



INTEGRATION JOINT BOARD

Date of Meeting	19 November 2024
Report Title	Chief Officer's Report
Report Number	HSCP.24.076
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Consultation Checklist Completed	Yes
Directions Required	No
Exempt	No
Appendices	None
Terms of Reference	5

1. Purpose of the Report

- 1.1. The purpose of the report is to provide the Integration Joint Board with an update from the Chief Officer on recent and upcoming activities.

2. Recommendations

It is recommended that the Integration Joint Board;

- a) Notes the detail contained within the report.

3. Strategic Plan Context

- 3.1. The Chief Officer's report highlights areas of activity within the Aberdeen City Health & Social Care Partnership (ACHSCP) which are relevant to the delivery of the Strategic Plan.



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4. Summary of Key Information

Local updates

1. Granite Gathering

The event drew hundreds of people aged over-50 to the Beach Ballroom last month for talks, taster sessions and workshops focused on healthy retirement. The free event – on the theme of Age Well, Retire Well, Die Well – focused on people who are already in retirement or are soon-to-retire.

Dozens of organisations, voluntary groups and charities from across the North-east and beyond promoted their activities at an event with partnership working at its heart and which embodied one of ACHSCP's key Strategic Plan aims – to help people "achieve fulfilling, health lives".

2. Complex care accommodation

Work is under way on Aberdeen's first purpose-built complex care accommodation for some of the city's most vulnerable people.

The £4million development, on the site of the now-demolished Stoneywood School on Stoneywood Road, will deliver homes for eight people with complex care need and will offer round-the-clock care.

Support for its residents will be provided by a specialist operator with expertise in the field. The care will be overseen by Aberdeen City Health & Social Care Partnership when the Aberdeen City Council capital project is completed and operational.

The IJB and Aberdeen City Council has long recognised the city's need for bespoke accommodation for those in our community with extremely complex care needs and in need of 24-hour care and support.

The development manifest's the Partnership's Strategic Plan aim of "Caring together", "Keeping people safe at home", and "Helping them to achieve fulfilling, healthy lives". It will allow local people who are currently often cared for well beyond the city boundary, sometimes hundreds of miles away, to be closer to families and friends, benefitting everyone's wellbeing.



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Stonewood external view graphic, courtesy of MRT Architects

Each of the eight wheelchair-adapted bungalows will have a bedroom, a kitchen, a living room and a wet room, along with a small private garden. A shared garden space and a sensory garden are also part of the scheme – along with a staff building with office space, a meeting/training room, and an area for carers to take time out. Staff will be on site at all times. The development will have 28 car parking spaces for staff and visitors.

3. Budget Consultation & Engagement 2025/26

The Medium Term Financial Framework (MTFF) is being reviewed ahead of submission to the IJB in February 2025. The ACHSCP Budget Consultation went live on the 25th October 2024 and can be accessed [here](#). The online consultation ran until the 17th November 2024, and engagement events are planned until early December. Analysis of the engagement will take place over late December / early January, before being considered by the IJB at their Insights Session on the 28th January 2025. A full report on the engagement will be available as an appendix to the final MTFF.

4. Winter Vaccination Programme

Residents who have had vaccinations in previous years have been sent a scheduled appointment time and all other residents have been contacted to arrange an appointment.



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The timetable has been set as follows and is in line with priorities set by Scottish Government:

Staff clinics have been organised to take place at ARI, Royal Cornhill Hospital and Woodend. Staff can also book into any of the vaccination clinics throughout Grampian. People can book via the online portal https://vacs.nhs.scot/csp@id+csm_login or by contacting the National Contact Centre on 0800 030 8013.

Pop-up clinics are being organised for late December and January in priority neighbourhood areas, dates still to be finalised.

