

EAST LOTHIAN INTEGRATION JOINT BOARD

26 JANUARY 2017

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MINUTES OF THE MEETING OF THE EAST LoTHIAN INTEGRATION JOINT BOARD

WEDNESDAY 21 DECEMBER 2016
COUNCIL CHAMBER, TOWN HOUSE, HADDINGTON

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Voting Members Present:

Councillor S Akhtar
Councillor S Currie
Councillor Goodfellow
Councillor D Grant
Ms F Ireland
Mr A Joyce
Mr P Murray

Non-voting Members Present:

Ms F Duncan
Dr A Flapan
Mr D King
Mrs M McKay
Ms S Saunders
Mr D Small
Mr E Stark
Dr J Turvill
Mr A Wilson

ELC/NHS Officers Present:

Mr C Briggs
Mr P Currie

Visitors Present:

Mr M Bonnar (MELDAP)

Clerk:

Ms F Currie

Apologies:

Mr M Ash
Dr R Fairclough
Mr D Harvie
Ms A MacDonald
Ms M McNeill

Declarations of Interest:

None

1. MINUTES OF THE MEETING OF THE EAST LoTHIAN INTEGRATION JOINT BOARD OF 24 NOVEMBER 2016

The minutes of the East Lothian Integration Joint Board meeting of 24 November 2016 were approved.

2. MATTERS ARISING FROM THE MINUTES OF THE MEETING ON 24 NOVEMBER 2016

The following matters arising from the minutes of the meeting held on 24 November were discussed:

Cockenzie Medical Centre – David Small advised members that the standard business case had been presented to the Lothian Capital Investment Group and, following some refinement, would be considered at the NHS Lothian Finance & Resources Committee meeting in February 2017.

3. CHAIR'S REPORT

The Chair thanked members for attending what had been a very interesting and worthwhile Primary Care workshop on 24 November 2016. Mr Small explained that the key propositions from this meeting would be used to formulate some of the Directions for 2017/18 and to influence the Lothian-wide discussions on Primary Care. A follow up event would be hosted by Edinburgh in February 2017.

In response to questions, Mr Small indicated that for 2017/18 it would for IJBs to decide how to spend their share of Primary Care budgets. He added that a workshop on financial matters was being arranged for East Lothian IJB members and that this would take place in January 2017.

4. NHS HEALTHCARE GOVERNANCE COMMITTEE

Fiona Ireland reported back on two meetings of the NHS Healthcare Governance Committee which took place on 27 September and 29 November 2016.

Ms Ireland advised that the East Lothian IJB had presented its proposals for comprehensive reporting arrangements at the September meeting. These were accepted by the Committee with the suggestion that they be used as a template for other IJBs to follow. At the meeting in November, the Committee considered a range of topics including GP sustainability and Child and Adolescent Mental Health Services (CAMHS). The discussion on CAMHS had centred on access to psychological therapies. Ms Ireland advised members that there was huge pressure on this service and an action plan had recently been put in place to reduce waiting times for psychological therapies.

In response to questions, Ms Ireland and Mr Small agreed to look into the possibility of IJB members receiving a copy of the action plan and having access to other papers submitted to the NHS Healthcare Governance Committee.

5. EAST LOTHIAN COUNCIL POLICY & PERFORMANCE REVIEW COMMITTEE AND AUDIT & GOVERNANCE COMMITTEE

Councillor Jim Goodfellow gave members a brief outline of the remits and membership of the Council's scrutiny committees. He advised that the Audit & Governance Committee had recently considered the Children and Adult Services Risk Register and the Policy & Performance Review Committee received performance reports on social work complaints processes and Delayed Discharges.

Councillor Goodfellow added that two reports of relevance to the IJB would be presented at the January meeting of the Audit & Governance Committee: 'Social Work in Scotland (Audit Scotland) and a report from the Council's Internal Audit Manager containing proposals for the sharing of audit reports and information between the Council and the IJB.

6. FINANCIAL ASSURANCE 2016/17

The Chief Finance Officer had submitted a report updating the IJB on financial assurance work for the IJB for 2016/17.

David King presented the report summarising the background and decisions taken to date in respect of financial assurance for 2016/17. He advised that NHS Lothian were predicting a breakeven position for 2016/17 and, if this proved to be the case, they had agreed to underwrite the projected overspend in the health element of the IJB's budgets. He added that East Lothian Council had recently agreed to put an additional £1million into the Adult Wellbeing budget which meant that this budget was also likely to breakeven, although the position remained challenging.

Mr King also referred to the use of Social Care Fund (SCF) monies to fund other budget pressures, including the increased cost of the Living wage, and to provide additionality, some of which had already been done through funding of additional care packages. He suggested that the IJB should continue to move forward with its Partners and avoid placing additional pressures on them during the current financial year.

Mr Small added that the additionality monies given to address delayed discharges were already having an impact with an increase in weekly care hours available to over 65s, a substantial increase in Self Directed Support packages and a continued improvement in the delayed discharge figures.

In response to questions from members, Mr Small said that it was his intention to prepare a review of the impact of additionality monies during the period April 2016 to January 2017 and present this to the IJB in the New Year. He said that this would also tie-in with the planned workshop on finance which was being arranged for January.

Margaret McKay said that it was important for the IJB to be clear about what it meant by 'additionality'. At the moment it seemed to be doing more of the same for good purpose whereas it should really be about change and transforming the way services are provided.

Peter Murray observed that there was often an expectation that such change will generate efficiency savings and when setting budgets for future years the IJB would need to be confident that any proposals were achievable. He also said that significant public engagement was required to ensure that service users understood how they might be affected by any proposed changes.

Councillor Currie agreed, adding that meeting targets for efficiency savings was crucial if the IJB was to deliver on its longer term goal of investing in real additionality and service redesign. He said that the IJB must also be realistic about setting these targets and ensure that appropriate measures are in place to monitor performance and mitigate against the risk of failure, which would not only impact on the current budget year but on future years as well.

