GLASGOW CITY HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD

IJB(M)2017-02

Minutes of meeting held in the Sir Peter Heatly Boardroom, Glasgow City HSCP, Commonwealth House, 32 Albion Street, Glasgow, G1 1LH at 9.30am on Wednesday, 15th February 2017

PRESENT: Heather Cameron NHSGG&C Board Member (substitute for

Rona Sweeney)

VOTING MEMBERS Simon Carr NHSGG&C Board Member

Jacqueline Forbes NHSGG&C Board Member
Cllr Marie Garrity Councillor, Glasgow City Council
Cllr Emma Gillan Councillor, Glasgow City Council

Clir Archie Graham Councillor, Glasgow City Council (Vice-Chair)

Cllr Mhairi Hunter Councillor, Glasgow City Council
Cllr Matt Kerr Councillor, Glasgow City Council
Rev. John Matthews NHSGG&C Board Member

Trisha McAuley NHSGG&C Board Member (Chair)
Bailie Mohammed Razaq Councillor, Glasgow City Council

NON-VOTING MEMBERS Dr Richard Groden Clinical Director

Linda Hall Professional Nurse Advisor Council (substitute

for Mari Brannigan)

Alex MacKenzie Chief Officer, Operations

Elaine Rae Independent Sector Provider Representative

(substitute for Peter Millar)

Andrew Robertson Carers Representative

Susanne Millar Chief Officer Planning, Strategy &

Commissioning/Chief Social Work Officer

Anne Scott Social Care Users Representative

Ann Souter PPF Representative

Brian Smith Glasgow City Staff Side (substitute for Ian

Leech)

Dr Michael Smith Lead Associate Medical Director Mental Health

Shona Stephen Third Sector Representative

Sharon Wearing Chief Officer, Finance and Resources

David Williams Chief Officer

IN ATTENDANCE: Allison Eccles Head of Business Development

Tom Jackson Chief Executive, Criminal Justice Authority Jackie Kerr Head of Operations, North West Locality

Rhoda MacLeod Head of Sexual Health Services
Sheena Morrison Head of Public Protection and Quality

Assurance

Dr Saket Priyadarshi Associate Medical Director

Ann-Marie Rafferty Head of Operations, North East Locality
David Walker Head of Operations, South Locality
Sheena Walker Governance Support Officer (Minutes)

APOLOGIES: Jonathan Best Interim Chief Operating Officer, NHSGG&C

Mari Brannigan Nurse Director

Ross Finnie NHSGG&C Board Member Ian Leech Glasgow City Staff Side

Margaret McCarthy NHSGG&C Staff Representative

Peter Millar Robin Reid Cllr Soryia Siddique Rona Sweeney Independent Sector Provider Representative NHSGG&C Board Member Councillor, Glasgow City Council NHSGG&C Board Member

Trisha McAuley commenced the meeting by expressing thanks to Cllr Archie Graham on behalf of the Integration Joint Board for his role as Chair for the past year, and for his knowledge and steer through the first year of the establishment of the Integration Joint Board.

Trisha also welcomed Andrew Robertson, Carers' Representative as a new member on the Integration Joint Board.

1. DECLARATION OF INTERESTS

No declaration of interests were raised.

2. APOLOGIES FOR ABSENCE

Apologies for absence were noted.

3. CHAIR AND VICE CHAIR OF INTEGRATION JOINT BOARD AND COMMITTEES

Allison Eccles presented a report to outline a number of considerations with regard to the role of Chair and Vice Chair of the Integration Joint Board and its committees; propose an interim amendment to the appointment process of the Chair and Vice Chair of the IJB; and, make recommendations as to formalising the process of appointing committee chairs.

Allison advised that the Health Board had confirmed that the lead non-executive Director for Glasgow City IJB is Trisha McAuley and is therefore the Chair of the Integration Joint Board; Cllr Archie Graham is Vice Chair. The report was also to remind members of the statutory requirements, noting that there was no change to standing orders.

David Williams commented that as the Integration Joint Board had only been established for a year; the Finance and Audit Committee established for nine months, and the Public Engagement Committee had met twice, there was in his view a need for continuity at this time and therefore recommended no change to the current chairing arrangements for the Finance and Audit and Public and Engagement Committees at this stage.

