

**Minute of virtual meeting of the  
East Renfrewshire Integration Joint Board  
held at 10.30 am on 23 November 2022**

**PRESENT**

Anne-Marie Monaghan	NHS Greater Glasgow and Clyde (Chair)
Lynsey Allan	Scottish Care
Lesley Bairden	Head of Finance and Resources (Chief Financial Officer)
Councillor Paul Edlin	East Renfrewshire Council
Dr Claire Fisher	Clinical Director
Jacqueline Forbes	NHS Greater Glasgow and Clyde Board
Dianne Foy	NHS Greater Glasgow and Clyde Board
Anne Marie Kennedy	Third Sector representative
Amina Khan	NHS Greater Glasgow and Clyde Board
Dr Deirdre McCormick	Chief Nurse
Andrew McCready	Staff Side Representative (NHS)
Geoff Mohamed	Carers' representative
Julie Murray	Chief Officer – IJB
Councillor Owen O'Donnell	East Renfrewshire Council
Councillor Katie Pragnell	East Renfrewshire Council (Vice-Chair)
Raymond Prior	Head of Public Protection and Children's Services (Chief Social Work Officer)
Lynne Rankin	Staff Side Representative (ERC)

**IN ATTENDANCE**

Liona Allison	Assistant Committee Services Officer, East Renfrewshire Council
Tracy Butler	Lead Planner (Recovery Services)
Eamonn Daly	Democratic Services Manager, East Renfrewshire Council
Pamela Gomes	Governance and Compliance Officer
Dr Sarah Julyan	Medical Officer, NHSGGC
Michelle McGeever	Senior Manager, Mental Health and Recovery
Lee McLaughlin	Head of Adult Services – Communities and Wellbeing
Eilidh Nelson	Audit Scotland
Margaret Phelps	Strategic Planning, Performance and Commissioning Manager
Stephen Shaw	Audit Scotland
Tom Kelly	Head of Adult Services – Learning Disability and Recovery

**ALSO IN ATTENDANCE**

Suzanne Clark	Carers' Representative (observer)
---------------	-----------------------------------

**6**  
**NOT YET ENDORSED AS A CORRECT RECORD**

**APOLOGIES FOR ABSENCE**

Councillor Caroline Bamforth    East Renfrewshire Council

**DECLARATIONS OF INTEREST**

1. There were no declarations of interest intimated.

**MINUTE OF PREVIOUS MEETING**

2. The Board considered and approved the Minute of the meeting held on 21 September 2022 subject to the following amendment:-

Page 6, Paragraph 2 – following “£9.266” there be added the word “million”.

**MATTERS ARISING**

3. 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**

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

Having heard the Chief Financial Officer in response to a question from Councillor Pragnell, outline the ongoing work to identify a named establishment as a place of safety as required in terms of the Age of Criminal Responsibility (Scotland) Act 2019, the Board noted the report.

**PERFORMANCE AND AUDIT COMMITTEE**

5. The Board considered and noted the Minute of the meeting of the Performance and Audit Committee held on 21 September 2022.

**AUDITED ANNUAL REPORT AND ACCOUNTS 2021-22**

6. Under reference to the Minute of the meeting of the Performance and Audit Committee held prior to the meeting of the Board, the Board considered a report by the Chief Financial Officer seeking approval for the final annual report and accounts for the IJB for the period 1 April 2021 to 31 March 2022, following the external audit of the accounts. A copy of the annual report and accounts accompanied the report.

The report referred to the establishment of IJBs and the requirements, in accordance with Section 106 of the Local Government (Scotland) Act 1973, for annual accounts to be prepared in compliance with the Code of Practice on Accounting for Local Authorities in the United Kingdom, and also to additional guidance produced by the Local Authority (Scotland) Accounts Advisory Committee.

Thereafter, the report explained that the annual report and accounts had been prepared in accordance with the relevant legislation and guidance, and set out the key messages from

**NOT YET ENDORSED AS A CORRECT RECORD**

Audit Scotland. In summary, the annual report and accounts were unqualified and unmodified; the IJB had appropriate and effective financial management arrangements in place; the level of general reserves held by the IJB was well below the policy level of 2%; the medium term financial outlook for the IJB was challenging and work should continue with partners to develop a sustainable strategy; there were appropriate governance arrangements in place; and appropriate arrangements were in place to demonstrate best value.

