Glasgow City Integration Joint Board

IJB(M)2021-02

Minutes of a virtual meeting held
at 9.30am on Wednesday, 24th March 2021

Present:

Voting Members	Susan Brimelow	NHSGG&C Board Member
	Simon Carr	NHSGG&C Board Member (Chair)
	Bailie Annette Christie	Councillor, Glasgow City Council
	Cllr Mhairi Hunter	Councillor, Glasgow City Council (Vice Chair)
	Amina Khan	NHSGG&C Board Member
	Cllr Jennifer Layden	Councillor, Glasgow City Council
	John Matthews	NHSGG&C Board Member
	Cllr Maggie McTernan	Councillor, Glasgow City Council
	Anne Marie Monaghan	NHSGG&C Board Member
	Cllr Jane Morgan	Councillor, Glasgow City Council
	Rona Sweeney	NHSGG&C Board Member
	Flavia Tudoreanu	NHSGG&C Board Member
	Charles Vincent	NHSGG&C Board Member
	Cllr Martha Wardrop	Councillor, Glasgow City Council
Non-Voting Members	Gary Dover	Assistant Chief Officer, Primary Care & Early Intervention
	Dr Julia Egan	Chief Nurse
	Mags McCarthy (attended until Item 9)	Staff Side Representative (NHS)
	Peter Millar	Independent Sector Representative
	Susanne Millar	Chief Officer
	Dr John O'Dowd	Clinical Director
	Anne Scott	Social Care User Representative
	Chris Sermanni	Staff Side Representative (GCC)
	Dr Michael Smith	Lead Associate Medical Director
	Shona Stephen	Third Sector Representative
	Sharon Wearing	Chief Officer, Finance and Resources
In Attendance:	Mike Burns	Assistant Chief Officer, Children's Services
	Allison Eccles	Head of Business Development / Standards Officer
	Gillian Ferguson	ADP Coordinator
	Stephen Fitzpatrick	Assistant Chief Officer, Older People's Services
	Christina Heuston	Assistant Chief Officer, HR
	Margaret Hogg	Assistant Chief Officer, Finance
	Julie Kirkland	Senior Officer (Governance Support)
	Claire Maclachlan	Governance Support Officer (Minutes)
Apologies:	Bailie Ade Aibinu	Councillor, Glasgow City Council
	Jonathan Best	Chief Operating Officer, NHSGG&C
	Patrick Flynn	Head of Housing Regeneration Services, DRS, GCC
	Cllr Elspeth Kerr	Councillor, Glasgow City Council
	Jacqueline Kerr	Assistant Chief Officer, Adult Services / Interim Chief Social Work Officer

Ann Souter	Health Service User Representative

Actions

Appointment of Chief Officer

Simon Carr presented report advising the purpose is to confirm the appointment of the Chief Officer to the Glasgow City Integration Joint Board (IJB).

David Williams has been on secondment to the Scottish Government for almost two years and has indicated he won't be returning to the post. In consultation with the two Chief Executives from the Council and Health Board, and in accordance with the recruitment procedures, Susanne Millar was interviewed for the substantive post of Chief Officer for Glasgow City HSCP last week and was successful.

Members asked for confirmation if this had been through a wider recruitment process.

The Chair confirmed this was a single applicant process in accordance with Glasgow City Council recruitment procedures.

Members welcomed the appointment and agreed unanimously that Susanne Millar be confirmed as the Chief Officer to the Glasgow City Integration Joint Board.

The Integration Joint Board:

a) confirmed the appointment of Susanne Millar as the Chief Officer to the Glasgow City IJB.

On conclusion of this item, Susanne Millar joined the meeting.

1. Declarations of Interest

There were no declarations of interest noted.

2. Apologies for Absence

Apologies for absence were noted as above.

3. Minutes

The minutes of 27th January 2021 were approved as an accurate record.

4. Matters Arising

There were no matters arising.

