

Item 3.1 - Minutes

Edinburgh Integration Joint Board

9.30 AM, Friday 25 September 2015

Present:

Board Members: George Walker (Chair), Councillor Elaine Aitken, Carl Bickler, Sandra Blake, Andrew Coull, Christine Farquhar, Councillor Joan Griffiths, Councillor Ricky Henderson, Kirsten Hey, Councillor Sandy Howat, Moira Pringle, Gordon Scott, Ella Simpson, Richard Williams, Maria Wilson, Councillor Norman Work

Officers: Monica Boyle, Karen Dallas, Carol Harris, Susanne Harrison, Gavin King, Alex McMahon and Chris Whelan.

1. Welcome and Apologies

George Walker welcomed those in attendance to the meeting and provided an update on the Edinburgh Integration Joint Board (EIJB) Chief Officer recruitment process. Shortlisting of candidates had taken place on 24 September 2015 and information would be circulated to the interview panel regarding this on 28 September 2015. The formal selection process would take place over two days. Candidates would meet a stakeholder panel on the first day, followed by a formal interview the next day.

Apologies were noted from Shulah Allen, Kay Blair, Hugh Dunn, Alex Joyce, Angus McCann, Ian McKay and Tim Montgomery and Sandra Blake.

2. Note of meeting of the Edinburgh Integration Joint Board 17 July 2015

Decision

To approve the minute of the meeting, subject to the inclusion of Alex McMahon as in attendance.

(Reference – note of the meeting of the Edinburgh Integration Joint Board - 17 July 2015, submitted.)

3. Matters Arising

3.1 Communication: Website and Extension of Branding

Decision

To note that a further report on website development (with costings) and the wider communications engagement would be submitted to the next meeting of the Edinburgh Integration Joint Board.

4. Rolling Actions Log

The Rolling Actions Log, containing decisions agreed at the previous meeting of the EIJB, for 25 September 2015 was presented.

Decision

- 1) To note the Rolling Actions Log and the updates provided.
- 2) To agree to include visits to acute facilities in the schedule of visits.

(Reference – Rolling Actions Log – 25 September 2015, submitted.)

5. Governance Arrangements, Capacity and Infrastructure

Alex McMahon presented a report on governance, capacity and infrastructure in relation to Older People's Services. The following was highlighted:

- A request had been made to the Scottish Government for bridging finance to support the Transformational Plan. This was expected to be approximately £2m and would be linked to performance.
- The Plan included the opening of additional beds at Gylemuir House, domiciliary care staff were currently being recruited to support this.
- The remaining two open wards at the Royal Victoria Hospital had been badly damaged by flooding. Patients had been moved and next steps were being considered.
- Key risks associated with the reduction in delayed discharge levels, including finance and recruitment, had been identified.

Chris Whelan provided an update on the proposed new contract for care workers in Edinburgh. This was expected to go live in August/September 2016. It was advised that a cost pressure of £8m was expected due to the introduction of a new national living wage. It had been advised that additional funding would not be received from Scottish Government to address this shortfall.

The following comments were raised during discussion by board members:

- It would be necessary to demonstrate progress against key indicators with the first tranche of Scottish Government bridging finance in order to secure the second half of funding.
- Interim Localities Managers were scheduled to be appointed on 2 October 2015.
- Any plans should consider both efficiencies and capacity.
- The Professional Advisory Committee should be built into the governance arrangements outlined at in the report.
- A finance representative would ideally be appointed to the Older People's Executive Group.

