

ABERDEENSHIRE COUNCIL

INTEGRATION JOINT BOARD

WOODHILL HOUSE, ABERDEEN, 19 JUNE, 2019

Integration Joint Board Members:

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

Integration Joint Board Non-Voting Members:

Dr C Allan; Mr A Coldwells; Chief Officer; Mrs S Kinsey; Mr M McKay; Dr M Metcalfe; Mrs A Mutch; Mr I Ramsay; and Mr A Sharp, Chief Finance Officer.

Officers:

Mrs S Campbell, Mrs K Davidson, Ms K MacLennan, Mrs A MacLeod, Mr P Matthews, Mr M Ogg, Ms J Raine-Mitchell, Ms K Reagan, Ms A Richert, Mr M Simpson, Mrs S Strachan, and Mrs A Wood, Aberdeenshire Health and Social Care Partnership (AHSCP); and Miss M Mackay and Miss J McRobbie, Aberdeenshire Council.

Apologies:

Ms J Gibb; Mr D Hekelaar; and Mrs I Kirk.

In Attendance:

Ms P Gowans, Moray Integration Joint Board; and Mr A Stephen, Aberdeen City Integration Joint Board.

1. DECLARATION OF MEMBERS' INTERESTS

The Chair asked for Declarations of Interest. No declarations were made.

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 Committee **agreed** that the public and media representatives be excluded from the meeting for Item 16 of the business, on the grounds that it involves the likely disclosure of exempt information of the class described in paragraph 7 of the Categories of Exempt Information, found at Appendix 2 of the Standing Orders of the Integration Joint Board.

3. MINUTE OF MEETING OF INTEGRATION JOINT BOARD OF 20 MARCH, 2019

There had been circulated and was **approved** as a correct record, the Minute of Meeting of 20 March, 2019.

4. ACTION LOG

There had been circulated a report by the Chief Officer providing updates on matters which had been instructed at the meeting on 20 March, 2019, relating to workforce planning, formal consideration of the Action Plan in response to the Director of Public Health's Annual Report, and the potential joint working with the Diocese of Aberdeen on the creation of dementia friendly communities.

There was discussion of how the workforce planning issues were being progressed, and how the Partnership's actions complemented those of NHS Grampian, and the Joint Board **agreed** to note the updates provided.

5. CHIEF OFFICER'S UPDATE

There had been circulated a report by the Chief Officer, providing updates on (a) resilience plans being established, particularly in the areas of commissioned services in the event of Brexit, with the UK currently to leave the European Union on 31 October, 2019, or before; (b) the continued monitoring of the Four Seasons care home situation, with care management ready and able to support residents and families should the service be disrupted; (c) commending staff and support services for their prompt action on 13 May, 2019, when the Ythanvale Care Home's 29 residents had been successfully evacuated to Ellon Resource Centre for a fire incidence; (d) the preparation for the delivery of palliative care, rehab and enablement, and short-term, intermediate, and respite care at the Schivas Wing, Ythanvale; (e) progress of the Public Health Reform, with decisions made on 2 May, 2019 regarding the establishment of the new national organisation, Public Health Scotland, considering the core and specialist workforce requirements; (f) the key messages of the Aberdeenshire Community Planning Partnership (CPP) annual report October 2017 – October, 2018; (g) the end of the payment card project on 28 June, 2019, and its implementation since January 2019, with net savings to budgets from the recovery of surplus funds from Direct Payment Accounts standing at over £1.1million, including the 2019/2020 recovery of £182,000 to date; and (h) the award of an "Enlightened Approach" Scottish Social Work Services award by the Shared Lives Team for their work in enabling people with a wide range of vulnerabilities to live independent and fulfilling lives.

The Joint Board heard further from the Chief Officer of the continuing networking and engagement in the development and refresh of the dementia strategy.

There was discussion of successful fire incident response, of the Shared Lives Team's excellence in achieving the Scottish Social Services award, and the positive outcome of the Payment card project and the Joint Board **agreed:-**

- (1) to congratulate staff in both Ythanvale Care Home and the Shared Lives Team for their achievements in making the theory real for people on the ground; and
- (2) in all other respects to note the terms of the update.

6. BUDGET THRESHOLD AND EQUIVALENCY MODEL FOR CARE AT HOME – OLDER PEOPLE AND PHYSICAL DIABILITY SERVICE

With reference to the Minute of Meeting of 29 November, 2017, (Item 3), there had been circulated a report dated 28 May, 2019 by the Partnership Manager (South), requesting consideration of proposals for the charging principles and criteria for the Care at Home, Older People and Physical Disability Service and detailing the history of the original charges proposal, linked to the budget threshold setting of Self Directed Support.

