

MINUTES – PUBLIC

Meeting	Integration Joint Board (IJB)
Date, Time and Place	Thursday, 28 May 2020 at 10am Room 6, 8 North Ness, Lerwick
Present [Members]	<p><u>Voting Members</u> Emma Macdonald</p> <p><u>Non-voting Members</u> Jo Robinson, Interim Chief Officer/ Director of Community Health and Social Care</p>
Present via remote link [Members]	<p><u>Voting Members</u> Natasha Cornick Jane Haswell Stephen Leask R McGregor Shona Manson</p> <p><u>Non-voting Members</u> Susanne Gens, Staff Representative, SIC Jim Guyan, Carers Strategy Group Representative Wendy Hand, Third Sector Representative [Substitute for Catherine Hughson] Denise Morgan, Interim Chief Social Work Officer Edna Watson, Senior Clinician, Senior Nurse Karl Williamson, Chief Financial Officer Pauline Wilson, Senior Clinician: Local Acute Sector, NHS</p>
In attendance via remote link [Observers/Advisers]	<p>Michael Dickson, Chief Executive – NHS Shetland Jamie Manson, Executive Manager – Finance, SIC Jan Riise, Executive Manager – Governance and Law, SIC Anne Cogle, Team Leader, Administration, SIC Charlotte Jones, Solicitor, SIC Sheila Duncan, Management Accountant, SIC Carol Anderson, Senior Communications Officer, SIC Leisel Malcolmson, Committee Officer, SIC <i>[note taker]</i></p>
Apologies	<p><u>Voting Members</u> None</p> <p><u>Non-voting Members</u> Catherine Hughson, Voluntary Action Shetland</p>
Also in attendance	Susan Webb, Director of Public Health – NHS Grampian
Chairperson	<p>Emma Macdonald, Chair of the Integration Joint Board, presided.</p> <p>The Chair ruled that, under Standing Order 5.6, this meeting is being held by remote participation due to the current</p>

	<p>restrictions on public gatherings and its impact therefore on meetings of public bodies.</p> <p>“In relation to those restrictions, and as we have not yet put in place the technical requirements to make our meetings accessible to the public, I move that the IJB agree to suspend standing order 5.8.1 relating to the circumstances under which the IJB can resolve to exclude members of the public. I should add that whilst the public are excluded from this meeting, I have given consent for members of the local media to be present in another room within 8 North Ness to view the proceedings via remote link accompanied by the SIC Senior Communications Officer. This, I believe, maintains a level of public accountability and scrutiny to our proceedings. The formal decisions of the IJB, as is usual practice, will be available to the public after the meeting.” The IJB unanimously agreed.</p> <p>The Chair commented that this was her first meeting as Chair of the IJB and noted that Councillor Duncan, had now stepped down from his role on the IJB. On behalf of the IJB she thanked Mr Duncan for his dedication and commitment during his time on the IJB. The Chair also welcomed Councillor Stephen Leask to his new role as a voting member of the IJB.</p> <p>The Chair also took the opportunity to thank all of the staff across health and care for the hard work and commitment they have shown during the current pandemic. She said that it was clear that Shetland is a real example of how effective partnership working can really make positive differences for the community. Services have been adapted almost overnight and with a clear professional approach, it is vital we continue to support these innovative ways of working. She said that every single person working in health and care across Shetland has had a role to play in the response to this pandemic. The Chair also thanked the community for supporting the work that has been ongoing and for adapting to the changes that have been required. She said that she knew how difficult the last few months have been for many people.</p>
Declarations of Interest	None.
Minutes of Previous Meetings	<p>The minutes of the meeting held on 5 March 2020 was unanimously confirmed with the exception of the following:</p> <p><u>Min. Ref. 03/20 – tenth paragraph, first sentence:</u> change to read “Further questions were asked, and the IJB were informed on the performance of District Nursing, Non-doctor Island Nursing and the plans to form working groups in other areas to</p>

