ABERDEENSHIRE INTEGRATION JOINT BOARD

20 MARCH 2019

Integration Joint Board Members:

Ms R Atkinson, (Chair); Councillor E A Stirling (Vice-Chair); Councillor A Allan; Ms A Anderson; Ms J Duncan; Mr A Gray; Provost W Howatson; Ms R Little; Councillor D Robertson; and Councillor A Ross.

Integration Joint Board Non-Voting Members:

Dr C Allan; Mr A Coldwells; (Chief Officer); Mr D Hekelaar; Ms J Gibb; Mrs S Kinsey; Mr A Sharp, (Chief Finance Officer); and Mr I Ramsay.

- **Officers**: Mrs K Davidson, Ms D Flockhart, Ms K Penman, Ms A McLeod, Ms J Raine-Mitchell, and Mrs A Wood, Aberdeenshire Health and Social Care Partnership (AHSCP); and Ms J McRobbie, Aberdeenshire Council.
- In attendance: Dr T Shivaji, Consultant in Public Health, NHS Grampian; Ms K Penman, NHS Grampian; Mrs K Mowat, Project Manager, Community Justice; Ms C Riach, (Women's Social Worker); Mr D Taylor, (Team Leader, North Aberdeenshire Drug & Alcohol Service); Ms N Wilson, (Young Person's Criminal Justice Social Worker); Mr K Buchan and Ms A Woodally, (Criminal Justice Social Workers); Andrew, (CPO Running Group); Ms M Clark, (Team Manager (Acting) Community Substance Misuse Service, South Aberdeenshire)); Ms V Case, (Team Manager, Community Substance Misuse Service, (North Aberdeenshire)); PC A Mellis, (Partnership Development Officer, Police Scotland); Ms R McCurrach, (Acting Head of Offender Outcomes, HMP&YOI Grampian); Mr S Gray, (Regional Throughcare Manager (North), HMP&YOI Grampian)); and Ms D Leslie, (Social Work Manager, Criminal Justice & Substance Misuse Services).

Apologies: Mrs I Kirk; Mr M McKay; Dr M Metcalfe; and Mrs A Mutch.

1. SEDERUNT AND DECLARATION OF INTERESTS

The Chair asked members for declarations of interest from both voting, and non-voting, members. No interests were declared.

2. RESOLUTION - 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; and
- (2) where an Equality Impact Assessment was provided, to consider its contents and take those into account when reaching their decision.

3. MINUTE OF MEETING OF INTEGRATION JOINT BOARD OF 27 FEBRUARY, 2019

There had been circulated the Minute of Meeting of the Integration Joint Board of 27 February, 2019. The Joint Board **agreed** to approve the Minute, subject to the undernoted amendments and corrections:

- (a) the addition of Mr Hekelaar to the list of those present;
- (b) the relocation of the name Mr I Ramsay from officers to non-voting members;
- (c) the recording of Councillor Allan's Declaration of Interest, and non-participation in Item 16, (Grant Funding awards) as a Director of Houseability;
- (d) the correction of the numbering of clauses in Item 5, Chief Officer's report; and
- (e) additional narrative, in Item 11 (Carefirst system), to reflect Officers' expressed opinion that a fully integrated care information database would not be achieved for a significant period of time.

4. ACTION LOG

There had been circulated the Integration Joint Board Action Log by the Chief Officer, Aberdeenshire Health and Social Care Partnership. The paper provided updates on previously approved actions, from the meeting of 27 February, 2019, in terms of the (a) the Integration Joint Board Audit Committee; (b) the Risk Register; (c) Charging Policy; (d) Annual Report; and (e) Docman Optimisation (Workflow).

Having noted that the Charging Policy recommendations had still to be approved by Aberdeenshire Council's Communities Committee, the Joint Board **noted** the updates provided.

5. CHIEF OFFICER'S UPDATE

There had been circulated a report by the Chief Officer providing an update on (a) the progress of the Safe Staffing Bill through the Scottish Parliament; (b) the preparatory work for the review of the current Strategic Plan; (c) the imminent delivery of Health & Social Care services from the Schivas Wing within Ythanvale Care Home in Ellon; (d) the continuing work to make staff fully aware of the Duty of Candour in its first year of implementation; and (e) the progress with the Primary Care Improvement Plan.

