

## **Inspection of Older People's Services 2017- DRAFT ACTION PLAN**

Risk or Issue	What good looks like	Action	Lead Person	Date to be completed	Evidence of completion (insert)	Measure/ Progress	RAG
effective communication plan which outlines the Partnership's vision and how the Partnership will engage and consult with all key stakeholders on key	plan which outlines the Partnership's vision and how the Partnership will engage and consult	1.1.1 Review and update existing Partnership communication plan	Jane Robertson, Strategic Planning and Development Manager	August 2017	HSC Comms Engagement Plan 16  H&SC Partnership - Proposed Comms Stra	Complete	G
	terms of service redesign, joint plans and policies	1.1.2 Review and update Partnership stakeholder lists and distribution lists  Use staff survey to evidence that staff aware of vision and consulted	Jane Robertson, Strategic Planning and Development Manager	August 2017	SC&H Locality office contacts.docx  ICS Staff List.doc  List of all Borders GPs as at 23.06.2017  Additional Contact List APR June 2017.x	Complete	G

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					APR Communications Plan v4.doc		
	1.2 Evidence of increased engagement and consultation activity specifically related to the Partnership Transformational Programme i.e. meetings with staff,	1.2.1 Record all partnership communication activity on overarching action tracker and individual project communication plans	Jane Robertson, Strategic Planning and Development Manager	Ongoing	H&SC Comms action tracker 2018 v.2.xls  Transformation & Efficiencies Event Age	Complete	G
	communication via newsletter	1.2.2 Agree arrangements going forward to support the ongoing engagement with members of the locality working groups	Jane Robertson, Strategic Planning and Development Manager	October 2017	Locality Consultation Communications Plan	Complete	G
	1.3 Ongoing commitment to support the Locality Working Groups which offers regular forum for engagement and consultation with representatives of all relevant stakeholder groups.	1.3.1 Distribute Health and Social Care Locality Plans for public consultation	Jane Robertson, Strategic Planning and Development Manager	July 2017	https://www.scotb orders.gov.uk/hscp localityplans	Complete Local measures of success of implementation of locality plans are being considered as part of a wider performance reporting framework for the Partnership	G
		1.3.2 Consult staff – a) workshop to	James Lamb, Portfolio	September 2017	a) Feedback	Complete	G

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		provide information on transformation projects b) Regular newsletters	Manager, Chief Exec Robert McCulloch- Graham, Chief Officer H&SC Integration		H&SC Transformation Work  H&SC Transformation Work  b) Newsletter  Health and Social Care News Update W  healthsocialcarenews SEP2017.pdf		
		1.3.3 Mental Health and Dementia Strategy Workshops	Peter Lerpiniere Associate Director, Mental Health	January 2018	Strategy. Comments collated & action plan in place.  Dementia Strategy Consultation Feedbac	Consultation dates on mental health transformation and development of dementia strategy. Sessions held separately Sep – Jan 2018.	G
2. Ensure the revised governance framework provides more effective	2.1 Revised Partnership governance structure in place and evidence of more effective and timeous approval and	2.1.1 Implement revised governance structure.	Robert McCulloch- Graham, Chief Officer H&SC Integration	February 2017	Revised Governance.pdf	Governance structure remains the same. Integration	G

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performance reporting and an increased pace of change.	decision making processes which in turn is supporting an increased pace of change.				Integration-performa nce-indicators-17021	performance measures.	
	2.2 Quarterly Partnership performance reports presented to Executive Management Team and Integration Joint Board and aligned to Ministerial Strategic Group performance reporting. Operational managers across the Partnership engaged in dialogue about data, performance and impact of service redesign.	2.2.1 Review effectiveness of revised governance structure.	Robert McCulloch- Graham, Chief Officer H&SC Integration	October 2017	IJB Quarterly Performance Report ( Refer to evidence provided at point 8	Complete	G
	2.3 A better understanding of staff views across the Partnership	2.3.1 Provide quarterly Partnership performance reports to the IJB.	Robert McCulloch- Graham, Chief Officer H&SC Integration	Complete	IJB Quarterly Performance Report - June 2017 Refer to evidence provided at point 8 (8.1)	Ongoing	G

