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**To: Renfrewshire Integration Joint Board**

**On: 26 March 2021**

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**Report by: Interim Chief Officer**

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**Heading: Chief Officer's Report**

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Direction Required to Health Board, Council or Both	Direction to:	
	1. No Direction Required	X
	2. NHS Greater Glasgow & Clyde	
	3. Renfrewshire Council	
	4. NHS Greater Glasgow & Clyde and Renfrewshire Council	

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## 1. Summary

- 1.1. This report provides an update to the Integration Joint Board (IJB) on the key operational activity, including the HSCP's operational response to COVID-19. The report focuses on activity undertaken since the last IJB on 29 January 2020.
- 1.2. The continually changing circumstances locally and nationally continue to necessitate the prioritisation of the HSCP's response to the pandemic, including the continued delivery with partners of the COVID-19 vaccination programme.
- 1.3. The report also provides the IJB with an update on the regional and national developments for health and social care services.
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## 2. Recommendations

It is recommended that the IJB:

1. Note the updates provided on the COVID vaccination programme, ongoing operational response to the COVID pandemic, and NHS GGC remobilisation plans (sections 4 to 11);
2. Note the update from Scottish Government on reporting requirements for Annual Performance Reports, Integration Scheme reviews, and the development of Strategic Plans (section 12);
3. As part of the above, note that work has commenced on the Annual Performance Report for 2020/21 and a Strategic Plan proposal will be brought to the IJB in June 2021 (section 12);

4. Note the additional HSCP strategy and planning updates provided on the development of a one-year workforce plan for 2021/22 and the draft expenses policy for unpaid carers (sections 13 to 14);
5. Note the updates provided on developments in national policy and strategy, covering the implementation of national whistleblowing standards within the NHS, Audit Scotland's report on the NHS in Scotland 2020, and the Scotland Prevention Review Group's recommendations for preventing homelessness (sections 15 to 17); and
6. Approve the draft expenses policy for unpaid carers described in section 14 and provided as Appendix 1 to this report.

### **3. Background**

- 3.1. On 23 February 2021, the Scottish Government set out an updated Strategic Framework, indicating the expected process and indicative timescales for current restrictions to be reduced. The framework recognises that infection rates in Scotland have been reducing. Coupled with the vaccination programme, this provides an opportunity to now consider how restrictions will be removed.
- 3.2. Assuming that the current direction of travel in infection numbers continues, restrictions will be eased within Level 4 at three-week intervals with the objective of stay-at-home requirements being lifted on 5 April 2021 and an expansion in retail which is able to open. The first steps in this process were the return of some school children, and the reinstatement of meaningful contact through internal care home visiting from early March. Additional changes are also being made by the Scottish Government where the evidence suggests this is possible. From 26 April, Scotland will return to geographical variations in COVID restrictions. The HSCP's response to COVID has continued, and will continue, throughout, and this report provides an update to the IJB on the current position of COVID and operational services.
- 3.3. More broadly, a range of national reviews have recently completed, such as Audit Scotland's annual review of the NHS in Scotland. This also includes several reviews and actions which had previously been delayed due to the impact of COVID, comprising the implementation of National Whistleblowing Standards for the NHS and the completion of the Scotland Prevention Review Group's review of homelessness prevention. Further updates on this national work are provided in this paper.

### **4. COVID Vaccination Programme**

- 4.1. The COVID-19 vaccination programme is being rolled out with prioritisation set nationally based on clinical risk. Three vaccines are currently approved by the Medicines and Healthcare products Regulation Agency (MHRA) with other vaccines at an advanced stage of development and testing, which subject to approval by regulators, may be made available on the NHS vaccination programme.
- 4.2. The national vaccination programme is progressing ahead of initial expectations. As of 9 March 2021, a total of 1,789,377 people had received

their first Coronavirus (COVID-19) vaccination in Scotland. 123,686 had received their second dose.

#### *Older Adult Care Home Residents and Staff*

- 4.3. As at 12 March 2021, 96.5% of eligible residents across all of Renfrewshire's internal and external care home estate have now received their second vaccination dose, with only a small number of residents ineligible or not consenting. The HSCP also continues to seek to complete the vaccination process for any residents who were unable to be vaccinated when they care out their initial visits.
- 4.4. Care Home staff who work in Renfrewshire care homes are also now being offered their 2nd vaccination. The Health and Social Care Partnership management team has been proactive in supporting the uptake of vaccines and continues to work with care home managers to encourage uptake amongst the remaining staff who have not yet had their 1st dose.

