INTEGRATION JOINT BOARD

COUNCIL CHAMBER - WOODHILL HOUSE, WESTBURN ROAD, ABERDEEN, AB16 5GB, WEDNESDAY, 27TH MAY, 2026

Integration Joint Board Members:
Councillor A Stirling (Chair), Dr J Tomlinson (NHS Grampian) (Vice-Chair), Dr C Backwell, Councillor R Cassie, Ms J Duncan, Councillor M Grant, Councillor D Keating, Councillor G Lang, Mr S Lindsay and Professor S Paranjothy (NHS Grampian).

Integration Joint Board Non-Voting Members:
Fiona Alderson (Third Sector Representative), June Barnard (Nursing Lead Adviser), Victoria Brown (Third Sector Representative), Keith Grant (NHS Trade Union), Janine Howie (Deputy Interim Chief Social Work Officer), Leigh Jolly (Chief Officer), Inez Kirk (UNISON Trade Union), Sue Kinsey (Third Sector Representative), Gillian Milne (Interim Chief Finance and Business Officer), Angie Mutch (Service User Representative) and Carolyne Wood (Carer Representative).

Officers: Ewan Black (Finance Manager, NHS Grampian), Shona Campbell (Interim Strategy and Transformation Manager), Cats Cameron (Lead Allied Health Professional for Aberdeenshire), Lauren Cowie (Legal Service Manager), Moyra Duncan (Primary Care Manager), Lindsey Flockhart (Lead Social Worker), Jo Hall (Vaccination Planning Manager NHS Grampian), Carolyn Lamb (Interim Health and Wellbeing Officer), Angela MacLeod (Programme Manager), Rebecca Meiklejohn (Business Partner), Alison McGruther (Chief Nurse), Jo Raine Mitchell (Communications & Marketing Team Leader), Neil Stephenson (Strategic Procurement Manager), Rachel Taylor (Interim Partnership Manager for Central Aberdeenshire), Harriet Tevendale (Committee Officer) and Dr Clare-Louise Walker (Consultant in Public Health Medicine/ Immunisation Coordinator NHS Grampian)

Apologies: Dr Stephen Friar (Secondary Care Adviser)

1 Sederunt and Declaration of Members' Interests

The Chair asked for Declarations of Interest.

Councillor Keating made a transparency statement in relation to his role as Vice-Chair of the Clinical and Adult Social Work Governance Committee. Having applied the objective test, he concluded that he had no interest to declare and remained in the meeting.

2a Public Sector Equality Duty

In taking decisions on the undernoted items of business, the Committee **agreed**, in terms of Section 149 of the Equality Act 2010:-

(1) To have due regard to the need to:-

(a) eliminate discrimination, harassment and victimisation;

(b) advance equality and opportunity between those who share a protected characteristic and persons who do not share it; and

(c) foster good relations between those who share a protected characteristic and persons who do not share it, and

(2) to consider, where an Integrated Impact Assessment has been provided, its contents and to take those into consideration when reaching a decision.

2b Exempt Information

The Joint Board **agreed,** that under paragraphs 6 and 7 of the Categories of Exempt Information, found at Appendix 2 of the Standing Orders of the Integration Joint Board, the public and media representatives be excluded from the meeting for Items 15 and 16 of the business below, on the grounds that it involves the likely disclosure of exempt information of the classes described in the relevant paragraphs.

3 Minute of Meeting of the Integration Joint Board of 18 March 2026

There had been circulated and was **approved** as a correct record the Minute of the Meeting of 18 March 2026.

4 Integration Joint Board Action Log

There had been circulated and was **noted** a report by the Chief Officer providing updates on progress with actions which had still to be completed and advising when these were scheduled to be reported to the Integration Joint Board. By way of an update, the Chief Officer reported that two items had been presented at the meeting, relating to GP walk-in centres and the revised workforce plan, and that the recovery plan would be addressed under the budget report. The remaining actions were noted as progressing within the timescales set out in the action plan.

