



INTEGRATION JOINT BOARD

Date of Meeting	9 th July 2024
Report Title	Chief Officer's Report
Report Number	HSCP.24.046
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Consultation Checklist Completed	Yes
Directions Required	No
Exempt	No
Appendices	None
Terms of Reference	5

1. Purpose of the Report

The purpose of the report is to provide the Integration Joint Board with an update from the Chief Officer.

2. Recommendations

2.1. It is recommended that the Integration Joint Board/Committee:

- a) Notes the detail contained within the report.



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3. Strategic Plan Context

The Chief Officer's report highlights areas relevant to the overall delivery of the Strategic Plan.

4. Summary of Key Information

Local Updates

1. Rosewell House

Rosewell House is a 60-bedded care facility in Aberdeen. The main admission routes for Rosewell House were from the frailty pathway (40 beds) or from the Rehabilitation pathway (20 beds). 30 of the frailty beds were aligned to Aberdeen City and 10 frailty beds were commissioned by Aberdeenshire Health and Social Care Partnership (HSCP) until 31 March 2024. All 40 frailty beds are now aligned to Aberdeen City Health and Social Care Partnership (ACHSCP).

In February 2024, the IJB considered the Supplementary Procurement Workplan 2024/25 which outlined challenges in securing sustainable staffing and medical cover from October 2023 in respect of the 20 rehabilitation beds. Bon Accord Care (BAC) subsequently intimated their intention to withdraw from Rosewell House. The Supplementary Procurement Workplan included changes to the contract with Bon Accord Care having regard to their withdrawal of service provision within Rosewell House. The IJB approved the Supplementary Procurement Workplan and made new Directions. The completion date for BAC withdrawal from Rosewell House is 1st July 2024. It's important to note that there will be no adverse effect on delayed discharges, the 20 rehabilitation beds were not used in this capacity.

BAC and ACHSCP have worked closely to ensure a smooth transition and continuity of care over the remaining 40 beds aligned to the frailty pathway and to the transfer of staff from BAC to NHS Grampian into this pathway. Both BAC and ACHSCP continue to work together develop the rehabilitation service at Clashieknowe and other community settings in a manner that mitigates the impact of the closure of the 20 rehabilitation beds and to meet current and future need.

The change in use of beds at Rosewell House offers an opportunity to ACHSCP and partners to reconsider the use of the facility in the context of other assets in the city and the desire to seek best value for the residents of Aberdeen city. Over the course of the next 12 months, options associated with the use of Rosewell House will be considered and reported back to the IJB, as required with any recommendations.

2. Woodlands Care Home

The contract with Woodlands Care Home to provide emergency discharge beds ended on the 31st May 2024. There will continue to be 2 dedicated interim beds in Deeside Care Home until March 2025. Bon Accord Care will also continue to provide interim and respite beds to support the citizens of Aberdeen.



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Given the emergency discharge beds will no longer be in place, there will be an impact on delayed discharge, to mitigate this, the team are working closely with acute leads and providers to ensure optimum flow out of hospital and increasing the use of tec enabled care to enable safe discharge. We are also working with Community Multi-Disciplinary Team colleagues to develop a more collaborative, Whole System Approach where Enhanced Community Support Huddles are utilised to discuss patients who may be suitable for home-based support rather than remaining in hospital for bed-based rehabilitation

3. Complex Care – Stoneywood

Works have now commenced onsite, with site set up enabling ground works. Roads statutory approvals are nearing conclusion and main utility connections are progressing. Over the next period, plot setting out works, foundation pouring and roads access into the site will move forward. The complex care facility will better meet the needs and outcomes of people with complex needs and aims to be operational by December 2025. The main driver behind this development is the reduction of out of area residential placements and inappropriate hospital stays. This will ensure that people are receiving the right care, in the right place, at the right time, simultaneously providing whole system savings, as bed days are released.

4. Contract Monitoring: Adult Social Care

The Social Care Contract Routine Annual Monitoring reports on residential and non-residential services were carried out in May 2024, with 102 contracts being monitored.

The purpose of contract monitoring is to ensure that the service is delivered as agreed, to appropriate quality standards and is providing value for money, and to allow a public body to manage any risks which may impact on a service provider's ability to deliver the service, or to deliver it to the required quality.

Overall, there are currently 154 Aberdeen City contracts across all services with the total contract value (TCV) being £599.14m. This includes the contracts held with Bon Accord Care and the Granite Care Consortium.

