



REPORT TO: East Lothian Integration Joint Board
MEETING DATE: 27 February 2020
BY: Chief Officer
SUBJECT: Changes to the Membership of the IJB

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1 PURPOSE

- 1.1 To inform and seek the Integration Joint Board's (IJB) approval for changes to its voting and non-voting membership.

2 RECOMMENDATIONS

- 2.1 The IJB is asked to:
- i. note the appointment of Dr Patricia Donald as a NHS Lothian voting member of the IJB, for the maximum term of office;
 - ii. approve the reappointment of Marilyn McNeill as a service user representative and non-voting member, for the maximum term of office; and
 - iii. approve the creation of a new public health non-voting member of the IJB and the appointment of Dr Philip Conaglen in this role.

3 BACKGROUND

- 3.1 Professor Moira Whyte stepped down as a voting member of the East Lothian IJB in December 2019. The Chairman of NHS Lothian wrote to the Chair of the East Lothian IJB on 20th December to confirm that Dr Patricia Donald would be nominated to replace Prof. Whyte as a voting member. The appointment would take effect from 1 February 2020 and would extend for the maximum term of three years.
- 3.2 A report was presented to the IJB at its meeting on 26 April 2018 outlining the statutory requirements of members' terms of office. The IJB agreed that the Chief Officer should take the necessary action in relation to members whose term of office was due to expire.
- 3.3 The Public Bodies (Joint Working) (Integration Joint Boards) (Scotland) Order 2014 (SSI 2014 No.285) allows each IJB to appoint additional non-

voting members as it considers appropriate. At the IJB's meeting on 5 December members supported the creation of a new non-voting member role specialising in public health. Dr Philip Conaglen is a consultant in public health employed by NHS Lothian.

4 ENGAGEMENT

- 4.1 The issues in this report have been discussed with the appropriate nominating body.

5 POLICY IMPLICATIONS

- 5.1 The recommendations in this report implement national legislation and regulations on the establishment of IJBs.

6 INTEGRATED IMPACT ASSESSMENT

- 6.1 The subject of this report does not affect the wellbeing of the community or have a significant impact on equality, the environment or economy.

7 DIRECTIONS

- 7.1 The subject of this report does not affect the IJB's current Directions or require an additional Direction to be put in place.

8 RESOURCE IMPLICATIONS

- 8.1 Financial – None.
8.2 Personnel – None.
8.3 Other – None.

9 BACKGROUND PAPERS

- 9.1 The Public Bodies (Joint Working) (Integration Joint Boards) (Scotland) Order 2014 (SSI 2014 No.285).
9.2 'Membership of the IJB – Terms of Office' report to the IJB on 26 April 2018.

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DATE	19 February 2020



MINUTES OF THE MEETING OF THE EAST LOTHIAN INTEGRATION JOINT BOARD

THURSDAY 5 DECEMBER 2019
COUNCIL, CHAMBER, TOWN HOUSE, HADDINGTON

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Voting Members Present:

Councillor F O'Donnell (Chair)
Councillor S Akhtar
Councillor N Gilbert
Councillor S Kempson
Mr P Murray
Prof. M Whyte

Non-voting Members Present:

Mr D Binnie
Ms L Cowan
Mr I Gorman
Ms E Johnston
Ms A MacDonald
Ms M McNeill
Mr T Miller
Ms J Tait
Ms L White

Officers Present from NHS Lothian/East Lothian Council:

Mr P Currie
Mr B Davies
Ms D Gray
Ms J Holland
Mr G Hunt

Clerk:

Ms F Currie

Apologies:

Dr R Fairclough
Ms C Flanagan
Ms F Ireland
Dr J Turvill

Declarations of Interest:

None

1. CHANGES TO NON-VOTING MEMBERSHIP OF THE IJB

The Chief Officer had submitted a report asking the IJB to agree to the appointment of a new East Lothian Council staff representative and Third Sector representative to replace the current non-voting members.

The Chair thanked Elaine Johnston and Penny Dutton for their contributions to the IJB and invited members to consider and agree the recommendations as set out in the report.

The Chair also invited members' views on appointing a public health representative to provide a voice on health inequalities and other key issues. The appointment would be as a non-voting member of the IJB.

This suggestion was strongly supported by Peter Murray and Moira Whyte. Subject to clarification of the legal requirements for appointing additional non-voting members, it was agreed that a report would be brought to the next meeting.

Decision

The IJB:

- i. Agreed to the appointment of Lesley White as the Council's new staff representative non-voting member of the IJB, in place of Penny Dutton; and
- ii. Noted the appointment of Paul White, ELCAP, as the new Third Sector representative and non-voting member of the IJB.

2. MINUTES OF THE EAST LOTHIAN IJB MEETINGS ON 31 OCTOBER 2019 (FOR APPROVAL)

The minutes of the East Lothian Integration Joint Board (IJB) meeting on 31 October were approved.

3. MATTERS ARISING FROM THE MINUTES OF 31 OCTOBER

There were no matters arising.

4. CHAIR'S REPORT

The Chair reported that she and Mr Murray attended a meeting of NHS Lothian's Board to hear an update on the pressures facing the Board and the progress of its recovery programme. A further update would be provided to IJB members today under agenda item 9. The Chair also reported on a recent Chairs & Vice Chairs event which had included speakers from the fire service and trade unions and a session on chairing meetings.

The Chair then invited members' views on the value of continuing to hold meetings at different venues around the county. Meetings had taken place in Musselburgh, Prestonpans and Dunbar during 2019, as well as in Haddington, in an effort to encourage greater public engagement. However, this had not been the case and it was pointed out that changing venues had reduced the frequency of press attendance. Members agreed that future meetings should take place in Haddington.

The Chair also invited views on the value of having presentations from services at the beginning of IJB meetings. Members were very much in favour of continuing this practice which they found helpful in providing a greater level of detail about progress with IJB priorities and individual services and initiatives.

Mr Murray indicated that a very useful presentation had recently been given to the Chairs & Vice Chair's Group by CoSLA and he would arrange for this to be circulated to members. He also commended the Scottish Parliament's Health & Sport Committee as a useful source of information.

5. CHIEF SOCIAL WORK OFFICER ANNUAL REPORT 2018/19

The Chief Social Work Officer (CSWO) had provided the IJB with her annual report for 2018/19 on the statutory work undertaken on the Council's behalf. The report also provided an overview of significant social policy themes current over the past year.

