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27 January 2020

SUPPLEMENTARY PACK 2

INTEGRATION JOINT BOARD (IJB) - COUNCIL CHAMBER, KILMORY, LOCHGILPHEAD on WEDNESDAY, 29 JANUARY 2020 at 1:00 PM

I enclose herewith **item 4c (MINUTES OF COMMITTEES - Finance and Policy Committee held on 6 December 2019)** and Appendix 2 to **item 9d (FINANCE - Budget Consultation 2020/21)** which were marked to follow on the Agenda for the above meeting.

I have also enclosed an amended Equality and Social Economic Impact Assessment in relation to **item 10 (DEMENTIA SERVICES REDESIGN)** which should replace the one previously issued to you within Supplementary Pack 1.

ITEMS TO FOLLOW / AMENDED ITEM

4. MINUTES OF COMMITTEES

(c) Finance and Policy Committee held on 12 December 2019 (Pages 3 - 6)

9. FINANCE

(d) Budget Consultation 2020/21 (Pages 7 - 10)

Appendix 2

10. DEMENTIA SERVICES REDESIGN (Pages 11 - 16)

Equality and Social Economic Impact Assessment

Integration Joint Board (IJB)

Contact: Hazel MacInnes Tel: 01546 604269

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Argyll & Bute HSCP Finance & Policy Committee

Thursday, 12th December 2019 at 2.30pm
in Committee Room 1 Kilmory, Lochgilphead

Present

Councillor Kieron Green (Chair)
Sarah Compton Bishop (VC)
Prof Boyd Robertson
Joanna MacDonald
Caroline Cherry
George Morrison (VC)
Judy Orr
Liz Higgins (VC)
Kevin McIntosh

IJB Chair
Vice Chair, IJB
IJB Member
Chief Officer
Head of Adult Services
Deputy Chief Officer
Head of Finance and Transformation
Professional Advisory Group Rep
Staff Side Representative

In attendance

Alex Taylor
Charlotte Craig (VC)
Linda Currie
David Forshaw
Dr Angus MacTaggart
Irene Luke

Head of Children & Families
Business Improvement Manager
AHP Lead
Principal Accountant Social Work
Professional Leads Representative
PA (minutes)

Apologies

Councillor Sandy Taylor
Councillor Gary Mulvaney
Stephen Whiston
Morven Moir
Fiona Broderick

IJB Member
IJB Member
Head of Planning & Performance
Acting Head of Finance
Staff Side Representative

		Action by
1.	Welcome and Apologies The Chair welcomed everyone to the meeting with introductions made around the room and VC sites. Apologies were noted as above.	
2.	Draft Minutes of 21 November 2019 The minute of meeting held on 21 November 2019 was reviewed and, subject to the below amendments/additions, was agreed as an accurate record. Item 4 <ul style="list-style-type: none"> Service Improvement Officer 0.5wte has been appointed and will provide focus on Older People savings for Social Work. A further 1 WTE SIO post is being interviewed for in early December and will focus on Learning Disability savings. 	

	<p>Item 8(b)</p> <ul style="list-style-type: none"> The Finance & Policy Committee agreed to Judy's suggestion that Financial Risk Reports which are presented to IJB every 2 months should be included in Finance & Policy Committee papers. 	
3.	<p>Action Log</p> <p>Updated Action Log was circulated and progress noted.</p>	
4.	<p>Budget Monitoring</p> <p>The updated Budget Monitoring as at 30 November 2019 report and appendices were circulated on 11 November and provided a summary of the financial position for as at 30 November 2019.</p> <p>The forecast outturn position for 2019-20 is a forecast overspend of £1.676m (split £1.376m Social Work and £0.300m Health) which has improved by £106k from that forecasted at end of October.</p> <p>Work continues to allow formal declaration of savings with added PMO resource now in place to support this work.</p> <p>The committee noted the forecast outturn position as at 30 November 2019 and that there is a year to date overspend of £0.674m as at the same date with overspend on Social Work of £0.883m offset by underspend on Health of £0.209m.</p> <p>It was noted that the variance explanation information for Health at the end of November had not been updated from the explanations provided at end of October. The information on the delivery of savings is currently being worked on and will be presented to the next meeting.</p>	
5.	<p>Budget Setting 2020-21</p> <p>Budget setting 2020/21 report prepared was circulated to the Committee which informed the budget gap for 2020/21 on a mid-range scenario is estimated at £8.837m.</p> <p>The report outlined proposals aimed at meeting c £4.8m of the budget gap and identified other areas to help bridge the remaining gap.</p> <p>The Committee considered the report and noted the Staff side request that reporting to Finance & Policy Committee in January should acknowledge that savings may change / become non deliverable.</p> <p>JO confirmed this would be reflected in updated report to the next meeting of the Finance & Policy Committee and to the IJB Development Session.</p> <p>The committee noted the report and approved officers continuing to plan on the basis of the mid-range scenario given the uncertainties around funding announcements for next financial year.</p>	JO