Alex Joyce said that the IJB needed to adopt a pragmatic approach. Much of what was being dealt with this year had been inherited from the previous system and it was important now to focus on planning for future years. He welcomed the opportunity to debate financial matters at the workshop in January and also to consider further what the IJB means by 'additionality'.

Councillor Akhtar agreed that the IJB needed to be realistic and to support its Partners. She said that the additional money provided by the Council was hugely significant and that budgets were likely to become even more challenging in future years.

The Chair thanked members for their contributions and acknowledged the challenges ahead. He said that strong financial planning was key and he hoped that the workshop in January would allow members to debate all of the issues and agree a way forward.

Decision

The IJB agreed to:

- (i) Note that NHS Lothian will underwrite the projected overspend in the health element of the IJB's budgets on the basis that NHSiL can break even in 2016/17; and
- (ii) Recognise the financial pressures within the Adult Wellbeing operational budgets and support them as necessary in 2016/17. This on the basis that:
 - a. East Lothian Council underwrite any overspend in the social care element of the IJB budget.
 - b. That in 2017/18 an appropriate element of additionality is delivered from the recurrency of the 2016/17 SCF investments.

7. DELAYED DISCHARGES

The Chief Officer had submitted a report updating the IJB on performance on delayed discharges in East Lothian.

Mr Small presented the report drawing members' attention to the reduction in the number of patients awaiting discharge during the period October – November 2016 and outlining the key factors which supported this improvement. He indicated that the improvement had continued during December but that a spike in numbers was expected during January/February 2017. The situation would continue to be monitored closely and a further update provided to the IJB.

In response to questions from members Mr Small expanded on the reasons for fluctuations in the figures during the census period and the current provision of step down facilities. Dr John Turvill provided background on the Hospital at Home service and its impact on delayed discharges.

Mrs McKay observed that those patients who were moved to step down facilities were still in a hospital setting and the length of time they remained there should also be monitored. She added that often the distinction between care homes and nursing homes could seem quite artificial and it was more important to focus on the provision of comprehensive care.

Councillor Akhtar welcomed the improvement in the figures and said that increasing the numbers of available step down beds would help to continue this positive progress.

Councillor Currie suggested that future reports might include a breakdown of private and public care provision and explanations as to why some facilities were full and others not. He added that only by having facilities which were flexible enough to adapt to changing levels of demand could the IJB hope to fully address the problem of patients remaining in hospital longer than necessary.

Decision

The IJB agreed to note the recent improving trend on performance.

8. DRUGS AND ALCOHOL FUNDING IN EAST LoTHIAN 2016/17

The Chief Officer had submitted a report explaining the work being undertaken to deliver a redesign of drug and alcohol services for East Lothian driven by the 23% reduction in funding ADPs received from the Scottish Government for the financial year 2016/17. The government's position was that as additional funding had been provided to NHS Boards any shortfall should be made up by NHS Boards.

Martin Bonnar presented the report outlining the background and the key issues contained in the report. He responded to a number of questions on the range of facilities available and the consultation taking place with services users and carers.

A lengthy discussion followed in which the members debated the impact of the reduction in funding, the allocation of budgets for different aspects of the service, the implications for future Directions issued by the IJB and how to ensure that the fullest range of support and treatment options remained available to service users within East Lothian.

Councillor Akhtar expressed her concern that this 23% reduction would affect services for some of the most vulnerable people in the county and asked for this to be noted in the minutes.

Decision

The IJB agreed to:

- (i) Note the process agreed by the MELDAP Strategic Group to manage the loss of 23% of the available income for Drugs and Alcohol Services in East Lothian;
- (ii) Note the intention to use MELDAP reserves for East Lothian where appropriate to smooth the transition in making the agreed changes for financial year 2017-18; and
- (iii) Support the redesign process by directing NHS Lothian to:
 - Make available East Lothian's full share of the drug and alcohol funding available to the IJB

- Ask MELDAP to propose a redesigned drug and alcohol service for East Lothian within the available financial envelope designed on a community based, recovery based model for agreement
- Deliver the agreed model.

9. PROGRESS AGAINST 2016-17 DIRECTIONS AND PROPOSED DIRECTIONS FOR 2017-18

The Chief Officer had submitted a report informing the IJB of progress made against the suite of Directions issued to NHS Lothian and East Lothian Council in April 2016 and seeking agreement to the development of 2017-18 Directions for NHS Lothian and East Lothian Council.

Paul Currie presented the report. He advised that the summary of progress covered the period up to the end of the third quarter and he referred members to the table within the report which outlined the achievement against each Direction. He highlighted the Directions that were yet to be achieved and advised that a further progress report would be provided in the New Year. He also referred members to the outline proposals for Directions to be issued in 2017/18. He said that his intention was to prepare more detailed Directions for consideration by the IJB in February and each of these would include the appropriate budgetary information.

Mr King added that the Directions were linked to the budget and the budget must balance at the end of the year. It was therefore important to prepare specific Directions which clearly showed the resources available to achieve the expected outcomes.

Responding to questions from members, Mr King and Mr Currie confirmed that the Directions and reporting on their progress were key aspects of the IJB's wider Performance Management Framework. They also acknowledged the need to build on the current year and consider where things could be done better and how to begin achieving transformational change through redesign of services.

Mrs McKay raised a concern that there appeared to be no proposals for a specific Direction in relation to carers. She noted the current Direction which focused on development of the Strategy for Carers but she said that a further Direction should be added to those for 2017/18 to focus on support for carers. She stated that carers provided more care than all of the health and social care staff put together and it was crucial to recognise their contribution and address their needs. She proposed an amendment to the report recommendations to include an additional Direction focussing on carers.

Mr Small pointed out that the proposals within the report were in the early stages and the detail was yet to be agreed.

