MINUTE of MEETING of the **ANGUS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD** held remotely on Wednesday 23 June 2021 at 2.00pm.

Present: Voting Members of Integration Joint Board

EMMA-JANE WELLS, Non-Executive Board Member, NHS Tayside – Chair Councillor BOB MYLES, Angus Council - Vice Chair Councillor JULIE BELL, Angus Council Councillor LOIS SPEED, Angus Council PETER DAVIDSON, Non-Executive Board Member, NHS Tayside PETER DRURY, Non-Executive Board Member, NHS Tayside

Non Voting Members of Integration Joint Board

SANDY BERRY, Chief Finance Officer PETER BURKE, Carer's Representative IVAN CORNFORD, Independent Sector Representative ALISON CLEMENT, Clinical Director CHRIS BOYLE, Staff Representative, Angus Council ELAINE HENRY, Registered Medical Practitioner RICHARD HUMBLE, GP Representative KATHRYN LINDSAY, Chief Social Work Officer HAYLEY MEARNS, Third Sector Representative CHARLIE SINCLAIR, Associate Nurse Director GAIL SMITH, Interim Chief Officer BARBARA TUCKER, Staff Representative

Advisory Officers

GEORGE BOWIE, Head of Community Health and Care Services, South AHSCP JILLIAN GALLOWAY, Head of Community Health and Care Services, North AHSCP DAVID THOMPSON, Manager, Legal Team 1, Angus Council

EMMA-JANE WELLS, in the Chair.

The Chair commended the continued work undertaken by the AHSCP staff, third sector and private care homes colleagues and carers. Referring to the improved pandemic situation supported by the excellent vaccination programme being provided across Angus, highlighted the ongoing challenges faced in terms of the recent outbreaks both in Angus and Dundee and the impact on all those providing health and care services.

1. APOLOGIES

Apologies for absence were intimated on behalf of Andrew Jack, Service User Representative and Emma Fletcher, Director of Public Health, NHS Tayside.

2. DECLARATIONS OF INTEREST

Councillor Bell advised that in her capacity as a Non-Executive Director of Public Health Scotland, she had a standing declaration of interest and specific exclusion and would take part in any discussion or voting.

Peter Davidson declared an interest in Item 7 (Report No IJB 18/21) in that he was involved and managed a charity in Montrose that may benefit from the proposed funding. He indicated that he had no financial interest and would not participate in any discussion and voting and would leave the meeting during consideration of the item.

Councillor Speed declared an interest in Item 7 (Report Nos IJB 18/21) as a parent/carer with family members who receive care and indicated that at this time she had no financial interest and would participate in any discussion and voting during consideration of the item.

Ivan Cornford declared an interest in Item 5 (Report IJB6/21) as a care home provider and indicated that he had no financial interest and would participate in any discussion during consideration of the item.

3. MINUTES INCLUDING ACTION LOG

(a) **PREVIOUS MEETINGS**

The minute of meeting of the Angus Health and Social Care Integration Joint Board of 21 April 2021 was submitted and approved as a correct record.

(b) ACTION LOG

The action log of the Angus Health and Social Care Integration Joint Board of 21 April 2021 was submitted.

In reference to the 14 December 2020, Item 2 Mental Health and Wellbeing Strategy overdue action point, the Chief Finance Officer advised that discussions were ongoing with other Chief Finance Officers and the Director of Finance, NHS Tayside to progress this area of work.

In response to the Chair's questions relating to the seven-day services and timeframe, the Interim Chief Officer and the Head of Community Health and Care Services – North provided an update and confirmed an update report would be provided to the next IJB.

Councillor Bell assured the Board that the same concerns around the progress on the mental health strategy had been raised at the IJB's Audit Committee. In highlighting that there continued to be work ongoing in Angus, she also expressed her concern regarding the slippage and that she did not want any citizens impacted as a result of the delays in progressing the strategy.

The Interim Chief Officer provided an update on the recruitment and staffing situation within mental health services.

