

## ABERDEENSHIRE INTEGRATION JOINT BOARD

WOODHILL HOUSE, ABERDEEN, 30 AUGUST, 2017

### Integration Joint Board Members:

Councillor E A Stirling (Chair), Dr L Lynch (Vice Chair), Councillor A M Allan, Ms A Anderson, Mrs S Duncan, Mr A Gray, Councillor G Petrie (as substitute for Councillor D Robertson), Councillor A Ross and Mr E Sinclair.

### Integration Joint Board Non-Voting Members:

Mr A Coldwells, Chief Officer, Aberdeenshire Health and Social Care Partnership; Mr A Wood, Chief Finance Officer; Ms S Kinsey and Mr D Hekelaar, both Third Sector Representatives; Ms I Kirk, Unison (Aberdeenshire); Mr M McKay, Unison (NHS Grampian); Ms D Cromar, Service User Representative.

**Officers:** Mr A Stobie, Mr S Ritchie and Mr N David, all Aberdeenshire Council; Mr M Ogg, Ms A Wood, Mr M Simpson, Mr I Ramsay, Ms K Menzies, Ms F Stephen, Ms S Donaldson and Ms S MacIntosh, all Aberdeenshire Health and Social Care Partnership.

**Apology:** Provost W Howatson, Councillor D Robertson, Dr C Allan and Ms E Chisholm.

## 1. SEDERUNT, DECLARATION OF INTERESTS AND WELCOME

The Chair asked for declarations of interest from both voting and non-voting members.

Ms Amy Anderson declared an interest in Item 8 as an employee of the organisation PAMIS and indicated that she would remain and take part in the discussion on this item. Ms Anderson also declared an interest in Item 11 as a paid employee of PAMIS and indicated that she would leave the meeting during discussion of the matters relating to PAMIS.

No other interests were declared.

Thereafter, the Chair, welcomed Ms Denise Cromar, Service User non-voting member of the Integration Joint Board to her first formal meeting. The Board concurred with the Chair in welcoming Ms Cromar.

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

### 3. INTEGRATION JOINT BOARD – 28 JUNE AND 26 JULY, 2017

There were circulated, **noted** and **approved** as appropriate, the minutes of meetings of the Integration Joint Board of 28 June and 26 July, 2017.

### 4. INTEGRATION JOINT BOARD AUDIT COMMITTEE – 28 JUNE, 2017

There were circulated, **noted** and **approved** as appropriate, the minutes of meeting of the Integration Joint Board Audit Committee and of the reconvened Integration Joint Board Audit Committee, both of 28 June, 2017.

### 5. ACTION LOG

There was circulated, **noted** and **approved** as appropriate, the Integration Joint Board Action Log prepared by the Chief Officer, Aberdeenshire Health and Social Care Partnership.

### 6. ABERDEENSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP COMMISSIONING PLAN 2017-19 – THEMES AND PRIORITIES

There was circulated a report dated 14 August, 2017, by the Partnership Manager (Strategy and Business), Aberdeenshire Health and Social Care Partnership on the themes and priorities of the Commissioning Plan 2017-2019.

The report reminded the Joint Board that the Health and Social Care Partnership had a Strategic Plan for the period 2016-2019 which set out the vision for the Partnership and how it intended to improve the health and wellbeing of adults in Aberdeenshire through the design and delivery of integrated health and social care services. From the Strategic Plan a number of priorities had been identified and detailed in the Commissioning Plan for 2016/2017. The fifteen priorities were set out under the four themes of: involving and engaging our communities; partners in health and social care; the best of health and care for everyone; and effective treatment and care.

A development session for members had been held on 26 July, 2017, with the aim to consider whether the themes and priorities were still relevant as planning for change over the next eighteen months took place. Thereafter, the Senior Management Team had discussed the information from the development session and were proposing that there were two themes and ten priorities that would be taken forward through the Commissioning Plan for 2017-2019. These were detailed within the report.

Following discussion, the Joint Board **agreed**:-

- (1) to acknowledge the outcome of the Integration Joint Board development session on 26 July, 2017, regarding a refresh of the themes and priorities in the Commissioning Plan,
- (2) that in advance of approving the revised themes and priorities that would inform the content of the Commissioning Plan 2017-2019 further information be provided in relation to ongoing work in respect of support for carers and staffing issues, and
- (3) that information be provided to the Joint Board on the next steps.