Judith Tait gave a detailed presentation highlighting the key themes within the report which included information on the role of the CSWO and social workers; details of key strategic partnerships in criminal justice, housing and community planning; the broader social issues of homelessness, poverty and how these impact on services; the range of work underway within children services; children and young people's mental health services; and the challenges facing services in the coming year. Ms Tait also outlined anticipated involvement with the Care Inspectorate and the independent care review which would include input from care-experienced young people. She said that social work services would have to be alert to the changes coming in future years as a result of this review.

A lengthy discussion followed and Ms Tait responded to a number of questions from members providing further context to her report.

The Chair thanked Ms Tait for her comprehensive report. Referring to the recent focus on homelessness and poverty and the rapid rehousing strategy, she said it would be helpful to see the impact of changes to the welfare system reflected in next year's report.

Mr Murray also welcomed the report which he said was a very useful summary of the key issues.

Councillor Shamin Akhtar noted the stark figures regarding domestic violence, substance misuse and drug-related deaths. She was keen to ensure that the IJB maintained a focus on the work of MELDAP and other agencies in this area.

Both Ms Tait and the Chair acknowledged the importance of this work and the broader issues of mental health, particularly in children and young people.

Decision

The IJB agreed to note the contents of the report.

6. IJB PERFORMANCE FRAMEWORK 2019/20

The Chief Officer had submitted a report updating the IJB on the development of a Performance Framework; and on responsibilities in relation to Ministerial Steering group indicators as well as reporting relationships with partner bodies.

Paul Currie presented the report outlining the background and development of performance reporting arrangements for the IJB. He highlighted the role and importance of Ministerial Steering Group indicators and how these were measured alongside other local and national benchmarks. He invited members to consider how the IJB might make best use of the data gathered from these exercises not only to demonstrate progress but also to inform future Directions.

Responding to questions from members, Mr Currie acknowledged that arrangements were not as well developed in areas such as children and young people's services and that there continued to be challenges in gathering data from social care services.

Bryan Davies confirmed that in future the plan would be to align the performance framework and the Directions with the work of the Change Boards which would allow them to monitor progress on key priorities. He advised that the member of staff who had recently joined the team had knowledge and expertise in data gathering and would help to drive forward this work.

Decision

The IJB agreed to:

- i. Note the aims of performance monitoring and management, including: clarity of reporting structures, ensuring robust monitoring, identifying areas for development, making best use of local intelligence and delivering high quality services.
- ii. Note the Performance Framework Performance Indicator hierarchy chart which details the various levels of reporting to ensure effective delivery across the IJB delegated service areas.
- iii. Review and accept the IJB Performance Framework as an accurate reflection of the local reporting requirements and intention to ensure robust monitoring of services.
- iv. Note that there may be ongoing evolution of Performance Indicators which will be updated by Planning and Performance.
- v. Support planning and Performance to continue to have dialogue with Community Planning Partners to agree a relevant set of Indicators which are reflective of IJB priorities.
- vi. Note that to ensure ongoing progress and use of local data, ongoing support from partner bodies will be required to ensure appropriate Information Governance and infrastructure.

7. UPDATE ON PROGRESS WITH CHANGE BOARDS

The Chief Officer had submitted a report updating the IJB on progress across the six Change Boards in progressing work across service areas and client groups which reflect strategic priorities.

Mr Currie presented the report outlining the background to the setting up of the 6 Change Boards and Reference Groups to support service change and delivery of the IJB's strategic priorities. He said that the Boards and Groups had benefited from their mix of members who offered a broad range of experience. He highlighted the structure and reporting arrangements and invited IJB members to note the progress made to date.

Mr Davies said that discussions would begin shortly with Board and Group members to get a sense of what elements of the structure were working well and what might be needed to maximise outcomes. While he hoped to retain the current format he acknowledged that some elements were not working as well as had been hoped. As well as discussions, a questionnaire would be circulated to Board and Group members seeking their feedback.

The Chair thanked all of those involved in the Changes Boards and Reference Groups for their commitment. She emphasised the importance for IJB members of being able to see the work which was happening on Directions and the priorities of the Strategic Plan and to be able to challenge and engage with the process rather than simply rubberstamping decisions. She said she did not envisage the need for any major changes to the structure at this stage but acknowledged that minor adjustments would be required as the process developed.

Mr Murray agreed that it was too early for any major changes to the format which had taken over a year to develop and now required time to take effect.

The Chair advised that officers would consider how best to provide access to reports from Change Boards to ensure that IJB members were kept up to date with developments.

Decision

The IJB agreed to note the progress in each Change Boards' delivery of work across its priority areas.

8. FINANCIAL POSITION 2019/20 AND FINANCIAL FORECAST FOR 2020/21

The Chief Finance Officer had submitted a report updating the IJB on its current financial position in 2019/20, reporting the projected year end outturn from the Q2 financial reviews and providing an early indication of the financial forecast for 2020/21.

Ms MacDonald presented the report as the Chief Finance Officer, Claire Flanagan, had been unable to attend the meeting. She outlined the key issues including the position as at end September 2019 of a £145,000 overspend and the projected year end outturn of a £34,000 overspend; a significant reduction on the previous year end forecast of a £645,000 overspend. She also highlighted some of the reasons for this revised projection including movement in the Social Care budget as a result of funding moving through for care home beds and a reduction in care at home hours. Ms MacDonald added that financial pressures were expected to continue into 2020/21 and work was already underway on a programme of efficiency savings. This would be brought to the IJB for consideration early in the New Year.

The Chair acknowledged the huge achievement of staff in getting to the current position with the hope of achieving a breakeven position at the financial year end.

Mr Murray referred to comments made by the Chair of the Parliament's Health & Social Care Committee on financial governance and the importance of considering timing when seeking the IJB's approval of plans for efficiency savings. He also asked about the revisions to planned efficiency savings outlined in the report and whether there were any concerns about achieving the additional savings.

Ms MacDonald explained that some of the revisions related to the point in the year at which efficiencies would begin to take effect but that the benefits would continue to be

felt in future years. She confirmed that, at present, there were no concerns about achieving the proposed plans.

In a response to a question from the Chair, Ms MacDonald advised that money for 'Frank's Law' had to be used for the purposes for which it had been allocated and could not be transferred to other services.

Decision

The IJB agreed to:

- i. Note the current financial position;
- ii. Note the Quarter 2 financial reviews of 2019/20; and
- iii. Note the initial financial forecast for 2020/21.

