

Meeting	Integration Joint Board (IJB)
Date, Time and Place	Thursday 26 September 2019 at 3pm Bressay Room, NHS Shetland (NHSS) Headquarters, Montfield, Burgh Road, Lerwick, Shetland
Present [Members]	<p><u>Voting Members</u> Simon Bokor-Ingram [Substitute for Shona Manson] Natasha Cornick Allison Duncan Jane Haswell Emma Macdonald Robbie McGregor</p> <p><u>Non-voting Members</u> Josephine Robinson, Interim Chief Officer/Interim Director of Community Health and Social Care Jim Guyan, Carers Strategy Group Representative Catherine Hughson, Third Sector Representative Denise Morgan, Interim Chief Social Work Officer Edna Watson, Senior Clinician – Chief Nurse – Community, NHS Karl Williamson, Chief Financial Officer Ian Sandilands, Staff Representative</p>
In attendance [Observers/Advisers]	Sheila Duncan, Management Accountant, SIC Caroline Laing, Trainee Solicitor, SIC Carol Anderson, Senior Communications Officer, SIC Leisel Malcolmson, Committee Officer, SIC <i>[note taker]</i>
Apologies	<p><u>Voting Members</u> None</p> <p><u>Non-voting Members</u> Susanne Gens, Staff Representative, SIC Pauline Wilson, Senior Clinician: Local Acute Sector, NHS</p> <p><u>Observers/Advisers</u> Gary Robinson, Chairman of the NHS Board</p>
Also in attendance	Karlyn Watt, Deloitte LLP Stephen Leask, Councillor on Bressay Community Council & “Caring For Bressay” Project Team
Chairperson	<p>Natasha Cornick, Chair of the Integration Joint Board, presided.</p> <p>The Chair advised that there would be workshops held on Community Led Support in Lerwick, Scalloway and Brae and said that she hoped that those present could attend.</p>

Declarations of Interest	Ms Watson declared an interest in item 3 “Caring for Bressay - Engaging Communities in Developing Sustainable Models for the Future”, as the author of the report.
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34/19	Annual Audit Report 2018/19
Report No. CC-38-19-F	<p>The IJB considered a report by the Chief Financial Officer that presented Deloitte’s Annual Audit Report on the 2018/19 Audit.</p> <p>The Chief Financial Officer introduced Karlyn Watt from Deloitte LLP, and advised that she would introduce her report at Appendix 1.</p> <p>In introducing the audit report Ms Watt covered two main areas in the Appendix, namely, Financial Statements and the four Audit dimensions. She advised that the figures were the same as presented in June and that no issues had been identified, and that the Action Plan presented in June 2019 would be followed up in the 2019/20 Audit Report.</p> <p>At the invitation of the Chair, the Chair of the IJB Audit Committee advised the IJB Audit Committee had discussed the level of challenge in terms of the financial savings targets. Further comment was added on the potential difficulties following Brexit and service driven demand it was difficult to see how reductions could be achieved.</p> <p>The Chair of the Audit Committee added that she believed it was the responsibility of the IJB to get behind the changes needed and that there was a need to make transformational change and to think ahead.</p>
Decision	The IJB NOTED Deloitte’s Annual Audit Report on the 2018/19 Audit.

35/19	Final Audited Accounts 2018/19
Report No. CC-37-19-F	<p>The IJB considered a report by the Chief Financial Officer that presented the Audited Annual Accounts for 2018/19 for approval and signature.</p> <p>The Chief Financial Officer introduced the report and advised that the final accounts had already been considered by the IJB Audit Committee for recommendation to the IJB. He reminded Members of the financial position as set out in the table on page 8 of Appendix 1, and the overspend highlighted in row 6 that required additional one off payments from the SIC and NHS. The Chief Financial Officer referenced the £541k surplus and reiterated the need for redesign. He concluded by stating that the IJB ended the year with a general reserve balance of £905k of which £474k was earmarked for specific purposes. He added that subject to</p>

