



**Perth and Kinross Integration Joint Board; 23 September 2020**

## **CHIEF OFFICER'S UPDATE**

**Gordon Paterson, Chief Officer/Director- Integrated Health & Social Care  
(Report No. G/20/103)**

### **PURPOSE OF REPORT**

This report provides an update to the IJB on the HSCP's continuing response to the Covid-19 pandemic and on the proposed process for reviewing the Integration Scheme.

### **1. RECOMMENDATION**

Perth and Kinross IJB Members are asked to note;

- the HSCP response and remobilisation activity in the context of the ongoing Covid-19 pandemic.
- the proposed process and timescales for developing a successor Integration Scheme.

### **2. BACKGROUND**

- 2.1 Since the emergence of Covid-19, I have provided the IJB with detailed information on the Health and Social Care Partnership's response and on the work that we are undertaking, in partnership, to mitigate the impact of the pandemic on local services, communities and citizens. In my last report, I outlined the move from our 'response' phase to a 'remobilisation' phase, so this report provides a brief update on developments since and on implementation of our Covid-19 Remobilisation Plan.
- 2.2 At the IJB meeting on 23 September, I would also intend to update members on discussions that are taking place with the Scottish Government the previous day in relation to all the Remobilisation Plans that NHS Tayside submitted to government on 31 July.
- 2.3 IJB members are also aware that there is a requirement to undertake a review of the Integration Scheme, being the agreement between the Health Board

and Local Authority on the arrangements for integrating the planning and delivery of certain adult health and social care services, locally. While the Scottish Government has recognised the impact the pandemic has had on these reviews, this report updates members on progress to date, the proposed process and intended timescales.

### 3. COVID-19 REMOBILISATION

- 3.1 The restrictions and interventions that were introduced nationally and implemented locally, from March, saw a reduction in the prevalence and impact of the virus, providing the opportunity to begin to remobilise services. The report I presented to the IJB in July provided an overview on the key actions being incorporated into our Remobilisation Plan. These sought to ensure that we could reintroduce further services, maintain responsiveness in the face of a second surge and embed the protective measures designed to prevent further outbreaks in the services and settings we operate.
- 3.2 The attached table (Appendix One) summarises for IJB Members the key areas that we have focussed on since developing our Remobilisation Plan. The table also illustrates how these areas link to the strategic priorities described in our Strategic Commissioning Plan. I would highlight the following for IJB Members' information;

- **Mental Health and Wellbeing;** In addition to progressing the recruitment of additional Community Mental Health nurses, we have successfully commissioned additional support from six third sector organisations to enhance community mental health service provision across Perth and Kinross.
- **Communities;** With the Perth and Kinross Council volunteer scheme attracting 1000 volunteers during the pandemic, we are working with the local Stronger Communities Teams to mobilise volunteers to support community groups, unpaid carers and people returning from hospital and to assist in the upcoming Flu vaccinations programme.
- **Capacity and Flow;** Through enhancing our multi-disciplinary team we are developing a more robust "Front Door Model" at PRI, to address the challenges of Unscheduled Care. This aligns to our approach for discharge planning, which considers the whole system with dedicated Medical, Nursing, Allied Health Professional and Social Care support. Anticipating winter and Covid-19 pressures we have identified additional bed capacity which can be brought in as a contingency.

For the 3-month period June to August 2020, our new Locality Integrated Care Service (LinCS) worked with 128 people, with 72% of these being supported to remain at home. LinCS improvement work is underway to test additional capacity for Winter in the District Nursing evening service for rapid triage, assessment and support alongside an enhanced overnight service in the out of hours period."

- **Primary Care;** We are continuing to work with GP Practices and Cluster Leads across Perth and Kinross to support them to remobilise, prepare for any resurgence in Covid-19 and safely reinstate services that were suspended.

We are also working jointly on the implementation of the Primary Care Improvement Plan, which is the subject of a separate report at today's IJB.

- **Safer Working;** We have implemented Safer Working and Physical Distancing guidance for services and staff, carrying out full risk assessments of our working environments and with every member of staff to ensure safe working.
- **Digital Solutions;** We have formed a Digital Board and TEC Steering Group, which is supported by a dedicated Programme Manager. This provides a strong infrastructure to design and deliver new ways of working, based on the experience and learning from the pandemic.
- **Third Sector;** We continue to engage with commissioned service providers to support them to remobilise and to respond effectively to local need, given how this has changed during the pandemic. We are looking at how we can safely re-open Day Centres, or creatively design alternative services, to seek to relieve the increasing pressure on unpaid carers.

