



**ANGUS HEALTH AND SOCIAL CARE**  
**INTEGRATION JOINT BOARD – 23 FEBRUARY 2022**  
**LEARNING AND PHYSICAL DISABILITY PRIORITY IMPROVEMENTS**  
**REPORT BY GAIL SMITH, CHIEF OFFICER**

**ABSTRACT**

This report provides an update to the Integration Joint Board (IJB) on the current position in relation to the implementation of the Learning and Physical Disability priority improvement plans. These are intended to address current challenges facing the service and to implement efficiency and sustainability actions in response to inflationary, demographic, and capacity demands. Our aim is to deliver sustainable services into the future within available resources. This Learning and Physical Disability priority improvement update has been merged into one report to reflect the progress made in developing a single Disability Service.

**1. RECOMMENDATIONS**

It is recommended that the Integration Joint Board: -

- (i) Notes the content of this report.
- (ii) Reduces the frequency of reporting on the Learning and Physical Disability Improvement Plan to annually, recognising that this improvement work is now well advanced. (Emerging issues can be highlighted in the general Strategic Planning Update Reports submitted to every second IJB).

**2. BACKGROUND**

The latest Learning and Physical Disability Improvement plans were approved by the IJB on 25 August 2021, (report IJB 41/21 and 42/21). The plans highlighted the current pressures associated with this sector of the population, newly emerging priorities, our current position, and early actions to achieve efficiencies. The plans enable existing resources to be used for areas of greatest need and support the service to respond to increased demand in a planned way, including disinvestment in some areas to allow investment in others.

The Learning and Physical Disability Improvement plans support the ambition within the Strategic Commissioning Plan of “shifting the balance of care to support more people in our communities and support people to greater independence for longer”. It supports all 4 of the strategic priorities within the Strategic Commissioning Plan, specifically in relation to strategic priority actions regarding housing solutions for those with varying needs, growing technology for the future, maximising support for promoting independence and promoting wellbeing approaches, reviewing day services, and improving integrated pathways. This will ensure we have an approach that helps mitigate overall demand and inflationary pressures, focussing available resources on those who need it most.

**3. CURRENT POSITION**

Progress made to date with improvement activity continues to be significantly impacted due to the COVID pandemic, which includes the redirection of the dedicated Development Officer and Senior Planning Officer resource towards operational priorities during this time.

An update on the progress made is detailed in section 5 of this report.

#### **4. ENGAGEMENT**

The agreed finalised improvement plans, and corresponding action plans have been shared widely online via the Angus Health and Social Care website and social media, and letters have been sent out directly to key stakeholders. This provided all stakeholders with the opportunity to access the final improvement plans in a variety of accessible formats.

Engagement will continue through a variety of activities to make sure that local improvements and priorities continue to be informed by what is important to people, and that the range of services delivered are focussed on meeting local need. The impact of COVID means that we have needed to engage differently with people whilst ensuring that individuals and families can be engaged in a way that is meaningful and accessible to them. This may include online focussed working groups and updates via the Angus Health and Social Care Partnership website.

#### **5. PRIORITY AREAS**

Section 5 details progress made in priority action areas since the last update provided to the IJB in August 2021 (report IJB 41/21 and 42/21).

##### **5.1 Demographic Pressures**

It remains important that demographic pressures are identified so that we can anticipate new or increased demand and plan capacity in our services. Disability services are experiencing increasing demand for services due to demographic change, particularly in the areas of increased complexity of need, ageing carers, increasing numbers of people experiencing physical disability, and people with a learning disability and autism.

Adults with learning disabilities are experiencing greater longevity resulting in a diverse range of health needs developing as people grow older. They are often cared for by ageing parents. Anecdotal evidence also suggests the population of adults with a learning disability who have complex needs and co-existing conditions is also increasing.

Work therefore continues on developing a data set for both Learning and Physical Disability services, that will capture the necessary information required to evidence our local demographic demands and subsequent pressures. National benchmarking with other local authorities continues.

##### **5.2 Autism and Learning Disability**

There are currently a small number of individuals from Angus that have extreme challenging behaviour, learning disability and acutely complex autism. These individuals are likely to require a specialised environment unique to the individual in order to meet their specialist environmental needs, A significant support package would be provided by a group of specialist, consistent, suitably trained and equipped staff.

