

Health & Social Care Partnership

**East Ayrshire Health & Social Care Partnership
 Integration Joint Board
 21 June 2023 at 2pm
 William Murdoch Room, Council HQ/ MS Teams**

Present:

- *Dr Sukhomoy Das, NHS Non-Executive Director (Chair)
- Mr Craig McArthur, Chief Officer
- *Councillor Elaine Cowan, East Ayrshire Council
- *Councillor Douglas Reid, East Ayrshire Council
- *Mr Neil McAleese, NHS Non-Executive Director
- Mr Alex McPhee, Interim Chief Financial Officer
- *Councillor Neil Watts, East Ayrshire Council
- *Councillor Kevin McGregor, East Ayrshire Council
- Mr Neil Kerr, ADP Independent Chair
- Ms Marion MacAulay, Chief Social Work Officer
- Dr Alexia Pellowe, Clinical Director
- Ms Allina Das, RCN Representative
- *Councillor Maureen McKay, East Ayrshire Council

*indicates a voting member

In Attendance:

- Ms Amanda McInnes, Senior Manager Business Support
- Ms Jo Gibson, Head of Wellbeing & Recovery
- Ms Arlene Bunton, Scottish Care
- Mr Erik Sutherland, Head of Locality Health & Care
- Mr Craig Ross, Senior Manager Locality Services
- Mr Martin Egan, Senior Manager Justice Services
- Mr Jim Murdoch, Senior Manager Planning, Performance & Wellbeing
- Ms Kathleen Winter, Public Health
- Mr Ryan Duffy, Carers Centre
- Ms Lianne McNally, Senior Manager AHP
- Aileen Anderson, Committee Secretary (Minutes)

Agenda	Discussion	Action
1.	<p><u>Welcome & Apologies</u></p> <p>Dr Sukhomoy Das welcomed everyone to the meeting and noted apologies from Dalene Steele, Catherine Adair, Sheila Cowan, Jennifer Wilson, Isabella Paton and Irene Allen.</p> <p>Dr Das also welcomed Neil McAleese who was appointed to the IJB by NHS Ayrshire & Arran on 1 May 2023 and is attending his first IJB meeting.</p>	

2.	<p><u>Good News Story – Young Carers</u></p> <p>Mr Ryan Duffy delivered a presentation on Young Carers highlighting the work of the Carers Centre to support young people and give them opportunities to be children while in their caring role.</p> <p>The Board welcomed the presentation and Mr Neil Kerr advised that the Alcohol and Drug Partnership Committee would also welcome the presentation to identify areas where they can provide support for young carers affected by substance and alcohol problems.</p> <p>The Carers Centre work to build strong relationships with the young people and their families to allow an understanding of the whole family needs and support with benefit maximisation as well as signposting to other services which could or should be supporting the family.</p> <p>From the Carers Statements there was a range of requests for additional support, this ranges from advocating for the young people with their school to allow additional support and providing financial grant assistance to young people and families to allow the young carers to join a group or hobby. The ‘Time to Live’ fund is utilised to fund hobbies and small breaks for young people, this has also included purchasing a Nintendo Switch for some young people to give them some respite within the home.</p>	
3.	<p><u>Declaration of Interest</u></p> <p>There were no declarations of interest.</p>	
4.	<p><u>Minutes of the Previous Meeting held on 29 March 2023</u></p> <p>The minutes of the previous meeting were agreed as an accurate record of discussions.</p>	
5.	<p><u>Matters Arising</u></p> <p>No pending matters arising or outstanding actions.</p>	
6.	<p><u>Health Needs Assessment Report for HMP Kilmarnock</u></p> <p>Mr Martin Egan presented the report to share the key findings and recommendations of the Health Needs Assessment completed for HMP Kilmarnock.</p> <p>The report set out the basis for completion of a Health Needs Assessment for HMP Kilmarnock and highlighted the principal health care needs identified. The report outlined the recommendations that related to changes in the skill mix and staffing arrangements to enhance and improve the delivery of health care and health outcomes. The report also sets out implications of the Scottish Prison Service (SPS) taking management of the prison and the need to develop the physical facilities.</p>	

A drive to complete the Health Needs Assessment (HNA) was Her Majesty's Inspection of Prison Services (HMIPS) inspection of HMP Kilmarnock and subsequent report published in May 2022. Whilst this was a whole prison inspection, the report made a number of recommendations in relation to the provision of healthcare at the prison. Prior to its publication Health Improvement Scotland (HIS), who jointly inspect with HMIPS, escalated some immediate concerns which mainly focus on the physical facilities and environment in which healthcare is delivered in HMP Kilmarnock, but remain the responsibility of SERCO, the private prison provider.

