

# ABERDEENSHIRE INTEGRATION JOINT BOARD

BY SKYPE, 19 MAY, 2021

Board Meeting 07.10.21 Open Session Item 15.10
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## Integration Joint Board Members:

Mrs R Atkinson, (NHS Grampian) (Chair); Councillor A Stirling (Vice Chair); Ms A Anderson (NHS Grampian); Mrs J Duncan (NHS Grampian); Ms R Little (NHS Grampian); Provost W Howatson; Councillor G Reynolds, Councillor A Ross; Councillor D Robertson; and Ms S Webb (NHS Grampian).

## Integration Joint Board Non-Voting Members:

Ms F Culbert, Carers' Representative; Mr D Hekelaar, Third Sector Representative; Mrs S Kinsey, Third Sector Representative; Mr M McKay, NHS UNISON; Mrs McNicol, Advisor; Mr A Sharp, Chief Finance Officer, Aberdeenshire Health and Social Care Partnership; Dr M Metcalfe, NHS Grampian; Mr S Reary; and Ms P Milliken, Chief Officer, Aberdeenshire Health and Social Care Partnership.

**Officers:** Mrs G Fraser, Mrs J Howie, and Mr M Simpson, Aberdeenshire Health & Social Care Partnership; Ms A McGruther, Ms S Strachan, NHS Grampian; Mr P Mathews, Ms J Wells, Mr N David, Mrs J Raine-Mitchell, and Ms M Youngson, Aberdeenshire Council.

**Apologies:** Mrs I Kirk, UNISON; Mrs A Mutch, Public Representative; Mr I Ramsay; Mrs K Davidson.

## INTRODUCTION

The Joint Board concurred with the Chair in welcoming Pamela Milliken to her first meeting of the Aberdeenshire Integration Joint Board since being appointed to the position of Chief Officer.

### 1. DECLARATION OF MEMBERS' INTERESTS

The Chair asked for Declarations of Interest. No interests were declared.

### 2. STATEMENT OF EQUALITIES

In making decisions on the following items of business, the Joint Board **agreed**, in terms of Section 149 of the Equality Act, 2010:-

- (1) to have due regard to the need to:-
  - (a) eliminate discrimination, harassment, and victimisation;
  - (b) advance equality of opportunity between those who share a protected characteristic and persons who do not share it; and
  - (c) foster good relations between those who share a protected characteristic and persons who do not share it: and
- (2) where an equality impact assessment has been provided, to take its contents into consideration when reaching a decision.

### **3. MINUTE OF MEETING OF THE INTEGRATION JOINT BOARD OF 31 MARCH, 2021**

There had been circulated and was **approved** as a correct record, the Minute of Meeting of 31 March, 2021.

### **4. INTEGRATION JOINT BOARD ACTION LOG**

There had been circulated a report by the Partnership Manager (North) providing updates on progress with actions which had still to be completed and advising when these were scheduled to be reported to the Joint Board.

There was discussion on the fact that the Circular Economy was still to be considered and that the format of the report should include completed items for one report being removed. Thereafter the Joint Board **noted** the updates provided.

### **5. CHIEF OFFICER'S REPORT**

There had been circulated a report by the Partnership Manager (North), providing an update of the ongoing work of the Health and Social Care Partnership, highlighting (a) the National Whistleblowing Standards launch on 1 April 2021; and (b) ongoing work in respect of Frailty.

The Partnership Manager (North) gave a verbal update on progress of the roll out of Covid-19 vaccinations.

The Joint Board **agreed**:-

- (1) to commend the sustained resilience and dedication of staff in rising to challenges presented by Covid-19;
- (2) that a briefing paper on the Frailty Pathway be issued to the Joint Board by the Chief Officer;
- (3) that a report on Whistleblowing would be submitted to a future meeting by the Chief Officer; and
- (4) to note, in all other respects, the terms of the update provided.

### **6. FINANCE OUTTURN 2020/2021**

There had been circulated a report dated 28 April 2021 by the Chief Finance Officer, providing an update on the sixth and final financial monitoring update for the 2020/21 financial year.

The report covered the twelve month period up to the end of March 2021. It also covered the financial impact of the Covid 19 pandemic on the resources of the Joint Board in terms of funding received and additional expenditure incurred.

