



## MINUTES OF THE MEETING OF THE EAST LOTHIAN INTEGRATION JOINT BOARD

THURSDAY 31 OCTOBER 2019  
EAST LOTHIAN COMMUNITY HOSPITAL, HADDINGTON

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### **Voting Members Present:**

Councillor F O'Donnell (Chair)  
Councillor S Akhtar  
Councillor N Gilbert  
Mr P Murray  
Councillor S Kempson (Items 1 – 9)

### **Non-voting Members Present:**

Ms C Flanagan  
Ms E Johnston  
Ms A MacDonald  
Ms M McNeill  
Mr T Miller  
Dr J Turvill

### **Officers Present from NHS Lothian/East Lothian Council:**

Ms T Carlyle  
Mr P Currie  
Ms R Crichton  
Ms M Goodbourn  
Mr I Gorman  
Ms J Holland  
Ms R Laskowski  
Ms R Miller  
Ms J Odgen-Smith

### **Visitors Present:**

Ms N Cochran, NHS Lothian  
Mr M Bonnar, MELDAP

### **Clerk:**

Ms F Currie

### **Apologies:**

Ms F Ireland  
Mr A Joyce  
Prof. M Whyte  
Mr D Binnie  
Dr G Choudhury  
Ms L Cowan

## **Declarations of Interest:**

None

The Chair welcomed everyone to the meeting. She informed members that Jean Trench, non-voting member and independent sector representative, had resigned from the IJB. Discussions were underway to appoint a replacement.

### **1. PRESENTATION BY MID & EAST Lothian DRUGS AND ALCOHOL PARTNERSHIP (MELDAP)**

Martin Bonnar of MELDAP and Nicky Cochran, NHS Lothian gave a detailed presentation to members on the drug-related deaths in 2018; the impact of poly-drug use; current actions to mitigate and minimise risk; prevention and early intervention work and plans for future expansion of services.

Mr Bonnar and Ms Cochran responded to questions from members providing further detail on priorities for the service going forward and assessing the needs of clients who are accessing services. They also asked members to promote the message that drug and alcohol abuse was not restricted to one area of the community and should be everyone's concern. Talking about these issues openly and reducing the stigma of drug and alcohol issues would be an important step in dealing with the problem and helping to reduce future drug deaths.

The Chair thanked both Mr Bonnar and Ms Cochran for their very informative presentation and hoped that a future session could be arranged with IJB members to discuss some of the issues in more detail.

### **2. MINUTES OF THE EAST Lothian IJB MEETINGS ON 29 AUGUST AND 11 SEPTEMBER 2019 (FOR APPROVAL)**

The minutes of the East Lothian Integration Joint Board (IJB) meetings on 29 August and 11 September were approved.

### **3. MATTERS ARISING FROM THE MINUTES OF 29 AUGUST AND 11 SEPTEMBER**

The following matters arising were discussed:

#### **29 August 2019**

The Chair noted that a number of actions had been progressed but sought an update regarding David Binnie's request for the inclusion of more detailed risk information in financial reporting. Claire Flanagan indicated that the format for the annual accounts was fairly rigid but that it may be possible to include more information in the Management Commentary.

#### **11 September 2019**

**Item 2** - Peter Murray to give feedback on the development session with NHS Lothian. He said that, for him, the session had raised questions about whether the existing NHS Committee structure complemented the IJB governance structures or whether there would have to be a change in future. No answers had been forthcoming at the development session but it was a subject which would likely evolve over time.

**Item 5** – the Chair said it was important to consider how to take forward work on demonstrating Best Value as part of performance reporting. Mr Murray referred to the Improvement Service which offered a free assessment which may be worth considering but he cautioned that any such assessment should complement the work already being done.

Mr Murray raised the issue of strengthening the service user voice on the IJB and ensuring that it had the opportunity to influence the work being done. The Chair agreed adding that having service user input at an earlier stage was also an important factor.

Jon Turvill observed that the challenge would be to increase representative at Change Board and planning group levels. Jane Ogden-Smith added that the Health & Wellbeing Groups set up by each of the Area Partnerships and the new Patient Participation Groups provided opportunities for service users to feed into discussions on local issues.

#### **4. CHAIR'S REPORT**

The Chair said that the issues she intended to highlight were covered in the agenda business.

#### **5. NHS HEALTHCARE GOVERNANCE COMMITTEE**

Alison MacDonald informed Members that there was no update as the Committee had not met since the last IJB meeting on 11 September.

#### **6. ISSUES OF RELEVANCE TO THE IJB:**

##### **Clinical & Care Governance**

Ms MacDonald reported on the Clinical & Care Governance Committee meeting which had taken place earlier that day. She informed members that the main areas of interest were the Self-Directed Support action plan, the Community Justice Services inspection planned for January 2020 and the review of complaints. There were no areas of concern noted at the meeting.

Trish Carlyle confirmed that no significant risks had been identified that needed immediate action.

##### **Delayed Discharges**

Ms MacDonald reported that at the time of this month's census the team had reached its target trajectory of 12. However, she was concerned about the trend over the next few weeks as staff and services move to the new community hospital.

