

NHS Highland



Meeting: Highland Health and Social Care Committee

Meeting date: 7th May 2025

Title: Implementation of the Highland HSCP Joint Strategic Plan

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

Report Authors: Rhiannon Boydell, Head of Integration, Planning and Performance, HHSCP
Fiona Malcolm, Chief Officer – Integrated People Services, The Highland Council

Report Recommendation: The Committee are asked to accept moderate assurance that the Joint Strategic Plan is being Implemented effectively through partnership approaches.

1 Purpose

This is presented to the Board for:

- Assurance

This report relates to a:

- NHS Board/Integration Joint Board Strategy or Direction

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

Safe, Effective and Person Centred

This report relates to the following Strategic Outcome(s)

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

2 Report summary

2.1 Situation

This report provides an overview of the transformation and planning work currently being undertaken by Highland Health and Social Care Partnership which will result in the implementation of the Joint Strategic Plan

2.2 Background

The Highland Health and Social Care Partnership Joint Adult Services Strategic Plan 2024 – 27 is entering it’s second year of implementation. The plan sets out the direction for Health and Social Care in Highland for the period 2024 - 2027 and also the way in which the plan will be delivered, through engagement and collaboration with communities and partners. The plan acknowledges the challenges facing health and social care delivery, including service availability / capacity, financial and workforce challenges.

The plan committed to taking forward implementation in Districts and a Strategic Charter, “Home is Best”, was developed to assist with local service planning through District Planning Groups. The work of the District Planning groups in shaping the strategy to their localities is overseen by the Strategic Planning Group.

Within NHS Highland, transformational change plans are taken forward within the Strategic Transformation Accountability Group (STAG) structure. All work streams align with the Joint Strategic Plan and contribute to the plan implementation. This includes work specific to Adult Social Care which is identified in the Highland Council Delivery Plan and is led by the Chief Officer – Integrated People Services in the Highland Council, as a People Transformation Programme.

2.3 Assessment

Strategic and District Planning Groups

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 the national health and wellbeing outcomes.

This same Act also directs that a **Strategic Planning Group** requires to be established and in place in to support the development of the Joint Strategic Plan.

The group continues to have oversight of the implementation of the Joint Strategic Plan.

District Planning Groups (DPGs) were established in April 2024 and had their initial meetings during April and May. They 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.

Meetings are scheduled every 3 months in line with the Strategic Planning Group and are 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 1 st Meeting	Date 2 nd Meeting	Date 3 rd Meeting	Date 4 th meeting
Caithness	08/04/2024	23/08/2024	06/11/2024	10/02/2025
Nairn	16/04/2024	27/08/2024	05/11/2024	17/02/2025
Mid Ross	16/04/2024	13/08/2024	08/11/2024	14/03/2025
Sutherland	26/04/2024	Planned for 07/08/2024. Cancelled due to low attendance	10/12/2024	Planned for 11/03/25, cancelled due to low attendance
Lochaber	29/04/2024	01/08/2024	04/11/2024	06/02/2025
Skye, Lochalsh, Wester Ross	01/05/2024	12/09/2024	13/12/2024	12/03/2025
East Ross	09/05/2024	30/07/2024 (People Thematic Group)	05/11/2024	21/01/2025
Badenoch and Strathspey	13/05/2024	28/08/2024	11/11/2024	18/03/2025 Minutes not available at time of writing.
Inverness	14/05/2024	22/08/2024	05/11/2024	26/03/2025 Minutes not available at the time of writing)

