



MINUTES OF THE MEETING OF THE EAST LOTHIAN INTEGRATION JOINT BOARD

THURSDAY 15 SEPTEMBER 2022
VIA DIGITAL MEETINGS SYSTEM

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Voting Members Present:

Councillor S Akhtar
Ms E Gordon
Councillor C McFarlane
Mr P Murray (Chair)

Non-voting Members Present:

Ms M Allan	Mr D Binnie
Ms L Cowan	Ms C Flanagan
Dr W Hale	Ms M McNeill
Mr T Miller	Dr J Turvill
Ms F Wilson	

Officers Present from NHS Lothian/East Lothian Council:

Ms L Berry	Mr P Currie
Ms C Goodwin	Mr J Hardman
Ms J Jarvis	Ms L Kerr
Mr M Kennedy	Mr C King

Clerk:

Ms F Currie

Apologies:

Ms F Ireland
Councillor L Jardine
Ms V de Souza
Mr I Gorman

Declarations of Interest:

None

The Chair made a statement on the sad passing of Her Majesty Queen Elizabeth. He paid tribute to her 70 years of service to her country and the wider world, observing that she was someone who deserved the utmost respect. He said that everyone would have their own particular recollections of the Queen and he invited those present to pause for a moment of silent reflection before the commencement of the meeting.

1. MINUTES OF THE MEETING OF THE EAST LoTHIAN IJB ON 25 AUGUST 2022 (FOR APPROVAL) AND MATTERS ARISING

The minutes of the meeting on 25th August 2022 were approved. There were no matters arising.

2. CHAIR'S REPORT

The Chair had no matters to raise in addition to those on the agenda.

3. EAST LoTHIAN IJB STRATEGIC PLAN 2022-25

The Chief Officer had submitted a SBAR updating members on the preparation of the new Strategic Plan for 2022-25 and seeking the IJB's approval of the Plan.

Paul Currie presented the report. He outlined the background to the preparation of the Plan, the consultation process, the agreed strategic objectives and accompanying actions. He reminded members that the Plan was designed to be flexible to take account of changing responsibilities flowing from the new National Care Service and other current and future challenges. The Plan would also be subject to an Integrated Impact Assessment and would be converted from a text-only version to include illustrations and other DTP elements.

Fiona Wilson stated that as a Health & Social Care Partnership, they were keen to be ambitious for local communities and to deliver person-centred care to meet the needs of people in East Lothian.

The Chair said that it was important to him that the IJB demonstrated that, irrespective of the work on the National Care Service, it was still open for business and that it maintained a clarity of purpose and direction, and was keen to deliver on stated objectives. He added that without the strategic enablers the process would be flawed and that these should address any issues which could potentially derail delivery of the Plan.

Maureen Allan put forward some suggested amendments to the text to better reflect collaborative working with the partners and the funding available for delivery of each of the objectives. Laura Kerr suggested that while emphasis around funding could be added to the Plan it was not perhaps the right place of the detailed funding information.

Councillor Shamin Akhtar suggested that Ms Allan's points could be reflected in next year's performance report. In the meantime, she wanted to recognise the comprehensive consultation which had taken place on the Plan including seeking views of those with lived experience, the third sector and others.

The Chair thanked Ms Allan and Councillor Akhtar for their comments.

Mr Currie said that more detail would be included in the delivery plan document but that if Ms Allan could provide specifics he would look at revising the text of the Strategic Plan, where appropriate.

The members agreed to note recommendations i to iii. The vote was taken by roll call on recommendation iv, and this was approved unanimously.

Decision

The IJB agreed to:

- i. Note the consultation and other processes carried out to develop the 2022-25 Strategic Plan and its Strategic Objectives;
- ii. Note the intention to develop an Annual Delivery Plan for the Strategic Plan and to report on progress;
- iii. Note that the SPG approved the Strategic Plan at its 6th September meeting and agreed to recommend it to East Lothian IJB; and
- iv. Accept the 2022-25 Strategic Plan.

4. IJB ANNUAL PERFORMANCE REPORT 2020-2021

The Chief Officer had submitted a SBAR updating members on progress with the IJB's annual performance report 2020-2021.

Claire Goodwin presented the report. She reminded members that requirement for the annual performance report was set out in legislation and that the content of the report was in line with the guidance from the Scottish Government including performance in relation to core indicators, Ministerial Steering Group indicators and financial performance. In addition, it contained a detailed narrative describing elements across HSCP services and highlighting key achievements during the year, illustrated with specific examples and case studies. The guidance required the report to be presented in a way that to non-experts and Ms Goodwin explained that this had been addressed in the report's language and design. Further work would be done to make the report even more accessible and easier to navigate and a summary version would be made available online.

The Chair said the report was a great summary of the activity during the year and clearly demonstrated the hard work of staff and the progress made from previous years and the continuing challenge of COVID.

Councillor Akhtar referred to a number of the achievements highlighted in the report and asked how best to acknowledge the role of staff in these achievements and to pass on the thanks of the IJB.

Jennifer Jarvis said she would be happy to produce press releases highlighting key elements from the report and to help reflect these in the design of the report.

Ms Wilson observed that when talking about the new Strategic Plan it would be important to ensure that staff and communities understood their place in the Plan and their part in the delivery process.

The Chair agreed that the choices made regarding priorities for the Strategic Plan should be reflected in the performance report and the delivery of outcomes within a balanced budget added to the level of achievement seen in the current report.

He thanked officers for their work on the report and agreed with Councillor Akhtar on the need to get the message out to staff.

Decision

The IJB agreed to:

- i. Recognise the achievements of East Lothian HSCP and individual services throughout the year; and
- ii. Commend the contribution made by staff, volunteers, communities and partner organisations.

5. EAST Lothian COMMUNITY HOSPITALS AND CARE HOMES PROVISION CHANGE BOARD

The Chief Officer had submitted a SBAR providing members with an update on the progress of the East Lothian Community Hospitals and Care Homes Provision Change Board.

Ms Kerr presented the report. She referred to previous reports presented in December 2021 and March 2022 and advised that this paper provided a further update. She outlined the progress made by the 3 working groups: Communications and Engagement; Capacity and Planning; and Finance and Capital, and she summarised the key messages drawn from the capacity planning work.

The Chair thanked Ms Kerr for the update and reiterated the importance of the work around intermediate care, timely communications and identifying sources of capital funding to take projects forward to the next stage.

Ms Allan said it was generally recognised that East Lothian was ahead of the curve on a lot of these issues and she welcomed the report. She also commended the hard work and commitment of staff over the past few years.

Dr Jon Turvill thanked officers for producing an excellent report and said he looked forward to having the opportunity to contribute to the future work. He referred in particular to the number of people who were in hospital in the last few months of life and the need to improve opportunities for them to remain in their own homes for as long as possible. He added that there were good services available but there was clearly a need to understand and address why these were not being accessed in some cases.

Ms Wilson concurred with Dr Turvill's comments and said capacity in the workforce would be a key issue, along with strengthening connections between community services and building confidence in services overall. She agreed that significant work had been done but that there remained some distance to travel.

Decision

The IJB agreed:

- i. To note the actions and work to date undertaken by the Change Board in relation to the 3 working groups and the production of the Intermediate Care Paper and our focus upon Home First;
- ii. To note the Summary to date of this work and its key messages; and

- iii. To note the continuing and ongoing pressure on staff as a result of the impact of COVID-19 and service impacts of COVID-19 through high levels of sickness, high vacancies, and staff self-isolating.

6. 2022/23 Q1 FINANCIAL UPDATE

A report was submitted by the Chief Finance Officer laying out the results of the partner's (East Lothian Council and NHS Lothian) quarter one financial reviews and considering how these impacted on the projected financial position of the IJB for 2022/23. The report also provided an update on the work to support sustainable financial solutions as part of the COVID exit planning.

Claire Flanagan presented the report. She set out the results of the Partners' quarter 1 reviews and the IJB's financial position as at end June, including the year end forecast of a £1.1m overspend. She advised that COVID funding continued to be drawn down and that this and further allocations from the Scottish Government meant that the budget position would remain fluid in the months ahead. The largest budget pressure would be seen in Set Aside and the biggest financial uncertainty would be the pay award with the costs of this yet to be built into the budget. Despite further allocations from the Scottish Government, there was likely to be a shortfall in COVID funding for 2022/23 and it would be necessary to use winter funding to support COVID exit planning. Most areas had been realigned against recurring funding sources but four areas were currently without allocated funding beyond 2022/23. Ms Flanagan concluded that work would continue to mitigate financial pressures where possible and regular updates would be provided to the IJB.

The Chair acknowledged that the inability to influence the Set Aside budget was a difficulty and that this lack of flexibility would have to be addressed going forward. He also noted the potential shortfall in COVID costs and the impact on key areas if the IJB was unable to use its Reserves.

Ms Flanagan concurred; explaining to members that the Scottish Government had written to all IJBs seeking the return of COVID funding reserve balances where these were not required to cover COVID costs. She added that she continued to submit regular reports to the Government and that this issue had been highlighted.

Ms Flanagan and Ms Wilson responded to a question from Elizabeth Gordon regarding the potential impact of reduced COVID funding on the arrangements for the vaccination programme. Ms Flanagan advised that the vaccination programme was administered and funded by NHS Lothian. Ms Wilson confirmed that there were challenges resulting from reduced funding and planning work was underway to identify sustainable options for premises going forward. She also acknowledged the need to use the transformation programme to address future challenges resulting from the National Care Service and continued pressure on funding across all services.

In response to further questions from members, Ms Flanagan agreed to provide a more detailed outline of prescribing pressures in future financial update reports and suggested that a presentation from colleagues on the Set Aside budget might provide some useful context for members.

Dr Turvill, Mr King and Mr Hardman discussed some of the reasons for increases in the prescribing budget and alternative options for the management of chronic pain. Ms Wilson suggested that a development session on this issue might also be helpful for members and allow them to better understand some of the key challenges.

Ms Allan observed that while she agreed that GPs must prescribe based on their professional judgement, she questioned the necessity of using public funds to prescribe drugs which were cheaply available over the counter.

Lesley Berry outlined the physio-led service in East Lothian for the management of chronic pain and advised that work was ongoing to expand this to include providers such as Enjoyleisure and to cover prescribing options for GPs. A paper would shortly be presented to the Strategic Planning Group covering these options.

The Chair welcomed this news and said he looked forward to seeing the benefits of these new services coming forward in the months ahead. In the meantime, he thanked members for their contributions to the discussion.

Decision

The IJB agreed to:

- i. Note the quarter one financial review undertaken by partners; and
- ii. Note the COVID exit planning.

DRAFT

Signed

Mr Peter Murray
Chair of the East Lothian Integration Joint Board



REPORT TO: East Lothian Integration Joint Board
MEETING DATE: 27 October 2022
BY: Chief Finance Officer
SUBJECT: IJB's Audited Annual Accounts for 2021/22

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1 PURPOSE

1.1 This report presents the IJB's annual accounts for 2021/22.

2 RECOMMENDATIONS

2.1 The IJB is asked to:

- i. Note the IJB's Audited Annual Accounts for 2021/22; and
- ii. Note the External Auditor Annual Report for East Lothian IJB for 2021/22.

3. BACKGROUND

3.1 As a body governed by section 110 of the Local Government Scotland Act (1973) and the appropriate regulations and subsequent Acts, the IJB must prepare a set of Annual Accounts. The accounts must fulfil the requirements of the Act and the regulations and must give a true and fair view of the IJB's financial position.

3.2 The accounts are reviewed by an Independent Auditor who reported their findings to the IJB's Audit & Risk Committee on the 13th September 2022. There were no issues arising from the auditors' report and the committee recommended acceptance and authorisation of the annual accounts.

3.3 The auditor's report is unqualified - that is that the auditors consider that the accounts meet the regulations and requirements of the Act and that the accounts are a true and fair view of the IJB's financial position.

3.4 The accounts have also now been signed electronically in line with the request to the IJB for this to happen after the September Audit & Risk Committee.

4 ENGAGEMENT

4.1 The IJB makes its papers and reports available on the internet.

5 POLICY IMPLICATIONS

5.1 This paper is covered within the policies already agreed by the IJB.

6 INTEGRATED IMPACT ASSESSMENT

6.1 There are no implications for health inequalities or general equality and diversity issues arising directly from the issues and recommendations in this paper.

7 DIRECTIONS

7.1 The IJB may wish to issue directions regarding the use of the reserves (especially these funds carry forward to support the COVID pandemic).

8 RESOURCE IMPLICATIONS

8.1 There are no immediate resource implications from this report.

9 RISK

9.1 None

10 BACKGROUND PAPERS

10.1 None

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DATE	October 2022

Appendix 1 - East Lothian IJB Audited Annual Accounts for 2021/22.

Appendix 2 - External Auditor Annual Report for East Lothian IJB for 2021/22.



East Lothian Integration Joint Board

Audited Annual Accounts 2021/22



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Audit Arrangements

Under arrangements approved by the Accounts Commission of Scotland, the auditor with responsibility for the audit of the accounts of East Lothian Integration Joint Board for the period 1 April 2021 to 31 March 2022 is Audit Scotland, 102 West Port, Edinburgh EH3 9DN.

Management Commentary

Introduction

The management commentary considers the work that the IJB has undertaken during the financial year 2021/22 and then describes the financial performance for the financial year ended 31 March 2022. It further provides an overview of the key messages relating to the role, remit, members, objectives and the strategy of the East Lothian Integration Joint Board (IJB).

Impacts of COVID-19 on Service Outcomes and Integration

2021/22 is the second year of the COVID-19 pandemic and the IJB would like to sincerely thank the staff of NHS Lothian, East Lothian Council, the GP Practices, the independent providers of social care and the voluntary organisations who have continued to deliver the functions that have been delegated to the IJB during a very difficult period.

COVID-19 has continued to disrupt patient journeys and service delivery in health and care settings and is delaying access to secondary care treatment which might otherwise reduce care requirements for individuals. The impact of the pandemic has also continued to constrain the work of the IJB in the delivery of its Strategic Plan, for example delivery of services had to cease or reduce to ensure compliance with public health guidance ultimately to keep staff, patients and clients safe. The IJB remains committed to supporting its partners (East Lothian Council and NHS Lothian) during this very difficult time but it is hoped that in 2022/23 that the impacts of the pandemic become more manageable and that the IJB will be able to return to a more 'business as usual' position.

During the financial year, the IJB has expended around £8,141,000 to support the additional costs of health and social care generated by the COVID-19 pandemic and this has been funded through the IJB's COVID-19 reserve along with additional grants from the Scottish Government. In addition, the IJB has continued to support NHS Lothian with its remobilisation plan as part of the overall recovery of Health and Social Care services from the pandemic

These accounts cover the period from 1 April 2021 to 31 March 2022.

The Role and Remit of the IJB

The purpose of integration is to improve care and support and therefore the health and wellbeing outcomes for people who use health and social care services. It will make sure that they are listened to, involved and take part in decisions about their care and how it is delivered. It is a significant change in how the strategic planning and delivery of services happens with a range of partners – individuals, local groups and networks, communities and organisations, including patients, service users, carers and the third and independent sectors



The Public Bodies (Joint Working) (Scotland) Act 2014 (the Act) requires Local Authorities and Health Boards to integrate the strategic planning of a substantial number of health services and functions and most social care functions. The functions delegated to the IJB by East Lothian Council and NHS Lothian are as follows:

- Adult Social Care
- Criminal Justice
- Primary Care Services (GP Practices, Community Dentists, Community Pharmacies and Community Opticians)
- Mental Health Services
- Physical and Learning Disabilities Services
- Community Health Services
- Community Hospital Services
- Unscheduled Care Services (services that are generally delivered from the Royal Infirmary of Edinburgh, the Western General Hospital and St. John's Hospital)

The IJB sets the strategic direction for these delegated functions through the development of a Strategic Plan, to enable it to plan and deliver these strategic outcomes at an overall health and social care level. It gives Directions to the Council and NHS Lothian for the operational delivery of functions and the resources available to them for this.

East Lothian IJB is an Integration Authority set up under the Public Bodies (Joint Working) Act (2014). It is a 'body corporate', that is a separate legal entity. The IJB is constituted through its Integration Scheme which was prepared by East Lothian Council and NHS Lothian and presented to Scottish Ministers in March 2015. The Integration Scheme was approved by the Scottish Parliament in June 2015 and the first meeting of the IJB took place on 1 July 2015. The IJB assumed formal responsibility for these functions in April 2016 including the budgets for the delivery of these functions.

The Strategic Plan

The strategic plan of each IJB must be reviewed and approved by the IJB every 3 years. East Lothian IJB approved its second Strategic Plan on 28 March 2019, this covers April 2019 to March 2022. A link to the plan is below:

https://www.eastlothian.gov.uk/downloads/file/28278/east_lothian_ijb_strategic_plan_2019-22

The IJB is developing a new Strategic Plan for 2022-2025 and this work is further described below. The IJB Strategic Plan was agreed by the IJB in March 2019 to run from April 2019 to March 2022, in June 2021 the IJB agreed to extend the strategic plan until September 2022.

The process of monitoring the progress of the Strategic Plan and the development of that plan is managed by the IJB's Strategic Planning Group. This group is supported by six change boards reflecting on the IJB's strategic priority areas for change.



These focus on: primary care, adults with complex needs, transformation, adults affected by mental health and substance misuse issues, shifting care from acute hospitals to the community and support to carers.

Each Change Board has to take into account in its work key principles or 'Golden Threads'. The Golden Threads are:

- early intervention and prevention
- carers needs
- Self-Directed Support rights
- equality and diversity, including tackling health inequalities and discrimination
- re-ablement/recovery
- needs of people with dementia health promotion
- partnership working
- communication, engagement and involvement
- advocacy
- community justice
- maximising effective use of resources
- use of integrated information technology and technology enabled care; and
- tackling social isolation

There is a requirement on all projects to evidence to their respective Change Board that the Golden Thread commitments have been achieved as part of project delivery.

As mentioned above the IJB is preparing a new Strategic Plan to cover the years 2022-2025. This will be presented to the IJB in September 2022.

Review of the IJB's Integration Scheme

The IJB is constituted through the Integration Scheme drawn up by East Lothian Council and NHS Lothian. This requires revision every five years – although because of the COVID-19 pandemic the scheme had not been revised for six years - and East Lothian Council and NHS Lothian Council drafted a new scheme during the financial year which has been out for consultation and approved by both Council and the Health Board. The scheme is currently with Scottish Government. This new scheme contains no material changes for the old scheme and therefore there should not be any impact on the IJB.

IJB Membership

The IJB comprises eight voting members, made up of four elected members appointed by East Lothian Council and four NHS Lothian non-executive directors appointed by NHS Lothian. There are a number of non-voting members of the Board, including the IJB Chief Officer, Chief Finance Officer, medical and nursing professional advisors, representatives for Carers and third party organisations and staffing representatives.

