

**Glasgow City
Integration Joint Board
Finance, Audit and Scrutiny Committee**

IJB-FASC (M) 09-12-2020

Minutes of meeting held virtually, via Microsoft Teams, at 9.30am on Wednesday 9th December 2020.

Present:

Voting Members

Ade Aibinu	Councillor, Glasgow City Council
Simon Carr	NHSGG&C Board Member
Jane Morgan	Councillor, Glasgow City Council (Chair)
Rona Sweeney	NHSGG&C Board Member (Vice Chair)
Flavia Tudoreanu	NHSGG&C Board Member

**Non-Voting
Members**

Peter Millar	Independent Sector Provider Representative
Sharon Wearing	Chief Officer, Finance & Resources

In Attendance:

Duncan Black	Chief Auditor, Internal Audit
Steven Blair	Principal Officer, Business Development
Mike Burns	Assistant Chief Officer, Children's Services
Jim Charlton	Business Development Manager
Craig Cowan	Business Development Manager
Allison Eccles	Head of Business Development
Patrick Flynn	Head of Housing & Regeneration Services
Duncan Goldie	Planning and Performance Manager
Janet Hayes	Head of Planning and Strategy, Adult Services
Christina Heuston	Assistant Chief Officer, HR
Margaret Hogg	Assistant Chief Officer, Finance
Jackie Kerr	Assistant Chief Officer, Adult Services
Julie Kirkland	Senior Officer, Governance Support
Claire Maclachlan	Governance Support Officer
Pat Togher	Assistant Chief Officer, Public Protection & Complex Needs

1. Declaration of Interests

The following declarations of interest were raised:

Peter Millar – item 11, Homelessness Funding Arrangements

2. Apologies for Absence

No apologies were received.

3. Minutes

The minutes of 21st October 2020 were approved as an accurate record subject to the following amendment:

The Chair queried the wording on page 8, under item 9, with regards to reserves. Officers confirmed this should read 'use of reserves'. Minute to be amended.

4. Matters Arising

The following matters arising were raised:

Members highlighted the action on page 4 of the minute for Audit Scotland regarding best value. Information has been shared with members and a decision was to be taken on whether a Development Session was required.

Officers confirmed there will be an update on best value in the new year from Audit Scotland and how it relates to IJBs and the decision on a Development Session should be delayed until the guidance is available. Officers to seek clarity from Audit Scotland on timescales for the guidance and further reflection to be given at the next meeting.

Officers

5. Rolling Action List

Allison Eccles presented the Rolling Action List providing an update on the actions listed.

There is no change to reference numbers 7 and 41 relating to Set-Aside and OLM Contract. Action 53 - Glasgow City A&E Performance (Royal Hospital for Children) has been closed. It was noted that this was not a matter for the IJB and the information was included in the presentation in error.

Action 54 remains open – further information will be shared following the National Messaging Campaign.

Updates were provided for Actions 55, 57, 58 and 59 and these actions are now closed.

6. Housing Contribution Statement 2019-2020 - Costs

Patrick Flynn presented a report outlining the costs associated with delivering actions outlined in Glasgow's Housing Contribution Statement 2019-2022.

Officers highlighted the figures in the report are estimated costs to assist with financial planning. Outputs and outcomes are reported back to the Board.

Officers outlined the funding information at table 1 in section 3 of the report. Officers highlighted the spend in Affordable Housing and confirmed a budget of £174m however noted that there has been 6 months of construction lost due to the pandemic. This will affect the total figure for next year. Officers advised that Care and Repair is under review for next year and this will be reported to the IJB.

The report also outlines 10 actions which don't have associated costs and these are outlined in the appendix.

Members asked for clarity on the Common Housing Register and whether the delay is COVID related or other reasons.

Officers advised that this is partnership programme and there is now IT potential to roll out a Common Housing Register. 68 organisations are involved and a pilot exercise is required. Officers reported the delays relate more to complicated IT procurement issues rather than COVID. Learning from the first pilot is underway which will be reported back to the Wheatley Group and the Board. Officers are unable to provide a timescale on the project at this time.

Members asked for clarity with regards to the overall budget outlined in the table of £365m to help increase the supply of homes to address homelessness and households with particular needs and what proportion goes to those people.

Officers confirmed this is the overall budget and includes new housing for people who are homeless. Homeless households would account for around half of the allocations at this time.

