



Minutes of a meeting of the **Scottish Borders Health & Social Care Integration Joint Board** held on **Wednesday 15 December 2021** at **10am** via Microsoft Teams

**Present:** (v) Cllr S Haslam (v) Mrs L O’Leary, Non Executive (Chair)  
(v) Cllr J Linehan (v) Mrs K Hamilton, Non Executive  
(v) Cllr T Weatherston (v) Mr J McLaren, Non Executive  
(v) Cllr E Thornton-Nicol (v) Mr T Taylor, Non Executive  
Mr C Myers, Chief Officer  
Mrs J Smith, Borders Care Voice  
Ms L Gallacher, Borders Carers Centre  
Ms G Russell, Partnership Representative NHS  
Mr N Istephan, Chief Executive Eildon Housing  
Mr S Easingwood, Chief Social Work and Public Protection Officer

**In Attendance:** Miss I Bishop, Board Secretary  
Mrs J Stacey, Internal Auditor  
Mr R Roberts, Chief Executive NHS  
Mrs N Meadows, Chief Executive, SBC  
Mr G McMurdo, Programme Manager SBC  
Ms J Holland, Director of Strategic Commissioning and Partnerships SBC  
Ms S Bell, Communications Manager SBC  
Mrs L Lang, Communications Officer NHS  
Mr A Bone, Director of Finance, NHS Borders  
Ms H Jacks, Planning & Performance Officer, NHS  
Mr G Samson, Audit Scotland  
Dr T Patterson, Director of Public Health  
Ms S Henderson, Planning & Development Officer, NHS  
Mr S Burt, General Manager MH&LD  
Ms S Brown, Public Member

**1. APOLOGIES AND ANNOUNCEMENTS**

- 1.1 Apologies had been received from Cllr David Parker, Mrs Harriet Campbell, Non Executive, Mr David Robertson, Chief Financial Officer, SBC, Mrs Sarah Horan, Director of Nursing, Midwifery & AHPs, NHS, Dr Lynn McCallum, Medical Director, NHS, Dr Kevin Buchan GP, Ms Linda Jackson, LGBT+, Mr David Bell, Staff Side, SBC and Ms Juliana Amaral, BAVs.
- 1.2 The Chair advised that there would be a slight change to the running order of the agenda, with item 5.5 being taken ahead of item 5.4.
- 1.3 The Chair confirmed the meeting was quorate.

1.4 The Chair welcomed guest speakers and members of the press to the meeting.

## **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 THE PREVIOUS MEETING**

3.1 The minutes of the extraordinary meeting of the Health & Social Care Integration Joint Board held on 20 October 2021 were approved.

## **4. MATTERS ARISING**

4.1 **Action 4:** Mr Chris Myers suggested he meet with Cllr Shona Haslam to clarify the data available before bringing it forward to a future meeting. Cllr Haslam agreed to that approach.

4.2 **Action 2020-3:** Mr Tris Taylor commented the action had been marked as complete by 31.03.21. Miss Iris Bishop apologised for the inaccurate sentence and advised that it should have been marked as in progress as the Scheme of Integration light touch review consultation would commence shortly.

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

## **5. FORMAL APPOINTMENT OF CHIEF OFFICER HEALTH & SOCIAL CARE**

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** formally appointed Mr Chris Myers as Chief Officer Health & Social Care.

## **6. IJB BUSINESS PLAN AND MEETING CYCLE 2022**

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved the business plan and meeting cycle for 2022.

## **7. SELF ASSESSMENT**

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved the format of the self assessment form template.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved roll out to the Board and its Committees and Groups to undertake an annual self assessment in the autumn each year with a six week turnaround.

## 8. IJB STRATEGIC COMMISSIONING APPROACH

- 8.1 Mr Chris Myers provided an overview of the content of the paper. He suggested the next IJB Development session be used to further discuss the strategic commissioning approach. He noted that the paper had been developed based on discussion at the IJB's Strategic Planning Group.
- 8.2 Further discussion focused on: assurance that staff governance standards would be adhered to; visibility of unmet need and ensuring planning was taken forward in coproduction with people; directions formulated in coproduction and if necessary resolution pathways followed before directions are issued; planning for success through the alignment of NHS Borders and SBC strategies with the IJB Strategic Commissioning Plan; and adequacy of joint needs assessment resourcing.
- 8.3 Mrs Jenny Smith welcomed the robust and thorough approach and asked that the membership of the Future Strategy Group included third sector and independent sector representation.
- 8.4 Mrs Karen Hamilton commented that the IJB Audit Committee had discussed the paper at its meeting the previous week and had been supportive of it. The Audit Committee had also acknowledged the issue of updating the Terms of Reference and were content to take on a monitoring role to provide the IJB with assurance.
- 8.5 Mr Myers welcomed the discussion and commented that broad engagement with all stakeholders is key, and as a result that the Future Strategy Group (FSG) would support and report into the Strategic Planning Group which contained service users and other experts from the community, third sector, staffside and independent sector representatives. The output from the FSG would be submitted to the Strategic Planning Group (SPG) to assess the plans and directions, and if supportive recommend them to the IJB for approval and issue. However the SPG could also return plans and directions back to the FSG for further consideration by other groups.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** considered and approved the following recommendations:

- That the work of the SIP Oversight Board is realigned to the Audit Committee rather than directly reporting to the IJB.
- That the IJB hold a series of development sessions in partnership with key operational and functional stakeholders to appropriately consider and undertake the planning process.
- That a 'Future Strategy Group' is developed that reports into the Strategic Planning Group to develop Directions and to manage the work associated with the delivery of the new Strategic Developments over the next 12-14 months.
- That the IJB endorse the approach of undertaking a comprehensive Joint Needs Assessment to inform the Strategic Commissioning Plan that will be concluded towards

the end of 2022/23 to support the development of a 3 year Strategic Commissioning Plan for 2023-26.

- That whilst the Strategic Commissioning Plan is focused on the period up to the implementation of the National Care Service, that a series of strategic commissioning assumptions are developed over the longer term to support the business planning processes and sustainability of the IJB's key strategic and operational partners.
- That the Audit Committee oversee a rapid review of the Terms of Reference and a self-assessment of the IJB Committees to ensure that the IJB and these Committees are able to continue to effectively function in the context of the significant level of work required, in line with the IJB's duties outlined in the Act.
- That an additional development session be held to progress the Strategic Commissioning Approach work.

## **9. DIRECTIONS POLICY AND PROCEDURE**

- 9.1 Mr Chris Myers provided an overview of the content of the report and commented that by providing a more formalised approach to directions a monitoring and review of progress could be undertaken. The IJB Audit Committee had agreed to take on the role of monitoring and reviewing implementation to provide assurance to the IJB that directions were being delivered. The process was based on best practice guidance and national expectations for issuing of directions. The process would also allow all parties to understand the planning assumptions of the IJB and all associated parties.
- 9.2 Mrs Netta Meadows sought assurance that the process had been checked against the standing orders of the respective organisations especially in regard to budgetary decisions and delegated decisions.
- 9.3 Mr Myers commented that the standing orders of the partners had not been consulted. He advised that the process was aligned to the Scheme of Integration and the IJB's Standing Orders which were not incompatible with the partners standing orders.
- 9.4 As the IJB is the commissioning body and the new Future Strategy Group and SPG would produce plans in coproduction with the parties, which the SPG would review and potentially recommend to the IJB, there would be no surprises for either organisation when a direction was issued, as all parties were involved through each stage of the process.
- 9.5 Operational decisions would remain with the partners and directions would be strategic in nature and at times may reference some operational decisions taken. He assured the IJB that partners would be involved in the decision making process when developing directions.
- 9.6 Mr Ralph Roberts commented that it was important that in the development of directions at a strategic level, the engagement process was robust and included, service providers as well as the public and service users. He suggested once any organisation received a direction from the IJB it would have the right to advise the IJB

that the direction could not be fulfilled and ask the IJB to reconsider and adjust the direction.

- 9.7 The Chair welcomed the improved level of transparency that would be achieved through the process.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the content of this report, the requirements of the Public Bodies (Joint Working) (Scotland) Act 2014 and the statutory guidance issued by the Scottish Government in January 2020 in relation to Directions.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved the IJB Directions Policy and Procedure and IJB Directions template set out in Appendices 1 and 2 of this report.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved the associated addition to the SBIJB Audit Committee Terms of Reference: The oversight and scrutiny of the implementation of the Strategic Commissioning Plan and the application of the Directions Policy. Monitor and review progress with the implementation of Directions made to partners to ensure that clarity and transparency can be demonstrated and aligned to performance and financial reporting, and escalate key delivery issues to the IJB. Maintain independent oversight of progress against the Strategic Commissioning Plan, and provide assurance to the IJB thereon.