## 7. ABERDEENSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP LOCALITY PLANNING UPDATE

There was circulated a report dated 17 August, 2017 by the Partnership Manager (Central), Aberdeenshire Health and Social Care Partnership which outlined the approach being taken and progress for locality planning in the Aberdeenshire Health and Social Care Partnership.

The report provided an update to the Joint Board on the progress of locality planning arrangements. Localities were intended to be central to the process of integration, bringing together service users, carers, and health and care professionals to plan and help redesign services. Creating forums to bring these people together would enable them to play an active role in service design and improvement.

The report provided detailed information on the progress and the preparation phase for the implementation of locality planning.

Following discussion, the Joint Board **agreed** to support the approach being taken and progress for locality planning in Aberdeenshire Health and Social Care Partnership and to underline that the approach should take account of the importance of communication with Aberdeenshire residents, the Third Sector and the Health and Social Care Partnership workforce.

## 8. ANNUAL GRANTS TO THIRD SECTOR ORGANISATIONS

There was circulated a report dated 14 August, 2017, by the Partnership Manager (Strategy and Business) on annual grants to third sector organisations.

The report reminded the Joint Board that the Social Work and Housing Committee of Aberdeenshire Council previously had responsibility for the allocation of annual grants to third sector organisations. In February 2016 the Committee agreed allocation of a budget of £425,000 to third sector organisations and a transfer of £89,000 to Education and Children's Services for payment to third sector organisations supporting children and families. Thereafter, the third sector grants budget was transferred to be included in the combined Health and Social Care Budget on 1 April, 2016 and it was recommended by the Social Work and Housing Committee that the spend needed to be aligned to contributing to achievement of the fifteen priorities in the Aberdeenshire Health and Social Care Partnership Strategic Plan. At the meeting of the Integration Joint Board in June, 2016, it was agreed: to approve the plan to consult with relevant third sector organisations regarding a new process of aligning spend with the priorities in the Strategic Plan and replacing the annual grants process with more sustainable, long-term funding, and in particular it was noted the requirement for risks and benefits to be clarified, and alignment of funding budgets and an assurance that there would be equitable access to the funding; and that the Chief Officer, Aberdeenshire Health and Social Care Partnership, seek the views of the Council Area Committees on the consultation plan and report back to the Integration Joint Board.

The report went on to outline the process that had taken place since June, 2016. This included workshop sessions with each of the six Area Committees. The report concluded by outlining an action plan suggested for approval by the Joint Board.

Following detailed consideration, the Joint Board **agreed**:-

- (1) to acknowledge the feedback from Area Committees on proposals to change the eligibility criteria and process for the award of grants to organisations, and

- (2) to defer approval of the new arrangements, as outlined in the report, subject to a report being submitted to the next meeting, specifically including information on the contribution of the Third Sector Grants programme to the overall funding of these organisations and projects.

## 9. DELAYED DISCHARGE

There was circulated a report dated 3 August, 2017, by the Partnership Manager (South) on the current position with regard to delayed discharge.

The report reminded the Joint Board that the predecessor body, the Transitional Leadership Group had received a monthly report and participated in several development sessions on delayed discharge. This included the Transitional Leadership Group endorsing the Delayed Discharge Action Plan in May, 2015, which set out the mechanism for the reduction of the number of people who were delayed in hospital. The Action Plan committed the additional funding provided by the Scottish Government.

The report went on to provide detailed information on: the current number of people delayed; bed days lost to delays in discharge and Grampian-wide Discharge Policy.

The Joint Board **agreed** to:-

- (1) endorse the current approach adopted by the Aberdeenshire Health and Social Care Partnership in managing delays in discharges from hospital, and
- (2) receive twice yearly updates at Integration Joint Board meetings, with additional exception reports as required.

## 10. IMPLEMENTATION AND PROGRESS OF THE NEW SCOTTISH ASSOCIATION FOR MENTAL HEALTH (SAMH) CONTRACT

There was circulated a report dated 1 August, 2017, by the Chief Officer, Aberdeenshire Health and Social Care Partnership on the implementation and progress of the new Scottish Association for Mental Health contract.

The report explained that Mental Health Services were provided in the community through a range of mechanisms including Community Mental Health Teams, Primary Care Services and Commissioned Third Sector Provision.

