

INVERCLYDE INTEGRATION JOINT BOARD – 23 JANUARY 2023

Inverclyde Integration Joint Board
Monday 23 January 2023 at 2pm

PRESENT:

Voting Members:

Councillor Robert Moran (Vice Chair)	Inverclyde Council
Councillor Martin McCluskey	Inverclyde Council
Councillor Elizabeth Robertson	Inverclyde Council
Councillor Lynne Quinn	Inverclyde Council
Ann Cameron-Burns	Greater Glasgow and Clyde NHS Board
David Gould	Greater Glasgow and Clyde NHS Board

Non-Voting Professional Advisory Members:

Kate Rocks	Chief Officer, Inverclyde Health & Social Care Partnership
Allen Stevenson	Chief Social Work Officer
Craig Given	Chief Finance Officer, Inverclyde Health & Social Care Partnership
Dr Hector MacDonald	Clinical Director, Inverclyde Health & Social Care Partnership
Dr Chris Jones	Registered Medical Practitioner
Laura Moore	Chief Nurse, NHS GG&C

Non-Voting Stakeholder Representative Members:

Gemma Eardley	Staff Representative, Inverclyde Health & Social Care Partnership
Diana McCrone	Staff Representative, NHS Board
Charlene Elliot	Third Sector Representative, CVS Inverclyde
Christina Boyd	Carer's Representative

Additional Non-Voting Member

Stevie McLachlan	Inverclyde Housing Association Representative, River Clyde Homes
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Also present:

Vicky Pollock	Legal Services Manager, Inverclyde Council
Alan Best	Health and Wellbeing Service Manager, Inverclyde Health & Social Care Partnership
Gillian Neal	Mental Health Programme Manager, Inverclyde Health & Social Care Partnership
Gail Kilbane	Alcohol & Drug and Homelessness Service Manager
Arlene Mailey	Service Manager, Quality & Development, Inverclyde Health & Social Care Partnership
Marie Keirs	Senior Finance Manager, Inverclyde Council
Diane Sweeney	Senior Committee Officer, Inverclyde Council
Lindsay Carrick	Senior Committee Officer, Inverclyde Council
Karen MacVey	Legal & Democratic Services Team Leader, Inverclyde Council
PJ Coulter	Corporate Communications, Inverclyde Council
Karen Haldane	Executive Officer, Your Voice, Inverclyde

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Community Care Forum (public business only)

Chair: Councillor Robert Moran presided.

The meeting took place via video-conference.

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| 1 | <p>Apologies, Substitutions and Declarations of Interest</p> <p>Apologies for absence were intimated on behalf of:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 40%;">Alan Cowan (Chair)</td> <td>Greater Glasgow and Clyde NHS Board</td> </tr> <tr> <td>Simon Carr</td> <td>Greater Glasgow and Clyde NHS Board</td> </tr> <tr> <td>Margaret Tait</td> <td>Interim Service User Representative, Inverclyde Health & Social Care Partnership Advisory Group</td> </tr> </table> <p>Ms Boyd declared an interest in agenda item 12 (Reporting by Exception – Governance of HSCP Commissioned External Organisations).</p> | Alan Cowan (Chair) | Greater Glasgow and Clyde NHS Board | Simon Carr | Greater Glasgow and Clyde NHS Board | Margaret Tait | Interim Service User Representative, Inverclyde Health & Social Care Partnership Advisory Group | 1 |
| Alan Cowan (Chair) | Greater Glasgow and Clyde NHS Board | | | | | | | |
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| Margaret Tait | Interim Service User Representative, Inverclyde Health & Social Care Partnership Advisory Group | | | | | | | |
| 2 | <p>Minute of Meeting of Inverclyde Integration Joint Board of 7 November 2022</p> <p>There was submitted the Minute of the Inverclyde Integration Joint Board of 7 November 2022.</p> <p>The Minute was presented by the Chair and checked for fact, omission, accuracy and clarity.</p> <p>Decided: that the Minute be agreed.</p> | 2 | | | | | | |
| 3 | <p>Minute of Meeting of Inverclyde Integration Joint Board of 28 November 2022</p> <p>There was submitted the Minute of the Inverclyde Integration Joint Board of 28 November 2022.</p> <p>The Minute was presented by the Chair and checked for fact, omission, accuracy and clarity.</p> <p>Decided: that the Minute be agreed.</p> | 3 | | | | | | |
| 4 | <p>Financial Monitoring Report 2022/23 – Period to 31 October 2022, Period 7</p> <p>There was submitted a report by the Chief Officer, Inverclyde Health & Social Care Partnership on the projected financial outturn for the year as at 31 October 2022, and an update on the current projected use of earmarked reserves and projected financial costs of the continued response to the Covid-19 pandemic.</p> <p>The report was presented by Mr Given, and noted that as at 31 October 2022 it was projected that the IJJB revenue budget will have an overall underspend of £1.083million, broken down as Social Care Services projected to be underspent by £1.202million and Health Services projected to be underspent by £0.119million.</p> <p>Mr Given provided a verbal update on the return of the surplus Covid funding to the Scottish Government, advising of recently received correspondence which had been forwarded to members confirming that the Scottish Government proposed to reduce the amount of funding to Health Boards by the relevant amount. This amount would then be transferred from Earmarked Reserves. Mr Given further advised that he would be seeking clarification on the specific details and this would be included in future budget papers.</p> <p>The Board again expressed their disappointment that the surplus funding would be returned and (a) requested that officers seek clarification on the legal position and the mechanism by which the funding would be returned by writing to the Scottish</p> | 4 | | | | | | |