The Integration Joint Board:

- a) approved the proposals outlined in sections 4.3of the report and
- b) Chairing arrangements for the Finance and Audit, and Public Engagement Committees remain unchanged at this point.

4. MINUTES

The minutes of the meeting of the Integration Joint Board held on 18th January 2016 were approved as an accurate record subject to the following amendments:

Page 2, Item 5 – Shona Stephen stated that the report was helpful and if a column could be added detailing **outcomes**.

Page 6, Item 11 – The second paragraph should be amended as follows: "Trisha McAuley asked what communications strategies were in place for crises and issues on the horizon and received assurance from Susanne Miller that robust arrangements and protocols were in place."

Page 7, Item 14 — 'Ian Leech asked if the Trade Union representing the voluntary sector could be given place at the IJB. David Williams advised caution in opening up the membership to the IJB further at this stage given its size already and indicated that the HSCP currently has liaison mechanisms in place for various representations to be made to the HSCP.' A paper would be brought to a future IJB meeting to allow a discussion with workforces regarding engagement.

5. MATTERS ARISING

Brian Smith referred to Item 14 of the previous minute 'Integration Joint Board Regulations – Attendance and Membership', advising that Unison's view remained that trade union representatives in the Third Sector should have representation on the IJB, as their employers were represented and decisions were affecting members.

David Williams re-stated what he had said previously, that there were a few issues regarding this; one being the manageability of the Integration Joint Board as there was already a large membership that went beyond statutory requirements. Also that requests for additional memberships from employee representatives could result in others e.g. Royal College of Nursing or British Medical Association, who would equally have the right to IJB representation. David stated that there were representatives on the IJB from the independent and voluntary sectors and representation of those sectors' 'business' should include any potential employee issues that might be picked up by trade unions with whom providers have recognition agreements. David further highlighted that there was the commitment made at the last IJB to ensure that the already well-established staff-side trade union representatives within the health and social work services side of the business, at officer level, may be arenas where any issues could get aired.

Cllr Graham reported that the minute of the previous meeting could have been more precise in that the commitment had been made to present a paper at a future IJB meeting to discuss workforces and engagement, noting that this meeting was well represented. [Minute amended as per Item 4 above].

Shona Stephen reminded the Board of the individual status of her representation on the IJB, albeit to represent the general interest of the Third Sector. Therefore, it was not her role to represent staff members.

Trisha McAuley thanked Brian for raising the important point and agreed that a paper be brought back to a future meeting.

6. INTEGRATION JOINT BOARD ROLLING ACTIONS LIST

Allison Eccles presented a report on the Integration Joint Board Rolling Actions List to provide updates on a number of actions agreed at previous IJB **David Williams**

David Williams

meetings.

The action list would also be updated to reflect Shona Stephen's comments to add a column for outcomes.

Allison Eccles

Allison advised that the last action on the list was for Cllr Graham to write to the Scottish Government outlining concerns regarding distribution mechanisms in relation to the impact of universal credit on homelessness budgets was complete and that no response had yet been received from the Scottish Government.

The Integration Joint Board:

(a) noted the report.

INTRODUCTION TO ITEMS 7-11

David Williams referred to Items 7-11 advising that he would set the context for all the papers within this section. David advised that the IJB had a statutory responsibility to set and deliver the Strategic Plan and that they could only do this within the available budget and in the context of shifting the balance of care to transform health and social care services; to also deliver the 9 National Health & Well Being Outcomes and support people in their homes and in communities.

David highlighted that some of the papers would present a challenge to IJB members as there are significant levels of financial reduction involved, but that the Health and Social Care Partnership could not deliver the same level of service with a reduced budget. David reported that Sharon Wearing would present a budget paper at the March IJB for approval; and this could only be within the means to deliver.

The long term aspiration is set out in papers, which is evidence based transformation to the business and services, within budget and providing quality services for people in the city. A positive reported in some of the papers will be to transfer and redirect resource to transform services; however, there were also proposals which were challenging financially.