Decision

- 1) To note the progress in securing funding from Scottish Government for year one of a three year transformation plan.
- 2) To note that additional beds within Gylemuir would be opened as part of the three year transformation plan, and that recruitment for domiciliary care workers was ongoing, with the first cohort recruited, trained and in place for the week beginning 18 December 2015.
- 3) To note that there was £300,000 within the transformation fund which was available to the Edinburgh Integration Joint Board to support the governance and infrastructure required to deliver this agenda.
- 4) To agree the governance arrangements set out in section 3 of the joint report by the Associate Director of Strategic Planning and the Senior Manager of Older People's Services, subject to Partnership and Finance representatives being added to the membership of the Older People's Executive Group and noting that the GP Sub-Committee would be asked to nominate the 2 GPs.
- 5) To support the Interim Management Team in continuing its dialogue with Scottish Government in relation to years two and three funding requirements.
- 6) To agree and endorse the need for a minimum of 80 packages of care (discharges) to be delivered weekly, from as early a date as possible, to drive a step change in performance.
- 7) To request further information on activity within hospital teams to support effective patient discharge.
- 8) To agree to receive further information on the ongoing review of Council Occupational Therapist services.

(Reference – joint report by the Head of Service, Older People, CEC and Associate Director, Strategic Planning, NHS Lothian – CEC, submitted.)

6. Transforming Older People's Services – Communication and Engagement Activity

Carol Harris presented an overview of communication and engagement activities, including aims and objectives, used to support the Older People's Executive Group in the implementation of the redesign programme.

Board members highlighted that it would be beneficial to start engagement with network forums in advance of the official confirmation of timelines and that sensitivity would be required regarding the closure of the Royal Victoria Hospital.

Decision

To support the need to actively engage with staff, patients and communities through the range of communication channels regarding the redesign of older people's services in Edinburgh, in particular the development of new Integrated Care Facilities.

(Reference – report by the Head of Communications, NHS Lothian, submitted.)

7. Transition Fund Utilisation

The utilisation of the Transition Fund, made available by the Scottish Government to support the development of the EIJB, was detailed. Approximately 50% of the £615k funding allocation had been committed by both partners up to 1 April 2015.

Decision

- 1) To note the level of expenditure committed to date, and the carry forward into 2015/16 financial year.
- 2) That expenditure for the period(s) subsequent to 1 April 2015 should be associated with growing capacity and project management to drive change. In part this might be through the use of external support to review current practice and ways of driving efficiency and productivity whilst also releasing cash.
- 3) That no further expenditure should be incurred from 1 April 2015 on embedded staff.

(Reference – joint report by the Chief Social Work Officer, CEC and the Director of Strategic Planning, Performance and Information, NHS Lothian, submitted.)

8. GameChanger – Public Social Partnership

Details were provided of four established Public Social Partnerships (PSP). These were cited as strong examples a co-planning and co-diversity approach, aimed at fulfilling the strategic objectives and priority actions of the Strategic Plan.

Game Changer was a new PSP led by NHS Lothian, Hibernian Football Club and the Hibernian Community Foundation. The stated aim of the PSP was to unlock the power and passion associated with football; to make greater use of all Hibernian's physical, cultural and professional assets; and to deliver a better, healthier future for the most vulnerable, disenfranchised or disadvantaged in local communities.

Decision

- 1) To acknowledge the key role of the Public Social Partnership in the delivery of shared strategic priorities.
- 2) To support the four Public Social Partnership workstrands currently active.
- 3) To recognise the potential contribution of GameChanger to assist with delivering on a number of strategic objectives with a particular focus on preventative approaches and communities and individuals who experience significant health inequalities.
- 4) To support the development of flagship and road map proposals which will include the preparation of funding applications.
- 5) To support the potential application of the Public Social Partnership model to other areas of health and social care delivery which in turn would support the delivery of the Edinburgh Integration Joint Board Strategic Plan.
- 6) To consider future options at a development session, to include localities and inequalities issues, and links with the draft Strategic Plan.

(Reference – report by the Strategic Programme Manager, NHS Lothian, submitted.)

9. Winter Planning

Arrangements for winter planning being undertaken across NHS Lothian, and the process for submission to the NHS Lothian Board in October 2015, were detailed. A draft version of the Winter Plan was appended to the report. During discussion the following points were raised by board members:

- A preventative model would be essential if the EIJB was to maintain a sustainable winter plan. This would include supporting patients outside of acute facilities.
- Engagement and consultation should involve non-professional networks, such as the British Red Cross Assisted Discharge Service, unpaid carers etc.
- A shift in the balance of care from acute to community-led services would impact upon workloads for General Practitioners.
- The agreed approach for the Winter Plan would need to be person centred.
- Performance monitoring should utilise a wider range of indicators than just four hour breaches.

