

MINUTE of MEETING of the **ANGUS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD** held remotely on Wednesday 8 December 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
ANDREW JACK, Service User Representative
PETER McDONNELL, Depute CSWO (Proxy for KATHRYN LINDSAY, CSWO)
HAYLEY MEARNES, Third Sector Representative
SARAH DICKIE, Associate Nurse Director (from Item 6 onwards)
GAIL SMITH, Chief Officer
BARBARA TUCKER, Staff Representative, NHS Tayside

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.

Prior to the commencement of the meeting, the Chair, on behalf of the Board extended appreciation to all AHSCP staff and partners who continued to work through very challenging conditions due to the pandemic and recently through Storms Arwen and Barra, which as a result, had caused considerable disruption in Angus and increased demand on services.

At this stage in the meeting, the Chair advised that following receipt of legal advice related to Agenda Item 10, Report No IJB 73/21 Forensic Medical Services (Victims of Sexual Assault) (Scotland) Act 2021, the Report was now withdrawn.

1. APOLOGIES

Apologies for absence were intimated on behalf of Kathryn Lindsay, Chief Social Work Officer, Angus Council; also Dr Emma Fletcher, Director of Public Health and Dr Richard Humble, GP Representative, both 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.

3. MINUTES INCLUDING ACTION LOG

(a) PREVIOUS MEETING

The minute of meeting of the Angus Health and Social Care Integration Joint Board of 27 October 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 27 October 2021 was submitted and noted.

Councillor Bell, in reference to the Mental Health and Wellbeing Strategy, requested a progress update related to the financial framework, and in response, the Chief Finance Officer and Chief Officer provided an update. The Chief Finance Officer also intimated that there was a fuller update provided in Report IJB69/21 Angus Mental Health and Wellbeing Update Report to be considered later in the agenda.

(c) AUDIT COMMITTEE

The minute of meeting of the Angus Health and Social Care Integration Joint Board Audit Committee of 29 September 2021 was submitted and noted.

(d) SPECIAL MEETING

The minute of meeting of the Special Meeting of Angus Health and Social Care Integration Joint Board of 12 November 2021 was submitted and approved as a correct record.

4. FINANCE REPORT – 2021/22

With reference to Article 6 of the minute of meeting of this Board of 27 October 2021, there was submitted Report No IJB 67/21 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 2021/2022, the impact of COVID-19 on the IJB's financial position, an update on reserves, financial planning and financial risks.

Attached as Appendix 1 to the Report was the Integration Joint Board's detailed financial position for 2021/22. This showed that the overall projected financial position for Angus IJB for the year to March 2022 was an underspend of c£1.165m, after allowing the costs of COVID-19. Appendices 1, 2, 3 and 4 of the Report set out the financial monitoring report 2021/22; financial risk assessment 2021/22, the reserves position and financial governance.

The Chief Finance Officer highlighted the impact that COVID-19 had on progress against planned interventions and recurring saving initiatives timelines. A brief summary was also provided in terms of the Financial Planning update – Winter Planning, progress with the Strategic Financial Plan and highlighted that an interim financial plan would be brought forward to the IJB in February 2022, followed up with a final report to the IJB in April 2022; and the financial risks as detailed in Section 3.15 of the Report.

The Chief Finance Officer and the Head of Community Health and Care Services, South responded to questions from the Chair and Peter Drury, Non Executive Board Member in relation to the winter planning funding, particularly around the wellbeing monetary allocation and prolific growth in demographics.

The Integration Joint Board agreed: -

- (i) to note the overall projected financial position of Angus IJB for 2021/22;

- (ii) to note the risk documented in the Financial Risk Assessment as outlined in Appendix to the Report;
- (iii) to note the update regarding the Reserves position as outlined in Appendix 3 to the Report, including the need to develop plans to ensure reserves were mobilised effectively; and
- (iv) to note the issues documented in the Financial Governance as outlined in Appendix 4 to the Report.

