



Stephen Brown (Chief Officer)

Orkney Health and Social Care
Partnership

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Agenda Item: 3

Orkney Integration Joint Board

Wednesday, 19 April 2023, 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 Joanna Kenny (all via Microsoft Teams).

Non-Voting Members:

Professional Advisers:

- Stephen Brown, Chief Officer of the Integration Joint Board.
- Dr Kirsty Cole, General Practitioner representative, appointed by NHS Orkney.
- Sharon-Ann Paget, Acting Chief Social Work Officer of the constituent local authority, Orkney Islands Council.
- Sam Thomas, Nurse representative, employed by NHS Orkney (via Microsoft Teams).
- Peter Thomas, Section 95 Officer of the Integration Joint Board.

Stakeholder Members:

- Janice Annal, Service User Representative (via Microsoft Teams).
- Morven Brookes, Third Sector Representative (via Microsoft Teams).
- Jim Love, Carer Representative.
- Ryan McLaughlin, Staff-side Representative, NHS Orkney (via Microsoft Teams).
- Danny Oliver, Staff-side Representative, Orkney Islands Council.
- Frances Troup, Head of Community Learning, Leisure and Housing, Orkney Islands Council.

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 Swannie, Head of Strategic Planning and Performance/Interim Head of Children, Families and Justice Services.
- Shaun Hourston-Wells, Project Manager.

Orkney Islands Council:

- Pat Robinson, Service Manager (Accounting) (for Items 1 to 10).
- Karen Bevilacqua, Solicitor.
- Emma Chattington, Interim Senior Organisational Development Adviser (for Items 12 to 14).

NHS Orkney:

- Anthony McDavitt, Director of Pharmacy (NHS Orkney and NHS Shetland) (for Items 3 to 18) (via Microsoft Teams).
- Steven Johnston, Chair, Joint Clinical and Care Governance Committee (via Microsoft Teams).
- Morven Gemmill, Lead Allied Health Professional.
- Hannah Casey, Public Health Manager (for items 1 to 11).

Observing

Voting Member:

- Meghan McEwen, NHS Orkney (via Microsoft Teams).

Chair

- Issy Grieve, NHS Orkney.

1. Apologies

The Chair welcomed everyone to the meeting, particularly Peter Thomas, Sharon-Ann Paget and Ryan McLaughlin, who were attending their first meeting of the Board as the Chief Finance Officer, Acting Chief Social Work Officer and NHS Orkney's staff representative, respectively. The Chair also welcomed Steven Johnston and Hannah Casey, who would be presenting reports later in the meeting.

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.

Although apologies for absence had been tendered on behalf of Meghan McEwen, with Joanna Kenny attending as a proxy, due to a change in circumstance, Meghan McEwan was observing the meeting.

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

- Dr Louise Wilson, Secondary Medical Care Practitioner representative, employed by NHS Orkney.
- Maureen Firth, Head of Primary Care Services, Orkney Health and Social Care Partnership.

2. Declarations of Interest

There were no declarations of interest intimated in respect of items of business to be discussed at this meeting.

3. Appointment of Members

There had been previously circulated a report setting out appointments to vacancies on the Integration Joint Board, together with re-appointment of existing members, for consideration.

Hazel Flett advised that the Public Bodies (Joint Working)(Integration Joint Boards) (Scotland) Order 2014, which regulated membership of integration joint boards, stated that the Board must comprise voting members, nominated by the health board and the local authority, together with various non-voting members, who were holders of key posts or represented groups with an interest in the work of the integration joint board. The Order also allowed for the appointment of additional members as the Board saw fit, with the only stipulation being that those additional members could not be a councillor or a non-executive member of the health board.

The Integration Scheme set out the detailed membership of the Board, which included three voting members from each of the health board and the Council, together with non-voting members which, locally, included a housing representative.

With the exception of the Chief Officer, the Chief Finance Officer and the Chief Social Work Officer, who were members of the Board by virtue of Regulations and the post they held, all other appointments to the Board were for an initial period of two years and could be reappointed for a further term.

The table at section 4.1 of the report listed those appointments which were made by the relevant authority or by virtue of the post, for example the Chief Officer, and set out the date of appointment, together with date of reappointment, where applicable.

The table at section 4.2 of the report listed those appointments which required to be made by the Board.

Previously, the Board considered any vacancy when it arose. Going forward, it was proposed that the Board would receive regular reports to ensure appointments and reappointments were made in accordance with the Order and the Integration Scheme.

