

REPORT TO: MORAY INTEGRATION JOINT BOARD ON 28 MAY 2020

SUBJECT: CHIEF OFFICER REPORT

BY: 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 nine Health and Wellbeing outcomes.

2. RECOMMENDATION

- 2.1. It is recommended that the Moray Integration Joint Board (MIJB):
 - i) consider and note the update on Covid-19 as set out in sections 3.1 and 3.2 of the report; and
 - ii) agree the Strategic Leadership arrangements at Dr Gray's Hospital as set out in section 3.3 of the report.

3. KEY MATTERS RELEVANT TO RECOMMENDATION

3.1 **Covid-19**

- 3.1.1 The command and control structure is now well embedded, with the Health and Social Care Moray (HSCM) Control Centre at Bronze level, supported by the Silver and Gold from NHS Grampian and Moray Council. The mobilisation plan is being enacted, delivering key services and additional activity, and has built capacity to cope with increased demand. Delayed discharges, where numbers will fluctuate, are in single figures most days, and the reconfiguration of how community support and discharge planning now work together as a team has been solidified.
- 3.1.2 Further national redesign for the distribution of PPE (Personal Protective Equipment) has taken place, and our local PPE Hub arrangements have responded to that, and are working tirelessly to ensure that staff across inhouse services and external providers have the right equipment. The Third





Sector and Unpaid Carers are also included in the Hub arrangements, and the links have been strengthened to ensure that HSCM are able to respond to all requests.

- 3.1.3 There is rightly much focus nationally on the care home sector, and locally HSCM are working within the framework for putting in additional support to our care homes, both from local clinicians and also Grampian Public Health. The work to date has involved the Care Inspectorate and clinicians in Public Health, to identify early on where support is needed, and to provide interventional action to minimise risk to care home residents.
- 3.1.4 The provision of social care support continues to meet need at critical level, and the process of assessment and reassessment is overseen by our Consultant Social Work Practitioners. Any variation to a package of care will be reassessed in a maximum timescale of 12 weeks or sooner if triggered by the service user or the team. It is important that HSCM maintain an ability to meet all critical needs whilst having the capacity to continue with hospital admission avoidance and early hospital discharge, to protect the acute hospital bed capacity.
- 3.1.5 Primary Care are vital in providing out of hospital care, and supporting the wider system across community health and social care. The decrease in acute hospital presentations has the potential to create a national "health debt", storing up unmet demand and negative impacts for the future. This will need further analysis over time, but is not evident at this point locally.
- 3.1.6 There is an opportunity to create a "green" (Covid-19 free) site for restarting elective surgery at Dr Gray's Hospital. The Executive Nurse Director NHS Grampian and the Interim Chief Officer are working up a plan to achieve this, which may involve how we use our community hospitals. This will also protect the patients who access Dr Gray's Hospital for renal dialysis by making the hospital a "green" site.

3.2 Recovery and Renewal

- 3.2.1 As we progress through this critical phase of the Covid-19 pandemic, it is essential that whilst the priority remains to deliver services safely and effectively in what is clearly a constantly changing landscape, it is recognised that there is need to consider the recovery phase and what is widely being termed as 'the new normal'.
- 3.2.2 NHS Grampian have established a Recovery Cell, setting out some initial principles for consideration. Within this cell it is recognised that Recovery is wide ranging, and spans through internal NHS Grampian functions, through Health and Social Care Partnerships and the wider community, involving all partners. This strategic response has set out its aims and objectives as follows:
 - Objective 1 Supporting Staff
 - Objective 2 Defining the new normal
 - Objective 3 Understanding health debt
 - Objective 4 Implementing the new normal and repaying the health debt

- 3.2.3 Task and finish groups have been established to progress this work and representation from HSCM has been agreed. In addition to supporting the NHS Grampian recovery cell, it is important for HSCM to consider recovery within its own setting. This will be led by the Senior Management Team with a focus on capturing the learning being experienced from within the service.
- 3.2.4 The Senior Management Team are in the process of gathering initial data which will better equip HSCM to understand the effectiveness of the crisis response measures and enable collective sense and decision-making. Dr Lewis Walker had previously engaged with Professor Dave Snowden (Founder and Chief Scientific Officer of Cognitive Edge) around his work on the Cynefin model and SenseMaker software. This was an exercise that was actively being progressed in Grampian but recently, due to the Covid-19 response, this input has been re-purposed with a view to supporting current objectives. An identified key area is leadership and learning into recovery, and HSCM will engage in this process.

3.3 Strategic Leadership of Dr Gray's Hospital

- 3.3.1 The MIJB have considered reports in the past on the involvement of the Chief Officer in the operation of Dr Gray's Hospital. The level of input required on a day to day basis is considerable, and the Interim Chief Officer has considered how best to balance the priorities across the whole Health and Social Care Partnership (HSCP) portfolio.
- 3.3.2 The continuation of oversight from the MIJB is crucial, ensuring that the opportunities Dr Gray's Hospital presents are aligned to the MIJB strategic plan, and that the HSCP continues to support patient pathways which maximise use of care in the community and in peoples own homes.
- 3.3.3 In discussion with the NHS Grampian Chief Executive, it has been agreed that the Executive Nurse Director NHS Grampian will take on the executive lead role for Dr Gray's Hospital, and both the Executive Nurse Director and Interim Chief Officer will co-chair the Dr Gray's Transformation Board, which will drive the strategic direction for Dr Gray's Hospital.

4. KEY MATTERS RELEVANT TO RECOMMENDATION

- 4.1. Scotland continues to be in a pandemic response phase. There are a number of additional pieces of work that have arisen during this time, and staff have responded to the challenge. The Recovery and Renewal phase is work that will happen in parallel to the response, and is important as that will create the conditions conducive to operating in a "new normal", where the response to the pandemic will be over a long timeframe.
- 4.2. Dr Gray's Hospital is a key asset in the heart of Moray, and the MIJB, through the Interim Chief Officer, must continue to have strategic oversight to ensure that pathways of care make best use of what the site has to offer.

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 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 HSCM systems are as simple and efficient as possible.

(b) Policy and Legal

The Interim 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 Mobilisation Plan was approved, and the Chief Financial Officer reports on a weekly basis any variation to the plan to ensure that the Scottish Government are sighted on additional costs arising from Covid-19.

(d) Risk Implications and Mitigation

The report captures a number of key areas critical to the delivery of services during Covid-19, along with the actions being taken to mitigate risk.

The strategic risk around Dr Gray's Hospital will be mitigated by the work the Interim Chief Officer will take forward in partnership. The risk of the oversight work of Dr Gray's Hospital consuming a disproportionate amount of capacity for the HSCP has been mitigated with the arrangements being put in place.

(e) Staffing Implications

There are no issues arising directly from this report. Staff are the greatest asset, and HSCM must continue to engage with all sectors to ensure full involvement, which will create the best solutions to the challenges faced.

(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 there are no disadvantages to any section of the community.

HSCM will continue to work closely with all partners to ensure contribution to the health and well-being of the community and support the recovery phase of the Covid-19 pandemic.

(h) Consultations

Consultations have taken place with the Chief Financial Officer, Jane Mackie, Head of Service and Sean Coady, Head of Service, who are in agreement with the report where it relates to their area of responsibility.

6. **CONCLUSION**

6.1. The MIJB are asked to acknowledge the significant efforts of staff, across in-house providers, externally commissioned services and the Third Sector; who are supporting the response to the Covid-19 pandemic.

Author of Report: Simon Bokor-Ingram, Interim Chief Officer

Background Papers: with author