

Minutes of the meeting of the **Health & Social Care Integration Joint Board** held on **15 March 2023** commencing at **10.00am** via Microsoft Teams

Present: (v) Mrs L O'Leary, Non Executive (Chair)

(v) Cllr D Parker(v) Cllr N Richards(v) Cllr R Tatler

(v) Mrs F Sandford, Non Executive

Mr C Myers, Chief Officer

Mrs H Robertson, Chief Financial Officer

Mrs J Smith, Borders Care Voice

Mr D Bell, Staff Side, SBC

Mrs Y Smith, Partnership, NHS Borders

Mr N Istephan, Chief Executive Eildon Housing

Dr R Mollart GP

Mrs S Horan, Director of Nursing, Midwifery & AHPs

Mr S Easingwood, Chief Social Work Officer

Ms J Amaral, BAVs

In Attendance: Miss I Bishop Board Secretary, Mr D Robertson Chief Executive

SBC, Mrs J Stacey Chief Internal Auditor, Dr S Bhatti Director of Public Health, Mrs L Jones Director of Quality & Improvement NHS Borders, Ms W Henderson Scottish Care, Mr A Bone Director of Finance NHS Borders, Ms L Thomas Communications NHS

Borders, Mr D Knox BBC Scotland

1. ANNOUNCEMENTS & APOLOGIES

1.1 Apologies had been received from Cllr T Weatherston, Elected Member, Cllr E Thornton-Nicol, Elected Member, Mrs K Hamilton, Non Executive, Mr J McLaren, Non Executive, Mr T Taylor, Non Executive, Dr L McCallum, Medical Director, Ms L Jackson, LGBTQ+, Ms L Gallacher, Borders Carers Centre, Mr R Roberts, Chief Executive, NHS Borders, Mrs J Smyth, Director of Planning & Performance, NHS Borders, Mr B Davies, Chief Officer – Strategic Commissioning & Performance, SBC, Mrs S Bell, Communications Officer, SBC, Mrs S Flower, Chief Nurse Health & Social Care Partnership, Mrs H Jacks, Planning & Performance Officer, NHS Borders, and Mrs J Holland, Director of Strategic Commissioning & Partnerships

1.2 The Chair welcomed Cllr Neil Richards to his first meeting of the Integration Joint Board (IJB).

- 1.3 The Chair welcomed attendees and members of the public to the meeting including Ms Wendy Henderson, Scottish Care and Mr David Knox, BBC Scotland.
- 1.4 The Chair confirmed that the meeting was not quorate and IJB would therefore be unable to formally approve any matters but would still be able to discuss and note items. Items that required approval before 31 March 2023 would be circulated to the Voting Members after the meeting to seek approval via email.

2. DECLARATIONS OF INTEREST

2.1 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 - 01.02.23

3.1 The minutes of the previous meeting of the Health & Social Care Integration Joint Board held on 1 February 2023 were noted and would be submitted to the next meeting for formal approval.

4. MATTERS ARISING

- 4.1 Action 2022: Mr Chris Myers advised that the Carers workstream had been updated and a number of its members were part of the Teviot & Liddesdale working group. Public engagement had taken place across the locality and good feedback had been received on the day service and other services that supported carers the area. The feedback was being worked through with the working group and work was being undertaken in regard to a provider and commissioning. Stage 1 of the Inequalities Assessment had been completed and Stage 2 was being taken forward.
- 4.2 Action 2022-4: Mrs Hazel Robertson advised that she had presented to the Carers workstream on the Carers Act Funding covering current year spend and projected year spend. On an on-going basis she would be updating the group on how the funds were being used. Additional funding had been provided and not used in the current year but would be carried forward into next year. The Chair suggested the action be recorded as complete.
- 4.3 Action 2023-1: Mr Chris Myers advised that the revised direction would be submitted to the Strategic Planning Group for consideration and recommendation to the IJB in May. The SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD agreed that Action 2022-4 be marked as complete.

