

Minute of the Dumfries and Galloway Integration Joint Board (IJB) meeting held on 21st May 2020 at 2pm via Microsoft Teams

Voting Members Present:

Andy Ferguson	(AF)	Local Authority Voting Member (Chair)
Penny Halliday	(PH)	NHS Voting Member (Vice Chair)
Lesley Bryce	(LB)	NHS Voting Member
Ian Carruthers	(IC)	Local Authority Voting Member
Laura Douglas	(LD)	NHS Voting Member
Andrew Guisti	(AG)	Local Authority Voting Member
Melissa Gunn	(MG)	NHS Voting Member
Jane Maitland	(JM)	Local Authority Voting Member
Elaine Murray	(EM)	Local Authority Voting Member

Advisory Members Present:

Norma Austin Hart	(NAH)	Third Sector Representative
Grecy Bell	(GB)	Registered Medical Practitioner (Primary Medical Services)
Caroline Cooksey	(CC)	Workforce Advisor to the IJB
Lillian Cringles	(LC)	Chief Social Work Officer
Heather Currie	(HC)	Associate Specialist
Ken Donaldson	(KD)	Registered Medical Practitioner (Not Primary Medical Services)
Ann Farrell	(AFa)	Local Authority Staff Representative
Fiona Gardiner	(FG)	NHS Staff Side Representative
Jim Gatherum	(JG)	Scottish Care Representative
Vicky Keir	(VK)	NHS Staff Representative
Katy Lewis	(KL)	Chief Finance Officer
Stella MacPherson	(SMac)	Service Users Representative
Karen Martin	(KM)	Carers Representative
Alison Warrick	(AW)	Governance Officer
Alice Wilson	(AWi)	Nurse Director
Julie White	(JW)	Chief Officer

In Attendance:

Ananda Allan	(AA)	Performance and Intelligence Manager
Rod Edgar	(RE)	Communications and Engagement Manager
Vicky Freeman	(VF)	Head of Strategic Planning and Performance
Nicole Hamlet	(NH)	Deputy Chief Officer
Amber Murray	(AM)	PA to Julie White – Chief Officer
Kirsty Peden	(KP)	Community Support Cell Lead
Stephen Thompson	(ST)	Substitute Member

Apologies:

Grace Cardozo	(GC)	NHS Voting Member
Karen Martin	(KM)	Carers Representative
Carol Stuart	(CS)	Carers Representative
Valerie White	(VW)	Acting (Interim) Director of Public Health (Substitute)

1. NOTIFICATIO OF SUBSTITUTES

We have apologies from Grace Cardozo, Karen Martin, Carol Stuart and Valerie White.

AF welcomed our new NHS Staff Side Representative Fiona Gardiner who is joining us for her first meeting today.

2. DECLERATIONS OF INTEREST

LD raised a declared of interest in Item 8, she having been involved with some of the work at Third Sector, Dumfries and Galloway.

3. MINUTES OF DUMFRIES AND GALLOWAY INTEGRATION JOINT BOARD HELD ON 22nd APRIL 2020

Minutes were agreed as an accurate record.

NAH asked why the advisory members were not aware of the meeting, a discussion will be picked up with AF out with this meeting in terms of advisory members not being included in the previous meeting.

LD asked in terms of the Partnership wide Surge plan, she expected this on the agenda, JW confirmed this was not finalised in time to come out with the papers, there is a scenario surge plan meeting on the 28th May 2020 and the high level surge plan will be presented at the next IJB meeting.

4. REVIEW OF THE INTEGRATION SCHEME

AW mentioned the Dumfries and Galloway Integration Scheme was approved by Scottish Ministers on the 3rd October 2015. This report is presented to inform the IJB of the legal requirements on both Dumfries and Galloway Council and NHS Dumfries and Galloway to prepare a successor Integration Scheme in line with the Public Bodies (Joint Working) (Scotland) Act 2014.

However in March 2020 Scottish Government informed Chief Officers of Integration Authorities, Chief Executives of NHS Boards and Chief Executives of Local Authorities that they did not require a successor Integration Scheme due to the ongoing COVID 19 response but that NHS Boards and Local Authorities should carry out a minimum requirement of a review of the current Integration Scheme. The Chair of the IJB agreed to write to both the Chief Executives to formally set this out for a successor scheme which would need to be presented to our Management team, the NHS Board and Full Council before coming back to the IJB for approval prior to submission on the 3rd October 2020.