#### *Mass Vaccination Programme*

- 4.5. At the time of writing, the mass vaccination centres have now been operating for six weeks and continue to support the vaccination programme roll out in line with the priorities set nationally based on clinical risk. The number of clinics is kept under review by the Health Board and all of Renfrewshire's sites have been set up to provide a flexible model that can accommodate a clinic undertaking up to 1,000 vaccinations per day, over a 12-hour period. The aim is to vaccinate all over 50s by mid-April with the size and number of clinics expected to increase towards the end of March and into April to support delivery of this target. All of the adult population should be offered a first dose of vaccine by the end of July 2021.
- 4.6. Since 15 February 2021 the centres have been vaccinating people in one of the largest priority groups, Priority Cohort 6, which includes those aged 16 to 64 years old at risk, as well as carers and those with mild to moderate learning disabilities (which it has been recently expanded to include). People with severe and profound learning disabilities have already been vaccinated. There is a blended approach underway between GPs and mass vaccination centres to vaccinate those with learning disabilities. For those who are unable to attend their GP or a mass vaccination centre, Learning Disability Nurses will vaccinate and offer additional support as required.
- 4.7. Due to the size of the current priority group (around 1 million people across Scotland), vaccination appointments will continue to be offered to those eligible over the coming weeks. Renfrewshire residents are offered an appointment at a clinic within the Health Board area at the closest available clinic. People are being urged to attend the appointment allocated wherever possible, but if they are unable to do so, they can rearrange online by following the instructions within their appointment letter.
- 4.8. People can continue to access transport support via my travel line and "MyBus" where required. SPT have agreed to waive the normal "MyBus" registration process and allow people to book "MyBus" (should they need to) to attend vaccination appointments across Greater Glasgow and Clyde.

### *Unpaid Carers*

- 4.9. The Scottish Government have established a two-stage process for inviting carers to receive their vaccination. The first tranche is those carers who receive certain benefits, including Carers Allowance. These carers should now have been vaccinated or have received appointment letters. For all other unpaid carers aged 16 to 64, the Government is launching a self-registration system. Carers aged 65 and over will already have been offered a vaccine due to being included in an earlier priority group.
- 4.10. The self-registration service will offer both online and phonenumber options and will go live at 8am on 15 March 2021. Renfrewshire Carers Centre are being asked to send information about self-registration to carers from 12 March 2021. The Government will be launching a digital campaign on 15 March 2021 followed by press and radio from 22 March 2021. Carer vaccinations will be delivered through the local mass vaccination centres.
- 4.11. Renfrewshire Carers Centre provides ongoing support and information to approximately 3,000 carers. However, the 2011 Census found that 17,759 (10%) people in Renfrewshire identified themselves as a carer. It is widely accepted that this figure will be higher, with estimates of up to 17% of the population being carers.

### *Remaining Priority Groups or Missed Invitations*

- 4.12. Renfrewshire along with all other local authorities within the Health Board areas will move through the remaining cohorts in line with the national timescales set by the Scottish Government.
- 4.13. Anyone in the NHS Greater Glasgow and Clyde Health Board area who thinks they should have received an invitation to get their vaccination or who have lost their invitation letter can check whether they should have received an invitation and get a response by completing a new missing invitations contact form on the NHS Scotland website.

## **5. Care Homes**

- 5.1. There are 23 Care Homes for Older People in Renfrewshire, three of which are operated by the HSCP – Montrose, Hunterhill and Renfrew. The impact of the COVID vaccination programme is now visible across all Care Homes, reflected in increased levels of stability in infection levels since the last update to the IJB. At the time of writing there are no confirmed coronavirus outbreaks in care homes across Renfrewshire.
- 5.2. The HSCP has continued, and will continue, to work closely with both Public Health and the Care Inspectorate. The range of enhanced oversight delivered through the Daily Huddle and enhanced clinical and care governance arrangements also remains in place. Surveillance and mass testing of staff and residents also continues to be undertaken to proactively identify and manage any potential outbreaks.

## 6. Updated Care Home Visiting Guidance

6.1. On 5 January 2021, the 'Stay at Home' regulations came into effect to minimise the risk and spread of the virus. As a result, indoor visiting was restricted to essential visits only – in cases where there is distress, urgency or a need to prevent decline – and outdoor visiting to see loved ones via garden or window visits, arranged with the care home in advance. Given the additional risk posed by the new variant, garden visits have been limited to one visitor and visits by children and young people have not been permitted. The regulations have classed visiting a loved one in care homes as essential travel and is therefore exempt from travel restrictions.

### *'Open with Care' Guidance*

6.2. On 24 February, the Scottish Government released 'Open with Care' guidance to support meaningful contact in care homes. The guidance has been supplemented with some short film clips, information posters and a series of workshops for providers and partners to support the delivery of 'Open with Care'. The guidance recognises that every time someone goes into a care home it is a COVID risk and that it is everyone's responsibility to ensure that visiting takes place safely. However, with a range of protections now in place against COVID, the bigger risk is the continued separation of residents from loved ones.