#### **7. WINTER PLANNING**

The Chief Officer had submitted a report explaining East Lothian HSCP's plans to ensure all possible steps are taken to assist in controlling pressures on Lothian's acute hospitals during the winter months through effective planning and provision of additional capacity in key services.

Members were asked to note that the report did not cover the ongoing resilience work being undertaken across the partners to plan for business continuity across the county.

Ms MacDonald presented the report outlining some of the proposals including Enhanced Discharge to Assess, 7 Day Working Patient Flow Team, increasing the capacity of Hospital to Home and increasing the Emergency Social Care Service. She said that the proposals were being funded through additional monies from the Scottish Government specifically for winter planning.

The Chair said it would be extremely important to evaluate how the new and expanded services impacted on pressures within other areas.

Jon Turvill endorsed the proposals adding that as well as being very valuable from a primary care perspective they also strengthened out of hours care.

Mr Murray expressed disappointment that the IJB was having to rely on additional monies to deal with any form of service planning and particularly matters which were delegated functions of the IJB.

Councillor Akhtar welcomed the proposals as being very positive; especially Hospital to Home. She asked if there was any review of service user feedback.

Ms MacDonald confirmed that a care survey was undertaken with users of the Hospital to Home service and high levels of satisfaction had been recorded. Feedback was regularly reported to the Clinical and Care Governance Committee.

Mr Murray endorsed Councillor Akhtar's point and said that measuring performance through service user feedback was the type of approach and focus that the IJB should be adopting across its local services.

The Chair said it would be interesting to see that reflected at a national level. She informed members of feedback she had received through a constituent who had had a very positive experience of local services.

## **Decision**

The IJB agreed to note the work being taken forward to cope with additional pressures which were likely to arise in the Lothian acute hospitals during the winter months.

## **8. ROYAL INFIRMARY OF EDINBURGH (RIE) FRONT DOOR SERVICES**

The Chief Officer had submitted a report informing the IJB of developments concerning the 'Front Door' entry points to the Royal Infirmary of Edinburgh (RIE) unscheduled care services.

Rebecca Miller gave a presentation outlining the background to the redesign of front door services at the RIE, which had included assessing future capacity requirements and identifying the most appropriate clinical assessment models. She highlighted the pressures on existing services and that these would continue to increase over the coming years due to an increasing and ageing population in Lothian. A core group had considered the strategic case for change and a Programme Board had been subsequently established to determine the scope of the redesign and to develop the preferred clinical model. She explained that the Lothian IJBs were now being asked to support, in principle, the proposal for capital investment and the Health & Social Care Partnerships would be required to develop appropriate community-based alternatives to acute hospital care to reduce demand on the RIE front door.

Ms Millar responded to questions from members providing clarification and additional details on the planning process, the impact of the opening of the Children's Hospital on

demand and the impact investment in acute services may have on other IJB budget priorities.

Dr Turvill observed that the percentage increase in demand was quite alarming and he worried about expanding capacity rather than looking at suitable alternatives in the community. While he acknowledged that patients were dealt with differently when assessed in hospital and that the increase in capacity may be inevitable, he echoed the points regarding the potential impact on budgets and on opportunities for developing community based services.

Ms MacDonald reminded members that as the population increased so too would the number of patients who required treatment in the RIE and there were no community-based alternatives to some of these services.

Mr Murray commented that the timing of the second recommendation in the report, regarding the development of community-based alternatives, should be given priority.

### **Decision**

The IJB agreed:

- i. To support, in principle, an application for capital investment from NHS Lothian, in the RIE Front Door services; and
- ii. That East Lothian HSCP would undertake a programme of work in conjunction with the RIE and the other Lothian HSCPs to examine and develop, as appropriate, viable and cost-effective community based alternatives to acute hospital care to reduce demand on the RIE Front Door.

*Sederunt: Councillor Kempson left the meeting.*

## **9. IJB DIRECTIONS AND DELIVERY PLAN**

The Chief Officer had submitted a report updating the Integration Joint Board (IJB) on progress against the 2018-19 Directions; the proposed suite of 2019-20 Directions; and the associated Delivery Plan.

The Chair commented that a significant amount of work had gone into the Directions and Delivery Plan; both of which were making real progress in improving services for people living in East Lothian.

Melissa Goodbourn presented the report summarising the background to the preparation of the Directions and the Delivery Plan; the focus on streamlining and linking Directions to the key priorities within the IJB's Strategic Plan and with national targets; and the emphasis on monitoring with six monthly and annual reporting. She also reminded members that the Directions could be reviewed and amended to take account of changing circumstances and priorities during the year.

Paul Currie added that the Directions only worked when the Partners engaged with them. He informed members that once the Directions were approved discussions would take place with the Partners to agree arrangements for performance monitoring and reporting.

Ms Goodbourn responded to questions from the Chair on some of the detail within the Plan, including the purpose of the 'Link' column and identifying Directions with the work of individual Change Boards.

Marilyn McNeill queried the co-production approach listed against Direction D12d. She said that, as far as she was aware, those with an interest were not consulted on the project plan. Ms MacDonald explained that this referred to a Hub Southeast event held at Queen Margaret University and added that the plan was a live document and would be kept under review.

