

# The Highland Council / NHS Highland

Agenda Item	<b>5</b>
Report No	<b>JMC/18/25</b>

**Committee:** Joint Monitoring Committee

**Date:** 04 December 2025

**Report Title:** Chief Officer's Report Adult Services

**Report By:** Arlene Johnstone - Chief Officer

## **1. Purpose/Executive Summary**

- 1.1 This report provides an update on the implementation of the Adult Strategic Plan 2024-2027. It is intended that the Committee monitor performance of the Partnership in terms of the implementation of the Strategic Plan.

## **2. Recommendations**

- 2.1 Members are asked to:
- i. **Note** the work undertaken in implementing the HHSCP Joint Strategic Plan and assurance performance information as supplied.

## **3. Implications**

- 3.1 **Resource** - There are no specific resource issues arising from this report, it is expected that the plan will be implemented within existing resource and associated risks and issues escalated to the HSCP and Strategic Planning Group. It is however accepted that in general there are significant resource issues in terms of the delivery of adult social care and those resource issues are governed by the Integration Scheme currently in place, as signed off by the Council and Board in March 2021 and which received Ministerial sign off in February 2022.
- 3.2 **Legal** - The content of this report is to seek to ensure the Partnership's compliance with The Public Bodies (Joint Working) (Scotland) Act 2014.
- 3.3 **Risk** - There are no specific risks arising from this report.
- 3.4 **Health and Safety (risks arising from changes to plant, equipment, process, or people)** - There are no Health and Safety implications as a result of this report.
- 3.5 **Gaelic** - There are no Gaelic implications as a result of this report.

## **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. Background

- 5.1 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.
- 5.2 This same Act also directs that a **Strategic Planning Group** requires to be established and in place in to support the development of this Strategic Plan. The Strategic Planning Group continues to oversee the implementation of the Strategic Plan.
- 5.3 The same Act also directs that Locality Planning Groups require to be established to provide a forum for professionals, communities and individuals to collectively develop and deliver locality plans based on the Joint Strategic Plan and local need. In Highland, these groups are called **District Planning Groups**.

## 6. Implementation Of The Strategic Plan

- 6.1 The Joint Strategic Needs Assessment was considered by the Strategic Planning Group in March 2025. At the meeting of the Strategic Planning Group on the 28 October 2025 a workshop format was adopted to review the Joint Strategic Plan 2024 – 2027 against the Joint Strategic Needs Assessment with the aim of reviewing the current implementation actions and areas for consideration in the next version of the Joint Strategic Plan.

Comparisons in key themes were drawn between the two documents and each was discussed by the group. Areas of strength and weakness were discussed with reference to framing and inclusion in the next version of the plan due for publication in 2027.

The group also received a presentation on the planning approach being taken in the development of the next NHS Highland Strategic Plan, including relevant national strategic publications which will influence Strategic Plans across health and Social Care.

The role of the Strategic Planning group in the development of the next Joint Strategic Plan was discussed and following agendas will reflect the role of the group in both monitoring implementation of the current plan and development of the next plan.