Fiona Duncan suggested that community justice might be another addition and she advised members that a presentation was planned for the IJB's January meeting.

Sharon Saunders suggested that future discussions on Directions should also consider that services for the adult population did not just cover the elderly and that there were a wide range of services for vulnerable adults which had a significant impact on budgets. She added that to not do so would be a missed opportunity, particularly in relation to the potential for service redesign.

There was further discussion about how best to address these proposed amendments and additions. Members wanted to ensure that the comments would be reflected not only in the minutes but also in the development of the detailed Directions.

The Chair acknowledged these views and gave a commitment that officers would take into account the proposals put forward by members when drafting the Directions for 2017/18 and reminded members that the IJB would have a further opportunity to debate the detail of the Directions at its February meeting.

Decision

The IJB agreed to:

- (i) Note the progress made against many of the 2016/17 Directions, to note that a number of Directions remain to be delivered and that some of these may not be achieved before the financial year end;
- (ii) Approve the development of new Directions for 2017/18 as proposed in the report; and
- (iii) Agree that those partners delivering the Directions should be required to report on progress as required by the IJB for the purposes of monitoring achievement.

SUMMARY OF PROCEEDINGS – EXEMPT INFORMATION

The Integration Joint Board agreed to exclude the public from the following business containing exempt information by virtue of paragraph 5.9.1 of its Standing Orders (the Integration Joint Board is still in the process of developing proposals or its position on certain matters).

NHS Lothian Hospitals Plan

A report was submitted to update the IJB on the NHS Lothian Hospitals Plan to provide the opportunity for members to discuss the way forward. The IJB agreed to note the contents of the report and that updated proposals would be presented to the IJB in the first quarter of 2017.



REPORT TO: East Lothian Integration Joint Board

MEETING DATE: 26 January 2017

BY: Chief Officer

SUBJECT: Older People's Day Centres

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1 PURPOSE

- 1.1 To seek agreement to support the development of older people's day centres in line with the commitment in the East Lothian Health and Social Care Partnership Strategic Plan 2016-18.

2 RECOMMENDATIONS

- 2.1 The IJB is asked to support the development of an improvement programme approach to older people's day services in line with the strategic priorities as set by East Lothian's Health and Social Care Partnership and the Integrated Joint Board.
- 2.2 And to agree that the additional investment needed in order to achieve the improvement programme as detailed in the resource framework 7.1 Appendix 1 should be funded from the Integrated Care Fund subject to final budget decisions by the IJB in March 2017.

3 BACKGROUND

- 3.1 The current East Lothian Single Outcome Agreement contains the following contributory outcomes to Outcome 6:

'People are enabled to live at home and access opportunities in their communities for as long as possible'

'Health is improving and the gaps in health inequalities are closing'.

Scotland's national health and well being outcomes include:

- **Outcome 1:** People are able to look after and improve their own health and wellbeing and live in good health for longer
- **Outcome 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

Outcome 5. Health and social care services contribute to reducing health inequalities.

The ELH&SCP Strategic Plan includes the following strategic objectives and immediate priorities:

- Improving promotion and early intervention, shifting services towards prevention of ill health, to anticipate at an early stage the need for support and to prevent crises
- Providing care closer to home, delivering safe and effective care as close to home as possible, enabling people to remain in the homes and communities for as long as possible.

The Integrated Joint Board Strategic Plan includes the development of older people's day centres as a priority and IJB Directions include DO2.e:

- To develop and implement a modernisation strategy for day services for older people by December 2016 which recognises need, geography, resources and capacity.

3.2 Older people's day centres in East Lothian are run by voluntary management committees as charitable organisations and receive funding from East Lothian Council. The ten centres have developed independently over the years, leading to variations in levels of funding allocated, as well as variations in opening hours. All centres are open for 48 weeks of the year. The Care Inspectorate have accepted applications for registration from all 10 day centres. Day centres have been advised of the maximum number of clients that they should support, given their staffing complement and the condition of their premises. Service Level Agreements are in place and need to be renewed by April 2017. Day centre provision is not equally distributed across the county and there are currently fewer purpose built and adapted premises in the West locality, where the greatest population growth and need in the older elderly population will occur from 2017.

3.3 Older people's day centres are a key resource across East Lothian. They are a central element of both the provision of complex personal care as well as part of local preventative services and are delivered using a partnership and co-production approach. This role could be developed further in a number of ways. Day centres could play a key role in preventing admission to hospital and enabling older people to return home following hospital admission. As they offer direct personal care they could increasingly be meeting some of the need that might otherwise be met through care at home services. They could also provide extensive respite and support to carers, their family, neighbours and friends while the service user attends the day centre. Day centres could play an important part in a whole systems approach to shifting the balance of care and sustaining individuals safely at home for longer

with a better quality of life, employing a personalised outcomes approach.

Future development should be targeted to improve the knowledge, skill set and confidence of care staff to support individuals with multiple or complex needs including co-morbidities, such as physical frailty and dementia or several long term conditions. This would achieve a key recommendation in the Care Inspectorate Inspection Report that we develop better support for people with dementia through day centre provision. The day centres could also offer a focus for support from NHS services for people with dementia as NHS services move away from bringing older people to a central point for day services. .

3.4 The East Lothian Health Improvement Alliance and the Joint Strategic Needs Analysis indicate the following about East Lothian's population:

- The population of East Lothian is forecast to grow at one of the fastest rates of all 32 local authorities in Scotland

- The number of people aged over 65 is forecast to grow by 72.2% between 2012 and 2037 and almost 20% of the population is aged 65 and over

- The number of households in which the head of household is aged over 75 is forecast to double between 2012 and 2037

- a projection of over 75 and over 85 populations based on GROS mid-year projections suggests an increase in the population of over 75's in the West locality from 2017 onwards:

Over 85's 2017-20		Over 75's 2017-20	
West	1498	West	5619
East	1434	East	4467

- Evidence suggests that levels of need within the day centres are becoming more intense. East Lothian's Strategy for Physical Disability and Sensory Impairment is clear that the consistent indicator of increase in physical disability is age-related, i.e. the increase in volume and intensity of need because of physical disability relates directly to the increase in the demographic of older people.