Day	Date	Time	Location
Mon	30 Sept	9.30-4.30pm	Kildrummy Ward, RCH
Tues	1 Oct	9.30-4.30pm	RACH, Dental Suite Level1
Wed	2 Oct	9.30-4.30pm	RACH, Dental Suite Level1
Fri	4 Oct	9.30 – 3.30pm	Ward 17, Woodend
Mon	7 Oct	9.30-4.30pm	Kildrummy Ward, RCH
Tues	8 Oct	9.30-4.30pm	ARI, Level 5 Conference Room, Green Zone
Wed	9 Oct	9.30-4.30pm	ARI, Level 5 Conference Room, Green Zone
Fri	11 Oct	9.30 – 3.30pm	Ward 17, Woodend
Tues	15 Oct	9.30-4.30pm	ARI, Level 5 Conference Room, Green Zone
Fri	18 Oct	9.30 – 3.30pm	Ward 17, Woodend
Wed	23 Oct	9.30-4.30pm	ARI, Level 5 Conference Room, Green Zone
Thurs	24 Oct	9.30-4.30pm	ARI, Level 5 Conference Room, Green Zone
Mon	4 Nov	9.30-4.30pm	Kildrummy Ward, RCH
Tues	12 Nov	9.30-4.30pm	ARI, Level 5 Conference Room, Green Zone
Thurs	14 Nov	9.30-4.30pm	ARI, Level 5 Conference Room, Green Zone
Tues	19 Nov	9.30 – 4.30	ARI, Level 5 Conference Room, Green Zone
Thurs	21 Nov	9.30 – 4.30	ARI, Level 5 Conference Room, Green Zone
Tues	10 Dec	9.30 – 4.30	ARI, Level 5 Conference Room, Green Zone
Thurs	12 Dec	9.30 – 4.30	ARI, Level 5 Conference Room, Green Zone



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5. Discharge without Delay

The national work continues with the weekly Collaborative Response and Assurance Group (CRAG) meeting enabling a laser focus around this work. Aberdeen City is currently sitting at delays of 33.8 per 100,00 adults, this is below the national expectation but higher than the target Scottish Government set for ACHSCP of 20.8 per 100,000 adults. The local team continue to work on the improvement plan and report into the Grampian wide weekly group. This group ensures shared learning across Grampian and good practice from HSCP's across Scotland.

6. Analogue To Digital

The A2DT (Analogue to Digital Telecare) programme is dedicated to ensuring the delivery of a reliable and robust digital telecare emergency response service ahead of the decommissioning of analogue networks in December 2025. This initiative encompasses the replacement of the existing analogue Alarm Receiving Centre (ARC) software platform and the maintenance of connectivity with all currently linked alarm units and peripherals. Transitioning to a modern digital platform is anticipated to enhance reliability, efficiency, and integration with new technologies.

Aberdeen City Council's Regional Communications Centre (RCC) provides telecare alarm-monitoring services to approximately 16,000 citizens. This includes monitoring around 7,000 dispersed units and 8,000 sheltered-housing connections across Aberdeen, Aberdeenshire, and Moray. The nearly completed replacement of analogue dispersed alarm units with digital alarms in Aberdeen has led to the Digital Office of the Scottish Government awarding Bon Accord Care and Aberdeen City HSCP the Bronze Award for Digital Telecare Implementation.

Testing of these alarms and other devices with the new ARC is scheduled to commence soon, with the target go-live date for the new ARC set for spring 2025. The project utilizes the Shared ARC framework, led by the Digital Office, to streamline procurement and implementation, ensuring compliance and cost efficiency. Preparations for executing the ARC framework are currently underway, with the contract expected to be finalized within the next few weeks.

Regional Updates

7. Dietetics Action on Weight Control

The Partnership's Dietetics Team is working with Public Health colleagues, Aberdeenshire Health & Social Care Partnership and Moray Health & Social Care to



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develop and deliver early intervention and prevention services in adult weight management and diabetes.

The team has used temporary Diabetes Healthier Futures Framework funding from the Scottish Government to work on delivering some services locally and to procure some digital services.

A business case has been submitted via Public Health to NHSG Charities for three-year funding to support further service provision.

The move reflects a renewed push by Allied Health Professional services to support work in the areas of early intervention, prevention and self-management.

AHP is also reporting improved recruitment to teams, apart from Podiatry which continues to face challenges in this area.

Our Public Health Consultant is leading on the whole system on healthy weight and is ensuring all the work is connected to improve effectiveness of the approach.

National Updates

8. National Care Service

At its meeting on 24 September 2024, the Integration Joint Board received a report regarding the progress of the National Care Service (Scotland) Bill.

Since that meeting, the Convention of Scottish Local Authorities (CoSLA) subsequently agreed that local government should withdraw support for the 'shared legal accountability' model. The GMB and Unison trade unions also withdrew their support for the current proposals in September.

That model for the National Care Service (NCS) had previously been approved, in principle, by CoSLA and the Scottish Government. This reflected CoSLA's view that insufficient progress had been made to address the concerns, risks and complexities identified by local government.

