The Highland Council/NHS Highland

Agenda Item	8b
Report No	JMC-04-25

Committee:	Joint Monitoring Committee
Date:	13 March 2025
Report Title:	Finance Report – Highland Council
Report By:	Chief Officer – Corporate Finance

1. Purpose/Executive Summary

- 1.1 This report sets out for members of the Joint Monitoring Committee (JMC), an update on the Council's overall financial position, and that related to Integrated Children's Services functions delivered by the Council through the Lead Agency arrangement.
- 1.2 The figures presented reflect the year end forecast as at Quarter 3 of the current financial year, covering the period up to and including 31st December 2024. The Council's internal financial monitoring operates on a Quarterly reporting cycle.
- 1.3 The report also provides the Committee with an update in relation to the Highland Council's delivery plan and those elements related to Integrated Children's Services functions.

2. Recommendations

- 2.1 Members are asked to:
 - i. Note this report and update provided;
 - ii. Note the forecast out-turn position for Council and Integrated Children's Services;
 - iii. Note the update provided regarding the Council's Delivery Plan.

3. Implications

- 3.1 Resource there are no specific recommendations with resource implications in this report.
- 3.2 Legal no particular implications to highlight.
- 3.3 Risk the report highlights a number of particular risk areas as they may impact on the revenue budget, in the current year and into future years. The report provides narrative relating to the current staffing and vacancy challenges facing aspects of the children's services activities, and status update on savings delivery including service redesign.

- 3.4 Health and Safety (risks arising from changes to plant, equipment, process, or people) – no particular implications to highlight.
- 3.5 Gaelic no implications.

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 and update report and therefore an impact assessment is not required.

5. Forecasts for 2024/25

- 5.1 For context, the revenue budget for the year was based upon targets to deliver agreed budget savings of £26.1m in 2024/25 (and a total of £54.6m across 3 years). The Council had agreed a reserves strategy and the allocation of earmarked reserves to support investment, change and transformation. The Council also agreed an Operational Delivery Plan to support achievement of outcomes and budget savings.
- 5.2 **Annex 1** sets out the Quarter 2* monitoring forecast for the Council. At Quarter 2, net service expenditure is forecast to be overspent by £10.929m with variances across a number of service areas. Further details of which is provided later in this report.

*At the time of writing this report for JMC, Council estimates for Quarter 3 are being finalised and not yet available for this report. A link has been provided to the Council's <u>Corporate Resources Committee</u>, which will consider a Quarter 3 report and with reports available once published. That report is expected to be online from the link above prior to the date of the JMC meeting. A verbal update will also be provided at the JMC meeting.

- 5.3 This Q2 overspend is partly mitigated by assumed underspends on loan charges (cost of repaying borrowing) and unallocated budgets, leading to a net overspend against budget of £4.607m. After allowing for a forecast increase in council tax income, this results in an overall net year end deficit of £4.100m. If not addressed over the course of the year, this deficit will need to be funded from, and therefore would reduce, the Council's non-earmarked reserves.
- 5.4 The main areas of overspend reflected within that Quarter 2 position are as follows.
 - Communities and Place Fleet management and savings delivery.
 - Health and Social Care Looked After Children and historical savings delivery.
 - Infrastructure, Environment and Economy Harbours and Ferries costs pressures and income targets, climate change income targets.
 - Property and Housing Utilities costs and income recovery.

• With some mitigation through projected underspends in Education & Learning, and Corporate Services.

The Quarter 3 position relating to Health & Social Care was reported to the Strategic Committee on 5th February, with further information on this is set out in the following section.

- 5.5 In relation to Integrated Children's Services, and **Annex 2**, the out-turn position forecast is a net overspend of £2.234m. The statement at Annex 2 reflects those elements of the structure of the Council's Health and Social Care service which include activity in this area. Where budget lines relate to both children's and adult service areas (i.e. management and other central costs) no attempt has been made to split the costs between the two functions given their fully integrated nature.
- 5.6 Members will note that since Q2 there has been movement between a number of individual budget lines. This does not signify an overall adjustment to the Service budget itself but rather reflects the allocation of savings across the relevant headings to indicate more accurately where the savings will be made and their impact on the projected out-turn.

Since Q2 there have been further challenges in relation to costs for certain looked after children placements, mainly driven by independent 3^{rd} Sector placement costs, and those have contributed to the overspend across the Looked After Children budget heading having increased to £3.404m.