	look at how best to meet the health needs of those local populations.”
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07/20	Council Voting Member Appointments and Complete Membership Update
Report No. GL-08-20-F	<p>The IJB considered a report by the Executive Manager – Governance and Law that provided an update on the Membership of the IJB following a number of recent changes.</p> <p>The Executive Manager – Governance and Law introduced the report.</p> <p>During discussion, the IJB were advised that Ms L Ward was no longer a Member of the NHS Board and therefore no longer a substitute on the IJB. The Executive Manager – Governance and Law said that this matter together with the outstanding vacancies would be brought to a future meeting of the Board.</p> <p>It was also noted that neither Community nor Hospital Pharmacy had a role on the IJB and given the frontline service provided to the public throughout the pandemic it was suggested that representatives be invited to participate at the IJB, not just when they have a report to present. Following advice from the Executive Manager – Governance and Law it was agreed by the IJB that consideration be given to including a Pharmacy Representation as a Non-Voting Member when the IJB’s Scheme of Administration is next presented to Ministers for approval.</p> <p>The IJB unanimously noted the recommendations contained in the report.</p>
Decision	<p>The IJB NOTED that:</p> <ul style="list-style-type: none"> • The term of office for the Council appointed Chair ended on 31 March 2023. • The Council made the following Voting Member appointments from 18 May 2020: <ul style="list-style-type: none"> • Mr Stephen Leask • Mrs Emma Macdonald (Chair/Vice Chair) • Mr Robbie McGregor • Mrs Macdonald assumed the role of Chair from 18 May 2020, until the date of the next Ordinary Election in May 2022, following which the Council will appoint Members to the IJB at its Statutory Meeting following that election. The Chair/Vice-Chair appointed at that meeting will assume the role of Chair until 31 March 2023.

	<ul style="list-style-type: none"> • From 18 May 2020, until the date of the next Ordinary Election, the Council made the following Voting Member substitute appointments: <ul style="list-style-type: none"> • Mr Stephen Flaws • Mrs Andrea Manson • That appointments to the IJB Audit Committee are affected by these changes and will be the subject of a separate report. • Two Non-Voting Member vacancies remain namely: GP Representative and Patient Representative.
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08/20	Appointment of Chief Officer and Depute Chief Officer to the IJB
Report No. GL-13-20-F	<p>The IJB considered a report, by the Executive Manager – Governance and Law, SIC, that informed of recent changes in senior officer appointments in the SIC and NHS, and their impact on the Chief Officer role for the IJB.</p> <p>The Executive Manager – Governance and Law introduced the report. He advised that following the secondment of Mr Bokor-Ingram to another IJB for a 12 month period, the two Chief Executives of the NHS and SIC agreed that Jo Robinson take on the role of Interim Chief Officer until 13 July 2020. Thereafter, for the remaining period, Mr Chittick will take on the role. He said that given the current circumstances and the span of the department to manage, the Chief Executives had agreed that Jo Robinson would deputise as Director of Community Health and Social Care, on the respective management teams when required, and have taken the opportunity to put to the IJB the proposition that Jo Robinson also deputise for the Interim Chief Officer for the remaining period. The Executive Manager – Governance and Law explained that the Depute Chief Officer was not a formal role but would provide the Board with a pre-selected depute should Mr Chittick be unavailable to attend a meeting. He said that there would be no additional cost to the Board as the costs would be borne by the two partners in terms of salary for both Officers.</p> <p>Mr Dickson commented that the appointment of Chief Officer and Depute Chief Officer was for an interim period of time rather than a stop gap measure.</p> <p>There being no further discussion the IJB unanimously approved the recommendations contained in the report.</p>
Decision	The IJB noted the management arrangements and joint nominations by Chief Executives of the Shetland Islands Council and NHS Shetland as set out in Section 4, and:

	<ul style="list-style-type: none"> • APPOINTD Mr Brian Chittick, as Interim Chief Officer of the IJB; and • APPOINTED Ms Josephine Robinson, as Interim Depute Chief Officer of the IJB, supporting the role of the Chief Officer, and formally deputising at meetings of the IJB, in the absence of the Interim Chief Officer.
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09/20	Appointment to IJB Audit Committee
Report No. GL-09-20-F	<p>The IJB considered a report by the Executive Manager – Governance and Law, SIC, that sought the necessary appointments to the IJB Audit Committee in accordance with the Integration Scheme and the approved Scheme of Administration and Delegations.</p> <p>The Executive Manager – Governance and Law introduced the report and advised that the Chair/Vice-Chair role is a three yearly rotating appointment in May and it is now for the NHS to take on the role of Chair. He advised that with the recent Council appointments to the IJB there is a vacancy for the Vice-Chair position and he referred the IJB to the decisions required at Section 1.</p> <p>The Chair nominated Mr McGregor and Mr Leask as Members on the IJB Audit Committee. She said in recognising that Mr McGregor had more experience of the IJB she moved that he be appointed as Vice-Chair. Ms Manson seconded.</p> <p>Mr McGregor indicated acceptance of the role of Vice-Chair to the IJB Audit Committee.</p> <p>Mr Leask indicated acceptance of the role of Member to the IJB Audit Committee.</p>
Decision	<p>The IJB</p> <ul style="list-style-type: none"> • Noted that the rotation of Chair/Vice Chair takes place in May 2020 therefore the role of Chair falls to the NHS voting member previously appointed by the IJB as Chair/Vice-Chair until May 2023. • Appointed Mr McGregor, an appointed voting member as Chair/Vice-Chair of the IJB Audit Committee, to assume the role of Vice-Chair until May 2023; and • Appointed Stephen Leask, a Council appointed voting member, as a member of the IJB Audit Committee.

10/20	2020/21 Budget
<p>Report No. CC-12-20-F</p>	<p>The IJB considered a report by the Chief Financial Officer that provided the IJB Budget for 2020/21, which presented as a balanced position and included the proposed use of Scottish Government Additionality Funding.</p> <p>The Chief Financial Officer introduced the main terms of the report and he commented that this was the first time that the IJB would have a fully funded budget from the start of the year. He said that this would ensure compliance with the new legislation around Directions. The Chief Financial Officer went on to say that neither the NHS nor the SIC were in a sustainable financial position and that there still had to be focus on redesign. He highlighted the savings challenge of 3% each year and made further comment on the risk around the use of locums and that redesign should look to reduce reliance on locums.</p> <p>The Chair said that it was clear that this was the best budget setting process that had been undertaken for the IJB, but as set out in paragraph 2.6 of the report, it was very important for the IJB to drive redesign.</p> <p>During discussions, delight was expressed in the fully funded budget position. Although concern was expressed in terms of the cost associated with the current pandemic, it was also noted that the Scottish Government and the UK Government were committed to fund costs directly associated with COVID-19.</p> <p>The Interim Chief Officer was asked however when the IJB could expect proposals in regard to the implementation of redesign. The Interim Chief Officer advised that a lot of work had been carried out and some change plans had moved ahead and she anticipated that a Community Nursing Direction would be presented in June 2020 with Directions on both Mental Health and Pharmacy following in September 2020. She said that other areas continued to be worked on and these would be presented at the earliest opportunity to the IJB.</p> <p>Concern was expressed that the June 2020 and September 2020 timescales for Directions would not take effect in this year's budget. The Chief Financial Officer agreed that it would take time to implement savings plans and that some of that work had been derailed by COVID-19, but said that the situation was as good as it can be at this stage. The Interim Chief Officer added that there would not be a full year effect on the budgets but she assured the IJB that other areas of savings had moved faster and where there had previously been blockages these had been removed. She said that given the situation with COVID-19 the full year effect could not be expected this year.</p>