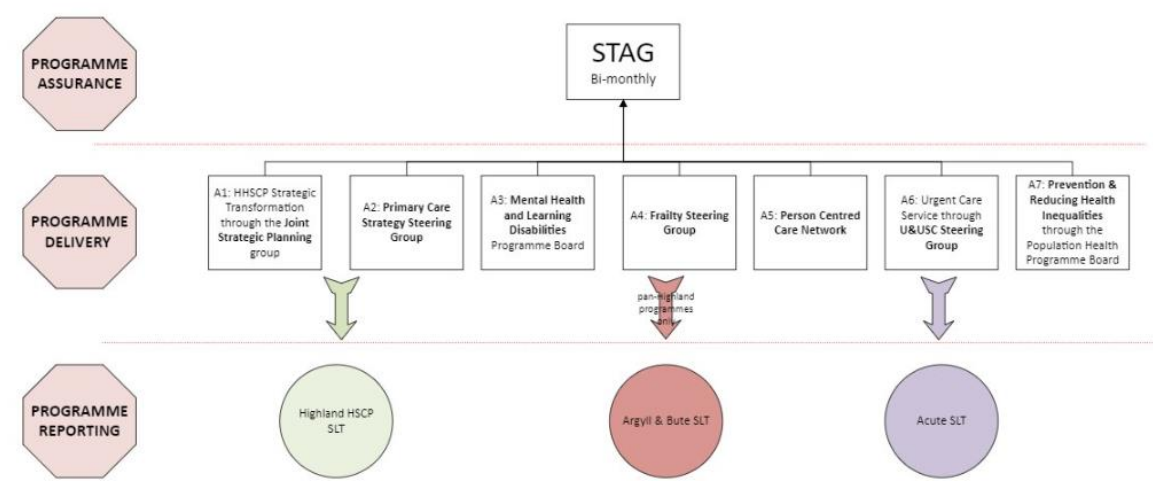
Key priority areas raised in the latest meetings include:

- Workforce challenges. Discussion has included opportunities for work experience and apprenticeships, enabling the workforce to be adaptable, flexible and innovative, actions to address recruitment challenges, child care
- Integrating care provision – concerns about future models and ongoing integration of health and social care.
- Alternatives to hospital acute hospital admission and attendance
- Expanding and maintaining membership
- Addressing Delayed Discharges
- Working with the third and voluntary sectors
- Opportunities to work differently with the communities to share plans and work together across the age ranges from cradle to grave
- Collaborative working
- Mental health and psychiatric service access
- Access to vaccinations services

All District Planning Groups receive feedback on the content and discussion of the last Strategic Planning group meeting and received the overview of the Adult Social Care Transformation Programme as delivered to the Strategic Planning Group development session in November.

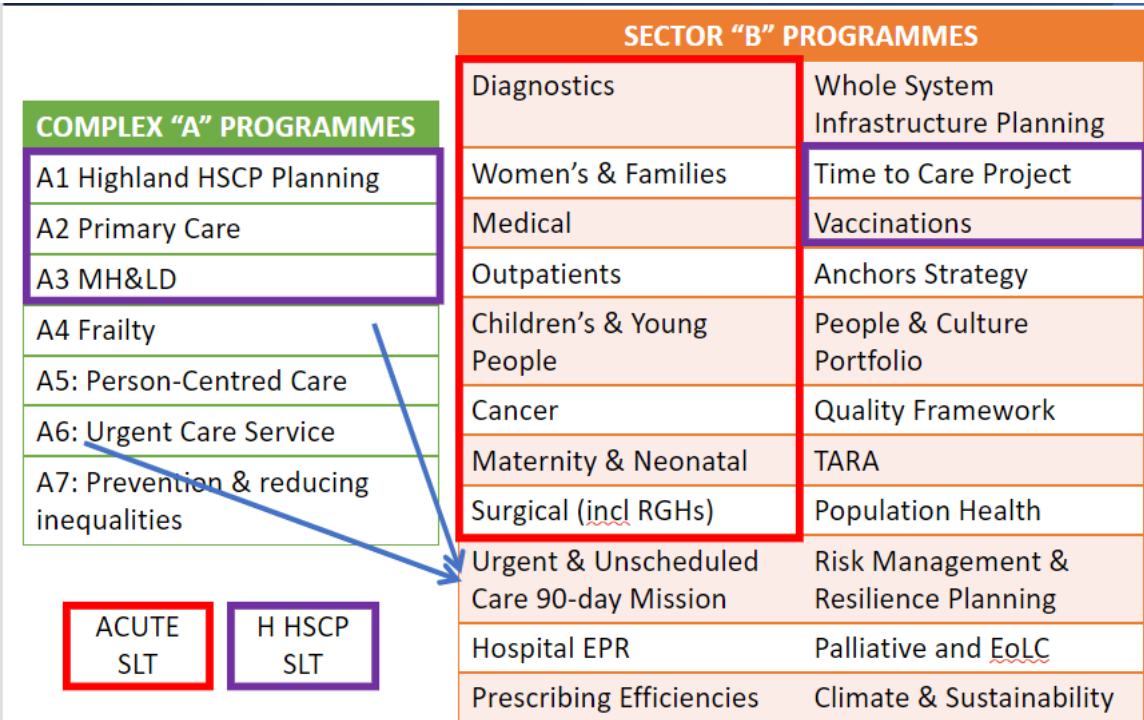
NHS Highland Strategic Transformation Accountability Group