9. RECOVERY PROGRAMMES UPDATE (VERBAL)

Ms MacDonald updated IJB members on progress with recovery programmes to address the pressures facing NHS Lothian and the work being undertaken by services in East Lothian. She advised that the East Lothian Health & Social Care Partnership (ELHSCP) had been asked to open one of its two mothballed wards at the new Community Hospital in Haddington to support the anticipated winter pressures. As of 9th December, 10 patients would be accommodated in the ward with an additional 24 beds available as required. Additional finance had been provided by NHS Lothian and staff were in place to support the arrangements which would be in place for at least 3 months.

Ms MacDonald said that while it was positive that the ELHSCP was in a position to respond to additional need it was not without its challenges. However, she acknowledged that it was likely that there would be a requirement for additional beds at some point during the winter period and this arrangement was simply bringing that forward by a few weeks.

The Chair acknowledged the work of staff within services across East Lothian and asked about the longer term plan for the two wards.

Ms MacDonald stated that the first call on those beds would always be to support the requirements of patients within East Lothian and the priorities of the IJB.

Decision

The IJB agreed to note the update on recovery programmes.

10. EAST Lothian Health and Social Care Partnership Winter Plan 2019/20

The Chief Officer had submitted a copy of the East Lothian Health & Social Care Partnership (ELHSCP) Winter Plan for 2019/20.

Ms MacDonald explained that a plan was prepared on an annual basis to deal with periods of significant pressure during the winter months and which include arrangements to be put in place in the event of severe weather or other adverse events. She advised that East Lothian Council had its own robust business continuity arrangements and the ELHSCP Winter Plan would sit alongside these.

Decision

The IJB agreed to note the contents of the winter plan for 2019/20.

11. ISSUES OF RELEVANCE TO THE IJB (FOR NOTING)

a. HOSPITAL DELAYED DISCHARGES

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

Decision

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

b. CLINICAL AND CARE GOVERNANCE

There were no matters for noting.

12. MINUTES OF OTHER GROUPS OF RELEVANCE TO THE IJB (FOR NOTING)

Minutes of the Community Justice Partnership meetings on 27 June 2018, 30 October 2018 and 4 March 2019 were presented for noting.

Decision

The IJB agreed to note the minutes of the Community Justice Partnership.

Health & Social Care Scotland Conference

Marilyn McNeill provided a brief report on her attendance at the health & Social Care Scotland conference entitled "Collaboration, Compassion and Ambition in Integration". Keynote speakers had included the Cabinet Secretary who had referenced work happening in East Lothian when discussing models for transforming primary care.

Ms McNeill reported on the range of issues raised during the talks and workshop sessions and indicated that the clear message from the Cabinet Secretary is that the focus should now shift from theory and governance of integration to implementation and innovation of new models of care.

Bryan Davies

Mr Murray advised members that Bryan Davies would shortly be leaving his post as Group Service Manager - Planning and Performance at East Lothian Council. He thanked him for his contributions and support over the years and said he had helped to drive forward progress on integration. He wished him well in his new role.

The Chair echoed these remarks adding that as well as providing great support Mr Davies had always shown great humanity and compassion. She also wished him well.

DRAFT

Signed

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



REPORT TO: East Lothian Integration Joint Board

MEETING DATE: 27 February 2020

BY: Chief Officer

SUBJECT: NHS Lothian Annual Operational Plan/System Transformation Plan

5

1 Purpose

- 1.1 To inform the Integration Joint Board (IJB) of work underway by NHS Lothian to produce a two year Annual Operational Plan (AOP) as part of the System Transformation Plan (STP) which are documents required by the Scottish Government as part of governance of the Health Board.

2 Recommendations

The IJB is asked to:

- 2.1 Note that colleagues in the Strategic Planning Department of NHS Lothian are leading the preparation of the Annual Operational Plan/System Transformation Plan, working to guidance from Scottish Government on the plan's structure and content. The AOP/STP is still in development with a final draft scheduled for consideration by NHS Lothian's Strategic Planning Committee in mid-March (see appendix 1) and final sign off by Lothian NHS Board on the 8th April.
- 2.2 Note that the plan includes a section describing in summary the strategic priorities of the Lothian IJBs. The Strategic Planning Leads of the HSCPs contributed these sections and are supporting the preparation of the AOP/STP.
- 2.3 Agree to consider the final version of the AOP/STP at the 26th March IJB meeting with a view to supporting the commitments within.

3 BACKGROUND

3.1 NHS Lothian's Annual Operational Plan for 2020-2022 is an integral part of the Lothian System Transformation Plan. The AOP states both documents form part of the 'contract' between NHS Lothian and its stakeholders – the Scottish Government, Integration Joint Boards, its staff, and patients and families who use NHS Lothian's services.

3.2 The current draft AOP acknowledges that although the plan is the responsibility of NHS Lothian, the aspirations within require a whole system approach and the support of partners in the delivery of improvements to meet performance targets in health and social care and to improve patient/client outcomes.

3.3 The final plan will, amongst other things, set out actions to:

- Improve the quality of care through improved attainment of and continuing adherence to national standards for access to healthcare, including the 4-hour emergency access standard, elective waiting times standards, child and adolescent mental health services and psychological therapies, and by making NHS Lothian services safer, more patient-centred, and of the highest possible quality;
- Improve the health of the population by reducing inequalities across the area;
- Make the NHS Lothian 'system' sustainable through supporting the workforce to give their best and to develop and maintain the skills to make a difference to patient/client care and outcomes;
- Deliver financial sustainability, improve buildings to bring these up to modern standards and maximise the opportunities offered by changing technology and new ways of working;
- Develop and maintain Primary Care as a central part of the health and social care journey for citizens.

3.4 The actions in the AOP will contribute to the delivery of the vision within the NHS Lothian strategic plan – 'Our Health, Our Care, Our Future' which applies until 2024.

4. ENGAGEMENT

4.1 Any required engagement will be carried out by NHS Lothian colleagues.

5. POLICY IMPLICATIONS

5.1 There are no policy implications for East Lothian IJB or for the local health and social care services.

6. INTEGRATED IMPACT ASSESSMENT

- 6.1 The subject of this report does not affect the wellbeing of the community or have a significant impact on equality, the environment or the economy.

7. RESOURCE IMPLICATIONS

- 7.1 There are no resource implications concerning the input to the Annual Operational Plan, apart from the HSCP officer time required to prepare narrative for inclusion.

