

Minutes of an Extra Ordinary meeting of the Health & Social Care **Integration Joint Board** held on Monday 30 January 2017 at 9.30am in Committee Room 2, Scottish Borders Council

Present:

(v) Cllr C Bhatia (Chair)	(v) Mrs P Alexander
(v) Cllr J Mitchell	(v) Dr S Mather
(v) Cllr F Renton	(v) Mr D Davidson
(v) Cllr S Aitchison	(v) Mrs K Hamilton
(v) Cllr G Garvie	Mrs A Trueman
Mr M Leys	Dr A McVean
Mrs E Torrance	Mr J McLaren
Mr D Bell	Ms L Jackson

In Attendance:

Miss I Bishop	Mrs J Davidson
Mr P McMenemy	Mrs T Logan
Mrs J Stacey	Mrs C Gillie
Ms C Petterson	Mr D Robertson

1. Apologies and Announcements

Apologies had been received from Mr John Raine, Dr Annabel Howell, Mrs Lynn Gallacher, Mrs June Smyth, Mr Andrew Murray, Mrs Evelyn Rodger, Mrs Jenny Smith and Mrs Alison Wilson.

The Chair confirmed the meeting was quorate.

2. Declarations of Interest

The Chair sought any verbal declarations of interest pertaining to items on the agenda.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted there were none.

3. 2016/17 Integrated Budget Monitoring Position – Recovery Plan

Mr Paul McMenemy gave an overview of the content of the paper and highlighted that the adverse variance for the budget delegated was £5.6m with a variance of £3m for the large hospital budget (set aside). He advised that in order to mitigate the social care element of the projected pressure (£378k) £145k was directed towards this pressure for the purchase of additional equipment by BAES. Scottish Borders Council remained committed to the identification of further management actions to address the social care financial pressures.

Mr McMenemy commented that the overall projected pressure of £5.2m and set aside of £3m were part of NHS Borders wider financial pressures of £13.9m in the current financial year. NHS Borders had committed to the application of £2m of contingency to reduce the overall financial cost pressure to £11.9m. Work had been undertaken on a recovery plan for the residual pressure which included £11.7m of mitigating savings, however further cost pressures across NHS wide functions of £1.6m had been projected as recently as the previous week, due to a range of emerging factors.

Mr McMenemy drew attention to section 4.6 in the report and commented that following the application of the £2m contingency, the residual financial pressure amounted to £11.9m in NHS Borders, of which just over £4m related to the budget delegated with the rest related to the large hospital budget and other NHS functions. He emphasised that section 4.7 of the report detailed the summary of how the recovery actions would deliver the mitigating savings.

Mr McMenamain advised that the partnership Executive Management Team had met and discussed the mitigating actions to be taken forward in December and January and had recommended that £677k of remaining Social Care funding be directed to mitigate the forecast outturn pressure on the delegated budget. Although it would not address the wider set aside pressures the Executive Management Team had also agreed to explore further funding sources and proposals to address the outstanding pressures and had committed to bring those back to a future meeting.

Mr McMenamain reiterated that social care was also under further pressure in the current financial year and work was underway to identify further remedial actions. He was keen that a more sustainable basis to take health and social care functions forward with recurring savings be identified and agreed.

Mrs Elaine Torrance assured the Health & Social Care Integration Joint Board that a lot of actions had been taken in regard to adult social care and by NHS Borders to bring the financial position back into balance. She suggested there was a need for an integrated transformational programme for 2017/18 and the longer term, with clear direction in terms of actions to be taken, regular reporting, and close monitoring of actions and outcomes.

Mr David Davidson enquired if the Executive Management Team (EMT) were able to provide any additional information that they thought might be helpful to the Health & Social Care Integration Joint Board in order for it to make a well informed decision? Mrs Torrance advised that the EMT had looked at all of the partnerships resources to date that were not actually allocated such as social care funding and any other uncommitted budgets that might be available ie the Integrated Care Fund (ICF). She commented that the EMT viewed the financial pressure as a joint problem and were keen to find joined up solutions and were actively considering and working on remedial actions to jointly reduce the deficit as much as possible.