The Committee will recall that in Q2 the expected savings in terms of the looked after children budget had not been allocated. Although the reallocation has now been reflected in the budget, challenges remain for the service in terms of addressing the level of projected overspend. As Members are aware, the Service is frequently constrained by decisions made about the care of children by the court and children's hearing systems which cannot be challenged. In one particular case, costs in the region of £34,000 per week (circa £1.7m pa) are being incurred for a young person who has been cared for since June 2024, which has contributed significantly to the budget challenge. Work is underway with colleagues in Health in terms of their contribution to that package in terms of meeting that young person's particular health needs. It is expected that once complete this exercise ought to have an impact on the figures of approximately £350,000.

Figures are also being considered in relation, in particular, to the Families First initiative and the associated Home to Highland programme. That programme is continuing to deliver savings and those have contributed to the savings of £600,000 required by the Delivery Plan. It should however be noted that on a pro-rata basis the savings achieved by the programme are not as significant as those previously achieved principally because the costs of caring for children and young people who are returned to Highland have increased significantly. Those increases are not just through annual uplifts (estimated at £400k for this year's placements), but the costs of putting in place local, alternative provisions has increased significantly in the last year due to the complexity of needs. For example, in late 2023, four children were returned to Highland because independent providers were unable to meet their needs, and they served notice. No alternative provision could be found in the UK. Given the complexity of need, residential care and education packages amounted to an annual cost of over £1.4M, which has been recurring. This presents a challenge for the Service as, whilst it is accepted that outcomes are much improved by caring for children and young people in Highland where possible, the associated savings are generally reducing.

The overspend as described above, is being partly mitigated by underspends on staffing across the remaining service budget areas including Family Teams £0.641m & Other Services for Children £0.442m. Past reports to JMC have described some of the challenges presented by staffing vacancies, and the work being taken forward to address those matters.

6. Council Delivery Plan

- 6.1 The Council's approved Operational Delivery Plan consists of 6 portfolios which set out how the Council will deliver on operational commitments to secure social and economic transformation for Highland communities. The Delivery Plan sets out the key measures of success, and the activity to deliver outcomes. The Delivery Plan is supported by resourcing and investment to support the outcomes to be achieved, and with relevant savings targets and other financial measures defined within the Plan. The portfolio covers 4 themed workstreams relating to Family First, Adult Social Care, Digital Solutions and Capacity Building. Details of the Portfolio and the workstreams and projects sitting within it are attached as **Annex 3** to this report.
- 6.2 Updates in relation to the workstreams focused on Children's Services were provided as part of the Delivery Plan Update report to the Health, Social Care and Wellbeing Committee on 5th February. The update report can be accessed here <u>H&SC</u> <u>Committee Delivery Plan Update</u>.

Designation: Chief Officer - Corporate Finance

Date: 25 February 2025

Authors: Brian Porter, Chief Officer – Corporate Finance Jennifer McGonagle Strategic Lead – Financial Services (People Cluster)

Background Papers:

Health and Social Care - Revenue Monitoring Budget and Performance Report – Quarter 3 2024-2025

Delivery Plan Budget Monitoring and Progress Update - Person Centred Solutions

Appendices: Annex 1 Qtr2 Annex 2 Q3 Revenue Annex 3 Q3

Annex 1

Revenue Expenditure Monitoring Report -General Fund Summary									
1 April to 30 September 2024									
	Actual Year to Date £000	Annual Budget £000	Year End Estimate £000	Year End Variance £000					
Table A: By Service									
Communities & Place	27,765	41,323	44,168	2,845					
Depute Chief Executive	9,655	12,545	12,421	(124)					
Education & Learning	125,101	268,543	268,037	(506)					
Health, Wellbeing & Social Care	76,938	188,679	190,947	2,268					
Infrastructure & Environment and Economy	13,834	38,355	44,227	5,872					
Performance & Governance	3,266	6,338	5,982	(356)					
Property & Housing	39,743	80,146	80,610	464					
Resources & Finance	10,188	13,720	14,000	280					
Welfare Services	6,000	7,833	8,019	186					
Service Total	312,490	657,482	668,411	10,929					
Valuation Joint Board	1,648	3,296	3,296	0					
Green Freeport	458	458	458	0					
Non Domestic Rates reliefs	1,700	1,725	1,700	(25)					
Loan Charges	0	67,696	63,796	(3,900)					
Unallocated Budget	0	26,010	21,420	(4,590)					
Unallocated Corporate Savings	0	(6,310)	(4,117)	2,193					
Total General Fund Budget	316,296	750,357	754,964	4,607					

Table B: By Subjective

 531,487 970,556 (79,106) (141,093) (220,199) 	975,535 (80,175) (140,396)	697
970,556 (79,106)	975,535 (80,175)	4,979 (1,069)
970,556	975,535	4,979
		,
531,487	542,111	10,624
E04 407	542,111	40.004
439,069	433,424	(5,645)
	4 439,069	