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

5. 2022/23 IJB Financial Plan and Initial Budget

5.1 Mrs Hazel Robertson provided an overview of the content of the report and explained how the IJB and Health & Social Care Partnership (HSCP) budget was compiled through offers from Scottish Borders Council (SBC) and NHS Borders. The process had been revised to formalise the sign off of the budget with both SBC and NHS Borders. The NHS Borders position was complex and formal sign off of that element would be sought at the next IJB meeting. However the SBC position was less complex and she confirmed that the information provided by SBC met the requirements for setting the IJB budget.

- 5.2 Mrs Robertson commented that there had been a substantial historical savings target within the IJB budget and she anticipated that remaining in place with an increased requirement for savings in order to reach a balanced position for the partnership. She reiterated that the process with NHS Borders had not yet concluded and it was important to rectify that position in order to produce a recovery plan to show how those savings targets would be met. Whilst it was a difficult budget to work with she now had clarity of the issues and the funding to be set aside as the budget for next year remained consistent.
- 5.3 Mrs Robertson then detailed the budget proposals.
- 5.4 Mrs Fiona Sandford welcomed the report which was very clear in its layout. She enquired about the table in section 8.1 as it did not detail an entry against Home First. She also enquired if the level of savings was in line with other IJBs across Scotland.
- 5.5 Mrs Robertson advised that she would check the detail of Home First and respond outwith the meeting. Mr Andrew Bone suggested that the Home First information had been included in the "generic services" line but advised he would clarify the positon to Mrs Robertson.
- 5.6 Mrs Robertson commented that in regard to other IJBs she would gather some benchmarking information to be shared at the next meeting.
- 5.7 Mrs Jenny Smith echoed Mrs Sandford's compliment in terms of the layout and content of the report. She commented that in her role as third sector member of the IJB it was a challenge to understand the finance and savings plan as they were high level and without the detail it was hard to make an informed decision. She suggested moving forward that they be involved earlier in the process. Mrs Robertson commented that she was keen to pursue the best value for every £1 approach in a number of areas and sought Mrs Smith's involvement in that process. Mrs Smith welcomed the opportunity to be involved.
- 5.8 Dr Sohail Bhatti welcomed the clarity in the budget paper and enquired about the starting point when needing to decrease resource. He quoted Professor Rose of GlaxoSmithKlein about the vast majority of drugs only working on 30%-50% of people due to genetic factors. He suggested there was progress to be made with the drugs budget and getting the public to be fitter and healthier and manage self care with confidence. He also welcomed the programme budgeting pathway.
- 5.9 On a point of clarification Dr Rachel Mollart questioned the PCIP funding of £2.1m. Mrs Robertson commented that PCIP funding was complex due to the way the funding had been allocated by the Scottish Government. She believed that tranche 2 of the funding was inaccurate as it amounted to zero and was probably a consequence of an error in the formulae used by Scottish Government. She confirmed that the PCIP figure would be what the actual allocation was.
- 5.10 Mr Nile Istephan echoed Dr Bhatti's comments and suggested that the IJB had to do things differently in order to manage the budget and commission services moving forward. He suggested the delay in the national care service might free up some additional resource that could be redirected to the IJB.
- 5.11 Mr Chris Myers commented that it was a stark position and would have an impact on services and delivery and it was important that the IJB be mindful of that and express that to the public and local communities and some of that was already expressed in the strategic framework. The IJB was a legal entity and had statutory obligations and further work would be taken forward on financial governance with the help of the Director of Finance and Chief Financial Officer of NHS Borders and SBC respectively. He further commented that working closely with partner was important to ensure that where savings plans were agreed in one area they did not have a negative impact on another area.

5.12 In regard to the national care service he was unsure what the plans from the Scottish Government were given the current political turmoil. He advised that he would update the IJB on its request to be a pathfinder as soon as the Scottish Government advised him. The SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD noted the report.

