

**Minute of Meeting of the
East Renfrewshire
Integration Joint Board
held at 10.30 am on 27 November 2019 in
the Eastwood Health and Care Centre, Drumby Crescent,
Clarkston**

PRESENT

Councillor Caroline Bamforth	East Renfrewshire Council (Vice-Chair)
Lesley Bairden	Head of Finance and Resources (Chief Financial Officer)
Susan Brimelow	NHS Greater Glasgow and Clyde Board
Dr Angela Campbell	Consultant Physician in Medicine for the Elderly
Anne Marie Kennedy	Third Sector representative
Dr Deirdre McCormick	Chief Nurse
Andrew McCready	Staff Side representative (NHS)
Geoff Mohamed	Carers' representative
Julie Murray	Chief Officer – HSCP
Councillor Paul O'Kane	East Renfrewshire Council
Dr Ian Ritchie	NHS Greater Glasgow and Clyde Board (substitute for Anne-Marie Monaghan)
Ian Smith	Staff Side representative (East Renfrewshire Council)
Councillor Jim Swift	East Renfrewshire Council
Flavia Tudoreanu	NHS Greater Glasgow and Clyde Board

IN ATTENDANCE

Eamonn Daly	Democratic Services Manager, East Renfrewshire Council
Vivienne Hoggan	Specialist NHS Learning Disability Services
Fiona McBride	Operations Manager, Children 1 st .
Belinda McEwan	Senior Manager, Children and Families (Intensive Services) and Criminal Justice
Rhoda MacLeod	Head of Adult Services (Sexual Health, Prison & Police Custody Health Care) Glasgow City HSCP
Candy Millard	Head of Adult Health and Social Care Localities
Jennifer Schofield	Lead Nurse, Sandyford, Glasgow City HSCP

APOLOGIES FOR ABSENCE

Councillor Tony Buchanan	East Renfrewshire Council
John Matthews	NHS Greater Glasgow and Clyde Board
Anne-Marie Monaghan	NHS Greater Glasgow and Clyde Board (Chair)
Kate Rocks	Head of Public Protection and Children's Services (Chief Social Work Officer)

DECLARATIONS OF INTEREST

1. There were no declarations of interest intimated.

Variation in Order of Business

In accordance with Standing Order 16.2, Councillor Bamforth advised that she had altered the order of business to facilitate the conduct of the meeting.

TRANSFORMATIONAL CHANGE PROGRAMME – SEXUAL HEALTH SERVICES IMPLEMENTATION PLAN

2. The Board considered a report by Jackie Kerr, Assistant Chief Officer, Adult Services, Glasgow HSCP, on service changes and implications for East Renfrewshire of the ongoing transformational change programme for Sexual Health Services.

By way of background, the report explained that the transformation plan to remodel sexual health services in the Greater Glasgow area was set out in the document *Transformational Change Programme – Sexual Health Services*. This had been endorsed through engagement with partners and the public, and approved by Glasgow City IJB in March 2018.

The report also outlined the objectives of the service review and highlighted a number of the key service improvements that would be delivered

Thereafter, the report explained that the change programme had recommended the introduction of a 3-tier future service model with details of the service provided at each tier being outlined. The report also outlined the range of proposals and activities that had been developed alongside or as part of the new service model. This would lead to improved access to specialist sexual health care and treatment and appropriately skilled staff, and a better, more efficiently organised service. Implications for East Renfrewshire were the establishment of a transitional 1-day Tier 1 service in Barrhead while online services for local residents were tested. In addition, an evening service for young people would be provided from a suitable location.

The report also provided information in relation to the development and introduction of an online service from January 2020 to support people with simpler and more straightforward clinical needs to gain access to services timeously. This may encourage people to access services who were usually unable to travel to or access physical services, whilst at the same time freeing up time and capacity at local services for those with more complex needs who needed to see specialist staff.

Details of how the online service would work having been explained, and the key objectives and anticipated benefits of the online service having been listed, the report noted that the project would be established as a demonstration project for 12 months with physical services being retained locally on 1 day a week to allow evaluation of the online service.

