Agenda Item: 7

INVERCLYDE JOINT CARE BOARD

MINUTE OF MEETING OF 21 OCTOBER 2009 AT 2 PM

MUNICIPAL BUILDINGS, GREENOCK

Present: Councillors R Ahlfeld, T Fyfe and J McIlwee (Chair) and Mrs B Billings (Inverclyde Council), Mr D Walker and Dr L Bidwell (Inverclyde CHP), Mrs N McFadden (Inverclyde Community Care Forum) and Mr R Taggart (UNISON).

Present Also: Mrs G McCready, Ms I Howat and Mrs R McGhee (Inverclyde Council).

Apologies: Mrs M McConnachie (Inverclyde Council).

MINUTE OF PREVIOUS MEETING

The minute of the meeting held on 19 August 2009 was submitted and approved.

ADULT SUPPORT AND PROTECTION (SCOTLAND) ACT 2007 - NATIONAL CAMPAIGN TO HELP STOP DELIBERATE AND UNINTENTIONAL HARM "ACT AGAINST HARM CAMPAIGN"

There was submitted a report by the Acting Director Social Care on (1) the national campaign to help stop deliberate and unintentional harm within the context of the Adult Support and Protection (Scotland) Act 2007 Part 1 of which, dealing with the protection of adults at risk of harm, came into effect in October 2008 and (2) the Inverclyde Partnership's response to supporting the campaign locally.

Ms Iseabail Howat gave a presentation on the act against harm campaign (copy attached).

The Board noted the national campaign "Act Against Harm" and the local support for the campaign.

SHIFTING THE BALANCE OF CARE IMPROVEMENT FRAMEWORK - AGREEING PRIORITIES AND DELIVERING OUTCOMES

There was submitted a report by the Acting Director Social Care on the successful expression of interest submitted through the Inverclyde CHP for the Inverclyde Partnership to participate in a programme which provides support for the local implementation of the national Shifting the Balance of Care framework.

It was noted that the programme was particularly important in Invercive as demographic projections suggested that the numbers of elderly would in future increase with the number of carers falling and that the local approach set out in the outline of approach and work underway appended to the report would help inform the development of a joint strategic approach.

The Board recognised the impact of the work associated with the Shifting the Balance of Care improvement framework on the wider community planning system and supported the work required to develop the improvement framework locally.

DELAYED DISCHARGES

There was submitted a report by the Acting Director Social Care on the current position regarding people who have had their discharge from hospital delayed.

It was noted that, while a zero target set by the Scottish Government had been maintained since October 2008, the numbers in Inverclyde had increased in August and September 2009.

Mrs McCready advised that to improve the position it would be necessary to consider a number of issues including the sources of care home admissions, how quickly people are assessed for care homes, care home packages and rehabilitation.

The Board noted the trends and issues raised in the report regarding hospital discharges and supported this area of work as a key priority.

CHOOSE LIFE APSE AWARD

Mrs Billings referred to the success of the Choose Life initiative in the National Association of Public Sector Excellence Awards 2009 in winning the award for Best Public/Voluntary Partnership Working Initiative.

The Board extended congratulations to the Choose Life team following their achievement.

(Councillor Fyfe left the meeting following consideration of this item of business).

H1N1 VACCINATION PROGRAMME

Dr Bidwell gave a presentation on the H1N1 Virus Vaccination Programme (copy attached).

He reported that the vaccination programme had been brought forward from November and was starting the same day as the meeting. It was noted that the seasonal flu vaccine would not protect against H1N1 and those receiving the seasonal vaccine would also be given the H1N1 vaccine. With regard to local arrangements, Dr Bidwell advised that the vaccination programme would commence on 26 October with health staff receiving the vaccination and, thereafter, the appropriate local authorities. During the course of discussion, it was noted that the illness was mild in the vast majority of cases.

It was noted that the at risk groups for H1N1 were similar to those for the seasonal flu but also included pregnant women and the immunocompromised. GPs would use the normal recall procedures to contact those in these groups.

The Board noted the presentation by Dr Bidwell.