The IJB met virtually 7 times during the financial year 2021/22. The membership of the IJB during 2021/22 was as follows:



Member	Nominated/Appointed by	Role
Peter Murray	Nominated by NHS Lothian	Chair (voting member)
Councillor Shamin Akhtar	Nominated by East Lothian Council	Vice Chair (voting member)
Alison Macdonald (to June 2022)	Appointed by IJB	Chief Officer (non-voting member)
Fiona Wilson (from June 2022)	Appointed by IJB	Chief Officer (non-voting member)
David King (see note below)	Appointed by IJB	Interim Chief Finance Officer (non-voting member)
Fiona Ireland	Nominated by NHS Lothian	Voting Member
Dr Richard Williams	Nominated by NHS Lothian	Voting Member
Dr Patricia Donald	Nominated by NHS Lothian	Voting Member, Chair of Audit & Risk Committee
Councillor Fiona O'Donnell	Nominated by East Lothian Council	Voting Member
Councillor Neil Gilbert	Nominated by East Lothian Council	Voting Member
Councillor Sue Kempson	Nominated by East Lothian Council	Voting Member
Vacant	Appointed by IJB	Independent sector representative (non-voting member)
Paul White until September 2021 then Maureen Allan	Appointed by IJB	Third sector representative (non-voting member)
David Binnie	Appointed by IJB	Carer representative (non-voting member)
Marilyn McNeill	Appointed by IJB	Service-user representative (non-voting member)
Prof Emma Reynish until August 2021 then Dr. Claire Mackintosh	Nominated by NHS Lothian	Medical Consultant (non-voting member)
Lesley White	Appointed by IJB	ELC Staff Representative (non-voting member)
Judith Tait	Nominated by East Lothian Council	Chief Social Work Officer (non-voting member)
Thomas Miller	Appointed by IJB	NHS Staff Representative (non-voting member)

Member	Nominated/Appointed by	Role
Dr Jon Turvill	Nominated by NHS Lothian	Clinical Director (non-voting member)
Iain Gorman	Appointed by IJB	Head of Operations (non-voting member)
Lorraine Cowan	Nominated by IJB	Chief Nurse (non-voting member)
Dr. Wendy Hale (from February 2022)	Appointed by the IJB	Specialist in Substance Abuse (non-voting member)
Philip Conalglan	Appointed by IJB	Public Health (non-voting member)

Note – Claire Flanagan is the IJB’s Chief Finance Officer, however she went on maternity leave from the start of August 2021. From then until the end of the Financial year, David King acted as Chief Finance Officer. Claire Flanagan returned to her post in May 2022. The Chief Officer (Alison MacDonald) was appointed to the post of NHS Lothian Executive Director of Nursing and AHPs and she has stepped down as Chief Officer in June 2022. Fiona Wilson has been appointed as Chief Officer and took up post at the end of June 2022.

The IJB’s Operations for the Year

Allowing for the constraints and the operational impact of the COVID-19 pandemic on the IJB’s partners, the IJB has continued to deliver its current Strategic Plan during the financial year. The Strategic Plan is delivered through the IJB’s directions to the partners (East Lothian Council and NHS Lothian) and the IJB considered the delivery of these directions in detail at its June 2021 and February 2022 meetings. The IJB’s Strategic Planning Group (SPG) has met regularly during the financial year to reflect on and develop the IJB’s Strategic Plan with the SPG being supported by the Change Boards as described above

The IJB categorises its services into three broad areas –

Core Services

These are the local health and social care services within East Lothian and are operationally managed by the Health and Social Care Partnership (The HSCP) which is a joint arrangement between East Lothian Council and NHS Lothian. The HSCP has operational delivery of these local services and forms part of the IJB under the title of core services where they are delegated, the IJB however is much wider than this and the IJB not only strategically commissions the delegated services of the HSCP but also those operationally managed outwith East Lothian for example the Emergency Department of the Royal Infirmary of Edinburgh (part of set aside below).

Hosted Services



These being delegated functions that are operationally managed by other parts of NHS Lothian – for example in-patients mental health services provided at the Royal Edinburgh Hospital in Edinburgh.

Set Aside Services

These being delegated functions operationally managed by NHS Lothian in its Acute Division. The Appendix to these accounts describes Set Aside in more detail.

Within each of these areas the IJB has continued to drive forward its Strategic Plan. Examples include –

Core Services

The East Lothian HSCP teams continue to remobilise services locally and are:

- Supporting COVID-19 related actions
- Providing high quality and responsive professional oversight and support to care homes and care at home services
- Providing enhanced community support to home care and care homes to avoid hospital admission
- Delivering a suite of rehabilitation and Technology Enabled Care (TEC) Services
- Developing and delivering long-COVID-19 support (and post-COVID-19 rehabilitation) through rehabilitation services
- Developing pain management approaches
- Fully remobilising social care packages

During the year, the East Lothian Community Hospital wards continue to operate at Amber, with one ward available to mobilise to Red if necessary and with the flexible ward layout continuing to provide bed capacity to respond to increased acute sector or community demand. This is part of the system wide management of the pandemic which is indicated at a range of categories – amber and red being the most severe.

The IJB has also supported the expansion of face-to-face patient attendance at Outpatients and this is happening as circumstances allow. Most clinics still run with one face-to-face appointment and with the majority of follow-up appointments utilising 'Near Me' video.

Care Homes

The nurse-led care home team continues to support East Lothian Care Homes in maintaining high quality services and appropriate infection prevention control approaches (some of which require significant investment in view of building design limitations) to protect residents and staff, while responding to easing of restrictions. The visiting restrictions and testing requirements continue to place additional stress on Care Home providers and staff.

The team continues to manage activity which might otherwise be directed to GP practices, by responding to acute illness, providing anticipatory care and managing many long-term conditions. In doing so, the team is reducing admissions and supporting discharge from hospital.

All care homes continue to receive tailored education and training input from the Care Home Team.

Care at Home

The Pandemic has seen an increased demand on Care at Home services, resulting from continued restrictions on day support, carers not coping and a reluctance to accept residential respite or care home permanent placements. High levels of demand are being met by an increase in the HSCP's homecare service and Hospital to Home funding and by block contract awards to external providers.

The sector is experiencing significant strain, with all providers struggling to recruit adequate staff and to continue to deliver services while dealing with waves of absence resulting from COVID-19 self-isolation.

Work is underway to improve efficiency in assessments for service support, in application of eligibility criteria and in continuing the drive to ensure efficiency in use of resources.

Community Support

Transformation of community resources for under and over 65s continues, with service redesign focussed on the challenges and costs of delivering a blended model. New opportunities arising from COVID-19 responses are being pursued, focussed on: community support; direct access to community physiotherapy and the possibility of third sector co-ordinated volunteers providing support.

Delivery of adult social work continues, with these conducted by telephone and video conference as indicated by assessment of need. Face-to-face appointments remain focussed on statutory and urgent assessments. Each client is risk assessed on an individual basis.

Primary Care

The IJB has continued to support its Primary Care Improvement Plan (PCIP) as a key part of the implementation of the new GMS (General Medical Services) contract

The PCIP has:

- Fully established a Community Link Worker service to all GP practices
- Delivered the flu vaccination programme - planning is underway for delivery of all previously GP delivered vaccinations and for existing and new COVID-19 jags
- Provided pharmacotherapy services to all practices, with further increases planned
- Established Community Treatment and Care (CTACs) bases around East Lothian
- Expanded the Care When It Counts (CWIC) same-day, Nurse Practitioner-led primary care service from one GP practice to four (47% of East Lothian population) with high satisfaction among service users
- Provided direct access Musculoskeletal (MSK) Services, which reduced waiting times



- Established a CWIC mental health service - greatly improving access by providing direct access for patients.

East Lothian Rehabilitation Service (ELRS)

ELRS continues to deliver a suite of services to support patients across a growing and aging population, in recovering from illness and injury and in regaining and maintaining independence. All of ELRS services use integrated approaches, delivered where possible in partnership with other teams.

A new BT Cloud-based telephone contact centre, launched on 14th June 2021, provides patients with a single point of contact, giving rapid access to a clinician who can deal with enquiries immediately, book an appointment/allocate for further assessment or place on a waiting list for:

- Musculoskeletal Physiotherapy
- Community Occupational Therapy
- Domiciliary Physiotherapy
- Post-COVID-19 rehabilitation (via Advanced Practice Occupational Therapy and Physiotherapy).

The system also provides ELRS with metrics to understand demand variation, which assists with capacity planning.

MSK (Musculoskeletal) Service

The service provides direct, first point of contact access to specialist MSK physiotherapy assessment and treatment, significantly decreasing routine MSK waits. It delivers a safe, effective, responsive and cost effective MSK physiotherapy model, providing physiotherapy input to patients in a timely manner, with input determined by assessment of individual clinical need. The service while directing activity from primary care, so decreasing GP workload. In house escalation protocols ensure direct referrals to secondary care if indicated

As all of the Advanced Physiotherapy Practitioners are accommodated within the physiotherapy service, there is no pressure on practices to provide rooms or equipment.

Post-COVID-19/Long COVID-19

A short-life working group has developed an evidence-based and multidisciplinary post-COVID-19/long COVID-19 pathway for East Lothian. This provides assessment and rehabilitation responsive to client demographics.

The group is functioning as a post-COVID-19 network and is developing competencies and in-service training framework for staff across all services to ensure equity of knowledge and resources. The Group's post-COVID-19 directory acts as a resource pack for clinicians and patients to draw on.

Digital and Technology Enabled Care Innovation

The Occupational Therapy (OT)/Physiotherapy (PT) teams continue to use a digital monitoring tool to assess patient mobility and function at home, allowing in some cases reduced packages of care.



Remobilisation of Wellwynd Technology Enabled Care (TEC) clinic is allowing recommencement of OT assessments and application of necessary interventions for patients, alongside the continuation of remote consultations and home visits to explore smart TEC options to support independence. The team is also providing support and advice across East Lothian HSCP teams to support and promote TEC solutions to support clients

The TEC team continues to respond to critical technical service visits and referrals for telecare installations to facilitate hospital discharges and to prevent hospital admissions.

Hosted Services

The IJB has considered and supported phase II of the Royal Edinburgh Hospital (REH) business case, this was considered at its meeting in October 2021. The Royal Edinburgh Hospital is an in-patient facility for Mental Health patients in Edinburgh. NHS Lothian have been working on rebuilding this hospital and providing modern fit-for purpose accommodation and services for patients.

As part of the overall IJB's Mental Health Strategy, the IJB has been successful in reducing the in-patient bed usage at the REH and now requires fewer beds than it used previously. This is recognised in the phase II business case and the IJB was asked to agree to the proposed bed numbers (which it did) noting that financial releases will be available at the end of this development and that these resources can then be reinvested in local mental health services.

Set Aside Services

The COVID-19 pandemic has generated serious pressures on the Acute Hospitals which support East Lothian Patients (the Royal Infirmary of Edinburgh and the Western General Hospital). This has not stopped the IJB's work on reducing its use of acute beds and reducing attendances at the Emergency Department but the IJB recognises the pressure on the Acute system caused by the pandemic and has concentrated on reducing that pressure as much as possible. This work has been delivered by the HSCP who have been developing intermediate care services to reduce admissions and lengths of stay as much as possible.

Performance

The core components and key developments for 2021/22 are summarised above and further details will be included in the Annual Performance Report. The Annual Performance Report will be published at the end of September 2022, it has therefore not been possible to include a link to this at this time, but this will be available on the IJB webpage in due course which will include key performance indicators and comparators.

The IJB's Position at 31 March 2022

For the year ending 31 March 2022, the IJB was underspent. That is, the costs incurred in delivering the IJB's functions by East Lothian Council and NHS Lothian are less than the income that the IJB received from NHS Lothian and East Lothian Council.



This is the third year that the IJB has been underspent. The underspend in 2020/21 was a reflection of the impact of the COVID-19 pandemic on the health and social care system. Although the system was under a huge pressure additional financial resources were made available to cover that pressure but the shortage of staff and the impact on the pandemic on the third party providers of social care meant that some planned programmes couldn't be undertaken and in financial terms, the IJB was underspent and carried this money forward in its reserves.

Although underspent the IJB still has financial challenges in areas such as General Medical Services and prescribing budgets due to rising prices and demand plus significant financial challenges within our social care learning disabilities budget where care packages are complex and expensive.

In 2021/22, the underspend has been generated by three main areas:

1. Additional funds have been received in year from the Scottish Government to support the COVID-19 pandemic beyond those required in 2021/22. This has been part of a specific policy to allow the IJBs to be able to carry forward into 2022/23 adequate funds to cover the projected costs of supporting the COVID-19 pandemic in that year.
2. Additional support was made available by the Scottish Government in November 2021 to support Winter pressures, in total c. £1,839,000. The IJB has not been able to utilise these funds in year and they have been added to the IJB's earmarked reserves. In addition further investments were made by the Scottish Government through NHS Lothian, again the IJB has not been able to utilise these funds in year
3. Having taken account of funds to be moved to earmarked reserves, the IJB was left with an operational underspend of £1,727,000. This being, as was the case in 2020/21, largely because of the inability of the IJB to fully utilise its planned programmes through the demands and pressures from the COVID-19 pandemic. These funds have been moved to the IJB's general reserve.

Reserves

The movement in the IJB's reserves and the makeup of that reserve is detailed below. In summary the balance in the IJB's reserves on 31 March 2022 is £20,289,000. This is made up of £9,182,000 for COVID-19 costs, £6,297,000 for earmarked reserves and £4,810,000 of general reserves. It is expected that the COVID-19 reserve will be utilised during 2022/23.

	Opening £000's	in Year £000's	Closing £000's
Covid	3,623	5,559	9,182
Other Earmarked	2,903	3,394	6,297
General	3,082	1,727	4,810
	9,608	10,680	20,289

Elements of the reserve are for very specific projects and the IJB will be encouraging the partners to progress these projects, however some elements (for example Additional Capacity in Care at Home) will support broader work and the IJB is committed to ensuring that the earmarked funds which can be appropriately used to



develop the IJB's services are used in that way. Further detail on the reserves can be found in Note 5 in the statements.

The IJB's general reserve is now in excess of the target set by the IJB's Reserves Policy. The IJB is considering how elements of that reserve can be used, albeit non-recurrently, to further develop work that will support the delivery of the Strategic Plan.

Analysis of the Financial Statements

The financial statements are all presented on a net basis.

The table below summarises the income and expenditure for the IJB for 2021/22.

Income and Expenditure

	Budget Health £000's	Budget Social Care £000's	Expenditure Health £000's	Expenditure Social Care £000's	Variance £000's	Note
Direct East Lothian Services						
Community AHPS	6,027		5,927		100	
Community Hospitals	13,307		12,800		507	
District Nursing	2,795		2,671		124	
General Medical Services	18,835		19,049		-214	
Health Visiting	2,030		1,923		107	
Mental Health	6,116		6,049		67	
Other	20,163		10,757		9,406	
Prescribing	20,894		21,378		-484	
Resource Transfer	4,961		4,964		-3	1
Older People		29,394		30,012	-618	
Mental Health		1,867		2,011	-144	
Physical Disabilities		2,496		2,699	-203	
Learning Disabilities		14,943		17,827	-2,884	
Planning and Performance		2,984		2,877	107	
Other		8,303		3,614	4,689	
East Lothian Share of pan Lothian						
Set Aside	23,652		23,825		-173	2
Mental Health	2,721		2,778		-57	
Learning Disabilities	1,699		1,713		-14	
GP Out of Hours	1,580		1,572		8	
Rehabilitation	1,055		949		106	
Sexual Health	836		811		25	
Psychology	1,046		1,113		-67	
Substance Misuse	419		407		12	
Allied Health Professions	1,716		1,597		119	



Oral Health	2,225		2,187		38	
Other	4,197		4,067		130	
Dental	7,026		7,026		0	3
Ophthalmology	2,091		2,091		0	3
Pharmacy	4,555		4,555		0	3
Totals	149,946	59,987	140,209	59,040	10,680	
SCF	6,216	-6,216	6,216	-6,216	0	4
Per accounts	156,160	53,771	146,427	52,824	10,680	

Income & Expenditure Notes

1. Resource Transfer are funds for specific purposes which are transferred from health to social care. However, these remain part of the health budget and are reported there.
2. Set Aside is the budget for those functions delegated to the IJB which are managed by the Acute Services management teams within NHS Lothian; These services are:
 - Accident and Emergency
 - Cardiology
 - Diabetes
 - Endocrinology
 - Gastroenterology
 - General Medicine
 - Geriatric Medicine
 - Rehabilitation Medicine
 - Respiratory Medicine
 - Various ancillary support services for the above.

These services are delivered at the Royal Infirmary of Edinburgh, the Western General Hospital and St. John's Hospital.

3. In the Health system, expenditure to support the delivery of community dentistry, community opticians and community pharmacists is termed as 'non cash limited' (NCL) but is clearly part of the delivery of primary care services and these functions are delegated to the IJB. However, being NCL there is no budget as such but any expenditure incurred is supported in its entirety by the Scottish Government. The NCL values are not part of the budget setting process, there being no budget, but NHS Lothian has matched the NCL expenditure with income to cover this expenditure.
4. The Social Care Fund (SCF) is a resource which the Scottish Government has directed to the IJB through NHS Lothian and is shown as health funds in the accounts. However, these funds are then transferred to the Council and used to support the delivery of social care services and the analysis above reflects this.

The charges (shown as expenditure above) made by East Lothian Council to the IJB are the net direct costs incurred in the delivery of social care services in East Lothian. The charges from NHS Lothian are based on the health budget setting model as



agreed by the IJB. That is, charges for the core services (those services specifically for and delivered by the East Lothian HSCP) are based on the net direct actual costs incurred in East Lothian. However, charges for hosted and set aside services (those services which are not generally managed by the East Lothian Partnership and are delivered on a pan-Lothian basis) are based on the total actual costs for these services shared across four IJBs per the budget setting model. The IJB share of the total actual costs incurred in 2021/22 for hosted services is 12% and, generally, 12% of the Lothian element of the set aside budgets and the non-cash limited budgets.

Consideration of the 2022/23 Financial Position

The IJB set a balanced budget for 2022/23 at its March 2022 meeting, albeit using an indicative budget offer from NHS Lothian. The 2022/23 Scottish Budget settlement included significant resources for the Integration Authorities to support further capacity and development in social care and these funds along with an appropriate utilisation of the IJB's reserves as discussed above allowed the IJB to set a balanced budget. That said, there are clearly a significant range of financial pressures impacting on the IJB's partners and the IJB is committed to supporting the partners in so far as the Integration Scheme allows.

NHS Lothian published their 2022/23 initial budget forecast at their Board meeting of 6th April 2022. This forecast shows an unbalanced position with a current projected financial gap of which £79m related to the costs of supporting the Covid Pandemic leaving a core gap of £28m. This gap is then analysed over the delegated and non-delegated functions and shows a gap for East Lothian IJB of £205,000 which is in line with the forecast position in the March 2022 budget setting paper. That said, there is clearly a significant set of pressures within those functions that are not delegated to the IJB. The IJB will wish to consider, as part of the on-going development of its Strategic Plan, how the delegated functions can support pressures on the other non-delegated functions. It should be noted that the NHS Lothian budget remains indicative as further allocations for delegated functions will be received from the Scottish Government in year

The East Lothian Council 2022/23 budget is set and was agreed by the Council. Its clear from further information now available that pressures on the social care budgets, especially the uplifts now being requested by the providers, may be greater than was originally estimated as part of the budget setting process. This may impact on the ability of the IJB to further develop social care services as element of the additional resources from the 2022/23 settlement are used to manage increased financial pressures.