Actions

5. Integration Joint Board Rolling Action List

Allison Eccles presented the IJB Rolling Action List advising there were six open actions which are ongoing

Ref No 59 - Glasgow City IJB Meeting Recording – Officers confirmed there is an item on this agenda to discuss this action.

Ref No 60 - Officers confirmed a further meeting of the Short Life Working Group on Performance took place on Friday 12 March. A number of actions were agreed to refine the framework and a meeting has been arranged with the Glasgow Centre for Population Health to discuss academic input. Officers will work on a paper and bring to a future IJB meeting. Officers

Ref No 61 - Scottish Government Funding for Improved Mental Health Services and Support for Children and Young People – Officers confirmed Councillor Mhairi Hunter has written to Scottish Government regarding this action and is awaiting a response.

6. Chief Officer Update – COVID-19 / IJB Governance

Susanne Millar presented the Chief Officer Update – COVID-19 Report advising the purpose of this is to update the IJB on COVID-19 and the current arrangements in place across the Partnership to respond to the pandemic.

Officers highlighted the following from the presentation:

Incidence – Tests:

- By 17th March 2021 a cumulative total of 444,386 tests for COVID carried out across Greater Glasgow & Clyde (GG&C).

Incidence – Inpatients:

- The total number of inpatients has been gradually decreasing since February, however at 22 March is still 7% higher than during the first wave peak last year.

Incidence – Community Assessment Centres (CAC's):

- The main outcomes for people attending a CAC are discharge to self isolate (46%), discharge to home (26%) and referral to SATA (23%).

Vaccinations:

- At 20th March, a total of 459,886 vaccinations have been administered across GG&C – 413,448 first doses and 46,438 second doses.

Care Homes (Glasgow City):

- As at 19th March 2021 there was 1 older people care home and 0 adult care homes in Glasgow City with confirmed COVID outbreaks.

Actions

Workforce (NHS):

- COVID-19 related absence amongst NHS staff in the HSCP has been falling steadily since the last update (103). Absences due to COVID diagnosis have dropped significantly from 24% to 1%.

Workforce (GCC):

- COVID-19 related absence amongst GCC staff in the HSCP has fallen steadily since the last update on 24 January when it was 355.

COVID-19 Governance:

- Since the previous update the NHS Strategic Executive Group has scaled back to meeting 3 times per week, and the GG&C HSCP Tactical Group now meets once per week.
- During February the HSCP's Executive Group scaled back from 4 to 3 times per week and has met twice per week during March.
- Care Home Enhanced Governance arrangements continue
- In terms of recovery, the Accommodation group have met throughout February and March reviewing risk assessments and COVID restrictions in all buildings used by the HSCP.
- The HSCP Executive Group plan to review COVID governance over the coming weeks which will include focus on arrangements supporting the transition from Response to Recovery.

IJB Governance:

- It is proposed that full governance arrangements for the IJB is stood back up from today (24 March 2021).
- It is recommended that the requirement for report authors to keep report presentations brief remains in place to ensure meetings can effectively address all business.
- It is recommended that members raise questions / points of accuracy in advance of meetings where possible. The service will continue to aim to issue IJB papers 2 weeks before meeting dates to facilitate this.

Officers encouraged Members to send questions to the Glasgow City IJB mailbox in advance of the meetings. Questions and answers will be published on the Glasgow City HSCP website.

Members questioned the percentage of tests being carried out that are providing a positive result which appeared higher that what is being reported nationally.

Officers advised that this could be related to the volume of testing being carried out and also the asymptomatic community-based testing centres that have been established. Numbers have also been added for front-line staff, teachers and senior pupils returning to school who have been offered testing.

Officers confirmed the key message is that the rates are still under control.

Actions

Members suggested that future updates display staff absence figures as a percentage rather than numbers as this will be more meaningful for Members.

