



Minutes of a meeting of the **Scottish Borders Health & Social Care Integration Joint Board** held on **Wednesday 16 November 2022** at **10am** in **Committee Rooms 2 & 3, Scottish Borders Council**

Present: (v) Cllr T Weatherston (v) Mrs L O'Leary, Non Executive (Chair)
(v) Cllr R Tatler (v) Mrs K Hamilton, Non Executive
(v) Cllr E Thornton-Nicol (v) Mr T Taylor, Non Executive
(v) Mr J McLaren, Non Executive
(v) Mrs F Sandford, Non Executive

Mr C Myers, Chief Officer
Mrs H Robertson, Chief Financial Officer
Mr N Istephan, Chief Executive Eildon Housing
Mrs S Horan, Director of Nursing, Midwifery & AHPs
Dr R Mollart GP
Mrs J Smith, Borders Care Voice
Mr D Bell, Staff Side, SBC
Mrs J Amaral, BAVs
Mr S Easingwood, Chief Social Work Officer

In Attendance: Miss I Bishop, Board Secretary
Mrs L Prebble, PA to Chief Officer
Mrs J Stacey, Internal Auditor
Mr R Roberts, Chief Executive, NHS Borders
Dr S Bhatti, Director of Public Health
Mrs J Holland, Director of Strategic Commissioning & Partnerships
Mrs J Smyth, Director of Planning & Performance, NHS Borders
Ms H Jacks, Planning & Performance Officer, NHS Borders
Mrs C Oliver, Head of Communications & Engagement, NHS Borders
Ms L Thomson, Communications Officer, NHS Borders
Mr J Ayling, Non Executive NHS Borders
Ms E Fabry, Project Manager, Scottish Borders Council (SBC)
Ms Shirley Brown

1. APOLOGIES AND ANNOUNCEMENTS

1.1 Apologies had been received from Cllr David Parker, Elected Member, Cllr Jane Cox, Elected Member, Dr Lynn McCallum, Medical Director, Mrs Lynn Gallacher, Borders Carers Centre, Ms Linda Jackson, LGBTQ, Mrs Laura Jones, Director of Quality & Improvement, NHS Borders, Mr Andrew Bone, Director of Finance, NHS Borders and Mrs Gail Russell, Partnership Representative, NHS Borders.

1.2 The Chair welcomed a range of attendees to the meeting.

1.3 The Chair confirmed the meeting was quorate.

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 Extraordinary meeting of the Health & Social Care Integration Joint Board held on 31 October 2022 were approved.

4. MATTERS ARISING

4.1 **Action 2021-6:** The Chair noted that the action was a substantive item on the meeting agenda.

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

5. DIRECTION: BUILDINGS BASED DAY SERVICE PROVISION IN TEVIOT AND LIDDESDALE – NEXT STEPS

5.1 Mr Chris Myers provided an overview of the content of the report. He commented that the Integration Joint Board (IJB) had a strategic commissioning plan for 2018-2023 and part of that plan was to reimagine day services. The IJB as the commissioner had the responsibility to commission services and directions against the strategic commissioning plan, however it had not enacted that process in the instance of the Teviot and Liddesdale day service provision.

5.2 He reassured the IJB that over the past year the approach to governance of the IJB had been refreshed: a Directions and Procedures Policy had been put in place; the strategic commissioning approach had been updated and enacted; and an enhanced governance process had been put in place for the IJB in relation to its commissioning role. He also advised that a number of actions had been agreed on the general responsibility of the IJB in terms of equalities and human rights and a full refresh of the Equalities Mainstreaming Report was being undertaken. The Terms of Reference for the Strategic Planning Group (SPG) would be amended to ensure the SPG considered the detail of impact assessments (IA) and looked at consultation in more detail.

5.3 Mr Myers suggested that there would be a financial impact related to the direction before the IJB and the costs were not currently clear. Work would be taken forward on the scope with service users and carers to understand the model required and the Chief Financial Officer was working with partners in SBC and NHS Borders to ensure appropriate provisions were available.

5.4 Mr Myers recorded his apologies to those affected and advised that he and the Chair had agreed to get in contact with those affected in regard to the oversight of the IJB.

5.5 A robust discussion ensued which focused on: contact with unpaid carers to apologise; direct engagement with those affected; was the Teviot spike within the “We have listened report” on the back of the closure; when listening to unpaid carers there may potentially be a requirement for a buildings based solution in the

future; the consultation for the new service would include the involvement of those affected by the closure; agreement on the need for meaningful apologies; would the inclusion of IA and consultation in the SPG terms of reference be adequate to mitigate other risks on how we work in partnership with other Borders communities; were the SPG already considering the Community Empowerment Act implications and risks of participation requests; should non voting members be made voting members to ensure their voice is valued and improve governance; and workforce supply chain issues and a need to expand the overall pool of people across the partners.

