

**Minute of Meeting of the
East Renfrewshire
Integration Joint Board
held at 10.00 am on 30 January 2019 in
the Eastwood Health and Care Centre, Drumby Crescent,
Clarkston**

PRESENT

Morag Brown	NHS Greater Glasgow and Clyde Board (Chair)
Lesley Bairden	Head of Finance and Resources (Chief Financial Officer)
Councillor Caroline Bamforth	East Renfrewshire Council (Vice-Chair)
Susan Brimelow	NHS Greater Glasgow and Clyde Board
Anne Marie Kennedy	Third Sector representative
Dr Craig Masson	Clinical Director
John Matthews	NHS Greater Glasgow and Clyde Board
Dr Deirdre McCormick	Chief Nurse
Andrew McCready	Staff Side representative (NHS)
Geoff Mohamed	Carers' representative
Anne-Marie Monaghan	NHS Greater Glasgow and Clyde Board
Julie Murray	Chief Officer – HSCP
Councillor Paul O'Kane	East Renfrewshire Council
Kate Rocks	Head of Public Protection and Children's Services (Chief Social Work Officer)
Councillor Jim Swift	East Renfrewshire Council

IN ATTENDANCE

Eamonn Daly	Democratic Services Manager, East Renfrewshire Council
Candy Millard	Head of Health and Social Care Localities

APOLOGIES FOR ABSENCE

Councillor Tony Buchanan	East Renfrewshire Council
Dr Angela Campbell	Clinical Director for Medicine for the Elderly
Ian Smith	Staff Side Representative (East Renfrewshire Council)

ANNE MARIE KENNEDY OBE

Prior to the start of the meeting, on behalf of the Board, Ms Brown offered congratulations to Mrs Kennedy on her award of an OBE for services to the community in East Renfrewshire in the recent New Year Honours list.

DECLARATIONS OF INTEREST

1. There were no declarations of interest intimated.

MINUTE OF PREVIOUS MEETING

2. The Board considered and approved the Minute of the meeting held on 28 November 2018 subject to an amendment to record apologies for absence having been intimated by John Matthews.

MATTERS ARISING

3. The Board considered a report by the Chief Officer providing an update on matters arising from discussions that had taken place at the previous meeting.

The Chief Financial Officer provided an update on the discussions in relation to hosted services that took place at the meeting of the Chief Financial Officers' Group in the course of which she explained that any changes to hosted service arrangements would need to be reflected in changes to IJBs' Integration Schemes. The review of schemes would be taking place in the medium-term.

Referring to unscheduled care discussions at the previous meeting (Minutes Item 6 refers), the Chief Officer explained that sessional funding had been made available to 2 local practice managers to enable them to work with the Primary Care Development Manager to review current processes and to investigate possible opportunities to improve access to primary care practitioners locally. Whether this had any impact on the number of patients attending A&E services would be monitored.

In response to Mrs Brimelow who sought an update on progress on work in advance of the closure of Mearns Kirk Hospital, the Chief Officer explained that whilst some beds had been reopened over the winter, arrangements to move patients out of the hospital were ongoing and further details in relation to actual numbers would be circulated to members of the Board for information.

The Board noted the report.

ROLLING ACTION LOG

4. The Board considered a report by the Chief Officer providing details of all open actions, and those which had been completed since the last meeting.

Having heard the Chief Officer in relation to a number of actions that had now been closed off, the Board noted the report.

MINUTES OF MEETINGS OF COMMITTEES

5. The Board considered the undernoted Minute of meetings:-
 - (i) Clinical and Care Governance Committee – 31 October 2018; and
 - (ii) Performance and Audit Committee - 28 November 2018.

Mr Mohamed having referred to the discussions at the meeting of the Performance and Audit Committee in respect of CAMHS waiting times (Minutes Item 10 refers), the Chief Officer was heard in further explanation of the pressures facing the service, with the Chief Social Work Officer also explaining that recent statistical information showed that the target time from referral to choice appointment was improving.

Mr Mohamed expressed concern at the implications for young children which serious mental health problems having to wait for appointments and queried whether a triage system could be introduced. In reply the Chief Social Work Officer explained that very few children presented with acute psychoses and that the challenge, which was being addressed, was for inappropriate referral to the service in the first instance. In support, the Clinical Director explained that in his experience those children who did have severe mental health issues were seen very quickly.

The Board noted the Minutes and the additional information.