Table C: Appropriations to Reserves

Contribution to earmarked balances	0	830	830	0
Contribution to non-earmarked balances	0	0	0	0
Affordable housing contribution from 2nd homes council tax	0	6,015	6,015	0
Contribution to Other reserves	0	2,019	2,019	0

Total Contributions to Balances	0	8,864	8,864	0

Table D: Financed By

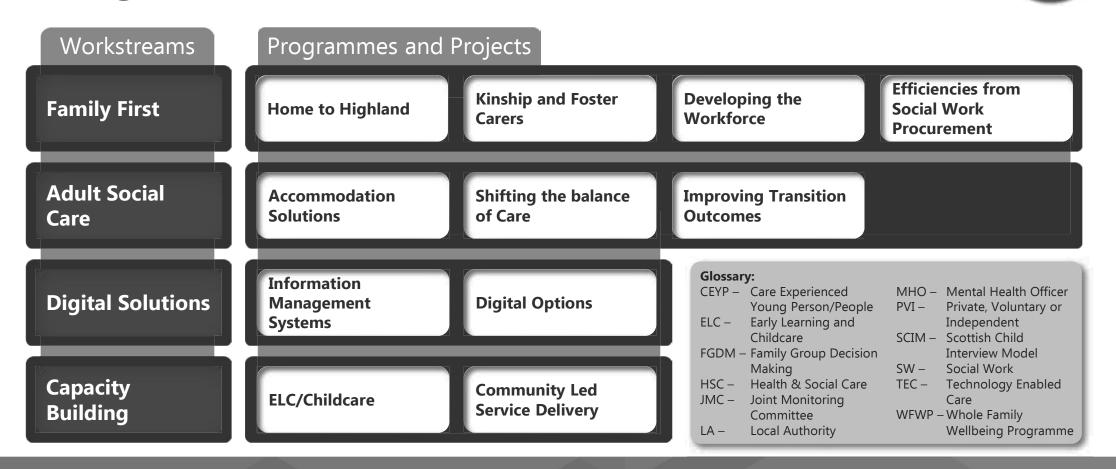
Aggregate External Finance as notified	221,437	579,924	579,924	0
Additional resources	0	9,650	9,650	0
Additional resources - GCG - Pay award	0	0	0	0
Council Tax	94,859	151,210	151,717	507
Use of earmarked balances	0	2,510	2,510	0
Use of non earmarked balances	0	9,927	14,027	4,100
Use of other reserves	0	6,000	6,000	0
Total General Fund Budget	316,296	759,221	763,828	4,607