The Integration Joint Board:

a) noted the contents of the presentation; and
b) approved the return to full governance arrangements for the IJB and its committees

7. Medium Term Financial Outlook 2021-2024

Sharon Wearing presented the report which outlines the Medium Term Financial Outlook for the Integration Joint Board (IJB) and has been prepared to support financial planning and delivery of the IJB's Strategic Plan.

Members questioned if other IJBs are completing a medium term financial outlook and if the Scottish Government view them.

Officers advised nationally all IJBs are expected to produce a Medium Term Financial plan and this is also a recommendation from Audit Scotland. They are a good practice tool and are available to view on the HSCP website for anyone wishing to view the plan.

Officers highlighted a 5-year plan for Health and Social Care is available, produced by the Scottish Government, which laid out new demand, pressures and growth. The plan illustrates that demand is higher and growing at a faster rate however the funding is not representative of that.

Members referenced the provision of iPads and chrome books to children and whether there is joined up work with Education Services to make sure all families have access to these resources particularly families where English is not their first language.

Officers provided reassurance that the digital work is across all Children and Families Services, including Health Improvement, Education Services, Glasgow Life and Third Sector partners and this is linked to the work on the Poverty Action Plan for Children's Services.

Members highlighted the reference to the Institute of Fiscal Studies and the Health Foundation report which outlined the requirement for an average of 3.3% per year increase to maintain NHS provision and a 3.9% increase for Social Care to meet the needs of the population. Members asked if this report was available and Officers confirmed the report would be circulated to Members. Officers

Members raised concern with regards to the savings and the allocation being received from partners not being sufficient to meet demand and asked for clarification on how this would be taken forward.

Actions

Officers advised there are a number of factors to this. The first is the funding from the Scottish Government and what is in their plans for Health and Social Care going forward. The biggest challenge is in Social Care as this is the first year since integration that the HSCP has not received any funding for demographic pressures.

The second factor relates to the processes through the Council where officers will make the case on behalf of the HSCP for Social Care and outline the pressures around this. The Chief Social Work Officer has a role to provide safe services to service users and to meet statutory requirements.

Officers highlighted that the budget is managed through transformation programmes and the HSCP hasn't been in a position thus far where the Chief Social Work Officer has felt the need to step in and raise a breach of statutory duty in terms of the budgets available.

The Integration Joint Board:

a) approved the Medium Term Financial Outlook 2021– 2024 attached to this report at Appendix 1.

8. Integration Joint Board Financial Allocations and Budgets for 2021/2022

Sharon Wearing presented the report which provides the IJB with a full update on the proposed financial allocations to, and implications for, the IJB Budget in 2021-22.

Officers advised the offer letters have been received from the Council and Health Board, and both offers comply with the letters that have come out from the Scottish Government in relation to budget allocations.

Members questioned the reserves, referencing the underspend being allocated to reserves to take it up to £26m, and asked if this is the current position.

Officers advised there will be an out-turn report presented at the IJB in June 2021 which will provide an update on the reserves position. This paper outlines the policy which is to have a 2% general reserve based on the budget. The current position is 1% however the aim is to get this to 2% to get financial stability and Officers are making progress towards this. Officers advised that Audit Scotland review the reserves position of IJBs every year.

Members requested a copy of the preliminary assessments that have been undertaken looking at the possible impact on groups of protective characteristics.

Officers advised a number of EQIAs have been completed and the details will be circulated to members. Officers

Actions

The Trade Union representative (GCC) questioned how much consideration had been given to no budget cuts this year and using reserves due to the unique position this year with the pandemic.

Officers advised that reserves are non-recurring, and therefore this is not a recurring solution to a savings target. Officers highlighted that the strategy is to set a balanced budget but recognising that reserves are there to assist throughout the year if things don't go to plan. The challenges of COVID and the ask around savings for Year 2 and Year 3 will require Officers to ensure the position can be sustained going forward.