Having heard further from officers of the consideration which had been given to the proposals, required to meet the needs of users as assessed, and not what was affordable by the authority,

and intended to provide staff with increased certainty in applying the guidelines equitably, there was discussion of the impact on budgeting; the inclusion of care from family to complement assessed need; the challenges in providing services across the geography of Aberdeenshire, necessitating the consideration of alternative methods of provision, including technology solutions and joint working with third sector providers; the inter-relationship with acute service provision with the increasing ambition of maximising care at home, which may be more costly to provide in the home environment; and whether the situation would be kept under review and reconsidered if there were negative feedback from practitioners.

The Joint Board **agreed:-**

- (1) the continuing application of the budget threshold and equivalency model as detailed in the report;
- (2) the development of additional guidance on the application of a budget threshold and equivalency for Care at Home Services to be used by Care Management staff;
- (3) that the approach be applied to all new requests for support as of August 2019; and
- (4) the rationale for reasonable exceptions to the budget threshold and equivalency model, as detailed in the report.

7. UPDATE ON RESHAPING CARE PROGRAMME BOARD

There had been circulated a report dated 29 May, 2019, by the Partnership Manager (South), providing an update on the progress of the reshaping care at home programme board, focusing on the freeing up of internal home carers for rehabilitation and enablement work; the resources obtained with ARCH interfacing with the Virtual Community Wards (VCR); the slower than wished progress on technology enabled care, now being taken forward in terms of Florence, (for the remote monitoring of, and reporting on, long term health conditions) and the “Attend anywhere” remote appointment schemes; and the integrated, multi-disciplinary team role, now utilising a single assessment tool through a shared portal, in the absence of a shared IT system; and working with housing colleagues in terms of the provision of appropriate accommodation, whether sheltered, very sheltered, care homes, or care at home.

Having heard from the Partnership Manager that the pace of enablement was now picking up, and that, overall, despite some areas of frustration in timescale of process, he felt that the Reshaping Care work was providing positive outcomes for the communities of Aberdeenshire, with emergency hospital admissions lower than other parts of Scotland, there was discussion of the requirement to ensure sufficient future resources, both technological and staff, to support the process; the culture shift in service user expectation needed with the change to enablement priorities; ongoing dialogue with the Robert Gordon University regarding the need to reconsider and refine professional qualifications, in addition to the increasing concentration on staff skills development the provision of online learning packages for Health & Social Care staff and third sector providers; and the wider issue of the continuing challenge in recruitment and retention of staff in some areas.

The Joint Board **agreed:-**

- (1) to commend staff on the progress in developing Reshaping Care, demonstrated by an excellent suite of approaches to fulfil one of the main strategic priorities;
- (2) that additional information be provided as to who sits on the Project Board, and identifying whether any freeing up of resources by the new ways of working could be reapplied to other areas of reinvestment in service provision;
- (3) that further reports analysing performance information and providing updates on specific projects be submitted as appropriate; and
- (4) to note the addition of new projects, as detailed in the report, to the Reshaping Care Programme, on Delayed Discharge Action Plan, Management Systems and Data Recording, and E-Frailty.

8. PRIMARY CARE IMPROVEMENT PLAN (PCIP) – YEAR 2 IMPLEMENTATION PLAN 2019/20

There had been circulated a report by the Partnership Manager (Central), providing an update on progress with the Primary Care Improvement Plan, Year 2 Implementation Plan 2019-2020, as required to be approved by the GP Sub-Committee and the Joint Board in advance of being submitted to the Scottish Government.

Having heard further from officers of the benefits of being involved in the national workstreams which were progressing this matter, and of the advantages of the key relationship with the GP Sub-Committee, which facilitated the practical consideration of the matter, and also of the good working relationship with colleagues in Acute Care, which was the complementary sector of provision, there was discussion of workforce issues, including recruitment and retention, and also financial issues associated with the redesign of primary care as required.

There was discussion of the model being proposed in the Western Isles; the situation with staff transfers in practices – where the staff would mainly have a change of employer and be transferred under Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE) conditions (on their existing terms and conditions), with little disruption to their daily working patterns; the potential role of pharmacists in the approval of repeat prescriptions; and the financial shortfall, currently being discussed at national level at the Local Negotiating Committee, between the existing funds and what was anticipated to be needed to support the revised structures.

