

INTEGRATION JOINT BOARD

BY SKYPE, 03 NOVEMBER , 2021

Integration Joint Board Members:

Mrs R Atkinson, (NHS Grampian)(Chair); Councillor A Stirling (Vice-Chair); Ms A Anderson (NHS Grampian); Mrs J Duncan (NHS Grampian); Ms R Little (NHS Grampian); Provost W Howatson; Councillor D Keating; Councillor G Reynolds; and Councillor D Robertson; and Ms S Webb (NHS Grampian).

Integration Joint Board Non-Voting Members:

Ms F Culbert, Carers' Representative; Ms I Kirk, UNISON; Mrs S Kinsey, Third Sector Representative; Mr M McKay, NHS UNISON; Mrs J McNicol, Nursing Lead Advisor; Ms A Mutch, Public Representative; Mr C Smith, Chief Finance and Business Officer; Aberdeenshire Health and Social Care Partnership; and Ms P Milliken, Chief Officer, Aberdeenshire Health and Social Care Partnership.

Officers: Mrs G Fraser, Mrs A MacLeod, Ms S Strachan, Ms K Mowat, Ms D Leslie, Aberdeenshire Health & Social Care Partnership; Ms A McGruther, NHS Grampian; and Ms A McLeod, Aberdeenshire Council

In attendance:

Chief Inspector Jackie Knight, Police Scotland; Ms L Scott, Director of Planning, Innovation and Programmes, NHS Grampian.

Apologies: Mr D Hekelaar, Third Sector Representative.

Prior to the commencement of the meeting, the Chair intimated that Councillor Ross had recently tendered her resignation from the Integration Joint Board and paid tribute to her contribution to the work of the Board. The Chair also welcomed Councillor Keating who had been appointed to represent Aberdeenshire Council on the Joint Board

1. DECLARATION OF MEMBERS' INTERESTS

The following interests were declared:

In respect of item 11, Ms S Kinsey declared an interest, by virtue of being a Board Member of AVA, and confirmed that she would leave the meeting during consideration of the item.

In respect of item 12, Councillor Keating advised that he had an interest, by virtue of being a Trustee of an organisation which received grant funding from the Aberdeenshire Health and Social Care Partnership. Having applied the objective test, he had concluded that it was not clear and substantial and therefore he would remain and participate.

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:-

- (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.

2B. EXEMPT INFORMATION:

The Joint Board **agreed** that under paragraphs 6, 7 and 8 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 11, 12 and 13 of the business below, on the grounds that it involves the likely disclosure of exempt information of the classes described in the relevant paragraphs.”

Item No	Paragraph No
11	7
12	6
13	8

3. MINUTE OF MEETING OF INTEGRATION JOINT BOARD

a. MINUTE OF 29 SEPTEMBER, 2021

There had been circulated, and was **approved** as a correct record, the Minute of Meeting of 29 September, 2021.

b. MINUTE OF 8 OCTOBER, 2021

There had been circulated, and was **approved** as a correct record, the Minute of Meeting of 8 October, 2021.

4. INTEGRATION JOINT BOARD ACTION LOG

There had been circulated and was **noted** a report by the 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.

In relation to the recent consideration of the National Care Service Consultation, the Chair stressed the importance of receiving the input of all members, both Voting and Non-Voting in order to ensure that the views of the IJB as a whole were properly represented and she thanked all for their input and contributions to the process.

5. CHIEF OFFICER'S REPORT

There had been circulated a report by the Chief Officer providing an update of the ongoing work of the Health and Social Care Partnership, highlighting winter planning arrangements for social care, primary care and community services, which were continuing to face increased demand. She advised that the Health and Social Care Partnership had sought to support the system wide demand by reopening 16 beds across community hospitals and consideration was being given to reopening Morven ward at Glen O'Dee hospital to provide additional support within the system. NHS Grampian had recently submitted its fourth draft of its Remobilisation Plan to the Scottish Government, which included system wide planning for winter. The Scottish Government had recently announced additional funding relating to winter planning for Health and Social Care until the end of 2021/22, and plans were being developed and costed to ensure that where possible the funding could be implemented as quickly as possible to utilise this new funding against the winter plan.

There was discussion of the potential for increased capacity to stabilise and support services over the winter, the potential for further recruitment and how to monitor the increase within existing resources; the challenges around staff wellbeing for a workforce that was already very stretched and the need to ensure that staff were supported; concerns from the staff side regarding changes in bed spacing, including transmission rates, as well as the anticipated pressures over the coming months; a focus on a recruitment drive from out with the Health and Social Care sector with a view to increasing numbers in the sector.