	<p>In responding to a comment and request for the Additionality funding to be seen earlier on the business programme for the IJB's consideration, the Chief Financial Officer agreed that it would be easier in future years to bring that business to the IJB sooner now that there is a balanced budget in place. The Chair questioned how far away some items, currently funded from the Additionality budget were from being included within the main budget. The Chief Financial Officer said that with the fully funded budget it would now be possible to consider this during the budget setting process next year, but savings were needed for that to happen.</p> <p>Further questions were asked that the Chief Financial Officer confirmed, that in terms of the 3% recurring savings, the budget had been set on substantive costs that did not include locum costs. He said that redesign needed to ensure a sustainable service that has less reliance on locums. The Chief Financial Officer also clarified that the School Counselling Service, at paragraph 4.6, was outwith the IJB budget. At Appendix 2, the Chief Financial Officer also confirmed that the entry for self-directed support related to Option 1, direct payments.</p> <p>The Executive Manager – Governance and Law took the opportunity to explain the advantages of having a fully funded budget and that the Local Partnership Finance Team had recognised that the IJB would have the opportunity to consider what effect being able to invest would have on services as opposed to just looking for savings. He said that it was commendable to all those involved in moving the IJB forward in this positive fashion. The Executive Manager – Governance and Law also referred to the current situation and the holding of meetings remotely. He said that moving forward seminars would help the IJB in planning going forward.</p> <p>The IJB unanimously approved the recommendations contained in the report.</p>
<p>Decision</p>	<p>The IJB:</p> <ul style="list-style-type: none"> • APPROVED the IJB budget for 2020/21 which is presented as a balanced position and includes the proposed use of Scottish Government Additionality funding as detailed in Appendix 2. • NOTED that this budget is approved subject to NHS Shetland Board approval of the delegated budget at its meeting on 18 August 2020. • NOTED the risk associated with Covid-19 and the impact this may have on 2020/21 budget and costs.

11/20	IJB Directions – Implementation of Statutory Guidance
Report No. GL-12-20-F	<p>The IJB considered a report by the Executive Manager – Governance and Law, SIC, that presented an overview of the Statutory Guidance on Directions and how the requirements within the Statutory Guidance on Directions should be implemented by the IJB.</p> <p>The Executive Manager – Governance and Law introduced the report, and advised that the current template had served its purpose but was no longer compliant with the new statutory guidance. He said that Directions provided a means for the IJB to explain its intention to officers and partners and to determine whether outcomes are met. He explained that the Chief Officer and her teams have started to work in line with the statutory guidance and the first of the new Directions would be presented in June 2020, provided approval is given for the use of the new template. The Executive Manager – Governance and Law advised that the checklist also provided, was not only to be used by the authors of Directions to ensure that all areas are covered but also for Members to use to ensure that the Directions align with their expectations. The Executive Manager – Governance and Law added that the report template would also be changed to include a section on Directions to be used as a prompt if a new Direction is required or to inform Members of whether a change has been made to an existing Direction.</p> <p>During discussion the question was raised as to how the officers would be instructed to move to a Direction as that would need to be done before a seminar is arranged to develop it into a formal Direction for presentation. The Interim Chief Officer advised that there would be reports brought in June and September and consideration would be given to whether these would be presented as an option or whether formal direction come thereafter. It was suggested that the Scheme of Administration Review would be an opportunity to look at such issues and governance, if time allowed. The Interim Chief Officer acknowledged that she had not fully answered the question but the main aim of the new template was to also allow the IJB to monitor performance, and she said that more discussion was needed on the technicalities. There was also a request for the storing and logging of decisions to be made easy for Members to access and look at, at any time.</p> <p>In responding to a concern on the time that the process of Directions could take, the Interim Chief Officer agreed that work was needed on speeding up the process.</p> <p>The Chief Executive, NHS said that there is always a temptation to get involved in the detail however he said that there was much talent in the room who know the community and benefit can be achieved in that regard. He said that in terms of outcomes, it was for the IJB to make a Direction but</p>

	<p>how that is done is for the organisations to provide assurance that the Direction set are being achieved. The Chief Executive, NHS said that it was important to set challenging outcomes to meet the needs of the community. The Executive Manager – Governance and Law advised that work would be done on the means by which Officers engage with Members by devising Directions relative to the Strategic outcomes. He agreed with the Chief Executive, NHS that the IJB should always resist the temptation to interfere in the operational work but be assured that Officers are moving forward to achieve the objectives set.</p> <p>The Chair commented on the good work of officers, and that the good discussion today would help shape the process going forward.</p> <p>The IJB unanimously approved the recommendations contained in the report.</p>
Decision	<p>The IJB</p> <ul style="list-style-type: none"> • NOTED and CONSIDERED the Scottish Government's Statutory Guidance on "<i>Directions from Integration Authorities to Health Boards and Local Authorities</i>" (the "Statutory Guidance on Directions"). • APPROVED the areas of best practice set out in paragraphs 4.5 and 4.6 of the report which the IJB and its delivery partners should adopt to comply with the Statutory Guidance on Directions. • APPROVED the revised Directions Template and the Checklist for Drafting Directions.

