



<b>MEETING:</b>	<b>IJB</b>
<b>DATE:</b>	<b>WEDNESDAY 9<sup>TH</sup> DECEMBER 2020</b>
<b>TIME:</b>	<b>1.00PM</b>
<b>VENUE:</b>	<b>MS TEAMS</b>

<b>PRESENT :</b>	<p><b>NHS Lanarkshire:</b> Dr A. Osborne (Chair), Mr B Moore, Mrs M. Morris</p> <p><b>North Lanarkshire Council:</b> Councillors P Kelly (Vice Chair), Cllr J Linden</p> <p><b>Stakeholder Representatives:</b> Mr H Robertson, North Lanarkshire Carers Together, Mrs L Seaton, Partnership for Change (service user representative); Dr T Smyth, GP representative; Ms M Halliday, Chief Executive, VANL; Mr J Watson, Trade Union representative, Unison NLC, Mrs C McGinty, Staff Side representative NHSL,</p> <p><b>Board Members:</b> Mr R McGuffie, Chief Officer; Miss M Moy, Finance Officer (S95); Mrs Alison Gordon, CSWO; Dr Lucy Munro, Medical Director, Mrs T Marshall, Nurse Director</p> <p><b>IN ATTENDANCE</b>          Mrs M Dendy, Head of Performance, Planning and Quality Assurance; Ms L Duthie, Senior Auditor, Audit Scotland; Dr L Munro, Medical Director; Mrs C Jack, IJB Board Secretary; Mrs J Arthur, IJB Admin Support (minutes); Mr T Moan, Partnership for Change Development Worker; Mrs H Knox, Chief Executive NHS Lanarkshire; Mrs S Simpson,</p>
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	OD Lead; Mr M Dell, Communications Manager; Mrs M Anderson, Associate Nurse Director;
<b>Apologies:</b>	Mr P Campbell, Non Exec Director, NHSL Mr D Murray, NLC Chief Executive Dr R McKenzie, IJB Board Member Cllr J Logue, IJB Board Member Cllr M Gallacher, IJB Board Member

#### **1. Welcome and Apologies**

Dr A Osborne welcomed everyone to today's meeting.

#### **2. Declarations of Interest**

No declarations of interest were noted.

#### **3. Minutes of IJB : 22.09.20**

Minutes agreed and approved. Two amendments to be made to the minutes –

- Ms Iqbal's title
- Ms Halliday's apologies to be noted

#### **4. Matters Arising - Action Log**

Mrs C Jack updated that all items in the action log had been marked as complete or included in the agenda for today's meeting or scheduled for future meetings.

Item 8 – Staff Health & Wellbeing. Ms Jack noted that this item had been covered in detail at the last PF&A meeting in November 2021 and it was agreed that this could now be closed off from the action log.

Item 9 - Records Management Plan. Dr Osborne noted that this item was still marked as open and Ms Jack explained that the draft Records Management Plan had been submitted to the Keeper of Records and was awaiting formal approval from the Keeper. There has been ongoing correspondence with the partnership with a number of queries and requests for further evidence and the Record Plan would only be approved once these issues had been addressed. In the meantime, the item would remain on the action log until formal approval had been received and the final version of the plan formally noted at IJB.

##### **Covid Update**

Mr R McGuffie shared slides relating to Covid -19 Vaccine programme which commences this month, explaining how the programme would be rolled out, in 3 waves. This is on a huge scale with a significant amount of planning ongoing. He reminded members of the importance of continuing to adhere to FACTS even though the vaccination programme would be starting.

Mr McGuffie went on to explain the Redesign of Urgent Care which is to reduce the numbers of patients who present to A&E and direct them to other more appropriate services and explained how patients would be redirected. He referred to the Acute Respiratory Illness Centre (ARIC) and Mental Health Hub in place to support alternative patient flows. The ARIC is situated within Douglas St, Hamilton with the Wester Moffat site on standby to be set up as an additional centre based on demand. Localities have been asked to monitor the impact of the changes.

Ms L Seaton asked to see some guarantees that the outcomes and evaluation would be used to ensure the best service for patients. This was also part of the national aims and learning. Dr L Munro explained that there is a suite of indicators that would measure this but advised that a

group is specifically looking at evaluation and feedback. Dr Smyth raised concerns about ensuring that the right messages were being given to the public in terms of appropriate access to GP services. Mr McGuffie confirmed that both a national and local communications plan were being developed.

