# **Scottish Borders Health and Social Care Partnership Integration Joint Board**

19 July 2023

#### STRATEGIC PLANNING GROUP MINUTES



Report by Iris Bishop, Board Secretary

#### 1. PURPOSE AND SUMMARY

- 1.1. To provide the Integration Joint Board with the approved minutes of the Strategic Planning Group meeting, as an update on key actions and issues arising from the meeting held on 3 May 2023.
- 1.2. The meeting focused on 3 main areas: Hawick Care Village; Draft Strategic Framework; and Teviot & Liddesdale Day Service.

#### 2. **RECOMMENDATIONS**

- 2.1. The Scottish Borders Health and Social Care Integration Joint Board (IJB) is asked to:
  - a) Note the SPG minutes of 3 May 2023.

# 3. ALIGNMENT TO STRATEGIC OBJECTIVES AND WAYS OF WORKING

- 3.1. It is expected that the proposal will impact on the Health and Social Care Strategic Framework Objectives and Ways of Working below:
- 3.2. All items discussed at the SPG will fall into the categories listed below.

Alignment to our strategic objectives								
Rising to the workforce challenge	Improving access	Focusing on early intervention and prevention	Supporting unpaid carers	Improving our effectiveness and thinking differently to meet need with less	Reducing poverty and inequalities			
х	x	x	х	x	X			

Alignment to our ways of working								
People at the heart of everything we do	Good agile teamwork and ways of working – Team Borders approach	Delivering quality, sustainable, seamless services	Dignity and respect	Care and compassion	Inclusive co- productive and fair with openness, honesty and responsibility			
Х	X	х	х	х	х			

## 4. INTEGRATION JOINT BOARD DIRECTION

4.1. A Direction is not required.

#### 5. BACKGROUND

5.1. Once approved minutes from the Strategic Planning Group and Integration Joint Board Audit Committee are submitted to the Integration Joint Board for noting.

# 6. IMPACTS

## **Community Health and Wellbeing Outcomes**

6.1. It is expected that the proposal will impact on the National Health and Wellbeing Outcomes below:

N	Outcome description	Increase / Decrease / No impact
1	People are able to look after and improve their own health and wellbeing and live in good health for longer.	N
2	People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.	N
3	People who use health and social care services have positive experiences of those services, and have their dignity respected.	N
4	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	N
5	Health and social care services contribute to reducing health inequalities.	N
6	People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.	N
7	People who use health and social care services are safe from harm.	N
8	People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	N
9	Resources are used effectively and efficiently in the provision of health and social care services.	N

## **Financial impacts**

6.2. There are no costs attached to any of the recommendations contained in this report.

# **Equality, Human Rights and Fairer Scotland Duty**

6.3. An IIA is not required.

# **Legislative considerations**

6.4. Not applicable.

# **Climate Change and Sustainability**

6.5. Not applicable.

## **Risk and Mitigations**

6.6. Not applicable.

#### 7. CONSULTATION

## **Communities consulted**

7.1. Not applicable.

## **Integration Joint Board Officers consulted**

7.2. The IJB Board Secretary, the IJB Chief Financial Officer and the IJB Chief Officer have been consulted.

# Approved by:

Chris Myers, Chief Officer Health & Social Care

## Author(s)

Iris Bishop, Board Secretary

**Background Papers: SPG Minutes 03.05.23** 

Previous Minute Reference: Not applicable

For more information on this report, contact us at Iris Bishop, Board Secretary, email: iris.bishop@borders.scot.nhs.uk



Minutes of a meeting of the Scottish Borders Health & Social Care Strategic Planning Group held on Wednesday 3 May 2023 at 9am – 11am via Microsoft Teams

**Present:** Chris Myers, Chief Officer (Deputy Chair)

David Bell, Staff Side Representative, SBC

Caroline Green, Public Member Philip Grieve, Chief Nurse, H & SCP

Wendy Henderson, Independent Sector Lead Susan Holmes, Principal Internal Audit Officer, IJB

Karen Lawrie, Partnership Forum Colin McGrath, Community Councillor Amanda Miller, Eildon Housing Association

Clare Oliver, Head of Communications and Engagement, NHS Borders

Hazel Robertson, IJB Chief Financial Officer

In Attendance: Laura White, Minute Taker

Keith Allan, Public Health

Simon Burt, General Manager, Mental Health Services

Elka Fabry, Project Manager

Stephen Fotheringham, Project Manager, SBC

Julie Glen, Adult Social Care, SBC Clare Richards, Project Manager, SBC Kathleen Travers, for Jenny Smith

#### 1. APOLOGIES AND ANNOUNCEMENTS

Apologies received from Cllr David Parker, Dr Sohail Bhatti, Jen Holland, Debbie Rutherford and Jenny Smith

# 2. MINUTES OF THE PREVIOUS MEETING

The Minute of the previous meeting held on 5 April 2023 was approved.

#### 3. MATTERS ARISING/ACTION TRACKER

- Unpaid Carers Update on Agenda.
- Membership Once LWGs are re-established.
- 2023 Action 1 Complete.