Work is ongoing to develop a sustainable accommodation specification to meet the accommodation needs of this complex group locally. This is being progressed with multi-disciplinary input to ensure it reflects the needs of the individuals. Work is ongoing to specify the requirements that would be made of a care provider to support the complex needs of these individuals and to clearly define the requirements of the service. The intention is to invite providers to bid for specialised, complex care.

##### **5.3 Support and Care, and Personal Care**

Work continues to review existing care packages and scrutiny continues to be applied to new packages to ensure outcomes are met in the most effective and efficient manner. Reviews are taking place within an existing supported accommodation provision to further explore the potential use of technology-enabled care to promote maximum independence within a supported environment. Due to the current workforce recruitment and retention issues, this will enable the available workforce to meet outcomes in a more targeted way. Work is being

undertaken to ensure that we attract and retain appropriate and high-quality care providers into Angus through reviewing current procurement processes.

A new role of Review Officer will be piloted within the service for a period of 12 months, commencing on 01 April 2022; this is a response to changing demographics, increasing pressures on the service and a need for increased practice scrutiny and quality assurance relating to complex care. Strategic Planning Group (SPG) approved funding for the Review Officer post from strategic financial reserve funds for a period of 12 months. This funding is non-recurring and, should the model be successful, the service will review their existing staffing structure to consider how this could be embedded into the service permanently within existing resources.

The Strategic Commissioning Plan for 2019 – 2022 identifies a growing demand for care provision. People are living longer with multiple and complex care needs that require more support from health and social care services. Local providers are finding this challenging and there is a lack of local knowledge, skill and expertise to meet the increasing complexity of need being presented. This is also an emerging national issue. There is a need to support local providers to develop the skills, knowledge and expertise to meet the increased complexity of need being presented and to ensure that good quality of care is provided. The introduction of a Review Officer will support these issues by providing advice and guidance based on national standards. This includes identifying areas for skills development and working with providers to access specialist training. The role will provide quality assurance and scrutiny of practice relating to complex care across disability services, and local multi-agency arrangements to promote the achievement of positive outcomes for adults with complex needs.

#### **5.4 Accommodation**

Reviews of supported accommodation contracts are being progressed; this has previously been delayed due to procurement capacity and more recently due to the impact of the COVID pandemic.

The accommodation databases highlight a need for additional supported accommodation throughout the Angus area, including additional accommodation for a group of people with complex needs, as described in section 5.2. We continue to work collaboratively with our housing colleagues through the Housing, Health and Social Care Strategy Group to identify any future housing requirements. This information has also been fed into the Housing Need and Demand Assessment.

Work has yet to commence on respite arrangements, also delayed by COVID and capacity issues.

A separate paper has been submitted regarding the replacement of the Gables Care Home.

#### **5.5 Day Services and Community Opportunities**

Pressures continue to increase in relation to the capacity of the existing day service provision provided by the Learning Disability Resource Centres across Angus to meet demand. To meet the outcomes of individuals in transition, we plan to re-allocate resources to recruit additional staff into the Resource Centres to increase the staffing capacity and provide the necessary levels of support.

A review of the current transition processes for young people with disabilities will be undertaken to ensure the relevant information is captured and that capacity and resource demands are accurately recorded to better inform future planning.

#### **5.6 Health Inequalities**

We will continue to challenge mainstream health services and highlight any inequalities experienced.

We require to meet the needs of individuals requiring emergency medication to manage epilepsy within the Learning Disability Resource Centres, through suitably trained staff. A Community Learning Disability Nurse has been trained to meet this requirement. This has

proved very successful in maintaining a local response to need in a more person-centred way and reduces health inequalities.

We intend to participate in a pilot project to enable a group of individuals with learning disabilities to understand their health care needs and participate in their own anticipatory care planning. Annual health checks for those with a learning disability are due to begin in March 2022 to provide local data on any unmet health needs.

Collaborative working with the COVID vaccination team has ensured that individuals who were unable to attend a vaccination centre received their COVID vaccinations and boosters through individualised support.

## 6. FINANCIAL IMPLICATIONS

The financial planning environment remains extremely challenging, compounded by the impact of the COVID pandemic. The AHSCP continues to drive forward the Disabilities Improvement Plan priorities, as per reports (41/21 & 42/21) with some cost savings realised in the financial year 21/22.