6. Scottish Borders Health and Social Care Strategic Framework 2023-26

- 6.1 Mr Chris Myers provided an overview of the content of the Strategic Framework for the period 2023-2026. He explained how the framework had been formulated through a bottom up approach engaging with local communities; analysing data; undertaking a needs assessment; targeting groups of stakeholders; holding locality sessions in person and online; reviewing feedback; scrutinising performance against the health and wellbeing outcomes; identifying strategic issues; planning for the future; and considering ways of working.
- 6.2 The Chair thanked all those involved in formulating the document which was more meaningful than previous iterations.
- 6.3 The Chair commented that it was clear that engagement had been at the heart of the document and so it had started in the right place and had changed the tone of the document compared to previous versions and she welcomed the single plan to be adopted across the partnership. In terms of being realistic and making tough decisions she suggested the strategic framework set that out within its contents and provided the IJB and its partners with permission to be brave and tackle difficult issues.
- 6.4 Mrs Fiona Sandford echoed the Chairs comments and welcomed the framework being produced bottom up. She enquired about the communications strategy to publicise the framework and also enquired about the mission, vision and outcomes on page 13 in regard to the aim that 85% of adults would feel supported at home and questioned whether that should be a higher aim given it meant there would be an acceptance that 15% of people would feel unsafe.
- 6.5 Mrs Sarah Horan welcomed the framework and looked forward to receiving the annual plan that would support it and she enquired how it would be executed. She particularly referred to objectives on the promise and trauma practice. Mr Myers advised that trauma informed practice sat within the Equalities and Human Rights documentation and was not within the framework. He confirmed that the framework had been heavily edited to enable it to be as succinct as possible and much of the execution of it would be contained with the annual plan and other supporting documentation.
- 6.6 Mr Myers commented in regard to the 85% aim, obviously it was good to aim as high as possible and achievement was measured through a random survey of 500 people and sometimes the results were surprising as areas where work had been done, no improvement was seen and in other areas were no work was done a more positive result was received. He was committed to supporting people to feel safe.
- 6.7 Dr Rachel Mollart welcomed the section on "How everyone in the Scottish Borders can 'Play their Part'" on page 5 as it would have an impact on primary care services. The SCOTTISH BORDERS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD note the report.

7. Evidencing Compliance with the Equality, Human Rights and Fairer Scotland Duties

- 7.1 Mr Chris Myers provided a brief overview of the report.
- 7.2 Mrs Wendy Henderson give an in-depth analysis of the report and highlighted that the IJB was in a strong position to evidence Equalities and Human Rights compliance with the Scottish specific duties 3, 4, 5 and 10. She explained the requirements of the duties and the supporting evidence that was in place.
- 7.3 Mrs Jill Stacey commented that it was a significant improvement and the evidence base around the legislative frameworks was very positive and would be reflected on as part of the requirement of the annual assessment.
- 7.4 Mr Henderson commented that a website would be created where all the relevant documents would be held for public scrutiny. She intended to bring a paper to the May IJB meeting on the United Nations Rights of the Child.
- 7.5 The Chair welcomed the sight of impact assessments now regularly accompanying all Board papers.

The SCOTTISH BORDERS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD noted the report.

8. Strategic Risk Register Update

- 8.1 Mr Chris Myers provided an overview of the content of the report. He advised that it continued to be reviewed on a regular basis and strategic issues were brought forward thought the strategic framework onto the risk register in line with the risk management approach. He noted the other key risk to note was the budgetary risk and assured the Board that he would be looking at the impact of that on outcomes and would feed that into the risk register. He suggested as progress was made with the annual plan there would be directions drafted for each service delegated to the IJB in line with best practice.
- 8.2 Mrs Jill Stacey commented that the integrated risk management approach in terms of the IJB was reliant on what was commissioned through the directions and was reliant on the operational delivery of services and obligations that the partners had. She suggested the IJB have more sight of that and noted that Mr Myers was sighted on those risks that might escalate and have an impact on the strategic objectives. She advised that there was a quarterly risk review of the IJB strategic risk register and there had been a delay in bringing the report to the IJB for consideration. She also wished to look at the timing of the report to the Board to enable assurance to the Board.
- 8.3 The Chair commented that it was helpful to see the risk register did not have any risks moving in the wrong direction.

