# Agenda Item 5

**Chief Officer Report** 

## Agenda Item: 5



## **Falkirk Integration Joint Board**

20 November 2020 Chief Officer Report For Decision

#### 1. Executive Summary

1.1 The purpose of this report is to update members on current developments within the Falkirk Health and Social Care Partnership (HSCP). The report also provides an update on the Covid-19 pandemic response.

#### 2. Recommendations

The Integration Joint Board is asked to:

- 2.1 note the content of the report
- agree to continue to delegate authority to the Chief Officer, to be reviewed at the Board meeting in March 2021
- 2.3 to support the ongoing implementation of the planned programmes of work
- 2.4 note that the annual IJB Climate Change report 2019/2020 has been submitted.

## 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. Response to Covid-19

#### 4.1 Delegated Authority

Since the March IJB, members have continued to agree that authority is delegated to the Chief Officer to deal with urgent business, which would normally be determined by the Board, during the period of the Coronavirus outbreak. All IJB Board and Committee meetings have now resumed on a virtual basis, however the delegated authority arrangements remain in place.

4.2 The IJB Chair and Vice-chair meet fortnightly with the Chief Officer and Chief Finance Officer. This provides an opportunity for an update and discussion about decisions being taken. An update on the use of delegated authority and summary of all decisions taken by the Chief Officer is presented in

appendix 1.

4.3 The Scottish Government has introduced new national restrictions including additional local restrictions that apply to the Forth Valley area, including the Falkirk Council area. The Board is asked to agree to continue to delegate authority to the Chief Officer, to be reviewed at the Board meeting in March 2021.

#### 4.4 Covid-19 Falkirk HSCP Remobilise, Recover, Redesign

The HSCP continues to work in partnership with Clackmannanshire and Stirling HSCP and NHS Forth Valley to progress with remobilisation, recovery and redesign. The senior management team have updated this plan, with realigned timescales and priorities. This is presented to the Board as a separate agenda item.

#### 4.5 Mobilisation Centre

The HSCP has taken the decision to re-establish the Covid-19 Huddle. Initially this was twice weekly, and the team now meets on a daily basis, effective from 26 October 2020. The team has representation from all HSCP partners and service areas and ensures the HSCP response is well coordinated.

#### 4.6 Covid-19 Mobilisation Plan Financial Returns

Financial returns continue to be submitted to the Scottish Government on a monthly basis to capture the additional costs associated with Covid-19. The total projected costs remain significant and include potential unachieved savings that are expected to be delayed or unable to proceed due to Covid-19. The Finance Report, presented by the Chief Finance Officer, is a separate agenda item and provides further information.

#### 4.7 Service Update

The service has taken into account the Scottish Government national restrictions including additional local restrictions and have decided that our day services will not open yet. We will keep this under review and continue to look at other options with people. We know this is a difficult time for people who use services, family and friends, but it is important that we minimise the risk to people and staff. A verbal update with the most current position, by exception, will be provided to the Board meeting.

## 4.8 Public Health Scotland Report: Discharges from NHS Scotland hospitals to Care Homes

The main points from the national report are as follows:

There were 3,599 discharges from hospital to a care home between 1 March and 21 April. The majority (81.9%) of which were not tested for COVID-19, in-keeping with clinical guidance which restricted testing to those with symptoms of infection. Of the 650 who were tested, 78 received a positive result while in hospital.

