

# **AUDIT AND PERFORMANCE COMMITTEE OF THE PERTH AND KINROSS INTEGRATION JOINT BOARD**

Minute of Special Meeting of the Audit and Performance Committee of the Perth and Kinross Integration Joint Board (IJB) held via Microsoft Teams on Monday 2 August 2021 at 9.30am.

**Present:** Councillors C Purves (Chair) and J Duff (Perth and Kinross Council), B Benson (substituting for P Kilpatrick) and D McPherson (substituting for R Erskine) (Tayside NHS Board), and B Campbell (Carer Public Partner).

**In Attendance:** Councillor E Drysdale; G Paterson (Chief Officer), J Smith (Head of Finance and Corporate Services), C Jolly, K Ogilvy, A McManus, F Low and P Jerrard (all Perth and Kinross Health and Social Care Partnership); S Hendry, K Molley and A Brown, Corporate and Democratic Services (Perth and Kinross Council).

**Apologies:** P Kilpatrick and R Erskine (both Tayside NHS Board)

Councillor Purves, Chair.

## **1. WELCOME AND APOLOGIES**

Councillor Purves welcomed all those present to the meeting and apologies were submitted and noted as above.

## **2. DECLARATIONS OF INTEREST**

There were no Declarations of Interest made in terms of the Perth and Kinross Integration Joint Board Code of Conduct.

## **3. ANNUAL PERFORMANCE REPORT 2020/21**

There was submitted a report by the Chief Officer (G/20/100) presenting the Annual Performance Report (APR) for the Partnership for the year 2020/21 which sets out the performance against key performance indicators and providing an overview of the steps taken to delivery services in pursuance of the strategic objectives and the national health and wellbeing outcomes while responding to the Covid-19 pandemic.

D McPherson commended the report but queried the measure of the number of carers who feel supported in their role and commented that this seemed quite low and wondered whether we should be doing more. He also referred to the staff pulse survey which showed 50-60% of staff felt satisfied in their role and stated this also seemed low. In response, G Paterson concurred with this sentiment and stated that we should not be content with the Carers figure. He further commented that work had taken place during the pandemic with Carers with the production of a local survey which informed development activity and action planning moving forward but

conceded that more work needed to be done. He also further advised that with regards to staff feeling satisfied in their role, the Partnership had a range of measures identified to improve this and in particular in relation to the emotional toll of the pandemic on our staff. He confirmed that work will continue to enhance this provision in conjunction with our Statutory Partners and whilst the surveys indicate that we are performing relatively well we should not be complacent and there is more that can be done.

Councillor Drysdale stated he was encouraged with the plans in place for increasing facilities for individuals with more complex needs and acknowledged the unavoidable delays caused by the pandemic over the last 18 months and the impact on day centres and daytime support. In response, K Ogilvy advised that the Partnership was hopeful of significant developments being completed by the end of the year but stressed the importance for suitable models of care also being in place. He also stated that building based day care is now available, albeit restricted and dependent on need but this will increase as restrictions are eased.

Councillor Purves commented on the need to include more case studies in the report to give an idea of how our services are being delivered on the ground. In response, C Jolly acknowledged this and stated that undertaking this work has been challenging this year due to the pandemic, but that the Partnership was now seeking to ensure a systematic approach across a small number of services to gain patient and service user feedback with the ethos behind this being to try and understand the extent to which service users are being supported and to get to a point where we can quantify the information harvested. G Paterson also stated that he acknowledged this reasonable challenge from Councillor Purves and that in this report we do not have a system for gathering and reporting the regular positive feedback of people who use our services. He further stressed the need to find a way of gathering this as well as complaints and that he would like to see our APR to begin to move to a position of less reporting as outputs of measures of productivity and activity, and more about outcomes and how we are making a difference to people's lives and confirmed this will be something which will be considered in the next APR.

D McPherson questioned the Primary Care Services section in the report and what lessons have been learnt here from the pandemic and what might we do differently in the future. In response, G Paterson advised that the contribution of Primary Care from the outset of the pandemic has been remarkable, and the Partnership has derived significant benefits from effective working with GP colleagues and through the commitment and compassion of District Nurses providing services in local communities. He further stated that much of what we need to advance in relation to Primary Care is articulated in the GMS contract already and the provision that we need to make to ensure that we can bring forward a range of services away from GP Practices which need not be dealt with by GPs. He also stated that there have been opportunities during the pandemic to accelerate some of this work in relation to Social Prescribers, Mental Health support and MSK services for example and in the second phase of the pandemic we saw the continued commitment of GPs in the face of staff having to self isolate and the effective work done by the Medical Director and GP Practices to mitigate this. He stated there was enormous goodwill, commitment, creative working across boundaries, use of

appropriate digital and a real commitment to a collective endeavour to provide a strong foundation for us moving forward in delivering the GMS contract.

**Resolved:**

- (i) The Annual Performance Report 2020/21 as set out in Appendix 1 of Report G/20/100 be approved subject to the following amendments being made and circulated to Members:
- Addition of indicator showing if Scotland figures are up or down to aid historic comparison.
  - Explanation of NI20 to be added.
  - Words concerning the Strategic Planning Group to be reviewed.
  - Consideration of inclusion of wording on pilot on health inequalities.
  - Section on rising demand regarding Mental Health issues and the Third Sector support to be strengthened.
  - Inclusion of issues concerning Public Dental Services.
- (ii) The progress made towards achieving the aims outlined within the Strategic Commissioning Plan 2020-2025 be noted.

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