

Health & Social Care Partnership

East Ayrshire Health & Social Care Partnership Integration Joint Board 09 February 2022 at 2pm MS Teams

Present:

Councillor Douglas Reid, East Ayrshire Council (Chair)
 Mr Craig McArthur, Director of Health and Social Care
 Councillor Jon Herd, East Ayrshire Council
 Councillor Clare Maitland, East Ayrshire Council
 Dr Sukhomoy Das, NHS Non-Executive Director
 Ms Sheila Cowan, NHS Non-Executive Director
 Ms Irene Clarke, East Ayrshire Advocacy
 Councillor Iain Linton, East Ayrshire Council
 Mr Neil Kerr, ADP Independent Chair
 Ms Marion MacAulay, Chief Social Work Officer
 Ms Jennifer Wilson, Interim Nurse Director
 Mr Michael Breen, NHS Non-Executive Director
 Ms Dalene Steele, Associate Nurse Director
 Councillor John McGhee, East Ayrshire Council

In Attendance:

Mr Erik Sutherland, Head of Locality Health & Care
 Ms Heather Irving, Service Manager
 Ms Claire Kavanagh, Planning & Performance Officer
 Mr Ewan McGill, Communications Officer
 Ms Lorna Wallace, Resource Worker
 Mr Jim Murdoch, Senior Manager Wellbeing, Planning & Performance
 Ms Clare Wilson, Senior Manager
 Ms Amanda McInnes, Senior Manager Business Support
 Ms Vicki Campbell, Head of Primary Care and Out of Hours Services
 Councillor Claire Maitland, East Ayrshire Council
 Ms Aileen Anderson, Committee Secretary (Minutes)

Agenda	Discussion	Action
1.	<p><u>Welcome & Apologies</u></p> <p>Mr Craig McArthur welcomed everyone to the meeting and noted apologies from Alex McPhee, Kathleen Winter and Allina Das.</p>	

2.	<p><u>Good News Story – Launch of HSCP Webpage</u></p> <p>Mr Craig McArthur advised that the Health and Social Care Partnership (HSCP) website had been in development for several months having previously relied on the websites of East Ayrshire Council and NHS Ayrshire & Arran.</p> <p>Mr Ewan McGill delivered a demonstration of the HSCP Website and advised that the link would be shared following the meeting. The link had already been provided to a number of colleagues and Senior Managers to review and identify any significant issues ahead of a formal launch.</p> <p>It was noted that the site was user friendly and engaging and would be an excellent public facing support to the wellbeing plan.</p> <p>Mr Ewan McGill advised that the site included links and signposting to the NHS Inform Service Directory and ALISS to allow users to search for services by post code; engagement was ongoing with community groups to ensure they could include their services on the ALISS directories to ensure they could be highlighted in a search.</p> <p>Councillor Linton advised that he had reviewed the site and felt it would be beneficial to everyone. The group welcomed the ongoing development of the site and provided positive feedback.</p>	
3.	<p><u>Declarations of Interest</u></p> <p>There were no declarations of interest.</p>	
4.	<p><u>Minute of the previous meeting which took place on 01 December 2021</u></p> <p>The minutes of the previous meeting were agreed as an accurate record of discussions.</p> <p>It was noted that Irene Clarke was not noted as attending the previous meeting and this was an error. The previous minutes were updated to reflect this change.</p>	
5.	<p><u>Matters Arising</u></p> <p>There were no matters arising.</p>	
6.	<p><u>Governance Update</u></p> <p>Mr Craig McArthur presented the report to provide the Board with an update on governance arrangements in respect of the membership of the Integration Joint Board.</p> <p>Following the appointment of the new Chief Executive of NHS Ayrshire and Arran, Claire Burden, Ms Borland has returned to her role of Nurse Director</p>	