8. BACKGROUND PAPERS

- 8.1 None

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DATE	20 th February 2020

Appendix 1 – Annual Operational Plan Development and Approval Timetable

Date	What will happen?	Notes
24 th January	Feedback from Scottish Government	Some feedback provided already (see below)
31 st January	Scottish Government expects trajectories for USC/DDs, SC/CWT, and MH to be submitted	Pete coordinating for Recovery Plan meeting (23/1/20)
10 th February	CMT meeting	Paper would likely focus on feedback and work being undertaken to complete 2 nd draft (deadline for papers 31 st Jan)
14 th February	Submission of second draft to SGHSCD	
26 th February	F&R	Focus on financial aspects
28 th February	Feedback from SGHSCD on 2 nd draft	
c.19 th March	Strategic Planning Committee (being rearranged)	SPC is charged with signing off “AOP” on behalf of Board normally
25 th March	F&R	
31 st March		Papers for Board and CMT would be out in advance of this date
6 th April	CMT	For sign-off/homologation
8 th April	Board	For sign-off/homologation



REPORT TO: East Lothian Integration Joint Board

MEETING DATE: 27 February 2020

BY: Chief Officer

SUBJECT: Integration Scheme Review

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1 PURPOSE

- 1.1 To inform the Integration Joint Board (IJB) of the statutory requirement for East Lothian Council and Lothian Health Board to carry out a full review of the Integration Scheme for the East Lothian Integration Joint Board.

2 RECOMMENDATIONS

The IJB is asked to:

- 2.1 Note the statutory requirement of the Public Bodies (Joint Working) (Scotland) Act 2014 to fully review the Integration Joint Board Integration Scheme every five years.
- 2.2 Note that although Scottish Government advice was that the introduction of Carers Legislation, which required a revision to the East Lothian IJB's Integration Scheme in 2019, would 'reset' the timeframe for a comprehensive review to 2014, this is no longer the case.
- 2.3 Note that, as a result of the removal of the 'reset' date, the East Lothian Integration Scheme needs to be fully reviewed at the 5th anniversary of the original scheme's approval, requiring this to be completed by 27th June 2020.
- 2.4 Note that the Strategic Planning Group supported this proposal at its meeting on 19th February 2020.
- 2.5 Agree the indicative review process.

3 BACKGROUND

- 3.1 The Public Bodies (Joint Working) Scotland Act 2014 imposed statutory duties on councils and health boards to integrate specified health and

social care services. These were to be achieved by formal delegation through an 'Integration Scheme' of statutory duties by each council and relevant health board to an integration authority (IJB). The integration authority then has responsibility for making a strategic plan, receiving budget payments from the council and health board and directing the council and health board on how to deliver the delegated functions and the resources required. The integration authority has oversight of the delivery of those functions and has to publish a statutory performance report each year.

- 3.2 East Lothian Council and Lothian Health Board agreed an Integration Scheme for East Lothian IJB which delegated functions for adults and older people and retained children's services and criminal justice services within the Council and Health Board. It was approved at Lothian Health Board on 4th March 2015 and at East Lothian Council Executive on 10th March 2015. Following submission to the Scottish Ministers, it was duly approved on 27th June 2015. The East Lothian Integration Joint Board was formally established on 1st July 2015. It has since then carried out its statutory duties of strategic planning, oversight and direction of the delegated health and social care services.
- 3.3 There is a legal requirement to review the Integration Scheme under which the East Lothian IJB was established and is run. This duty lies with East Lothian Council and Lothian Health Board, not with the IJB.
- 3.4 The review must be carried out within 5 years of Scottish Ministers giving the Scheme formal approval. As noted, the current Scheme, dated 29th May 2015, was approved by Scottish Ministers on 27th June 2015. Since there is a statutory process of review, and since that process includes obtaining Ministerial approval prior to publication, the review must be completed in that 5 year period. The mandatory review must therefore be completed on or before 27th June 2020.
- 3.5 In 2019, East Lothian Council and Lothian Health Board went through the formal process of reviewing the Integration Scheme to make a reference in it to duties created in the Carers' (Scotland) Act 2016. A revised Scheme was approved by Scottish Ministers on 8th July 2019. However, this review did not constitute a full review as required by the legislation. It therefore remains that this must be carried out and concluded on or before 27th June 2020.
- 3.6 The review process is set out in the 2014 Act and must be carried out by the Council and Health Board, not by the Integration Joint Board. It is a three-stage process, and in summary:

Stage 1:

- Consultation must take place with the persons and groups specified by the Ministers and with others identified by the relevant Council and Health Board.
- The Council and Health Board must take account of views expressed before proceeding to decide if changes are required.

Stage 2, if East Lothian Council and Lothian Health Board decide changes are required:

- The Council and Health Board prepare a revised Scheme
- The Council and Health Board consult again with the same people and groups
- The Council and Health Board must take account of views expressed before proceeding to finalise the Scheme

Stage 3:

- The Council and Health Board submit the revised Scheme to the Scottish Ministers for approval.
- Once approved, the amended Scheme is republished and the changes take effect

3.7 The current [Integration Scheme¹](#) contains a mechanism for dispute resolution.

3.7.1 In the event of a failure by the Council and Health Board to reach agreement between or amongst themselves in relation to any aspect of the Scheme or the integrated functions, the Chief Officer shall use their best endeavours to reach a resolution through discussion and negotiation with both parties.

3.7.2 In the event that the matter remains unresolved, a meeting to seek a resolution shall take place amongst the Chief Executives of the Council and Health Board, the Chair of the Health Board, the Leader of the Council, the Chief Officer and the Chair and Vice-Chair of the Integration Joint Board within 21 days.

3.7.3 In the event that the matter remains unresolved after this stage the parties will proceed to mediation.

3.7.4 In the event that mediation is unsuccessful then the parties can choose to resubmit the current version of the Scheme for approval or will notify

¹ https://www.eastlothian.gov.uk/downloads/file/28529/east_lothian_revised_integration_scheme

Scottish Ministers and seek a direction in accordance with s52 of the Act.