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		2.3.2 Staff survey due to be sent out to all staff across the Partnership in Feb 2018	Robert McCulloch- Graham, Chief Officer H&SC Integration	April 2018	Report to be embedded as evidence	iMatter survey completed. Managers will use the report to make improvements	G
		2.3.3 Report Partnership Performance via published Annual Performance Report and to the Ministerial Strategy Group.	Robert McCulloch- Graham, Chief Officer H&SC Integration	July 2017	Annual Performance Report Refer to evidence provided at point 8 (8.1)	Complete	G
3. Further develop and implement the joint approach to early intervention and prevention services so there is a range of services working together that	3.1 A range of services work together that support older people to remain at home and help avoid hospital admission.	3.1.1 Hold a ½ day strategic review session to fully understand the current landscape and Identify the key components of a good EI & P approach for older people and identify gaps	Tim Patterson, Joint Director of Public Health	May 2018	Health Improvement & Self-Management ir Fall Conference Update (22.11.17).dc		A
support older people to remain at home and help avoid hospital admission.	3.2 There is a clear strategic overview of the early intervention and prevention landscape in the Borders supported by a clear understanding of the broad range of early intervention and prevention	3.2.1 Develop a strategic delivery plan to address gaps in EI & P identified at the strategic review session	Tim Patterson, Joint Director of Public Health	May 2018	Community Capacity leaflet (Nov 17) V3.px  Borders Community Capacity Project Reprince:  Evidence: Delivery plan to be	Develop map of ACPs focus to be placed on Care Homes in the first instance.	A

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Risk or Issue	What good looks like	Action	Lead Person	Date to be completed	Evidence of completion (insert)	Measure/ Progress	RAG
	approaches required to achieve positive outcomes for older people.				written Current prevention/early intervention services Patient pathway work Telecare Falls work		
		3.2.2 The community hubs and customer services are signposting to healthy living activities and preventing social isolation	Gwyneth Lennox, Social Work Group Manager	November 2017	Paper - Community Led Support, Hub Sigi	As Community Led Support is rolled out in each area, weekly planners detailing community activities and services are being drawn up and used by Customer Services and staff in the What Matters hubs to signpost and connect people on to a range of appropriate services. Data is then collated on the number and range of these signposted services	G

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	3.3 Early intervention and prevention providers understand their role and function in the broader landscape and develop complementary	3.3.1 Embed anticipatory care planning and plans into care assessment and planning	Murray Leys, Chief Social Work Officer	May 2018	Anticipatory care plans are within MOSAIC		A
	approaches with partners that enhance the positive outcomes experiences by older people.	3.3.2 Introduce specific software to collate and disseminate information on a range of positive activities on a locality basis.	Murray Leys, Chief Social Work Officer	December 2019	Software in place and being utilised	Contact with providers has been made	A
	3.4 Anticipatory Care Plans in Care Homes are up to date.	3.4.1 Ensure ACP in Care Homes are up-to-date.	Murray Leys, Chief Social Work Officer	June 2018	Early Warning Scores		А
4. Review delivery of care at home, care home, intermediate care and palliative care services to better support a shift in the balance of care towards more community based support	4.1 The older people's commissioning strategy is reviewed and strategic plans put in place based on demographic evidence across the Scottish Borders.	4.1.1 Update the older peoples commissioning strategy to reflect the outcome of the Older Peoples Housing Strategy currently under development.	Robert McCulloch- Graham, Chief Officer H&SC Integration	June 2018	Draft strategies to be completed.  Option appraisal report final (21.02.18  Demographic paper v3.7 Final.docx  Equality impact assessments	Consultation process being taken forward in relation to the Physical Disability Strategy  Michael Curran formulating a benchmarking report as follow up on the	A

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					undertaken.  Consultation process with local communities	demographic paper	
	4.2 Equality of access and choice for those who meet eligibility criteria in all areas of the Borders, in a timely way, that ensures individuals remain at home.	4.2.1 Development of Care Home and Care at Home Commissioning Strategy  Develop commissioning plan for all areas in the Borders in terms of access to Care at Home and Care Homes.	Murray Leys, Chief Social Work Officer	June 2019	Development of commissioning strategy and plan  Development of revised contractual specifications that ensure service outcomes and individual outcomes are met.	KPI's are measured in terms of both qualitative and quantitative information.  Measurement of individual outcomes  Consultation with local communities regarding current and future provision	A
	4.3 A cohesive commissioning plan that is informed by the market strategy is developed which clearly states expectation of contracted services both in the statutory sector and in the voluntary sector.	4.3.1 Plan cohesively to ensure that specifications for services are understood and align to ensure service users experience joined up health and social care services.  Commission all services in a way that ensures service users are given	Eric Livingston, Social care & Health Business Partner	June 2018	Evidence to be provided		A