The report then explained the ongoing discussions with the HSCP about the impact of the project on local services and on multi-partner and multi-agency involvement in development of the project's implementation plan.

Details of the public engagement process held between 5 August and 13 September 2019 and conclusions of the engagement were also summarised, it being noted that further engagement and evaluation would take place during the life of the implementation plan.

Finally the report set out the various implications of the proposals, it being noted that there would be no financial implications for East Renfrewshire HSCP with transitional funding coming from the overall financial framework.

Councillor Bamforth introduced Rhoda MacLeod Head of Adult Services (Sexual Health, Prison & Police Custody Health Care) and Jennifer Schofield Lead Nurse, Sandyford, Glasgow City HSCP, who were heard further on the proposals as outlined in the report, in the course of which it was explained that the proposed changes would not lead to any reduction of service in East Renfrewshire. It was further explained that East Renfrewshire would be involved in the online services pilot project.

Responding to questions from Councillor Swift, the reasons why oral contraception repeat prescribing could not form part of the pilot were explained, although work was ongoing to address this.

Comment was also made on some concerns expressed by GPs that the changes would lead to increases in their workload. Ms MacLeod explained that this was not the intention and that every effort would be made to work with GPs to ensure services were delivered in an efficient manner and did not increase GP workload.

Comment was also made on the public engagement that had taken place, and on the positive responses received, particularly in relation to the development of online services. In response to Councillor Swift, the number and type of testing kits available and how algorithms would be used to determine the type of testing kits issued to patients was explained.

Welcoming the development of online services, Councillor O'Kane questioned whether the use of social media to advertise the availability of services had been considered. In reply, it was explained that there had been considerable investment into the service's website and that work to develop social media channels was ongoing.

Responding to further questions on working with other vulnerable groups, not just young people, it was explained that as the service was an open door service it made targeting specific groups of vulnerable people more challenging. Notwithstanding some key groups, including drug injectors, people with learning disabilities, and homeless people had been targeted for support.

Ms Tudoreanu questioned what support mechanisms were in place for young people who did not want parents/carers to know that they were accessing the service, and what the impact of the change would be on the LGBT community.

In reply, it was explained that young people over the age of 13 were entitled to access the service on a confidential basis, although it was clarified if the reason for attending related to potential child protection issues, these would be reported as normal. In addition, it was explained that the changes had been subject to an Equality Impact Assessment to make sure no groups were disadvantaged. In addition, the service had recently received its customer care charter.

The Chief Officer having suggested that it may be useful for an update to be provided to the Board at a future meeting, the Board noted the report and the presentation.

FAMILY WELLBEING SERVICE – ANNUAL REPORT 2018-19

3. The Board considered a report by the Head of Public Protection and Children's Services (Chief Social Work Officer) presenting the 2018-19 Annual Report for the Family Wellbeing Service.

NOT YET ENDORSED AS A CORRECT RECORD

The report explained that the Annual Report related to the delivery and expansion of the Family Wellbeing Service to support children and young people who presented with a range of significant mental and emotional wellbeing concerns.

The report further explained that Children 1st had delivered the service as a two-year pilot project, commencing in September 2017, originally taking direct referrals from 2 predetermined GP practices. This had expanded to 6 GP practices during Year 2 of the project and from June 2019, with increased investment from both the HSCP and the Robertson Trust a phased implementation across all remaining GP practices in East Renfrewshire had started.

The Annual Report, a copy of which was appended, provided a range of statistical information relative to the operation of the service including the ages and genders of those using the service; education/employment status; and referral outcomes.

The Annual Report also contained some of the positive feedback received from families as well as information from the external evaluation of the service carried out by the Scottish Recovery Network, and concluded by providing details of the future development proposals for the service

Councillor Bamforth welcomed to the meeting Fiona McBride, Operations Manager, Children 1st, and Belinda McEwan, Senior Manager, Children and Families (Intensive Services) and Criminal Justice, who were heard further on the information contained in the Annual Report, and on further upscaling work that had taken place since June and which was not covered in the report.

The Chief Nurse posed a number of questions; on outliers in terms of the uptake of the service by GP practices; the possible use of A&E attendance data as some young people went there rather than to their GP; numbers of young people over 19 accessing the service; and the interface between the service and school nurses.