5. STRATEGIC PLANNING PROGRESS UPDATE

With reference to Article 7 of the minute of meeting of this Board of 25 August 2021, there was submitted Report No IJB 68/21 by the Chief Officer providing an update Report on progress in a range of change programmes as part of the Angus Care Model.

The Report indicated that the progress update should be taken in context of the impact of the COVID-19 pandemic. Remobilisation and recovery were now well under way and efforts were focused firmly on resumption of normal business, while factoring in any longer-term changes prompted by the pandemic. There was still a degree of remaining COVID-19 related work, especially in care homes and care at home, and activity was still disrupted by COVID absences.

Section 3 of the Report detailed the progress update in terms of the reviews related to the Integration Scheme and Strategic Plan, prevention and early intervention, workforce planning, and the range of change programmes included in the Angus Care Model. A number of projects were running behind schedule or were at risk of not being delivered in accordance with the IJB's Strategic Financial Plan and placed an increased burden on the IJB as the IJB's Financial Plan had significant deficits inherent in it by 2023/24. The main risks to the successful completion of the change programme were detailed in Section 5 of the Report.

The Head of Community Health and Care Services, South highlighted that services were exceptionally busy, and with increased demand on highly fatigued workforce, there was a notable increase in staff absences. He provided an informative overview of the main key priority areas including the Strategic Plan review update; prevention and early intervention initiatives including the partnership work with Angus Council and ANGUSalive; care home review including proposals to bring forward a report to a Special IJB meeting in January 2022; and the Day Care Review.

Updates were also provided in terms of the risks related to corporate services and the lack of capacity to support the change programmes, in areas including procurement, finance and HR.

He also referred to the shortages in the availability of care at home, and the risk across a number of service areas at present, that staff shortages, caused as a result of recruitment and retention issues, had adversely affected service provision. Also responded to comments and questions from Councillor Bell and the Carer's Representative related to the support available to progress the strategic planning work including health needs assessment, and the process to stress test providers.

The Clinical Director, AHSCP intimated that discussions were in progress to strengthen relationships with the Partnership and the Director of Public Health and her team and to also explore opportunities to link into other partnership areas.

In reference to future reporting, the Chair highlighted that a Special IJB meeting would take place in January 2022. The Head of Community Health and Care Services also confirmed that a Report related to nursing provision within Care Homes would be brought forward to the IJB in due course.

The Integration Joint Board agreed to note the contents of the Report.

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

6. **ANGUS MENTAL HEALTH AND WELLBEING UPDATE**

With reference to Article 7 of the minute of meeting of this Board of 27 October 2021, there was submitted Report No IJB 69/21 by the Chief Officer providing an update in relation to Mental Health and Wellbeing provision in Angus.

The Report indicated that the draft improvement plan to deliver the Living Life Well Strategy in Angus had been developed and the key aims and priorities outlined in Section 3 of the Report. Appendix 2 to the Report detailed the actions that would be taken to progress communication and engagement activities.

The Listen Learn Change (LLC) Action Plan outlined that Angus had contributed, alongside Tayside colleagues, to progress the 49 recommendations with the Trust and Respect Report and as at 18 October 2021 it was reported that 36 were complete with sufficient evidence; 2 were complete with partial evidence; and 11 were work in progress, but that significant progress had been made.

The Head of Community Health and Care Services, North, highlighted that there had been significant movement and progress in developing relationships and connections in mental health and on a positive note, considered there was now a whole system response with services working together. Updates were thereafter provided in relation to Enhanced Community Support (ECS) Service including next steps and the Distress Brief Intervention (DBI) which was projected to be operational in early 2022. In terms of Tayside Mental Health and Wellbeing Strategy: Living Life Well, she acknowledged that whilst there was no financial framework in place, she emphasised there would be no delay in progress.

The Integration Improvement Manager, AHSCP provided an overview of the Communication and Engagement Plan and highlighted the importance of ensuring effective stakeholder mapping. The Partnership were also working closely with the Angus Mental Health and Wellbeing Network in the development of the plan. She emphasised there would be a rigorous communication and engagement process and envisaged that more actions would be incorporated into the plan, in future.

