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**REPORT TO: MORAY INTEGRATION JOINT BOARD ON 24 NOVEMBER 2022**

**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'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; remobilisation from the covid pandemic; supporting measures for the reduction of local covid transmission; and budget control. We also need to continue taking a longer term strategic view and setting out clear plans that will deliver transformational change so we can best meet the needs of our community within the resources at our disposal.

**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 MIJB's Strategic Plan remains a priority, with a focus on key objectives as we remobilise from the Covid-19 pandemic, along with a look ahead as we continue to develop our strategic planning.**

**3. BACKGROUND**

**Home First and Hospital without Walls**

- 3.1 Work continues to develop the Home First portfolio of projects with a focus on ensuring projects are sustainable, scalable and meet the strategic objectives of HSCM. A minor revision will see the portfolio broadened ensuring it emphasises a whole system approach with work stream specific key performance indicators (KPIs) a requirement going forward. Recent efforts have also concentrated on tackling delayed discharges, with a three-phase plan currently in operation. Hospital without Walls continues to be developed and there will be opportunities for testing new concepts within the framework

of the Moray Growth deal and specifically with the Digital Health and Care Innovation Centre. An update on Home First is on today's agenda.

### **Remobilisation**

- 3.2 To date the healthcare system has coped with some significant surges in demand. A pan Grampian approach to manage surge and flow through the system ensures 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 significant pressure in some service areas which will require a particular focus to work through the backlog of referrals.
- 3.3 Whilst we are seeing pressure easing in some areas as staff absence rates decrease, for some services the pressures remain. Demand for unscheduled hospital care has not diminished, and Dr Gray's is having to manage a very tight capacity position on a daily basis. Community hospital beds, and intermediate options are being fully utilised, with expedient discharge from Dr Gray's as soon as beds are available.
- 3.4 Waiting times for inpatient elective surgical procedures at Dr Gray's Hospital continue to increase during the post pandemic period. Unfortunately, a combination of continued higher than desirable volumes of delayed transfers of care, plus the yet to be fully resolved incident in our theatre suite on the 10 August 2022, all inpatient elective surgery has been cancelled for the time being. Emergency surgery and day case procedure capability remains in place. Essential ventilation and duct cleaning has now been completed and we are now to await the results of air samples which, if clear, will allow the theatres to be reopened for operational use. The timescale for this will be considered by the ongoing Incident Management Team.
- 3.5 The significant pressure on Social work/Social care continues with limited signs of any sustained improvement. Homecare staff consistently have absence rates of over 8% and some weeks more than 10%. The internal home care service is successfully recruiting staff, but these gains are offset by numbers of staff leaving. The backlog of social care (the weekly number of people awaiting assessments is consistently between 150 and 165) and inability to meet demand, with 164 people currently awaiting care amounting to 1,224 hours of unmet need (as at 23 October 2022), is resulting in family carers having to shoulder increased care, and in its turn this leads to high demand for carer support, combined with concern from community members at levels of unmet need. The inability to meet care needs also impacts upon delays from hospital with 92% (37 out of 40) current delayed discharges being delayed as a result. The sustained pressure on care staff is impacting on the quality of care that some providers can deliver. Sustainability issues continue to be discussed with local social care providers, this has been a focus for mid-year finance contract review meetings. A national Gold Command group on social pressures has identified a need to set up a Sub Group focussing on the viability of care homes which our Commissioning Manager will be attending over the next 5 months. A 6 week review meeting has taken place regarding a Large Scale Investigation at a Moray care home with positive progress being evidenced.

## **Covid Vaccination Programme**

### **3.6 SCHOOLS**

While there have been more non consents than in previous years, the programme is going well. This includes the staff, who require flu and Covid vaccination, if in an eligible cohort. This cohort will be completed by end of November 2022.

### **CARE HOMES (583 individuals)**

- 3.7 This programme is making particularly good progress, with very few people not being able to be vaccinated due to the time frame of 12 weeks, since last vaccination, not being reached yet. We have been providing a follow up service for those who were not yet eligible, and this has now been completed. We have had minimal non consents - less than in previous years. We have also provided 1<sup>st</sup> doses for people who have recently moved into a care home. Care home uptake is 89.9%.