The SCOTTISH BORDERS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD considered the reframed IJB Strategic Risk Register to ensure it covers the key risks to the IJB.

The SCOTTISH BORDERS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD noted the work in progress to manage the risks.

The SCOTTISH BORDERS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD noted that a further risk update will be provided in June 2023.

9. Financial Outlook Update

9.1 Mrs Hazel Robertson provided a presentation to the IJB and spoke to several key elements including: improved financial regulations and controls; scheme of delegation;

financial decision making; directions process; workforce; involvement; longer term; and best value.

9.2 The Chair welcomed the presentation given it had been largely about approach rather than facts and figures and was not just limited to money but was also about resources and how they should be used.

The SCOTTISH BORDERS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD noted the presentation.

10. Quarterly Performance Report

- 10.1 Mr Chris Myers provided an overview of the content of the report and highlighted: the key changes to be made to report to reflect the six objectives; the positive reduction in unmet need in the community over the past few months; the slight reduction in delayed discharges; and in terms of social work assessments there were a roll out of the developing community led support approach with a refocus on the work started in 2017.
- 10.2 Mr Myers commented that in terms of unscheduled care occupied bed days whilst the information was not contained within the report he assured the Board that there was a renewed focus on length of stay in NHS Borders. He further commented that an event had been held in regard to a national exercise on multi agency discharge. Following on from that the exercise had been rolled out locally in the Borders General Hospital, Mental Health wards, Community Hospitals, Garden View and in a number of interim care facilities to replicate that exercise across a number of health and social care units. The outcome had been that good traction had been gained and the learning from that exercise was being evaluated in order to mainstream it into "business as usual" and focus on those with long lengths of stay.
- 10.3 Dr Sohail Bhatti commented that he was concerned that primary and community care contacts were not given the recognition for the amount of work they undertook and he was keen to see their data shared.
- 10.4 Ms Juliana Amaral commented that the third sector was very enthusiastic about the direction of travel as community led work was linked to place making work and moved away from traditional silo working. Based on previous learning and the capitalisation of conversations happening in the communities she was sure that further progress would be made.
- 10.5 Mr Myers summarised that that primary care data and especially GP data was being captured for national data comparison and there were now dashboards available that the partnership could access. In terms of community led support there had been a lively session held the previous day on refocusing community led support and he was pleased with the appetite from the third sector to work in partnership with the health and social care partnership on that.

The SCOTTISH BORDERS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD noted the report.

11. Scottish Borders HSCP Integrated Workforce Plan – Implementation Plan

11.1 Mrs Wendy Henderson provided an overview of the content of the report and reminded the Board that the integrated workforce plan had been approved in October 2022 and since then work had been taken forward to develop an Implementation Board. She spoke of the membership of the Implementation Board to reflect the 5 key areas of NHS Borders, SBC, the independent sector, primary care and the third sector. She outlined the vision agreed by

the Board, the priorities identified and confirmed that Mrs Hazel Robertson had agreed to chair the Board.

