Strategic Partnership Highlight



& Exception Report

Strategic Partnership (Name of Partnership you are reporting on)	Argyll & Bute Health & Care Strategic Partnership
CPP Thematic Group (i.e Economy, Environment or Social Affairs)	Social Affairs
CPP Outcome (please select – you can select more than one outcome)	CPP/CP01 – competitive and successful businesses
Please refer to attached table for more detail on each CPP Outcome.	CPP/CP02 – sustainable economic assets
	CPP/CP03 – vibrant towns that are centres of economic growth
	CPP/CP04 – promoting our cultural, social and natural heritage
	CPP/CP05 – Utilising our environment to create employment and prosperity
	CPP/CP06 – Protecting our unique area
	CPP/CP07 – services are planned and delivered based on local need
	CPP/CP08 – overall health, wellbeing, independence and social inclusion are improved
	x CPP/CP09 – people feel safe and secure
	CPP/CP010 – our diverse culture is celebrated

Activity Summary in Period (please state period you are reporting on)	3rd quarter 2011/12	
Key Challenges & Actions to Address	 Strategic Planning for Re-shaping Older People's services / Change Fund Initial draft has been accepted on high level information, however the detailed action plan still to be signed off that confirms disinvestment plan on the CHP side. Proposal is that Council will reduce the commissioning care home budget by £0.5 m over three years. An equivalent proposal is required from CHP prior to investment plan being signed off. £1.7 million (limited to 3 years) revenue is available and in order to facilitate the re-design of social care, housing third sector and CHP services. Action Plan is ready for implementation from 1st April 2012 and meets the Government requirements for developing services in partnership with the 3rd sector and services specifically to support carers. E-Care agenda.NHS system being implemented in Bute. Timescale for the system to be used across the area and linking into Council's Care First system to be determined. No progress on the development of a single, integrated system is being made on this matter either locally or nationally. Mental Health redesigns (CHP). Confirmation from Scottish Government is available to confirm that a revenue option for funding the new facility is now accessible. Timescale for new hospital building is the summer of 2014. Older Persons' re-design (Council). Project Board of 27th confirmed that Day services would go to tender; outcome will be reported to Project Board on 23rd February 2012. The Home Care service will proceed to tender on 1st February 2012 and return to a Project Board by the end of April As previously reported, the sustainability of the Care Homes will be re-visited. Learning Disability re-design (Council). The Pre Qualifying Questionnaire being progressed was be presented to the Project Board on 7th December 2011. It was agreed that there should be further consultation with staff in order that a 	

- decision on whether to proceed to tender or retain the service in house can be made on 23rd February 2012.
- 6. Community model of care for older people's services being phased in on Bute. The Head of Adult Care and general Manager of the CHP have been leading the implementation of this model via a number of presentations to staff throughout the council area during January 2012 concluding in Campbeltown on 2nd February 2012.
- 7. Integration of CHP and Adult Care Services (Council). Discussion paper has been approved by the Council and NHS Highland Board. Further detailed work plan to be agreed by Chief Executives of Council & NHS Highland. There has been no progress on this matter due to lack of participation from NHS Highland. Indications are that once the new integrated model is implemented in north Highland with Highland Council on 1st April, NHS Highland will then have capacity to proceed on negotiations with Argyll & Bute. A Ministerial announcement prior to Christmas confirmed a move away from the proposal of a single care agency managed within the NHS towards an integrated model based on a partnership approach across health and social care which would be accountable to the Chief Executives of each partner. This will be endorsed by new legislation and it is expected that formal consultation by the Scottish Government will proceed during May/June 2012.

8. Performance Issues:

- Balance of Care for Older People. Target has been increased to 70% at home. Evidence indicates that present practice is achieving 73.6% (Dec 2011) for the current year 2011/12 while the overall figure is at 67% due to significant number of historical admissions who would no longer meet the criteria for admission.
- Delayed Discharge. Partnership has consistently achieved the national 0/0 target with the exception of one month during 2010/11. Priority has moved to reducing the overall number and reducing the number of unplanned admissions to hospital by implementing a new community model of care which will reduce admissions and cut of the delayed discharges at source. The proposal is highly dependent upon GP's using the alternative services as opposed to admission to hospital. The total number of Delayed Discharges remains low (9 for January 2012) and the number of bed days lost continues to fall. Detailed information on the reason for admission/re-

	 admission continues to be absent from the CHP and will require some negotiation with the national statistical service, ISD, in order that the appropriate information is recorded and reported. Waiting list for Free Personal Care at home and residential care placements. There have been no waiting issues relating to finance during 2010/11. Any delays in relation to service delivery have been due to availability of staff and beds.
Name	James Robb, Head of Adult Care
Date	1 st February 2012

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