



INTEGRATION JOINT BOARD

Date of Meeting	6 July 2021
Report Title	Chief Officer's Report
Report Number	HSCP.21.083
Lead Officer	Sandra MacLeod, Chief Officer
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Consultation Checklist Completed	No
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. Interim Respite Beds

The procurement of residential respite and interim care capacity continues at pace. Following an engagement event with the providers, we will progress with the procurement of a blended procurement model with block purchase



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arrangements based upon our knowledge of required capacity and the opportunity to spot purchase additional capacity to allow some surge capacity to meet demands across the whole system. We hope to continue to test our opportunity for admission avoidance through this capacity. During the engagement session, providers highlighted some of the key challenges they face during unplanned admissions. We have responded to this through both an augmented rate for unplanned admissions (interim beds, and capacity to support emergency requests for respite and end of life support), and an assurance of continued joint working with providers.

3.2. Hospital at Home-Research Paper

In June 2021, a fourth research article about the work of the Partnership was published in an international journal. The article, authored by former Partnership employee Katherine Karacaoglu and Dr Calum Leask (Lead for Research & Evaluation) focused on the views of staff working in our Hospital @ Home Service, that has been operational in Aberdeen since June 2018. In one of the first pieces of research to explore this topic, it demonstrates the Partnership's ongoing commitment to robustly evaluating our activities and sharing our learning with others around the world. The findings emphasised the value of working in a non-hierarchical way (synergistic to the self-management model we have adopted within our organisation) and the benefits to our population by assessing and looking after people at home when safe and appropriate to do so. The article is published in the journal 'AIMS Public Health' and can be accessed by clicking the following link (<http://www.aimspress.com/article/doi/10.3934/publichealth.2021036>) or emailing cleask@aberdeencity.gov.uk to request a PDF file.

3.3. GP Practice Teams-Communications

A significant communications effort is under way in order to support our under-pressure GP practice teams, using assets developed by the NHS Grampian and Aberdeen City and Aberdeenshire Health & Social Care Partnership communications teams.

A suite of social media assets has been prepared, including a short video, Twitter messaging, poster/leaflet images and a Q&A for disseminating, to explain in straightforward terms the new ways in which practices are now



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working and the different pathways patients can now utilise in order to secure a consultation with the most appropriate healthcare professional within a practice.

We are also proposing to link up with the Press & Journal and the Evening Express to develop a series of articles on the above, over a period of time, which will include personal pieces authored by healthcare professionals working on the front line to explain their experiences of the new ways of working. It is also proposed that Aberdeen Journals develops a simple-to-follow pathway infographic, in close consultation with us, to explain potential patient journeys when they contact their practice.

3.4. Wider Partnership Communications

The City Partnership has also been working closely with Aberdeen Journals recently to showcase a number of positive stories to interest the general reader about our staff, our work and our partner organisations.

These have included:

- an interview with the new vice-chair of our local Alcohol and Drugs Partnership, Dermot Craig, who is now bringing his own lived experience of substance use and his work leading the charity Aberdeen in Recovery to bear upon the work of Alcohol and Drugs Action (ADA);
- an interview with one of our Health Improvement Officers, Rachel Thomson, about her long road to recovery following a traffic accident and her plan to paddleboard the full length of the 60-mile Caledonian Canal for a homelessness charity this summer, despite the life-changing injuries she suffered in the accident;
- an article in support of our Locality-focused grants scheme for community projects designed to reduce harms from alcohol and drug use, in which the newspapers highlighted 14 of the shortlisted schemes and invited readers to cast their vote online for their favourite project.

3.5. Staff Wellbeing

Healthy working lives activities have restarted, initially with free reflexology sessions for staff. Planning is underway for free complementary therapy



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sessions delivered by North East Scotland College (NESCOL) students in the Autumn 2021.

The City Healthy Working Lives Group has been re-established and met on the 22 June 2021 to identify possible activities for the next few months. This includes participating in a public campaign in September 2021 on “Stay Well Stay Connected”.

3.6. Long Covid

A new temporary service that will offer follow-up to patients who have been hospitalised with Covid-19 who have developed psychological symptoms is being developed.

This clinic model follows Scottish Government recommendations, has approved funding, and a recruitment process is underway.

