



MINUTES OF THE MEETING OF THE EAST LOTHIAN INTEGRATION JOINT BOARD

THURSDAY 28 MARCH 2024
VIA DIGITAL MEETINGS SYSTEM

Voting Members Present:

Councillor S Akhtar (Chair)
Mr A Cogan
Ms E Gordon
Mr G Gordon*
Ms F Ireland
Councillor L Jardine
Councillor C McFarlane
Councillor G McGuire*

Non-voting Members Present:

Ms M Allan	Mr D Binnie
Ms L Byrne	Ms S Gossner
Mr D Hood	Mr D King
Dr C Mackintosh	Ms M McNeill
Mr T Miller	Ms F Wilson

Present from NHS Lothian/East Lothian Council:

Ms L Berry	Mr P Currie
Ms C Goodwin	Ms J Jarvis
Ms L Kerr	Mr J Megaw
Mr N Munro	Ms G Neill
Ms I Nisbet	Mr G Whitehead

Clerk:

Ms F Currie

Apologies:

Dr P Cantley (*substitute)
Councillor J Findlay (*substitute)
Dr P Conaglen
Dr J Hardman

Declarations of Interest:

None

1. MINUTES OF THE MEETING OF THE EAST LoTHIAN IJB ON 22 FEBRUARY 2024 (FOR APPROVAL)

The minutes of the IJB meeting on 22 February were approved.

2. MATTERS ARISING FROM THE MINUTES OF 22 FEBRUARY

The following matters arising were discussed:

Item 5 (page 3) – The Chair thanked the Communications Team for raising awareness of the role of Carer representative on the IJB and welcomed the re-appointment of David Binnie in this role.

3. CHAIR'S REPORT

The Chair advised members that the legislation for the new National Care Service was now at Stage 1 within the Scottish Parliament and staff had been employed by the Government to support the setting up of the NCS. She had attended a recent CoSLA meeting where concern was expressed about the draft legislation, and oversight and funding issues linked to the NCS. She agreed to share the latest updates on this issue with IJB members.

The Chair said she had recently attended a briefing on dental services within the Lothians and she agreed to circulate a copy of the presentation with IJB members.

The Chair also reported on her attendance at a recent meeting of the Association of Day Centres.

4. REVIEW OF 2023-2024 FINANCIAL OUT-TURN

A report was submitted by the Interim Chief Finance Officer presenting to the IJB: an update on the projected financial out-turn for 2023/24; and a review of the IJB reserves.

David King presented the report outlining the forecast year-end position and likely overspend of £3.8M. He referred to ongoing financial challenges and provided details of the particular pressures within the Set Aside budget. He advised that the forecast overspend had been built into the budget-setting for 2024/25. He informed members that the IJB had £4.3M in its general Reserves and, in line with the Integration Scheme, the IJB was now being asked to consider its position on how to mitigate the forecast overspend.

Mr King responded to questions from George Gordon. He advised that there was no minimum requirement for Reserves but that the IJB had a 2% target which equated to approximately £3.5M. Should the partners be unable to provide additional support, the IJB should consider the use of its Reserves to mitigate financial pressures. He indicated that discussions had taken place with the partners, and it was clear that they were both in very challenging financial situations. Before further negotiations could progress, it was important to understand the IJB's position on this matter.

Replying to questions from Fiona Ireland, Mr King confirmed that there was an improvement in the Set Aside position as a result of implementing the new model for calculation of use. However, this applied to 2024/25 onwards and would not impact the 2023/24 year-end position. He also outlined the elements which contributed to the

overspend in the social care budget and agreed provide a more detailed analysis of the figures.

Ms Ireland agreed that this would be helpful. She also stated that, in her view, balancing the year-end position including an overspend which was a compound effect of not receiving full funding of the social care budget year on year, was an unacceptable use of the IJB's Reserves.

Councillor Jardine expressed concern that there had not been the opportunity to have a discussion around the potential difference of opinion that may exist between the partners, and that this may leave the IJB in a difficult position. She also noted that there was no clear recommendation in the report and asked Mr King which option he would support.

