#### INTEGRATION JOINT BOARD

## WOODHILL HOUSE, ABERDEEN, 30 OCTOBER, 2019

#### Integration Joint Board Members:

Mrs R Atkinson, (Chair); Councillor A Stirling (Vice-Chair); Councillor A Allan; Ms A Anderson; Ms J Duncan; Provost W Howatson (via Skype); Ms R Little; Councillor A Ross; Councillor D Robertson; and Ms S Webb.

#### Integration Joint Board Non-Voting Members:

Dr C Allan, Primary Care Advisor; Mrs J Gibb, Nursing Advisor; Mr D Hekelaar, Third Sector Representative; Mrs S Kinsey, Third Sector Representative; Mrs I Kirk, UNISON; Dr M Metcalfe, Acute Care Advisor; Mr I Ramsay, Chief Social Worker; Mr A Sharp, Chief Finance Officer; and Mrs A Wood, Interim Chief Officer.

#### Officers:

Mrs S Campbell, Mrs M Duncan, Mrs A MacLeod, Mr M Ogg, Mrs K Penman, Ms J Raine-Mitchell, Mr M Simpson, Mrs S Strachan, Aberdeenshire Health and Social Care Partnership (AHSCP); and Miss J McRobbie, Mrs A Overton, and Mrs J Stewart-Coxon, Aberdeenshire Council.

#### **Apologies:**

Mr M Mckay, UNISON; and Mrs A Mutch, Public Representative.

#### In Attendance:

Mr W Gault and Ms L Grugeon, Alcohol & Drugs Partnership.

# 1. DECLARATION OF MEMBERS' INTERESTS

Apologies were submitted from Mrs Angie Mutch and Mr Martin McKay.

The Chair asked for declarations of interest. No interests were intimated.

# 2A. STATEMENT OF EQUALITIES

In making decisions on the following items of business, the Joint Board **agreed**, in terms of Section 149 of the Equality Act, 2010:-

- (1) to have due regard to the need to:-
  - (a) eliminate discrimination, harassment, and victimisation;
  - (b) advance equality of opportunity between those who share a protected characteristic and persons who do not share it; and
  - (c) foster good relations between those who share a protected characteristic and persons who do not share it.

# 2B. EXEMPT INFORMATION

The Joint Board **agreed :-** that under paragraph 7 of the Categories of Exempt Information, found at Appendix 2 of the Standing Orders of the Integration Joint Board, the public and media representatives be excluded from the Meeting for Item 17 of the business on the grounds, that it involves the likely disclosure of exempt information of the class described in the relevant paragraph.

# 3. MINUTE OF MEETING OF INTEGRATION JOINT BOARD OF 28 AUGUST, 2019

There had been circulated and was **approved** as a correct record, subject to the addition of Mr D Hekelaar, Third Sector Representative, and Ms S Webb, NHS Representative to the sederunt, the Minute of Meeting of 28 August, 2019.

# 4. ACTION LOG

There had been circulated a report by the Interim Chief Officer, providing an update on matters which had been instructed for action at previous meetings, and identifying those which had been completed, recommended for removal.

Having heard further from the Interim Chief Officer of the new layout of the report, there was discussion of the need to clarify which diocese was involved in the efforts to reach hard to reach groups, and the Joint Board **agreed**:-

- (1) to note the updates provided;
- (2) that it be noted that the diocese to which reference was made was Anglican and not Catholic; and
- (3) that the completed actions be dismissed from the action log as reported.

# 5. CHIEF OFFICER'S UPDATE

There had been circulated a report by the Interim Chief Officer, providing updates on (a) the continuing implementation of the eligibility criteria for adult social care; (b) preparations for Brexit, where the issue continued to be in an ever changing state of flux; (c) Public Health Reform; (d) issues relating to sustainable provision at Methlick Branch Surgery; (e) a follow-up inspection of the Healthcare Centre at HMPYOI Grampian by Her Majesty's Inspectorate of Prisons for Scotland (HMIPS), supported by Healthcare Improvement Scotland; (f) Grampian-wide strategy developments, including mental health and learning disability, palliative and End of Life Care, Care of Older People, and the Respiratory Pathway; and Directions, where the promised report to this meeting had been delayed by the lack of Scottish Government guidance.

Having heard from the Interim Chief Officer, there was discussion of the support which had been provided for the community of Methlick by Health and Social Care in meeting the challenges of the branch sustainability, and the continuing discussions with Aberdeenshire Council about transport linkages; and the requirement to monitor and report not just the implementation of eligibility criteria but the take up and impact of staff training on the matter.