The Chief Finance Officer advised that in reference to Agenda Item No 5, Report IJB 16/21, Finance Report that he would be seeking approval for a further recommendation to that Report, specific to setting aside reserves that would support the mental health strategy.

Councillor Speed also expressed concerns in relation to the slow progress of the Mental Health Strategy. Noting the slow progress from an NHS perspective, the Head of Community Health and Care Services – North provided assurances and a progress update in terms of the local implementation plan. She intimated there required an increased pace of change to meet the needs of the Angus population. An update would also be provided in a future report to the IJB.

The Integration Joint Board agreed to note the action log of 21 April 2021.

(c) AUDIT COMMITTEE

The minute of meeting of the Angus Health and Social Care Integration Joint Board Audit Committee of 21 April 2021 was submitted and noted.

The Chief Finance Officer advised that the IJB Audit Committee at their meeting earlier today, had approved the IJB's Annual Governance Statement and Unaudited Annual Accounts for submission to the IJB's External Auditors.

4. **APPOINTMENTS**

With reference to Article 4 of the minute of meeting of this Board of 21 April 2021, there was submitted Report No IJB 15/21 by the Interim Chief Officer to advise of appointments to the Integration Joint Board, to approve the appointment of a non-voting member and to appoint a member of the IJB to the IJB Audit Committee.

The Chair welcomed Councillor Myles, Peter Davidson and Hayley Mearns to the IJB and also took the opportunity to commend Councillor Speed in her work and support to the IJB.

Councillor Bell, Chair of the IJB Audit Committee intimated that should any volunteers express an interest in becoming a member of the IJB Audit Committee, that she would be willing to follow this up in a discussion, outwith the meeting.

Having heard from the Chief Finance Officer, and also the Third Sector Representative who expressed an interest in relation to the appointment to the IJB Audit Committee, the Integration Joint Board agreed: -

- (i) to note the appointment by Angus Council of Councillor Bob Myles to the post of Vice-Chairperson of the Board;
- (ii) to note the appointment by NHS Tayside of Peter Davidson as a voting member of the IJB;
- (iii) to appoint Hayley Mearns as a non voting member of the IJB representative of third sector bodies; and
- (iv) to note that the Third Sector Representative expressed an interest in relation to the appointment as an additional member to the IJB's Audit Committee.

The GP Representative joined the meeting at 2.19pm.

5. **FINANCE REPORT – 2020/21**

With reference to Article 6 of the minute of meeting of this Board of 21 April 2021, there was submitted Report No IJB 16/21 by the Chief Finance Officer providing an update to the Board regarding the financial position of Angus Integration Joint Board including the financial projections for 2020/2021, an update in terms of reserves, financial risks, governance and financial planning issues.

Attached as Appendix 1 to the Report was the Integration Joint Board's detailed year-end financial position for 2020/21. This showed that the overall projected financial position for Angus IJB for the year to March 2021 was an underspend of c£1.922m, post offset of the costs of COVID-19. Appendices 2, 3 and 4 of the Report set out the ongoing and emerging financial risks for the IJB; the reserves position; and financial governance. By making ongoing progress with delivering efficiencies alongside service redesign and modernisation, the IJB should be able to deliver to the local population on a sustainable basis.

The Chief Finance Officer provided an overview of the key areas of the year-end Report, including, the key provider support costs, prescribing costs, the financial impact of COVID-19, IJB reserves, financial planning, particularly, the de-commissioning of the IJB's in-house residential care home provision.

Councillor Bell's raised a question regarding the ring-fenced reserves, and also raised concerns around the timing of the request to decommission beds, particular given the Independent Adult Services Care Review and also the validity of the occupancy figures. In response, the Chief Finance Officer provided an update in terms of the reserve position.