5 Chief Officer's Report

There had been circulated a report by the Chief Officer which provided an overview of key national and local developments shaping service delivery of the Partnership. The Chief Officer introduced the report highlighting a number of important national developments shaping the local delivery of care, including the National Care Service Charter, Anne’s Law and the emerging Mental Welfare Strategic Plan. It was noted that these developments reflected an increased emphasis on rights, access to care, transparency and accountability and that work was ongoing locally to embed these principles through strengthened governance, assurance, workforce engagement and monitoring arrangements.

During discussion, members queried the extent to which assurance could presently be provided in relation to Anne’s Law, given that implementation remained at an early stage, and sought clarification on whether the Clinical and Adult Social Work Governance Committee was being assigned any additional responsibilities in this regard. The Chief Officer explained that assurance was derived from the existing person-centred approach already embedded across services, with further work underway to ensure alignment with the specific requirements of Anne’s Law. It was also clarified that no additional or exceptional responsibilities were being placed on the Clinical and Adult Social Work Governance Committee; rather, reporting arrangements were being strengthened to provide more regular scrutiny and assurance to the Board as part of normal business.

After discussion, the Integration Joint Board **noted** the updates provided.

6 IJB Revenue Budget Update

There had been circulated a report dated 18 May 2026 by the Chief Officer providing the IJB with an update on the revenue budget. The interim Chief Finance and Business Officer presented the financial report, highlighting the significantly improved financial position at the 2025/26-year end. It was reported that the unaudited underspend before underwriting was £14 million, representing a marked improvement from the position previously reported and reflecting tighter governance, stronger forecasting, delivery of savings and active in-year financial management. It was noted that, although the final requirement for partner underwriting had reduced, underlying demand-led and cost pressures remained significant, and the improved outturn did not remove the need for continued financial discipline and service redesign.

During discussion, Members welcomed the improved position and commended officers and staff for the work undertaken to strengthen financial management and deliver the turnaround. Questions were raised regarding the long-term sustainability of the financial position, lessons learned from the previous loss of control over cost drivers, the governance of reserves and financial risk and the implications of specific savings proposals, including the use of technology-enabled care, support for carers and GP services with special interests.

In response, officers advised that future financial sustainability would require continued savings, transformation and service prioritisation and that strengthened joint working with funding partners would be required in relation to risk, reserves and longer-term planning. It was also confirmed that care package reviews would continue to be undertaken on an individual and person-centred basis and that further assurance on this work would be provided.

Thereafter, the Integration Joint Board **agreed** to:-

(1) note the improved unaudited year-end financial position for 2025/26, including the reduced reliance on partner underwriting compared with the level assumed in the approved budget, and the associated improvement in financial grip, control and forecasting;

(2) acknowledge that, notwithstanding the improved year-end position for 2025/26, significant underlying demand-led and cost pressures remained and would require continued active in-year financial management;

(3) endorse the continuation in 2026/27 of the strengthened financial management arrangements introduced during 2025/26;

(4) note that financial sustainability would continue to be supported through the rolling three-year savings programme aligned with the Medium-Term Financial Strategy previously agreed by the Board;

(5) receive a report at each meeting of the Integration Joint Board on progress in delivering the savings programme and the overall financial position, including assurance on delivery and financial sustainability, together with a specific update on care package work;

(6) acknowledge the additional detail provided on the 2026/27 savings programme, including the savings schedule set out at Appendix 4, and the arrangements in place to monitor delivery and implementation progress;

(7) note the position on Integrated Impact Assessments (IIAs) in relation to the savings proposals, and that any proposal involving material service change, workforce impacts, changes to eligibility, access or care pathways, or potential implications for equality, safety or outcomes, would be referred to the Integration Joint Board for explicit consideration alongside a completed IIA;

(8) receive a further report to the Integration Joint Board, developed with funding partners, setting out proposals to: (i) confirm a refreshed shared risk appetite; (ii) establish a strengthened, jointly governed approach to reserves and financial risk; and (iii) identify priority transformation and service redesign actions to support longer-term financial sustainability; and

(9) stand down the recovery plan and request funding partners to consider this, with their response and recommendation to be reported to the Board at its July meeting.