CARE AT HOME UPDATE

6. The Board considered a report by the Chief Officer providing an update on Care at Home including the move to reablement, and action being taken to address capacity issues.

Having summarised the information contained in the previous report to the Board in March 2017 on the move from the traditional methods of care at home provision to the reablement approach, the report explained some of the challenges in rolling out the new service. In particular, the report highlighted the increased volume of referrals from hospital which, when coupled with the capacity of in-house and external care at home service providers, had reduced the time available for reablement. Available time had also more recently been adversely affected by higher than average levels of absence which had impacted on the service's ability to guarantee continuity of care staff and timing of service delivery resulting in some client dissatisfaction, although performance on delayed discharge had been maintained.

The report then provided details of some of the work that was ongoing to address the capacity issues in the service. This included regrading of care at home staff to allow staff across all care at home patches in East Renfrewshire to undertake the duties and tasks to support the reablement approach; an increase in night-time responders to allow a service to be provided in each locality rather than authority-wide; and additional resources being provided to support care at home organisers including timely client review, absence management support and more effective use of the CM2000 homecare scheduling system.

The report also outlined details of further work scheduled to take place during 2019. Amongst other things, this included the alignment of in-house reablement home care with Adult Localities teams to make better use of both health and care staff skills. It was further noted that partnership work with external providers would continue to ensure service capacity and a market place enabling service users to exercise choice should they wish under their preferred option of Self-Directed Support.

Commenting further, the Head of Adult Health and Social Care (Localities) explained having written to Board members during the festive season regarding the issues facing the service at the time and how they were being dealt with in the short-term, it was felt that that some further information for Board members on how challenges were being addressed would be helpful.

Welcoming the report and acknowledging the pressures faced by the service, Mrs Monaghan cautioned that these should not be used as an opportunity to raise service

access thresholds. Further information on the outcome of the consultation and partnership working that was taking place in relation to the development of reablement would also be welcomed. In reply, the Head of Adult Health and Social Care (Localities) explained that the work was still ongoing but that a report could be brought back to a future meeting once it was complete.

Councillor O’Kane having welcomed the mitigation measures that had been put in place and highlighted that the issues facing the service, particularly in relation to staffing, were being experienced nationwide, Mrs Brimelow expressed disappointment at performance, reminding the Board that a Care Inspectorate review of the service had already identified areas of relatively poor performance. She suggested that there was no explanation in the report of the impact on the quality of care being provided as a result of recruitment issues, and referring to comments about performance on delayed discharge being maintained, suggested that the aim should be for performance to improve. Further information on these matters would be of interest.

Acknowledging Mrs Brimelow’s comments, the Chief Officer explained that taking other issues into account, maintaining delayed discharge performance over the period in question was considered to be acceptable. However another inspection of the service was expected in the near future and the results of that, along with further information in relation to the ongoing activity within the service could be brought back to a future meeting.

Responding to questions on recruitment challenges, the Head of Adult Health and Social Care (Localities) explained that there had been limited success in attracting staff at the recent Employment Fayre that had been held, that in any case this had been a short-term measure, and that it was clear that moving forward a new approach needed to be taken. It was also highlighted that staff recruitment was an issue across the whole care at home sector and that being able to employ additional staff may have implications for other service providers.

Following further discussion the Board:-

- (a) noted the report; and
- (b) agreed that a further report with further details of the impact on quality of care; service vacancy information; an analysis and update of the position in relation to delayed discharge; and further details of the consultation and joint working in relation to the rollout of reablement be submitted to a future meeting.

REVENUE BUDGET 2019/20 - UPDATE

7. The Board considered a report by the Chief Financial Officer, providing an update on the latest information relating to the 2019/20 revenue budget and associated implications following the Scottish Government’s draft budget announcement on 12 December 2018.

Having referred to the further detail in relation to the proposed local government and health board settlements contained in appendices 1 and 2 accompanying the report, the report summarised the key messages in respect of health and social care.

Thereafter details were provided of the 2 areas where there was a difference in interpretation between the IJB Chief Finance Officer, and East Renfrewshire Council and NHSGGC on the financial information that had been provided, and where further clarity was being sought nationally.

Notwithstanding, based on the IJB Chief Financial Officers' Section analysis of the draft budget, the report outlined that the proposed total revenue contribution from the partners was expected to be £117.742M, £50.543M from East Renfrewshire Council and £67.199M from NHSGGC. Whilst this gave a potential increase of £3.84M on the 2018/19 revenue budget, likely pressures were estimated at £4.8M leaving a funding gap of approximately £1M. This was some £3.1M less than the originally estimated funding gap and allowed some flexibility to review and reprioritise savings proposals and ways in which to meet the funding gap.

