



## INTEGRATION JOINT BOARD

<b>Date of Meeting</b>	11 October 2022
<b>Report Title</b>	Chief Officer's Report
<b>Report Number</b>	HSCP.22.088
<b>Lead Officer</b>	Sandra MacLeod
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<b>Consultation Checklist Completed</b>	Yes
<b>Directions Required</b>	No
<b>Appendices</b>	None

### 1. Purpose of the Report

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

### 2. Recommendations

- 2.1. It is recommended that the JB note the detail contained in the report.

### 3. Summary of Key Information

#### 3.1. Local Updates

##### *Staff Wellbeing*

- Active distribution of winter safety items for staff, including personal alarms, torches and winter driving kits
- Increased levels of free complimentary therapies being provided, with the most popular being pedicures
- Sandwiches/teas/coffees still being distributed across City



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- Promotion of mindfulness and listening services (face to face and virtual)
- Focus on iMatter action plans in things most important to staff

### *Primary Care Demand*

Demand continues to increase within Primary Care. Maintaining adequate capacity within the sector to meet the demand on practices continues to be challenging. Within this context, practices are considering all options, including the consolidation of practices. A number of workstreams are being led by the Primary Care Team to address the immediate challenges, for example:

- The review of boundaries protocol and a workshop with all City practices is planned following requests for boundary changes;
- a City Communications and Engagement Group has been created and is leading on a pan-Grampian media campaign to increase public awareness of the wider roles in primary care;
- a new Health Assessment Team has been implemented to support the health needs of Ukrainian Refugees across Grampian; and
- the joint review of Marywell Medical Practice is ongoing, with a final workshop to be held in early October.

A sustainability report that is inclusive of all City practices is being collated for Clinical Care and Governance Committee in October 2022 and will provide more detail on levels of sustainability and the Primary Care team's response to the challenges.

The Scottish Government has confirmed PCIP funding for Aberdeen City for 2022/23. This incorporates underspend from 2021/22 funding. The PCIP project group is working alongside GP Sub-Committee (advisory group for the Area Medical Committee) and the Local Medical Council (LMC) to prioritise areas of spend to best fulfil the GP contract. Revised forecasts are being collated and submitted for November alongside a refreshed plan. Engagement sessions are currently underway with stakeholders to inform the plan.

Plans to meet mental health needs in Primary Care (First Contact Mental Health Workers) is not being progressed meanwhile as Scottish Government is currently reviewing all 2022/23 budget plans in light of the known



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conclusion of in-year COVID-19 consequentials. This has placed unprecedented pressure on existing Health and Social Care budgets and therefore recruitment and related activity has been paused.

Also, Enhanced Services payment protection for practices, which was live throughout COVID-19, will stop on 1<sup>st</sup> October 2022 for almost all services as planned. This will see progress towards a return to baseline levels of activity, for example for long-acting reversible contraception.

### *Support for Refugees*

Service Level Agreement (SLA) now in place for General Medical Services (GMS) provision and work is ongoing to register all Ukrainians staying within Welcome Hubs with GP practices.

Recruitment is ongoing to support the new 'Health Assessment Team'. This includes one service manager, two team leaders and 5 Care Navigators. These roles will work across the Welcome Hubs in the Grampian area to provide a first point of contact for all Welcome Hub guests, signposting to relevant services, and assisting with GMS registrations.

### *Housing Support Update*

As of the 10 January 2023, and for 14 months we are looking to make a direct award to Castlehill Housing Association for the housing support to tenants in their sheltered housing complexes. This will allow for engagement and assessment around future models of care. This is following the end of the current contract with current provider Cornerstone. A Business Case on this work will be presented at the November 2022 meeting.

### *Analogue to Digital Telecare Programme (A2DT)*

The first project board meeting was held on the 6<sup>th</sup> of September to discuss the project charter. This included the scope, objectives, governance and estimated costs, as well as the major risks and issues. The project charter was approved by the board which is a major milestone for the programme.

Due to complexity of funding, a finance sub-group was selected from the project board to organise the funding required for the project and advise on the appropriate committees and boards to approach for spending approval.

The Scottish Digital Office is scheduled to release the tender for the shared Alarm Receiving Centre (ARC) Technology Solution by end of September



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2022. The procurement exercise will be concluded with a single supplier framework for the ARC which will be ready to call off from by end of February 2023. The decision on the community alarm unit replacements depends on the outcome of testing which is still ongoing as well as suppliers' lead time.

### *Culture Working Groups*

The Culture sub-group continues to meet and is co-chaired by Luan Grugeon and Jason Nicol and is open to any IJB/SLT member to join. The recent work has focussed on three elements;

1. Buddying arrangements for IJB members with colleagues on the IJB or SLT.
2. Connecting with the Kings Fund, we are considering an 'observer' role for use in IJB development sessions.
3. Progressing use of BOOM (Best Out Of Me) boards where SLT and IJB members are invited to develop a slide or physical board which through images which they talk to, colleagues share more of themselves as a leader; a story of what makes them the person they are, their values, likes and dislikes, ways of getting the best out of them. Early testing and use of this has generated positive feedback on the sense of connection and understanding this is fostering, with a further BOOM session planned for the 7th November seminar.