6.	<p>NHS Greater Glasgow & Clyde Update</p> <p>Head of Finance confirmed a further letter had been sent to NHSGG & C reiterating our offer. No response received to date.</p> <p>In response to meeting requests NHSGG & C have advised officers are not currently in a position to provide dates to meet in January or February of next year.</p> <p>GM will continue to urgently push for a resolution and hopes to be able to provide further clarity to the next meeting of the Finance & Policy Committee in January.</p> <p>The Committee noted the verbal update and agreed if no response is available at the next meeting will consider escalation.</p>	GM
7.	<p>Transformation Report</p> <p>Transformation Programme Board Report, along with work stream highlight reports, was circulated to the Committee. The report provided an update on progress of the identified Transformation work streams contributing to the delivery of the Strategic Plan. Highlight reports detailed the progress, challenges and issues and next steps regarding transformational work and financial savings.</p> <p>The Committee discussed the report and attached highlight reports. Executive leads present provided further comment around review of transformational work and efforts to ensure improved services and better value.</p> <p>The Committee noted the report and agreed an updated report which provided further clarity around savings should be presented to the next meeting of the Finance & Policy Committee.</p>	
8.	<p>Adult Residential Care Charging Policy</p> <p>Adult Residential Care Charging Policy cover report and appendix Social Work Adult Residential Care Charging Policy 2020-21 were circulated to the Committee.</p> <p>The Committee noted the updated Policy and supported progression to Local Authority approval processes.</p>	
9.	<p>AOB:</p>	
(a)	<p>Clinical Professional Representation</p> <p>Dr Angus MacTaggart requested clarification around attendance of clinical professionals.</p> <p>It was noted representation includes HSCP Lead Nurse and Associate Medical Director. Dr MacTaggart welcome in attendance.</p>	
	<p>Date of next Meeting</p> <p>Friday, 24th January 2020 at 9.30am in Committee Room 1, Kilmory, Lochgilphead</p>	

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2020-21 Budget Preparation - Draft Management & Operational Savings for consideration by IJB 29 Jan 2020 following review by Finance & Policy Committee on 24 January 2020

Ref	Service Area	Savings overview	Saving 2020-21 estimate £000s
2021-17	Adult Services	Ongoing grip and control of all non-essential expenditure	340
2021-18		Savings in time & travel through further roll out of Near Me (Attend Anywhere)	50
2021-19		Redesign of hotel services to reflect reduction in inpatient numbers	99
2021-20		Centralised booking of medical records - reduction in admin costs	97
2021-21		Alternative local provision for patients placed with high cost providers - 10% saving on £2.2m budget predominantly	200
2021-22		Patient Travel costs - spending below budgets	100
2021-23		Catering & domestic - spending below budgets	80
2021-24		Oban medical services - underspending areas of admin and non-pay	138
2021-25		Near Me Mental Health project - savings on travel	10
2021-26		Admin pays - removal of budget for 2 half posts saved in Lochgilphead in 2019/20	29
2021-27		Cowal general transport - underspend	15
2021-29		Dunoon Gum clinic - underspend	20
2021-30		alternative - savings on top of £299k for earlier years b/fwd and not yet delivered	50
2021-31		training	250
2021-32		Review housing support services and remove where not required for LD and PD clients	184
2021-33		Reduce travel and increased grip and control of expenditure	8
2021-34		Additional recovery of direct payments above budget	25
2021-35		Carers support - align budget to current levels of expenditure	15
2021-36		Respite Care - align budget to current levels of expenditure	8
2021-37		Day Care - additional client charge income running above budget	25
2021-38		Development & flex budgets not currently utilised	1
2021-39		Progressive Care Mull additional income	10
2021-40		Resource Release - budget not utilised	1