The Chair noted that the intention to bring a balanced position appeared to be predicated on predominantly non recurring savings. She advised that she was reluctant to apply the £677k to address the NHS Borders delegated budget pressures at that point in time, as she viewed the monies as a reserve that the partnership had.

The Chair suggested directing Scottish Borders Council and NHS Borders to try and bring the budget back into balance and bear in mind that the £677k could be applied at a later date. She further suggested asking the EMT and Chief Officer to continue to work together to mitigate the pressures in the system, given there was every possibility that a worse financial position would be likely by April 2017.

Cllr John Mitchell sympathised with the recurring savings challenges faced by both Scottish Borders Council and NHS Borders.

Mr Davidson enquired what the alternative would be if the Health & Social Care Integration Joint Board (IJB) did not accept the recommendation provided by the EMT? Mrs Tracey Logan suggested it made little difference at what point in time the IJB decided to direct the monies prior to April 2017 as the same effort would be made to mitigate the financial pressures. She clarified that if the monies were directed and not required they would be returned and she reiterated that time and effort had been spent on ensuring the financial year was delivered in budget and a joint budget process would be undertaken for the following year.

The Chair suggested a revised recommendation of: The Health & Social Care Integration Joint Board (IJB) issue the direction that NHS Borders continue to work with partners and Scottish Borders Council to deliver a balanced outturn for the IJB in 2016/17, and notes that £677k of the Social Care Fund remains uncommitted and gives consideration to its application at the IJB meeting on 27 March 2017.

Mrs Jane Davidson agreed that it did not make a significant difference when the funding was to be directed to NHS Borders. She commented that the key issues were to keep the financial gap minimised, and look at transformational change and performance across the year.

Cllr Garvie supported the revised recommendation and commented that paragraph 5.3 within the report referred to finding other kinds of savings, which he suggested was the most critical point in moving forward and enquired how that would be achieved. Mrs Logan highlighted that the Development session later that morning would be addressing the budget for the following financial year and emerging pressures.

Mrs Linda Jackson enquired if the remedial actions taken were impacting on direct service provision? Mrs Logan confirmed that they were not at that point in time. Mr Murray Leys commented that there was continued purchasing of beds and services which added to the pressures on the budget.

Dr Stephen Mather commented that the principle was that the IJB had a budget and was able to direct that budget to where it was required the most and from the EMT recommendation that appeared to be the NHS delegated functions budget. The Chair agreed with the principle and suggested it was a timing issue as potentially at the year end there would be either a deficit or a surplus and the £677k was the only money available to the IJB to use to plug any financial gap at that time.

Mrs Gillie reminded the IJB that an overspend on the NHS delegated functions budget had been forecast from an early point in the financial year and whilst action was being taken to mitigate financial pressures the outturn position would not change significantly. Whilst she accepted that there could be a delay in directing funds she reminded the IJB that the outturn forecast would remain as a deficit as a result.

Further discussion focused on: delegation to the EMT to manage the best way possible to contain pressures; social care fund provided to address the living wage issue with the exact amount spent to implement the living wage; potential risks in making negative changes of service provision to individuals which might not be necessary if the £677k were allocated; investing to reduce blocked beds; joint working approach at a senior level to address delayed discharges and ensure that individuals were in the right place at the right time with the right health and care package; and support the EMT with their recommendation.

The Chair commented that her preference was to delay the commitment of the funds until the year end as the financial forecast was only as good as it was at that point in time.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the report and agreed to issue the direction that NHS Borders continue to work with partners and Scottish Borders Council to deliver a balanced outturn for the IJB in 2016/17.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** agreed to delay the approval of issuing a direction for the remaining 2016/17 uncommitted social care funding (£677k) to NHS Borders in order to support mitigation of the overall forecast pressures across the delegated budget until its meeting on 27 March 2017.

4. Any Other Business

5. Date and Time of Next Meeting

The Chair confirmed that the next meeting of Health & Social Care Integration Joint Board would take place on Monday 27 February 2017 at 2.00pm in Committee Room 2, Scottish Borders Council.

The meeting concluded at 10.10 am