All patients who have been hospitalised with Covid-19 in NHS Grampian will be contacted to opt in. Patients who have been hospitalised will have priority as per the Scottish Government brief, but depending on demand, this may be opened up to primary care referrals. Delivery of this service is supported by the Post Covid-19 Mental Health Steering Group. This group is liaising with the NHS Grampian Rehabilitation Framework Group.

3.7. Vaccinations “Cold Spots” Update

The Covid vaccination programme continues to deliver at least 2 community pop-up clinics across the City, predominantly in geographical communities with low vaccination uptake. Current additional focus is in Tillydrone and Froghall where we are working with community leaders to increase uptake in these areas.

Agreement has now been reached to provide a locality-based immunisation service in the City, including a City Centre mass vaccination location along with renovated clinics at Bridge of Don and Airyhall clinics.

As part of the Covid Immunisation programme, we have worked collaboratively with Partners to reach out to our diverse and disadvantaged groups. This has included looking at different ways of delivering immunisations in alternative settings. This has included:



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- Setting up local pop-up clinics targeting diverse and disadvantaged groups.
- Working jointly with local Churches, mosques and community centres to provide venues for delivering vaccinations and support local knowledge to promote venues.
- Working with Aberdeen City Council to make use of local awareness, networks and rapid mobilisation.
- Meeting with local councillors and Locality Empowerment Groups to promote vaccine within local community groups and the wider community.
- Working in Partnership with Sexual Health services with staff attending local pop-up clinics to hand out dry blood spot testing kits along with a joint Sexual Health Screening and Covid Vaccination clinic planned in July 2021.
- Working jointly with GREC (Grampian Regional Equality Council) to promote vaccine to ethnic minority groups, plan local pop-up clinics, undertake surveys and linking with intermediaries (i.e. SHIMCA Scottish Highlands and Islands Moray Chinese Association, Seafarers Association, Spanish Workers etc) to support residents with no CHI number or not registered with a GP to ensure everyone is vaccinated no matter their circumstances.
- Working collaboratively with Healthy Hoose Hub and Manor Avenue to delivery vaccines on a daily basis.
- Working collaboratively with Public Health & Station House Media Unit (SHMU) to produce local material/videos and radio clips to promote vaccine uptake.
- Working collaboratively with Foodbanks to help promote uptake of vaccine and provide local pop-up clinics during foodbank opening hours.
- Contacting construction and hospitality industries to promote vaccine and arrange local pop-up clinics within work settings.

This approach has supported building longer term relationships for the delivery of the wider immunisation programme within Aberdeen City.

3.8. Digital Citizen Delivery Plan

NHS National Services Scotland's Technology Enabled Care (TEC) Programme has launched its Digital Citizen Delivery Plan which can be accessed here [Digital-Citizen-Delivery-Plan-final-21-22.pdf \(tec.scot\)](#). Annex A of the publication provides a summary update of progress on a number of



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TEC projects over the past year. The plan notes that Covid-19 has been an important catalyst of change for digital health and care, with significant acceleration and adoption of digital approaches and tools to facilitate access to health and care services.

Digitisation is a focus of the Leadership Team Objectives and we are currently assessing our progress in relation to the four Strategic Priorities within the plan which are: -

- Addressing Inequalities and Promoting Inclusion
- Engaging Citizens, Staff, and Services through Co-Design and Participation
- Redesigning Services – Improving Citizen Access, Promoting Wellbeing
- Innovating to Support Transformation.

This assessment will help inform the scoping of the projects to be delivered within the Digitisation Programme, delivery of which will be monitored via the Leadership Team Huddle arrangements. The digital agenda is an important aspect of our transformation and close alignment to our partners will maximise delivery impact. We plan to incorporate our strategic intentions in relation to the digital agenda within our refreshed Strategic Plan and it is proposed that a Workshop dedicated to identifying these intentions is scheduled for August 2021, to which Partners will be invited.

3.9. 2C Tender Process-Update

The 2c procurement process is now complete and the following awards have been made:

Camphill Medical Practice – successful provider is the 2c Social Enterprise Group,

Carden Medical Centre - successful provider is the 2c Social Enterprise Group,

Marywell Medical Practice – no bids received,

Old Aberdeen Medical Practice – successful provider is Newburn Ltd,

Torry Medical Practice - successful bidder is the 2c Social Enterprise Group,

Whinhill Medical Practice – successful bidder is OneMedical Group.