This cohort has now been completed, but we will still offer the vaccine to those who move into a care home who have not yet been vaccinated.

Care home staff have also been offered their vaccines during our visits.

### **HOUSEBOUND RESIDENTS (1717 individuals)**

- 3.8 This is a large cohort in respect of time and distance to be travelled. We are contacting people first to ascertain their housebound status and reduce unnecessary visits. We have had a good uptake with everyone consenting to receiving the vaccines so far, with around 50% of those on our list having now received their vaccine. We have also come across many people who are needing more support, so have been liaising with GPs and Quarriers.

This cohort is projected to be completed by 24<sup>th</sup> December 2022.

### **HEALTH AND CARE WORKFORCE (5722 individuals)**

- 3.9 There are extensive communications to encourage people to come forward for vaccination. There has been a slow start. Two Community Treatment and Care (CTAC) nurses had been delivering peer-to-peer vaccines within the GP Practices across Moray. They had a good response with over 100 people vaccinated. Anyone missed can get their vaccine at Fiona Elcock Vaccination Centre (FEVC) through the appointment system. We also provided HSCW appointments at all of our outreach over 80s clinics, but that uptake was very poor. We have also provided 3 clinics at Dr Gray's hospital in the Mobile Information Bus which proved worthwhile. The health and care workforce cohort has been extended throughout the rest of the programme to allow for members of Health and Care work to come forward when they are available. Current uptake shows that 40.2% of NHS Staff have taken up the offer and 20% of Social Care Staff.

### **Over 80s (5719 individuals)**

- 3.10 We commenced the over 80s cohort week starting 19 September 2022, with outreach venues and clinics within the FEVC, this has now been completed with a percentage uptake of 81.1%. Opportunities are still available for those who still wish the vaccine at FEVC.

### **Other Groups**

- 3.11 Over 65s (16673 individuals) has now been completed with a 79.7% uptake. At risk (12902 individuals) and household contacts commenced 24 October 2022 with an uptake of 9.7% to date. Over 50s (14720 individuals) letters were sent with appointments available to book from 24<sup>th</sup> October 2022 with an uptake so far of 17.1%. Opportunity for vaccination will continue to be provided for all eligible cohorts.

### **Ukrainian Refugee Scheme**

- 3.12 Moray continues to offer a Warm Scots Welcome to 102 Ukrainian Displaced Persons (UDPs). The breakdown consists of 65 adults and 37 children. An additional 10 UDPs are known to have settled in Moray through links with family members and have arrived on the Family Visa Scheme, which offers no data or financial support to the local authority.
- 3.13 The Refugee Resettlement Team (RRT) with support from wider partners have successfully triaged 6 families from the Welcome Hub (Elgin Travel Lodge) into host accommodation. Once the UDPs have been triaged, the RRT have been actively arranging suitable temporary accommodation. This accommodation has been sought either through the Expression of Interest (EOI) list which is a list of Moray residents who have offered to support the Ukrainian crisis through the Government portal or from the local housing stock. Two families have been accommodated into social housing with a further 11 applications for those transiting from host accommodation into social housing.
- 3.14 The RRT have taken a person-centred approach to match the UDPs with hosts in Moray. Essential time is spent to ascertain the UDPs family needs and interest and then matched with a suitable host in Moray. A host meeting is facilitated by the RRT and support is given to the host in achieving a successful match and to reduce the possibility of a future break down in relationship.
- 3.15 The Expression of Interest (EOI) list requires a property check and PVG check to be completed for the offer to be "active" for the Scottish Government statistics. In Moray there is also a Social Work check conducted as an additional safeguarding check. Of the 253 EOIs, 54 house checks have been completed. 32 EOIs have withdrawn the offer and 9 deemed unsuitable. These checks have been focused on the larger towns in Moray concentrating on Elgin with additional 45 properties to be checked in the Buckie and Forres area. This is to eliminate issues regarding rural and remote properties.
- 3.16 While the focus over the past 2 months has rightly been on ensuring arrivals receive the care and support to settle into their new home in Moray, a key priority must now be to support the Scotland Super Sponsor Scheme and continue to match more hosts with Ukrainian arrivals to Moray for as long as they need a temporary home.

