

**NOT YET APPROVED AS A CORRECT RECORD**

**GLASGOW CITY HEALTH & SOCIAL CARE  
INTEGRATION JOINT BOARD**

**IJB(M)2018-07**

Minutes of meeting held in the Sir Peter Heatly Boardroom, Commonwealth House,  
32 Albion Street, Glasgow, G1 1LH at 9.30am on Wednesday, 12<sup>th</sup> December 2018

**PRESENT:**

**VOTING MEMBERS**

Bailie Ade Aibinu	Councillor, Glasgow City Council
Cllr Ken Andrew	Councillor, Glasgow City Council
Simon Carr	NHSGG&C Board Member (Vice Chair)
Ross Finnie	NHSGG&C Board Member
Jacqueline Forbes	NHSGG&C Board Member
Cllr Mhairi Hunter	Councillor, Glasgow City Council (Chair)
Cllr Elspeth Kerr	Councillor, Glasgow City Council
Cllr Jennifer Layden	Councillor, Glasgow City Council
Cllr Kim Long	Councillor, Glasgow City Council
Rev. John Matthews	NHSGG&C Board Member
Anne Marie Monaghan	NHSGG&C Board Member
Cllr Jane Morgan	Councillor, Glasgow City Council
Rona Sweeney	NHSGG&C Board Member

**NON-VOTING MEMBERS**

Jonathan Best	Interim Chief Operating Officer, NHSGG&C
Stuart Graham	Glasgow City Council Staff Side Representative (substitute for Chris Sermanni)
Margaret McCarthy	NHSGG&C Staff Side Representative
Susanne Millar	Chief Officer Planning, Strategy & Operations / Chief Social Work Officer
Dr Richard Groden	Clinical Director (substitute for Dr John Nugent)
Anne Scott	Social Care User Representative
Dr Michael Smith	Lead Associate Medical Director Mental Health and Addictions
Shona Stephen	Third Sector Representative
David Walker	Assistant Chief Officer, Corporate Strategy
Sharon Wearing	Chief Officer, Finance and Resources
David Williams	Chief Officer

**IN ATTENDANCE:**

Sybil Canavan	Head of H R
Gary Dover	Head of Planning (North East)
Allison Eccles	Head of Business Development
Jackie Kerr	Assistant Chief Officer, Older People's Services
Sheena Walker	Governance Support Officer (minutes)

**APOLOGIES:**

Jeanette Donnelly	NHSGG&C Board Member
Patrick Flynn	Head of Housing and Regeneration, Glasgow City Council
Cllr Archie Graham	Councillor, Glasgow City Council
Peter Millar	Independent Sector Representative
Dr John Nugent	Clinical Director
Chris Sermanni	Glasgow City Council Staff Side Representative
Ann Souter	Health Service User Representative
Mark White	NHSGG&C Board Member
Sheena Wright	Interim Nurse Director

## 1. DECLARATION OF INTERESTS

Dr Richard Groden declared an interest in item 7, Primary Care Improvement Fund: Planned Expenditure 2018-19.

## 2. APOLOGIES FOR ABSENCE

Apologies for absence were noted as above.

## 3. MINUTES

The minutes of the meeting of the Integration Joint Board held on 7<sup>th</sup> November 2018 were approved as an accurate record.

## 4. MATTERS ARISING

There were no matters arising.

## 5. INTEGRATION JOINT BOARD ROLLING ACTION LIST

Allison Eccles presented the IJB Rolling Action List advising that this was for information and noting; some actions were on-going. Shona Stephen will pursue rolling action reference 44.

Shona Stephen

## 6. RESOURCE ALLOCATION FOR ADULTS ELIGIBLE FOR SOCIAL CARE SUPPORT: UPDATED POLICY FRAMEWORK

Susanne Millar presented a paper to:

- report on the output of stakeholder engagement undertaken in respect of the interim policy framework on resource allocation for adults eligible for social care support, as noted by the IJB in June 2018;
- share the content of the published Equality Impact Assessment (EqIA) and the associated action plan;
- as requested by IJB members at the meeting in June 2018, to amend the policy framework to more explicitly reference the role of carers, to reference potential risks and to be clearer that finance, whilst important, is not the driving factor behind the policy framework; and
- provide an updated policy framework for consideration and approval.