Members questioned how easy it is to access the Care and Repair Service depending on what sector you live in and asked if availability across the city can be included when the report comes back.

Officers confirmed there is a consistency issue regarding service provision which is why the review is being undertaken. Initial findings are that outputs for Care and Repair are good, it is value for money and there is a case for retaining however the consistency issue needs to be resolved.

Members highlighted the report being commissioned on new models of accommodation for older people and vulnerable adults and whether this was available.

Officers confirmed the link to the report will be circulated to Members.

Officers

Members queried the figures with regards to the expenditure for the Alliance Partnership in table 1 which differ from the figures reported in the report at Item 11 on the agenda.

Officers to review and provide confirmation to members after the meeting.

Officers

The IJB Finance, Audit and Scrutiny Committee:

a) noted the contents of the report.

7. HSCP Performance Report Q2 2020/21

Duncan Goldie presented the Joint Performance Report for the Health and Social Care Partnership for Quarter 2 of 2020/21.

Officers highlighted additional information included in the report including the impact of COVID-19 in section 4.3 of the report, emphasising that some have positively impacted.

Officers advised that each indicator includes details on measures taken. Several new KPIs have been added including 4 new KPIs for homelessness relating to the Rapid Rehousing Transition Plan (RRTP).

An Appendix has been added which brings out the core set of strategic KPIs that are in the Annual Report

The Chair acknowledged the level of detail in the report and suggested that consideration be given to having a future meeting without performance presentations to allow more time to be spent on the full report.

Members questioned the sustainability of progress in section 4.4 of the report relating to performance improving in A&E and the Acute Sector, and how much of this progress is due to environmental changes and how much is due to activity owing to the work of the service.

Officers confirmed that steps have been taken to improve performance however changes introduced as result of the pandemic will also have led to further improvements which may lead to longer term change.

For example, the establishment of the Community Assessment Centre has diverted people away from A&E with COVID-19 symptoms. The Mental Health Assessment Unit (MHAU) was also set up early on as part of the response to deal with people under significant distress or under the influence of alcohol and drugs. Direct referrals were made from Police Scotland, A&E and the Scottish Ambulance Service. The next phase will make the service accessible by GPs from March 2021. Officers confirmed a report on MHAUs will be presented to the IJB in January.

A new service was also set up with the third sector, Glasgow Association for Mental Health (GAMH) Distress Hub, which was developed as a result of the pandemic and now forms part of the Mental Health Strategy.

Officers advised that other initiatives are coming through such as the Flow and Navigation Hub which will redirect people to a more appropriate service rather than presenting to A&E.

Members asked for clarity around recovery planning whilst still in the middle of the pandemic and whether Officers are anticipating or setting targets for when performance will get back to the previous target level and if this is being modelled yet for areas where there has been a negative impact.

Officers advised it is too early for this and it will be next year before they recover to where they were before. It will differ for different services depending on the impact. Officers advised that part of the challenge is that we are now in a second wave so part of recovery has stalled and a third wave is being predicted for February.

The Chair thanked Officers for the additional material included in this quarterly report.

The IJB Finance, Audit and Scrutiny Committee:

- a) noted the attached performance report;**
- b) considered the exceptions highlighted in section 4.4;**
- c) reviewed and discussed performance with the Strategic Leads for Criminal Justice and Adult Services in relation to these areas.**

8. Performance Presentations

Adult Services

Jackie Kerr delivered a presentation on Adult Services performance.

The Alcohol and Drug Partnership (ADP) Strategy was presented to the IJB in November and a number of points were raised regarding output versus outcomes. Officers have carried out some work around this and are looking at new measures relating to outcomes and recovery. Officers advised that this is the only service across Adult Services that is fully integrated

Officers confirmed the presentation would cover performance during the pandemic and the challenges.

In relation to Mental Health, the impact of COVID-19 presented a number of challenges to inpatient and community environments. The establishment of Mental Health Assessment Units (MHAUs) has been a success. These offered a face to face assessment to individuals presenting in mental health crisis/distress who would have ordinarily attend Accident and Emergency Departments. The success of the assessment units is now included in the Programme for Government. A paper on MHAUs will be presented to the IJB early next year. Officers reported that there has been an increase in demand in Mental Health Services and ICPU beds are really challenging.

