

REPORT TO: MORAY INTEGRATION JOINT BOARD ON 29 SEPTEMBER 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 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 a recent submission to Scottish Government has been made to explore how digital solutions can be incorporated into the model.





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 Grays 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 Grays as soon as beds are available.
- 3.4 Waiting times for elective procedures at Dr Gray's Hospital continue to increase during the post pandemic period. During the months of June and July a total of 157 patients received their elective surgical procedure. During this time we were able to protect elective beds to allow major joint surgery to take place. Unfortunately, a combination of continued high volumes of unscheduled care activity demand, plus an incident in our theatre suite on the 10 August 2022, where a drainage pipe was dislodged flooding the theatre department disabling 2 of the 4 theatres, all elective surgery has been cancelled for the time being. Emergency surgery capability remains in place. We are awaiting the results of air samples which, if clear, will allow us to resume our elective care programme. The results will be reported week of 19 September 2022 and will be considered by the 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 140 and 150) and inability to meet demand, with 142 people currently awaiting care amounting to 1.219 hours of unmet need (as at 12 September 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 97% (37 out of 38) current delayed discharges being delayed as a result. The sustained pressure on care staff is beginning to impact on quality that some providers can deliver, with additional concerns about sustainability. One Large Scale Investigation is underway at a care home and commissioning are contacting all providers to discuss their situation.

Covid Vaccination Programme

Schools

3.6 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 (1406 individuals)

3.7 These are going extremely well, with very, very few numbers not being able to be vaccinated due to the time frame of 12 weeks, since last vaccination, not being reached yet. We will provide a follow up service for those not yet eligible. We have had minimal non consents - less than in previous years. We have also achieved in providing some 1st doses for people who have recently moved into a care home. Staff have also been offered their vaccines during our visits.

The care home cohort should be completed by Saturday 17 September 2022, with only the follow ups to cater for at a later date, when eligible.

Housebound residents (900 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. We have also came across many people who are needing more support, so have been getting involved with GPs and Quarriers.

This cohort is projected to be completed by the end of October 2022.

Health and care workforce (5722 individuals)

3.9 There is extensive communications to encourage people to come forward for vaccination. There has been a slow start. Two Community Treatment And Care (CTAC) nurses have been delivering peer-to-peer vaccines within the GP Practices across Moray. These have had a good response with over 100 people vaccinated so far. These will be completed by Friday 16 September 2022. Anyone missed can get their vaccine at Fiona Elcock Vaccination Centre (FEVC) through the appointment system. The health and care workforce cohort should have been completed by 24 September 2022, but it looks like this will now overrun into other cohorts.

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.

Other Groups

3.11 Over 65s (16673 individuals) commence on 3 October 2022.

At risk (12902 individuals) and household contacts commence 24 October 2022.

Over 50s (14720 individuals) will be commencing on 28 November 2022, and sooner dependant on staff availability.

Ukrainian Refugee Scheme

3.12 Moray have offered a Warm Scots Welcome to 91 Ukrainian
Displaced Persons (UDPs). 11 UDPs have been accommodated in a
Welcome Hub in Elgin with 80 UDPs hosted in Moray. The Refugee
Resettlement Team (RRT) have taken a proactive role to facilitate local
matching, allowing the UDPs to leave the Elgin Welcome Hub to be supported

- by local hosts who are willing to aid the humanitarian crisis. Further health requirements have been discussed in a later report.
- 3.13 Through the UK sponsorship scheme, Ukrainians can apply for a three-year visa and if they choose Scotland to live, they must either have a private sponsor or select the Scotlish Government as their 'super sponsor'. Scotland's 'super sponsor' scheme removes the need to seek out private sponsors on social media in advance of being able to obtain a visa and travel.
- 3.14 Moray has welcomed 43 Ukrainian persons, 26 adults and 17 children, through the private sponsor scheme, although others have arrived through different schemes. The Ukrainian families are supported by hosts families scattered throughout Moray. All host families regardless of the scheme must clear mandatory checks, including Disclosure Scotland and property checks, in order to receive their £350 monthly thank you payment.
- 3.15 As more Ukrainians seek sanctuary in Scotland, a dedicated refugee and resettlement team has been recruited, including a project officer and 1.5 WTE support staff. Alongside the resettlement team, a multi-agency team has been assembled to support the hosts and arrivals to navigate the benefits, education and health systems to name but a few, in order to help integration into Moray.
- 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 are taking place in September and October, a principal element of the Scottish Approach to Service Design Framework, otherwise known as the Double Diamond approach. This engagement will be extended during September to November to include patient and service users, partner organisations and the wider public. As engagement progresses, feedback will be 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).

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 The impending retirement of our Chief Social Work Officer in October this year has meant that we have needed to recruit a Head of Service who also meets the requirements to be eligible to be Chief Social Work Officer. The decision on assigning the Chief Social Work Officer role is a function of the Council. A refined job description to incorporate the delegation of Children's Services was developed; the post advertised nationally; and a selection process undertaken. The Council Appointments Committee met on Friday 9 September 2022 and considered a report on the outcome of the selection process, and ratified the recommendation of the recruitment panel which was to appoint to the role. The HR process will now need to be completed which will allow there to be continuity with no gap between the current post holder leaving and the new incumbent taking up post.
- 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 and the NHS Grampian Director of Finance to secure a longer term solution.

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 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 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 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 wellbeing.

(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.

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