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Following the issue of the award letters, meetings were arranged with Officers and Staff of the practices to answer any queries they had. A lot of the questions focused on terms and conditions and transfer of staff to the new providers. Two of the new providers have met with staff and the third will meet the week of 28 June 2021. A Project Group has been set up comprising representatives from Human Resources, Information Technology, Property & Asset Management, Primary Care Contracts Team, Finance, Practitioner Services, Telephony, Communications and Aberdeen City Health and Social Care Partnership (ACHSCP) staff. The first meeting of this Project Group is due to take place on 24 June 2021.

As highlighted, no bids were received for Marywell Medical Practice (MP). Marywell MP currently have 188 patients registered with them, of which, 1 person is of no fixed abode, 96 (52%) potentially reside in temporary accommodation, 48% in other accommodation and 119 of 188 currently supported for drug / alcohol addiction.

Marywell MP was relocated to the Timmermarket (TM) building after their original building was flooded. Prior to the outcome of the procurement exercise, it was discussed and agreed with the Marywell team that should there be no tender award for this practice, ACHSCP and partners would work with the team to redesign the service. The relocation of the service into the TM building, has enabled both services to identify opportunities for working across their systems, which provides mutual support and efficiency both to patients and their staff groups.

A project team has been established to review the options for the redesign of the service. As Marywell MP and their patient group has frequent contact with other public sector organisations, this project team includes representation from the Aberdeen City Council, 3rd sector and independent affiliated support services, Police Scotland, Scottish Ambulance Service, Scottish Prison Service and patient representation groups.

The project team are considering the following options:

- The original service prior to the move to the Timmermarket,
- The co-located service at the Timmermarket and whether this can be expanded on to deliver more benefits,
- The development of an outreach service,



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- Any other models which the project team feel might be workable.

Whilst the primary focus will be on the patient group registered with this practice, the project team is asked to consider whether it would be worthwhile considering other patient cohorts within these options, particularly those with complex needs.

An options appraisal will be brought back to the 2 November 2021 IJB and will include feedback from service users.

Regional Updates

3.10. Hosted Services Discussions

Discussions have been held at Chief Officer level in Grampian to arrange for Aberdeen City, Aberdeenshire and Moray Partnerships to provide a summary of the major hosted services (Prison Service, GMED's (out of hours non emergency service), Sexual Health, Mental Health and Specialist Older Adults and Rehab Service (SOARS) within the Grampian area. Included within the summary will be an explanation of what they have delivered in 2020/2021, and what their operational plans are for 2021/2022 to include metrics, financial position, risks. These summaries will be collated then submitted to the Aberdeen City, Aberdeenshire and Moray IJB's for information.

The above process will help inform the review of the strategic risk on Hosted Services, as requested by the Risk, Audit and Performance Committee (RAPC); to be reported back at the September 2021 RAPC meeting.

National Updates

3.11. Adult Support and Protection (ASP) Inspection Programme

The Lead for Social Work has been advised by the Link Inspector from the Care Inspectorate that those Adult Protection Partnerships which are to be jointly inspected by the Care inspectorate, Healthcare Improvement Scotland and Her Majesty's Inspectorate of Constabulary in Scotland in 2021 have been advised of this timetable; given this, the inspection of the Aberdeen City Adult Protection Partnership will therefore take place in 2022 sometime. The Care Inspectorate



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has also uploaded [an ASP update](#) with relevant inspection methodology documents onto its website and the Partnership's inspection steering group is using this information to inform its preparations in respect of the position statement, supporting evidence, case file-reading logistics and other aspects of the inspection process.

4. Implications for IJB

4.1. **Equalities, Fairer Scotland Duty &** – there are no implications in relation to our duty under the Equalities Act 2010 and Fairer Scotland Duty.

4.2. **Financial** – there are no immediate financial implications arising from this report.

4.3. **Workforce** – there are no immediate workforce implications arising from this report.

4.4. **Legal** – there are no immediate legal implications arising from this report.

4.5. **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.

4.6. **Unpaid Carers** – There are no implications relating to unpaid carers in this report.

4.7. **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.



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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.

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)