

INTEGRATION JOINT BOARD

BY SKYPE, 3 FEBRUARY, 2021

Integration Joint Board Members:

Councillor A Stirling (Chair); Mrs R Atkinson, (NHS Grampian) (Vice-Chair); Ms A Anderson (NHS Grampian); Cllr A Allan (as substitute for Councillor D Robertson); Ms J Duncan (NHS Grampian); Miss R Little (NHS Grampian); Provost W Howatson; Councillor G Reynolds; Councillor A Ross; and Ms S Webb.

Integration Joint Board Non-Voting Members:

Ms F Culbert, Carers' Representative; Mr D Hekelaar, Third Sector Representative; Mrs S Kinsey, Third Sector Representative; Mrs I Kirk, UNISON; Mr M McKay, NHS UNISON; Mrs McNicol, Advisor; Mrs A Mutch, Public Representative; Mr A Sharp, Chief Finance Officer, Aberdeenshire Health and Social Care Partnership; and Mrs A Wood, Interim Chief Officer, Aberdeenshire Health and Social Care Partnership.

Officers: Mrs G Fraser, Mrs J Howie, and Mr M Simpson, Aberdeenshire Health & Social Care Partnership; Mrs K Penman and Mrs J Pirie, NHS Grampian; and Mrs L Cowie, Mrs S Donaldson, Mr D Gammack, Ms J McRobbie, Mrs J Raine-Mitchell, and Mrs J Stewart-Coxon, Aberdeenshire Council.

Apologies: Cllr Robertson; Dr C Allan; Dr M Metcalfe; Mr G Mitchell; and Mr I Ramsay.

1. DECLARATION OF MEMBERS' INTERESTS

The Chair asked for Declarations of Interest. No interests were declared.

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, in making decisions on the attached reports, -

- (1) to have due regard to the need to:
 - (i) eliminate discrimination, harassment, and victimisation;
 - (ii) advance equality of opportunity between those who share a protected characteristic and persons who do not share it; and
 - (iii) foster good relations between those who share a protected characteristic and persons who do not share it; and
- (2) where an equality impact assessment had been provided, to take its contents into consideration when reaching a decision.

2B. EXEMPT INFORMATION:

The Joint Board **agreed**, that under paragraphs 1,6, and 7 of the Categories of Exempt Information, found at Appendix 2 of the Standing Orders of the Integration Joint Board, the public and media representatives be excluded from the meeting for

Items 14 and 15 of the business below, on the grounds that it involves the likely disclosure of exempt information of the classes described in the relevant paragraphs.

3. MINUTE OF MEETING OF 9 DECEMBER, 2020

There had been circulated and was **approved** as a correct record, the Minute of Meeting of 9 December, 2020.

4. INTEGRATION JOINT BOARD ACTION LOG

There had been circulated a report by the Interim Chief Officer providing updates on progress with actions which had still to be completed and advising when these were scheduled to be reported to the Joint Board.

There was discussion on the current operating practices of Minor Injury Units (MIUs), restricted by Covid-19 matters in line with Scottish Government guidance, as were local GP practices, and the Joint Board **noted** the updates provided.

5. CHIEF OFFICER'S REPORT

There had been circulated a report by the Interim Chief Officer, providing an update of the ongoing work of the Health and Social Care Partnership, highlighting (a) the progress of the initial roll out and forward planning for mass vaccinations, in line with the Scottish Government timetable, where a high level of uptake had been demonstrated; (b) ongoing work with Care Homes and other residential facilities, with the Oversight Group meeting daily; (c) preparation for the normal winter activity, including an increased demand for mental health and wellbeing support and the continuing work of the Virtual Community Ward to keep residents at home where possible and support on hospital discharge; and (d) the continuing focus on staff wellbeing, with a huge range of resources available and promoted.