Ref	Service Area	Savings overview	Saving 2020-21 estimate £000s
2021-41		Telecare - additional income above budget	80
2021-42		integrated equipment store - increased consistency in prescribing, restriction in range of catalogue items to aid re-use and improved procurement; remove items supporting priority 3 and 4 needs	100
2021-43		Sensory impairment -See/Hear monies underspent	10
2021-44		Resource Centres/Day Centres - additional income; Travel underspent; underspend on day services	70
2021-45		Community Support Teams underspends on travel and other services	22
		Total for Adult Services	2307
2021-46	Children & Families	Improved rostering of staff for school hostels	50
2021-47		Review of catering arrangements at Dunclutha and East King Street	23
2021-48		Redesign Emergency Social Work service - shift to contracted hours	100
2021-49		Reduce external contracted hours for childrens support workers	8
2021-50		Dunoon hostel - income from nursery meals	200
2021-51		Contact & welfare £10k per locality - underspends	40
2021-52		External room hire budget not required	15
		Total for Children & Families	256
2021-53	Public Health	Reduction of health improvement team budget by one third	6
		Total for Public Health	6
2021-54	Strategic Planning & Performance	Printer rationalisation and centralisation of GP servers	17
2021-55		Technology Enabled Care - improve re-use of equipment through better asset utilisation, cap Telecare equipment cost, reduce travel budget	34
2021-56		Extend Care First to other NHS services and introduce mobile app to improve productivity and reduce unbudgeted overtime, use of Bank/ locums/agency staff, and reconfigure support team	0
2021-57		Fleet management - electric vehicles, improved accuracy of mileage claims using postcodes; fuel savings through use of telematic data	40
		Total for Strategic Planning & Performance	91
2021-58	Income & Other	Additional income from other health boards (being achieved in 19/20)	300
2021-59		Review of continence nursing practice and related use of supplies (Lead Nurse)	20
		Total for Income & Other	320

Ref	Service Area	Savings overview	Saving 2020-21 estimate £000s
2021-60	Chief Officer	Additional vacancy savings - achieving £2.85m in 2019/20	750
2021-61		Investment fund savings - reduction in funds to support colocation and vacant posts	72
2021-62		Central funds not utilised	180
2021-63		Estate Rationalisation (£50k provision in Investment Fund to be used only on a spend to save basis)	50
		Total for Chief Officer	1052
2021-64	Clinical Director	Review of Forensic Medical Examiner Costs - particularly Bute & Cowal and Out of hours costs (full year saving may only be available in 2021/22)	50
2021-65		Review of support payments to GP practices from Hosptal & Community Health Services funding not linked to outcomes	50
2021-66		Community dental practices	25
		Total for Clinical Director	125
	Total for A&B HSCP		4157

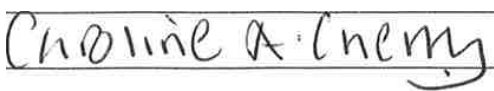
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July 2019



Argyll and Bute HSCP Equality and Socio-Economic Impact Assessment (EQIA)

Section 1: About the proposal

Title of Proposal	
Dementia Services Redesign	
Intended outcome of proposal	
Investment in Community Dementia services to support individuals with dementia to remain at home or in a homely care setting within their local community and to avoid hospital admissions. To use our resources more effectively to support more clients at home and avoiding hospitalisation. As part of the redesign, it is proposed that Knapdale Ward be closed.	
Description of proposal	
To decommission Knapdale Ward and investment in sustainable community dementia services across Argyll & Bute (excluding Helensburgh & Lomond)	
HSCP Strategic Priorities to which the proposal contributes	
This forms part of mental health redesign work but also supports the development of effective services for older adults.	
This work underpins the main strategic aim of the Partnership, to support adults to remain living well at home within their own communities.	
Lead officer details:	
Name of lead officer	Caroline Cherry
Job title	Head of Adult Services
Department	Older Adults and Community Hospitals
Appropriate officer details:	
Name of appropriate officer	Nicola Gillespie
Job title	Local Area Manager
Department	Mental Health Services
Sign off of EQIA (Head of Service):	
Date of sign off:	26.01.2020
Who will deliver the proposal?	