The **STRATEGIC PLANNING GROUP** noted the Action Tracker.

#### 4. TEVIOT & LIDDESDALE DAY SERVICE UPDATE

Clare Richards gave a verbal update. The Stage 2 IIA is now complete. Both providers have given a presentation and an options appraisal carried out. Each provider was ranked and scored against each other and against a mixed option. A recommended provider has now been agreed by the task and finish group. The business case will be completed today by HR to be reviewed and responded to by Monday 8 May 23 before going to the IJB on 17 May 23 for approval. The provider will then be informed and can start the Care Inspectorate registration process and arranging transport and housekeeping. The task and finish group will continue to consider the needs for a day service in Newcastleton. HR noted the challenge of how to measure the mixed option but noted her satisfaction in the resulting robust recommendation. Chris Myers added that the scoring had been carried out by 3 carers and 3 professionals. A financial and non-financial options appraisal was carried out. Chris Myers asked the group if they were satisfied with the work carried out by this group.

Caroline Green noted this has been a good piece of work and asked if there has been any research into the needs for a day service in the East of the Borders. Chris Myers reassured the group the needs for a day service is other areas have been considered and the Carers Workstream will now be looking at how to take this work forward into the whole of the Borders in order of need identified with Eildon being the next locality to consider. Directions were reviewed at the meeting by the group and updates made. Chris Myers thanked Clare Richards and Hazel Robertson for their work on this project

Action: Full business case for the day service to be circulated to the group for review and comment by Monday 8 May 23.

The **STRATEGIC PLANNING GROUP** noted the update and recommended the updated business case go the IJB for approval on 17 May 23.

# 5. CONFIDENTIAL: DRAFT ANNUAL PLAN (NOT FOR WIDER CIRCULATION)

Chris Myers shared a summary presentation with the group and thanked Elke Fabry for pulling the presentation together. The Council plan was approved in February 23 and the Health & Social Care framework was approved by IJB in March 23. The H & SC annual delivery plan (ADP) for all delegated services is currently in draft. There is an expectation from Scottish Government that NHS Scotland have an ADP referencing all NHS services (including delegated services). The H & SCP ADP will be compatible with both SBC and NHSB plans and will sit in the middle of both. The aim is to be able to report once and that feeds into the 3 plans. The ADP will align to the 6 identified strategic issues. Each action has an owner identified. The plan notes on-going good joint working, improved delegated budgets and quarterly reporting to the IJB.

The annual plan will continue to be refined. To ensure- what needs to be escalated to the IJB for oversight and performance reporting is directed to the IJB and what does not can happen without the need to go to the IJB.

Wendy Henderson noted the paper was helpful and noted that embedding the IIA gives evidence to the regulator on equality outcomes. Amanda Millar queried wheelchair

accessible housing and integrated OT services, whether the supply is where the need is. The 10-year plan for older people should be reviewed. Chris Myers agreed housing should be included. Although not a delegated service, housing is part of partnership working. Amanda Millar noted there used to be a care and repair advisory group that facilitated this connection with the wider group.

# Action: CM to contact Donna Bogdanovic to discuss housing further.

Caroline Green asked how the hospital based eye care would work and noted her concern for the extra workload for GP practices. Chris Myers advised this would be a further development of the community optometry service having enhanced services within opticians. Discussions are ongoing with optometrists on their having the ability to diagnose. Colin McGrath noted there was no mention of TUPE for the IJB workforce. Chris Myers advised that staff employers would not change. Staff would continue to be employed by either SBC or NHSB and be bound by their terms and conditions. The plan is about having an integrated approach such as joint training. Colin McGrath noted the Highlands have one employing body and asked about the future in the Borders. Chris Myers noted the IJB only employee the Chief Officer and Chief Finance Officer. David Bell noted the IJB is a non-employing board but is a parent body. No formal discussion has been held to discuss the merging of the 2 key major employers. David Bell note the dental section as ambitious to increase the dental capacity when not everyone can even register with a dentist at present.

Hazel Robertson is writing the scheme of delegation for the IJB in June. This will include where operational issues turn into strategic issues for the IJB.

Chris Myers asked for any further comments to be fed back as soon as possible so they can be fed back to the primary care team.

The **STRATEGIC PLANNING GROUP** noted the confidential draft annual plan.

#### 6. FINANCE RECOVERY PLAN

Hazel Robertson shared the draft recovery plan yesterday which is not for further circulation. The IJB is required to have a recovery plan due to the risk. There is a significant savings target. The plan will go to SPG for support. The Health Board has a 3-year recovery plan that requires sign off by the Scottish Government. The aim is to have a longer term approach and HR will set up a sub group to look at this and asked if members wanted to join this group. HR has been having conversations with key staff asking for their thoughts. A whole system approach is needed.