Highland HSCP are delivering a number of complex transformation programmes which are overseen the formal Strategic Accountability Assurance group due to the complex nature. They are illustrated in the diagram below, which also illustrates the interdependencies with the acute system, and for pan highland programmes, also with Argyll and Bute. Work streams overseen by STAG are referred to as A programmes.



Highland HSCP also has a number of programmes, referred to as “B” programmes which are overseen by the HSCP Senior Leadership Team and

monitored by the formal STAG on a regular basis. These relate to single services or programmes with effect within HSCP teams only and are illustrated in the following diagram along with those led by Acute:



Transformation Programme

The vision outlined in the Partnership's Strategic Plan is vital for the successful delivery of the transformation programme which is being delivered jointly with the Highland Council.

In terms of that programme it should be noted that a sum of £20m has been identified by the Highland Council from reserves to support the delivery of change. A programme board has been developed which is attended by officers from both organisations which supports the delivery of 2 principal workstreams as follows:-

- Shifting the Balance of Care and Accommodation Solutions
- Improving Transitions Outcomes

The vision provides for: *'Working together to support our communities in Highland to live healthy lives, achieve their potential, and live independently where possible.'* This requires transforming service delivery, with a focus on shifting the balance of care to support people in their homes and communities for as long as possible.

It is also necessary to address accommodation solutions to meet the diverse needs of all age groups, which is relevant to both work streams namely older adults and younger adults including those transitioning from children's services.

A key aspect of these changes is the development of a Target Operating Model (TOM), which outlines how care services will be delivered, with an emphasis on reducing reliance on residential care. The TOM has been approved by the Joint Monitoring Committee and is attached as Appendix 1 to this report. It articulates the projects within the programme and serves as the focus for all projects in the Adult Social Care Transformation Programme.

More specifically the Highland Council has now purchased Moss Park Care Home in Caol, Fort William, which is now being operated by NHS Highland from 1st April 2025 as the registered care provider, in line with the lead agency model of integration in Highland HSCP. The aim of taking over the service is to secure care home provision in Lochaber for the next 2-3 years. In the longer term, a different care model, consistent with the aims set out in the Joint Strategic Plan.

A Strategic Outline Business Case is being developed and is exploring all options for the future delivery of care services in Lochaber that would be consistent with an overall strategic plan for the wider Highland HSCP area and the aims of the Joint Strategic Plan.

The first stage of this work will comprise the development of the strategic objectives and desired outcomes and is expected to take up to 3 months. An update will be brought to the Highland Council in June to request capital funding. The required housing solutions will require to be provided by the Highland Council in terms of the service model. A Principal Project Manager was appointed by Highland Council on 10 March 2025, who will lead the Project.

As part of the governance review, an Adult Social Care Programme Board has been established. The first meeting took place on 11 March 2025, and future meetings will take place approximately every six weeks. The Adult Social Care Programme Board has identified a number of strategic priorities including a Care Home Strategy, Care at Home Strategy and a Commissioning Framework which are being developed now at pace, to support service transformation.

The Adult Social Care Transformation Programme sits within the A1 Highland HSCP Planning STAG programme as illustrated in the diagram above.

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 in that transformation work is occurring in partnership, is managed, monitored and has oversight.

3 Impact Analysis

3.1 Quality/ Patient Care

Quality and patient care are expected to improve as a result of the transformation work. Work is undertaken through Project Implementation Plans which identify quality and patient care benefits.