Those in the care of the prison have significant mental health and wellbeing support needs and are more likely than not to have mental health needs. The closed environment of the prison means that they are not able to access the range of community based support and wellbeing self-care strategies and are reliant on the services provided in the prison. Suicide is a significant risk factor with nine of the deals in the prison over a five-year period 2016-2021 being due to suicide. The prison is also seeing increasing rates of self-harm and increasing numbers of people who are in the care of the prison where Prevention of Suicide in Prison Strategy protocols are in place to reduce the risk.

There are high levels of drug use in those coming into the care of the prison and those needing support with their drug use. In HMP Kilmarnock this is significantly higher than the Scottish prison average. Drug testing that takes place for those entering prison showed that 79% of those entering HMP Kilmarnock tested positive for an illegal substance compared to the Scottish prison average of 71.1%. In the most recently available comparison figures in 2021 38.4% of those in the care of HMP Kilmarnock were receiving opiate replacement therapy compared to 30.8% in Scotland and this has been consistently higher and rising over the reporting period since 2016.

The Health Needs Assessment produced 27 recommendations which were detailed in the report. The recommendations covered a range of areas which included those directly related to service delivery by the prison based healthcare team, along with ones which relate to work with key partners. The aim of the recommendations were to improve the delivery of health care services and the wider health and wellbeing outcomes of those in the care of the prison.

The current facilities are based on the delivery of healthcare when HMP Kilmarnock opened in 1999, since that time there has been a fundamental change in how health care is being delivered.

HMIPS Inspection Reports in 2016 and 2022 identified concerns in relation to the physical facilities both noting that the facilities were no longer considered fit for purpose.

Under the existing contractual arrangements between the Special Purpose Vehicle (SPV) who hold the lease for the prison and SPS, SERCO are

responsible for maintaining the facilities as originally provided. Development of the facilities are the responsibility of SPS to fund but would need the agreement of the SPV to implement.

The transfer of the prison to SPS in March 2024 will simplify these arrangements with the removal of an additional party. Work is taking place with SPS to develop a business case to identifying funding to develop the physical facilities but at this time there is no commitment from SPS to provide investment which is a recommendation from the Health Needs Assessment.

HMP Kilmarnock has been managed and operated by SERCO from the opening of the Prison in 1999 under a 25 year contract. This contract has not been renewed and SPS will take direct management of the prison on 16 March 2024.

SPS have in place, a project lead and team to manage the transfer of the prison. The Senior Manager for Justice has a regular engagement meeting with the project lead to identify and plan transition issues that need to be considered for the delivery of health care services in the prison. There are specific recommendations on changes to the skill mix of the mental health team and the work pattern of the Band 6 Charge Nurses in the Prison.

Recruitment of Mental Health Nurses has been very challenging which reflect both local and national shortage of Mental Health Nurses and the particular difficulties recruiting to prison healthcare. This situation is unlikely to change in the near term and the reduced capacity has impacted on service delivery. The service has needed to focus on those most at risk and need and has not been able to provide lower level and preventative care to those that could benefit from this.

Proposals are to create a Band 6 Mental Health Practitioner role and 2 Band 4 Mental Health Assistant Practitioner roles from existing Band 5 vacancies. These would strengthen service delivery in the triage and assessment of referrals and the delivery of mental health and wellbeing intervention including group work. This would more effectively meet the needs of those requiring mental health and wellbeing support.

Changes to the skill mix of the mental health team in the prison and development of the Band 6 Charge Nurse posts are to provide management support and quality assurance for the delivery of healthcare beyond existing Monday to Friday 9-5 arrangement. This will require an additional Band 6 post to provide sufficient capacity and changes to the shift pattern to include evening and weekend working.

Informal discussions have taken place with those staff members affected. If the Board approve this proposal the formal Organisational Change Protocol will be initiated with the issue for the standard change notification form and establishment of a workforce group with HR and Trade Union representatives to take forward the change programme.

