



Minutes of a meeting of the **Scottish Borders Health & Social Care Integration Joint Board** held on **Wednesday 20 September July 2023** at **10am** in the Council Chamber, Scottish Borders Council and via Microsoft Teams

**Present:**

(v) Cllr T Weatherston (Chair)	(v) Mrs K Hamilton, Non Executive
(v) Cllr R Tatler	(v) Mr T Taylor, Non Executive
(v) Cllr E Thornton-Nicol	(v) Mr J McLaren, Non Executive
Mr C Myers, Chief Officer	
Mr N Istephan, Chief Executive Eildon Housing	
Mrs J Smith, Borders Care Voice	
Ms L Jackson, LGBTQ+	
Mr S Easingwood, Chief Social Work Officer	
Mr D Bell, Staff Side, SBC	
Dr R Mollart, GP	
Mrs J Amaral, Borders Community Action	

**In Attendance:**

Miss I Bishop, Board Secretary  
Mrs L White, PA to Chief Officer  
Mr P Grieve, Associate Director of Nursing P&CS, NHS Borders  
Dr S Bhatti, Director of Public Health  
Mrs L Jones, Director of Quality & Improvement, NHS Borders.  
Ms J Holland, Director of Strategic Commissioning & Partnerships, SBC  
Mrs C Wilson, General Manager Primary & Community Services  
Mrs F Doig, Head of Health Improvement  
Mrs S Elliot, ADP Co-ordinator  
Mr S Burt, General Manager, MH&LD  
Ms S Henderson, Planning & Development Officer, LDS  
Mr P McMenemy, Deputy Director of Finance, NHS Borders  
Ms C Oliver, Head of Communications & Engagement, NHS Borders  
Mr D Knox, BBC  
Mr A McGilvray, Roving Reporter

## **1. APOLOGIES AND ANNOUNCEMENTS**

- 1.1 As the Chair had submitted their apologies and the Vice Chair, Cllr David Parker would be late in attending the meeting, the voting membership nominated Mrs Karen Hamilton to Chair the meeting until Cllr Parker arrived.
- 1.2 Apologies had been received from Mrs L O'Leary, Non Executive, Cllr D Parker, Elected Member, Cllr N Richards, Elected Member, Mrs F Sandford, Non Executive, Mrs H Roberts, Chief Financial officer, Mrs L Gallacher, Borders Carers Centre, Dr L McCallum, Medical Director, Mrs S Horan, Director of Nursing, Midwifery & AHPs, Mr A Bone, Director of Finance, NHS Borders, Mrs J Stacey, Chief Internal Auditor, Mr R Roberts,

Chief Executive, NHS Borders, Mr D Robertson, Chief Executive, SBC, Mrs J Smyth, Director of Planning & Performance, NHS Borders.

- 1.3 The Chair welcomed attendees and members of the public to the meeting including Mrs C Wilson, General Manager Primary & Community Services, Mr S Burt, General Manager MH&LD, Mrs F Doig, Head of Health Improvement and Mr P McMenamin, Deputy Director of Finance
- 1.4 The Chair noted that it was the last meeting that Mr Stuart Easingwood would attend as he moved on in his career. The Chair invited the Board to record their thanks to Mr Easingwood for his expertise and advice over the past years.
- 1.5 The Chair confirmed that 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 **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted there were no declarations made.

## **3. MINUTES OF THE PREVIOUS MEETING**

- 3.1 The minutes of the previous meeting of the Health & Social Care Integration Joint Board held on 19 July 2023 were approved.

## **4. MATTERS ARISING**

- 4.1 There were no matters arising.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted there were no live actions on the action tracker and no matters arose from the minutes of the previous meeting.

## **5. DIRECTION: HOSPITAL AT HOME**

- 5.1 Mrs Cathy Wilson provided an overview of the report and advised that the test of change would be extended in order to explore a further evolved model recognising the unique challenges of the Borders. She further provided a range of reasons for the expansion to go ahead such as: addressing inequalities in the final business case through expanding the service to Hawick; increased complexity of patients; increased referrals to Hospital at Home; demand is exceeding capacity; mixing teams and including a junior doctor, advanced nurse practitioner, pharmacist and dietician; testing over medication to avoid sedation; test the model over the winter period; maintenance of packages of care; District Nursing teams skill mix; moving from a 5 day to a 7 day service; and comparable data for discharge rates from the service compared to wards in the acute hospital.
- 5.2 Discussion focused on: staffing challenges; training; assurance that the IA commitments would be achieved; Programme Board to help educate and support the team in regards

to the duty under the Fairer Scotland Act; extending the package of support to include physical adaptations to peoples home to ensure the medical care has the best chance to be as effective as possible; inclusion of the Carers Centre to assist with the evaluation of the wellness of carers going forward; social disadvantage as we move into winter and links available to money wise, third party organisations and adult protection; clinical nurse specialists may be of more value in the community than the secondary care setting; would be useful to see data on patients that cannot be accepted; psychological safety is a test of change; national portal and mentors for support; alternative staffing roles such as Assistant Nurse Practitioners and physician assistants to maximise the model; and lots of interest in the service at a national level.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted progress made between April 2023 until August 2023;

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** extended the current TOC, scheduled to end 27 October 2023, to run until 31 March 2024; and

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted HaH team's intention to apply for further funding by September 2023.