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		maximum control via revised contractual requirements with providers.					
	4.4 All services are able to deliver choice and flexibility in line with SDS approach while integrated pathways for individuals ensure that people are able to achieve their outcomes.	4.4.1 Establish a contractual position with care at home providers which allows for flexible care at home delivery.?	Robert McCulloch- Graham, Chief Officer H&SC Integration	June 2018	Schedule C - Contract (2016).pdf		G
	4.5 Margaret Kerr Unit is viewed as a homely setting in Scottish Government performance figures	4.5.1 Discuss with Scottish Government the use of Margaret Kerr Unit as a homely setting in Scottish Government performance figures	Murray Leys, Chief Officer Adult Social Work	January 2018	Margaret Kerr letter to ISD. docx	Julie Kidd informed; ISD colleagues are considering the letter from Murray in the broader context of national data, service configurations in other NHS Board areas etc. ISD are going to be undertaking wider consultation nationally about these sorts of	G

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						measures. timescales not yet known	
5. Update the carers' strategy to have a clear focus on how carers are identified and have their needs assessed and met. Monitor and review performance in this area.	5.1 There is a clear pathway for identifying carers and ensuring their needs are assessed and met.	5.1.1 Develop a Carers support plan, eligibility criteria and pathway for assessing and supporting carers	Susan Henderson, Planning Manager	April 2018	Pathway in place with supporting documentation  Scottish Borders Carers Eligibility Fram  Adult Carers Support Plan.docx		G
		5.1.2 Put communication and training plans in place to ensure stakeholders are aware of the legislation	Susan Henderson, Planning Manager	April 2018	DRAFT Communications Plan  DRAFT Stakeholder Analysis 91217 - Care	Remove the word draft from both documents	G
	5.2 A carers strategy is in place that indicates how carers needs are identified and have their needs assessed and met.	5.2.1 Carers strategy 2017-19 agreed and published that states how carers needs are identified and met.	Susan Henderson, Planning Manager	April 2018	Carers Act policy and procedure 20318.doc	Consulting on a 2018-19 Strategy and preparing for a 2019 strategy	G

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	The partnership monitor and review this performance				Caring Together - Supporting Carers Sti Project Proposal Health Needs Assessi		
		5.2.2 A performance process in place to monitor and review progress in identifying and supporting carers	Susan Henderson, Planning Manager	April 2018	Reporting regularly to IJB.  Carer feedback. See quarterly report at point 2.2	Measure the increase in uptake of carers support plans. The carers support plan includes the monitoring information required by the Scottish Gov. The Borders Carers Centre (BCC) will maintain information and report to the IJB and Scottish Gov. BCC will update their IT to facilitate this.	G

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		5.2.3 An assessment of the health needs of carers in Scottish Borders is produced	Tim Patterson, Joint Director of Public Health	May 2018	Health Needs Carers Stakeholder event ag Health Needs of Carers Report - DRAF	Draft Health needs Assessment has been completed Recommendations and action plan are being prepared following the stakeholder event on 01.05.18	G
6. Ensure that people with dementia receive access to a timely diagnosis	6.1 Clinicians will be supported to recognise the importance of a dementia diagnosis, make appropriate referrals, and support people through their diagnosis.	6.1.1 Develop and circulate a checklist of "things to consider" in relation to dementia diagnosis for GPs, Junior Doctors and Care Homes.	Peter Lerpiniere, Associate Director, Mental Health	May 2018	V1.3 Leaflet for GP's, Junior Doctor's (	"Checklist" will be developed by Dementia Strategic Partnership Group (DSPG).  Possibly pass to OPAH to take forward-Peter/Rob to confirm	А
	6.2 Resources will be utilised as effectively as possible to widen opportunities for access to diagnostic services.	6.2.1 Carry out awareness session on TiME agenda November facilitated by MHOAS	Peter Lerpiniere, Associate Director, Mental Health	November 2017	The Importance of Diagnosis in Dementia		G
		6.2.2 Consider increasing capacity to carry out more memory clinics	Peter Lerpiniere, Associate Director, Mental Health	October 2018	Sessions held Sept 17 - Dec 17 with further sessions planned for Jan 2018	MH strategy & dementia strategy consultation events are underway and will include	А