The report also referred to the 3 recommendations made by Audit Scotland and summarised the response and associated timescale for action in respect of each, with progress on these to be reported to the Performance and Audit Committee.

The report also highlighted that the main messages from the annual report and accounts remained unchanged from the unaudited position reported in June, with the operational underspend of £0.837 million remaining unchanged. This was marginally better than the position last reported to the IJB in March, when the projected outturn was an underspend of £0.554 million. Main budget variances were set out and it was noted that the reserves total had increased significantly during the year from £10.485 million to £20.572 million, with further allocations received in the final quarter of 2021/22 mainly for winter funding, the Primary Care Improvement Plan and COVID-19. This increase in reserves was in line with the national position the vast majority of which related to Scottish Government ring-fenced funding. The majority of the ring-fenced funding related to COVID-19 and would be used to support the ongoing response to the pandemic in 2022/23. The Scottish Government's intention to clawback unused COVID-19 reserve funding during 2022/23 was noted, with the mechanism still to be confirmed.

Councillor Pragnell, Chair of the Performance and Audit Committee, reported that the accounts, along with the external auditor's report, had been discussed at length at the committee, and that it had been agreed to remit the report and accounts to the Board with a recommendation that they be approved. She also expressed thanks to the Chief Financial Officer and her team for preparing the accounts as well as thanking both internal and external audit for their contributions.

The Chief Financial Officer was then heard further on the accounts, welcoming the results of the audit, particularly given this was another complex and challenging year.

Referring to the 3 recommendations made by Audit Scotland together with the responses provided, she highlighted that these were same issues that had been raised in previous years.

In relation to the key messages she confirmed that these remained unchanged since the unaudited position was reported to the Board in June.

In addition, she referred to confirmation in the report of the restatement to the prior year set aside expenditure for 2020/21 which had been included in the draft accounts. Audit Scotland had advised that they did not consider this material and it had therefore been removed. It was noted that this was the treatment requested across all NHSGGC IJBs. However an explanatory note had been left in the accounts at Note 14 to promote transparency.

It having been reported that as with prior years the opportunity had been taken between the unaudited and audited report to refine narrative, update performance information for the latest available and revise for any updates during the period, the Board's attention was drawn to the updated medium-term financial outlook which had been altered to reflect the current assumptions as discussed at the seminar the previous week.

The Chief Financial Officer also reported that the easy read summary document which was appended would be published on the website once the full annual report and accounts had been approved and submitted.

Having heard the Chief Financial Officer thank audit, performance and finance colleagues for their support, the Board:-

- (a) approved the audited annual report and accounts;
- (b) authorised the Chair, Chief Officer and Chief Financial Officer to accept and sign the annual report and accounts on behalf of the IJB for submission to Audit Scotland; and .
- (c) noted the summary overview of financial performance document for 2021-22.

## **REVENUE BUDGET MONITORING REPORT**

7. The Board considered a report by the Chief Financial Officer advising of the projected outturn position of the 2022-23 revenue budget as at 30 September 2022.

It was reported that against a full year budget of £144.999 million there was a projected operational overspend of £0.465 million (0.32%) after assumed contributions from reserves.

It was noted that the use of reserves in the current year was significant and much of the funding would be used fully in the current year. This would impact on the ability to smooth costs in future years. Clarification on the mechanism the Scottish Government would use to clawback the balance of COVID funding was awaited.

As in previous updates, the report explained that HSCP costs related to COVID-19 activity were reported to the Scottish Government via NHS Greater Glasgow and Clyde, as health boards were the leads on this reporting. The latest return showed there had been minimal change in projected costs since last reported.

The report explained that current projected local mobilisation plan costs were £4.726 million. This was funded by £9.266 million COVID Reserve funding carried forward leaving a balance of £4.540 million. It was also noted that Scottish Government advice was now that there would be no further COVID-19 funding after this year and work was ongoing to make sure appropriate exit strategies were in place.