6.3. In the first instance, the guidance states that indoor visiting should involve up to two designated visitors weekly, visiting one at a time. This may increase in future where care homes, with support from oversight arrangements, are confident it is safe to do so. Children under 16 are not recommended as a designated visitor at this stage.

6.4. Visitors to care homes will be required to wear face coverings and any PPE requested by the care home and will be strongly encouraged to take a COVID-19 test on-site. While visiting may sometimes still be restricted, for example in the event of an outbreak at a care home, the expectation will now be that homes will facilitate regular weekly contact for residents and will have in place the following nine levels of protection to mitigate risks:

- Effective Infection Prevention Control in each care home as standard practice at all times.
- Appropriate PPE and training on donning and doffing in a safe way and a safe place.
- Testing for all residents entering or returning to a care home.
- Three times weekly testing for all staff.
- Testing for all professional and other staff entering a care home.
- Testing for family visitors.
- PPE for family visitors.
- Vaccination of residents and staff.

- Public health and primary care support and guidance if symptoms or a positive case develops in a resident or staff member.
  - Following this the Scottish Government will look to gradually increase the frequency and duration of contacts allowable.
- 6.5. The three care homes run by Renfrewshire HSCP are enabling visiting in line with the 'Open with Care' guidance. Due to footfall associated with staff testing every Monday and Wednesday, there are no visits arranged on these days. Visiting is facilitated over the remaining 5 days each week, during the hours of 10am and 6pm. It is anticipated that visiting arrangements will attract between 14-19 designated visitors to each care home on these days.
- 6.6. All designated visitors are asked to undertake a Lateral Flow Test each time they visit the care home which will take around 40 minutes to undertake and administer, before the designated visitor is accompanied through the building to the resident's bedroom, where they will remain for the duration of the visit. Whilst there is no time limit on the visits, it will be recommended that designated visitors spend up to 2 hours with the resident.
- 6.7. Outdoor visits will continue to be facilitated for residents to see their non-designated visitors within the care home garden areas. New outdoor cabins at each care home are expected to be completed during March 2021, which will provide much more comfortable areas for residents to meet with their visitors in heated, but adequately ventilated spaces.
- 6.8. Visiting co-ordinators are required to undertake the role of managing visitors to the care homes, including testing and recording, infection control adherence and supporting the visitor processes in alignment with each resident's individual support plans about spending time with their designated and non-designated visitors.

## **7. Care Home Testing Team**

- 7.1. Renfrewshire's Care Home Testing Team was established in May 2020 with staff mobilised from access HSCP services. The purpose was the early identification, through PCR testing, of COVID-19 cases within adult and older adult care homes and the subsequent understanding and mitigation of the spread of COVID019 amongst residents and staff.
- 7.2. PCR testing involves a nasal / throat swab being taken with the person's consent and the tests are processed through NHS labs.
- 7.3. Since the establishment of the Care Home Testing Team, the role of the team has continued to expand. At present the role of the team is:
- To undertake COVID-19 testing of symptomatic care, nursing home, extra care, sheltered and very sheltered housing residents and hospice patients.
  - To undertake weekly surveillance testing in two older adult care or nursing homes on a rotational basis (10% of residents).

- To undertake mass testing in care homes, nursing homes, extra care and sheltered and very sheltered housing following a positive COVID-19 test for a resident or staff member.
- To provide COVID-19 testing kits to the local Community Nursing Team for pre-admission care home or nursing home tests and for symptomatic housebound patients in Renfrewshire who are unable to complete a home test.

7.4. The team review and monitor the results when they are available and are in regular communication with Public Health. The results of the tests are made available to the Care Home Managers, which is used to inform the need for residents to self-isolate and to identify potential outbreaks. The results are shared with the Daily Huddle and the weekly enhanced clinical and care governance meeting.

7.5. The demand for testing residents has decreased over February. At the peak of infection levels, the number of tests undertaken was around 700 per week and this has reduced in the last week of February to 170. This is a result of the reduction in the number of positive cases and subsequent reduced demand for testing.

## **8. PPE and Lateral Flow Testing**

8.1. Renfrewshire HSCP has in place a single point of contact and coordination for all PPE requirements across health and care services from the PPE Hub in Paisley, in conjunction with colleagues from Renfrewshire Council's Building Services team. The Hub oversees the ordering, distribution and collection arrangements for all PPE for HSCP internal services and commissioned services.

8.2. Regular inflows of stock continue to be received via national NHS Procurement and National Services Scotland (NSS) supply routes and at the time of reporting we have no demand or delivery issues. On average our weekly incoming stock is in excess of 500k items of PPE and we support the timely allocation of this for delivery and collection by a range of services. The current arrangements via NSS were due to expire at the end of March 2021 and have now been extended until the end of June 2021. Further communication will follow with regards approach beyond that date.

