

REPORT TO: MORAY INTEGRATION JOINT BOARD ON 26 NOVEMBER 2020

SUBJECT: CHIEF OFFICER REPORT

BY: INTERIM CHIEF OFFICER

1. REASON FOR REPORT

1.1 To inform the Board of the Interim Chief Officer activities that support the delivery against the IJB's strategic priorities articulated in the Strategic Plan, and the delivery against the 9 Health and Wellbeing outcomes. Key work for the Partnership includes the implementation of Home First, alongside preparations for winter, responding to the ongoing COVID-19 pandemic, and budget control.

2. **RECOMMENDATION**

- 2.1. It is recommended that the Moray Integration Joint Board (MIJB):
 - i) note and comment on the content of the report; and
 - ii) agree that transforming services to meet the aspirations of the MIJB's Strategic Plan remains a priority.

3. BACKGROUND

Operation Home First

- 3.1. Responding to COVID-19 has brought about rapid change, fast tracking many of the plans that had been under development in line with our Strategic Plan. The reduction of delayed discharges and the increased use of technology for consultations are two examples, where we had aspirations but the pace was slow.
- 3.2. The strong relationships that exist in North East Scotland between key partners has enabled a swift and cohesive set of responses to how services have been delivered, and challenges met. Whole system leadership has built the common approach, with rapid and decisive decision making within the limits of delegated authority.





- 3.3. The Home First principles include:
 - Building on the initial response
 - Maintaining agile thinking and decision making
 - Retaining our ability to respond to COVID-19 related demand, and winter surges in demand
 - Using a home first approach for all care where that is safe to do so
 - Utilising available technology to widen and ease access to services
 - Avoidance of admission
 - Removing delays for discharge from hospital
 - · Maintaining safe services for those Shielding
 - Removing barriers between primary and secondary care, with as much care as possible in communities
- 3.4. Work is being co-ordinated and driven by the 3 health and social care partnerships and acute services, with a local programme of work in Moray sitting within that framework, supported by local clinicians, practitioners and managers. We were keen that locally Children's Social Work Services were included in the Home First approach, with the framework supporting the efforts to improve outcomes particularly for looked after children.
- 3.5. Key performance indicators and data to identify the impacts of change are being developed and will be used to demonstrate progress in all the areas of work. A commission has been developed by the Chief Officers, with staff resources being funded through the NHS Grampian remobilisation plan.

Winter Planning

- 3.6. The Health and Social Care Partnership has contributed to the NHS Grampian winter plan, and ensuring that our local planning fits the Moray context and is cognisant of lessons learned from previous winters. The planning also meets the aspirations of the Remobilisation Plan which is being led by NHS Grampian. We continue to develop the planning, with the additional challenge injected in how we would continue to deliver services with staff absences due to COVID-19, across our in-house and independent provision. We are also using the "Adult Social Care Winter Preparedeness Plan 2020-21" just published by Scottish Government in our planning.
- 3.7. An action plan is in place with joint work between the Partnership and Dr Gray's Hospital to reduce the number of people delayed in their discharge from hospital. There are a number of work streams in place to achieve a reduction and to gain the best outcomes for individuals. With winter upon us maintaining patient flow through the system is really important.

Flu Vaccination Programme

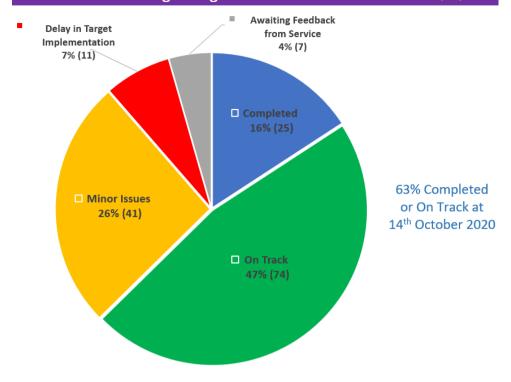
- 3.8. Our Chief Nurse is leading the local flu vaccination campaign, and despite the administrative challenges across Grampian at the start, we are on trajectory and continuing to offer opportunities for people to get immunised.
- 3.9. Planning has begun to prepare for the availability of a COVID-19 vaccine, and a full time manager has been appointed from within the current establishment for Moray. This will be the most challenging and complex

vaccine programme delivered to date, and will be supported by a number of clinical leads and managers, and drawing on the experience of our Chief Nurse and the flu campaign.