Accordingly, the Board was asked to consider the reappointment of three non-voting members whose initial term of office had now expired. Section 5 of the report set out details of current vacancies on the Board, namely the Chief Finance Officer and the Chief Social Work Officer. As stated previously, both were members by virtue of their post and the Board was therefore asked to note the appointment of Peter Thomas as Chief Finance Officer and Sharon-Ann Paget as Acting Chief Social Work Officer.

The Integration Joint Board noted:

3.1. That, in terms of the Integration Scheme, membership of the Board comprised six voting members, as follows:

- Three elected members of the Local Authority.
- Three non-executive directors of the Health Board, although article 3(5) of the Integration Joint Board Order permits otherwise if necessary.

3.2. That the Integration Scheme allowed for various co-opted non-voting members, as follows:

- The Chief Officer of the Board.
- The Chief Finance Officer of the Board.
- Senior clinicians including:
 - A registered medical practitioner whose name is included in the list of primary medical services performers prepared by the Health Board in accordance with Regulations made under section 17P of the National Health Service (Scotland) Act 1978.
 - A registered nurse who is employed by the Health Board or by a person or body with which the Health Board has entered into a general medical services contract.
 - A registered medical practitioner employed by the Health Board and not providing primary medical services.
- The Local Authority's Chief Social Work Officer.
- A patient/service user representative.
- A carer's representative.
- A representative of the third sector.
- A staff representative from each of the Parties.

3.3. That the Orkney Integration Joint Board had agreed to appoint a housing representative.

3.4. That, with regard to the period of office, the Integration Scheme stated that all appointments, with the exception of the Chief Officer, the Chief Finance Officer of the Board and the Chief Social Work Officer, who were members of the Board by virtue of the Regulations and the post they held, would be for a period of two years.

3.5. That, in addition, individual Board appointments would be made as required when a position became vacant for any reason, and that any member of the Board could be appointed for a further term.

3.6. The undernoted appointments:

- Chief Finance Officer – Peter Thomas – with effect from 17 April 2023.
- Chief Social Work Officer (Acting) – Sharon-Ann Paget – with effect from 20 March 2023.

The Board **resolved**:

3.7. That the undernoted members be re-appointed for a period of two years:

- Patient/service user representative – Janice Annal.
- Staff representative (Orkney Islands Council) – Danny Oliver.
- Housing representative – Frances Troup.

4. Minute of Previous Meeting

There had been previously circulated the draft Minute of the Meeting of the Integration Joint Board held on 22 February 2023.

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

5. Matters Arising

There had been previously circulated a log providing details of 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 a paper would be presented to the June meeting of the Board, Lynda Bradford would provide a short update in respect of the proposed new Kirkwall care facility.

Due to the timing of meetings, no update was available in respect of the recent joint inspection of Adult Support and Protection services, however Stephen Brown undertook to keep the Board, as well as Orkney Islands Council and NHS Orkney, apprised of progress with the action plan, as it was a joint inspection of delegated services.

Lynda Bradford advised that progress with the new Kirkwall care facility was slightly behind schedule, due to a number of factors, although it was anticipated that a site visit could be planned for late summer. Kirkwall and St Ola Community Council would be approached regarding naming of the facility, with a proposal to undertake the same approach as with Hamnavoe House, where the local primary schools would be invited to submit names for consideration.

Morven Gemmill provided a short update on Getting it Right for Everyone (GIRFE), including co-designing a pathway for frailty.

In response to a query from Davie Campbell, Shaun Hourston-Wells confirmed that a letter had been sent to the Scottish Government regarding climate change reporting duties and a response was awaited.

Janice Annal joined the meeting, via Microsoft Teams, during discussion of this item.

6. 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 24 January 2023, to enable the Board to seek assurance.

Steven Johnston extended his thanks for being invited to attend the Board, as Chair of the Joint Clinical and Care Governance Committee, with a view to strengthening links.

Regarding the approved Minute of the Joint Committee on 24 January 2023, Steven Johnston advised that the terms of reference and workplan were considered at the previous meeting of this Board, work continued on a training plan for the High Dependency Unit and proposals for both a public and a carer representative on the Joint Committee were being considered.

