

WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNERSHIP BOARD

At a Meeting of the West Dunbartonshire Health & Social Care Partnership Board held via Video Conference on Wednesday, 5 August 2020 at 2.00 p.m.

Present: Bailie Denis Agnew and Councillor Marie McNair, West Dunbartonshire Council; and Allan MacLeod, Rona Sweeney and Audrey Thompson, NHS Greater Glasgow and Clyde Health Board.

Non-Voting Beth Culshaw, Chief Officer; Jonathan Hinds, Head of Children's Health, Care & Criminal Justice/Chief Social Work Officer; Diana McCrone, NHS Staff Side Co-Chair of Joint Staff Forum; Peter O'Neill, WDC Staff Side Co-Chair of Joint Staff Forum; Selina Ross, Chief Officer – WD CVS; Julie Slavin, Chief Financial Officer; and Val Tierney, Chief Nurse.

Attending: Margaret-Jane Cardno, Head of Strategy and Transformation; Lynne McKnight, Integrated Operations Manager, Care at Home; Jennifer Ogilvie, HSCP Finance Manager; Marie Rooney, Integrated Operations Manager; Audrey Slater, Head of People and Change; Fiona Taylor, Senior Nurse; Nigel Ettles, Principal Solicitor and Nuala Borthwick, Committee Officer.

Also Attending: Marie McFadden, Trainee Auditor, Audit Scotland.

Apologies: Apologies for absence were intimated on behalf of Councillor John Mooney (Voting Member); and John Kerr, Housing Development and Homelessness Manager; Helen Little, MSK Physiotherapy Service Manager; Kim McNab, Service Manager, Carers of West Dunbartonshire; Barbara Barnes and Anne MacDougall, Co-Chair of WD HSCP Public Engagement Network for the Clydebank area (Non-Voting Members).

Mr Allan MacLeod in the Chair

DECLARATIONS OF INTEREST

It was noted that there were no declarations of interest in any of the items of business on the agenda.

MINUTES OF PREVIOUS MEETING

The Minutes of Meeting of the Health & Social Care Partnership Board held on 25 June 2020 were submitted and approved as a correct record.

The Chief Officer was heard in further explanation of the list of outstanding actions (matters arising from previous minutes) and the Partnership Board agreed that they were content with the progress on the various actions including slightly amended timelines, noting the undernoted points:-

- (1) that the first two action points, relating to reports on the agenda, could be closed off;
- (2) that stakeholder representatives, both Selina Ross and Brian Polding-Clyde, had been invited to participate in the Health & Social Care Scotland 'Lessons Learned' sessions being organised across Scotland and that the Chief Officer was happy to share if others wished to join any of the sessions;
- (3) that in relation to the Public Performance Report October to December 2019, there had been communication between the Head of Health and Community Care and the Service Manager of Carers of West Dunbartonshire to promote SCI Gateway to GPs as a referral tool for carers support and that this would be followed up further in due course;
- (4) that due to reporting timelines it was realistic that the final audited Accounts would be presented to the Board at the end of November 2020; and
- (5) that the Unscheduled Care Commissioning Plan was scheduled to come back to the Partnership Board by end November 2020.

VERBAL UPDATE FROM CHIEF OFFICER AND COVID-19 UPDATE PRESENTATION

The Chief Officer provided an overview in relation to the current position and work of the Health & Social Care Partnership Board in response to the COVID-19 pandemic and the position was noted in relation to the undernoted main points:-

- to note the update on the structures and governance meeting arrangements (eg Core Senior Management Team, Local Resilience Management Teams, Strategic Resilience Groups, Joint Staff Forums and 1:1 meetings) in place which had currently been scaled down in both the health board and local authority to reflect the stage of the pandemic but that the mechanisms were in place to step back up again if and when required;