Trisha McAuley referred to the IJB development session where a presentation was received on the scale of the financial challenge and the need for change. Trisha encouraged input from the IJB on the papers due to be presented, highlighting that the IJB needed to be clear on the case for change, the benefits to service users, and how they monitored consequences and also take staff with them through the changes.

Andrew Robertson advised that this was his first meeting at the Integration Joint Board representing carers and that none of the papers due to be presented specifically targeted carers needs or the impact on carers. Andrew raised two points; that all policy papers presented should show the anticipated impact on carers; and that there was also a real concern carers had regarding the impact of transformational change or cuts on the sustainability of the caring responsibility carried out by 56,000 carers in Glasgow, delivering 20+ hours of care per week; a 66% increase in the past 15 years, reported in 2015. Andrew highlighted that carers are a critical part of the health and care economy and if carers were not supported there would be three consequences; their own health would suffer; the health of those they support would suffer; and, this would then impact upon statutory services. Andrew urged the Integration Joint Board to register this concern

and raise this at the Scottish Parliament.

David Williams welcomed Andrew's statement and would ensure that papers beyond today would make comment on any impact on carers and sustainability issues, and this would be embedded in the work.

David Williams

7. ADULT SERVICE FINANCIAL PLANNING FOR 2017/18 – ALCOHOL AND DRUGS

David Walker presented a report to seek approval for the streamlining of services in two distinct service areas, firstly to redesign the current Alcohol and Drugs Service to a single location, and secondly to move to tender for a redesigned Alcohol and Drugs Prevention and Education Service.

Richard Groden acknowledged that the people with the greatest needs would benefit from the move to the community and would lead to better engagement and improved outcomes for them.

Simon Carr questioned how they would measure the impact of Items 7-11 on service users and the ability to meet the National Health & Well Being Outcomes, requesting that this should be included in future papers. Agreed.

Ann Souter requested to see the final document drawn up by Social Work regarding the impact of alcohol and drugs on communities and also more information on community hubs. Susanne Millar advised that the joint strategy for alcohol and drugs was produced, this included information on outcomes and targets and good feedback was received from the Scottish Government. The Draft Alcohol and Drug Partnership Strategy would be reporting to the IJB in April. Susanne would share with Ann and meet outwith the meeting to discuss. David Walker advised that the community hubs were currently in development but would provide more information.

The Integration Joint Board:

- a) approved the proposals outlined in this report; and,
- b) directed the Health Board to develop and redesign services as outlined in this report

8. ADULT SERVICE FINANCIAL PLANNING FOR 2017/18 – MENTAL HEALTH SERVICES

David Walker presented a report providing an outline of the adult services financial proposals for 2017/18.

David reported that there was some work under way to develop a strategy for the next 5 years as outlined in section 5.3 and 5.4 of the report. The strategy was to shift the balance of care to the community, try to manage unscheduled care in a different way, take people from hospital and relocate them in the community; and prevention and early intervention.

The group discussed the financial detail of the strategy stating that more information should have been provided to the IJB. David Williams acknowledged the criticism regarding lack of detail on figures and that this would be included in the March budget report albeit David Walker also provided the breakdown verbally.

David Williams

Susanne Millar

David Walker

Sharon Wearing

Michael Smith informed the IJB that there was a detailed work plan behind the strategy and that plans would be developed to ensure that a robust system was in place at the end of the 5 year strategy. The strategy would generate savings, but they were trying to manage this, put patients first and support staff. The financials would be brought back to the Integration Joint Board next year.

Trisha McAuley acknowledged that the strategy was patient and clinician led, albeit that savings had to be made and the realities of budget planning addressed. It would be important to monitor the strategy and the progress of the work.

The Integration Joint Board:

- a) noted the content of the report;
- b) approved the direction of travel as set out in section 4;
- c) approved the programme of savings set out in section 7 for 2017/18; and,
- d) directed the Council and Health Board to develop or redesign services as outlined in this report.