The Joint Committee had subsequently met in early April and key points to bring to the Board's attention were as follows:

- Mental Health Assurance Report – the mental health transfer bed continued to present challenges, with the current model unsustainable due to the number of users and the knock-on effect for clinics the following day. A new model was being explored.
- Care Home and Care at Home – the agenda was currently considered “health heavy”, therefore the agreed workplan introduced more reports from the social care and social work side, in order to provide assurance to this Board. Assurance reports in respect of Care Homes and Care at Home would feature on alternate agendas.
- Pharmacy Annual Report – this was a very comprehensive report, including aspirations for the future, to align with the Clinical Strategy.
- Public Health – an update was provided in relation to inequalities and screening programmes across Orkney, although performance tended to be better than the Scottish average and, overall, credit to the public for taking up clinical appointments.

Lynda Bradford reported that a part-time GP with Specialist Interest (Dementia), was expected to go live within the next 10 days.

7. Strategic Planning Group

There had been previously circulated the approved Minute of the Meeting of the Strategic Planning Group held on 2 February 2023, together with the unapproved Minute of the Meeting held on 9 March 2023, to enable the Board to seek assurance.

Councillor Rachael King referred to the meeting held on 2 February 2023, where she welcomed three new members, namely Jim Love, Ryan McLaughlin and Chief Inspector Scott Robertson. Main items of discussion were around frailty and GIRFE, together with a discussion paper from Jim Love on the whether there was an acceptable balance between care at home and care in a residential setting for Orkney's most vulnerable older people.

The meeting held on 9 March 2023 focussed on the latest iteration of the Strategic Plan Action Plan, with the outcome being to establish breakout groups, outwith the cycle of meetings, to review the action plan priorities. The Strategic Planning Group also received an update on the carers' conference planned to take place on 18 May 2023 at the Pickaquoy Centre. Maureen Swannie had advised that she was part of a national group looking at strategic planning guidance and that Michael Ross, Integration Governance and Evidence, Scottish Government, would be invited to the next meeting to set out his findings on how Strategic Planning Groups operated across Scotland.

With a number of new people on the Board, Davie Campbell asked for information on the remit of the Strategic Planning Group, its workplan and business cycle, together with membership. Councillor King responded that the Strategic Planning Group was the "engine room" of the Integration Joint Board, being a collegiate group, which fed into the Strategic Commissioning Plan, looking at innovative service delivery solutions. Stephen Brown commented further that the group was not as structured in agenda management as some other groups, for good reason. However, the group had addressed three of the four strategic priorities within the Strategic Plan, a recent example being the helpful discussion led by Jim Love on the balance between care at home and care home provision.

8. Joint Staff Forum

There had been previously circulated the unapproved Minute of the Meeting of the Joint Staff Forum held on 9 March 2023, to enable the Board to seek assurance.

Stephen Brown, one of three co-Chairs, had chaired the meeting and highlighted three main issues, namely:

- Feedback from the Children and Families team following recent press coverage on former employees as a result of Stephen Brown personally meeting 27 members of the team, on an individual basis, and his commitment to undertake a similar exercise with other staff teams.
- Health and safety and promoting positive behaviours, particularly in light of increased aggression and violence by service users in care settings as a result of pandemic restrictions – training would be provided to staff on how to de-escalate situations, including local people being trained to provide the training.
- Service accommodation requirements – as a result of following COVID restrictions and moving into the new Balfour Hospital, there was still some work required in order to maximise use of space.

As co-Chair, Ryan McLaughlin had nothing further to add, other than his perception with regard to accommodation for clinical services within the Balfour Hospital, where one service was displaced to accommodate another.

As the third co-Chair, Danny Oliver asked for an action to be included on the Matters Arising Log in respect of producing a one page document, specifically for Orkney Islands Council staff, regarding policy and procedure on raising concerns around safety, noting that, although lengthy, this was currently available for NHS Orkney staff.

In response to a query from Councillor Jean Stevenson regarding use of the old health centre for vaccination purposes, Stephen Brown confirmed this facility was no longer in use, with NHS Orkney looking to dispose of or repurpose the building.

9. Appointments to Sub-committees

There had been previously circulated a report setting out proposals for appointments to the Joint Clinical and Care Governance Committee and the Performance and Audit Committee, for consideration.

Hazel Flett advised that, in terms of the Integration Scheme and the Board's Standing Orders, the Board was permitted to appoint various sub-committees.

Section 3 of the report set out the background to the establishment and membership of the Joint Clinical and Care Governance Committee (JCCGC) and the Performance and Audit Committee.

Section 4 referred to the revised terms of reference of the JCCGC, approved earlier in 2023, with the Board being requested to approve the reappointment of the Chair, Steven Johnston, and the appointment of NHS Orkney's Vice Chair, Rona Gold, noting that the Board of NHS Orkney had already approved those appointments.