3.5 In order to address population growth and meet the needs of older people in East Lothian, day centres will in future focus on early intervention, prevention and outreach as well as direct care and support. This paper proposes building robustness into current provision, resourcing it adequately, bringing it into current partnership priorities and making it sustainable for the next three to five years while a new older people's strategy is developed, whereupon day centre provision can be reviewed.

The day centre's redesign programme will focus on:

- Equitable distribution of funding across the day centre network, based on an agreed daily rate
- Addressing geographical inequalities in current provision, particularly in the Musselburgh area. We would seek support to find and adapt suitable premises in Musselburgh to enable people with multiple and complex needs to be supported.
- Ensuring lease arrangements for day centres are maintained
- Improving geographical links between day centres, based on current catchment areas, health and social care localities and Local Area Partnerships. This will support day centres to share their expertise and enable individuals to access the day centre that meets their needs, while maintaining freedom of choice and community connections
- Developing improved transport arrangements for day centres, as part of the planning of local community transport across East Lothian
- Enabling day centres to provide both personal care and early intervention and prevention services in various models. This will include opening extra days as well as potentially in the evenings and weekends
- Further develop the link with social work and health referrals through the Quality Assurance mechanism in order to direct people to day centres following hospital discharge or as an alternative to care at home
- Develop dementia care provision within the day centres to better support people with dementia
- Further develop links with lunch clubs and other community resources
- Play a central role in the development of new initiatives, such as the community hub.
- Continue support for the development of the Association of East Lothian Day Centres.

3.6 The older people's day centres with the highest level of funding provide a cost-effective resource at £25 per day for a staffing ratio of approximately 5:1. It is proposed that the funding formula of £25 per day is extended to all day centres for 52 weeks of the year, thus improving parity across the day centre network, and providing an additional 8000 days of support, including 3000 in Musselburgh.

This would require approximately £365,000 revenue funding and would enable all day centres to:

- Open at least five days per week and 52 weeks of the year
- Provide intense levels of personal care to those who need it
- Focus on prevention and early intervention work
- Dementia work
- Better provide accessible transport.

Additional funding would also be needed to:

- Adapt and provide an additional resource in Musselburgh (depending on identification of suitable facility).

In addition the partnership should continue to support the following:

- The Association of East Lothian Day Centres, to improve governance and function and to improve understanding of the contribution of day centres to the wellbeing of older people and their carers
- Access to an independent collective advocacy resource.

3.7 Adult Wellbeing is currently scoping the development of a community hub to provide support to older people as part of the wider network of preventative resources (see Appendix 4 Community Hub).

4 POLICY IMPLICATIONS

4.1 The development of a network of older people's day centres is in line with the commitments in the East Lothian Health & Social Care Strategic Plan.

5 INTEGRATED IMPACT ASSESSMENT

5.1 The subject of this report proposes changes that will improve the support for older people in their communities through enhanced access and support.

6 RESOURCE IMPLICATIONS

6.1 Financial – additional revenue funding of £365,000 (including the development fund of £150,000 already allocated by East Lothian Council) to achieve the agreed vision for day centres, giving a net increase of £215,000. Capital funding of £150,000 to adapt an additional resource in Musselburgh (dependant on identifying and securing suitable facilities).

6.2 Personnel – The engagement of Partnership groups will be essential to progress this work. In addition, robust staffing levels and renewed terms and conditions of service will be developed within all the centres.

7 BACKGROUND PAPERS

7.1 Appendix 1: Proposed resource framework

7.2 Appendix 2: Development plan

7.3 Appendix 3: Map of East Lothian Day Centres **(to follow)**

- 7.4 Appendix 4: Community hub (proposal)
- 7.5 Statistics (Adult Wellbeing)
- 7.6 Presentation to Association of Day Centres

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DATE	19 January 2017

Proposed funding framework for older people's day centres April 2017 onwards £25 per day

Day centre	Locality	10+ hours care at home per day	Client numbers	Current award	New award at Daily rate@ £25 per day	Increase/decrease in award
West Locality		252				
Musselburgh new centre	West		18/day – 4680 places	£80,688	£117,000	£36,312
John Bellany, Port Seton	West		18/day - 4680 places	£106,640	£117,000	£10,360
Harlawhill, Prestonpans	West		16/day – 4160 places	£106,406	£104,000	-£2,406
Tranent	West		16/day – 4160 places	£64,570	£104,000	£39,430
Primrose, Ormiston	West		16/day – 4160 places	£40,479	£104,000	£63,521
East Locality		130				
Haddington	East		18/day - 4680 places	£61,258	£117,000	£55,742
North Berwick	East		18/day - 4680 places	£121,640	£117,000	-£4,640
Gullane	East		16/day – 4160 places	£48,769	£104,000	£55,231
Lynton	East		16/day - 4160 places	£49,410	£104,000	£54,590
Dunbar	East		16/day – 4160 places	£51,545	£104,000	£52,455
Total		382		£731,405	£1,092,000	£360,595

This

assumes that:

- Each day centre opens 5 days per week for 52 weeks. Lynton and Gullane open 4 days at present
- Each day centre is full. Gullane SLA for 13 clients only at present. Musselburgh requires purpose built or adapted centre to take 18 clients per day
- An allowance for transport is included in the funding award. Consider a 'rural' transport premium.
- .

Proposed day centre development plan October 2015

Below we have set out some proposed key development areas and stages that we could follow in order to progress this piece of work and ultimately develop a 3 year strategy for change with a detailed action plan which will set out how we get from the current position to where we agree we need to be in the future.