The Chief Finance Officer provided an update in terms of the financial planning position and requested the Board to note that there was potential for local Mental Health management to

develop a case to access the existing Strategic Planning Reserve to support the local introduction of mental health plans; and requested the IJB to consider an additional recommendation:- to devolve authority to the Chief Officer to progress a proposal for £300k of the existing Financial Planning Reserve to be used to support the regional Mental Health system in terms of implementing the Mental Health Strategy.

Following discussion and having heard from Councillors Bell and Speed, and the Carer's Representative who raised concerns regards the timing of the de-commissioning proposals and the potential to re-commission in future, also the impact on carers, data inconsistencies, care management pressure, the lack of information provided around the impacts of increased care at home, the further demands on housing services provision, and the requirement to ensure maximised quality of life. Councillor Speed also suggested that recommendation (ii) of the Report be amended to include "that should the position change in future that this would be reviewed".

In response, the Chief Finance Officer provided an update and confirmed that in order to minimise risk and with changing demand and needs, that any decision taken could be reviewed in future, again highlighting that it would not be without financial challenge. In terms of adaptations, he confirmed that he would revert to Councillor Speed post meeting, and that an update would be provided in the next Finance Report.

The Head of Community Health and Care Services – South provided a detailed overview in terms of the de-commissioning proposals for in house residential care home provision; and also responded to Councillor Speed's point relating to the impact on the workforce and retention of staff.

The Staff Representative in echoing members' comments around the timing of the proposal, also raised concerns regarding the de-commissioning proposal, workforce position, including retention, differing job types, and the ongoing mental health unit proposals. He requested that the consultation process timescales be sufficient to ensure staff were not rushed into making decisions. In response, the Head of Community Health and Care Services – South provided an update and also confirmed that in terms of the Mental Health Prior Information Notice (PIN) should any interest be received that this would be considered alongside the existing Seaton Grove proposal.

The Clinical Director provided an update and highlighted the main risks to the partnership. In highlighting the influx of patients into Angus for care home beds including resulting pressures on services, expressed her support to the workforce; to the de-commissioning proposal and to the additional funding recommendation proposed by the Chief Finance Officer in terms of the mental health strategy.

Peter Drury highlighted the good financial outturn and requested further information regarding underspends and workforce retention. In response, the Chief Finance Officer, Interim Chief Officer and the Head of Community Health and Care Services – South provided an update.

The Chief Social Work Officer highlighted that the current proposal reflected the agreed IJB's strategic priorities, to shift the balance of care. In providing context to the proposal to decommission up to c20 beds, intimated that an overall professional approach would be taken to meet the needs of individuals in each locality. She also provided further information in relation to the responsibilities of Angus Council and AHSCP as a provider of last resort, the cost of local authority care including void periods and staffing. In terms of the risks highlighted, confirmed that these would be contained and if there was a reduction of the in-house capacity, the risk around last resort, would be monitored by the clinical and care governance process.

Having also heard from the Registered Medical Practitioner in terms of the challenges with recruitment, particularly, across the mental health services; and Councillor Myles who commended the positive financial position, and confirmed that his concerns and questions around the proposal to de-commission had now been addressed. He intimated support to the proposal on the proviso this could be reviewed, if required.

The Independent Sector Representative acknowledged the improved progress to the Key Provider Support Costs process and confirmed that social care providers had been very supportive off this, over the last few months.

Having heard from the Chair, the Integration Joint Board agreed: -

- (i) to note the overall projected financial position of Angus IJB for 2020/21;
- (ii) to approve the de-commissioning of up to c20 beds of the IJB's in house residential care home provision and requested the IJB's Executive Management Team to develop and progress an operational plan to deliver this change; also that should the position change in future that this would be reviewed; and also a progress update be provided to a future IJB meeting that would also provide assurances around the workforce position;
- (iii) to note the risks documented in the Financial Risk Assessment as detailed in Appendix 2 of the Report;
- (iv) to note the update regarding Reserves as detailed in Appendix 3 of the Report, including the need to develop plans to ensure reserves were mobilised effectively;
- (v) to note the issues documented in the Financial Governance as detailed in Appendix 4 of the Report;
- to devolve authority to the Chief Officer to progress a proposal for £300k of the existing Financial Planning Reserve to be used to support the regional mental health system in terms of implementing the Mental Health Strategy;
- (vii) to note the potential for local mental health management to develop a case to access the existing Strategic Planning Reserve to support the local introduction of mental health plans; and
- (viii) to approve the associated Direction as detailed in Appendix 5 of the Report.