### 6.1 Learning Disability

Table 1 – Learning Disability Service Financial Plan

| <b><u>Financial Commitments</u></b>      | <b><u>2021/22</u></b> | <b><u>2022/23</u></b> | <b><u>2023/24</u></b> |
|--|-----------------------|-----------------------|-----------------------|
|  | £k                    | £k                    | £k                    |
| Demographics Growth                      | 200                   | 300                   | 300                   |
| Inflation                                | 400                   | 405                   | 420                   |
| Complex Care                             | 90                    | 0                     | 0                     |
| <b>Total</b>                             | <b>690</b>            | <b>705</b>            | <b>720</b>            |
| <b><u>Financial Benefits</u></b>         | <b><u>2021/22</u></b> | <b><u>2022/23</u></b> | <b><u>2023/24</u></b> |
|  | £k                    | £k                    | £k                    |
| Review of care packages                  | 100                   | 50                    | 30                    |
| Review of block contracts                | 41                    | 20                    | 21                    |
| Enhanced Housing Management              | 0                     | 50                    | 50                    |
| Explore TEC options                      | 0                     | TBC                   | TBC                   |
| Increase capacity in LD day service      | 0                     | 88                    | TBC                   |
| Explore accommodation options            | 0                     | TBC                   | TBC                   |
| Explore model of PBS                     | 0                     | TBC                   | TBC                   |
| <b>Total</b>                             | <b>141</b>            | <b>208</b>            | <b>101</b>            |
| <b><u>Overall Financial Position</u></b> | <b><u>2021/22</u></b> | <b><u>2022/23</u></b> | <b><u>2023/24</u></b> |
|  | £k                    | £k                    | £k                    |
| Annual Shortfall                         | 549                   | 497                   | 619                   |
| Cumulative Shortfall                     | 549                   | 1,046                 | 1,665                 |

The financial benefits realised in financial year 21/22 include work undertaken to review block contracts which identified underutilisation of 113 hours, equating to annual cost savings within Learning Disabilities of £61k, partial year benefit in 21/22 of £41k.

Resources were originally ear-marked to support young people transitioning into the service. However, through the improvement programme this requirement has been contained within

existing resources and the earmark, (£100k), has partially offset the shortfall on the original savings (£220k) as identified in the IJB Strategic Plan (report 04/21).

## 6.2 Physical Disability

Table 2 - Physical Disability Service Financial Plan (Source - report IJB 41/21)

| <b><u>Financial Commitments</u></b>      | <u>2021/22</u> | <u>2022/23</u> | <u>2023/24</u> |
|--|----------------|----------------|----------------|
|  | £k             | £k             | £k             |
| Demographic Growth                       | 100            | 100            | 100            |
| Inflation                                | 98             | 101            | 104            |
| <b>Total</b>                             | 198            | 201            | 204            |
| <b><u>Financial Benefits</u></b>         | <u>2021/22</u> | <u>2022/23</u> | <u>2023/24</u> |
|  | £k             | £k             | £k             |
| Review of care packages                  | 80             | 100            | 100            |
| Explore TEC options                      | 0              | TBC            | TBC            |
| Explore residential and respite options  | 0              | TBC            | TBC            |
| Review of PD day services                | 0              | TBC            | TBC            |
| <b>Total</b>                             | 80             | 100            | 100            |
| <b><u>Overall Financial Position</u></b> | <u>2021/22</u> | <u>2022/23</u> | <u>2023/24</u> |
|  | £k             | £k             | £k             |
| Annual Shortfall                         | 118            | 101            | 104            |
| Cumulative Shortfall                     | 118            | 219            | 323            |

Physical Disabilities continue to work towards realising cost mitigations within a challenging environment. The cumulative shortfall in this plan remains unaltered at £323k. Meanwhile the service's forecasted overspend for 2021/22 is c£1.3m. This highlights that the plan above is a small part of the overall picture regarding physical disability resourcing and the imperative to develop improvement plans further. The ongoing overspend on Physical Disability services continues to place an additional burden on the IJB's overall financial planning. An important requirement of the overall improvement plan is to review the budgets for Physical Disability services and recommendations will require to come back to the IJB in due course regarding this, setting out how services can be delivered from available resources.

A review of the current transition process will ensure all relevant information is available at the earliest opportunity to identify any future costs and any potential benefits. The introduction of the role of Review Officer will increase the level of scrutiny and quality assurance and ensure that the resources of the IJB are utilised in the most efficient way. As part of this role, the Review Officer will review all complex care packages and will ensure they are efficient and equitable, which will help to achieve the financial targets detailed in tables 1 and 2.