1	<p>Day centres' development days</p> <p>Continue to organise development days in order to continue engagement and complete key stages and developments together.</p>	<p>Next development day: Monday 26th October Esk Rooms, 10 am to 2pm Agenda:</p> <ul style="list-style-type: none"> • Structure / membership of future events • Beginning to shape a vision • Development Plan
2	<p>Day Centre Association</p> <p>Further explore and develop role of Association on collaborative approaches in order to support key capacity improvement measures across the centres.</p>	<p>Further collaborative approaches could include:</p> <ul style="list-style-type: none"> - A shared training needs analysis - A training plan - A registered managers' network - Management of waiting lists for preventative and complex need - Allocations according to need. - Staffing - governance
3	<p>Funding</p>	<ul style="list-style-type: none"> - Set up panel ELC/Association to allocate development funding - look at funding across the network of day centres and lunch clubs - Develop a funding strategy as part of the overall strategy - Agree funding levels across all centres once roles and remits are developed
3	<p>Demographic changes and statistical information / market data / forecast demand</p>	<ul style="list-style-type: none"> - In East Lothian, the number of people over 65 with dementia is expected to double to by 2035 (NHS Lothian 2014) - Develop dataset to inform final composition of day centre

		<p>structure</p> <ul style="list-style-type: none"> -
4	Strategy 2016-19: Focus could be 'Community resources for older people, including day centres and lunch clubs'	<p>In order to develop the strategy and action plan we would determine:</p> <ul style="list-style-type: none"> - What do we have? - What are the gaps? E.g. an East Lothian community information hub? - What resources are available? - What resources do we need? - Clarify demand. - Registration requirements - Build into the overall Joint Strategic Plan for East Lothian
5	Carry out initial geographical analysis based on West and East localities	<p>For example: A mix of registered centres plus a specialist dementia resource plus 2 preventative centres and local lunch clubs in both the East and the West</p>
6	Scope developing other models for example social enterprise and links to other employment opportunities, maintaining people in the own tenancies and homes, combating social isolation and mental wellbeing, nutrition and physical wellbeing	<ul style="list-style-type: none"> - Food Train - Home maintenance - Gardening - Dog walking. - Befriending - Peer support
7	Manage transition period (the finished action plan)	Strategy to be developed and implemented over an agreed timeframe
8	Communication	<ul style="list-style-type: none"> • Ensure involvement of all roles within the day centres • Including service users and carers • Link to wider strategic reporting structures

**Development Opportunity: Capability Scotland service re-provision
August 2015 updated September 2016**

1. Introduction

Capability Scotland is modernising its services and plans to make major changes which will affect a range of service users and carers in East Lothian. All those affected by this change are being reassessed and funding for any services and transport will in future be through individual budgets.

Our current contracts with Capability Scotland are therefore due to expire and this has given us an opportunity to reflect on how we would wish to see services developed in future.

2. Current services Capability Scotland

New centres are being planned in Edinburgh in Riccarton at the Heriot-Watt campus in West Edinburgh and in Craigmillar.

• **Sensory and wellbeing hub - Riccarton**

The sensory and wellbeing hub at Riccarton will have a suite of purpose-built rooms providing a range of stimulating and therapeutic experiences for those with the most complex needs. This will include a sensory kitchen, physical activity room, sensory rooms and a café style communal area. The service will have two 'Changing Places' toilet facilities. Activities will include cooking workshops, calming sensory therapy sessions and exercise programmes.

• **Arts and digital community hub - Craigmillar**

The new arts and digital community hub will be based at the Space building in Craigmillar. There will be a suite of studios for arts and crafts (pottery, textiles, sewing, printing etc) and for digital technology (photography, design, research, Skype, social media).

Local Area Coordinators

This service is currently run by Capability Scotland (in Edinburgh the service has been taken in house). It is funded at approx £80,000 pa to employ two coordinators based in Haddington. They offer an individual one-to-one response to new referrals – 74 in 2014-15 and also an enquiry service - 50 in 2014-15.

3. Developing East Lothian's Community Hub: Improving day, evening and weekend opportunities

The finance available from both contracts outlined above can be seen as a potential resource to re-invest (with the caveat that New Trinity Centre has received S10 funding; Additional investment to support the five service users may need to be made available if they are supported into alternative types of provision).

All of our current strategies identify the need for a single point of contact about community resources, both virtual and real, including:

- Lothian Partnership Sensory Impairment Implementation Plan 2014-16
- East Lothian Autism Strategy 2014-24
- Carers Strategy: Caring Together Strategy for East Lothian 2013 – 2018
- Opportunity and Independence: East Lothian’s Joint Physical Disability and Sensory Impairment Strategy and Action Plan 2013-20
- East Lothian’s Learning Disability Strategy 2013-18
- A Sense of Belonging - a Joint Strategy for Improving Mental Health & Wellbeing of Lothian’s population 2011 – 2016 and local implementation plan
- East Lothian’s Older People’s Strategy 2012-2020.

Improving access to information is the one of the key comments from recent consultations, including the work on My Futures and young people in transition to adult services. The need for the development of a ‘hub’ approach was identified in particular in our strategy for physical disability and sensory impairment:

‘There are many community groups and resources in East Lothian, providing a wide range of activities. A key message from consultations with physically disabled people, however, is that people do not know how to find out what is on offer or how to access appropriate transport. A community information and opportunities hub for East Lothian will provide a one stop shop, with an accessible point of contact for young people and adults and their carers wanting advice on the range of activities locally. It will provide information on disability and signpost people to activities and organisations. It will offer flexible opening hours accessible to service users and carers, including evenings, weekends and holidays. The centre will support telenetworking, and develop online resources as well as a directory of services, working with existing information and advice agencies’¹.