In reply it was explained that phasing was the main reason for outlier GPs; that A&E attendance figures could be looked at; and that the project was for young people aged 0-18 although if someone was involved with the service prior to their 19th birthday they were able to continue the treatment they were receiving. The links the service had with the school nursing service were also explained.

Mrs Kennedy and Councillor Swift having welcomed and commended the service, and it having been explained that the development of social media and peer support structures was ongoing, Mrs Brimelow suggested that it would be useful to know the impact of the new service on the CAMHS service. Responding to Mrs Brimelow, Ms McEwan confirmed that the Family Wellbeing Service was not a substitute for those young people who required CAMHS. Quantifying the impact on the CAMHS service would be challenging, however the Chief Officer confirmed that staff would be monitoring any long-term trends and impact on CAMHS.

The Board:-

- (a) noted the Family Wellbeing Service 2018-19 Annual Report and the increasing numbers of children and families accessing the service during that period; and
- (b) the progress made since June 2019 to expand and upscale the service to all GP practices in East Renfrewshire.

VOLUNTEER OF THE YEAR

4. At this stage in the meeting the Chief Officer reported that Mrs Kennedy had been named Volunteer of the Year at the recent Scottish Health Awards. The award had been made in connection with Mrs Kennedy's involvement in the "Wee Red Bus", the local community transport scheme, but the Chief Officer also referred to Mrs Kennedy's involvement in other volunteer groups.

The Board congratulated Mrs Kennedy on her success.

MINUTE OF PREVIOUS MEETING

5. The Board considered and approved the Minute of the meeting held on 25 September 2019.

MATTERS ARISING

6. The Board considered and noted a report by the Chief Officer providing an update on matters arising from discussions that had taken place at the previous meeting.

ROLLING ACTION LOG

7. The Board considered a report by the Chief Officer providing details of all open actions, and those that had been completed since the last meeting.

The Chief Officer having intimated that the seminar on housing was to be rolled over until January, the Board noted the report.

PERFORMANCE AND AUDIT COMMITTEE

8. The Board considered and noted the Minute of the meeting of the Performance and Audit Committee held on 25 September 2019.

CARE AT HOME IMPROVEMENT AND REDESIGN PROGRAMME

9. Under reference to the Minute of the previous meeting (Item 5 refers), when the Board had noted the progress report into the delivery of the Care at Home Improvement Plan, the Board considered a report by the Chief Officer providing an update on the most recent report from the Care Inspectorate and setting out arrangements to develop a comprehensive programme to focus efforts on meeting the Care Inspectorate requirements, alongside a more fundamental service redesign.

The report referred to the implementation of the new senior management structure in April 2018, reminding the Board that this had seen a change in head of service and operational management for the care at home service. In addition, it had been recognised at that time, that there needed to be a substantial service redesign and a change programme board was established to take this forward.

However following the publication of the inspection report of the service by the Care Inspectorate in February 2019, service redesign was suspended with the aim of focussing on the improvements necessary to meet the Inspectorate's requirements.

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NOT YET ENDORSED AS A CORRECT RECORD

The report explained that a further inspection of the service had been undertaken by the Care Inspectorate in August. The findings, published on 11 November, acknowledged that progress had been made, but stated that the Care Inspectorate did not consider the initial requirements to be met. Accordingly the inspection grades remained unchanged from the initial inspection.

The report further explained that in discussions with the Care Inspectorate it had become evident that their requirements would not be met in a sustainable way unless the service was redesigned.

Whilst the report set out the various elements to a redesign programme it emphasised that the most critical element in relation to meeting the Inspectorate's requirements was a review of frontline management roles and the development of new roles to ensure support workers were properly supported. Furthermore, current working practices would need to be reviewed to ensure staff were deployed at times needed by service users. This would require a review of existing shift patterns.

To take the redesign forward a wider programme of improvement and redesign had been initiated, led by the Chief Officer. To support this approach, a programme oversight board had been set up, membership of which included the Council's Chief Executive, and legal, HR and staff side representatives. Details of the remit of the group were provided.