### *Integration Scheme*

The Public Bodies (Joint Working) (Scotland) Act 2014 requires Local Authorities and Health Boards to jointly prepare an Integration Scheme, which sets out the key arrangements for how Health and Social Care Integration is to be planned, delivered, and monitored within their local area. The legislation requires Integration Schemes to be reviewed and revised every 5 years. Although Aberdeen City's Integration Scheme was implemented in 2016, it was reviewed in 2018 following the implementation of the Carers (Scotland) Act 2016. It is therefore due to be reviewed by March 2023.

The Integration Scheme is 'owned' by our two statutory partners – Aberdeen City Council (ACC) and NHS Grampian (NHSG) and the Scottish Government have final approval of it. The Senior Leadership Team and ACC legal advisors have been working on updating the scheme and it has



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been presented to the Strategic Planning Group for community representative input. It is about to go out for wider consultation which IJB members will be involved in. The revised scheme will then be submitted through ACC and NHSG governance routes in December 2022 with a view to receiving approval to submit it to the Scottish Government in January 2023. This should allow sufficient time for their review, comment and any further revisions in advance of the March 2023 deadline.

### *Woodlands Care Home Update*

We have seen an increasing demand in our acute settings which has often resulted in prolonged ambulance stacking at Emergency Departments and patients being treated in ambulances or corridors whilst waiting for beds to become available. To create urgent capacity in the system, we require additional emergency discharge beds in the community to ensure continued maximisation of patient flow. This will also create much needed capacity as we head into winter. With the opening of a new eighty-one bedded care home, we have the opportunity to increase the bed base within Aberdeen City by potentially up to forty-three beds. These additional beds will support flow and prevent additional pressures on the system. We would like to carry out a small test of change on seven of the beds which will be trialled as a GP led unit. There are currently no GP led units in care homes in Aberdeen. Similar units have been very successful in other areas, including Aberdeenshire.

### **3.2. Regional Updates**

#### *Regional awareness of North East Alliance*

The North East Alliance has recently been established as a forum to develop a learning system that explores shared challenges, tests solutions and seeks to implement 'what works' at scale and pace. The current membership includes Local Authorities, Health and Social Care Partnerships, Fire and Rescue and Police. It will seek to shape collective conversations and actions with a diverse range of people to deliver a vision of thriving communities which live fulfilled lives. The Forum will use the King's Fund's four pillars to frame action to improve population health:

- Wider determinants of health
- Behaviours and lifestyles



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- Places and communities
- Integrated health and care system

### *NHSG Population Health Committee*

NHS Grampian is committed to preventing harm, promoting wellbeing and integrating services to support communities to thrive. In this, it recognises that it needs to rebalance activities to become an organisation that has a clear focus on population health, through promoting preventative approaches and reducing health inequalities.

To make this happen, the Population Health Committee has been established by the Grampian NHS Board to provide the necessary assurance that it is delivering this ambition in four key areas:

- (1) ensuring the effective delivery of the Board's Public Health work;
- (2) creating equity and reducing health inequalities;
- (3) ensuring that NHS Grampian is working closely with partner agencies and with the people and communities it serves to plan and deliver health programmes; and
- (4) providing robust governance for the work of the committee on behalf of the NHS Board

The Committee will be chaired by John Tomlinson and include 6 Non-Executive NHS Board members. Executive Lead will be shared between Susan Webb, Director of Public Health, and Stuart Humphreys, Director of Marketing & Corporate Communications. The terms of reference for the new committee also require that the Chief Officer of each IJB is in attendance at the Committee. As a formal Committee of the NHS Board, the IJB will have a clear opportunity to feed into this work, as it does with any of the other Committees and structures in which the IJB participates. However, the commitment to ensuring close collaboration in co-producing population health planning and delivery means that both formal and informal relationships will need to be clarified and – where necessary – enhanced.

### **3.3. National Updates**

#### *National Care Service*

Following the presentation and discussion with members of the Integrated Joint Board (IJB), a response on behalf of the IJB to the consultation on the





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National Care Service (Scotland) Bill was submitted to the Scottish Parliament. The response can be found here:

[https://yourviews.parliament.scot/health/national-care-service-bill/consultation/view\\_respondent?show\\_all\\_questions=0&sort=submitted&order=ascending&q\\_text=aberdeen+city&uuld=556815647](https://yourviews.parliament.scot/health/national-care-service-bill/consultation/view_respondent?show_all_questions=0&sort=submitted&order=ascending&q_text=aberdeen+city&uuld=556815647)

The Scottish Parliament is continuing to review all consultation responses received. The Scottish Government has committed to a period of co-design with relevant stakeholders and the Health and Social Care Partnership in Aberdeen stands ready to engage with the process. Further updates on the Bill's progress through the Scottish Parliament and the co-design process will be provided to members of the IJB as required.

### *Current State of National Demand*

A number of meetings have been held, including with the Cabinet Secretary, in order to discuss and confirm improvement plans and trajectories for national Emergency Department Performance. A number of key development areas have now been identified.

## 4. Implications for IJB

- 4.1. **Equalities, Fairer Scotland and Health Inequality** - There are no implications in relation to the IJB's 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** – There are no immediate Covid-19 implications arising from this report.
- 4.6. **Unpaid Carers** - There are no implications relating to unpaid carers in this report.



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**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.

#### **6.2. Link to risks on strategic or operational risk register:**

3 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 potential of integrated & collaborative working. This risk covers the arrangements between partner organisations in areas such as governance; corporate service; and performance.

4 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.