

## ABERDEENSHIRE INTEGRATION JOINT BOARD

27 FEBRUARY 2019

### Integration Joint Board Members:

Councillor EA Stirling (Vice-Chair); Councillor A Allan; Ms A Anderson; Ms J Duncan; Mr A Gray; Councillor F Hood (as substitute for Provost W Howatson); Councillor D Robertson; and Councillor A Ross.

### Integration Joint Board Non-Voting Members:

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

### Officers:

Mrs K Davidson, Ms J Gibb, Ms K MacLennan, Mrs S McIntosh, Ms J Raine-Mitchell, Ms K Regan, Mr I Ramsay, Mrs S Strachan, Mr M Simpson, and Mrs A Wood, Aberdeenshire Health and Social Care Partnership (AHSCP); and Mrs L Cowie, and Ms J McRobbie, Aberdeenshire Council.

### Apologies:

Ms R Atkinson; Provost W Howatson; and Ms R Little.

## 1. SEDERUNT AND DECLARATION OF INTERESTS

In the absence of the Chair, Councillor EA Stirling, Vice-Chair, took the Chair for the meeting.

At the Chair's discretion, the meeting not being quorate at its scheduled start time, informal discussion took place on various items of business, which were formally considered at approved when the meeting became quorate with the arrival of Ms Anderson and Mr Gray.

She advised the Joint Board that apologies had been received from Ms R Atkinson, Provost W Howatson, and Ms R Little.

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

Councillor Robertson advised that he had been appointed, on an individual basis, as a non-executive member of the NHS Grampian Board but that, having applied the objective test, was confident that, sitting on the Integration Joint Board as a Council appointment, he had no interest to declare.

Mr Hekelaar advised the Joint Board that as Director of Aberdeenshire Voluntary Action (AVA) he had interests to declare in terms of Items 15 and 16.

In terms of item 15, (External Evaluation Of The Community Health In Partnership (CHiP) Project), having applied the objective test, Mr Hekelaar advised that he would leave the meeting and take no part in the discussion of the item.

In respect of item 16, (Aberdeenshire Health And Social Care Partnership Grant Funding), he advised that, as a Director of AVA which no longer applied for grant funding from the partnership. having applied the objective test, Mr Hekelaar concluded that it was not clear and substantial and indicated that he would therefore remain and participate in the discussion.

Mrs Kinsey advised the Joint Board that as Director of Aberdeenshire Voluntary Action (AVA) she had interests to declare in terms of Items 15 and 16.

In terms of Item 15, (External Evaluation Of The Community Health In Partnership (CHiP) Project), Mrs Kinsey advised that, having applied the objective test, she would leave the meeting and take no part in the discussion of the item.

In respect of Item 16, (Aberdeenshire Health And Social Care Partnership Grant Funding), she advised that, as a Director of AVA, which no longer applied for grant funding from the partnership, and having applied the objective test, it was not clear and substantial interest and indicated that she would therefore remain and participate in the discussion.

## 2. RESOLUTIONS

### (A) - 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.

### (B) EXEMPT INFORMATION

The Joint Board agreed, in terms of Appendix 2 of the Standing Orders of the Integration Joint Board, to exclude the public and media representatives from the meeting in respect of Items 12 to 16, exempt under paragraph 7 of the Categories of Exempt Information, 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 12 DECEMBER, 2018

There had been circulated the Minute of Meeting of the Integration Joint Board of 31 October, 2018.

The Joint Board **agreed** to approve the Minute, subject to the amendment, in the sederunt and Item 1, (Page 1), of "Councillor E A Robertson" to read "Councillor E A Stirling".

## 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 the extension of the membership of the Audit Committee; Directions issued to both NHS Grampian and Aberdeenshire Council in respect of the Adult Mental Health and Wellbeing Strategy; the British Sign Language training available to NHS Grampian staff; and briefings issued to Aberdeenshire Councillors on the progress of the Minor Injury Units Review.