For Sexual Health there has been a number of positive developments which has improved performance in relation to urgent care. The development of telephone triage services, telephone consultations and postal services for oral contraception and the development of the remote early abortion service have been positive outcomes of the pandemic.

Alcohol and Drug Services were challenging due to the lack of face to face contact with service users. The ADP moved to a digital platform however this was not suitable for service users and a work stream has now been developed to look at digital developments.

There was increased use of the Injection Equipment Provision (IEP) Van and a second vehicle has been purchased which will help to deliver flu vaccinations.

Officers reported that the closure of Learning Disability Day Care Services was a concern in relation to how sustainable some of the care arrangements would be as many service users live with elderly parents. The service moved to an outreach service which is working really well.

With regards to future demand, there has been a real challenge relating to the roll out of a good IT infrastructure but there also needs to be safe clinical environments for patients that need to be seen face to face. The HSCP will continue its work in upscaling early intervention and prevention services to reduce workload of the already overstretched specialist services.

Members asked for further detail on the Roma community and the pregnancy centre. Officers confirmed there has been an increase in under age pregnancies. As there is no access to Govanhill Health Centre just now outreach support is being delivered.

Members questioned if provision is made in relation to language barriers and educational barriers. It is also important that information is provided on contraception and how to have a healthy pregnancy.

Officers confirmed the Sandyford Service is a Centre of Excellence and they have strong links with the Roma community. Translation services are used. Early intervention and prevention is part of the service provided.

Members questioned why Alcohol and Drug Services is the only service that is fully integrated and why there is a lack of integration in other services.

Officers confirmed that progress on integration of some services has stalled due to the pandemic. A report on Learning Disability services has been presented to the IJB and the Mental Health Strategy includes integrated community mental health services. The team is co-located but it is not currently a fully integrated service.

Members suggested it would be useful to have an overview of service integration at the Committee or the full IJB next year. Detail on how far services have integrated and what the obstacles are to integration with an action plan would be helpful.

Members highlighted the success of the Mental Health Assessment Units and queried why this had not been done sooner.

Officers advised the HSCP were working on the unscheduled care agenda and there was resistance for Mental Health services joining up the Alcohol and Drug services. Officers also advised that MHAUs have costs of £1.7m per year and the service had to look at innovations and ways of funding by redirecting services. The MHAUs have now moved to a nurse led model and is moving to a peer support model which is more effective, efficient and responsive.

The Chair queried how people arrive at the Mental Health Assessment Unit.

Officers confirmed there are four referral routes: Police Scotland, Scottish Ambulance Service, Out of Hours GPs and A&E.

Members questioned why there is a variation between treatment services in South and those in the North East.

Officers advised that this is being looked into and there are challenges about using a digital platform which may be a factor. North East also had a large proportion of staff absent during the pandemic.

Members highlighted the sense of urgency with which Officers have been working during the pandemic. Members queried whether there was a link with integration of services and early intervention issues.

Officers advised that early intervention and integration need to be linked. They highlighted integrated work that is taking place including work that is about to progress in 3 areas of the city to develop a multi-disciplinary team approach to access Mental Health Services and deliver much more effective early intervention. Officers agreed integration needs to have early intervention at its core.

Members questioned why there was an increase in City Centre injections during the first phase of the pandemic.

Officers advised that this related to the increase in the homeless population however there has been considerable investment in the last 3-4 months with regard to staffing resource with an additional 14 full-time workers. The priority is to decommission the city centre hotel arrangements. The figures in hotels is now 500 (from 620) and accommodation has also been secured in hotels outwith the city centre. A city centre risk management meeting has been established involving the HSCP, Police Scotland the third sector and there has been a reduction in offending behaviour.

Members referred to the closure of Day Care Centres for Learning Disability and whether the evidence on the outreach approach being more beneficial was anecdotal or if there was evidence to support that view.

Officers confirmed that the outreach service started in November for placements that were starting to become fragile. The evidence is anecdotal at this point in time however service users and carers feel much safer that someone is going into their home rather than taking service users to a building based service. This will be reviewed if and when day care opens up as the previous numbers will not be possible for building based services.

Members referred to the Short Life Working Group being arranged to look at outcomes and asked what outcomes are being used currently.

Officers confirmed that the standard KPIs are what is used to measure outcomes presently. Most KPIs however are about input and there is a need be more outcome focused.

Members asked to what extent data is being integrated to follow people from service to service to see what is effective and what isn't.