HEALTH, WELLBEING AND SOCIAL CARE MONITORING STATEMENT 2024-25

		STAFF	COSTS			OTHER				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	£'000
31/12/2024	Annual	Actual	Year End	Year End	Annual	Actual	Year End	Year End	Annual	Actual	Year End	Year End	Annual	Actual	Year End	Year End	Annual	Actual	Year End	Year End
	Budget		Estimate		Budget			Variance			Estimate		Budget			Variance			Estimate	
ΒΥ ΑCTIVITY	Duuget		Lotinate	Variance	Duuget	110	Estimate	Variance	Duuget	110	Estimate	variance	Dudget	ΠĐ	Lotiniate	Variance	Duuget	110	Lotimate	Variance
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																				1
Service Management and Support	000	704	070		2	24	22	20	0		0	0		•	0		000	745	1.010	24
Management Team	986	721	978	-8	3	24	32	29	0	0	0	0	0	0	0	0	989	745	1,010	21
Business Support	1,598	1,103	1,448	-150	31	4	4	-28	0	0	0	0	0	0	0	0	1,629	1,107	1,452	-178
COVID-19 Response	0	0	0	0	0	1	0	0	0	-100	0	0	0	0	0	0	0	-99	0	0
Unallocated Savings	-69	0	0	69	0	0	0	0	0	0	0	0	0	0	0	0	-69	0	0	69
Looked After Children																				
Family Based Care	1,233	840	1,120	-113	6,762	4,924	6,757	-5	0	0	0	0	0	9	-10	-10	7,995	5,773	7,867	-128
Residential, In house	5,575	4,322	5,690	116	1,548	936	1,215	-333	-1,374	-2,293	-1,374	0	0	2	-304	-304	5,748	2,966	5,227	-521
Respite, In house	1,871	1,381	1,873	2	129	60	80	-49	0	0	0	0	0	0	0	0	1,999	1,441	1,953	-47
Independent and 3rd Sector placements	0	0	0	0	7,893	5,895	10,713	2,820	0	0	0	0	0	0	0	0	7,893	5,895	10,713	2,820
Through care & aftercare	27	96	147	120	1,117	943	1,137	20	0	0	0	0	0	3	0	0	1,144	1,041	1,284	141
Home to Highland	788	1,013	1,236	448	584	491	878	293	-327	-160	-372	-45	0	-1	0	0	1,044	1,344	1,741	697
LAC Management and Support	720	342	457	-264	7	8	9	255	0	0	0	45 0	0	0	0	0	727	350	465	-262
Unallocated Savings	-704	0	437 0	704	0	0	0	0	0	0	0	0	0	0	0	0	-704	0	405 0	704
onanocated savings	-704	0	U	704	0	0	0	0	0	0	0	0	0	0	0	0	-704	0	0	704
Family Teams																				
Family Teams - North	2,980	1,978	2,637	-343	294	407	407	114	0	-1	0	0	0	-1	0	0	3,274	2,384	3,044	-229
Family Teams - Mid	3,387	2,167	2,889	-498	392	505	505	114	0	-12	0	0	0	4	0	0	3,779	2,664	3,394	-384
Family Teams - West	3,111	1,888	2,518	-593	318	319	358	40	0	0	0	0	0	0	0	0	3,429	2,207	2,876	-553
Family Teams - South	7,748	5,006	6,676	-1,073	849	1,259	1,304	455	-15	-1	-15	0	0	6	0	0	8,582	6,270	7,964	-618
Self Directed Support (Direct Payments)	78	60	79	1	1,055	1,246	1,663	608	0	0	0	0	0	0	0	0	1,133	1,306	1,743	609
Unallocated Savings	-535	0	0	535	0	0	0	0	0	0	0	0	0	0	0	0	-535	0	0	535
Other Services for Children																				
Child Protection	917	620	827	-89	41	186	26	-15	-124	-314	-124	0	0	0	0	0	834	491	729	-105
Health and Health Improvement	1,471	965	1,245	-226	130	84	140	11	-710	-452	-710	0	0	0	0	0	890	597	675	-215
Allied Health Professionals	3,917	2,878	3,838	-220	161	203	258	97	0	-432	0	0	-11	0	-42	-31	4,067	2,963	4,053	-14
Primary Mental Health Workers	665	476	634	-30	101	8	11	1	0	0	0	0	0	0	-42	0	675	484	4,055 645	-30
Specialist Services	134	76	102	-31	124	212	240	116	0	0	0	0	0	0	0	0	258	288	342	-30 84
Youth Action Services	1,352	748	990	-362	386	387	240 395	9	0	-8	0	0	0	0	0	0	1,738	1,126	1,384	-353
Other Services for Children	1,532	1,858	1,444	-302 -87	1,303	527	1,330	27	0	-8	0	0	-7	-1	-2	5	2,827	2,385	2,772	-55
Staff Training	246	1,858	1,444	-87 -85	1,303 0	25	25	27	0	6 G	0	0	-7	-1	-2	0	2,827	2,585	186	-55 -60
Independent Funds	246	0	101	-05	0	-20	25 0	25 0	0	0	0	0	0	0	0	0	240	-20	186	-60
Unallocated Savings	-306	0	0	306	0	-20	0	0	0	0	0	0	0	0	0	0	-306	-20 0	0	306
onanocateu savings	-300	U	0	500	U	U	0	U	U	0	U	0	0	0	0	U	-300	0	0	300
Delegated Child Health	0	0	0	0	0	0	0	0	-11,562	-5,962	-11,562	0	0	0	0	0	-11,562	-5,962	-11,562	0
Grand Total	38,721	28,658	36,989	-1,733	23,137	18,634	27,487	4,351	-14,112	-9,416	-14,157	-45	-18	21	-358	-340	47,724	37,896	49,957	2,234

Appendix 2

Person centred solutions ⁷³ Fuasglaidhean stèidhichte air neach



Person centred solutions⁷⁴

Family First

Adult Social Care

Digital Solutions

Capacity Building Strengthening our approaches to enable families to sustain themselves.

Programme: Home to Highland

A programme to ensure that young people in formal care arrangements are looked after and nurtured as close as possible to their own community networks.

Project: Kinship and Foster Care

Building a stronger support system for families providing kinship care to young people and expanding our foster care capacity.

Project: Developing the Workforce

In recognition of our challenges in recruiting staff, we have a planned programme of activity to develop our future workforce with partners.

Project: Efficiencies from Social Work Procurement

In order to provide more sustainable support for care providers, we are establishing more effective mechanisms to commission partners.



Adult Social Care

Digital Solutions

Capacity Building

Family First

Person centred solutions⁷⁵

Developing our approaches to ensuring that people live independently and well and are catered for in their communities.

Project: Accommodation Solutions

Providing more effective solutions to enable people to live independently and at home.