Of the 102 contracts that were monitored, 99 were deemed compliant with the requirements of the contract, which reflects value for money and delivery of a quality service in line with the terms and conditions of the agreed contract, 2 were non-compliant – both failed to meet Care Inspectorate grades, so enter non-compliance procedures and 1 provider is in “areas of concern” - failed to provide appropriate monitoring information. The results show compliance rising year-on-year.



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5. Contract Monitoring: GP Practice Visits

The Primary Care team are in the process of completing the annual contract monitoring practice visits with all 27 GP practices across the city. The visits commenced on the 1st of May 2024 and will run until the 13th of August 2024. Once all the visits are completed, a report will be created with the main themes being fed into the appropriate Vision workstreams and communicated to the Grampian Vision Programme Board. An update will be provided in the September Chief Officer's report.

There will be a separate report for practice premises, attached as an appendix to the main report. The findings from the practice visits will be distributed across Grampian to primary care leads, to enable collaborative working on the actions where required. Once all parties have agreed, the findings will be shared with primary care representatives from the Scottish Government.

6. Forensic Mental Health Services - Specialist Mental Health & Learning Disability Services (Hosted MHLDS)

A report has been received from author Dr Daniel Bennett who provided a local response to the Scottish Government Independent Review of the Forensic Mental Health Services (Barron Report 2021). His report presents 19 recommendations to be addressed.

One of the main concerns is about the physical environment and infrastructure within the Blair Unit at Royal Cornhill Hospital. A Physical Environment and Improvement Board has now been convened and will take this forward. The Chief Executive Team and NHS Grampian Asset Management Group support immediate remedial backlog maintenance works, spend against an allocated £500k capital award, and endowment application.

7. Appointment of New Chief Finance Officer

The current Chief Finance Officer of Aberdeen City Health & Social Care Partnership (Paul Mitchell) retires on the 12th July. We wish Paul a long and happy retirement. Kenny Low has been appointed as the new Chief Finance Officer and joined Aberdeen City Health & Social Care Partnership on the 1st July 2024. Kenny previously worked as Finance Manager with NHS Grampian.

PUBLIC HEALTH: OUR SHIFT TO EARLIER INTERVENTION AND PREVENTION

8. Wellbeing Festival

The Wellbeing Festival has been a huge success across the city within excess of 150 activities hosted by more than 30 hosts. Those hosting have reported good footfall and interest in Aberdeen's latest festival and feel this paves the way for many more years of building on this year's success. We want to extend thanks to all hosts and delegates in supporting the festival. A summary of the impact and reach of the festival will follow in due course.



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9. Operational Leadership Team meetings (OLT) Meetings & Staff Wellbeing

OLT meetings continue on MS Teams three times per week. These meetings provide an opportunity for operational managers to escalate any service concerns, challenges and sharing of good practice. There is a short well-being session delivered weekly at these meetings for the managers to cascade to their teams, topics have included dealing with change, setting and reviewing personal goals as well as the promotion of the Well-being festival and this year's Gathering, which will be held on 28th September 2024.

Two very important topics, "stress & Burn out" and "Joy at Work" were discussed recently at one of our OLT meetings. The topics were highlighted by Professor Derek Feeley in his webinar with Alliance Scotland. It is highly recommended to invest an hour of your time in the webinar, as it emphasizes the significance of hope and joy in your professional life, ensuring that you provide the best possible care and support to your partners in care. You can access the webinar [here](#)

10. Learning Disabilities Week 2024 (LD Week)

The Partnership, Service Providers and supported individuals celebrated Learning Disability Awareness week from the 6th – 10 May 2024. The theme this year was "Digital Inclusion" and throughout the week there were a variety of showcasing examples shared, demonstrating how providers were enabling adults with Learning Disabilities to be digitally experienced and connected. Supported people spoke of their digital journeys and how they are enabled and empowered to live as independently and as safely as they can with support from a variety of technology enabled care devices/options.

The Vaccination Centre hosted the event, this worked well due to its accessibility, space and central location. With the development of Learning Disabilities health checks to be carried out in the hub in future, LD week was a great introduction to services users.