Consultation on the National Care Service

The Scottish Government is undertaking a consultation on their proposal to set up a national care service. The consultation process will support the development of the Bill and under the current proposals IJBs will be reformed into local care boards, accountable to Scottish Ministers. The IJB has formally responded to the consultation and this was presented to the IJB at its October 2021 meeting. The IJB awaits clarity from the legislation.



Lothian Strategic Development Framework

NHS Lothian has drawn up a strategic development framework which includes a range of functions which have been delegated to the IJBs. NHS Lothian and the Lothian IJBs have committed to work jointly to deliver the ambitions in the IJBs' updated Strategic Plans.

Key Risks and Uncertainties

The challenge for the IJB is to transform the delivery of its delegated functions whilst supporting the delivery of financial balance within the financial resources available.

There remain a series of uncertainties:

- The coronavirus pandemic resulted in a disruption for many services and additional funding met by the Scottish Government to mobilise services is a short term solution. The medium and long term impacts of the pandemic remain uncertain and there is little doubt that significant financial challenges lay ahead.
- East Lothian faces increasing demands from this ageing and growing population and we must ensure we have the ability to provide additional GP consultations and provide services locally in appropriate premises. East Lothian has a high level of aging population growth in Scotland. This population growth and the increasing aspiration to deliver more care in the local community results in pressure on GP practices to provide fit-for-purpose premises.
- The increasing population in East Lothian remains a challenge which may exacerbate the staffing and financial pressures above.
- The financial position for the UK and Scotland remains uncertain and this will provide a challenge to the amount of financial resources available to the IJB.
- That said, the Scottish Government have announced a series of investments in Primary Care, Mental Health and Substance misuse and Drugs Related Deaths all of which will be directed to the IJB and these resources will support not only the delivery of the new GMS contract but also the transformation programme that the IJB is managing for these services.
- The current fragility of provider organisations in the home care and care homes sector may require action and investment to secure sustainability in these important services

Peter Murray
Chair


13 September 2022

Fiona Wilson
Chief Officer


13 September 2022

Claire Flanagan
Chief Finance Officer


13 September 2022

Statement of Responsibilities

Responsibilities of the Integration Joint Board

The Integration Joint Board is required to:

- Make arrangements for the proper administration of its financial affairs and to secure that the proper officer of the board has responsibility for the administration of those affairs (section 95 of the Local Government (Scotland) Act 1973). In this authority, that officer is the chief finance officer
- Manage its affairs to secure economic, efficient and effective use of resources and safeguard its assets
- Ensure the Annual Accounts are prepared in accordance with legislation (The Local Authority Accounts (Scotland) Regulations 2014), and so far as is compatible with that legislation, in accordance with proper accounting practices (section 12 of the Local Government in Scotland act 2003)
- Approve the Annual Accounts for signature.

I confirm that these Annual Accounts were approved for signature at a meeting of the Audit & Risk Committee on 13th September 2022.

Signed on behalf of East Lothian Integration Joint Board



Peter Murray
Chair

13 September 2022

Responsibilities of the Chief Finance Officer

The Chief Finance Officer is responsible for the preparation of the IJB's Annual Accounts in accordance with proper practices as required by legislation and as set out in the CIPFA/LASAAC Code of Practice on Local Authority Accounting in the United Kingdom (the Accounting Code).

In preparing the Annual Accounts, the Chief Finance Officer has:

- Selected suitable accounting policies and then applied them consistently
- Made judgements and estimates that were reasonable and prudent
- Complied with legislation
- Complied with the local authority Accounting Code (in so far as it is compatible with legislation).

The Chief Finance Officer has also:

- Kept proper accounting records which were up to date
- Taken reasonable steps for the prevention and detection of fraud and other irregularities.

I certify that the financial statements give a true and fair view of the financial position of the East Lothian Integration Joint Board at the reporting date and the transactions of the East Lothian Integration Joint Board for the year ended as at 31 March 2022.



Claire Flanagan
Chief Finance Officer

13 September 2022

Remuneration Report

Introduction

This Remuneration Report is provided in accordance with the Local Authority Accounts (Scotland) Regulations 2014. It discloses information relating to the remuneration and pension benefits of specified IJB members and staff.

The information in the tables below is subject to external audit. The explanatory text in the Remuneration Report is reviewed by the external auditors to ensure it is consistent with the financial statements.

Remuneration: IJB Chair and Vice Chair

The voting members of the IJB are appointed through nomination by East Lothian Council and NHS Lothian Board. Nomination of the IJB Chair and Vice Chair post holders alternates between a Councillor and a Health Board representative.

The IJB does not provide any additional remuneration to the Chair, Vice Chair or any other board members relating to their role on the IJB. The IJB does not reimburse the relevant partner organisations for any voting board member costs borne by the partner. Neither the Chair nor the Vice Chair appointments had any taxable expenses paid by the IJB in 2021/22.

The IJB does not have responsibilities, either in the current year or in future years, for funding any pension entitlements of voting IJB members. Therefore no pension rights disclosures are provided for the Chair or Vice Chair.

NHS Lothian remunerates its non-executive members on a notional day basis. That is they are paid a fixed annual amount which is considered to represent payment for one day a week. Those non-executive members of the NHS Lothian Board, who are also Chairs or Vice Chairs of IJBs, are given an additional day's remuneration per week in recognition of the additional time required to undertake those roles. Peter Murray, as a non-executive member of NHS Lothian Board who was also the Chair of East Lothian IJB, has received an additional day's remuneration specifically for his role as Chair of the IJB in 2021/22. This remuneration is £8,930 per annum.

Remuneration: Officers of the IJB

The IJB does not directly employ any staff in its own right, however, specific post-holding officers are non-voting members of the Board.

Chief Officer

Under section 10 of the Public Bodies (Joint Working) (Scotland) Act 2014 a Chief Officer for the IJB has to be appointed and the employing partner has to formally second the officer to the IJB. The employment contract for the Chief Officer will adhere to the legislative and regulatory framework of the employing partner organisation. The remuneration terms of the Chief Officer's employment are approved by the IJB.

The Chief Officer of the IJB was Alison MacDonald until end of June 2022. Alison has a joint role as Director of Health and Social Care for East Lothian Council and the Joint



Director of the East Lothian Partnership. As in previous years it has been agreed, 50% of total remuneration is to be shown in the accounts of the IJB as the remuneration as the Chief Officer of the IJB.

Chief Finance Officer

Although the costs of the Chief Finance Officer are not included in the charges made to the IJB by either partner, given the S95 role of the Chief Finance Officer and in the interests of transparency, the remuneration of the Chief Finance Officer is included below. During 2021/22 the Chief Finance Officer (Claire Flanagan) was on a leave of absence between the start of August 2021 until the end of March 2022. The Chief Finance Officer is employed by NHS Lothian and has three roles – the IJB’s Chief Finance Officer, the Chief Finance Officer of Midlothian IJB and an operational role in the NHS Lothian finance team as a Finance Business Partner. On that basis, one third of the total remuneration for Claire Flanagan is shown below. Between August 2021 and March 2022, the role of Chief Finance Officer was undertaken on an Interim basis by David King. David King is retired but was paid on the NHS Lothian Staff bank (by NHS Lothian) on an ad hoc basis. David King also undertook the role of CFO in Midlothian IJB but did not undertake any duties as a finance business partner. NHS Lothian have provided the total costs of having employed David King during this time and half of these costs will be shown here (the other half shows in Midlothian IJB). David King is not superannuated.

Other Officers

No other staff are appointed by the IJB under a similar legal regime. Other non-voting board members who meet the criteria for disclosure are included in the disclosures below.

Total for 2020/21 £	Senior Employees Salary, Fees & Allowances	Total for 2021/22 £
50,757	Alison MacDonald, Chief Officer	53,692
25,000	Claire Flanagan, Chief Finance Officer	9,644
n/a	David King, Interim Chief Finance Officer	14,047

In respect of officers’ pension benefits, the statutory liability for any future contributions to be made rests with the relevant employing partner organisation. On this basis there is no pensions liability reflected on the IJB balance sheet for the Chief Officer or any other officers.



Pension Disclosure

The IJB however has responsibility for funding the employer contributions for the current year in respect of the officer time spent on fulfilling the responsibilities of their role on the IJB. The following table shows the IJB's funding during the year to support officers' pension benefits. The table also shows the total value of accrued pension benefits which may include benefits earned in other employment positions and from each officer's own contributions.

	In Year Contribution (restated)		Accrued Pension benefits	
	For year to	For year to	at	at
	31/03/2021	31/03/2022	31/03/2021	31/03/2022
	£000's	£000's	£000's	£000's
Alison MacDonald	21	22	Pension 16	17
			Lump Sum 6	13
Claire Flanagan	16	17	Pension 16	18
			Lump Sum 25	27

Disclosure by Pay Bands

Pay band information is not separately disclosed as all staff pay information has been disclosed in the information above.

Exit Packages

The IJB did not support nor did it direct to be supported by its partners for any exit packages during 2021/22.



Peter Murray
Chair

13 September 2022



Fiona Wilson
Chief Officer

13 September 2022



Annual Governance Statement

Purpose

The annual governance statement lays out how East Lothian Integration Joint Board (the ELIJB) complies with the Code of Corporate Governance and sets out the framework within which the ELIJB has put in place proper financial and governance arrangements for the conduct of its business affairs. This will facilitate the effective exercise of its functions, ensuring that appropriate arrangements are in place for the management of risk and that appropriate systems of internal control are in place.

Scope of Responsibility

ELIJB is responsible for ensuring that its business is conducted in accordance with the law and proper standards. This is to allow the public funds at its disposal to be safeguarded and used efficiently and effectively in pursuit of best value.

Board members, including the Chief Officer and the Chief Finance Officer, are responsible for the governance of the business affairs of the ELIJB. This includes setting the strategic direction, vision, culture and values of the ELIJB and establishing appropriate and cost effective systems, processes and internal controls to allow the strategic objectives to be delivered.

In order to achieve this, the ELIJB follows the principles of corporate governance based on the CIPFA/SOLACE Framework and Guidance on ‘Delivering Good Governance in Local Government’.

The ELIJB Local Code of Corporate Governance details 7 core principles which are supported by 20 sub-principles and 91 behaviours and actions that demonstrate good governance. Elements of good governance included are:

- Ensuring Board and Committee members behave with integrity and lead a culture where acting in the public interest is visibly and consistently demonstrated thereby protecting the reputation of the ELIJB;
- Creating the conditions to ensure that all ELIJB members and the ELIJB’s partners (East Lothian Council and NHS Lothian) are able to fulfil their responsibilities in accordance with legislative and regulatory requirements;
- Developing and maintaining an effective workforce plan to enhance the strategic allocation of resources and to ensure best value is achieved, the ELIJB Workforce Plan 2019-2022 was approved by the ELIJB in May 2019;
- Evaluating and monitoring risk management and internal control on a regular basis, which is monitored through the ELIJB Audit and Risk Committee;
- Ensuring additional assurance on the overall adequacy and effectiveness of the framework of governance, risk management and control is provided by the ELIJB’s Chief Internal Auditor, as monitored through the ELIJB Audit and Risk Committee;
- Ensuring an audit committee, which is independent of the Board and accountable to the IJB, provides a further source of effective assurance regarding arrangements for managing risk and maintaining an effective control environment and that its recommendations are listened to and acted upon. As demonstrated in the maintenance of all 2021/22 Audit and Risk Committee meetings;
- Ensuring robust arrangements for assessing the extent to which the principles contained in the Framework have been applied and providing an Annual Report



which includes an action plan for improvement and evidence to demonstrate good governance (the annual governance statement); and

- Ensuring that recommendations for corrective action made by the external auditor are acted upon.

ELIJB Audit & Risk Committee approved the ELIJB adoption of the CIPFA Financial Management Code in March 2022. ELIJB's financial management arrangements conform to the requirements of the CIPFA Statement on the role of the Chief Financial Officer in Local Government. The Chief Finance Officer has overall responsibility for the ELIJB's financial arrangements and is professionally qualified and suitably experienced.

The functions of the Audit and Risk Committee are undertaken as identified in Audit Committees: Practical Guidance for Local Authorities and Counter fraud and anti-corruption arrangements are in accordance with the Code of practice on Managing the Risk of Fraud and Corruption within the partner organisations

The ELIJB is responsible for conducting each financial year, a review of the effectiveness of its governance framework, including risk management and the systems for internal control and financial control. The review of the effectiveness of the ELIJB's governance framework is informed by:

- The work of the ELIJB Board, the Strategic Planning Group, and the Audit and Risk Committee;
- The annual assurances that are provided by the ELIJB Chief Officer and the Chief Finance Officer;
- The ELIJB Chief Internal Auditor's annual assurance report which is based on internal audit work completed during the year;
- Reports from the ELIJB's external auditor;
- Reports from other external review bodies, agencies and inspectorates.

The key governance arrangements and controls are set out in the Local Code of Corporate Governance.

Statutory and other Compliance

ELIJB ('the Board') has secured compliance with statutory and other requirements, as follows:

- Membership - its minimum membership (voting and non-voting) is set by statutory instrument, with the power to appoint additional members as it sees fit. The Board's membership is fully populated;
- Standing Orders - the Board is required by statutory regulations to have Standing Orders to regulate its business, with some aspects stipulated in those regulations. Standing Orders were adopted at the ELIJB's inaugural meeting and were subsequently amended on 26 March 2020 as part of COVID-19 recess procedures. They comply with statutory requirements;
- Committees - the Board has established an Audit and Risk Committee with a detailed remit and powers and with the membership clearly defined. This complies with statutory requirements and with the Board's Standing Orders;
- Meetings - the Standing Orders adopted by the Board allow the public to have prior access to meeting agendas and reports, and to attend meetings of the Board and its committees, except in clearly defined and limited circumstances. During the



2021/22 year meetings have been held remotely via Teams. Local press representatives have been invited to meetings and the meetings recorded and made available publicly to meet these commitments;

- Strategic Plan - the Board established its Strategic Planning Group as required by legislation, with Terms of Reference approved by the Board covering membership, meetings and meetings procedures. From August 2020 the Strategic Planning Group continued to meet remotely;
- Annual Performance Report – ELIJB produces an Annual Performance Report, with the last report being published in November 2021 ([east lothian integration joint board annual report 2020 to 2021](#)), incorporating elements of the National Core Suite of National Integration Indicators and a Financial Performance Review. This will be published at the end of September 2022 and available on the IJBs website
- Officers - the Board appointed a Chief Officer and a Chief Finance Officer as required by the legislation. A Chief Internal Auditor has been appointed to carry out the Board's internal audit requirements and assist its Audit and Risk Committee;
- Finance - the Board received reports in relation to financial assurance prior to the setting of budgets for the functions delegated by East Lothian Council and NHS Lothian, and adopted Financial Regulations in relation to the conduct of its financial affairs, the maintenance of its accounting and financial records, and its annual accounts and financial statements;
- Code of Conduct - the Board adopted a Code of Conduct based on the existing Model Code for Members of Devolved Public Bodies in Scotland, and members have registered their interests according to that Code. The Scottish Government approved the ELIJB's initial Code of Conduct on 1 June 2016, a revised code of conduct is being submitted to the June ELIJB meeting and an approved updated Code of Conduct will be supplied to the Scottish Government by the end of June 2022.

The ELIJB Chief Internal Auditor has responsibility for the provision of Internal Audit services to the ELIJB and reports functionally to the ELIJB Audit and Risk Committee to allow appropriate independence. The ELIJB Chief Internal Auditor is professionally qualified and suitably experienced to lead and direct the Internal Audit team.

The ELIJB Chief Internal Auditor concluded that based on the work undertaken in 2021/22 reasonable assurance can be placed on the overall adequacy and effectiveness of the IJB's framework of governance, risk management and control for the period to 31 March 2022, but noted areas for further development. These improvements are reflected below.

Action Plan

During 2021/22, areas identified with scope for improvement included the following:

- The Risk Management Policy and Strategy requires to be reviewed and updated, having been originally approved in December 2017 with an expectation that this would be reviewed on a three yearly basis, this did not occur due to other key priorities as a result of the COVID-19 pandemic. The review should ensure that appropriate escalation processes for risks impacting the strategic plan are implemented.
- Financial Reporting to the IJB should be returned to a consistent basis in reporting projected financial outturns. The consistency of reporting has been impacted by

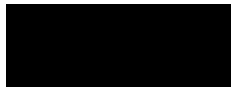


the fast changing nature of the COVID-19 additional funding elements for both partners.

- Evaluation structures monitoring against the strategic objectives set for the East Lothian Community Hospital should be reintroduced during recovery from the COVID-19 pandemic.

The implementation of these actions to enhance the governance arrangements in 2022/23 will be driven and monitored by the ELIJB Chief Officer in order to inform the next annual review. Internal Audit work planned in 2022/23 is designed to test improvements and compliance in governance and implementation of agreed recommendations. Progress has been made against all actions noted in the 2020/21 annual governance statement and monitoring to completion is undertaken by Internal Audit.

It is our opinion, subject to the weaknesses outlined above, that reasonable assurance can be placed on the overall adequacy and effectiveness of the IJB's framework of governance, risk management and control for the year to 31 March 2022.



Peter Murray
Chair

13 September 2022



Fiona Wilson
Chief Officer

13 September 2022



Independent Auditor's Report

Independent auditor's report to the members of the East Lothian Integration Joint Board and the Accounts Commission

Reporting on the audit of the financial statements

Opinion on financial statements

I certify that I have audited the financial statements in the annual accounts of the East Lothian Integration Joint Board for the year ended 31 March 2022 under Part VII of the Local Government (Scotland) Act 1973. The financial statements comprise the Comprehensive Income and Expenditure Statement, Movement in Reserves Statement, Balance Sheet and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and UK adopted international accounting standards, as interpreted and adapted by the Code of Practice on Local Authority Accounting in the United Kingdom 2021/22 (the 2021/22 Code).

In my opinion the accompanying financial statements:

- give a true and fair view in accordance with applicable law and the 2021/22 Code of the state of affairs of the East Lothian Integration Joint Board as at 31 March 2022 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with UK adopted international accounting standards, as interpreted and adapted by the 2021/22 Code; and
- have been prepared in accordance with the requirements of the Local Government (Scotland) Act 1973, The Local Authority Accounts (Scotland) Regulations 2014, and the Local Government in Scotland Act 2003.

Basis for opinion

I conducted my audit in accordance with applicable law and International Standards on Auditing (UK) (ISAs (UK)), as required by the Code of Audit Practice approved by the Accounts Commission for Scotland. My responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of my report. I was appointed under arrangements approved by the Accounts Commission on 10 April 2017. The period of total uninterrupted appointment is six years. I am independent of the East Lothian Integration Joint Board in accordance with the ethical requirements that are relevant to my audit of the financial statements in the UK including the Financial Reporting Council's Ethical Standard, and I have fulfilled my other ethical responsibilities in accordance with these requirements. Non-audit services prohibited by the Ethical Standard were not provided to the East Lothian Integration Joint Board. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Conclusions relating to going concern basis of accounting

I have concluded that the use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work I have performed, I have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the East Lothian Integration Joint Board's ability to continue to adopt the



going concern basis of accounting for a period of at least twelve months from when the financial statements are authorised for issue.