The Chief Officer spoke of the additional pressures caused recently with the phone outage in Laurencekirk, and the full emergency response in Huntly with a gas outage, affecting the hospital, care homes, and vulnerable at home, and the continuing dedication of staff in providing services regardless of the impacts of adverse weather.

There was discussion about the different local and national news messages and the potential confusion caused, in terms of access of designated carers to community hospitals, and the impact of small outbreaks in facilities which would cancel any agreed access; the timescale for the issue of the nationally generated "blue envelope" vaccine invitations, which were due to be sent in the next day or so; and the Joint Board **agreed**:

- (1) to welcome and commend the sustained resilience and dedication of staff in rising to challenges; and
- (2) to note, in all respects, the terms of the update provided.

6. FINANCE UPDATE AS AT DECEMBER, 2020

There had been circulated a report dated 19 January, 2021 by the Chief Finance Officer, providing an update on the financial position as at the ninth month of the financial year and of an indicative forecast position for the year as a whole, projecting a £3M underspend at the end of the year, and reporting on (a) the financial implications of the 2019/20 overspend, (b) the impact of Covid-19 on resource under- and over-spends for 2020/21, (c) areas of over- or under- spend including a drop in GP prescribing costs, and slowing down of cost increases directly related to covid required adaptations; (d) the receipt, or expected receipt, of Scottish Government funding; and (f) the implications for the achievability of agreed savings for the current financial year.

The Joint Board heard further from the Chief Finance Officer that the costs reported did not include vaccination related expenditure, as that was incurred by NHS Grampian as lead agent for the work with the government, with £12M already disbursed nationally and additional funds recently announced; of the areas of lower cost where services, primarily residential, had been reduced, or community hospital capacity, and associated costs in bank staff, training and travel also diminished in line with Covid-19 restrictions, counterpointed with areas of higher cost relating to out of area specialist care and the challenges of recruiting community mental health locums; of the impact on the agreed savings plan with the estimate now reduced to just under £2.5M, a shortfall from that projected; and that there might be further implications when the Scottish Government set its budget on 3 March, 2021.

There was discussion of the continuing need for locums in community mental health, where recruitment to permanent posts had not been successful; and of the “slippage” in application of Scottish Government priorities funding which was allowed to be added to local finances if not achievable in the financial year.

The Joint Board, having considered the financial position as detailed in the report and appendices **agreed:-**

- (1) to approve the budget adjustments as detailed in Appendix 3 to the report;
- (2) to note the progress, as detailed in Appendix 4 to the report, towards achieving the savings programme;
- (3) to note that slippage from nationally funded government activities, if not achievable in each financial year would be moved to general funding for the Partnership;
- (4) to welcome the improved forecast for the budget;
- (5) that a further budget update, including Government Assistance be provided to the Joint Board on 31 March, 2021; and
- (6) to note, in all other respects, the budget update position and commend the Chief Finance Officer and his team for the report.

7. AUDIT COMMITTEE REPORT

There had been circulated a report dated 23 December, 2020 by the Chair of the Audit Committee, providing an update on business considered by the Committee at its meeting on 9 December, 2020, including (a) Internal Audit reports on Service Standards and Governance Performance and on outstanding recommendations from previous Audits, where additional work was to be reported to the next meeting of the Committee by the Chief Finance Officer; (b) the impact of Covid-19 on the Integration Joint Board's Financial Position and Governance Arrangements; (c) Emerging Fraud Risks arising from Covid-19; (d) the consideration of the need to strengthen the Committee's Terms of Reference; (e) a review of the risk, in the current pandemic, to provider service for social care providers; and (f) the consultation on the Scottish Government's proposed revised Code of Conduct.

Having heard further from the Chair of Audit, there was discussion of the timescales within which the outstanding audit recommendations were to be addressed, noting that the Chief Finance Officer was to report to the meeting on 31 March, 2021 with on status, risk, and timescales; and the need for the whole Joint Board to have a better understanding of current risk, and changing risks which might apply post Covid-19, potentially through an informal session.

