

Glasgow City Integration Joint Board

IJB(M)2024-05

Minutes of a virtual meeting held at 9.30am on Wednesday 28th August 2024

Present:

Voting Members

Brian Auld	NHSGG&C Board Member
Martin Cawley	NHSGG&C Board Member
Cllr Allan Casey	Councillor, Glasgow City Council
Dr Emilia Crighton	NHSGG&C Board Member
Cllr Chris Cunningham	Councillor, Glasgow City Council (Chair)
David Gould	NHSGG&C Board Member
Jane Grant	NHSGG&C Board Member
Graham Haddock OBE	NHSGG&C Board Member
Bailie Ann Jenkins	Councillor, Glasgow City Council
Margaret Kerr	NHSGG&C Board Member (substitute for Charles Vincent)
Bailie Norman MacLeod	Councillor, Glasgow City Council
Cllr Elaine McDougall	Councillor, Glasgow City Council
Cllr Jon Molyneux	Councillor, Glasgow City Council
Cllr Lana Reid-McConnell	Councillor, Glasgow City Council
Paul Ryan	NHSGG&C Board Member (Vice Chair)
Charles Vincent	NHSGG&C Board Member

Non-Voting Members

Fred Beckett	Carers Representative
Ian Bruce	Third Sector Representative (substitute for Fi Grimmond)
Craig Cowan	Head of Business Development / Standards Officer
Lorraine Cribben	Chief Nurse (substitute for Julia Egan)
Gary Dover	Assistant Chief Officer, Primary Care & Early Intervention
Kelda Gaffney	Interim Assistant Chief Officer, Adult Services, and Interim Chief Social Work Officer
Stuart Graham	Trade Union Representative (GCC)
Jacqueline Kerr	Interim Chief Officer
Lorcan Mullen	Staff Side Representative (NHS GG&C) (substitute for Margaret McCarthy)
Dr John O'Dowd	Clinical Director
David Reilly	Independent Sector Representative
Sharon Wearing	Chief Officer, Finance and Resources

In Attendance:

Steven Blair	Business Development Manager
Karen Dyball	Assistant Chief Officer, Children's Services
Margaret Hogg	Assistant Chief Officer, Finance
Claire Maclachlan	Governance Support Officer
Anne Mitchell	Head of Older People & Primary Care Services
Jane Wong	Support Officer – Minutes

Apologies:

Dr Scott Davidson	Acute Services Representative
Dr Julia Egan	Chief Nurse
Fi Grimmond	Third Sector Representative
Margaret McCarthy	Staff Side Representative (NHS GG&C)
Cllr Cecilia O'Lone	Councillor, Glasgow City Council
Jennifer Sheddan	Head of Housing, Neighbourhoods, Regeneration & Sustainability, GCC

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Charles Vincent

NHSGG&C Board Member

Actions

1. IJB Membership Update

Craig Cowan presented a report providing an update on several changes to the membership of the Glasgow City IJB. The report requests approval of appointments to IJB Committees and notes the remaining vacancies.

The Chair welcomed new members to their first Glasgow City IJB and advised that Jane Grant, Chief Executive, Greater Glasgow, and Clyde NHS Board has been appointed as a Member of the IJB, noting that the Health Board will seek to appoint a member to replace Jane when she retires later this year.

The Integration Joint Board:

- a) Noted the appointments outlined in sections 2 and 3;
- b) Noted the NHS GG&C Board have appointed Paul Ryan as the NHS Lead and Vice Chair of the IJB outlined at paragraph 2.2;
- c) Approved the appointments to IJB Committees in section 4; and
- d) Noted a number of positions that remain vacant on IJB Committees outlined in section 5.

2. Declarations of Interest

There were no declarations of interest.

3. Apologies for Absence

Apologies for absence were noted as above.

4. Minutes

The minutes of 26th June 2024 were approved as an accurate record.

5. Matters Arising

There were no matters arising.

6. Chief Officer Update

Jacqueline Kerr provided the following update.