- There were 1,605 discharges from hospital to a care home between 22 April and 31 May. The majority (1,493, 93%) were tested for COVID-19, in line with the changes in clinical guidance. Of these, 1,215 tested negative and 278 tested positive. Of those who tested positive, 233 had a negative test result prior to discharge.
- It is important to note that there are valid clinical reasons for individuals **not** to be tested prior to discharge, relating to their capacity to consent to testing and avoiding causing distress, and to appropriateness of testing, e.g. in end of life care situations
- 843 of the 1,084 care homes received hospital discharges between 1
   March and 31 May
- Using laboratory confirmed cases, 348 (32%) of care homes in Scotland experienced an outbreak of COVID-19 in the home between 1 March and 21 June
- In the statistical modelling analysis:
  - Care home size has the strongest association with outbreaks of COVID-19, and this association persists after taking account of other care home characteristics including discharge from hospital. Risk of a care home outbreak increases progressively as the size of care home increases.
  - Hospital discharge is associated with an increased risk of an outbreak when considered on its own. However, after accounting for care home size and other care home characteristics, the estimated risk of an outbreak associated with hospital discharge reduces and is not statistically significant.
- Between 1 March and 31 May 2020, there were 5,204 discharges from NHS hospitals to care homes (4,807 individuals), this accounted for 5.3% of all hospital discharges during the same period.
- The outputs from the study will be taken into account along with any other emerging evidence in the review of care homes, plans for models of care and commissioning.
- 4.9 Care Homes and the Health and Safety Executive (HSE)
  The Health and Safety Executive (HSE) has announced it will extend its spot check phone calls to include care homes. Spot checks will review measures being taken to minimise spread of coronavirus in the care home and to protect workers as they care for residents.
- 4.10 During the call a series of questions will be asked to evaluate the care home's knowledge, awareness and implementation of the suite of guidance produced to enable them to operate safely. Where the initial phone call raises concerns, the care home will receive a second to explore the issues in

more detail. If, after the second call, the care home has not provided sufficient assurance about control measures, a further intervention may include a visit on a suitable date.

4.11 HSE inspectors and visiting officers will seek to take a proportionate approach, focusing on what is reasonable and achievable in each situation. HSE anticipates that advice will be enough to resolve issues, but if serious risks are encountered, they can take enforcement action to protect people's health and safety. HSE will share the outcome of the spot checks and any follow-up action with the Care Inspectorate.

#### 5. New Models of Care

- 5.1 The Board and Strategic Planning Group participated in a virtual workshop in October 2020 to consider the outputs of the community capacity modelling work, supported by Buchan Associates. The presentation provided information on the demand and capacity of community hospital, intermediate care and some community based services.
- The IJB workshop demonstrated the evidence base of current and future requirements for community bed based care to model the requirements for Forth Valley and Falkirk. This was the output from analysis of information provided by NHS Forth Valley Information Team, Falkirk Council Performance Team and Public Health Scotland (PHS) LIST team, who were involved in the previous workshops to develop the model, along with operational and clinical managers.
- 5.3 The presentation of the demand and capacity analysis covered:
  - number of beds required for acute hospital care within the Aging & Health specialty
  - number of beds required in Community Hospitals across both partnerships
  - number of care home places within Falkirk HSCP.
- The workshop discussion recognised the imperative to reshape services in response to the continuing and anticipated demand for health and social care and to shift the balance of care.. The initial findings of the modelling work indicate that there could be capacity across the whole Forth Valley system to reduce the bed base across the community and increase investment in community based care.
- 5.5 Since the Falkirk workshop, Buchan Associates has presented the findings to Clackmannanshire and Stirling IJB and NHS Forth Valley System Leadership Team (SLT). The SLT has now sought assurance on the data used and the assumptions reached in relation to bed reductions and savings. They have set up a short-life working group (SLWG), chaired by the Medical Director, to complete this review by end November 2020.

- The aim of this exercise is to provide SLT members (and in turn the IJB's and NHS Board) with the assurance necessary to facilitate informed strategic decision making around the anticipated benefits of the 5 Key Improvement Opportunities detailed. Key areas of focus are:
  - Hospital at Home
  - Palliative Care Pathways
  - Rehabilitation Pathways
  - Community Hospital Flow
  - Intermediate Care.
- 5.7 The work of the SLWG will provide assurance in due course, and in the meantime the planned reviews and redesign programmes should continue, acknowledging the impact the pandemic may have on pace.
- 5.8 The demand and capacity model sets out improvement opportunities and work is already ongoing or planned to take place that will be necessary to support the transition to different ways of working and models of health and social care services. This is in line with the Strategic Plan, delivery plan and Remobilise, Recover and Redesign plan, all of which have been agreed by the Board. The three year priorities are set out below

