

Agenda Item 17

Approved Minutes of Meetings

FALKIRK HEALTH AND SOCIAL CARE PARTNERSHIP NOTES FALKIRK JOINT STAFF FORUM

Thursday 12 January 2023 at 10.30 am

Via MS Teams

Chair: Patricia Cassidy, Chief IJB & Director of Falkirk HSCP

P R E S E N T :

Martin Thom, Head of Integration, Falkirk HSCP (MT)
Gail Woodcock, Head of Integration, Falkirk HSCP (GW)
Linda Robertson, HR Manager Forth Valley NHS
Tracey Gillespie, HR Manager Falkirk Council
Kevin Robertson, Falkirk Council Unite Representative (KR)
Helen Welsh, Falkirk Council Unite (HW)
Gordon Tucker, Unison Representative, NHS Forth Valley (GT)
Roger Ridley, Unison Representative, Falkirk Council (RR)
Robert Clark, NHS Forth Valley, Area Partnership Forum Representative (RC)
Grace Traynor, Falkirk Council GMB Representative (part meeting) (GT)
Elaine Kettings, Chief Nurse, Falkirk HSCP (EK)
Michelle Campbell PA to Chief Officer (MC) (Minutes)

A P O L O G I E S :

Julie McIlwaine NHS Forth Valley HR Manager

I N A T T E N D A N C E

Item 1 Andrew Strickland, Policy Officer, Falkirk HSCP (AS)
Item 2 & 3 Lesley MacArthur, Partnership Funding Coordinator Falkirk
HSCP (LMA)
Item 4 Suzanne Thomson, Senior Service Manager, Falkirk HSCP (ST)
Item 6.1 Scott McKinnon, HR Business Partner, Falkirk HSCP

Item	Action
1. Strategic Plan Outcomes & Presentation	
AS provided the background and timeline of draft strategic plan. A strategic needs assessment (SNA) was completed for the plan.	
Priorities have been developed in consultation with the Strategic Planning Group with a second draft published for consultation next week. The final draft plan will be presented to March IJB for approval.	

Item**Action**

SNA identified the following challenges following the pandemic:-

- Accessing services
- Workforce pressures were frequently highlighted
- Additional demand on unpaid carers
- Cost of living pressures
- Aging demographic

Outcomes and vision are unchanged, priorities have been updated and include 2 new crosscutting priorities. HSCP Locality plans will take forward the right care at the right time concept. Health Improvement and Primary Care Services will transfer into the Partnership localities to address health needs within communities.

A Delivery plan will feed into Strategic Plan with a performance framework to be developed. Locality managers will develop this along with Community Planning Partnership.

Consultation closes on 27 February 2023.

2. **Care Opinion Implementation**

In September 2022 SLT approved subscription to Care Opinion for social care. Care Opinion is a service user experience online platform.

All stories submitted will be anonymous and rated 1 – 5 with 1 being positive and 5 negative. Services will have the opportunity to review the story before being published and feedback will be provided. Information will be collated to inform improvement and good practice. It does not replace the normal complaints service.

Detailed implementation plan has been developed and to be launched in April 2023. A robust training programme will be delivered to staff both internal and external providers staff

All stories are shared with a lead in HSCP/NHS FV. TUs noted this as a positive way of sharing service user experiences. Group welcomed and endorsed the implementation of Care Opinion.

Item

Action

3. **Staff Wellbeing**

Staff wellbeing funding allocated by Scottish Government has been distributed to staff and external providers. Some of the funds will be used to provide fleeces for care at home staff which have the HSCP logo. Personal alarms as well as small robust metal torches and replacement batteries.

Group welcomed communication with staff and endorsed the proposals.

4. **Health & Safety Management Group**

Health & Safety Management Group has recently been established and met for first time on 1 November 2023. There is wide representation across HSCP which will grow as more services integrate into HSCP. The Group is supported by Health & Safety leads from both Falkirk Council and NHS.

The Group scrutinise Health & Safety performance which reports into Senior Leadership Team, Council and NHS Health & Safety Groups. Reporting will continue to be developed by the group.

ST as chair is seeking Council TU nominations from JSF, NHS TU representatives are attending. RR stated he will attend the next meeting. Terms of reference require at least TU representative for the meeting to be quorate. KR will ask Lyn Turner to nominate a representative for Unite.

KR

5. **Minutes of Meeting 12 May 2022**

The last formal meeting of JSF was held on 12 May 2022. A joint meeting with Clacks/Stirling held on 4 August 2022. Minutes from this meeting are still to be circulated. November meeting was cancelled due to system pressures.

Minutes noted as accurate.

5.1. **Matters Arising**

Workforce Plan

The plan was submitted to Scottish Government in October 2022. Update is on today's agenda.

NHS TU Representation

RC noted that there is no substitute available for NHS due to system pressures.

Item

Action

Annual Assurance Statement

This was submitted to IJB.

Integrated Discharge Project

Work is continuing using a workforce planning tool and will be shared for professional overview and TU consultation. RR said he would be happy to be included in the group.