The Joint Board, having considered the financial position as detailed in the report and appendices **agreed**:-

- (1) to note the budget update position;
- (2) that a briefing paper on financial spend to support unpaid carers during the Covid-19 pandemic to date be issued to the Joint Board by the Chief Officer; and
- (3) that a briefing paper on the current position and future plans with regard to dental care in Aberdeenshire be issued to the Joint Board by the Chief Officer.

## **7. AUDIT COMMITTEE UPDATE FROM MEETING ON 31 MARCH, 2021**

There had been circulated a report dated 11 April 2021 by the Chair of the Audit Committee, providing an update on business considered by the Committee at its meeting on 31 March, 2021, including (a) the introduction of a Business Planner; (b) the Internal Audit Plan 2021/22; (c) a Risk Assessment of Outstanding Internal Audit Recommendations; (d) the External Audit Draft Annual Audit Plan 2020/21; and (e) the Audit Scotland Report on NHS in Scotland 2020 Overview

The Joint Board **agreed** to note and welcome, being assured, in terms of the update on audit matters.

## **8. AUDIT COMMITTEE MEMBERSHIP**

There had been circulated a report dated 22 April 2021 by the Partnership Manager (North) seeking the appointment of a member to the Integration Joint Board (IJB) Audit Committee.

The report explained that Councillor Robertson had intimated his resignation from the IJB Audit Committee, although he would remain a member of the IJB.

The Joint Board **agreed** to appoint Councillor Reynolds to the IJB Audit Committee.

## **9. ABERDEENSHIRE AUTISM STRATEGY**

There had been circulated a report by the Partnership Manager (Central) on the Aberdeenshire Autism Strategy.

The report explained that Aberdeenshire Health and Social Care Partnership (AHSCP) had recently taken part in the Scottish Government's independent evaluation of the national strategy by holding a local workshop with Blake Stevenson on 11 March 2021. Autistic people, family, carers, third sector partners and AHSCP staff attended this workshop. Key themes coming out of the workshop included the need for more involvement of autistic people in service development, clearer information on local autism support groups and services, improved transitions for young people, better autism training, improved mental health support and employability services. Participants were very clear that their preference was for an autism strategy to be developed, as opposed to a standalone action/delivery plan.

The Joint Board **agreed**:-

- (1) that work commence to develop an updated life-course autism strategy for Aberdeenshire;
- (2) to support the collaboration between the Education and Children's Service and Aberdeenshire Health and Social Care Partnership in the development of a new autism strategy; and
- (3) that the Aberdeenshire Health and Social Care Partnership be cognisant of appropriate terminology for autistic people.

## **10. ALCOHOL AND DRUG PARTNERSHIP GOVERNANCE**

There had been circulated a report by the Partnership Manager (North) on the Alcohol and Drug Partnership (ADP).

The report explained that, following the departure of Luan Grugeon as ADP Chair in September 2020, a conscious decision was taken not to immediately appoint a Chair and for the function to be carried out on a temporary basis by one of the Partnership Managers. During the pandemic ADP meetings had generally been less formal, focusing on how partners can increase cooperation to improve service resilience. The ADP now required a permanent Chair.

The Joint Board **agreed** to:-

- (1) appoint Chief Inspector Jackie Knight, Police Scotland, as Chair of the Alcohol and Drug Partnership; and
- (2) the proposed arrangements for future Alcohol and Drug Partnership reporting, as detailed in Appendix 1 to the report.

## **11. INSCH SERVICES**

There had been circulated a report dated 30 April, 2021 by the Partnership Manager (Central) proposing that officers carry out a strategic needs assessment for residents of Inch and the surrounding area, in order to develop options for future health and social care services.

The report explained that in December 2019, staffing issues at Inch War Memorial Hospital led to a reduction in the number of patients that could be accommodated, from 10 to 5. The decision was taken to mothball Inch War Memorial Hospital in March 2020 at the beginning of the Covid-19 pandemic to consolidate staff at other sites.

The report advised that clinical and professional governance matters would be reported to and considered by the Clinical and Adult Social Work Governance Committee, in parallel with the strategic needs assessment.

The Joint Board **agreed** to instruct officers to carry out a strategic needs assessment for residents of Inch and the surrounding area, in order to develop options for future health and social care services.