Mr Murray welcomed the Directions and the Delivery Plan noting the clear links between Directions, budgets and Change Board leads. Referring to the increased level of performance reporting he noted that the scrutiny arrangements had yet to be agreed; whether Audit & Risk Committee should take the lead in reviewing this information and report by exception to the IJB or whether all reports should come directly to the IJB. He personally favoured the Audit & Risk Committee taking on the main scrutiny role.

Councillor Akhtar noted the new Directions in relation to mental health priorities and asked whether the IJB could be confident that existing services had the capacity to deliver these new Directions.

Ms Goodbourn said that in many cases the work had been underway for some time but had never previously been reflected formally in the Directions.

Rona Laskowski added that this was particularly true for mental health services which had been reviewed over the past 18 months or so to take account of Strategic Plan priorities and the Mental Health Implementation Plan. She also referred to the transformation programme for day services as another example.

Mr Currie said that officers were trying hard not to increase the number of Directions year on year to the point where they got in the way of delivery, but rather to have a core set of Directions that matched the IJB's strategic priorities.

Mr Murray proposed an amendment to the wording of recommendation (iv); that it should be revised to read "agree that all of the partners responsible for delivering Directions will be asked to report to the IJB on progress for the purposes of monitoring achievement". This proposal was seconded by the Chair and the IJB agreed to amend recommendation (iv).

## **Decision**

The IJB agreed:

- i. Note progress against all the Directions operating through 2018-19.
- ii. Accept the proposed Directions for 2019-20 which the Strategic Planning Group approved on 16th October 2019.
- iii. Accept the associated Delivery Plan produced in collaboration with the Change Boards and their Reference Groups.
- iv. Agree that all of the partners responsible for delivering Directions will be asked to report to the IJB on progress for the purposes of monitoring achievement.
- v. Agree the IJB should, during its future business sessions, take the opportunity to review the requirement for changes to or retirement of existing Directions or development of new Directions.
- vi. Note that the Directions intended to operate in 2019-20 reflect either the IJB priority areas as outlined in the IJB Strategic Plan or operational priorities.

## **10. MONTH 5 FINANCIAL REVIEW 2019/20**

The Chief Finance Officer had submitted a report providing an update to the IJB on its year to date financial position in 2019/20 and the recent financial forecast projections which considered the projected year out-turn undertaken during August 2019 by East Lothian Council and NHS Lothian.

Ms Flanagan presented the report advising members that as of end August 2019 the position for the IJB was a total overspend of £115,000 and a forecasted year end position of £645,000 overspent. She explained that these figures were based on the first 5 months of the year and that the formal Quarter 2 position would be presented to the IJB at its next meeting. She outlined some of the factors which had impacted on financial performance and the key challenges for the IJB during the remainder of the year.

The Chair acknowledged that the position remained challenging and that the IJB needed to ensure that money was available to spend on transformation of services and that it was getting Best Value for its money. However, she cautioned against the use of reserves to bolster the overall financial position. She also noted that the budget planning was based on the assumption of a flat cash position and that much would depend on the Scottish Government budget settlement.

Ms Flanagan reminded members that the figures were based on only 5 months of the year. She added that the Quarter 1 forecast for health had been fairly prudent and the Quarter 2 position may present a more favourable picture. She pointed out that the forthcoming General Election was creating some uncertainty in relation to future budget planning.

Mr Murray said it would be helpful if the report to the December IJB included examples of recovery actions should the financial forecast for the current year remain unchanged.

The Chair observed that there were factors that may still influence the current year performance and that the IJB was not yet at the stage of requiring recovery plans.

### **Decision**

The IJB agreed to:

- i. Note the current financial position; and
- ii. Note the Month 5 financial reviews undertaken by the partners.

## **11. MEMBERSHIP OF THE EAST LOTHIAN INTEGRATION JOINT BOARD AND THE AUDIT & RISK COMMITTEE**

The Chief Officer had submitted a report asking the IJB to agree that the newly appointed Head of Operations within the Health & Social Care Partnership should become a non-voting member of the IJB. The report also sought approval for the appointment of David Binnie as a non-voting member of the Audit & Risk Committee.

The Chair invited members to consider the recommendations as set out in the report.

### **Decision**

The IJB agreed that:

- i. the Head of Operations within the Health & Social Care Partnership was appointed as a non-voting member of the IJB; and
- ii. David Binnie was appointed as a non-voting member of the Audit & Risk Committee.

**12. MINUTES OF THE AUDIT & RISK COMMITTEE (FOR NOTING)**

Minutes of the IJB's Audit & Risk Committee meetings on 10 January, 19 March and 4 June 2019 were presented for noting.

**Decision**

The IJB agreed to note the minutes of the Audit & Risk Committee.

**Danny Harvie**

The Chair informed members that Danny Harvie, who had previously been a non-voting member of the IJB, had passed away. She paid tribute to his dedication and commitment to making people's lives better and expressed her condolences to his family and friends.

Signed .....

Councillor Fiona O'Donnell  
Chair of the East Lothian Integration Joint Board