	<p>The Band 6 Mental Health role will be a practitioner post rather than managing staff to allow continuity of care with Band 4 Mental Health Practitioners being added to provide lower level support.</p> <p>Concerns was raised around staff potentially leaving due to change in working pattern; informal discussions have taken place and staff are not overly keen on the proposals however there is a need for Senior Nurses to be in the Prison after 5pm with services running until 9pm. A formal consultation will take place with staff around the proposed changes with staff able to decide to accept the proposals or consider redeployment options.</p> <p>Concern was raised around replacing the Band 6 roles with Band 4 Mental Health Practitioners; it was recognised that the recruitment for the Band 6 roles had been continuous for the last eighteen months and hadn't been successfully recruited to therefore the Mental Health Practitioner role was being utilised to support the service during the national shortage of Mental Health Nurses.</p> <p>Discussion took place regarding timescales for the associated actions; a business case for capital funding for SPS will be developed for December 2023 however, to date, there was no commitment from SPS to make funding available.</p> <p>Mr Egan welcomed the Health Needs Assessment to profile the needs of the people in custody and that this would be useful in profiling the physical constraints of the health care service and the improvements required.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none">i. Note the content of the HMP Kilmarnock Health Needs Assessment and plan to take forward the recommendations, with an update to be provided at a future meeting;ii. Note the risk implications of the transfer of the prison to the Scottish Prison Service and work with SPS to manage the transfer;iii. Agree the proposals to change the skill mix of the prison mental health team;iv. Agree to progressing the NHS Organisational Change Process for the proposed changes to the Band 6 posts; andv. Issue a Direction to NHS Ayrshire & Arran to implement the proposed staffing changes.	
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Financial Management Report

Mr Alex McPhee presented the report to provide details of the draft final outturn position for East Ayrshire Health and Social Care Partnership for 2022/23. The report provided an analysis of movements on the Annual Budget 2022/23, approved by the IJB on 23 March 2022, as well as an update on the outturn position in relation to the Partnership's response to the Covid-19 pandemic and includes progress against approved recurring cash releasing efficiency savings, as well as confirmation of funds within the IJB Reserve Balance. The report also provided a summary of the outturn on services managed under Lead Partnership/ Hosted Services arrangements, as well as information on Acute Services budgets in relation to the large hospitals Set Aside resource within the scope of the Strategic Plan.

The month 12 Financial Management Report for the Partnership had been compiled following financial analysis and budget monitoring at East Ayrshire Council and NHS Ayrshire & Arran.

The consolidated draft final outturn for the Partnership on a population basis for 2022/23 was an uncommitted balance of £3.376m. This comprises net underspend of £1.898m on Council commissioned services and £1.478m on NHS commissioned services. This represented 1.2% of the final £275.930m population basis.

The draft 2022/23 uncommitted balance £3.376m was after accounting for funding balances for earmarking to offset future commitments within the IJB Reserve totalling £3.690m.

The overall underspend on directly managed services was after taking account of an underspend of £2.187m related to East Ayrshire hosted services managed under routine NHS Lead Partnership arrangements. Draft final outturn figures for North Ayrshire Lead Partnership services highlighted an underspend of £2.840m, with draft South Ayrshire Lead Partnership services figures highlighting an overspend of £0.139m.

The draft final outturn position results in a net increase cost to East Ayrshire IJB of £0.174m. This comprises the North and South shares of the East hosted services underspend £1.144m plus the East contribution to the overspend in South hosted services £0.44m, partially offset by the East £1.014m share of the underspend on North hosted services.

The 2022/23 Annual Budget was approved by the Board on 23 March 2022 on a 'business as usual' basis and made no allowances for additional costs associated with Covid-19. Over the course of 2022/23, all Councils, Health Boards and IJBs took guidance from the Scottish Government on legislative requirements and spending priorities as part of the mobilisation planning process. Regular returns were submitted to the Scottish Government over the course of 2022/23, to provide details of the financial implications of the response to the pandemic. The draft final outturn position for 2022/23

highlights that all Covid-19 attributable costs included in the pan-Ayrshire Health and Social Care Local Mobilisation Plan have been fully funded.

The IJB Reserve balance at 31 March 2023 reflects an initial review of earmarked balances undertaken as part of the closure of Accounts. Sums drawn-down to offset attributable expenditure in 2022/23 totalling £21.063m were highlighted. This included the Covid-19 funding balance of which £7.038m was returned. Sums earmarked at 31 March 2023 totalling £7.066m were shared with cumulative earmarked balances carried forward totalling £20.172m.