Notwithstanding the new proposals, the report explained that there was still a focus on delivering the Inspectorate's requirements but alongside a parallel redesign process, with additional support resources being identified to increase the pace of change and improvement, and details of focus of activity between September 2019 and March 2020 being set out.

Thereafter the report provided the latest update on key activities, current status, and future plans to March 2020.

The report then set out the current financial position it being noted that an overspend of £461K was projected, with the reasons for this being provided. Projections were refined as the year progressed and every effort was being made to bring costs closer in line with budget.

Commenting further, the Chief Officer stated that although the Care Inspectorate had acknowledged that improvements had been made, staff were disappointed that the Inspectorate did not consider these to be at such a level to amend their inspection grades. She explained that a recent round of recruitment had proven to be more successful than earlier attempts and indicated that she was now more confident that adequate resources and processes were in place to deliver on both the improvement and redesign of the service.

Mrs Brimelow indicated that she did not feel wholly reassured by both the report and the additional comments made by the Chief Officer. She referred to both the 9 requirements from the Inspectorate's February report that the still not been addressed as well as a recommendation form made in 2017 that also remained unmet.

Whilst expressing hope that the redesign project would deliver the necessary service improvements Mrs Brimelow suggested that the root of the problems facing the service was weak management and leadership and that the current management did not have the capability to deliver improvements.

In reply, the Chief Officer explained that management was focussed on delivering the required improvements, A detailed action plan containing 81 actions had been prepared and would be delivered.

Responding to questions from Ms Tudoreanu on why the grades of the service had declined in recent years, the Chief Officer explained that the Care Inspectorate appeared to have adopted a different approach recently in terms of inspections and grades and that it was noticeable that some neighbouring authorities had been given similar inspection grades. She indicated that the Inspectorate had directed the HSCP to areas of good practice in other local authorities and visits had been made to these authorities to discuss how the services had been improved in those areas.

Supporting the redesign, Councillor Swift reminded the Board of comments he had made at previous meetings about underfunding of the HSCP by the Council, which in his view had not been as supportive of the HSCP as it should have been.

The Board noted the report.

JOINT INSPECTION BY CARE INSPECTORATE AND HEALTH IMPROVEMENT SCOTLAND ON EFFECTIVENESS OF STRATEGIC PLANNING

10. The Board took up consideration of a report by the Chief Officer providing an overview of the findings of the Joint Strategic Inspection of Adult Services carried out by the Care Inspectorate and Health Improvement Scotland.

Having explained that the inspection was one of a series on the effectiveness of strategic planning requested by Scottish Ministers and having set out the key elements of the inspection, the report explained that the inspection had taken place between April and June 2019 with the final report being published in October.

Thereafter, the report summarised the inspection findings in 3 main areas, these being Performance; Strategic Planning and Commissioning; and Leadership. For each area the performance rating was “good” with there being important strengths in each with some areas for improvement identified.

It was further clarified that 5 areas for development had been identified, with these being set out. It was noted that these were similar themes from both the Ministerial Strategic Group self-evaluation and the findings from the Audit Scotland report into health and social care integration. In view of this it was proposed that development actions be incorporated into a single Improvement Plan to be presented to the next meeting of the Board for consideration.

The Chief Office was heard further on the findings of the inspection and on the areas for development, highlighting that the grades awarded had been the highest in Scotland to date.

Referring specifically to development area 5, which stated that the partnership should ensure that it had sufficient effective operational leadership and management capacity to fully implement strategies and plans, the Chief Officer acknowledged that the senior management team needed to be strengthened and improved. Discussions would take place with the council and the health board about how to deliver this.

The Board:-

- (a) noted the Joint Inspection Report; and
- (b) agreed that the Chief Officer prepare an action plan in response to the areas for development identified.

SPECIALIST LEARNING DISABILITY SERVICES – ENVIRONMENTAL CHANGES TO BLYTHSWOOD HOUSE AND CLAYTHORN HOUSE

10. The Board considered a report by the Chief Officer seeking approval to invest in environmental changes to both Blythswood House and Claythorn House, the changes being required to safely meet the complex needs of 2 patients and to ensure the overall safe operation of the service.

