

AGENDA ITEM

6

Title/Subject: Chief Officer Report
Meeting: Integration Joint Board
Date: 5 April 2019
Submitted By: Chief Officer
Action: For Noting

1. INTRODUCTION

- 1.1. The purpose of this report is to update members of the Integration Joint Board (IJB) on current developments within the Falkirk Health and Social Care Partnership (HSCP).

2. RECOMMENDATION

The IJB members are asked to:

- 2.1. note the progress with the development and recruitment to the Integrated HSCP team
- 2.2. agree that the Leadership team develop proposals for temporary and permanent additional capacity to support the delivery of the Strategic Plan and business priorities, through the approved Leadership Fund process.
- 2.3. consider a request to convene a special meeting in June 2019
- 2.4. note that the Records Management Plan has been submitted to the Keeper of the Records
- 2.5. note that the HSCP Leadership Team will complete a self-evaluation against the proposals contained in the MSG review of progress with integration report and update the Board at a future meeting.
- 2.6. note that the partners are required to complete and submit their digital maturity self-assessment to the Scottish Government by 28 June 2019.

3. BACKGROUND

- 3.1. The Board has previously agreed key areas of work that should be undertaken and the report provides an update on a range of activity.

4. INTEGRATION ARRANGEMENTS

4.1. Integrated Structures

The Chief Officer has worked with the Head of HR Falkirk Council and Director of HR NHS Forth Valley to finalise the job descriptions and develop the recruitment process for the Heads of Integration and Locality Manager posts.

- 4.2. The respective HR processes and TU and staff side engagement have been completed in accordance with the NHS and Council policies. The Meetings with staff side and TU colleagues took place on 25 March along with briefing sessions for service managers who will be working as part of the HSCP. The Head of Service and Locality Manager posts are now being advertised, interviews are planned in May.

- 4.3. The Shadow Management team is being reconvened and continues to develop the draft locality team structure.

- 4.4. Further work is required to agree the principles for the co-ordination of Forth Valley wide health services. This will require agreement between both IJBs and the Health Board. In addition the IJBs will require an agreement to ensure that each Chief Officer has clear accountability to the other IJB for any services delivered on their behalf.

- 4.5. Clackmannanshire and Stirling IJB have recently appointed a new Chief Officer which will help to move discussions forward.

4.6. Support Services Agreement

The IJB requires sufficient corporate support to discharge the responsibilities as a public body and for the HSCP to properly administer and deliver £220m of public services. Discussions continue with the Chief executives to agree how this requirement is met.

- 4.7. At the special IJB meeting on 28 March members of the Board raised concern about capacity within the HSCP team to ensure delivery of the transformation programme and development of the Localities. It was proposed that the HSCP adopt a Programme Management Office approach, similar to NHS Forth Valley and Falkirk Council and that partnership funding is used to create this required capacity. It was acknowledged there has been limited available capacity in partner organisations to support the HSCP.

- 4.8. It was also acknowledged that the HSCP will require additional capacity to deliver transformation at the same time as delivering business as usual. It is proposed that the Leadership team will develop propositions for temporary and permanent capacity to support the delivery of the strategic plan and business priorities and submit through the approved Leadership Fund process.

4.9. **Scheme of Delegation**

The NHS scheme of delegation requires to be updated to enable the Chief Officer to manage NHS resources. The NHS Forth Valley Board agreed at their meeting on 26 March that updates to the NHS Board standing orders and scheme of delegation would be made at the June 2019 Board to tie in with national work on model standing and governance.

5. **HSCP SERVICE UPDATES**

5.1. **Primary Care Improvement Plan Practice Update**

The Primary Care Improvement Plan group has prepared a practice update that is sent to all GP practices. This will be a regular update sent after each meeting to help keep Primary Care teams up to date with the Primary Care Transformation Programme. This is attached at appendix 1 for information.

6. **SERVICE PLANNING**

6.1. **Falkirk HSCP Strategic Plan 2019 – 22**

The Strategic Plan is a separate agenda item.

6.2. **Carers Strategy**

The Carer's Strategy is a separate agenda item.

6.3. **West of Scotland Regional Planning**

The West of Scotland Regional Planning Team is awaiting approval to publish the Finalised Regional Design Document. This will be presented to the IJB for endorsement at a future meeting.

