



Highland Council and NHS Highland - The Highland Partnership

Guidance on District Partnerships

August 2012

*Following lessons learned during 2012
from first 2 District Partnerships
in Lochaber and Caithness*

Background

As the Framework for Strategic Governance around the integrated services for Children and Adults has been evolving, the Partnership of the Council and Health Board has recognised the unique responsibility held by elected Councillors.

As well as ensuring the efficient and effective management of services for which they are accountable, they are also general advocates on behalf of their constituents in relation to a wide range of issues impacting on their communities.

The Partnership of the Council and Health Board has recognised this role by proposing the establishment of a series of District Partnerships. These will be action focussed and will provide a clear two-way link between strategic direction and local solutions.

They will involve Councillors, relevant managers, community representatives and representatives of professional groups (Social Work, Nursing, GPs and so on).

The role and remit of these District Partnerships is described in more detail below.

This is likely to also involve some rationalisation of existing local groups who also deal with health and social care issues, to avoid duplication and overlap.

Role and Remit of District Partnerships

The District Partnerships will consider issues relevant to the defined geographic and service delivery area covering both Integrated Children's Services and Adult Services and will be a key element of local engagement. Their role and remit is to:

1. consider issues raised in relation to local service delivery and ensure that these are addressed either by local management or referred to the relevant Chief Executives of the NHS Highland or Highland Council;
2. identify key local issues and priorities in relation to the delivery of strategy and policy in services for children and adults;
3. consider and comment on performance management and monitoring reports on children and adult services outcomes in the local area;
4. consider the development and implementation of initiatives approved by the strategic governance structure;
5. propose new developments and initiatives for the consideration of the strategic governance structure; and
6. provide views on the redesign of local services, as appropriate

Strategic Governance Structure

The responsibility for strategic planning, resourcing and decision making in both children's and adult services lies with the governance committee for each lead agency, as set out in the Partnership Agreement.

For Highland Council, and with regard to integrated children's services, this is the Adult and Children's Services Committee. For NHS Highland, and with regard to services for adult and health provision (including child health services that are not delegated), this is the Health and Social Care Governance Committee.

Each governance committee has nine members who have the remit of ensuring good links and communication with a District Partnership, also ensuring that strategic decision making is informed by local views and circumstances.

Chairman

The Chair of each District Partnership will come from either the Lead District Partnership Member on the NHS Board or the Lead District Partnership Member on Highland Council's Adult and Children's Services Committee.

It is envisaged that the two Members will determine this between themselves, but failing that, the Chair will be confirmed by the Leader of the Highland Council and Chair of NHS Highland.

Assessment Panel

This Panel will draw from the District Partnership core membership and will consist of the Chairman, Council Ward Manager, Adult Services Manager and Children's Services Manager.

The purpose of the Panel is to consider requested agenda items for meetings and accept, reject or re-direct them as appropriate. Items will be assessed 21 days in advance of the Partnership meeting taking place. A sample of the agenda request form is attached.

If an item is accepted, the Panel may consider that due to its sensitivity it should be discussed either partially or wholly in private.

Attendance

Core membership:

- NHS Board Member or other representative of the Operations Committee (1)
- Adult and Children's Services Committee Member (1)
- Highland Council Elected Member representative of each Council Ward in the areas of the District Partnership (1 from each Ward). (The 9 Members appointed by Adult & Children's Services Committee as District Partnership Lead Members will be the representative from their Ward on the DP)
- Council Ward Manager (facilitation role)
- Nursing representative
- Associated School group representation to include 1 secondary HT, one primary HT and one colleague representing youth services*
- ECS management
- Children's services management (1)
- Adult services management (1)
- Ambulance service (1)
- Voluntary sector (1)
- Independent Sector (1)

*To ensure best use of time ASGs should ensure attendance for items relevant to their area. However ASG's must ensure a minimum presence per district of 1 secondary HT, one primary HT and one colleague representing youth services at all meetings.

Casual attendance:

The assessment panel will extend a meeting invite(s) to appropriate others as and when required dependant on the items being discussed.

Meeting

The District Partnership will meet 4 times per annum, in public. (Whilst District Partnerships are not public meetings, a slot will be scheduled at the end of each agenda to listen to any public views or suggestions). The action points arising from the District Partnership will be considered by the relevant strategic governance body of both NHS Highland and The Highland Council.

The meeting will be facilitated by the local Council Ward Manager, with focussed agendas and action points.

There will be one meeting taken in two sections to deal with Integrated Children's Services and Integrated Adult Services.

Agenda for and Action Points from each meeting will be uploaded onto the following websites as a minimum: For Highlands Children; For Highlands Communities; Highland Life.

The meetings must be promoted to the general public using appropriate means agreed by the District partnership in addition to the above. i.e. through a press release, display of posters etc.