11. Obesity & Healthy Weight Management

At the last meeting of the IJB, the question of Aberdeen City Health & Social Care Partnership involvement on developing a Whole System Approach (WSA) to Obesity and Healthy Weight Management was noted. Aberdeen City Health & Social Care Partnership (ACHSCP) has been working alongside colleagues in Aberdeen City Council and NHS Grampian's Public Health Directorate to develop its existing work on promoting healthy weight management as part of its contribution to the Local Outcome Improvement Plan (LOIP), Stretch Outcome 3 (95% of all children (0-5 years) will reach their expected developmental milestones by the 27-30 month review by 2026).

Members of the Health Improvement Team have been working with colleagues in Education and the Health Determinants Research Collaborations (HDRC) in developing the Aberdeen City approach to delivering evidence informed actions within the Whole System Approach (WSA). A Short-Life Working Group to scope and lead the initial work on this is in development and an initial analysis of existing service contributions towards obesity and healthy weight management will take place after the summer break.



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Obesity and healthy weight management for adults is equally important, this is why it is also included in the Local Outcome Improvement Plan (LOIP), under Stretch Outcome 10 (Healthy life expectancy - time lived in good health) is five years longer by 2026. Aberdeen City Health & Social Care Partnership contributions towards Healthy Life Expectancy links closely to the broader prevention agenda which is being prioritised by ACHSCP. With the support of ACHSCP prevention lead (Phil Mackie), all service leads have started the process of understanding how city and hosted services can ensure that they are contributing towards healthier lives and healthier life expectancy. In addition, through the community planning partnership ACHSCP is seeking to actively contribute towards the broader shift towards preventative services to improve population health.

12. Aberdeen City Vaccination & Wellbeing Hub

Spring COVID Booster - The spring booster commenced on 1st April for the delivery of COVID Vaccines to over 75s and people aged 16-64 in the “at risk” category. This eligible co-hort totalled 22,522 people in Aberdeen. The programme was scheduled from 1st April – 30th June. As at end of May, 11,345 people had received their booster (50%). The programme has additional drop-in clinics in local communities planned during July to increase uptake within our priority neighbourhoods.

13. Childhood Vaccinations – Test of Change

Work is currently being developed around a test of change over the summer holidays to support increased uptake of childhood MMR and Booster Vaccines. A collaboration between Pre-school Immunisations, Health Visiting Service, Aberdeen City Council Children’s Services and various children’s voluntary organisations will see summer activity clinics held at the Aberdeen City Vaccination & Wellbeing Hub.

This model is based on a pilot carried out in Merseyside in 2013 to increase childhood immunisations against vaccine preventable disease. See link to further information [here](#)

The sessions will be co-produced and provide children’s activities plus additional support around cost of living, housing, social care, food and nutrition, health & wellbeing, to support children having the best start in life, focussing on early intervention and prevention.

Regional Updates

14. The Commissioning Academy

The Commissioning Academy had a great start with more than 150 people at the first session and 95 people at the second, where commissioning cycles and collaborative commissioning were the topics. The Commissioning Academy is a joint initiative across Grampian to help the social care sector understand and apply the themes of Ethical Commissioning. There are monthly sessions scheduled until March 2025, and we are learning and improving from each session, based on feedback.



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The concept of the commissioning academy came from Shona Omand-Smith, the Commissioning Lead for Aberdeen City HSCP. Shona has a background in nursing and social care, and she knows how difficult it is to keep up with the constant changes in policies, procedures and frameworks in the social care sector. To support the sector, Shona set up the Commissioning Academy, which follows a lunch and learn model. Delegates are invited to come along to the meetings, which happen on the last Tuesday of every month and focus on a different topic each time. An expert explains the topic in plain and easy language, without any jargon, followed by an opportunity for delegates to ask questions and talk about how they deal with the topic.

Shona hopes the Commissioning Academy will be a helpful network of people who work in health and social care and who want to learn and exchange ideas. Her vision is for it to become a source of ideas and innovations. The commissioning academy is open to anyone who wants to learn about relevant topics affecting social care, starting with the ethical commissioning principles, GIRFE (getting it right for everyone), and safer staffing legislation. Shona would like to see the Academy become a permanent feature.

15. GP Visioning Programme Update

The GP vision programme is moving into the implementation phase. During April and May we worked with colleagues from each Health & Social Care Partnership, Clinical Leads, NHS Grampian and Local Medical Committee to identify the resources necessary to progress each of the objectives. A Senior Responsible Officer, Deputy Senior Responsible Officer, Local Medical Committee / GP Sub Committee Representative, Project Lead and other key stakeholders for each of the objective workstreams have been identified.