The Joint Board agreed:-

- (1) to commend officer support, centrally and locally, in working to support the Methlick community on GP provision, and note (a) the continuing discussions with Aberdeenshire Council on input to transport considerations and (b) the involvement of Councillor Stirling and the Partnership Manager (Strategy & Business Services) in the current Council Transportation Review Working Group;
- (2) that officers assess, and report alongside the assessing of the implementation and reporting of the roll out of the eligibility criteria themselves, the Eligibility criteria training for staff; and
- (3) to note, in all other respects, the terms of the updates provided.

# 6. FINANCE UPDATE AS AT AUGUST 2019

There had been circulated a report dated 1 October, 2019 by the Chief Finance Officer, providing an update on the spend to date, and the future projections towards meeting savings previously identified, and requesting consideration of proposed amendments to the budget.

Having heard further from the Chief Finance Officer of the main areas of overspend, still just over 1% of the total budget, relating to health provision of agency locums in community health, GP Practices, hosted services overspend, and the provision of intermediate care at Woodend Hospital, and of the continuing pressures in social care in residential care and care at home.

There was discussion of the long term financial sustainability of Integrated Health and Social Care, the recent report by COSLA to the Scottish Government in terms of funding, and the Audit Scotland report on the sustainability of health and social care provision; the inclusion of budget for winter planning initiatives; the main areas of spend pressure across hosted services, and of the steps proposed to mitigate the current budget pressures, in terms of ongoing discussions with partners about the anticipate budget shortfall.

Having noted that the payment against the Inverurie HUb had been an unexpected, one-off cost, the Joint Board **agreed:-**

- (1) to recommend that the Aberdeen City, Aberdeenshire, and Moray Integration Joint Boards collectively consider GMED provision as a recurring overspend;
- (2) that officers develop and report a line by line rebasing of the budget, to consider over and underspends;
- (3) that consideration be given to the use of locums, not as a default additional provision and budget pressure, but as an addition to resource diversity;
- (4) to commend the progress made towards achieving the proposed savings as detailed in Appendix 2 to the report; and
- (5) to approve the budget adjustments as detailed in Appendix 3 to the report.

## 7. ABERDEENSHIRE HSCP PERFORMANCE AND OUTCOMES FRAMEWORK QUARTER 1 REPORTING – APRIL TO JUNE 2019

There had been circulated a report dated 12 September, 2019 by the Partnership Manager, (Strategy and Business Services), requesting consideration of the Performance report for the first quarter of 2019/20, April to June, 2019, including exception reporting, noting that the report would be shared with Aberdeenshire Council's Communities Committee for their consideration and comment.

Having heard further from officers as to the areas where performance was not meeting the set targets, of the areas for which target definitions had still to be established, and the on-going work to maximise the effectiveness of reporting, both to the Joint Board and the Council's Communities and Area Committees, against the timing of availability of date, there was discussion of the means by which service user, patient and carer experience, with a national survey undertaken every two years which would inform, in part, local response to engagement; the challenges of working with difficult to reach groups, and the liaison role of Aberdeenshire Council's Gypsy Traveller Sub-Committee and liaison officer in sign-posting that community to engage with health and social care services; the proposed integral role of service user input to work around the dementia and learning disability strategies currently development; the governments' increasing use of the 125 plus Atlases of Variability, coordinated by the Information Services Division (ISD) as a performance tool, without the providers being advised if their ranking were good, bad, or indifferent; whether rurality had any bearing on the impact of delayed discharge, care package provision options, and the potential role of local organisations in increasing resilience in smaller communities; and consideration of the

focusing of quality improvement work on areas which matter most in staff, patient, and public expectation.

The Joint Board agreed:-

- (1) that the contributions of local organisations such as Braemar Cares to community resilience in terms of care be commended;
- (2) that a development session be held to better determine which performance information the Board wished to have to support its monitoring and scrutiny of operations, including the availability of information from the Atlases of Variability and other Information Services Division data; and
- (3) in all other respects to note the Performance Report, Quarter 1, including reported Exemptions, as detailed in Appendices 1 and 2 to the report.

## 8. UPDATE FROM PETERHEAD PROJECT BOARD

With reference to the Minute of Meeting of 28 August, 2019, (Item 14), there had been circulated a report dated 11 October, 2019 by the Partnership Manager (North) providing an update on the on-going work associated with the proposed relocation of services currently provided at the Ugie Hospital Site, Peterhead, in the wider context of the Council's Capital Plan for a care village in North Aberdeenshire and proposed creation of a Community Campus at Kinmundy, Peterhead.