Review

A review of District Partnerships will take place within 18 months.

A flow diagram is encompassed in this guidance to illustrate the intended functioning of the District Partnership.

A worked example for illustrative purposes only is attached at the end of the guidance

SKYE, LOCHALSH AND WESTER ROSS DISTRICT PARTNERSHIP

AGENDA item request

This form is to be used when requesting items to be placed on the Skye, Lochalsh and Wester Ross District Partnership agenda. Forms must be submitted at least **21 days** prior to the partnership meeting taking place.

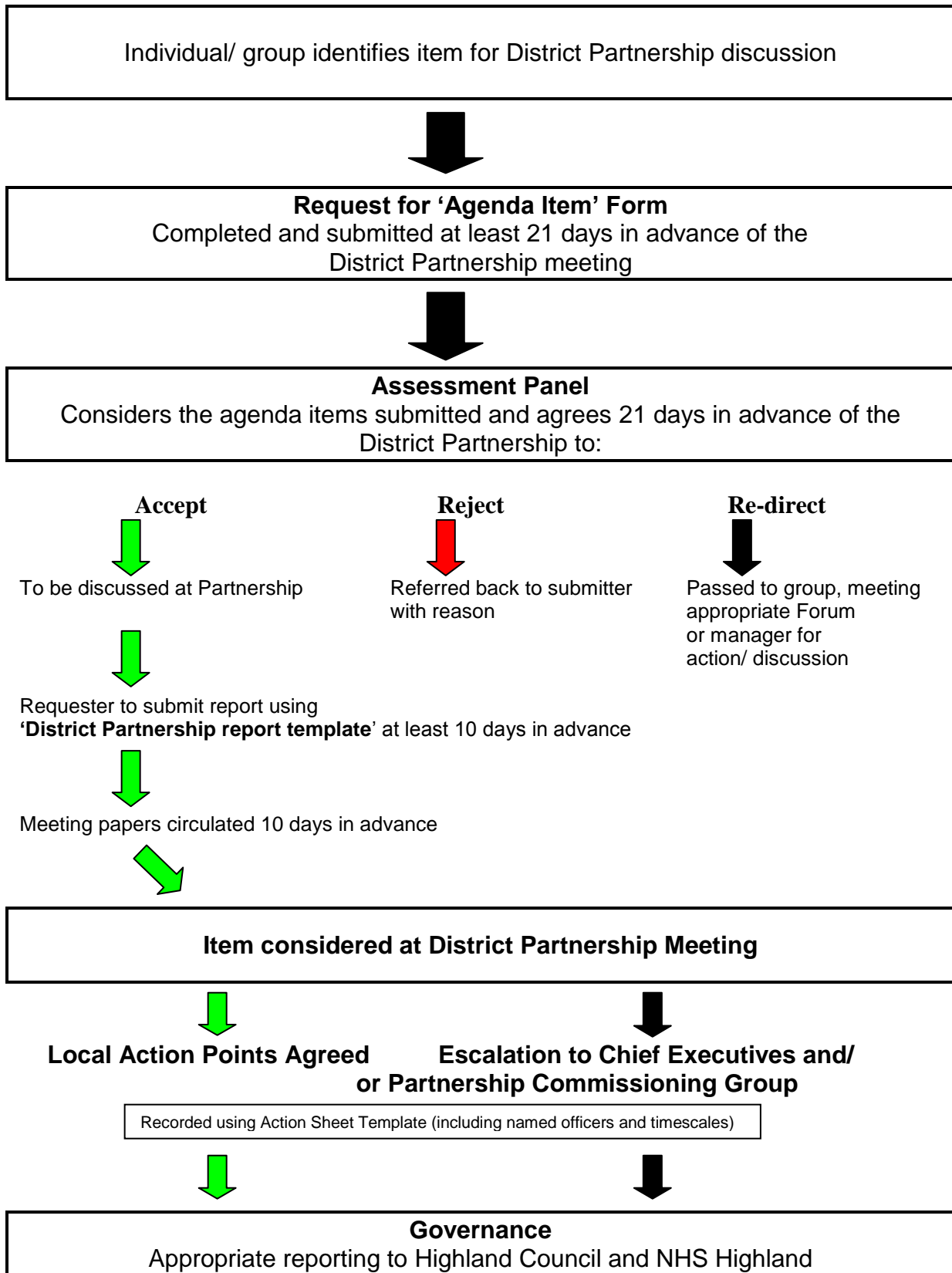
Persons requesting the item will be notified by email if it has been accepted. At this stage supporting documentation will need to be forwarded at least 10 days in advance of the meeting (see report template). Please email your completed form back to: liz.cowie@highland.gov.uk. Contact tel: 01478 613849. Requests should be no longer than 2 A4 sides (12pt font).