- It would be necessary to record lessons learned, for use when drafting future iterations of the Winter Plan.

Decision

- 1) To note the approach being taken and the work to date, and await a final version of the Winter Plan for the November 2015 meeting of the Edinburgh Integration Joint Board.
- 2) To request more detailed information to the November 2015 Edinburgh Integration Joint Board meeting on the scope, to include more details on performance monitoring, and lessons learned.
- 3) To note that in the meantime the current version would be considered by the NHS Lothian Board in early October 2015, and that the Chair would reflect the Edinburgh Integration Joint Board's discussion then.

(Reference – report by the Associate Director of Strategic Planning NHS Lothian, submitted.)

10. Communication and Brand Development

Decision

To note that the item had been withdrawn from the agenda.

11. Financial Assurance for the Integration Joint Board

Moira Pringle detailed key financial actions required in advance of 1 April 2016, when the EIJB was scheduled to become fully operational. These included:

- Development of a financial framework for the Strategic Plan;
- Agreement of budgets delegated from City of Edinburgh Council (CEC) and NHS Lothian (NHSL) following a due diligence process;
- A strategy for working with the other three Lothian IJBs, CEC and NHSL to agree where risk would be jointly managed and which mechanism(s) would be used;
- Working with the Integrated Management Team to develop an agreed set of 'directions' with aligned financial resources;
- Establishing appropriate governance arrangements; and
- Development of reporting mechanisms to provide the EIJB and the Integrated Management Team with appropriate and timely financial information.

The following points were raised during discussion by board members:

- Any reduction in mental health nursing spend would have a significant negative impact in an area where resources were already low.

- It would be important to share information regarding risks with other IJBs as many would be facing similar challenges.
- Respective internal auditors would be invited to present reviews by CEC and NHSL internal audit departments. Governance and finance had been identified as the biggest risks currently facing the EIJB.
- Both NHSL and CEC Chief Executives had made a commitment to explore the possibility of multi-year budgeting.

Decision

- 1) To note the contents of the Interim Chief Finance Officer's Report and to support the work plan laid out.
- 2) That the 11 December 2015 development session would focus on the budgets being delegated to the Edinburgh Integration Joint Board. In turn this session would be required to assist the Joint Board members in understanding key financial pressures and also the process for agreeing any change and the criteria and process for change.
- 3) To agree to consider Finance at the December 2015 development session, alongside the draft Strategic Plan.
- 4) To request further information on the decision making process regarding the £1.1m reduction in mental health nursing spend.

(Reference – report by the Interim Chief Finance Officer, submitted.)

12. Information, Communication and Digital Technology: Position Statement

A summary was provided of the current position with respect to joint developments in information governance and information, communications and digital technology (ICDT). This included:

- An update on information governance
- An updated 'Road Map'
- A description of recently delivered, ongoing and scheduled technical work;
- A proposed approach for supporting the development and delivery of the Strategic Plan
- An update on work to develop the approach for the provision of technical support functions to the EIJB.

In response to questions from Board Members, it was confirmed that a joint protocol for data sharing existed.

Decision

- 1) To note the current position on information governance and that a further report would be provided in due course.
- 2) To agree to the assumptions adopted for joint working in ICDT.
- 3) To note the update of the 'Road Map' and the technical work recently delivered, ongoing or scheduled.
- 4) To invite the Council's ICT Solutions Team and NHS Lothian e-Health services to review and comment jointly on the Draft Strategic Plan as part of the consultation.
- 5) To request that an appropriate approach be developed for ensuring that information governance and ICDT requirements could be considered for all major service/pathway re-design proposals to ensure improved information flows along the pathway.
- 6) To request that appropriate and affordable ICDT delivery/implementation plan(s) were developed in relation to these service/pathway re-design proposals.
- 7) To note the Council and NHS Lothian would be developing a proposal for the provision of 'Professional/Technical and Administrative' support services to the Joint Board and that this would include support for information governance and ICDT.
- 8) To note the 'starter list' of requirements for information governance and ICDT and to note that an update would be provided on this in due course.
- 9) To use a future development session to address current issues, including shared protocols, and future development, and to ask Angus McCan to act as the Joint Board's member lead on this.