Officers highlighted that this is a challenge in Adult Services as a number of service users have multiple and complex needs. Work is ongoing to look at outcomes for those service users throughout their journey.

The Independent Sector rep cautioned on the use of specialised services as a significant number of people don't benefit from this. Officers agreed that a multi-disciplinary team approach is more beneficial. Not everything needs to have an integrated management structure but an integrated approach is key to make sure people get an appropriate service in the right place at the right time.

The Chair asked that Officers consider how best to present information on how the Committee can properly assess the progress and benefits with regards integration. A baseline is required with details of what has been achieved and the obstacles to the next steps.

Officers

Criminal Justice Services

Pat Togher delivered a presentation on Criminal Justice performance.

Officers highlighted that Q2 performance demonstrates the considerable resilience of the workforce and the management team in Criminal Justice throughout the pandemic. It illustrates significant improvement from Q1 to Q2 in relation to KPIs.

Officers outlined the performance context and what the service needs to respond to in terms of national objectives:

- Policy – reducing offending and reoffending. Early intervention is key to this
- Public Protection emphasis - the governance arrangements around MAPPA have remained unchanged due to the high level of risk
- Community Justice Scotland – focus is on continuous improvement
- National standards for criminal justice social work
- Statutory reporting required for Scottish Government – for accountability and informing national trends.

KPI figures were outlined which in the main show a positive direction of travel:

- Unpaid Work Placements commenced within 7 days of sentence – target is 80%, for quarter 2 the actual is 70%
- Community Payback Orders with a Case Management Plan within 20 days – target is 85%, for quarter 2 the actual is 80%
- Community Payback Orders 3 month reviews held within timescales – target 75%, for quarter 2 the actual is 83%
- Unpaid Work requirements completed within timescales – target 70%, for quarter 2 the actual is 73%
- Percentage of Criminal Justice Social Work Reports submitted to Court – target is 80%, for quarter 2 the actual is 85%
- Throughcare Order / Licences: Post release interviews held within one day of release – target is 90%, for quarter 2 the actual is 97%

Officers highlighted that the figures demonstrate how committed the workforce has been despite COVID.

An update was provided on how Criminal Justice Services responded to COVID-19:

- Impact of COVID on court attendance and unpaid work within 7 days – court trials ceased however court custody continued. There was a decline in activity coming through however
- Staff adjusting to new working arrangements
- Reduced availability of unpaid work placements balanced with additional 12 months to complete – an extension has been granted to the period to complete the hours

- Short notice CJSWR requests – this is indicative of the Courts and their own recovery arrangements. The Courts have been responsive when issues are raised.
- RAG system in place to manage face to face appointments safely – this has been successful and been applied across the whole system. It has been extremely well received by staff and provides assurance that those who are most vulnerable are receiving targeted support.
- Use of Microsoft Teams to support MAPPA meetings – this has been important. There has been no change to the governance and frequency of meetings. The MAPPA report has been published which demonstrates that performance has not been affected.

Officers outlined the following developments in Criminal Justice. Between Q1 and Q2 the service demonstrated resilience and improved performance whilst also keeping an eye on developments. The downturn in court activity has allowed this to be progressed.

- Introduction of HSCP Domestic Abuse strategic oversight group – this has been an excellent piece of work so far and is not unique to Justice Services. This cuts across Children, Adult and Older People Services. This will be a major piece of work and the Committee will be kept updated.
- Trauma training scheduled for early 2021 – this will go forward next year and is a broader strategic initiative to ensure a trauma informed approach
- Progression of Community Disposals incl. Bail Supervision, Diversion from Prosecution, Alcohol Court – this has continued throughout, there are over 100 people involved in this
- Proposal for a Youth Court in conjunction with Youth Justice Services – this reflects the progress made in structured deferred sentences. Work is ongoing with the Sheriff Principal.
- Establishment of virtual courts – this reflects a piece of work in the custody suite in response to domestic violence. Victims are not required to attend Court. The pilot in Glasgow is working really well and there is a close working relationship with the Sheriff Principal on how it is progressing.
- Management of Early Prison Release Programme – 170 were in scope at the start of the pandemic. Around 90 people, who were carefully selected, were released early over a 3 phased approach. This was governed by the HSCP, Scottish Prison Service and Prison Governors.

Members asked for clarification on the Community Payback Order statistics and what the actual gap is between achieving the 80% target and the current position.