We have continued to support social care providers via the Social Care Sustainability Payment Scheme and are mindful that as we transition beyond the pandemic that we must continue to ensure the sector remains sustainable.

- **Alcohol Services and Support;** In August, through the Alcohol and Drug Partnership, and with partners we promoted a public information campaign on the dangers of drinking excessively and on sources of support. Our statutory substance use services have recently resumed routine visits, in person.
- **Workforce Resilience and Development;** We are supporting colleagues to gain and retain new skills to support them should we need to re-task staff in the face of a second Covid surge and we have contingency plans in place should this arise. Health and wellbeing support continue to be provided to colleagues and we have given particular attention to those returning to work after having been shielding.

3.3 It is important to also recognise that, more recently, we have seen the planned easement of restrictive measures being curtailed, in response to the further growth in the number of cases of Covid-19. This has also resulted in specific measures being imposed in certain local authority areas and more general restrictions being imposed nationally, to limit the pandemic's grip and spread. The HSCP is closely monitoring developments and recognises that this may soon require us to be attentive to these developments, which will inform our response, and this may require us to again;

- step-up our Command Structure
  - prioritise and maintain critical services
  - initiate our Workforce Matching Unit
  - respond to staffing pressures in our own and commissioned services
  - work with partners in Incident Management Teams to manage outbreaks
- 3.4 We have also seen a significant outbreak of Covid-19 arise locally, followed by a very effective multi-agency response to effectively manage and contain this. IJB Members will wish to be assured that having contributed to this response, the HSCP has now reviewed the features of this outbreak, the necessary actions, the learning to be derived from it and we have developed an 'Outbreak Response Plan'. Based on our learning and experience, this will enable us to respond swiftly, with agility and decisiveness to any future outbreak.

#### **4. REVIEW OF THE INTEGRATION SCHEME**

- 4.1 Under the Public Bodies (Joint Working) (Scotland) Act 2014, all Councils and Health Boards were required to establish an Integration Scheme to take forward integration of health and social care functions in their areas.
- 4.2 The Integration Scheme setting out the arrangements for health and social care integration in Perth and Kinross was approved by the Cabinet Secretary for Health, Wellbeing and Sport on 14 September 2015. An Order to establish the Integration Joint Board was passed on 3 October 2015. Since that date, the Integration Joint Board has exercised strategic responsibility for health and social care services in Perth and Kinross and the integration of those services.
- 4.3 Section 44 of the Act provides that a Council and a Health Board must carry out a review of its Integration Scheme before the expiry of the relevant period. The purpose of the review is to identify whether any changes to the scheme are necessary or desirable. The "relevant period" is defined as the period of five years beginning with the day on which the Scheme was approved by the Scottish Ministers.
- 4.4 In common with other Councils and Health Boards, work to commence a review of the Scheme was delayed as a result of the response to Covid-19. On 17 March 2020, correspondence was received from the Scottish Government in relation to the duty on Councils and Health Boards to review their Schemes. This correspondence advised that, given the work required across local health and social care systems to respond to Covid-19, it was only necessary to carry out a review to determine whether changes to the Scheme are necessary or desirable.
- 4.5 During August 2020, officers carried out an initial, high level review of the Scheme to determine whether changes were necessary or desirable. The outcome of that initial review was that there were a number of aspects of the Scheme where changes were both necessary and desirable to reflect changing practice as integration has evolved. Initial discussions have also

taken place with NHS Tayside and representatives from the Angus Council and Dundee City Council who have confirmed that all three Schemes will need more comprehensive revision.

- 4.6 It is intended that this review will be advanced by several short life working groups and will include formal consultation with relevant stakeholders. Before any revised Integration Scheme is submitted to the Scottish Government for approval, consultation must take place with a range of persons and groups. The views expressed by any of those persons or groups must be taken into account before preparing the final version of a revised Scheme.
- 4.7 An indicative timetable is being developed and it is proposed that a first draft be made available for consultation in March 2021, with a final draft being submitted to the Council and NHS Board for approval by July 2021.

## **5. CONCLUSION**

- 5.1 This report provides an update on key developments the HSCP is advancing in remobilising services, in response to the global pandemic. IJB Members will recognise that this activity is also inextricably linked to the ongoing Primary Care Improvement Plan and the imminent Winter Planning activity, which are both the subject of separate reports at today's meeting.
- 5.2 In addition, this report provides an update to IJB Members on the proposals that statutory partners are considering to advance a formal review of the current Integration Schemes and develop successor schemes to reflect the national and local ambition for the integration of health and social care services.

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**NOTE:** No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information), were relied on to any material extent in preparing this report.