



**Stephen Brown (Chief Officer)**

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## **Orkney Integration Joint Board**

Wednesday, 30 November 2022, 09:30.

Council Chamber, Council Offices, School Place, Kirkwall.

### **Minute**

#### **Present**

##### **Voting Members:**

##### **Orkney Islands Council:**

Councillors Rachael A King, Jean E Stevenson and Ivan A Taylor.

##### **NHS Orkney:**

Issy Grieve, Davie Campbell and Meghan McEwen.

##### **Non-Voting Members:**

##### **Professional Advisers:**

- Stephen Brown, Chief Officer of the Integration Joint Board.
- Dr Kirsty Cole, General Practitioner representative, appointed by NHS Orkney.
- Mary Moore, Nurse representative, employed by NHS Orkney (present via Microsoft Teams).

##### **Stakeholder Members:**

- Janice Annal, Service User Representative (present via Microsoft Teams).
- Martha Gill, Staff-side Representative, NHS Orkney (present via Microsoft Teams).
- Jim Love, Carer Representative.

##### **Clerk**

- Hazel Flett, Service Manager (Governance), Orkney Islands Council.

## **In Attendance**

### **Orkney Health and Social Care Partnership:**

- Lynda Bradford, Head of Health and Community Care.
- Maureen Firth, Head of Primary Care Services (present via Microsoft Teams).
- Matthew Webb, Community Justice Planning, Performance and Information Officer (present via Microsoft Teams).
- Shaun Hourston-Wells, Project Manager.

### **Orkney Islands Council:**

- Erik Knight, Head of Finance.
- Karen Bevilacqua, Solicitor.

### **NHS Orkney:**

- Morven Gemmill, Lead Allied Health Professional.

## **Observing**

### **NHS Orkney:**

- Anthony McDavitt, Director of Pharmacy (NHS Orkney and NHS Shetland).

## **Not Present**

### **Stakeholder Member:**

- Danny Oliver, Staff-side Representative, Orkney Islands Council.

## **Chair**

- Issy Grieve, NHS Orkney.

## **1. Welcome and Apologies**

The Chair welcomed everyone to the meeting, the first face-to-face meeting held in the Council Chamber since the pandemic in March 2020, although some members were attending virtually through Microsoft Teams.

The Chair reminded members that the meeting was being broadcast live over the Internet on Orkney Islands Council's website. The meeting was also being recorded, with the recording publicly available for listening to after the meeting for 12 months.

Apologies for absence had been intimated on behalf of the following:

- Professional Advisers:
  - Jim Lyon, Interim Chief Social Work Officer of the constituent local authority, Orkney Islands Council.
  - Dr Louise Wilson, Secondary Medical Care Practitioner representative, employed by NHS Orkney.

- Stakeholder Members:
  - Morven Brooks, Third Sector Representative.
  - Frances Troup, Head of Community Learning, Leisure and Housing, Orkney Islands Council.
- Orkney Health and Social Care Partnership:
  - Dr Dawn Moody, Associate Medical Director (Community)/OOH GP.
  - Maureen Swannie, Head of Strategic Planning and Performance.

## 2. Appointment of Stakeholder Members

There had been previously circulated a report setting out appointments to stakeholder vacancies on the Board, for consideration and approval.

Stephen Brown advised that, following the retirement of Gail Anderson as Chief Executive Officer of Voluntary Action Orkney, the position of Third Sector representative on the Board (IJB) was now vacant.

Following discussions with Crossroads Care Orkney, facilitated through Shaun Hourston-Wells, a potential carer representative had been identified.

The Board noted:

**2.1.** That the Integration Scheme allowed for various co-opted non-voting members, including the following:

- A carer's representative.
- A third sector representative.

**2.2.** That the Integration Scheme stated that individual appointments would be made as required when a position became vacant for any reason, with the initial period of office being two years.

**2.3.** That the positions of Carer representative and Third Sector representative were currently vacant.

The Board **resolved**:

**2.4.** That Jim Love be appointed as the Carer representative on the IJB for an initial period of two years.

**2.5.** That Morven Brooks be appointed as the Third Sector representative on the IJB for an initial period of two years.

**2.6.** That Morven Brooks be appointed as the Third Sector representative on the Joint Clinical and Care Governance Committee.

## 3. Declarations of Interest

Jim Love advised that a close family member had had podiatry services withdrawn, resulting in a formal complaint to NHS Orkney, and confirmed that he would not participate in the discussion at Item 14 (Personal Foot Programme) below.