Personal Carers

Job descriptions are being looked at with Pauline Mcgrellis, Claire Chapman and Lana Ray. They are looking at the remit for inclusion of administering medication. Update to be provided for GW next JSF.

Staff Wellbeing Working Group

Update report to be provided for next JSF. MT to pick it up with Evelyn. Noted the good work ongoing for recruitment, however, retention of staff remains a challenge as well as continued low staff morale.

TU input is required with members and to encourage staff to undertake exit interviews, these do not need to be completed with staffs current line manager.

Standing Items

6. HSCP Update

6.1. Recruitment Campaign Update

Homefirst Recruitment Campaign.

Senior Leadership Team agreed funding to develop an immediate recruitment drive to attract frontline home care staff. This was developed with SMK, Paul Surgenor Communications Officer and Homecare Team manager Lana Ray.

"A Career That Cares" tag line and video campaign was launched in December to raise the profile and brand within the community. Materials will be reviewed and updated as the campaign progresses. The event was positive with an increase in personal carer applications and 1700 visits to the HSCP careers page. An app where CVs can be uploaded to website will trial in February 2023.

Item

Action

Case studies with video content of staff in homecare is being developed, will be published on the website, and posted on social media. It will also be included in Scottish Government's recruitment campaign.

RR noted it was good to see the report and acknowledged the market is very competitive. The issue of offering temporary holiday / student workforce contracts was discussed. PC noted the request for this to be considered within previous meetings and asked for this to be considered a priority. It should also include weekend working contracts.

SMK

Pre employment checks can also delay people getting into post quickly. SMK will look at how this could be risk assessed and measures put in place to allow staff to start employment / training whilst checks are completed.

SMK

TG / PC

TG will share the report with CMT/Council for awareness. PC to raise with KL.

6.2 Senior SW/Practitioner Role Update

Recruitment & Retention working group are in consultation at creating Advanced Practitioner and Assistant Team Manager roles. The roles will create a rewarding continuous career pathway to retain experienced staff.

RR expressed concerns on timescales for the consultation. The deadline date is required to meet grading deadline. More work is to be undertaken on the implementation process.

6.3 Workforce Action Plan – Implementation Group

The group will be set up and TUs asked to identify representation. RR happy to be involved.

This a really important piece of work that requires key people to help deliver it.

7. Falkirk Council Updates Budget

Council are considering options and transformational change to achieve savings of £67m over next 4 years. The Strategic Property Review are consulting on building closures.

Item**Action**

Stadium accommodation is nearing completion, Children's Services are moving soon with Denny Town House staff due to move by end of March .

SJC Pay award has concluded with Chief Officers and teachers still outstanding. Teacher strike action continues.

A report to is to be presented to Executive on the public holiday for King's Coronation.

Restructures are ongoing for the Market Team / HR / Benefits Team.

The Partnership remains under significant system pressure which has seen a 60% increase in demand for packages of care. As noted previously staffing remains a challenge and is impacting on business delivery. Teams have shown dedicated commitment during these pressures and a lot of work continues to get people out of hospital

8. NHS Forth Valley Updates**8.1. NHS Forth Valley Escalation**

Scottish Government escalated NHS Forth Valley to level 4. An Assurance Board has been established with external support being provided to ELT. PC / RC are involved in meetings to take forward the improvement plan.

Scottish Government require weekly data on capacity within the system. This information is signed off by Chief Officers and CEXs in NHS and 3 Local Authorities.

Work is ongoing to close additional beds opened to cope with the acute site pressures. A Whole system risk assessment is being undertaken. JLES are delivering beds to help support people out of Acute.

8.2 Coordination of Services into HSCP

We have agreement of transfer of operational management into both HSCPs by both IJBs.

Item

Action

Specialist Mental Health will be strategically planned and managed by Clacks/Stirling HSCP. This does not include Community Mental Health Services.

Primary Care, Out of Hours and Health Improvement will be managed Falkirk HSCP, this also includes the commissioning and contract for primary care services on behalf NHS FV.

9. Feedback from Trade Unions

9.1. Mileage

There is a difference in mileage allowance being paid to staff in NHS and Council under the different terms and conditions. PC to raise nationally.

MT to discuss consultations with TUs/HR to have a clear process for these being undertaken in the future.

10. AOCB

None

FUTURE MEETING DATES

Date	Time	Chair
16 March 2023	3.00 pm	Linda Robertson NHS FV HR
11 May 2023 at Chair	3.00 pm	Tracey Gillespie Falkirk Council HR
6 July 2023 at	10.30 am	Robert Clark APF Representative NHS FV
31 August 2023 at	3.00 pm	Roger Ridley Unison Representative Falkirk Council
26 October 2023 at–	10.30 am	Patricia Cassidy, Chief Officer
21 December 2023 at–	3.00 pm	Linda Robertson NHS FV HR

Note of Meeting

Strategic Planning Group

Friday 16 February 2023 at 3:00pm

Present:

Suzanne Thomson (ST)	Senior Service Manager, Falkirk HSCP(Chair)
Patricia Cassidy (PC)	Chief Officer, Falkirk HSCP
Martin Thom (MT)	Head of Integration, Falkirk HSCP
Margaret McGowan (MMc)	Independent Sector Rep, Scottish Care
Laura McKenzie (LM)	Carer's Representative, Carer Centre
Margaret Petherbridge (MP)	Project Development Manager, Falkirk HSCP
Marlyn Gardner (MG)	Locality Manager, Falkirk HSCP
Lesley Macarthur (LMa)	Partnership Funding Coordinator, Falkirk HSCP
Jennifer Faichney (JF)	Policy Officer, Falkirk HSCP
JamesA Paterson (JP)	Graduate, Falkirk HSCP
Kenny Gillespie (KG)	Head of Housing & Communities, Falkirk Council
Irene McKie (IMcK)	Chief Executive, Strathcarron Hospice
Evelyn Crosbie (EC)	Service User Representative
Philip Heaton (PH)	ADP Coordinator, Falkirk HSCP
Gail Woodcock (GW)	Head of Integration, Falkirk HSCP
Jane Yarrow (JY)	AHP Coordinator, Falkirk HSCP
Gordon MacKenzie (GMac)	Locality Manager, Falkirk HSCP

Apologies:

Agnes McMillan	Carer's Representative, Carer Centre
Fiona Collie	Vice Chair Falkirk IJB
David Herron (DH)	GP Lead, NHS Forth Valley, Falkirk IJB
Claire Chapman (CC)	Locality Manager, Falkirk HSCP
Samantha Goudie	Programme Lead for Realistic Medicine, NHS Forth Valley
Steven Kirkwood (SK)	Chief Finance Officer, Falkirk HSCP
Sara Lacey	Chief Social Work Officer, Falkirk Council
Robert Clark (RC)	Area Partnership Forum Representation NHS Forth Valley

1. STRATEGIC PLAN CONSULTATION AND DELIVERY PLAN

- 1.1. LMac provided an overview and update on current stage of Strategic Plan and a copy of the presentation is attached.

2. CARERS STRATEGY

- 2.1. MP provided an update on the consultation and information gathering which has occurred to inform the revised Carers Strategy.
- 2.2. Information has been gathered and analysed from:
- Online formal consultation during November / December 2022 with specific question to young carers
 - Face to Face consultation session with young carers at Carers Centre
 - Carers Centre survey
 - Short Breaks Service survey
- 2.3. A draft update was presented to carers at Carers Centre. It was agreed that the priorities from the original Strategy be continued as there is still work to be done, which was halted due to the pandemic.
- 2.4. Two priorities which remain the main focus are:
- To maintain positive relationships with person they support and care
 - Financial impact carers are now facing
- 2.5. Further feedback was that a lengthy document is not required and that carers wish this to be a local document and request that signposting is available for their own specific needs.
- 2.6. Continued work is required for Parent Carers, as their needs are different from Carers of Adults.
- 2.7. The group will continue to link with Education services to support young people with additional support needs and Young Carers
- 2.8. Carers Challenge Fund was launched in December 2022 with a budget of £500,000 and inviting organisations to apply for funds up to £35,000.

3. GROUP DISCUSSION ON ACTION PLAN

3.1. Draft Strategic Plan high-level Action Plan was circulated to the group and members were split into groups for discussion.

3.2. An update from the discussions was shared and will be included in the consultation for the Strategic Plan.

3.3. **Group one:**

- Crossover and connection with priority one and two therefore discussion focussed
- Step up - Step down care; more mention to community work ongoing
- Mention AHP's not specific to OT's
- Include health improvement to priority one
- Language and definitions – need to be more explicit so not mis-interpreted
- GP has key role, not leadership role
- Primary Care to be considered in entirety
- Third Sector and Housing roles be included in their roles they have supporting people to be independent at home
- Housing - need to be more timely on aids and adaptations
- JLES – further discussion required.

3.4. **Group two:**

- Communication – importance around range of approaches, as hearing people still do not know how to access services.
- Recognise the delay of accessing services due to pandemic, therefore sensitivity required around the messages on early prevention and intervention.
- Human Rights Based Approach and link to MAT standards, and how to link in Plan
- Technology – blended range, tech doesn't work for all, Plan needs assurance that Tech won't be sole driver and services are available in different ways.
- SDS – allow reference to power of attorney
- Tech Gaps – how to work integrated way and bridge the gaps on how to access and sharing information
- Health literacy – staff to convey messages accurately.

3.5. **Priority Three**

- Thought around heading as interpretation of 'early intervention, prevention and harm reduction' differs

- Education, prevention and early intervention – need to link with schools and education to target earlier age
- Minimising harm than harm reduction
- Mental health issues, not always people with drug issues, as this could create further problems.
- AHP – include falls / falls strategy
- Obesity and hoarding to be including – link with Locality Plan as this will be targeted needs
- Difference in scope of actions, these to be measured – priority framework will underpin and determine the actions.

3.6. Cross Cutting Priorities and Carers Strategy, input will be included with consultation. Other opportunities available to provide comments.

3.7. Final Strategic Plan and Carers Strategy will be presented to IJB in March for approval.

4. NOTE OF PREVIOUS MEETING – 28 October 2022

4.1. The note of previous meeting was agreed as accurate.

5. MATTERS ARISING

5.1. No matters arising.

6. PARTNER UPDATES

6.1. Care at Home

MMcG advised that mapping work is ongoing and agencies are sharing ideas and staff linking together. Things are improving and collaborative commissioning is progressing.