The Service Leader, Angus Mental Health Integration Services highlighted the significant progress made, both locally and across Tayside to improve the pathways for people with mental health needs in Angus and the continuing progress in the provision of the Enhanced Community Support (ECS) Service. The Chief Officer acknowledged the swift progress over the last few months but expressed disappointment of the low return rate in respect of the patient survey and intimated that discussions had taken place with VAA to facilitate their webpage to reach out to stakeholders, and in going forward, that the Communication and Engagement work would also continue to improve and strengthen stakeholder engagement.

Following discussion, the Chair, Councillors Bell and Speed and Peter Davidson, Non Executive Board Member raised questions and comments in relation to the Communication and Engagement Plan, 7 day service evaluation, Seaton Grove; and Learning Disabilities and Mental Health Project and peer support, and in response, both Heads of Community Health and Care Services and the Service Leader, Angus Integrated Mental Health Services provided detailed updates.

In terms of the update regarding the vacated space, previously the Mulberry Unit in the Susan Carnegie Centre, having heard from the Head of Community Health and Social Care, North, and also from the Chief Officer who reiterated the position and advised that discussions were ongoing and that no decision had yet been made.

The Registered Medical Practitioner confirmed there had been significant uptake in funding for the Children and Adolescent Mental Health Services (CAHMS), and that an extensive recruitment programme, was continuing. She highlighted that the waiting times for mental health services within this service had improved recently and a neurodevelopment review to redesign pathways to be more efficient and effective was planned. Updates were provided in

relation to the proposals for Tayside to host an Inpatient Intensive Psychiatric Care Unit for Young People and Rossie, Montrose.

On reflecting the good progress made over the last year, she also stressed the difficulties around the recruitment issues, thereafter she commended all those involved for their hard work and also for the comprehensive update report.

The Third Sector Representative provided an update in terms of the Community Mental Health and Wellbeing Fund and the Community Research projects.

The Chief Officer also took the opportunity to request IJB members to encourage people to come forward and share their individual life stories and confirmed that the Chair of Angus Voices also welcomed this approach.

The Chair thanked members and officers for their valuable contributions and assurances following which the Integration Joint Board agreed:-

- (i) to support and approve the direction of travel for the Living Life Well (LLW) in the Angus Implementation Plan;
- (ii) to note the requirements under Section 36 of the Public Bodies (Joint Working) (Scotland) Act 2014 relating to engagement; noting an extended period of planning for engagement had been required and engagement would continue until April 2022;
- (iii) to note the Communications and Engagement Plan as outlined in Appendix 2 to the Report, for the Living Life Well in the Angus Implementation Plan;
- (iv) to note the risks detailed in the Report;
- (v) to note the financial framework to support the Living Life Well Strategy remained outstanding;
- (vi) to note progress to date in relation to the delivery of Mental Health and Wellbeing Services in Angus;
- (vii) to note progress with the Listen Learn Change Recommendations; and
- (viii) to request an update report be brought back to the April 2022 IJB meeting.

At this stage in the meeting, the meeting was adjourned for a 10 minute comfort break.

The meeting resumed at 15.35pm.

7. PRIMARY CARE IMPROVEMENT PLAN UPDATE

With reference to Article 8 of the minute of meeting of this Board of 23 June 2021, there was submitted Report No IJB 70/21 by the Chief Officer providing an update on the delivery of the 2020/21 Primary Care Improvement Plan and the overall indicative Angus Primary Care Improvement Fund financial commitments for 2021/22.

The Report indicated that the period of implementation of the GMS 2018 contract was originally set to be completed by March 2021, however in light of COVID-19, an extension to the implementation period had been granted with a new delivery target for the end of the year for some priority areas of the contract and the end of 2022/23 for other areas. The focus for 2021/22 was to reprioritise three service areas including:- Vaccination Transformation Programme (VTP); Pharmacotherapy; and Community Treatment and Care Services (CTAC).