Mr King acknowledged the point and confirmed that discussions would continue with a view to agreeing a way forward. While he could not recommend a particular option, he reiterated the importance of supporting the partners as far as possible.

Replying to a final question from Andrew Cogan, Mr King advised that should the IJB agree to use Reserves to mitigate the year-end position this would leave a balance of approximately £600,000 remaining in the Reserves.

The Chair said it was clear that the current financial situation was very challenging for both partners, and she felt it was unlikely that they would be in a position to offer additional support to the IJB to help balance the 2023/4 year-end position.

A vote was taken via roll call and recommendations 2.1 i and ii were approved unanimously. The roll call vote on recommendation 2.1 iii resulted in an equality of votes (4:4) between NHS Lothian and East Lothian Council voting members. In line with the IJB's Standing Orders (SO 9.9), the Chair gave direction to the Chief Officer and the Interim Chief Finance Officer to review this matter, with the aim of addressing any concerns, and developing a proposal which the IJB could reach a decision on at a future meeting.

Decision

The IJB agreed to:

- i. Note the current 23-24 out-turn forecast.
- ii. Note the projected position for the IJB's reserves.

The IJB could not reach an agreed position on the utilisation of the IJB's general reserves (rec iii). In line with the IJB's Standing Orders, this matter will be reviewed and brought back to the IJB at a future date.

5. BUDGET OFFER FROM THE IJB'S PARTNERS 2024/25

A report was submitted by the Interim Chief Finance Officer laying out the budget offers from the IJB's partners (East Lothian Council and NHS Lothian) for 2024/25.

Mr King presented the report outlining the offers from both the Council and NHS Lothian. He referred to the requirements set out by the Scottish Government in relation to these offers, and reminded members of the tests of adequacy and fairness which were applied when considering both offers. Having considered these tests, it was his opinion that both tests were met, and he recommended that the IJB accept the budget offers for 2024/25 from both partners.

Mr King responded to a question from the Chair outlining how the increasing demographic pressures within East Lothian were factored into budget calculations.

Mr Cogan welcomed the two budget offers noting the enormously challenging financial environment for both partners.

The Chair concurred with these remarks. She added that, when considering these offers, the IJB needed to be mindful of the very challenging level of financial risk and sustainability facing both partners.

A vote was taken via roll call and the recommendations were approved unanimously.

Decision

The IJB agreed to:

- i. Note the proposed budget offers from the partners.
- ii. Accept the 2024/25 budget offers from both partners as detailed in the report.

6. BUDGET-SETTING 2024/2025

A report was submitted by the Interim Chief Finance Officer setting out the 2024/25 budget setting process and work undertaken to date; a proposed balanced budget for the IJB based on a range of savings proposals; and noting that the IJB must set a balanced budget before the start of the new financial year.

Mr King presented the report outlining the background and recommendations. He provided details of the consultation and discussion which had taken place in drawing up the proposals, and the role of service re-design would play in these proposals to address the forecast budget deficit. He referred members to the proposals set out in the appendices to the report and how these would assist in addressing the forecast budget deficit. He confirmed that all the planned efficiencies would be monitored in year and a report brought to the IJB in September. In addition, further work would be undertaken on the IJB's 5-year financial plan and report would be presented to the IJB's next meeting.

Fiona Wilson advised members that officers had worked hard to develop proposals which would have the least impact. She said that people were at the heart of all that the IJB and the ELHSCP did, and she acknowledged that any proposed closures were emotive and difficult decisions. There was, however, a need to ensure that services across the county were sustainable and while there were risks associated with some of the proposals, work had been done to ensure that they were deliverable. She informed members that the consequences of not approving a balanced budget would mean that the IJB would have to take more reactive decisions throughout the year leaving people open to potentially greater risk from restrictions on spending, e.g., in relation to care packages.

The members debated the proposals at length and officers responded in detail to a variety of questions.