Janice Annal joined the meeting via Microsoft Teams at this point.

#### **4. Disclosure of Exempt Information**

The Chair advised that, although the public could be excluded from the meeting for consideration of Annex 3 to Item 14, as the business to be considered might involve the disclosure of exempt information in terms of paragraph 3 of Part 1 of Schedule 7A of the Local Government (Scotland) Act 1973 as amended, she did not think the Board would require to discuss the detail of the Annex.

#### **5. Minute of Previous Meeting**

There had been previously circulated the draft Minute of the Meeting of the Integration Joint Board held on 21 September 2022.

Stephen Brown confirmed that an organogram would be included in the induction pack for new members, with the action to be marked as complete in the Matters Arising Log.

Regarding the Annual Performance Report, it was confirmed that Maureen Swannie had circulated an updated version via email prior to submission to the Scottish Government by the deadline of 30 September 2022.

In response to a query from Meghan McEwen on the lack of financial reporting to this meeting, Stephen Brown advised that, following the Chief Finance Officer moving on to a new role, discussions with colleagues at both Orkney Islands Council and NHS Orkney were ongoing with a view to a full financial report being submitted to the next meeting.

The minute was thereafter **approved** as a true record.

#### **6. Matters Arising**

There had been previously circulated a log providing details on matters arising from previous meetings, for consideration and to enable the Board to seek assurance on progress, actions due and to consider corrective action, where required.

Stephen Brown advised that, although it had been hoped to submitted the integrated workforce plan to this meeting, following feedback from the Scottish Government, further work was required to the iterative, live document, and he anticipated that a further draft would be submitted to the next meeting.

Regarding the revised risk register, Stephen Brown confirmed that work was ongoing to fully capture risks/mitigating actions associated with the workforce. However, given this was a wider issue, consideration was being given to a public sector risk register, rather than taking individual risk registers, with similar content, to all the various public sector bodies.

In response to a query from Davie Campbell regarding prioritising outstanding actions rather than updates at each meeting, Stephen Brown advised that this could be looked at in the presentation of future Matters Arising Logs.

The Chair referred to the recent media announcement on the inspection report and asked Stephen Brown to brief members. Stephen Brown apologised for the lack of forewarning, however he was led to believe the inspection would be published in mid-December, therefore its publication the previous day (29 November) had meant he could not brief the Board earlier.

The inspection report was a sobering read. As a result of challenges within the workforce, particularly in relation to social workers and managing demands on the children's services' inspection, Fostering, Adoption and Kinship social workers were redirected to care and protection within the Children and Families section, which then led to delays in permanence plans.

An Interim Service Manager had since been appointed to take the lead and a priority action plan was in place. Staff would continue to work with Care Inspectorate colleagues and an offer of employment had been made in respect of a permanent Service Manager, with significant experience.

Although Meghan McEwen appreciated capacity issues, she enquired whether all outstanding actions from the various children's services' inspections could be collated into one area.

Mary Moore left the meeting during discussion of this item.

## **7. Joint Clinical and Care Governance Committee**

There had been previously circulated the approved Minute of the Meeting of the Joint Clinical and Care Governance Committee held on 5 July 2022, to enable the Board to seek assurance.

The Chair advised that, in future, the Chair of the Joint Clinical and Care Governance Committee, Steven Johnston, would be invited to attend the Board to give assurance.

Stephen Brown highlighted the main items of business considered by the Joint Clinical and Care Governance Committee on 5 July 2022 and, for assurance purposes, confirmed that it was an active committee with a full agenda. At the Development Session held the previous day, it was confirmed that Orkney was unique in that it was the only area in Scotland with a joint, integrated Clinical and Care Governance Committee and, although there was still much work to do, Steven Johnston, as Chair, had made good progress over the past year.

As Davie Campbell was not a member of the Joint Clinical and Care Governance Committee, he queried whether there were any commissioned services from Orkney Islands Council which were not currently on the agenda. Stephen Brown confirmed that, previously, both care home and care at home services were not reported, however there were now regular reports on infection control. Again, at the Development Session held the previous day, it was agreed that inspection reports and complaints and compliments would now also be reported more regularly, on a similar basis as had been done with Mental Health services some years ago. Other service areas would also be identified and included in reporting.

Mary Moore rejoined the meeting during discussion of this item.

## **8. Joint Staff Forum**

There had been previously circulated the unapproved Minute of the Meeting of the Joint Staff Forum held on 7 September 2022, to enable the Board to seek assurance.