A summary comparison of the approved programme allocation and actual programme spend to October 2021, and the forecast spend for 21/22 were outlined in Section 5 of the Report and the key risks associated with the programme detailed in Section 6 of the Report.

The Service Manager, Primary Care, AHSCP provided a summarised overview of the key areas of the Report.

Having heard from the Carer's Representative who raised concerns in terms of the vaccination transformation programme, particularly related to the lack of information, the logistical constraints and the health inequalities aspect, the Clinical Director, AHSCP provided an informative update. She highlighted that Public Health colleagues were progressing work around health inequalities, and from a partnership and primary care perspective, advised that those concerns were also being taken forward.

The Clinical Director, AHSCP, the Head of Community Health and Care Services, North, and the Service Manager responded to members questions related to the Community Link workers/Social prescribers; Community Treatment and Care Services (CTCS) Hub/Practices; and Additional Services – Mental Health.

Thereafter the Integration Joint Board agreed:-

- (i) to note the progress made in the delivery of the 2020/21 Primary Care Improvement Plan (PCIP);
- (ii) to note the overall indicative Angus Primary Care Improvement Fund financial commitments for 2021/22 included, as per previous years, to delegate devolved authority to the Chief Officer to approve updated versions of the financial plans as required, noting that Local Medical Committee agreement would also be sought to subsequent changes;
- (iii) that due to the imperative associated with deploying resources it was recommended that, with engagement with local GP Sub representatives, an update regarding the reserves and the formulation of a spend plan be presented to the next meeting of the Integration Joint Board; and
- (iv) to request a wider Primary Care update paper to be brought forward to the April 2022 Integration Joint Board meeting.

8. PRESCRIBING MANAGEMENT

With reference to Article 9 of the minute of meeting of this Board of 23 June 2021, there was submitted Report No IJB 71/21 by the Chief Officer providing an update to members on prescribing management in Angus.

The Report indicated that the annual work plan was tracked and reported at each Angus Prescribing Management Group (PMG) and indicated that the forward motion of the Group had been difficult through the last eighteen months. There was now increased focus on remobilisation that afforded new opportunities to tackle ill health and alternatives to prescribing.

Appendix 1 to the Report detailed the Annual Prescribing Work Plan. Section 3 of the Report provided updates in relation to the Angus (PMG) and Work Plan, the Quality Management Systems for Prescribing and the Pharmacotherapy Service.

The Angus (PMG) as part of the Angus Health and Social Care Partnership continued to work in partnership with clinical leaders to deliver the vision for quality prescribing, as set out in the Tayside Prescribing Strategy.

The overall Family Health Service (FHS) prescribing forecast for 2021/22 was an overspend of c£19,000. A 3-year financial framework had previously been agreed for Angus prescribing resources with shortfalls for future years forecast to be more significant without further intervention and support.

The Pharmacy Lead provided a progress update in relation to the Angus (PMG); Quality Management Systems for Prescribing; the recruitment and resource issues and the impact that staffing issues had on the work to identify further costs savings and efficiency in the Pharmacotherapy service, remobilisation plans; alternatives to prescribing and social prescribers.

She also highlighted that NHS Tayside were working alongside Scottish Government Effective Prescribing and Therapeutics Division to support a pilot of the Scottish Polypharmacy Decision Support toolkit and that four GP practices in Angus had been accepted onto the pilot. More recently, many practices had also been accepted on a Health Improvement Scotland pilot to consider acute prescribing.

In referring to the connection with prescribing and the development of early intervention and prevention work, the Clinical Director, AHSCP, provided an update and also referred to increased expenditure related to chronic pain and mental health drugs. In going forward, she highlighted the partnership working with ANGUSalive and the benefits that the new development would bring to the Angus population to support health and wellbeing.