As the Chair of the Integration Joint Board (IJB) reverted to a Council appointment in May 2023, in accordance with the Terms of Reference, a substitute required to be appointed. Accordingly, the Board was asked to approve the appointment of Councillors Jean Stevenson and Ivan Taylor to the JCCGC, together with one of the Council's three proxy voting members, Councillors Lindsay Hall, Mellissa-Louise Thomson or Heather Woodbridge, as the substitute for the Chair of the IJB.

The Board was then requested to appoint one of the Councillors as the Council's Vice Chair of the JCCGC – Councillor Jean Stevenson currently held this role being appointed in June 2022.

Current membership of the Performance and Audit Committee comprised the four voting members of the IJB, not including the Chair and Vice, together with two non-voting members. There was currently one vacancy, following the retiral of Jim Lyon, with the other non-voting member being Frances Troup, who had served on the committee since it was established in 2016.

Given the recently expanded remit of the committee to include performance, it was suggested that membership be increased to three non-voting members. For obvious reasons, the Chief Officer and the Chief Finance Officer were excluded from membership. Since the report was circulated, in addition to Ryan McLaughlin and Jim Love expressing an interest to serve on the Committee, further expressions of interest had been received from Dr Kirsty Cole, Sam Thomas and Danny Oliver.

As indicated earlier, with the Chair of the IJB reverting to a Council appointment next month, chairing of the Performance and Audit Committee would revert to an NHS appointment, namely one of the two voting members.

The Board **resolved**:

9.1. That the following appointments to the Joint Clinical and Care Governance Committee be approved:

- Chair – Steven Johnston.
- NHS Orkney's Vice Chair – Rona Gold.
- Councillor Jean E Stevenson.
- Councillor Ivan A Taylor.
- Councillor Heather N Woodbridge, Council proxy voting member as a substitute for the Chair of the IJB.
- OIC's Vice Chair – Councillor Jean Stevenson.

9.2. That membership of the Performance and Audit Committee be extended from two non-voting members to three.

Although further expressions of interest were noted, it was clarified that membership of the Performance and Audit Committee must comprise members of the Integration Joint Board – officers in attendance were ineligible, although they could attend to provide information in relation to their respective service areas.

Due to other commitments, as well as requiring agreement from partners, which was not yet available, Dr Kirsty Cole and Danny Oliver withdrew their interest in becoming members of the Performance and Audit Committee.

The Board thereafter **resolved**:

9.3. That, in addition to the four voting members, the following non-voting members be appointed to the Performance and Audit Committee:

- Jim Love.
- Ryan McLaughlin.
- Sam Thomas.

10. Annual Budget 2023/24

There had been previously circulated a report presenting the funding allocations from NHS Orkney and Orkney Islands Council for 2023/24, for consideration.

Peter Thomas summarised the main highlights, including accumulated savings targets, limited recurring savings achieved to date and the baseline budget for 2023/24, noting that the increases were in line with Scottish Government requirements, as set out in sections 6.1.2 and 6.2.4 of the report in relation to NHS Orkney and Orkney Islands Council respectively. However, work was required with both partners to deliver savings in order to achieve a balance budget.

Davie Campbell, while appreciating the high-level baseline figures, suggested that the Board accept, rather than approve, the budget, with the first iteration of the detailed cost centres being considered by the Performance and Audit Committee. Peter Thomas advised that, with financial year 2023/24 already commenced, the budget should be approved. The baseline allocations were set by each of the

partners, but he was content for the Performance and Audit Committee to be made aware of the detail below the baseline figures.

From a Council perspective, Pat Robinson advised that section 6.2 of the report set out how the Council's allocation was calculated, the requirements from Scottish Government and noting that approximately £3 million had recently been invested in services which the Board commissioned. For NHS Orkney, the Scottish Government had indicated that health boards must deliver an uplift of 2% over 2022/23 agreed recurring budgets. Information provided in Annexes 3 and 4 gave those commitments to the Board.

Joanna Kenny also believed that the paper should be submitted to the Performance and Audit Committee for scrutiny – although a well-presented report, there was insufficient detail in order to approve the recommendations. On being asked by the Chair what further detail she required, Ms Kenny responded that she required the full budget and time to look through.

Davie Campbell suggested that, if approving the baseline, this was, in effect, approving the allocation from each of the partners. If approving the budget, this would need more detail, especially where savings were required.