Ms Halliday asked for further detail on timelines for waves 2 and 3 of the vaccination plan, acknowledging this was dependent on vaccine availability. She also asked when patients with specific underlying conditions or terminal illness/palliative care were likely to be vaccinated. Lucy advised that the detail of this has not yet been fully defined.

Ms McGinty noted that staff and patient communication would be critical to ensure full awareness of the process.

Dr Osborne advised that updates would continue to be provided to members.

### **5. Whole system approach to maintaining a positive balance of care**

The Health and Social Care Partnership is fully committed to ensuring that people are supported to live full and active lives in their own homes and localities, minimising the use of hospital settings. Mr McGuffie shared this report to update the IJB of the wide range of developments currently underway and progress towards full implementation.

During the public consultation exercise on the Strategic Commissioning Plan, the top three priorities identified were:

- People should be in control of the care they receive and it should meet their needs
- People are supported to maintain independence and manage their care needs
- People are supported and helped to avoid preventable conditions

Our services and supports were developed in line with these, to enable people to live as long as possible, not just within the community but connected to the community.

The report contained the latest benchmarking data which highlighted that our Care Home usage was well below the Scottish average and that the percentage of adults with long term needs receive personal care at home.

Mr Moore welcomed this very positive report which gave strong evidence of integrated working. He asked what plans were in place to further extend the Planned Date of Discharge work which was seeing excellent benefits. Mr McGuffie confirmed that roll out priority was being given to areas with high discharge volumes. Rollout would take place at Udston Hospital on 14<sup>th</sup> December with other areas later in December into January and February with Mental Health looking at a similar timescale.

Mr Moore asked if dynamic scheduling was in place yet. Mr McGuffie confirmed this had not yet been rolled out but initial meetings had taken place and trials were due to commence imminently. This was being taken through the NLC Digital team.

Cllr Linden agreed this was a very positive report and was pleased to see Community Solutions acknowledged within.

Ms Halliday welcomed the report, noting she had met with Ms Dendy and other colleagues to discuss the foundational aspect of community solutions.

### **Decided - the IJB agreed the following recommendations -**

- To note the progress made in maintaining and further developing the positive balance of care in North Lanarkshire, in line with the Strategic Commissioning Plan, 2020-23.

### **6. Strategic Commissioning Plan 2020/2023 & Programme of Work**

Ms Dendy shared a report which provided an update on the review of Health and Social Care North Lanarkshire's Programme of Work (PoW) which is being undertaken in the wake of the COVID-19 pandemic to ensure that it builds on the recovery plans and focuses recovery efforts on

the ambitions set out in the Strategic Commissioning Plan (SCP). Ms Dendy explained that the remobilisation work had now been integrated with the SCP ambitions. In terms of the impact of Covid, many aspects of the Programme of Work had moved forward more quickly. Engagement continued with stakeholders to evolve the detail of the plan. The performance framework that supports the work is also being reviewed and refreshed to ensure it effectively supports the SCP and PoW. Ms Dendy highlighted that an ambitious programme over the next 2 years has been put in place with a schedule of Committee updates to be created for each thematic area, covering the Integration Joint Board; IJB Performance, Finance and Audit Committee; Adult Health and Social Care Committee; and the Population Health and Community Care Committee to give all Board members assurance around progress and impact upon delivery.

Ms Halliday commented on the Mental Health & Wellbeing Strategy implementation being paused due to Covid though there had been a welcomed stakeholder event on 23rd October. Whilst she acknowledged the reasons for this pause in work, she asked if the strategy board would be progressing in view of the negative impact Covid was having on mental health. Mr McGuffie confirmed work was ongoing and that Ms M Thomson was in the process of setting up a new series Strategy Board dates to progress the work, making links with work that Dr Alastair Cook has been leading on nationally pulling together various strands. Ms Halliday advised that additional SG funding was expected, some of which would be allocated to Community Solutions to support local work. Links were also being made with Health Improvement colleagues on Social Prescribing. Ms Halliday suggested it would be helpful to see plans for the next stages at a future IJB and this was agreed.

In relation to the Addictions item 5.3.4 in the paper, Ms McGinty highlighted the accommodation issues in Wishaw locality. Ms Dendy acknowledged the operational pressures and assured Ms McGinty that we were supportive of reaching a consistent approach across all localities to have suitable space and an update on Addiction service would be provided to the PF&A meeting in February 2021.