## **10. DAY SERVICES PETITION AND FUTURE PROVISION**

- 10.1 Mr Stuart Easingwood provided an overview of the content of the report and highlighted that the intention was to design day services with a focus on early intervention and in line with self-directed support requirements.
- 10.2 Mrs Netta Meadows sought clarification of the scope of the action plan.
- 10.3 Cllr Tom Weatherston supported the proposal and referenced earlier discussion on coproduction, advising that the public had been unsupportive of the direction of travel, however mechanisms were in place to reach a resolution.
- 10.4 Mr Tris Taylor enquired if carers were involved in the proposal at a sufficient level to influence the direction of travel initially, especially given there had been a public reaction.
- 10.5 The Chair commented that in moving forward the Carers Workstream would be asked to undertake the work, and she enquired if there was a mechanism of engagement with the end users themselves in addition to carers.
- 10.6 Mrs Lynn Gallacher commented that there were lessons to be learned on the engagement and consultation process for day services. The original transformation of day services had not engaged well to provide an informed direction of travel and that would be remedied through the engagement of the Carers Workstream. She welcomed the recommendation from the SBC Audit and Scrutiny Committee.

- 10.7 Mr John McLaren commented that previously work had focused on buildings and services provided from buildings, when it would have been more beneficial to have known the needs of carers and service users as the first focus of any transformation.
- 10.8 Cllr Elaine Thornton-Nicol supported the intention of assisting people in their communities instead of in buildings and suggested the pathway to progress the matter would sit within the Older Peoples pathway group. She commented that the world had changed since 2019 and what might have been right then might not be right as matters were progressed.
- 10.9 Mr Easingwood, provided reassurance in terms of individuals circumstances, commenting that the first stage of the process was coproduction and the mapping of individuals needs as a starting point and then matching the services to the individuals needs.
- 10.10 In regard to scope Mr Easingwood commented that the approach was for carers to be supported to access flexible support and information to best meet their needs and choices going forward. The scope was within the remit of the Carers Workstream and would ensure there was clear and transparent engagement.
- 10.11 Mr Easingwood commented that in regard to buildings, 4 of the 5 locality areas had now moved away from buildings based services, and there were some individuals without the right packages in place that were being reviewed. He commented that as a consequence of the pandemic it was essential to look at the current and future landscape for service delivery moving forward. The needs of individuals and the open and honest conversations with carers and service users about their individual circumstances and what they needed would inform service provision moving forward.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** considered and agreed to the request made by the Scottish Borders Council Audit and Scrutiny Committee

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the contents of the petition papers and Audit and Scrutiny meeting minute

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** agreed to task the existing Carers Workstream with the task of undertaking this piece of work, as part of the workstream's new work to develop an Action Plan for Carers in the Scottish Borders. Progress of this work should be reviewed in the first instance by the Integration Joint Board's Audit Committee prior to reporting to the Integration Joint Board.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that a future Integration Joint Board Direction for day services is likely to be required as a result

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** sought a timeline for the work to be taken forward.

## **11. MEMBERSHIP OF THE IJB**

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the change in voting membership.

## **12. MONITORING AND FORECAST OF THE HEALTH AND SOCIAL CARE PARTNERSHIP BUDGET 2021/22 AT 30 SEPTEMBER 2021**

12.1 Mr Andrew Bone provided an overview on the content of the report and drew the attention of the Board to the £6.2m deficit for the year end forecast. He further referred to the supporting appendices, breakdown of savings and gap in projections.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the combined forecast adverse variance of (£6.186m) for the Partnership for the year to 31 March 2022 based on available information and arrangements in place to partially mitigate this position;

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that whilst the forecast position includes direct costs relating to mobilising and remobilising in respect of Covid-19, it also assumes that all such costs will again be funded by the Scottish Government in 2021/22;

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that the position includes additional funding vired to the Health and Social Care Partnership during the first half of the financial year by Scottish Borders Council to meet reported pressures across social care functions from managed forecast efficiency savings within other non-delegated local authority services and funding brought forward in respect of Covid-19 expenditure;

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that any residual expenditure in excess of the delegated budgets at the end of 2021/22 will require to be funded by additional contributions from the partners in line with the approved Scheme of Integration.

## **13. STRATEGIC RISK REGISTER UPDATE**

13.1 Mr Chris Myers provided an overview of the content of the report and advised that he had met with the Auditors and the Risk Management Team separately.

13.2 The Chair commented that in regard to escalating risks with the external environment it was good to know that something could be done to reduce their risk level a little.

13.3 Mr Tris Taylor welcomed the news that it would be rewritten and suggested it did not provide a systematic overview of the actions being taken to manage risks.

13.4 He commented that in regard to Risk 1 on cultural change it was hard to assess if it had been appropriately managed as it did not have a definition of what was required to be done or by when. He further commented that it did not reflect that low compliance with the Choices Policy remained a key barrier to the discharge strategy. He enquired

if the risk was a feature of the partners risk registers. He further suggested it did not seem a sufficient approach if it was confined to partners to manage risks with stakeholder engagement.