## **6. COMMUNICATIONS AND ENGAGEMENT FRAMEWORK**

- 6.1 Mrs Clare Oliver provided an overview of the content of the paper and highlighted setting out the approach to delivery of the strategic framework and referenced the involving people framework which was considered evidence of a mainstreaming action.
- 6.2 Discussion focused on: measuring engagement activity and behaviour change as a helpful extension to the Stage 3 IA process; staff training and awareness; challenges of engaging with the public; focus on older people engagement, where is the younger people engagement; good baseline; evolving framework; reach into individual community councils; and engaging with children and young people does occur.
- 6.3 Mr Chris Myers advised that whilst Mrs Jill Stacey had sent her apologies she wished the Board to note that "the approval of the Framework would demonstrate the implementation of an agreed improvement and therefore enable a 2021/22 Internal Audit recommendation for the IJB (AUDIT.175) to be marked as completed."

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved the HSCP Communications and Engagement Framework 2023-2026.

## **7. FINANCIAL OUTLOOK UPDATE**

- 7.1 Mr Paul McMenamin provided a short presentation on the Quarter 1 financial position. He highlighted several elements including: outturn variance of £8.2m; pressure in social care functions in non delegated functions primarily; LD service pressures and funding tranches have been drawn down; underspends in home care and reduction in the use of agency staff; delegated health care functions have significant pressure in regard to efficiency savings; prescribing pressures; undelivered savings positions; set aside healthcare functions and mitigating actions; and a communication just received from the

Scottish Government to Health Boards and the Partnerships to identify where they hold reserves that were based on funding allocations made this year or previously with a view to relaxing the ring fencing to enable them to be used more creatively to help the bottom line position.

- 7.2 Discussion focused on: over spending on the over medicalisation of the entire health and care system through the prescribing budget; upstream investment in prevention; balance of helping people to deliver the best outcomes for people at the lowest cost; opportunities in encouraging health to engage with the social prescribing project; social care are not allowed to overspend on their budget and lots of financial input is provided to them to achieve break even; presentation of the budget to allow to get upstream; strategic oversight and service delivery; allocation of resources to areas for best value; and a key objective to focus on prevention and early intervention as the ADP is developed.

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

## **8. UNSCHEDULED CARE SURGE PLANNING AND DELAYED DISCHARGE TRAJECTORY UPDATE**

- 8.1 Mr Chris Myers provided an overview of the content of the report and highlighted: high impact actions matched to bed occupancy; aim to close existing surge capacity; and management of risks.
- 8.2 Mr Tris Taylor welcomed the layout of risks being tabulated and enquired how they impacted each other and if they multiplied. Mr Myers commented that the intention had been to record any actions that would have an impact on the delivery of an improved position and to record the risks of non delivery. He expected to be in a better position when actions were progressed as they would mitigate the relevant risk.
- 8.3 Mr Taylor commented that the financial risk created clinical risk and heightened other risks, and what was missing was the opportunity to reduce expenditure.
- 8.4 Mrs Jenny Smith enquired what the alternatives were and welcomed the whole sector approach to try and address the matter. She enquired about commissioning, negotiating and billing. Mr Myers commented that more work had been carried out in with the third sector in terms of commissioning in the winter to look at what the opportunities were.
- 8.5 Mr Nile Istephan enquired if there was a clear position on RAAC. Mr Myers commented that surveys were being conducted nationally across the health and education sectors and priorities were being identified in accordance with perceived risk. He advised that there was no significant concern in regard to RAAC, however surveys were on-going.
- 8.6 Cllr Tom Weatherson enquired about the impact of the movement of staff in closer contact with other staff across the hospital setting. Mr Myers advised that he would clarify the point as staff followed infection control procedures when contacting staff in different areas.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the progress made by the HSCP Joint Executive Team on actions which support surge planning

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the delayed discharge trajectory

