



REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD

**REPORT ON: OVERVIEW OF DUNDEE HEALTH AND SOCIAL CARE PARTNERSHIP
REPOSE TO COVID-19 PANDEMIC**

REPORT BY: CHIEF OFFICER

REPORT NO: DIJB22-2020

1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to provide the Integration Joint Board with an overview of the Partnership's strategic and operational response to the COVID-19 pandemic.

2.0 RECOMMENDATIONS

It is recommended that the Integration Joint Board (IJB):

2.1 Note the content of the report including the steps taken by Dundee Health and Social Care Partnership to respond to the challenges at each stage of the COVID-19 pandemic (as outlined in sections 4.5 to 4.8 and appendix 1).

3.0 FINANCIAL IMPLICATIONS

3.1 The Scottish Government has made a commitment to provide additional funding for mobilisation plans developed by Health and Social Care Partnership's in response to the COVID-19 crisis. Funding of £200k was provided to Dundee Health and Social Care Partnership through NHS Tayside in 2019/20 to meet additional expenditure incurred responding to the initial stages of the pandemic. Estimated and actual funding requirements for 2020/1 are submitted to the Scottish Government on a two-weekly basis and at this stage include a number of assumptions around the scale of increasing costs. This includes estimated additional costs which care providers are anticipated to incur alongside in-house services in relation to issues such as increased staff absence levels, increased use and cost of PPE and loss of income. Providers can request reimbursement of these additional costs from HSCP's.

3.2 The Scottish Government announced an initial funding allocation of £50m across Scotland to support Health and Social Care Partnerships in May 2020 of which Dundee will receive £1.429m. Further funding is anticipated based on the cost of mobilisation plans.

4.0 MAIN TEXT

4.1 On the 12 January 2020 the World Health Organisation (WHO) confirmed that a novel coronavirus (later to become known as COVID-19) was the cause of respiratory illness in a cluster of people in Wuhan City, Hubei Province, China. The first confirmed case in Scotland was identified on 1 March 2020 in the Tayside region and 10 days later, on 11 March 2020, the WHO declared a global pandemic.

- 4.2 The COVID-19 pandemic has been the biggest public health challenge facing society, including our health and social care system, in our lifetimes. Daily life has been significantly restricted, particularly following the imposition of lockdown arrangements by the UK Government on 26 March 2020, which, at the time of writing, continue to remain in place in Scotland. On 17 March the Cabinet Secretary for Health placed NHS Scotland on emergency footing for a three-month period as a direct consequence of substantial and sustained transmission of COVID-19, with non-urgent elective operations and routine care suspended.
- 4.3 Whilst recent data across Scotland demonstrates a sustained decline in new COVID-19 cases, hospital admissions, Intensive Care Unit admissions and deaths, the impact on the population's health and wellbeing has been significant. As at 26 May 2020 there had been 15,185 confirmed cases of COVID-19 in Scotland; 1,659 of which were in Tayside and 901 of which were in Dundee. As of 24 May 2020 there had been 149 deaths of Dundee residents recorded by the National Records of Scotland from a total of 924 deaths across Tayside (based on deaths where COVID-19 was mentioned on the death certificate).
- 4.4 The impact of the COVID-19 pandemic on the health and social care needs of the population, how we deliver supports and services, on health inequalities and on the health and wellbeing of our workforce and of unpaid carers has been substantial and wide ranging. At the present time data and modeling information about the impact of the pandemic beyond acute hospital settings is limited and it will be a number of months before we more fully understand the medium to long-term impact of the pandemic. This will include understanding the direct impact of the pandemic, such as the exacerbation of underlying long-term conditions in COVID-19 positive people, but also the indirect impacts, such as the consequences of delayed help –seeking / treatment for other health condition and impact of reduced household incomes on health and wellbeing. The Scottish Government recognises that COVID-19 will be “...*endemic to society to varying levels for a significant period of time. It is anticipated that normal society will not return and levels of social distancing and lockdown measures will be in place for 12 months or more.*” It is also clear that the medium to long-term impacts of the pandemic will persist for many years following this.
- 4.5 Services delegated to the Partnership form a critical part of our overall health and social care system, particularly the wide range of community-based health, social care and social work supports and services. Partnership services have not only supported efforts to rapidly increase the availability of beds in the acute sector to respond to COVID-19 positive patients requiring hospital admission, but have also been integral to providing responses to COVID-19 positive people in the community, both within their own homes and within residential settings such as care homes. As well as working to establish new COVID-19 pathways and responses, a range of services and supports have been the subject of rapid redesign to enable continued operation in the context of social distancing regulations and public health advice. A range of essential, non-Covid services have also continued to be delivered, including face-to-face contact on a risk assessed basis. In addition, the Partnership has made a significant contribution to wider Dundee Community Planning Partnership efforts to respond to community support needs, such as responses to shielded people, food distribution and a range of public protection responses.
- 4.6 Changes to operational arrangements have been overseen and supported by a rapidly established incident control structure, which is set-out in appendix 1. The Partnership's Silver Command has led internal response planning and implementation, supported by a range of subject / issues specific Bronze Groups. This has been supplemented by arrangements for senior management cover across weekends. The internal Partnership structure is co-ordinated with those in place in NHS Tayside and Dundee City Council. There are also direct links to the Tayside Local Resilience Partnership through their Care for People Sub-Group which is chaired by the Head of Service for Health and Community Care. The Chief Officer, Chief Finance Officer and Head of Service for Health and Community Care are active participants in a number of national groups / meetings, both within Health and Social Care Scotland and with the Scottish Government.