The Joint Board **agreed:-**

- (1) to approve in principle, pending any final amendments made following formal comments from the GP Sub-Committee, the draft Primary Care Improvement Plan (PCIP) for 19/20 as detailed in Appendix 1 to the report, and delegate to Chief Officer, in consultation with Chair and Vice-Chair, approval of the final document prior to submission to Scottish Government;
- (2) to acknowledge the challenges of delivery of the PCIP, particularly within required timescales; and
- (3) to commend staff and partners on their joint working in a difficult area.

9. MINOR INJURY UNITS REVIEW

With reference to the Minute of Meeting of 20 June, 2018, (Item 7), there had been circulated a report by the Partnership Manager (Central), presenting the proposals for the redesign of Minor Injury Units (MIUs) in Aboyne, Banff, Huntly, Stonehaven, and Turriff, the outcomes of local group discussion, based on location, demand and activity, practitioner competency, and ongoing sustainability.

The Joint Board heard from officers of continued focus on assurance over patient safety and staff safety, the interface with Acute Care colleagues to ensure urgent care could be provided in rural areas, and discussions with staff on how best to apply existing resources to provide the best services to local communities who had demonstrated, through various engagement methods, their clear valuing of the existing facilities which had led to recommended options for four of the sites.

There was discussion of the differing presentations to the MIUs and a potential for misunderstanding that MIUs were able to provide urgent and emergency care for a wider range of conditions than those appropriate to MIU provision, with associated risk to patient and staff safety, and concerns were expressed that MIUs were being used as an alternative to other methods of delivery, such as GMeds, and NHS24; the continuing confusion promoted by misleading archaic signage in some locations; the impact on in-patient provision where MIU

and in-patient were staffed by single nursing team; the challenges in ensuring adequate competency to provide the necessary services; the underlying Duty of Care which meant that any real emergency presentation would be supported to the best of abilities and resources; the need for better signposting of services and awareness of how the vulnerable in communities might still be best supported to access the necessary care from the appropriate providers; and the requirement to ensure that de-skilling does not become an issue for community hospitals, impacting on recruitment and retention.

The Joint Board **agreed:-**

- (1) to commend staff and partners, the communities, for the continuing work undertaken during the review of MIUs and their participation which has informed the findings;
- (2) to welcome the recent work undertaken in the communities of Aboyne, Banff, Huntly, Stonehaven, and Turriff to develop options for the Minor Injury Units in these areas;
- (3) to approve Option 3, as recommended by the Aboyne Local Implementation Group that the Aboyne Minor Injury Unit be open 08.00 – 22.00, seven days per week;
- (4) to approve Option 1, as recommended by the Huntly Local Implementation Group that the Huntly Minor Injury Unit be open 24 hours, seven days per week;
- (5) to approve Option 3, as recommended by the Stonehaven Local Implementation Group that the Stonehaven Minor Injury Unit be open 08.00 – 22.00, seven days per week;
- (6) to approve Option 3, as recommended by the Turriff Local Implementation Group that the Turriff Minor Injuries Unit be open 08.00 – 18.00, seven days per week;
- (7) that further work be continued to review existing and new data with local team and Friends of Chalmers Hospital group so that they can develop confidence in the recommendations for the Banff Unit, and that these be brought back to the IJB in August 2019;
- (8) that Directions be issued to NHS Grampian to implement the options supported for Aboyne, Huntly, Stonehaven, and Turriff; and
- (9) that the situation be monitored after implementation and reported to the Joint Board as appropriate.

10. NHS GRAMPIAN SERVICES (DELEGATED) WHICH ARE HOSTED WITHIN ABERDEENSHIRE, ABERDEEN CITY AND MORAY INTEGRATION JOINT BOARD

With reference to the Minute of Meeting of 12 December, 2018 (Item 14,) the Chair, on behalf of the Joint Board welcomed Pam Gowans, of the Moray Integration Joint Board, and Alex Stephen of the Aberdeen City Integration Joint Board to the meeting which thereafter heard in detail from officers of the hosted services, as detailed in the report from the Chief Officer.

Having heard from the Officers that the report would be considered, in turn, by each of the three Joint Boards, covering services hosted by specific Integration Joint Boards on behalf of the others, covering six specialties in Aberdeen Royal Infirmary and delegated community services which could range from small to significant budgets with proportionate risk, and highlighted the role of the North East Partnership Group in directing strategic planning for the six specialist services which was an evolving process but would be based on outcome framework, and strive to keep flexibility to preserve local provision.

There was discussion of the need for wide-spread engagement even when services were hosted in a specific locality and the need for the Integration Joint Board to be assured in considering the detail of the hosted services.