**Decided: The IJB agreed the following recommendations -**

- Noted the progress made to date in developing a Programme of Work which renews focus on the ambitions set out in the Strategic Commissioning Plan, 2020-23 as we remobilise services and takes advantage of the opportunities and experience of working in different ways during the course of the pandemic.
- Noted the key themes that have been identified as areas to progress in 2020/21.
- Noted continued review of Partnership performance management processes to ensure that they consider the performance of services in light of recovery and redesign efforts and that there is a co-ordination of performance management activities to reflect emerging management structures across HSCNL.
- Agreed that an update on progress with refreshed MH Strategy Board be provided at a future meeting.
- Agreed that an update on Addictions services should be provided to next meeting of the PF&A and should include issues around accommodation.

**7. IJB Category 1 Responders**

Following a Scottish Government consultation on the proposal to expand the number of Category 1 responders to include IJBs, the IJB submitted a response welcoming this proposed change. The response noted the positive local arrangements that have seen the IJB exercising agile governance principles and the Chief Officer participating as a full and active member of North Lanarkshire Council and NHS Lanarkshire's Gold Command structures and the Lanarkshire Resilience Partnership.

Ms H Knox advised that NHSL position had been that they did not feel legislation was necessary as Lanarkshire had a very effective whole system approach in place with partnership involvement

and contribution. Dr Osborne acknowledged this to be the case and that the Chief Officer was an integral part of the whole system approach and command structure.

**Decided: The IJB agreed the following recommendations -**

1. Noted the submission on the consultation made by the North Lanarkshire Integration Joint Board.
2. Agreed that an update should be presented to the IJB at its next meeting.

**8. Participation & Engagement**

Ms Dendy shared a progress report for members on the Participation & Engagement Strategy including the Engagement and Participation Strategy, Framework and Principles, the Engagement & Participation Programme of Work template and the Care Opinion Programme of Work. This work displayed a firm commitment to wider engagement following a culmination of months of work reflecting on what was important and the direction of travel. Progress on wider engagement would come to future meetings.

Cllr Linden noted he and other SNP colleagues were pleased to see that this would be embedded in structures.

Ms Halliday welcomed stronger links with communities and emphasised the importance of this. She advised she had been involved in the process of updating SG guidance on H&SC community engagement.

Mr Moore noted the reference to Partnership Boards and suggested it would be useful at a future meeting to see further detail on the remit and role of these Boards. Ms Dendy agreed and Dr Osborne suggested this be included within the PFA agenda.

**Decided: The IJB agreed the following recommendations -**

- Noted the progress made by the Stakeholder Engagement and Participation Working Group following its reinstatement approved by the Integrated Joint Board (IJB) at their meeting on 8 September 2018.
- Noted the revision of the IJB Engagement and Participation Strategy 2021 to 2024 and approved the associated Framework (Appendix 1).
- To review the resources to strengthen engagement and participation.
- Noted the work being carried out to review the remit and terms of reference of the Partnership Boards for Frailty and Long Term Conditions and Addictions, Learning Disability, Mental Health and Justice Services and the Locality Planning Groups which support them.
- Noted the Engagement and Participation Programme of Work (Appendix 2)
- Endorsed the structural changes to embed engagement and participation in operational practice, including a section in the IJB report template.
- Approval to extend the Care Opinion Subscription in September 2020 with the subsequent communication and implementation plan being developed (Appendix 3)
- Approval for the continuation of the HSCNL Head of Planning, Performance and Quality Assurance and Organisational Development Lead to meet three times a year with service user, carer, community and voluntary sector representatives with open discussion around participation and engagement in the governance structures. Noted further discussion to take place on how we link with Community Boards.
- Agreed that an update on remit and role of the Partnerships Boards be provided to the next meeting of the PF&A.

**9. Risk Register**

Ms Jack provided members with a summary on risk management activity and IJB risk register, noting any amendments or additions to the current risk register. At the last meeting it was agreed

to close a number of older risks and add new risks. All finance risks had now been reviewed and updated.

Ms Jack made particular reference to item 5.8 in the paper where a number of operational risks identified by NHS Lanarkshire had been highlighted as having an impact on IJB objectives.

Cllr Linden welcomed seeing this revised version. He asked what mitigating actions were being taken to reduce the risks relating to the withdrawal from the European Union now that a No Deal position was looking more likely. Ms Jack advised it was a very fluid situation with sharper focus from both NHSL and NLC in refocussing resilience efforts around Brexit. A number of national seminars and briefings were taking place as well as sessions with national teams supporting local partnerships around actions that need to be put in place.

Mr Moore also welcomed the further developments which had led to a solid register being in place.