Martha Gill advised that the Joint Staff Forum had only recently commenced meeting following the pandemic and was still finding its way. However, fruitful discussions were had with interesting comparisons between the different parts of the workforce.

Stephen Brown reiterated Martha's comments, in that the Joint Staff Forum had not met during the pandemic, but was now scheduled to meet regularly. Discussions were ongoing to ensure that matters were discussed at the appropriate forum, be that the Joint Staff Forum, the regular meeting which Orkney Islands Council held with trade union representatives and/or the Area Partnership Forum at NHS Orkney.

## **9. Performance and Audit Committee**

There had been previously circulated the unapproved Minute of the Meeting of the Performance and Audit Committee held on 28 September 2022, to enable the Board to seek assurance.

Councillor Ivan Taylor advised that the two main items of business were the external audit annual report and the final annual accounts, which were scrutinised and approved for signature.

Regarding the external audit annual report, the external auditors had provided an unmodified opinion on the accounts, there were no matters for exception reporting, effective management was in place and there were no significant weaknesses in internal controls. This was the last audit undertaken by Audit Scotland, with the newly appointed external auditors, KPMG, due to take over. Erik Knight confirmed that that process was already underway.

In response to a query from Meghan McEwen regarding Chairs of both Audit Committees meeting, Councillor Ivan Taylor, being new to the role, welcomed any partnership working which would help bring any benefit. Stephen Brown confirmed that there were a set number of days for internal audit activity specifically in relation to the IJB in both Orkney Islands Council and NHS Orkney's internal audit plans and cross collaboration would certainly help maximise that limited time.

## **10. Strategic Planning Group**

There had been previously circulated the approved Minute of the Meeting of the Strategic Planning Group held on 31 August 2022, together with the unapproved Minute of the Meeting of the Strategic Planning Group held on 25 October 2022, to enable the Board to seek assurance.

Stephen Brown confirmed that the meeting on 31 August 2022 began the process whereby one substantive item from the strategic priorities was discussed in detail – the discussion on mental health and wellbeing was extensive and fruitful.

At the meeting held on 25 October 2022, discussion focussed on the impact of the cost of living crisis on mental health and wellbeing, resulting in an increasing number of people in distress.

Davie Campbell queried whether membership of the Strategic Planning Group should be expanded to include representatives from the Third Sector, given the increasing impact of the cost of living crisis. Stephen Brown advised that membership of the group was continually under review to ensure the right groups were present and/or represented at the appropriate time. Meghan McEwen suggested that the community planning partnership was the more appropriate forum to co-ordinate a response to the cost of living crisis locally.

The Chair confirmed that the Board would listen to the messages coming from the Strategic Planning Group, including in relation to the cost of living crisis, and ensure any concerns were passed to the relevant forum, including the community planning partnership, where appropriate.

## **11. Orkney Community Justice Partnership – Annual Report**

There had been previously circulated a report presenting the annual return sent to Community Justice Scotland from the Orkney Community Justice Partnership (OCJP), for scrutiny.

Matthew Webb presented the local area annual return whereby community justice outcome activity and performance was measured against the previous year and the previous strategy. As requested by the Board, a local summary report had also been produced in order to provide context and interpretation of data.

The Board noted:

**11.1.** The Community Justice Local Area Annual Return for 2021-22, attached as Appendix 1 to the report circulated.

**11.2.** The impact of justice services on improving outcomes for those subject to court disposals locally.

**11.3.** The priority areas which would be the focus of the next reporting year as follows:

- Implementation of Safe and Together training across the OCJP, a continued focus on domestic abuse reporting, with the aim of addressing offending behaviour.
- Continued development of a Strategic Needs and Strength Assessment as part of the review of the local Community Justice Outcome Improvement Plan (CJOIP).
- In line with CJS recommendations, all partners within the OCJP understand their responsibilities to community justice and contribute effectively.

**11.4.** The Executive Summary, attached as Appendix 2 to the report circulated, which summarised the Annual Return.

## **12. Climate Change Duties**

There had been previously circulated a report presenting the annual Climate Change Duties Report, for consideration and approval, prior to submission to the Scottish Government by 30 November 2022.

Shaun Hourston-Wells reminded members that all public bodies, which included the IJB, were required to complete an annual report on compliance with climate change duties. The report template was standard and, as most of the work was undertaken by either Orkney Islands Council or NHS Orkney, very little information was contained in the IJB's report.