The report went on to explain that there was a requirement to recommission the provider element of Mental Health Services because of: an increasing Aberdeenshire-wide shift to delivery of services on a community based model which supported integration, equality and efficient use of resources; a need to comply with financial and procurement regulations because it had been at least ten years since the previous services were commissioned; and a need to update the service specification to reflect the Aberdeenshire Health and Social Care Partnership's strategic priorities and current thinking on good practice within mental health social work.

The Joint Board **agreed** to acknowledge the progress made by the Scottish Association for Mental Health (SAMH) during the first six months of 2017 in the implementation of their contract for Aberdeenshire's new commissioned community mental health service, My Life Dynamic, and that regular updates be provided to the Joint Board.

## 11. PROGRESS TOWARDS IMPLEMENTATION OF CARERS (SCOTLAND) ACT 2016

There was circulated a report dated 15 August, 2017, by the Partnership Manager (Strategy and Business), Aberdeenshire Health and Social Care Partnership on progress towards implementation of the Carers (Scotland) Act 2016.

The report explained that the Carers (Scotland) Act 2016, which would come into force on 1 April, 2018, represented a bold vision through extending and enhancing the rights of carers. Implementation of the Carers (Scotland) Act 2016 sat within a wider context of the integration of health and social care, building a fairer Scotland and a strong, sustainable economy, tackling inequalities and delivering public services with communities.

The Carers Act would also work alongside other initiatives and programmes to support carers and the people they cared for, including transformation of primary care and reform of adult social care and the social security system. The driver for change was providing choice and control through self-directed support.

The report included detailed information on the current service provision for carers; ready for implementation toolkit; finances relating to the Act; and progress in preparing for implementation.

Within the report there were recommendations for approval regarding funding for the Carer Information Strategy 2017-2018. This included funding to the PAMIS Project – Digital Passport Development Project (Grampian) and Quarriers – Respite Central Aberdeenshire Pilot.

Following discussion, the Joint Board **agreed**:-

- (1) to endorse the progress being made towards implementation of the Carers (Scotland) Act 2016, as detailed in the readiness for implementation toolkit,
- (2) to note the spend of the Carers (Scotland) Act 2016 transitional funding of £80,000,
- (3) to acknowledge delegation of Carer Information Strategy funding of £198,541 for 2017/2018 from NHS Grampian to the Joint Board and that a further report be submitted on recommendations of the use of this funding, and
- (4) with regard to funding for PAMIS – Digital Passport Development Project (Grampian) and Quarriers – Respite Central Aberdeenshire Pilot, from August, 2017 to March, 2018 and August, 2018 respectively, that this be delegated to the Chief Officer, Aberdeenshire Health and Social Care Partnership.

## 12. IMPLEMENTATION OF PAYMENT CARDS FOR DIRECT PAYMENTS

There was circulated a report dated 11 July, 2017, by the Partnership Manager (Strategy and Business) on the implementation of payment cards for direct payments.

The report explained as background that direct payments were first introduced in 1987 under the Community Care (Direct Payments) Act 1996. Further to this the Social Care (Self Directed Support) (Scotland) Act 2013 came into effect in April, 2014. These pieces of legislation placed a duty on the local authority to offer direct payments as one of the alternatives to traditional models of care provision.

The Joint Board **acknowledged** the update provided on the implementation of payment cards for direct payments.

### 13. FINANCE UPDATE

There was circulated a report by the Chief Finance Officer which provided a finance update as at June, 2017.

The report explained that the first full year's accounts, which were still subject to audit, were presented to the Audit Committee of the Integration Joint Board on 28 June, 2017, showing a surplus of £9,000 for the year, which was now in the Integration Joint Board reserves. At this stage of the audit process, discussions with Audit Scotland indicated that a clean audit report was expected for the Joint Board. The Chief Finance Officer advised verbally that this had now been received.

As the accounts for the Integration Joint Board were prepared using a local government format some funds which were held as cash by NHS Grampian were not actually transferred by the end of the financial year. The Integration Joint Board accounts had accrued this cash in the accounts and therefore recommendations were required to transfer the cash. The Finance Section of the Integration Scheme stated that "a final transfer will be made at the end of the financial year on closure of the annual accounts of the Integration Joint Board to reflect in-year budget adjustments agreed.". In order to conclude this, the Integration Joint Board were asked to direct a payment of £548,000 from NHS Grampian to the Integration Joint Board, with £529,000 of this sum for onward remittance to Aberdeenshire Council.