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Government and the Greater Glasgow & Clyde Health Board, and (b) that a further report be brought to the Board on this matter. It was also noted that Ms Pollock would review the Integration Scheme and liaise with the other officers.

The Board referred to the recent announcement that the Amazon warehouse in Gourrock was scheduled for closure and asked if there were plans to recruit Amazon staff to work in the care sector. Mr Stevenson advised that officers had discussed this matter and that approaches to Amazon staff would be through the Task Force.

Referring to paragraph 5.2 of the report and the overspend in mental health in-patient services and referencing an outstanding remit from the IJJB meeting of 26 September 2022 that officers bring back a further report addressing concerns about the Langhill Unit, the Board requested an explanation for the overspend and asked if officers were satisfied with staffing levels. Ms Rocks advised that issues with recruitment had led to an increased use of bank and locum staff and that a strategy was being developed to address this. Ms Kilbane added that this matter would be reported to the Board at a later date.

Mr Stevenson left the meeting during consideration of this item of business.

Decided:

- (1) that (a) the current Period 7 forecast position for 2022/23, as detailed in the report and at appendices 1-3, be noted, and (b) it be noted that the projection assumes that all Covid related costs in 2022/23 will be fully funded from the Covid Earmarked Reserves;
- (2) that (a) the proposed budget realignments and virement, as detailed in appendix 4 to the report, be approved, and (b) officers be authorised to issue revised directions to the Council and/or Health Board as required on the basis of the revised figures as detailed at appendix 5 to the report;
- (3) that the specific earmarking detailed at section 4 of the report and summarised at paragraph 8.2 of the report be approved;
- (4) that the position of the Transformation Fund, as detailed at appendix 6 of the report, be noted;
- (5) that the current capital position, as detailed at appendix 7 of the report, be noted;
- (6) that the current Earmarked Reserves position, as detailed at appendix 8 of the report, be noted;
- (7) that the key assumptions within the forecast, as detailed at paragraph 12 of the report, be noted; and
- (8) that it be remitted to officers to (a) write to the Scottish Government and the Greater Glasgow & Clyde Health Board requesting clarification on the legal position and mechanism by which the unspent Covid funding will be returned to the Scottish Government, and (b) submit a further report on this matter to the Board for consideration.

5 Rolling Action List

5

There was submitted a Rolling Action List of items arising from previous decisions of the IJJB.

Decided: that the Rolling Action List be noted.

6 Proposal to Fund Final Year MSc Social Work Students to Commit to Work for Inverclyde HSCP for 3 Years

6

There was submitted a report by the Chief Officer, Inverclyde Health & Social Care Partnership providing detail of a new initiative to attract self-funding MSc students who are not currently employed by Inverclyde HSCP to ensure an intake of newly qualified Social Workers to Inverclyde.

The report was presented by Mr Stevenson and advised that the Workforce Plan had

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identified that recruitment and retention of staff in health and social care sectors was challenging and that the Covid pandemic had increased pressure in some qualified roles, especially that of Social Workers. The new initiative proposed that, in return for funding their final year of study, students would commit to working for Inverclyde HSCP for 3 years.

The Board expressed their support for the initiative, and Ms Rocks provided an overview as to how the initiative would work in practice.

The Board asked if a similar approach could be adopted to address recruitment and retention issues within the Care at Home sector, and Ms Rocks advised that other measures were being considered to address this, including Modern Apprenticeships, salaries and career perception.