## 7. Performance

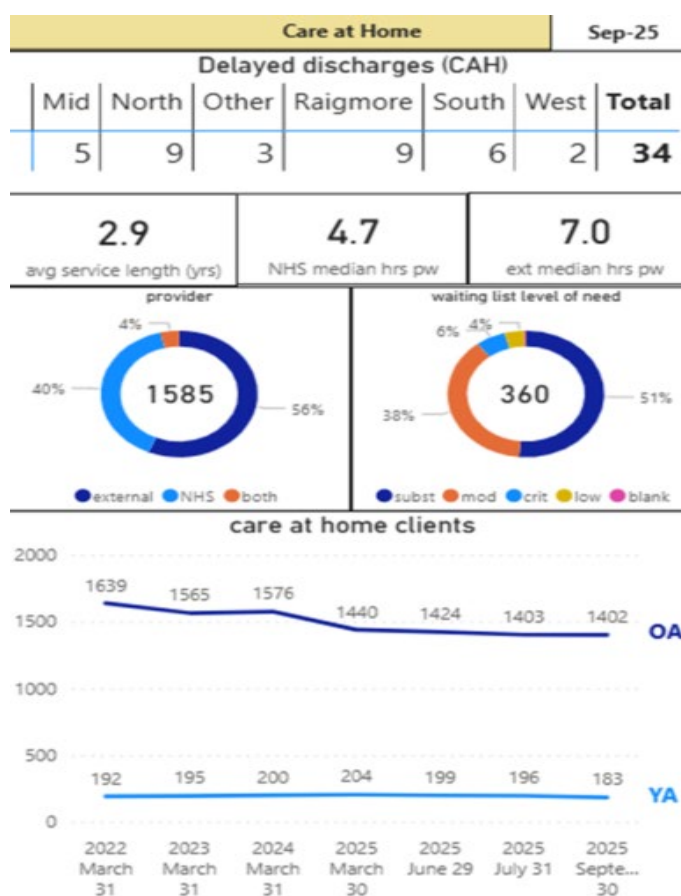
### 7.1 Care at Home

There remain sustained pressures in the market and maintaining current delivery remains a priority.

In this reporting period (September 2025) there are 381 people waiting for a CAH service and there are 34 people delayed in their discharge from hospital awaiting a care at home service.

Operational colleagues and our partner providers continue to work collaboratively to deliver services however the complexity of care at home provision, along with ongoing and acute recruitment and retention, and major competition from other / more desirable employment sectors, is resulting in a reduction of activity across this area

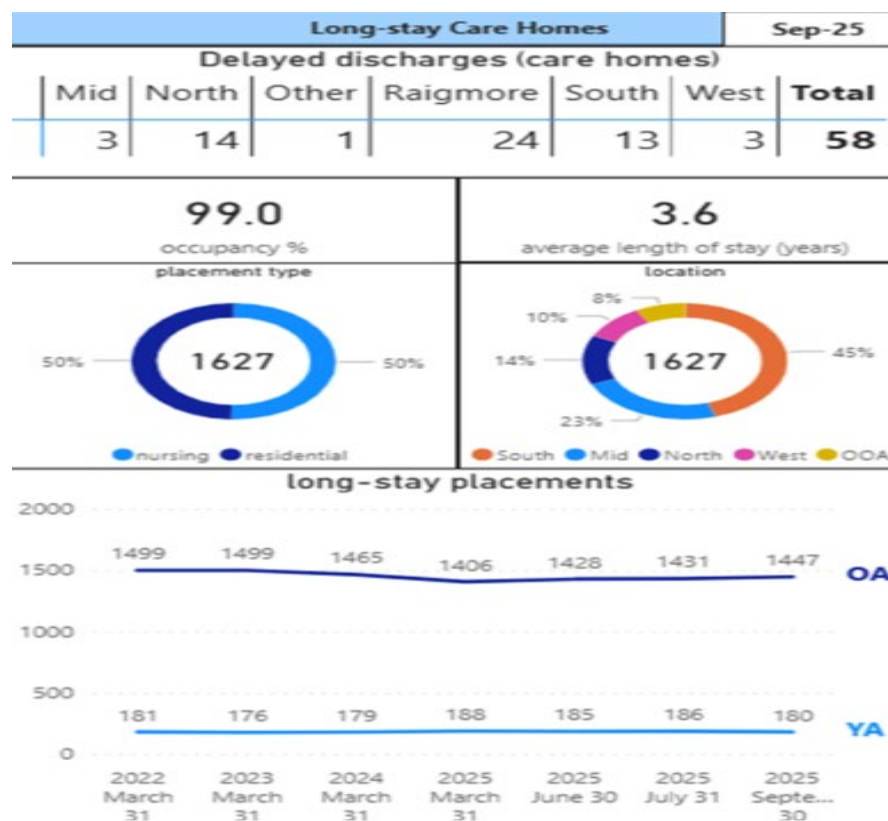
A commissioning strategy remains required to clarify future commissioning actions in this area. This is to be delivered by Q4.