6. WHOLE SYSTEM PATHWAY/LARGE HOSPITAL SET ASIDE

There was submitted Report No IJB 17/21 by the Interim Chief Officer providing an update to the development of whole system pathway/large hospital set aside (LHSA) work.

The Report indicated that traditionally, LHSA had been centred on an activity-based approach with the potential to transfer funding associated with the reduced occupied bed days. Work was progressing regarding integrated hubs and interface care which linked both Planned Care and Unscheduled Care and the whole systems pathway approach agreed.

A Whole Systems Pathway Strategic Interface Group had been established. A clinical pathway tool and whole system framework had been developed which would progress the development of pathways including the shift of resources to the community. The workplan would also include a review of unscheduled admission data to identify any further opportunities/pathways to progress prevention of admissions to hospital.

The Head of Community Health and Care Services – North confirmed that the Group would be clinically led and that a data driven collaborative approach would be taken. Working in partnership with Dundee HSCP, she intimated that corporate support had been provided by NHS Tayside. To drive forward the whole system pathway there required a pace of change and for all elements of care be aligned. The Scottish Government had recently provided further information in relation to Interface Care national priorities but confirmed that these were not dissimilar to the local priorities already identified.

The Clinical Director welcomed the whole system effort and emphasised that the approach was about people working as a whole system from a variety of backgrounds and recognising the

opportunities. She confirmed that considerable work was in progress; also highlighted the benefits of day treatments being undertaken in local communities.

The Chair, Registered Medical Practitioner and Councillor Bell welcomed the Report. In response to Councillor Bell's query regarding the Dementia Care pathway, the Head of Community Health and Care Services – North provided an update and intimated that the pathway would also be brought forward in the mental health work and to the Strategic Planning Group in future.

The Integration Joint Board agreed to note the progress made around a clinically led approach to the development of whole system pathway/Large Hospital Set Aside (LHSA) work as outlined in IJB 81/20 Report.

Having declared an interest at Article 2 above, Peter Davidson left the meeting during consideration of the following item.

7. UPDATE ON PROGRESS WITH IMPLEMENTATION OF THE CARERS (SCOTLAND) ACT 2016

With reference to Article 7 of the minute of meeting of this Board of 24 February 2021, there was submitted Report No IJB 18/21 by the Interim Chief Officer providing an update on progress.

The Report highlighted the changing systems and time taken to deliver re-assessments had meant that there were data quality issues in the systems related to carers. The IJB were not in a position to present a full financial plan for the resources associated with the Act until the data quality issues were resolved. Therefore, to avoid delay and enable progress in the work with carers, third sector partners and other workstream areas, Section 4 of the Report described the funding and commissioning proposals to be considered.

In highlighting the challenges of the last year, the Principal Planning Officer provided an overview and update in relation to the carers assessment, care management, data consistency issues, third sector support for carers and the waiving of charges and residential respite. An update was also provided by the Head of Community Health and Care Services – South.

Councillor Bell in commending the work of the Principal Planning Officer, confirmed there had been positive feedback from carers in terms of the approach taken. In highlighting the recent Carers Conversation event in which a number of IJB members had also attended, in her opinion highlighted that the IJB had been able to demonstrate and evidence that Angus cares about carers. She also welcomed the proposal for funding to allow the development of the Kirrie Connections model with the rest of Angus.

In support of Councillor Bell's comments, the Interim Chief Officer also referred to the recent Carer's Conversation event, and that the purpose of the Report was to evidence to all the carers that they have been listened to. She emphasised the need to support care management to ensure reviews were completed timeously and the support to carers of people with dementia through Kirrie Connections.