Programme: Shifting the balance of Care

Developing mechanisms to enable more local, community and family based care solutions for vulnerable people.

Project: Improving Transition Outcomes

Supporting more effective transitions across children - adults care services.



Digital

Solutions

Capacity

Building

Family First

Adult Social

Care

Person centred solutions⁷⁶

Ensuring digital solutions support effective care provision.

Project: Information Management Systems

Ensuring our case management systems are effectively implemented and used.

Project: Digital Options

Enabling more effective digital solutions for individuals, to help sustain care packages that encourage independent living.



Capacity Building

Family First

Adult Social

Care

Digital

Solutions

Building our single care model for communities with key partners.

Project: ELC/Childcare

Increasing more effective childcare solutions for families across the Highland area.

Project: Community Led Service Delivery

Person centred solutions⁷⁷

Building community partnership capacity to support our developing single care model.



Family First

Programme

Home to

Highland

Responsible Officer:

Head of Social Work -

Children and Justice

Person centred solutions⁷⁸

Senior Responsible Officer: Chief Officer **Portfolio Sponsor:** Assistant Chief Executive

Activity

We will retain children in, and return children to, local Highland provision to ensure better outcomes at less cost. We will strengthen whole system family support with enhanced community capacity, including through a Virtual School for Care Experienced Young People (CEYP) and Family Group Decision Making (FGDM).

Project Elements

- Strengthen local community solutions:
- Scale up and sustain Family Group Decision Making.
- Scale up and sustain Scottish Child Interview Model (SCIM).
- Develop a Children's Rights & Participation Team.
- Develop Family Support Roles.
- 2 Develop a Virtual School:
 - Ensure rigorous planning for CEYP & system effectiveness.

Measures of Success

- Reduce numbers of children in secure care.
- Reduce numbers in external residential provision.
- Increase proportion of children in kinship care.
- Increase number of siblings staying together.
- Increased community services and supports.
- All CEYP have an effective Education Plan.

Milestones

- **06/24:** Children's Rights Team established.
- **08/24:** FGDM and SCIM team made permanent.
- **08/24:** Family teams model established.
- **12/24:** Recruit Virtual School Headteacher.
- 12/25: Review progress & update annually.

Programme Theme: 1 A Fair and Caring Highland

Links to Performance Plan targets:

1.8

(iv)-(vi)

Links to Programme:
Place – Whole family approach.

Link to HOIP:

• **People** - People will access right support at right time through whole system approach.

Key Risks

- 1. High vacancy rates and challenge in service delivery.
- 2. Insufficient investment in early intervention.
- 3. Protracted time to establish infrastructure of community family support.

Ref: CS:22

1.8

(ii)

Investment: £2m (approved)

Income Target: £2m

Workstream	Person centred solutions ⁷⁹	Senior Responsible Officer: Chief Officer	Portfolio Sponsor: Assistant Chief Executive
Family First Project Kinship and Foster Carers Responsible Officer: Head of Social Work - Children and Justice	 Activity Children will achieve more sustainable family-base care through the development of a kinship team. This will increase the proportion of children in kinship care, and more foster carers will ensure Highland children remain with Highland families. Project Elements Codesign new service with Kinship Carers & Children. Increase recruitment of Foster Carers using dig technology, marketing and comms strategies. Link with partners to develop support to improvise support to kinship Carers & Foster Carers. 	 reducing the number in residucing the number in residucing the number of fered is of care. Higher numbers of brothers Fostering Recruitment annument of the second sec	idential care. enhanced to promote stability s & sisters staying together. hal target (8) will be achieved. n within whole system: Continuing Care & Kinship Care. hst measures of success.
Links to Performance Plan targets: 1.8 1.8 (ii) (iv)-(vi)	 1 A Fair and Caring Highland Links to Programme: Place – Whole family approach. Link to HOIP: People - People will access right support at right time through whole system approach. 	 Key Risks 1. High vacancy rates and chall 2. Insufficient investment in ear 3. Length of time to establish in family support. 	ly intervention.
Ref: CS:22	vestment: £2m (approved)	Income Target: £2m	19