The Joint Board **agreed:-**

- (1) that an informal session on Risk be arranged in due course;
- (2) to note and welcome, being assured, in all other respects, the terms of the update on audit matters; and
- (3) to thank members of the Audit Committee for their work.

8. CLINICAL AND ADULT SOCIAL WORK GOVERNANCE COMMITTEE REPORT

There had been circulated a report dated 10 December, 2020 by the Chair of the Clinical and Adult Social Care, providing an update on matters considered by that Committee at its most recent meeting on 10 December, 2020. The report highlighted (a) an overview of the group's governance approach; (b) consideration of the Chief Social Worker's Annual Report, 2019/20; (c) the Substance misuse and mental health support; (d) the Community Hospital Short Life Working Group report; (e) staff wellbeing through the pandemic; (f) the work of the Professional and Clinical Oversight Group in respect of Care Homes; and (g) the Chair and Vice-Chair's continued appreciation of staff working through the pandemic and those supporting the work of the group.

Having heard further from the Chair and Vice-Chair, there was discussion as to whether the Care Home Oversight Group papers could be shared with the wider Integration Joint Board members; and whether future reports could be set in the context of risk and level of assurance gained, whilst avoiding duplication of reporting.

The Joint Board **agreed:-**

- (1) that, if possible, the reports on Care Homes be shared with the wider Joint Board; and
- (2) to welcome the report, and note its terms, being reassured by the work undertaken by the Governance Committee.

9. OPERATION HOME FIRST (ABERDEENSHIRE) UPDATE

With reference to the Minute of Meeting of 20 July, 2020, (Item 6), there had been circulated a report dated 11 January, 2021 by the Interim Partnership Manager (Shona Strachan) providing an update on Operation Home First, specifically on the Frailty Pathway development for Aberdeenshire and the identification of appropriate performance measures.

The Joint Board heard from the Partnership Manager (Central) of the series of workshops, supported by clinical leads across the various sectors of interest; the work with staff in community hospitals to put support in place for a safe return home, not unduly delayed pending a full geriatric assessment; investment in technology to support care at home; successful recruitment to ARCH, as providers of 24 hour unscheduled cover; of the different model of frailty beds being provided at Rosewell House, which would be monitored and returned for further consideration in due course.

There was discussion on the impact of the need to upskill the workforce and clarity was provided that this did not mean an overloading of existing staff cohorts with additional tasks, but rather a support for learning skills, different from those currently held, needed for new community team roles; the role of Partnership staff in being deployed temporarily into the discharge hub at Aberdeen Royal Infirmary; the innovative approach of Aberdeen Health and Social Care Partnership in the function of Rosewell House, defined by the services based there rather than its traditional designation as a particular type of facility; the need to monitor and report on outcomes of Operation Home First for clients; concerns about ensuring support for familial carers at home, and involving them in any decision on a move from acute care; the positive inclusion of carers in shaping the policy; awareness that the scheme would not be appropriate for all; and the status of those suffering from long Covid, albeit not included in the current iteration of frailty focused on those 75 and older.

The Joint Board, having considered the update on developments within Operation Homefirst, **agreed:-**

- (1) to note that upskilling of the workforce referred to new posts, not additional work for the existing cohorts;
- (2) to note Aberdeen City Health and Social Care Partnership's innovative and flexible use of Rosewell House to suit needs not defined by categorisation of building to particular care delivery;
- (3) that feedback be sought from unpaid and familial carers; and

- (4) that a performance report be submitted to the July, 2021 meeting of the Joint Board.

10. MAINSTREAMING EQUALITIES – THE IMPACT OF COVID-19

With reference to the Minute of Meeting of 24 June, 2020, (Item 11), there had been circulated a report by the Business and Strategy Partnership Manager, reporting on how Covid-19, and the subsequent changes to the delivery of services had impacted disproportionately on people with certain protected characteristics and limited the progress on mainstreaming equalities, and identifying five main themes around which mitigations might be considered: Digital Exclusion; Social Isolation; Support for Unpaid Carers; Financial Impact; and Access to Health Services.