These conclusions are not intended to, nor do they, provide assurance on the East Lothian Integration Joint Board's current or future financial sustainability. However, I report on the East Lothian Integration Joint Board's arrangements for financial sustainability in a separate annual audit report available from the [Audit Scotland website](#).

Risks of material misstatement

I report in my annual audit report the most significant assessed risks of material misstatement that I identified and my judgements thereon.

Responsibilities of the Chief Finance Officer and the Audit and Risk Committee for the financial statements

As explained more fully in the Statement of Responsibilities, the Chief Finance Officer is responsible for the preparation of financial statements that give a true and fair view in accordance with the financial reporting framework, and for such internal control as the Chief Finance Officer determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Chief Finance Officer is responsible for assessing the East Lothian Integration Joint Board's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless there is an intention to discontinue the East Lothian Integration Joint Board's operations.

The Audit and Risk Committee is responsible for overseeing the financial reporting process.

Auditor's responsibilities for the audit of the financial statements

My objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. I design procedures in line with my responsibilities outlined above to detect material misstatements in respect of irregularities, including fraud. Procedures include:

- obtaining an understanding of the applicable legal and regulatory framework and how the East Lothian Integration Joint Board is complying with that framework;
- identifying which laws and regulations are significant in the context of the East Lothian Integration Joint Board;



- assessing the susceptibility of the financial statements to material misstatement, including how fraud might occur; and
- considering whether the audit team collectively has the appropriate competence and capabilities to identify or recognise non-compliance with laws and regulations.

The extent to which my procedures are capable of detecting irregularities, including fraud, is affected by the inherent difficulty in detecting irregularities, the effectiveness of the East Lothian Integration Joint Board's controls, and the nature, timing and extent of the audit procedures performed.

Irregularities that result from fraud are inherently more difficult to detect than irregularities that result from error as fraud may involve collusion, intentional omissions, misrepresentations, or the override of internal control. The capability of the audit to detect fraud and other irregularities depends on factors such as the skilfulness of the perpetrator, the frequency and extent of manipulation, the degree of collusion involved, the relative size of individual amounts manipulated, and the seniority of those individuals involved.

A further description of the auditor's responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website www.frc.org.uk/auditorsresponsibilities. This description forms part of my auditor's report.

Reporting on other requirements

Opinion prescribed by the Accounts Commission on the audited part of the Remuneration Report

I have audited the part of the Remuneration Report described as audited. In my opinion, the audited part of the Remuneration Report has been properly prepared in accordance with The Local Authority Accounts (Scotland) Regulations 2014.

Other information

The Chief Finance Officer is responsible for other information in the annual accounts. The other information comprises the Management Commentary, Annual Governance Statement, Statement of Responsibilities and the unaudited part of the Remuneration Report.

My responsibility is to read all the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or my knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If I identify such material inconsistencies or apparent material misstatements, I am required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact. I have nothing to report in this regard.

My opinion on the financial statements does not cover the other information and I do not express any form of assurance conclusion thereon except on the Management Commentary and Annual Governance Statement to the extent explicitly stated in the following opinions prescribed by the Accounts Commission.

Opinions prescribed by the Accounts Commission on the Management Commentary and Annual Governance Statement

In my opinion, based on the work undertaken in the course of the audit:

- the information given in the Management Commentary for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with statutory guidance issued under the Local Government in Scotland Act 2003; and
- the information given in the Annual Governance Statement for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with the Delivering Good Governance in Local Government: Framework (2016).

Matters on which I am required to report by exception

I am required by the Accounts Commission to report to you if, in my opinion:

- adequate accounting records have not been kept; or
- the financial statements and the audited part of the Remuneration Report are not in agreement with the accounting records; or
- I have not received all the information and explanations I require for my audit.

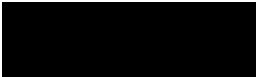
I have nothing to report in respect of these matters.

Conclusions on wider scope responsibilities

In addition to my responsibilities for the annual accounts, my conclusions on the wider scope responsibilities specified in the Code of Audit Practice, including those in respect of Best Value, are set out in my annual audit report.

Use of my report

This report is made solely to the parties to whom it is addressed in accordance with Part VII of the Local Government (Scotland) Act 1973 and for no other purpose. In accordance with paragraph 120 of the Code of Audit Practice, I do not undertake to have responsibilities to members or officers, in their individual capacities, or to third parties.



Gillian Woolman MA FCA CPFA
Audit Scotland
102 West Port
Edinburgh
EH3 9DN
13 September 2022



Financial Statements

Comprehensive Income and Expenditure Statement

This statement shows the cost of providing services for the year according to accepted accounting practices. Where the impact on the General Fund is amended by statutory adjustments this is shown in the Movement in Reserves Statement.

2020/21		2021/22
Net Expenditure	Note	Net Expenditure
£000's		£000's
3,993	Community AHPS	5,927
11,608	Community Hospitals	12,800
2,488	District Nursing	2,671
17,928	General Medical Services	19,049
1,740	Health Visiting	1,923
7,888	Mental Health	8,060
13,545	Other	14,371
20,686	Prescribing	21,378
4,738	Resource Transfer	4,964
28,126	Older People	30,012
3,073	Physical Disabilities	2,699
16,325	Learning Disabilities	17,827
2,543	Planning and Performance	2,877
29,144	Share of pan Lothian Health Services	30,867
21,957	Set Aside	23,825
185,781	Cost of Services	199,251
192,991	Taxation and Non-Specific Grant Income	209,931
7,210	Surplus/(Deficit) on Provision of Services	10,680
7,210	Total Comprehensive Income and Expenditure	10,680



Movement in Reserves Statement

This Statement shows the movement in the year on the different reserves held by the East Lothian IJB

	2020/21 Total £000's	2021/22 Movement £000's	2021/22 Total £000's
General Reserves			
Surplus on Provision of Service	3,082	1,727	4,810
Earmarked Reserves			
Surplus on Provision of Service	6,526	8,953	15,479
Total Usable reserves	9,608	10,680	20,289

Reserves

The Integration Joint Board is permitted to set aside future amounts of reserves for future policy purposes. These reserves normally comprise funds that are set aside for specific purposes; and funds which are not earmarked for specific purposes but are set aside to deal with unexpected events or emergencies. They are created by appropriating amounts out of revenue balances. When expenditure to be funded from a reserve is incurred, it is charged to the appropriate service in that year and thus included in the Comprehensive Income and Expenditure Statement. Movements in reserves are reported in the Movement in Reserves Statement.

Useable Reserves

East Lothian IJB has both a general reserve which can be used to mitigate financial consequences of risks and other events impacting on the IJB's resources and an earmarked reserve the monies within this fund are earmarked for specific purposes. East Lothian IJB has an earmarked reserve which can be used to mitigate financial consequences of risks and other events impacting on the specific project budget. The monies within this being the carry forward COVID-19 funding, Primary Care Improvement Fund, the Action 15 funding to support implementation of Scottish Government's Mental Health Strategy, the unused elements of funds made available for Winter (Care at Home Capacity, Interim Care and Multi-disciplinary Teams) and other locally committed programmes.



Earmarked Reserves	£000's
COVID-19	9,182
Primary Care Improvement Fund	354
Mental Health Strategy	8
Alcohol and Drugs Strategy	1,038
Community Living Change Fund	346
Care at Home Capacity	419
Interim Care	420
Multi-disciplinary Teams	158
Carers fund	79
Locally Committed programmes	3,476
Committed Project Funds	15,480



Balance Sheet

The Balance Sheet shows the value, as at 31 March 2022, of the assets and liabilities recognised by the Board. The net assets of the Board are matched by the reserves held.

2020/21		Notes	2021/22
Total £000's			Total £000's
	Current Assets		
9,608	Short Term Debtors		20,289
	Current Liabilities		
0	Short Term Creditors		0
9,608	Total Assets less current Liabilities		20,289
	Capital and Reserves		
6,526	Earmarked Reserves		15,479
3,082	General Reserves		4,810
9,608	Total Reserves	MIRS Note 5	20,289

The accounts were authorised for issue on 13th September 2022



Claire Flanagan
Chief Finance Officer

Notes to the Financial Statements

1. Significant Accounting Policies

General Principles

The Financial Statements summarises the IJB's transactions for the 2021/22 financial year and its position at the year-end of 31 March 2022.

The IJB was established under the requirements of the Public Bodies (Joint Working) (Scotland) Act 2014 and is a Section 106 body as defined in the Local Government (Scotland) Act 1973.

The Financial Statements are therefore prepared in compliance with the Code of Practice on Local Authority Accounting in the United Kingdom 2021/22, supported by International Financial Reporting Standards (IFRS), unless legislation or statutory guidance requires different treatment.

The accounts are prepared on a going concern basis, which assumes that the IJB will continue in operational existence for the foreseeable future. The historical cost convention has been adopted.

Accruals of Income and Expenditure

Activity is accounted for in the year that it takes place, not simply when settlement in cash occurs. In particular:

- Expenditure is recognised when goods or services are received and their benefits are used by the IJB
- Income is recognised when the IJB has a right to the income, for instance by meeting any terms and conditions required to earn the income, and receipt of the income is probable
- Where income and expenditure have been recognised but settlement in cash has not taken place, a debtor or creditor is recorded in the Balance Sheet
- Where debts may not be received, the balance of debtors is written down.

It should be noted that the above principles are those applied by the partners (NHS Lothian and East Lothian Council). The IJB has funded these partners to deliver the delegated functions and these partners have charged the IJB as above.

Funding

The IJB is wholly funded through funding contributions from the statutory funding partners, East Lothian Council and NHS Lothian. Expenditure is incurred in the form of charges by the partners.

Cash and Cash Equivalents

The IJB does not operate a bank account or hold cash. Transactions are settled on behalf of the IJB by the funding partner. Consequently the IJB does not present a 'Cash and Cash Equivalent' figure on the Balance Sheet.

The funding balance due to or from each funding partner as at 31 March is represented as a debtor or creditor on the IJB's Balance Sheet. Where income and expenditure



have been recognised but settlement in cash has not taken place, a debtor or creditor is recorded in the Balance Sheet.

Employee Benefits

The IJB does not directly employ staff. Staff are formally employed by the partners who retain the liability for pension benefits payable in the future. The IJB therefore does not present a Pensions Liability on its Balance Sheet.

The IJB has a legal responsibility to appoint a Chief Officer. More details on the arrangements are provided in the Remuneration Report.

Provisions, Contingent Liabilities and Contingent Assets

Provisions are liabilities of uncertain timing or amount. A provision is recognised as a liability on the balance sheet when there is an obligation as at 31 March due to a past event, settlement of the obligation is probable, and a reliable estimate of the amount can be made. Recognition of a provision will result in expenditure being charged to the Comprehensive Income and Expenditure Statement and will normally be a charge to the General Fund.

A contingent liability is a possible liability arising from events on or before 31 March, whose existence will only be confirmed by later events. A provision that cannot be reasonably estimated, or where settlement is not probable, is treated as a contingent liability. A contingent liability is not recognised in the IJB's Balance Sheet but is disclosed in a note where it is material.

A contingent asset is a possible asset arising from events on or before 31 March, whose existence will only be confirmed by later events. A contingent asset is not recognised in the IJB's Balance Sheet but is disclosed in a note only if it is probable to arise and can be reliably measured.

The IJB has no provisions, contingent liabilities or contingent assets at 31 March 2022.

Reserves

The IJB's only Useable Reserve is the General Fund. The balance of the General Fund as at 31 March shows the extent of resources which the IJB can use in later years to support service provision. As noted above, the IJB had reserves of £20,289,000 at 31 March 2022.



Indemnity Insurance

The IJB has indemnity insurance for costs relating primarily to potential claim liabilities regarding Board member and officer responsibilities. NHS Lothian and East Lothian Council have responsibility for claims in respect of the services that they are statutorily responsible for and that they provide. The IJB holds separate indemnity insurance through its membership of the CNORIS scheme; the charge for this in 2021/22 was £3,000.

Unlike NHS Boards, the IJB does not have any ‘shared risk’ exposure from participation in CNORIS. The IJB participation in the CNORIS scheme is therefore analogous to normal insurance arrangements.

Known claims are assessed as to the value and probability of settlement. Where it is material the overall expected value of known claims taking probability of settlement into consideration is provided for in the IJB’s Balance Sheet.

The likelihood of receipt of an insurance settlement to cover any claims is separately assessed and, where material, presented as either a debtor or disclosed as a contingent asset.

2. Critical Judgements and Estimation Uncertainty

The critical judgements made in the Financial Statements relating to complex transactions are:

- The partner organisations have considered their exposure to possible losses and made adequate provision where it is probable that an outflow of resources will be required and the amount of the obligation can be measured reliably. Where it has not been possible to measure the obligation, or it is not probable in the partner organisations’ opinion that a transfer of economic benefits will be required, material contingent liabilities have been disclosed (there are none).
- The Annual Accounts contains estimated figures that are based on assumptions made by the IJB about the future or that are otherwise uncertain. Estimates are made taking into account historical experience, current trends and other relevant factors. However, because balances cannot be determined with certainty, actual results could be materially different from the assumptions and estimates. There are no items in the IJB’s Balance Sheet at 31 March 2022 for which there is a significant risk of material adjustment in the forthcoming financial year.

Provisions

The IJB has not created any provisions in respect of compensation claims. The IJB has not had any claims made against it in 2021/22 nor is it aware of any claims pending. However, it is not certain that all claims have been identified or that the historic level of settlement payments is a reliable guide for future settlements.

3. Events After the Reporting Period

The Annual Accounts were authorised for issue by the IJB’s Audit and Risk Committee. Events taking place after this date are not reflected in the financial statements or notes.



Where events taking place before this date provided information about conditions existing at 31 March 2022, the figures in the financial statements and notes have been adjusted in all material respects to reflect the impact of this information.

4. Short Term Debtors

The IJBs short term debtors are broken down as follows:

	2020/21	2021/22
	£000's	£000's
Funding due from NHS Lothian	9,049	18,782
Funding due from East Lothian Council	559	1,507
Total	9,608	20,289

Amounts owed by the East Lothian Council is stated on a net basis; that is the creditor balances relating to expenditure obligations incurred but not yet settled in cash terms are offset against the funds they are holding on behalf of the IJB.

5. Reserves

The IJB's useable reserve is broken down as follows:

	2020/21	2021/22
	£000's	£000's
Earmarked Reserves		
COVID-19 Funding	3,623	9,182
Scottish Government Mental Health Strategy - Action 15	53	8
Scottish Government Primary Care Improvement Plan Fund	226	354
Midlothian and East Lothian Drug and Alcohol Partnership	766	1,038
Community Living Change Fund	346	346
Winter - Care at Home Capacity		419
Winter - Interim Care		420
Winter - Multi-Disciplinary teams		158
Carers		79
Locally Committed Programmes	1,512	3,476
	6,526	15,479
General Reserves	3,082	4,810
Total Reserves	9,608	20,289

6. Taxation and Non-Specific Grant Income

2020/21		2021/22
£000		£000
49,385	Contributions from East Lothian Council	53,771
143,606	Contributions from NHS Lothian	156,160
192,991	Total	209,931

The contributions received by East Lothian IJB represent the funding provided by the Partners (East Lothian Council and NHS Lothian).

The funding contribution from the NHS Board shown above includes £23,825k in respect of the set aside resources and £30,867k in respect of East Lothian's share of pan Lothian health services resources.

7. Corporate Service

Included in the above costs are the following corporate services:

2020/21		2021/22
£000		£000
51	Staff (Chief Officer)	55
6	CNORIS	3
27	Audit Fee	28
84	Total	85

8. Related Party Transactions

As partners with the East Lothian Integration Joint Board both East Lothian Council and NHS Lothian are related parties and the material transactions with these bodies are disclosed in these accounts.

There are elements of expenditure which are shown against NHS Lothian but where the resources are used by social care services delivered by East Lothian Council. Further details are shown on the Income and Expenditure analysis on page 13.

Both Resource Transfer and the Social Care fund are resources which are part of the NHS Lothian Budget and are shown as expected there in but these funds are used to deliver social care service supplied by East Lothian Council.

The change in Resource Transfer in 2021/22 relates to a presentational reclassification exercise within NHS Lothian.

2020/21		2021/22
Net Expenditure		Net Expenditure
£000's		£000's
136,829	NHS Lothian	146,427
(4,738)	Resource Transfer	(4,964)
(6,216)	Social Care Fund	(6,216)
125,875	Total	135,247
48,952	East Lothian Council	52,823
4,738	Resource Transfer	4,964
6,216	Social Care Fund	6,216
59,906	Total	64,003



9. Agency Transactions

COVID-19 Grants were distributed on behalf of the Scottish Government in accordance with the Scottish Government's eligibility criteria. The £500 social care workers grant funding was not received in 2020/21, but has been received and disbursed by East Lothian Council in 2021/22.

10. VAT

The IJB is not a taxable entity and does not charge or recover VAT on its functions. The VAT treatment of expenditure and income within the accounts depends upon which of the partners is providing the services as these bodies are treated differently for VAT purposes.



Appendix 1 – Set Aside

Set Aside budget relates to services provided by large hospitals on behalf of the IJB. The principle is illustrated in the diagram below.

What is a set aside budget?

The budgets of integration authorities (IAs) are composed of two elements:

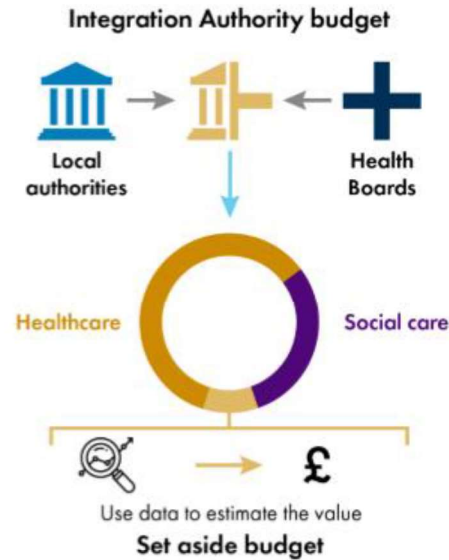
- Social care
- Health care – including primary and community healthcare, as well as some hospital care

The majority of integration authorities (IAs) have a 'set aside' budget. This relates to unscheduled acute hospital care.

How is the set aside budget agreed?

When setting the budget, the integration authority agrees with the NHS health board partner how much it expects to need for unscheduled acute hospital care. To do this, the partners use hospital data on levels of activity.

For IAs using the "set aside" approach, the agreed amount remains within the NHS rather than being paid to the IA (like the rest of the NHS contribution). This "set aside" budget should still remain under the control of the IA.



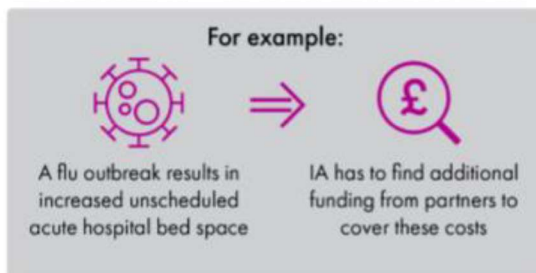
What can change the set aside budget?