It is intended that the transformational change programme funding retained within the IJB Reserve will be used to mitigate a number of financial risks associated with cost and volume budget pressures, as well as operational risks related to staff recruitment and retention, as part of the work being taken forward through the Strategic Commissioning Board. This will include investment aligned to the Partnership's strategic aims and objectives, with particular emphasis on early intervention and prevention, to be taken forward through a test of change process. The treatment of the uncommitted balance for 2022/23 has been considered in respect of the IJB Reserve Strategy, as well as the transformational change programme, Covid-19 remobilise, recovery and redesign, and ongoing cost and volume pressures across the full range of delegated services. Subject to the outcomes of the external audit of 2022/23 Annual Accounts, it is proposed that the £3.376m uncommitted balance be set aside within the IJB Reserve as follows.

The Board noted the report and agreed the following recommendations:

- i. Note the draft final outturn position for East Ayrshire Health and Social Care Partnership at 31 March 2023;
- ii. Note the draft final outturn position in relation to the response to the Covid-19 pandemic in 2022.23 and ongoing financial risk in relation to legacy costs;
- iii. Note the draft final outturn position in respect of IJB Reserves and balances;
- iv. Approve in principle, subject to the outcome of the external audit of the Annual Accounts, the proposals to set aside £3.376m retained uncommitted balances within the IJB Reserve as set out in the report;
- v. Note progress towards achievement of approved cash releasing efficiency savings 2022/23;
- vi. Note the draft final outturn position in respect of services managed under Lead Partnership/ Hosted Services arrangements;
- vii. Note the position in respect of large hospital Set Aside budgets; and
- viii. Note that the draft final outturn position outlined within this report is consistent with the unaudited Annual Accounts 2022/23, which are also presented to today's meeting of the IJB; and
- ix. Note the arrangements put in place by the Scottish Government to enable surplus the Covid-19 reserve balance £7.038m to be returned, and in recognition of the exceptional nature of this transaction, that a national solution on final accounting treatment and disclosures will be reached as part of completion of the audit of the Annual Accounts.

<p>8.</p>	<p><u>Draft Unaudited Annual Accounts</u></p> <p>Mr Alex McPhee presented the report to advise of the Integration Joint Board requirements introduced by the Local Authority Accounts (Scotland) Regulations 2014, to submit Annual Accounts for the year ended 31 March 2023 to the IJB for approval and thereafter forward the Accounts to the Controller of Audit.</p> <p>The 2014 Regulations require IJB Members to consider the unaudited accounts at a meeting to be held no later than 31 August. In addition, the Board, or a committee whose remit includes audit or governance functions, must consider the audited accounts and aim to approve the Annual Accounts for signature no later than 30 September, with publication no later than 31 October.</p> <p>Since the inception of the East Ayrshire IJB in 2015, the audited accounts, alongside the external auditors report have been presented to the August meeting of the IJB. Following discussion with Audit Scotland, the Board's appointed external auditors, regarding the audit timetable, it has been agreed that the audited Annual Accounts 2022/23, along with the external auditors ISA260 report on the outcome of the audit, will be submitted to the Board on 11 October 2023 for formal approval.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> i. Approve the unaudited Annual Accounts for 2022/23; and ii. Note the timetable for approval of the audited Annual Accounts for 2022/23. 	
<p>9.</p>	<p><u>ADP Annual Report</u></p> <p>Mr Neil Kerr presented the report to provide members with the content and detail of the East Ayrshire Alcohol and Drug Partnership (ADP) Annual Report outlining activity and investment during the financial year 2022/23.</p> <p>The annual report is required by the Scottish Government to be agreed and supported by both the ADP and IJB prior to formal submission on 27 June 2023. The report was approved by the ADP at the ADP Committee meeting on 02 June 2023.</p> <p>As in previous years, the annual report was set out in a 'tick box' format with free text boxes for additional context, information and clarification as and when required. The East Ayrshire ADP was consulted by the Scottish Government regarding the content and questions contained within the report and provided appropriate feedback and considerations.</p> <p>The East Ayrshire ADP is required to submit and publish an annual report to the Scottish Government covering a wide range of aspects relating directly to the delivery of the National Mission during the financial year 2022/23. The Scottish Government appreciates that the report will not reflect the totality of</p>	