### 7.2 Care Homes

Demand for a care home placement remains our most common reason for delayed hospital discharges, however this figure has reduced from 73 reported in the last Chief Officers report (July 2025) to 58 (September 2025). 99% of all available care home beds are occupied.

A commissioning strategy remains required to clarify future commissioning actions in this area. This is to be delivered by Q4.

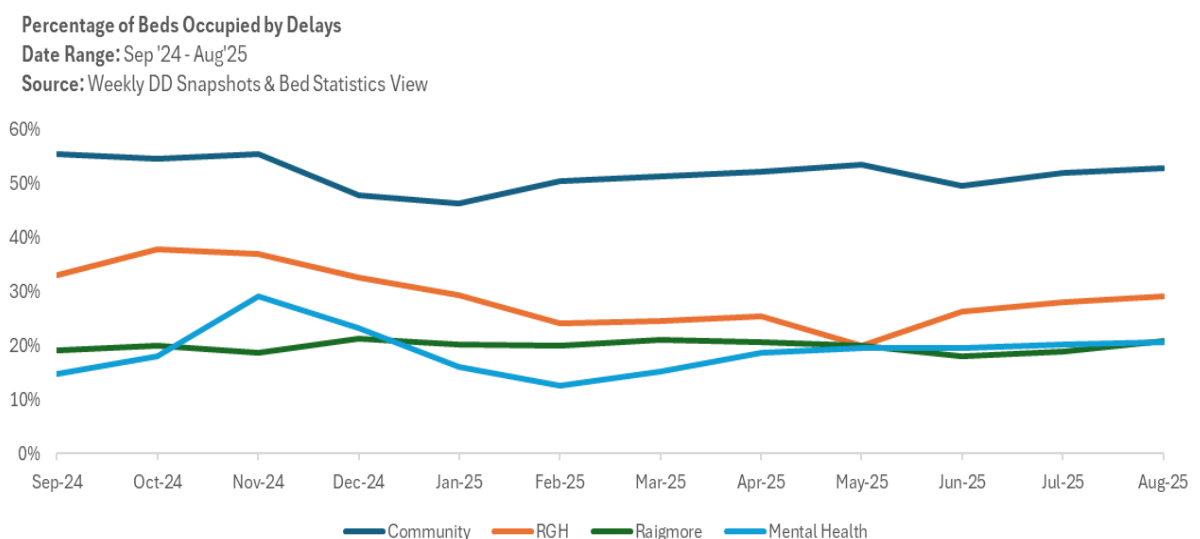


### 7.3 Delayed Hospital Discharges

There has been an overall reduction in people affected by delayed discharge from a peak of 235 at the end of November 2024. This reduced to 194 in Mid July 2025 in Highland however improvement has stabilised with the number in the current reporting period (September 2025) being 211.

Approximately 55% of all community hospital capacity is filled by delayed hospital discharge.

Reducing delayed discharges remains a key metric for the work overseen by the Urgent and Unscheduled Care Portfolio Board. Teams continue to hold daily reviews of all planned discharge dates and ensure discharge planning activity is in place.