7 Membership Updates and Appointments to Committees

There had been circulated a report dated 11 May 2026 by the Chief Officer which informed the Board of changes to the membership of the IJB and its Committees. The Legal Services Manager introduced the report, seeking approval to appoint Dr John Blake as Primary Care Adviser to the Board as a non-voting member. It was also noted that a stakeholder representative vacancy remained on the Clinical and Adult Social Work Governance Committee and that work was continuing to identify a suitable nominee. Members were advised that this was expected to be addressed in the coming months as part of the wider governance changes.

The Board was also advised of forthcoming Scottish Government legislative changes which would give voting rights to service user, carer and third sector representatives from 1 September 2026. Members were advised that consequential amendments to the Integration Scheme would be presented in July 2026, followed by revisions to the Governance Handbook in September 2026, together with support arrangements for members moving to voting status.

During discussion, concern was raised regarding future representation of the third sector, with Members suggesting that the Third Sector Interface/Aberdeenshire Voluntary Action should be considered as the appropriate representative body.

Members requested that officers consider and clarify the process for appointing Aberdeenshire Voluntary Action, or another suitable body, as the third sector representative on the IJB in light of the forthcoming legislative changes to voting rights.

Thereafter, the Integration Joint Board **agreed** to:-

(1) appoint Dr Jon Blake, General Practitioner, as the Primary Care Adviser to the Board as a non-voting member;

(2) note the existing stakeholder vacancy for a public, carer, third sector or staff representative member on the Clinical and Adult Social Work Governance Committee (CASWG) and that work would continue to identify a nominee; and

(3) note that the Scottish Government had intimated that there would be legislative change regarding voting rights for certain members of Integration Joint Boards as previously reported and that a full review of the memberships of Committees would be undertaken.

8 Equalities Mainstreaming and Progress Report 2024-2026

There had been circulated a report dated 21 April 2026 by the Chief Officer setting out the mainstreaming of equalities and progress in delivering Aberdeenshire Integration Joint Boards's Equality Outcomes 2024 -2026. The Interim Strategy and Transformation Manager introduced the report and highlighted that it provided assurance that statutory equalities duties were being met and that equality considerations were increasingly being embedded in planning, decision-making and service delivery. It was noted that progress had focused on embedding equalities in policy and planning, improving services for people with protected characteristics and strengthening workforce capability through engagement tools and training.

During discussion, Members welcomed the report and noted that it was largely narrative and activity focused. Members suggested that future reporting should include clearer outcome measures, including numerical targets or timescales where appropriate, to enable the Board to assess progress and impact more effectively. Clarification was sought on the number of project leads trained in engagement processes and officers advised that this reflected the level of current service redesign activity rather than a fixed training cohort. Members also emphasised the need to identify and report on gaps and measurable outcomes, particularly in relation to prevention and early intervention.

Thereafter, the Integration Joint Board **agreed** to note the report describing the mainstreaming of equalities and progress on implementation of Aberdeenshire IJB's Equality Outcomes 2024 – 2026.

9 Use of Special Urgency Powers 2025/26

There had been circulated a report dated 11 May 2026 by the Chief Officer on the use of delegated powers in cases of special urgency between 1 April 2025 and 31 March 2026.

The Programme Manager introduced the annual report on the use of the Chief Officer's delegated powers in cases of special urgency, submitted in accordance with the Integration Joint Board's Scheme of Delegation and Governance Handbook. It was highlighted that these powers had been used on one occasion during the last financial year and that the report was presented for assurance and transparency.