The benefits of such a model include:

- Service users leave with timetable of activities/opportunities and the appropriate support to access those opportunities
- Providers have a resource to help them develop personalised support
- People are supported to maintain social networks with friends
- People are supported to be independent and have the choice to do what interests them
- People are enabled to make best use of self-directed support and personalised budgets
- Dependence on statutory services is reduced
- Isolation is reduced.

The community hub model will be part of a broader drive to develop a network of preventative resources, for example shopping or gardening services. It is in line with the Self Directed Support Act especially in relation to our obligations to provide signposting and information. Local area co-ordination services will play a key role in

¹ Opportunity and Independence 2013-20

enabling people to access the wider choice of activities and opportunities through the community hub. Links with Local Area Partnerships would be established, especially with Prestonpans, Seton, Gosford Partnership. There is the potential for creating local employment opportunities.

The development of a community hub will take into account and complement other work being considered in East Lothian, including 'GameChanger' the Public Social Partnership work and out-of-hours support for those in emotional distress.

4. Information Resource

An information resource would need to be created by building on existing resources, including:

- A local information system for Scotland (ALISS)
- Living It Up
- Ageing Well
- Edinburgh Gateway
- [Eastspace-East Lothian mental health information online.](#)

5. Hub and spoke model

The main hub would be the Resource Centre, Prestonpans. Additional centres could include:

- Visualise base in Musselburgh
- Community Centres
- Libraries.

6. Commissioning/procurement

The Local Area Coordination service was originally developed through a tendering exercise. There is the potential to bring new providers into East Lothian to support the community hub as well as continuing to work with existing partners.

Current third sector partners include:

Local	National
ELCCF	Capability Scotland
COEL	Alzheimers Scotland
ELIS	RNIB/Deaf Action
Strive	Upward Mobility
LCIL	Penumbra

We wish to commission a new model or provision.

We should therefore:

- Scope the need and appropriate models with local partners by holding an initial stakeholder event
- Carry out local market analysis of the options
- Consider a Public Social Partnership approach.

CaH clients (65+)			
Ward	10+ hours clients	All clients	% clients 10+ hrs
Dunbar	44	106	41.51
Fa'side	66	178	37.08
Haddington	46	144	31.94
Musselburgh East	43	133	32.33
Musselburgh West	53	121	43.80
North Berwick	44	146	30.14
Preston, Seton, Gosford	81	223	36.32

Unfilled hours (65+)

Ward	Hours	Clients	Hours per client
Dunbar	296.25	21	14.11
Fa'side	221.25	28	7.90
Haddington	243.00	23	10.57
Musselburgh East	232.75	25	9.31
Musselburgh West	183.00	20	9.15
North Berwick	283.50	32	8.86
Preston, Seton, Gosford	240.50	22	10.93

Age breakdown of current 65+ CaH clients

Age-group / Ward	Dunbar	Fa'side	Haddington	M East
65-69	4	10	20	11
70-74	12	19	14	11
75-79	14	30	16	14
80-84	29	45	30	28
85-89	25	36	34	37
90-94	18	29	22	25
95+	4	9	8	7
TOTAL	106	178	144	133

% breakdown of current 65+ CaH clients

Age-group / Ward	Dunbar	Fa'side	Haddington	M East
65-69	3.77	5.62	13.89	8.27

70-74	11.32	10.67	9.72	8.27
75-79	13.21	16.85	11.11	10.53
80-84	27.36	25.28	20.83	21.05
85-89	23.58	20.22	23.61	27.82
90-94	16.98	16.29	15.28	18.80
95+	3.77	5.06	5.56	5.26

Population Projections		85+ by ward			
Ward/Zone	2010	2011	2012	2012 - 2016	
1/2 - Musselburgh	503	525	539	601	
3 - Preston / Seton / Gosford	286	299	306	342	
4 - Fa'side	217	226	232	259	
5 - North Berwick	402	420	431	480	
6 - Haddington	265	276	284	316	
7 - Dunbar	214	223	229	255	
Other	223	233	239	267	
Total	2,110	2,202	2,260	2,521	
Population Projections		75+ by ward			
Ward/Zone	2010	2011	2012	2012 - 2016	
1/2 - Musselburgh	2,015	2,050	2,084	2,277	
3 - Preston / Seton / Gosford	1,249	1,270	1,291	1,410	
4 - Fa'side	963	979	995	1,087	
5 - North Berwick	1,340	1,366	1,390	1,521	
6 - Haddington	852	869	884	968	
7 - Dunbar	792	806	820	897	
Other	816	831	845	924	
Total	8,028	8,172	8,308	9,084	

M West	NB	P S G
8	12	13
15	14	21
14	15	37
26	22	55
34	36	56
19	31	29
5	16	12
121	146	223

M West	NB	P S G
6.61	8.22	5.83

12.40	9.59	9.42
11.57	10.27	16.59
21.49	15.07	24.66
28.10	24.66	25.11
15.70	21.23	13.00
4.13	10.96	5.38

2017 - 2020
699
398
301
559
368
297
310
2,931

2017 - 2020
2,539
1,570
1,210
1,701
1,083
1,001
1,032
10,136

Older Peoples' Day Centres Event

Follow up event
October 10th 2016

Paper being presented to the IJB at their November meeting

- ▶ **Purpose:** To outline the proposed developed use of older peoples' day centres in East Lothian in line with the strategic priorities within the East Lothian Health & Social Care Partnership Strategic Plan 2016–18 which includes a commitment to shifting the balance of care.

Recommendations within the paper

- ▶ The IJB is asked to support the development of an improvement programme approach to older peoples' day services in line with the strategic priorities as set by East Lothian's Health & Social Care Partnership and the IJB Strategic Plan and Directions.
- ▶ And to agree the additional investment needed in order to achieve the improvement programme as detailed in the resource framework.

IJB Direction DO2.e

- ▶ To develop and implement a modernisation strategy for day services for older people by December 2016 which recognises need, geography, resources and capacity.