Stephen Brown advised that the settlements from both NHS Orkney and Orkney Islands Council were in keeping with the Scottish Government's aspirations. He strongly urged the Board to accept that settlement, while sharing concerns regarding what that meant in reality for known pressures which, he confirmed, would be built into regular reporting to the Board, rather than the Performance and Audit Committee.

The Board thereafter noted

10.1. That, although the Board was anticipating achieving a break-even position with additional funding being required from the Council for financial year 2022/23, this was subject to change as year-end processes had not yet been completed.

10.2. The original savings target over the three-year period 2020/21 to 2022/23 which was set at £4.2 million, with £2.4 million attributable to NHS Orkney delivered services and £1.8 million attributable to Council delivered services.

10.3. That only £259,400 of savings had been identified on a recurring basis within services commissioned to the Council.

10.4. That, for financial year 2022/23, the accumulated savings target for NHS Orkney of £2.4 million had not been achieved.

10.5. That, within services commissioned to the Council, no efficiency savings were requested in preparation of the 2023/24 budget.

10.6. That, although no additional recurring savings target had been set against the NHS delegated service budgets for 2023/24, the Board was expected to deliver, as a minimum, £2.4 million of the unachieved recurring savings for NHS Orkney commissioned services over the next five years, commencing in 2023/24, on its delegated budgets.

10.7. That, in addition, there would be a separate recurring savings target set against the set aside budget for 2023/24.

The Chair called for a vote, the result of which was five of the six voting members were prepared to accept the recommendation that the baseline budget be approved, subject to the caveat provided by Stephen Brown that known pressures and potential savings be incorporated within regular reporting to the Board. Joanna Kenny, as a proxy member and not a regular attendee, was not prepared to accept the recommendation as she could not understand why only the baseline budget was presented with no detail.

The Board thereafter **resolved**:

10.8. That the baseline budget for financial year 2023/24, amounting to £61,273,000, as detailed in Annexes 2 to 4 of the report circulated, be approved, noting that:

- The increases were in line with Scottish Government requirements as explained in sections 6.1.2 and 6.2.4.
- Known pressures and potential savings would be incorporated within regular reporting to the Board.

10.9. That work must be undertaken with both partners with the aim of delivering savings in order to deliver a balanced budget.

11. Public Health Annual Report

There had been previously circulated a report presenting the Public Health Annual Report for 2021/22, for scrutiny.

Hannah Casey advised that the Public Health annual report was split for convenience between health protection, screening, resilience and health improvement and recovery. Within health protection, there was an increase in health protection activity, as well as an increase in the number and variety of notifiable infections being seen with the easing of restrictions for the COVID-19 pandemic. This was alongside significant COVID-19 case numbers commencing in Autumn 2021 and continuing in waves with gradually increasing peaks into the spring of 2022 and included management of outbreaks in various settings during that time.

For Scottish vaccination programmes, where data was available, Orkney's performance tended to be generally good and uptake for all components of the childhood immunisation programme was above the Scottish average. Additional focus was required on increasing vaccine uptake amongst teenagers and in the influenza vaccination programme for those with a clinical risk and pregnant women.

Within the Scottish adult screening programmes, the uptake rates for the Abdominal Aortic Aneurysm, Bowel Cancer and Breast Cancer screening programmes were above national targets. The Cervical Screening programme uptake rates for women aged 25-49 years and 50-64 years in Orkney were higher than the Scottish average of 66.3% and 74.4% respectively but below the Scottish standard of 80%. Where available, data for the pregnancy and newborn screening programme indicated a high uptake had been achieved.

Whilst the report was split into sections of work, it should be noted that many staff in the department spanned those areas of work. Throughout 2021/22, the health improvement team was involved in supporting the health protection response impacting on the broader public health work. The report outlined the wide health improvement-based work under the six public health priorities set out by Scottish Government. Notably, there were two screening inequalities projects ongoing during the reporting year, one working in collaboration with NHS Shetland considering barriers to screening experience with people with a learning disability and the other in tandem with NHS Dumfries and Galloway considering barriers to cervical screening with women who had experience of intimate partner violence.

Throughout this time, despite COVID-19, the Nordhaven Clinic, the sexual health clinic, continued to run and pre-school orthoptic vision screening was offered across Orkney. COVID-19 highlighted a need for psychological wellbeing support for those struggling with the impact of the pandemic. During the year, until closure in April 2022, the NHS Grampian Psychological Resilience Hub offered support to anyone in Orkney, both staff and public, with this support advertised by the Communications Team.