- 3.8 Legislation contains a list of professional and representative groups and stakeholders who must be consulted in the review of the Integration Scheme. There must be a public consultation as part of the review process, with anyone able to participate and express views. The East Lothian IJB will be asked to contribute. All views expressed must and will be considered and taken into account before proceeding.
- 3.9 Because the statutory duty to review the East Lothian Integration Scheme rests with East Lothian Council and Lothian Health Board, the consultation will be carried out jointly. Each organisation will have to comply with its own internal decision-making arrangements.
- 3.10 Co-ordination between East Lothian Council and Lothian Health Board will be required. Each body will have to plan for consideration at Council, Health Board and other Committees as relevant before completing the process. The indicative timeline is shown in Appendix 1, although it may be subject to changes depending on the issues raised and the need to coordinate reporting within and to the Council and the Health Board.
- 3.11 The four IJB Chief Officers are jointly reviewing this process and the required timetable which will be forthcoming in due course.

4. ENGAGEMENT

- 4.1 Engagement will be informed by the requirements of the Scottish Government and in line with legislative requirements.

5. POLICY IMPLICATIONS

- 5.1 These will be known once the Scheme has been reviewed.

6. INTEGRATED IMPACT ASSESSMENT

- 6.1 Integrated Impact Assessments will be carried out as necessary where service delivery arrangements are varied or changed as a result of actions arising from the Integration Scheme review.

7. RESOURCE IMPLICATIONS

- 7.1 There will be resource implications arising from the officer time required to support the review of the scheme and to carry out engagement.
- 7.2 Support from legal colleagues will be required in the drafting of the reviewed scheme. The four Lothian IJBs are currently considering how

to secure this support in the most cost effective way to jointly review, where possible, the four Integration Schemes.

8. BACKGROUND PAPERS

- 8.1 [East Lothian Integration Scheme 2015²](#)
- 8.2 [Public Bodies \(Joint Working\) \(Scotland\) Act 2014, ss 45-47, incorporating ss 3-6](#)
- 8.3 [Public Bodies \(Joint Working\) \(Health Professionals and Social Care Professionals\) \(Scotland\) Regulations 2014](#)
- 8.4 [Public Bodies \(Joint Working\) \(Prescribed Consultees\) \(Scotland\) Regulations 2014](#)
- 8.5 [East Lothian Council Management Team approval of the revised Integration Scheme on 25th June 2019](#) and [Lothian Health Board approval on 3rd April 2019](#)
- 8.6 [East Lothian Integration Scheme 2019 \(Revised\)](#)

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DATE	20 th February 2020

² https://www.eastlothian.gov.uk/downloads/file/28529/east_lothian_revised_integration_scheme



REPORT TO: East Lothian Integration Joint Board
MEETING DATE: 27 February 2020
BY: Chief Finance Officer
SUBJECT: Financial Position for 2019/20, Quarter Three Financial Reviews and Financial Outlook for 2020/21

7

1 PURPOSE

- 1.1 To inform the IJB of quarter three financial reviews carried out by both its partners. East Lothian Council will present their review at the Council meeting on 25th February 2020 and NHS Lothian reported their review to their Finance and Resources Committee on the 22nd January 2020.
- 1.2 The financial reviews are used to provide forecast outturn positions. The quarter three forecasts project that the health 'arm' of the IJB will be underspent and the social care 'arm' of the IJB will be overspent.

2 RECOMMENDATIONS

- 2.1 The IJB is asked to:
 - i. Note the current financial position;
 - ii. Note the quarter three financial reviews of 2019/20; and
 - iii. Note financial forecast for 2020/21.

3 BACKGROUND

- 3.1 Both the IJB's partners (East Lothian Council and NHS Lothian) have undertaken quarter three financial reviews – that is they look at the financial information available (as at the end of December) and use that to project a forecast outturn position.
- 3.2 At its meeting in December 2019, the IJB projected an outturn of £36k overspent across the whole of the IJB. As a result of the formal quarter three review a forecast of £444k underspent is now projected. The quarter

three review highlighted a projected underspend within the health budget and a small overspend within the social care budget of the IJB.

East Lothian IJB Financial Performance & Updated Forecast

	Year to Date Outturn at December 2019	Q2 Forecast Outturn	Q3 Forecast Outturn	Movement
	£k	£k	£k	£k
Social Care	-16	-241	-101	140
Health	132	205	545	340
	116	-36	444	480

3.2 The social care movement in the 2019/20 forecast is due to an anticipated reduction in demand within residential placements and care at home for the last three months of the year. Although there is evidence that both services are seeing a drop in demand there remains a risk that this does not continue to fall.

3.3 As reported previously within the health budgets these are split into core, hosted and set aside. Of the £340k improvements in the health forecast,

- £354k relates to core. This improvement is due to a combination of further slippage in usage of funding, a deterioration in prescribing of and an small improvement in GMS.
- An improvement of £35k is within set aside. This is due to a reduction in General Medicine and Junior Medical pressures.
- Hosted services forecast has deteriorated by £49k and is now projecting a £159k underspend. This deterioration relates to prescribing pressures.

3.4 The IJB forecast position as a result of the quarter three reviews will continue to be monitored as there are some volatile budgets within the IJB; those mainly being demand within social care and prescribing. As will dialogue with Partners regarding these projections.

3.5 As in 2018/19 the IJB intends to carry forward any surplus at 31 March 2020 through reserves for future years use. Reserves normally comprise funds that are for specific purposes; and funds which are not earmarked for specific purposes but are set aside to deal with unexpected events or emergencies.

Financial Recovery Actions

- 3.6 As previously reported, part of the budget setting process, included a savings target of £702k. The HSCP developed a suite of recovery actions to meet this target and these actions have supported bringing the overall financial position for the IJB in 2019/20 back into balance.
- 3.7 Some of the recovery actions remain challenging as timelines to implement new models are taking longer than originally anticipated. The HSCP will continue to monitor the progress of the recovery actions to ensure savings are made on a recurring basis.
- 3.8 Slippage in projected costs associated with the new monies allocated this financial year for Franks law and Carers, has offset timing delays in savings in year only.

2020/21 Financial Position

- 3.9 As previously reported in December's report the IJB and its delegated functions will have underlying financial pressures with the challenging financial environment both Partners face.
- 3.10 On 21st January 2020 East Lothian Council reported to Cabinet on Budget Developments for 2020. This outlined the timetable of national budget announcements and the constraints this places on East Lothian Council's budget planning process. Assumptions have therefore been made in draft budget proposals to allow progress to be made within the timescales required. The key assumptions for budget proposals relating to the IJB are detailed below.
- That the final level of Scottish Government funding provided in 2019/20 will be recurring with the following additional increases
 - Further funding will be provided to offset a wide range of additional inflationary costs within the Adult Wellbeing service, including contractual commitments relating to National Care Home Contract, Non National Care Home Contract and Care at Home, and this remains consistent with the condition set within the 2019/20 budget settlement.
 - A potential £250k savings target allocated to the Adult Wellbeing services giving a net increase of budget of circa £1.55m
- 3.11 For NHS Lothian the latest iteration of the Financial Plan for 2020/21 was shared with Finance and Resources Committee on 22nd January 2020. A final version will be approved by the Board in April 2020. The latest plan highlights a gap of £31.2m for next year (East Lothian's share is £1.44m). NHS Lothian is now assuming 3% uplift for 2020/21 and that a similar 3% uplift will be passed through to IJBs.