Workstream	Person centred solution	ons ⁸⁰ Senior Chief C	r Responsible Officer: Officer	Portfolio Sponsor: Assistant Chief Executive		
Family First Project	Activity In light of our particular workforce challen develop a stronger and flexible workforce 3 year <u>National Health and Social Care Workforce Plans (scot.nhs.uk)</u> a Scotland's emerging workforce plan.	plan aligned to the orkforce Strategy:	the care sector with relevantDevelop community, volume	ntary & 3 rd sector workforce. reer development – uptake of rour roles.		
Developing the Workforce Responsible Officer: Strategic Lead –Child Health	 Project Elements Build community-based resource and we through spread of the WFWP. Develop workforce initiatives (e.g. "grow education flow/apprenticeship schemes) Assertive partnership recruitment, retent sustainability, opportunity and stability a Develop role of support staff across the Work with Higher Education to future present sustainability of the section of the	y your own"/higher). tion drive to create across communities. directorates.	 Milestones 08/24: Support worker review & implementation of findings. 12/24: Strengthened practice support for Grow Your Own Scheme for undergraduate Social Work and MHOs. 12/24: Accelerate the postgraduate advanced nurse training. 04/25: Implement a ready-now/ready-later in-work support pathway. 06/25: Increased success in recruitment. 			
Performance Plan targets: 1.8 1.8 W		Key Risks 1. Risk of Family a 2. Risk of service	model. 06/26: Annual review and u and community breakdown. failure due to demand capacity	n of workforce working in a hybrid pdate.		
Ref: CS:22	vestment: £2m (approved)	Saving	gs: £2m	20		

Workstream	Person centred solutions Chief Office	er Assistant Chief Executive
Family First	Activity The Shared Procurement and HSC Services will ensure that commissioned SW services and contracts fully comply with	 Measures of Success Savings ≥ £0.600m. Provision of multi-year contracts with providers.
Project	current procurement regulation and achieve improved outcomes and deliver Best Value.	Increase of community-based services.Increased Direct Payment spend.
Efficiencies from Social Work Procurement Responsible Officer: Lead Officer – Strategy, Performance & Quality Assurance	 Project Elements Review commissioned services with support from Shared Procurement Service to determine outcome achievement, cost benefit or otherwise. Develop a commissioning framework. Engage with current/future providers – outcomes focused. Enable the provision of longer-term contacts for providers. Shift from commissioning to direct payment to families where appropriate. 	 Milestones 06/24: Category & contracts manager appointed. 12/24: Contracts review complete. 01/25: Savings identified across contracts. 04/25: Model contracts offered to providers. 05/25: Commissioning framework in place. 09/25: Review progress against measures of success, annually and update.
Programme Theme: 2	2 Resilient and Sustainable Communities	

Links to Performance Plan targets: 2.5 (i), (ii)

Links to Programme: **Place** – Support communities to help each other live well and independently.

Link to HOIP:

People – Improved access to services and support. **People** – Benefit from good health

& social wellbeing opportunities.

Key Risks

- 1. Negative impact on clients due to change process.
- 2. Failure to deliver Statutory Services due to social care staffing levels.

Dortfolio Spons

3. Providers resistance to framework changes.

Savings Target: £0.600m Year 3

Senior Pernonsible Officer

Ref: CS:20

Investment: Nil

Workstre	am	Person	centred solutions ⁸²	Senior Respons Chief Officer	sible Officer:	Portfolio Sponsor: Assistant Chief Executive
Adult Soc Care Projec		the Highland • support po communit	e JMC, deliver and monitor the outcor d HSC Partnership Strategic Plan for A eople to live independently & well in ties; uitable and sustainable housing optic	Adults. We will: 1 their	remain in their • Increased Dire • Reduced cost	over 65 being supported to
Accommod Solutions Responsible Offi Head of Integra Adult Services	cer:	 identify an Project Ele Work close of care for Roll out exin their ow Housing s 	nd implement local community suppo	ort solutions. Cy to develop a mode plex cases. port people to rema	 Increase levels Mileston 06/24: To of Stin To 	s of direct spend on families.
Programme Links to Performance Plan targets: 2.5 (i), (ii)	Links to F Place – Su	Programme: oport es to help each ell and	d Sustainable Communities Link to HOIP: People – Improved access to services and support. People – Benefit from good health & social wellbeing opportunities.	Key Risks 1. Meeting increasin maximise the use investment to sec improvement in c 2. Delivering housin because of workf	e of available cure outcomes. ng solutions	 for Care at Home and Support Services. 3. Failure by partners to transform the way services are delivered. 4. Agreeing terms with providers for extended roll out of handyperson scheme.