Thereafter, the Integration Joint Board **agreed** to note the use of the Chief Officer's delegated powers in cases of special urgency between 1 April 2025 and 31 March 2026.

10 Aberdeenshire Health and Social Care Partnership Draft Market Facilitation Plan

There had been circulated a report dated 14 May 2026 by the Chief Officer presenting the Aberdeenshire Health and Social Care Partnership (AHSCP) Market Facilitation Plan. The Interim Strategy and Transformation Manager introduced the report seeking approval of the draft Market Facilitation Plan ("the Plan"), which set out the Partnership's strategic approach to shaping, supporting and sustaining the local care and support market in line with anticipated demand and strategic priorities. It was noted that the Plan reflected current market pressures, including rurality, workforce challenges and the fragility of provision across key service areas and emphasised continued partnership working with independent and third sector providers.

During discussion, Members sought clarification on the practical implications of adopting the Plan and were advised that it was intended as a high-level strategic framework which would strengthen and support existing engagement with providers. Clarification was also provided that the timescales set out in the Plan referred to completion of the relevant work and reporting back to the Board, rather than the commencement of engagement. Members also noted that a market position statement on care homes and very sheltered housing would be brought to the Board for approval in September 2026. The importance of transparency regarding market fragility was acknowledged.

Thereafter, the Integration Joint Board **agreed** to:-

(1) note the Aberdeenshire Health and Social Care Partnership (AHSCP) Market Facilitation Plan; and

(2) approve the final version of the Market Facilitation Plan as one of the four supporting documents to the AHSCP Strategic Plan.

11 Strategic Delivery Plan 2025/26 - 2028/29 - Quarterly Performance Report

There had been circulated a report dated 12 May 2026 by the Chief Officer presenting the first quarterly performance report for the Strategic Delivery Plan 2025/26 – 2028/29.

The Programme Manager introduced the report noting that this was the initial version of the reporting format and that it would be refined further through the work of the short life performance working group
It was highlighted that the report provided a high-level update on the delivery including progress, challenges and risks and would in due course be shared with the Communities Committee and Area Committees in line with existing arrangements.

During discussion, Members welcomed the report and the developing format and made comments regarding the need for clearer metrics, targets and more granular data to support effective performance monitoring, particularly in relation to prevention and place planning. Assurance was provided that the short life working group would consider this further and report back in September. Clarification was also sought regarding references to savings in relation to the community hospitals review and it was confirmed that the review itself was not driven by savings but by service consistency and understanding population need, while separate efficiency measures were being considered through the budget process. Members requested that future reports make a clear distinction between the community hospital review and associated budget savings to avoid confusion.

Members also discussed the proposed reporting timescale for the learning disability day services review. Officers advised that the suggested two-year period was designed to give recent service changes sufficient time to become established and to enable a meaningful assessment of their impact.

Thereafter, the Integration Joint Board **agreed**:-

(1) to note the first quarterly performance report for the Strategic Delivery Plan 2025/26 – 2028/29;

(2) to note that the format of the quarterly performance report would continue to be refined in line with the wider performance framework review; and

(3) that the report would be shared with the Communities Committee and Area Committees as per current agreed performance reporting arrangements.

12 <u>Aberdeenshire Health and Social Care Partnership Draft Workforce Plan 2026-2029</u>

There had been circulated a report dated 28 April 2026 by the Chief Officer presenting Aberdeenshire Health and Social Care Partnership Workforce Plan 2026 – 2029 ("The Plan").

The Interim Strategy and Transformation Manager introduced the report seeking approval of the Plan, which set out the Partnership's approach to ensuring a sustainable, skilled and supported workforce to deliver safe and effective services over the next three years. It was noted that the Plan aligned with the Strategic Delivery Plan, Medium Term Financial Strategy and Market Facilitation Plan, and reflected key workforce challenges including increasing demand, workforce pressures, and the need for service redesign.