Having heard further from Ms Gibb of the education available to NHS staff, there was discussion of the need to consider widening accessibility standards to encompass all sensory issues. The Joint Board **agreed:-**

- (1) that officers consider accessibility of support for all sensory issues;
- (2) that an annual report be submitted to advise members on the roll out of the Council's British Sign Language Plan to meet requirements; and
- (3) to note, in all other respects, the updates provided.

## 5. CHIEF OFFICER'S UPDATE

There had been circulated a report by the Chief Officer providing an update on (a) progress with the Minor Injury Review, with community events planned for March, 2019, and continuing work with the local implementation groups; (b) the agreement of the Macduff Medical Practice to take over the Deveron Medical Practice from 1 May, 2019, with all services being operated from Banff Health Centre, and drop in sessions and correspondence sent to all patients; (c) a joint redesign, with Moray and Aberdeen City Health and Social Care Partnerships, of the service supply of Oral Nutritional Supplements for adults, with dietetics and pharmacy working closely with Primary Care colleagues, where improvements to nutritional care, reduced pressure for GPs to prescribe, and cost savings through improved prescribing practices and appropriate product choice had been realised in tests; (d) the relocation of the Substance Misuse Service to temporary accommodation at Fraserburgh Hospital, with building work scheduled to create a permanent additional clinical space planned for later in 2019; (e) ongoing preparations for BREXIT, including strengthening existing civil contingency response and communication systems; (f) the continuing evolution of the Clinical and Adult Social Work Governance (CASWG) structure and its planned workshop review in April, 2019; (g) the Winter 2018/19 performance, with delayed discharge, emergency admission, and emergency occupied bed days all improved, or remained stable, compared with the same period in 2017/18; the work of the Clinical and Adult Social Care Committee, including two legacy referrals from Aberdeenshire Council's Social Work Complaints Review Committee, neither of which had been upheld, but which had recommended action in some procedural areas relating to communication; and (h) on the appointment of additional, non-voting members to the Audit Committee, and subsequent need to reconsider the quorum for that Committee.

There was discussion of the cost benefits of the improved adult health oral nutritional supplement process, noting that this would not cover food allergies but did encompass celiac patients; the status of the legacy Social Work Complaint cases; and the membership, quorum and chairing of the Audit Committee.

The Joint Board **agreed:-**

- (1) to welcome the arrangements in place for the Deveron Medical Practice cases;
- (2) to approve the appointment of Tony Cox, David Hekelaar, and Inez Kirk to the Audit Committee with immediate effect;
- (3) to note that NHS Grampian had replaced Mr Eric Sinclair on the Audit Committee with Ms Amy Anderson;
- (4) to note that either Ms Anderson or Ms Little would be Vice Chair of the Audit Committee;
- (5) that officers report in detail to the next meeting on the issue of Audit Committee quorum and confirmation of the Chair and Vice-Chair;
- (6) that a further paper on three legacy Social Work Complaints Review Committee be submitted when the outstanding case has been heard; and
- (7) to note, in all other respects, the updates provided.

## 6. ABERDEENSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP (HSCP) RISK REGISTER AS AT JANUARY, 2019

There had been circulated a report by the Partnership Manager, (Strategy and Business Services), requesting consideration of the Partnership Risk Register as at January 2019, encompassing 10 identified risks and attributing levels to them, and providing information on the work plan to further develop the Partnership's attitude to risk.

Having heard further from the Chief Officer of the work, and Internal Audit's recommendation that a much clearer policy on risk be considered, there was discussion of the effectiveness of communication methods, including the accessibility of Minutes, and other methods by which public willingness to engage with the Partnership might be promoted; the impact of delays in the court system on mental health and wellbeing, given that Aberdeenshire currently had no difficulty recruiting Mental Health Officers; future training for officers; and national challenges of GP recruitment in rural Scotland;

The Joint Board **agreed**:-

- (1) to approve the current Risk Register, subject to greater emphasis being placed on the Sustainable Workforce and ensuring future engagement and communication strategies are easy read and have British Sign Language support where appropriate;
- (2) that future risk appetite be considered at the development session scheduled for May, 2019; and
- (3) that officers consider and report on Minuting style.

