

NORTH LANARKSHIRE HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD (PERFORMANCE, SCRUTINY AND ASSURANCE) SUB – 12 September 2017

Motherwell, 12 September 2017 at 1.45 pm.

Note of Meeting of the NORTH LANARKSHIRE HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD (PERFORMANCE, SCRUTINY AND ASSURANCE) SUB-COMMITTEE

PRESENT

NHS Lanarkshire: M. Morris (Chair).
North Lanarkshire Council: Councillor Gallacher.
Board Members: L. Seaton, Partnership for Change.

CHAIR

M. Morris (Chair) presided.

IN ATTENDANCE

The Head of Planning, Performance and Quality Assurance; Dr. A. Cook, Medical Director, and the Performance Manager.

ALSO IN ATTENDANCE

M. Fuller, Dr. A. Osborne, H. Robertson and Councillor Weir.

APOLOGIES

Councillor Kelly, Dr. Smyth and J. Watson.

DECLARATIONS OF INTEREST IN TERMS OF THE ETHICAL STANDARDS IN PUBLIC LIFE ETC. (SCOTLAND) ACT 2000

1. Councillor Gallacher declared an interest in paragraph 9 below by reason of her being the Convener of the Council's Audit and Scrutiny Panel.

The Chair exercised her discretion to vary the order of business as hereinafter minuted.

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2. There was submitted the Minute of the meeting of North Lanarkshire Health and Social Care Integration Joint Board (Performance, Scrutiny and Assurance) Sub-Committee held on 6 June 2017.

Decided: that the Minute of the meeting of North Lanarkshire Health and Social Care Integration Joint Board (Performance, Scrutiny and Assurance) Sub-Committee held on 6 June 2017 be approved and noted.

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NORTH LANARKSHIRE COMMUNITY CAPACITY BUILDING AND CARER SUPPORT STRATEGY 2017/18

3. There was submitted a report dated 12 September 2017 by the Head of Planning, Performance and Quality Assurance (1) providing details on the North Lanarkshire Community Capacity Building and Carer Support Strategy 2017/18, as contained within the Appendix to the report, and (2) detailing the background relative thereto together with a summary of key issues.

Thereon, Susan Little, Voluntary Action North Lanarkshire (VANL) spoke to the Plan and outlined key areas of activity.

Decided: that the contents of the report be noted.

PERFORMANCE UPDATE – QUARTER 1 (APRIL-JUNE) 2017/2018

4. There was submitted a report dated 26 September 2017 by the Head of Planning, Performance and Quality Assurance (1) providing an update on the areas for improvement which had been identified as part of the Chief Executive Quarterly Performance Review for the period 1 April to 30 June 2017; (2) indicating (a) that the Chief Accountable Officer held joint Quarterly Performance Review meetings with the Chief Executive of NHS Lanarkshire and also North Lanarkshire Council, and (b) that these meetings were supported by a Chief Executive Performance Framework consisting of over 100 performance measures from across both Health and Social Work systems, including relevant targets and trajectories; (3) detailing the background relative thereto, and (4) setting out, within the Appendix to the report, areas requiring improvement together with corrective actions identified.

Decided: that the contents of the report be noted.

STRATEGIC COMMISSIONING PLAN

5. There was submitted a report dated 25 August 2017 by the Chief Accountable Officer (1) advising that in March 2017, the Integration Joint Board approved the Strategic Commissioning Plan, "Achieving Integration", which set out the commissioning intentions for 2017/18, as contained within Appendix 1 of the report; (2) setting out the process for agreeing future commissioning intentions; (3) indicating that, to drive the delivery of the Plan, a monthly Programme Board had been established with a number of supporting workstreams, as outlined in Appendix 2 of the report; (4) setting out the supporting pillars of the commissioning framework, as contained within Appendix 3 of the report; (5) detailing progress against the implementation of all 10 commissioning intentions; (6) outlining newly identified intentions for development through wider engagement, and (7) further advising that future intentions would be developed for 2018/19 and beyond largely from the outputs of the Integration Service Review Board, Children's Services Plan and Community Justice Outcome Improvement Plan.

Decided: that updates on the progress of the Strategic Commissioning Plan be submitted to a future meeting of this Sub-Committee.