8.3. The HSCP continues to hold contingency PPE stocks to support any unforeseen demand pressures and changes in policy position.

8.4. Lateral Flow Testing has been introduced for HSCP health and social care staff who are patient or service user facing, including those visiting older adult care homes. Lateral flow testing (LFT) is a new diagnostic test, for detecting the virus that causes COVID-19. These tests do not require lab processing and so can return a result much quicker than a PCR test. With a lateral flow test, a liquid sample is placed on a small absorbent pad and the staff member reads the result.

8.5. Staff are provided with a box of tests, which they register the serial number, undertake the tests twice weekly and they log their results online. If the

results are positive, the staff member is required to self-isolate and attend for PCR testing.

- 8.6. The roll out of LFTs enables additional staff groups to be added to the list of those eligible for testing on a regular basis.

## **9. COVID Assessment Centre**

- 9.1. The COVID Assessment Centre established at Linwood Health Centre in March 2020 continues to operate to provide a service for patients who are who experiencing COVID respiratory symptoms. Across February the demand for the service has reduced, resulting in a reduction in the number of appointment slots available. The demand for this service is monitored on a daily basis by the Head of Service and Clinical Director, to make sure there is adequate appointments available and to predict any potential spikes in demand as lockdown eases and schools reopen.

## **10. Operational Services Update**

### *Day Support for older people and people with physical disabilities*

- 10.1. There are six Day Support Centres within Renfrewshire, five for Older People and one for people with physical disabilities (the Disability Resource Centre). Following Government guidance on COVID-19 in March 2020 building-based day support was required to close and the services were redeployed to provide virtual support. This has included weekly welfare calls for older people and a range of online activities and support for people who previously accessed support at the Disability Resource Centre. Day support staff have also been deployed to support the HSCP's response to COVID across several services.
- 10.2. As reduced infection levels allow, the HSCP has focused on the development of an interim 'hub and spoke' model of day support for older people and individuals with a physical disability. The hub and spoke model recognises that it will not be possible to reopen all day care buildings immediately. The day care buildings at Johnstone, Montrose and Renfrew continue to be utilised as drop-down facilities for care at home staff, who currently have no access to the network of staff facilities within extra care, sheltered housing and care homes.
- 10.3. The hub for older people will be based in the Falcon Centre and will be continually evaluated throughout based on information and feedback from staff and service users. This will help to determine lessons learned from this hybrid model which can inform the future direction of day support for older people. In addition to in-person support provided within the centre, community outreach will enable individuals to be supported within their own homes, alongside virtual (or digital) engagement and ongoing welfare calls.
- 10.4. The physical disability service will also use the Falcon Centre Hub as part of the hub and spoke model for day support. The service will also continue to build on the use of the existing virtual services which have been adopted throughout the pandemic including:
- Service user signposting

- Online care support groups
- Virtual activities
- Engagement via a variety of communication channels

10.5. Work has been progressed with the objective of opening the Falcon Centre as a base for staff to operate from and deliver the community outreach aspect of the hub and spoke model in April 2021. The HSCP has engaged with Health and Safety and Facilities Management colleagues within Renfrewshire Council to ensure that the appropriate risk and building assessments are in place and that necessary alterations and infection control procedures are in place to ensure safety for staff. A date for service users to access support in the hub will be determined through ongoing work.

10.6. The HSCP is now undertaking individual needs reviews for all service users across the older people and physical disabilities day support services to ensure that their individual needs will be met by the facilities provided at the Falcon Centre, through community outreach and ongoing digital and welfare support.

10.7. As noted above, the implementation of a hub and spoke model will support both service recovery from the pandemic, as infection levels allow, and the opportunity to understand how this adapted hybrid approach works for people who use older people and physical disability day support. This will assist in informing the future of day support services as the HSCP focuses on enabling choice, control and flexibility in service provision through the continued implementation of Self-directed Support and seeks to further embed the principles set out in the independent review of adult social care.

*Learning Disability Day Support and Respite*

10.8. Previous reports to the IJB on the response to and recovery from COVID-19 have provided regular updates on the HSCP's approach to increasing learning disability day support and respite provision where this is possible and reflects current guidance and restrictions in place.

10.9. Emergency and crisis support recommenced from early February, following a service pause due to the announcement of increased restrictions within Tier 4 areas and 'stay at home' messaging on 4 January 2021. Support continues to be provided in line with the eligibility criteria for people with the most critical level of needs, and service users continue to be contacted on a weekly basis to provide ongoing support and advice.

10.10. In line with recent Scottish Government guidance, implementation of twice weekly staff testing (Lateral Flow Tests) commenced from 2 February 2021. In addition to staff testing, eligible service staff have received their first dose of a COVID vaccination.