Decision(s)

Board Members noted:

- **That in line with the Public Bodies (Joint Working) (Scotland) Act 2014, NHS Dumfries and Galloway and Dumfries and Galloway Council require to review the Integration Scheme for approval by Scottish Government on or before the 3rd October 2020**

- **The correspondence received from Scottish Government in March 2020**
- **That the Chair will write to the Chief Executives of the Local Authority and the NHS Board to advise them of the timescales for completion of a review of the Dumfries and Galloway Integration Scheme**

5. LOCALITY PERFORMANCE REPORTS

Dumfries and Galloway Integration Joint Board is committed to the accountability of locality health and social care services to communities through their Area Committees. Every 6 months, localities report their progress against the National Health and Wellbeing Outcomes.

AA confirmed these were completed when business was normal but confirmed Area Committees are currently suspended due to circumstances and not due to meet until October 2020. EM highlighted could these be submitted to the members of the Area Committees and they could share any concerns with AA, AF confirmed if these are shared with the Local Authority Chief Executive and he can share with the required people.

JW highlighted if we make the recommendation highlight these will be distributed to the Area Committee members for noting and if they have questions they can seek clarification from JW or Partners from the localities.

JG requested that the reports should be more as a Partnership approach and include more of the Independent Sector, these are well written and well informative. NAH agreed for these to also include the Third Sector.

Decision(s)

Board Members:

- **Discussed and approved the Locality Performance Reports for circulation to the Local Authority Chief Executive to share further with members for feedback**

6. SUMMARY PERFORMANCE REPORT (APRIL 2020)

VF mentioned this Summary Performance Report is produced by NHS Dumfries and Galloway. The figures are reflecting different times due to being pre COVID this will all require to be looked over going forward. The number of people admitted as an emergency was beginning to fall including people attending the accident and emergency department.

JM asked in terms of B11 Mental Health waiting times, it looks like we are going in the wrong direction, what we are doing as a Partnership for this activity. JW mentioned in terms of Mental Health we made decisions at the start of COVID in relation to implementing an escalation framework within Mental Health which prioritised our capacity to the most vulnerable. Colleagues then re prioritised the framework to ensure we could continue to deliver the services that are available for mental health services. In relation to our CAHMS service over the first 7 weeks we seen a reduction in general referrals to CAHMS but found an increase in the crisis service in terms of young people with anxiety and stress but this allowed us to

prioritise these individuals. Clinical lead from the CAHMS completing a learning summary to take into the post COVID times. JW will come back with up to date data around the psychological therapies.

Decision(s)

Board Members:

- **Noted the Summary Performance Report (April 2020)**

7. FINANCIAL PLAN 2020/21 – 2022/23

KL mentioned we are finding ourselves in a unprecedented time, this is a business for usual paper and should have come to the IJB in March, this sets out the pressures, financial issues and the costs of the Partnership and sets these with the resources available. It identifies a savings gap of £22.63m, we don't have a full plan yet confirming a balanced position for 2021.

We have been tasked to deliver a mobilisation plan, this is a Health and Social Care Partnership Plan, although it has been led by the NHS Board. KL has been required to submit a plan on a weekly basis but is moving to 2 weekly identifying a cost of £34m to implement this plan due to COVID. KL will bring back a more detail plan to a future meeting.

A complete new financial plan is required to be completed for the first quarter of the financial year as services have now changed and different services are working in different ways, this plan is being approved today as business as usual, work on going in terms of the COVID costs, timeline for this will tie in with the Quarter One review.

GB asked around the certainty of the financial implications from COVID19, the cost we have occurred and are occurring will this balance out. KL mentioned the general COVID caused, Scottish Government have approx £680m, but this has been increased. There is no certainty at this stage that all costs will be funded, this will be reviewed.

JM raised a question around 3.18 in terms of SAM opportunities, the concern is if we don't keep pushing this through and taking this through the IJB system so this can be monitored, can we bring something through regularly. Our SAM Programme Director, David Rowland this programme has been paused, but JW and Nicole Hamlet have directed David Rowland to review the Home Teams but also leading alongside Nicole Hamlet and VF in terms of recovery. JW highlighted what we are trying to do throughout our mobilisation plan, our ambition to develop these homes teams. JW flagged we are not going back to business as normal we are going to redesign our services.

HC confirmed they had their first meeting this morning and David Rowland and Ewan Bell are completing an SBAR in terms of all the new opportunities in pathways. Relating to the patient pathways, patient information and bringing patients to our hospital for face to face appointments will begin very rare. Some of the data we receive highlights just near me but has asked for the data to highlight telephone conversations, both to be captured and options to be offered to patients.

GB mentioned the changes we are seeing is not just related to Health, we cannot lose track of all this, the needs in the communities around social needs.

ST highlighted in terms of the £22.6 Gap that has been identified, the concern at the moment is that there is no plan, can something be brought back quickly to just highlight the issue. In terms of working differently to address the needs in different ways, what has the increase in cost been for the redeployment. KL confirmed there is a plan that gets us partly of the way there but is being worked on.