## 6.3 Community Living Change Fund

The Scottish Government non-recurring funding of £391k distributed through the Community Living Change Fund in February 2021 will continue to be held in reserves. The final report from the SLWG for Complex Care, co-chaired by the Scottish Government Director of Delivery, Integration, and the Head of Policy from COSLA is expected imminently and is expected to provide guidance around the use of the fund. This will be considered in line with the agreed priority areas within the improvement plans.

## 7. RISK

- (i) Issues with the recruitment and retention of required workforce to deliver complex care, particularly for care providers.
- (ii) Ongoing financial risks in relation to demographic growth and the affordability of services.
- (iii) Lack of capacity within staff groups to progress actions.

## 8. EQUALITY IMACT ASSESSMENT

An Equality Impact Assessment is required, see Appendix 1.

## 9. DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in Section 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Angus Council and NHS Tayside.

| <b>Direction Required to Angus Council, NHS Tayside or Both</b> | <b>Direction to:</b>          |   |
|---|-------------------------------|---|
|   | No Direction Required         | X |
|   | Angus Council                 |   |
|   | NHS Tayside                   |   |
|   | Angus Council and NHS Tayside |   |

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**EMAIL DETAILS:** [tay.angushscp@nhs.net](mailto:tay.angushscp@nhs.net)

List of Appendices:

Appendix 1 - Equality Impact Assessment



## EQUALITY IMPACT ASSESSMENT

### BACKGROUND

|  |   |
|--|---|
| <b>Date of Assessment:</b>   | 31 January 2022   |
| <b>Title of document being assessed:</b>   | Learning and Physical Disability Priority Improvements  |
| <b>1. This is a new policy, procedure, strategy or practice being assessed.</b><br>(If <b>Yes</b> please check box) <input type="checkbox"/><br><br><b>This is a new budget saving proposal</b><br>(If <b>Yes</b> please check box) <input type="checkbox"/> | <b>This is an existing policy, procedure, strategy or practice being assessed?</b><br>(If <b>Yes</b> please check box) <input checked="" type="checkbox"/> X<br><br><b>This is an existing budget saving proposal being reviewed</b><br>(If <b>Yes</b> please check box) <input checked="" type="checkbox"/> X  |
| <b>2. Please give details of the Lead Officer and the group responsible for considering the Equality Impact Assessment (EQIA)</b>  | Linda Kennedy, Service Leader.<br>Fiona Rennie, Principal Planning Officer.<br>Disabilities Improvements group.   |
| <b>3. Please give a brief description of the policy, procedure, strategy or practice being assessed, including its aims and objectives, actions and processes.</b>   | The current position in relation to the implementation of the Learning and Physical Disability priority improvements. These are intended to address current challenges facing the service and to implement efficiency and sustainability actions in response to inflationary, demographic, and capacity demands.  |
| <b>4. What are the intended outcomes of this policy, procedure, strategy or practice and who are the intended beneficiaries?</b>   | <p>The latest Learning and Physical Disability Improvement plans were approved by the IJB on 25 August 2021. The plans highlighted the current pressures associated with this sector of the population, newly emerging priorities, our current position and early actions to achieve efficiencies. The plans enable existing resources to be used for areas of greatest need and support the service to respond to increased demand in a planned way, including disinvestment in some areas to allow investment in others.</p> <p>The Learning and Physical Disability Improvement plans support the ambition within the Strategic Commissioning Plan of “shifting the balance of care to support more people in our communities and support people to greater independence for longer”. It supports all 4 of the strategic priorities within the Strategic Commissioning Plan.</p> |

|  |   |
|--|---|
| <p><b>5. Has any local consultation, improvement or research with protected characteristic communities informed the policy, procedure, strategy or practice being EQIA assessed here?</b></p> <p><b>If Yes, please give details.</b></p> | <p>A survey was made available to all members of the public and staff on the AHSCP website. Supported people, carers and family members were also sent individual letters inviting them to the planned engagement events. The letter included a link to the survey which they were invited to use to feedback their views. The survey was open for several weeks. Copies of the plan and feedback form were made available in British Sign Language and Easy-Read. Approximately 100 responses were received.</p> <p>This approach has supported individuals and communities to be at the heart of service planning, delivery and review and to have the opportunity to be involved in the planning, development, delivery and continuous improvement of services.</p> <p>Feedback from the engagement activities was used to inform the finalised Learning and Physical Disability Improvement Plans and action plans that were approved at IJB board in August 2021. In line with the national engagement standards, the finalised plans and action plans have been made available to the general public via the AHSCP website. Letters have been sent out to supported people, carers and family members to inform them of this.</p> <p>National statistics recorded in the Scottish Consortium for Learning Disabilities statistical release have been used to inform the plan as has local and national data from Carefirst, ISD and financial expenditure records.</p> <p>Demographic information from the 2018 Scottish Health Survey has been used to inform the Physical Disability plan as has local and national data from Carefirst, ISD and financial expenditure records.</p> |
| <p><b>6. Fairer Scotland duties:</b></p> <p><b>1) Does this report have an impact for Angus citizens under Fairer Scotland? No</b></p> <p><b>2) If yes, what are these implications and how will they be addressed?</b></p>              | <p>There are no negative implications for Angus citizens under Fairer Scotland duties.</p>  |