- that significant effort had been put into the range of both formal and informal communication to ensure people were kept informed, that officers were responding to particular enquiries and that services were being pro-active in sharing information (communication was provided across a range of methods, via Elected Members' enquiries, significant number of Elected Members Briefings, Staff Newsletters, HSCP Briefings and via a recent Extended Management Team – 'Ask Me Anything' Session which was now being developed further for future communication with teams as directly as can be whilst people continue to work remotely);
- to note the figures relating to the complement and range of home care visits provided during March 2020 and July 2020 Care which is an area of great focus within the HSCP where the approach was to stratify risk in relation to all service users and where provision was scaled back to concentrate on those with the greatest need to ensure that the required services continued to be provided. This was complemented by the Humanitarian Aid Centre within the Council and by Meals on Wheels and many other services to ensure those with the home care skills that were needed could really focus on the people who had the need for personal care.
- to note that the Home Care Team responded well to the changing guidance in relation to PPE etc and that the Home Care Management Team made real efforts at an early stage to have particularly effective communication with all clients, staff and families and also with Trade Union colleagues which has been highlighted as particularly effective and has been used as a model for some Care Home work later in the pandemic;
- to note that the emotional impact is a key consideration for all during the pandemic particularly in Home Care where vulnerabilities are coupled with media reports which was a real area of concern and it was important that the right support was provided. In addition, the emotional impact of very sadly losing a member of staff from the Home Care Team cannot be underestimated;
- to note that there had been no delayed discharges in relation to home care throughout the pandemic which was a significant achievement and one not matched by many Partnerships across Scotland;
- to note that delayed discharges continued to be a real challenge for the Partnership as activity in the acute sector started to return to normal levels and some rises in delayed discharge were disproportionately high for the size of the population and reflected some of the complexities of people being discharged and their needs, however this figure was now decreasing;
- to note that a range of informal visits has taken place to care homes by the Chief Nurse and Lead Nurse – Adult Services to look at all the processes and practices in place within the care homes in relation to infection control and PPE and to consider good practice and to support our care homes to ensure they had the right advice and information available to them;
- to note there continued to be daily care home huddles with input from the Chief Nurse, the Chief Social Worker, the Clinical Director, Chief Officer, Public Health and the Care Inspectorate to ensure that in terms of the level of care provided the scrutiny is there and can be demonstrated;

- that in relation to Testing, the guidance is changing and has posed challenges in terms of the scale and complexity in delivering testing to both staff and residents of care homes. Laterally most recent guidance has moved to a requirement to ensure staff within care homes are tested on a weekly basis;
- in relation to data and information returns, Testing has been one of the key challenges the Partnership has faced over recent times and the staff testing has been carried out on a daily basis and the results have been monitored very closely; 3302 tests have been carried out in care homes to date;
- in relation to Community Assessment Centres, West Dunbartonshire HSCP has been the only Partnership Board in NHSGGC to establish two assessment centres (one in Clydebank and one in Renton) supported entirely by our own GPs and that 375 patients had been assessed in the two assessment centres to date. The centres were separate from GP and hospital facilities due to the nature of the COVID-19 infection and the requirement for this service to be kept remote to minimise transmission;
- that opening hours had been scaled back and there was an active consideration within the Health Board in relation to how the Assessment Centres would be maintained going forward due to the current reducing demand and for the possible need for these to quickly resume given that this was a very live situation;
- to note that Mental Health Services had supported patients in very pro-active ways with telephone and digital consultations where face-to-face meetings were not possible and that further work with the Health Board was underway to manage digital patient management in West Dunbartonshire;
- to note that in terms of Children and Families Services national guidance was applied in terms of operating procedures and child protection duties were maintained by ensuring our young people had virtual support by maximising digital consultations and the Champions Board have worked with the service to help and steer the services;
- to note that Health Visiting Services were now returning to full service and that immunisation services had now resumed;
- to note that supervised contact had been re-introduced in Children and Families' Services so the Partnership was having to ensure that building-based activities and facilities were appropriate for that;
- in relation to public protection, the Partnership had to ensure very early on that it had robust and comprehensive mechanisms in place to continue face-to-face supervision for high risk offenders;
- to note that the number of children on the Child Protection Register is higher due to the reduced way in which the service is operating and to ensure there is contact and people are being kept safe;
- to note that as people come out of shielding, services may see increases in staff absence and therefore it is an area that is being monitored very closely and that staff are supported in returning to work;
- to note that a major piece of work on a winter flu vaccination programme was currently underway which planned for the programme to be extended to all social care staff and thereafter potentially extended to wider care staff;
- to note that Test and Protect, through contact tracing, could have a significant impact on the workforce and communities therefore the information in relation to that will be monitored closely;

- to note that recovery would be measured and appropriate and that the management team were very thoughtful of increasing demands across services particularly given financial pressures that were likely to be faced.