## 7 - CHARGING POLICY 2019/20

There had been circulated a report by the Chief Officer, (a) requesting the Board's consideration, as formal consultee, of Aberdeenshire Council's proposed Charging Policy for Non-Residential Care and Support for 2019/20 and (b) detailing the proposed charges.

Having noted that the proposals continued the previously agreed process of charging, with inflationary increases only; would be supported by a communication strategy for service users; and would maximise annual billing and online processes to minimise administrative costs, the Joint Board **agreed** to recommend to Aberdeenshire Council's Communities Committee:

- (1) approval of the proposed Charging Policy for Non-Residential Care and Support for 2019/20, as detailed in the charging policy as detailed in Appendix 2 to the report;
- (2) approval of the rates for Charges and Allowances as detailed in Appendix 3 to the report;
- (3) approval of the unit costs as detailed in paragraph 5.1 of the report; and
- (4) approval of the Charging Guide for Residential Care and Support 2019/20, as detailed in Appendix 4 to the report.

## 8. REHABILITATION AND ENABLEMENT PATHWAY

There had been circulated a report dated 25 January, 2019, by the Allied Health Professional Lead, providing an update on work done in supporting an integrated rehabilitation and enablement pathway in Aberdeenshire; indicating ongoing work to lead local implementation, based on best practice; and proposing that regular performance updates be submitted to the Joint Board.

Having heard further from the Allied Health Professional Lead on the challenges of recording enablement pathways in evidencing reducing reliance on social care provision; staff training

to understand and apply the enablement approach (e.g. in assisting someone to learn how to put their clothes on themselves, as opposed to put them on for them); there was discussion of the public lack of understanding of “re-enablement”/ “enablement” as a concept, seeing it rather as a reduction in services previously provided.

The Joint Board **agreed:-**

- (1) that officers provide background information to all as to the enablement scheme’s concept and intent;
- (2) that consideration be given to increasing the accessibility of the naming of the project;
- (3) that consideration be given to providing more public information, at the time of use, to clarify that positive intent of the enablement approach; and
- (4) that updates on progress be reported every six months.

#### **9. UNDERSTANDING PROGRESS UNDER INTEGRATION – ABERDEENSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP (HSCP) RESPONSE TO MINISTERIAL STRATEGIC GROUP FOR STRATEGIC GROUP FOR HEALTH AND COMMUNITY CARE**

There had been circulated a report dated January 2019 by the Partnership Manager (Strategy and Business Development), requesting members’ consideration of a proposed response to a Ministerial consultation on Integration updated objectives for the six areas previously approved for as indicators, namely, (a) emergency admissions to Acute (SMR01) specialities; (b) unscheduled hospital bed days; (c) Accident and Emergency attendances and the percentage of patients seen within 4 hours; delayed discharge bed days; (d) percentage of last six months of life spent in the community; and (e) percentage of populations residing in non-hospital setting for all adults and 65+.

Having heard from officers of the baselines chosen for each indicator, with 15/16 the default except for delayed discharge beds where 17/18 was more appropriate, there was discussion of the merits of percentage reporting when the total number was not obvious; the care needed in drawing conclusions or making comparisons when acute care beds were now being used in a different way; and the requirement to augment statistical reporting with some accompanying narrative about the people behind the bed numbers.

The Joint Board **agreed:-**

- (1) to approve for submission the proposed response, amended as detailed above; and
- (2) that additional narrative be provided, including reference to the positive impact of the Virtual Community Wards (VCW) and stressing the number of people kept out of hospital (estimated to be over 2000).