Details of the main projected operational variances as well as ongoing financial risks were set out.

The Chief Financial Officer was then heard further on the report. Having reported that the level of projected overspend had improved by £100k since last reported, she highlighted that this did not yet include the cost of the current year pay award which would be offset in part by the share of funding to be passed through from the Council or the gain that would be made from the reversal of the increase in National Insurance contributions that was implemented in April.

She clarified that whilst the change in projected costs since last reported was not in itself particularly material it had to be noted that it was after significant use of reserves in the current year, with it being likely that the full prescribing reserve would be used.

In conclusion the Chief Financial Officer referred to the moratorium on non-essential spend in the current year and that officers were working to deliver savings through the recovery and renewal programme as well as to identify further options given that if was likely they would be needed. Costs and demand would continue to be monitored and as much mitigating action as possible would be taken.

Ms Monaghan having referred to the extremely challenging financial times ahead, Ms Forbes enquired if the position regarding the allocation by the Scottish Government of the additional health and care funding from UK Government was yet known. In reply the Chief Financial Officer explained it had not been clarified but that Scottish Government officials were attending a forthcoming meeting of the national Chief Financial Officers' Group and further information may be available at that time. Notwithstanding Chief Financial Officers were preparing budgets on the basis of a flat cash settlement.

Ms Forbes having referred to a meeting of IJB Chairs and Vice Chairs at which concerns regarding the challenging financial position would be discussed, Councillor Edlin enquired about the method to be used for prioritising services to be protected, and whether there was any scope to approach partners for additional funding. In response, Ms Monaghan explained it was highly likely that the thresholds for accessing services would need to be increased and changes made to service eligibility criteria.

The Chief Officer explained that it would be necessary to prioritise service users most at risk, the Chief Financial Officer further explaining that prioritisation of service had always been in place. She also explained that whilst savings had been identified these did not deliver the level of savings required and the position would become clearer once the financial settlement was known.

In relation to seeking additional funds from partners, the Chief Financial Officer explained that both the NHS GGC and the Council were facing challenging financial positions, that the Scottish Government have given directions to both regarding funding to be provided to IJBs and that both bodies would determine the level of funding they could provide.

Responding to questions from Ms Khan, the Chief Financial Officer clarified the reasons why there were at this stage not considered to be any equalities implications and confirmed that equality impact assessments were carried out when required. In this regard she referred to the multiple workstreams being taken forward as part of the recovery and renewal programme. It was important to make sure that service users were not disproportionately adversely impacted by any changes that may be made.

The Board noted the:-

- (a) projected outturn for the 2023-23 revenue budget; and
- (b) projected reserves balances.

## **HSCP RECOVERY AND RENEWAL PROGRAMME**

8. Under reference to the Minute of the previous meeting (Item 10 refers), the Board considered a report by the Chief Officer providing an update on the HSCP Recovery and Renewal Programme. A detailed overview of current projects accompanied the report.

It was explained that following the previous meeting the reporting format had been revised to better reflect project details and benefits. This included indicative financial savings.

The Chief Financial Officer clarified that there had been no significant updates or key project milestones since the previous meeting, but confirmed that the programme board meeting on 16 November had approved the proposals to start the Care at Home Review, Information Governance project and Review of Commissioned Services, and to close the Staff and Patient Access project. Increased savings targets for the Individual Budget Calculator Review and the Review of Commissioned Services were also noted.

Ms Khan and Mrs Kennedy having welcomed the proposals to bring updates to alternate Board meetings in future, the Board:-

- (a) noted progress on the HSCP Recovery and Renewal Programme; and
- (b) agreed that update reports be submitted to alternate Board meetings in future, subject to exception reports being submitted if required.

### **WINTER PLAN 2022-2023**

9. The Board considered a presentation from Lee McLaughlin, Head of Adult Services – Communities and Wellbeing, providing an update on preparedness for winter across the NHSGGC area.

The shared approach to winter planning was highlighted and it was explained that in July and August, officers had attended national and NHSGGC events to reflect on winter planning for the previous winter, and to share ideas and opportunities for the coming winter.

