the impact of the overspend would affect the Partnership.

The Committee **NOTED** the report.

### **b. NHS Highland**

There was circulated Report No. JMC/08/20 by the NHS Highland Director of Finance.

In discussion, in terms of reducing the budget gap for adult social care services, this had been a result of the success of the adult social care workstream and details were provided at the meeting.

In relation to Covid-19 costs for adult social care outlined in the report, some of these costs might well run on, for example, the additional care home and care at home costs. It was explained that there would be a recurring commitment of those costs in the current year to free up hospital beds and delayed discharges and this would carry on into next year. There was also only funding guaranteed for this year. As part of the remobilisation plan these recurring costs were recognised, but in terms of funding around this there was no clarity or indication of this at present.

A point was made that there were signs of improvements in technology and in care for a whole cohort of children and young people who would not previously have lived into adolescence. This would require more financial planning and forecasting.

Reference was made to the Home First Strategy and redesign of urgent care programmes and how this should be represented across the Highland demographic. In Officers and Partners meetings, discussions had centred around the vision for community care and the solution being in the community. Opportunities and challenges needed to be identified in response to the Home First Strategy and some of these issues could be discussed at the Project Management Board.

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

## 8. Project Management Board Update

FM

There was circulated Joint Report No. JMC/09/10 by the NHS Depute Chief Executive and the Highland Council Interim Executive Chief Officer Health & Social Care.

In relation to the Chairing of the Project Management Board, a view was expressed that there should be a joint approach to Chairing the Board, similar to the arrangement for Chairing this Committee.

It was noted that the Project Management Board would set the parameters for the work of the project team and the Board would receive reports from the Project Team. In this respect, it was requested that there be Staff Side involvement in the Project Team and this was confirmed.

Emphasis of partnership and new ways of working with communities was highlighted and it was requested that at an early Board meeting there be a report and discussion about how we would seek to engage with Partners, communities, service users and carers in discussions on new ways of working. This request was acknowledged and it was explained that there was a need for a community based approach to support people in communities. It was recognised that where acute need was required there would be specific services that would deliver that care. In terms of the lower levels of care, options for providing this in the community would need to be explored so that the care provided the least disruption to the individual, but the most efficient support for them. It may be that Pilot areas be introduced to test different models.

Thereafter, the Committee:-

- i. **APPROVED** the proposed approach to arrangements to be put in place between the Highland Council and NHS Highland with a view to delivering transformation and efficiencies; and
- ii. **NOTED** that there would be Staff Side involvement in the Project Team.

## 9. AOB

The Committee **AGREED** that their next meeting would be on a date

to be arranged in December, 2020.

The meeting was closed at 4.25 p.m.