Following discussion and having heard the Chief Officer, the Chief Social Work Officer, the Head of Strategy and Transformation, the Chief Nurse and the Integrated Operations Manager in answer to questions, the Partnership Board agreed to note the current updated position in relation to COVID-19.

Thereafter, the Chair thanked the Chief Officer for a very comprehensive and reassuring presentation on the ongoing pandemic and a continually changing situation.

DEMENTIA, ALZHEIMER AND AUTISM STRATEGIES

A report was submitted by the Head of Strategy & Transformation providing an update on the progress made in relation to the Dementia and Autism Strategies.

After discussion and having heard the Chief Officer and Integrated Operations Manager in further explanation and in answer to Members' questions, the Board agreed:-

- (1) to note the concerns expressed in relation to progress and development of the two separate strategies and the requirement for reassurance in relation to performance and service delivery of both strategies;
- (2) to note two key appointments of lead officers responsible for the implementation of the Autism Strategy and the re-establishment of the Autism Strategy Steering Group; and
- (3) to retain both strategies on future agendas as separate items and seek regular updates in relation to progress against timescales.

REVIEW OF FINANCIAL REGULATIONS

A report was submitted by the Chief Financial Officer presenting for review amendments to the current Financial Regulations of the West Dunbartonshire Health & Social Care Partnership Board.

After discussion and having heard the Chief Financial Officer in further explanation and in answer to Members' questions, the Board agreed:-

- (1) to approve the revised Financial Regulations; and
- (2) that the Chief Financial Officer would discuss the review period with the external auditor to tie in with the Council and Health Board which was suggested to be every 2-3 years.

FINANCIAL PERFORMANCE AND UPDATE REPORT - PERIOD 3 (30 JUNE 2020)

A report was submitted by the Chief Financial Officer providing an update on the financial performance as at period 3 to 30 June 2020 and a projected outturn position to 31 March 2021.

After discussion and having heard the Chief Financial Officer in further explanation of the report and in answer to Members' questions, the Board agreed:-

- (1) to note the updated position in relation to budget movements on the 2020/21 allocation by WDC and NHSGGC and the direction back to our partners to deliver services to meet the strategic priorities approved by the HSCP Board;
- (2) to note that the revenue position for the period 1 April 2020 to 30 June 2020 was reporting an overspend of (£0.234m) (-0.55%);
- (3) to note that the COVID-19 cost for the period 1 April 2020 to 30 June 2020 was £2.8m and that COVID-19 funding received to date equates to £1.294m;
- (4) to note the projected outturn position of £1.659m underspend (0.97%) for 2020/21 if the projected costs of COVID-19 are fully met by the Scottish Government;
- (5) to note that the projected costs of COVID-19 were currently estimated to be £8.145m;
- (6) to consider the financial risk to the HSCP if COVID-19 costs were not fully funded which could trigger the need to revisit 2020/21 funding priorities and approved savings programmes;
- (7) to note the unaudited reserves position detailed in the report;
- (8) to note the update on the capital position and projected completion timelines; and
- (9) to note that officers would report back to the Partnership Board on a clear Brexit strategy continuum on how it will impact services as and when more clarity emerges.

PARTNERSHIP BOARD MEETING SCHEDULE

A report was submitted by the Head of Strategy & Transformation seeking approval of a meeting schedule for the period June 2020 – August 2022.

After discussion and having heard the Head of Strategy and Transformation in further explanation and in answer to Members' questions, the Board agreed:-

- (1) to approve the meeting schedule outlined at Appendix A of the report;

- (2) to note that once meetings no longer required to be held remotely, they will be initially held in 16 Church Street, Dumbarton to observe current social distancing guidance; and
- (3) that alternating venues between Dumbarton and Clydebank would be reintroduced following updated social distancing guidance.

MINUTES OF MEETINGS FOR NOTING

The undernoted Minutes of Meetings were submitted and noted as follows:-

- (1) Minutes of Meetings of the Joint Staff Forum held on 18 June 2020;
- (2) Minutes of Meeting of the Joint Staff Forum held on 25 June 2020; and
- (3) Minutes of Meetings of the Clinical and Care Governance Forum held on 3 June 2020.

The meeting closed at 4.09 p.m.