Officers advised that the concerns of the IJB and stakeholders have been taken seriously; and are reflected in the policy framework. There was a need to be clear on the framework used by the HSCP; and to be honest and transparent with service users to articulate the policy.

There has been significant reflection from senior managers and Practitioners in the Partnership; and significant stakeholder engagement for both the resource allocation and overnight support papers. The key messages from the engagement events were outlined at section 3.3. It is important to have honest conversations with service users; and officers acknowledged that this can be difficult.

Officers advised that a paper was also presented to the September IJB on the Balance of Care which showed the direction of travel for the HSCP, to support as many people as possible to live in the community. Within Adult Services, 88% of service users were living supported in the community. Officers strived to achieve this, although acknowledged that there may be circumstances due to an individual's needs where this is not possible.

An EqIA had been completed and this presented an honest reflection of issues. An action plan will also be in place and this outlined the risks; with equalities seen as the

biggest risk. The EqIA will be a dynamic process and will continue to be reviewed parallel to the action plan, as this progressed to implementation; and would also take account of stakeholder views.

A risk enablement approach will be taken. Officers will work with families to be clear on timescales; and support people to live as independently as possible. There is also a complaints process in place and a process to review cases if service users wish, through a Risk Enablement Panel. The Panel will include service users, stakeholders and advocates. The detail of how the Panel will operate would be developed with service users and providers. The role of carers was also implicit in terms of the policy framework; the carers' assessment was clear and the role of planning.

The appendix provided in the report included the changes made following the concerns raised at the June IJB meeting. The framework and resource allocation shows the HSCP position; engagement will then take place regarding models of care.

Cllr Hunter informed the IJB that she had received an email from Glasgow Disability Alliance regarding the Framework and will arrange a meeting with that organisation to discuss in the New Year.

The IJB welcomed the paper and raised the following points:

- At section 4.5 Option 1 of the Framework – this referred to managing care needs; members stated that it was more than just care needs and statutory guidance must be referred to throughout the documents and reflect choice among all four options.  
Officers accepted these comments and would amend this.
- Queried how the service user would be involved and if they can represent themselves and share their experience.  
Officers advised that they would reflect on the language of the report; and that the Risk Enablement Panel would include the involvement of service users and their advocate as stated. Officers would not specify their role, but there would be an opportunity to be involved.
- That the EqIA did not capture that disabled people have more barriers. Also the impact on women should be strengthened; and people's human rights.  
Officers explained that the EqIA would be a dynamic process; the EqIA does not capture everything at this point, but would continue to be reviewed through implementation; and officers will reflect on their response.
- Members queried how the process will be monitored and evaluated. Would there be an internal process reporting back to the IJB; and an external evaluation in a few years. If so, how this would be financed.  
Officers advised that a report would be presented annually and include internal evaluation. Officers would discuss a method for external evaluation; adding that there will be interest in a review. Evaluation will also be discussed at a future development session.
- Members discussed the risk to reputation of the Board and the challenges that can be faced with a potential backlash when people choose to spend their individual budget to meet their needs and achieve their outcomes in non-traditional ways that may not be understood or well received by the media and others; and recognise the biggest challenge in SDS is about changing the culture in Social Care delivery.  
Officers were comfortable in responding to this; and it was agreed that a paper would be presented to the Council to raise awareness of complexities.
- Officers would circulate an updated version of the report.

Susanne Millar

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#### ***The Integration Joint Board:***

- a) noted the output from the stakeholder engagement;***
- b) noted the content of the EQIA and associated action plan;***
- c) noted the proposed amendments to the interim policy framework; and***

*d) approved the revised policy framework.*

## **7. PRIMARY CARE IMPROVEMENT FUND: PLANNED EXPENDITURE 2018-19**

David Walker presented a paper to seek IJB approval for expenditure in support of implementation of the city's Primary Care Improvement Plan (PCIP) in 2018-19. Table A showed the existing and inherited commitments. Progress across the priorities was varied and this pattern was expected to continue. The table also outlined planned expenditure for 2019/20. Table B represented the expected growth in the funding allocation and the critical items arising from implementation within the allocations were also outlined. There included issues of affordability; headroom available for existing commitments; recruitment issues, which were a national problem; and the allocations not currently being subject to any inflation or pay uplift meaning that the value of the allocation declines over time. All of these factors had significant bearing on the pace of spend.