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						evaluating capacity to rebalance resources to support more clinics.	
						The dementia strategy is being written and Transformation Programme is taking this forward.	
		6.2.3 Map the patient pathway from referral to diagnosis to entry on to Dementia Register to look for any challenges and areas for improvement	Peter Lerpiniere, Associate Director, Mental Health	July 2017	Diagnosis of Dementia - Pathway.	Mapped and areas identified for improvement include communication with GPs to request diagnoses be added to the register (see action 7).	G
	6.3 All patients who receive a diagnosis of dementia will be recorded on the primary care register.	6.3.1 Discuss with GP practices in order to carry out a gap analysis of the diagnoses on MHOAS records against GP records	Peter Lerpiniere, Associate Director, Mental Health	August 2017	No evidence available – telephone calls		G
	6.4 All people given a diagnosis have an understanding of what to expect from the service.	6.4.1 Write letters to GP practice to follow up on discussions in point 5 above and ask GP to add missing diagnoses	Peter Lerpiniere, Associate Director, Mental Health	September 2017	DoD Letter - GP Practices - Sept 17.da		G

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		on to register 6.4.2 Adjust first assessment letter used by MHOAS to include clear diagnoses & request to GP to add to dementia register	West Team secretary/ Consultant Psychiatrist	July 2017	MHOAS Assessment template.docx	Discussed at Mental Health Operational Group and agreed for implementation.	G
		6.4.3 Develop patient awareness leaflet to set expectations of what will be offered / delivered	Peter Lerpiniere, Associate Director, Mental Health	June 2018	PDS Borders Leaflet for Patients (Draft).p	Draft leaflet prepared – MHOA Team & Borders Dementia Working Group to take forward	A
7. Take action to provide equitable access to community alarm response services for older people.	7.1 Protocol in place for a comprehensive responder service that is equitable to all.	7.1.1 Produce protocol	Murray Leys, Head of Adult Social Care	September 2018	Protocol in place for responder service	SB Cares shall produce information that relates to the success of the alarm service.	A
	7.2 Older people have access to a 24 hour response service	7.2.1 Audit current systems through use of SWOT analysis.	Murray Leys, Head of Adult Social Care	September 2018	Consultation undertaken with local communities and other stakeholders		A
	7.3 Resilience aspects of current (Tunstall) technology (SB Cares risk owner)	7.3.1 In conjunction with a Falls Strategy increase focus on telecare and establish feasibity of introducing a universal alarm service	Murray Leys, Head of Adult Social Care	April – December 2018	Actions from strategy realised via implementation plans.  BOPPP highlight reports to show scrutiny of work – to be embedded		G

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8. Provide stronger accountability and governance of transformational change programme. Ensure that: progress of the strategic plan priorities are measured and evaluated; service performance and financial monitoring are linked; locality planning is implemented and leads to changes at a local level; independent needs assessment activity is included in the joint strategic needs assessment; There is appropriate oversight of procurement and	8.1 There is clear evidence of the impact of improvements and service redesign on the delivery of local strategic objective as laid out in the Strategic Plan through:  • Annual performance report  • Quarterly performance reports to IJB  A number Ministerial Strategy Reports	8.1.1 Improve the content, structure and format of the IJB quarterly performance reports	Jane Robertson Strategic Planning and Development Manager	October 2017	IJB Annual Performance Report :  DRAFT IJB Annual Report 2017 -18 (May  IJB Quarterly performance reports can be found at: https://www.scotb orders.gov.uk/dow nloads/download/8 72/joint board qu arterly performanc e reports  H&SC Partnership Annual Performance F	Completed  Note: The 2017-18 report is in DRAFT format – pending updates have been highlighted in yellow - due to be approved 31.07.18.	G