Remobilisation

- 3.10. The Grampian Remobilisation Plan sets out the whole-system overarching response to living with COVID-19 based on the innovation and reform accelerated during the initial response. Our priority with our partners is to seek the opportunity for more innovation and reform, whilst at the same time adapting to "living with COVID-19" and supporting the phases of the Scottish Government route map and creating stabilisation and resilience of health and care services to meet population needs.
- 3.11. The Plan supports phased transition to redesign and rebuild the 'new' normal over the next 12-24 months. Central to the Plan is ensuring a move into the next phase of living with COVID-19 and commence the co-ordinated stepping-up of services that is safe and clinically prioritised, minimising harm to patients, public, our staff and other professionals working across the system. The approach and key priorities within the Plan have been informed by a wide range of clinical and non-clinical stakeholders and expert groups within NHS Grampian, the three Health and Social Care Partnerships and other health and care partners within the North East.
- 3.12. A performance and assurance framework has been put in place by the System Leadership Team of which the Chief Officer is a member. A monthly progress report will be available setting out overall progress along with key areas of concern/risk for further exploration. These reports will also be shared with a range of cross-system groups. A review of progress (14th October) shows that 63% of the 158 milestones set out in the Plan for delivery by the end of October are completed or on track to be completed by the end of October 2020. The chart below illustrates the breakdown.
- 3.13. Part One of the Plan can be accessed via the following link <u>Grampian</u> Remobilisation Plan Part One

Breakdown of Progress Against End of Oct 2020 Milestones (n-158)



Care of Learning Disability Clients

- 3.14. The MIJB, as part of the strategic planning for the long term care of Learning Disability clients, will receive in due course an update of the Learning Disability Strategy, which will then inform any future case for resources to support those clients.
- 3.15. The MIJB Development Session timetabled for the 17 December will inform on the development of the Strategy. A formal paper will be presented to the January 2021 MIJB meeting with an update on the strategy development; emerging issues; and a timeline for completion.

4. KEY MATTERS RELEVANT TO RECOMMENDATION

- 4.1 We remain in a pandemic response phase, and must be ready to step up quickly where that is required. In parallel, there is the opportunity to accelerate work to achieve the MIJB ambitions as set out in the Strategic Plan, and Home First is the programme designed to do that.
- 4.2 The challenges of finance have not gone away, and the underlying deficit must be reduced. Funding partners are unlikely to have the ability to cover overspends going forwards. Re-mobilisation Plan funding will only cover additional expenditure, and the Partnership faces a potentially difficult winter.

4.3 Transformational change, or redesign, that provides quality and safe services, whilst bringing more efficient ways of operating, will be the focus for the senior management team as the route to operating within a finite budget, while meeting the health and care needs of the Moray population.

5. **SUMMARY OF IMPLICATIONS**

(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Plan 2019 – 2029, 'Moray Partners in Care'

Working with our partners to support people so they can cope with, and where possible, overcome the health and wellbeing challenges they may face.

Ensuring that the right care is provided at the right place at the right time when people are in need. Ensuring that our systems are as simple and efficient as possible.

(b) Policy and Legal

The Chief Officer continues to operate within the appropriate level of delegated authority, ensuring that the MIJB is sighted on key issues at the earliest opportunity, and continues to influence and agree the strategic direction.

(c) Financial implications

There are no financial implications arising directly from this report. Our Mobilisation Plan was approved, and the Chief Finance Officer reports regularly on variations to plan to ensure that the Scottish Government are sighted on additional costs arising from COVID-19.

The key drive of Operation Home First is to secure quality and capacity. More efficient ways of working will cost less, allowing re-investment in services. There is a link between the aspirations of Home First and the set-aside, and also the potential to shift planned hospital outpatient activity to community settings. Staff and or finance will need to follow the patient in order to adequately resource the community setting.

(d) Risk Implications and Mitigation

The risk of not redesigning services will mean that Health and Social Care Moray cannot respond adequately to future demands.

(e) Staffing Implications

Staff remain the organisation's greatest asset, and we must continue to engage with all sectors to ensure full involvement, which will create the best solutions to the challenges we face.

(f) Property

There are no issues arising directly from this report.

(g) Equalities/Socio Economic Impact

Any proposed permanent change to service delivery will need to be impact assessed to ensure that we are not disadvantaging any section of our community.

HSCM will continue to work closely with all our partners to ensure that we contribute to the health and well-being of the community and support the recovery phase of the COVID-19 pandemic.

(h) Consultations

Any major service change will be subject to proper consultation. There are no direct implications arising from this report.

6. CONCLUSION

6.1 The MIJB are asked to acknowledge the significant efforts of staff, across in-house providers, externally commissioned services, the Independent and Third Sector, who are supporting the response to the COVID-19 pandemic, and the drive to create resilience and sustainability through positive change.

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