3.2 Workforce

Transformation work may affect the way in which the workforce is structured and the way in which they work, including the development of new processes and roles. Work streams may aim to improve conditions for the workforce including new development opportunities and improved staff experience.

3.3 Financial

Financial efficiencies and savings are expected as a result of transformation work.

3.4 Risk Assessment/Management

Risks are identified and managed in the transformation work streams through project management methodology and risk and impact assessments for each work stream.

3.5 Data Protection

The work described in this report does not use person identifiable information.

3.6 Equality and Diversity, including health inequalities

Transformational work streams are managed through a project management approach which includes an impact assessment for each work stream. The implementation of the Joint Strategic Plan is supported by an Equalities and Impact Assessment and a Joint Strategic Needs assessment.

3.7 Other impacts

3.8 Communication, involvement, engagement and consultation

The District Planning Group role is primarily to engage with local communities and to enable localised implementation of the JSP to local circumstances. They are one of a number of community engagement groups and as such have formal links to Community Planning Partnerships through the District Managers.

Transformational work streams include stakeholder working groups

3.9 Route to the Meeting

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

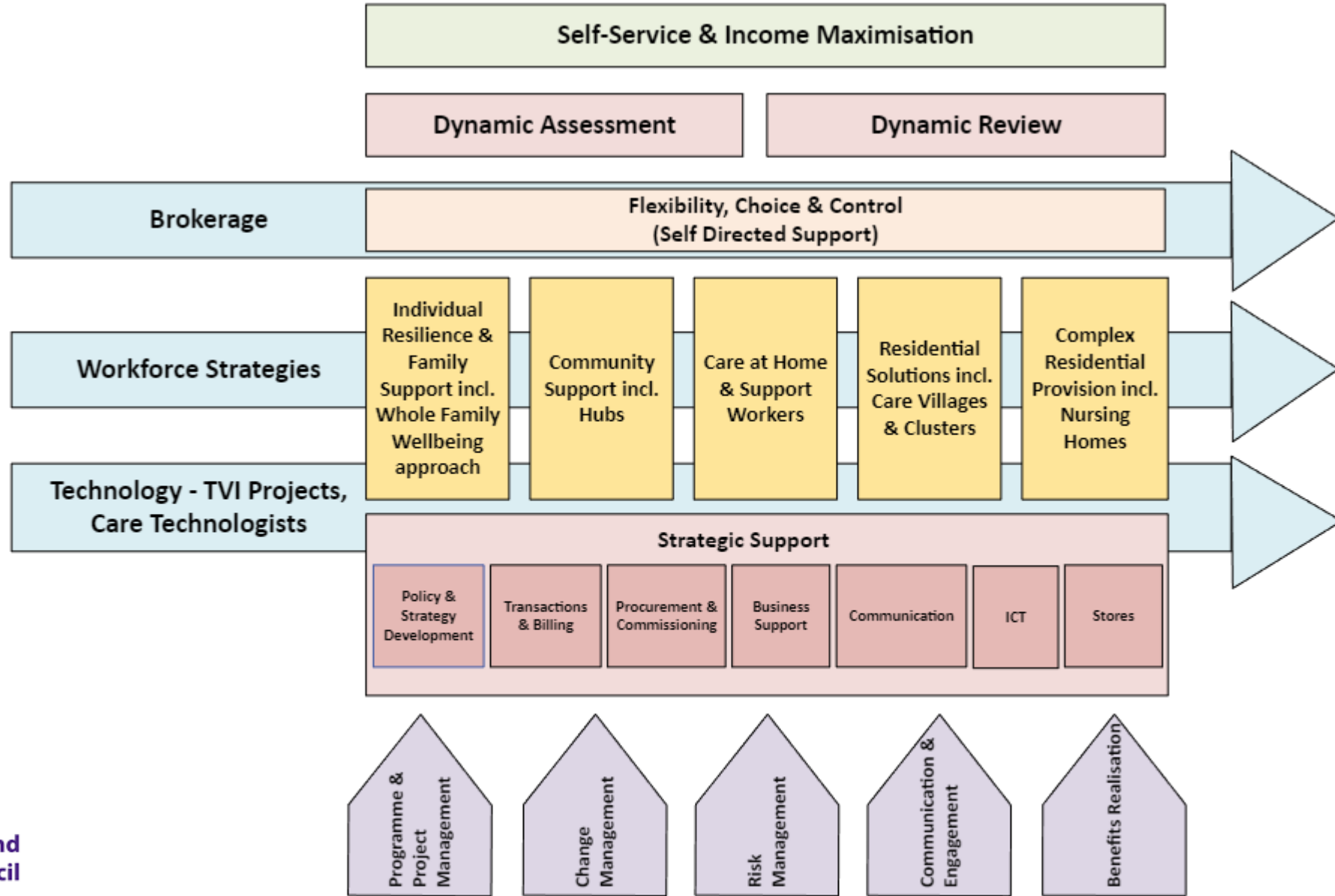
- The extent of the transformational work in the HSPC is considered by the Strategic Planning Group and at HSCP Senior Leadership Team
- The work is an integral part of the NHS Highland Executive Directors Group (EDG) Strategic Transformation Accountability Group (STAG)