The Carer's Representative endorsed Councillor Bell's and the Interim Chief Officer's comments and given any opportunity he highlighted that Angus IJB were at the forefront in their work and support with carers.

Councillor Speed also intimated her support to the proposals. She commended the work of the Carers Centre but emphasised the importance of continuing to seek out and engage with carers who may not be participating in events. In response to Councillor's Speed question relating to the Kirrie Connections model, particularly the £50k one off funding, the Principal Planning Officer provided a detailed update.

The Integration Joint Board agreed:-

- (i) to note the content of the Report and progress made to date with the implementation of the Carers (Scotland) Act 2016;
- (ii) to approve the funding and commissioning intentions set out in the Finance section of the Report; and
- (iii) to approve the Direction as outlined in Appendix 2 to the Report.

Peter Davidson was re-admitted to the meeting.

Prior to consideration of the following item, the Interim Chief Officer advised this was the last meeting for Rhona Guild, Primary Care Manager, and on behalf of the Board, acknowledged and commended Rhona for the immense amount of work undertaken in relation to Primary Care and Long Term Conditions Management. In supporting the Interim Chief Officer's comments, the Chair on behalf of the IJB thanked Rhona for her support and contributions.

8. PRIMARY CARE PLAN IMPLEMENTATION UPDATE REPORT

With reference to Article 9 of the minute of meeting of this Board of 28 October 2020, there was submitted Report No IJB 19/21 by the Interim Chief Officer providing an update on the delivery of the Primary Care Implementation Plan.

The Report highlighted the impact the COVID-19 pandemic on the delivery and implementation of the 2020/21 plans approved by Angus Integration Joint Board in August 2020. Nationally, a joint letter issued by the Scottish Government and BMA in December 2020 emphasised the commitment to the 2018 GMS contract and their intentions around a number of priority areas including vaccinations; pharmacotherapy; community treatment and care services; urgent care and additional professional roles.

The Angus Primary Care Improvement Plan update was summarised in Section 3 of the Report and Section 4 of the Report provided a summary of those services which had been fully implemented in 2021/22. Appendix 1 to the Report detailed the Adult Flu Immunisation Programme 2021/22. The financial plans for 2020/21 and 2021/22, a summary comparison of approved programme allocation and actual programme spend was detailed in Section 5 of the Report.

The Primary Care Manager highlighted the impact and challenges of the pandemic, the national and local operational opportunities and the pivotal role of social prescribing and mental health services, particularly during the pandemic. She also commended the work of Voluntary Action Angus and the Mental Health Peer Support Workers. An update was provided in terms of the proposals outlined in Section 4 of the Report, particularly in relation to Community Treatment and Care Services (CTCS), and the Adult Flu Immunisation Programme for 2021/22. The national guidance in relation to COVID-19 had not as yet, been confirmed. Going forward to the year ahead, she referred to the recommendations of the Report and the outstanding and ongoing risks outlined in Section 6 of the Report.

Echoing the Interim Chief Officer's comments to the Primary Care Manager, Andrew Thompson, GP, also commended the work of all those involved in the planning and delivery of the programmes. An update was provided in relation to mental health, social prescribers, Community Treatment and Care Services (CTCS) and First Contact Physiotherapy. Highlighting the positive benefits of remote consultations, he also referred to the risks outlined in Section 6 of the Report. He emphasised the need to maintain the retention of the workforce, and in his opinion, intimated that further investment may be required and for MDT's to identify efficiencies in partnership that would ensure service delivery within the available resources.

The Interim Chief Officer advised that the Interim Director of Allied Health Professions had offered support, particularly around dietetics and requested the report authors to follow up on the offer made. A premises update was also provided.