Grampian-wide HSCP resource will deliver the first 5 objectives. These are: Data, Models of Contract, MDT (PCIP Review), Digital and Premises. The Implementation Programme board has been established, including Reporting Arrangements and Patient Participation. Regular meetings with the Scottish Government Primary Care representatives have been established to help deliver the models of contract objective. A Working group with leads from each work stream has also been established to provide space for addressing barriers and blockers and sharing of good practice across each objective.

National Updates

16. NHS Scotland Event 2024 – Planning for the Future: Delivering Health & Care Services through Innovation & Collaboration – 10th June 2024

A number of ACHSCP staff attended the above event in Glasgow to share some of the great work being undertaken in ACHSCP and learn more from others.



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Poster Presentations were provided by:

Craig Farquhar to promote Domestic Abuse Support Database – showcasing how TEC could play a role in supporting delivery of multi-agency services for people aged 18+ who experience domestic abuse within Aberdeen city.

Caroline Anderson & Stephen Main – to showcase the journey to “The Aberdeen City Vaccination & Wellbeing Hub” promoting the Integrated Priority Intervention Hub model.

Emma Dobson and Rachel Thompson to promote the Peep Healthier Families Programme – showcasing the approaches to support the tier 1 delivery of Child Height Weight programmes and healthier families peep toolkit.

There were further posters from NHS Grampian showcasing the Development of the Long COVID Service, Implementation of Treatment Escalation Plans (TEP) within NHS Grampian, Introducing the Palliative Oral Care Box in the Care Home Setting, NHS Grampian & Scottish Ambulance Service – Leading the Way Together & Experiences of AHP Consultants in the UK.

Two of our Staff, Caroline Anderson and Stephen Main also presented at a Parallel Session to over 80 delegates in the afternoon under the category of “Integrated Care – Working Innovatively and collaboratively to create health and social care communities”. The focus of the session was to:

- Showcase the Journey to the Aberdeen City Vaccination & Wellbeing Hub
- Raise awareness of how to create collaborative partnerships which enables people to access earlier support, self-management tools and social engagement to improve their health & wellbeing
- Increased awareness of “Making every Opportunity Count” to support early intervention & prevention with an audience of people attending the hub.

The session was very well received and subsequently 13 representatives from various NHS Boards, Health & Social Care Partnerships and voluntary organisations around Scotland have reached out for further information on the model or to arrange a visit to the hub. The event allowed ACHSCP to not only showcase it’s achievements but also informally influence national colleagues.

17. National Care Service (NCS) Update

The National Care Service (Scotland) Bill is currently at Stage 2 of the Scottish Parliament legislative process. At Stage 2, the government and MSPs can propose changes to the Bill (amendments). At the time of writing, it is understood that the Scottish Government intends to publish draft amendments to the NCS Bill in summer 2024. On publication of the draft amendments, the Aberdeen City National Care Service Board, chaired by the Chief Operating Officer, will scrutinise and engage with the process. The aim will be to ensure that any legislative change is developed in a manner that enables further improvement of local outcomes and does not cause unintended harm to progress made to date.



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18. Healthcare Improvement Scotland: Ageing and Frailty

Healthcare Improvement Scotland (HIS) have been consulting on their new [Ageing and Frailty standards](#). Phil Mackie (Public Health Consultant) and Shona Omand-Smith (Commissioning Lead) were on the steering group for development of these standards. A response has been submitted on behalf of Aberdeen City Health & Social Care Partnership (ACHSCP), with the overall response supporting what is outlined within the new standards, whilst acknowledging that support will be required to implement these in light of system and budget pressures.

5. Implications for IJB

5.1. Equalities, Fairer Scotland and Health Inequality

There are no direct implications arising from the recommendations of this report.

5.2. Financial

There are no direct financial implications arising from the recommendations of this report.

5.3. Workforce

There are no direct workforce implications arising from the recommendations of this report.

5.4. Legal

There are no direct legal implications arising from the recommendations of this report.

5.5. Unpaid Carers

There are no direct implications relating to unpaid carers arising from the recommendations of this report.

5.6. Information Governance

There are no direct information governance implications arising from the recommendations of this report.

5.7. Environmental Impacts

There are no direct environmental implications arising from the recommendations of this report.



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5.8. Sustainability

There are no direct sustainability implications arising from the recommendations of this report.

5.9. Other

There are no other direct implications arising from the recommendations of this report.

6. Management of Risk

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.

6.1. Identified risks(s)

There are no identified risks related to this report.