Smoking cessation support in Orkney continued throughout the year, but the specialist service run through Public Health moved to telephone or Near Me appointments. Whilst Orkney performed comparably to Scotland in quarter one of 2021/22 regarding Local Delivery Plan targets for those quitting smoking, it should be noted this would drop through the year due to reduced staff capacity to deliver the service.

In relation to financial inclusion, the 'Worrying about Money?' leaflet was developed by the Independent Food Aid Network, Orkney Citizen's Advice Bureau, Social Security Scotland and NHS Orkney Public Health Team. Subsequently, 50 frontline staff across Orkney were trained to use the leaflet to support people struggling with money worries or financial crisis. Lastly, during 2021/22, the NHS Orkney Public Health team worked closely with dietetics, having focussed the healthy weight and physical activity work on implementation of the national standards for weight management services and the Type 2 Diabetes Framework. This included work such as implementation of an adult weight management pathway, establishment of a health psychology service, training of professionals in raising the issue of child healthy weight and providing access in Orkney to a pre-diabetes education and support app.

To finish, staff demonstrated determination, resilience and flexibility in their ability to respond to the changing priorities and pressures throughout the reporting year. It was only through their dedicated hard work that the department was able to remobilise and continue to deliver the services, projects and programmes discussed above. This work would, and had, continued into 2022/23 to further the effort to reduce inequalities and improve the health and wellbeing of the population in Orkney.

Both the Chair and Stephen Brown commented on the amount of information contained in the annual report and the potential influence on future commissioning decisions for the Board. Of particular note was the graph at the top of page 29 highlighting the percentage change in population age group between 2001 and 2021, where the 75 and over age group had increased by 72.7% yet the 25 to 44 age

group had decreased by 5.1%. As previously mentioned, the staffing crisis was not unique to Orkney, whereby the number of working age people available to support the aging population was declining.

Dr Kirsty Cole referred to vaccination programmes moving from GP practices to the responsibility of the Board and asked that future reports include comparative data to determine whether that shift had been successful. It was agreed that this be added to the Matters Arising Log.

In response to a query from Jim Love regarding the possibility of advertising shingles vaccination, Stephen Brown agreed to pass this to NHS colleagues.

The Board scrutinised the Public Health Annual Report for 2021/22, attached as Appendix 1 to the report circulated, and took assurance.

12. Orkney Health and Care Workforce Plan

There had been previously circulated a report presenting progress with outcomes contained in the Orkney Health and Care Workforce Plan 2020 to 2022, for scrutiny.

Maureen Swannie advised that the 2020-2022 Orkney Health and Care Workforce Plan was approved by the Board in December 2020 and included an action plan that detailed 12 priorities and associated actions.

An Internal Audit of workforce planning, undertaken as part of the Board's internal audit plan for 2022/23, included a recommendation that an update on progress made in relation to the Workforce Plan Action Plan be reported to the Board.

Appendix 1 highlighted the status of actions as at March 2023, whereby a number of actions still required to be completed or were ongoing as "business as usual". Some actions were hampered due to staffing pressures but were now on track. Other actions with a learning and development theme would be progressed as part of recommendations from the Learning Needs Analysis which was currently underway, with Phase 1 due to complete in the next few weeks.

Councillor Rachael King referred to the number of priorities which had a reliance on digital connectivity, however a group of staff relied on information being posted on work noticeboards thereby struggling to access and experience skills development. Lynda Bradford confirmed that, although there was a reliance on paper-based communication for Care at Home staff, smart phones were available for recording and monitoring visits.

In response to a query from Councillor Rachael King regarding the status of Action 7 (Scottish Government's response to the report of the independent review of adult social care), Stephen Brown confirmed that the action related, in the main, to the Feeley review and that things had moved on considerably since that report was published, hence the status for the action being marked as closed.

In response to a query from Danny Oliver regarding incomplete actions, Maureen Swannie confirmed those would be picked up in the Integrated Workforce Plan, including input from the Third Sector, with meeting dates already diarised to progress.

Dr Kirsty Cole referred to Action 12, Develop Primary Care services in line with the Primary Care Improvement Plan, and advised the Board that, during the last two rounds of Primary Care Improvement Fund allocations, Orkney received zero allocation as there was a perception of significant underspends and/or reserves that could be utilised. The action plan suggested that no funding was available, therefore something was not quite right. One example was pharmacotherapy, which was due to transfer from GP practices to the health and social care partnership on 1 April. The transfer had not happened yet with GPs continuing to provide the service, but this would not continue if no funding was available.