6.2. Housing

Budgets will be approved next week. Focus on adaptation of larger properties are being reviewed with Housing needs team to identify properties available.

Two new housing sites at Torwood and Langlees are almost complete. Other sites are progressing at Woodend Farm, Hallglen, Oakbank for ambient / disabled tenants.

7. CHIEF OFFICER UPDATE

- 7.1. PC provided an update that significant demand continues. There is increased complexity on level of support and care need in community and work continues to support people out of FV hospital and community hospitals and to provide interim care placements.
- 7.2. Falkirk Council in process of finalising budget papers for 3 March. Significant budget gap to bridge, which will impact on HSCP budget.
- 7.3. NHS FV is currently under escalation; Scottish Government has a National Performance Framework and FV is at level 4 in relation to concerns on culture, leadership and governance. There is an Assurance Board set up with Scottish Government led by Christine McLaughlin, Director of Population Health. This includes directors of health board, HSCP Chief Officers, Chief Finance Officers plus Chief Executives from Council and NHS Forth Valley. The improvement plan is available on NHS FV website.
- 7.4. An area of improvement has led to the completion of integration and transfer of services to HSCP's.
- 7.5. Falkirk HSCP will manage Primary Care and Out of Hours GP services and Health Improvement, and strategically plan for all Forth Valley. This took effect from 31 January however will take some time to fully transfer and due diligence will continue in the transfer for budget, staffing and services. Updates will be provided in future meetings and within IJB papers in March.
- 7.6. Clackmannanshire and Stirling HSCP will operationally manage specialist mental health services for Forth Valley. Falkirk HSCP will still manage community Mental Health services.
- 7.7. Further discussion with the Assurance Board on joint approach on palliative care has been agreed and will progress with Government support.

8. AOCB

- 8.1. None.

9. SPG MEETING ARRANGMENTS

- 9.1. The group was asked to complete the Form circulated with preference of meetings and results will be discussed at a future meeting.

10. NEXT MEETING: 16 August 2023 at 3pm



**Minute of meeting of the Audit Committee held remotely, on Friday 17 March 2023
at 2.00 p.m.**

Voting Members: Fiona Collie (Vice-Chair)
Gordon Johnston (Chair)

Non – Voting Members: Robert Clark, NHS Forth Valley Staff Representative
Roger Ridley, Falkirk Council Staff Representative

Also Attending: Tony Gaskin, Chief Internal Auditor, NHS Fife (Items AC36 & AC37)
Dave Keenan, HSCP Governance Support Officer
Steven Kirkwood, Chief Finance Officer (Items AC35, AC38 & AC39)
Sara Lacey, Chief Social Work Officer
Gillian McCreadie, Audit Scotland (External Audit) (Item AC34)
Gail Woodcock, Head of Integration

AC31. Apologies

An apology was received from Patricia Cassidy.

AC32. Declarations of Interest

There were no declarations of interest made.

AC33. Minute

Decision

The minute of the meeting of the Audit Committee held on 2 December 2022 was approved.

AC34. External Audit Plan

The Committee was provided with a verbal update by the External Auditor on the progress to finalise the External Audit Plan for 2022/23. The preparation of the External Audit Plan had been delayed due to a Covid-19 related backlog of audits from 2021/22. The plan had been completed but was not ready in time for the issue of the agenda. A final draft of the Plan would be considered by Committee at the next meeting in June 2023.



Decision

The Committee noted the verbal update.

AC35. Strategic Risk Register

The Committee considered a report by the Chief Finance Officer which provided an update on the IJB's Strategic Risk Register. One new risk had been added to the register since the last version presented to the Audit Committee in December 2022. The previous Primary Care risk had been split into two separate components. The splitting of the Primary Care risk arose from discussion with NHS Forth Valley.

In total, there had been 10 live risks recorded in the register; 9 had been considered as high risk and 1 as medium risk.

The Committee asked how progress against each of the risks had been measured and for clarity on the definition of 'likelihood' in relation to the probability of a risk occurring. In response to the question, the Chief Internal Auditor explained that the Strategic Risk Register had been created to consider all possible risks, regardless of how remote the probability or likelihood of a risk occurring could be. The register had been designed to allow for the proper consideration and mitigation of risks.

In relation to Strategic Risk 4 (Capacity & Infrastructure), the Committee asked for an update on the progress to review the risk and whether this would be split into two separate risks: Workforce and Infrastructure. The Chief Finance Officer advised the Committee that the workforce challenges had merited a separate risk on the Strategic Risk Register. Discussion had been ongoing to review this risk. The Chief Finance Officer expressed concern that this would create too many risks on the register. Therefore, further work would have been required to assess and prioritise existing risks on the Strategic Risk Register.

Decision

The Committee noted the high-level summary of the strategic risk register presented at section 4.1 of the report and the detailed strategic risk register appended to the report.