The Integration Joint Board:

a) noted the contents of this report;
b) noted and accepted the funding offer from Glasgow City Council;
c) noted and conditionally accepted the indicative funding offer from NHS Greater Glasgow and Clyde, subject to confirmation when the out-turn for the 2020/21 financial year has been finalised;
d) noted that the budget for set aside is still notional and further updates will be provided in 2021-22;
e) agreed to the funding pressures outlined at section 5.2;
f) agreed to the savings programme outlined at section 5.9;
g) delegated a budget to NHS Greater Glasgow and Clyde of £966,117,000 and directed that this budget is spent in line with the strategic plan of the IJB and the proposals included within this paper at section 5.2 and 5.9; and
h) delegated a budget to Glasgow City Council of £452,051,700 and directed that this budget is spent in line with the strategic plan of the IJB and the proposals included within this paper at section 5.2, 5.9 and 5.10.

9. Primary Care Improvement Plan April 2021 onwards (PCIP 3)

Gary Dover presented the report which seeks approval from the Board for the primary care improvement plan for April 2021 onwards (PCIP 3).

Officers highlighted that no further funding has been made available from the Scottish Government, therefore final plans must be limited to the final funding which is available, which is £18.792m. The main changes that are being proposed to the final workstream budget and recruitment of staff are outlined in the report.

The Chief Officer praised the work of Gary and the Clinical Directors and highlighted the commitment to ensuring General Practice and Primary Care is at the heart of the partnership's strategic direction and a key driver for the transformational work that the HSCP wants to do. The Clinical Director also confirmed his support for the plan.

Actions

Members requested an updated paper on the Community Link Workers programme, in particular those areas where they have made the most progress.

Members also questioned if there has been any consideration to CBT workers being employed in the Primary Care team.

Officers confirmed they would be happy to produce a paper for a future IJB meeting on the Community Links Workers programme. Officers

Officers advised that the Mental Health workstream is still being worked on and the proposals around that can be brought to the IJB in due course. Primary Care is key in the strategic direction and there is a need to work in a much wider view of mental health and mental wellbeing. Online access to CBT has been popular with GPs and patients and has been well evaluated.

Members highlighted there is some expenditure needed to reconfigure premises and asked if there is scope to use capital for this.

Officers advised the expenditure in the main relates to health centres and a proposal is going to the Capital Planning Board around this. Officers highlighted there is some non-recurring money which has been identified for PCIP and this will be used specifically to convert some of the rooms to treatment rooms. There are also general maintenance issues that need addressed to make sure the fabric of the building is secure. As the HSCP don't receive a capital allocation this needs to be done through the partner organisation.

Members noted concern with regards to urgent care and the financial pressures, particularly around the recruitment of Advanced Nurse Practioners (ANPs).

Officers advised that urgent care is a specific programme for PCIP which will use ANPs and paramedics to replace GPs for urgent home care visits. ANPs have been providing support in the five HSCP residential care homes. There has been really good feedback with regards to the quality of care and there is a significant saving on GP time. Officers highlighted the national urgent care model hasn't been agreed as yet and they need to await the outcome of this.

Members also referenced evaluation and the need to look at the impact of the Community Link Workers as there could be pressure further down the line with the impact of COVID and long COVID.

Officers advised that there will be Board-wide evaluation on the impact of link workers. The Scottish Government is looking at increasing numbers for link workers and discussions are taking place regarding longer term funding.

Members questioned how much of the budget is focusing on prevention, and how much focus is on addressing primary care issues.

Actions

Officers confirmed that a lot of discussion took place when the PCIP and the MOU came out around the balance of prevention and treatment. There are different layers of prevention and exact numbers and proportions are not available. Officers agreed however that there is a need to strengthen the inequalities in the prevention agenda.

Members questioned how the Independent Review of Adult Social Care impacts on the PCIP and how the plan links with other strategies, such as the Moving Forward Together (MFT) programme.