The Social Care Users Representative referred to Table A, and the funding allocation for Mental Health in 2018/19 and the reduction in the projection for 2019/20. Officers advised that this reflected the migration of the fund and provided reassurance that there would be further investment throughout 2019/20 as the programme progressed.

Members discussed issues with recruitment and what measures would be taken to respond to this; and also to manage gaps that are created in the system. Officers advised that this would be worked through with work stream leads to establish how services would be provided; discussions would also take place with GP clusters as to how the plan would be implemented. Recruitment was a national issue that needed to be addressed. Officers will work with the other Partnerships through common recruitment adverts. Jonathan Best also highlighted the requirement for joint working with the Acute sector for workforce planning, as hospitals were also losing staff to IJBs.

David Walker

### ***The Integration Joint Board:***

- a) approved the proposed PCIF expenditure for 2018-19;***
- b) approved delegation to the Implementation Leadership Group to make any further changes as necessary in spend within the annual budget including draw down of carry forward as necessary based on the requirements of the PCIP; and***
- c) noted the receipt by the IJB of further reports on future spending within PCIP allocations as implementation planning develops.***

## **8. ALCOHOL AND DRUG PARTNERSHIP: PRIORITIES FOR ADDITIONAL INVESTMENT**

Susanne Millar presented a report to advise the Integration Joint Board on the development of plans for investing £2,054,677 of Scottish Government funding for alcohol and drug services. This follows support from the IJB following submission of a paper in May 2018 outlining the development process in anticipation of funds and guidance: <https://glasgowcity.hscp.scot/publication/item-no-8-alcohol-and-drug-partnership-adp-priorities-additional-investment>

The IJB previously approved the priorities for ADP funding, which included funding for the Safer Drug Consumption Facility (SDCF); Heroin Assisted Treatment; and Multiple and Complex Needs. It was previously raised by members that spend had been committed for the SDCF when there was no certainty about when it would become operational. Officers advised that this resource had been committed to other priorities in the first year.

The ADP additional funding investments are within harm reduction; children and young people; prevention and recovery. The detail of spend over the three years for these areas were outlined. In relation to the allocation to the Recovery Communities, they had

commissioned an independent evaluation at a cost of £10k; the report would be available late November. Members requested that the cost of the evaluation is clearer within the appendix.

Members discussed outputs and outcomes, questioning how these would be reported against targets. Officers advised that an annual report is submitted annually to the Scottish Government to report on progress.

The Third Sector Representative requested that the paper recognise the increase in older people with addiction problems; and within kinship care older people caring for adult children with addictions; this was an increasing issue. Officers advised that this is recognised within mainstream funding, but would have a discussion outwith the meeting on the impact to the third sector and housing sector.

**Susanne Millar**

Members questioned if work could take place with the DWP and the Recovery Community to stop sanctions. Officers advised that the Welfare Rights team worked with vulnerable clients and worked with local offices of DWP; training is also available.

***The Integration Joint Board:***

- a) noted the proposals outlined in the report;***
- b) approved the plans for the use of the additional Scottish Government funding;***  
***and***
- c) expected an annual report on progress and outcomes.***

**9. GLASGOW CITY HSCP WORKFORCE PLAN**

Sharon Wearing presented a paper to provide Glasgow City Integration Joint Board with an update to the first Workforce plan for the HSCP, previously presented in June 2017. Officers advised that the Plan would be updated again to include the Mental Health Strategy, Action 15, Primary Care Improvement Plan; and the staff transferred from Cordia.

The Plan would also be realigned to the Strategic Plan in March when this was presented to the IJB. The Plan was used to bring together changes in to a singular document. Officers also reported that there had been high staff turnover due to a phase of retirement.

