

REPORT TO: MORAY INTEGRATION JOINT BOARD ON 30 SEPTEMBER 2021

SUBJECT: CHIEF OFFICER REPORT

BY: CHIEF OFFICER

# 1. REASON FOR REPORT

1.1 To inform the Board of the Chief Officer activities that support the delivery against the Moray Integration Joint Board's (MIJB) strategic priorities articulated in the Strategic Plan, and the delivery against the 9 Health and Wellbeing outcomes.

## 2. **RECOMMENDATION**

#### 2.1. It is recommended that the MIJB:

- i) consider and note the content of the report; and
- ii) agree that transforming services to meet the aspirations of the MIJBs Strategic Plan remains a priority, with a focus on key objectives as the IJB remobilise from the Covid-19 pandemic, along with a look ahead, continuing to develop strategic planning.

#### 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 to meet aspirations set out in the Strategic Plan. Home First will remain a bedrock of aspirations to meet need more responsively, and to be more anticipatory in the approach. A Home First update is contained in a separate report on today's agenda.

# Remobilisation

3.2 To date the system has coped with some significant surges in demand, with a pan Grampian approach in how surge and flow through the system is managed to ensure patients/service users receive the care they require. Staff





within Moray, across all sectors of health and social care, including independent providers and the third sector, have stepped up to the challenge on a daily basis. There is pressure in some service areas which will require a particular focus to work through the backlog of referrals.

- 3.3 As part of the development of the performance framework, and to support remobilisation, further performance indicators are being sought from services to understand system pressures and how one part of the system impacts on other elements. A key risk to achieving the MIJBs objectives is the availability of staffing. Staff sickness/absence/vacancies will be monitored closely, on a weekly basis, and staff will work with the pan Grampian system to look at tackling the recruitment challenge.
- 3.4 The general picture across Scotland is of a significant rise in Covid-19 infections. This will lead to increased hospitalisations, at a time when services are already under pressure. Further work is underway to plan an increase in capacity across Grampian in readiness for a potential demand from this increase in Covid-19 transmission.

### **Covid-19 Vaccination Programme**

- 3.5 By the end of December 2020 all care home residents along with staff had been offered the first dose vaccine. Second dose vaccines have been administered in line with the Chief Medical Officer direction. Uptake rate information is available on the Public Health website at <a href="https://www.publichealthscotland.scot/news/2021/february/covid-19-daily-dashboard-now-includes-vaccination-data/">https://www.publichealthscotland.scot/news/2021/february/covid-19-daily-dashboard-now-includes-vaccination-data/</a>
- 3.6 With a longer term campaign being predicted for repeated Covid-19 vaccinations, along with delivery of this winter's flu campaign and all the other immunisation programmes, the team are preparing and a dedicated Nurse Manager is now in post who will take forward the plan over the longer term.

#### Portfolio arrangements

- 3.7 Covid-19 has presented the greatest challenge the health service has faced. As NHS Grampian recovers, remobilises and renews as part of the North East system there has been reflection on how best to move forward to demonstrate learning and improvement from Covid-19 is an imperative. During the pandemic the effectiveness, efficiencies and improvement in outcomes achieved through public sector organisations working together have been demonstrated, as well as partners and communities rather than individual entities. To deliver further on this whole system, integrated approach, there is a desire to transition from an organisational leadership and management model to a system leadership and management approach. On an interim basis, as the model is developed, the Chief Officer is providing a leadership role for Dr Gray's Hospital alongside the responsibilities already carried, thus expanding the portfolio to encompass all Moray health and care services.
- 3.8 The senior management team membership for health and social care in Moray has been revised to incorporate community and acute leaders and is functioning with an integrated approach and a responsibility for the success of the whole Moray health and care system. The response to pressures and a

potential increase in demand from Covid-19 will be from Moray health and care across acute and community, with an integrated approach to balancing care across the system.

## **Accommodation for Learning Disability Clients**

- 3.9 As a result of the Covid-19 pandemic and the impact of Brexit there is volatility in the building sector due to the availability and rising cost of building materials. The development of a Woodview 2, approved by the MIJB in January 2021 (para 9 of the minute refers), is going to be delayed. The target date was for completion of the accommodation by Summer 2023, but there will now be an estimated 12 month delay. Application for planning consent is expected to be submitted to the Moray Council Planning and Regulatory Services Committee scheduled to meet on 16 November 2021. The developers, Grampian Housing Association, intend to wait until the new financial year before going out to tender in order to mitigate their risks. The timescale will depend on the availability and cost of building materials at that time.
- 3.10 This global situation is highly likely to have an effect on other housing developments for Learning Disability clients that have been planned to provide suitable accommodation for future years. This poses a risk to the ability to support clients and families, and the service know that there are families where they are nearing the end of their ability to continue caring for someone in the home, and where more specialist support along with suitable accommodation will be needed. The risk extends to temporary placements needing to be sourced, and these may have a greater cost attached, particularly if the placement is out of area if nothing suitable can be sourced within Moray.
- 3.11 Of the clients that were planned to be offered accommodation in purpose built units in Moray over the next 12 months, there are risks of care and support breakdowns for a variety of reasons; high levels of challenging behaviour with families struggling to cope; people who are out of area and the provider has set a discharge date; and young people coming into adult services. The service are looking at alternative ways to support those people and their families and are negotiating with providers in order to manage and mitigate the risk.