The Joint Board heard further from officers on the issues of limiting access to digital tools, not least because of challenges of rural connectivity; and of communication challenges with some for whom English was not their first language.

There was discussion of the role of the Strategic Planning Group to have determine how the objectives were to be achieved, and the need to link the aims with processes and practices; awareness that language barriers were not equal across all those for whom English was not their first language; and the role of the third sector as partners in the work.

Noting that it was intended that a report on Strategic Planning and priorities be submitted to an early meeting of the Joint Board, and having acknowledged how Covid-19 had disproportionately impacted people with certain protected characteristics, with the ability to progress equalities mainstreaming activity impaired by the pandemic, the Joint Board **agreed:-**

- (1) that the issue of equalities be added to the informal session to be held to consider risk;
- (2) that progress on the mitigation of the 5 emerging themes be reported with the scheduled updates on Mainstreaming Equalities;
- (3) that an informal session on Mainstreaming Equalities in the context of Covid be held;
- (4) to welcome the ongoing development of involvement of third sector in strategic planning; and
- (5) to commend staff on the report and progress being made.

11. PRIMARY CARE IMPROVEMENT PLAN – YEAR 3 IMPLEMENTATION PLAN 2020-21

There had been circulated a report dated 11 January, 2021, by Drs Reary and Finlayson, and Rachel Taylor, providing an update on the Primary Care Implementation Plan, for 2019/20 and up to December, 2020, and highlighting challenges, exasperated by the pandemic, relating to recruitment, funding, and meeting the agreed timescales.

The Joint Board heard from the Partnership Manager (Central) and Mrs Pirie, NHS Grampian, details of the progress across each of the 6 workstreams; of lessons learnt in the uptake and delivery of the flu immunisation programme in 2020 which would inform future practices; the phased progression of the cluster model pharmacy; the creation of a professional lead to support the new advanced clinical practitioners being recruited; the changed approach to physiotherapy where first contact had reduced waiting times significantly; the tendering for mental health link worker provision, and seven additional link workers attached to the Aberdeenshire Humanitarian Hub during the pandemic.

There was discussion of the community's positive reaction to the changes in physiotherapy, particularly in the context of restricted access to building based service provision; the current ratio of patients per GP; the reasons for staff choosing to leave the profession and efforts being made to both recruit additional staff and retain existing cohorts, training them, if required, for any changed role; and the need for a change in dynamic between the competing demands in primary care.

The Joint Board **agreed:-**

- (1) to acknowledge progress in delivery of the Primary Care Improvement Plan (PCIP) for 19/20 and up to December 2020, as detailed in Appendix 1 to the report;
- (2) to acknowledge the challenges of delivery of the Primary Care Improvement Plan, particularly within required timescales, funding and recruiting workforce;
- (3) that information be provided on the reasons for staff leaving posts; and
- (4) to commend all involved for pace of change to meet expected, and new, demands on services.

12. CONSULTATION ON REVIEW ON THE MODEL CODE OF CONDUCT

With reference to the Minute of Meeting of 10 December, 2020, (Item 12), there had been circulated a report dated 8 January, 2021 by the Interim Chief Officer, containing, for members' consideration a proposed response, after discussion by the Audit Committee on 9 December, 2020, to the Scottish Government consultation reviewing the model Code of Conduct.

Having heard further from the Principal Solicitor, (Governance) as to the highlights of the discussion at the Audit Committee, including concerns on the proposed removal of the gift and hospitality register, and the lack of clarity over bullying, the Joint Board **agreed:-**

to approve for submission the draft response on the review of the Model Code of Conduct for Devolved Public Bodies as detailed in Appendix 1 to the report.

