



Minutes of the meeting of the **Health & Social Care Integration Joint Board** held on 18 December 2017 commencing at 2.00 pm in Committee Room 2, Scottish Borders Council

Present:

(v) Cllr J Greenwell	(v) Dr S Mather (Chair)
(v) Cllr S Haslam	(v) Mrs K Hamilton
(v) Cllr T Weatherston	(v) Mr J Raine
Mr R McCulloch-Graham	(v) Mr T Taylor
Mrs J Smith	Dr C Sharp
Mr D Bell	Mrs E Reid
Ms L Gallacher	Dr A McVean
Mrs Y Chapple	

In Attendance:

Miss I Bishop	Mrs J Davidson
Mrs T Logan	Mr P Lunts
Mr M Curran	Mr J Lamb
Mrs C Gillie	Mrs D Rutherford
Ms S Holmes	

1. ANNOUNCEMENTS & APOLOGIES

Apologies had been received from Cllr David Parker, Cllr Helen Laing, Mrs Susan Swan, Mrs Claire Pearce, Mr Murray Leys, Mr John McLaren, Mr David Davidson, Mrs Jill Stacey and Mr Colin McGrath.

The Chair confirmed the meeting was quorate.

The Chair welcomed Mrs Erica Reid, Lead Nurse for Community to the meeting who was deputising for Mrs Claire Pearce.

The Chair welcomed Mrs Yvonne Chapple, Staff Side Representative to the meeting who was deputising for Mr John McLaren.

The Chair welcomed a range of other attendees to the meeting including Mr Philip Lunts, Mr Michael Curran, Mrs Debbie Rutherford and Mr James Lamb.

The Chair welcomed members of the public to the meeting.

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. MINUTES OF PREVIOUS MEETING

The minutes of the previous meeting of the Health & Social Care Integration Joint Board held on 8 November 2017 were approved.

4. MATTERS ARISING

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the action tracker.

5. CHIEF OFFICER'S REPORT

Mr Robert McCulloch-Graham gave an overview of the content of the report and highlighted the opening of Craw Wood; hospital to home support; visit to the Cheviot model and the work already undertaken there by a multi-disciplinary team; reablement function; regional work, workstreams, sharing innovation across the health and social care partnerships; career pathways and recruitment; new GP contract; looking at diabetes services; the drug issue locally involving a fake opiate which involved both NHS Borders, Scottish Borders Council and partners; and the Leadership Team across the partnership jointly forward planning, with facilitation from the Scottish Government, to review the existing commissioning plan and look at how the team works together across the organisations.

Cllr Shona Haslam enquired if there were any known impacts yet, on implementing the mechanics of the discharge to assess policy. Mr McCulloch-Graham advised that it was too early to provide any substantial evidence.

Cllr Haslam was keen to understand if the current level of funding was making a difference. Mr McCulloch-Graham commented that he had agreed to stay within the envelope of funding agreed, however, should the Hay Lodge funding not be fully utilised he was keen to divert it to other areas such as Berwickshire, central Borders and Hawick to expand the roll out further.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the report.

6. Inspection: Joint Older People's Services Report

Mr Robert McCulloch-Graham gave an overview of the content of the report.

Mrs Karen Hamilton enquired if the staff survey sent to all staff across the partnership was the imatter survey. Mr McCulloch-Graham confirmed that it was.

Mrs Hamilton enquired about Action 13 on page 21 and what the evidence of completion actually was. Mr McCulloch-Graham confirmed that it was the workforce strategy.

Mr Tris Taylor was concerned at the quality of the report and highlighted several elements that were marked as both "on going" and "complete". Mr McCulloch-Graham assured Mr Taylor that the Inspectors would be looking for evidence of activity and the action plan had been designed to capture that evidence, hence the classifications used.

Mr Taylor sought assurance around the adequacy of the evidence and learning gleaned. Mr McCulloch-Graham assured Mr Taylor that the actions within the action plan were cross referenced across several of the recommendations, as a consequence of the Inspectors being unclear in their recommendations.

Mr Taylor suggested the documentation and attachments should have been provided to the Board in a more completed state to enable members to make better informed decisions.

Dr Angus McVean commented that he would expect to see a greater percentage of anticipatory care plans updated and completed as a consequence of the early warning pressure sores system, which was different to anticipatory care plans in care homes and not part of the GP primary care remit.

Mr John Raine recognised the difficulty of providing evidence against recommendations that were unclear. He commented that the action plan was classified as draft and he recognised that it would evolve further once the meeting with the Inspectors had taken place. He was content to support it as a work in progress.

Mrs Jenny Smith enquired if learning and good practice was being gleaned from the other national partnerships as listed on page 4. Mr McCulloch-Graham advised that nationally the Chief Officers and Directors of Finance met and shared good practice.