Year 1	Year 2	Year 3
Review of Assessment & Care Planning	Review of Residential Care	
	Finalise Model of Care for	
Develop Integrated Localities	Community Hospitals	Open New Intermediate Care Facility
Deliver Home First	Capital Project for new	
	Intermediate Care Facility	Improved Balance of Car
Increase Bed Based		
Intermediate Care	Develop non Bed Based Intermediate Care	Embed Wholesystem Approach
Review of Falkirk and		10. • • On a novem
Boness Community Hospitals	Options Appraisal for JLES	
Review & Redesign of Home Support	Increased Commissioning with 3rd Sector	
Review of Older Adults Day Services		

- 5.9 This is a complex process, and by continuing with ongoing and planned work, we will ensure interlinked areas of work and dependencies are progressed. This will include:
  - Review of Allied Health Professionals AHP) and development of rehabilitation model to shift the balance from acute rehabilitation bed

days and to support the expansion of intermediate care provision; Hospital at Home model; step up to community hospital and intermediate care

- Forth Valley Strategic Review of Palliative and End-of-Life Care (PEOLC) is underway and due to report by the end of the year. The review is building on the work previously done by NHS Forth Valley and updated with existing activity data, needs assessments, pathway mapping information, stakeholder engagement feedback, workshop outputs, clinical audits etc.
- Development of the Partnership Funding Investment plan. The Partnership Funding Group has completed a review of current funded projects and is working with leads to consider changes to service delivery as a result of the pandemic. The Investment Plan will enable us to take forward a range of transformation and test of change programmes in line with local priorities. As reported to the Board in September, redesign of partnership funded projects that support the new Enhanced Care Team (ECT)/Hospital at Home will be taken forward in conjunction with Clackmannanshire and Stirling IJB, the Director of Acute Services and Clinical Director for Ageing and Health.
- Continued implementation of the Carers Strategy, including the future model of respite/short breaks.
- Develop a proposal to consolidate the old age psychiatry beds across Forth Valley
- 5.10 The Board is asked to support the ongoing implementation of the planned programmes of work set out above.

## 6. Falkirk Community Hospital Master Plan

6.1 The Chief Officer is working with NHS colleagues to develop a Strategic Needs Assessment as the first stage in the process to develop a business case for the redevelopment of the site. The initial meeting had taken place at the time of writing the report. An update will be provided at the next Board meeting.

## 7. Service Updates

#### 7.1 Carers Short Breaks Statement

A requirement of the Carers (Scotland) Act 2016, is that Falkirk HSCP must update and publish a local Short Breaks Services Statement annually. Over the period since March 2020 it is recognised that the Covid-19 pandemic has had a significant impact on carers and has reduced their access to breaks from caring. Some carers have found that their caring role has increased and

others have become carers for the first time.

- 7.2 Throughout this period Falkirk HSCP has been working in close partnership with Falkirk Carers Centre to support carers including continuing to offer Adult Carer Support Plans/Young Carer Statements, providing updates and information on the impact of the pandemic, ensuring access to appropriate Personal Protective Equipment (PPE) and access to overnight short breaks provision, where there is urgent need.
- 7.3 In the absence of regular overnight breaks for carers, a more creative approach to short breaks provision has been taken. Carers have been asked to consider what kind of practical support might help and invited to use some of their short breaks/respite funding to achieve their outcomes. Carers have led this process by telling staff what would help them to feel more rested or relaxed and help them maintain their health and wellbeing. Carers have used funding to:
  - access technology to keep in contact with family/friends
  - access online courses
  - purchase exercise equipment to keep healthy when their ability to go out is restricted
  - purchase equipment to create a safe space in the home or garden where they can relax.
- 7.4 We recognise that these supports do not fully compensate for the lack of access to overnight breaks, but they are helping to make life a little easier.
- 7.5 The update to the Falkirk Short Breaks Statement will reflect the impact of Covid-19 on short breaks provision and will be published in December 2020. It will also highlight the use of flexible and creative short break solutions to support carers throughout the pandemic.
- 7.6 Carers Wellbeing Campaign 2020
  - Due to the pandemic the national campaign planned for June 2020 was cancelled. A new campaign is being developed which has the same broad objectives as the previous campaign however reflects the different circumstances we are in. It has been informed by research that took place in August 2020 to understand how carers were feeling and what their key challenges were as well as some message testing. The national group also spoke to carer organisations to understand their situation, what help is needed and being offered at a local level. The campaign is due to launch in November, running through to December 2020.
- 7.7 In normal times there are an estimated 690,000 unpaid carers in Scotland, however, recent polling indicates that around 400,000 additional people have taken up caring responsibilities during the pandemic and suggests that there is currently as many as 1.1 million unpaid carers in Scotland.