The Joint Board heard (a) from the Associate Nurse Director, NHS Grampian, of how the safe staffing implications were being applied by NHS Grampian in its acute care sector, and how having the correct skills mix and the right amount of registered nurses was of equal importance to the right number; and (b) from the Partnership Manager (Central) how work was being done to create a set of tools for staffing assessments more objectively across community based services, and of her participation in national discussions on the matter. The application of a similarly objective approach to workforce planning in the caring sector, on which the Care Inspectorate were expected to lead, was also debated. It was noted that the Partnership Manager (Strategy and Business Services) led on a recently established workforce planning group and had requested that the Joint Board consider holding a development session to be updated on progress.

Having heard of the proposed engagement planned to support the production of the revised Strategic Plan, the Marketing and Communications Officer demonstrated the work done to update the Partnership's webpages and provide online resources, focusing on the five priority areas previously identified, to support community participation. Availability of the resources offline was confirmed, and there was discussion on the accessibility of the on-line resources across different groups of the differently able. In respect of the delivery, through the Physio- and Occupational Therapy facilities already located in the Schivas Wing at the Ythanvale Care Home, of additional health and social care services relating to enablement, officers stressed that this development had been generated by the Care Home's own suggestion that they had capacity to deliver on a wider remit. There was discussion of whether staff required additional support to work with differing age groups.

Officers spoke to the Duty of Candour legislation, explaining that the process merely formalised what already took place, across different partner organisations in terms of good practise. There was debate on how far this could be applied in looking at the various private sector and independent providers who may be involved in service delivery, but assurance was given of the increasing good communications between commissioning agencies and these, to the benefit of standard improvement across the varied fields of provision.

In terms of the Primary Care Improvement Plan, there was discussion of the continuing challenges in both recruitment and retention of GPs in rural areas, and the learning which was possible through several on-going pilot projects of working differently.

The Joint Board agreed:-

- (1) that a development session across all three sections of the safe staffing bill, including workforce planning, across the acute, community, and care home sectors, be scheduled;
- (2) that members be provided with a copy of the Joint Board's previous response to the staffing consultation;
- (3) to approve the increased engagement scheduled to be undertaken in advance of the revised Strategic Plan, and note that feedback on their submissions would be provided to individuals and groups;
- (4) to commend staff at Ythanvale for their pro-active approach to supporting a separate area of work; and
- (5) to note that the Primary Care Improvement Plan would be considered at the development session scheduled for May, 2019.

6. **RESPONSE TO CHALLENGES ASSOCIATED WITH WINTER**

There had been circulated a report dated February, 2019 by the Partnership Manager (South) proving an update on Health & Social Care services' response to the winter of 2018/19, (a) detailing the plans which had been put in place for winter, including joint working with Aberdeenshire Council's Infrastructure Services Committee, in terms of both road and street clearing, and the proposed, but not activated for 2018/9, prophylactic flu injection availability to front line roads staff; (b) the Council's Snow Warden Scheme, coordinating 70 volunteers in 27 teams, to which the Partnership had committed some additional funding; (c) the impact of winter viruses nationally, compared to the previous period where unusually high levels or Influenza-Like Illness (ILI); (d) the number of delayed discharges across winter of comparative years, echoing a national trend of ILI affecting the younger age group more and so having less impact on required hospital beds, emergency admissions, and delayed discharge; and (e) ongoing work in refining the Delayed discharge process, being pursued as a Rapid Improvement Event across community and acute hospital settings, and monitored regularly via the Reshaping Care Programme Group.

Having heard further from the Partnership Manager that mid-March may be a premature reporting period, as winter weather may still occur; that it was intended to consult with users of their experiences of both Virtual Community Wards (VCW) and delayed discharge; and that direct comparisons of delayed discharge should be approached with caution, given the complex factors which might impact on the outcomes, there was discussion of the factors

which had impacted on the reduced availability, and potentially lesser take-up of the flu vaccine; how the "vulnerable" in communities were identified; and a general welcoming of the increased joint working on winter responses to the communities of Aberdeenshire.