12/20	Oversight of COVID 19 activity in Care Homes in Shetland
Report No. CC-14-20-F	<p>The IJB considered a report by the Director of Public Health that presented an oversight of the approach taken to ensure the safety and wellbeing of care home residents and staff.</p> <p>The Director of Public Health introduced the report and provided a summary of the steps taken to enhance the system put in place. She said that a lot of good work had been done in care homes in Shetland and the measures in place had been reviewed against Scottish and English health guidance. She advised that the guidance and policy changed regularly and they had been reviewed recently by the Executive Manager – Community Care Resources who had found no issues.</p> <p>The Director of Public health also commented on the supply of PPE to care homes and the training regime in place for staff, as well as the use of testing for infection control. She said that there was a Plan in place to move forward with new guidance on testing, and once a few elements were resolved the Plan</p>

would go live.

The Director of Public Health reported that since the outbreak in a care home early on, staff continued to manage and there were no new issues of concern. She said that an outbreak can take time for residents to clear the virus but there were now enhanced monitoring in homes. She said that the RAG (Red, Amber, Green) statistics report is submitted to the Scottish Government weekly and there were 8 Green, and 1 Amber status on Shetland Care homes following the outbreak previously referred to.

The Chief Social Work Officer advised that the decision had been made to bring the Chief Social Work Officer into the regular meetings being held to ensure the Social Work aspect was being covered. A lot of work had already been done through integrated systems in place. She said that the Chief Social Work Officer updates the GP and District Nurse and this had been working well during the pandemic. She said that extra measures were put in possible whilst keeping things as normal as possible for clients but staff had worked very hard. She said that she was assured that the partners were doing all that they can.

The Senior Clinician, Senior Nurse advised that staff were working towards ensuring that everything is in place to ensure standards of clinical care are maintained going forward. . She said that there was an opportunity to review how much staff do work together on the front line. She said that District nurses support the changes made with the District Nurse being based with the care staff as well as providing support to staff. She said that it is fortunate that all District Nurses have advanced clinical and prescribing which allows them to change the management of patients on a timely basis which is highly important. She said that going forward it was hoped that more enhanced input would be provided by District Nurses in surgeries providing good standards of close working with people. This was a unique position that had come from the people at the front line during a very stressful time.

The Chief Social Work Officer added that the Human Resources services in both the NHS and the SIC had been working hard to ensure redeployment, training and advertising of relief staff. She said that staff had been mobilised to ensure good staffing levels were in place. In addition the Human Resources services had provided extra Counsellors for staff who need additional support and to ensure that the Health and Social Care staff in the fore front are well looked after.

The Interim Chief Officer advised that in terms of wider support the Pharmacy services had provided significant support, while the integrated systems in place provided solutions to issues such as PPE provision, which resulted in a positive situation. She said that she was aware that some Chief Officers across

Scotland continued to have issues with PPE, weeks after they were resolved here.

The Chair commented that this was a difficult time for care staff who were protecting the most vulnerable population. She said this highlighted the excellent partnership work in place in Shetland.

In responding to a question in regard to the timeline of events, the Director of Public Health was asked whether the response had been reactive rather than proactive. The Director of Public Health said that what had been done was in line with the guidance albeit that changed regularly, however the actions taken to start infection visits locally were undertaken before guidance was in place. She said that clearly there were actions taken and things that are now done differently but it was important to learn and put the right measures in place. She said that initially the weekly meetings were between Health and Social Care and the Care Inspectorate but a gap was clear by the third meeting when the Chief Social Work Officer and District Nursing became involved. She added that the reason for presenting a positive picture today was because it was positive.

In responding to a questions about the support provided to staff, the Chief Social Work Officer confirmed that in addition to self-referrals, systems are in place to ensure that Line Managers identify and refer staff for support, with their permission. She said that Management would ensure that this remains a robust process.