Issues relating to capacity and workload within primary care were discussed and the need to signpost and raise awareness of other options and avenues available for support. It was noted that there was a lack of available activity data from primary care, which was a complex and longstanding issue, and was being considered at a national level, and that it would be beneficial to be able to access activity data from GP practices at a national as well as local level.

Thereafter, the Joint Board **agreed**:

- (1) to acknowledge the pressures and impacts on resilience and staff health and wellbeing and the importance of monitoring these during the forthcoming unprecedented winter period;
- (2) to receive regular briefings/updates in relation to winter planning arrangements, with the option to call an additional meeting in mid-December, if considered necessary; and
- (3) to note the terms of the updates provided.

6. FINANCE REPORT

There had been circulated a report dated 22 October, 2021 by the Chief Finance and Business Officer, providing an update on the financial monitoring information for the 2021/22 financial year, covering the period up to the end of August 2021. The report also provided an update on the projected costs and funding arrangements for dealing with the ongoing impact of the Covid 19 pandemic during 2021/22.

The Joint Board heard from the Chief Finance and Business Officer on the financial position to the end of August 2021, together with a projected forecast for the year as a whole. He advised that the audited annual accounts for 2020/21 would be presented to the IJB Audit Committee for consideration and approval at its meeting scheduled for later in the day. The year to date position at end of August, 2021 indicated an underspend of £114,000, and for the remainder of the year an underspend of £2.826 million was forecast, equating to just under 1% of the IJB budget. He confirmed that transformational funding from Aberdeenshire Council continued to be committed and further updates would be provided to future meetings. He advised that additional funding had been announced by Scottish Government on 5 October, 2021 relating to Winter Planning for Health and Social Care, with further detailed information on the allocation of the funding yet to be received. In order to be able to respond quickly to ensure that where possible the funding could be implemented, it was proposed that the use of Special Urgency powers be used by the Chief Officer, in consultation with the Chief Executives of NHS Grampian and Aberdeenshire Council and the Chair and Vice Chair of the IJB, and the IJB was asked to approve this approach.

There was discussion of the need to ensure a partnership approach when developing the eligibility criteria for community based initiatives that promote and develop good mental health and wellbeing, with the aim of being supportive, inclusive and to develop capacity being key, and the desire to see the mental health funding used at a grass roots level; how the additional covid costs were categorised in order to ensure that they could be recovered from the Scottish Government; and the future proofing of budgets going forward to ensure that the effects of covid were planned for within funding streams.

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

- (1) to note the financial position set out in the report at 6.3 and Appendices 1 and 2;
- (2) to approve the budget adjustments detailed in Appendices 1 and 3;
- (3) to note the position relating to additional funding in Section 7 and approve the use of Special Urgency powers; and
- (4) to note the progress towards achieving the proposed savings in Appendix 4.

7. STRATEGIC PLANNING GROUP UPDATE AND TRANSFORMATIONAL WORKSTREAMS PERFORMANCE REPORT

There had been circulated a report dated 8 October, 2021 by the Chief Officer, providing a summary of key items considered at a recent meeting of the Strategic Planning Group (SPG) and seeking comments from the Joint Board on the transformational workstream performance reports for the Community Hospital Inpatient Review and Frailty Pathway (Hospital at Home) projects, which were two of the priority transformational workstreams under Phase 1 of the Health and Social Care Partnership's Strategic Delivery Plan.

The Programme Manager introduced the report and highlighted key aspects of the recent considerations by the SPG on (1) the mainstreaming of equalities and delivery of the HSCP's equalities outcomes; (2) the management and assurance arrangements for hosted services across Grampian, specifically hosted services with budgets under £3 million; (3) proposed IHub development work; and (4) the two Transformational Workstream Performance Reports.

The Partnership Manager (Central) provided a summary of the Community Hospital Inpatient Review project, which formed part of a number of complex workstreams, and aimed to produce recommendations for the redesign of the inpatient bed capacity across the Aberdeenshire community hospital network, to ensure an efficient use of resources to meet inpatient requirements across our communities.

The Partnership Manager (South) update the Joint Board on progress with the Frailty Pathway Redesign Project, and the key challenges faced in terms of staffing and recruitment, which had impacted upon implementation timescales.

There was discussion of the benefits of capturing data of lived experience when designing a model for new pathways; the use of 'virtual community wards' in service design; the proposed use of the information from the property surveys and audit of existing bed spacing arrangements in the development of the workstreams; and timescales for the development of performance measures and targets.

After discussion, the Integration Joint Board **agreed**:

- (1) to acknowledge the report from the Strategic Planning Group following its meeting on 7 October 2021; and
- (2) to note the ongoing progress with the Community Hospital Inpatient Review and Frailty Pathway (Hospital at Home) projects.