The Joint Board agreed:-

- to commend all involved in the establishment, and continuing development, of crossservice working with the Council's Infrastructure Services, including the volunteer Snow Warden Scheme;
- (2) to welcome the proposal to see the feedback of users and carers in terms of the delayed discharge processes;
- (3) to acknowledge the increased pressure upon services during winter;
- (4) to endorse the overall approach adopted by the Aberdeenshire Health and Social Care Partnership (HSCP) in planning for winter and managing seasonal pressures;
- (5) to endorse the overall approach to strengthening the resilience of the Delayed Discharge process following the recent rapid improvement event; and
- (6) that officers report in 6 months detailing progress made towards implementing actions related to Delayed Discharge detailed in Table 3 of the report.

7 - EQUALITIES AND OUTCOMES ANNUAL PROGRESS/UPDATE REPORT

There had been circulated a report dated 7 February, 2019 by the Chief Officer, reporting, in terms of The Equality Act 2010, and the Public Sector Equalities Duty, progress in implementing the mainstreaming of equalities in the period from April 2018 to March, 2019.

The Joint Board heard further from the Health and Well-being Lead, of the positive work with those with protective characteristics, evidenced in case studies; of on-going activities including the establishment of an equalities champions group across each of the partnership manager sections; the challenging in accessing feedback from those of protected characteristics; and the proposal that a workshop session be arranged for the Joint Board.

Having noted that officers continually working to understand better the outcome measures and link them to the Partnership's Strategic Plans, the Joint Board **agreed**:

- (1) that officers report in six months, progression on the outcome ambitions, by exception reporting; and
- (2) to commend staff on progress to date in implementing the Mainstreaming Equalities and Equalities Outcomes, towards meeting the Public Sector Equality Duty.

8. COMMUNITY JUSTICE UPDATE AND THE DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT

There was tabled a report, "Changing the Record: Improving the health and well-being of people in contact with the justice system", being the Annual Report2017/18 by the Director of Public Health.

The Chair, on behalf of the Joint Board welcomed Dr Tara Shivaji, Consultant in Public Health, NHS Grampian, and various representatives of Health and Social Care, Criminal Justice, NHS Grampian, Police Scotland, HMP Grampian, and service users, who made presentation to the meeting on Public Health issues, focusing on how community justice, working in localities, was delivering on the aims and strategies expressed in the Director of Public Health's Annual Report, and meeting the challenges of health and wellbeing in the justice system, with premature mortality three times higher than for those in the general population.

There was discussion of the demonstrated achievements of "one-stop shops", affording participants access to health and well being resources in accessible locations, coordinating the use of resources where they could make significant impact to specific user groups who might be otherwise difficult to reach; the barriers inherent in stereo-typing in terms of community stigma, increasing inequalities and exacerbating feelings of isolation and ostracization; the sense of well-being which could be engendered where vulnerable groups were able to contribute to their communities; the role of police to support those with in the criminal justice system and work to diminish recidivism; the increasing requirement for food bank provision and the availability in the community of healthy cooking skills training; the sharing of good practice across the multi-agency working; the interface with faith organisations such as the Salvation Army and Street Pastors; issues relating to short-term female prisoners and their higher likelihood of loss of contact with children; and the value of preventative and early intervention.

The Joint Board agreed:-

- (1) that the multi-disciplinary working, across agencies and voluntary sector be commended and welcomed as exemplary partnership within the resources available;
- (2) that officers consider and report on how the Partnership might contribute to, and otherwise support, the ongoing work and future development of this kind of interventions; and
- (3) that a summit to further explore the matter be organised in early course.

9. FINANCE UPDATE AS AT JANUARY 2019

There had been circulated a report dated 26 February, 2018 by the Chief Finance Officer, reporting the financial position as at January, 2019 and requesting members' consideration of proposed budget adjustments.

Having heard further from the Chief Finance Officer that with two months remaining of the financial year, a forecast of £2.96M was anticipated, reduced from the figure reported in February, 2019, with continuing pressures on older people and out of area referrals, and that Aberdeenshire Council and NHS Grampian were aware of the projected variation and had agreed, subject to year-end confirmation, to meet the overbudget, there was discussion of the impact of the local government pay increase on budget; and the impact of Brexit on the supply and cost of drugs; Joint Board **agreed:-**

- (1) to approve the proposed budget adjustments as detailed in Appendix 3 to the report; and
- (2) in all other respects, to note the terms of the report.