6.4. **NHS Forth Valley Annual Operational Plan 2019/20**

The Scottish Government issued correspondence to NHS Boards on 25 February 2019 setting out the requirements to prepare an Annual Operational Plan (AOP).

6.5. The AOP will set out how the NHS Board will deliver expected levels of operational performance to provide the foundations for delivering the Cabinet Secretary's priorities on:

- waiting times improvement
- investment in mental health
- greater progress and pace in the integration of Health and Social Care
- meeting the standards for Healthcare Associated Infection.

6.6. The AOP should be developed in the context of the HSCP Strategic Plan, NHS Board Strategic Plan, regional planning, workforce planning, financial planning and the range of quality improvement and collaborative work that is underway in Scotland.

- 6.7. The AOP will provide assurance on the whole-system operational planning process over 2019/20 and the next two years. The intention is that for 2019/20, plans will be aligned to budgets with plans for future years indicating direction of travel.
- 6.8. The AOP is to be submitted by the end of March and agreed by the end of April 2019, with provision for feedback to NHS Boards during the engagement process with Scottish Government throughout February and into early April.
- 6.9. NHS Forth Valley colleagues will lead in the preparation of the AOP, linking with the HSCP to ensure the necessary connections are made in line with the AOP guidance.

7. IJB FINANCIAL UPDATE

- 7.1. The Leadership Team has been meeting regularly, with separate meeting arrangements in place to cover finance issues. An update on the financial position is detailed as a separate agenda item. The Board also received a report at the Special IJB meeting on 28 March 2019.

8. IJB GOVERNANCE

8.1. IJB Meetings

The Board is asked to consider a request to convene a special meeting in June 2019. It is anticipated further work will have been done on the integrated structures and aligned budget, and this meeting will consider any recommendations if these are required.

- 8.2. The Scottish Government have issued a self evaluation template reflecting the proposal from the review of integration by the Ministerial Strategic Group. This template must be returned to the Scottish Government by 15 May 2019. The submitted template will be considered at the June IJB meeting. The meeting will also consider an update on the financial outturn for 2018/19, the 2019/20 budget, including savings options, and progress on implementation of the Set Aside arrangements.

8.3. IJB Records Management Plan

The Board was previously advised of correspondence received from the Keeper of the Records at the National Records of Scotland. The IJB were asked to submit their Records Management Plan no later than 4 March 2019.

- 8.4. The Board is asked to note that this requirement was met. The Board will be advised of feedback from the Keeper of the Records when this is received.

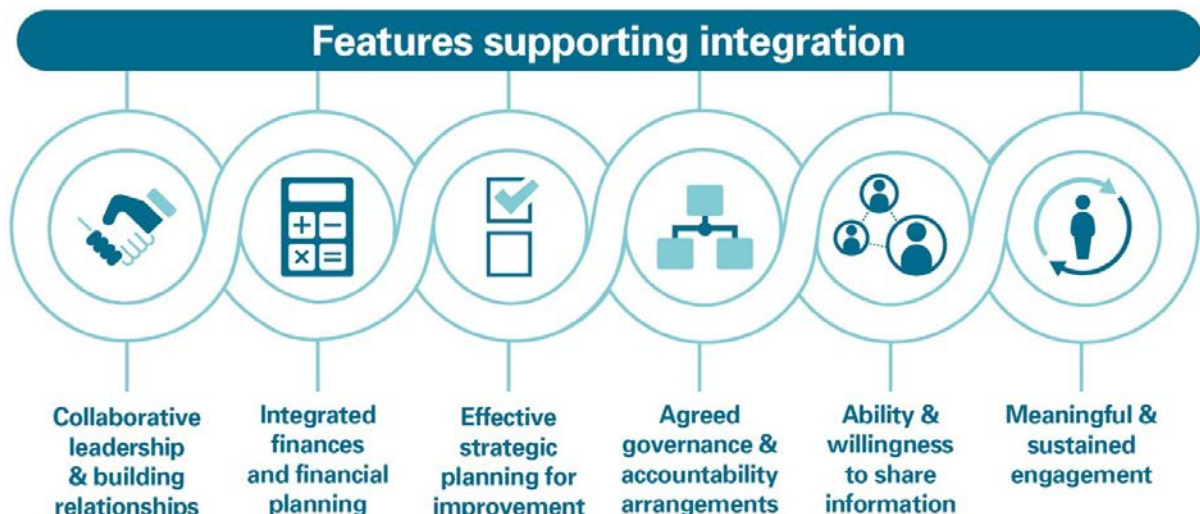
9. PUBLICATIONS

9.1. [Ministerial Strategic Group for Health and Community Care – Review of Progress with Integration of Health and Social Care](#)