AC36. Internal Audit Progress Report

The Committee considered a report by Chief Internal Auditor on the progress of the 2022/23 IJB Annual Internal Audit Plan. The report also detailed the relevant Falkirk Council and NHS Forth Valley internal audit reports.

The assignment plan for audit FK05-23 (Strategic Plan) had been with Management for review at the time of the meeting. Internal audit would provide initial commentary on the draft Falkirk HSCP Strategic Commissioning Plan 2023 – 2026, which would be reported to the June 2023 Audit Committee.

Work on audit FK03-23 (Internal Control Evaluation) had been ongoing and would be reported to the June 2023 Audit Committee. This audit would assess the adequacy and effectiveness of internal controls, providing time for any remedial action to be taken before year-end, allowing the annual accounts process to be focused on year-end assurances and confirmation that the required actions had been implemented.

Decision

The Committee:-

- (1) noted the progress on the 2022/23 Annual Internal Audit Plan set out at appendix 1 to the report; and**
- (2) noted the summaries of relevant reports from the partner bodies set out at appendix 2 to the report.**

AC37. Annual Internal Audit Plan 2023/24

The Committee considered a report by the Chief Internal Auditor which sought approval for the Annual Internal Audit Plan for Falkirk IJB for 2023/24.

Public Sector Internal Audit Standards stated that the purpose, authority and responsibility of the internal audit activity must be formally defined in an internal audit charter. The standards had also required that the charter is periodically reviewed and presented to senior management and the Board for approval. The internal audit charter had established the internal audit activity position within the organisation, which included the nature of the Chief Internal Auditor's functional reporting relationship with the Board; authorised access to records, personnel and physical properties relevant to the performance of engagements; and defined the scope of internal audit activities.

The Annual Internal Audit Plan had been predicated on the basis that operational controls over services are maintained and assured through the partners – Falkirk Council and NHS Forth Valley. An Internal Audit Joint Working Protocol had been agreed in addition to a Protocol for sharing Internal Audit Outputs. Audit Committee had been asked to note that relevant audits would be shared under the output sharing protocol which would provide additional assurance to the IJB.

Decision

The Committee:-

- (1) approved the Annual Internal Audit Plan for 2023/24;**
- (2) requested that Falkirk IJB's Internal Auditors proceed with the implementation of the approved Audit Plan and report progress to Audit Committee; and**
- (3) approved the Falkirk IJB Internal Audit Charter.**

AC38. National Audit Report and Inspection Overview

The Committee considered a report by the Chief Finance Officer which provided an overview of national audit, scrutiny and inspection reports published since the previous Audit Committee meeting held on 2 December 2022. A total of 10 reports had been published since the last meeting (6 by Audit Scotland and 4 by the Mental Welfare Commission).

Decision

The Committee noted the report.

AC39. Governance Statement Improvement Actions

The Committee considered a report by the Chief Finance Officer which provided an update on progress to implement a range of improvement actions identified through the annual governance statement and from various internal and external audit recommendations.

Following format changes outlined at the December Audit Committee, improvement actions had been grouped into 4 broad categories. These were:

- Progress with Integration Scheme / MSG Self-Assessment;
- Implementation of the Chartered Institute of Public Finance and Accountancy (CIPFA) Financial Management Code;
- Audit Committee self-assessment against good practice principles;
- Other Internal & External Audit Reviews.

There had been good progress since the previous Audit Committee with Integration Scheme actions. Actions in respect of the CIPFA Financial Management Code and Audit Committee self-assessment had stalled due to capacity challenges. There had been similar position for the Medium-Term Financial Plan. The management team had been progressing options to

address capacity challenges in what had been a challenging operating environment.

Decision

The Committee noted the report.



Draft

Minute of meeting of the Integration Joint Board Clinical and Care Governance Committee held remotely within Grangemouth Community Education Unit, on Friday 24 March 2023 at 9.30 a.m.

Voting Members: Councillor Anne Hannah (Chair)
Stephen McAllister (Vice-Chair)

Non –voting Members: Margo Biggs, Service User Representative
Victoria McRae, Third Sector Interface

Also Attending: Lynda Bennie, Head of Clinical Governance
Lynette Denovan, Team Manager (Item CCG43)
Frances Dodd, Nurse Director
Fiona Donaldson, Interim Patient Relations Lead (Items CCG47 & CCG48)
Phillip Heaton, ADP Lead Officer (Item CCG44)
David Herron, GP Representative
Jonathan Horwood, Area Infection Control Manager (Item CCG49)
David Keenan, HSCP Governance Support Officer (Item CCG50)
Elaine Kettings, Head of Nursing
Sara Lacey, Chief Social Work Officer
Gordon Mackenzie, Locality Manager – East (Items CCG47 & CCG48)
Martin Thom, Head of Integration
Suzanne Thomson, Senior Service Manager (Items CCG45 & CCG46)

CCG39. Apologies

Apologies were received from Patricia Cassidy, Andrew Murray, Roger Ridley and Gail Woodcock.

CCG40. Declarations of Interest

There were no declarations made.

CCG41. Minute

Decision

The minute of the meeting held on 25 November 2022 was approved.