The Chief Finance Officer referred to the GMS contact, GP recruitment and retention and to support primary care sustainability including recruitment and retention of general practitioners, he proposed an additional recommendation to allocate £150k of the Strategic Planning Reserve to support the developing proposals regarding GP recruitment and retention.

The Third Sector Representative also thanked the Primary Care Manager for her support in the implementation of the social prescribing project and wished her well for the future.

The Integration Joint Board agreed:-

- (i) to note progress made in the delivery of the 2020/21 Primary Care Improvement Plan (PCIP);
- to approve the proposed Angus Primary Care Improvement Workplan for 2021/22 which reflected the updated General Medical Services (GMS) contract guidance issued jointly in December 2020 by the Scottish Government and the British Medical Association (BMA);
- (iii) to approve the overall indicative Angus Primary Care Improvement Fund financial commitments for 2021/22 outlined in Section 5 of the Report included, as per previous years, delegated devolved authority to the Chief Officer to approve updated versions of the financial plans as required, and to note that the Local Medical Committee agreement would also be sought to subsequent changes;
- (iv) to approve the development of a plan, in conjunction with the Local Medical Committee, to ensure the deployment of the available PCIP underspends in a manner that was consistent with PCIP purposes and reflected that this was non-recurring funding included, as above, delegated devolved authority to the Chief Officer to approve plans associated with these non-recurring resources;
- (v) to request a further progress report in December 2021 to include detail of the updated national Memorandum of Understanding and its implications;
- (vi) to allocate £150k from the existing Strategic Planning Reserve to support Primary Care sustainability;
- (vii) to note in terms of recommendation (vi) above that as the allocation would deplete the Strategic Planning reserve, a report outlining replenishment proposals would be brought forward to a future IJB meeting; and
- (viii) to approve the Direction as outlined in Appendix 2 to the Report;

The Associate Nurse Director left the meeting during consideration of the following item.

9. PRESCRIBING MANAGEMENT

With reference to Article 8 of the minute of meeting of this Board of 9 December 2020, there was submitted Report No IJB 20/21 by the Interim Chief Officer providing an update to the IJB on prescribing management in Angus.

The Report indicated that prescribing governance continued through the Angus Prescribing Management Group (PMG), with good clinical engagement and buy-in. Appendix A to the Report detailed the recent workplan. Section 3 of the Report provided update in terms of serial and social prescribing and the Tayside Prescribing Strategy.

The overall Family Health Service (FHS) prescribing position to March 2021 showed a cumulative underspend of c£330,000. A 3-year financial framework had now been agreed for Angus prescribing resources with the detailed financial forecast for 2021/22 being an overspend of c£19,000. Shortfalls for subsequent years were forecasted to be more significant without further intervention and support. A workshop was planned to focus on quality management of

prescribing. The recently launched NHS Prescribing Strategy was being promoted and actions progressed to implement the strategy locally.

The Clinical Director highlighted the improved financial position and also referred to the forthcoming workshop event. An update was provided in terms of serial prescribing and the Tayside Prescribing Strategy. Also highlighted was the considerable work undertaken in terms of mental health, social prescribing and the work of the Medicine Management Group. She advised that the role of Lead Pharmacist for Mental Health and Wellbeing in Arbroath had been well received.

The Chair commended the Report particularly highlighting the good progress made with regard to the Social Prescribing Service in Angus.

The Integration Joint Board agreed:

- (i) to note the content of the Report and the ongoing measures being taken to ensure efficient and effective prescribing within Angus;
- (ii) to request a further update to be provided to the Integration Joint Board in December 2021; and
- (iii) to note ongoing opportunities to progress the use of prescribing savings to support sustainable investment in evidence-based models of care.

10. ANNUAL PERFORMANCE REPORT

With reference to Article 13 of the minute of meeting of this Board of 24 June 2020, there was submitted Report No IJB 21/21 by the Interim Chief Officer providing an update on the progress made in delivering the strategic plan and the effect of activity on performance during 2020/21.

