



INTEGRATION JOINT BOARD

Date of Meeting	25 May 2021
Report Title	Chief Officer's Report
Report Number	HSCP.21.055
Lead Officer	Sandra MacLeod
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Consultation Checklist Completed	Yes
Directions Required	No
Appendices	None

1. Purpose of the Report

- 1.1. The purpose of the report is to provide the Integration Joint Board (IJB) with an update from the Chief Officer.

2. Recommendations

- 2.1. It is recommended that the Integration Joint Board note the content of the report.

3. Summary of Key Information

Local Updates

3.1. IJB Annual Report Development

The IJB has a statutory obligation to produce an Annual Performance Report (APR) to demonstrate delivery of the Strategic Plan. Normally this is required by 31st July every year however last year, because of the response to Covid, IJBs were given until the end of November to produce this.



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- 3.2.** The IJB approved the Aberdeen City APR at its meeting on 8th September 2020. Some leeway was also given last year in relation to content recognising that staff who were involved in the preparation of the report were diverted to the Covid response and most IJBs produced a slimmed down version from their normal format. Similar leeway in relation to timescale and content has also been provided for this year however officers are working towards submitting the Aberdeen City APR for approval to the IJB meeting on 24th August 2021 and, if approved, would intend to publish it immediately thereafter.
- 3.3.** The APR covers the financial year immediately preceding its publication. Last year's APR covered the financial year April 2019 to March 2020 so although it was prepared during the Covid response, it related to service delivery in the period prior to when the main impacts of Covid were experienced.
- 3.4.** The APR for 2020/21 will, in the main, reflect the impact the Covid response had on delivery of the Strategic Plan, some of which was very positive. Discussions with colleagues in other partnerships nationally at the Strategic Commissioning and Improvement Network (SCIN), a subgroup of Health and Social Care Scotland, indicates that this will be a common approach across Scotland.
- 3.5. Financial Update**
The Chief Finance Officer took the quarter 4 financial monitoring report to the Risk, Audit and Performance Committee on 27 April 2021. Largely due to the additional income received in the last quarter the IJB ended the final year with a reserve of £15.4 million. The un-audited accounts were also presented at this meeting, these will be audited over the next month. A special meeting of the Risk, Audit and Performance Committee will be required to be held to approve the audited accounts in June. It is not possible to provide a date at this point.
- 3.6. Care Homes update**
Whilst the situation with covid infection has significantly stabilised, there is a focus on continuing Enhanced Care Home Support. Confirmation was received on 26th March through the Scottish Government Office of the Chief Social Work Officer directing HSCPs to ensure the provision of this level of support to care homes both by continued assurance visits, as well as undertaking reviews of all care home placements.
- 3.7.** In Aberdeen, there are just under 1100 older people's care home placements for whom Aberdeen City Council retain social work responsibility. Significant



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work is ongoing to progress this work, whereby care management staff are holding reviews by Near Me, Microsoft Teams, or telephone conference with families, residents where they are able, and care home staff teams to ensure that provision of care meets the identified outcomes of people living in our care homes. From this, a report to the Chief Social Work Officer will be undertaken, analysing themes and issues that arise from this work.

Established actions to mitigate risk:

- 3.8.** Care home providers are required to report to the HSCP daily against a list of requirements set out by the Scottish Government. The purpose outlines the necessary situational awareness within both individual and wider sector settings, allowing the care home to escalate any concerns to the Partnership and for us then to respond appropriately and in a supportive manner.
- 3.9.** This information is used daily, and in collaboration with our colleagues in NHS Grampian's health protection team to inform the best means of supporting the care home to manage any outbreak and to ensure that wherever possible, we protect the safety of the residents. This data and intelligence are fed into the daily oversight meetings, attended by HSCP and Health Protection Team colleagues. Oversight meetings continue to take place daily, in line with a Grampian wide approach, with the intention of moving the meetings to be undertaken within each locality.
- 3.10.** Assurance continues to be provided in relation to the infection prevention and control measures within all care homes, and we support this in the following ways:
 - Ensuring there is an adequate supply of PPE for staff to use.
 - Testing of both staff and residents where indicated.
 - As of 4th January, 2021, care homes now have access to twice weekly lateral flow device tests for staff members, to be used alongside the existing weekly PCR test, in line with the SAGE recommendations. This approach is now established within all care homes.
 - Lateral flow device tests are also recommended to be used daily during outbreaks.
 - Reports are now available from TURAS highlighting the number of LFD tests recorded for each care home, for both staff and visitor testing. This data is being reviewed regularly with some inaccuracies in data input being identified.
 - Data relating to the number of visitor tests is collated by the care home team and shared weekly with the oversight group.



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- Ensuring that staff are suitably trained in infection, prevention and control, including the donning and doffing of PPE.
 - Ensuring that there is a rigorous cleaning regime within the home, cleaning regimes are scrutinised by the NHS Grampian Health Protection team.
 - Ensuring that staff are adhering to social distancing measures, both whilst working within the home, and whilst on their break.
 - Reducing the risk of transmission within the home, both through ensuring that residents remain within their room, and wherever possible, cohorting staff.
 - Our nursing and social work teams conducting assurance visits to observe staff providing care, and to observe the interior of the building. These visits allow for recommendations for improvement and we ensure that the care homes are making the necessary changes. Our care assurance nurses for care homes are now joining us on these visits. These visits are now established into a 16 week rolling programme.
 - Learning from previous outbreaks has been shared through the provider forum, and work is ongoing to share common themes from support and assurance visits with providers.
 - Daily oversight meetings which include members of staff from NHS Grampian Public Health and Nursing, Aberdeen City Health and Care Partnership, the Care Inspectorate, the provider, Scottish Government. The purpose of these meetings is to ensure that recommended improvements are in place and to make any further recommendations, as well as to continually ensure appropriate sharing of intelligence to determine and manage risk.
 - Seek assurance from the care home team that all recommendations have been put into place.
- 3.11.** Another significant aspect of our intervention is to ensure that the care home teams remain resilient, and HSCP maintain regular telephone contact with all care homes, to identify any issues at the earliest opportunity and bring these to the attention of the oversight team. The project lead for Team Recovery and Recuperation, (Clinical Psychologist Dr Emma Hepburn), is providing an overview regarding psychological wellbeing and promoting resilience to care home managers in June.