It was noted that the Scottish Government Advice on winter planning had been issued at the start of October and that in terms of the Winter Resilience Overview 8 priority areas had been identified. Information on how each of the priorities was being addressed locally was set out.

The presentation also provided information on business continuity and contingency planning arrangements in place and summarised the current situation regarding Care at Home. This included numbers of people delayed in hospital, and capacity challenges within the service. It was noted that whilst positive work had taken place in reducing the number of people waiting for an assessment, this had resulted in an increase in the numbers of people now waiting for a care package.

In light of the above the Board's approval was being sought to write to service users to let them know about the pressures the service was under, to ask for the support of family members where possible, and to let them know that there may be some impact on service continuity at short notice.

In conclusion, the Head of Adult Services – Communities and Wellbeing paid tribute to the efforts of all staff who continued to deliver services in difficult circumstances.

The Chief Officer was then heard further on the pressures facing the service following which discussion took place.

Responding to a question from Councillor O'Donnell on how the pressure on the service compared to previous years, the Head of Adult Services – Communities and Wellbeing explained that she had joined the HSCP in July 2020 and this was the most pressure on the service that she had witnessed. The Chief Officer also commented on the pressures the service was operating under.

Ms Allan welcomed the presentation highlighting that partner providers were also experiencing recruitment challenges and questioned whether any discussions were taking place around this and the use of resilience funds. In reply, the Head of Adult Services – Communities and Wellbeing, acknowledged that recruitment was the main challenge facing all providers. She explained that external providers were now taking on 49% fewer services and referred to occasions when contracts were being handed back as external providers did not have sufficient staff. She also clarified the situation regarding the level of winter funding being provided.

In response to Ms Khan, the Head of Adult Services – Communities and Wellbeing reported on the work taking place to support older people impacted by the Cost of Living crisis, including support being provided through the third sector and the Council's Money Advice service.

Commenting on absence levels, she reported that these fluctuated but had been at around 20/30% in recent weeks, although she explained that planned leave was include in this figure as it had an impact on the ability to deliver service.

Having heard Ms Forbes clarify that many other IJBs wrote to service users regarding reduced service levels, and Mrs Kennedy indicate that service users preferred to know these things in advance, the Board:-

- (a) noted the presentation; and
- (b) agreed that officers write to service users to let them know about the pressures the service was under, to ask for the support of family members where possible, and to let them know that there may be some impact on service continuity at short notice.

#### **HSCP WORKFORCE PLAN 2022-25**

**10.** Under reference to the Minute of the meeting of 22 June 2022 (Item 11 refers), when the Board had considered and noted the draft Workforce Plan, the Board considered a report by the Chief Officer seeking agreement to the 2022-25 HSCP Workforce Plan and associated Action Plan, copies of which accompanied the report. It was noted that the plan was intended to set out a cohesive picture of health and care workforce need across the HSCP geographic area.

The report explained that following consideration in June, revision had been made to the draft plan prior to its submission to the Scottish Government Workforce Planning Unit in July.

Scottish Government feedback noted that the plan was well written but asked for additional commentary with regards to the older workforce, turnover within the HSCP and further detail in relation to specific recruitment actions within the action plan. Sections 4, 5 and 8 of the plan had been updated to take account of this feedback.

The report also referred to the accompanying Action Plan which set out a broad range of activities that would progress during the next 3 years and would be brought back to the IJB for further update. It was noted that the local actions were based on the Scottish Government's five pillars of workforce planning.

The Chief Officer having commented further on the plan the Head of Adult Services – Communities and Wellbeing, was heard in response to questions from Councillor Pragnell in relation to the Care at Home workforce. She acknowledged that the workforce was ageing, and that there were various reasons why it was difficult to attract younger people into the role. However the HSCP did work with further education establishments to try and attract a younger workforce.

Referring to Section 5 of the plan relating to the HSCP workforce, Ms Khan suggested that there seemed to be some information missing, particularly in relation to disability and sexual orientation. She explained that NHSGGC was working to address this lack of information and asked if similar work was taking place in the Council as a consistent approach would be helpful. She also enquired if it would be possible for a series of site visits to HSCP premises to be arranged for Board members.