The Report builds on previous performance reports presented and demonstrated the impact of some of the improvements being made across the partnership and the progress made towards delivering the vision, strategic shifts and planned improved outcomes for the people of Angus.

The four priorities of the Angus HSCP Strategic Commissioning Plan aimed to deliver on the nine national Health and Wellbeing outcomes, as outlined in Section 2 of the Report. The aim of the AHSCP Strategic Commissioning Plan 2019-22 was to progress approaches that supported individuals to live longer and healthier lives.

The Annual Performance Dashboard and the associated improvement actions formed part of the workplan for the Hospital Admission and Discharge Management Group. A number of actions had been delayed as a result of the AHSCP's response to and recovery from the COVID-19 pandemic.

The Head of Community Health and Care Services – North advised that the full Performance Report would be presented to the next IJB meeting. She provided an overview of the Report and the associated 2020/21 Performance Dashboard. In highlighting the good progress made, she also referred to the marked impact on some of the performance indicators, as a result of the final year data not being available and the impact of the COVID-19 pandemic.

She also took the opportunity to commend the Principal Planning Officer and her team for their work in the preparation of the Report.

The Chair indicated that despite a challenging and difficult year, the AHSCP had continued to perform well and noted the indicators directly impacted as a result of COVID-19. She highlighted that NHS Tayside were currently reviewing their performance dashboard to include public health and mental health indicators and enquired whether this could be replicated in Angus. In response, the Head of Community Health and Care Services – North provided an update and agreed to take those indicators into consideration when progressing with the review of some of the local indicators.

Having heard from the Carer's Representative in terms of the respite and the Chief Social Work Officer's in relation to Telecare, the Principal Planning Officer provided a detailed update.

The Integration Joint Board agreed:-

- (i) to note the current performance within Angus HSCP for 2020/21;
- (ii) to request the Chief Officer to provide a performance dashboard to the IJB biannually; and
- (iii) to note the work to progress further improvement where the targets had not been achieved to capture this within the existing improvement/action plan.

11. CLINICAL CARE AND PROFESSIONAL GOVERNANCE ANNUAL ASSURANCE REPORT

With reference to Article 15 of the minute of meeting of this Board of 26 August 2020, there was submitted Report No IJB 22/21 by the Interim Chief Officer providing assurance to the Angus Integration Joint Board (IJB) and NHS Tayside Care Governance Committee on the work undertaken by the Angus Clinical Care and Professional Governance Group during 1 April 2020 to 31 March 2021.

The Report indicated that the meeting of the Adverse Event Management Group held in January 2021 agreed that the Angus Clinical Care and Professional Group would be split into two shorter meetings with the focus alternating between service quality assurance; strategic risk and adverse event management and meetings held monthly.

The Clinical Director, Angus Health and Social Care Partnership provided an overview of the Report.

The Integration Joint Board agreed to support the integrated approach, the frequency of meetings, the breadth of the business undertaken, and the range of attendees at meetings of the Angus Clinical Care and Professional Governance Group.

12. ANGUS INTERGRATION JOINT BOARD – ANNUAL WORKPLAN – APRIL 2021 TO MARCH 2022

There was submitted Report No IJB 23/21 by the Interim Chief Officer presenting the Annual Work Plan for the period April 2021 to March 2022.

Appendix to the Report outlined the proposed annual work plan for the IJB.

The Chief Finance Officer provided an overview of the Report.

The Chief Social Work Officer indicated that the report authors assigned to the Angus Community Justice Partnership Annual Outcome Activity Return and Angus Child Protection Committee Annual Report should be replaced with an Officer from the AHSCP management team.

The Integration Joint Board agreed:-

- (i) to note the Integration Joint Board Annual Work Plan as outlined in the Appendix to the Report; and
- (ii) to request an IJB Annual Work Plan be shared annually at the first meeting of each reporting year.

13. DATE OF NEXT MEETING

The Integration Joint Board noted that the next meeting would take place on Wednesday 25 August 2021 at 2.00pm.