COVID-19 vaccination programme

- 3.12.** All eligible care home residents, for whom we have consent, have now received their second covid vaccination.



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Care Home Visiting

- 3.13.** The oversight group continue to monitor the progression of the implementation of indoor visiting, both through TURAS reporting and through regular contact with care home managers. We are also gathering feedback from families through the care management reviews process and although there has been a degree of anxiety both from residents, relatives and care home teams, visits have been progressing well. For example, there has been much anecdotal evidence reflecting the improvement to the emotional wellbeing of residents who are able to have prolonged contact with loved ones, and from being able to go on short trips out. As we move to lower restrictions, Scottish Government have just advised that there is to be additional Open with Care guidance to support residents with outings away from the care home.

Regional Updates

3.14. NHS Grampian Portfolio Management-Interim Arrangements

As part of NHS Grampian's transition from Operation Snowdrop, interim arrangements have been put in place. A portfolio management arrangement has been developed.

- 3.15.** The objectives of the portfolio arrangements are to develop a shared understanding of what the portfolio approach is; to understand how the portfolios will function with the appropriate leadership styles; and to ensure that NHS Grampian is set up to deliver against the new strategic plan.

- 3.16.** The success of the whole system approach depends on a number of demonstrators including: a clear and unifying vision with a common purpose that is articulated across the system; consistent collective leadership across the system that embraces common goals and aligns activities to achieve maximum benefits; high trust, low bureaucracy environment that takes shared responsibility for the delivery of care across the whole system; a well embedded quality and continuous service improvement approach that supports innovation and change; a sustained investment in NHS Grampian staff to develop the right skills, competencies with the appropriate capacity and support to enhance capabilities; a positive culture that builds on strong engagement with staff, patients and the public to deliver outcomes; and a well-developed network and interface that assures integrated working across boundaries.



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- 3.17.** The Chief Officer of the Aberdeen City Health and Social Care Partnership has been asked to develop the outcomes and objectives for the interim portfolio areas of Adult Medical/Unscheduled Care and Mental Health and Learning Disability. The outcomes and objectives are to be formally consulted on during July 2021.
- 3.18.** It is proposed that the IJB receive a report from the Chief Officer on the progress of the portfolio management approach at its meeting in July 2021.

National Updates

3.19. Adult Support and Protection (ASP) Inspection Programme

As reported previously, the 12-month inspection programme recommenced in March 2021. Preparatory work has already commenced with the drafting of the self-evaluation by each agency. A fortnightly meeting with the leads for adult protection from NHS, Police and HSCP will oversee this work and report progress through the Adult Protection Committee, Clinical and Care Governance Committee (CCGC) and the Chief Officers Group. Learning from the recent Justice Inspection will be invaluable in the preparation for this upcoming inspection but we recognise this is a joint inspection and all partners require to work closely together to achieve a positive outcome. A workshop is to be held on 19th May 2021, where the key agencies will collate the multi-agency self-evaluation. This will enable us to see a true reflection of our practice here in Aberdeen across partners and identify any issues that we need to address.

4. Implications for IJB

- 4.1. Equalities** – there are no implications in relation to our duty under the Equalities Act 2010.
- 4.2. Fairer Scotland Duty** - there are no implications in relation to the Fairer Scotland Duty.
- 4.3. Financial** – there are no immediate financial implications arising from this report.
- 4.4. Workforce** – there are no immediate workforce implications arising from this report.
- 4.5. Legal** – there are no immediate legal implications arising from this report.



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- 4.6. **Covid-19** – The update on the Portfolio Management Approach references the Partnership’s involvement in the wider NHS Grampian transition out of Operation Snowdrop which relates to the COVID-19 pandemic.
- 4.7. **Unpaid Carers** – There are no implications relating to unpaid carers in this report.
- 4.8. **Other**- there are no other immediate implications arising from this report.

5. Links to ACHSCP Strategic Plan

- 5.1. The Chief Officers update is linked to current areas of note relevant to the overall delivery of the Strategic Plan

6. Management of Risk

- 6.1. **Identified risks(s)** - The updates provided link to the Strategic Risk Register in a variety of ways, as detailed below
- 6.2. **Link to risks on strategic or operational risk register:**

The main issues in this report directly link to the following Risks on the Strategic Risk Register:

1- There is a risk that there is insufficient capacity in the market (or appropriate infrastructure in-house) to fulfil the IJB’s duties as outlined in the integration scheme.

2-There is a risk of financial failure, that demand outstrips budget and IJB cannot deliver on priorities, statutory work, and projects an overspend.

4-There is a risk that relationship arrangements between the IJB and its partner organisations (Aberdeen City Council & NHS Grampian) are not managed to maximise the full potentials of integrated & collaborative working. This risk covers the arrangements between partner organisations in areas such as governance; corporate service; and performance.

6- There is a risk of reputational damage to the IJB and its partner organisations resulting from complexity of function, delegation and delivery of services across health and social care.



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6.3. How might the content of this report impact or mitigate these risks:

The Chief Officer will monitor progress towards mitigating the areas of risk closely and will provide further detail to the IJB should she deem this necessary.

Approvals	
	Sandra Macleod (Chief Officer)
	Alex Stephen (Chief Finance Officer)