**Decided: The IJB agreed the following recommendations -**

- The IJB noted the contents of the report which included; the latest version of the IJB risk register, the list of Covid related risks and a note of risks from partner agencies that impact upon delivery of IJB business.
- The IJB approved the addition of the revised financial risks for the IJB which had previously been presented to the P, F&A Committee in November 2020.

**10. Terms of Reference & Schedule of Dates**

Ms Jack explained that we are duty bound to review the Terms of Reference for the IJB and PF&A and shared a report to that effect, requesting approval of any proposed amendments as well as noting the schedule of dates for both committees during 2021 and approving revisions to the standard reporting template. Ms Jack highlighted the main amendments as below –

1. Revised membership of the PF&A proposing an increase in stakeholders from 3 to 5.
2. Reinforcing the wording that PF&A is not a decision making body.
3. Recommendation that the IJB reporting templates now include, as standard, reference to Stakeholder Engagement.
4. Attached schedule of dates for 2021.

Ms McGinty referenced a recent report tabled at the NLC Policy & Strategy Committee referencing structure changes within NLC and a proposed review of the IJB. Ms McGinty requested further information and noted the expectation that staff side representatives be fully involved with this review. Mr McGuffie confirmed that a paper had been approved at NLC to around a senior restructure and that he would share this for information. He further advised that there would be an engagement process with the IJB and NHSL which was welcomed by Ms McGinty as it would give an understanding on any possible impact on health staff.

Cllr Linden noted that these changes were not immediate and there were a number of processes within the Council that the changes would need to go through. He suggested that a discussion with the NLC Chief Executive would be helpful to understand the changes.

Cllr Linden referred to the terms of reference for the PF&A and asked if the trade unions were fully and actively involved. Ms Jack confirmed this be the case and the changes would allow all 5 stakeholders, which included the trade unions, to attend both the IJB and PFA. This was welcomed by Cllr Linden.

**Decided: The IJB agreed the following recommendations -**

- The IJB approved the revised Terms of Reference for the IJB and P, F & A noting the changes outlined in section 5.3, 5.4 & 5.5.

- The IJB noted the schedule of dates proposed for the IJB and P, F&A meetings for 2021.
- The IJB approved the revision to the IJB standard reporting template noting the addition of Item 7.7 Stakeholder Engagement
- The NLC paper referenced was to be shared with the IJB and Mr McGuffie would provide further details of the scope of the review of the IJB and implications for the IJB and NHS colleagues. A full engagement process would take place.

### **11. Finance Monitoring Report**

Ms Moy shared this report which provided a summary of the financial position of the North Lanarkshire Health and Social Care Partnership (HSCP) for the period from 1 April 2020 to 31 October 2020 (Health Care Services) and 16 October 2020 (Social Work and Housing Services).

Ms Moy highlighted the following:

- The financial position as at October 2020 is a net overspend of £1.087m and is summarised as follows: an underspend of £2.027m on health care services, and an overspend of £3.114m on social care and housing services
- The net overspend to date reflects different financial planning assumptions by each partner. In respect of the additional costs as a result of the Covid-19 pandemic, NHS assumed the additional costs to date as at 31 October 2020 will be funded. The NLC period 7 financial monitoring report reflects the year to date position as at 16 October 2020. At this stage therefore, additional funding to address the year-to-date costs of £3.996m as a result of the pandemic is not yet included for social care and housing services.
- Excluding the Covid-19 costs, the financial position is a net underspend of £2.909m as follows: an underspend of £2.027m on health care services, an underspend of £0.882m on social care and housing services
- Work is ongoing with finance colleagues around availability of Covid funding and how that is directed to actual Covid costs. A further update is expected in January 2021 which should provide clarity.
- Prescribing currently showing a breakeven position but this could be impacted by the European withdrawal.
- Following the review of the Integration Scheme, the discretionary functions delegated to the IJB by NLC in respect of the Children, Families and Justice Services were transferred to Education and Families Service in NLC effective from 1 April 2019. In recognition of the complexity of the disaggregation exercise and to complement the structural and operational service changes which were being implemented, it was agreed that the budgets would be transferred in phases. The plan to transfer the budget to NLC was implemented over an 18 month period from 1 April 2019 to 30 September 2020. In line with the requirements of the Public Bodies (Joint Working)(Scotland) Act 2014, in order to reflect the budget disaggregation exercise in line with the revised Integration Scheme which has now been completed, the IJB is asked to approve the revised direction to NLC which is attached at appendix 7.