Delayed Discharges – delays position is stable at the moment for August 2024, consistently remained around 150. The major issue of the past month has been the increase in Adults with Incapacity (AWI) delays, which at 72 have reached almost 50% of all delays. Health Improvement Scotland (HIS) have agreed to work with the HSCP to establish where there may be improvement opportunities. This offer being part of John Swinney's mission to reduce delayed discharges across Scotland by 700 by October. The focus is likely to be on the increasing

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number of complex under 65 patients lacking capacity who become delayed in hospital. A meeting is planned to take this work forward.

The purchased care home budget continues to come under significant pressure due to the increased discharge demand from hospital.

Homelessness:

- Extensive work continues to prevent homelessness however the volume of applications continues to increase with 700 new applications in July resulting in the current total applications in the city being 6649.
- The Assistant Chief Officer, Operational Care Services, presented a paper to the Executive Team to request a review of two key services areas:
 - Accommodation Services
 - Casework Teams
- In relation to temporary accommodation, 4000 families are supported.
- Some of the management information and tools to deal with the turnover of accommodation are out dated, the plan is to review the sector and look to digital tools to improve voids, minimise use of hotels and address anti-social behaviour.
- In relation to Homeless Locality Casework Services, the review will consider opportunities to improve practice, deliver lean business processes, review statutory duties, embed risk assessment tools in practice and review case holding tools.

Care at Home Services – the HSCP Community Alarms Services are preparing for the move from analogue to digital programme, with the Community Alarms Service transitioning to a digital platform and replacing all analogue devices in service users' homes. The team is preparing for the switch over starting in October 2024, which is expected to be completed in 2025. Currently communication has gone to all front-line service users to explain the implications for them (equipment change over).

Mental Health – there continues to be pressures on bed capacity and staffing across the three Mental Health sites, with significant pressures in relation to costs associated with bank usage:

- Work in relation to agency use has concluded and agency staff are now only deployed in exceptional circumstances, with strict control measures in place. This has improved patient experience and risk management.
- An action plan has been developed in relation to bank use to employ similar control measures and escalation.
- Approx. 60% bank staff are required to meet with requirements of prescribed observations and work in relation to the continuous observation policy is due to conclude by end September, which will have a significant impact on staff required for observations as well as improving care and activity levels for patients. In addition, zonal observations are being implemented across sites to manage observations more effectively.
- A weekly huddle will focus not only on bed state and pressures across the Board, but also on staffing pressures, bank use and staffing levels to support movement of staff where required.

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- Newley Qualified Nurses (NQN) are due to take up post over the coming weeks – 134 for general MH Services (MH, Alcohol and Drug Related Services (ADRS), Prisons inpatient and community services). A second phase NQN recruitment is due to take place to fill the remaining 35 vacancies across inpatients and community.
- The Suicide Risk and Design ward decants began in July with patients in ward 3b in Leverndale moving to Nairn ward in Stobhill, removing 2 beds and a contingency bed (Renfrewshire) on a temporary basis.
- The HSCP has commissioned a new care home, Olympia House, a 12 bedded unit in Bridgeton. 11 patients have transferred from hospital, with plans for one further patient in the next week. The target group has been long stay Hospital Based Complex Clinical Care (HBCCC) patients over 55 years and transfers have been successful. A transition period was agreed for 4 weeks and thereafter patients are fully discharged from hospital.

Members raised concern in relation to the significant and growing number of families in temporary accommodation and questioned if a report should be brought to a future IJB setting out the review. Officers advised that a report on the review of casework and temporary accommodation services will be presented to the IJB in September.

The Local Authority Trade Union Representative welcomed the review of casework and temporary accommodation services but highlighted the challenges in relation to capacity, there needs to be further investment into resources as caseloads are unmanageable.

Members noted that at the IJB in June, Officers advised that a meeting was being arranged with the Deputy Director of Mental Health Division in the Scottish Government (SG) to discuss the Adults with Incapacity (AWI) issue and questioned if this meeting has happened and if the SG have introduced a new AWI target. Officers advised that the meeting has happened, and a working group is being set up to look into the AWI legislation, the Glasgow City Council Legal team have representatives on the working group.