It had been anticipated that the Stage 2 Amendments would be formally lodged by the Scottish Government in autumn 2024. The Aberdeen City NCS Programme Board will continue to monitor discussions taking place at a national level in respect of the NCS and engage as appropriate. The Chief Operating Officer will submit a further report to the IJB following Stage 2 of the legislative process.

9. National Care Home Contract

Negotiations for the 2025/26 uplift are expected to start in November. This is often a lengthy process. It is expected to be tougher this year given the lack of funds



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available to local government. Scottish Care (the body that represent Care Providers) have concerns with the cost of care calculator and at this stage it is not known whether Scottish Care will participate in the 2025/26 negotiations. This could result in very extended negotiations or potentially end up with no settlement agreed, and the risk that providers will walk away from the NCHC. Local Authorities across Scotland were in a similar position a couple of years ago.

We are already seeing more providers move towards a more 'self-funding' model, leaving less available capacity for Local Authority funded individuals. At the National Care Home Contract User Intelligence Group (NCHC UIG) meeting in September a national approach was discussed to influence the market to stay with the Local Authority and as a national group they will continue to work together to drive the care home market in the direction that ensures we have sustainable services into the future.

Locally, along with NHCH UIG, we are looking at contingency planning should the 2025/26 NCHC negotiations be unsuccessful.

10. Early Release of Prisoners

In response to the rapid rise in the prison population, Scottish Government have used emergency measures to release prisoners early across the prison estate. In collaboration with the Scottish Prison Service and other relevant services, the release of 19 'Aberdeen' individuals was successfully coordinated in June 2023, to ensure, that those transitioning from prison to the community have access to housing, healthcare, financial support, in the same way as we would seek to deliver for those being released from prison on a planned basis.

Due to ongoing issues with prison overcrowding, it is anticipated that there are likely to be more such releases in the coming period. At present however there has been no decision made. A national consultation closed on 19th Aug, with regards to returning to automatic release after two thirds of sentence. Currently release is 6 months prior to sentence end.

Scottish Government published an 'Analysis of consultation responses' in October 2024. In that report it states that the responses will help to inform a range of measures designed to respond to the rising prison population, including planned legislation relating to the release point for certain prisoners. [Long-term Prisoner Release Process: Consultation : Analysis of Consultation Responses](#)

11. Social Work Governance and Assurance

Adult and children's social work have been participating in the Care Inspectorate's national review of social work governance and assurance. The Care Inspectorate is



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undertaking the review to consider how social work governance and assurance supports leaders across Scotland to ensure statutory duties are carried out safely and effectively; enable social work staff to be supported, accountable and effective in their practice and assist social work staff to uphold social work values.

We have participated by sharing all required information on our internal governance processes, through a social work staff survey and through targeted interviews with service managers, the Chief Officer for adult social work and the Chief Social Work Officer. An overarching report on social work governance in Scotland will be published in March 2025. We will also receive an area specific report on the staff survey which will not be published but will enable us to measure our performance against the national position and progress with any areas of improvement required.

12. Population Health Framework

The Scottish Government and Convention of Scottish Local Authorities (COSLA) have jointly developed a Population Health Framework (PHF) with key system wide partners, including Public Health Scotland, the Scottish Directors of Public Health and wider public health service professionals. The PHF deliberately takes a cross government and cross sector approach to improve the key building blocks to health and wellbeing including good early years education, fair work and income, access to healthy places and public services, and the ability to lead healthy lifestyles. At its heart the focus is on increased action on prevention and early intervention to improve the health of our population and, in the longer term, reduce preventable demand on our public services.

As a result, the Framework is key to the business of the IJB and of Community Planning Aberdeen. What is described as an engagement process is currently concluding, after which the PHF will be finalised and published. From a Health & Social Care Partnership perspective the PHF is welcome in that it will further support our existing commitment to focusing on prevention and early intervention. The cross-sectoral approach it promotes is very closely aligned to the type of Whole System Approach we have already adopted to address adult and child obesity across Aberdeen. Finally, the PHF is underpinned by the same “Four Pillars” Population Health model that informs our contributions to wider Grampian efforts as part of the North East Population Health Alliance.

5. Implications for IJB

5.1 Equalities, Fairer Scotland and Health Inequality

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



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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.

5.8 Sustainability

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

5.9 Other Implications

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

6. Management of Risk

There are risks associated with the levels of public engagement in our budget consultation activities. The Chief Officer will monitor progress and work with colleagues to address public feedback and/or information gaps which arise.