Organisation/service/agency /Strategic Board requesting item		
Named contact		
Email address		
Phone contact	Landline	
	mobile	
Address		

Item subject heading	
Brief descriptor of item (no more than 750 characters with spaces)	
Has this item been presented to the LDP before or any other partnership/forum/grouping for discussion or action? (If so, please indicate grouping and meeting date(s))	
What action/outcome(s) are you seeking from the Partnership?	
- - -	
Does anyone else need to be invited to participate in the discussion (beyond the core membership of the Partnership)? If so please provide the organisation(s) name, individual's name, e-mail and phone contact:	
1. 2. 3. 4.	
How much time do you estimate you require to present your item (include discussion time)	

DISTRICT PARTNERSHIP

DISCUSSION FLOW



SAMPLE

A WORKED EXAMPLE - LOCHABER DISTRICT PARTNERSHIP

Agenda item	
Report number	
Meeting date	

Report Title	December 2012 storms
Report by	Dot Ferguson, Snr Wards Manager, RSL
Organisation	The Highland Council

Situation Summary – This report sets out the issues arising from a severe storm which hit Lochaber in early December, the resulting damage and consequences and identifies actions already undertaken / underway to limit future problems.

1	<p><u>Background</u></p> <p>On 8 December 2011, Lochaber was hit by a severe storm resulting in:</p> <ul style="list-style-type: none">- the area being temporarily cut off by road;- power cuts across a large part of the area and loss of some landline and most mobile phone communications as well as- some IT systems;- high risk of flooding in Caol. <p>Of primary concern to this Partnership is the:</p> <ul style="list-style-type: none">- loss of power to the Belford Hospital;- identification of vulnerable clients for both NHS and Social Work;- liaison with external support groups e.g. Red Cross;- resilience within local communities to withstand prolonged periods without power and water
2	<p><u>Assessment</u></p> <p><i>2.1 Loss of Power to the Belford Hospital</i></p> <p>The Belford Hospital suffered a loss of power on the morning of the 8 December necessitating the use of back-up generators. Unfortunately an initial problem was experienced with the operation of the generators. This was resolved and generator operation monitored closely until power was restored. As a result of operating on generator power, the hospital was required to reduce power requirements to a minimum to maintain continuity of core services to operate at a safe level. This is a normal outcome of reverting to generator power supply. The initial problem with generator functionality was found to be a result of lack of coolant and was resolved at the time of the incident. Procedures have been implemented to ensure that this does not reoccur.</p>

	<p>2.2 Identification of Vulnerable Clients for both NHS and Social Work</p> <p>Due to the high risk of flooding, it was agreed to open an evacuation centre in Caol. HC SW opened Caol Community Centre and Housing and Property began an evacuation process. However, due to IT systems being affected, it was difficult to ensure client lists were available. It has now been agreed that paper copies of such lists will be available (regular updates essential).</p> <p>Due to the ongoing power loss in West Lochaber, the Red Cross provided a support service to visit vulnerable people in their homes. The liaison for this had been through HC SW, but it became apparent that this did not necessarily include all NHS vulnerable clients. This situation should begin to ease with P4I, but discussions are now taking place at a local level to ensure no-one is missed.</p>
	<p>2.3 Liaison with External Support Groups</p> <p>Related to item 3, it is essential that a full range of contacts is available to all agencies etc working with vulnerable people for use in emergency situations. Liaison needs to consider/ include services such as Care @ Home and their Telecare Call Handling links with the Highland Hub. As a result of power outages, Telecare equipment alarms were activated however there was no follow up of this with the Hub which was required to manage the calls.</p>
	<p>2.4 Resilience within local communities</p> <p>While this event was unusual, it is considered that such severe weather will probably continue to happen and that communities may find themselves isolated from a range of services for some time. To minimise the impact of this, community resilience plans should be produced for each community and this work will involve a wide range of community and agency representatives</p>
3	<p><u>Summary of Action Points (APs) already completed / in progress</u></p> <p>AP1 Identification of vulnerable clients for both NHS and Social Work; NHS/SW by 06/12 AP2 Liaison with external support groups e.g. Red Cross: NHS/SW by 06/12 AP3 Development of community resilience plans: CSAT by 12/12</p>
	<p><u>Implications</u></p> <p>a) Resource – adequate resources will be required to ensure consistent power levels are maintained at the Belford b) Legal – there are no legal implications arising from this report c) Equality – there are no equality issues arising from this report d) Climate change – actions identified will help to mitigate effects of climate change and increase community resilience e) Risk – failure to address issues highlighted may result in a repetition / worsening of consequences</p>

Recommendation – the District Partnership is asked to consider the above actions and identify any further issues/ actions considered necessary to ensure the well-being of Lochaber residents when such difficulties arise again.