EM highlighted in terms of 3.25 in the report is the sum that is provided to Scottish Government is this a broken down sum, could we see a more detailed report. KL confirmed she will share this.

JW confirmed the SAM work is now tied into the remobilisation work when an update on this is brought back It will tie in with SAM.

Decision(s)

Board Members noted:

- **The delivery of a balanced position for 2019/20 following additional funding of £4.774m from NHS Board to cover overspends.**
- **Approve the IJB Financial Plan for 2020/21 which is presented as a balanced position with an in-year gap of £13.064m for which savings are still to be identified.**
- **Note the ongoing discussions with Scottish Government around the costs associated with the Covid-19 crisis and the uncertainty around funding streams for this additional cost.**
- **Note that a further financial update will be presented once the Quarter One financial results are known.**

8. VOLUNTEERING PRESENTATION

3:09pm Penny left meeting.

KP, Community Support Cell Lead went through the presentation which was shared with all the members, the remit of this group is around Food, Shelter, Advice and Guidance, Community Resilience including Minority Communities and Volunteering, the approach is a person centred approach, in terms of the groups:

- Group 1 Shielding
- Group 2 Self Isolating
- Group 3 Financially at risk/vulnerable groups

The Community Support Cell is a Partnership approach group and reports to the Cell Management Team in the Council (Weekly) and the Senior Leadership Team (Daily) it is made up of a number of different organisations. These include for example Ward Officers, Third Sector D&G Engagement Officers, Health and Social Care Community Learning and Development Workers, DGHP Community Liaison Staff.

A ward map throughout Dumfries and Galloway was included in this presentation.

NAH highlighted most volunteering has been informal between neighbours and communities, 1,648 Volunteers registered with Third Sector, there have been 246 of these volunteers assigned. Most have been matched with resilience groups or food-providing charities, Tasks include shopping, dog-walking, and grass cutting.

All volunteers are covered by Dumfries and Galloway Councils blanket insurance policy and their expenses are paid.

KP confirmed that the below are working well.

- Prioritisation of resources to those in need
- Collective staff working at Ward/area level
- Risks to those in need of support and volunteers are low because of the referral system in place.
- Community organisations are working collectively to respond to need.
- Willingness of partners to adapt existing practices, share resources and information and report on performance as a collective.

Moving forward we require ensuring available resources is directed to those most in need.

JW thanked both for all the work across all the Partnership in terms of what the Community cell has shared. JW asked both KP and NAH how we build our learning into the new normal. JW confirmed she has witnessed all the support through all the teams we require to enable our communities to respond, the challenges are around bringing this into our new stage. We cannot lose the learning and go back to what we used to do.

NAH mentioned at Locality level working with Council and Health and Wellbeing staff, the flexibility of people working has been very helpful and is learning for everyone.

LC confirmed she has a particular role within the Health and Social Care Partnership in terms of managing risk, there was challenges around this it was taken on board by KP and NAH team and resolved, anything can work if it is discussed.

JM asked around in terms of what we should be receiving from the funds, what are we going to do to help these groups along, the figures suggest that Third Sector have not been successful there is some work to be done to encourage applications going forward.

JG mentioned there will be good coming out of this situation, when COVID hits a care home this is significant, surge planning has been reviewed to be prepared if this does hit in Dumfries and Galloway. When they need the resource could the Partnership provide HR into these homes, could we work together? NAH will pick up a conversation offline with JG.

JW confirmed to JG as mentioned earlier the Surge planning scenario workshop we have scheduled for next week will look into the trigger points for the support to care homes, this will allow us to have a collective recollection. JG mentioned all care homes have been asked to provide their breaking points.

LC confirmed the volunteer list is still going through a recruitment process, individuals who have offered to support Health and Social Care a number of these could be permanent.

A briefing in terms of how we approach this in Dumfries and Galloway will be brought back in 4 weeks, JW confirmed a Care Home Oversight Group has been formed and are meeting daily, which includes JW, LC, AW, KD, VF and Valerie White. Graham Abrines chairs a care home support group which includes all the appropriate professional outlook. JG confirms he sits on the Scottish Care National Board and Dumfries are ahead of other organisations in Scotland.

3:56pm Katy left the meeting.

9. ANY OTHER BUSINESS DEEMED URGENT BY THE CHAIR DUE TO THE NEED FOR A DECISION

GB mentioned this is giving us the opportunity to do things differently. We did not acknowledge what we have been through recently. This pandemic has given us the opportunity to do the things we have been trying to do differently for a while. GB asked for us to reflect on our feelings from this situation at the beginning of the next IJB Meeting.