	<p>the work of the ADP but that it is designed to reflect details of progress that has not been reporting nationally through other means.</p> <p>The ADP continues to be funded by the Scottish Government through core funding and National Mission funding. The ADP has also been successful in securing funding from CORRA for a number of initiatives and projects and more recently for the Recovery Hub, Recovery Housing and Pre and Post Residential Recovery Support (Recovery Hub, Blue Triangle, and We Are With You).</p> <p>The ADP have also had a focus on education and awareness raising for young people including input to schools to promote prevention in drug and alcohol abuse.</p> <p>The service is undergoing a Best Value Service Review and, through the 'challenge' discussion phase consideration will be given to people presenting with Alcohol Related Brain Damage and suitable environments for support and care for these individuals.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> i. Note the information and data contained within the report; ii. Note the progress being made by the ADP in terms of the requirements of the Scottish Government; iii. Agree and approve the content and detail of the ADP annual report as required by the Scottish Government; and iv. Request any further information or updates as required. 	
<p>10.</p>	<p><u>Extension to Supported Accommodation Housing Support Contract</u></p> <p>Ms Jo Gibson presented the report to seek approval to continue contractual agreement for one East Ayrshire Health and Social Care (EAHSCP) Adult Service contract to 31 March 2024. This extension will support and align to the Partnership's Best Value Service Review (BVSR) Programme. This was requested in accordance with the Council's Standing Orders Relating to Contracts.</p> <p>The Partnership sought approval to grant an extension for one contract, PS/18/134 – 24/7 Supported Accommodation/ Housing Support, Cessnock Road, Hurlford. Realignment was requested in conjunction with the Partnership's Best Value Service Review Programme, with strategic support in place to ensure a focus on person centeredness and collaborative design principles.</p> <p>The report recognised the legislative arrangements for contractual arrangements were retained by East Ayrshire Council and NHS Ayrshire and Arran therefore the report will also be presented to Council on 28 June 2023.</p> <p>The Board noted the report and agreed the following recommendations:</p>	

	<ul style="list-style-type: none"> i. Agree to the proposed extension, to 31 March 2024, for the contract in terms of Paragraph 21 (2) of the Standing Orders Relating to Contracts; and ii. Issue a Direction to East Ayrshire Council in respect of the implementation of the revised contractual arrangements. 	
11.	<p><u>Extension to Contact – We Are With You</u></p> <p>Ms Jo Gibson presented the report to seek approval to directly award a negotiated contract to Ayrshire Council on Alcohol (ACA) (which terminates on 30 September 2023) and We Are With You (WAWY) (which terminated on 11 October 2023) to support continued delivery of the Rapid Access to Drug and Alcohol Recovery (RADAR) service for East Ayrshire, to 31 May 2026. These services are essential to the integrated delivery of RADAR which is required by Scottish Government in order to comply with MAT.</p> <p>The report set out proposals to establish negotiated contracts with two key providers to continue the innovative work in East Ayrshire to offer speedy access to treatment to people who are ready to tackle addiction to alcohol or drugs.</p> <p>The multi-agency aspect of the RADAR model ensures that individuals receive support to address the complexities of their drug use and the factors behind it, and in so doing, seeks to ensure retention in treatment thereby lessening the risk of drug related deaths.</p> <p>In seeking to reduce the scale of drug related deaths, Scottish Government introduced a set of standards that every drug service in Scotland must fully implement by 2024. The RADAR model in East Ayrshire has been recognised as an example of good practice of this standard by Scottish Government.</p> <p>RADAR is a single point of contact for anyone concerns about their own, or someone else's, drug and/or alcohol use. RADAR has listened to the people of East Ayrshire and heard that service users want faster access to services as well as more say in the support and treatment that they receive.</p> <p>As part of a unique approach, RADAR is made up of partnership from; NHS Addiction Services; We Are With You (WAWY); Ayrshire Council on Alcohol (ACA); and East Ayrshire Advocacy Services.</p> <p>WAWY offer a positive place where people can progress, connect with others and get friendly, expert help. WAWY lets people know that they will work alongside them and treat them with warmth, compassion and respect. WAWY is an active partner in delivering the RADAR service.</p> <p>ACA provide a locally based counselling support Service to assist individuals to recover from problematic alcohol use. The Service is person-centred and offers self-directed approaches to care that build on the strengths and resilience of individuals, families and communities to both attain and sustain personal responsibility, health, wellness and recovery from alcohol use.</p>	