- 4.7 An overview timeline of the Partnership's strategic and operational response to the COVID-19 pandemic, from the onset of the pandemic to the end of May 2020 is provided in appendix 2. The timeline includes national milestones / developments, local governance and infrastructure milestones / developments, and local service developments and changes. It is not intended to be a comprehensive account of all developments and changes during the period but to summarise some of the most significant developments during the pandemic period.
- 4.8 The contribution of the health and social care workforce, including those employed by independent and third sector providers, has been a critical and invaluable enabler during the COVID-19 pandemic. Their commitment to maintaining services and to protecting the health and wellbeing of the people they care for has been demonstrated through their flexible approach in rapidly changing and very challenging circumstances. Developments that recognise and respond to the impact of the experience of working through a pandemic on our workforce have been an important element of the Partnership's overall response. This will continue to be a key priority during the recovery period.
- 4.9 As the Partnership moves forward to the recovery planning stage there is much to learn and build on from the initial response period. Rapid change and innovation provides a foundation for consolidation and further development and improvement. There are also opportunities for reflection and learning in relation to the Partnership's approach to strategic planning, leadership and governance. So, whilst the pandemic period has been the biggest challenge that we have faced since health and social care integration in 2016 it also presents our biggest opportunity for learning and change as we move into the recovery period.

5.0 POLICY IMPLICATIONS

- 5.1 This report has been screened for any policy implications in respect of Integrated Impact Assessment. There are no major issues.

6.0 RISK ASSESSMENT

- 6.1 This report has not been subject to a risk assessment as it does not require any policy or financial decisions at this time.

7.0 CONSULTATIONS

- 7.1 The Chief Finance Officer, Head of Service, Health and Community Care and the Clerk have been consulted in the preparation of this report.

8.0 DIRECTIONS

- 8.1 The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Directions Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	X
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