	<p>and the NHS Board has therefore confirmed Ms Borland will resume her position as a voting member of the Board, until end March 2022 at which time the NHS Board will advise of any further changes.</p> <p>It was noted that the carer representative role on the IJB was currently vacant. This is an important position on the IJB and the appointment of a suitable candidate will ensure the voice of carers can continue be heard in support of the IJB decision making process.</p> <p>Due to a change in acute staffing responsibilities, Dr Mahanth Manuel, Associate Medical Director, will represent acute medicine on the Board for future meetings.</p> <p>The Board noted the report and agreed on the membership update.</p>	
7.	<p><u>Reflection on Current Position</u></p> <p>Mr Craig McArthur presented the report to provide the Board with an overview of the Partnership response and activity since the emergence of the Omicron variant of COVID, and to provide assurance on the delivery of health and social care services during this period.</p> <p>All GP Practices are open and continue to focus on priority services including urgent care, palliative care, vaccines and screening programmes. Many practices have reviewed service models to allow them to deliver all services where possible as workforce allows whilst continuing with these priority areas. In late December, some GP practices supported the Board to quickly deliver COVID19 vaccines and boosters to eligible patients. Overall, general practice has maintained a good level of service delivery and access.</p> <p>The majority of Dental Practices across Ayrshire & Arran continue to provide a mix of routine and emergency appointments with activity during September to December 2021 averaging 43% against pre-COVID levels. Infection prevention and control measures had a major impact on dental activity. Where a practice is unable to treat patients due to a short term issue then an alternative nearby dental practice is identified for those registered patients. Only a small number of total practices are accepting new patients due to high waiting lists for routine care which in turn may impact on patient's long term oral health. Work is ongoing to restore activity to pre-covid levels.</p> <p>Since March 2020, AUCS has incorporated a COVID-19 clinical pathway including the COVID Assessment Centre to assess patients with worsening COVID symptoms. Since December 2021, new COVID-19 therapeutic medication has been introduced into this pathway to support a cohort of patients deemed as very high risk if they develop COVID symptoms and test positive for the virus. Within the first five weeks a total of 44 patients in Ayrshire and Arran received this new treatment with early indicators being positive and showing an improvement in most patient symptoms following treatment and reducing the need for secondary care intervention.</p>	

There has been an increase in the level of complex children's plans being referred to Locality services with evidence that community, social and economic factors are adding to existing pressures that COVID is exacerbating. Colleagues in Early Years health have supported these plans through their Named Person Service, with additional targeted support being offered by Children 1st. There has been a 40% increase in the number of children being placed on the East Ayrshire Child Protection Register between August 2021 and January 2022.

Some children's services have temporarily paused direct face-to-face contact with children in their family home, creating additional pressures for the Named Person's planning, and resulting in an increase in work for Children and Families. Child Protection Oversight arrangements have taken place on a weekly basis, with senior leads from all services analysing current service capacity and exploring any new protection themes or trends for children.

It is anticipated there will be challenges to fill Social Worker vacancies, and as such an HSCP-wide Recruitment and Retention group has been established to develop options and work plans to mitigate this risk, operationally and strategically, during 2022. Our workforce have been magnificent in their collective efforts to support the current challenges, going above and beyond for children and families in unique and challenging times.

There has been significant pressures on the prison health care service, managing two significant COVID outbreaks in the prison in the last 12 months, and the routine management of a number of cases on a daily basis. The work of the team has meant that, despite the vulnerability and unique nature of the population, there has been very limited hospital admissions and no deaths due to COVID. Testing and isolation processes are in place for new admissions and transfers, which has been successful in limiting the scale and levels of transmissions of the most recent infections.

The Care at Home service has supported over 280 people affected by coronavirus since March 2022. This has required careful consideration of infection prevention and control, risk assessments, staff testing, vaccinations and extensive use of PPE.

The impact on this area of the workforce has been significant and regular engagement with workforce representatives, including a number of meetings with Trade Unions, attended by the Chief Executive, Head of HR, Head of Service and Chief Social Work Officer has been very helpful in understanding and responding to concerns.

The care home sector has continued to respond to the pandemic in caring for some of East Ayrshire's most vulnerable citizens, in line with public health and government guidance. The Care Home Support Team and Care Home Oversight Group have supported the sector with guidance, risk assessment, learning, development and practical supports. This has included, on occasion, staffing support when care homes have found themselves unable to provide safe staffing levels due to COVID-related staff sickness.