CCG42. Rolling Action Log

An action log detailing ongoing and closed actions following the previous meeting on 25 November 2022 was provided.

Decision

The Committee noted the action log.

CCG43. Living Well Falkirk Update

The Committee considered a report by the Team Manager which provided an overview of activity within Living Well Falkirk services during the period January 2020 to December 2022. The services had been based on an online tool that had promoted healthy, independent living by emphasising people's ability to stay active and participate in their community. People had direct access to the website, 24/7 and 365 days of the year. This meant that they could use it at a time that suited them, including outside of the usual opening hours of social work offices.

For those who needed more help, the Living Well Falkirk centre had offered face-to-face appointments in the Forth Valley Sensory Centre, or online appointments using Near Me technology. Data had been provided from the web-based software that supported the Living Well Falkirk services from 2020 to 2022 and from Living Well Falkirk centre appointments from its re-start in October 2022 to 31 December 2022.

In 2022, the site had recorded 4638 users contributing 5839 sessions. This had represented a 5% reduction in users from 2021 and a 12% reduction in sessions. It had been planned to promote the system through social media to encourage usage. The percentage of users accessing the website 'out of hours' had increased from 2021 by 3% (to 47%) which meant more people had been accessing Living Well Falkirk when traditional services were closed.

Appointments had recommenced week beginning 24 October 2022. A phased approach had been taken, starting with the East Locality, which had the largest waiting list of the three localities. With the waiting list screening complete, people in the East Locality who had a simple activity of daily living (ADL) difficulty had been passed directly to the Living Well Falkirk centre to be offered an in-person or Near Me appointment.

Appointments would be re-started for other localities in Spring 2023. West locality had more people waiting for an assessment than Central, so had been prioritised as the next target area for Living Well Falkirk appointments. Screening of the West locality waiting list had been underway, to identify people who it appeared could benefit from a Living Well Falkirk appointment. People would be contacted individually to offer them an appointment at the Living Well

Falkirk Centre (or a Near Me appointment if they were unable to get to the Sensory Centre). Appointments for the West locality had been scheduled to start week commencing 17 April. People waiting in Central locality would be contacted following West locality.

Two temporary social care officer posts aligned to Living Well Falkirk were being recruited to. This would support the team to further populate the system with information about the wide range of community activities available throughout the Falkirk area. The increased staffing capacity would allow the roll out of the service to the West and Central localities, to impact on waiting lists and waiting times in both areas.

The Committee noted that the two social care officer posts that were being recruited to were temporary and asked how the work they would be supporting would be made sustainable. In response, the Team Manager had advised that this work would require staffing resource. In addition, it had been their intention to follow a Scottish database model which charted groups and activities. The model would be adjusted to reflect a localised system which would report on smaller scale groups and activities. The Scotland-wide model had sent out proforma templates to all listed organisations to ensure that the information held was correct. The Team Manager contacted the local Third Sector Interface, CVS Falkirk, and Falkirk Council Community Education to ask for assistance with the distribution of letters and proforma templates to local groups so that the groups and activities listed on the Living Well Falkirk website could be expanded. It had been the intention that once this initial phase of data collection had been completed, the database would just need to be maintained, which would be more sustainable once the temporary posts have ended.

The Committee also asked if there had been plans for promotional work to advertise the service once the new social care officers had been appointed. The Team Manager confirmed that there would be promotional activity.

Decision

The Committee noted the report.

CCG44. Medication Assisted Treatment (MAT) Standards Update

The Committee considered a report by the ADP Lead Officer which provided an update on progress that had been made by the Falkirk Alcohol and Drug Partnership (FADP) towards delivering the Medication Assisted Treatment (MAT) Standards.

The Scottish Government had published the Drug Deaths Taskforce's recommendations for the MAT Standards in May 2021. The Standards had been intended to help reduce drug-related deaths, and other harms and to

promote recovery. There had been 10 Standards, the first 5 of which were initially required to be fully embedded in substance use treatment systems across Scotland by April 2022. The Scottish Government had since revised this date and now expected implementation by April 2023.

A steering group had been convened to oversee the progress of delivering the MAT Standards. The group had been chaired in rotation by FADP and Clackmannanshire & Stirling ADP (CSADP). Leads had been identified for each of the MAT Standards and reported progress into the steering group. All ADPs had been required to submit a Quarterly Project Update Report in January 2023, detailing progress made on the MAT Standards Implementation Plan signed off by IJB Chief Officers. The team had been confident that the Implementation Plan would be achieved within the expected timeframe.

The Minister for Drugs Policy had requested a meeting with ADP Leads, Chairs, and IJB Chief Officers to discuss local progress on the MAT Standards. It had been anticipated that the Minister would visit Forth Valley in May 2023.

Decision

The Committee noted the report.

CCG45. Overview: Local Oversight Arrangements

The Committee considered a report by the Senior Service Manager which provided an overview of local oversight arrangements that are relevant to the Falkirk Health and Social Care Partnership (HSCP).

Updates were provided on:

- Falkirk Public Protection Chief Officers meeting;
- HSCP Clinical and Care Governance Management Group;
- NHS Forth Valley Clinical Governance Arrangements;
- Care Home Assurance;
- Falkirk Adult Protection Committee (APC);
- Alcohol and Drug Partnership (ADP), and;
- Falkirk Suicide and Drug Related Death Prevention Update.