Stephen Brown advised that all boards were impacted early last year regarding the Primary Care Improvement Fund, particularly in filling roles, with one example being physiotherapy. Integration Joint Boards had accumulated reserves through slippage, with posts not being filled for the whole of the financial year. Locally, managers were considering how to spend non-recurring funding, with the same challenges being experienced elsewhere. Discussions were required with the Scottish Government to determine how to manage the gap with GPs. Dr Kirsty Cole thanked Stephen Brown for the explanation, however reserves/underspends were not recurring costs – services required to be transferred to the Integration Joint Board, however time was being spent thinking how to spend small pockets of money to whittle these down, but there was still no permanent funding.

Ryan McLaughlin referred to various references throughout the action log to health and wellbeing, which rested primarily with the partner organisations, and it appeared that no resources were available. Stephen Brown confirmed that some data and proxy measures were available to assess general health and wellbeing of staff, although the struggle remained with collating the information to get an organisation wide position. Conversations would be held with HR colleagues to discuss measures.

Anthony McDavitt referred back to the Primary Care Improvement Fund issue and his understanding that very different methods were used in commissioning services. He offered to speak with colleagues to better understand delivery models as there was a possibility Orkney was not receiving the right income from the Scottish Government.

The Integration Joint Board scrutinised progress made in respect of actions detailed in the Orkney Health and Care Workforce Plan 2020-2022, attached as Appendix 1 to the report circulated, and obtained assurance that the expected outcomes had been met.

13. Market Facilitation Statement

There had been previously circulated a report presenting the updated market facilitation statement, for consideration, together with an Equality Impact Assessment and an Island Communities Impact Assessment.

Shaun Hourston-Wells advised that market facilitation was part of the strategic commissioning process and aimed to inform, influence and change the service delivery market to provide a wider range of options for service users.

The Market Facilitation Statement did not set out a description of all services that were formally commissioned or purchased through Service Level Agreements but was intended to show areas where there was scope to provide services differently, in a way that might enable third or independent sector service providers to develop their role in the overall health and social care sector.

For that reason, key information provided in the document focused on the areas of pressure in the health and social care system, the reasons for this, and the potential scope for development.

On 29 October 2020, the Board considered and approved a Market Facilitation Statement for the period 2019 to 2022, to align with the Strategic Commissioning Plan. Whilst the focus of the Market Facilitation Statement was unchanged from the previous iteration, wording was substantially revised in an attempt to make the document more approachable and comprehensible. This reflected the approach in the most recent iteration of the Strategic Plan, along with other relevant strategies and policies.

The Board resolved that the Market Facilitation Statement 2023-2026, attached as Appendix 1 to the report circulated, be approved for publication.

14. Equality Outcomes and Mainstreaming

There had been previously circulated a report presenting an update on progress made against the four equality outcomes, together with efforts to mainstream the equality duty, for scrutiny.

Shaun Hourston-Wells advised that an amendment to Schedule 19 of the Equality Act 2010 and the Equality Act 2010 (Specific Duties) (Scotland) Amendment Regulations 2015 placed a single equality duty on public authorities, including Integration Joint Boards (IJBs), covering the nine protected characteristics of race, sex, disability, sexual orientation, religion and belief, age, gender reassignment, pregnancy and maternity and marriage and civil partnership. That amendment required IJBs to report on efforts to mainstream the single equality duty, along with progress made against their published equality outcomes.

The single equality duty required public authorities to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations across the protected characteristics.

In 2020, the Equality and Human Rights Commission clarified the expected scope and subject matter of Equality Outcomes. Principally, Outcomes should be both proportional and relevant, inasmuch as they must describe areas and themes over which IJBs had an influence. The Outcome was not what the public body did, but the changes or effects resulting from it, which may be for individuals, groups, families, organisations, or communities.

On 21 April 2021, the Board adopted the following Equality Outcomes, which sought to reflect the most pressing issues affecting people within the nine Protected Characteristics Groups in Orkney, including characteristics that fell within the broader description of “peripherality”:

- Unpaid Carers Outcome.
- Young Person's Mental Health Outcome.
- Access to Technology Outcome.
- Social Isolation of Older People Outcome.

The COVID-19 pandemic presented a number of challenges to service providers over the last few years, hampering efforts to address some inequalities. Indeed, the pandemic had undoubtedly deepened some inequalities, not least those that the Unpaid Carers, Young Person's Mental Health, and Social Isolation of Older People Outcomes sought to address.