9. ADULT SERVICE FINANCIAL PLANNING FOR 2017/18 – ADULT COMMUNITY LEARNING DISABILITY

David Walker presented a report to set out the proposed actions to deliver financial efficiencies within adult community learning disability services in 2017/18 and to inform of the further work that will take place in 2017/18 to scope the potential for further efficiency savings in future years. These proposals are set within the context of full implementation of the agreed Learning Disability Change Programme: 'A Strategy for the Future'

David advised that the report focused on Glasgow City Health and Social Care Partnership adult community learning disability teams. There was a smaller workforce due to 3.5wte posts that had been vacant for the past 18 months and managers were accessing the impact to identify if the posts could be released. This would result in potential savings in 2017/18 of £155k, with no impact on patient care.

David stated that the future model was to provide support for people with a learning disability and support mainstream services to better understand and care for the needs of people. There would be minimal and manageable impact on patient care; however a risk was that if changes outlined in section 5.2 did not take place then further changes would impact patients.

Trisha McAuley highlighted that the IJB should not lose sight of general issues including transitional arrangements, finance and engagement when proposals were being considered for approval.

The Integration Joint Board:

- a) noted the content of the report;
- b) approved the proposed actions outlined in this report; and
- c) directed NHS Greater Glasgow and Clyde to develop or redesign adult

learning disability services as outlined within this report.

10. REVIEW AND REFORM OF SEXUAL HEALTH

Rhoda MacLeod presented a report to provide an outline of the financial planning for sexual health services in 2017/18 and beyond.

Rhoda advised that there were two parts to paper; the current service at Sandyford and the board-wide service. Rhoda explained that there was a need to look at reviewing the core service, noting that there had been recruitment issues for specialist doctors which challenged on-going service delivery. An underspend of £300k had been reported for a number of years and it was proposed that this is utilised for savings in 2017/18 where no services were being cut.

The review would include all stakeholders and users, including engagement with the LMC if there was any effect to GPs. The review would look at team structures, skill mix, localities and opening hours to make the service more accessible. It was proposed that they would engage in a review over the next year and report back to the Integration Joint Board in September on progress.

The Integration Joint Board:

- a) noted the content of the report;
- b) approved the review of sexual health services;
- c) instructed the Chief Officer to report on the conclusion of the review with proposals for transformational reform by the end of September 2017;
- d) directed NHS Greater Glasgow and Clyde to undertake the review; and
- e) agreed a progress report be presented to the Integration Joint Board in September.

11. TRANSFORMATIONAL CHANGE IN OLDER PEOPLE'S COMMUNITY BASED HEALTH AND SOCIAL CARE SERVICES

David Williams informed the Integration Joint Board that correspondence had been received regarding the paper from the Royal College of Nursing (RCN) on Friday, expressing concerns on the nursing element of the paper and proposals impacting clinical practice in the community.

David had responded at length yesterday and indicated that they would progress to discuss the paper at the IJB. The RCN had responded advising that they wanted to meet to discuss and requested that the paper be withdrawn from the meeting until it has been agreed with the RCN.

David advised that he was bringing this to the IJB's attention for transparency; he would meet with the RCN with HSCP officers to discuss but that it was a decision for the IJB as to whether the paper be withdrawn from the meeting.

Trisha McAuley advised that David had shared the response with the Chair and Vice Chair and they felt that the paper should be discussed, as they did not want to set a precedent for future papers Nurse clinical advice had also

been sought from the Lead Nurse Director and support given to the paper. Trisha asked for the views of the IJB and it was agreed that the paper would be discussed.

Jackie Kerr presented a report to inform the Integration Joint Board of further transformation of Older People's Services. The paper set out proposals for reform and redesign resulting in a £450k saving in 2017/18. Jackie advised that the proposals for change were to support the elderly population, move to support home based care and respond to pressures around delayed discharge. The essence of the paper was to bring people to work together in an integrated approach.

Elaine Rae welcomed the proposal as a way to bring people together to work in an integrated approach, and welcomed (the opportunity from Jackie Kerr) on behalf of the independent sector (strategic nursing group) noting their interest in contributing to the development of new models of care around delayed discharge.

Simon Carr questioned where the £450k of savings would come from and that they required this information to make decisions. Simon also highlighted the process of papers coming to the meetings and asked that they be presented together as care groups to allow members to understand the scale of the challenge. Trisha McAuley highlighted that this had been presented at the development session, acknowledging that few people were in attendance, and that proposal themes were well raised. David Williams acknowledged Simon's comments and that they would ensure that when papers were presented that required decision they would make reference to the Strategic Plan and the National Health and Well-being Outcomes.