- 11.2 Mrs Jenny Smith commented that there was a good appetite for the integrated workforce plan from the third sector as well as learning disability providers, mental health providers and other independent providers.
- 11.3 Dr Sohail Bhatti commented that the paper listed "no impact" on climate change, however if the workforce was increased and visited patients at various locations in the community there was likely to be some climate change impact due to increased traffic unless electrical vehicles were used. In terms of equalities and human rights he suggested the intention was to engage workers from the local area and train them up and that would be a social impact. If workers did not have the right qualifications the challenge was then to find a way for them to get those qualifications and that might be through more vocational than academic routes. He was keen to remind the Board that the equalities and human rights element was not just about protected characteristics but was wider than that in terms of social impacts.
- 11.4 Mrs Sarah Horan commented that it was a good opportunity to enable the prospects for young people and indeed all people in the Borders. She suggested there was an opportunity to have a positive impact through the collective strength of having a local Care Academy approach with various education providers developing training and career pathways.
- 11.5 Mr Chris Myers advised that a meeting had taken place recently between SBC, NHS Borders and Eildon Housing Association in regard to a pilot for housing with key workers in Galashiels. He commented that it was a positive piece of work and was supported by all partners and very much aligned to the intended ways of working approach to workforce from an IJB perspective.
- 11.6 Mrs Henderson advised that in terms of the right qualifications, the vocational approach would be picked up through the Care Academy that was being looked at. In relation to climate change she was looking at the whole systems approach and transport was recognised as a barrier to employment within the Borders. Providers were welcoming of e-bikes and alternative forms of transport. Within the protected characteristics the impact assessment included the Fairer Scotland duty and captured within that was evidence of positive impacts.
- 11.7 Ms Juliana Amaral commented that BAVs had some e-bikes that they would be happy to provide for a community transport pilot.

The SCOTTISH BORDERS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD noted the formation of and membership of the cross sector SBHSCP Integrated Workforce Plan Implementation Board.

The SCOTTISH BORDERS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD noted the Terms of Reference of the Implementation Board specifically the remit and scope which was coproduced with Implementation Board members.

The SCOTTISH BORDERS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD noted the content of the first progress report detailing the Implementation Plan coproduced by the Implementation Board.

The SCOTTISH BORDERS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD noted that two of the Equality Outcomes for the period 2023 to 2025 relate specifically to the Partnership's Workforce. The Implementation Board will report progress against these outcomes monthly to the SPG E&HR Subgroup.

The SCOTTISH BORDERS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD noted that the Implementation Plan is living document which will be refreshed and reported against quarterly to the IJB.

12. Directions Tracker

12.1 Mrs Hazel Robertson commented that the PCIP direction remained challenging and would be discussed in more detail at the IJB Audit Committee meeting the following week. 12.2 The Chair comment that some business cases took longer than others for good reason.

The SCOTTISH BORDERS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD noted the contents of the Directions Tracker.

13. Strategic Planning Group Minutes: 12.12.22

The SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD noted the minutes.

14. ANY OTHER BUSINESS

14.1 Future Business (May):

- Directions: Hawick Care Village Gala Resource Centre
- Mental Health Improvement & Suicide Prevention Action Plan 2022-2025
- Locality Working Groups/Community Engagement
- Strategic Framework: Annual Plan
- IJB Recovery Plan
- Rights of the Child

The SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD noted the future business items.

14.2 Appointment: Mrs Jenny Smith congratulated Ms Juliana Amaral on her appointment as Chief Executive of the new third sector interface. Ms Amaral advised that she would be taking up post in April and it was exciting for her to be able to be a Borders wide voice and work with Mrs Smith more effectively across the 5 localities.

The SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD recorded its congratulations to Ms Amaral on her appointment.

14.3 Budget: Mrs Hazel Robertson suggested the next IJB Development session to be held on Wednesday 19 April might include a short Extraordinary IJB meeting in order to sign off the NHS Borders element of the budget.

The SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD agreed to hold a short extraordinary IJB meeting on 19 April.

15. DATE AND TIME OF NEXT MEETING

15.1 The Chair confirmed that the next meeting of the Scottish Borders Health & Social Care Integration Joint Board would be held on Wednesday 17 May 2023, from 10am to 12noon through MS Teams and in person in the Council Chamber, Scottish Borders Council.