9.0 BACKGROUND PAPERS

9.1 None.

Vicky Irons
Chief Officer

DATE: 12 June 2020

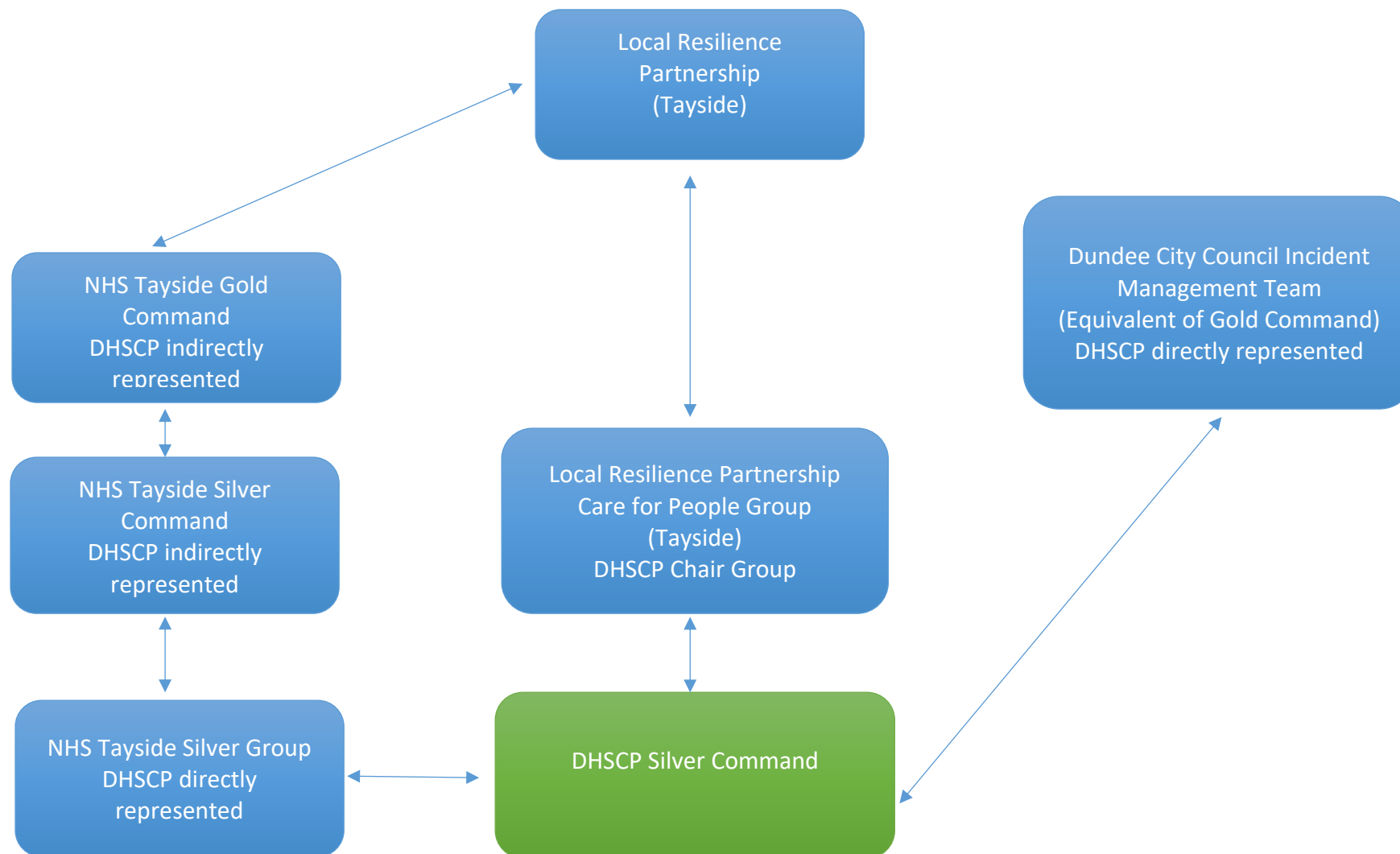
Kathryn Sharp
Senior Manager, Strategy and Performance

DUNDEE IJB SIGNING DOCUMENT

In view of the timescales involved this Report/Agenda Note was approved by the Chief Officer in consultation with the Chief Finance Officer, Clerk and Standards Officer, Chairperson, Vice Chairperson and all other voting members on the Integration Joint Board.