	<p>approval, the Accounts would be signed and published by the end of October 2019.</p> <p>At the invitation of the Chair, the Chair of the IJB Audit Committee confirmed that Members had been happy to recommend the Accounts to the IJB for approval.</p> <p>During questions, the Interim Chief Officer confirmed that the agency staff costs were as a result of sourcing locums from the mainland and included pay and accommodation. The IJB were also advised that should spare capacity become available in one area, staff would be moved around to cover in another if required, but that in practice there was rarely spare capacity. The Interim Chief Officer assured the IJB that the priority is always to use local resources before external resources.</p> <p>In response to further questions, the Interim Chief Officer confirmed that an update on the Community Care spend to save projects would be provided in either November 2019 or February 2020.</p> <p>The Chief Financial Officer was also asked a question to which he directed the IJB to a breakdown provided on page 48 that showed the specific funding allocations that were unspent at year end and carried forward in an earmarked reserve. These allocations had been paid to NHS Shetland but were passed to the IJB at year end so they could be retained in the IJB reserve. Historically NHS Shetland may have had to return these unspent allocations to the Government.</p> <p>Ms Haswell moved that the IJB approve the recommendations contained in the report, seconded by Mrs Macdonald.</p>
Decision	<p>The IJB RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the audited Annual Accounts for 2018/19 for signature (Appendix 1); • NOTE the Management Representation Letter for signature (Appendix 2).
36/19	Caring for Bressay - Engaging Communities in Developing Sustainable Models for the Future
Report No. CC-41-19-F	<p>The IJB considered a report by the Chief Nurse (Community)/ Project Lead that presented enhancements to the current service model for Bressay and put forward the model as having the potential to be relevant to the redesign of services in other communities across Shetland.</p> <p>The Chief Nurse (Community)/ Project Lead introduced the report and provided a comprehensive overview of the work undertaken jointly by the Bressay Community Council, and the Chief Nurse</p>

(Community), Shetland Health and Social Care Partnership through the interagency Project Team that had been formed. She highlighted the significant engagement with the community through questionnaires, open discussion sessions and further opportunities that were attended by a range of service providers to engage with the public and she informed that the Ketso consultation process had been used. In terms of the consultation responses received, 50% of people fully supported the model and 44% partially supported it. It was seen that a 98% return was significant.

The Chief Nurse also commented on the first response needed to enhance the service and she advised that although not concluded nationally yet, there had been discussion around the Scottish Fire and Rescue Service taking over this role. She advised of a space identified as suitable for a clinic which she said had architect drawings produced and the NHS had identified capital budget for the work required. The Chief Nurse added that there had been a significant piece of work reflecting on lessons learned from the process and said that some practical elements could have been done better. She gave the inequalities data gathering, as an example of a lesson learned, and advised that the data gathered would not be shared. Another point would be to invite service providers to the open sessions.

For a point of clarity, it was noted the heading at Appendix 9 should no longer read "Draft Results" as this was now the final version with all responses up to 21 August included.

At the invitation of the Chair, Mr Stephen Leask, member of the Bressay Community Council was invited to speak of his involvement on the Project Team, in the absence of the Chair of the Bressay Community Council. The IJB heard how this project had been a collaborative effort and Mr Leask explained how useful the Ketso sessions had been and reported that through discussion the people involved had developed a pragmatic list of sustainable service needs.

Mr Leask said that should the project not be progressed such a failure would have reputational damage for the NHS, IJB and the Council. He said that what has been presented is services that stack up for the Bressay Community and can be given to the community. He said that the model is both achievable and possible to provide and not to progress would be a serious failure.

During questions the Chief Nurse was asked if the process had been expected to take as long as it had, having started in 2017, and whether lessons had been learned in terms of how to speed up the process. It was suggested that in supporting transformational change this would be useful to inform other rural communities who may feel that they are more remote than Bressay. The Chief Nurse explained that the process does take time because it is about building relationships with the community and sharing information so that everyone is on board. She gave an example within the Bressay project where professionals learned to use less jargon

which made discussions. This had helped to get to a place of trust where the professionals are not seen as making the decision was very important. The Chief Nurse added that everyone involved felt equal and able to ask questions and get answers. In terms of timescale for future work, she said that the process should move faster with the Bressay model in place. Mr Leask added that this project came from a standing start and although some felt it did not progress quickly it had to be done properly with the right expertise in place. The Chief Nurse advised that there was already a plan to do similar work in Yell there is already a location for a clinic and the questionnaires have been done. She added that although each area has specific requirements the Bressay model has the component parts that can work anywhere in Shetland.