## **EQUALITY IMPACT ASSESSMENT (EQIA) - RELEVANCE SCREENING**

**1. Has the proposal already been assessed via an EQIA process for its impact on ALL of the protected characteristics of: age; disability; gender; gender re-assignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation?**

**Yes - (EQIA of 23/07/21)**

**1 a. Does the proposal have a potential to impact in ANY way on the public and/or service users holding any of the protected characteristics of age; disability; gender; gender reassignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation?**

**Yes - Proceed to the Full Equality Impact Assessment (EQIA).**

**1 b. Does the proposal have a potential to impact in ANY way on employees holding any of the protected characteristics of age; disability; gender; gender re-assignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation? This applies to employees of not only NHS Tayside and Angus Council, but also the 3<sup>rd</sup> sector.**

**Yes**

**2. Name: Linda Kennedy**

**Position: Service Leader**

**Date: 31 January 2022**



## FULL EQUALITY IMPACT ASSESSMENT (EQIA)

### Step 1.

**Is there any reason to believe the proposal could affect people differently due to their protected characteristic?** Using evidence (e.g. statistics, literature, consultation results, etc.), justify whether yes or no. If yes, specify whether impact is likely to be positive or negative and what actions will be taken to mitigate against the undesired impact of a negative discrimination. When considering impact, please consider impact on: health related behaviour; social environment; physical environment; and access to & quality of services of NHS Tayside, Angus Council or 3<sup>rd</sup> sector social justice.

#### 1a. The public and/or service users holding the Protected Characteristics:

|                   | POSITIVE IMPACT   | NEGATIVE IMPACT           | Intended mitigating actions against the b) Negative Discrimination   |
|-------------------|-------------------|---------------------------|--|
|                   | a)Positive Action | b)Negative discrimination |  |
| <b>AGE</b>        | X                 | X                         | Learning and Physical disability services are provided for adults with of a variety of ages. Some of the actions in the action plans could have either a positive or a negative impact on service users. There could be changes to the way current services are being delivered or to individuals care packages which could be seen to have negative impact depending on the changes.  |
| <b>GENDER</b>     |                   |                           |  |
| <b>DISABILITY</b> | X                 | X                         | As above comment. Some actions in the actions plans may have an impact on individuals who have particularly complex care needs, including people with a physical disability, learning disability and autism. The welfare of service users is paramount, and they will remain at the centre of any actions taken forward. We will aim to minimise impact to service users, taking in to account their needs and ensuring clear and consistent communication and engagement throughout the |

|   |   |   |   |
|---|---|---|---|
|   |   |   | duration of the improvement plans.  |
| <b>ETHNICITY/ RACE</b>  |   |   |   |
| <b>SEXUAL ORIENTATION</b>   |   |   |   |
| <b>RELIGION/ BELIEF</b>   |   |   |   |
| <b>GENDER REASSIGNMENT</b>  |   |   |   |
| <b>PREGNANCY/ MATERNITY</b>   |   |   |   |
| <b>OTHER: CARERS OF OLDER AND/OR DISABLED PEOPLE</b><br>(Although carers are not considered as a PC in itself, they are protected by the Equality Act 2010 from “discrimination by association” with the PCs of age and disability) | There is potential for some positive impact for some carers depending on the outcome of some of the actions to be progressed, this could be in relation to the service being provided, accommodation or individual care packages. | There is potential for some negative impact for some carers depending on the outcome of some of the actions to be progressed, this could be in relation to the service being provided, accommodation or individual care packages. | As point above. In addition to this, carers and family members will be involved in the ongoing consultation throughout the duration of the improvement plans. |