Mrs Smith suggested references to the third sector should be included in relation to workforce planning.

Mrs Lynn Gallacher suggested references to carers should also be included in regard to the delivery of care, early intervention and prevention, and diagnosis of dementia.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** accepted the report subject to it being a work in progress and recognised that it would change following a response from the Joint Inspectorate Team.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** sought an update at a future meeting on progress against the various recommendations.

7. Appointment of the Chief Financial Officer - Integration Joint Board

Mr Robert McCulloch-Graham gave an overview of the content of the report and highlighted that the overall budget for the partnership was in the region of £160m. He therefore felt it essential that the Integration Joint Board should have its own professional financial support as well as the continued professional financial support from both NHS Borders and Scottish Borders Council.

Mr John Raine supported the recommendation of a joint permanent appointment and questioned the difference in the salaries scope. Mrs Carol Gillie confirmed that the job description had been through due process and evaluated by both organisations and the gradings and salaries quoted were correct.

Further discussion focused on: how remuneration for the post would be decided for a successful candidate; staffing across the partnership; individual choice on employing body;

and lobbying for one single set of terms and conditions for a joint model; raising difficulties around recruitment with the Cabinet Secretary.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** agreed to the permanent joint appointment for a Director for Finance for the IJB, by NHS Borders and Scottish Borders Council.

The Chair advised that he would consider writing to the Cabinet Secretary on behalf of the Integration Joint Board to point out the difficulties and anomalies with recruitment.

8. Community Capacity Building - Transformation Proposal

Mr Michael Curran gave an overview of the content of the report and highlighted, the makeup of the team, zero background costs and suggested it was critical in terms of the delivery of some of the transformation programmes to be able to continue with community based support mechanisms.

A discussion took place that focused on several issues including: modelling of activity to push money out to the community; return on investment; compliments the early intervention and engagement outcomes within the Strategic Plan; expectation of further engagement with local communities to expand the proposal to combat loneliness for people; builds on the work of the Dementia working group in communities; success of various initiatives under the proposals such as men's sheds and soup clubs; evolved into a 3 phase project; exit strategy and self sustaining activities; collation of all community lead hub initiatives over the next 12 months to assist communities to look after themselves; and this is the first of similar projects funded through the Integrated Care Fund totalling £500k that might return to the Board to seek further funding.

Mrs Carol Gillie reminded the Board that the source of funding for the proposal to date had been non recurring funding from the Integrated Care Fund. She commented that it would be essential if the proposal were to be agreed, to have a plan on the sustainability of services in the future either through other sources of funding or volunteer services.

Dr Cliff Sharp welcomed the initiative to assist communities, but challenged it as a measure in terms of outcomes and was keen to see evidence to support the proposal in terms of fewer admissions to hospital and less activity in primary care services.

Cllr Shona Haslam commented that the scope for evidence was about transforming peoples' lives and given the wider understanding of social impacts, she therefore supported the proposal.

Dr Angus McVean suggested there were assumptions being made in terms of outcomes and a lack of evidence to support those assumptions, he highlighted that there was no evidence to support such a high level of funding. He further commented that the proposal did not decrease the number of people needing to see their GP and reminded the Board of the pressures on services for people ending up in Borders General Hospital as there were not enough carers available or care home places available. He suggested a significant difference could be made to those issues by diverting that level of funding.

Mrs Lynn Gallacher commented that she had met the community capacity team and welcomed the work they undertook. She was aware that there was little evidence to support the proposal and she reminded the Board of the immense pressure placed on carers and the need to support them.

Mrs Tracey Logan commented that it was a modest amount of money and the Board should not be solely focused on keeping people out of hospital as it also had a responsibility to engage with communities around their whole wellbeing. She suggested the proposal was about ultimately mainstreaming some of the activities whilst providing initial short term funding to get them established and moving towards self sustainability. She commented that once the framework was properly joined up there would be scope to disinvest in the proposal and suggested the funding be agreed for a 12 month period and during that 12 month period, evidence of the impact on clinical services in secondary care and primary care could be gathered.

Mr John Raine commented that he could see the arguments from both sides and was supportive of Mrs Logan's suggestion to agree to fund the proposal for a further 12 months whilst looking at the potential to mainstream activities and to see if any clinical evidence could be brought forward.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** agreed to continue with the project for 12 months with the proviso that there was an evaluation by the partnership organisations on the projects listed within the document within 12 months and an interim update provided in 6 months time.