The Joint Board **agreed:-**

- (1) to endorse the approach set out for the monitoring and performance management of delegated services which are hosted by one of the three Integration Joint Boards on behalf of the other two Integration Joint Boards;

- (2) that the North East Partnership meet four times per year and await a further report from officers on a proposed role and remit for this meeting; and
- (3) that the detail of the services be considered at the July development session and reported formally to a subsequent meeting of the Joint Board.

11. ABERDEENSHIRE PASSENGER TRANSPORT NETWORK REVIEW MEMBER OFFICER WORKING GROUP – EXPANSION OF MEMBERSHIP

With reference to the Minute of Meeting of Aberdeenshire Council's Infrastructure Services Committee of 16 May, 2019 (Item 11), there had been circulated a report dated 27 May, 2019 by Aberdeenshire's Director of Infrastructure Services, providing details of the Council's Passenger Transport Network Review Member/ Officer Working Group, and requesting the appointment of a member of the Integration Joint Board to represent Health & Social Care on the expanded membership of the Working Group.

Having heard from the Principal Officer, Transportation, Aberdeenshire Council as to the evolution of the Working Group from looking at supported bus services to make them more sustainable in the medium to long term the wider impact on social inclusion had led to the recommendation that representatives from the Council's Education and Children's Services Committee and the Integration Joint Board, the Joint Board **agreed** unanimously to appoint Councillor Stirling as its representative to the Working Group.

12. ABERDEENSHIRE ADULT MENTAL HEALTH AND WELLBEING STRATEGY, 2019 – 2024

With reference to the Minute of Meeting of 12 December, 2018 (Item 9), there had been circulated a report by the Partnership Manager (North), recommending the approval of the Aberdeenshire Health & Social Care Partnership's Adult Mental Health and Wellbeing Strategy 2019 – 2024 and its attendant Delivery Plan 2019 -2021, informed by an extensive engagement in summer and autumn 2018 with key stakeholders, including those with "lived experience", Health & Social Care Partnership staff, third sector organisations, and members of the public. The engagement had taken place via an online survey, face to face focus groups, and briefings to the 6 Aberdeenshire Area Committees, garnering the participation of approximately 630 people in all.

Having heard further from officers of the anticipated positive impact across all protected characteristics, the already planned increase in number of mental health workers across Aberdeenshire, there was discussion of the interface with the developing Learning Disability strategy, as 40% of that group were known to have associated mental wellbeing issues; common national trends in the consideration of provision; the known links to detrimental life style behaviours; increasing evidence of stress across workforces and employers' responsibilities for support in addition to the promotion of self-management coaching; the stigma associated with mental unwellness as opposed to physical health issues; the separate work being undertaken to develop a strategy for children transitioning from children to adult care services; the role of the Scottish Association for Mental Health (SAMH) across Aberdeenshire, with its contract to be reviewed at its two year point; and ongoing discussions with Council colleagues and local GP Practices on integration of mental health and wellbeing with both the Council's culture and sport service and with GP prescribing leisure and recreational activities as support.

The Joint Board **agreed:-**

- (1) to approve the Aberdeenshire Health & Social Care Partnership (AHSCP) Adult Mental Health and Wellbeing Strategy 2019 – 2024 as detailed in Appendix 1 to the report, subject to the potential addition of more illustrative narrative to explain case studies;

- (2) to approve for implementation the Adult Mental Health and Wellbeing Strategy: Delivery Plan 2019 – 2021, as detailed in Appendix 2 to the report; and
- (3) to commend officers on the excellent work in developing the strategy.

Arising from consideration of the above, the Chief Officer advised that this would be Mr Matthews, Strategic Development Officer, last presentation to the Integration Joint Board before he took up the post of Policy Officer (Mental Health) with Health and Social Care Scotland, supporting the Chief Officers Group on mental health policy research and engagement.

The Chair, on behalf of the Joint Board, thanked Mr Matthews for his work in supporting the Partnership to date, and wished him all the best in his new post.

13. RISK MANAGEMENT POLICY

There had been circulated a report dated 7 May, 2019 by the Partnership Manager (Strategy & Business Services), requesting consideration, for formal adoption, of a Risk Management policy, citing the outcomes of an Internal Audit report of February, 2019 which had noted that the previous, cross-sector Risk Management Policy of 2016 had not been formally approved by Aberdeenshire Integration Joint Board. Having heard from officers that the proposed policy had been reviewed, updated, and streamlined; and that the Health & Social Care Partnership's Senior Management Team considered the matter regularly, with any items classified as high risk being reported to the Joint Board, usually in terms of sustainability of services and workforce, there was discussion of when Risk Registers would be formally in place, and how such registers were established and assessed; and the processes of two way dialogue which would inform them, with the register to link to the Joint Board's Strategic Plan and its four priorities.