- 13.5 In regard to Risk 9, Mr Taylor suggested evidence was required on progress and project management and for Risk 10 he commented that the year 2021 was probably a typo and should read 2022.
- 13.6 The Chair welcomed the comments and suggested members provide feedback to Mr Myers on how to make the report stronger in the future.
- 13.7 Mrs Jill Stacey commented that the intention was to have a more fundamental review of the IJB strategic risk register, especially in light of the reviews of the Strategic Commissioning Plan and Scheme of Integration. She welcomed Mr Taylor's comments and advised that they would be captured as part of that fuller review. In terms of the appendix she advised that it was a summary report and a fuller report was provided to the Chief Officer with all of the linked actions in terms of mitigating actions and controls. She advised that the format of the report could be expanded for the Board to highlight some of the key mitigating actions being undertaken.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** considered the IJB Strategic Risk Register to ensure it covers the key risks of the IJB;

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the actions in progress to manage the risks; and

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that a further risk update will be provided in June 2022.

#### **14. QUARTERLY PERFORMANCE REPORT**

- 14.1 Mr Chris Myers commented that the report had been updated in line with the principles of 'Active Governance' to try and ensure the narrative and the way in which data was presented was more helpful to the IJB members and he thanked Mrs Meriel Carter and her team for enabling the change. Mr Myers commented that in future a key focus on outcomes and delivery would be made more explicit through the performance reports.
- 14.2 Mr Myers drew the attention of the Board to the key concern of the number of delayed discharges in the system. He advised that there had been an increase in demand and need across the whole system with more people with a greater level of frailty and dependence being requiring support both in hospitals and our communities. He added that the Health and Social Care Partnership teams were continuing to work across the whole system to address the increased demand.
- 14.3 The Chair noted the huge pressures being felt by all sectors as a consequence of the pandemic and welcomed the partnership approach to addressing increased demand on all services.



The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the quarterly performance report.

## **15. INTEGRATED WORKFORCE PLAN**

- 15.1 Mr Chris Myers commented that an interim workforce plan had been formulated and would continue to be further developed by the HR Directors in both SBC and NHS Borders.
- 15.2 Mr Nile Istephan commented that it was an important piece of work and suggested the independent sector might be included given the continuing recruitment difficulties in all sectors. Mr Myers commented that he would welcome the input of independent providers, third sector and primary care independent providers to ensure a more coordinated approach to recruitment in future.
- 15.3 Mr Tris Taylor enquired if as the workforce plan developed it would provide a view of the entire workforce that was producing health and care and wellbeing in the Borders including unpaid carers. Mr Myers commented that in terms of unpaid carers they often provided the bulk of care and the Carers Workstream would need to map out the needs of people who were provided unpaid care, to form the basis of the IJB's Strategic Commissioning Plan..

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that Scottish Government DL(2020)28 outlines the requirement for:

- Integration Authorities to ensure a 3 year workforce plan is developed no later than 31 March 2022.
  - o This plan should cover the period 1 April 2022 to 31 March 2025.
  - o Integration Authorities' Workforce Plans should be published on organisations' websites by 31st March 2022, and a link to each Plan should be forwarded to the Scottish Government's National Health and Social Care Workforce Planning Programme Office by that date

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that HR Directors have been advised that recognising the impact of COVID-19, this deadline may be postponed to a later date in 2022.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that an Interim (integrated) Workforce Plan was submitted to the Scottish Government at the end of April 2021

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** recommended that the Health and Social Care Partnership should continue to develop an Integrated Workforce Plan over the coming months, and report this back to the IJB prior to submission to the Scottish Government.