Members welcomed the Plan and the work that had been undertaken by officers to produce this. The following comments were raised:

- Requested that the Third Sector workforce within the Partnership is represented in the Plan. Officers welcomed this request and would discuss this with the Third Sector Representative.
- That when the Plan is presented again that all of the actions include timescales.
- That a section on strategic view and challenges are included; and that the issues and risks in relation to recruitment are also included.
- That there be correlation by population and staff required to support the health and social care needs of the population.

**Sybil Canavan**

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**Sybil Canavan**

Members also discussed succession planning and workforce requirements. Officers advised that Organisational Development colleagues were doing some work in this area and to have projections for a 10 year period. Members proposed that officers look at the road map documents produced by Skills Development Scotland on workforce requirements, to provide a strategic perspective.

**Sybil Canavan**

***The Integration Joint Board:***

- a) noted and approved the detail of the Workforce Plan.***

***b) agreed that future iterations of the plan will be aligned to the Strategic Plan timescale.***

## **10. GLASGOW CITY INTEGRATION JOINT BOARD BUDGET MONITORING FOR MONTH 7 / PERIOD 8**

Sharon Wearing presented a report to outline the financial position of the Glasgow City Integration Joint Board as at 31 October 2018 (Health) and 26 October 2018 (Council), and highlight any areas of budget pressure and actions to mitigate these pressures.

Officers reported that this was the first report post transfer of Cordia. The net expenditure is £0.425m higher than budget to date. Gross expenditure is £1.600m (0.25%) overspent, and income is over-recovered by £1.185m (2.34%). The changes to budget were outlined and the progress made on the transformation programme. Members were informed of budget pressures; and a number of risks to be mitigated going forward were highlighted.

Members discussed the increase in demand for services and also the increase of people with complex needs and the impact of this. Officers explained that some of the reporting in underspend was due to timing of reporting. There was also pressure in hospitals with AWI beds; and legislative requirements.

### ***The Integration Joint Board:***

***a) noted the contents of this report;***

***b) approved the budget changes noted in section 3; and***

***c) noted the summary of current Directions (Appendix 2).***

## **11. PROPOSED CHANGES TO IJB COMMITTEES**

Allison Eccles presented a report to update the Integration Joint Board on the results of a request for feedback from IJB members on potential changes to the IJB Committee; and to make recommendations and table options to the IJB in relation to proposed changes to the IJB Committees.

The proposed changes were outlined and the feedback received from members through development sessions and a survey. Issues with the current structures were also highlighted.

Members discussed the proposals and agreed with the recommendations; and that the IJB Finance and Audit Committee would be renamed IJB Finance, Audit and Scrutiny Committee. The Board also agreed that the Glasgow Equality Forum would be invited to join the IJB Public Engagement Committee as an Advisor.

**Allison Eccles**

The Board would monitor changes to the Committee structures and review as required.

**Allison Eccles**

### ***The Integration Joint Board:***

***a) noted this report;***

***b) agreed that the terms of Chairs of the IJB Committees should be set at two years and should rotate between Glasgow City Council and NHS members; and***

***c) considered the options laid out in 6.2 to 6.7 and agreed to the removal of Performance Scrutiny from the Committee schedule and considered a new name for Finance and Audit to IJB Finance, Audit and Scrutiny Committee.***

## **12. GLASGOW CITY IJB RECORDS MANAGEMENT PLAN**

Allison Eccles presented the draft IJB Records Management Plan prepared in line with the requirements of the Public Records (Scotland) Act 2011. This was a legislative

requirement and members were informed that there were a limited number of IJB records.

***The Integration Joint Board:***

- a) noted this report;***
- b) delegated responsibility to the Chief Officer, Finance and Resources to finalise the IJB's Records Management Plan in collaboration with the Keeper of the Records of Scotland; and,***
- c) instructed the Chief Officer, Finance and Resources to present the final agreed IJB Records Management Plan to the IJB or a committee of the IJB in due course.***

**13. CARERS (SCOTLAND) ACT 2016 SHORT BREAKS STATEMENT**

Susanne Millar presented a report to ask the Integration Joint Board to endorse the Glasgow City HSCP Short Breaks Statement which has been produced in accordance with the provisions of the 2016 Carers (Scotland) Act. The information provided was fairly well known; but would be reviewed annually with input from carers and providers.