10.11. Supported people accessing Day Support/Respite and wider Community Team provision have also been identified for COVID vaccination under Priority 4 and 6 of the JCVI priority list. Where supported people are unable to receive vaccinations through GP Surgeries and mass vaccination centres, due to complex need, appropriate support will be offered to assist.

- 10.12. The four-tier model of support continues to be utilised by Renfrewshire Learning Disability Services (RLDS) to provide essential support to the most vulnerable adults with learning disabilities and their families. This model incorporates day support and respite services, working closely with the Integrated Community Team. The day respite tier of the model was necessarily paused when Renfrewshire moved into Tier 4 restrictions. However, following updated communications from Scottish Government, approval has been received from the Corporate Management Team to restart this provision at the Anchor Centre and Spinner's Gate.
- 10.13. During week commencing 8 March 2021, the Corporate Management Team also approved the reopening of the Mirin Day Service, which is located within the Lagoon Leisure Centre. Access to Mirin has been made possible due to the utilisation of the Lagoon as a mass vaccination centre (with separate access available for Mirin). The initial occupancy of the day service will be limited to 10 people initially, moving to 20 when it has been deemed safe to do so. The Milldale Day Service, located at On-X, will reopen when the leisure centre itself reopens in coming weeks.
- 10.14. RLDS will continue to utilise the tiered model as the safe re-opening of wider building-based services develops. The Learning Disability Planning Group continues to meet every three weeks, providing the opportunity for engagement with a range of stakeholders including carers and service user representatives, and this group will continue to be integral to decision making within the ongoing response to and recovery from the pandemic.

#### *Mental Health Inpatient Services*

- 10.15. Patients admitted to Renfrewshire Mental Health wards continue to be tested for COVID-19 and isolated until a negative result is confirmed. Staff in the Mental Health wards are tested regularly using two methods, PCR tests and Lateral Flow Tests.
- 10.16. The patient vaccination programme has commenced with all patients, within the Older People's Mental Health wards and shielding patients having received their COVID-19 vaccinations. The current vaccination programme is now aimed at patients with underlying health conditions, who are at higher risk of severe illness if they contract COVID-19. The rest of the patients will receive their vaccine in line with the national rollout.
- 10.17. The staff vaccination programme is well under way with most staff having received their first dose and have now received or have a date to receive their second dose.
- 10.18. There is currently a significant demand on Mental Health Services, in particular inpatient services. This is reflected across NHS GGC and across Scotland. Renfrewshire are working closely with colleagues across the board area to ensure effective and efficient use of the whole system of Mental Health beds across NHS GGC.

- 10.19. There are nursing recruitment challenges across NHSGGC. A board-wide group has been established to improve recruitment and retention of in-patient staff. There is currently a long day shift pattern pilot underway in Renfrewshire, put in place as locally a number of nursing staff have been lost to areas offering such a shift pattern. Early indications of this pilot show that this has improved staffing levels and feedback from staff has been positive. The pilot will be evaluated over the next month.

## **11. NHS Greater Glasgow and Clyde Remobilisation Plan**

- 11.1. As part of ongoing activity in line with the Scottish Government's Remobilise, recover, re-design framework, NHS Greater Glasgow and Clyde has developed a third remobilisation plan (RMP3) to cover the period April 2021 to March 2022. This plan has been developed across the health and care system, including primary care, secondary care and health and care services within the community.
- 11.2. The plan, which was to be submitted to the Scottish Government by 3 March 2021, builds on the detail provided in previous remobilisation plans and continues to be guided by Moving Forward Together (MFT) and seeks to continue to deliver on national priorities which include (i) supporting staff wellbeing and developing sustainable workforce planning; (ii) living with COVID by delivering additional COVID services and managing the impact on existing health and care provision; (iii) delivering essential services; (iv) addressing inequalities and embedding innovation; and (v) demonstrating value for money and affordability.
- 11.3. It is noted that the plan continues to recognise the significant uncertainty which remains around the impact of COVID-19 in the year ahead. It has therefore been developed on the assumption that high levels of COVID-19 will remain for at least the first six months of the planning period.

### ***HSCP Strategic and Operational Updates***

## **12. National Reporting Arrangements for Integration Schemes, Strategic Commissioning Plans and Annual Performance Reviews**

- 12.1. On 3 March 2021, the Scottish Government circulated confirmation of reporting arrangements for Integration Schemes, Strategic Commissioning Plans (also referred to as Strategic Plans) and Annual Performance Reviews for the current reporting year.
- 12.2. Legislation was moved in Parliament during the week commencing 22 February 2021 to extend the Coronavirus Scotland Act (2020) through to 30 September 2021. Under the provisions of this Act, IJBs are able to extend the date of publication for Annual Performance Reviews to the end of November 2021. However, as noted in paragraph 12.6 below, work will commence in Summer 2021 on the development of the IJB's Strategic Plan. Therefore, to manage planning and reporting activity as effectively as possible, work has commenced on the development of the Annual Performance Report with an objective of being in a position to publish the report in July 2021.