- 5.6 Mr Ralph Roberts suggested there needed to be clarity on the Direction to be issued which was asking for a piece of work to be carried out. He commented that when the outcome of that piece of work was before the IJB for decision, the IJB would need to make that decision in the context of what the impact would be in relation to all the other services.
- 5.7 Cllr Robin Tatler enquired if the unpaid carers survey data was available and if any previous surveys had been undertaken which collected the views of unpaid carers.
- 5.8 Mr Myers commented that the unpaid carers survey data was available and he would share it with the IJB for information. He was aware that previous surveys had been undertaken but was not aware of the detail of those.
- 5.9 The Chair commented that voting and non voting members were dictated by legislation however she assured the IJB that she valued the input of all views and voices around the table and would always take them into consideration when discussing matters.
- 5.10 Mr Tris Taylor suggested the direction was not completely clear and enquired if the IJB was being asked to commission a proposal or a service. Mr Roberts commented that the IJB was being asked to commission a piece of work. The outcome of that piece of work would then need to identify any implications on other service provision before the IJB could consider whether or not to commission a service.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the ruling by the Court of Session on the closure of the Teviot and Liddesdale adult day service.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the role and responsibility of the Integration Joint Board in relation to this process.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the response from the Scottish Borders Council.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** agreed that there was a need for buildings based adult day service provision in the Teviot and Liddesdale locality.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** agreed to amend the direction to read “To ask Scottish Borders Council to continue to work to develop a proposal to inform the re-commissioning of the Teviot and Liddesdale day service in line with the need in the locality and to return to the IJB in February 2023 with a plan for what might be delivered.”

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved the amended Direction to the Scottish Borders Council.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that further work was being undertaken to explore other supports for unpaid carers in line with the results of the unpaid carers survey.

6. CLIMATE CHANGE DUTIES REPORT 2021-22

- 6.1 Hazel Robertson provided an overview of the content of the report. The report described the arrangements in place given the IJB did not own any buildings, fleet or undertake any direct procurement. Previous reports had placed reliance on Scottish Borders Council and NHS Borders to fulfil their climate change duties. Those partner reports were being agreed and would be included in the IJB submission report. In moving forward Mrs Robertson suggested the IJB might consider aspects of a wider duty through its commissioning role for sustainable development goals on activities that it commissioned.
- 6.2 Mr Tris Taylor commented that as a commissioner the element the IJB would be involved in would be the supply change.
- 6.3 Dr Rachel Mollart enquired if the cover paper template for the IJB should reference climate change and Miss Iris Bishop confirmed that the new template to be used from January 2023 had been revised and included a section on sustainability.
- 6.4 Cllr Elaine Thornton-Nicol suggested it should include all journeys that were undertaken on IJB business.
- 6.5 Mr John McLaren queried the reference to equalities issues.
- 6.6 Mrs Sarah Horan welcomed the report and suggested from a workforce perspective it was fundamental to what could be done to manage climate change and support staff to feel more greener through the provision of e-bikes or electric cars and a wellbeing of being greener.
- 6.7 Mrs Robertson commented that the paper was signalling a transition to a different way of reporting on climate change from the IJB. In terms of inequalities she advised that a fuller engagement process would be undertaken and more evidence would be provided.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the legal requirement for the IJB as a Public Body to submit an annual climate change duties report.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved the attached report which reflects that the duties are undertaken by the Scottish Borders Council and the NHS Board as delivery bodies. These reports also set out the planned dates for achieving net zero status for our partner bodies.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that future consideration could be given to the contribution that the IJB could make regarding the climate emergency through progressing activity relating to the Sustainable Development Goals.

7. JOINT STRATEGIC NEEDS ASSESSMENT

- 7.1 Dr Sohail Bhatti provided a presentation to the Board and highlighted: the strategic issues that had been identified through the joint strategic needs assessment and community engagement; life expectancy and healthy life expectancy; ethnicity; deprivation; specialist housing and adaptations; homelessness; smoking, drugs, alcohol and obesity; loneliness; dementia; sight loss and hearing loss; mental health; palliative care; and anchor institutions.
- 7.2 Cllr Elaine Thornton-Nicol welcomed the presentation and seeing all of the information in one place. She commented that there were many people that might be on medication where it might not be the best solution for them, however she urged caution that judgemental situations were not created for those people that did need medication.
- 7.3 Discussion focused on: the benefits of social prescribing; early intervention and prevention; supporting people to come away from loneliness; future iterations of the report might have more breadth in terms of realistic medicine, health needs and provision, number of care home hours delivered, and hours for delayed discharges; self declared proportion of the workforce that declares a disability; understanding the needs of minority groups in the local population; not always enough places to signpost people to for social prescribing; and the suggestion to add living wage data to future reports.
- 7.4 Mrs Jenny Smith sought a commitment that the report would be kept updated moving forward. Dr Bhatti commented that the document was a live document and would be published and would be revised as and when new data was received. He was keen to expand the report as had been suggested and commented that it should be incorporated in everything that was commissioned.