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commissioning work; A market facilitation strategy is developed and implemented					H&SC Partnership Annual Performance I  Next MSG submissions -FILE, Leadership Group, IJB, EMT  Locality Plans:- https://www.scotb orders.gov.uk/dire ctory record/4923 4/health_and_soci al_care_locality_pl ans/category/306/ current_consultatio		
	8.2 - Commissioning & Implementation Plan in place	8.2.1 Ratification of Commissioning and Implementation Plan by IJB	Robert McCulloch- Graham, Chief Officer H&SC Integration	December 2017	IJB Agenda 23.10.17.pdf  IJB Minutes 23.10.17.doc	THE IJB was presented with a finalised Commissioning & Implementation Plan at its meeting on 23rd October 2017	G
	8.3 Fully costed Commissioning and Implementation Plan and Locality Plans in place. Clear identification of financial costs/benefits and expected outcomes	8.3.1 Both IJB and strategic planning group bodies have timetabled development sessions throughout the year which will cover strategic planning and commissioning	Robert McCulloch- Graham, Chief Officer H&SC Integration	July 2018	Strategic needs analysis	Review/Develop the "bath tub model" i.e. Community Capacity & relation to hospital capacity. Work has been commissioned.	A

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	including all project briefs / PIDs.	functions with a clear inclusion of outcomes and value for money.  Further development of financial elements of Locality Plans and demonstration of "fair"					
	8.4 Comprehensive assessment of performance impacts of Financial Planning efficiency targets and in-year recovery plans.	share"  8.4.1 Refer to Action Point 9	Robert McCulloch- Graham, Chief Officer H&SC Integration	June 2018	NHS Recovery Plan NHS financial plan SBC financial plan IJB financial statement Descriptor of how strategy not impacted by above  IJB financial planning budgetary control reports	Refer to Action Point 9  The IJB Financial Plan is not directly linked to performance outcomes.  The 18/19 budget has gone to IJB, further work required from NHS and Scottish Government to close the 5 million funding gap.	G
	8.5 Clear mechanisms in place for progressing and monitoring locality implementation plans. Clear evidence of changes made at a local level	8.5.1 Continued support for locality working groups to take on monitoring role of progress of implementation of Locality Plans	Robert McCulloch- Graham, Chief Officer H&SC Integration	April 2018	Locality Action Plans have been set up Representatives from locality offices sit on the Strategic Partnership Group (SPG) and report on progress.	SPG to monitor progress	G

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		8.5.2 Implementation of robust reporting mechanisms to evidence changes made at a local level	Robert McCulloch- Graham, Chief Officer H&SC Integration	September 2017	Extension of locality co- ordinator role until 31 March 2018 Progress reports Locality Plans	Complete	G
	8.6 Commissioning and Implementation Plan approved by IJB	8.6.1 Commissioning and Implementation plan ratified by IJB October 2017	Robert McCulloch- Graham, Chief Officer H&SC Integration	December 2017	IJB agenda and minute; Refer to documents provided at point 8 (8.2)  Refer to Joint Strategic Commissioning plan below	The Commissioning and Implementation Plan was presented to the IJB 23.10.17	G
	8.7 Regular monitoring and reporting of the Commissioning and Implementation Plan	8.7.1 Monitor the Commissioning and Implementation Plan	Robert McCulloch- Graham, Chief Officer H&SC Integration	July 2018	Joint Strategic Commissioning and In SPG Minutes (10.01.18).doc	The Commissioning & Implementation Plan has now been combined with the Strategic Plan to create one document, with a draft going to the SPG on 16.05.18 for approval before EMT and the IJB.	G
	8.8 A medium-term Market Facilitation Plan and regular and frequent reports to the IJB over its	8.8.1 Development, approval and implementation of a Market Facilitation Plan for the IJB	Robert McCulloch- Graham, Chief Officer H&SC Integration	August 2018	Market Facilitation Plan IJB agenda and minute	Ongoing	А