The Senior Clinician: Local Acute Sector, NHS, provided an overview from the secondary care perspective. She said that the Gilbert Bain had faced the difficulty of transferring to intensive care, which had been a concern. However through collaboration and work behind the scenes this was very proactively managed. She said that people came together in challenging circumstances and with ever changing guidance. She commented that it had been good for clinicians to look at delivering services in a collaborative way. She advised that there was a lot to learn from the Community partnership and said that although there was a lot of focus on the NHS it was clear that community care had also managed critically unwell patients.

The Senior Clinician: Local Acute Sector, NHS added that this provided a good footing for redesign and the pace of change and direction of change was very positive. She extended her thanks to the community teams and the flexible working of the Senior Clinician, Senior Nurse who had enabled the District Nurses to support care homes and commented that it was clear that Shetland services do work well together. The Senior Clinician: Local Acute Sector, NHS went on to say that the challenge was not going away but that everyone was working

	<p>with the challenge to better the services provided.</p> <p>In response to the information shared, tribute was paid to the hard work and care provided by all staff and services involved.</p> <p>During further questions the Director of Public Health advised that the wording “subject to consent” within the Action Plan regarding Scottish Policy on Testing, meant that everyone has to be able to give permission. She said that the test is not pleasant and that some patients with dementia cannot give consent. She said that there is no one who would be forcibly tested, but where there is concern around symptoms they would be isolated.</p> <p>The IJB unanimously noted the report.</p>
Decision	The IJB considered the enhanced system of assurance around the safety and wellbeing of care home residents and staff and endorsed the approach taken.

13/20	COVID-19 – Governance Update Report
Report No. GL-14-20-F	<p>The IJB considered a report by the Executive Manager – Governance and Law, SIC, that provided information in regard to the decision making arrangements undertaken by various parties to the Shetland Islands Health and Social Care Partnership during the period of the response to the COVID-19 outbreak.</p> <p>The Executive Manager – Governance and Law introduced the report. He advised it provided information on the conduct of meetings and the legislative change to convene meetings with the ruling to exclude the public but permit oversight of meeting by the media, providing for openness and transparency. The Executive Manager – Governance and Law advised on the role of the internal and external auditors in terms of risk management and ensuring that the Chief Officer continues to make important decisions. He said that future reports would allow the IJB to scrutinise but assured the IJB that weekly meetings are held and that staff wellbeing is taken into account. He emphasised that staff wellbeing was the direct responsibility of the employers who have a duty of care for their staff. The Executive Manager advised that delegated authority was sought to call meetings as and when required.</p> <p>In responding to a concern in regard to audit committees and how it would carry out its role the longer the pandemic continues, the Executive Manager – Governance and Law advised that the IJB Auditors in Glasgow continue to monitor and ensure that, where necessary, policy had to be relaxed to ensure quick action. He said that control continued to be done in the name of the IJB and the Auditors would seek to give the IJB relevant assurance through reporting to the Audit</p>

	<p>Committee.</p> <p>The Executive Manager – Governance and Law gave assurance that controls were in place and this report ensured that the Chief Officer had the ability to ensure agile decision making.</p> <p>The IJB unanimously approved the recommendations contained in the report.</p>
Decision	<p>The IJB:</p> <ul style="list-style-type: none"> • Noted the cancellation of all meetings of the Integration Joint Board and its audit committee from 23rd March 2020 (the date when the coronavirus lockdown and requirements were brought into effect) until the date of this meeting. • Delegated authority to the Chief Officer, in consultation with the Executive Manager – Governance and Law (SIC), the Chief Executives of the partner organisations of the Shetland Islands Council and NHS Shetland, and the chair and vice chair of the Integration Joint Board, to approve the cancellation of any scheduled meetings or to call any special meetings as required during the period of response to the COVID-19 outbreak. • Noted that these temporary arrangements will be kept under review, taking cognisance of national guidance and direction, and may, by reporting to the Integration Joint Board be extended or revoked at the appropriate time.

The meeting concluded at 11.35am.

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Chair