**1b. The employees holding the Protected Characteristics:**

|               | POSITIVE IMPACT   | NEGATIVE IMPACT           | Intended mitigating actions against the b) Negative Discrimination  |
|---------------|-------------------|---------------------------|---|
|               | a)Positive Action | b)Negative discrimination |   |
| <b>AGE</b>    | X                 | X                         | Some of the actions in the action plans could have either a positive or a negative impact on staff. There could be changes to the way current services are being delivered. These changes would impact those staff working in specified service areas regardless of age. Any age related issues would be supported as part of the change process. |
| <b>GENDER</b> | X                 | X                         | Some of the actions in the action plans could have either a positive or a negative impact on staff. There could be changes to the way current services are being delivered. These changes would impact those staff working in specified service areas regardless of gender. Any gender related issues would be supported                          |

|   |   |   |   |
|---|---|---|---|
|   |   |   | as part of the change process.  |
| <b>DISABILITY</b>   | X | X | It is possible that some staff may have disabilities. We would ensure that any disabilities were taken fully into account when considering any changes to the way current services are being delivered. E.g., working patterns and environment. This would include identifying any reasonable adjustments that would be required. |
| <b>ETHNICITY/ RACE</b>  |   |   |   |
| <b>SEXUAL ORIENTATION</b>   |   |   |   |
| <b>RELIGION/ BELIEF</b>   |   |   |   |
| <b>GENDER REASSIGNMENT</b>  |   |   |   |
| <b>MARRIAGE/CIVIL PARTNERSHIP</b>   |   |   |   |
| <b>PREGNANCY/ MATERNITY</b>   |   |   |   |
| <b>OTHER: CARERS OF OLDER AND/OR DISABLED PEOPLE</b><br>(Although carers are not considered as a PC in itself, they are protected by the Equality Act 2010 from “discrimination by association” with the PCs of age and disability) | X | X | It is possible that some staff affected are also unpaid carers. We would ensure that their caring responsibilities were taken fully into account when considering changes to role, working patterns etc that may be a result of changes to the way current services are being delivered.  |

**1c. Does the proposal promote good relations between any of the Protected Characteristics?**

YES

NO

NOT SURE

The Learning and Physical Disability Priority Improvements specifically promote the rights and upholds our legal responsibilities for people with a physical disability, learning disability and/or autism.

**1d. What steps will you take to collect the Equality Monitoring information needed to monitor impact of this proposal on PCs, and when will you do this?**

Equality monitoring information is collected annually in line with the equalities mainstreaming outcomes and monitoring arrangements.

**Where will the Equality Impact Assessment (EQIA) be published?**

Angus Health and Social Care Partnership page on Angus Council website.

## CONTACT INFORMATION

|   |   |
|---|---|
| <b>Name of Department or Partnership:</b> | <b>Angus Health and Social Care Partnership</b> |
|---|---|

| <b>Type of Document</b>       |                                     |
|-------------------------------|-------------------------------------|
| Human Resource Policy         | <input type="checkbox"/>            |
| General Policy                | <input type="checkbox"/>            |
| Strategy/Service              | <input checked="" type="checkbox"/> |
| Change Papers/Local Procedure | <input type="checkbox"/>            |
| Guidelines and Protocols      | <input type="checkbox"/>            |
| Other (please specify):       | <input type="checkbox"/>            |

| <b>Manager Responsible</b>                                     | <b>Author Responsible</b>                      |
|--|--|
| <b>Name: George Bowie</b>                                      | <b>Name: Fiona Rennie</b>                      |
| <b>Designation: Head of Community Health and Care Services</b> | <b>Designation: Principal Planning Officer</b> |
| <b>Base: Angus House, Forfar</b>                               | <b>Base: Angus House, Forfar</b>               |
| <b>Telephone: 01307 491806</b>                                 | <b>Telephone: 01307 492404</b>                 |
| <b>Email: BowieGS@angus.gov.uk</b>                             | <b>Email: RennieF@angus.gov.uk</b>             |

|  |                               |
|--|-------------------------------|
| <b>Signature of author of the policy:</b><br>Signed Fiona Rennie     | <b>Date: 23 February 2022</b> |
| <b>Signature of Director/Head of Service:</b><br>Signed George Bowie | <b>Date: 23 February 2022</b> |
| <b>Name of Director/Head of Service: George Bowie</b>                |                               |
| <b>Date of Next Plan Review: February 2023</b>                       |                               |

For additional information and advice please contact: [tay.angushscp@nhs.scot](mailto:tay.angushscp@nhs.scot)