## **16. TWEEDBANK CARE VILLAGE**

- 16.1 Mrs Jen Holland spoke to the content of the report and highlighted that it set out the case for change and care needs across the Scottish Borders, especially for older people requiring a provision of care to be given at the right time, in the right place with a focus on possibility rather than disability.
- 16.2 Mrs Holland advised that SBC had approved the capital allocation for residential care provision and owners and designers of a similar scheme in the Netherlands had met with some IJB members and officials to look at the possibility of replicating facilities in the Scottish Borders on the Tweedbank site. The proposal was for 60 units including outdoor community space and the site would include rehabilitation, assessment, nursing care, palliative care, and dementia care.
- 16.3 The Chair enquired about the role of the IJB in terms of commissioning for the care to be delivered in the proposed Care Village.
- 16.4 Mrs Jenny Smith commented that the Impact Assessment was incorrect, which was important in terms of due process, given under item 6 on page 127 it listed Borders Carers Voice. She advised that there had been one workshop in early 2020 which involved Borders Carers Voice and the proposal discussed at that time was not the same proposal presented to the IJB, so very limited discussion had taken place without further engagement and consultation.
- 16.5 Mrs Lynn Gallacher advised that Borders Carers were also referenced in the report and were at the same session in early 2020 which had been more of an information shared session as opposed to a consultation session and had not had any further engagement on the proposal as it had been progressed. She commented that she was concerned that there was not enough detail in the report to be able to understand the implications of the closure of Garden View and Waverley on staffing, given the model would have more carers than residents and might not meet the care that was required to enable people to stay in their own homes. She sought further information about filling the gap of enabling people to stay in their own homes and how that would impact on the demand for residential care.
- 16.6 Mr Tris Taylor advised that he was mindful about the role of the IJB in the project and that it was for SBC to provide the buildings and the services were to be commissioned by the IJB. He suggested the outline business case detailed the involvement of carers and third sector in the project but that was not actually the case and it did not mention the engagement of service users. He suggested an options analysis was required given the only other option was the current status quo. He further commented that it was difficult to understand the rationale for moving from a desire to keep people in their own communities and homes where possible, to moving them from their homes and communities to a purpose built facility. It was also not obvious from the outline business case that it would meet the kinds of needs against which the IJB would want to commission. He was concerned that SBC might expose itself to that risk without genuine coproduction having taken place and clear accountability being given to address the actual needs of older people instead of potentially consolidating supply to meet a number of other broader SBC objectives.

- 16.7 Mrs Netta Meadows assured the Board that people were not removed from their homes, any relocation was done as part of a social work assessment and decisions to provide people with residential care settings were taken carefully, based upon their level of need. In regard to delivering care, the proposal was fundamentally about delivering residential care services to meet the increasing need identified. It would meet the need for older people to be supported to grow old well with the delivery of high quality residential care in better fit for purpose settings. The IJB were responsible for commissioning the provision of residential and nursing care and the new facility would provide a higher quality standard environment.
- 16.8 Mrs Holland commented that in regard to consultation as the project moved towards the full business case, there would be consultation with key users, carers, families and potential users. She advised that the intention was always to keep people as independent as possible, although some people required 24 hour care and the model was designed to be able to provide that care within a homely environment with social community aspects. An additional 11 beds had been included in the plan to accommodate the closure of Garden View and Waverley. A year ago there had been a need for 180 beds, and a lot of work had been put into discharge to assess and conversations with carers about what was needed for individuals to help people live independently at home.
- 16.9 The Chair commented that in the longer term the IJB would issue a direction to commission the provision of care within the care village.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the paper presented to Scottish Borders Council on 25<sup>th</sup> November 2021 and approval of its recommendations.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the capital and revenue decision taken by Scottish Borders Council.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the expected growth in demand and current planned mitigations.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that it would issue a direction to commission the provision of care within the care village which would clarify the role and requirements of the IJB from a governance perspective.

## **17. REVIEW OF LEARNING DISABILITY (LD) DAY SUPPORT SERVICES – MARKET TESTING**

- 17.1 Mr Simon Burt provided an overview of the content of the paper.
- 17.2 The Chair welcomed the approach to balancing the needs of service users and carers.
- 17.3 Ms Lynn Gallagher congratulated Mr Burt on the approach that had been taken and suggested there was learning for other services to be taken from it.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the progress of the learning disability day support review

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that the LD service will, on completion of the market testing, seek a commissioning decision from the IJB in the spring of 2022.

## **18. THE ALLIANCE – HEALTH & SOCIAL CARE IN THE SCOTTISH BORDERS**

18.1 Mr Chris Myers referred to the significant work that had been taken forward with the Alliance and other partners and that a number of sessions had been held. The key themes from the sessions had been formulated into a report for the partnership to consider and he advised that the partnership would be working with communities on the outputs of the report.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the Alliance Report.

## **19. ALCOHOL AND DRUGS PARTNERSHIP ANNUAL REPORT 2020-21**

19.1 Dr Tim Patterson provided an overview of the content of the annual report.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the Annual Review and highlight Annual Report

## **20. STRATEGIC PLANNING GROUP MINUTES: 04.08.21**

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

## **21. ANY OTHER BUSINESS**

21.1 The Chair advised that there had been no notification of any other business.

## **22. DATE AND TIME OF NEXT MEETING**

22.1 The Chair confirmed that the next meeting of the Scottish Borders Health & Social Care Integration Joint Board would be held on Wednesday 16 February 2022, from 10am to 12noon, via Microsoft Teams.

The meeting concluded at 12.15.

Signature: .....  
Chair