The Joint Board heard from Officers highlights of recent community engagement and in particular feedback from a session held on 26 September, 2019, where meaningful dialogue had been held and constructive comments received, which appeared to demonstrate a greater understanding of what was proposed; the processes through which the progression of the work would be undertaken by Aberdeenshire Council (as owner of the care homes which would be affected) and NHS Grampian, relating to the assets in health board ownership.

There was discussion of the various areas of concern which continued to be expressed, including (a) the impact on the current facility at Willowbank, Peterhead, (b) the requirement to keep the nursing team from the Ugie together as a unit, albeit relocated to the Summers Ward at the Community Hospital; (c) the addition to the number of buildings currently lying redundant in Peterhead; and (c) questions on public transport links to the Kinmundy site.

It was stressed that clarification would be provided to the community that the Ugie site would come out of use before the new care village was in place, but that acceptable interim arrangements had been considered and were already in place; that a formal response would be provided directly on each of the points made by the community; that information on the timing of the proposed provision of additional car parking adjacent to the Community Hospital would also be reported; and that local Councillors would continue to be involved in, and informed of, progress.

Having noted that, on the issue of transport links, Cllr Stirling sat on the Council's current Public Transport Review Working Group and Mr Hekelaar had been involved in recent consultatons, the Joint Committee **agreed:**-

- (1) to note the report on public engagement and commend officers and the community for their participation;
- (2) that a Business Case be prepared for Full Council for the development of Peterhead Care Village at the Kinmundy Site based on a 60 bed, dementia-friendly, Care Home, hub for day services, and supporting living provision;
- (3) that inpatient rehabilitation services be consolidated at Peterhead Community Hospital
- (4) that work to find improved accommodation for the remaining H&SCP staff accommodated at Ugie Hospital continue;

- (5) that a community engagement forum, including all relevant local Councillors, be established, involving service users, carers, and the wider community on all aspects of the design and delivery of the Care Village;
- (6) that officers approach Stagecoach directly for early discussions on potential public transport links to the Kinmundy site;
- (7) to welcome the proposed extension of car parking at Peterhead Community Hospital;
- (8) that the report be shared with NHS Grampian's Asset Management Group; and
- (9) that Health & Social Care Partnership officers continue to engage with the Peterhead Masterplan process.

# 9. ABERDEENSHIRE ALCOHOL AND DRUG STRATEGY 2020-2025

There had been circulated a report dated September, 2019 by the Chair, Aberdeenshire Alcohol and Drug Partnership (ADP), requesting the consideration of a proposed draft Alcohol and Drug Strategy, 2020 - 2025, "Being Human", intended to inspire partners to work collectively to reverse deterioration in Aberdeenshire's alcohol and other drug related death rates.

The Chair welcomed Ms Grugeon and Mr Gault to the meeting which thereafter heard of the proposed direction of travel, intended to be embedded in and enacted by partners as part of their existing strategies, as opposed to a stand-alone, resourced strategy. The golden thread was to be kindness in communities and a "no wrong door" approach, including the realisation that people do not live "single issue lives", requiring a whole system approach to the addressing of the complex issues which can cause people to feel hopeless and ambivalent for the future and tackling inequalities by safeguarding and advocating for marginalised people's human rights.

There was discussion of the need to be explicit in the very comprehensive document, identifying the roots of the strategy's evolution and describe why Aberdeenshire's changing situation differed from the rest of Scotland; the potential requirement to reshape the document's content and presentation for different audiences and partners; the capacity required to deliver the strategy, given its intended incorporation as detailed actions within the existing strategic priorities of other partner organisations; the potential joint working with Public Health Scotland as an early adopter; and the links to other going initiatives such as Housing First.

The Joint Committee agreed:-

- (1) to commend the bottom-up, inclusive approach, in the strategy's evolution, deemed bold and compassionate radical approach;
- (2) that local indicators to be pursued regardless of delay in national guidance;
- (3) to note that there would be a need to present different document for different organisations, in order to highlight the fit with their existing strategies and resource provision;
- (4) that the document draft be revisited to (a) Explain more clearly "why" and "how rectify" golden thread, which would ultimately assist in assessing the successful outcomes of the strategy; and (b) reconsider language in commitment expectation to be more generally accessible; and
- (5) that the amended draft be issued for wider public consultation, including the Aberdeenshire GIRFEC (Getting It Right For Every Child) Strategic Group, the Aberdeenshire Community Justice Partnership, and the Aberdeenshire Community Planning Partnership; and a 'mini-public' consultation process facilitated by Community Learning and Development exploring in detail the concept of 'Radical Kindness'.