(Reference – report by the Integration Programme Manager, CEC, submitted.)

13. Proposals for Receiving Deputations

Gavin King presented a report which included options that the EIJB could adopt with regard to deputations. Board members were advised that deputations were a unique way for external organisations to feed into the decision making process and should not be seen as a replacement for existing consultation processes.

The following points were raised by board members during discussion:

- Deputation requests at Development Sessions would not be appropriate, as these workshops were intended to offer private briefings to Joint Board members.
- A programme of upcoming agenda items would help organisations, who would later make deputations, engage with the decision making process at an earlier stage.
- A trial period would allow the EIJB to fine tune the deputation process.

- Clear guidelines would be required in order to ensure that only appropriate deputations were considered.

Decision

- 1) To agree in principle to allow deputations at some meetings of the Joint Board.
- 2) To request detailed guidelines on how the process would work in practice, and on the scope for allowing deputations at meetings for a pilot period.

(Reference – report by the Interim Management Team, submitted.)

14. Audit Committee - Options

Gavin King presented a report regarding the possibility of the EIJB establishing an Audit Committee to ensure appropriate consideration of governance, risk and assurance matters. It was advised that the creation of an audit committee would be in line with good practice governance standards in the public sector.

Decision

To agree option 2.1, to establish an Audit Committee with a wide ranging audit risk and scrutiny remit) and to request a report to the next meeting on its possible membership and terms of reference.

(Reference – report by the Deputy Chief Executive, CEC, submitted.)

15. New Grant Programme for Prevention of Health Inequality from 2016/17

Following Council's decision to transfer responsibility for developing grant programmes and making grant awards to executive committees, the 2015-16 grant process for reducing health inequality was approved by Health, Social Care and Housing Committee on 27 January 2015.

The report outlined that responsibility for Health and Social Care grant systems would transfer to the Health and Social Care Partnership with final allocation decisions through the EIJB. A new programme of grants for the prevention of health inequality to operate from 2016/17, using an updated policy framework with funding criteria based on this, was proposed. A parallel report was agreed by the Health, Social Care and Housing Committee of the Council on 16 June 2015.

Decision

To approve the recommended approach to the new grant programme for preventive action on health inequality, including:

- a) Reduction of the priority outcomes from 13 to 10 by removing or merging three outcomes set out in Paragraph 13 of the report.
- b) Retaining the priority for six of the ten outcomes set out in Paragraph 11 of the report as key areas for partnership work and funding priorities in the preventive programme.
- c) Continued coproduction work to improve definitions of some assessment criteria, such as enhancing local services and continue the development of impact measures.
- d) The award of three year grant funding from 2016/17 through an application process in 2015.
- e) Consideration of grants at the Joint Board meeting in February 2016 for grants starting in April 2016, with a phased approach aligned to partner funding cycles
- f) That award recommendations take into account agreed budget targets and arrangements to rationalise the funding periods for HSCP grant with the main joint funding sources.

(References – minutes of the Health and Social Care and Housing Committee 27 January 2015 (item 1) and 16 June 2015 (item 7); minute of the Communities and Neighbourhoods Committee 11 February 2014 (item 1); report by Health and Social Strategy Manager, submitted.)

16. Request for Board Membership

A letter from Rene F. Rigby on behalf of Scottish Care requesting membership of the EIJB was presented.

Decision

To refuse the request for Board membership, on the basis that there were already a number of avenues for the organisation to influence Joint Board policy.

(Reference – letter from Scottish Care, submitted.)

17. Risk Management Update

It was proposed that Alex McMahon scheduled a workshop on risk for a future development session meeting of the EIJB.

Decision

- 1) To agree to hold a development session/ workshop on Risk.
- 2) To note that a timetable of development sessions would be produced and circulated.