9.2. The Board were advised in the Chief Officer report in February 2019 of the review of the progress of integration of health and social care. This has been taken forward by a Leadership Group led by the Ministerial Strategic Group (MSG) and Convention of Scottish Local Authorities (COSLA). A larger group of senior stakeholders has acted as a “reference” group to the Leadership Group.

9.3. The purpose of the review is to help ensure there is an increase in pace in delivering all of the integrations principles and national health and well-being outcomes.

9.4. The findings of this review were published in February 2019, and noted the Leadership Group agreement with the Audit Scotland report on integration,



published in November 2018.

9.5. The Leadership Group noted that exhibit 7 from the Audit Scotland report, reproduced below, provided a helpful framework and proposals for implementation are set out under these headings.

9.6. In addition, the Leadership group noted that workforce issues were not considered in any detail in the audit, but recommends that those should be a key focus for statutory and non-statutory partners taking forward integration.

9.7. The review report notes the expectation that Health Boards, Local Authorities and IJB's should evaluate their current position in relation to both national reports, and take action to make progress. To assist this, the Leadership Group are developing a self-evaluation template, which is anticipated will be circulated to partners in the near future.

- 9.8. The Board is asked to note that the HSCP Leadership Team will complete the self-evaluation and improvement plan, and report this to a future meeting of the Board.

10. CORRESPONDENCE

10.1. Review of Mental Health Legislation

The Scottish Minister for Mental Health has written to Chief Officers and Chief Executives on 19 March 2019 announcing a review of mental health legislation.

- 10.2. The principal aim of the review of the Mental Health Act is to improve the rights and protections of people with a mental disorder and remove barriers to those caring for their health and welfare. It will do so by:

- reviewing the developments in mental health law and practice on compulsory detention and care and treatment since the Mental Health (Care and Treatment) (Scotland) Act 2003 came into force
- making recommendations that gives effect to the rights, will and preferences of the individual by ensuring that mental health, incapacity and adult support and protection legislation reflects people's social, economic and cultural rights including UN Convention on the rights of Persons with Disabilities (UNCRPD) and European Convention on Human Rights (ECHR) requirements
- considering the need for the convergence of incapacity, mental health and adult support and protection legislation.

- 10.3. The review work will be supported by a short-life working group which will include representation from a range of key stakeholders. The views of people with lived experience and their carers will be at the centre of the work.

- 10.4. The Board will be updated as information becomes available.

10.5. Planning and Health Boards

The Cabinet Secretary for Health and Sport and the Minister for Local Government, Housing and Planning wrote to Chief Executives of both the Council and NHS on 8 March 2019. The letter set out existing and forthcoming duties for Planning Authorities and Health Boards in relation to development planning and in particular its relationship to primary care.

- 10.6. Planning Authorities have a duty to prepare a development plans for their area. This plan forms the basis for determining planning applications across their area. Health Boards are key agencies for the purpose of planning, and to co-operate with Planning Authorities in the preparation of local development plans and the associated delivery programme.

- 10.7. Proposals under the Planning (Scotland) Bill, currently before the Scottish Parliament, contains provisions that mean in future consideration of the capacity of health services will be required in the preparation of a development plan.