- 12.3. The Scottish Government has also reconfirmed the minimum requirement for IJBs to carry out a review of Integration Schemes before their expiry date, which is five years after the scheme was approved in Parliament. This review can note anything that requires further work between partners and set out plans for completion of that work at a later date. Until that work is undertaken, the current Integration Scheme will remain in force. Renfrewshire IJB undertook a review of the existing Integration Scheme in 2019 and 2020 however consultation on proposed changes was paused due to the pandemic. The Senior Management Team will consult with NHS GGC and Renfrewshire Council on next steps regarding the Integration Scheme, to reflect a desire to align Integration Schemes across the six HSCPs where possible. Revised timescales will also be developed where necessary. Following these discussions, a recommendation on next steps will be brought to the IJB.
- 12.4. The same principles apply to the development of Strategic Commissioning Plans (Strategic Plans) under the Public Bodies (Joint Working) (Scotland) Act 2014. The Act requires IJBs, working with their Strategic Planning Group, to undertake a review (rather than necessarily create a new plan). Such a review could result in a decision to continue with the same plan for a period of 12 months prior to a new plan being developed.
- 12.5. The IJB's current Strategic Plan covers the period 2019-22. The HSCP recommends that work is undertaken to develop a new Strategic Plan from 2022, rather than utilising the option to undertake a review, and is currently reviewing existing supporting strategic planning processes and structures. Work will be undertaken with the Strategic Planning Group and Staff Partnership Forum to develop a proposed approach and timescales for developing the IJB's next Strategic Plan.
- 12.6. A further update, including a formal proposal for the 2022-25 strategic plan and supporting strategic planning approach, will be brought to the IJB for approval in June 2021.

### **13. Workforce Planning**

- 13.1. The Recovery and Renewal Planning paper submitted to the IJB in January 2021 provided an update on work being undertaken to inform the development of an interim one-year workforce plan, in advance of guidance on requirements being received from the Scottish Government.
- 13.2. This guidance was initially expected in December 2020 and was received on 3 February 2021. Consequently, the deadline for submission of workforce plans for 2021/22 has been extended by the Scottish Government from end March to end April 2021.
- 13.3. A Workforce Planning and Organisational Development Group has been convened to take forward development of the interim plan. This group is led by the Head of Strategic Planning and Health Improvement, with input from staff-side, NHS and Local Authority HR, Training and Development, Organisational Development and Change and Improvement. This group will oversee the development of the plan and supporting actions, which include:

- Completion of a further planning workshop with members of the Leadership Network who were unable to attend two planning sessions held in late 2020. This session will cover participants' views on objectives for developing the workforce in their service areas.
- Assessment of existing feedback received through the Everyone Matters survey and additional surveys undertaken to understand the views of staff on the impact of and response to COVID.
- Discussion of a draft of the one-year plan with the Staff Partnership Forum.

13.4. As part of ongoing measures to support the health and wellbeing of staff, which will form a critical element of the one-year workforce plan and beyond, the Cabinet Minister for Health and Support announced the launch of the 'Workforce Specialist Service' on 26 February 2021. This service will provide confidential and expert care from professionals suffering from issues including stress, anxiety, depression or addiction and can be found through the national wellbeing hub at [www.promis.scot](http://www.promis.scot).

#### **14. Unpaid Carers' Expenses Policy**

14.1. The Expenses Policy for Carers is for unpaid carers who are appointed as a member of the Renfrewshire Health and Social Care Partnership Integration Joint Board (IJB), as per 2.16 of the Integration Scheme, and any associated groups or committees. There is one carer representative on the IJB.

14.2. In February 2019, the Ministerial Steering Group produced a report entitled "Review of Progress with Integration of Health and Social Care". Proposal 6.3 of the report is "We will support carers...better to enable their full involvement in integration...(including) paying reasonable expenses for attending meetings." To support IJBs to comply with this, the Carers Collaborative produced a template expenses policy for carer representatives.

14.3. The Collaborative's template, and examples from other Health and Social Care Partnerships, have been used for the development of the draft Renfrewshire IJB Carer Expenses Policy, attached at Appendix 1. This policy will ensure our carers are supported to attend meetings and further enhance their contribution to IJB decision making. This paper seeks approval from the IJB for this draft strategy.

#### ***National Strategy and Policy Updates***

#### **15. NHS National Whistleblowing Standards**

15.1. In October 2020, the Scottish Public Services Ombudsman announced that the revised go-live date for the implementation of National Whistleblowing Standards and the full Independent National Whistleblowing Officer (INWO) service would be 1 April 2021. The original date for implementation was 27 July 2020 however this was delayed due to the COVID-19 pandemic. The powers of the Independent National Whistleblowing Officer apply across the NHS in Scotland, and to any organisation providing an NHS service.