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	delivery		(Eric Livingston)		Refer to documents provided at point 8 (8.2)		
9. Develop and implement a detailed financial recovery plan to ensure savings proposals across NHS Borders and council services are achieved	9.1 A joined-up approach to ensure that the partnership medium-term financial plan not only underpins its Strategic and Commissioning Plans, but assures its affordability, robustness and sustainability. Its component provisions and assumptions are transparent and consistent.	9.1.1 Develop and implement a detailed financial recovery plan to ensure that a sustainable financial position is achieved and agreed by the Integration Joint Board.	Carol Gillie Director of Finance (NHS)  David Robertson Chief Financial Officer Chief Financial Officer IJB — Recruitment pending	June 2018  There is a joint EMT on 14 <sup>th</sup> March to consider what the 3 partner organizations can do to address the financial challenge and to develop integrated and medium/longer term financial planning.	Actions from EMT Financial Planna 2018-19.pdf  IJB Presentation to be embedded	A Recovery Plan was approved by the IJB in January 2017 – total value of savings delivered in excess of £4m, enabling a breakeven outturn position  The partnership's new Medium-term Joint Financial Planning and Reserves Strategy was approved by the IJB on 27 February 2017  IJB presented with a financial plan paper on the 23.04.18. Work is ongoing on a longer term sustainable financial plan.	G

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	9.2 The delivery of a balanced, affordable and sustainable medium-term financial plan for the Health and Social Care Partnership which will be presented to members of the IJB as its Financial Statement.	<ul> <li>Identification of the impact of the current planned transformation and redesign programme in terms of resource realignment, efficiency opportunities and ongoing sustainability requirements beyond transitional funding arrangements</li> <li>Identification of further joint opportunities for service redesign and agree a joint plan for any associated capital or revenue investment requirements</li> <li>Implementation of a medium-term solution for addressing the recurring efficiency gap across the partnership's devolved and large hospital budget setaside resulting from non-recurring savings delivered in current and historic years</li> <li>Identification of any additional investment</li> </ul>	Carol Gillie Director of Finance (NHS)  David Robertson Chief Financial Officer  Chief Financial Officer IJB — Recruitment pending	June 2018	Balanced 2018/19 Financial Statement  All recurring pressures to be addressed by recurring mitigating actions  Delivery of financial planning and reserves strategy over medium-term	Partnership approved its 2017/18 Financial Statement on 27 March 2018 Noting that majority of healthcare savings within 2016/17 recovery plan were non-recurring. Due diligence carried out at the inception of IJB confirmed the IJB had received a fair provision of resources as part of the delegated functions from the overall Health & Social Care resources available, however this was not confirmed to be adequate and had required recurring efficiency targets to achieve financial balance.  2017/18 Financial Recovery plan has again been underpinned by non-recurring measures and has	A

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		requirements associated with the delivery of the partnership's approved Strategic Plan and how these investment requirements can be met				required additional non-recurring monies to be approved to Health and Social care delegated functions.  The IJB Financial Plan and provision of health and social care for 2018/19 is currently in discussion. This will confirm the level of efficiency required to achieve a breakeven financial position. The IJB is progressing a Transformation and Efficiency Programme which will contribute a level of efficiency savings from the delegated functions.  The quantum of the contribution from the T&EP has yet to be confirmed.	

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10. Ensure that there are clear pathways for accessing services and that eligibility criteria are developed and consistently applied. It should communicate these pathways and criteria clearly to all stakeholders. The partnership should also ensure effective management of any waiting lists and that waiting times for services and support are minimised.	10.1 Accessible pathways are in place to enable people to access appropriate and timely support	10.1.1 Deliver community led services via hubs in localities  Provide shortened 'what matters' assessments	Murray Leys, Chief Officer Adult Social Work	January 2018	Waiting List Monthly Report Performance (  Waiting List Weekly Report Team Leaders  Waiting Time Report WC 30-04-18.pdf  Paper - What Matters Hubs. docx  Introduction to Social Care Leaflet.pdf  Community Led Support Hub Screenir  Matching unit evidence91017.docx	Waiting list figures are discussed at the monthly Performance Clinic.  Figures are issued to Locality Team Leaders on a Monday morning showing people on waiting lists and how long they have been on it.  A new waiting list report giving weekly/monthly figures for people waiting on assessment and also care at home / care home placement goes to IJB Leadership Team Meeting with consideration being given to inclusion in the IJB Quarterly Report. Measures will be monitored at the	G