The report then outlined a number of issues that may impact on this outlined financial position. These included amongst others Learning Disability Specialist Services and the potential cost implications for complex care packages, and Brexit implications particularly on staffing and prescribing.

Furthermore, the report explained that the set aside budget was yet to be confirmed and that further work was required to ensure the budget worked in accordance with legislative requirements.

The Chief Financial Officer then gave a full presentation to the Board providing further details in relation to the information contained in the report following which full discussion took place. In the course of discussion Councillor Swift highlighted the low levels of social care funding provided to the IJB by the Council in response to which Ms Brown acknowledged that the issues around funding were well known and that both partner bodies needed to reflect on these when determining their financial contributions to the IJB.

Referring to Councillor Swift's comments the Chief Officer also highlighted that the Council received one of the lowest GAE financial settlements from the government, and explained that financial challenges were not unique to East Renfrewshire IJB although the specific issues facing other IJBs may be different. Commenting further she emphasised the importance of working collaboratively with partners to achieve the best possible outcomes for local people.

Councillor O'Kane explained that the Council's administration group was very aware of the issues facing the Board and were taking them into account in budget deliberations. He referred to discussions the following day in the Scottish Parliament on the Government's budget proposals, how it would be difficult for partner bodies to finalise their contributions to the Board until their own funds had been agreed, but that notwithstanding, views expressed by Board members would be relayed back.

Mr Mohamed having welcomed the proposed additional funding for carers, and Mr Matthews having commented on the challenges of delivering preventative services in difficult financial times the Board noted the report.

AUDIT SCOTLAND REPORT: HEALTH AND SOCIAL CARE INTEGRATION – UPDATE ON PROGRESS

8. The Board considered a report by the Chief Officer providing an overview of the recent Audit Scotland report examining progress in the integration of the delivery of health and social care services.

Having referred to the Audit Scotland report on Changing Models of Health and Social Care that set out some of the risk and challenges associated with transformational change in health and social care, and which had been considered by the Performance and Audit Committee in June 2016, the report explained that Audit Scotland had in November 2018 published its report reviewing progress on health and social care integration.

Whilst overall the key messages from the report were positive to date, concern was expressed that financial planning was not integrated, long-term, or focussed on providing the best outcomes for people needing support, with financial pressures across health and care services making it difficult for Integration Authorities to achieve meaningful change.

Concern was also expressed that strategic planning needed to improve, and details were provided of several barriers that needed to be overcome to speed up change including a lack of collaborative leadership and strategic capacity; and disagreements over governance arrangements amongst others.

The report again emphasised that significant changes were required in the way health and care services were delivered and the arrangements that needed to be in place for these changes to be delivered, including a stronger commitment to collaborative working by Integration Authorities, councils, and health boards to achieve the real long-term benefits of collaborative working.

Thereafter, the report explained that the Audit Scotland report identified six key areas that if addressed would lead to improvements, and provided a summary of each. In addition, appended to the report was a summary of those Audit Scotland recommendations relevant to the operation of the IJB together with details of how the recommendations were being addressed locally.

The Chief Officer was heard further on the six key areas identified by Audit Scotland and how the IJB was placed in respect of each, it being noted that whilst work was required in respect of a number of matters, overall East Renfrewshire was well placed. Comment was also made on the local actions being taken in response to the specific recommendations made by Audit Scotland, particular reference being made regarding the complexities around financial planning and reporting. By way of example, in response to Mr Matthews, the Chief Officer highlighted how East Renfrewshire Council had moved to 3 year budgeting, whilst the NHSGGC budget was still set annually.

It was further noted that the Ministerial Steering Group for Health and Social Care would be reporting in the near future and it was planned to combine the action plan arising from their recommendations with the plan in relation to the Audit Scotland recommendations.

The Board noted the report.

INTEGRATION JOINT BOARD RECORDS MANAGEMENT PLAN

9. Under reference to the Minute of the meeting of the Performance and Audit Committee of 28 November 2018 (Item 5 refers), the Board considered a report by the Chief Officer seeking approval of the Integration Joint Board Records Management Plan (RMP) and associated Memorandum of Understanding (MoU), copies of which accompanied the report.