Shaun Hourston-Wells also reminded the Board of its previous frustration with the need to complete a zero return, each year, following which the Interim Chief Officer wrote to the Scottish Government, in December 2020, expressing the IJB's frustration, and requesting consideration be given to exempting IJBs from completing a Climate Change Reporting Return. A response from the Scottish Government acknowledged the IJB's frustration and advised that this would be given further consideration, but, in the meantime, IJBs would have to continue to make the annual return.

Dr Kirsty Cole advised that, while she appreciated the limited information in the Board's report for the reasons explained, given the importance of climate change, she enquired whether it would be more appropriate to see the climate change duties reports of the two partner organisations.

Shaun Hourston-Wells agreed to speak to colleagues and there was general agreement that this was an appropriate action to follow up. Councillor Rachael King also requested that the Board write again to the Scottish Government, highlighting capacity and the lack of value in the Board producing an "empty" report.

The Chair suggested that, in future, with a limited population of approximately 20,000, could Orkney produce one report, rather than individual reports. Shaun Hourston-Wells advised that the template was standard across public bodies in Scotland, rather than area specific, however, he could see the merit in an area based report. Meghan McEwen suggested that ministerial portfolios could also influence the reporting mechanism. If, for example, a report for the community planning partnership was produced, if one partner was not "pulling its weight", how could the other partners hold that one to account?

The Board noted:

**12.1.** The statutory duty to prepare a report on compliance with climate change duties.

The Board **resolved:**

**12.2.** That the Climate Change Duties report, attached as Appendix 1 to the report circulated, be approved for submission to Scottish Government by the deadline of 30 November 2022.

### **13. Freedom of Information and Guide to Information**

There had been previously circulated a report presenting an updated Freedom of Information Policy and a Publication Scheme, together with an Equality Impact Assessment, for consideration and approval.



Shaun Hourston-Wells reminded members of the legislative requirement on public bodies to make information publicly available and how freedom of information requests were processed. With assistance from Orkney Islands Council's Information Governance Officer, the existing Freedom of Information (FOI) Policy and Publication Scheme had been reviewed. Very little change was proposed, with one addition proposed, as follows:

At page 5 of the FOI Policy, under **Handling Requests for Recorded Information**, specifically:

"If an applicant requests information that is not held by the Integration Joint Board and it is likely that the information is held by another public authority, the Chief Officer should signpost the applicant to that other authority."

Given the lack of significant changes to either document, it was proposed that the timeframe for review be increased from two to three years.

Councillor Rachael King queried whether the extended review timeframe should be included in the recommendations. Hazel Flett confirmed that, with the revised timescale included in the version control on the documents, should the Board approve the revised documents, this would, by default, also be approved. The rolling list of regular reports would also be updated to reflect the timescale.

The Board noted:

**13.1.** The requirement to publish a Freedom of Information Policy and a Publication Scheme, which should be reviewed periodically.

**13.2.** The updated Freedom of Information Policy and Publication Scheme, attached as Appendices 1 and 2 respectively to the report circulated, which incorporated the minor amendments detailed in section 4 of the report circulated.

The Board **resolved**:

**13.3.** That the Freedom of Information Policy and the Publication Scheme, as circulated be approved.

## **14. Personal Foot Programme**

With reference to paragraph 3 above, Jim Love, having previously declared an interest in this item, remained in the room, but did not take part in the discussion.

The Chair reminded the Board that, although Annex 3 contained exempt information, as described in paragraph 3 of Part 1 of Schedule 7A of the Local Government (Scotland) Act 1973 as amended, she saw no reason to discuss in detail and therefore the public were not excluded.

There had been previously circulated a report advising of changes to podiatry service provision, for information.

Lynda Bradford introduced the report which set out the national direction of travel in the podiatry profession and how Orkney intended to react.

Morven Gemmill advised that Orkney was behind the curve in terms of separating out its clinical podiatric service and personal footcare, for which there were compounding reasons. Clinicians were working with complex presentations and scarce resource was also being required to deliver basic personal footcare.

Working with Third Sector colleagues, foot health practitioners would undertake footcare services which folk could not do themselves or where they chose that service. Where there was a clinical requirement, individuals could contact the service and be triaged by a registered podiatrist. Training would be provided for health and social care colleagues to identify any changes in what a healthy foot would look like.