#### **10. DELAYED DISCHARGE**

There had been circulated a report dated September, 2019, by the Partnership Manager (South), providing an update on the performance of the delayed discharge strategy and the implementation of the associated action plan.

Having heard from the Partnership Manager of the 2018 overview of a dynamic system, with an increasing number of individuals staying, but with the length of delay reduced, with a key issue to be reviewing the process in the light of feedback from the people who has been subject to delayed discharge, their carers and families, as to their experiences; of the continued financial pressures of the process, performing above the national averages; there was discussion of the potential to separate out the bed usage between GP admissions to Community hospitals and those admitted to acute care; staff training, and management support, for what could often be an emotional or difficult conversation with patients, families, and carers; the accessibility of user information in an accessible form, not just written leaflets, at appropriate times.

The Joint Board heard further of the joint work being done with the acute sector on the issue, as the best place for assessment was at home, and how this linked with both the progression of the enablement model and the winter planning.

The Joint Board agreed:-

- (1) that future reporting consider the split between acute/ community beds, which may help inform the direction of future provision;
- (2) that future reports include input and feedback from carers, potentially as anonymised exemplars, as required by the Carer's legislation;
- (3) that officers review all documents and information relating to delayed discharge in terms of accessibility for end users;
- (4) that staff training, including on difficult conversations, be monitored and reported;
- (5) to be assured that the escalation process for discharge decisions is fully in place and understood;
- (6) to endorse, in all other aspects, the approach to managing delays in discharge from hospital as adopted by the Aberdeenshire Health and Social Care Partnership (HSCP);
- (7) to commend progress with the implementation of the Delayed Discharge Action Plan since the rapid improvement event in February 2019; and
- (8) to receive a further report in six months.

## 11. EQUALITIES MAINSTREAMING

With reference to the Minute of Meeting of 20 March, 2019, (Item 7), there had been circulated a report by the Chief Officer providing an update on the progress with equalities mainstreaming activity, as required by the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 as amended 2015.

The Joint Committee heard from officers of the four main areas progressed, including interpretation and translations services; the delay in progressing an Integrated Impact Assessment, and the adoption of Aberdeenshire Council's revised Equalities Impact Assessment (EIA), which had been expanded to include the Fairer Scotland Requirements to reflect socio-economic factors; support for breast feeding women on Health and Social Care Partnership locations; and engagement, including with those of protected characteristics, proposed to develop the Joint Board's Equality Outcomes for 2020 -2024.

There was discussion of the wider use of the interpretation and translation services to cover both British Sign Language (BSL) users, as an often overlooked language of the deaf community, and an awareness that some of these users may also require translation into a different language; the challenges in involving Aberdeenshire's Gypsy Traveller Communities, and other difficult to reach groups in the discussion of health and social care provision; and the difficulty in determining whether people of other protected characteristics had participated in engagement, given the opt out in completing personal classifications in any surveys.

Having noted that the Council's Gypsy Travellers Sub-Committee provided an invaluable liaison function in considering the needs of that community, and that the Liaison Officer was skilled in directing that community to appropriate health and social care services; and that work had been undertaken with Grampian Regional Equality Council, (GREC) regarding the inclusion of people from eastern European communities, the Joint Board **agreed:**-

- (1) that access to, and the use of British Sign Language (BSL), and BLS with languages, be investigated and reported;
- (2) to note the well-established and effective links with Gypsy Traveller Communities through Council Liaison Officer signposting to services and via Aberdeenshire's Gypsy Travellers Sub-Committee;
- (3) that future update reports consider the use of illustrative case study reporting if statistics not available;
- (4) to note that, in terms of protected characteristics, not everyone will choose to define; and
- (5) that an update report be submitted in six months.

# 12. PRIMARY CARE IMPROVEMENT PLAN – YEAR 2 IMPLEMENTATION PLAN 2019 - 2020

With reference to the Minute of Meeting of 28 August, 2019 (Item 6), there had been circulated a report dated 24 September, 2019 by Dr Chris Allan, Clinical Lead, Aberdeenshire Health and Social Care Partnership, providing an update on progress in the delivery of the Primary Care Improvement Plan (PCiP) for 2019/20.