Discussion followed around the Covid funding expected from Scottish Government. Ms Moy advised that in terms of the money already allocated, it was likely this would meet all costs to date. In January it was anticipated that clarification would be given from Scottish Government on what the totality of the funding would be. Scottish Government recognise that some costs are likely to be ongoing into the next financial year.

Mr Moore asked for an update on the ADP financial position at the next meeting. This will be included in the agenda for the next IJB meeting.

Mr Moore also referenced the significant number of vacancies in the system and the underspend attached to this. Ms Moy acknowledged this and the need to fill vacancies being critical.

Ms Moy acknowledged the continued great partnership working with finance colleagues in NHSL and NLC.

**Decided: The IJB agreed the following recommendations:**

- Noted the financial position to date summarised at sections 6 and 7;
- Noted that, in order to address the additional health and social care costs as a result of the Covid-19 pandemic, additional Scottish Government funding was announced on 29 September 2020, the distribution of which was being agreed with North Lanarkshire Council Head of Solutions and the NHS Lanarkshire Director of Finance;
- Noted that, due to the uncertainty, the Scottish Government funding confirmed to date did not yet fully address the projected costs to 31 March 2021 as a result of the Covid-19 pandemic;
- Noted that it was expected that additional funding would be announced in November 2020 for Social Care Services and a further funding announcement was planned by the Scottish Government in January 2021;
- Noted the management actions that continue to be taken to mitigate the financial impact of the Covid-19 pandemic where possible;
- Approved the revised direction to North Lanarkshire Council to reflect the conclusion of the budget disaggregation exercise in line with the revised Integration Scheme as highlighted at section 7.2;
- Noted that the review of the IJB Financial Plan 2020/2021 continued to progress in consultation with both partners.
- Agreed that an update on ADP Finances be provided at a future meeting.

**12. Quarter 1 – Performance Report**

Ms Dendy shared the report which provided an update to the Board on the areas for improvement which have been identified as part of the Quarterly Performance Review for the period 1 April 2020 to 30 June 2020 (Quarter 1). The report also provided additional information in relation to the impact of the wider COVID19 response on our key areas of performance and the next steps for recovery, reinforcing there was no shift to commitment but the redeployment of staff in response to the pandemic had impacted certain areas.

Ms Dendy specifically highlighted the CAMHS and Psychological Therapies areas of high risk, noting some of the actions being taken towards improving the position. Scottish Government had offered to provide support, although acknowledged a recovery process was in place and the position was improving. Mr McGuffie advised that half of the Boards in Scotland had been offered this supported, which included 2 cohorts, North partnership being part of the 2<sup>nd</sup> cohort which of the bigger boards.

Ms Morris referred to the mention of referring patients back to GPs who have declined the offer of a remote consultation. Mr McGuffie clarified that these were patients who would not be deemed through clinical prioritisation as it being necessary to receive a face to face consultation.

**Decided: The IJB agreed the following recommendations**

- Noted the contents of the report and its appendix.

**13. Primary Care Implementation Plan**

Mr McGuffie shared the most recent iteration of the plan and accompanying appendices which:



- Detailed the impact of the Covid Pandemic and response on the Primary Care Improvement Plan (PCIP)
- Detailed the recovery of the PCIP
- Presented the PCIP3 return for Scottish Government for approval

The papers highlighted the additional challenges and opportunities since the start of the pandemic.

Dr Munro added that Scottish Government and the BMA had last week issued a joint statement which gave an indication of the direction of travel post 2021. Further updates would be provided to the IJB.

Dr Osborne reminded members that GP Primary Care Services was a hosted service, led by South H&SCP. She welcomed Dr Munro's offer of future updates to ensure IJB members were kept apprised of progress.

**Decided - The IJB agreed the following recommendations**

1. Noted the ongoing work.
2. Noted that the impact of the pandemic will delay final delivery of the PCIP.
3. Approved the PCIP3, subject to any minor changes following GP Sub review, for submission to Scottish Government.

**14. Risk**

Mr McGuffie gave reassurance that what was included in the current risk register on Brexit was sufficient.

On behalf of the IJB members, Dr Osborne thanked all colleagues for continuing to maintain the governance of the IJB through these past few difficult months. She further thanked the Leadership team and their teams for their continued hard work and wished all staff a safe and peaceful festive season.

**7. FUTURE MEETINGS DATES**

Integration Joint Board	Tuesday	23.03.21	1400-1630
Integration Joint Board	Tuesday	22.06.21	1400-1630
Integration Joint Board	Tuesday	21.09.21	1400-1630
Integration Joint Board	Wednesday	08.12.21	1400-1630