- 10.8. Given the recent receipt of this letter, further consideration will be given to this, in discussion with colleagues in planning department.
- 10.9. **Digital Maturity of Health and Social Care Services in Scotland**
The Scottish Government and COSLA wrote to Councils, NHS Boards and IJB's on 19 March 2019.
- 10.10. Following the publication of Scotland's Digital Health and Care in April 2018, one of the early deliverables is to "*Develop and roll-out an assessment of digital maturity across health and social care services, identify areas for improvement and support, and establish a process for regular review and update*".
- 10.11. To facilitate this process, the Scottish Government, COSLA and partners have developed a digital maturity self-assessment tool to help to understand the level of readiness for digital transformation across health and social care services in Scotland.
- 10.12. The outcomes from this work will enable all partners to better target future support and investment to ensure that the necessary leadership, culture, skills, capability and infrastructure are in place to enable progress and improvement.
- 10.13. The Board is asked to note that the partnership is required to complete and submit their self-assessment by 28 June 2019. It is anticipated the results will be published by late September 2019.
- 10.14. This work is welcomed and will be helpful to the Partnership to support delivery of the new Strategic Plan priority to "*make better use of technology to support the delivery of health and social care services*".
- 10.15. **EU Exit: Health and Social Care**
The Chief Officer continues to work with NHS Forth Valley and Falkirk Council colleagues to ensure the necessary business continuity arrangements are in place. This also includes work with the Scottish Government Health and Social Care EU Exit Response Hub.
- 10.16. Comprehensive arrangements are under development for reporting any service impacts due to the ongoing national discussion around EU Exit. A number of Regional Resilience Partnership workshops have been held to identify potential risks and agree planning arrangements to manage issues that arise. A key element of this is reporting any EU Exit issues that are impacting on the provision of health and social care services locally. The main risks relate to recruitment and retention of staff, securing continuity of supplies, medicines, food and delivery of contracted services by external providers. Initially the arrangements will focus on NHS FV preparing weekly reports, increasing to daily if required.
- 10.17. In the meantime NHS Forth Valley and Falkirk Council colleagues are taking steps to ensure that the Partnership is aware of any EU Exit issues that become apparent and take appropriate action if required to mitigate any service issues. Contact has

been made with the Scottish Government seeking clarity on how the HSCP's are expected to report and this process is still being finalised.

10.18. Waiver of charges for carer support

Prior to the Carers (Scotland) Act 2016 local authorities had the power to support carers to enable them to provide or to continue to provide care and support. Where local authorities exercised this power they could not charge the carer for the support. The 2016 Act places a duty on local authorities to provide support to carers that meet local eligibility criteria for funded support, and continue the power to support carers even where they don't meet local eligibility criteria. Where support is provided under either the duty or power to support, the local authority must waive charges for the support.

- 10.19. Part 3 (Chapter 3) of the Carers (Scotland) Act 2016 Statutory Guidance, published in March 2018, provides guidance on how to apply the waiving of charges regulations. At the time of publication the Policy Team at Scottish Government agreed to establish a cross sector Task Group to provide some worked examples to assist with understanding of the Regulations and how they should be applied locally. The worked examples were published on 6 March 2019. The examples provide greater clarity on how the regulations (and guidance can be applied), outlining when it is appropriate to make charges for support (to the cared for person) and when charges should be waived because the primary purpose of the support is to benefit the carer.

11. CONSULTATIONS

11.1. Inquiry on the future of primary care in Scotland

The Health and Sport Committee has launched an Inquiry on the future of primary care in Scotland. A [public survey](#) will run till 30 April 2019.

12. CONCLUSIONS

- 12.1. The report summaries work being taken forward on a collaborative and strategic approach that will continue to address the range of issues facing the partnership.

Resource Implications

The Chief Finance Officer will continue to report through the IJB finance reports to the Board.

There remains commitment from all partners to ensure the Partnership meet its statutory obligations under the Public Bodies (Joint Working) (Scotland) Act 2014. This will be confirmed in a future report to the Board on the Support Service agreement and the integrated structure.

Impact on IJB outcomes and priorities

The ongoing work is designed to deliver the outcomes described in the Strategic Plan.

Legal and Risk Implications

The IJB is required to be compliant with the Public Bodies (Joint Working) (Scotland) Act 2014 and the Falkirk IJB Integration Scheme.

Consultation

Stakeholders will be involved as required.

Equalities Assessment

There will be appropriate consideration of the equalities implications and equalities impact assessments as required for work noted in this report.

Approved for submission by: Patricia Cassidy, Chief Officer

Author – Suzanne Thomson, Programme Manager Falkirk HSCP

Date: 28 February 2019

Primary Care Improvement: Practice Update - February 2019

The New Year has come with a flurry of planning and PCIP implementation activities which are now moving forward the first phase of the Primary Care Improvement Plan at a pace. We hope that this brief update will help keep you informed of progress and new developments.