Investment: £20m (approved)

Ref: CS:29

Savings: £12.6m (NHSH)

Workstream	Person centred solutions	83 Senior Responsible Office Chief Officer	er: Portfolio Sponsor: Assistant Chief Executive
Adult Social Care Programme Shifting the balance of Care Responsible Officer: Head of Integrated Adult Services	Activity To implement the Highland Health and Socia Partnership Strategic Plan for Adults. As part will consider how we can work to support co solutions for people in need of support and i implement sustainable, community and local	of this we ntinuingand where possible in the same placement.• Increase direct payments spend on adults.• Reduced cost of Adult Social Care.• Increase deployment of resources in local communities	
	 Project Elements Roll out of Shared Lives programme. Develop joint commissioning solutions with including housing and employment service Increased roll out of, and use of, SDS include 	h services across the Council es.	 hoice of care solutions. Milestones To be agreed by the JMC in terms of the implementation of the Strategic Plan and adoption of Shared Lives programme.
Programme Theme: Links to Performance Plan targets: Dan	ities to help each services and support. Well and People – Benefit from good health	person centred solutions. 2. Delivering Statutory Services d 3. Failure to transform service del commissioning solutions.	nd lack of physical resources to enable ue to social care staffing levels. livered in terms of identifying joint programmes in terms of identifying

People – Benefit from good health & social wellbeing opportunities.

Ref: CS:29

Investment: £20m (approved)

Savings Target: £12.6m (NHSH)

Adult Social Care

Project

Improving Transition Outcomes

Responsible Officer: Head of Integrated Adult Services

Person centred solutions⁸⁴

Senior Responsible Officer: Chief Officer **Portfolio Sponsor:** Assistant Chief Executive

Activity

Deliver the outcomes set out in the Highland Health and Social Care Partnership Strategic Plan for Adults and the Integrated Children's Services Plan with particular reference to that cohort of young people transitioning from children's services – including an education only service – to an adult social care service. Identify and implement local solutions.

Project Elements

- Working closely with NHS Highland as lead agency in terms of model of care and support provision.
- Develop joint commissioning solutions with services across the Council including housing and employment services with a particular focus on young people transitioning to adult services.
- Develop digital / community-based solutions.
- The role of third sector providers clarified / systematised.

Measures of Success

- Increased % of people remaining in their communities and in placements which can be sustained beyond childhood where appropriate.
- Reduced cost of Adult Social Care.
- Increase resources in local communities to provide more choice and opportunities to young adults in receipt of adult social care.

Milestones

• To be agreed by the JMC in terms of the implementation of the Strategic Plan.

Programme Theme: 2 Resilient and Sustainable Communities

Links to Performance Plan targets: 2.5 (i), (ii) Links to Programme: Place – Support communities to help each other live well and independently.

Link to HOIP:

People – Improved access to services and support.

People – Benefit from good health & social wellbeing opportunities.

Key Risks

- 1. Failure to deliver Services due to increasing demand and lack of physical/ financial resources.
- 2. Failure to deliver Statutory Services due to social care staffing levels.
- 3. Failure by partners to

transform delivery in terms of identifying joint commissioning solutions.

4. Challenges for young people who are in placements as children which cannot be made available to them as adults.



Workstream		enior Responsible Officer: Nief Officer Assistant Chief Executive	
Digital Solutions	Activity Replace the current Case Management System (Carefirst) which will be obsolete in 2025.	 Measures of Success Increased direct access to records. Reduced time spend on record management. 	
Project Information	Seek opportunities to deploy digital solutions across the Service where there is a robust Business Case which demonstrates service efficiencies and/or performance improvements.	Milestones 12/24: eHealth Business case, funding & implementation plan in place.	
Management Systems Responsible Officer:	 Project Elements Replace Carefirst with new Case Management System With NHSH, eHealth programme to digitalise Child Health Records. 	 06/25: Replacement Case Management System procured. 01/26: Replacement Case Management System implemented. 06/26: Implementation of E-Child Health Surveillance system. 	
Lead Officer – Performance and Improvement			
Links to Performance Plan targets: Links • Peo serv resp	S A Resilient and Sustainable Council1. Fato Programme:Links to HOIP:ople – Redesign rice delivery in sonse toPeople – Improved access to services and support.2. CStrained budgets.Place – Access to local4. Fe	Risks ailure to meet the needs of the service and potential breach of atutory duties. ost of the replacement System exceeds the budget allocated. CT Connectivity solution to join NHSH and THC system, is not proven able enough to support accessibility to MORSE as an ePlatform. unding for digitalisation of Child Health Records not secured from artners.	
Ir	vestment: Existing resources	25	

Digital Solutions

Project

Digital Options

Responsible Officer: Lead Officer – Strategy, Performance & Quality Assurance

Person centred solutions⁸⁶

Senior Responsible Officer: Chief Officer **Portfolio Sponsor:** Assistant Chief Executive

Activity

Seek opportunities to deploy digital, data and marketing solutions across Health and Social Care, NHS Highland and Education and Learning to deliver services at less cost, working with industry leaders and learning from best practice.

Project Elements

- Pre-empting demand for adult services.
- Reducing care supply issues through digitally involving the community in care.
- In home TEC for adults requiring care and support.
- Keeping carers caring during the

cost-of-living crisis.