Subsequently, the new service provision could potentially provide capacity to meet demand and not increase the clinical workforce. Diabetes numbers in Orkney were higher than Lothian and Shetland, as well as child obesity levels, and those two factors alone had significant implications for foot health, as did the prevalence of Motor Neurone Disease and Multiple Sclerosis.

It was made very clear that channels of communications would be kept open, with anyone previously receiving personal hygiene services through the podiatry service who experienced a change in their footcare and wanted to come back into system, being reviewed.

Davie Campbell sought further information on the Third Sector involvement and logistics with provision on the outer isles. Morven Gemmill advised that discussions were held with the Isles Wellbeing Co-ordinators to help with training through the OrkPod Forum. As a direct consequence of freeing up capacity in the clinical podiatry service, a peripatetic podiatry service to the isles was being piloted, aimed at individuals with very high, complex conditions who could access the service on the mainland. The introduction by Age Scotland of foot health practitioners would also provide support.

Councillor Rachael King sought assurance on clinical responsibility and the potential blind spot on the impact on finances and resources, given the break in service during the pandemic for some people with low and medium risks, whose condition may have deteriorated. Morven Gemmill gave assurance that the personal footcare training given to colleagues in the Third Sector would help identify any changes in skin colour, pulse or condition and this would provide a route in for review by a podiatrist.

The cost of not managing active foot disease in terms of health economics was staggeringly high, which included prescribing, hospital admission and life limiting changes. Known numbers of people who potentially did not require podiatry and managed personal hygiene footcare themselves equated to approximately 250 hours of a qualified clinician's time, every six weeks, which could be freed up, which was more than one full-time podiatrist per annum.

Lynda Bradford provided further reassurance in managing the transition through comprehensive training and confirmed that what was required was not dissimilar to other tasks which health and social care staff were regularly observing and reporting on.

Councillor Jean Stevenson queried the length of training, which Morven Gemmill suggested was no more than one day for personal hygiene services. Age Scotland were looking at putting their staff through a foot health practitioner programme, which could take up to 12 months, but was more than just personal hygiene, capturing basic footcare health up to low risk podiatry. Guidance provided to people who were no longer eligible for podiatry services was very detailed, including how to look after their feet and any basic equipment required.

Martha Gill questioned the communications plan with other health and social care teams and if there was a plan to explain the change to practice nurses and GPs. Care at home staff would receive training as part of their employment. Regarding risk and equality, Martha Gill suggested there might be an equality implication where someone had a personal hygiene need, such as flexibility, but had no means to pay for private footcare, and no home care service was currently provided or available through the Third Sector in that particular area.

Morven Gemmill confirmed that letters were ready to go to everyone in the personal footcare group, which included signposting to Third Sector organisations and other available services, for which training was complete. Communications would also be passed to practice managers for cascading, as well as a blog on NHS Orkney's website. As not everyone was known to the health and social care service at the moment, if there was an equality or socio-economic impact, such as no flexibility, this became a personal care task, so would be an issue for service provision or a self-directed support payment.

Janice Annal referred to the increasing number of patients deteriorating to active foot disease during the break in service, and queried how the effects of that would be monitored going forward. Morven Gemmill confirmed that, sadly, many folk had declined during the Covid pandemic when access to services was reduced or not available, and some folk who were waiting well had subsequently deteriorated. This was a pressure point right across Scotland and not just locally. She stressed again that anyone known to the system will get a letter and, should there be any change in basic footcare requirements, or more pain in a foot or a skin tear not healing, there were routes into community nursing, primary care and podiatry services. Surveillance and screening programmes were also undertaken following diabetes diagnosis, for example, which could result in an escalation to the appropriate service.

Councillor Ivan Taylor sought clarification on the provision of training, given that the paper was for noting, therefore the new service provision was going ahead. Letters going out to folk in the service had been mentioned, and he was concerned there would be a gap between those letters being received saying existing services were stopping and when they could access services through other means. It was clarified that training had already been completed, with the podiatry service able to refer people to members of the OrkPod Forum. The training element still to be completed was for care home and care at home staff.

The Board noted:

**14.1.** The national direction to remove personal footcare from Podiatry provision.

**14.2.** The plans to take forward that direction locally including the creation of the OrkPod Forum.

**14.3.** The impact for those who had been in receipt of lower level Podiatry services.

### **15. Date and Time of Next Meeting**

It was agreed that the next meeting be held on Wednesday, 22 February 2023 at 14:00 in the Council Chamber, Council Offices, Kirkwall.

### **16. Conclusion of Meeting**

There being no further business, the Chair declared the meeting concluded at 10:55.