Brian Smith questioned how the cuts to Cordia would impact the programme and also what the concerns of the RCN were. David Williams advised that they had worked alongside Cordia since March 2015, and met quarterly for strategic discussions to ensure that what Cordia did, did not compromise the strategic direction of the IJB.

David advised that the concerns of the RCN were regarding clinical governance, staff-side engagement and processes and that they had wanted agreement before taking proposals to the IJB..

The Integration Joint Board:

- a) noted the contents of the report;
- b) approved the programme of transformational change activity outlined in section 3; and,
- c) directed the Health Board and Council to implement the change programme.

12. INTEGRATED HEALTH AND SOCIAL CARE HUB IN NORTH EAST GLASGOW

Alex MacKenzie spoke to a paper advising that at its meeting on 21st September 2016 the IJB instructed officers to bring forward detailed plans and a business case in early 2017 for the new integrated health and social care hub in North East Glasgow. This paper sets out an initial proposal for the development of a hub for the community in the east end of Glasgow. Our

David Williams

initial site appraisal identified Parkhead as our preferred option.

The paper is based on the guidance in the Scottish Government's Capital Investment Manual for the Strategic Assessment stage for capital projects. The project will be led by Glasgow City Health and Social Care Partnership and we will be working with NHS Greater Glasgow and Clyde on the development of the proposal to ensure opportunities for acute services to be included in the proposal are fully explored. We also envisage that it will involve a range of partner agencies from the public and voluntary sectors.

Alex advised that the paper had been presented and approved at the NHS Capital Planning Group and would be presented to the NHS Board.

Anne Souter stated that she had attended a PPF meeting the previous week and they had received a presentation on the proposal. Feedback from attendees was that this was well received and there was excitement about the multi-agency proposals and this was supported by the community.

The Integration Joint Board:

- a) agreed that this project is confirmed as a priority by Glasgow Health and Social Care Partnership for future investment and should be included in the Health Board's property and asset management strategy with the document submitted to Scottish Government Finance Directorate for inclusion in the 2018/19 investment plans;
- b) approved full engagement on this proposal be carried out by the Health and Social Care Partnership from March-May 2017;
- c) in developing the formal outline business case, instructed officers to assess the options for the project following the engagement process outlining the best option in terms of the strategic and service objectives, value for money and the affordability model; and
- d) directed the Health Board and Council in line with approvals given by the IJB.

13. SAFER CONSUMPTION FACILITY AND TREATMENT SERVICE PILOT

Susanne Millar presented a report advising that the purpose of this report was to:

- Update the Integration Joint Board on progress towards development of a safer drug consumption facility and heroin assisted treatment service; and,
- Seek approval of the draft Business Case

Susanne advised that the proposal and further work was to transform services and improve or change outcomes for people in the city of Glasgow; this was not just a financial efficiency. Engagement had taken place with carers and families affected, and they were the strongest supporters of the proposals.

Section 3.2 of the report provided an update on progress since October 2016. A draft business case was attached for the Integration Joint Board to review, with the main themes summarised in section 4.3 of the report.

It was proposed that a report come back to the Integration Joint Board in June with location proposals following engagement with City Property on service

specification and to present the financial framework. Significant work was also taking place regarding the legal framework.

Susanne advised that following feedback from the last Integration Joint Board development session, a booklet on frequently asked questions had been developed which had received a good response and that this approach may be useful going forward for complex and controversial proposals.

Cllr Kerr supported the proposal and thanked officers for their work noting that this was a very positive step for vulnerable people in Glasgow; current methods had struggled to make progress and it was time to look at something different.

Rev. Matthews recognised the need for dynamic change within addictions and that as outlined in section 7 of the report, there was the opportunity for engagement with those not presenting at all and assisting in helping people to get their life back.

Simon Carr asked about the costs of the pilot and Susanne Miller replied that this information would form part of the report back to the IJB in June once further work had been done on identifying the necessary resources.

Anne Souter asked what the timescales would be for proposals to be in place, what current support there was for people and would the proposals be taken to other areas in Scotland.