Having heard further of the progress which was being made, including challenges in the providing access to welfare rights advice in areas of higher deprivation; the renaming of "treatment and care" to be a service, not a centre, as the latter implied a fixed geographical location which might not be the solution in all cases; consideration of areas of capacity pressure, such as phlebotomy and physiotherapy; there was question on whether any practices in Aberdeenshire had handed back their independent contract. Assurances were given that although there were areas of concern, we only have one 2C practice which has been managed by HSCP more some years now The Joint Board **agreed:**-

(1) to commend officers coordinating the implementation in challenging circumstances; and

(2) to note, in all other respects, the terms of the update.

## 13. SAFETY AND CLEANLINESS INSPECTION BY HEALTHCARE IMPROVEMENT SCOTLAND

There had been circulated a report dated 1 October, 2019 by the Partnership Manager (Central) providing details of an inspection carried out in August 2019, and published on 23 October, 2019, by Healthcare Improvement Scotland, across five of Aberdeenshire's Community Hospitals, in terms of infection standards, education, procedures and guidance, and decontamination. In its 6 requirements and two recommendations, the report identified areas where NHS Grampian had been seen to be performing well in safety and cleanliness, making positive assessments on good adherence to, and good staff knowledge of, standard infection prevention and control precautions, and a good standard of equipment cleanliness. In terms of where improvements might be applied, it was suggested that there required to be

greater clarity on mandatory training requirements, a clear programme of audit, and a process for reporting estate issues.

The Joint Committee heard further from Associate Nursing Director, Ms Gibb that this had been an announced inspection, requiring the submission in advance of supporting documentation evidencing training records and minutes of meetings in addition to a selfassessment form, that debriefing sessions would be held with staff to inform a response to the requirements and recommendations, and from other officers commending the engagement of the Inspectors directly with patients, their families, and carers, although this engagement with individuals to assess the specific impact on them was not explicit in the inspection report.

There was discussion of the report's findings and of its determination that Aboyne Hospital, Glen O' Dee Hospital, Jubilee Hospital, Kincardine Community Hospital, and Turriff Hospital were delivering well in terms of safety and cleanliness, and also of the benefit in speaking directly with patients to garner their experiences.

The Joint Committee agreed:-

- to agree that actions to address the Requirements and Recommendations pertaining to Aberdeenshire Health and Social Care Partnership be developed and/or continue; and
  to commend all involved on a pacific increasing concentration
- (2) to commend all involved on a positive inspection assessment.

# 14. CLINICAL AND ADULT SOCIAL WORK GOVERNANCE

There had been circulated a report dated 27 September, 2019, by the Associate Nursing Director, requesting consideration of the outcomes of a review carried out into the review of the functionality and effectiveness of the Partnership's clinical and adult social work governance framework, instigated as previously approved in the Committee's Terms of Reference.

Having heard further from officers of the deliberations at a workshop session, engagement with the wider staff teams, the structure and function of the current officer group and the Clinical and Adult Social Work Committee, and the development of an assurance plan to ensure that the structures are being used effectively, and the risks associated with the reporting process and the management of the risk register, there was discussion of the welcome inclusiveness of the engagement with officers in the development of the proposals, to establish the importance of governance; the requirement to consider how the governance would be applied to hosted services; and the need to make reference to Aberdeenshire Council's Communities Committee in the organisational chart as the "parent" of adult social care.

The Joint Committee agreed:-

- (1) to endorse the work of the Clinical and Adult Social Work Governance Committee to date in providing assurance to the Integration Joint Board (IJB) on the delivery of services which are safe, effective, sustainable and person-centred in line with the Integration Joint Board's statutory duty for the quality of health and adult social work services;
- (2) to approve the action plan developed by the Clinical and Adult Social Work Governance short-life working group, as detailed in Appendix 1 to the report;
- (3) to approve the updated terms of reference for the Clinical and Adult Social Work Governance Committee, as detailed in Appendix 2 to the report, subject to the inclusion of a reference to Aberdeenshire Council's Communities Committee in terms of governance;
- (4) to approve the proposed quarterly and annual reporting schedule to the Integration Joint Board as defined in the terms of reference;

- (5) to approve in principle the appointment of two additional Integration Joint Board members to the Clinical and Adult Social Work Governance Committee in accordance to the updated Terms of Reference, and delegate the approval of this to the Chief Officer in consultation with the Chair and Vice-Chair of the Integration Joint Board and the Chair of the Clinical and Adult Social Care Committee; and
- (6) to approve in principle the appointment of a Deputy Chair of the Clinical and Adult Social Work Governance Committee from the four Integration Joint Board representatives, and delegate the approval of this to the Chief Officer in consultation with the Chair and Vice-Chair of the Integration Joint Board and the Chair of the Clinical and Adult Social Care Committee.