<i>Vicky Irons</i> Chief Officer	22nd July 2020 Date
<i>Dave Berry</i> Chief Finance Officer	22nd July 2020 Date
<i>Roger Mennie</i> Clerk and Standards Officer	22nd July 2020 Date
<i>Trudy McLeay</i> Trudy McLeay, Chairperson	4th August 2020 Date
<i>Ken Lynn</i> Councillor Ken Lynn, Vice Chairperson	4th August 2020 Date
<i>Helen Wright</i> Baillie Helen Wright	4th August 2020 Date
<i>Roisín Smith</i> Councillor Roisín Smith	11th August 2020 Date
<i>Jenny Alexander</i> Jenny Alexander	11th August 2020 Date
<i>Donald McPherson</i> Donald McPherson	4th August 2020 Date

**APPENDIX 1
COVID-19 PANDEMIC RESPONSE STRUCTURE**



**APPENDIX 2
TIMELINE OF PARTNERSHIP PANDEMIC RESPONSE**

The table below provides a high level timeline of the Partnership’s strategic and operational response to the COVID-19 pandemic, from the onset of the pandemic to the end of May 2020. It includes national milestones / developments (shaded green), local governance and infrastructure milestones / developments (shaded blue), and local service developments and changes (shaded purple).

Week 1 (1 March)	1 March	First patient tests positive for COVID-19 in Scotland; they are resident in Tayside.
Week 2 (8 March)	11 March	World Health Organisation declare global pandemic.
	13 March	First reported COVID-19 death in Scotland.
Week 3 (15 March)	15 March	Scottish Government advises against all non-essential travel and contact with others, including non-essential travel to work.
	16 March	Partnership Silver Command established including twice daily calls.
		First DHSCP provider communication issued and dedicated e-mail address set-up. Regular updates have been issued to third and independent sector providers covering key national and local developments throughout the pandemic. A dedicated e-mail address has also been established a single point of contact with providers for communications related to COVID-19.
	17 March	NHS Tayside introduced SARS-CoV-2 testing for health and social care (HSC) staff and their symptomatic household members (SHM) early in the pandemic with the first tests arriving in the local laboratory on 17 March 2020. Testing is later expanded to include other key workers including local authority, police, prison and fire and rescue staff. The testing programme has also accommodated investigation of asymptomatic staff in the context of a ward outbreak (week 7) and enhanced testing within care homes following guidance published by Health Protection Scotland (weeks 9 and 10).
		NHS Scotland placed on emergency footing for 3 month period as consequence of substantial and sustained transmission of COVID-19.
	19 March	NHS National Services for Scotland emergency PPE Triage service opens and provides emergency supplies to social care providers where local supplies are not available.
	20 March	Scottish schools close, along with other public facilities. Scottish Government advise citizens to work at home where possible.
All Dundee Community Centres Close and all Dundee City Council meetings are suspended.		
Partnership submits costed mobilisation plan to the Scottish Government.		

		<p>During this week the Partnership takes steps across all delegated services to:</p> <ul style="list-style-type: none"> • Cease all non-essential building based service provision and replace with remote service provision wherever possible; • Significantly enhance the provision of services through remote and outreach models, utilizing digital technology wherever possible and informed by risk assessment; • Communicate directly with service users and their families about these changes and seek their feedback; and, • Continue to accept new referrals on a risk assessed basis.
Week 4 (22 March)	23 March	<p>All Partnership staff employed by DCC move to home working for all staff where this is possible. All non-essential business stood down (including Integration Joint Board and Performance and Audit Committee meetings).</p> <p>Community Assessment Centre opens at Kings Cross Hospital to provide members of the public with a dedicated route to clinical advice and support. This development allows GP Practices to focus on the treatment and care of non-COVID health conditions. Patients are referred to the Community Assessment Hub if they are COVID + or suspected COVID+. The Hub is staffed by teams of GPs deployed on a rota basis from GP practices. The Hub also provides contingency arrangements for GP Practices who are unable to operate for a period of time due to staff absences, with work transferring from the affected practice to the Hub.</p>
	26 March	UK Government lockdown restrictions take effect from midnight and to be reviewed every 3 weeks.
	27 March	Provision of childcare for key workers and vulnerable children begins at Community Support Centres.
	28 March	Process agreed for management of Integration Joint Board and Performance and Audit Committee business during lockdown (Essential Business Procedure)
Week 5 (29 March)	30 March	Community Support Centres start operating to provide a range of co-ordinated support to assist people during the crisis. The centres serve as focal points for food distribution and outreach services for people who face challenges due to the continuing pandemic, and also allow the council to identify where intervention is needed.
	31 March	Staff testing begins to be actively promoted to external social care providers in the independent and third sector and infrastructure for management of referrals is put in place.
		Integration Joint Board weekly briefing calls commence (initially for the Chair and vice-Chair and later expanded