8. UPDATE FROM ABERDEENSHIRE ALCOHOL AND DRUG PARTNERSHIP (ADP)

With reference to the minute of the IJB of 19 May, 2021 (Item 10) there had been circulated a report by Chief Inspector Knight, the Chair of the ADP, providing an update on ongoing work to streamline and improve ADP Governance and delivery mechanisms and presenting the ADP Delivery Plan and draft Annual Report for 2020/21. The report indicated that membership of the ADP Strategic Committee had been clarified and realigned across partner agencies, with the aim to allow the group to focus on strategic matters going forward, and a number of sub-groups had been agreed to support the work of the Strategic Committee providing specific operational focus on (1) Financial Planning and Arrangements/Contracts and Commissioning; (2) Strategic Outcomes, Delivery and Reporting; and (3) Community and Lived/Living Experience.

Chief Inspector Knight provided an overview of the areas of focus of the ADP, to provide a solid foundation and reaffirm the commitment of the partnership in order to produce a Delivery Plan for the first phase of the updated ADP Strategy. She advised that the ADP had recently agreed to support a number of new initiatives which were aimed at reducing drug related deaths and ensuring the implementation of the Government's required Medicated Assisted Treatment (MAT) Standards by

the April 2022 deadline, and these were supported by new national funding. She highlighted the need to invest monies into statutory services and of getting the new projects up and running and embedded within communities, and the need to plan for the sustainability of these services. She highlighted the recognition of lived experience representation being key to achieving a partnership and co-production of services.

There was discussion of the need for good performance measures to be agreed in order to monitor progress of the strategic outcomes; assurance that the actions related to 'Changing Aberdeenshire's relationship with alcohol', which previously sat under the LOIP and had been transferred to core ADP business, had been embedded in the ADP Delivery Plan; that regular monitoring updates should be reported to the IJB; and the reporting mechanisms within the ADP, given the large number of partner organisations, which was managed and co-ordinated through the ADP Support Team.

Thereafter, the Integration Joint Board (IJB) **agreed:**

- (1) to note the update report from the Aberdeenshire Alcohol and Drug Partnership (ADP);
- (2) to acknowledge the efforts to improve ADP Governance;
- (3) to note the ADP Delivery Plan and Draft Annual Report for 2020/21; and
- (4) to acknowledge the work undertaken by Mark Simpson, Partnership Manager (North), in the role of Interim Chair of the ADP, and to welcome Chief Inspector Knight to the role.

9. COMMUNITY JUSTICE ANNUAL REPORT 2020/21

There had been circulated a report dated 8 October, 2021 by the Partnership Manager (North) in his role as Chair of the Aberdeenshire Community Justice Partnership, requesting the consideration of the draft Annual Report on Community Justice in Aberdeenshire for 2020/21, prior to submission to the Aberdeenshire Community Planning Partnership and Community Justice Scotland.

The Joint Board heard from the Project Manager (Community Justice) and the Justice and Substance Misuse Manager of the content of the report, which was based on a fixed template, but noted that the template this year provided an opportunity for partnerships to reflect on the impact of the Covid 19 pandemic on community justice activity and to reflect on the collective achievement they were most proud of during the reporting period.

There was discussion of the impacts of the results of less face to face contact in the delivery of the service due to the pandemic, and the measures in place to mitigate those impacts; the use of measures for early intervention, prior to or potentially avoiding the entry to the justice system, based on a whole system collaborative approach; the limited number of Diversion Exit Questionnaires completed in 2020/21, which was symptomatic of circumstances during the pandemic and would be addressed going forward; and the challenges relating to the potential impacts of a National Care Service for Scotland, which was currently under consultation.

After consideration, the Joint Board **agreed** to note the Annual Report on Community Justice in Aberdeenshire for 2020/21, and note the progress that has been made collectively by the Aberdeenshire Community Justice Partnership during the period.

10. IJB SCHEDULE OF MEETINGS 2022

There had been circulated a report dated 1 October, 2021 by the Chief Officer, requesting Members' consideration of a proposed schedule of meetings for 2022.

The Joint Board **agreed** to approve the undernoted meeting dates for 2022:

Wednesday 23 February, 2022;
Wednesday 30 March, 2022;
Wednesday 1 June, 2022;
Wednesday 24 August, 2022;
Wednesday 12 October, 2022;
Wednesday 7 December, 2022.

11. PROPOSALS FOR THIRD SECTOR INTERFACE DIRECT AWARD 2022/23

As referred to under Item 1, Ms Kinsey withdrew from the meeting during consideration of this item.