Members spoke in support of taking the time needed to make sure of the right outcome, but acknowledged that in future the process should be undertaken in a shorter timescale.

Throughout the discussion there was much praise and thanks expressed to those involved with special mention to Mr Henderson, Chair of the Bressay Community Council and Mr Christie-Henry of the Project Team. She confirmed that the Bressay Community Council and the Project Team was open and happy for Yell to attend a Project Team Meeting to see how it works and that the Project Team would be happy to assist in any way to help in other areas.

During further discussion, the Chief Nurse said she was unaware of any other Island Group having done anything to this level but they would face the same challenges as in Bressay. She confirmed that the Director of Pharmacy had asked if would consider sharing this model with other areas outwith Shetland but that had not happened to date. She also responded to a query regarding the Bressay Nurses House and advised that any rental or capital disposal would rest with the NHS as the property forms part of their capital assets.

In terms of the building identified for a Bressay Clinic, the Chief Nurse advised that the property belongs to the Local Authority and there had been discussions between SIC and NHS Estates Management. She said that the identified building was their preferred option but a financial agreement is needed. The Chair said that a further update would be required before the project went live. The Chief Nurse confirmed that approval today was for the model and she would bring a further report with the location secured.

Further comment was made on the excellent work of the team. It was noted that other local authority areas, where engagement has not been successful, the Scottish Government has "called in" the decision making process. In such circumstances, external reviews had been carried out with models of care being imposed upon them.

	<p>In discussing inequalities, it was noted that the Bressay model is trying to counteract inequalities in society and is an example of a better approach in that area.</p> <p>The Chief Nurse was asked whether there was enough funding to see the project through. She advised that the only spend would be the creation of the clinic, with all the other activities about doing things differently. The Chief Financial Officer added that £20k had been approved by the NHS Shetland Capital Management Group.</p> <p>In terms of first responders, the point was made that this could be volunteers from outwith the emergency services and it was suggested that this should be made clear in the model document. In responding to a further question, the Chief Nurse confirmed that the Clinic would have a booking system that would allow other services to use the facilities, such as the Citizen's Advice Bureau, but its primary function would be as a clinical facility.</p> <p>In terms of transformational change the Chief Officer was asked if there would be enough staff free to do the work required at pace. The Chief Officer confirmed that her priority was to ensure staff are available as this was the only way to move matters forward.</p> <p>The Chair echoed the positive comments during the discussion and extended her congratulations for the first class piece of work. She said that this was a great way to engage and asked whether the stakeholder engagement policy should be updated. The Chief Officer said that this model would be used as an exemplar and the policy would be updated.</p> <p>The Chair said that the thoroughness of the paper had given a real look at how the project had developed into this excellent support for the community. In responding to the Chair's question the Chief Nurse confirmed that the Community Nursing Directions do cover this process.</p> <p>Mr Duncan moved that the IJB approve the recommendations contained in the report, seconded by Ms Haswell.</p> <p>Upon request, the Chair confirmed that the requirement for a further report mentioned earlier, did not need to form part of the decision but would be recorded as an action point.</p> <p>On behalf of the Bressay Community Council and the Community, Mr Leask thanked the IJB for its decision.</p>
Decision	<p>The IJB:</p> <ul style="list-style-type: none"> • CONSIDERED AND COMMENTED on the work undertaken between the Health and Social Care Partnership and the Bressay Community Council to explore the health and care needs of residents on Bressay in order to create a sustainable, affordable, and clinically appropriate service model which meets the health and care

	<p>needs of islanders both now and for the future.</p> <ul style="list-style-type: none"> • APPROVED the enhancements to the current service model for Bressay and noted that the Chief Nurse (Community), as Project Lead / Service Manager will move the project forward to the Implementation stage, in line with the Community Nursing Directions. • RECOGNISED the key components identified in this model as having the potential to be relevant to the redesign of services in other communities across Shetland. • CONSIDERED AND COMMENTED on the approach to community engagement adopted within this project and supports the roll out of a similar approach to the implementation of co-production methods with communities throughout Shetland, appropriate to the particular community context.
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The meeting concluded at 4.10pm.

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Chair