In relation to the Community Alarm Services move from analogue to digital, Members questioned how long this is projected to take. Officers advised that the switch over starts in October 2024 and should be complete by mid-2025.

7. Integration Joint Board 2024-25 Budget Update including Community Health Services within Children and Families

Sharon Wearing presented a report providing an update on the revenue budget for Glasgow City Integration Joint Board for 2024-25 following approval of the budget by the IJB on 20 March 2024 and the update presented on 15 May 2024.

Members questioned how the IJB will monitor the impact and effectiveness of applying the caseload waiting tool. Officers advised that they could report back to the IJB on this.

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The Staff Side Representative (NHS GG&C) raised concerns regarding the reduction in capacity within Health Visiting and Children and Families, although appreciating the clinical reasoning provided, and asked what other options were considered. The Chair advised that the proposal within this report relates to the IJB Budget report that was approved at the IJB in March 2024, and this report details the implementation of the decisions that were approved. Officers confirmed at request of IJB in March, the Chair had written to Scottish Government, Glasgow City Council and Westminster Government and was informed that no additional funding would be provided.

In relation to Health Visiting, Members questioned if the report is approved today, will the universal pathway still be implemented, and in relation to the caseload tool, how this will work with smoothing the resource. Officers advised that they are keen to examine the data to establish any reductions, although it is anticipated that there will be some reduction. The three workstreams are also ready to commence, and the universal pathway can be delivered and will be scrutinized while in operation. There is a robust family support strategy which provides health visitors with access to resources quickly and directly. Officers also advised that the development of this proposal was in collaboration with Dr Julia Egan, and it provided an opportunity to review homelessness services and how the homelessness team could be best suited to support families in the community. The caseload waiting tool is used safely and is being monitored and scrutinized to ensure cases are being allocated appropriately.

Members questioned how the proposals will impact on service users and their experience. Officers advised that they are currently able to and will continue to deliver the universal pathway, this model also allows the HSCP to offer additional support where required. There is a bespoke resource for homelessness given the challenges in this service and a revised school nursing approach will be implemented to support families, particularly if families are homeless. Officers also noted that in recent years Health Visitors numbers have increased from 150 to 274.

Members highlighted that they are aware of the challenges of this financial climate and wish to support Officers' position.

The Integration Joint Board:

- a) Noted the contents of this report;**
- b) Considered the community health savings for children and families of £0.772m of which £0.512m will be delivered in 2024-25; and**
- c) Approved community health savings for children and families of £0.772m of which £0.512m will be delivered in 2024-25; and**
- d) Noted the remaining balance of £1.035m will be the subject of a separate report in relation to the hospital at home service.**

8. Hospital at Home Model

Jacqueline Kerr presented a report proposing a revision to the existing Hospital at Home (H@H) service in Glasgow City and includes the delivery of Glasgow

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City Call Before You Convey (CBYC), given the alignment of purpose around admission avoidance and synergies in respect of professional and clinical skill sets.

Members questioned what the timescales are with regards to the service review, how this will be implemented and any details on the potential expansion outside the city. Officers advised that an extensive evaluation was completed last year which can be circulated to Members, and the same format and framework will be used to carry out the evaluation. The new approved model starts in November 2024. Officers noted that it requires around 6 months to operate before an evaluation can start. With regards to expansion plan, there was a pilot carried out on a small number of care homes and learning was extracted. There are 11 beds covering the South of the city and part of North West due to being linked to Queen Elizabeth Hospital. Officers are planning to expand across the rest of city however the 11 beds will remain due to current financial climate, therefore requests will be prioritised. The HSCP aim to have the rest of the city being included into the H@H plans at the beginning of 2025.

The Staff Side Representative (NHS GG&C) welcomed this but raised concern with regards to the possible impact on district nurses and capacity challenges in addition to the transferring of tasks which were previously undertaken by doctors. Officers advised that there is a Transforming Nursing Group that has been established to look into the capacity and demand on district nurses, as well as supporting nurses to take on the responsibility and tasks that they are qualified to do. Officers noted that the underspend on district nursing originates from years of unfilled vacancies, therefore, they have adapted and have been operating with existing tasks for a while. Officers are looking into the appropriateness of some of the tasks the district nurses undertake, and the aim is to release some of the work that sits outside district nursing. The introduction of band 4s is being looked at where practitioners could take on appropriate clinical tasks.