		to all voting members), including written update provided to all Board members.
		In Integrated Substance Misuse Service arrangements for supervised Medically Assisted Treatment (including methadone prescribing) are changed to support service users who are self-isolating. This includes deployment of additional staff to support implementation of changes.
	1 April	First deliver received from national PPE stock to local distribution centres at West District Housing Office. Responsibility for stock allocation remains with NHS National Services for Scotland with local staff supporting administration of distribution to providers.
		Re-modelling of in-patient sites at Royal Victoria, Kingsway, Roxburgh and Centre for Brain Injury Rehabilitation to support discharge from the acute sector and to provide end of life care begins.
		A multi-agency rapid response team led by third sector organisations begins providing support to community pharmacies across the cities to help them continue providing services and support to individuals using drugs. The team helps to manage queues, maintain social distancing, engage with individuals and offer advice on IEP and naloxone.
		NHS Tayside Staff Deployment Centre begins operating
Week 6 (5 April)	6 April	Coronavirus (Scotland) Act introduces a range of emergency measures to support the pandemic response in Scotland, including changes to mental health and social work assessment arrangements.
	6 April	Partnership Silver Command moves to single daily call 5 days per week.
		Dundee City Council receives Shielding list from Scottish Government and process of identifying and contacting those people know to social work and social care services begin. To date just under 500 people who are shielded have been contacted by the Partnership. In addition, medication delivery pathways are reviewed in line with national guidance. This work is co-ordinated with wider arrangements for supporting shielded people., including the establishment of a dedicated helpline for shielded people by Dundee City Council
		Patients flow pathways between Ninewells, Royal Victoria Hospital and community settings finalised. Further changes to the use of wards and facilities at Royal Victoria Hospital are explored to support the movement of COVID + patients through the system (including care and treatment for older people who do not requiring acute or palliative care).
		Incidence of confirmed COVID-19 cases peak in Tayside.
Week 7 (12 April)	17 April	Initial intensive work to reduce delayed discharge is completed moving from position of a total of 15 delays to

		8 delays within a 2 week period. This includes a reduction from 7 standard delays to 0 standard delays.
		COVID Palliative Care Response Team service commences, including both nursing and social care support for those who have palliative care needs and who are being cared for in the community.
		Testing made available to people living in homeless hostels and increased levels of temporary homeless accommodation are identified.
		Integrated Substance Misuse Service and associated services begin to implement revised arrangements for management of assisted medications on a risk assessed basis.
		Stroke Liaison Team implement remote working approaches including telephone and Near Me consultations. Patients are contacted on the same day as the referral which has reduced time from referral to contact considerably from the previous one week or more timescale. The service has had some positive feedback following the changes.
		Scottish Government appoint Director of PPE.
Week 8 (19 April)	20 April	Proposal agreed to establish a Dundee Mental Health Discharge Hub to provide additional support for people around the transition from in-patient and Intensive Home Treatment to 'ordinary' levels of community care.
	22 April	Partnership's Care Home Support Plan submitted to the Scottish Government detailing range of available supports across internal and external provision during the pandemic. The plan also identified further areas for development that were being taken forward or we planned at the point of submission.
	24 April	Care home assessment process begins following request from Scottish Government to Directors of Public Health to assess all care homes against 5 main areas (Knowledge and Observance of Social Distancing, Knowledge and Implementation of Infection Prevention, Education and Training, COVID 19/infection, Effective Use of Testing and Staffing levels and Support).
Week 9 (26 April)	27 April	Responsibility for allocation and distribution of PPE from national supply chains to social care providers, personal assistants and unpaid carers moves to Partnerships. The West District Housing Office begins operating as Dundee's local distribution hub and information issued through range of communication channels to support this.
		Harm reduction services begin to utilise postal service for distribution of IEP and naloxone. Additional provision of IEP and naloxone is also available at homeless hostels. These enhancements complement ongoing service provision from core harm reduction services, for example at the Cairn Centre.