In year

During the year, actual **unscheduled acute activity** might be higher or lower than anticipated.

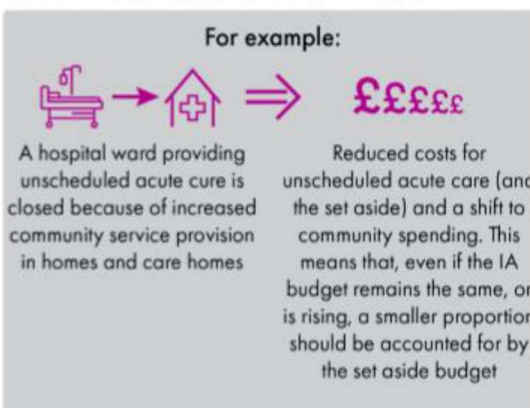
If activity is higher, the IA needs to agree with partners how these additional costs will be met.

If activity is lower, the IA should be able to decide how to spend the difference between actual and anticipated costs.



Longer term

Over the longer term, changes to how services are delivered should also be aimed at reducing demand for unscheduled acute care and – in turn – the set aside budget.



Source - Scottish Government Health and Sport Committee report in October 2019 "Looking ahead to the Scottish Government Health Budget 2020/21: When is hospital bad your health? "

East Lothian Integration Joint Board

2021/22 Annual Audit Report



Prepared for the East Lothian Integration Joint Board and the Controller of Audit
13 September 2022

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Key messages

2021/22 annual accounts

- 1 Our audit opinions on the annual accounts of the East Lothian Integration Joint Board are unmodified.
- 2 The financial statements give a true and fair view and were properly prepared in accordance with the financial reporting framework.
- 3 There was no adverse impact of Covid-19 on the accounting and auditing timetable for the 2021/22 financial statements.

Financial management and sustainability

- 4 The IJB reported an underspend of £10.6 million. Covid-19 funding of £13.7 million was received in 2021/22; £9.2 million of which was unspent at 31 March 2022 and is included in earmarked reserves to cover future costs.
- 5 Reserves have increased from £9.6 million to £20.2 million. We have confirmed that £15.4 million is appropriately earmarked for specific purposes, with the remaining £4.8 million held as a general reserve.
- 6 Medium and longer-term financial plans have yet to be updated to reflect the impact of Covid 19 and prepare for the future.

Governance, Transparency and Best Value

- 7 The governance arrangements are appropriate and operate effectively. There is effective scrutiny, challenge and informed decision making.
- 8 Arrangements are in place to secure best value.

Introduction

1. This report summarises the findings arising from the 2021/22 audit of the East Lothian Integration Joint Board (the IJB).
2. The scope of the audit was set out in our 2021/22 Annual Audit Plan presented to the Audit and Risk Committee in March 2022.
3. This report comprises the findings from:
 - the audit of the East Lothian IJB's annual accounts
 - consideration of the four audit dimensions that frame the wider scope of public audit set out in the [Code of Audit Practice 2016](#)
 - a review of the arrangements put in place by the East Lothian IJB to secure Best Value.
4. The global coronavirus pandemic has had a considerable impact on the IJB during 2021/22. This has had significant implications not least for the services it delivers but also for sickness absence levels, redeployment of staff to critical areas and the suspension of non-essential projects and activities.

Adding value through the audit

5. We add value to the IJB, through the audit by:
 - identifying and providing insight on significant risks, and making clear and relevant recommendations
 - sharing intelligence and good practice through our national reports ([Appendix 2](#)) and good practice guides
 - providing clear and focused conclusions on the appropriateness, effectiveness and impact of corporate governance, performance management arrangements and financial sustainability.

Responsibilities and reporting

6. The IJB has primary responsibility for ensuring the proper financial stewardship of public funds. This includes preparing annual accounts that are in accordance with proper accounting practices.
7. Also, the IJB is responsible for compliance with legislation, and putting arrangements in place for governance and propriety that enable it to successfully deliver its objectives.

8. Our responsibilities as independent auditor appointed by the Accounts Commission are established by the Local Government in Scotland Act 1973, the Code of Audit Practice 2016 and supplementary guidance, and International Standards on Auditing in the UK.

9. As public sector auditors we give independent opinions on the annual accounts. Additionally, we conclude on:

- the effectiveness of the IJB's performance management arrangements,
- the suitability and effectiveness of corporate governance arrangements,
- the financial position and arrangements for securing financial sustainability, and
- Best Value arrangements.

10. Further details of the respective responsibilities of management and the auditor can be found in the [Code of Audit Practice 2016](#) and supplementary guidance.

11. This report raises matters from our audit. Weaknesses or risks identified are only those which have come to our attention during our normal audit work and may not be all that exist. Communicating these does not absolve management from its responsibility to address the issues we raise and to maintain adequate systems of control.

12. Our annual audit report contains an agreed action plan at [Appendix 1](#) setting out specific recommendations, responsible officers and dates for implementation. It also includes outstanding actions from last year and progress against these.

Auditor Independence

13. Auditors appointed by the Accounts Commission or Auditor General must comply with the Code of Audit Practice and relevant supporting guidance. When auditing the financial statements auditors must comply with professional standards issued by the Financial Reporting Council and those of the professional accountancy bodies.

14. We can confirm that we comply with the Financial Reporting Council's Ethical Standard. We can also confirm that we have not undertaken any non-audit related services and therefore the 2021/22 audit fee of £27,960 as set out in our 2021/22 Annual Audit Plan remains unchanged. We are not aware of any relationships that could compromise our objectivity and independence.

15. This report is addressed to both the IJB and the Controller of Audit and will be published on Audit Scotland's website www.audit-scotland.gov.uk in due course. We would like to thank the management and staff who have been involved in our work for their co-operation and assistance during the audit.

Audit appointment from 2022/23

16. The Accounts Commission is responsible for the appointment of external auditors to local government bodies. External auditors are usually appointed for a five-year term either from Audit Scotland's Audit Services Group or a private firm of accountants. The current appointment round was due to end in 2020/21 but this was extended for a year meaning 2021/22 is the last year of the current appointment round.

17. The procurement process for the new round of audit appointments was completed in May 2022. From financial year 2022/23 Audit Scotland will be the appointed auditor for the East Lothian Integration Joint Board. We are working closely with the new auditors to ensure a well-managed transition.

18. A new [Code of Audit Practice 2021](#) applies to public sector audits for financial years starting on or after 1 April 2022. It replaces the Code issued in May 2016.

19. We would like to thank Board members, Audit and Risk Committee members, and other staff, particularly those in finance for their co-operation and assistance over the last six years.

Audit of 2021/22 annual accounts

The principal means of accounting for the stewardship of resources and performance

Main judgements

Our audit opinions on the annual accounts of the East Lothian Integration Joint Board are unmodified.

The financial statements give a true and fair view and were properly prepared in accordance with the financial reporting framework.

There was no adverse impact of Covid-19 on the accounting and auditing timetable for the 2021/22 financial statements.

Our audit opinions on the annual accounts are unmodified

20. The IJB's annual accounts for the year ended 31 March 2022 were approved by the Audit and Risk Committee on 13 September 2022. As reported in the independent auditor's report:

- the financial statements give a true and fair view and were properly prepared in accordance with the financial reporting framework
- the audited part of the Remuneration Report, Management Commentary and the Annual Governance Statement were all consistent with the financial statements and properly prepared in accordance with the relevant regulations and guidance.

The Covid-19 pandemic had limited impact on the audit process. The annual accounts were signed off in line with our agreed audit timetable

21. The working papers provided with the unaudited accounts were of a good standard and finance staff provided good support to the audit team during the audit. This helped ensure that the audit of the annual accounts process ran smoothly. For 2021/22, the deadline for the audited accounts is 31 October 2022.

There were no objections raised to the annual accounts

22. The Local Authority Accounts (Scotland) Regulations 2014 require local government bodies to publish a public notice on its website that includes details of the period for inspecting and objecting to the accounts. This must remain on the website throughout the inspection period.

23. The IJB complied with the Regulations. There were no objections to the 2021/22 annual accounts.

Overall materiality is £4 million

24. We apply the concept of materiality in both planning and performing the audit and in evaluating the effect of identified misstatements on the audit and of uncorrected misstatements, if any, on the financial statements and in forming the opinion in the auditor's report. We identify a benchmark on which to base overall materiality, such as gross expenditure, and apply what we judge to be the most appropriate percentage level for calculating materiality values.

25. The determination of materiality is based on professional judgement and is informed by our understanding of the entity and what users are likely to be most concerned about in the annual accounts. In assessing performance materiality, we have considered factors such as our findings from previous audits, any changes in business processes and the entity's control environment including fraud risks.

26. Our initial assessment of materiality for the annual accounts was carried out during the planning phase of the audit. This was reviewed on receipt of the unaudited annual accounts, and is summarised in [Exhibit 1](#).

Exhibit 1 Materiality values

Materiality level	Amount
Overall materiality	£4.0 million
Performance materiality	£3.0 million
Reporting threshold	£100,000

Source: Audit Scotland

We have no significant findings to report on the audited annual accounts

27. International Standard on Auditing (UK) 260 requires us to communicate significant findings from the audit to those charged with governance, including our view about the qualitative aspects of the body's accounting practices.

28. We have no significant findings to report from the audit of the annual accounts. We do however note the significant increase in the total reserves as a result of the £10.6 million underspend in year largely caused by the receipt of additional Covid-19 funding in March 2022 and an inability to progress projects during the year due to the pandemic. This is detailed in the financial management and sustainability section of this report (see [Exhibit 3](#) and [Exhibit 4](#)).

29. We have obtained audit assurances over the identified significant risks of material misstatement to the financial statements. [Exhibit 2](#) sets out the significant risks of material misstatement to the financial statements we identified in our 2021/22 Annual Audit Plan. It summarises the further audit procedures we performed during the year to obtain assurances over these risks and the conclusions from the work completed.

Exhibit 2

Significant risks of material misstatement in the financial statements

Audit risk	Assurance procedure	Results and conclusions
<p>1. Risk of material misstatement due to fraud caused by the management override of controls.</p> <p>As stated in International Standard on Auditing 240, management is in a unique position to perpetrate fraud because of management's ability to manipulate accounting records and prepare fraudulent financial statements by overriding controls that otherwise are operating effectively.</p>	<p>Service auditor assurances were obtained from the external auditors of East Lothian Council and NHS Lothian in line with the 2021/22 Integration Joint Boards Protocol for Auditor Assurances issued by Audit Scotland.</p> <p>Agreement of contributions received from partner bodies in the Comprehensive Income and Expenditure Statement of the 2021/22 accounts to letters of assurance provided by East Lothian Council and NHS Lothian.</p>	<p>Results: Assurances were obtained from the external auditors of East Lothian Council and NHS Lothian with no issues noted.</p> <p>We did not identify any instances of management override of controls through our audit work.</p> <p>Conclusion: Satisfactory</p>

There were no identified misstatements in the audited annual accounts

30. No misstatements above our reporting threshold were identified during the audit.

Limited progress was made on prior year recommendations

31. The IJB has made limited progress in implementing our two prior year audit recommendations. For the actions not yet implemented, revised responses and timescales have been agreed with management, and are set out in [Appendix 1](#).

2. Financial management and sustainability

Financial management is about financial capacity, sound budgetary processes and whether the control environment and internal controls are operating effectively.

Financial sustainability looks forward to the medium and long term to consider whether a body is planning effectively to continue to deliver its services.

Main judgements

The IJB reported an underspend of £10.7 million. Covid-19 funding of £13.7 million was received in 2021/22; £9.2 million of which was unspent at 31 March 2022 and is included in reserves to cover future earmarked costs.

Reserves have increased from £9.6 million to £20.2 million. We have confirmed that £15.4 million is appropriately earmarked for specific purposes, with the remaining £4.8 million held as a general reserve.

Medium and longer-term financial plans have yet to be updated to reflect the impact of Covid-19.

The IJB underspent by £10.7 million in 2021/22

32. The IJB does not have any assets, nor does it directly incur expenditure or employ staff, other than the Chief Officer and Chief Finance Officer. All funding and expenditure for the IJB is incurred by partner bodies and processed in their accounting records.

33. The Covid-19 pandemic had a significant impact on the IJB's 2021/22 position. In February 2022 additional Covid-19 funding of £13.5 million was received from the Scottish Government with the expectation it would be used in 2022/23 to support Covid-19 costs. This funding is included in the earmarked reserves for use in 2022/23. Plans have been agreed by the IJB.

34. The IJB returned an underspend of £10.7 million against a budgeted breakeven position with the largest underspend, £9.7 million, in health ([Exhibit 3](#)). Various projects within health could not progress in year due to the overall impact of Covid-19 on the IJB including staff absences.

Exhibit 3**2021/22 Performance against budget**

IJB budget summary	Budget £m	Actual £m	Variance £m
NHS Lothian	156.1	146.4	9.7
East Lothian Council	53.7	52.8	0.9
Total Net Expenditure	209.9	199.2	10.7
Surplus (from NHS Lothian to be retained by the IJB)			9.7
Surplus (from East Lothian Council to be retained by the IJB)			0.9

Source: East Lothian IJB 2021/22 Audited Accounts (figures rounded to nearest £100k)

Reserves have increased from £9.6 million to £20.2 million

35. £8.9 million (84%) of the IJB's £10.7 million underspend has been allocated to earmarked reserves to be spent in 2022/23. Covid-19 earmarked reserves represent 45% (£9.2 million) of the total reserves/surplus at year end. ([Exhibit 4](#)).

Exhibit 4**Movement in reserves 2021/22**

Reserve category	Opening balance £m	Increase in year £m	Closing balance £m
Covid-19 earmarked reserve	3.6	5.6	9.2
Other earmarked reserves	2.9	3.4	6.2
Total earmarked reserves	6.5	8.9	15.4
General reserves	3.1	1.7	4.8
Total reserves/surplus	9.6	10.7	20.2

Source: Finance Update to the ELIJB (June 2022) (figures rounded to nearest £100k)

Wider audit dimension risks relating to financial management and sustainability identified in our 2021/22 Annual Audit Plan

36. [Exhibit 4](#) sets out the one audit dimension risk relating to financial sustainability that we identified in our 2021/22 Annual Audit Plan. It summarises the audit procedures we performed during the year to obtain assurances over these risks and the conclusions from the work completed.

Exhibit 4

Risks identified from the auditor's wider responsibility under the Code of Audit Practice

Audit risk	Assurance procedure	Results and conclusions
<p>1. Financial sustainability – medium term financial planning</p> <p>The Integration Joint Board continues to operate in an increasingly challenging environment, where core national funding to partner bodies is reducing, relative to rising demand for services. The picture is further complicated by the ongoing Covid-19 pandemic which is adding to the pressure on resources and services.</p> <p>As highlighted in our 2020/21 Annual Audit Report it is important that medium term budgets are developed to assess the impact of the Covid-19 pandemic on the finances of the IJB.</p> <p>In the absence of such budgets there is a risk that the IJB will not be able to deliver against its objectives, its strategic plan and against its budget in the longer term.</p>	<p>Review of papers presented to the IJB Board on medium term financial planning.</p> <p>Monitor progress in developing medium term financial plans.</p>	<p>Results: Regular finance reports have been provided to the IJB however medium and longer-term financial plans have yet to be updated to reflect the impact of Covid-19 and prepare for the future. Updates beyond 2022/23 are qualitative rather than quantitative in content.</p> <p>As part of Internal Audit's 2021/22 Plan they reviewed the adequacy and effectiveness of the arrangements in place for budget monitoring within the East Lothian IJB. This was presented to the ARC in June 2022 and graded as reasonable assurance. All findings have been agreed with the CFO including a new five-year financial plan to be in place by December 2022.</p> <p>We reviewed the Internal Audit report and have included their overall conclusion and key recommendations in paragraph 37 below.</p> <p>Conclusion: In progress</p> <p>The IJB has received indicative budget allocations from East Lothian Council and NHS Lothian up to and including 2023/24 and</p>

Audit risk	Assurance procedure	Results and conclusions
		2025/26 respectively. These should be used to inform the IJB's medium to longer term financial plans. As part of this work, the IJB should develop exit strategies for Covid-19 generated costs because funds will not likely be available from 23/24 and beyond.

Source: 2021/22 Annual Audit Plan

Medium and longer-term financial plans have yet to be updated to reflect the impact of Covid 19 and prepare for the future

37. Internal Audit's 2021/22 report on the adequacy and effectiveness of the arrangements in place for budget monitoring within East Lothian IJB concluded:

The East Lothian Integration Joint Board has a sound system of internal controls in place for budget monitoring, adequate arrangements are in place for monitoring budgets on a regular basis and the annual budget is correctly built up from the indicative budget offers from both partners. However the audit has identified some improvements that require to be implemented, including preparing a new five year financial plan, a review of the approach adopted for reporting financial out-turns for both partners to the East Lothian Integration Joint Board and the lack of a clear directive for allocating surplus funds to specific strategic objectives.

38. The following key findings and recommendations are highlighted, which have all been agreed by the Chief Finance Officer and include implementation dates:

- The East Lothian Integration Joint Board had not prepared a multi-year financial plan based on the final budget offers from the financial partners, laying out how it will resource the delivery of its strategic plan. Management have agreed to prepare a new five year financial plan by December 2022.
- The arrangements currently in place for reporting projected financial out-turns to the East Lothian Integration Joint Board require review to ensure that a breakdown of the annual budgets and forecasted expenditure are provided for both partners. Management have agreed to review the approach adopted by September 2022.
- The East Lothian Integration Joint Board had a projected underspend for financial year 2021/22, however there was a lack of a clear directive for allocating surplus funds to specific strategic objectives. Management have agreed to create a new Direction for allocating the surplus by December 2022.

39. We observed that senior management and members receive regular information on the IJB's in-year financial position but note the recommendations made by Internal Audit and have not repeated them here. Our 2021/22 recommendation remains 'in progress' and has been included in the action plan at [Appendix 1](#) (follow up of prior year recommendations).

Financial systems of internal control operated effectively

40. The IJB does not have its own financial systems and instead relies on partner bodies' (NHS Lothian and East Lothian Council) financial systems.

41. As part of our audit approach, we sought assurances from the external auditors of NHS Lothian and East Lothian Council and confirmed there were no weaknesses in the systems of internal controls for either the health board or the council which would have had an impact on the IJB and our audit approach.

Standards of conduct and arrangements for the prevention and detection of fraud and error were appropriate

42. The IJB does not maintain its own policies relating to the prevention and detection of fraud and error but instead depends on those in place at its partner bodies. We reviewed the arrangements in place at East Lothian Council and found them to be adequate. The IJB has a Code of Conduct in place to which members subscribe and the Members' Registers of Interest are publicly available on the IJB's website

43. Appropriate arrangements are in place for the prevention and detection of fraud and error. We are not aware of any specific issues we require to bring to your attention.

4. Governance, transparency and Best Value

The effectiveness of scrutiny and oversight and transparent reporting of information

Main Judgements

The governance arrangements are appropriate and operate effectively. There is effective scrutiny, challenge and informed decision making.

Arrangements are in place to secure best value.

Governance arrangements are appropriate and operate effectively

44. We reported in our 2020/21 annual audit report on the revised governance arrangements introduced by the IJB including:

- Home working for the majority of staff
- Holding Audit and Risk Committee meetings on Microsoft Teams
- Effective scrutiny, challenge and decision making.