Officers advised that any structural changes arising from the Independent Review won't make a difference to the strategic direction of travel for primary care and the aspirations in the organisation. PCIP is a contributor to the strategic agenda and is fully aligned with the Strategic Plan. The focus is on the recommendations and aspirations of the Independent Review rather than the organisational structures.

Officers confirmed that the HSCP contribution to MFT is aligned to Maximising Independence and inequalities. PCIP is the operational arm of strategic direction of travel for primary care and is clearly aligned with MFT.

The Integration Joint Board:

a) noted the contents of this report; and
b) approved the attached PCIP 3.

10. Alcohol and Drug Partnership Investment Plan Update

Susanne Millar presented the report advising the Integration Joint Board (IJB) on the Alcohol and Drug Partnership development plans for investment, following the allocation of Additional funding to reduce drug deaths 2020-21, and to seek approval for the additional planned activity to reduce drug deaths.

Members welcomed the changing narrative and the different approaches being explored, particularly around the WAND roll out.

Officers highlighted the history of ADP in the city and the IJBs courage in relation to the alcohol and drugs agenda. WAND was started and proposed by frontline staff led by pharmacy and IMP provision and the HSCP has been well supported by the IJB in its innovations.

Members questioned if there had been any service user involvement in how the money was spent, particularly given the tight turnaround required in submitting spending plans.

Officers advised that the recovery movement are a formal member of the ADP and were involved in the discussions regarding additional spend.

Members requested clarification on the current number of residential beds and what impact it would have by increasing the number by 4.

Actions

Officers confirmed the 4 extra beds gives a possible 16 extra placements and will give flexibility to extend places. The increase will take the number of beds from 56 to 72 in abstinence and there is a 10 bedded stabilisation service with a planned extension to 16 beds.

Members queried if this will meet demand. Officers confirmed that there is no waiting list for residential abstinence services so demand is being met. Stabilisation services are under a bit more pressure and the plans regarding extension of beds will help with this.

Members questioned what links there are with the Third Sector regarding community support to people with poor life circumstances and how to ensure engagement with that sector regarding the money being made available.

Officers confirmed the Third Sector are members of the ADP and are involved in the discussions and decision making. Engagement with the third sector and RSLs is critical to success of the Housing First agenda.

Members questioned how much discretion there is with regards to monies from the Scottish Government.

Officers advised some of the urgent non-recurring money is attached to certain initiatives and there is explicit guidance with regards to how the HSCP spends this funding. Mainstream funding and spend is where the most influence can be applied to make significant differences.

Members questioned if the funding will be focused on wider goals and not solely on preventing drug deaths.

Officers advised the vast majority of funding is on core mainstream services and recovery is the focus. Glasgow has three strong recovery communities and recovery hubs. The strategy in Glasgow City is well balanced about that focus on recovery and harm reduction.

Officers clarified that the specific focus of this money related to the response from the Scottish Government in terms of the ongoing increase in drug related deaths however there is a wider range of services and the strategic approach is much greater than described in this report.

The Integration Joint Board:

a) noted the proposals outlined in this report; and
b) approved the additional planned activity funded from the Scottish Government ADP Additional funding to reduce drug deaths 2020-21.

11. Glasgow City IJB Budget Monitoring Statement for Month 10 / Period 11 2020/21

Sharon Wearing presented report which outlines the financial position of Glasgow City Integration Joint Board as at 31st January 2021 (Health) and

Actions

15th January 2021 (Council) and highlights any areas of budget pressure and actions to mitigate these pressures.

Officers noted a correction at paragraph 5.4.1 in the report, which should state underspend and not overspend. This will be amended on the report. Officers

Additional funding was received in December 2020 from the Scottish Government via the Winter Plan Social Protection Fund and the plans for spend are outlined in the report. It has been confirmed that up to 25% of the allocation can be carried forward into next year.

Officers highlighted that they are awaiting a technical response regarding 'principal' and 'agency' transactions which will determine what happens with COVID money. This decision may impact year end but will allow a clearer picture when the position is clarified.