3.12 In the context of the circumstances both partners are facing, budget forecasting and approval for the IJB will be brought to a future IJB meeting for discussion.

4 ENGAGEMENT

4.1 The IJB holds its meetings in public and makes its papers available on the Council's website.

5 POLICY IMPLICATIONS

5.1 There are no new policies arising from this paper.

6 INTEGRATED IMPACT ASSESSMENT

6.1 The subject of this report does not affect the wellbeing of the community or have a significant impact on equality, the environment or economy.

7 RESOURCE IMPLICATIONS

7.1 Financial – discussed above

7.2 Personnel – none

7.3 Other – none

8 BACKGROUND PAPERS

8.1 East Lothian Council Budget Development 2020

AUTHOR'S NAME	Claire Flanagan
DESIGNATION	Chief Finance Officer
CONTACT INFO	Claire.flanagan@nhslothian.scot.nhs.uk
DATE	19 February 2020



REPORT TO: East Lothian Integration Joint Board
MEETING DATE: 27 February 2020
BY: Chief Finance Officer
SUBJECT: Update on the IJB Reserves Position

8

1 PURPOSE

- 1.1 This report provides an update to the IJB on Reserves held and a reminder of the Reserves Policy. It also looks for support from the IJB to reinvest delegated funding recently disaggregated from a Medicine of the Elderly ward closure on the Western General site into local services to support unscheduled care.

2 RECOMMENDATIONS

- 2.1 The IJB is asked to:
- i. note the contents of this report; and
 - ii. approve the release of East Lothian's share of the NHS Lothian ward 71 budget, to be reinvested locally supporting unscheduled care.

3 BACKGROUND

- 3.1 The Reserves Policy of the IJB was approved by the board in March 2017. Reserves normally comprise funds that are for specific purposes; and funds which are not earmarked for specific purposes but are set aside to deal with unexpected events or emergencies. Reserves are generally held to do three things:
- i. create a working balance to help cushion the impact of uneven cash flows and avoid unnecessary temporary borrowing – this forms part of **general reserves**;
 - ii. create a contingency to cushion the impact of unexpected events or emergencies – this also forms part of **general reserves**;
 - iii. create a means of building up funds, often referred to as **earmarked reserves**, to meet known or predicted liabilities.

- 3.2 There is no guidance on the minimum level of reserves that should be held. The Chartered Institute of Public Finance & Accountancy (CIPFA) guidelines advises that there are many factors when considering appropriate levels of Reserves and that these can only be assessed at a local level. A considerable degree of professional judgement is required, looking at the strategic, operational and financial risk facing the IJB. East Lothian IJB's Reserves Policy sets a prudent level of General Reserves would represent 2% of net expenditure. As net expenditure in 2018/19 was £159,817k, 2% would equate to £3,196k.
- 3.3 In 2018/19 the IJB incurred a surplus of £1,772k and now have a Useable Reserve comprised of General and Earmarked Reserves. The Reserves at 31 March 2019 are split below, £1,077k General Reserves equates to 0.67% of net expenditure in 2018/19.

	£k
Specific	695
General	1,077
Reserves at 31 March 2019	1,772

Table 1: Summary of Reserves

- 3.4 The detailed Reserves breakdown and year to date movement at December 2019/20 is shown below.

Reserves	2019/20	2019/20	2019/20	2019/20
	Opening	Transfers Out	Transfers in	Closing
	£k	£k	£k	£k
Earmarked Reserves				
Primary Care Improvement Fund	219	-219		0
Action 15	164	-164		0
Alcohol and Drugs	312	-312		0
Committed Project Funds	695	-695	0	0
General Reserves	1,077	0	28	1,105
Total	1,772	-695	28	1,105

Table 2: Reserves Breakdown

- 3.5 Within 2019/20 the Earmarked Reserves have been released into operational budgets to deliver committed investments plans. The IJB also has some earmarked funding sitting with Scottish Government which are not anticipated to be used in 2019/20 and remain with Scottish Government for these specific investment plans for draw down by East Lothian in future years.

3.6 Within General Reserves an additional £28k has been added in year, £28k relates to the closure of Ward 71 at the Western General Hospital (£67k full year effect). This was a Medicine of the Elderly ward which is a delegated function of the Integration Authorities; therefore the budget attached to the closure of the ward is released back to the IJBs. East Lothian IJB have this funding in their Reserve and have sought through this paper that this can be utilised locally to ensure that East Lothian can work within this reduced bed footprint for Medicine of the Elderly. If this is agreed the funding will be released from reserves into operational budgets with the HSCP. It's worth noting the funding is recurrent.

4 ENGAGEMENT

4.1 The IJB holds its meetings in public and makes its papers and report available on the internet.

5 POLICY IMPLICATIONS

5.1 There are no new policies arising from this paper.

6 INTEGRATED IMPACT ASSESSMENT

6.1 The subject of this report does not affect the wellbeing of the community or have a significant impact on equality, the environment or economy

7 RESOURCE IMPLICATIONS

7.1 Financial – none

7.2 Personnel – none

7.3 Other – none

8 BACKGROUND PAPERS

8.1 Paper on Reserves Policy to IJB - 30th March 2017

AUTHOR'S NAME	Claire Flanagan
DESIGNATION	Chief Finance Officer
CONTACT INFO	Claire.flanagan@nhslothian.scot.nhs.uk
DATE	19 February 2020



REPORT TO: East Lothian Integration Joint Board
MEETING DATE: 27 February 2020
BY: Chief Officer
SUBJECT: IJB and Audit & Risk Committee Meeting Dates 2020/21

9

1 PURPOSE

- 1.1 To set the dates of East Lothian Integration Joint Board (IJB) business meetings and development sessions, and meeting dates for the Audit & Risk Committee during 2020/21.