Ms Rocks further noted that this initiative was the first of its kind in Scotland and it was hoped would compete with the higher wages and shorter working week offered by other authorities in attracting staff.

Decided: that (a) the funding aspect of the proposal be agreed, and (b) it be noted that the responsibility to ensure the HSCP has sufficient registered Social Workers across its services sits with the Chief Social Work Officer.

7 Service Pressures on Professional Disciplines Within Primary Care Sector

7

Dr MacDonald provided a verbal report on service pressures on the professional disciplines within the Primary Care sector.

The following points were noted:

- (1) there are 13 GP practices in Inverclyde, and all are seeing patients face-to-face and also providing telephone, video and e-mail consultations;
- (2) currently 2 GP practices have new patient list closures due to work pressures and staffing provision, but will take new familial patients (e.g. new babies);
- (3) seasonal flu and a resurgence of Covid over the Christmas period caused pressure across all medical disciplines;
- (4) there has been an increased patient demand post-Covid, possibly as the result of patients deferring seeking treatment during the pandemic;
- (5) there has been an increase in New Scots, which in some cases brings language, cultural and complex health needs;
- (6) that the 2018 contract has not been fully implemented with regard to recruitment; and
- (7) there is no evidence that there is an increase in A&E figures caused by GPs and that A&E figures are lower than pre-pandemic.

Dr MacDonald also provided a detailed description of the current out-of-hours GP provision and advised of proposed changes to the service, which will include appointment times currently offered at Royal Alexandra Hospital in Paisley being changed from 8am-2pm to 10am-4pm.

The Board commented on the out-of-hours GP provision being provided at Paisley and noted that there was a demand for it to be provided locally, advising of a live petition with an excess of 5600 signatures to this effect. There were further comments on the flow of patients within the service, from the initial call to NHS24 to being provided with an appointment to see a out-of-hours GP.

The Board asked for further detail on the two GP practices which have currently closed their waiting lists, and Dr MacDonald advised that the measure was temporary until the patient lists decreased naturally. Dr MacDonald highlighted contributing factors such as recruitment issues, and also positive measures taken across the Board such as increasing the profile of the Advanced Nurse Practitioner (ANP). Mr Best further added that training and retaining staff was a priority and provided an overview of the role of the ANP within the service.

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The Board asked how GP practices ensured that people obtained an appropriate level of care and Dr MacDonald advised that GP practices provided staff with signposting training.

Councillor Quinn left the meeting during consideration of this item of business.

Decided: that the verbal report be noted.

Dr MacDonald left the meeting and Mr Stevenson returned to the meeting at this juncture.

8 Roll-out of Naloxone Training

8

There was submitted a report by the Chief Officer, Inverclyde Health & Social Care Partnership providing an update on the roll-out of Naloxone training to staff.

The report was presented by Ms Kilbane and advised that on 22 September 2022 Inverclyde Council agreed to support a motion to increase the uptake of Naloxone.

The report was presented by Ms Kilbane and provided (a) advice from the Chief Social Work Officer, (b) detailed information on drug related deaths, and (c) the involvement of the Alcohol and Drug Recovery Service and other agencies in the provision of Naloxone to the public.

The Board asked how many Naloxone kits were in circulation in Inverclyde and if there was a target figure. Ms Kilbane advised that the target figure had been exceeded as it was measured against Drug Related Deaths, which had halved last year. She further noted that, although Inverclyde HSCP knew how many kits it had issued, other agencies also provided kits, and that it was planned the information would be collated centrally within the Alcohol and Drug Partnership.

The Board asked if Inverclyde Council would be informed of the content of this report, and Ms Rocks advised that a report would be submitted to the Social Work & Social Care Scrutiny Panel.

Decided:

- (1) that the continued roll-out of Naloxone kits to appropriate staff across the Council/HSCP and Third Sector partner organisations across Inverclyde be noted;
- (2) that the advice of the Chief Social Work Officer, namely that appropriate staff groups be identified on a voluntary basis to maximise the availability of Naloxone to assist the public who may require swift treatment in an emergency situation, be noted;
- (3) that the Trade Union view, namely that this work should continue with appropriate staff on a voluntary basis moving forward, be noted; and
- (4) that it be remitted to officers to provide a report to the Social Work & Social Care Scrutiny Panel on this matter.

9 Advanced Clinical Practice Update

9

There was submitted a report by the Chief Officer, Inverclyde Health & Social Care Partnership providing an update on the development of Advanced Clinical Practice roles within mental health services in Inverclyde.