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		10.1.2 Through matching unit provide more speedy access to services  Develop a more robust hospital to home process	Jane Prior, General Manager, Patient Pathways	May 2018	Matching Unit evidence (2).docx  Discharge to Assess Policy.docx  Pathways from hospital final version.  Pathways from hospital Professionals	Finance and Performance Group  The Discharge to Assess Policy paper is due to be scrutinized by the IJB Leadership Team in the next couple of weeks before going to IJB Board to be formally adopted as Policy. Documents for service users/ family/carers and professionals will be available following IJB approval process.  Asked Jane for more up-to-date matching Unit evidence	G
11. Work together with the critical services oversight group and adult protection committee to ensure that: risk assessments and risk	11.1 Risk assessment and management plans are completed and recorded in MOSAIC  Quality assurance process reflects appropriate responses	11.1.1 Quarterly Adult Protection file audits to be carried out. The Adult Protection Committee Coordinator conducts a 100% Audit of Adult Protection. All Audits are reported to the AP Audit sub group	Stuart Easingwood, Chief Officer Public Protection	August 2017	AP Audit - Referrals & Interventions Q1 2 AP Quality Assurance & Audit Te	There is now an AP Audit Tool on Mosaic which allows Teams to self-audit or audit neighbouring teams The Adult	G

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management plans are completed where required; quality assurance processes to ensure that responses for adults who may be at risk and need of support and protection improve; and improvement activity resulting from quality assurance processes is well governed	to Adults at risk	and any team remediation is captured through an individualised team improvement plan.  Produce performance reporting reports for the AP Audit sub group, AP Committee & CSOG. These reports will be subject to peer scrutiny particularly in relation to Risk assessment, Protection plans, Chronologies and Case Conferences.  Refresher AP training to be set up.			AP Quarterly Report Q3 2017-18.pdf  11.1.1 - AP Monthly Report March 2018.p  2017-18 Q3 ASP KPI Scorecard (Updated 2  Adult Protection KPI Score Card – Update  AP Learning & Development Scoreca  Inspection File Reading Improvement  AP Highlight Report DP Dec 2017.docx  SB Adult Support & Protection Training Ma	Protection procedure has been refreshed  AP Level 3 Refresher Training has been set for Nov 2017 and this will further support the AP Process, Outcomes and use of Risk assessment, Protection Plans and Chronologies.  New Monthly reports for AP data are being produced and replace the currently quarterly reports.  Performance reports to be discussed at the Finance & Performance Group.	

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					Level 3 ASP LD Figures 2017.docx		
12. Develop and implement a tool to seek health and social care staff feedback at all levels. The partnership should be able to demonstrate how it uses this feedback to understand and improve staff experiences and also its services.	12.1 Health and Social Care staff feedback is sought and used to inform staff experience and support services	12.1.1 Implement i- matters staff survey across the Partnership	Robert McCulloch- Graham, Chief Officer H&SC Integration	May 2018	Provision of joint combined list to iMatter National Team iMatter (NHS) Result of iMatters to be embedded	Survey completed, action plan being prepared and will be sent to managers to take forward recommendations.  Update report to be provided by Jennifer Boyle	G
		12.1.2 Examination of iMatter output  Include feedback through Self-evaluation strategy  Annual Appraisal process/PRD  Report to Integration Joint Board Team	Robert McCulloch- Graham, Chief Officer H&SC Integration	July 2018	Self-evaluation strategy  NHS Borders HSCP iMatter Timetable.doc		A

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Risk or Issue	What good looks like	Action	Lead Person	Date to be completed	Evidence of completion (insert)	Measure/ Progress	RAG
13. Develop and implement a joint comprehensive workforce strategy, involving the third and independent sectors. This should include a focus on sustainable recruitment and retention of staff, building sufficient capacity and skills mix that delivers high quality services	13.1 Draft Integrated Workforce Development Plan developed will reflect the workforce requirements of the Third and Independent Sectors within the Integrated Workforce Plan for the Partnership Including sustainable recruitment plans	13.1.1 Draft Joint Workforce Plan to include third and independent sectors to incorporate plans for developing a sustainable workforce. Present Draft Workforce Plan for sign off by IJB.	Robert McCulloch- Graham, Chief Officer H&SC Integration	June 2018	Draft Workforce Plan 2017-2019 v1.docx	Draft Plan complete process for agreement to take place next stage will include third and independent sector.	G
		13.1.2 Work with the 3rd and independent sector to collate information on recruitment & retention in the workforce	Robert McCulloch- Graham, Chief Officer H&SC Integration	November 2018	Private and 3rd sector staff survey  Minutes of providers meeting to be added		A
		13.1.3 Support the 3rd and independent sector with a strategy to meet the demands of the workforce – plan for this?		November 2018			A

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