4. List of appendices

The following appendices are included with this report:

- 1 Transformation Programme Adult Social Care Target Model (TOM)
- 2 B25 STAG HSCP Planning

Adult Social Care Target Operating Model



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

NHS Highland "B" Programmes Assurance Report



26/03/25

Item 3.5
Appendix 2

Programme	B25: Highland HSCP Planning Structure
Executive Lead	Pamela Stott
SRO	Rhiannon Boydell



Programme Charter:		Executive Summary and deliverables agreed March 2025						
Programme Definition:		Delivering a single planning structure for Highland HSCP that brings together planning activities including Annual Service Planning, Operational District Planning, Quality Improvement actions and strategic development of services in line with current and future HSCP delivery models. Data analysis commenced and framework of population need including pathways mapping.						
Area		Progress since last report	Actions/priorities for next report period	Risks and issues	Challenges for escalation	Measures of success	Timescale for completion	
District Planning Groups		Update on DPG activity provided to JSPG on 27/03	<ul style="list-style-type: none">DPG meetings planned quarterlyThemes raised by latest round of meetings summarised for discussion at JSPGFeedback will be provided at next DSG meetings			Communication and engagement with localities, currently on ASC Transformation and planning activity	Ongoing – quarterly meetings	
Joint Strategic Planning group		JSPG continues to meet quarterly	Next meeting 27/06 with agenda items: <ul style="list-style-type: none">ASC Transformation Programme updateJoint Strategic Needs Assessment presentationDistrict Planning Groups updateFinance position				Ongoing – quarterly meetings	
Whole Systems Planning Group for NHS Highland		Attendance at first meeting along with NHS and A&B colleagues, including alignment to regional and national planning	<ul style="list-style-type: none">Engagement on particular topic areas that impact across NHS Highland and ensuring continuous communications loop between local, board, regional and national planning activity			Planning activities at regional, national and board level align with Highland HSCP planning activity.	Ongoing	
Articulate single planning structure for Highland HSCP		Agreement of deliverable to articulate single planning structure for Highland HSCP through an SOP by June 2025	<ul style="list-style-type: none">Develop SOP and share through Highland HSCP SLT in first instance			Agree SOP to articulate Highland HSCP planning structure	June 2025	
Reporting against NHS Highland’s Annual Delivery Plan		Deliverables agreed for ADP 25/26 in relevant Well themes	<ul style="list-style-type: none">Session to be arranged to agree KPIs for reporting through HHSCP IPQR and Performance ReviewsQ4 24/25 ADP Deliverables reporting to SLT in April 2025, before moving to EDG & FRPC in May			Completion of agreed ADP deliverables – review of Q1 25/26 in July 2025	Quarterly reporting on ADP deliverables in 2025/26	
Annual Performance Report		Initial engagement with S&T on production of this year’s Annual Performance Report	<ul style="list-style-type: none">Developing timeline for production of Highland HSCP Annual Performance ReportOn agenda for Community SLT April 2025			Report presented to Highland Health and Social Care Committee	End of September 2025	