Strategic Fit

- ▶ Single Outcome Agreement: Outcomes 1,2 and 5 which talk of people looking after and improving their own health & wellbeing, people living independently regardless of level of need and the reduction of health inequalities.
- ▶ ELH&SCP Strategic Plan strategic objectives which include improving the promotion of early intervention and prevention and providing care closer to home helping people remain in their communities as long as possible.

Current Day Centre provision

- ▶ Ten independent organisations across EL.
- ▶ Registered to provide complex personal care to an agreed number of people per day.
- ▶ Elements of early intervention and preventative support.
- ▶ Varying levels of funding.
- ▶ Varying quality of buildings.
- ▶ Differing transport arrangements.
- ▶ Differing staff teams.

Rationale for further investment

- ▶ Reducing the need for hospital admission and supporting speedier discharge from hospital.
- ▶ Providing personal care which otherwise would come from stretched care at home services.
- ▶ Provide respite opportunities for carers.
- ▶ Day centres part of a whole system approach to shifting the balance of care and enabling people to stay at home in their own communities longer.

Rationale for further investment

- ▶ Offers opportunity to further develop the workforce to work more effectively with people with multiple and complex conditions.
- ▶ Develop services to support people with dementia in line with the Care Inspectorate recommendation.
- ▶ Link into services currently being developed within the community once delivered at the NHS Lothian Hopetoun Day Centre which is planned for closure.

Data

- ▶ Population of EL forecast to grow faster than all other LAs.
- ▶ Number of people over 65 forecast to grow by 72.2% between 2012 and 2037.
- ▶ The number of households where the head is over 75 forecast to double between 2012 and 2037.
- ▶ A projection of over 75 and over 85 populations based on GROS mid-year projections suggests increase of over 75s in the West in particular from 2017.

Future day centre provision

- ▶ Equitable distribution of funding across day centres based on an agreed daily rate.
- ▶ Standardised lease arrangements.
- ▶ Improving geographical links between day centres linked to social work and health localities and local area partnerships.
- ▶ Supporting and contributing to improved transport networks.
- ▶ All centres providing both personal care and early intervention and prevention services.

Future day centre provision

- ▶ Centres need to be regarded as health and social care day centres.
- ▶ Developed links with social work and health to support referrals to day centres and ensure places are filled.
- ▶ Increased use of emergency places to support improvement in delayed discharge.
- ▶ Developed dementia care within the centres.
- ▶ Developed links with other community resources.

Future day centre provision

- ▶ Developed links with Allied Health Professionals and the services they deliver such as speech and language therapy, diatetics, bloods taking, training services for centre staff on lifting and handling.
- ▶ New developments including technology enabled care could be showcased and trialled in centres.
- ▶ Central role in the piloting and development of community resources and support services.

Future funding

- ▶ Highest funded centres costed at £25 per day.
- ▶ Proposal to extend this to all centres linked to places offered.
- ▶ For 52 weeks of the year and for 5 days.
- ▶ Providing an additional 8000 places.
- ▶ Develop potential for evening and weekend opening.
- ▶ Representing total further investment of £365,000.

Next steps

- ▶ Following today discussions with partnership management team, corporate management team and council lead.
- ▶ Presentation to the IJB in November.
- ▶ Budget setting process.
- ▶ Development of new Service Level Agreements to be in place for April 2017.
- ▶ Development programme in year one to implement the changes.

QUESTIONS?



REPORT TO: East Lothian Integration Joint Board
MEETING DATE: 26 January 2017
BY: Chief Officer
SUBJECT: Community Justice Transition

7

1 **PURPOSE**

To inform the IJB on progress with the community justice transition and highlight the need for further dialogue.

2 **RECOMMENDATIONS**

- 2.1 The IJB is asked to note its role as a statutory partner in Scotland's new Community Justice arrangements, with a duty to co-operate and actively contribute to reducing reoffending.
- 2.1 The IJB is invited to develop dialogue with the Reducing Reoffending Board around how assessments of need and strategic approaches are shared and aligned between partners.

3 **BACKGROUND**

Community Justice Act

- 3.1 The Community Justice (Scotland) Act 2016 received royal assent on 21 March 2016. It sets out a process of change towards a new model of community justice.
- 3.2 Community Justice is defined as: *"the collection of individuals, agencies and services that work together to support, manage and supervise people who have committed offences from the point of arrest, through prosecution, community disposal or custody and alternatives to these, until they are reintegrated into the community. Local communities and the third sector are a vital part of this process which aims to prevent and reduce further offending and the harm that it causes, to promote desistance, social inclusion and citizenship"*.
- 3.3 The Scottish Government's Vision for Community Justice is outlined below:

Vision: Scotland is a safer, fairer and more inclusive nation where we: Prevent and reduce further offending by addressing its

underlying causes; and safely and effectively manage and support those who have committed offences to help them reintegrate into the community and realise their potential for the benefit of all citizens.

Mission statement: Deliver a decisive shift in the balance between community and custodial sentences by: Increasing the use of community based interventions and; Reducing the use of short-term custodial sentences. Improve reintegration from custody to community.

The four main priorities are:

- Improved community understanding and participation
- Strategic planning and partnership working
- Effective use of evidence-based interventions
- Equal access to services

- 3.4 The objectives of the Community Justice Act are to help create a stronger community justice system based on local collaborative strategic planning and delivery, with responsibility for community justice matters being transferred to Community Planning Partnerships (CPPs).
- 3.5 The changes will also result in the disestablishment of the existing 8 Community Justice Authorities on 31 March 2017 and the establishment of a new national body, Community Justice Scotland. This new body will provide assurance and identify and promote best practice.
- 3.6 Under the new Act, a range of partners have a statutory duty to actively contribute to reducing reoffending. The identified core partners include the Local Authority, Health Board, Police Scotland, the Scottish Fire & Rescue Service, Skills Development Scotland, Integrated Joint Boards, the Scottish Courts and Tribunal Service and the Scottish Prison Service.