45. We have confirmed that these arrangements have been maintained in 2021/22 and remain appropriate. We consider that the IJB's governance arrangements are appropriate and support effective scrutiny, challenge and decision making.

Performance reporting was of a good standard

46. Management commentary included in the annual accounts should provide information on a body, its main objectives and the principal risks faced. It should provide a fair, balanced and understandable analysis of a body's performance as well as helping stakeholders understand the financial statements.

47. Following our review of the management commentary in the unaudited accounts, we provided feedback to the CFO regarding the commentary on the IJB's financial position at 31 March 2022. It could be improved by including more information similar to that which was included in the June 2022 Finance Update submitted to the IJB Board. The Finance Update was of a good standard and included explanation of the financial outturn for the year

including the underlying financial position, reserve movements and Covid-19 funding and reserve details. The CFO has accepted this observation and will incorporate equivalent information for 2022/23. Other areas raised and discussed as part of the audit process were addressed by the CFO in the final version of the annual accounts.

Changes in senior officers

48. There was a change in senior officers in year: the Chief Officer, Alison MacDonald, left the post in June 2022 and a new Chief Officer, Fiona Wilson, was appointed in April 2022. This is a significant change in senior management since the IJB was established. The incoming Chief Officer was the previously the Head of Health at West Lothian Health and Social Care Partnership. The CFO also returned from maternity leave in May 2022.

Arrangements are in place to secure Best Value

49. Integration Joint Boards have a statutory duty to have arrangements to secure Best Value. To achieve this, IJBs should have effective processes for scrutinising performance, monitoring progress towards their strategic objectives and holding partners to account.

50. The IJB has demonstrated its commitment to best value in the use of their resources by having an approved Strategy, Workforce and Financial Plan. The current Strategic Plan runs to March 2022. A decision was taken in June 2021 by the IJB to extend the 2019-2022 Strategic Plan by six months to September 2022 due to increased COVID-19 related demand on officers. It was also agreed by the IJB that the extra time would allow incorporation of any early Scottish Government guidance and policy arising from the recommendations of the Independent Review of Adult Social Care and the development of a National Care Service.

51. Next steps involve consultation with officers to inform the development of priorities and a consultation and engagement programme to seek community and other views on the draft Strategic Plan. Regular updates have and will continue to be provided to the IJB. A final Strategic Plan is due for approval in September 2022.

Revisions to the Integration Scheme are underway

52. Integration Schemes require to be updated every five years. The current East Lothian IJB Integration Scheme 2019-2022 was last reviewed and approved by the Scottish Government in July 2019 and is publicly available on the East Lothian Council website.

53. A planned review of all Integration Schemes for the Lothians was due in 2020 (including East Lothian). This was delayed by changed service priorities arising from the Covid-19 pandemic. Work on a revised Scheme recommenced during 2021. The review between NHS Lothian and East Lothian Council is being led by the NHS Lothian Strategic Planning Department. A consultation went out and closed at the end of March 2022. The

revised Scheme has been agreed by the partners in June 2022 and is now with the Scottish Government for approval.

Annual Performance Report

54. The Public Bodies (Joint Working) (Scotland) Act 2014 requires the IJB to produce an annual performance report covering areas such as assessing performance in relation to national health and wellbeing outcomes, financial performance and best value, reporting on localities, and the inspection of services.

55. We have previously reported and recommended that the Annual Performance Report be prepared and presented to the IJB in a more timely fashion. The 2021/22 Report is due to be presented to the IJB at its September 2022 meeting. Our 2021/22 recommendation remains 'outstanding' and has been included in the action plan in [Appendix 1](#) (follow up of prior year recommendations).

56. From our review of the IJB's 2020/21 Annual Performance Report and accompanying Summary Report (published November 2022) we noted that the IJB responded well to the challenges and implemented new ways of working in response to the pandemic. Success factors for the IJB included:

- Use of online and telephone appointments to deliver services. This helped overcome some of the impacts of East Lothian's geography and dispersed communities especially during lockdown periods.
- An expanded and increased range of services at the East Lothian Community Hospital. This helped deliver one of the IJB's key ambitions of providing health services as close to home as possible for residents of East Lothian. The hospital also acted as a PPE hub for organisations and individuals; a Covid-19 test supply centre and was the East Lothian Covid-19 Vaccination Centre.
- Expansion of the Care When It Counts service from one GP practice to four, resulting in the service now being available to 47% of the East Lothian population.

57. Overall East Lothian's performance in 2020/21 was in line with the Scottish average. One indicator where the IJB performed significantly better than the national average was the additional days people aged 75+ spend in hospital when they are ready to be discharged per 1,000 population - 262 days compared to the national average of 488 days. As a result the East Lothian IJB was the fourth best performing in Scotland for delayed discharges

58. The IJB's 2020/21 Annual Performance Report Summary comprehensively summarises the key achievements of the full report. The Summary is easy to understand and includes staff and end-user, real-life examples of the impact the IJB has had.

National performance audit reports

59. Audit Scotland carries out a national performance audit programme on behalf of the Accounts Commission and the Auditor General for Scotland. During 2021/22 we published some reports which may be of direct interest to the IJB as outlined in [Appendix 2](#).

60. The most recent and relevant national report published in June 2022 - [Integration Joint Boards: Financial analysis 2020/21](#) - will be of interest to the IJB. A brief summary of the report's main findings is below:

Funding to Integration Joint Boards increases, but significant risks and challenges ahead

Funding of Integration Joint Boards (IJBs) in 2020/21 increased by nearly 10 per cent in real terms, bringing total funding to £10.6 billion. This was mainly due to one-off Scottish Government funding to mitigate the impacts of Covid-19.

Reserves also tripled, reflecting unspent Covid-19 funding and the late allocation of specific funding for primary care, community, mental health and alcohol and drug support.

All Scotland's IJBs, however, face significant financial sustainability issues: uncertainty of future funding, rising demand and the potential impacts of a national care service. This means:

- across all 30 IJBs there remains a significant overall budget gap - this was £151 million in 2021/22, with some IJBs facing significant financial challenges
 - making recurring savings and delivering services differently is essential to addressing future budget gaps
 - 81 per cent of money held in reserves is ringfenced, creating a lack of flexibility in how IJBs can use this money
 - Securing longer-term financial planning – only five IJBs have long-term financial plans
-

61. From attendance at the Board and Audit and Risk Committee meetings, we note that the IJB has arrangements in place for considering and reviewing national reports including any locally agreed actions.

Appendix 1. Action plan 2021/22

2021/22 recommendations

62. There are no new recommendation for 2021/22 however we have carried forward two recommendations from the prior year:

Follow-up of prior year recommendations

Issue/risk	Recommendation	Agreed management action/timing
<p>4. Medium term financial plan update</p> <p>The medium-term (five year) financial plan covering the period 2021/22 – 2024/25 was prepared under a ‘business as usual,’ pre Covid-19 scenario. The plan is due to be refined and updated once there is further clarity on future service provision.</p> <p>Risk – There is a risk that the IJB will not be able to deliver against its objectives, its strategic plan and deliver financial balance against its budget in the longer term.</p>	<p>The existing medium-term financial plan must be revised to take account of the impact, new challenges, and ways of working as a result of Covid-19.</p>	<p>In Progress</p> <p>Revised action: The IJB financial plan is currently being produced as we now have more clarity regarding covid exit funding. This will be presented to the IJB before Dec 2022. Q1 report will have forecast and 5 year plan (from 22/23).</p> <p>Responsible officer: Chief Finance Officer</p> <p>Agreed revised date: December 2022</p> <p>Original implementation date: March 2022.</p>
<p>5. Performance information provided to the IJB</p> <p>It is noted that ELIJB are taking advantage of the nationally agreed delay in producing the annual performance report.</p> <p>Risk – There is a risk that the performance information for ELIJB is not reported to the</p>	<p>Ensure the annual performance report is prepared and presented to the IJB in a timely fashion to allow the members of the IJB to be aware of how it is performing as a whole</p>	<p>Outstanding</p> <p>Revised action: The draft 2021/22 Annual Performance Report is due to be submitted for approval at the IJB Board meeting in September 2022.</p> <p>Responsible officer: Chief Finance Officer</p>

Issue/risk	Recommendation	Agreed management action/timing
Board on a regular basis with the Board members not being able to see the whole picture of how the IJB is performing.		Agreed revised date: September 2022 Original implementation date: August 2022

Appendix 2: Summary of 2021/22 national performance reports

May

[Local government in Scotland Overview 2021](#)

June

[Covid 19: Personal protective equipment](#)

July

[Community justice: Sustainable alternatives to custody](#)

September

[Covid 19: Vaccination programme](#)

January

[Planning for skills](#)

[Social care briefing](#)

February

[NHS in Scotland 2021](#)

March

[Local government in Scotland: Financial Overview 20/21](#)

[Drug and alcohol: An update](#)

[Scotland's economy: Supporting businesses through the Covid 19 pandemic](#)

East Lothian Integration Joint Board

2021/22 Annual Audit Report

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REPORT TO: East Lothian Integration Joint Board
MEETING DATE: 27 October 2022
BY: Chief Finance Officer
SUBJECT: 2022/23 Financial Update – end of August 2022

4

1 PURPOSE

- 1.1 This report lays out the most recent financial forecasts from Partners and the projected financial position of the IJB for 2022/23. Plus updates the Board on the recent correspondence from Scottish Government regarding IJB COVID reserves.

2 RECOMMENDATIONS

- 2.1 The IJB is asked to:
- i. Note the end of August 2022 financial reviews undertaken by Partners; and
 - ii. Note the correspondence from Scottish Government regarding IJB COVID reserves.

3 BACKGROUND

- 3.1 At the IJB meeting during September 2022, the IJB received the outputs from the Quarter 1 review exercise undertaken by its Partners East Lothian Council and NHS Lothian which projected the financial position for the IJB for the year 2022/23.
- 3.2 The output of the Quarter 1 review was a projected overspend of £1,106k. These financial forecast projections are now routinely monitored and updated as new information is made available. Both Partners have reviewed the forecasts during the end of August 2022 reporting cycle which has result in a small movement within social care. The forecast is now a projected overspend of £1,193k.

	Annual Budget as at end of August 2022	Forecast Expenditure	August 2022 Forecast Under/(Over) Spend
	£k	£k	£k
Core	80,079	79,896	183
Hosted	14,502	14,543	-41
Set Aside	21,919	23,100	-1,181
Health	116,499	117,539	-1,040
Social Care	67,788	67,941	-153
Total	184,287	185,480	-1,193

(Fig 1: IJB Financial Forecasts 2022/23)

- 3.3 A Quarter 2 review which is a fuller forecasting exercise will be undertaken after end of September 2022 financial positions are closed. This will take the first 6 months of financial information and make updated financial projections for 2022/23.
- 3.4 The Core services within Health although reporting a very small underspend do have some areas with financial challenges these are our Prescribing and General Medical Services budgets plus overall use of high cost agency and locum staff to fill workforce gaps.
- 3.5 Within Set Aside services the forecast continues to highlight the financial pressures driven by staffing costs being higher due to the use of agency and locum staff to fill gaps and the increased cost within acute drugs driven by both increased demand and price. This area is the major overspend of the IJB and we are working with acute colleagues to determine if there are any recovery action to mitigate this pressure.
- 3.6 The Social Care projection is an overall overspend of £153k it should be noted that there are underlying pressures that need to be addressed to ensure this position can be achieved, specifically there are financial challenges within commissioned services and in particular Learning Disabilities.
- 3.7 At the IJB in September 2022 the finance report also reported on the COVID exit work within the HSCP and the national shortfall in funding. The HSCP COVID costs for 2022/23 being reported are
- an additional ward within East Lothian Community Hospital,
 - additional costs in Primary Care (GMS and Prescribing),
 - costs relating to the ongoing sustainability payments to our external providers
 - and the loss of income from core services.

- 3.8 During September 2022 a letter from Scottish Government titled Update on COVID reserves was sent to HSCP Chief Officers, HSCP Chief Finance Officers, NHS Directors of Finance, LG Directors of Finance. This letter references the reclaiming of IJB COVID reserves

“There have been a number of significant changes to Public Health policies in relation to Covid over the summer, resulting in the profile of Covid spend reducing significantly compared to when funding was provided to IJBs for Covid purposes. In response to this, the Scottish Government will reclaim surplus Covid reserves to be redistributed across the sector to meet current Covid priorities. The detail of this will follow at an IJB level and the process and timetable will follow through further communications.”

- 3.9 This letter has been shared with members and at this stage we await further correspondence on the detail of this.
- 3.10 The outturn projections will continue to be refined throughout the year, and regular updates will be brought back to the IJB. The main outstanding risk not included in the above projections is the settlement of the pay awards. We await clarity to assess the impact of this with our Partners both in terms of cost projections and any additional funding.

4 ENGAGEMENT

- 4.1 The IJB makes its papers and reports available on the internet.
- 4.2 The issues in this report have been discussed with the IJB’s partners but do not require wider engagement

5 POLICY IMPLICATIONS

- 5.1 There are no new policies arising from this paper.
- 5.2 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
- 6.2 The issues in this report do not require an integrated impact assessment.

7 DIRECTIONS

7.1 There are no implications for Directions in this report.

8 RESOURCE IMPLICATIONS

8.1 There are no immediate resource implications from this report. Any resource implications from the outcome of the process will be highlighted in a future report if required.

9 RISK

9.1 None

10 BACKGROUND PAPERS

10.1 None

AUTHOR'S NAME	Claire Flanagan
DESIGNATION	Chief Finance Officer
CONTACT INFO	Claire.flanagan@nhslothian.scot.nhs.uk
DATE	October 2022



REPORT TO: East Lothian Integration Joint Board
MEETING DATE: 27 October 2022
BY: Chief Officer
SUBJECT: Medication Assisted Treatment (MAT) Standards

5

1 PURPOSE

- 1.1 This report seeks to update the East Lothian IJB in relation to the Medication Assisted Treatment Standards and the requirement to embed and implement these standards to 'enshrine a right's based approach to immediate, person centred treatment for problem drug use, linked to primary care, mental health and other support services'.

2 RECOMMENDATIONS

- 2.1 The IJB is asked to:
- i. Note the specific responses, actions and oversight arrangements required by the Scottish Government to achieve implementation of the MAT standards.
 - ii. Approve and sign the MAT Standards Implementation Plan.
 - iii. Note quarterly progress update against the delivery of the MAT Standards Implementation Plan.

3 BACKGROUND

- 3.1 In response to the high level of drug related deaths within Scotland the Drugs Death taskforce has contributed to the development and the prioritisation and introduction of the Medication Assisted Treatment (MAT) standards, to help reduce deaths and other harms, and to promote recovery.

The term MAT is used to refer to the use of medication, such as opioids, together with psychosocial and social support, in the treatment and care of individuals who experience problems with their drug use.

The MAT standards (**Appendix 1**) are evidence based and define what is needed for the consistent delivery of safe and accessible drug treatment in Scotland.

The standards aim to:

- Improve access and retention in MAT
- Enable people to make an informed choice about treatment, care and support.
- Include families or nominated person(s) wherever appropriate
- Strengthen accountability and leadership so that the necessary governance and resource is in place to implement them effectively.

3.2 Initially the Scottish Government had announced that these standards needed to be embedded by April 2022, however in June 2022, Public Health Scotland published a MAT implementation Benchmarking Report which shows that whilst progress on implementation had been made in all areas, the MAT standards 1-5 had not been fully implemented fully by April 2022.

The benchmarking report as detailed in **Appendix 2**, provided the RAG status for each of the MAT standards 1-5 for each Alcohol and Drug Partnership area and you will note that East Lothian was RAG rated RED for MAT 1 and AMBER for MAT 2-5.

In response to this report and in order to achieve full implementation of MAT standards 1-5 by April 2023, Ministers recommended that the following actions and oversight arrangements are put in place for each local area:

- By end of September, Chief Officers and Chief Executives personally sign times, specific and published Improvement plans for implementing the standards.
- Chief Officers and Chief Executives take shared and visible responsibility for delivering the standards.
- Chief Officer and Chief Executives include reports on progress against the delivery of the MAT Standards Implementation Plan, as well part of the regular Board quarterly reporting against Annual Delivery Plans.

3.3 The Scottish Government also announced additional funding to support the implementation of the standards.

East Lothian originally bid for £224,500, however only £156,115 was allocated from the Scottish Government and MELDAP matched the remaining £68,385. This has allowed us to employ additional staffing to ensure improved access and retention in MAT.

3.4 Over the last few months, considerable work has been undertaken across all ADP partners within East Lothian to ensure that the criteria and principles set against each MAT Standard are fully understood to support people in their MAT treatment in recovery and to inform how services will be accessed and delivered. These are detailed in local implementation plans and progress will be monitored through the following governance routes:

- East Lothian HSCP and partners will meet monthly as part of the Substance Use Business meeting to monitor and progress actions.
- MAT Implementation Meeting which will review progress against the agreed actions and will ratify a quarterly report which will highlight risks to delivery
- 2 monthly update report will be presented by Operational Strategic Managers to the MH/SUS Change Board
- The quarterly report will be presented to East Lothian Senior Management Team for comment, to note progress and to address any risks to delivery.
- The report will be presented to the Chief Executive of East Lothian Council and NHS Lothian for agreement and sign off prior to submission to Scottish Government.

3.5 The Scottish Government have also requested that each Integration Authority submit a MAT Standards Implementation Plan to set out the actions being taken to meet the standards and respective criteria for each MAT standard.

3.6 The first plan as detailed in **Appendix 3** was submitted to the Scottish government on 06/10/2022 and provides a high level summary of the progress made to date and confirms that East Lothian are on track to meet the MAT standards 1-5 by April 2023.

3.7 The IJB are required to sign off this plan as one of the key delivery partners, alongside NHS Lothian and East Lothian Council.

3.8 East Lothian HSCP is also required to submit the first quarterly progress report by 21/10/2022 to cover the period July to September 2022.

4 ENGAGEMENT

4.1 The Scottish Government has established an implementation support team (MIST) which includes practitioners and people with lived experience. It is led by Public Health Scotland to support local areas scale up and implement the standards.

4.2 East Lothian is fully engaged with MIST in relation to data collection and delivery of standards. MIST also facilitated a local workshop event with key stakeholders to support teams to deliver and meet MAT standards and to agree quality Improvement Project Charter.

4.3 Local stakeholders within East Lothian are fully engaged in this process and will continue to engage and involve People with Lived Experience to ensure their experience and feedback informs delivery of treatment and support.