15.2. The Standards set out how the Independent National Whistleblowing Officer expects all NHS service providers to respond when staff raise concerns, including supporting the person raising a concern. Any organisation providing an NHS service is expected to have procedures in place that enable their staff, students, volunteers and others delivering services, to access the standards. A range of support including training, an advice line and resources have been developed to enable implementation of the Standards.

15.3. Additional guidance has also been developed to clarify expectations of HSCPs, recognising that partnership staff are employed by two separate organisations. All those working in HSCPs must be able to raise concerns about NHS services, and must have access to the support they need to do so, whoever their employer is. Any concerns about the delivery of NHS services must be handled in line with the requirements of the Standards, and anyone raising a concern through the Standards will have access to the INWO, whoever their employer is.

## **16. Audit Scotland Report: The NHS in Scotland 2020**

16.1. On 17 February 2021, Audit Scotland published the report “NHS in Scotland 2020: Lessons to be learned from pandemic response”. This report forms part of Audit Scotland’s annual reporting on how the NHS in Scotland is performing. The focus of this year’s report was consideration of the Scottish Government and NHS response to the significant and unprecedented challenges of the COVID-19 pandemic and assessment of the impact on health; pandemic preparedness; NHS remobilisation and NHS finances and performance.

16.2. Audit Scotland concluded that the “Scottish Government acted quickly to prevent the NHS from being overwhelmed by COVID-19, but it could have been better prepared to respond to the pandemic”. The Scottish Government based its initial response to COVID-19 on the 2011 UK flu pandemic preparedness strategy. Scotland took part in three pandemic preparedness exercises in the years before the coronavirus outbreak, however not all of the actions identified in these exercises had been fully implemented when COVID-19 emerged.

16.3. The report also recognises that staff across the NHS and Scottish Government took early action during the first wave in 2020, including increasing intensive care capacity and pausing non-urgent treatment. Service innovation was also highlighted and the swift upscaling of video consultations. However, challenges around remobilisation within the pre-existing financial and operational context are also identified and addressed within the report’s recommendations.

16.4. A more detailed update on Audit Scotland’s recommendations was provided to the Audit, Risk and Scrutiny Committee on 12 March 2021 ([available here](#)) and the full report is provided in the background documents to this paper.

## **17. Preventing Homelessness in Scotland Recommendations: Impact on HSCPs**

17.1. The Scotland Prevention Review Group was set up in 2019 at the request of the Scottish Government and was tasked with identifying legal duties required

for local authorities and other public bodies in the prevention of homelessness in Scotland. The group's report and recommendations were published in February 2021 and set out a number of proposals for changes to housing and homelessness legislation, policy and practice. This includes a recommendation that public bodies be required to have a role in preventing homelessness, as part of a shared public responsibility, and have a duty to ask about a person's housing situation as well as a duty to take appropriate action.

- 17.2. The report includes a number of recommendations of particular relevance to, and requiring consideration, by HSCPs. These include:
- That a statutory duty should be placed on HSCPs to identify the housing circumstances of patients and where necessary work with partners to ensure that patients are assisted into suitable housing or that a risk of homelessness is prevented.
  - Where needs are more complex and cannot be supported in mainstream housing, primary responsibility for meeting those accommodation needs should sit with the HSCP.
  - Where a social worker or social care worker identifies a risk of homelessness, they should make a referral to the relevant part of the local authority. If they consider that there are unmet social care needs, a social care needs assessment should be carried out.
  - Where it is identified that an individual may have health and social care needs as part of an assessment of homelessness or threat of homelessness, or an assessment of housing support needs (s30A or 30B of draft legislation), a statutory duty is placed on the health and social care partnership to cooperate with the local authority in planning to meet those needs.
- 17.3. The report also makes recommendations with regards strengthening strategic planning processes. HSCPs should set out a clear statement of their contribution to preventing homelessness within Local Housing Strategies. Within this context, Renfrewshire has a number of strategies and fora in place which reflect the HSCP's commitments to working with preventing homelessness as set out in the IJB's Strategic Plan 2019-22 and the Local Housing Strategy 2016-21. More broadly, Renfrewshire Council and the HSCP work together through a Housing Strategy Group, and as noted in previous reports, Housing as a Health Issue has been agreed as a key priority for the Strategic Planning Group.
- 17.4. The Housing Minister has welcomed the recommendations from the report and will now work with CoSLA and partners to agree how the proposals can be implemented. The HSCP will work with partners to consider the recommendations made and implement necessary actions. Further updates will be brought to the IJB as the recommendations are progressed.
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## Implications of the Report