During discussion, Members welcomed the clearer integration of workforce actions into operational service plans and the strengthened accountability arrangements arising from this approach. Clarification was sought on the proposed recruitment measures, the approach to retention and the impact of service redesign on staff confidence and certainty. Discussion also took place on workforce pressures affecting third sector providers, including the potential effect of changes to migration arrangements and it was confirmed by officers that these matters were considered through contract monitoring processes.

Members emphasised the importance of gaining a clearer understanding of staff turnover, sickness absence and stress-related absence. Officers agreed to explore and incorporate more detailed exit interview data from NHS Grampian and Aberdeenshire Council to inform future reporting on the reasons for staff leaving. Members also noted the need to improve the visibility of Board Members and to strengthen staff wellbeing arrangements.

Thereafter, the Integration Joint Board **agreed** to approve the Aberdeenshire HSCP Workforce Plan 2026 - 2029.

13 Grampian Vaccination and Immunisation Annual Report 2025

There had been circulated a report dated 1 May 2026 by the Chief Officer presenting the Vaccination and Immunisation Annual report 2025.

The Consultant in Public Health Medicine/ Immunisation Coordinator introduced the report, which provided an overview of vaccination delivery across Grampian, including uptake levels, the introduction of new programmes such as RSV vaccination, equity of access and the financial position supporting delivery. It was highlighted that Aberdeenshire continued to demonstrate strong uptake levels across vaccination programmes, although challenges remained in some areas and among certain groups.

During discussion, members sought clarification on the public health implications of uptake levels falling below herd immunity thresholds. Officers advised that while Aberdeenshire's position compared favourably to other areas, there remained a need for continued efforts to maximise uptake and address local pockets of lower coverage. Further discussion took place on the financial oversight of vaccination services, with officers advising that budget scrutiny was undertaken through partnership governance arrangements and that there may be scope to provide the IJB with further visibility of this work.

Members raised questions about engagement with home-schooled children and young people. Officers acknowledged that this remained a complex national issue and that further work was needed to improve reach and uptake. It was also noted that vaccination uptake continued to be affected by misinformation, reduced confidence in vaccination and public fatigue following the pandemic. Members requested officers to explore options for bringing delivery and financial oversight of the Aberdeenshire vaccination programme within the IJB, either through a development forum or another appropriate forum, and to report back via the Chief Officer's Report.

Thereafter, the Integration Joint Board **agreed**:-

(1) that the Board was assured by the Vaccination and Immunisation Annual Report 2025; and

(2) to instruct the Chief Officer to submit the next annual report to the Integration Joint Board in 2027.

14 Aberdeenshire Health and Social Care Partnership Walk-in clinic update

There had been circulated a report dated 14 May 2026 by the Chief Officer on the preferred location for an Aberdeenshire Walk-In Centre as part of the walk-in centre pilot for Grampian.

The Interim Partnership Manager for Central Aberdeenshire introduced the report seeking agreement to Inverurie as the preferred location for the Aberdeenshire GP Walk-in Centre pilot, as part of the wider Grampian test of change. It was noted that the pilot aimed to improve access to same-day care for urgent but non-emergency needs, operating on a walk-in basis from 12 noon to 8.00 pm, seven days a week and that the pilot would be funded by the Scottish Government with no direct impact on IJB core budgets at this stage.

During discussion, Members expressed support for Inverurie as the preferred location but raised concerns regarding the practical delivery of the pilot. In particular, concerns were raised regarding workforce capacity and the risk of drawing staff away from existing GP and primary care services, the need for clear public communication on the purpose and scope of the service and the potential reputational risk to the IJB should the pilot fail to meet expectations. Members also sought assurance regarding continuity of care, data sharing, demand management, the location of the service and the longer-term implications should the pilot create expectations beyond the available short-term funding.