Members questioned the payments with regards to Looked After and Vulnerable Children and who the payment is going to.

Officers advised these payments are going direct to the children themselves. This includes looked after and accommodated children and all children in the care of Social Work who have received a payment of £400. The Scottish Government have approved these plans.

The Integration Joint Board:

a) noted the contents of this report;
b) approved the budget changes noted in section 3;
c) noted the funding received from the Winter Plan Social Protection Fund and the plans outlined in section 5.1.9; and
d) noted the summary of current Directions (Appendix 2).

12. Mental Health Strategy – Programme Update

Stephen Fitzpatrick presented the report which updates the IJB on the approach and work to date in development of the Board-wide Older People's Mental Health (OPMH) and Adult Mental Health (AMH) strategy. Similar reports are being considered by the other five IJBs in Greater Glasgow & Clyde.

Officers highlighted the work has been progressing over the last 2-3 years in the Adult and Older People system and is highly interconnected.

There is a clear emphasis to substantively shift from inpatient care to community-based services. There are no savings attached to this work and any reduction in inpatient beds will result in that funding going to support community-based alternatives.

Actions

Learning from the pandemic response will inform the final content of both strategies. The development of Mental Health Assessment Units (MHAUs) has been a significant element of responding to the pandemic and will feature in the final strategies.

Members requested more detail on how the strategies link to the Maximising Independence programme.

Officers advised that the principal philosophy of Maximising Independence is reflected across all transformation programmes and areas of change across the HSCP in relation to prevention, early intervention and supporting people to live as independently as possible.

Members requested clarity on the demand on beds and also sought assurance that the work being done on forensic beds is joined up.

Officers advised that the detailed work on adult beds is ongoing and has been impacted by COVID-19. The implementation of those plans has been postponed as it's not clear how it will look subsequent to the pandemic. Officers provided assurance that beds will not be reduced unless there is confidence that the system can manage without them.

For Older People Services there has been overcapacity in some units for a long time and therefore OP beds can safely be reduced. Work is ongoing in relation to bed modelling which is not included in the report.

Officers confirmed that recent work is explicitly linking forensic with adult beds and includes low secure rehab beds. Officers highlighted the Barron Report relating to Forensic Services which was recently published and will impact on how the forensic estate is managed overall. Officers agreed to circulate the report to Members. Officers

Members highlighted the ward closures that will happen due to remedial work and asked for clarity on the mitigation strategy in terms of the impact that will have on other wards and beds.

Officers highlighted there are a range of health and safety issues to be addressed. There is no national guidance on the refurbishment of mental health wards so there is uncertainty on what the specifics would be. Work will continue on the actions required to mitigate the risks.

Members referred to the needs and arrangements of other Health Boards particularly in relation to specialist learning disability services which faced huge challenges during the pandemic and the overflow in mental health service provision, and whether the strategy mitigates for these going forward.

Officers confirmed there are good working relationships with neighbouring Boards and discussions will take place to manage the cross-border flow. Specialist services will be strengthened over the next few years to pull resources nationally to support rural areas.

Actions

Officers agreed that the pandemic had an adverse impact in learning disability provision in relation to day care support. There is awareness of the issues and this will take time to resolve.

Members noted that greater emphasis needs to be given to addressing the needs of people with protected characteristics and highlighted that the BAME community have been particularly affected this past year. More emphasis was requested on reflecting on the service approach thus far and committing to adapting and changing where necessary in order to better serve minority communities.

Officers accepted these points however highlighted that the paper is reporting back on a specific element rather than the Strategy in its entirety. Officers confirmed there will be a refresh of the full strategy which will include the specific adverse impact on protected characteristics as a result of COVID-19. This reflection is on-going and Officers welcomed the comments from members in this regard.

Members praised the ground-breaking work of the Mental Health Strategy and the radical approach and suggested that the core elements are picked out when reviewing the strategy to highlight the progress made and any change in direction and why that has happened.