National Community Justice Strategy

- 3.7 The National Community Justice Strategy was launched on 24th November 2016¹. Importantly, this strategy relates primarily to adults. For children and young people see the Youth Justice Strategy for Scotland².
- 3.8 Responsibilities for community justice services will be fully transferred from Community Justice Authorities to Community Planning Partnerships on 1st April 2017, with a 'transition year' during 2016/17. *'It will be the responsibility of partners to ensure that any local integration arrangements enacted for health and social care are consistent with*

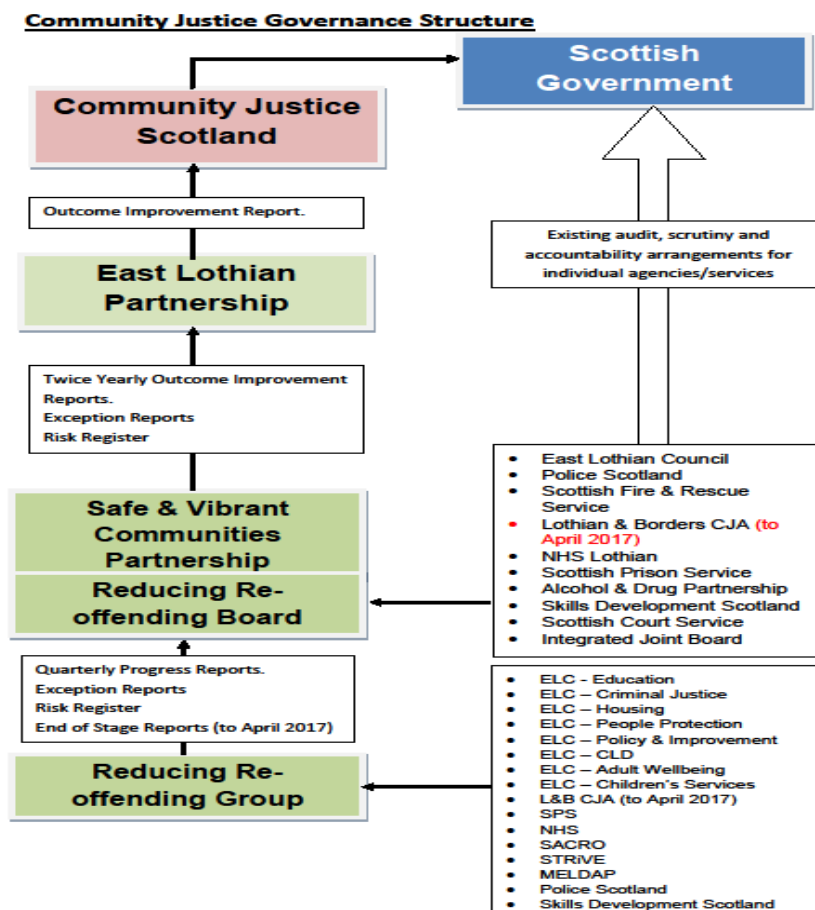
¹ National Community Justice Strategy: <http://www.gov.scot/Publications/2016/11/5600>

² Youth Justice Strategy for Scotland: <http://www.gov.scot/Publications/2015/06/2244>

requirements for partners to deliver on community justice outcomes and vice versa³

East Lothian Reducing Reoffending Arrangements

- 3.9 At its October 2015 meeting, East Lothian Partnership agreed to new arrangements proposed for community justice in East Lothian. These proposals included the Safe & Vibrant Communities Partnership taking on the role of Reducing Reoffending Board, as well as the setting up of a Reducing Reoffending Group to act as planning and delivery group for a local Community Justice Strategic Plan.
- 3.10 A meeting of the Safe and Vibrant Communities Partnership in November 2015 agreed that the S&VCP would take on the role of Reducing Reoffending Board and would extend its membership as necessary
- 3.11 The governance structure for community justice in East Lothian is as follows:



³ 2015 Scottish Government, The New Model for Community Justice in Scotland, FAQs: <http://www.gov.scot/Resource/0048/00486213.pdf>

Community Justice and Health and Social Care Needs

- 3.12 Those in contact with our criminal justice system come predominately from communities which experience poor physical, mental and social health. They frequently suffer from multiple and complex short and long term health issues, including both physical and mental health problems, learning difficulties, and substance misuse. A disproportionately high number of those who spend time in our prisons have never worked, have been in care or dropped out of school with few or no qualifications⁴.
- 3.13 Efforts to improve the health and wellbeing of those in contact with the community justice represents an excellent opportunity to provide care and support for some of our most vulnerable and difficult to serve individuals.

4 POLICY IMPLICATIONS

- 4.1 The East Lothian Reducing Reoffending Board will be responsible for conducting a local needs assessment and creating a Community Justice Outcomes Improvement Plan. The development and realisation of these will need to be in accord with the Health and Social Care Partnership's needs assessment and strategic plan and vice versa.
- 4.2 As dialogue between the IJB/HSCP and the Reducing Reoffending Board develops, priority areas of overlap will need to be identified and partnership representation identified for emerging Community Justice work.

5 INTEGRATED IMPACT ASSESSMENT

- 5.1 As this partnership work develops it will need to incorporate integrated impact assessments to consider the impact of plans on inequalities and protected characteristics.

6 RESOURCE IMPLICATIONS

- 6.1 Financial – There are no immediate financial implications
- 6.2 Personnel – There are no immediate personnel implications
- 6.3 Other – There are no other implications

7 BACKGROUND PAPERS

Scottish Government (2016) Guidance for local partners in the new model for Community Justice: <http://www.gov.scot/Resource/0051/00510514.pdf>

⁴ Graham, L. (2007) SPS Prison Health in Scotland – A Healthcare Needs Assessment

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