Having set out the services provided at both locations and highlighted the diverse patient group which in turn required a careful approach to risk management including how to best use the estate to minimise risk and provide a therapeutic environment, the report explained that there was a need to reconfigure both units to better accommodate the needs of 2 individuals.

Details of the historic care arrangements and the reasons for these having been set out, the report provided details of the proposed changes to be made to both properties, it being noted that the Specialist Learning Disability Services senior management team considered the proposals to be in line with the current redesign programme. They would also support plans to work more flexibly with community services providing a good resource that could be used in a variety of ways to prevent admission. This was consistent with the overall service vision and strategic plans.

It was noted that the anticipated overall cost of the specialist furnishings would be around £25,000, and the Board's approval was sought to meet this from the Repairs and Renewals reserve set up for the service. In addition, the Chief Finance Officer reported that whilst the final cost estimates had not yet been received from the health board's Estates Service, and assuming that they would meet appropriate costs, the Board's agreement was also sought to the use of the reserve for any reasonable share of building costs.

The Board approved the proposals and the drawdown from the earmarked reserve.

INTEGRATION SCHEME REVIEW

11. The Board took up consideration of a report by the Chief Officer providing an overview of the work to date and anticipated timeline for the review of the Integration Scheme between East Renfrewshire council and NHS Greater Glasgow and Clyde (NHSGGC).

Having reminded the Board that the current Integration Scheme took effect in June 2015 and in terms of the relevant legislative provisions required to be reviewed after 5 years, the report explained that a working group, comprising representatives of all 6 HSCPs who partnered with NHSGGC, along with a health board representative and the Chief Officer of the East Dunbartonshire HSCP, representing all 6 Chief Officers, had been set up in July 2019.

The report explained that all 6 existing integration schemes had been reviewed for content and consistency and a specimen scheme drafted to identify areas of commonality, the aim being to maintain consistency across the schemes where possible although it was acknowledged there would be some local variation.

It was further explained that the proposed changes to date had been minor and that locally, discussions with Council officials did not indicate significant change. It was also noted that East Renfrewshire councillors would be consulted as part of the process.

The report explained that the Chief Officer from East Dunbartonshire HSCP was leading on discussions with NHSGGC and that these discussions would include any proposed changes

and agreed wording for hosted services and the set aside budget although it was explained that to “future proof” new schemes and allow for latitude for operational changes, operational detail of these 2 areas would not be included. In addition, it was explained that a separate review of the mechanisms for managing and accounting for hosted services was currently being carried out by Chief Finance Officers, as well as a working group looking at the mechanics of the set aside.

The Board noted the report.

REVENUE BUDGET MONITORING REPORT

12. The Board took up consideration of a report by the Chief Financial Officer providing details of the projected outturn position of the 2019/20 revenue budget as at 30 September 2019, and seeking approval of a budget virement.

It was reported that against a full year budget of £120.032M there was a projected overspend of £0.263M (0.22%), with details of the projected overspend being provided. It was noted that this was an improvement of £0.105M from the position to 30 July reported at the September meeting of the Board. It was further noted that any overspend at the end of the year would be funded from reserves if required although every effort would be made to eliminate the operational overspend during the year.

Comment was made on the main projected variances, it being noted that at these would be subject to change as the year progressed.

It was also reported that the proposed budget virements as set out in Appendix 7 to the report reflected realignment of existing budgets

Commenting further, the Chief Finance Officer clarified that within the overspend, it had been assumed that £600K would be drawn from reserves to cover part of the required savings target. Some further savings may be may be achieved during the remainder of the year. However a prudent approach had been taken.

The Chief Officer having responded to comments from Councillor on capacity and associated costs to the effect that there was some contingency available if required, the Board:-

- (a) noted the report; and
- (b) approved the budget virements as set out in Appendix 7.

DATE OF NEXT MEETING

13. It was noted that the next meeting of the Integration Joint Board would be held on Wednesday 29 January 2020 at 10.00 am in the Council Offices, Main Street, Barrhead.

CHAIR

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