- 7.8 A Media strategy and plan is being developed and will include:
  - TV (focus on daytime STV/C4)
  - digital/social media ads
  - local press advertising
  - stakeholders toolkit
  - Website/phoneline, working alongside NHS Inform who run <u>Care</u> Information Scotland.
- 7.9 The HSCP will work with the partner Comms Teams and the Carers Centre to support and promote the campaign.

## 8. Winter Planning

- 8.1 Flu Vaccination Programme 2020-21 Update
  - The flu vaccination programme is now underway in Forth Valley. Like all areas across Scotland, due to Covid-19 a very different approach is being taken this year to maintain physical distancing and help keep people safe.
- 8.2 The majority of children between the ages of 2 and 5 will continue be vaccinated at their local GP Practice and primary school children will be vaccinated at their local school by NHS Forth Valley's immunisation team. GPs will also continue to vaccinate any young people aged 12 18 in the higher risk groups. A number of local GP practices, including several in more rural areas, are also continuing to provide the vaccine to adults in some of the higher risk groups (details are available on the NHS Forth Valley website www.nhsforthvalley.com/flu).
- 8.3 Around 40 local pharmacies across Forth Valley are providing the vaccine to staff working in the care sector and certain patients receiving support for substance misuse. Letters have been issued to all staff to enable vaccinations at the local pharmacies. A system wide approach to the immunisation of care home residents will be carried out with the support of a number of health professionals. Pregnant women and people undergoing chemotherapy will be able to get vaccinated at existing healthcare clinics and appointments and NHS staff will be able to get vaccinated at work. Other people who are eligible for a free flu jab will be offered an appointment at a 'community hub' larger venues, such as town halls, which have the space and facilities required to deliver the vaccine safely in line with national Covid-19 guidance.
- 8.4 Everyone who is eligible will be sent a letter inviting them to attend an appointment and some letters have already been issued for the very first community hub clinics which started on Monday 28 September 2020. Letters will continue to issued on a rolling programme going forward. If the appointment time doesn't suit or if people have any difficulty in getting to their appointment they will be advised in the letter to email or phone NHS Forth Valley's local flu helpline to make alternative arrangements (fv.adultflu@nhs.scot or 01324 614692 or 01324 616050). We expect that

demand for a flu vaccine this year to be high, and the Flu Immunisation Team will continue to explore the use of additional/alternative premises, should the need arise. A further venue in Dunblane has already been agreed for the week beginning 2 November.

8.5 More information (including details of local GP practices which are continuing to provide the vaccine to adults in the higher risk groups - in addition to children aged 2 – 5 years), participating pharmacies and community venues can be found on the NHS Forth Valley website <a href="www.nhsforthvalley.com/flu">www.nhsforthvalley.com/flu</a> Additional guidance on flu, including details of the eligible groups, can be found on NHS Inform <a href="www.nhsinform.scot/healthy-living/immunisation/vaccines/flu-vaccine">www.nhsinform.scot/healthy-living/immunisation/vaccines/flu-vaccine</a>

#### 8.6 Winter Plan 2020/21

Preparing for Winter 2020-21 is a component of the Remobilisation plans for Health and Social Care in Forth Valley. The remobilisation plans set out the arrangements to respond to the increased impact of Covid-19 on the delivery of health and social care services over the winter period, alongside the usual winter pressures. This includes increased demand and the response to severe weather conditions. This winter, in addition to the seasonal increases in demand and the resurgence of Covid-19, there is the potential impact of EU withdrawal, for example on the supply of medicines and other goods.