The Joint Board, noting that risk management had been, and would again be, discussed in detail at informal development sessions **agreed** to approve the Risk Management Policy as appended to the report.

14. FINANCIAL OUTTURN 2018/19

There had been circulated a report dated 11 May, 2019, by the Chief Finance Officer, setting out the final financial monitoring position for the year 2018 - 2019 of the activities for which the Integration Joint Board was responsible.

The meeting heard from the Chief Finance Officer of the key areas of budget pressure which had led to the formal request to partners for additional resources, including out of area packages and care of the elderly, both need based care and so impossible to forecast in detailed accuracy on an annual basis; and that a balanced budget had been approved in March 2019 for the 2019 – 2020 financial year, with the first summary report to be considered at the August meeting of the Joint Board. There was discussion of whether there was any direct connection between commissioned care costs and the "savings" made to the Acute sector provision by reducing bed blocking and reducing delayed discharge, with an increase in care costs of 160% in 2018 – 2019, unheard of in previous financial years; the recent Audit Scotland national report which evidenced that not all demands and services were funded adequately.

The Joint Board **agreed:-**

- (1) to note the financial position as set out in the report and Appendices 1 and 2;
- (2) to approve the budget adjustments as detailed in Appendix 3 to the report;
- (3) to formally request that NHS Grampian and Aberdeenshire Council fund the reported over-budget position for the year ended 31 March, 2019; and

- (4) to commend officers for achieving a balanced budget in the current financial context.

15. ABERDEENSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP PERFORMANCE AND OUTCOMES FRAMEWORK QUARTER 4 REPORTING – JANUARY TO MARCH 2019

There had been circulated a report dated 24 May, 2019 by the Partnership Manager (Strategy & Business Services), providing performance information against the Board's strategic priorities for the period January to March, 2019 and also reporting, as a matter of exception, those indicators which were currently at a red status, failing to meet local targets and outwith tolerances.

The Joint Board heard from officers that whilst performance was mainly good at both national and local outcomes, there were areas not showing improvements, one example being the rising level of attendance at the Emergency Department for which there was, as yet, no determined explanation; of considered refinements to the reporting process for Aberdeenshire's Communities and Area Committees, which often met before the information had been considered by the Integration Joint Board itself; and of ongoing discussions to ensure that the data requested could be provided meaningfully.

There was discussion of how any comments from the Council's Area and Communities Committee might be best reflected back for Joint Board consideration, as currently the timetable of presentation impacted on the information which the Joint Board received from stakeholders and how this timetable could be best organised to maximise its usefulness whilst reserving the Joint Board's ownership, and potential to have first sight of any information shared in another, public, domain.

The Joint Board **agreed:-**

- (1) to note the Performance Quarter 4 reporting and performance against the Strategic Commissioning Plan by Exception as detailed in the report;
- (2) that the report be circulated to Aberdeenshire Council's Area Committees for their information and reflection, with any feedback shared with the Joint Board members; and
- (3) to defer consideration of the sequencing of reporting between the Council's Committees and the Joint Board and seek informal input from various members before submitting a proposal for IJB consideration.

16. SUPPLEMENTARY WORK PLAN – PROCUREMENT APPROVAL

With reference to the Minute of Meeting of 12 December, 2018, (Item 16), there had been circulated a report dated 28 May, 2019 by the Chief Officer, requesting consideration of the addition to the Work Plan 2019 – 2020 of an additional piece of work relating to the proposed contract HSCP013, Peer Support Service, for a period of 24 months, from October 2019 to September 2022, at a total contract cost of £625,000.

There was discussion of the outcomes expected to be delivered and how they might best match strategic priorities and the Joint Board **agreed:-**

- (1) to approve the work plan as detailed in Appendix 1 of the report;
- (2) to note that the Business Case, having a value of less than £1,000,000, has been approved by the Chief Officer but may still be reserved for approval by Aberdeenshire Council's Communities Committee before the appropriate Direction is implemented;
- (3) to Direct Aberdeenshire Council to procure, on behalf of the Integration Joint Board, the services as detailed in the Work Plan;
- (4) to note that the contract requirements proposed aligned with the Strategic Plan, Outcome 5: - Health and social care services contribute to reducing health inequalities;

- (5) to note that, in relation to the requirement of a Direction, the budget for the proposed services has already been identified within existing budgets; and
- (6) that officers report on the impact of delivery to a future meeting of the Joint Board.