Thereafter the report went on to outline the current financial position as this was the first financial monitoring report to the Integration Joint Board for 2017/2018. The detailed projection for the financial year showed a forecast overspend position of £2,819,000 across all the financial resources available to the Joint Board. A number of overspends were currently being forecast across the health and social care budgets, whilst the delayed discharge and integrated care fund were forecast to be within budget.

The report concluded by explaining that the reinforcement of a strong partnership arrangement across the Integration Joint Board, with NHS Grampian and Aberdeenshire Council, was critical and this continued to be in place. This partnership, coupled with the production of a medium term financial strategy, would enable financial discussions to be strategic, forward looking and aligned to the Strategic Delivery Plan. However, the Integration Joint Board recognised that it had limited resources and that choices had to be made in terms of service delivery. Early and continuous dialogue with partners would ensure that the Integration Joint Board Delivery Plan was understood and integral to the funding priorities of both partner organisations.

The Joint Board **agreed** to:-

- (1) acknowledge the financial position set out in the report,
- (2) acknowledge actions to be taken in the current year relating to the financial position,
- (3) approve the budget adjustments detailed in Appendices 3 and 4 to the report,
- (4) acknowledge the credit of £48,000 on NHS Grampian funds from 2016/2017, which had been made available to the Integration Joint Board to use in 2017/2018, and
- (5) the transfer of £529,000 of this credit by the Integration Joint Board to Aberdeenshire Council to meet the overspend against Aberdeenshire Council funding for 2016/2017.

#### **14. ABERDEENSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP PERFORMANCE AND OUTCOMES FRAMEWORK: QUARTER 1 REPORTING – 2017/2018**

There was circulated a report dated 31 July, 2017, by the Partnership Manager (Strategy and Business), Aberdeenshire Health and Social Care Partnership which presented the Integration Joint Board with the Health and Social Care Partnership performance information reported against the strategic priorities for the period April to June, 2017. It included as an exception report those indicators which were currently a red status, ie. not meeting local targets and outwith tolerances, which were detailed in Appendix 2 to the report.

The performance information was to allow the Integration Joint Board scrutiny and sat alongside the Implementation and Change Action Plan. The scale and breadth of improvement projects meant it was difficult to align system information to any single project as the major projects aimed to hit multiple areas within the system in order to affect change.

The Joint Board **agreed**:-

- (1) to note the content and detail within the Integration Joint Board Performance Quarter 1 Report,
- (2) to acknowledge the performance of national core suite indicators as detailed in Appendix 1,
- (3) to acknowledge performance against the Strategic Commissioning Plan by exception, as detailed in Appendix 2, and
- (4) that the report be submitted to Area Committees for information and comment, which in turn would be fed back to the Integration Joint Board.

#### **15. NHS REGIONAL WORKING**

The Joint Board **agreed** that this item be considered as a briefing note rather than a report to the Joint Board. In this regard the Joint Board **noted** the information provided on the development of the North of Scotland Regional Delivery Plan.

#### **16. JOINT EQUIPMENT SERVICE**

There was circulated a report dated 23 August, 2017, by the Partnership Manager (Strategy and Business), Aberdeenshire Health and Social Care Partnership on the Joint Equipment Service.

The report reminded the Joint Board that detailed information had been provided to the Joint Board previously about the work and recent success of the Joint Equipment Store. The service had grown exponentially and now provided a range of OT, nursing and physiotherapy equipment, as well as community alarms, telecare, housing adaptations and bariatric equipment.

The report went on to outline two contracts that were necessary for the continuation of provision of stairlifts and aids by the Joint Equipment Service.

The Joint Board **agreed**:-

- (1) to acknowledge the provision of services for stairlifts in people's homes and daily aids, as outlined in the appendix to the report,

- (2) to direct Aberdeenshire Council to procure these services on behalf of the Integration Joint Board; noting that the contract requirements aligned with the Strategic Plan in relation to Priority 3 namely “involving people as partners in their care, listening and responding” as well as Priority 4 “self-care and self-management of long term conditions”, and
- (3) that in relation to the requirement of a direction, the budget for these services was identified within the existing budgets already approved.