***The Integration Joint Board:***

- a) approved the Short Breaks Statement and agree to publish in January 2019 and***
- b) agreed to review on 1st April 2020 and annually thereafter, updating the IJB as required.***

**14. HSCP Q2 PERFORMANCE REPORT 2018/19**

Duncan Goldie presented the Joint Performance Report for the Health and Social Care Partnership for Quarter 2 of 2018/19. A summary of overall performance status was provided; and changes in RAG status outlined. The report was also presented to the IJB Finance and Audit Committee on 5<sup>th</sup> December, with presentations from service leads in H R and Homelessness.

***The Integration Joint Board:***

- a) noted the attached performance report for Quarter 2 of 2018/19.***

**15. NORTH EAST HEALTH AND SOCIAL CARE HUB**

Sharon Wearing presented a report to update the Integration Joint Board on progress reached in developing the health and social care hub. The Initial Agreement has now been approved by the Scottish Government and authorisation has been given to move to the Outline Business Case stage. There has been a site option appraisal and through the process the Parkhead Hospital & Health Centre site has been identified as the preferred site. Engagement took place and the Capital Investment Group process was followed.

The report was also presented to the Health Board's Finance and Planning Committee and will be presented to the full Health Board meeting on 18<sup>th</sup> December 2018; and the Council City Administration Committee on 24<sup>th</sup> January 2019. The Health Board's Finance and Planning Committee asked that officers ensure that the Scottish Government are content with the engagement process and the criteria for involving stakeholders in the process; as outlined in a letter from the Cabinet Secretary for the Lightburn Hospital site. A letter had been sent to the Scottish Government and officers are awaiting a response.

***The Integration Joint Board:***

- a) noted that the approval of the Initial Agreement by the IJB, Glasgow City Council, NHSGG&C and the Scottish Government allows us to move to the development of the Outline Business Case; and*
- b) noted the recommendations of the site option appraisal that the Parkhead Hospital and Health Centre site should be the preferred site for the new hub.*

## 16. TRANSFORMATIONAL CHANGE PROGRAMME: OVERNIGHT SUPPORTS – PROGRESS REPORT

Susanne Millar presented a report to update IJB members on progress made in relation to the transformational change programme to review overnight supports, in the context of seeking a safe and effective transition from sleepover support to suitable, alternative arrangements that maximise the opportunity for people to be supported to live independently in accordance with assessed need.

An engagement event was held on 13<sup>th</sup> September 2018 with service users, carers and community group representatives. The key themes and messages were set out to members; and the Overnight Support Steering Group will take consideration of issues raised. There are four operational work streams led by GCHSCP officers that will report back to the Group.

An additional recommendation was made to the IJB that a further progress report will be presented to a future meeting. This was agreed. Members welcomed the report and the progress made, as well as the engagement with stakeholders.

Susanne Millar

### *The Integration Joint Board:*

- a) noted the progress to date;*
- b) noted the terms of reference and membership of the overnight support transformational steering group; and*
- c) noted the proposed timescales for the change programme to report its initial findings and recommendations.*

## 17. CRIMINAL JUSTICE AND COMMUNITY JUSTICE OVERVIEW

Susanne Millar presented a report to update the Integration Joint Board on: Community Justice in Glasgow and current partnership commitments within the Community Justice Outcomes Improvement Plan (2018-2023); Criminal Justice Developments within the HSCP; and Glasgow's Women's Custodial Unit

The impact of Community Justice was outlined; officers were working with Social Enterprises on a range of projects; and the work with Tomorrow's Women Glasgow continued to go from strength to strength. Officers informed members of the success of the alcohol court work and it was hoped to extend this to drug court.

### *The Integration Joint Board:*

- a) noted content of report.*

## 18. GLASGOW CITY INTEGRATION JOINT BOARD – FUTURE AGENDA ITEMS

The Integration Joint Board noted the future agenda items.

## 19. NEXT MEETING

The next meeting was noted as Wednesday, 6<sup>th</sup> February 2019 at 9.30am in the Boardroom, Commonwealth House, 32 Albion Street, Glasgow, G1 1LH.

The meeting ended at 12.15pm