Work on this project will be led by a newly formed Dementia Redesign Group

Section 2: Evidence used in the course of carrying out EQIA

Consultation / engagement

- Dementia Services Review Short Life Working Group – 6/52 meetings to develop options on future of services (October 2018 – October 2019) – membership included staff from community teams and inpatient services, carers, carers centre, Third Sector, NHS Local Area Management, Dementia Champion, Dementia Specialist Improvement Lead, Allied Health Professionals
- Mental Health & Dementia Steering Group
- Transformation Board
- Senior Leadership Team

Data

Scotland's National Dementia Strategy 2017-2020
The Health and Social Care Delivery Plan (2016)
National Clinical Strategy (2016)
The Public Bodies (Joint Working) Scotland Act 2014
Transforming Specialist Dementia Hospital Care Alzheimer Scotland (2018)

Other information

Inpatient data obtained from Argyll & Bute Information department
Case load data obtained from dementia community teams
Shetland Dementia Strategy (2015 – 2018)

Gaps in evidence

Nil of note

Section 3: Impact of proposal

Impact on service users:

	Negative	No impact	Positive	Don't know
Protected characteristics:				
Age			x	
Disability		x		
Ethnicity		x		
Sex		x		
Gender reassignment		x		
Marriage and Civil Partnership		x		
Pregnancy and Maternity		x		
Religion		x		
Sexual Orientation		x		
Fairer Scotland Duty:				
Mainland rural population			x	
Island populations			x	
Low income			x	
Low wealth		x		
Material deprivation		x		

	Negative	No impact	Positive	Don't know
Area deprivation		x		
Socio-economic background		x		
Communities of place?		x		
Communities of interest?		x		

Impact on service deliverers (including employees, volunteers etc):

	Negative	No impact	Positive	Don't know
Protected characteristics:				
Age		x		
Disability		x		
Ethnicity		x		
Sex		x		
Gender reassignment		x		
Marriage and Civil Partnership		x		
Pregnancy and Maternity		x		
Religion		x		
Sexual Orientation		x		
Fairer Scotland Duty:				
Mainland rural population			x	
Island populations			x	
Low income		x		
Low wealth		x		
Material deprivation		x		
Area deprivation	x			
Socio-economic background		x		
Communities of place?		x		
Communities of interest?		x		

If any 'don't knows' have been identified, at what point will impacts on these groups become identifiable?

N/A

How has 'due regard' been given to any negative impacts that have been identified?

There will be staff within Knapdale who live in the area who will be affected by the de-commissioning of Knapdale,

Section 4: Interdependencies

Is this proposal likely to have any knock-on effects for any other activities carried out by or on behalf of the HCSP?

Yes

Details of knock-on effects identified

Closure of Knapdale ward will result in the requirement to redeploy a number of staff. There will be opportunities to redeploy some of those staff to newly developed community posts and others will be redeployed as per the NHS Organisational change policy.

There will be implications for patients and families/carers having to utilise out of area placements for those requiring onward care who will not have access to dementia assessment beds locally, however Knapdale serves all of Argyll and Bute with exception to the Helensburgh area. The beds are not long stay beds and are for assessment, the majority of patients accessing inpatients are admitted already with a diagnosis of dementia so this pathway will not change.

The assessment beds provided are in Mid Argyll only and there are no assessment beds available currently in other Argyll and Bute localities (C&B, OLI, Kintyre and Island populations). The current established pathway for onward referral for long term care tends to present to out of area/other localities due to low numbers of residential and nursing homes available within these localities.

There are no current equitable service provision for assessment available throughout Argyll and Bute localities, therefore providing more flexible and robust community services should assist in reducing the requirement for an assessment admission away from home localities. The path for long term care has not changed through this proposal due to current provision of residential and nursing care homes. It is envisaged that the proposal of multi-disciplinary robust community teams will positively impact on the need to transition those in need of assessment to inpatient wards and will assist in in-reach to community hospitals and care homes that require additional support and training to accommodate stress and distress exhibited by those living with dementia. A longer term and related part of this work will be to review the suitability of our care homes within Argyll and Bute to support adults with dementia.

Section 5: Monitoring and review

How will you monitor and evaluate the equality impacts of your proposal?

A detailed project plan will be developed which includes monitoring and evaluation of this project.

Section 6: Publication

How will you publish this EQIA?
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This EQIA will be published on the NHS Highlands website and other social HSCP social media platforms

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