# <u>Potential delegation of Childrens Social Work and Criminal Justice to the IJB</u>

3.12 Officers have continued to work on developing the business case, and this has been presented, refined and re-presented along with a number of supporting documents to the programme board, put in place to oversee the work to reach a point where both Moray Council and NHS Grampian could be formally approached to consider delegation of these services to MIJB. The business case has now been accepted, and a timeline of engagement with the Council and NHS Board will be firmed up at the next programme board, prior to any formal paper being presented. In parallel, the completion of more detailed due diligence will be completed by finance colleagues, taking into account the significant underspend that the services generated at the end of the last financial year.

## Strategic Planning capacity

- 3.13 The role of Lead for Strategy and Performance has been filled and work is underway to develop local planning and performance arrangements and processes that increasingly support delivery of the MIJB strategy. This will include reforming and refreshing the Strategic Planning and Commissioning Group (SPCG) which is due to meet on 22 September 2021. The SPCG will oversee the development of key programmes of work across the interfaces between primary, secondary and social care, developing the locality planning approach and coordination of the many enabling elements upon which planning and/or delivery of services is reliant.
- 3.14 The SPCG brings together stakeholders from across the Moray system and wider, including the third and independent sectors and the voice of lived experience.

# **Budget Control**

- 3.15 Transformational change that meets the test of quality and safety must also be efficient, making the best use of available resources. The senior management team in the Health and Social Care Partnership are meeting regularly to review spend, seek to identify additional savings and to track progress on transformational redesign so that corrective action and appropriate disinvestment can be supported. There is a continued commitment from Scottish Government to support the Covid-19 response which will offset the effects of needing to focus on more immediate priorities in response to the pandemic, however the risks associated with less long term planning remain, and will need to be addressed as part of remobilisation.
- 3.16 A separate report will be provided to the MJB in November 2021 to discuss the overspend in the Older Peoples' budget. This budget incorporates Care Home, External Home Care services and the Extra Care Models. Initially it was intended that this report would be provided to the MIJB at this meeting in support of the finance paper on this agenda today, but a more in-depth review is now required and is underway. The overall budget set for this area for the year is £18,170,999 and for the first three months of this financial year is showing an overspend of £824,942. This is an increase of £528,196 from the same point in the year in 2020/21. A comprehensive report will be prepared for November, allowing for an in-depth review of the complex factors contributing to the adverse financial position, detailing the areas of overspend and mitigating actions to ensure robust financial governance and oversight. Budget Managers and finance staff are currently meeting on a weekly basis.

#### **Civil Contingencies - IJB Category 1 Responder**

3.17 Work is progressing to establish the planning and response mechanisms following the amendment in status for IJBs. Training has been provided by the Scottish Government in 2 workshops for IJB Chairs and Vice-Chairs and also Chief Officers. The output of these will be considered and taken forward in partnership with Moray Council, NHS Grampian and other Local Resilience

Partnerships. The MIJB is now a full member of the national and local resilience infrastructure.

## 4. KEY MATTERS RELEVANT TO RECOMMENDATION

- 4.1 Moray remains in a pandemic response phase, and are stepping 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, with the opportunities of an expanded portfolio of health and care that encompasses Dr Gray's Hospital on an interim basis.
- 4.2 The challenges of finance have not gone away and there remains the need to address any underlying deficit. Funding partners are unlikely to have the ability to cover overspends going forwards. Winter/covid funding will only cover additional expenditure in the short-term and so it is important to understand the emerging landscape.
- 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.
- 4.4 Remobilisation has begun, and will build from achievements and learning from the current pandemic phase. The interdependencies between services will need to form part of the assessment on how we remobilise, as no part of the system operates in isolation. While the demand on the health and care system continues to be immense, we will continue to plan for the longer term to ensure that services will remain responsive to the community.

# 5. **SUMMARY OF IMPLICATIONS**

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

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. The Chief Finance Officer continues to report regularly on actual expenditure to ensure

that the Scottish Government are sighted on additional costs arising from COVID-19.

# (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

The HSCM Senior Management Team have been consulted in the drafting of 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.

Author of Report: Simon Bokor-Ingram, Chief Officer