	<p>There is the potential, should the recommendations not be implemented, that services would cease to provide support to the recovery community, impacting on health and wellbeing. Should a re-tendering process be undertaken, this can take up to six months in which time both organisations could suffer a loss of staff due to lack of funding and perhaps no longer be in a position to bid for tenders.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ul style="list-style-type: none"> i. Agree the proposed negotiated contracts to 31 May 2026, in terms of Paragraph 21 (2) of the Standing Orders Relating to Contracts; and ii. Issue a direction in respect of the implementation of the revised contractual arrangements. 	
12.	<p><u>Implications of the Scottish Government Publication: “Equipment and Adaptations: Guidance on Provision”</u></p> <p>Mr Craig Ross presented the report to highlight implications arising from the recently published ‘Equipment and Adaptations: Guidance on Provision’ document.</p> <p>East Ayrshire Health and Social Care Partnership (EAHSCP) are well placed to deliver the aims of effective equipment and adaptations provision through significant work completed over the past decade in simplifying provision, integrating all equipment and adaptations provision in one service and adopting tenure neutral approaches wherever possible.</p> <p>Of the 78 relevant key actions from the new guidance, 45 are fully met, 24 partially met and nine are not currently met within EAHSCP.</p> <p>Areas of strength where all, or nearly all, key actions are fully met include work to support unpaid carers; Children and Young People, Prisons, Technology enabled care; Sensory Impairment, Integrated Service pathways for equipment provision, and community store service models.</p> <p>Areas where further action is required for key actions that are not met, include assessment and provision; prevention, early intervention and self-management; hospital discharge; care homes; health and safety; recycling; and adaptations and housing solutions.</p> <p>To provide assurance and oversight, an action plan will capture all required key actions as well as outline other areas for improvement across equipment and adaptations provision. The implementation officer will provide update reports to the EAHSCP Health and Care Governance Committee.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ul style="list-style-type: none"> i. Approve all proposed actions. 	
13.	<p><u>Risk Management Strategy</u></p>	

	<p>Ms Amanda McInnes presented the report to review and approve the Risk Management Strategy.</p> <p>The Risk Strategy provides guidance on the risk management process for the Health and Social Care Partnership. The Strategy brings together details of the Risk Appetite Statement, the governance supporting risk management, and the monitoring arrangements. A Severity Matrix Guide and Likelihood Matrix Guide are contained within the Strategy to support employees and managers when assessing risk and a Scoring Diagram is also included displaying overall risk ratings following the application of these matrices.</p> <p>The report was presented to the Risk Management Committee on 25 May 2023 for noting and subsequently to Audit and Performance Committee on 30 May 2023, as part of the Partnership Performance Report, for noting.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> i. Note and comment on the Risk Management Strategy; and ii. Approve the Risk Management Strategy. 	
14.	<p><u>Q3 and Q4 Whistleblowing Report</u></p> <p>Ms Amanda McInnes presented the report to provide the Board with an update following the implementation of the National Whistleblowing Standards and Once for Scotland whistleblowing policy (the Standards).</p> <p>The Whistleblowing Standards were introduced on 01 April 2021 and have been implemented successfully across NHS Ayrshire & Arran and Health and Social Care Partnerships.</p> <p>The report provides details of Whistleblowing concerns raised across NHS Ayrshire & Arran by staff, and those who provide services on behalf of NHS Ayrshire & Arran, for the periods October to 31 December 2022; and January to 31 March 2023.</p> <p>The Quarter 3 report was presented to the NHS Board on 27 March 2023. The Quarter 3 report noted that during this quarter there were three concern received through the whistleblowing process, one of which was received anonymously. Although the anonymous concern cannot be managed through the whistleblowing process, the concerns raised will be investigated following the principals of the Whistleblowing Standards and following local guidance.</p> <p>At the time of the Quarter 3 report being published, there was no outcome available as the investigation into both concerns was ongoing. An extension to allow adequate time for the requested detailed investigations to be held was discussed and agreed with those who raised the concern.</p> <p>The Quarter 4 report was presented to the NHS Board on 23 May 2023. The report noted that during Quarter 4 there were two concerns received through the whistleblowing process, one of which was not appropriate to be taken forward as Whistleblowing as it related to personal experience and was</p>	