There had been circulated a report dated 8 October, 2021 by the Chief Officer seeking approval for work to be undertaken to inform and develop a specification for a future Direct Award to Aberdeenshire Voluntary Action as the Health and Social Care Partnership's Third Sector Interface from 2022/23 onwards, and to be brought back to the Joint Board for formal approval by February, 2022.

The Programme Manager outlined the background to the request, advising that a Third Sector Interface (TSI) was established in every local authority area in Scotland around 10 years ago, with the aim of providing a unique but consistent arrangement in supporting and developing the role of the Third Sector in local community planning to meet local needs and outcomes. To support sustainability and enable forward planning as to future priorities and focus, approval was being sought to delegate to Officers to review and agree the key objectives and service specification for a TSI Direct Award from 1 April, 2022 onwards, and this would be reported back to the Joint Board for formal approval by February, 2022.

After discussion, the Integration Joint Board (IJB) **agreed** that work should be undertaken to inform and develop the specification for a future Direct Award to Aberdeenshire Voluntary Action as the HSCP's Third Sector Interface from 2022/23 onwards, and that a report should be brought back to the IJB for formal approval by February 2022.

12. PROPOSALS FOR ALLOCATION OF HEALTH AND SOCIAL CARE PARTNERSHIP GRANT FUNDING 2022/23 ONWARDS

With reference to the Minute of Meeting of 31 March, 2021 (Item 15), when a review of the existing criteria, process and evaluation around the allocation of Health and Social Care Partnership (HSCP) grants was sought in respect of the HSCP grants process from 2022/23 onwards, there had been circulated a report dated 8 October,

2021 by the Chief Officer asking the Joint Board (1) to consider and approve a preferred option for the allocation of HSCP grant funds for 2022/23 for a minimum 2 year period; and (2) to delegate responsibility to the existing IJB sub-group to monitor the HSCP grants process with reports to be brought back on an annual basis to the Joint Board.

The Programme Manager advised that the aim of the review was to ensure the allocation of grants to services/projects was clearly aligned to the outcomes within the HSCP's strategic delivery plan, that there was a robust process for evaluating and understanding how projects had contributed to the outcomes and how they addressed areas of unmet need and inequality, and in addition consideration was to be given to the adoption of a co-production approach with the third and voluntary sector. It was proposed that in order to move towards a co-production approach, that a proportion of the HSCP grants budget be made available through an application process and the remainder of the budget would be utilised to implement a test of change co-production initiative, on the basis as outlined in the report.

After discussion, the Integration Joint Board **agreed**:

- (1) to approve the preferred option 3, as detailed within the report, for the allocation of Health and Social Care Partnership (HSCP) Grant funds for 2022/23 for a minimum 2-year period;
- (2) to delegate responsibility to the existing IJB sub-group to monitor the HSCP grants process with reports to be brought on an annual basis to the IJB; and
- (3) that the IJB sub-group should report back in February, 2022 to confirm the membership and to update the Joint Board on progress on how the funding was proposed to be allocated.

13. WINTER PRESSURE AND REMOBILISATION PLAN 4

There had been circulated a report by the Chief Officer providing information on the planning for the next six months being progressed by the Aberdeenshire Health and Social Care Partnership, within the context of NHS Grampian's draft fourth Remobilisation Plan (RMP4).

The Joint Board heard from the Chief Officer and the Director of Planning, Innovation and Programmes, NHS Grampian as to winter planning arrangements for health and social care in Aberdeenshire, highlighting the increase in demand on services over the past 18 months, the normal cyclical implications around winter pressures, and the pressures around maintaining existing capacity. It was noted that NHS Grampian has submitted its fourth Remobilisation Plan (RMP4) to Scottish Government on 7 October 2021 and feedback was awaited on the comprehensive plan, which sets out the activities which will be undertaken as a Grampian system over the next six months. NHS Grampian would meet again on 4 December 2021 to consider a wider response to the Plan. As part of its contribution to RMP4, the Aberdeenshire Health and Social Care Partnership had considered what additional capacity could be mobilised from its own services and partners in order to provide support in getting through the anticipated very challenging winter period.

There was discussion of the challenges around non-recurrent funding, ongoing wide ranging recruitment initiatives to attract applicants from out with the health and social care sector, as well as from within, and the need for strong communications to ensure key messaging was being widely spread.

After further discussion, the Joint Board **agreed:**

- (1) to acknowledge the report outlining the sustained pressure on services and the planning for the next six months being progressed by Aberdeenshire Health and Social Care Partnership, within the context of NHS Grampian's draft fourth Remobilisation Plan (RMP4);
- (2) to seek ongoing situational updates and assurance on the activities being progressed; and
- (3) that an additional meeting of the IJB be scheduled, after 4 December, 2021, if deemed necessary, to receive a further update on winter planning arrangements and the Remobilisation Plan (RMP4).