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

8. WE HAVE LISTENED REPORT – NDTI

- 8.1 Mrs Clare Oliver provided an overview of the content of the summary report and highlighted: the engagement process; voices of those with protected characteristics were included; locality focus of the work; effective communication; emerging priorities; and next phase of engagement.
- 8.2 The Chair suggested it was helpful to have both the Joint Strategic Needs Assessment and the We Have Listened Report together on the same agenda as they were twin pillars of work that would inform the future.

Karen Hamilton left the meeting.

- 8.3 Cllr Elaine Thornton-Nicol suggested linking into all of the discussion was space planning and what people were missing in their communities, she commented it was the whole holistic approach to humans including the ability to join things up.
- 8.4 Ms Juliana Amaral commented that community engagement and localities linked with the place making approach was a good opportunity for meaningful engagement to take place across both health and social care. She suggested in moving forward

as the plan was reviewed it would be good to integrate it fully into all aspects of living in society and communities across the Borders and would provide opportunities for health, social care and the third sector to all work together.

- 8.5 Mr Tris Taylor commented that taking into account strategic directions and the priorities within the strategic plan, how could those priorities be looked at on a locality by locality basis to determine preferences for local communities and then be feed into the overall priorities of the IJB. The Chair suggested it be discussed at the next point of developing strategic priorities.

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

9. DEVELOPING STRATEGIC PRIORITIES

Karen Hamilton returned to the meeting.

- 9.1 Mr Chris Myers provided a presentation on the strategic framework to address strategic issues and highlighted: what had been done so far; emerging priorities; draft mission; workforce; waiting times; preventative and anticipatory planning; unpaid carers; older people; focus on activities that have an impact on services and costs; and next steps.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the presentation and the ongoing activity.

10. FINANCIAL OUTLOOK UPDATE

- 10.1 Mrs Hazel Robertson commented that in building on a forward outlook there was a need to think about how the IJB prepared its budgets and financial planning. Rather than presenting financial information in a spreadsheet she was keen to present the information in a doughnut chart and envisaged using that analogy. She further suggested looking at finance in a different way and she was keen to move to a programme management budgeting approach with a marginal analysis in future. She suggested it would enable the IJB to be able to identify those things that would provide the best value for the lowest costs and would help the IJB to redesign resources and services to best effect.
- 10.2 Mr Tris Taylor enquired if the new doughnut/bagel approach would be participatory budgeting. Mrs Robertson confirmed that she was keen to enable localities to be set up and to work with them on that.

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

11. MONITORING AND FORECAST OF THE HEALTH AND SOCIAL CARE PARTNERSHIP BUDGET 2022/23

- 11.1 Mrs Hazel Robertson provided an overview of the content of the report and highlighted that she was forecasting a £6.7m overspend out of a budget of £221m. There were less allocations in the current financial year compared to previous years and there were more restrictions on allocations. She was working on a solution for

funding for the next financial year to tackle the biggest service issues facing the partnership.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the forecast adverse variance of (£6.740m) for the H&SCP delegated services for the year to 31 March 2023 based on available information.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that the forecast position included costs relating to mobilising and remobilising in respect of Covid-19, and assumed that all such costs would be funded via Scottish Government monies held in the earmarked reserve.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that a recovery plan was in development and that any expenditure in excess of delegated budgets in 2022/23 would require to be funded by additional contributions from the partners in line with the Scheme of Integration. Previously, additional contributions had not been repayable.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that set aside budgets continued to be under significant pressure as a result of activity levels, flow and delayed discharges.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** agreed the importance of ensuring that the strategic commissioning and planning process currently in progress was used to identify options for change which would improve the long term financial sustainability of the partnership whilst at the same time addressing priority needs.

12. STRATEGIC PLANNING GROUP MINUTES: 24.08.22

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

13. ANY OTHER BUSINESS

13.1 APPOINTMENT OF EXTERNAL MEMBER OF JB AUDIT COMMITTEE: Cllr Tom Weatherston provided a brief overview of the content of the paper.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved the appointment of Mr Kai Harrod as External Member of the Scottish Borders Health and Social Care Integration Joint Board Audit Committee to 31 October 2025.

14. DATE AND TIME OF NEXT MEETING

14.1 The Chair confirmed that the next meeting of the Scottish Borders Health & Social Care Integration Joint Board would be held on Wednesday 21 December 2022, from 10am to 12noon through MS Teams and in person in Council Chamber, Scottish Borders Council

Meeting concluded at 12.04.