Aberdeen City Health & Social Care Partnership
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INTEGRATION JOINT BOARD

Date of Meeting	6th June 2023
Report Title	Update on the Governance Arrangements for Hosted Mental Health and Learning Disability Inpatient and Specialist Service.
Report Number	HSCP23.035
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Consultation Checklist Completed	Yes
Directions Required	No
Appendices	A: Organisation Chart B: Governance Structure Organogram

1. Purpose of the Report

1.1. The purpose of the report is to clarify the governance arrangements for the Mental Health and Learning Disability (MHLD) Inpatient and Specialist Services and the Child and Adolescent Mental Health Service (CAMHS).

2. Recommendations

2.1. It is recommended that the Integration Joint Board (IJB):

a) Notes the information in the report and the two appendices and in particular paragraph 3.5 of the report in relation to the review of governance arrangements.

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3. Summary of Key Information

3.1 MHLD and CAMHS services are delegated operationally and strategically to the three Grampian IJBs, hosted by the Aberdeen City IJB. None of these services are now being managed under NHS Grampian and are managed via the Aberdeen City Health and Social Care Partnership. The transfer of funding has not yet taken place i.e., NHS Grampian still holds the budget for the services delivered.

3.2 MHLD and CAMHS services are operating at a higher cost than budgeted for with the operating deficit being funded by NHS Grampian. NHS Grampian's Director of Finance is currently convening a working group to review the budget and a report will be presented to the three Grampian IJBs, by 31 March 2024 on the financing arrangements, once this work is complete. At this point the IJB will be able to determine whether the funding for these services should transfer from NHS Grampian to the IJB budget.

3.3 The vision of MHLD services is set out in the Senior Manager Team Statement and is to "work together with our staff, partners and patients, to deliver high quality care that makes a difference. We inspire confidence and provide reassurance by delivering person-centred, safe and effective services for patients, the public, our organisation and partnership agencies". The Organisation Chart for MHLD and CAMHS can be found at Appendix A to this report.

3.4 The delivery of the vision is supported by a number of assurance groups such as the MHLD and CAMHS Clinical Governance and Assurance group. It is led by the Chief Nurse for MHLD and meets monthly. The Governance Structure Organogram is presented in Appendix B. This highlights the meetings held locally and how they report into the wider system assurance structure.

3.5 There is work currently underway across the three health and social care partnerships to look at these existing governance structures to ensure that they are proportionate and ultimately enable better outcomes. The transformation of Grampian wide MHLD services is governed and monitored by a dedicated Programme Board. Contributing to the transformation activity is one of our Delivery Plan projects and quarterly updates are submitted to the Risk Audit and Performance Committee. The outcome of the governance review will be reported through the MHLD

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Programme Board and the IJB will be updated via the annual Hosted Services reports due to be submitted to the IJB meeting on 2nd April 2024.

4. Implications for IJB

4.1 Equalities, Fairer Scotland and Health Inequality

The strategic intent set out in the Grampian-wide Framework for MHLD could lead to the following positive impacts on those with protected characteristics:

- Age - some services may be increased up to the age of 18 years for children and young people experiencing mental health problems / or both a learning disability and mental health problems (e.g. social work services in line with the national direction)
- Disability – no direct impact
- Gender reassignment – further development of the pathway to improve access to Gender Identity Services in Grampian
- Marital Status – no direct impact
- Pregnancy and Maternity – further development of the pathway to improve access to perinatal services in Grampian
- Race, Religion or belief or Non-belief – no direct impact
- Sex, – no direct impact
- Sexual Orientation – no direct impact

The design and delivery of Grampian-wide inpatient and specialist MHLD Services will require a balance of a population approach, person centred care and securing best value with the available resource. The design and delivery of Grampian-wide services will take account of the population needs across the three IJB areas.

4.2 Workforce

The ACHSCP Workforce Plan 2022 – 2025 will focus on three key themes for the ACHSCP workforce over the next three years; recruitment and retention, health & wellbeing, and growth & opportunities. The ACHSCP Workforce Plan 2022 - 2025 clearly sets out how changes & improvements will be made and how the progress & impact of the plan will be measured.

Any changes arising from the Transformation Programme Plan will go through the workforce, staff side and staff engagement processes set out

by the respective employer Organisation Change processes (NHSG, Aberdeen City Council, Aberdeenshire Council and Moray Council). Staff will be engaged in the work streams arising from the Transformation Programme Plan and will receive regular briefings. Staff engagement has been identified in the Communication and Stakeholder Engagement Plan and Risk Register.

4.3 Legal

No direct legal implications have been identified.

4.4 Unpaid Carers

Consideration will be given to the development of services to support carers as a key stakeholder across all future work streams.

4.5 Other

None identified.

5. Links to ACHSCP Strategic Plan

The ACHSCP Strategic Delivery Plan has a project to 'continue to progress Mental Health and Learning Disabilities (MHLD) transformation to evidence increase community delivery across secondary and primary care.'
Through this project, a number of transformation workshops have been planned to discuss the priorities for the service and members of the various work streams once the priorities have been agreed. The proposed priorities below have been suggested:

- Addressing existing temporary closures on RCH site i.e. Lochhead Day Unit and Kildrummy Day Hospital
- Unscheduled care and flow into and out of the hospital
- Adult Mental Health (AMH) pathways – including community AMH modernisation
- Older Adult Mental Health (OAMH) pathways – including community OAMH modernisation
- Learning Disability (LD) pathway – including review of LD residential care and supported living
- Rehabilitation pathways
- Review of complex care residential care and supported living

- Forensic pathways
- Neuropsychiatry/acquired brain injury pathways
- Mental Health and Wellbeing pathways
- Review of nurse staffing

To look at all of the priorities in a 12 month period is an ambitious target, however during the transformation workshops, these priorities will be looked at again to identify what the service should look at first.

6. Management of Risk

6.1. Identified risks(s)

Financial Risk

No financial risk identified as the budget remains with NHS Grampian.

Governance

A Governance Framework setting out clinical, care and financial governance arrangements for the Inpatient, Specialist Service and CAMHS hosted by Aberdeen City IJB was developed following integration.

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

This report links to Strategic Risk 3:

Cause: Under Integration arrangements, Aberdeen IJB hosts services on behalf of Moray and Aberdeenshire, who also hosts services on behalf of Aberdeen City.

Event: hosted services do not deliver the expected outcomes, fail to deliver transformation of services, or face service failure.

Consequence: Failure to meet health outcomes for Aberdeen City, resources not being maximised and reputational damage.

This risk is currently sitting at High.

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

This report provides visibility to performance information in relation to Hosted Services which IJB can consider and instruct any action they feel is necessary to provide any further assurance required.