4.4 There will also be People with Lived Experience and family/carer representation on the QI project team.

5 POLICY IMPLICATIONS

5.1 This will be reviewed as standards are fully implemented.

6 INTEGRATED IMPACT ASSESSMENT

6.1 Integrated Impact Assessment (IIA) will be required to be carried out.

7 RESOURCE IMPLICATIONS

7.1 Financial

Funding Source 2022/26	Amount
MIST – Annual Funding	£156,115
MELDAP Match Funding	£68,385
Total	£224,500

7.2 Personnel

POST (Whole Time Equivalent)	Cost pa Funding Requirement	Duration
1 WTE Band 7 Clinical Nurse Specialists/NMP's	£63,500	4.5 yrs
2 WTE Staff Nurse (AFC Band 5)	£86,000	4.5 yrs
1.5 WTE Substance Use Staff (MELD)	£60,000	4.5 yrs
0.5 WTE Band 3 administrative support	£15,000	4.5 yrs
Total	£224,500	

8 BACKGROUND PAPERS

8.1 None.

Appendix 1 – MAT Standards

Appendix 2 – Benchmark Report

Appendix 3 – MAT Standards Implementation Plan

AUTHOR'S NAME	Gillian Neil
DESIGNATION	General Manager – Learning Disabilities, Mental health and Substance Use
CONTACT INFO	gneil@eastlothian.gov.uk
DATE	18/10/2022

MAT standards summary

Medication assisted treatment (MAT) is used to refer to the use of medication, such as opioids, together with psychological and social support, in the treatment and care of individuals who experience problems with their drug use.

The standards aim to improve access, choice and care and to ensure that MAT is safe and effective.

1. All people accessing services have the option to start MAT from the same day of presentation.
2. All people are supported to make an informed choice on what medication to use for MAT, and the appropriate dose.
3. All people at high risk of drug-related harm are proactively identified and offered support to commence or continue MAT.
4. All people are offered evidence-based harm reduction at the point of MAT delivery.
5. All people will receive support to remain in treatment for as long as requested.
6. The system that provides MAT is psychologically informed (tier 1); routinely delivers evidence-based low-intensity psychosocial interventions (tier 2); and supports individuals to grow social networks.
7. All people have the option of MAT shared with primary care.
8. All people have access to independent advocacy and support for housing, welfare and income needs.
9. All people with co-occurring drug use and mental health difficulties can receive mental health care at the point of MAT delivery.
10. All people receive trauma-informed care

NHS Board	ADP area	MAT 1 evidence, April 2022	MAT 2 evidence, April 2022	MAT 3 evidence, April 2022	MAT 4 evidence, April 2022	MAT 5 evidence, April 2022
Greater Glasgow & Clyde	West Dunbartonshire	Red	Amber	Amber	Amber	Amber
Highland	Argyll & Bute	Red	Red	Red	Amber	Amber
Highland	Highland	Red	Amber	Amber	Amber	Amber
Lanarkshire	North Lanarkshire	Red	Amber	Amber	Amber	Red
Lanarkshire	South Lanarkshire	Red	Amber	Amber	Amber	Amber
Lothian	Edinburgh	Amber	Amber	Amber	Amber	Amber
Lothian	Mid & East Lothian	Red	Amber	Amber	Amber	Amber
Lothian	West Lothian	Amber	Amber	Amber	Amber	Amber
Orkney	Orkney	Red	Amber	Amber	Amber	Red
Shetland	Shetland	Red	Amber	Red	Amber	Amber
Tayside	Angus	Red	Amber	Amber	Amber	Amber
Tayside	Dundee	Red	Amber	Amber	Amber	Amber
Tayside	Perth & Kinross	Red	Amber	Amber	Amber	Amber
Western Isles	Western Isles	Red	Amber	Amber	Amber	Amber

Table description: This table provides the detail of RAG status for each of MAT standards 1–5 for each ADP area. This information is presented visually in [Appendix 4: Maps](#).

This MAT Standards Implementation Plan has been produced to set out actions being taken in the Integration Authority area:

East Lothian Health and Social Care Partnership

The lead officer/post holder nominated to ensure delivery of this Implementation Plan is:

Name	Position/Job Title
Fiona Wilson	Chief Officer East Lothian IJB

This Plan is intended to ensure that services in the Integration Authority area are meeting the standards and the respective criteria for each standard as set out in the Drug Deaths Taskforce report: [Medication Assisted Treatment standards: access, choice, support](#) published in May 2021.

This Plan has been developed by partners and has taken account of the voices of lived and living experience. The Governance arrangements for local oversight of progress against this Plan, including the role of lived and living experience in this is as follows:

The plan has been developed alongside all ADP partners. East Lothian will continue to engage and involve People with Lived Experience to ensure their experiences and feedback informs delivery of treatment and support.

Governance arrangements

- East Lothian HSCP and partners will meet monthly as part of the Substance Use Business meeting to deliver actions identified against each MAT standard and criteria. This group will then report to a new MAT Implementation Meeting which will review progress against the agreed actions and will ratify a quarterly report which will highlight risks to delivery.
- Monthly meetings will be held with MELDAP, ELHSCP Operational Strategic Managers, Head of Service and Chief Officer
- 2 monthly update report will be presented by Operational Strategic Managers to the MH/SUS Change Board
- The quarterly report will be presented to East Lothian Senior Management Team for comment, to note progress comment and to address any risks to delivery.
- The report will be presented to the Chief Executive of East Lothian Council and NHS Lothian for agreement and sign off prior to submission to Scottish Government.

Timelines will be established once Scottish Government have confirmed submission dates.

This Plan has been signed off on behalf of the delivery partners by:

Name	Position	Delivery Partner	Date signed
Fiona Wilson	Chief Officer	East Lothian HSCP	Agreed in principle 2/10/22
Callum Campbell	Chief Executive	NHS Lothian	Agreed in principle 2/10/22
Monica Paterson	Chief Executive	East Lothian Council	Agreed in principle 2/10/22
Peter Murray	Chair of IJB	East Lothian HSCP	Agreed in principle 2/10/22
Iain Gorman	Head of Service/ Chair of MELDAP	East Lothian HSCP	

Appendices:

- Appendix 1: Key Delivery risks
- Appendix 2: Summary of recruitment plans:
- Appendix 3: Summary of developmental/ QI projects:
- Appendix 4: Glossary of abbreviations:

Background reading:

Evidence-based assessment of progress, MAT standards 1–5. April 2022, East Lothian [Supplementary information for the national benchmarking report on implementation of the Medication Assisted Treatment \(MAT\) standards. 2021/22 p375-390](#)

High Level Actions relating to the implementation of MAT within ELHSCP

MAT Standard 1	All people accessing services have the option to start MAT from the same day of presentation.	April 2022 RAG status: Amber. Implement changes agreed with MIST teams as part of TOC	
		September 2022 – Initially East Lothian were able to offer clinics three times a week, however, we are currently able to offer appointments slots each day for ORT/MAT assessment and treatment start/prescribing and from 31/10/2022 we will have increased capacity to offer same day access, 5 days for people who present or are referred from other agencies.	
Actions/deliverables to implement standard 1		Lead	Timescales to complete
Increase capacity of ESK Centre clinic to offer same day access, open 5 days a week, expanding to include outreach			
Recruitment of staff to East Lothian Substance Use Service (ELSUS)			
Funding confirmation		MELDAP	30 th April 2022
First round of Advertisement		ELSUS	31 July 2022
Recruitment to all posts		ELSUS	31 October 2022
Expansion in voluntary sector partner's (MELD) capacity			
Funding confirmation/ contracts in place		MELDAP	31 August 2022
First round of Advertisement		MELD	30 September 2022
Second round of advertisement (if needed)		MELD	31 Dec 2022
Test of Change – Contact Centre and Clinics			

Continue to develop single point of contact service model and robust pathways/protocols to ensure same day access if indicated or advice/guidance for other services/professionals.	MELD/ELSUS	31 October 2022
Standard operating procedures, improved pathways are in place, including outreach support for those people who can't access Esk Centre clinic	ELSUS/MELD	30 November 2022
Increased capacity at ESK Centre, 5 days a week clinic operational, supporting existing and self-referrals/new patients.	ELSUS	31 October 2022
Quality improvement charter agreed	NHL PH/ ELH&SCP/ MIST	31 October 2022
Monitoring and oversight		
Monthly Meetings with Chief Officers and Head of Service in EL	ELH&SCPMELDAP	31 October 2022
MAT 1 reporting submitted to SG/ PHS	NHSL PH	28 Feb 2023
Six month progress report	ELH&SCP/ NHSL PH	30 June 2023
Community Justice		
Ensure that those identified in police custody or courts as needing treatment have access to assessment and treatment start in situ, a direct pathway for continuity of prescribing and outreach to support continued engagement	MELDAP and various local partners alongside MIST	31 March 2023
Ensure, treatment can be initiated in HMP Edinburgh and that all people returning to East Lothian from any prison have continuity of care, this is managed through our current transform meeting/pathway	ELSUS and Community Justice	31 March 2023

MAT Standard 2	All people are supported to make an informed choice on what medication to use for MAT and the appropriate dose.	<p>April 2022. RAG status: Amber The key development in this area is roll out of Buvidal and evidence of people being involved in the type of medication that best meets their needs.</p> <p>September 2022 – within East Lothian, many elements of this standard have been met and buvidal is now considered as a treatment option for both new and existing/conversions within a primary and secondary care setting. Main priorities are to identify local community pharmacies within East Lothian to support with dispensing arrangements</p>	
Actions/deliverables to implement standard 2		Lead	Timescales to complete
Improve access to Buvidal			
Recruitment to ELSUS team			
Funding confirmation		MELDAP	31 December 2021
First round of Advertisement		ELHSCP	30 September 2022
Second round of advertisement (if needed)		ELHSCP	31 December 2022
Recruitment in place			
Clinic set up and pathway development			
Service procedures, pathways and protocols further developed and implemented and will include a pathway for those who do not wish psychosocial support in addition to MAT		ELSCP	31 Dec 2022
Clinics will continue to develop and expand to create additional capacity to accommodate new patients and ongoing reviews/administration of medication.		ELSCP	31 Dec 2022
Establish arrangements for community pharmacy Dispensing			
Pilot sites to be identified and set up within in East Lothian		REAS	31 March 2023
Evaluation of Pharmacy Buvidal dispensing		REAS	31 December and 31 March 2023
Systematically offer choice to existing patients in primary and secondary care			

Whilst pathways in place, they will be further developed to create additional capacity within both primary and secondary care	ELSUS	31 December 2022
Monitoring and oversight		
eAnnual MAT 2 reporting submitted to SG/ PHS	NHSL PH	Feb 2023
Ensure that those identified in Police custody or courts as needing treatment or those on DTTO have access to the full range of medications	MELDAP and various local partners alongside MIST	31 March 2023
Ensure that treatment options in HMP Edinburgh include all medications	MELDAP and various local partners alongside MIST	31 March 2023

MAT Standard 3	All people at high risk of drug-related harm are proactively identified and offered support to commence or continue MAT.	<p>RAG status: Amber East Lothian SUS Team and MELD have established an agreed approach involving outreach nurse and peer worker who will reach out to people who are identified as being in crisis and at high risk of drug related death and harms and those who have experienced NFO. Subject to the outcomes of the performance monitoring exercise, it is anticipated that the current work plus planned actions (including additional investment) will deliver the standard before April 2023.</p> <p>September 2022 – Existing approach/pathway continues to be developed to ensure robust follow-up within 72 hours timescale and now involves partners across East Lothian including housing and community justice. Priorities are recruitment to peer worker post and the development of outreach clinics.</p>	
Actions/deliverables to implement standard 3		Lead	Timescales to complete
Pathway development and standardising practice:			
Service procedures, pathways and protocols further developed across partners.		NHSL PH	30 Nov 2022
Existing EL NFO working group to make recommendation on practice including development of related performance metrics		MELDAP	30 Nov 2022
Develop package of support including Naloxone, IEP, mobile phone (with key contact numbers) for people including those experiencing NFO who do not want to engage with treatment services at point of follow-up.		ELSUS	30 Nov 2022
Expanding capacity and securing funding			
On-going recruitment of MELD worker to support outreach model			October 2022
Reaching high risk individuals in specific environments:			
Explore and agree a standard to improve joint working and training offer with homeless and other relevant services to support MAT 3 delivery in these settings		ELSUS/MELD	31 Dec 2022
Develop as test of change the use of Low Threshold Café's in areas of high DRD/NFO to engage with people at high risk of harm (Pennypitt)		ELSUS/MELD	31 Dec 2022

Develop and implement clear joint protocols (rapid response) for disengagement	ELSUS/MELD	31 Dec 2022
Continue transition meeting for People Prison Liberation	ELSUS/Housing and CJ	30 October 2022

MAT Standard 4	All people are offered evidence-based harm reduction at the point of MAT delivery.	RAG status: Amber: most interventions are available in most settings and it is anticipated that the current work plus planned actions will deliver the standard before April 2023. September 2022: all clinical staff have or will be trained in IEP, DBST and staff continue to offer naloxone training and awareness across East Lothian.	
Actions/deliverables to implement standard 4		Lead	Timescales to complete
BBV testing			
Survey to identify the proportion of staff trained (nursing and vol sec)		ELSUS/MELD	30 October 2022
Action plan for each team to bring it towards 100%		ELSUS/MELD	30 Nov 2022
Audit of case notes underway by BBV specialist to proactively identify those at risk of BBV's who have not recently been screened and to identify patient lost to follow-up. Themes to be identified and action plan to be developed		ELSUS/MELD	March 2023
Assessment of injecting risk (IEP)			
Survey to identify the proportion of staff who have completed injecting training (nursing and vol sec)		ELSUS/MELD	30 October 2022
Action plan for each team to bring it towards 100%		ELSUS/ REAS	30 Nov 2022
Naloxone and overdose awareness training			
Collate existing data re training offered and delivered and identify and prioritise target groups across East Lothian.		ELSUS/MELD	31 March 2023
Wound Care			
Set up a local clinic within East Lothian due to increase in demand		ELSUS/NHS Lothian	31 March 2023
Pathways			

Update pathways including documentation to ensure all patient is offered harm reduction at point of assessment, reviews and follow-up	ELSUS/MELD	31 Jan 2023
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MAT Standard 5, & 7 and Treatment target:	All people will receive support to remain in treatment for as long as requested and will have the option of MAT shared with Primary Care; increase by 9% the numbers on Opiate Replacement Treatment by April 2024	RAG status: Amber Current caseloads within ELSUS are 256 in core service and 255 in primary care. The assertive outreach support in GP practices already in place should continue to transfer people to primary care. East Lothian will work to engage an increase in 9% of individuals in to treatment by April 2024, within the core service, which is an average 23 new individuals.
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Actions/deliverables to implement standard 5, 7 and Treatment Target	Lead	Timescales to complete
Expand and diversify workforce in locality teams		
Recruitment in ELSUS		
Funding confirmation	MELDAP	31 August 2022
First round of Advertisement	ELSUS	30 September 2022
Second round of advertisement (if needed)	ELSUS	31 Dec 2022
Expansion in voluntary sector partner's (MELD) capacity		
Funding confirmation/ contracts in place	MELDAP	31 August 2022
First round of Advertisement	MELD	30 Sept 2022
Second round of advertisement (if needed)	MELD	31 Dec 2022
Develop new models of care through tests of change		
Consider ORT review clinic similar to buvidal clinic for those individuals who do not want access to psychosocial element of treatment and support.	ELSUS	31 December 2022

Develop as test of change the use of Low Threshold Café's in areas of high DRD/NFO to engage with people at high risk of harm (Pennypitt)	ELSUS/MELD	31 Dec 2022
QI charters/ baseline measures	ELSUS with support from NHSL PH and MIST	30 November 2022
QI charters/ baseline measures	ELHSCP with support from PCFT, NHSL PH and MIST	30 November 2022
Improved throughput, case management and role delineation		
QI charters/ baseline measures	ELHSCP with support from NHSL PH and MIST	30 November 2022

MAT Standard 6	The system that provides MAT is psychologically informed (tier 1); routinely delivers evidence-based low intensity psychosocial interventions (tier 2); and supports individuals to grow social networks.	NHS Lothian Psychology have developed an implementation and delivery plan and policy to ensure all staff receive appropriate training to deliver psychologically-informed care and structure psychosocial interventions. A number of actions are already complete eg local steering group established and an implementation plan is in place across NHS Lothian.
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Continue to implement plan developed by NHS Lothian Clinical Psychology as noted below:

Actions/deliverables to implement standard 6	LEAD	Timescales to complete
Establish required MAT 6 strategic leadership/steering group with appropriate membership and function	NHSL Clinical Psychology	Complete
Develop an overall MAT 6 delivery plan for ELHSCP	NHSL Clinical Psychology	Complete

Develop service specific delivery plans for East Lothian HSCP (including a framework for evidencing and reporting implementation progress)	NHSL Clinical Psychology	31 Dec 2022
To carry out a baseline audit of current service delivery in relation to the key elements of Mat 6. This includes: a) Staff survey b) Service user survey c) Trauma informed walk round – Esk Centre	NHSL Clinical Psychology	Complete 31 October 22
Initiate ongoing process of service development/ improvement to ensure the service culture and environment is psychologically-informed	NHSL Clinical Psychology	31 March 2023
Develop a workforce development plan clearly outlining MAT 6 training and supervision requirements and plans for delivery.	NHSL Clinical Psychology	Complete
Make available training, coaching and supervision for staff in key evidence-based MAT 6 psychosocial interventions	NHSL Clinical Psychology	Complete
Make available regular reflective practice space for staff working across all service areas	NHSL Clinical Psychology	31 Dec 2022
Ensure appropriate staff have psychosocial interventions delivery, with protected time to deliver (and attending coaching/supervision)	NHSL Clinical Psychology	31 Dec 2022
Develop resources (tools, manuals etc) to support staff to deliver MAT 6 psychosocial interventions	NHSL Clinical Psychology	31 Dec 2022
Establish a collaborative MAT 6 care planning process which has the service users' views at the centre.	NHSL Clinical Psychology	31 Dec 2022

	Continue to work with third sector providers who support families, carers and children who are affected by substance use to ensure that they receive appropriate psychological support and to address any associated trauma.	ELHSCP and third Sector Organisations	31 March 2022
MAT Standard 7	All people have the option of MAT shared with Primary Care.	Within East Lothian, the primary care substance use service was implemented in May 2019 and this model is well established within 12 out of 14 GP practices across East Lothian MIST are to support East Lothian to write this up to promote good practice. Up and running and to write up model with support from MIST/ finalise SOP etc/ commenced May 2019. Ormiston – look to develop more rural areas/outreach.	
	With support from MIST, write up model and promote good practice	ELSUS with support from MIST	28 Feb 2022
	Further develop model to develop more rural areas/outreach and encourage x 2 GP practices who chose to opt out of model to engage	ELSUS	31 March 2023

MAT Standard 8	All people have access to independent advocacy and support for housing, welfare and income needs.	
Actions/deliverables to implement standard 8		Timescales to complete
Continue provision of Independent Advocacy through CAPS and Access to Industry, access to income maximisation services in locality teams and primary care; continue to offer voluntary sector case management to all secondary care patients; provide support for families (through CIRCLE/COEL/MELD)		Ongoing
Publish leaflet detailing MAT rights and the organisations who will advocate and support patients to receive them		Feb 2023
Undertake development with treatment teams to ensure that pathways to these services are understood by all frontline practitioners		March 2023

MAT Standard 9	All people with co-occurring drug use and mental health difficulties can receive mental health care at the point of MAT delivery.	People have the right to ask for support with mental health problems and to engage in mental health treatment while being supported as part of their drug treatment and care.
Within East Lothian, as part of the Adult MH review, the interface between SUS and MH was identified as an area for improvement and this pathway is being reviewed and developed to improve service delivery and access to MH care at point of MAT delivery.		31 March 2023

MAT Standard 10	All people receive trauma informed care.	
Continue to Implement plan developed by NHS Lothian Clinical Psychology as noted below:		
Actions/deliverables to implement standard 10	LEAD	Timescales to complete

Establish required MAT 10 strategic leadership/steering group with appropriate membership and function	NHSL Clinical Psychology	Complete
Develop an overall MAT 10 delivery plan for Mid HSCP	NHSL Clinical Psychology	Complete
Develop service specific delivery plans for East Lothian HSCP (including a framework for evidencing and reporting implementation progress)	NHSL Clinical Psychology	31 Dec 2022
To carry out a baseline audit of current service delivery in relation to the key elements of Mat 6. This includes: d) Staff survey e) Service user survey f) Trauma informed walk round – Esk Centre	NHSL Clinical Psychology	Complete Dec 2022 31 October 22
initiate a process of continuous quality improvement underpinned by the principles of trauma informed care	NHSL Clinical Psychology	31 March 2023
Initiate a process where service users are continually asked for their views on service delivery and areas for improvement	NHSL Clinical Psychology	31 March 2023
Offer appropriate training supervision for all staff to work safely and effectively with trauma	NHSL Clinical Psychology	Complete
Develop a wellbeing planning tool and activities (e.g. staff mindfulness groups) to support staff health and wellbeing	NHSL Clinical Psychology	31 March 2023
Appropriate screening tools to be identified for use routinely (as appropriate) so that trauma is recognised	NHSL Clinical Psychology	31 March 2023

Develop resources (tools, manuals etc) to support staff to deliver MAT 6 psychosocial interventions	NHSL Clinical Psychology	31 Dec 2022
Establish a collaborative MAT 6 care planning process which has the service users' views at the centre.	NHSL Clinical Psychology	31 Dec 2022

Appendix 1: Key Delivery risks

Implementation, Performance management and governance

Implementing the plan requires rapid decision-making and sufficient management capacity to change services quickly. Mitigations for this risk will include strong management support and direct oversight by senior managers, incorporated into the monthly managers meetings.