The Clinical Director, AHSCP also responded to questions related to risk from Peter Drury, Non Executive Board Member and the Service User Representative.

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; and
- (ii) to request a further update to be provided to the Integration Joint Board in June 2022.

9. WINTER, INFLUENZA PLANNING AND COVID-19 UPDATE

With reference to Articles 8 and 6 of the minutes of meetings of this Board of 28 October 2020 and 26 August 2021 respectively, there was submitted Report No IJB 72/21 by the Chief Officer presenting the Winter Planning arrangements for NHS Tayside and Health and Social Care Partnerships for 2021/22.

The Report indicated that the integrated plan and work had been ongoing to ensure the Health and Social Care Partnerships and Acute Services had developed cohesive plans for winter, supported by the Remobilisation Plans and Influenza (Flu) Planning.

As at 23 November 2021, Angus was the second highest mainland local authority area for COVID-19 booster update in the over 50's with 37,461 vaccinations administered, which equated to 69.5% of the population.

Section 6.1 of the Winter plan detailed the specific actions for Angus HSCP with Section 4 of the Report detailing the main key actions agreed by the Tayside HSCPs.

The Scottish Government had announced £300m of additional funding to provide longer term improvement in service capacity across health and social care systems and whilst details continued to emerge, funding was intended to help address issues that may surface during COVID-19 responses and that had a recurring impact. Section 5 of the Report detailed the five main funding areas.

The Head of Community Health and Care Services, North provided a summary of the Report highlighting the main keys actions areas of the system wide planning in Angus; Primary Care; and Out of Hours (OOH) Preparedness. In terms of the flu vaccination programme including COVID-19 booster and third dose vaccinations, she advised that NHS Tayside were continuing to perform well in comparison to other Board areas within Scotland.

The Winter Planning funding for 2021/22, confirmed total was now £1.5m, and was managed through the Tayside Unscheduled Care Board and had provided assistance to a number of services to support winter planning.

Highlighting the significant increases in positive cases of the new COVID-19 variant, the Angus figures reported were 200,000 positive cases and 20 inpatients within NHS Tayside. On a positive note, she confirmed that there had been a significant reduction of patients within HDU and ICU.

In response to the Chair's comment, the Chief Officer agreed to provide a COVID update to members during the period December and to February 2022.

Councillor Bell requested further information regarding the uptake in vaccinations by pregnant women and an update in terms of paediatric prevalence in COVID, in response, updates were provided from the Head of Community Health and Care Services, North and the Registered Medical Practitioner.

The Head of Community Health and Care Services, South raised that there had been issues with the younger women groups' uptake of the COVID booster vaccination, particularly within the Care at Home and Care Home settings. In response, the Registered Medical Practitioner indicated that there may be an opportunity for some Community Midwives to provide a remote information session to address the issues raised. The Head of Community Health and Social Care, South advised that there were approximately 40 provider organisations and that he would further discuss the offer intimated, with the Independent Sector Representative and the Care at Home groups.

Thereafter Councillor Bell enquired whether the communication and engagement team could provide additional supporting material to encourage the uptake of the COVID booster, and in response, the Integration Improvement Manager confirmed she would progress the request.

The Integration Joint Board agreed:-

- (i) to approve and endorse the Winter Plan (NHS Tayside and Partner Organisations 2021/2022) for submission to the Scottish Government;
- (ii) to note the cost pressures to deliver the services required to meet winter, flu and COVID-19 demand on the background of ongoing flow challenges;
- (iii) to note whole system working in preparation for anticipated winter challenges;
- (iv) to note the approach taken within Angus to support flu vaccination; and
- (v) to note the COVID-19 update.

10. FORENSIC MEDICAL SERVICES (VICTIMS OF SEXUAL ASSAULT) (SCOTLAND) ACT 2021

The Integration Joint Board noted that Report No IJB 73/21 had been withdrawn.

11. DATE OF NEXT MEETING

The Integration Joint Board noted that the next meeting would be held on Wednesday 23 February 2021 at 2pm.