#### **10. ABERDEENSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP (HSCP) PERFORMANCE & OUTCOMES FRAMEWORK: PREPARATION OF ANNUAL PERFORMANCE REPORT 2018/2019**

There had been circulated a report dated 24 January, 2019 by the Partnership Manager (Strategy and Business Services) requesting consideration of a proposed framework for the 2018/ 2019 Annual report. Having notes the statutory requirements of what needed to be reported in terms of national health and well being outcomes, within the context of the Partnership Strategic Plan and Financial Statement; summary of financial performance; description of arrangements made to involve and consult with localities and an assessment of how they have contributed to the provision of services; and details of any inspections carried

out relating to the functions delegated to the Partnership by Healthcare Improvement Scotland and the Care Inspectorate.

There was discussion of the evolution of reporting to date, and the Joint Board **agreed:-**

- (1) to commend the proposed framework as detailed in the report, subject to the addition of local stories to illustrate and help to demystify all the qualitative and quantitative statistics;
- (2) that an additional section be included to outline future challenges; and
- (3) that the previous Annual Report be circulated to all members for their information.

#### **11. FINANCE UPDATE AS AT 31 DECEMBER, 2018**

There had been circulated a report dated 27 January, 2019 by the Chief Finance Officer, reporting the financial position as at 31 December, 2018 and requesting members' consideration of budget adjustments proposed.

Having heard further from the Chief Finance Officer that improvements had been observed in various areas, detailed in the report, where budget provision had been over-estimated, or savings made through staff retiral or vacancies, or additional funds received in respect of Mental health services, there was discussion of the expected impact of staff salary increases, and the inherited position of deficit funding, the Joint Board **agreed** to approve the budget adjustments as detailed in Appendix 3 to the report

#### **12. INTEGRATION JOINT BOARD (IJB) BUDGET SETTING 2019/20**

There had been circulated a report dated 4 February, 2019 by the Chief Finance Officer, requesting members' consideration of a provisional budget for the Aberdeenshire Integration Joint Board for 2019/20.

Having heard further from the Chief Finance Officer, that, despite the authority allowed councils by Holyrood in its budget allocation to reduce funding to their Integration Joint Boards, Aberdeenshire Council had decided, at its budget meeting of 14 February, 2019 not to exercise that flexibility, but that new commitments, and an existing overspent, left a budget gap to be balanced in 2019/20. On that basis, Mr Sharp commended proposed measures to make better use of bank and agency staff, and balance care at home across internal versus external support, indicating that the internal budget realignment would be discussed by the Finance Working Group on 28 February, 2019, with the intend to report a budget for agreement on 20 March, 2019.

The Joint Board **agreed:-**

- (1) to approve the proposed budget for 2019/20 as detailed in the report;
- (2) to commend funding partners, Aberdeenshire Council and NHS Grampian on their continued commitment to Integration; and
- (3) to commend officers for their continuing pragmatic approach to the budget challenges.

#### **13. SUPPLEMENTARY WORK PLAN 2019/2020 – CAREFIRST SYSTEM**

There had been circulated a report dated 29 January, 2019 by the Chief Officer, requesting members consideration of a proposed extension of an existing contract for the Maintenance

and Servicing of the CareFirst System, and reporting that, due to the timescale for refresh of the tender, Aberdeenshire Council's Communities Committee, which would usually have the matter referred to it as a Direction from the Integration Joint Board, had already considered the proposal at its meeting on 21 February, 2019.

Having heard further from officers of the role of the existing system as an essential service to Health and Social Care, there was discussion of options which may be available for consideration in any ultimate replacement or update of the system, initially across multi-disciplinary partners, and the Joint Board **agreed:-**

- (1) to approve the supplementary work plan (as detailed in Appendix 1 to the report) for the extension of the existing CareFirst Maintenance and Service Contract as detailed in the Business case detailed in Appendix 2 to the report;
- (2) to note that Aberdeenshire Council's Communities Committee on 21 February had agreed, in anticipation of any Direction to be made to them, to delegate to the Chief Officer, in consultation with the Chair and Vice-Chair, and Opposition Spokesperson, of the Communities Committee, approved of the business case;
- (3) that Aberdeenshire Council's Communities Committee be formally Directed to procure, on behalf of the Integration Joint Board, the services as detailed in the work plan;
- (4) to note that the contract requirements aligned with the Joint Board's Strategic Plan, 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);and
- (5) to note that the required budget for the services had already been approved.