The Committee asked what performance measures had been put place in relation to the implementation of the Medication Assisted Treatment (MAT) Standards. In response, the Head of Integration (M Thom) advised that there had been a Forth Valley-wide group monitoring drug-related deaths and the implementation of the MAT Standards. This group had comprised a multi-disciplinary team. Performance against the MAT Standards would be reviewed by each of the ADPs once they had been implemented. Furthermore, there had been a strong focus on the implementation of the MAT Standards from Scottish

Government, and it had been anticipated that they would set Key Performance Indicators. These had not been developed yet but it had been hoped that ADPs would be able to contribute to them.

Decision

The Committee noted the report.

CCG46. Inspection Reports

The Committee considered a report by the Senior Service Manager which provided an overview of inspection reports of registered Health and Social Care Partnership services published since the previous Clinical and Care Governance Committee meeting held on 25 November 2022. There had been six inspection reports published since the last meeting: One from the Care Inspectorate, one from Health Improvement Scotland and four from the Mental Welfare Commission. In addition to this, an update was provided on the Improvement Plan in response to NHS Forth Valley's escalation to Stage Four of NHS Scotland's National Performance Framework for Governance, Leadership and Culture.

The Care Inspectorate had carried out a short-announced inspection of the Joint Dementia Initiative Housing Support Service which took place on 6, 7 and 9 February. The inspection had considered five quality indicators and assessed the service using a six-point scale where 1 is unsatisfactory and 6 is excellent. Two quality indicators had been assessed as 'excellent' and three quality indicators had been assessed as 'very good'.

Healthcare Improvement Scotland had carried out an unannounced inspection of Forth Valley Royal Hospital (FVRH) on 5 and 6 April 2022 using their safe delivery of care inspection methodology. The report had been published 21 June 2022 and had identified areas of good practice as well as areas for improvement. The inspection covered a range of areas: acute assessment unit, emergency department, intensive care unit and six wards. It also included the public and staff communal areas of the hospital along with additional wards. Inspectors returned to FVRH on 19 April 2022 to follow up on areas of concern identified during the earlier inspection and visited three additional wards: A11, B11 and B32. A further unannounced visit by inspectors had taken place on 27 September 2022. The report was published on 5 December 2022.

The Mental Welfare Commission had conducted inspections of mental health wards in Bellsdyke Hospital - Tryst Park in September 2022, Bellsdyke Hospital – Tryst View and Russell Park in October 2022 and Bo'ness Community Hospital in November 2022.

Tryst Park had been a 12-bedded, low secure male ward in the community of Bellsdyke Hospital. Bed numbers had been reduced in February 2022 from 18 beds, following a review of national low secure unit provision. The ward also had access to three on-site supported living flats and four off-site flats. These flats had been shared with the other Bellsdyke wards and had been identified as a good resource to support discharge to the community. On the day of the MWC visit there were two vacant beds. There were four recommendations made and NHS Forth Valley had submitted a response to these in February 2023.

Tryst View had been a 20-bedded mixed-sex, slow-stream mental health rehabilitation ward in the community of Bellsdyke Hospital. The ward also had access to three on-site supported living flats and four off-site flats. These flats had been shared with the other Bellsdyke wards and had been identified as a good resource to support discharge to the community. On the day of the MWC visit there had been seven vacant beds in the ward. There were 5 recommendations made and NHS Forth Valley had been due to submit a response to these by March 2023.

Russell Park had been an 11-bedded mental health rehabilitation ward with three on-site supported trial living bungalows. There had also been four off-site independent trial living flats all of which had been accessible by the four wards of Bellsdyke Hospital. There were 4 recommendations made and NHS Forth Valley had been due to submit a response to these by March 2023.

Bo'ness Community Hospital Ward Two had been a 16-bedded unit which had provided assessment and treatment for older adults with dementia. The ward had admitted both male and female patients. On the day of the MWC visit there was one vacant bed. The MWC report provided positive feedback on many aspects of care and treatment within the ward. There were 5 recommendations made and Falkirk HSCP had been due to submit response to these by April 2023. Part of the response had been the development of an improvement plan, and this would be shared with the MWC as evidence of actions taken. The plan would be monitored through local governance process with updates provided to Committee.

The Committee commended Joint Dementia Initiative Housing Support Service for their inspection report.

Decision

The Committee noted the report.

CCG47. HSCP Complaints and Feedback October – December 2022 Performance Report

The Committee considered a report by the HSCP Locality Manager (East) and the Person-Centred Co-ordinator which provided an overview of complaints

activity across the Falkirk Health and Social Care Partnership (HSCP) during the period of October to December 2022 (Quarter 3). Complaints received through NHS Forth Valley had been for the period April – December 2022. The report detailed the number of complaints received, local resolution, compliance with the 5-day and 20-day national targets and Scottish Public Services Ombudsman (SPSO) referrals.