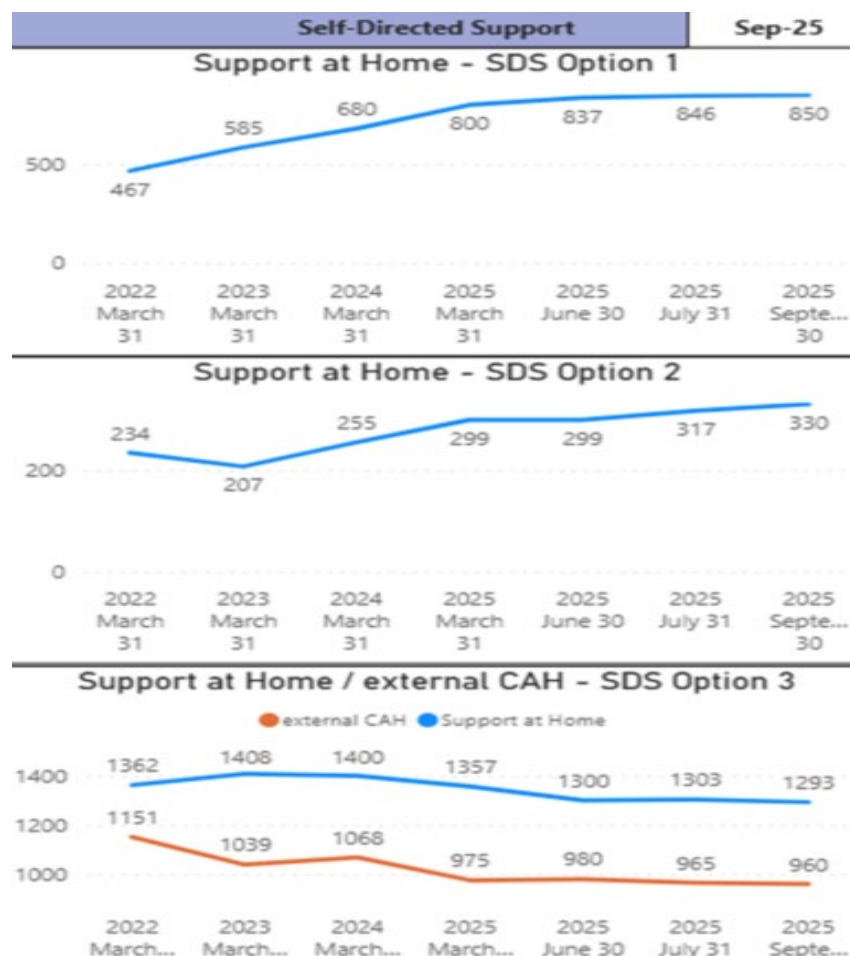
## 7.4 SDS

Option 1 - We have seen sustained levels of growth for both younger and older adults in our urban, remote and rural areas.

Option 2 - We have seen a sustained increase in service provision continuing.

Option 3 - We continue to see a reduction in the number of people supported, reflecting a complex landscape with significant market challenges, financial stressors and an increasing awareness of the care options available.

These changes are in line with the expectations of the Joint Strategic Plan, however for individuals with complex needs (where Option 3 is the usual desired option) it remains increasingly difficult to commission the specialist support services that individuals need.



## 8.0 Updates

### 8.1 Sutherland Care at Home

The Care Inspectorate improvement notice for Sutherland Care at Home has now been formally removed, with all required actions met. This reflects the significant progress made in service quality and compliance. While the notice has been removed, improvement work will continue to ensure sustained standards and ongoing development.

### 8.2 The Adult Social Care Finance Plan

The Adult Social Care Finance Plan has been endorsed by both Chief Executives and sets out a two-track approach to achieving financial sustainability:

Track 1 – Financial Recovery: Concentrating on immediate measures to manage in-year financial pressures and stabilise budgets. This includes tighter vacancy

management, review of high-cost care packages, improved use of commissioned capacity, and ensuring that care is delivered in the most appropriate and cost-effective setting.

Track 2 – Service Redesign and Sustainability: A medium- to longer-term transformation programme aimed at creating a more efficient and sustainable model of care. This includes redesigning in-house Care at Home and Care Home services to improve efficiency, exploring new delivery approaches to increase capacity, and aligning investment towards prevention and early intervention.

This work is being approached collaboratively and with a clear focus on sustainability, recognising the ongoing pressures on workforce and demand. Assurance mechanisms are being increased to monitor progress and ensure that service improvements are embedded and responsive to local needs.

Designation: Chief Officer, Highland HSCP

Date: 04 November 2025

Author: Rhiannon Boydell - Head of Service, Integration, Strategy and Transformation HHSCP

Background Paper: None

Appendices: None