DELAYED DISCHARGE ACTION PLAN AND DRIVER DIAGRAM

6. There was submitted a report dated 25 August 2017 by the Head of Planning, Performance and Quality Assurance (1) providing an update on the Unscheduled Care/Delayed Discharge Driver Diagram and associated Action Plan, which had been developed and agreed on a whole system basis via the Unscheduled Care/Delayed Discharge Improvement Board; (2) detailing the background relative thereto together with a summary of key issues, and (3) indicating (a) that the Delayed Discharge and Unscheduled Care performance continued to be a major priority within the Health and
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Social Care Partnership; (b) that the creation of a Driver Diagram and Action Plan provided clarity on the key pieces of work to be undertaken across the whole system in the pursuit of improved performance, as contained within the Appendices to the report, and (c) that progress against the Action Plan was being monitored via the Unscheduled Care/Delayed Discharge Improvement Board and would be reported to a future meeting of this Sub-Committee.

Decided: that updates on the progress of the Delayed Discharge Action Plan be submitted to a future meeting of this Sub-Committee.

ANNUAL PERFORMANCE REPORT 2016/17

7. There was submitted a report dated 26 September 2017 by the Head of Planning, Performance and Quality Assurance (1) providing details of the annual performance 2016/2017, as contained within the Appendix to the report, and (2) detailing the background relative thereto together with a summary of key issues.

Decided: that the contents of the report be noted.

NORTH LANARKSHIRE LOCAL OUTCOME IMPROVEMENT PLAN

8. There was submitted a report dated 12 September 2017 by the Head of Planning, Performance and Quality Assurance (1) providing an update on Community Planning Developments consistent with the role of North Lanarkshire Partnership Board, as outlined in the Community Empowerment (Scotland) Act 2015, and specifically, the preparation of the Local Outcome Improvement Plan (LOIP), as contained within the Appendix to the report; (2) detailing the background relative thereto, together with a summary of key issues; (3) indicating (a) that the Community Empowerment (Scotland) Act 2015 re-enforced the statutory duty on Community Planning Partnerships and broadens responsibility to all statutory partners through a set of guiding principles, and (b) that North Lanarkshire Partnership Board previously agreed a set of shared strategic priorities to drive the development of the Local Outcome Improvement Plan and focus partnership working in North Lanarkshire; (4) outlining the supporting collective actions, and (5) advising that, following endorsement of the Local Outcome Improvement Plan by all North Lanarkshire Partnership Partners in September 2017, a delivery plan would be presented to the North Lanarkshire Partnership Board in November 2017 outlining the specific actions to be taken forward under each theme in order to drive improvement.

Decided: that the Local Outcome Improvement Plan be approved and noted.

Councillor Gallacher having declared an interest in the following item of business by reason of her being the Convener of Audit and Scrutiny Panel withdrew from the meeting and took no part in the consideration thereof.

Councillor Weir assumed proxy for Councillor Gallacher for the following item of business.

INTERNAL AUDIT REPORTS 2016/17

9. There was submitted a report dated 12 September 2017 by the Chief Accountable Officer (1) providing details of the Performance Management Internal Audit Assignment undertaken as part of the 2016/17 Internal Audit Plan for the Integration Joint Board, and (2) outlining the agreed management response to the Internal Audit Action Plan, both of which were contained within the Appendices to the report.

Decided: that the contents of the report be approved and noted.

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Councillor Gallacher re-admitted the meeting.

COMPLAINTS AND COMPLIMENTS

10. There was submitted a report dated 12 September 2017 by the Head of Planning, Performance and Quality Assurance (1) providing an update on complaints performance in Quarter 1 of 2017/18; (2) detailing the background relative thereto, and (3) outlining in the Appendices to the report (a) NHS Lanarkshire and the Social Work Complaints Report, Quarter 1, and (b) the Social Work Complaints leaflet.

Arising thereon the Head of Planning, Performance and Quality Assurance advised that the future complaints would be reported via the Support, Care and Clinical Governance Group's outputs, as they would do the analysis investigating trends and repeat issues which would be reported back to the Committee via that Group's report.

Decided:

- (1) that future complaints would be picked up via the Support, Care and Clinical Governance Group and subsequently reported back to Committee via that Group's report, and
- (2) that the contents of the report be otherwise noted.

RISK MANAGEMENT

11. There was submitted a report dated 4 September 2017 by the Head of Planning, Performance and Quality Assurance (1) providing an update on Risk Management for the Health and Social Care Partnership; (2) indicating that following a development session with Board Members during November, the Risk Register had been updated with operational risks now being held on the respective Health and Social Work systems, leaving only the Integration Joint Board's specific risks on the register; (3) detailing the background relative thereto, and (4) outlining, in the Appendix to the report, the 10 risks identified.

Decided: that the updated Risk Register be noted.
