

Scottish Borders Health & Social Care  
Integration Joint Board



Meeting Date: 17 September 2018

Report By	Robert McCulloch-Graham, Chief Officer Health & Social Care
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**CHIEF OFFICER'S REPORT**

<b>Purpose of Report:</b>	To inform the Health & Social Care Integration Joint Board (IJB) of the activity undertaken by the Chief Officer since the last meeting.
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<b>Recommendations:</b>	The Health & Social Care Integration Joint Board is asked to:  a) <b>Note</b> the report.
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Personnel:	Not Applicable
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Carers:	Not Applicable
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Equalities:	Not Applicable
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Financial:	Not Applicable
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Legal:	Not Applicable
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Risk Implications:	Not Applicable
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## **Chief Officer Report**

### **Winter Planning**

A significant amount of modelling has been undertaken to determine the number of beds we require going into the winter period. The agreement at the last IJB meeting in August has allowed us to progress the expansion of the Hospital to Home work across all five localities and to maintain the Craw Wood step down facility. Both of these areas will provide a saving in the number of beds required for the winter. We are now working hard to recruit to the positions required to ensure we will be operational by the first week in January.

The draft winter plan is on the agenda for this meeting, and NHS Scotland has requested submissions from all integration authorities explaining our intentions to mitigate the expected pressures.

### **Regional Work**

The Diabetes steering group Chaired by Tracey Logan continues to drive the joint work of the three NHS boards, the six Integration Authorities and the six Councils to reduce the number of people at risk of Type 2 Diabetes. There was a workshop held regarding weight management programmes operating across the region last week. The outcome was to identify areas of common practice and to agree areas for development.

I have agreed to work on the Education Work Stream across the region. We will aim to base line current services/approaches and to develop new initiatives using the resources of partners to target vulnerable groups. The work will promote a healthier lifestyle and make it easier for people to access activities and information to help reduce Type 2 Diabetes.

### **Public Protection Executive Group**

I attended the first meeting of this group which aims to provide a multi-agency response to areas where the public are vulnerable. In attendance were; the Chief Social Work Officer (Chair), both Chairs of the Adult and Child Protection Committees, The Police, Childrens and Adults Social Services. The group will focus on many cross cutting themes including, drug usage, crime, domestic violence and abuse of adults and children. All of these areas and others are relevant to the wide range of services represented on the group. I will endeavour to keep the IJB informed of the programme of events / reviews commissioned throughout the year.

### **7 Day Discharge**

As part of the winter plan, we intend to move to be able to discharge people from hospital throughout the week. To this end we pulled together all of the services that would be required to enable hospital discharge over the weekend. There remains further work to do, and further funds to source to enable this to happen. We will extend the group to include residential care providers as well as the Matching Unit.

## **New Posts**

Mike has already made a difference in his role as Director of Finance for the IJB, and has been busy getting up to speed across both the Council and NHS Borders. We have recently agreed to go to advert for the Chief Officer position for Adult Social Care and for an additional Group Manager which will report into that position.

We are examining where more support could be provided for the Health and Social Care Partnership leadership team and further reports will be brought to the Board.

## **Set Aside Budget**

NHS Scotland Director of Finance has requested that all partnerships unify their approach to determining the allocation of funds to the "Set Aside" part of the IJB Budgets. These funds are required to resource delegated service provision within acute hospitals.

At present each local Board has determined how they arrive at these sums independently. This makes it impossible to compare how boards are achieving a shift in the balance of care.

We have now formed a Board to determine how Borders IJB will determine this sum and will be sharing our deliberations with the national group of IJB Directors of Finance before the end of the year.

## **Primary Care Improvement Plan**

As you will be aware we agreed the PCIP and have issued a direction to the NHS Borders for its implementation. As part of the six areas of focus, one was to introduce Community Link Workers. We agreed that in the first year we would strengthen our existing work in this area and we are shortly going to advertise for an additional four workers.

There are a number of areas within this work but all operate either through GP practices or support them through referrals. The current work is well regarded and it seems prudent to develop from this strong base.

In the second and third year we are hoping to provide a targeted approach to those families which require provision from a wide range of services. This work will however emerge from current experience and that gained from the forthcoming year.

Rob McCulloch-Graham  
September 2018