	<p>Councillor Reid sought clarity on screening for cancer programmes and noted that where waiting times were long, this created a risk for individuals being undiagnosed. It was noted was informed that every effort was being made by the NHS Board to restart services. The public perception around waiting lists for a number of services hasn't been realised, however there had been an impact on General Practice with more individuals requiring additional support to remain at home.</p> <p>Councillor Herd noted concern regarding the increase in the Child Protection Register, and sought clarity on whether there was an identifiable reason for this. It was noted that the register can vary in size, and smaller numbers cause actually more concern regarding young people potentially being missed and therefore remaining at risk and unsupported. It was felt that a number of services had reduced services over the pandemic, and as these have remobilised it has resulted in an increase in referrals to the service.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> i. Note and comment on this update report on service activity and impacts, especially since the emergence of the Omicron variant of COVID; and ii. Recognise and acknowledge the impact, both personally and professionally, and the incredible efforts that HSCP employees across all staff teams have delivered over an extremely challenging period of time. 	
8.	<p><u>System Pressures Investment Plan</u></p> <p>Mr Erik Sutherland presented the report for Board approval of the System Pressure Investment Plan and to seek approval to progress with recruitment to posts and other relevant investment plans.</p> <p>The report related to the local System Pressure Investment Plan developed following the announcement of national investment of £300M. The report set out key areas of investment in home first / discharge without delay, care at home, MDT locality working, Allied Health Professionals, Social Work and Mental Health Officer capacity, transitions, interim care and programme management, finance, HR and business support enablers.</p> <p>There has been considerable engagement across teams in developing the local System Pressures Investment Plan. This has included a series of workshops, individual submissions from teams and discussion at Senior Leadership Group, Partnership Management Team and Strategic Planning Group.</p> <p>Monitoring the impact of the investment centres on a suite of measures including the number of people remaining in hospital where their care and support could be better provided in another setting ('delayed discharge') and associated bed days occupied, assessment waiting times, progress with recruitment, the level of unmet need for care at home, up-take of Technology</p>	

	<p>Enabled Care, and use of interim placements. This will require reporting to the Government in line with funding conditions.</p> <p>The System Pressures Investment Plan contributes significantly to the Strategic Plan 2021-30 and specifically to the core themes of Starting Well and Living Well, Caring for East Ayrshire, and Safe and Protected. The report also contributed to Safe and Protected People at the Heart of What We Do, Caring for Our Workforce, and Digital Connections. Specific areas of investment also recognise the need to continue to develop capacity to meet increasing demand associated with Adults with Incapacity (Scotland) Act 2000 and Mental Health (Care and Treatment)(Scotland) Act 2003.</p> <p>Councillor Linton sought assurance around staff recruitment and that plans were in place to retain staff within East Ayrshire. It was highlighted that discussions were ongoing with Education and Ayrshire College to support career pathways and progression within roles for individuals.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> i. Receive the System Pressure Investment Plan report; ii. Approve the System Pressure Investment Plan; iii. Agree the implementation of the Plan through recruitment and other investment; iv. Direct parties to the Integration Scheme to ‘pass through’ resources in full to the IJB to enable implementation of the Plan; and v. To receive periodic progress reports on the impact of this investment. 	
9.	<p><u>Community Nursing Review</u></p> <p>Ms Dalene Steele presented the report to provide details of the findings from the Ayrshire and Arran wide review of community nursing services.</p> <p>A Community Nursing Review took place during September and October 2021 with a focus on the current nursing care delivery models across Ayrshire and Arran with the aim to develop a model which better meets the needs of our changing demographics and also to support improved workforce planning with clear career progression pathways. The review included District Nursing, Community Treatment and Care (CTAC), Advanced Nurse Practitioners (ANPs) and Integrated Care and Treatment (ICT) Nurses. It proposes a new service delivery model for communities of Ayrshire and Arran that aims to meet the challenges we face now, and will face in the future.</p> <p>The review was circulated virtually around NHS Ayrshire and Arran’s CMT and has been shared with relevant Heads of Service in each of the Health and Social Care Partnerships, including the Head of Primary and Urgent Care.</p>	