During the reporting period, October to December 2022, 21 complaints had been received about Social Work Adult Services. Performance overall had reduced from 58% of complaints answered within timescale in Quarter 2 to 52% in Quarter 3. Stage 1 performance had improved from 48% to 53%. However, Stage 2 performance reduced from 100% to 50%. Twenty people took the time to provide positive feedback to Social Work Adult Services (SWAS) during Quarter 3.

During the reporting period April – December 2022, a total of 17 complaints had been received by the Patient Relations Team relating to the delegated functions for the HSCP. These excluded complaints transferred, withdrawn or where consent had not been received. The overall year end performance for responding to complaints had been 82.4%. On analysis of Stage 1 complaints, the HSCP had received 4 Stage 1 complaints during the period and had achieved a 75% performance and for the same period, 13 Stage 2 complaints had been received, and a 76.9% performance target had been achieved in responding to complaints within 20 working days.

During the period April – December 2022, no complaints had been referred to the Scottish Public Services Ombudsman (SPSO) for investigation. Furthermore, no complaints had been received by the IJB in Quarter 3 of 2022-23.

Decision

The Committee noted the report.

CCG48. HSCP Complaints Annual Report 2021-22

The Committee considered a report by the HSCP Locality Manager (East) and the Person-Centred Co-ordinator which provided an overview of complaints activity across the Falkirk Health and Social Care Partnership (HSCP) during the period of 1st April 2021 to 31st March 2022. The report had been prepared in line with SPSO requirements and had considered the 9 Key Performance Indicators (KPIs) in line with the Complaints Handling Procedure. The 9 KPIs had been:

- Learning from Complaints;
- Complaint Process Experience;
- Self-Awareness and Training;
- Total Number of Complaints Received;

- Complaint Closed at Each Stage;
- Complaints Upheld and Not Upheld;
- Average Times;
- Closed in Full Within Timescales, and;
- Number of Cases where an Extension is Authorised.

For Social Work Adult Services (SWAS), the report showed an increase in the number of complaints which had been received, when compared with 2020-21. However, the number of complaints had remained below pre-pandemic levels. The report also showed an improvement in the percentage of complaint responses completed within timescales.

For services covered by the NHS Complaints Handling Procedure (CHP), the report indicated the number of complaints received had remained low and performance in relation to responding within timescales had been at a high level.

The Committee asked for further detail of the challenges being experienced by the NHS complaints handling team. In response, the Interim Patient Relations Lead explained that there had been staffing changes which had impacted on capacity which had been coupled with an increase in the number of complaints which had been received by the NHS as a whole.

The Committee noted that the Council complaints system had captured complaints across all Council services which had made it more resource intensive to extract detail from and categorise the complaints. In response, the Locality Manager (East) advised that whilst work had been done with the Council's complaints handling service in the last 12 months to improve the system, the system still had limits. Freeing up staff time to review the complaints and extract the data would be a priority.

The Committee asked to see detail of any changes and improvements made in response to complaints in future reports. The Locality Manager (East) and Interim Patient Relations Lead agreed to include this in future reports.

Decision

The Committee noted the report.

CCG49. Healthcare Acquired Infection Performance Report

The Committee considered a report by the Area Infection Control Manager which provided an oversight of all Healthcare Acquired Infection (HAI) related activity across Falkirk Community Hospital and Bo'ness Community Hospital from October 2022 to December 2022. Included in the report were details of all Staph aureus bacteraemias (SABs), Clostridioides difficile Infections (CDIs), Escherichia coli Bacteraemia (ECBs) and Device Associated Bacteraemias

(DABs) for these areas, with a brief summary of the investigations that had been carried out.

The report also provided details of Covid-19 work. The report contained more graphs to enable the reader to have a more comprehensive and clearer understanding of the data.

The Committee asked whether there had been a genuine fall in the number of Covid-19 cases or whether this had been attributed to a fall in the number of people testing. The Area Infection Control Manager explained that prior to September 2022, all Covid-19 testing conducted within healthcare settings had used PCR testing. This had been a more sensitive form of testing which could pick up any lingering bacteria from Covid-19 within 90 days of infection. This had returned positive test results even if the patient had been asymptomatic. Since September, healthcare settings had been using an LFT test which had been considered the better test for active infections. A positive result from an LFT test had always been verified by a PCR test. There had been no outbreaks because of the change in approach to testing.

The Committee asked for clarity on the amber rating for estates compliance levels at Falkirk Community Hospital. The Area Infection Control Manager explained that relatively minor things such as a chip in a skirting board or staining on bathroom sealant would reduce percentage scoring. Issues which had been identified are flagged at estates and domestic team meetings. Any fault or issue identified had been assessed for repair. A breakdown of areas of concern and the actions being taken to address them would be provided in future reports. In addition to this, data on infection prevention control activities within care homes would also be presented in future reports.

Decision

The Committee noted the report.

CCG50. National Publications

The Committee considered a report by the Senior Service Manager and HSCP Governance Support Officer which provided an overview of national reports relevant to the Health and Social Care Partnership (HSCP) that had been published since the previous Clinical and Care Governance Committee (CCGC) meeting held on 25 November 2022. A total of 8 reports had been published.

Decision

The Committee noted the report.