- Paying for care in adult services based on actuals rather than commissioning.
- Finding new childminders, enabling those who want to work to work.
- Improved financial assessment and support for individuals.

Measures of Success

- Shift the balance of care to enable greater family and community-based care.
- Demonstrable impacts to service delivery and the care delivered within our communities.
- Improved financial assessment and debt recovery.

Milestones

03/25: Highest priority solutions implemented within year one.

03/26: High level solutions implemented within year two.

Programme Theme: 5 A Resilient and Sustainable Council

Links to Performance Plan targets:

5.4 (i), (ii)

Links to Programme: People – Redesign service delivery in response to constrained budgets.

Links to HOIP:

- People Improved access to services and support.
- Place Access to local support and services.

Key Risks

- 1. Failure to deliver on priority change ideas will result in greater cost, potentially making services unsustainable.
- 2. People within our communities not being enabled to live well locally.

Ref: CS:34 Investment: Linked to data and digital solutions projects; and NHSH £20m

Workstream	Person centred solutions ⁸⁷	Senior Responsible Officer: Chief Officer	Portfolio Sponsor: Assistant Chief Executive	
Capacity Building Project	Activity Develop flexible, place-based, childcare solutions, root in the needs of local communities in collaboration with partners. Focus on sustainable delivery models. Address barriers to providing quality, flexible childcare solution	nd ELC provision across Highland lenges. el including a shift in the balance of		
Early Learning & Childcare (ELC) / Childcare	including training, recruitment, regulation and busines viability. Support communities and partners to bring forward childcare solutions (i.e. wraparound/blended approach). Work towards a single care model.	s Milestones 05/24: Community and	l business engagement commences. Plan in place including gathering	
Responsible Officer: Head of Education Resources	 ponsible Officer: ad of Education Project Elements Developing, supporting and commissioning childcare solutions. PVI viability, compliance and regulatory support. Service delivery in collaboration with partners 		 11/24: Assertive Highland Campaign (Childcare Workforce). 02/25: Support for business development and compliance in place. 05/25: Community wealth building as part of increase in provision. 	
Programme Theme:	5 A Resilient and Sustainable Council	03/26: Single Care Moc	del launched.	
	to Programme: Links to HOIP: • Place – Depopulation	on by Key Risks		

Plan targets: 5.2 5.6

(i)

- Work with public and private sector partners to co-ordinate employment opportunities.
- Place Develop place-based partnership strategies to coordinate investment and rural repopulation.
- **Place** Depopulation by addressing key barriers to childcare.
- **Prosperity** Improved access to career development opportunities.

- 1. Insufficient flexible & affordable childcare prevents adults entering or returning to the workforce.
- 2. Cost of living pressures worsen with more families and children in poverty.

Ref: EL:13

Savings Target: £0.5m

Capacity Building

Project

Community Led Service Delivery

Responsible Officer: Head of Community Support & Engagement

Person centred solutions⁸⁸

Senior Responsible Officer: Chief Officer **Portfolio Sponsor:** Assistant Chief Executive

People receiving support through Third

Volunteers trained and deployed.

Impact of specific interventions for

people measured by Outcome Star. People supported by Third Sector into

Quantum of match funding achieved.

08/24: Scope / remit agreed with partners,

08/24: Commissioning model approved.

06/24: Create sector steering group.

including HTSI.

05/25: Annual review of progress. **05/26:** Annual review of progress.

Measures of Success

Sector interventions.

iobs.

Milestones

Activity

This 3-year project will oversee the investment of £1.2m allocated to enable community led service delivery. The funding will provide direct capacity building resource on a thematic basis, in order to build service delivery capacity across the third and community sectors, delivered in partnership with HTSI and other community planning partners. This will support other strands of the Delivery Plan focused on creating stronger and sustainable commissioning frameworks, specifically adult commissioning, early learning and childcare and workforce for the future – tackling inequalities.

Project Elements

- Thematic led service delivery specialist support to build community capacity in key thematic areas of service delivery e.g. health & social care, childcare.
- Support for Highland Volunteering Academy to deliver training and mentoring to enhance volunteering capacity which contributes to service delivery.
 Enable greater impact of third sector interventions to support employability.

Programme Theme: 2 Resilient and Sustainable Communities

Links to Performance Plan targets:

2.11

(ii)

2.5

(i), (ii)

Place – Support communities to help each other live independently and well. **Economy** – Work with partners to develop community wealth building strategy.

Links to Programme:

Link to HOIP:

People – Improved access to services and support. **Prosperity** – People will benefit from community wealth building approaches.

Key Risks

1. Failure to build third and community sector capacity and enable a network of service providers to deliver against key areas of service delivery.



Investment: £1.2m (funded)