#### **14. IMPLEMENTATION OF A WORKFLOW OPTIMISATION PROJECT FOR GP PRACTICES IN ABERDEENSHIRE**

There had been circulated a report by the Partnership Manager (Central), requesting the Joint Board's consideration of a proposed workflow optimisation project for GP practices in Aberdeenshire. Having heard further from the Partnership Manager of the project's intention, already demonstrated in national trials, as well as local pilots, to release clinician time from increased routine administration, and from Dr Allan of the benefits to practices by freeing GPs from direct involvement in standard appointment correspondence,

There was discussion of how the system could be trusted to ensure that nothing important would be missed, compared with the current operating practices where human error, and over-stretched practice resources; the potential (voluntary) uptake by practices; and the one-off cost of the provision.

The Joint Board **agreed:-**

- (1) to approve the implementation of a Workflow Optimisation Project for GP Practices in Aberdeenshire as described in the Primary Care Improvement Plan;
- (2) that Business Case Option 2, as detailed in Appendix 1 to the report, be approved;
- (3) that NHS Grampian be directed to commence the procurement for the purchase of the required system, as detailed in Appendix 2 to the report;
- (4) that the costs be met from the Primary Care Improvement Plan funding already agreed; and
- (5) that officers consider and report on the perceived effectiveness of the project.

## 15. EXTERNAL EVALUATION OF THE COMMUNITY HEALTH IN PARTNERSHIP (CHiP) PROJECT

Mr Hekelaar and Mrs Kinsey, having declared interests in this item by virtue of being Directors of Aberdeenshire Voluntary Action (AVA) which had commissioned the evaluation of the CHiP project, left the room during consideration of the item.

There had been circulated a report dated 11 February, 2019 by the Partnership Manager (Strategy and Business Services) reporting the outcomes of an evaluation assessment made of the Community Health in Partnership (CHiP) project and requesting members' consideration of options to ensure a continuing means for the Partnership to engage with third sector partners.

The Joint Board heard further from officers of the successes of the CHiP project to date, and the areas where improvements might be expected, or inconsistencies eradicated to ensure an equitable delivery across all of Aberdeenshire's communities, there was discussion of how a better coordinated and directed service might be achieved, as a further conduit through which very local organisations might have a say in the operations of the Partnership.

The Joint Board **agreed:-**

- (1) to approve the extension of the current scheme for a period of six months;
- (2) that officers report to a future meeting on scoping options for the continued engagement with third sector partners; and
- (3) that any scheme established include six monthly reporting on evaluating the improvement and change of the scheme as it develops over the next three -year period.

## 16. ABERDEENSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP GRANT FUNDING

There had been circulated a report dated 19 February, 2019 by the Partnership Manager (Strategy and Business Services), requesting consideration of the allocation of health and social care partnership grant funding under a revised system which focused more on innovative schemes.

Having heard further from officers of the criteria recommended for application, the separation of the grants into three categories, and the impact, if agreed, on the 27 groups which had applied for funding, the Joint Board **agreed:-**

- (1) to approve the payment of grants to the organisations detailed in Appendix 3 to the report, and Direct Aberdeenshire Council to disburse funds totalling £275,550, for the period 1 April, 2019 to 31 March, 2022;
- (2) that current grant agreements for the five organisations detailed in paragraph 3.12 of the report, for whom no new funding was approved, be extended to 30 September, 2019 to allow them to source alternative funding, and Direct Aberdeenshire Council to issue these funds to a total of £37,565;
- (3) to delegate to the Chief Officer, in consultation with the Chair and Vice-Chair, any decisions regarding the disbursement of the residual grant funds of £39,485;
- (4) that a sub-group be established to consider evaluations from the 2019/20 awards, and discuss and approve future awards; and
- (5) to commend officers for their work on this vast project.

Cllr E A Stirling  
Vice-Chair