Workforce expansion and development:

The key professional groups needed to deliver the expansion plan are Mental Health Nurses, Prescribers (medical and non-medical) and recovery practitioners and Peer support workers and peer development peer workers. Mitigations for this risk might include engagement with wider workforce development processes within partner organisations, if recruitment poses challenges.

Premises and facilities

Challenges created by the current premises include:

- Insufficient office space for expanding staff and insufficient delivery space for patient numbers – limited room capacity restricts how flexible services can be (essential for our patient group)

Resources and capacity:

Although the recently allocated £224,500 (MIST £156,115 MELDAP £68,385) is a welcome expansion (and, as noted above, probably as large an increase in capacity as could be implemented immediately), it is not clear that this will be sufficient to relieve current pressures and meet increased expectations. Mitigation will require ongoing monitoring of progress and pressures.

Reporting and data gathering:

A system of quarterly reporting has been put in place. It requires evidence of continuous improvement toward MAT standards 1-5 and towards the target of increasing numbers of people in ORT. Mitigation would include investment in systems improvement and/or admin attached to teams on a non-recurring basis. Potential addition of a data analyst within MELDAP to support

Inaccurate predictions of demand: the plan represents a significant lowering of the threshold for entering treatment. This is exactly the intended effect and is very necessary. However, there is the risk that improving access will result in greater numbers coming forward than can be safely treated. Conversely, the additional capacity may not result in additional presentations (risking inefficient use of resources and less public health impact). These risks have been mitigated by planning and will be carefully monitored, with additional measures to engage patients if needed.

National Care Service:

Consideration should be made in relation to the NSC Bill which is likely to be finalised in the summer in 2023 and how this may impact the delivery of local services and plans as the NCS is established.

Appendix 2: Summary of recruitment plans:

Permanent additional recruitment:

Professional group	Number to be recruited (WTE)
Expanding capacity	
B7 Clinical Nurse Specialist NMP	1
Band 5 RMN	2
MELD staff	1.5
Band 3 admin	0.5

Additional non-recurring funding

All of the core posts are to be advertised through a single recruitment process (in each organisation) by September 2022, readvertised as needed in December 2022.

Additional non-recurring funding for staffing or other uses is available within the MELDAP budget. All partners, particularly East Lothian HSCP are able to have requests for this funding considered where it would achieve MAT standards.

Appendix 3: Summary of developmental/ QI projects:

All of these are to be delivered alongside the expansion of staffing numbers and reported through the ?

Key developmental projects:	Lead operational team(s) delivering	Lead QI support
Same day access	East SUS MELD	MIST
Implementation of the Buvidal pathway	EAST SUS	
Increasing capacity		
<ul style="list-style-type: none"> Improved throughput, case management and role delineation 	EAST SUS MELD	MIST/ project manager
Improving access to physical healthcare for patients of the hubs	All teams	MIST

Appendix 4: Glossary of abbreviations:

Abbreviation	Description
CJ	Community Justice
DTTO	Drug Treatment and Testing Order
East SUS	East Lothian Substance Use Service
DBST	Dried Blood Spot Testing
ELHSCP	East Lothian Health and Social care Partnership
MELD	Mid and East Lothian Drugs
MELDAP	Mid and East Lothian Drugs and Alcohol Partnership
MIST	MAT standards Implementation Support Team (Public Health Scotland)
ORT	Opiate Replacement Therapy
QI	Quality Improvement
REAS	Royal Edinburgh and Associated Services
PCFT	Primary Care Facilitation Team
RGN	Registered General Nurse
RMN	Registered Mental Nurse

Lead Contacts of organisations involved in implementation:

Organisation	Contact
MELDAP	Martin Bonnar <Mbonnar@eastlothian.gov.uk
Head Service	Iain Gorman <Iain.Gorman@nhslothian.gov.uk >
General Manager	Gillian Neil <gneil@eastlothian.gov.uk>
MIST	Dave Taylor <david.taylor28@nhs.scot>
NHSL PH	James Shanley <James.Shanley@nhslothian.scot.nhs.uk>;
REAS (HRT)	Jim Sherval <Jim.Sherval@nhslothian.scot.nhs.uk>;
REAS (PCFT)	Judith Craven <Judith.Craven@nhslothian.scot.nhs.uk>; David Ewart <David.Ewart@nhslothian.scot.nhs.uk>
MELD	"Dave Gasparini" <davegasparini@meld-drugs.org.uk>
Clinical Psychology	Peter Littlewood ,peter.littlewood@nhslothian.scot.nhs.uk>



SBAR – IJB Directions Policy

Date: 27th October 2022

Completed by: Claire Goodwin

Area: Planning and Performance

<p>Situation</p>	<p>East Lothian Integration Joint Board’s existing Directions Policy has been in place since 2015, predating more recent guidance published by the Scottish Government around good practice in the development and management of directions by IJBs.</p> <p>East Lothian IJB members agreed with the proposal to develop a new IJB Directions Policy at an IJB Development Session held in June 2002.</p>
<p>Background</p>	<p>The Public Bodies (Joint Working) (Scotland) Act 2014 requires Integration Joint Boards to issue directions to their constituent Local Authority and Health Board in relation to the functions and budgets delegated to them.</p> <p>Since the introduction of the Act, a Good Practice Note was issued in 2016 and Statutory Guidance published in 2020.</p>
<p>Assessment</p>	<p>A review of current IJB directions is due to take place on the back of the publication of East Lothian IJB’s Strategic Plan for 2022-2025 (agreed at a meeting of the IJB in September 2022). The development of a new Directions Policy is timely in terms of it informing the planned review of directions.</p> <p>Implementation of the new Directions Policy will help to ensure that the revised set of directions, and the approach taken to the ongoing development and management of directions, reflects good practice / statutory guidance.</p> <p>The key principles underpinning the approach outlined in the draft Directions Policy include:</p> <ul style="list-style-type: none"> • Directions will be developed through wider engagement and discussion at Change Board, Strategic Planning Group and Officer levels, as well as through discussion with East Lothian Council and NHS Lothian. • The full set of directions will be reviewed at key points (e.g., when the budget is set / a new IJB Strategic Plan is published), but consideration will also be given to introducing new or revising existing directions throughout the year. • Directions will be linked to decisions made by the IJB. The IJB report templates already prompts consideration of whether a new direction should be introduced / an existing one revised – further emphasis will be placed on this. • A new template will be used for formulating directions. This will reflect the principles outlined in the Directions Policy.



	<ul style="list-style-type: none"> • Progress measures will be developed for individual directions. These measures will form part of a wider Performance Framework. • Responsibility for overseeing the delivery of each direction will be assigned to Change Boards / the Strategic Planning Group and six-monthly updates will be submitted to the IJB.
Recommendation	<p>East Lothian IJB is asked to:</p> <ul style="list-style-type: none"> • Consider the content of the appended Draft Directions Policy. • Approve adoption of the Draft Directions Policy.
Further Information	<p>Direction from integration authorities to health boards and local authorities: good practice guidance note, Scottish Government, 2016</p> <p>Directions from integration authorities to health boards and local authorities: statutory guidance, Scottish Government, 2020</p>

East Lothian Integration Joint Board - Draft Directions Policy

Purpose of this Policy

This policy sets out East Lothian Integration Board's approach to issuing and managing directions. It has been developed in line with the requirements set out in the Public Bodies (Joint Working) (Scotland) Act 2014 and subsequent Statutory Guidance produced by the Scottish Government.

A summary of the process outlined in this policy and a template for issuing and monitoring the delivery of directions are included as appendices.

Context and Background

The Public Bodies (Joint Working) (Scotland) Act 2014 (the Act) requires Integration Joint Boards to:

- Develop a Strategic Plan setting out how they will plan and deliver the integrated functions and budgets delegated to them.
- Issue directions to their constituent authorities (Local Authorities / Health Boards) in relation to the delivery of each delegated function.

The Scottish Government subsequently issued a [Good Practice Note](#) in 2016 and [Statutory Guidance](#) in 2020 aimed at improving practice in relation to the use of directions by IJBs.

About Directions

Directions are issued by IJBs providing instruction to their constituent authorities regarding the delivery of delegated functions, along with specification of the associated budget for delivery.

The following description provides a useful summary:

'Put simply, directions are the means by which an IJB tells the Health Board and Local Authority what is to be delivered using the integrated budget and for the IJB to improve the quality and sustainability of care, as outlined in its strategic commissioning plan.'¹

Directions provide a mechanism for the operational delivery of the IJB Strategic Plan and for instructing the implementation of decisions made by the IJB. Used effectively, directions provide clarity on responsibility and accountability for delivery of delegated functions and monitoring of their delivery.

Under the 2014 Act, IJBs are required to issue a direction for each function delegated to them. Directions are binding on constituent authorities and remain in place until varied, revoked or superseded.

¹ [Health Health and Social Care Integration - Statutory Guidance - Directions from Integration Authorities to Health Boards and Local Authorities \(www.gov.scot\)](#)

Our Approach

The following principles, based on the Scottish Government's 2020 Guidance, are reflected in East Lothian IJB's approach to issuing and managing directions.

1. Whilst the decision to issue a direction lies with the IJB, wider engagement and discussion will inform the development and subsequent content of the direction. This will potentially include discussion at Change Boards and the Strategic Planning Group, as well as discussion at Officer level. Engagement with NHS Lothian and East Lothian Council will also take place to ensure they are supportive of what is proposed.
2. There are a number of key points where IJB directions will be fully reviewed, with new directions potentially being issued and consideration given to revising or retiring existing ones. This includes after the setting of the IJB budget and following the publication of a new or updated IJB Strategic Plan. However, directions can also be issued or revised throughout the year in relation to developments / IJB decisions.
3. Directions will be directly linked to decisions made by the IJB, with a hyperlink to the report containing the relevant IJB decision included in the direction outline. This will allow all parties to readily view the context and rationale behind the development of the direction.
4. The IJB report template will continue to include a prompt to authors to consider whether a new direction / amendment to an existing direction is necessary. On receipt of reports, the Planning and Performance team will check to ensure that due consideration has been given and an appropriate recommendation made.
5. It is also important to ensure that directions are not issued unnecessarily, that their use is proportionate, and that they do not destabilise hosted, or partner provided services.
6. Directions will be developed using a template to ensure that they reflect the Directions Policy and include the details required to allow them to be monitored effectively (see appendix 1). This will be appended in draft form to the IJB report recommending issuing / revising a direction.
7. Directions will include details of the associated budget available to East Lothian Council, NHS Lothian or both to support delivery of the direction (as determined by the IJB). Where the direction cuts across more than one function or service, financial allocation for each of these should be specified.
8. Individual directions will be linked to the IJB strategic objectives and delivery priorities contained in the Annual Delivery Plan (which sets out plans to deliver the IJB Strategic Plan). Conversely, the directions template includes a requirement to identify which strategic objectives / delivery priorities the direction contributes to.
9. Progress measures will be developed for directions and will form part of the wider East Lothian HSCP Performance Framework.

10. Responsibility for overseeing the delivery of individual directions will be assigned to one of the East Lothian Change Boards or to the Strategic Planning Group (SPG). Change Boards will provide progress updates to the SPG and make recommendations for any revision / retreat of existing directions. Change Boards may also make recommendations to the SPG for the issuing of new directions.
11. An update on the full set of IJB directions will be submitted to the IJB every six months as part of a wider Annual Delivery Plan progress report.
12. Further discussion is due to take place with regards to directions related to hosted and set aside services. Once discussion has been concluded, the Directions Policy will be updated accordingly.

Implementation of Directions

Yearly, or when new directions affecting partners are developed, the Chief Officer will write to NHS Lothian and East Lothian Council to inform them of active and/or new directions. These partners have a legal responsibility to comply with and implement the directions issued to them by East Lothian IJB. If there are any issues with delivery of any direction by partners, or where further clarification is needed, partners should bring these to the attention of the Chief Officer in the first instance.

The Chief Officer will seek to resolve any issues and / or provide clarification, involving the IJB Chair or Vice Chair where appropriate. If resolution proves difficult, East Lothian IJB will be made aware, and the dispute resolution process outlined in the IJB Integration Scheme will be initiated if needed.

Review of Directions Policy

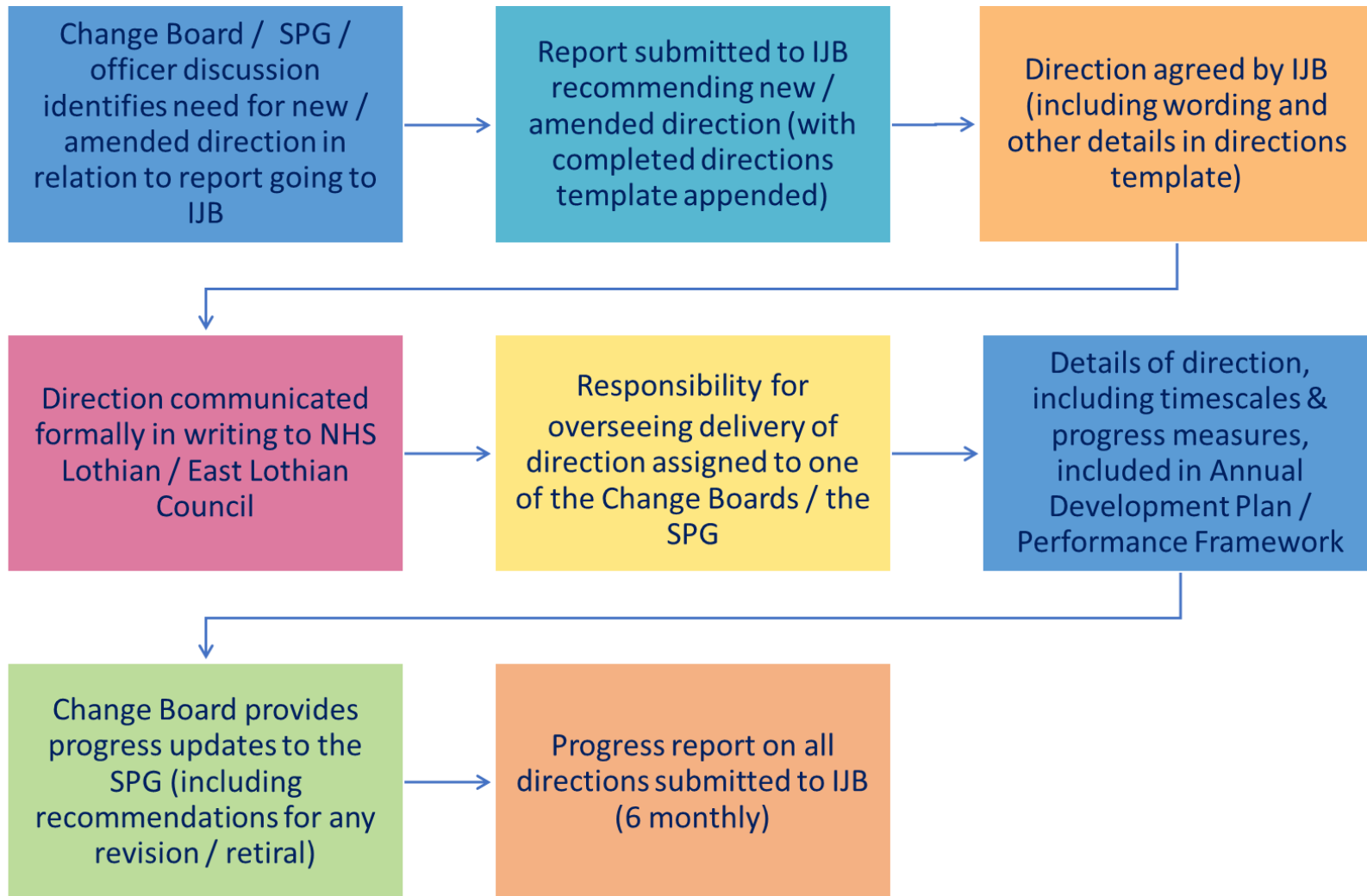
This Directions Policy will be reviewed every two years or sooner if new guidance is issued by the Scottish Government or significant changes take place in relation to the health and social care strategic context.

Date of policy approval:

Date of implementation:

Date of review:

Appendix 1 - Process for Issuing / Managing Directions



Appendix 2 - Directions Template

Title of direction and reference number	Short title, reference number to be provided by Planning & Performance.
Date direction issued by IJB	Date of IJB meeting direction agreed at.
Direction to	East Lothian Council and / or NHS Lothian.
Does this direction supersede, amend or cancel a previous direction? If yes, include reference number	Reference number can be provided by Planning & Performance.
Services / functions covered	List all services / functions that are relevant.
Full text of direction	Detailed description of what is required.
Link to relevant IJB report	Insert hyperlink
Budget allocation from IJB to carry out direction	Financial information on resource allocated to ELC, NHS Lothian or both to carry out direction. Where direction cuts across a number of functions financial allocation for each should be specified.
Which IJB Strategic Objectives / Delivery Priorities does the direction contribute to?	This will allow us to link the direction to the relevant part(s) of the Annual Delivery Plan.
Progress measures and timescales	Measures to demonstrate progress and / or completion – may include key milestones and completion measures – must include timescales. Measures likely to be task / action related.