Officers advised that the pilot remained in development, the staffing and operational arrangements would require to be evaluated through implementation and that lessons were being drawn from other Grampian and national pilots. It was confirmed that the service would be delivered from the existing Inverurie hub site and that a range of clinicians would staff the service rather than GPs alone. Officers also advised that detailed communication and operating arrangements were still being developed. Members requested that further information on the service design, including responses to the issues raised, be shared with the IJB before the pilot commenced. It was also requested that a further report would be submitted during the pilot period to update the IJB on progress, risks and mitigating actions.

Thereafter, the Integration Joint Board **agreed**:-

(1) on the preferred location, in Inverurie, for an Aberdeenshire Walk-In Centre, as part of the walk – in centre pilot for Grampian;

(2) to instruct officers to share the final design and communication plan for the Inverurie GP walk-in centre pilot with the IJB, including responses to the issues raised, prior to the centre opening; and

(3) to instruct officers to submit a formal update report to the IJB midway through the Inverurie GP walk-in centre pilot, setting out progress, challenges, risks and mitigating actions.

At the end of the public section of the meeting, the Chair noted that the Board had now approved a suite of key strategic documents, including those relating to market facilitation, workforce, financial planning and the strategic delivery plan, together with the development of service plans to support implementation at operational level. It was acknowledged that this provided a stronger basis for future decision-making, albeit within a context of continued prioritisation and service redesign.

The Chair also invited Members to acknowledge the progress made by officers and executives in bringing forward this framework and noted comments that this had been undertaken in a way intended to support both the workforce and the care groups for which the Partnership was responsible.

15 2026/2027 Supplementary Procurement Work Plan (Social Care)

There had been circulated a report dated 27 April 2026 by the Chief Officer which provided a Supplementary Procurement Work Plan for approval.

The Strategic Procurement Manager introduced the report and highlighted relevant information on the Supplementary Procurement Work Plan in relation to training and skills development services for adults from a range of care groups.

Thereafter, the Integration Joint Board **agreed** to:-

(1) note the Supplementary Procurement Work Plan as detailed in Appendix 1, which included one Procurement Approval Form (PAF) in Appendix 2;

(2) note the Procurement Approval Form and Award reports for items on the Work Plan which were within the Integration Joint Board's remit and where the value of the matter was over £1,000,000;

(3) direct Aberdeenshire Council to approve the services detailed in the Supplementary Procurement Work Plan on behalf of the Integration Joint Board; and;

(4) note the contract requirements relating to care and support services aligning with the Integration Joint Board's Strategic Plan in relation to Outcome 2: People, including those with disabilities or long-term conditions or are frail, can live independently at home or in a homely setting in their community; and agree that an update on the outcomes from the approved procurements in the report would be included in the Commercial and Procurement Shared Service's annual report.

16 2026/2027 Supplementary Procurement Work Plan D2A

There had been circulated a report dated 18 May 2026 by the Chief Officer which provided a Supplementary Procurement Work Plan for approval.

The Strategic Procurement Manager introduced the report and highlighted relevant information on the Supplementary Procurement Work Plan in relation to Discharge to Assess.

Thereafter, the Integration Joint Board **agreed** to:-

(1) note the Supplementary Procurement Work Plan detailed in Appendix 1, which included one Procurement Approval Form (PAF) in Appendix 2;

(2) note the Procurement Approval Form and Award reports for items on the Work Plan which were within the Integration Joint Board's remit and where the value of the matter was over £1,000,000;

(3) direct Aberdeenshire Council to approve the services detailed in the Supplementary Procurement Work Plan on behalf of the Integration Joint Board; and

(4) note that the contract requirements relating to care and support services aligned with the Integration Joint Board's Strategic Plan in relation to Outcome 2: People, including those with disabilities or long-term conditions or who are frail, can live independently at home or in a homely setting in their community; and agree that an update on the outcomes from the approved procurements in the report would be included in the Commercial and Procurement Shared Service's annual report.