1. **Financial** – Financial implications resulting from the operational response to COVID-19 are described further in a separate report to the IJB
  2. **HR & Organisational Development** – No implications from this report.
  3. **Community Planning** – No implications from this report.
  4. **Legal** – This report outlines the legislative changes resulting from the inclusion of IJBs as Category One Responders under the Civil Contingencies Act 2004. The implications of these changes will continue to be monitored.
  5. **Property/Assets** – Procedures in place to support the management and security of the authority's public information assets have been reviewed through the Records Management Plan. Ongoing COVID guidelines around physical distancing continue to guide the nature of service provision and the ability to use existing property.
  6. **Information Technology** – No implications from this report.
  7. **Equality and Human Rights** – No implications from this report.
  8. **Health & Safety** – No implications from this report.
  9. **Procurement** – No implications from this report.
  10. **Risk** – Risks and issues arising during the COVID response are tracked and managed on an ongoing basis.
  11. **Privacy Impact** – None from this report.
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### List of Background Papers:

- [Open with Care guidance](#)
  - [National Whistleblowing Standards](#)
  - [Audit Scotland Report: NHS in Scotland 2020](#)
  - [Preventing Homelessness in Scotland Report and Recommendations](#)
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**Author:** David Fogg, Change and Improvement Manager

Any enquiries regarding this paper should be directed to Shiona Strachan, Interim Chief Officer ([shiona.strachan@renfrewshire.gov.uk](mailto:shiona.strachan@renfrewshire.gov.uk) / 0141 618 7647)

## **Expenses Policy for Unpaid Carers**

### **Who is the expenses policy for?**

This policy is for unpaid carers who are appointed as a member of the Renfrewshire Health and Social Care Partnership Integration Joint Board (IJB), as per 2.16 of the Integration Scheme, and any associated groups or committees.

### **Why does this expenses policy exist?**

This policy ensures that any unpaid carers who are members of the IJB and associated groups or committees are not out of pocket as a result of carrying out their duties (as defined in the Public Bodies (Joint Working) (Scotland) Act 2014).

### **When does this expenses policy apply?**

This expenses policy applies to enable unpaid carers to undertake the work required in their capacity as IJB members. This includes preparatory work for, and attendance at:

- IJB meetings (including Workshop and Development Sessions)
- Strategic Planning Groups
- Other associated groups or committees
- IJB related duties and events

### **What expenses are included in this policy?**

The following are included but prior approval must be sought before any expense is incurred

- Travel costs
  - public transport (excludes first class travel - receipts to be provided)
  - mileage (at the agreed rate/mile)
  - parking (receipts to be provided)
  - taxi costs - where public transport arrangements are not suitable (receipts to be provided)
- Subsistence (where no meals or refreshments are provided)
  - Reimbursement of reasonable lunch expenses as per current Local Council guidelines (receipts to be provided)
  - Reimbursement of reasonable dinner expenses as per current Local Council guidelines (receipts to be provided)
  - Overnight accommodation and reimbursement of reasonable expenses for overnight stays, if and when required, as per current Local Council guidelines (receipts to be provided)
- Preparatory work and administration to carry out duties
  - IT / communication costs (e.g. phone / iPad / laptop) although a Council owned laptop will normally be loaned for the period of tenure

NB: there will be a requirement to agree to abide by the relevant policies in relation to use of IT equipment, data protection etc.

- Replacement care / care cover
  - for attendance at IJB meetings
  - for attendance at other meetings/events relating to role
  - for travel times to meetings
  - for preparation time (if and when required – to be discussed and agreed in advance)
- Loss of income to attend meetings
  - Where appropriate, loss of earnings income to attend IJB meetings will be considered (to be discussed and agreed in advance).
  - Any potential impact on social security benefits will be considered (to be discussed and agreed in advance).

### **What is the process for claiming expenses?**

- A named contact person will be identified to support communication, completion and agreement of all expenses claims.
- Expenses forms will be provided in electronic or paper format before or at each meeting / event to claim travel and subsistence expenses (receipts to be provided).
- For preparatory and administrative costs, reimbursement of costs as spent.
- For replacement care and loss of income reimbursement, discussion and agreement with named contact person in advance.
- All expenses will be paid in accordance with normal expenses processing deadlines following receipt of a properly completed expenses claim form. However, to ensure equity of involvement and engagement, if required immediate payments may be made. A payment schedule with dates of reimbursement will be provided.
- Payments will be made via BACS transfer where possible. Bank details will require to be provided to enable payment. Where BACS payment is unsuitable alternative payment arrangements (such as cheque/cash) can only be agreed by the Chief Finance Officer.

### **Reviewing this policy**

This policy will be reviewed annually with the relevant recipients. Any proposed changes to this policy will be discussed with those covered by the policy before implementation.