2 RECOMMENDATIONS

- 2.1 The IJB is asked to:
- i. approve the dates for IJB business meetings during session 2020/21 (proposals set out in Appendix 1);
 - ii. approve the dates for IJB development sessions during session 2020/21 (as set out in Appendix 2); and
 - iii. Approve the dates for the Audit & Risk Committee meetings during session 2020/21 (Appendix 3).

3 BACKGROUND

- 3.1 The IJB is required to approve a schedule of meeting dates for session 2020/21. From June 2019 the frequency of business meetings were set at every two months, with development sessions scheduled in the months in between. There were three exceptions – a meeting in early/mid September rather than late August, consecutive meetings in February & March and a special budget-setting meeting in May.
- 3.2 Standing Orders allow the IJB to call additional business meetings if necessary. However, this discretion will be used only in exceptional circumstances. In the event that a meeting date requires to be changed, members will be notified as soon as practicable. Standing Orders also require the IJB to approve the meetings dates for the Audit & Risk Committee.

- 3.3 The proposed IJB meeting and development session dates for session 2020/21 are set out in Appendices 1 and 2, and the meeting dates for the Audit & Risk Committee are detailed in Appendix 3. The proposed IJB meeting in December 2020 will require members to choose between two possible dates.

4 ENGAGEMENT

- 4.1 The proposed meeting dates were discussed with the Chairs, Depute Chair and Chief Officers prior to this report being presented to the IJB.

5 POLICY IMPLICATIONS

- 5.1 None.

6 INTEGRATED IMPACT ASSESSMENT

- 6.1 The subject of this report does not affect the wellbeing of the community or have a significant impact on equality, the environment or economy.

7 DIRECTIONS

- 7.1 The subject of this report does require the creation of a new Direction or the alteration of an existing Direction issued by the IJB.

8 RESOURCE IMPLICATIONS

- 8.1 Financial – none.
8.2 Personnel – none.
8.3 Other – none.

9 BACKGROUND PAPERS

- 9.1 None.

AUTHOR'S NAME	Fiona Currie
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DATE	17 February 2020

PROPOSED BUSINESS MEETING DATES FOR SESSION 2020/21

Thursday 17th September 2020, 2.00pm

Thursday 29th October 2020, 2.00pm

Thursday 3rd December 2020 or Thursday 10th December 2020, 2.00pm

Thursday 25th February 2021, 2.00pm

Thursday 25th March 2021, 2.00pm

Thursday 27th May 2021, 2.00pm (budget-setting)

Thursday 24th June 2021, 2.00pm

The majority of meetings will be held in the Council Chamber, Town House, Haddington, with occasional meetings held at venues elsewhere in East Lothian.

APPENDIX 2

PROPOSED DATES FOR DEVELOPMENT SESSIONS IN 2020/21

Thursday 27th August 2020, 2pm

Thursday 26th November 2020, 2pm

Thursday 28th January 2021, 2pm

Thursday 22nd April 2021, 2pm

Venues for the development sessions will be confirmed in due course.

**PROPOSED AUDIT & RISK COMMITTEE MEETING DATES FOR SESSION
2020/21**

Tuesday 15th September 2020, 10.00am

Tuesday 8th December 2020, 10.00am

Tuesday 16th March 2021, 2.00pm

Tuesday 8th June 2021, 2.00pm

These meetings will take place in the Council Chamber or other meeting room
in Haddington



REPORT TO: East Lothian Integration Joint Board
MEETING DATE: 27th February 2020
BY: Chief Officer
SUBJECT: Hospital Delayed Discharges

10a

1 PURPOSE

- 1.1 This report updates the Integration Joint Board (IJB) on performance for delayed discharges in East Lothian and asks the IJB to agree further actions to maintain progress.

2 RECOMMENDATIONS

- 2.1 The IJB is asked to:
- (i) Note the improving trend on performance and recent actions.
 - (ii) Discuss the issues involved in performance on hospital delayed discharge.

3 BACKGROUND

- 3.1 The national target for hospital delayed discharge performance requires that following being declared medically fit to leave hospital no (non-complex coded) patient should waiting more than 2 weeks for discharge.
- 3.2 An East Lothian IJB Direction (no. 11c) for 2019-20 agreed a local target to reduce the total number of occupied bed days for East Lothian residents arising from all episodes of unscheduled care by 10 % compared to the previous year. This has been achieved.
- 3.3 The Scottish Government, through its *Health and Social Care Delivery Plan* (December 2016) states that one of its Health and Social Care Integration actions is to reduce unscheduled bed days in

hospital by 10% by 2018 (Nationally this is as much as 400,000 bed days) by reducing delayed discharges, avoidable admissions and inappropriately long stays in hospital.

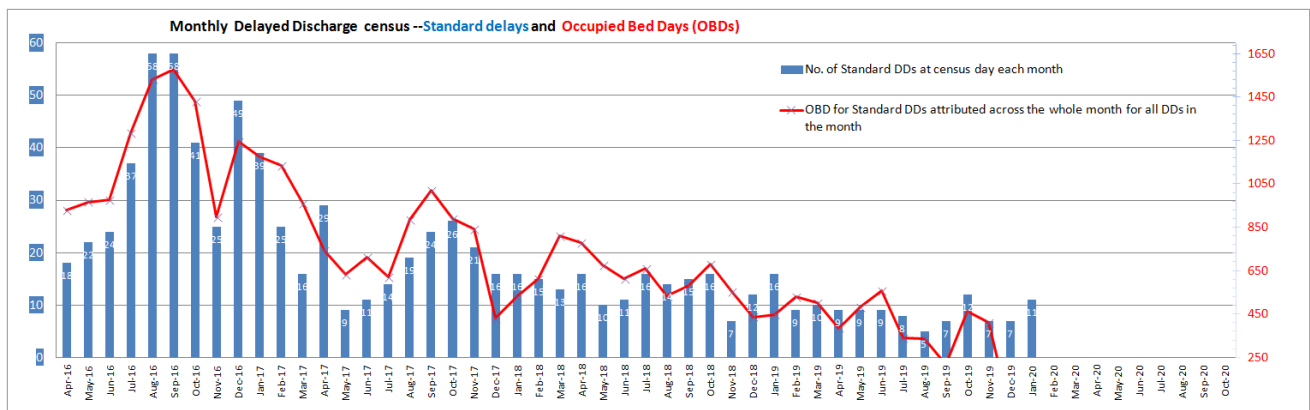
3.4 Delayed discharge is essentially the situation where an individual’s need for healthcare in the acute hospital setting is complete and they await transfer for provision of care in a community setting, or from another non-NHS type of service.