Officers confirmed that the aspirations of the Mental Health Strategy are still there and the findings from the Refresh Short Life Working Group can be reported back to a future meeting.

Members referred to discharge planning and development of care pathways and queried if there is currently a hospital discharge and aftercare programme similar to that.

Officers confirmed that there is however it does not work for all and further work is required for those who need extra support to make the transition more effectively.

Members raised concerns regarding the accommodation planning and financial investment and whether there was enough user or community involvement in the innovations that are ongoing regarding health and safety design
Officers advised that patient and family engagement will be covered in the refresh of the Mental Health Strategy and community engagement is central to the work.

The Integration Joint Board:

a) noted the financial framework at appendices 1 & 2; and
b) approved the approach to development of the Older People and Adults Mental Health Strategy as described throughout this report.

Actions

13. Integrated Children's Services Plan 2020-2023

Mike Burns presented report which seeks approval for the publication of the Children's Services Plan (2020 – 2023), which has been developed in conjunction with representatives of key agencies across the Community Planning Partnership.

Members raised performance monitoring and how to assess the wider impacts and outcomes where there is no local data available and asked if Officers can come back and look at outcomes more widely on a Glasgow or wider level.

Officers advised the data needs to be coordinated and should also be sourced from Education, Health Improvement, and the community to show the progress being made.

Officers also advised, from a planning perspective, that they will report to the IJB Finance, Audit and Scrutiny Committee with a new set of indicators which are more aligned to the Children's Services Plan and transformation agenda.

Officers highlighted that they have approached the Glasgow Centre for Population Health on the more general issue of performance, but a specific ask can go to them to look at outcomes in Children's Services.

The Integration Joint Board:

a) reviewed the draft Integrated Children's Services Plan 2020 - 2023;
b) provided feedback on the content; and
c) approved publication of the Plan by 31 March 2021, pending the incorporation of any feedback provided by IJB members.

14. Glasgow City Integrated Joint Board – Public Access

Allison Eccles presented report asking the Integration Joint Board to consider whether IJB meetings should be made accessible to the public via Microsoft Teams until physical meetings are able to be resumed and are open to the public.

Officers highlighted that over time Microsoft Teams has progressed and it provides more functionality. Guidance will be produced around participating in a virtual meeting and meeting etiquette — Officers

The Integration Joint Board:

a) considered whether IJB meetings should be made accessible to the public via Microsoft Teams; and
b) instructed officers accordingly to develop appropriate guidance as outlined at Section 4.

Actions

15. IJB Committees – Update from Chair of Finance, Audit and Scrutiny Committee (meeting of 10 February 2021)

Rona Sweeney provided an update from the IJB Finance, Audit and Scrutiny Committee held on Wednesday 10th February 2021.

Reports were presented on Mental Welfare Commission Visits and the Community Alarm Audit, which are both important areas of work which continued despite the pandemic.

Rona also highlighted the performance presentation which focused on Health Improvement and outlined the impact of the pandemic and how flexible services have been in finding alternative ways to contact people.

The next meeting is scheduled for Wednesday 14 April 2021.

AOCB

The Chair highlighted this would be Dr. Michael Smith's last IJB meeting as he is retiring. Members and Officers thanked Michael for his contributions and wished him well in his retirement.

The Chair also thanked Business Development staff for their support with papers and I.T. in advance of the IJB.

Scottish Living Wage

Sharon Wearing advised that the Scottish Living Wage announcement is due out next week and the decision by the Cabinet Secretary is for a 2.2% uplift of the whole rate. Due to the timing of IJB meetings, Officers advised that a report will be shared with the Chair and Vice Chair to request agreement for approval under the Chief Officer's delegated authority and a report will be presented to the May IJB for noting.

16. Next Meeting

The next meeting will be held at 9.30am on Wednesday 5th May 2021 via Microsoft Teams.