The Primary Care Improvement Plan Implementation Group met on Friday 25th of January. A summary of updates included:

Pharmacotherapy

Phase 1 - NW Stirling, Falkirk Town, Denny and Bonnybridge & Stenhousemuir/Larbert

Phase 1a recruitment for 20 new Pharmacists (16WTE) has been successful. New pharmacists have completed their induction period and are now initiating pharmacotherapy services in all practices within Falkirk Town and NW Stirling Clusters

Phase 1 b. The closing date for the recruitment of 10 further pharmacist and technician posts is 25th Feb. These posts will complete the pharmacotherapy team for West Falkirk Clusters.

General principles, Model Day and pre-prescribing assessment tools are developed for practices

Community Treatment, Urgent & Multidisciplinary Care:

The Five phase 1 clusters developing the urgent and MDT care models (SW Stirling, Stirling, Clacks, Grangemouth & Bo'ness, Slamannan and Braes) have reviewed and confirmed their cluster MDT resource plans:

14 Primary Care Mental Health Nurses are now recruited. Team leads Kara McIntosh and Jane Yule are currently working with practices to conclude placement of staff to initiate this service for people with mild to moderate mental health needs.

Advanced Practice Physiotherapists; 7.8 of 8.4 posts are now recruited and all due to start during March and April. The final 0.6 wte has been re-advertised. Extended Scope physios are supporting implementation with Helen Turner (Slamannan and Braes, Wendy Menteith (Stirling), Catherine McRitchie (Clacks) and Mark Stevens (Bo'ness, Grangemouth) liaising with practices.

Advanced Nurse Practitioners: there are a number of ANPs in training across clusters including in 2C practices. 10 PCIP ANPs are currently training within 9 practices with many on track to conclude core training around May this year. Clusters are currently considering how urgent care can be optimised across and between practices. The aim is to recruit phase 1b (3-5posts) in advance of the next MSc course intake. ANP leads/trainers are Val Davies (Clacks / Stirling) and Christine Haining (Falkirk).

Community Treatment & Care (CTAC):

This includes phlebotomy, LTC monitoring and treatment room transformation

Phlebotomy transition is a priority for this year. It is acknowledged that a number of complex factors have limited progress to date.

A short life working group is now accelerating this work and will develop and test a phlebotomy transition model in practices within two clusters (proposed to be Stirling and Denny) within the next 90 days. Rapid learning from this will inform a phased roll out thereafter. The first 7 HCSW will be recruited for the development phase, working closely with practices and existing HCSW staff.

Vaccination Transformation Programme (VTP)

5 immunisation nurses are in post and trained. The first cluster pilot of childhood immunisation has gone well in Clackmannanshire.

Week of Care Audit

Many thanks to practices involved in the Urgent / MDT work stream for participating in the 2 week of care (WoC) audit. This will provide a wealth of baseline information and when future audits are carried out we hope to be able to measure the impact of all our new services.

Reminder to send scanned WoC Audits to FV-UHB.ForthValleyCESS@nhs.net (practices don't need to do any data entry onto excel other than the capacity sheet)

Additional Support for Primary Care

We note growing interest from practices for support to implement signposting to the new MDT roles. We are in a fortunate position to draw on our learning from the 12 month Practice Administration Staff Collaborative (PASC) and have been successful in securing funding to continue this work locally for an additional 6 -12 months

The PASC team will support training for practice staff with workflow and signposting. Training sessions have been organised in March and April.

The PASC team work with MDT service leads to co-ordinate communication and information resources and aim to create a network to support regular "PASC clinics" for both training and general improvement work

Contact PASC Improvement Advisors, Bryony Murray, Louise McCallum or Fiona McGirr.

Primary Care Welcome Session – Feb 22nd



Around 70 new primary care staff were warmly welcomed to the Primary Care team at Welcome Session on Friday 22nd at Stirling Community Hospital. The programme included an overview of the Primary Care Contract and Plan and insights for new practitioners on "Why Primary Care Works".

Practice Manager Improvement Facilitator Opportunity

We are committed to developing leadership and improvement capacity in clusters and in primary care multidisciplinary teams. This includes an exciting new development opportunity for Practice Managers to facilitate improvement within clusters.

Funding is available to support a Practice Manager from each cluster to develop in the role of Improvement Facilitator for 1 day per month.

For anyone that is interested, please contact Lesley.middlemiss@nhs.net

Any other questions? Please contact

Stuart Cumming, David Herron or Lesley Middlemiss