The report was presented by Ms Neal and provided an update on proposals made in 2021 that mental health services develop and support Clinical Practice roles within the fields of pharmacy, nursing and allied health professions.

Decided: that the progress of Advanced Clinical Practice developments and the direction of travel be noted.

10 Care Home Assurance Themes and Trends Report – Oversight December 2022

10

There was submitted a report by the Chief Officer, Inverclyde Health & Social Care

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Partnership advising of emerging themes and trends identified from care assurance visits to the 21 Care Homes within Inverclyde in late 2021 which highlight good practice and areas for improvement.

The report was presented by Ms Moore and provided detail on how the visits were planned and undertaken, and the main focus areas of (a) Infection Prevention and Control, (b) Resident Health and Care Needs, and (c) Workforce, Leadership and Culture.

The Board asked for further detail on the Care Home Collaborative referred to in the report, and Ms Moore provided an overview of the membership and how Care Homes can access it for advice.

Decided: that the contents of the report and actions recommended for future visits, as detailed at section 4.9 of the report, be noted.

11 Chief Officer's Report

11

There was submitted a report by the Chief Officer, Inverclyde Health & Social Care Partnership providing an update on developments which are not the subject of reports on this agenda.

The report was presented by Ms Rocks and provided updates on (1) CAMHS/Specialist Children Services, (2) Care at Home review and (3) visit to Inverclyde Centre - Redesign.

The Board expressed concerns that the Care at Home review could lead to a service reduction, and Ms Rocks and Mr Stevenson provided reassurance that this was not the purpose of the review, and that the review would be looking at staffing and workforce matters.

The Board welcomed the proposed redesign of the Homelessness Service and noted that a report on this matter will be submitted to both the Inverclyde Council and IJJB in June 2023.

Ms Elliot left the meeting during consideration of this item of business.

Decided:

(1) that the HSCP service updates on (a) CAMHS/Specialist Children Services, (b) Care at Home review, and (c) visit to Inverclyde Centre – Redesign be noted;

(2) that future reports will be brought to the IJJB as substantive agenda items on these matters; and

(3) it be noted that a report will be submitted to both the Inverclyde Council and IJJB in June 2023 on proposals for the redesign of the Homelessness Service.

12 Minute of Meeting of IJB Audit Committee of 28 November 2022

12

There was submitted the Minute of the Inverclyde Integration Joint Board of 28 November 2022.

Decided: that the Minute be agreed.

It was agreed in terms of Section 50(A)(4) of the Local Government (Scotland) Act 1973 as amended, that the public and press be excluded from the meeting for the following items on the grounds that the business involved the likely disclosure of exempt information as defined in the paragraphs of Part I of Schedule 7(A) of the Act as are set opposite the heading to each item.

Item

Paragraphs

**Reporting by Exception – Governance of HSCP 6 & 9
Commissioned External Organisations**

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Appendix to Minute of Meeting of Inverclyde Integration Joint Board of 7 November 2022.

13 Reporting by Exception – Governance of HSCP Commissioned External Organisations 13

There was submitted a report by the Chief Officer, Inverclyde Health & Social Care Partnership on matters relating to the HSCP Governance process for externally commissioned Social Care Services for the reporting period 17 September to 18 November 2022.

The report was presented by Mr Given and appended the mandatory Reporting by Exception document which highlighted changes and updates in relation to quality gradings, financial monitoring or specific service changes or concerns identified through submitted audited accounts, regulatory inspection and contract monitoring.

Updates were provided on establishments and services within Older People Services, Adult Services and Children's Services, all as detailed in the Appendix.

Ms Boyd declared a non-financial interest in this item as a Director of Inverclyde Carer's Centre. She also formed the view that the nature of her interest and of the item of business did not preclude her continued presence at the meeting or her participation in the decision making process.

Decided:

(1) that the Governance report for the period 17 September to 18 November 2022 be noted; and

(2) that members acknowledge that officers regard the control mechanisms in place through the governance meetings and managing poorly performing services guidance within the Contract Management Framework as sufficiently robust to ensure ongoing quality and safety and the fostering of a commissioning culture of continuous improvement.

14 Appendix to Minute of Meeting of Inverclyde Integration Joint Board of 7 November 2022. 14

There was submitted an Appendix to the Inverclyde Integration Joint Board minute of 7 November 2022.

The Appendix was presented by the Chair and checked for fact, omission, accuracy and clarity.

Decided: that the Appendix be agreed.