## **9. SCOTTISH BORDERS HSCP LEARNING DISABILITY SERVICE COMING HOME PROGRAMME**

- 9.1 Mr Simon Burt provided a presentation on the Coming Home programme and highlighted several key elements including: strategic direction to ensure people are cared for as close to home as possible; dynamic support register monitoring by Scottish Government; current demand is 12 people in out of areas placements; prediction is 3 people coming through the system per year; Coming Home Programme Board and associated workstreams; financial implications; Scottish Government allocation; and risks and mitigations.
- 9.2 The Chair commented that some individuals in long term placements may potentially consider their placement as home and not recognise the Scottish Borders as their home. Mrs Susan Henderson commented that there were some 19 people in out of area placements who were happily settled and did consider those facilities as their homes.
- 9.3 Dr Sohail Bhatti suggested the issue represented capacity rather than risk and suggested the commissioning of a private provider or registered social landlord to base a facility in the Borders could generate extra resource and potentially attract clinicians.
- 9.4 Mrs Julianna Amaral enquired in terms of specific support required and what the gaps were in the Scottish Borders.
- 9.5 Cllr Elaine Thornton-Nicol enquired if the anticipated additional placements each year were drawn from the transitions process for 14 year olds, so that a more definitive forecast could be provided instead of an averaging. She was concerned about the appropriateness of on-going input of a 5:1 staffing ratio in private hospitals for individuals, especially if there was no improvement plan or improved outcomes for the individual. She suggested an early involvement with children's services to identify potential future service users be considered.
- 9.6 Mr Stuart Easingwood commented that he was supportive of the programme and that children's services were in a similar position in the sense that they were seeing a new level of complexity in child cases. He advised that there was also already a good partnership approach with registered social landlords to look at future solutions. In terms of predictors for the future, he agreed that more involvement with children's services was required and he emphasised that people were also identified through adult LD services. He also reminded the Board that there were people that migrated into the Scottish Borders with complex needs.
- 9.7 Mr Nile Istephan commented that the properties at Kelso that were alluded to earlier in the discussion were Eildon Housing properties and they represented a £600k investment by Eildon (60%) and the Scottish Government had funded the remaining 40%. The

properties were for service users and further work was being taken forward to find solutions for vulnerable people. He suggested there was positive collaboration and partnership opportunities across the housing sector to provide people with complex issues with a home environment and support. There were challenges in terms of workforce to ensure the sustainability of services.

- 9.8 Mr Burt welcomed the discussion and commented that the service worked closely with children's services and with registered social landlords. He reassured the Board that younger people in the age range 13-14 years old were being identified and services liaised closely with clinical teams who regularly visited clients.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** supported the initiatives being developed to achieve the Scottish Government's strategic aims set out in the "Coming Home: A Report on Out-of-Area Placements and Delayed Discharge for People with Learning Disabilities and Complex Needs" and 'Coming Home Implementation: report from the Working Group on Complex Care and Delayed Discharge' (2022).

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that the Scottish Government would be monitoring the H&SC partnerships progress in achieving the Strategic aims set out in the reports in 2.1a via the "Dynamic Support Register".

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that based upon current forecasts, to deliver placements for all 17 people in scope created a financial plan gap.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** agreed with the development of a future funding model between NHS Borders, Scottish Borders Council and the IJB, which will require resources to be identified within the totality of the IJBs financial plan.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** remitted the Chief Officer to escalate the funding risk to the Scottish Government on behalf of the Integration Joint Board and the Health and Social Care Partnership, and to seek a national risk share approach to better support the financial risk for areas with relatively smaller populations.

## **10. PRIMARY CARE IMPROVEMENT PLAN ANNUAL PROGRAMME REPORT**

- 10.1 Mrs Cathy Wilson provided an overview of the content of the report and highlighted that it was a look back from April 2022 to March 2023 and she highlighted that the report showcased the good work that had been achieved during that period.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the content of the report and considered the issues raised in the report.

## **11. ALCOHOL AND DRUGS PARTNERSHIP ANNUAL SURVEY RETURN TO SCOTTISH GOVERNMENT 2022-23**

- 11.1 Mrs Fiona Doig provided an overview of the content of the report.

The **SCOTTISH BORDERS HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved final sign off of the Annual Survey.

*Cllr Robin Tatler left the meeting.*

*The meeting was no longer quorate.*

## **12. DIRECTIONS TRACKER**

12.1 Mr Chris Myers provided an overview of the content of the directions tracker.

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

## **13. STRATEGIC PLANNING GROUP MINUTES: 07.06.23, 05.07.23**

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

## **14. ANY OTHER BUSINESS**

14.1 Mr Chris Myers provided an outline of the format for the IJB Development session to be held on Wednesday 18 October. He advised that it would include a discussion on the roles and remit of the IJB and a visit to the Community Equipment Store in Tweedbank.

14.2 Mr Myers also advised that the Chief Social Work Officer Annual Report would be submitted to the November IJB meeting for noting.

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

## **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 15 November 2023, from 10am to 12 noon through MS Teams and in person in the Council Chamber, Scottish Borders Council.

15.2 Cllr Tom Weatherston recorded the thanks of the IJB to Mrs Karen Hamilton for stepping in and chairing the meeting at the last minute.