The Integration Joint Board:

- a) Approved the discontinuation of the existing hospital at home model from 8th November 2024;**
- b) Approved the transition to the successor hospital at home service from 8th November 2024; and**
- c) Noted the associated saving of £1.78 million attached to this transition.**

9. Review of Access to Social Care Support

Jacqueline Kerr presented a report setting out the HSCP's proposed approach to allocate available self-directed support (SDS) social care resources in proportion to presenting need, underpinned by a commitment to fairness, transparency and keeping service users safe from harm.

Officers highlighted that the review does not propose any changes to existing relevant policies. It has been determined that the HSCP's duties to persons using SDS can be met using existing relevant policies and that there is also

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scope for reducing the overall HSCP SDS spend by just less than 2.8% by a more consistent application of the existing relevant policies. Accordingly, the HSCP intends to instate a course of refresher training and continuous professional development to ensure that SDS resources are allocated to meet assessed need in a consistent way.

The HSCP's priority has been to protect core services which deliver care to those who are acutely unwell, support prevention measures and deliver evidenced impact in improving the health and wellbeing of those who access services. It was in this strategic context that on 20th March 2024 the IJB approved the 2024/25 budget, inclusive of a proposed saving of £3M relating to a review of access to social care support, with agreement that this detailed report would come before the IJB for consideration.

Council Members raised concerns on behalf of Glasgow Disability Alliance (GDA) following a briefing note received from them in relation to this report. Health Board Members and Officers advised that they have not had sight of this briefing note and were unable to make comment.

Bailie Norman MacLeod suggested that there be a continuation of this report to the September IJB, with an appendix included with the questions raised by GDA, and Officers responses.

Following discussion and a recess, Cllr Jon Molyneux made an amendment which was seconded by Cllr Lana Reid-McConnell. Officers advised that this amendment was not competent.

The conclusion of this agenda item was taken after the discussion and agreement of items 10, 11 and 12.

The Chair made the decision that there would be a continuation of the report to the next IJB on 25th September 2024, and the report would be updated to include an appendix answering the concerns of the GDA. The report will be issued well in advance of the next IJB for any proposed amendments from Members. This item will also be further discussed at the next IJB Development Session.

10. National Care Service Bill – Stage 2 Amendments – Call for Views

Craig Cowan presented a report seeking approval from the Integration Joint Board (IJB) on the proposed approach to preparing the IJB's response to the Scottish Parliament's Call for Views on the proposed Stage 2 amendments to the National Care Service (Scotland) Bill.

The Local Trade Union Representative suggested a compare and contrast exercise as feedback from the stage 1 amendments viewed by the IJB, Trade Unions and HSCP are of the same views albeit articulated in different tones. Officers advised that they are planning to pull the views from stage 1 and to scope out views from new and existing members which may require to be

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considered when responding to the stage 2 amendments. There will be a discussion and views sought at the next IJB Development Session.

The Integration Joint Board:

- a) Noted the content of this report;**
- b) Approved the approach to preparing the IJB's response described in section 4; and**
- c) Approved the proposal that the final response will be approved on behalf of the IJB by the Chair and Vice Chair.**

11. Next Meeting

The next meeting will be held at 9.30am on Wednesday 25th September 2024.

12. Payment of the Scottish Recommended Allowance for Fostering to Providers in the Purchased Sector

Sharon Wearing presented a report updating on the payment of the Scottish Recommended Allowance for Fostering to providers in the purchased sector; and to note the approval by the Interim Chief Officer and Chief Officer, Finance and Resources under delegated authority, on the grounds of urgency.

The Integration Joint Board:

- a) Noted approval by the Interim Chief Officer and Chief Officer, Finance and Resources under delegated authority, on the grounds of urgency;**
- b) Noted the approval was undertaken in consultation with the IJB Chair and Vice Chair.**

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