	<p>passed to HR to progress through the One for Scotland Workforce Policies Investigation process.</p> <p>At the time of the Quarter 4 report being published, there was no outcome available as the investigation was ongoing. Due to the complexity of the concern raised it is anticipated that the investigation will go beyond the 20 working day timescale. The Whistleblower is aware of the need to extend the investigation period and it content with this.</p> <p>The Board noted the contents of the report.</p>	
<p>15.</p>	<p><u>Annual Complaints Report</u></p> <p>Ms Amanda McInnes presented the report to share the annual report for Social Work and IJB complaints for the year 2022/23.</p> <p>The number of complaints being received is now at a level consistent with pre-Pandemic levels. Although more complaints are being concluded within SPSO timescales, the average time taken has increased due to a small number of complaints that have impacted the average. This will be monitored during the year using the quarterly reports to reduce this figure again. Monitoring will be supported by advice and guidance to managers as required. From a qualitative perspective, there have been a number of review by SPSO which have all resulted in positive feedback regarding the handling of social work and social care related complaints. Specifically, none of the complaints resulted in SPSO formally accepting them for review due to the information provided demonstrating that the complaints had been handled appropriately and reasonably.</p> <p>Approximately 19% of complaints received were upheld or partially upheld and only 6% of complaints were withdrawn. Withdrawn complaints usually relate to duplicate complaints being received, or where a complaint has been received about an issue that has already been dealt with. In such circumstances applicants are usually signposted to the Scottish Public Services Ombudsman (SPSO) as the appropriate route when unhappy with a complaint outcome. The time taken to close stage one complaints has risen from an average of 7.9 days to 11.7 days, and for stage 2 complaints it has risen from an average of 24.4 days to 31.7 days. Stage 2 escalated complaints have reduced from 23.0 days to 6.8 days in part due to the significant reduction in the number of complaints escalated from stage 1 dropping from 14 to 5. The number of complaints being closed within SPSO timescales has increased and the report has highlighted that this has been as a result of some complaints being outliers and, because of the time taken to conclude them, this resulted in a skewing of the average figure.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> i. Note and comment on the Complaints report. 	
<p>16.</p>	<p><u>Annual Duty of Candour Report</u></p>	

	<p>Ms Amanda McInnes presented the report of the East Ayrshire Health and Social Care Partnership's Duty of Candour Annual Report 2022/23.</p> <p>31 March of each year concludes the latest year for which Social Work and Social Care organisations are required to report where the Duty of Candour procedure has been activated or to otherwise confirm a null report.</p> <p>For 2022/23 East Ayrshire will be submitting a Null Report as there have been no activations of the procedure. The report has been produced following the recommended format for a Null Report that was provided by the Scottish Government Duty of Candour Reporting and Monitoring Sub-Group.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ul style="list-style-type: none"> i. Note and comment on the 2022/23 Duty of Candour Annual Report. 	
17.	<p><u>Governance Report</u></p> <p>Mr Craig McArthur presented the report to provide the Board with an update on changes to the Chair and Vice Chair of the IJB, changes in the voting membership of the Board and Audit and Performance Committee, and the annual review of Governance Committee Terms of Reference.</p> <p>The report provided an update on the changes to the Chair and Vice Chair of the IJB, changes in the voting membership of the Board and the Audit and Performance Committee, as sought approval of the Terms of Reference for the Strategic/ Wellbeing Delivery Group, and Property and Asset Management Board.</p> <p>Councillor Douglas Reid's term of office as Chair of the Board ended in June 2023. NHS Board confirmed by email in April the Dr Sukhomoy Das' appointment as Interim Vice Chair of the Board would become permanent. This was confirmed in the NHS Board report on 23 May 2023.</p> <p>Dr Das will now assume the role of Chair of the Board on 21 June 2023 and will step down as Chair of the Strategic Planning/ Wellbeing Delivery Group, and as a member of the Audit and Performance Committee, at this time.</p> <p>From 21 June 2023 Councillor Douglas Reid will assume the role of Vice Chair of the Board and Chair of the Strategic Planning/ Wellbeing Delivery Group.</p> <p>The Integration Scheme, sets out that locally, the integration partners will each nominate four voting members, namely four councillors nominated by the Council, and four NHS Board members nominated by NHS Board.</p> <p>Neil McAleese was appointed as a Non-Executive Board Member from 01 May 2023, and the NHS Board subsequently confirmed that Mr McAleese would join the Board as a voting member, replacing Mr Adrian Carragher who joined on 01 November 2022 on an interim basis.</p>	