Officers advised the gap is being closed and the service is achieving further improved performance. The performance infrastructure has improved regarding data recording. Officers agreed to bring detail on volumes and trends in future presentations. There are 4 weekly Oversight Governance Structure arrangements which gives details of the KPIs but with more detail underneath including individual teams and how they are performing.

Members asked for an update on the top risks in relation to Criminal Justice Services.

Officers advised there will always be risks around MAPPA, particularly MAPPA 3 and there has been an increase in registered sex offenders. An exercise has taken place in the last 6 months which has redefined some of those priorities of risk in RAG. There is a complexity of need around this cohort.

Members asked for clarity on what the top risks were for the Executive Team in terms of service delivery.

Officers advised all of the risk is predicated on the recovery arrangements coming out of Tier 4.

The Chair thanked Officers for the performance presentations and acknowledged the efforts and innovation in both Adult Services and Criminal Justice Services.

9. Clinical and Professional Quarterly Assurance Statement

Pat Togher presented a report outlining the latest quarterly clinical and professional assurance statement.

Officers confirmed the report follows the usual format with some slight changes to provide assurance that the respective governance arrangements have remained in place throughout the pandemic.

Officers highlighted that Significant Clinical Incidents (SCIs) referenced at section 3.3 of the report will be replaced by a Serious Adverse Event Report (SAER) and more detail will be provided in the next quality assurance statement.

In relation to Significant Case Reviews (SCRs), Officers reported that there is presently a national consultation on Guidance for Undertaking Learning Reviews (which will replace the current SCR guidance). This is currently out for consultation and more detail will be provided in the next quarterly assurance report.

Officers updated on self-evaluation activity and emerging themes relating to mental health and child protection. Two thematic reviews will be undertaken as a result of the changes that have emerged.

Members asked if there has been an increase in the number of SCIs in terms of children or adults over the last 6 months of the pandemic and who makes the decision on SCIs.

Officers confirmed there has been no significant increase. The decision on SCIs is commissioned jointly by the Clinical Director and Head of Service. The severity index form informs the decision making.

The Chair asked if there would be instances where Officers would feel it appropriate to inform the Committee of aspects of an SCR where learning points reflect some real failure in practice or change in practice and how the Committee can be assured that learning has been taken on board.

Officers advised that this is linked to the national overview of SCRs and the learning from that. In relation to Glasgow specific it would not be an unreasonable ask for the Committee to receive a high level summary of learning from SCRs. Officers highlighted the case of Child B which is in the public domain and the significant work plan that was compiled covering all of the learning from that case. The Chair asked for clarity on who publishes the SCRs. Officers confirmed that this would be the independent chair of the Adult Protection Committee or the Child Protection Committee and the merits of publishing would be considered in discussion with Chief Officers Group with consideration given to the organisation and the family affected.

The IJB Finance, Audit and Scrutiny Committee:

a) considered and noted the contents of the report.

10. Glasgow City IJB Budget Monitoring for Month 7 and Period 8 2020/21

Margaret Hogg presented the report which outlines the financial position of the Glasgow City Integration Joint Board as at 31st October 2020 (Health) and 23rd October 2020 (Council) and highlights any areas of budget pressure and actions to mitigate these pressures.

Officers highlighted the budget changes at section 3 which includes additional funding of £28m received from the Scottish Government for COVID-19.

The overall savings delivery for 2020/21 in relation to the transformation programme is anticipated to represent 73% of the target at this stage in the year. Delivery of savings has been impacted by the need to focus resources in responding to COVID-19. The unachieved savings target from prior years is forecast to be achieved, 100% of the total savings target.

Officers advised that the budget variances in section 5 are consistent with what has previously been reported to Committee and the IJB.

Officers highlighted the underspend position in Primary Care at section 5.6 of the report which relates to the prescribing budget. This is mainly due to the volumes remaining low which has negated the impact of higher prices due to short-supply. With regards to volumes, the data is 3 months behind for prescribing and it is anticipated that volumes will start to increase as GPs see an increase in attendances. This budget area will continue to be closely monitored.

Officers updated on the funding of costs associated with COVID-19. To date the IJB has been allocated £39m to meet the initial costs of responding to COVID-19 and to date £18.7m has been spent.

Members questioned why only £18.7m of the £39m allocated has been spent.