13. CHARGING POLICY & UNIT COSTS 2021/22

There had been circulated a report dated 17 November, 2020 by the Interim Chief Officer, Aberdeenshire Health and Social Care Partnership, (a) requesting the consideration of recommendations to Aberdeenshire Council for the setting of

charges for social care services in the current pandemic context, (b) highlighting the impact of Covid-19 on the provision of some services, and (c) proposing that the scheduled full review of charges with a view to obtain full cost recovery, be deferred to a future date, with an inflationary increase only applied for 2021/22.

The Joint Board heard further from officers that the increased unit costs may not be passed directly to service users but might impact on their available budget allocation; and of the proposed communication strategy and continued use of virtual technology for individual discussions with clients which would be in place to assist in to communicate the changes.

There was discussion of the emotional and counselling support which fell under the heading of personal support; the availability of financial assessments for all clients, including those transitioning between children and adult social care; the source for the indicative 2.8% inflationary figure, set by the Council's Head of Finance in September 2020 for use in all Council budget considerations and to be confirmed in April 2021; draft guidance from the Convention of Scottish Local Authorities (CoSLA) on service costs fixing; the reason for the apparent discrepancy in figures for residential care, reflecting different costs for tenancies commencing prior to 2018, as opposed to newer residents; the need to be able to justify the choices made in charging in instances where there was no national standard set; and the reasons between different unit costs between client groups of differing complexities for "day care" services.

The Joint Board **agreed:-**

- (1) to note, and approve for its interest, the application of a Retail Price Index (RPI) inflationary rate of 2.8%, and not full cost recovery, proposed for charges and unit costs in 2021/22;
- (2) to note that the full review of charges for full cost recovery would be deferred in the light of the Covid pandemic:
- (3) to recommend to Aberdeenshire Council's Communities Committee:
 - (a) the non-residential charging policy for 2021/22, as detailed in Appendix 1 to the report;
 - (b) the rates for Charges and Allowances, as detailed in Appendix 2 to the report; and
 - (c) the Unit Costs as detailed in the Charges & Allowances, Appendix 2 and in paragraph 5.1 of the report; and
- (4) to recommend to the Communities Committee the reconsideration of the full cost recovery policy.

14. SOCIAL CARE CASE MANAGEMENT SYSTEM

There had been circulated a report dated 8 January, 2021 by the Partnership Manager, (Business and Strategy) requesting the consideration of a process for the replacement of the social care case management system, detailing options which could be pursued, and recommending the direct award to a specific supplier.

Having heard further from officers, and having discussed the option appraisal, including the functionality of the proposed system and differing levels of access which could be applied across different users, the Joint Board **agreed:-**

- (1) to agree to directly award the replacement for a social care case management system to OLM as the existing supplier, and Direct Aberdeenshire Council accordingly;
- (2) that officers consider the creation of a project team to consider the potential cross agency sharing of the system across partners, potentially to 3rd sector, users, to future proof the system; and
- (3) that any blockages in the procurement be reported to the Joint Board.

15. 2021-2022 ANNUAL PROCUREMENT PLAN

There had been circulated a report by the Interim Chief Officer, requesting members' consideration of the annual procurement plan 2021- 2022, including the work plans and business cases as appended to the report.

Having heard further from officers, there was discussion of specific proposals.

The Joint Board **agreed:-**

- (1) to approve the business cases for items on the Annual Work Plan which were within its remit and where the value of the matter was over £1,000,000;
- (2) to note that the business cases for items on the Work Plan with a value of between £50,000 and £1,000,000 might be reserved for approval by Aberdeenshire Council's Communities Committee, prior to the implementation of the Joint Board's direction; and
- (3) that Aberdeenshire Council be directed to procure the services detailed within the Work Plan, on behalf of the Joint Board;
- (4) note that the contractual requirements relating to care and support services align with the Strategic Plan, Outcome 2;
- (5) to welcome the recent instigation of a commissioning and procurement group, linking procurement to the key strategic outcomes; and
- (6) to note ongoing work in determining approaches to mental health support provision.