In reply the Chief Officer confirmed that she would make enquiries regarding data gathering arrangements and that site visits could be arranged although following a suggestion by Ms Monaghan these could begin in the Spring. In addition, in response to Councillor O'Donnell the Chief Officer confirmed that steps could be taken to review arrangements for increasing recruitment from minority ethnic groups.

The Board approved the 2022-25 HSCP Workforce Plan and associated Action Plan.

### **EAST RENFREWSHIRE ALCOHOL AND DRUGS PARTNERSHIP UPDATE**

**11.** The Board considered a report by the Chief Officer providing an overview of developments in the work of the Alcohol and Drugs Partnership (ADP), progress towards delivery of the national Drugs Mission to reduce and prevent drug-related deaths. This included an update on progress towards the Drugs Mission priorities, including implementation of the Medication Assisted Treatment Standards; increasing access to residential rehabilitation; establishing near fatal overdose pathways; enhancing assertive outreach; and how lived and living experience was shaping the approach.

The report detailed the recent guidance and expectations set out for Alcohol and Drug Partnerships on governance and transparency and the arrangements East Renfrewshire had in place to ensure requirements were met.

The report also sought approval for a revised reporting schedule for the submission of ADP reports to the Board, approval of the ADP Annual Report 2021-22 and approval of the Alcohol and Drugs Strategy mid-term report, copies of which accompanied the report.

By way of background the report referred to the approval by the Board in September 2020 of the East Renfrewshire Alcohol and Drugs Strategy and Delivery Plan, and work carried out thereafter to enhance the involvement of persons with lived experience in the work of the ADP.

Thereafter the report set out the current context in relation to drug related deaths prevention, provided information on the delivery of the Nation Drugs Mission in East Renfrewshire, and local work in relation to governance arrangements for the ADP.

The Head of Adult Services – Learning Disability and Recovery then introduced Dr Sarah Julyan who gave a presentation on the work of the ADP.

Dr Julyan provided information relating to drug related deaths between January and December 2021. It was noted that the national figure of 1295 deaths was a reduction on previous years and that locally the 6 confirmed drug related deaths mirrored the national trend.

Dr Julyan then referred to the 10 Medication Assisted Treatment Standards (MATS), providing further comment in relation to how the standards were being delivered locally, before concluding with information in relation to pathways to residential rehabilitation.

Welcoming the presentation, Councillor O'Donnell referred to the targets that had been set and questioned how these were monitored. He also questioned if ADP funding was subject to clawback.

In reply Dr Julyan explained that there were robust performance monitoring processes in place, that there were regular meetings with the Scottish Government to discuss targets and all performance reports were available online. In addition, the Head of Adult Services – Learning Disability and Recovery confirmed that it would be possible for a summary of targets to be provided.



In relation to funding, the Chief Officer supported by the Chief Financial Officer explained that the main concern of Scottish Government was to ensure that all local reserves were used before additional funding was provided. There were no changes to the recurring allocation going forward.

Responding to Ms Khan who enquired if in respect of case reviews that were carried out there were any issues the IJB needed to be aware of, Dr Julyan explained that overall case numbers were low, that there was a wide range of factors. Key issues were considered to be accessing care and appropriate treatment pathways for opiates.

The Board:-

- (a) noted progress to date on delivering the national Drugs Mission including the Medication Assisted Treatment Standards and access to residential rehabilitation;
- (b) noted the self-assessment of governance and accountability arrangements undertaken by the Alcohol and Drugs Partnership;
- (c) agreed the reporting schedule and focus of reports from the Alcohol and Drugs Partnership to the Integration Joint Board as outlined in the report;
- (d) approved the Alcohol and Drugs Partnership Annual Report 2021-22 submitted to the Scottish Government pending Integration Joint Board approval; and
- (e) approved the Alcohol and Drugs Strategy mid-term progress report.

**DATE OF NEXT MEETING.**

**12.** It was noted that the next meeting of the Integration Joint Board would be held on Wednesday 1 February 2023 at 10.00 am.

CHAIR

BLANK PAGE