Officers confirmed this is the overall funding package in relation to COVID-19 and the Scottish Government have provided funding in advance therefore some of the funding is for future periods. The HSCP continue to engage with the Scottish Government and further allocations are expected.

Members asked for clarity on the change to Scottish Government funding arrangements which has removed non delivery of savings and offset savings from these arrangements.

Officers advised the level of unachieved savings and the level of underspend fully compensate each other.

Members questioned if the level of reserves would be diminished as a result of COVID-19. Officers confirmed that based on what is known just now, and if the funding expected is received, there wouldn't be an impact on reserves.

The IJB Finance, Audit and Scrutiny Committee:

a) noted the contents of the report.

11. Homelessness Funding Arrangements

Margaret Hogg presented a report which gives an overview of how Homelessness Services are funded due to the unique element of the rent funding.

This report is in response to a question raised at the IJB on 25th November 2020.

Officers highlighted that 3 funding streams which make up the gross expenditure budget for Homelessness Services. The range of services funded from mainstream funding were highlighted, the biggest element of which relates to commissioned services.

Officers outlined how the weekly rent charge is calculated for providing temporary accommodation in temporary furnished flats, hostels and emergency accommodation.

The Housing Benefit subsidy was highlighted and Officers outlined the gap in what is paid out in Housing Benefit and what is paid out in DWP which results in a shortfall.

Members thanked Officers for the helpful report which clarifies the position but queried how the HSCP ensures the costs being charged are value for money.

Officers advised this is a combination of using procurement processes and also working with RSLs to achieve best value. Officers are aware of the market rates across the City.

Members queried if the position regarding DWP not receiving full recovery applies equally across Scotland. Officers confirmed that it is not unique to Glasgow however as Glasgow and Inverclyde do not have their own housing stock, the rate of recovery is lower.

The IJB Finance, Audit and Scrutiny Committee:

a) noted the contents of the report.

12. Attendance Management

Christina Heuston presented a report to advise of the latest absence levels across Glasgow City Health and Social Care Partnership.

The report details absence related to COVID-19 separately. These are not necessarily staff who are COVID positive. The figures also cover absences due to self-isolation etc.

Officers reported that absences in Home Care and Older People Residential are starting to reduce and this is reviewed daily. Absences in Children's Residential have gone up and this has coincided with children returning to school.

The Health figures include an extra 20 people as of today and this is as a result of contact from Test and Protect.

Officers advised that the current focus is on individual risk assessments for staff. Action plans are in place for staff who were previously shielding or have underlying health conditions.

Enhanced 'Return to Work' interviews will take place for staff who have had COVID-19 and workloads will be monitored.

Members noted that it would be useful to see the absence figures as a percentage of the total workforce.

Officers advised this is 1 or 2% added to the overall figure.

The IJB Finance, Audit and Scrutiny Committee:

a) noted the contents of the report.

13. Health and Social Care Complaints Activity 2019-20 – Annual Reports

Jim Charlton presented the data on complaints for both health and social care during the period 1st April 2019 – 31st March 2020.

Officers highlighted the trends, advising that the volumes have increased dramatically. Social Work complaints are up by 26%; Care Services by 72% and NHS by 34%.

The number of complaints upheld in Care Services and the NHS are down and Social Work is marginally up in terms of complaints upheld.

Care Services and the NHS are meeting timescales. Social work complaints are not meeting the timescales which is largely due to staffing issues in the central complaints team but this is being addressed.

The majority of complaints in the NHS relate to prison healthcare. There has been an increase in complaints in Social Work relating to homelessness and physical disability.

Officers highlighted on a positive note, service improvements are being captured. This needs to be strengthened in Care Services however.

Low numbers of complaints are upheld which is a sign of a healthy and functional complaints process. Officers advised that there has been a general shift from complaints about staff and quality to those that can be linked to resource.

Members asked to what extent are actions taken into account to reshape services and the way they are being provided.

Officers advised that there is evidence of this in the NHS where it is handled by local management and adjustments are made to the process at local level. Officers confirmed in Social Work it tends to deliver outcomes to improve individual situations but this might be due to the nature of the complaints. Further work could be carried out however to look at complaints themes, such as communication, which could be a source of learning for the organisation.

Members referred to the complaints report presented to the Acute Services Committee in the Health Board which reports on the trends and improvement actions. This can be shared with HSCP officers when developed if helpful.