Whilst some significant progress had been made since development of the Equality Outcomes, it was acknowledged there was more still to do. Momentum needed to be maintained in order to continue to improve and adapt to ongoing challenges and inequalities faced by many in the community.

Councillor Rachael King referred to section 4.1, Unpaid Carers Outcome, and queried whether the increase in numbers of unpaid carers was as a result of increased publicity or demographics. Shaun Hourston-Wells advised the figures were received from Crossroads, who confirmed that a number of people had come forward as a result of hearing news items on the local radio or through social media.

Councillor Jean Stevenson queried whether Komp machines were still being rolled out. Lynda Bradford confirmed that the service continued to loan machines to families to see whether it worked for them, with many families then purchasing their own device and returning the machine for another family to borrow and test.

The Integration Joint Board scrutinised the Equality Outcomes and Mainstreaming Report, attached as Appendix 1 to the report circulated, and obtained assurance that progress was being made against the equality outcomes and that efforts to mainstream the equality duty were satisfactory.

15. Risk Management Strategy

There had been previously circulated a report presenting a refreshed risk management strategy, for consideration.

Shaun Hourston-Wells advised that the Board was required to have an approved Risk Management Strategy, which ensured that processes were in place to identify significant risks to its corporate objectives and was integral to the decision making, planning, performance reporting and delivery processes of the IJB. The IJB's Risk Management Strategy was approved in October 2018 and most recently refreshed in February 2021.

An internal audit, reported to the former Audit Committee in March 2022, recommended that "the Risk Management Strategy should be updated to remove inconsistencies to ensure that appropriate, timely review processes are implemented and confirm the approach to ensure risk approach, analysis and relevant mutual risks are shared appropriately with and by the IJB to provide for effective partnership working on risk".

On review, the main body and narrative of the strategy was consistent with the duties and responsibilities of the IJB and, as such, no significant changes were proposed. However, Appendix 1 of the Strategy, the Classification section, showed a number of examples where the scale used was unclear, or where there were significant inconsistencies, reflecting the comments in the internal audit. Accordingly, this section had been extensively revised.

The Integration Joint Board noted:

15.1. That the Risk Management Strategy had been revised to respond to a recommendation arising from an internal audit reviewing risk management arrangements, which stated:

“The Risk Management Strategy should be updated to remove inconsistencies to ensure that appropriate, timely review processes are implemented and confirm the approach to ensure risk approach, analysis and relevant mutual risks are shared appropriately with and by the IJB to provide for effective partnership working on risk”.

The Board **resolved**:

15.2. That the revised Risk Management Strategy, attached as Appendix 1 to the report circulated, be approved.

16. Communication and Engagement Strategy

There had been previously circulated a report presenting the updated communication and engagement strategy, for consideration, together with an Equality Impact Assessment and an Island Communities Impact Assessment.

Shaun Hourston-Wells advised that the first Communication and Engagement Strategy was approved in late 2017, with an updated version approved in 2021. This update examined the legislative context of consultation, national and local standards for consultation and engagement, as well as the methodology for dissemination of information and consultation with stakeholders.

The period covered by the previous Strategy (2021-23) saw significant barriers to effective consultation and engagement, not least the restrictions associated with the COVID-19 pandemic, as well as challenging staff resources. Consequently, officers were unable to deploy many of the strategies and methodologies.

Some were repeated in this latest version and, given the much-improved conditions around contact and mixing, officers were optimistic that more effective communication and engagement could be realised during the term of the strategy, however challenges remained around the deployment of staff resources. Whilst every effort would be made to ensure the Strategy was applied, in full, this could only be realistically achieved if additional, dedicated, staff resources were identified.

The Board **resolved** that the updated Communication and Engagement Strategy, attached as Appendix 1 to the report circulated, be approved.

17. Date and Time of Next Meeting

It was agreed that the next meeting be held on Wednesday, 21 June 2023 in the Council Chamber, Council Offices, Kirkwall, noting that a special meeting had been scheduled for 14:00 on Thursday, 25 May 2022.

18. Closing Remarks and Conclusion of Meeting

Issy Grieve reflected that she had become Chair at the same time as the Chief Officer, Stephen Brown, came into post, with all meetings being held remotely on Teams. She had seen significant improvements, although there were challenging times, such as inspection outcomes. However, she fully appreciated the engagement of the Board, where lots of voices having been heard. Although her tenure as Chair would end shortly, she would remain on the Board.

There being no further business, the Chair declared the meeting concluded at 11:40.