- 8.7 A weekly Forth Valley Remobilisation Winter Planning meeting is attended by clinical and service leads from across health and social care and the group has focussed on capacity planning, escalation plans, workforce, test and protect, Covid-19 demand and policy, and the flu vaccination programme.
- 8.8 A national Health and Social Care Winter Planning and Response Group has been established and local actions in Forth Valley will be aligned to the requirements set out by the national group.
- 8.9 Other winter planning related work being taken forward in Forth Valley include near patient testing for flu, preparing for near patient testing for Covid 19, flu vaccination programme for vulnerable adults, adults aged 65 and above and children, severe weather preparations and a review of arrangements to access 4 wheeled drive vehicles.

## 9. Integrated Workforce Plan 2021 – 2024

9.1 Work has now commenced on the development of the integrated workforce plan for the HSCP. An initial workshop is being held with the HSCP Leadership team and Trade Unions to consider the key issues, challenges and future delivery plans which will impact on the HSCP workforce requirements. Following this, a further workshop will be held to consider the outputs from this session and to develop an action plan which will form part of the Workforce Plan.

- 9.2 As the IJB will be aware, the HSCP was required to publish its Workforce Plan by 31 March 2021. This timescale has however, been significantly impacted by Covid-19. In recognition of this, the Scottish Government has now amended the timescale. This requires all Partnerships to submit 3-year Workforce Plans by 31 March 2022. These will be effective from 1 April 2022.
- 9.3 In the interim, the Scottish Government will be producing a template workforce plan document which Partnerships will complete and submit. This template will cover the period 1 April 2021 to 31 March 2022. It is anticipated that this template will be received at some point in December 2020 for the HSCPs consideration.
- 9.4 In the meantime, the workshops will still progress as these will support completion of both the interim template and ensure good preparations are in place for the development of the future 3 year plan.

#### 10. IJB Governance

- 10.1 Consultation on amendments to the Civil Contingencies Act 2004
  Consultation on amendments to the Civil Contingencies Act 2004 to include IJB's closed on 2 November 2020. The Scottish Government are consulting to ensure that there are no unintended or unexpected consequences to IJB's becoming Category 1 responders under Schedule 2 of the <u>Civil</u> Contingencies Act (2004).
- 10.2 The Act makes the following requirements for those listed as Category 1 responders:
  - assess the risk of emergencies occurring and use this to inform contingency planning
  - put in place emergency plans
  - put in place business continuity management arrangements
  - put in place arrangements to make information available to the public about civil protection matters and maintain arrangements to warn, inform and advise the public in the event of an emergency
  - share information with other local responders to enhance coordination
  - co-operate with other local responders to enhance co-ordination and efficiency
  - provide advice and assistance to businesses and voluntary organisations about business continuity management (Local Authorities only).
- 10.3 IJB's, Health Boards and Local Authorities share a joint responsibility and accountability for drawing up suitable plans which take account of functions managed by each individual body. Therefore, the IJB Chief Officer is expected to work alongside Health Board and Local Authority colleagues

when carrying out the duties relevant to the Act.

- 10.4 Whilst Chief Officers have already been contributing to local emergency and resilience planning, they have only formally done so through their roles as directors of Health Boards and Local Authorities and without the appropriate reference to their accountable officer status within the IJB. By including IJB's as Category 1 responders, it ensures that where there is a risk of an emergency which will impact functions delegated to the Board, there will be formal coordinated and appropriate arrangements in place for: emergency planning; information sharing and cooperation with other responders; and joined up information sharing and advice for the public.
- The Chief Officer would lead for the IJB and can draw on resource from their integrated teams (both Health Board and Local Authority employed staff). It would be expected that the Chief Executives of the Health Board and Local Authority be involved, or have put in place appropriate representation to ensure the views of those bodies are well covered.
- 10.6 The Scottish Government does not envisage that including IJB's as Category 1 responders under the Civil Contingencies Act 2004 will cause significant additional burden to them. Although the Act sets out a number of requirements, the main addition will be the formal inclusion of IJB Chief Officers in emergency planning, not just in their role as a director within a Health Board or Local Authority, but also in their role as the accountable officer of the IJB.