S. Carr

Members queried if the same categorisation for complaints is used in other local authorities. Officers advised there is a new complaints system coming out next year which will have a common set of categorisation and benchmarking and allow consistency across all Local Authorities.

The IJB Finance, Audit and Scrutiny Committee:

- a) noted the contents of the report and two attached appendices.

14. Business Continuity Annual Assurance Statement

Allison Eccles presented the report to provide an assurance statement to the Committee about the business continuity arrangements for the HSCP.

Officers reminded Members that an internal audit was carried out by Glasgow City Council in 2019 which recommended that an annual assurance statement should be provided to the IJB on the position of the Partnership's business continuity arrangements and disaster recovery arrangements.

Officers outlined the management arrangements for business continuity and the lifecycle. This is a continual process however the HSCP has been operating in business continuity mode since March due to the pandemic.

Officers updated on Business Impact Assessments and the reviews carried out in relation to responding to COVID-19 throughout the pandemic and recovery planning built in since June. A further review was requested by the Senior Management Team (SMT) at the end of October with a further review in January.

Officers reported that there is less testing and exercising this year due to COVID-19 as the service is in a live situation. Planning for multi-agency business continuity exercises has resumed however.

Officers advised that debriefs always take place following significant incidents and they follow a specific format aimed at gathering the learning. A 'stocktake' debrief on the response to COVID-19 took place throughout August and September, with all services participating. A verbal summary of the findings was presented to the SMT in October and informed the next phase of reviewing business continuity plans.

Due to the impact of COVID-19, the Partnership's position in terms of ICT Disaster Recovery remains unchanged since the previous report to Committee in September.

The IJB Finance, Audit and Scrutiny Committee:

- a) noted the contents of the report.

15. Risk Management Quarterly Update

Allison Eccles presented the report to provide an update on the status of the risk registers being maintained within the Glasgow City Health and Social Care Partnership.

This report covers the review carried out in October 2020 in respect of changes to risks during Quarter 2 2020-21 (July to September).

There are no new risks for the IJB and no risks have been removed. Two risks have increased relating to financial sustainability of providers and service delivery model uncertainty. One risk has decreased relating to IJB governance.

The Social Care risk register has had one risk added relating to impact on commissioned services from COVID-19. One risk has been recommended for closure relating to registration with SSSC. Two risks have increased relating to distribution to HSCP services and Care Services absence levels as a result of COVID-19 on this service.

The Health risk register has had no risks increased. Two risks have decreased relating to mental health staffing.

Members highlighted the large number of risks where mitigating action is being taken but it is not likely to have a substantial impact in terms of risk scoring. Officers confirmed this is regularly reviewed but in some cases it is unlikely that the risk score will be reduced even if mitigating action is taken.

Members raised a lack of delivery of essential services to very vulnerable people in care at home services and how the level of risk the person is being exposed to is being assessed.

Officers advised there was a big impact on staffing (due to shielding) in the first wave of the pandemic and action was taken to look at the most vulnerable receiving a home care service. In some cases family carers were able to provide support or alternative services were provided such as meal delivery. Contact was maintained. Following a lessons learned exercise, action was taken by the HSCP to recruit more staff in advance of the second wave and these staff are now in post.

Officers reported that sessions took place with the HSCP Senior Management Team over the summer looking at risks, challenges and mitigation going forward. The management team have been very proactive in this area this year and haven taken actions as a result of the challenges at the start of the year.

The IJB Finance, Audit and Scrutiny Committee:

- a) noted the contents of the report; and**
- b) Noted the current highest risks on the Integration Joint Board, Social Care and Health Risk Registers.**

16. Climate Change Duties Report 2019/20

Allison Eccles presented Glasgow City Integration Joint Board's Climate Change Duties Report 2019-21 which has been submitted to the Scottish Government.

The IJB Finance, Audit and Scrutiny Committee:

- a) noted the contents of the report; and**
- b) noted the IJB's Climate Change Duties Report 2019-21 has been submitted to the Scottish Government following approval by the Chief Officer Finance and Resources acting under delegated authority.**

17. Next Meeting

The next meeting was noted as Wednesday, 10 February 2021 at 9.30am via Microsoft Teams.

Cllr Morgan advised the Committee that this was her last meeting as Chair and thanked Members and Officers for their input during her two year term. Rona Sweeney will take over as Chair for the next meeting.