



Meeting: Highland Health & Social Care Committee

Meeting date: 06 March 2024

Title: Chief Officer Assurance Report

Responsible Executive/Non-Executive: Pamela Cremin, Chief Officer

Report Author: Pamela Cremin, Chief Officer

<p>1. Purpose</p> <p>To provide assurance and updates on key areas of Adult Health and Social Care in Highland.</p>
<p>2. Major Redesign Programmes</p> <p>The Scottish Government announced last month that funding for all NHS Capital Projects is to be paused. This means that a number of refurbishment, redesign and capital build projects will be paused across Highland HSCP operational area.</p> <p>Plans for the redesign of Caithness General Hospital is paused.</p> <p><u>North Coast Redesign:</u> At the North Coast Redesign Programme Board held on Friday 23rd February an outline workforce plan was discussed. The work on the workforce plan needs to be further progressed with the hard stop date of March 2024. However, the translation of the strategic concept to an operational plan is now impacted by pause on capital spend. In this project there is a query whether or not the lease of the new build would fall under IFRS16 and would therefore be capital. This has to be clarified with Scottish Government at the time of report writing.</p> <p>As part of joint work in Caithness to redesign services and deliver the Local Care Model we have been working very closely with Highland Council, as owners of Pulteney House. Our aim, to develop two step up beds, has been supported by Highland Council who agreed to development work to refurbish a former Day Care Area to provide two ensuite rooms, a kitchen and sitting room. Reflecting the local area and the historical name of the unit the service is called “Longberry Care”. It is a fantastic facility and will be a great resource for us as we develop our Care & Support Team, incorporating the step-up beds and discharge to assess models of care will enable people to stay at home longer or be discharged quicker from hospital.</p> <p>Belford Hospital capital project is paused.</p> <p><u>Lochaber Community Redesign:</u> The Lochaber Community main elements continue to be focussed around the following work established workstreams: .</p>

- Project 1 – Living/ Waiting Well
- Project 2 - Developing Care at home service and MDT support worker roles
- Project 3 – Single Point of Access (SPOA) Service
- Project 4 – Frailty service
- Project 5 – Intermediate Care Services

The project topics represent the priority areas of focus for redesign and development of a high-level programme of work aligned to the Local Care Model Framework incorporating the Rainbow Model, developed in Caithness and the North Coast redesign work.

The projects demonstrate the interoperability and mutually supportive approach across health development in Lochaber.

3. Joint Inspection Adult Support and Protection for Highland HSCP Area

All Health and Social Care staff contribute to the risk assessment, support and protection of adults at risk of harm as defined by the Adult Support and Protection (Scotland) Act 2007, including; Community Nursing and Midwifery, GP’s, dental staff and allied Health Professionals, Social Workers and adult social care support staff including care home staff and care at home staff, and our public protection partners such as Police, fire and rescue and Highland Council Colleagues for example housing.

Scottish Ministers requested the Care Inspectorate, Healthcare Improvement Scotland, and His Majesty’s Inspectorate of Constabulary in Scotland carry out a phase 2 joint inspection of adult support and protection in six partnership areas (those previously inspected in 2017) in Scotland.

The purpose of this joint inspection is to seek assurance that adults at risk of harm in Scotland are supported and protected by existing national and local adult support and protection arrangements.

The Care Inspectorate will lead this programme which is based on a 13 week programme. The Care Inspectorate has attended NHS Highland and met with key stakeholders to engage them in the work required for the inspection.

Methodology: The Inspectorate will scrutinise partnerships’ **key processes** (duty to inquire, investigation, management of risk etc.) to ensure adults at risk of harm are safe, protected and supported. They will look at **leadership** for adult support and protection within the partnership.

The joint inspection will:

- scrutinise the social work, police, and health records of adult at risk of harm
- scrutinise the recordings of duty to inquire episodes related to adults at risk of harm
- survey of staff within the adult protection partnership
- analyse minimal documentary evidence and a succinct position statement submitted by the partnership.
- engage frontline staff and middle managers focus groups, and discussion with senior managers.

The Inspectorate have developed quality indicators and quality illustrations for this joint inspection.

Partnership's submission and supporting evidence

- The Inspectorate have a supporting evidence request document for partnerships.
- Partnerships are asked to submit **best evidence not all evidence – 20 – 25 documents maximum**
- The Inspectorate ask partnerships to submit a **succinct position statement** (*maximum of 20 pages*). We will provide guidance on format and content.
- The Care Inspectorate ask partnerships to populate our template (provided) with details of their stated timescales for the completion of various elements of adult protection activity – initial inquiries, investigations.

Discussion of findings with partnership & reporting

- After file reading, the Inspectorate will provide the partnership with written copies of the data from:
 - staff survey
 - analysis of partnership's handling of initial inquiries
 - main file reading analysis.
 - Following file reading, the Inspectorate will meet with the partnership to discuss their joint inspection findings.
 - The Partnership will get the opportunity to check factual accuracy of our draft report prior to publication.
 - The Inspectorate reports will **not** provide evaluations using the standard six-point scale, rather they will provide concise judgements on progress with key processes for adult support and protection and leadership.
 - Joint inspection reports will be published on the websites of the Care Inspectorate, Healthcare Improvement Scotland and HMICS. The Inspectorate will ask the partnership for an improvement plan.

Key Dates: file reading and meeting activity

- Staff survey opened 29 January, closed 16 February 2024
- Initial Partnership Return – noon, 26 January
- Case sample sent to Partnership – 5 February
- Professional Discussion 1 – 8 February
- Key Processes Meeting – 26 February
- Draft report sent to partnership for factual accuracy – 8 April
- Professional Discussion 2 – 10 April
- Embargoed report 23 April

4. Enhanced Services

The proposal for Enhanced Services that was communicated to General Practice has been paused and a revisit of communication and engagement governance with GP Sub Committee and Local Area Medical Committee (LMC) representation has taken place. An agreed governance and communication framework between NHS Highland and LMC is being developed and meetings focussed on Enhanced Services position are planned in order to negotiate and agree a position that is clear for practices from 1st April; and how we develop contracts going forward.