## 15. ABERDEENSHIRE COUNCIL'S FINANCIAL REGULATIONS AND HEALTH, SOCIAL AND RELATED CONTRACTS

There had been circulated a report dated 27 September, 2019 by the Interim Chief Officer, requesting the consideration of amendments to the Partnership's health and social care and related contracts, tandem on proposed amendments by Aberdeenshire Council to its Financial Regulations. The report highlighted that current Financial Regulations did not have the clarity to support both efficient procurement and compliance with Financial Regulations, and, in terms of the procurement approval process for Health Social and Related Contracts, a need to accurately reflect current UK, Scottish, and EU procurement legislation. In particular, the proposed changes would make the existing "exceptional" procedure a standing procedure and provide greater clarity for public transparency on spend, but not alter the current process of issuing Directions for the Council to procure services on behalf of the Partnership.

Having heard from officers that the proposed changes would be reported to the Council's Procedures Committee, and would thereafter require a two stage approval process for adoption by Aberdeenshire Council, there was discussion of the Council's parallel development of a more robust procurement document which identified more clearly expected outcomes in terms of community and other benefits as well as the delivery of services, the Joint Committee **agreed:-**

- to recommend to Aberdeenshire Council the revision of Financial Regulations relating to the operation of the Integration Joint Board's Direction of Procurement as detailed in the report; and
- (2) that officers circulate for information, in due course, the revised procurement document currently under development.

## 16. 2020 INTEGRATION JOINT BOARD (IJB) MEETING DATES

There had been circulated a proposed schedule of dates for meetings of the Integration Joint Board, both formal and development sessions, for 2020.

After discussion of the intent to have fewer scheduled development sessions, to reflect the diminishing need given the increasing maturity of the Partnership, but noting that additional sessions would be arranged if needed, the Joint Board **agreed** the undernoted meeting dates for 2020:

Wednesday, 26 February Wednesday 25 March Wednesday, 13 May Wednesday, 24 June Wednesday, 26 August Wednesday, 30 September Wednesday, 4 November Wednesday, 9 December Formal Session Budget Setting; Formal Session; Development Session; Formal Session; Development Session; Formal Session; and Formal Session.

# 17. SUPPLEMENTARY WORK PLAN - PROCUREMENT APPROVAL

There had been circulated a report dated 9 September, 2019 by the Interim Chief Officer, requesting the consideration of two additional procurements to be added to the approved workplan for 2019/20.

Having heard from officers of the specifics of the items, one relating to the a new joint procurement with Aberdeenshire Council's Education and Children's Services on a carers' support service; and the second jointly with Aberdeen City Health and Social Care Partnership on an innovative provision of supported accommodation for clients with complex needs, there was discussion of the data sharing implications of any new contract, in terms of GDPR and the requirement for historical user information to be transferred to any new provider; the advantage of procuring for adult social care at the same time as children's, whilst maintaining the option for these to be delivered as separate contracts; and the potential need to ensure coordination in transition if there were distinct contracts for children and adults. Having considered the Supplementary Work Plan as detailed in Appendix 1 of the report, and reviewed the associated Business Cases as detailed in Appendix 3 to the report, the Joint Board **agreed :-**

- (1) to note that the value of the Business cases identified in Appendix 3 to the report, with a value of up to £1,000,000 may be reserved for approval by Aberdeenshire Council's Communities Committee before the Integration Joint Board's Direction is implemented;
- (2) to Direct Aberdeenshire Council to procure the services detailed in the Work Plan on behalf of the Integration Joint Board; and
- (3) to note that the contract requirements relating to care and support services align with the Integration Joint Board's Strategic Plan in relation to Outcome 2: People, including those with disabilities or long term conditions or are frail, are able to live independently at home or in a homely setting in their community.

Prior to the conclusion of the meeting, the Chair indicated that this would be her last meeting as Chair; in line with the rotation between partners, from the beginning of November, she would be Vice-Chair, with the Chair reverting to Aberdeenshire Council.

Councillor Stirling, on behalf of the Joint Board, thanked Mrs Atkinson for her dedication and support for the work of the Board during her term as chair, particularly when the role had been inherited and come at a period of extensive conflicting calls on her time,