	<p>Mr McAleese will also join the Audit and Performance Committee from 21 June 2023, replacing Dr Sukhomoy Das.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> i. Note the change to the Chair and Vice Chair of the Board; ii. Note the change to voting membership of the Board and Audit and Performance Committee; and iii. Note the annual review of Governance Committees Terms of Reference is underway, and approve Terms of Reference for Strategic Planning/ Wellbeing Delivery Group, and Property and Asset Management Board. 	
<p>18.</p>	<p><u>Integration Scheme Review</u></p> <p>Mr Jim Murdoch presented the report to advise the Board of the legal requirement to undertake a review of the East Ayrshire Integration Scheme, and note that this will be jointly undertaken by East Ayrshire Council and NHs Ayrshire & Arran.</p> <p>The Public Bodies (Joint Working) (Scotland) Act 2014 (the Act) was passed by the Scottish Parliament in February 2014. This provides the legal framework for the integration of health and social care in Scotland, with greater emphasis on supporting people in their own homes and communities and less inappropriate use of hospitals and care homes.</p> <p>Section 44 of the Act requires local authorities and NHS Boards to integrate the governance, planning and resourcing of health and social care and other delegated services, by establishing an ‘Integration Authority’. The first meeting of the Board was held on 02 April 2015, following approval of the Integration Scheme by Scottish Ministers on 01 April 2015.</p> <p>Within legislation, there is a statutory duty to review the Integration Scheme before expiry of a 5-year period to identify whether any changes are deemed necessary or desirable. The review must have due regard to the integration planning principles set out in the Act and also to the National Health and Wellbeing Outcomes. Constituent parties must jointly consult with a range of stakeholders including: health and social professionals; users of services and their carers; service providers; the third sector; and any other persons considered appropriate.</p> <p>If any changes are deemed necessary or desirable, constituent parties must jointly prepare a revised Integration Scheme, taking account of any views expressed through the consultation process. This will require further engagement with stakeholders, and a joint submission must then be made to Scottish Ministers to formally approve the revised Scheme.</p> <p>The current Integration Scheme provides for the delegation of services that go beyond the statutory minimum outlined in the Public Bodies (Joint Working) (Scotland) Act 2014. This includes all children’s and family health and social work and criminal justice social work services.</p>	

	<p>East Ayrshire Integration Scheme was last updated in 2018 and must now be reviewed in line with the five year expiry date. North and South Councils are similarly in the process of undertaking a review of their integration schemes and discussions are ongoing to the scope to coordinate these on a pan-Ayrshire basis. It is proposed to undertake a high level overview and consultation on the Scheme initially, to establish if revisions are required that would result in a fuller review and update, and wider stakeholder consultation.</p> <p>The Integration Scheme is an agreement between East Ayrshire Council and NHS Ayrshire & Arran. The IJB is not a party to the Scheme. The review will be undertaken by the Council and the NHS Board. A detailed report outlining the scope of the review, roles and responsibilities, and further decision making and reporting arrangements will be submitted to the Council and NHS Board in early course.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> i. Note the legal requirement to review the East Ayrshire Integration Scheme in 2023; ii. Note that the review will be undertaken by the parties to the Integration Scheme, namely East Ayrshire Council and NHS Ayrshire and Arran; and iii. Note the proposed scope and timescale of the review. 	
19.	<p><u>Suicide Prevention Action Plan</u></p> <p>Ms Jo Gibson presented the report to update on progress within East Ayrshire on local suicide prevention activity during 2022/23 and introduce the 2023/24 Action Plan.</p> <p>The report also updated members on the publication of the national strategy and on suicide prevention activity progressed on a Pan-Ayrshire basis.</p> <p>In September 2022, Scottish Government published Creating Hope Together: Suicide Prevention Strategy 2022 – 2043, to supersede the previous national strategy; Choose Life. The new strategy seeks to build on the already strong suicide prevention work across Scotland, recognising that every organisation, community and individual has a part to play.</p> <p>East Ayrshire has had significant focus on suicide prevention for a significant number of years, but this became more acutely felt in 2018 when a sharp increase in deaths by suicide was experienced. As a result, a detailed analysis of 50 deaths by suicide was commissioned by Chief Officers Group. This analysis was reported back in October 2022 and the learning and recommendations were reflected in the local action plan.</p> <p>Official data on suicides will be published in August 2023, however, early analysis suggests there has been fewer deaths as a result of suicide in East Ayrshire in 2022 than in previous years.</p>	

	<p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> i. Note the publication of Creating Hope Together – national suicide prevention strategy; ii. Note that East Ayrshire updated Action Plan; iii. Note the progress on the 2022/23 Preventing Suicide Action Plan; and iv. Note the report of the Pan Ayrshire Suicide Prevention Conference of December 2023. 	
20.	<p><u>Governance Papers</u></p> <p>The minutes of the following meetings were shared for information:</p> <ul style="list-style-type: none"> • Audit & Performance Committee – 03 March 2023 • Health & Care Governance Group – 28 February 2023 • Health, Safety & Wellbeing Group – 09 February 2023 • Partnership Forum – 09 February 2023 • Risk Management Meeting – 09 March 2023 • Strategic Planning Group – 02 November 2023 	
21.	<p><u>AOCB</u></p>	
22.	<p><u>Date of Next Meeting</u></p> <p>30 August 2023 at 2pm Council Chambers, Council HQ/ MS Teams</p>	