10. REVENUE BUDGET 2019/20

With reference to the Minute of Meeting of 27 February, 2019, (Item 12,) there had been circulated a joint report dated 3 March, 2019 by the Chief Officer and Chief Finance Officer, requesting members' consideration of a budget for the Aberdeenshire Integration Joint Board for 2019/20.

Having heard further from the Chief Finance Officer that the figures reported did not include £5M of non-recurring budgets which would be confirmed by the Scottish Government throughout the year, there was discussion of the complexity of allocating budget for staffing and alternative approaches considered as opposed to using mid-point salary assumptions; and the ongoing requirement for all funding partners to consider changes in operation which might necessitate a re-evaluation of the budget allocation from acute to community provision.

The Joint Board agreed:-

- (1) to acknowledge that the revenue budget facilitates the delivery of the Integration Joint Board's priorities;
- (2) to agree the proposed budget savings listed in Appendix 1 to the report, and their consequences;
- (3) to note the financial allocations made from Aberdeenshire Council and NHS Grampian for 2019/20;
- (4) to approve the proposed balanced revenue budget for 2019/20, as detailed in Appendix 2 to the report;
- (5) to note the financial risks set out in Appendix 3 to the report; and
- (6) to Direct Aberdeenshire Council and NHS Grampian to deliver all delegated functions in terms of the legislation, and the Integration Scheme as currently delivered by them in terms of the budget outlined in this report, as set out in the Direction at Appendix 5 to the report.

11. HEALTH & SOCIAL CARE PARTNERSHIP (HSCP) PERFORMANCE & OUTCOMES FRAMEWORK QUARTER 3 REPORTING – OCTOBER TO DECEMBER 2018

There had been circulated a report dated 1 March, 2019 by the Partnership Manager (Strategy and Business Development) reporting on the third quarter performance of the Health and Social Care Partnership in the period October to December, 2018.

Having heard further from officers that it was intended that performance, including additional workforce information, would be considered at the May Development Session, the Joint Board **agreed:-**

- (1) to be assured by the performance, nationally and locally, as reported; and
- (2) that the report be shared with Aberdeenshire Council's Communities Committee for their information and reflection, with any comments fed back to the Joint Board for consideration.

12. DEMENTIA – POST DIAGNOSTIC SUPPORT REVIEW AND NEW ABERDEENSHIRE DEMENTIA STRATEGY

There had been circulated a report dated 27 February, 2019 by the Partnership Manager (Central Aberdeenshire), requesting the Joint Board's consideration of a proposed whole system approach to post diagnoses support of dementia patients and their carers, and the creation of a new strategy for dementia.

Having heard further from the Partnership Manager of previous errors in reporting which made Aberdeenshire's performance look poor compared to other areas of Scotland, and the requirement to have a revised dementia strategy, whole system approach developed for the Partnership, as opposed to continuing with inherited direction, there was discussion of the critical involvement of third sector partners in the strategy; the stigma of dementia and how contribution to their communities was still possible for sufferers; and the requirement for a cross-shire access provision.

The Joint Board agreed:-

- (1) to commend the review of Post-Diagnostic Support, as detailed in Appendix A to the report;
- (2) that a whole-system approach to Dementia support be taken in Aberdeenshire;
- (3) that the review include mapping existing Dementia services provided by, or commissioned by, Aberdeenshire Health and Social Care Partnership, and, where appropriate, evaluating and reviewing the quality of these services; and
- (4) that work commence simultaneously to develop a new Dementia Strategy for people diagnosed in Aberdeenshire, engaging closely with people living with Dementia, carers, commissioned services and relevant staff.

Prior to the conclusion of the meeting, the Chair indicated that Mr Tony Cox had tendered his resignation as public representative on the Joint Board. She paid tribute to his valuable contributions during his time as a member.

The Chief Officer provided information on the recruitment process which would commence to identify a replacement.

The Joint Board **agreed** to thank Mr Cox for his support for the work of the Partnership as a Board Member.