	<p>To deliver on the Transforming Nursing and Caring for Ayrshire agendas it requires new and innovative ways of working. This includes more joined-up, collaborative approaches to provide seamless interfaces with other professionals and services, as well as introducing new Band 7 District Nurse Specialist Practitioner posts.</p> <p>The age profile of the Community Nursing workforce and the high turnover of Band 6 District Nurses, especially those who have been supported by NHS Ayrshire & Arran to complete the Specialist Practitioner Qualification (DN) course, was another motivator for this review.</p> <p>Stakeholder engagement was central to the review, and community nurses voices have been key. Engagement with all levels of Community Nursing staff was facilitated through virtual focus groups and a questionnaire developed with support from NHS Ayrshire and Arran's engagement team.</p> <p>Ms Jenny Wilson fully supported the review outcomes, noting there was a requirement for a robust Community Nursing workforce and a new model of care; the proposed model was very ambitious but would link well with the Caring for Ayrshire visions.</p> <p>Ms Vicki Campbell voiced support for the Review and welcomed the career progression for community nursing staff.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> i. Receive the Ayrshire and Arran Community Nursing Review: September/ October 2021. 	
<p>10.</p>	<p><u>Financial Management Report – Period 9</u></p> <p>Mr Craig McArthur presented the report to provide details of the projected outturn position of for the Partnership for 2021/22, based upon the current financial position as at 31 December 2021, including a brief update on additional funding streams in the current year and going forward.</p> <p>The month 9 Financial Management Report for the Partnership was compiled following financial analysis and budget monitoring at East Ayrshire Council and NHS Ayrshire & Arran, for relevant service areas.</p> <p>The consolidated projected outturn for the Partnership on directly managed services is an underspend of £5.547m. This represents 1.91% of the £290.496m directly managed services budget for the year. This represents a favourable movement on the £4.659m month 7 projected underspend reported to the Board on 1 December.</p> <p>Covid-19 projected costs of £7.394m are being offset by savings in some areas of the budget in the current year, as outlined within this report. Covid-19 projected costs and offsetting income assumptions were outlined in the report.</p>	

	<p>The overall projected underspend on directly managed services is after taking account of a projected underspend of £1.678m related to East Ayrshire hosted services managed under routine Lead Partnership arrangements. Based on latest projections, North Ayrshire Lead Partnership services are projected to outturn by £0.264m less than budget with South Ayrshire Lead Partnership services projected to overspend by £0.021m.</p> <p>If this position is maintained until the end of the financial year, this will result in a reduced underspend to East Ayrshire IJB of £1.012m. This comprises the North and South shares of the East hosted services projected underspend £1.091m plus the East contribution to projected overspend in South hosted services £0.007m, partially offset by the East £0.086m share on the projected underspend on North hosted services.</p> <p>Mr Michael Breen acknowledged further discussion around budget setting and medium / longer term financial planning, would take place at the Integration Joint Board Development Session on 2 March 2022.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> i. Note the projected outturn position for East Ayrshire Health and Social Care Partnership as at 31 December 2021, including specific key actions on significant variances; ii. Note the current projected outturn position and underlying financial risk to the IJB in relation to the response to the Covid-19 pandemic; iii. Note the current position in respect of IJB Reserve balances; iv. Note progress towards achievement of approved cash releasing efficiency savings; v. Note the projected outturn position in respect of services managed under Lead Partnership/ Hosted Services arrangements; and vi. Note the current position in respect of large hospital Set Aside budget. 	
	<p>Councillor Reid left the meeting and this point and Mr Michael Breen chaired the remainder of the meeting.</p>	
<p>11.</p>	<p><u>Trauma Advisory Board</u></p> <p>Ms Clare Wilson presented the Board with an overview of the East Ayrshire ambition and intention to develop further, psychological trauma informed practice. Furthermore, this report will demonstrate new arrangements in place to have oversight of our approach to embedding trauma informed and responsive across all out public services.</p> <p>The report provided an overview of recent developments and plans in relation to the newly reformed East Ayrshire Trauma Advisory Board (TAB). This includes intentions to deliver upon key priorities to provide excellent trauma aware, trauma informed and trauma responsive services.</p>	