9. Discharge to Assess - Hospital to Home Pilot

Mr Robert McCulloch-Graham gave an overview of the content of the report and advised that since the last meeting he had engaged with other professionals across the region and he explained that the ethos of hospital to home was to focus on re-enablement of people in both the hospital and community settings. He commented that he was keen to appoint 5 healthcare workers to be led by District Nurses, to cover areas of particular concern in regard to delayed discharges and for an evaluation to take place after 4 months. He emphasised that the throughput of patients leaving hospital and going through re-ablement was based on a minimum of 3 patients per HCSW every 3 weeks. Over the period of 4 months it equated to offering capacity for 255 patients leaving hospital. The cost per patient would therefore be £680.

Mrs Karen Hamilton enquired if the 4 month evaluation would commence in January 2018. Mr McCulloch-Graham confirmed that it would.

Mrs Jenny Smith enquired what healthcare support worker progress would look like. Mrs Erica Reid advised that the model described had been tested and within 3 weeks reablement had been achieved together with clear outcomes.

Mrs Lynn Gallacher was supportive of the changed professional responsibility and was keen to strengthen and signpost to the carers support plan to gain a cultural shift and ensure family carers had support and intervention.

Mrs Jane Davidson suggested such a change could be incorporated now in the approach and Mrs Reid confirmed that that was the intention.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** agreed the extension of the “Hospital to Home” pilot across the Hawick, and Central localities in addition to the Berwickshire locality.

10. Scottish Borders Health & Social Care Winter Plan 2017/18

Mr Philip Lunts presented the joint winter plan presentation.

Mrs Lynn Gallacher enquired about the effect of readmission figures on length of stay. Mr Lunts commented that historically NHS Borders had higher readmission rates than other areas of NHS Scotland, however he was confident that it was a data issue and confirmed that changes had been made and there had been no increase in readmission rates as a consequence.

Mrs Jane Davidson suggested the next update on the winter plan should present by locality and capacity building plans going forward.

Cllr John Greenwell enquired about the level of flu vaccination uptake. Mr Lunts confirmed that the figures quoted were for NHS staff uptake and suggested that the public uptake level would be about 70%.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the presentation.

11. The Carers Act (Scotland) 2016

Mrs Debbie Rutherford presented the Carers Act (Scotland) 2016 presentation.

Mr Tris Taylor enquired if there were any areas of concern not being addressed by the new legislation. Mrs Lynn Gallacher advised that some national organisations had been keen to see the scope of the Act encompass more. She was aware that full guidance on eligibility criteria was still awaited and there remained some issues with regard to funding for the implementation of the Act. She further commented that there were areas of work to be progressed in regard to Learning Disabilities referrals and signposting for Dementia carers and it was anticipated that the Act would support that work in the Scottish Borders.

Mr Taylor enquired if it was confirmation of or extension to the eligibility criteria. Mrs Gallacher advised that it was still the responsibility of the professional regardless of the eligibility criteria.

Mr John Raine enquired if there was local discretion around eligibility criteria. Mrs Gallacher advised that it was a complicated area and explained that, if a carer had a support plan and the plan identified a high level need, then they might be entitled to a budget in their own right to meet that need, but only if the crucial need could not be met by the care support plan.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the presentation.

Ms Jenny Smith left the meeting.
Mrs Tracey Logan left the meeting.
Mrs Lynn Gallacher left the meeting.

12. Performance Report - Transformational Programme Tracker

Mr James Lamb gave an overview of the content of the report and highlighted: building base services; alcohol and drugs service co-location; integrated teams IT solutions; and efficiency and productivity gains.

Mrs Karen Hamilton observed that a great deal of discussion at the meeting had been around the community capacity building item and she suggested ensuring the “re-imagining” project be included in the data evaluation discussion to ensure both projects came together.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the report.

13. Monitoring of the Integration Joint Budget 2017/18

Mrs Carol Gillie gave an overview of the content of the report.

Cllr Shona Haslam enquired about the allocation of social care fund monies to Scottish Borders Council to cover a predicted overspend. Mrs Gillie advised that a request had been received by the partnership and further follow up information had been requested so that a fully informed recommendation could be made to the Integration Joint Board at its next meeting.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the report and the monitoring position on the partnership’s 2017/18 revenue budget at 30th September 2017.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that a recovery plan had been developed by the NHS which based on a number of assumptions and risks forecast a break even position on NHS budgets would be delivered.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted social care services were projecting a £130k overspend and work was ongoing to identify the issues and key actions to address the situation.

14. ANY OTHER BUSINESS

Mr Robert McCulloch-Graham reminded the Board of the proposed content for the forthcoming development session to be held on 29 January 2018.

- 2018/19 Financial Plan Budget – Delegated Functions
- Financial Planning
- Draft Strategic Commissioning Plan Review

15. 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 12 February 2018 at 2.00pm in Committee Room 2, Scottish Borders Council.

The Meeting Concluded at 4.07 pm

*Signature:
Chair*