Susanne advised that they would report back in June and that due to questions regarding the legal framework they were not clear on how long this would take and what the process would be. Currently they were addressing a number of the seven public health recommendations, including an outreach programme and working with sexual health colleagues around work in HIV. The short life working group was engaged with the Scottish Government there was interest in Scotland in the work in Glasgow; if proposals were put in place the evaluation would be shared people interested in.

Trisha McAuley stated that the work should continue to be developed and an update report presented in June. Consideration should also be given as to the Integration Joint Board's involvement in evaluation out with the meeting and volunteers identified.

The Integration Joint Board:

- a) noted the report;
- b) approved the principles outlined in the attached draft Business Case, subject to costs being signed off in June;
- c) considered involvement in the formal evaluation;
- d) directed NHS Greater Glasgow and Clyde and Glasgow City Council to proceed with the next stages of the project in line with the draft Business Case; and,
- e) instructed the Chief Officer: Strategy, Planning and Commissioning / Chief Social Work Officer to provide a further progress update in June 2017 outlining proposed location for the service, operational parameters and principles, the evaluation framework, update on actions to resolve legal issues, and details of the proposed financial

Susanne Millar

framework.

14. CRIMINAL JUSTICE FUNDING 2017/18

Sheena Morrison presented a paper to update the Integration Joint Board on the reduced level of funding for Criminal Justice Services, the impact of the reduction and the approach being taken to ensure budget fidelity.

Sheena was working with Tom Jackson, Chief Executive of the Criminal Justice Authority, who was involved in this work nationally and could answer any questions regarding funding formula elements.

Sheena advised that funding was reduced in Glasgow following a national review and the expected loss to the service was 8%, although the loss in one year is capped at 5%. Sheena reassured the IJB that they would work within budget on areas critical to service delivery in the City; and that rigor and focus for best value in all areas of spend would be applied to meet budget restrictions on 2017/18.

Trisha McAuley noted the report and that this was another challenge to delivering services. Trisha advised that the full support of the IJB was given and asked that a report be brought back at an appropriate point.

Sheena Morrison

The Integration Joint Board:

- a) noted the content of the report;
- b) approved the actions in section 4 to address the expected budget shortfall in 2017/18;
- c) instructed the Chief Officer; Planning, Strategy and Commissioning / Chief Social Work Officer to update the IJB as appropriate on progress; and,
- d) directed Glasgow City Council to implement the approach outlined in section 4.

15. GLASGOW CITY IJB - BUDGET MONITORING - MONTH 9 / PERIOD 10

Sharon Wearing advised that this report outlines the financial position of the Glasgow City Integration Joint Board as at 31 December 2016 (Health) and 22 December 2016 (Council), and highlights any areas of budget pressure and actions to mitigate these pressures.

Sharon reported that in summary overspend remained stable and net expenditure was less than £1,000 under budget to date. Trajectory was continuing and the direction of travel was similar to that reported during the year, with breakeven expected by year end and any monies carried forward would go in to reserves.

The Integration Joint Board:

- a) noted the contents of this report:
- b) approved the required actions as a consequence of the budget changes noted in paragraph 3.

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

16. GLASGOW COMMUNITY PLANNING PARTNERSHIP - TRANSITION

Allison Eccles presented a report to provide an update on transition arrangements for Community Planning in Glasgow including the development of a Local Outcome Improvement Plan and associated Locality Plan(s) by October 2017.

Allison stated that Section 2 of the report outlined four areas in which work had progressed and that there would be a rolling update as changes took place.

The Integration Joint Board:

- a) noted this report; and,
- b) approved the programme of transition outlined in 2.1 and the next steps outlined in section 4.

17. GLASGOW CITY INTTEGRATION JOINT BOARD – FUTURE AGENDA ITEMS

Allison Eccles presented a paper on Glasgow City Integration Joint Board, Future Agenda Items for noting.

18. NEXT MEETING

The next meeting was noted as Wednesday, 15th March 2017 at 9.30am in the Boardroom, Commonwealth House, 32 Albion Street, Glasgow, G1 1LH.

The meeting ended at 12.05pm