	<p>Councillor Herd welcomed the work and expressed regret that this approach had not been in place within Police Scotland during his career. It was highlighted that, although there was a national forum to share good practice of trauma informed practice, East Ayrshire was taking a unique approach which isn't currently being replicated elsewhere in the country.</p> <p>The Board noted the report and thanked Ms C Wilson for her presentation.</p>	
<p>12.</p>	<p><u>Partnership Provider Statement</u></p> <p>Ms Claire Kavanagh presented the report to outline the Partnership Provider Statement, co-produced by a broad range of delivery partners in fulfilment of requirements to prepare a 'Market Facilitation Statement', and in support of the HSCP's collaborative commissioning approach, for consideration and approval.</p> <p>The current community of East Ayrshire Health and Social Care providers, with stewardship from the Health and Social Care Partnership, has developed its statement of ambition towards changing the commissioning landscape by 2030, through collaborative approaches built on positive relationships and a curiosity to learn and innovate together. In co-producing the Partnership Provider Statement, partners have identified a range of opportunities, aligned to the Strategic Plan 2021-30, that will progress this transformational change, and have developed a charter of principle-based behaviours that will guide future work in these areas.</p> <p>Ms Claire Kavanagh delivered a presentation on the Partnership Provider Statement.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> i. Note co-production by delivery partners and support the continuation of this approach, based on shared vision, values and trusting relationships; ii. Note that the Partnership Provider Statement is the overarching product of this ongoing positive conversation and is subsequently evolving in nature; iii. Consider the transformative potential of the collaborative approach to changing the commissioning landscape as described; iv. Approve the Partnership Provider Statement; and v. Agree next steps as described, including that the Partnership Provider Statement, subject to IJB approval, will be shared for endorsement by the governance forums of the delivery partners involved in its development. 	
<p>13.</p>	<p><u>Continuation of Contractual Arrangements – Locality Care Services</u></p> <p>Mr Erik Sutherland presented the report to seek approval to continue a contractual agreement for three East Ayrshire Health and Social Care Partnership (EAHSCP) Locality Health and Care contracts from 31 March</p>	

	<p>2022. This was being requested in accordance with the Council's Standing Orders Relating to Contracts.</p> <p>The report related to the proposed extension of contracts in three areas of service. These are the Helping Hands project (Shopping Service), Helping Hands Project (Low level maintenance/ Housing Support Service), and the Care at Home Framework. The combined annual value to the IJB of these contracts is £2.819m. The report recommended that the cabinet of East Ayrshire Council be requested to progress extensions from 31 March 2022, in line with Standing Orders.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> i. Approve funding to continue contractual arrangements with providers from 31 March 2022; and ii. To remit to Cabinet for approval in line with Standing Orders Relating to Contracts. 	
14.	<p><u>NHS Q2 Whistleblowing Report</u></p> <p>Ms Amanda McInnes presented the report to provide the Board with an update following the implementation of the National Whistleblowing Standards and Once for Scotland whistleblowing policy (the Standards) introduced on 1 April 2021.</p> <p>The report provided details of Whistleblowing concerns raised across NHS Ayrshire & Arran by staff and those who provide services on behalf of NHS Ayrshire & Arran during the period July – 30 September 2021.</p> <p>The Whistleblowing Oversight Group will continue to meet through 2021-22 to provide oversight whilst this new policy moves beyond implementation to normal working in regard to whistleblowing, recognising that this is a learning process and that processes may require to be changed or developed following learning from the concerns raised and how these are managed.</p> <p>The Board noted the contents of the report.</p>	
15.	<p><u>Any Other Business</u></p> <p>Nothing to discuss.</p>	
16.	<p><u>Date of Next Meeting</u></p> <p>2 March 2022 – Development Session</p> <p>23 March 2022 at 2pm MS Teams</p>	