### **Dr Gray's Strategy**

- 3.17 A period of stakeholder engagement has begun to inform the strategic direction for the Plan for the Future for Dr Gray's Hospital (2023-2033). After initial high level engagement to inform the process in June, staff workshops have been taking place in September and October, using a principal element of the Scottish Approach to Service Design Framework, otherwise known as the Double Diamond approach. This engagement has been extended during September to November to include patient and service users, partner organisations and the wider public. As engagement progresses, feedback is being grouped thematically, consulted upon and will inform the Plan for the Future's strategic direction. Dr Gray's Plan for the Future is expected to go to the NHS Grampian Board in February 2023 for approval. Further information can be found here: [Plan For The Future - Dr Gray's Hospital 2023-2033 \(nhsgrampian.org\)](https://nhsgrampian.org/plan-for-the-future-dr-gray-hospital-2023-2033).

### **Portfolio arrangements**

- 3.18 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 as an imperative. During the pandemic the effectiveness, efficiencies and better outcomes that can be achieved when we work together as public sector have been demonstrated, with partners and communities rather than as 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. The portfolio leadership arrangements have now been confirmed as permanent. Further opportunities for the alignment of services around pathways will be led by the Chief Officer.
- 3.19 Two posts will become vacant at the start of 23/24, being the Chief Nurse post and the Strategy and Planning Lead post. Both posts are being reviewed to ensure that succession arrangements meet the needs of the business.
- 3.20 The Chief Finance Officer post continues to be covered on an interim basis. The Chief Officer is working with the Council Head of Finance to put in place arrangements which support a longer term interim arrangement. The arrangement will be reviewed in Quarter 1 of 2023/34.

### **Budget Control**

- 3.21 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 (SMT) for the Portfolio are meeting regularly to review spend and consider investment prior to seeking MIJB approval. There is a continuous need to track progress on transformational redesign to ensure it is meeting the aims of the Strategic Plan. Whilst we have presented a balanced budget and report an ongoing balanced position for 2022/23 to the MIJB, savings will continue to be required to ensure sustainability in the years beyond.
- 3.22 Ongoing work will be required, led by the Chief Officer, with the Senior Management Team and wider System Leadership Group, to develop options that will align the budget to available resources particularly in preparation for entry to 2023/24.

### **Payment Verification**

- 3.23 National Services Scotland (NSS) process the payments and have not been in the position to undertake the payment verification meetings since the start of Covid-19 pandemic. Their focus has been to maintain protective payments each month and because these are based on same amounts each month, there are no new claims coming through. The payment verification meetings are now recommencing and will start in ophthalmology during quarter 2, dentistry projected for quarter 3 with medicine to be confirmed. Therefore it will be June 2023 before first audit reports are received and a subsequent update report to the Audit Performance and Risk Committee.

## **4. KEY MATTERS RELEVANT TO RECOMMENDATION**

- 4.1 The opportunity remains to accelerate work of the MIJB ambitions as set out in the Strategic Plan. Home First is the programme designed to do that, with the opportunities of an expanded portfolio of health and care that also encompasses Dr Gray's Hospital and Children's Social Work and Justice Services.
- 4.2 The challenges of finance persists and there remains the need to address the underlying deficit in core services. Funding partners are unlikely to have the ability to cover overspends going forwards. Winter/Covid-19 funding will only cover additional expenditure in the short-term and it is important to understand the emerging landscape.
- 4.3 Transformational change, or redesign, that provides safe, high quality 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 "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 interim Chief Finance Officer continues to report regularly. Scottish Government Covid-19 related supplier relief ends in June this year, and we will monitor

impacts on our independent suppliers as part of the risk management process.

**(d) Risk Implications and Mitigation**

The risk of not redesigning services will mean that Health and Social Care Moray and the Moray Portfolio 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. Our staff are facing continued pressures on a daily basis, and we must continue to put effort into ensuring staff well-being.

**(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.

We 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) Climate Change and Biodiversity Impacts**

Care closer to and at home, delivered by teams working on a locality basis, will reduce our reliance on centralised fixed assets and their associated use of utilities.

**(i) Directions**

There are no directions arising from this report.

**(j) Consultations**

The Moray Portfolio Senior Management Team has 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, Moray Portfolio