The report explained that as a public authority as defined by the Public Records (Scotland) Act 2011, the IJB was required to prepare an RMP which would set out how the Board's public records would be created and managed in line with national policy. Once approved, a copy of the Plan had to be submitted to the Keeper of the Records of Scotland for agreement.

The report further explained that in addition to setting out how records would be stored, the Plan also had to identify the person responsible for the records, the person responsible for ensuring compliance with the Plan, and include provision about records management, archival and destruction and disposal.

It was noted that both East Renfrewshire Council and NHS Greater Glasgow and Clyde already had RMPs in place, both of which supported the management of records relating to staff, patients, and other non-IJB matters. As a result, the Board's RMP related to the IJB and its committees, and plans and policies such as the Annual Performance Report and the Strategic Plan. The MoU that had been prepared set out the relationship between the RMPs of the IJB, the Council and NHSGGC.

Furthermore it was explained that as all the Board's records were currently stored by the Council, the Council's Business Classification Scheme was being used to organise all IJB records.

Referring to ongoing discussions around the future status of the current Clinical and Care Governance Committee and to the implications in terms of the RMP for any meeting papers and associated meeting minutes going forward, the Democratic Services Manager explained that the availability of such papers in future would be dependent on the decisions taken by the Board on the future status of the committee. It was noted that a development day to discuss the format and remit of any group set up to monitor clinical and care governance issues in future was being arranged.

The Board approved the Records Management Plan and associated Memorandum of Understanding and agreed that they be submitted to the Keeper for the Records of Scotland for agreement.

GENERAL DATA PROTECTION REGULATIONS (GDPR)

10. The Board considered a report by the Chief Officer providing an overview of the changes and implications arising from new data protection legislation, seeking agreement to the terms of the Privacy Notice to be used by the IJB, and seeking agreement that the Council's Data Protection Officer be appointed as the Data Protection Officer for the IJB.

Having referred to the introduction in 2018 of the General Data Protection Regulations and Data Protection Act, both of which replaced the 1998 Data Protection Act, the report explained that the recent legislation introduced new rules on how personal data was collected and processed. It was explained that in the main the information collected and processed by the IJB was statistical and anonymised data but that it did process Board members' personal information in relation to the business of the IJB. As such the IJB was a Data Controller in terms of the new legislation and was therefore subject to the new legislative requirements.

One of the requirements was the need for the IJB to prepare a notice that set out the nature of, reasons for and parties involved in the processing and sharing of personal data, and a copy of the draft notice accompanied the report. In addition it was explained that the IJB was required to appoint a Data Protection Officer whose role was to monitor internal compliance, inform and advise on data protection obligations, and act as a point of contact for data subjects and the office of the Information Commissioner. Given the small amount of personal data held by the IJB and that any data would be held on Council systems, it was proposed that the Council's Data Protection officer be appointed as the Data Protection Officer for the IJB.

The Board:-

- (a) noted the report;
- (b) approved the Privacy Notice; and

- (c) agreed that East Renfrewshire Council's Data Protection Officer be appointed as Data Protection Officer for the IJB.

REVENUE BUDGET MONITORING REPORT

11. The Board took up consideration of a report by the Chief Financial Officer providing details of the projected outturn position of the 2018/19 revenue budget as at 30 November 2018 and seeking approval of a number of budget virements.

It was reported that against a full year budget of £115.393M there was a projected overspend of £0.425M (0.4%). It was noted that of the projected overspend, £0.398M related to the planned use of reserves and £0.027M was a projected operational overspend that would be met from the in-year contingency reserve at the year end, although every effort would be made to eliminate the operational overspend by the year-end.

Commenting further on the report, the Chief Financial Officer explained that winter activity and new activity to the end of March had been accounted for in the report. She also explained that whilst due to the cost sharing arrangements in place would result in the prescribing budget having a nil balance, actual prescribing costs had increased recently. It was also reported that some development work had been ongoing, the purpose of which was to bring more detailed prescribing information to the Board in future.

In response to a question from Mrs Monaghan on whether the concerns over the continued availability of pharmaceuticals post-Brexit was leading to a front loading of prescribing, the Clinical Director explained that a circular had been issued to GPs advising not to do this.

The Board:-

- (a) noted the report; and
- (b) approved the budget virements as set out in Appendix 7 accompanying the report.

DATE OF NEXT MEETING

12. It was reported that the next meeting of the Integration Joint Board would be held on Wednesday 20 March 2019 at 10.30 am in the Council Offices, Main Street, Barrhead.

CHAIR