#### 10.7 IJB Third Sector representative

Recruitment to the TSI Chief Executive Officer post is ongoing and an update will be provided at the next meeting. The Board previously agreed Third Sector representation would be from the TSI and a local third sector organisation.

#### 10.8 Climate Change Report 2019/2020

The IJB as a public body has a statutory duty to produce a Climate Change Report under the Climate Change (Scotland) Act 2009. As the IJB has no direct responsibility for staff, buildings or fleet cars, the report does not contain a significant level of detail and aspects related to these areas is contained within constituent authorities reports.

- 10.9 The IJB has submitted annual reports since 2017 and these can be found on Sustainable Scotland Network website at <a href="https://sustainablescotlandnetwork.org/reports/falkirk-ijb">https://sustainablescotlandnetwork.org/reports/falkirk-ijb</a>
- 10.10 The Board is asked to note that the annual Climate Change report 2019/2020 has been submitted and will ensure the Board is able to meets its requirements under the Climate Change (Scotland) Act 2009.

## 11. IJB Financial Update

11.1 An update on the financial position is detailed as a separate agenda item.

## 12. Correspondence

#### 12.1 Mental Welfare Commission: Section 13ZA

The MWC has written to Chief Officers to advise that the Commission intends to work with HSCP's to independently review the practice in recent months with specific reference to moves from hospital to care homes. This will also include further inquiries as to the rights based practice and legal authority supporting the moves. The focus of this piece of work is to identify any learning and ensure learning takes place where required to support individuals.

- 12.2 Section 9 of the Adults with Incapacity Act details the Commission's safeguarding role in respect of adults whose capacity to make decisions or to take actions to promote or safeguard their welfare is impaired due to a mental disorder.
- 12.3 The Partnership is responding to information requests from the MWC to support their inquiries. It is anticipated these will be concluded and reported on by end January 2021.

#### 13. Conclusions

13.1 The report summaries the range of work being taken forward on a collaborative and strategic approach that will continue to address the range of issues facing the partnership and to improve outcomes for service users and carers in Falkirk.

#### **Resource Implications**

The Chief Finance Officer will continue to report through the IJB financial 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.

#### Impact on IJB outcomes and priorities

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

#### **Directions**

A new Direction or amendment to an existing Direction is not required as a result of the recommendations of this report.

#### **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.

## 14. Report Author

Suzanne Thomson, Senior Service Manager

## 15. List of Background Papers

n/a

## 16. Appendices

Appendix 1: Delegated Decisions

## **Chief Officer Delegation of Powers to Determine Urgent Issues during the period of Coronavirus**

(from 20 March 2020 to 5 June 2020 (extended to 20 Nov 2020)

Date of Request	Date of Decision	Decision Taken	Approved By	Financial Impact	Budget Exceeded Y/N	Link to IJB Report Recommendation if Appropriate	Organisation	Purpose of Funding	Funding		Date Reported to IJB	Date Chair/Vi ce Chair Notified
	04-Sep-20	Approved	Patricia Cassidy	Y		Included in Covid- 19 Local	Scottish Care	1.5 day support extended to from 1st	£9,102	31- Mar-	Nov 20	
			,			Mobilisaton Plan		Oct to 31 March 2021		21		
	30-Oct-20	Approved	Patricia	N	N/A	IJB Meeting 20 Mar	HSCP	Approval of changes to	N/A	N/A	Nov 20	30-Oct-
			Cassidy			2020 agenda item		terms of reference of				20
						<u>11</u>		the Audit Committee.				