		Palliative District Nursing Team, supported by social care staff, establish joint working arrangements with the Care Home Teams and in home settings to enhance community based palliative care. This is supported by COVID+ and non-COVID pathways for end of life care by specialist palliative care services and by the creation of a responsive support service via a single point of contact through a consultant connect app. The new arrangements provide seamless access to specialist advice.
		Prisoner early release planning is implemented through a weekly “virtual team” conference call. This includes Scottish Prison Service, prison healthcare, police, community justice, housing, Integrated Substance Misuse Service, the third sector, Department of Work and Pensions and emergency food provision. Enhanced information sharing has been achieved and co-ordination of support progressed.
		Following a short test of change the Safe Zone bus begins regularly operating on Saturday nights. Provision includes treatment of minor injuries, provision of hot food, support and advice and bereavement counselling. Plans are being developed to enable the bus to continue to run every Saturday with the aim of increasing the frequency.
Week 10 (3 May)		<p>Work continues to enhance supports to care home (internal and external provision), including:</p> <ul style="list-style-type: none"> • Risk assessment of all homes to determine extent of further support required, including possibility of physical visits being undertaken under certain conditions or whether the provision of support and advice remotely will be sufficient; and, • Implementing national guidance from Scottish Government in relation to testing priorities for care homes: enhanced outbreak investigation, comprehensive surveillance testing, and testing across care homes groups
		The palliative care service at Roxburghe House stands down its dedicated COVID capacity and returns to focus on providing more general palliative care for non-COVID patients.
		Planning begins with Alcohol and Drug Partnership for reinstatement of workstreams temporarily delayed under the Drug Deaths Action Plan for Change.
		A peer support telephone group line is established through third sector partners to provide support for those struggling with their mental health during the pandemic, including the impact of isolation under lockdown.
		Scottish Government issues an initial allocation of funding to health and social care partnerships to support the immediate challenges the sector faces. Dundee will receive £1.429m of the national total of £50m.

Week 11 (10 May)	12 May	Partnership agrees and issues 'Financial Support for Commissioned Providers of Social Care Services and Supports Impacted by the COVID-19 Pandemic Guidance' providing assurance to providers regarding local implementation of national agreements regarding additional financial supports to meet excess costs associated with the pandemic impact and response.
Week 12 (17 May)	18 May	National testing arrangements expanded to anyone age 5 years or over, presenting with symptoms.
	21 May	Scottish Government publish 'Scotland's route map through and out of the crisis' setting out a four phased approach to exit from lockdown.
	11 May	Partnership Silver Command moves to 3 days per week.
	13 May	Dundee City Council launch employee wellbeing survey to gather feedback about the impact of the pandemic on the workforce and inform the development of their wellbeing service. The survey is repeated every week.
	18 May	Recovery planning for the Partnership formally commences.
	20 May	Dundee City Council launch their staff wellbeing service.
Week 13 (24 May)	25 May	NHS Tayside submits remobilisation plan to Scottish Government, this includes a contribution from the Partnership in relation to primary care and mental health services.
	26 May	Coronavirus (Scotland) (No.2) Act introduces enhanced financial supports for unpaid carers and new powers for the Care Inspectorate, health boards and local authorities to intervene to support care home provision in specific circumstances.