Caroline Green asked how services can be increased to improve outcomes if resources are being reduced. Hazel Robertson advised that that they are looking at how to spend less money by managing services. Wendy Henderson noted that any proposal would need an IIA to identify the impact and evidence due regard for equalities and human rights. Chris Myers added that difficult decisions will need to be made but to be mindful of the outcomes and avoid adverse impact. Hazel Robertson agreed people need to be at the centre. The plan sets out services that are within the scope of the IJB. Workforce is under the scope of their partner bodies as employers. David Bell noted the 3<sup>rd</sup> sector are also employers and

asked how long it will take to be in a balanced position since there has been 5 years of overspend. He agreed the person comes first and the IJB have to deliver what they need.

Hazel Robertson noted the paper is a draft and more analysis is needed. Even after the historical payment from partner bodies there may still be an overspend.

Claire Oliver noted the need to be open and transparent in relation to finance. The finance recovery plan is a challenge but to demonstrate some progress against it to the public. Amanda Miller noted that discussions have to come into the voluntary and 3<sup>rd</sup> sector so as to be able to pull resources together and asked if Hazel had been in contact with any. Hazel Robertson noted she had offered to have conversations with this sector as she recognises the role they play and noted she will re-engage with this group. Linda Clotworthy asked how the process would work as asked for assurance that all services would be considered and not just the easiest ones to cut. Hazel Robertson assured Linda that the IIA will be at the centre of the next stage. It is not about cutting the easiest service to cut but looking at the cost effectiveness versus the impact on the community and staff.

The **STRATEGIC PLANNING GROUP** endorsed the approach laid out in the paper.

#### 7. LOCALITY WORKING GROUP UPDATE

Stephen Fotheringham was welcomed the group. The latest draft was circulated with the Agenda for discussion. The recommendation is to rename groups as Community Integration Groups. To pilot a group in Eildon by September 2023. Following lessons learnt, groups will be set up in Tweeddale/Berwickshire then Cheviot/Teviot & Liddesdale by April 2024. There will be an IIA to ensure good representation. There will be a participatory budget requirement but it was agreed groups should become established for 15-18 months before this budget is allocated. Support proposed is 2 FTE locality co-ordinators with 1 FTE admin post. The paper is going to IJB on 17 May 2023 for approval.

David Bell asked about the difference in Health boundaries/GP practice areas. Stephen Fotheringham noted there will be cross communication between groups to ensure all areas are covered. Chris Myers agreed groups will need to be mindful of this. Colin McGrath added they should check with GPs so they are aware. Stephen Fotheringham noted the response from GPs has been positive. Chris Myers noted the 5 groups would be sub groups of the SPG. Chris asked Wendy Henderson if the IIA should be carried out up front or once the groups were running. Wendy Henderson noted Stephen Fotheringham has already started working on the IIA.

The **STRATEGIC PLANNING GROUP** endorsed the recommendations.

#### 8. NIGHT SUPPORT DUNS PATHFINDER

Julie Glen was welcomed to the meeting to present the paper. The draft paper was circulated for review by the SPG. There has been a pilot in Peebles replacing night care with tech enabled care. There were 240 responses to the follow up survey and many issues raised were address by the issue of a FAQ sheet issued after the survey responses were

received. The majority of night visits are safety checks but develop into continence support which should be dealt with by the emergency response teams instead. Palliative care would continue face to face. There would be no risk of staff redundancy. An additional shift would be added. Following consultation, the proposal is to re-provision night support to improve the care for service users. The proposal is to have a further pilot in the Duns area before rolling out across the Borders, provided the consultation is positive. A draft IIA will be circulate for comment.

Amanda Miller noted they have learning disability services in Duns that have overnight provision and raised the need to have a locality approach for responding teams. Julie Glen was happy to take forward a whole system approach. David Bell asked what the tech was as it would be useful to know when bringing this paper to the SPG/IJB and the public and Julie Glen agreed to include this when taking forward. Chris Myers agreed this should be included when informing the public as not understanding can cause anxiety. A direction has been drafted. The updated paper will go to the next IJB.

Action: CM to circulate the draft direction to the group for information.

The **STRATEGIC PLANNING GROUP** accepted the recommendations in the paper.

#### 9. UNITED NATIONS CONVENTION ON THE RIGHTS OF THE CHILD

Wendy Henderson gave a verbal update on the Bill and its implications. There is a 3-year implementation plan from April 2021to March 2024 with resources and guidance to assist IJBs with preparation for the Bill and develop a local strategic approach. The recommendation is to embed children's rights into the IIA process and review current support. Chris Myers noted the recent launch of the Children & Young People's Planning Partnership in the Borders which resonates with the Bill and noted that health visitors and school nurses are delegated operational and strategic IJB services. Colin McGrath noted to be aware of participation requests. Complaints can be changed into participation requests so as to get a quicker response.

Action: WH to circulate the presentation to the group for information.

The **STRATEGIC PLANNING GROUP** noted the verbal update.

#### 10. ANY OTHER BUSINESS

None.

#### 11. DATE AND TIME OF NEXT MEETING

The Chair confirmed the next meeting of the Strategic Planning Group would be held on Wednesday 7 June 2023 at 10am to 12pm via Microsoft Teams.

**Future Meeting Dates 2023 10am – 12pm:** 2 August 2023, 4 October 2023, 6 December 2023