3.5 The actual number of individual people reported as being delayed in their discharge from hospital at a single point in each month has historically been the most common expressed measure of performance. However, what can also be measured is the Occupied Bed Days (OBD) across the whole month by all delayed discharge patents. This extends beyond the simple data capture at 1 minute past midnight on the last Thursday of each monthly census snap shot.

3.6 East Lothian has performed well across the last three years in both reducing the number of individuals who experience a delay in their hospital discharge and in overall OBDs.

3.7 The Health and Social Care Partnership’s OBDs from a high of 1,400 days per months are now down to circa 400 in each of the last twelve months. Actual numbers of individuals being recorded as a delayed discharge on the census day has been 10 or below for the last 12 months –although January 2020 saw us with 11, which was still below our planned maximum of sixteen for the 1st month of 2020.

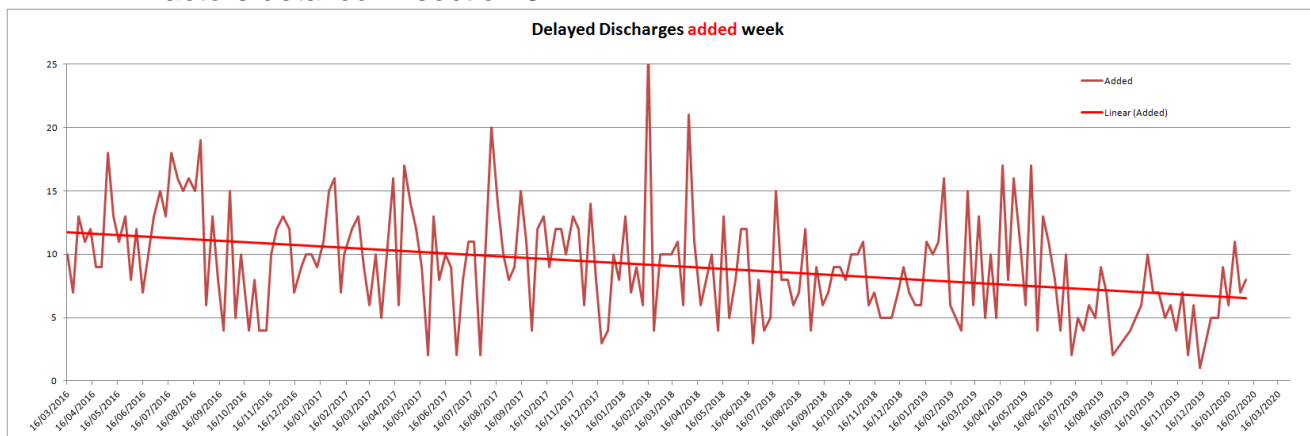
3.8 The graphic below shows both the OBDs (the red line, right hand axis) and the number of individuals recorded as a delayed discharge at the census point (blue columns, left hand axis).



Data source NHS Lothian live Trak

3.9 There have been fluctuations over time, but the Partnerships performance and direction of travel has been a steady and sustained reduction in East Lothian residents experiencing a delay in hospital discharge.

3.10 The table below shows the number of people becoming a delayed discharge weekly from April 2016 to January 2020. From circa 12 people being added weekly this has been reduced to 6. To date the winter spike across December to March has been far less than in previous years. The improvement is down to several interlinking factors detailed in section 3.12



Data source NHS Lothian Trak patient administration system

3.11 Within the county, from a hospital delayed discharge perspective, the number of OBDs has reduced circa 70% from 2016 for standard delays.

3.12 Factors contributing to the improvement:

3.12.1 Core Health and Social Care services continue to work with discharge hubs on all acute hospital sites.

3.12.2 The Hospital to Home service (H2H) takes people from hospital and gives them care in their own home and rehabilitation input. The client can then be taken on by a care provider, often with a reduced care need. Discharge to Assess Team in-reach to secondary care to support discharge at an earlier stage in journey. This team works closely with core services to co-ordinate care, if required.

3.12.3 The East Lothian Community Hospital (ELCH) based Hospital at Home service (H@H) team which accepts East Lothian GP referrals, to assess and maintains a patient in their own home, thus avoiding a hospital admission. This is not just of benefit to the patient, but also

avoids an unscheduled admission and a potential delay in discharge further down the

- 3.12.4 Weekly collaborative meetings across health, social work, care brokers and care providers has greatly improved understanding and the ability to offer joint working and shared solutions. This has enabled clients to return home quicker than would have historically been the norm. Health and social work colleagues now sit together with in the ELCH HUB.
- 3.12.5 The continued commitment to weekly meetings with senior management and operational staff from health and social work ensures every client is discussed and resolutions sought. The discussion is not only around 'hospital delayed discharges', but other clients in need of care be they in hospital or community settings.
- 3.12.6 The daily 8am health teleconference looks at bed capacity, expected discharges, and admissions, as well as H@H and H2H workloads and what capacity is required in order to avoid an acute admission or to pull patients from the acute hospitals. There are also twice daily teleconferences involving all NHS Lothian acute and community sites to, review capacity and discharge options.

Continued Challenges

- 3.13 The key issues in East Lothian regarding delayed discharges are:
- The vulnerability of the care at home market
 - Wait for care at home packages is the single biggest reason for clients remaining in hospital. The situation is county wide and is more acutely felt where two carers are required for each visit.
 - Circ. 9000 hours of home care are supported by the Partnership for the >65's weekly—currently in Hospital we have patients who cumulatively require 300 hours weekly—this equates to between 8 and 9 WTE care at home workers.
 - There continues to be a need for care homes with dementia places.
 - In addition, the service provision has to balance the needs of people who are delayed in hospital with people in the community.
 - We continue to operate 12 beds in ward five at ELCH – primarily in support of pressures being experienced within the wider NHS Acute care system this winter

4. POLICY IMPLICATIONS

4.1 The achievement of the national standards is set out in the Single Outcome Agreement and the IJB strategic plan.

5. INTEGRATED IMPACT ASSESSMENT

5.1 There is no requirement to carry out an impact assessment on this issue.

6. RESOURCE IMPLICATIONS

6.1 Financial – the resolution of the delayed discharge situation may have a financial impact. The costs of the living wage and the additionality required in home care are assumed to be covered through the social care fund.

6.2 Other – none.

7. BACKGROUND PAPERS

7.1 None

AUTHOR'S NAME	Gordon Gray
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DATE	14 th February 2020