Ms Wilson, Laura Kerr, Isobel Nisbet and Jamie Megaw responded to questions from Thomas Miller. They provided details of the assessments undertaken around acute bed usage, admissions and use of care home beds to assess the potential impact of the proposed closures on the front door of the Royal Infirmary, Edinburgh. They confirmed that there were a mixture of self-funding and local authority funded residents within Blossom House and the difference in costs between the two. Ms Wilson agreed to

provide figures on the cost of recent renovations to Belhaven Hospital and confirmed that, as a capital asset, the buildings would be returned to NHS Lothian following the closure of services. Mr Megaw advised that if Belhaven was closed, the vaccination service could use the Community Hospital, Edington Hospital or the primary care centre in Musselburgh. He also confirmed that they would seek to mitigate travel issues through the use of the RVS transport service and other transport services.

Replying to questions from Maureen Allan, Ms Wilson advised that the individual proposals had been reviewed in detail at the Strategic Planning Group meeting and a recent development session for IJB members. Ms Kerr stated that the proposed cuts affecting community and third sector groups were not disproportionate to cut in other areas. Officers were working with providers to review the impact of cuts to services. Mr King indicated that while there were no alternative solutions currently on the table, officers were always willing to hear suggestions from members. Ms Wilson acknowledged Ms Allan's concerns but pointed out that the proposals which allowed the IJB to reduce spend in a planned way, and one which created the least impact.

Ms Allan said that a 54% reduction in funding for link workers was unpalatable and unacceptable and she felt that not enough consultation had taken place within communities. She also felt that the Integrated Impact Assessment process had been rushed. She concluded that, going forward, conversations needed to take place at a much earlier stage to mitigate losses within communities.

In response to questions from Mr Gordon, Ms Wilson acknowledged that moving care home residents from Belhaven to the Community Hospital was not seen as a long-term solution, but it was necessary due to health and safety concerns around the Belhaven building. Gillian Neil advised that her team had been working alongside the Care Inspectorate, staff, and relatives, to make the new inpatient environment as homelike as possible.

Councillor Jardine noted that although the IJB had been discussing the challenging financial position and impact on budgets for some months, these proposals appeared to have been developed quite recently. She asked what assurances could be taken from the integrated impact assessment and risk assessment processes, and about the impact of the proposed efficiency measures, particularly the closure of some services. She also expressed the hope that, should the closure of sites be agreed, the IJB would work with the Partners to ensure that these assets were not simply sold off for housing.

Mr King acknowledged the timing concerns and said that these would be taken on board when planning for future years. Ms Wilson advised that the proposals had been based on discussions and data, e.g., the volume and usage of care home beds. However, she accepted that there was an element of risk where decisions would impact people, be it service users or staff. However, she felt that the proposals were a better option than being faced with a growing funding gap.

Mr Megaw provided further background on the decisions relating to the prescribing budget, the factors that influenced the figures. He acknowledged that the proposed saving was a challenging target and would require changes in procurement at national level, as well as changes to decision making at local level. He also accepted the need to encourage more social prescribing.

David Hood confirmed that no redundancies were expected from NHS Lothian or East Lothian Council as a result of the proposals, and staff would be supported should there be changes to their current job descriptions.

Ms Kerr agreed that the proposed closures in North Berwick and Dunbar were difficult given the level of emotion expressed by residents and families. However, it was

necessary to ensure that the provision of care home beds across the county met required standards and matched with local need. In order to do this, changes to current provision were necessary and the proposals had been developed following consultation with residents, families and staff.

Ms Neill added that during discussions with staff they had acknowledged that the buildings were old and not always conducive to meeting the needs of residents. Lack of sufficient numbers of bathrooms and suitability for hoists, etc., meant that the buildings could not offer residents a 'home for life'.

Marilyn McNeill suggested that the proposals represented a betrayal of trust for the communities in Dunbar and North Berwick and pointed out that a lack of local care home or palliative care beds went against the IJB ethos of care close to home. She raised the issue of mitigations around transport provision, for those now faced with travelling to the community hospital. She also noted that the integrated impact assessment for link workers seemed to make the case for retaining the current level of provision.

Ms Kerr responded to Ms McNeill's questions referring to previous points made on the work around service re-design and the reasons for proposing closures at this time. She said that while the changes were happening quicker than expected, they were in line with the results of engagement and research work already undertaken. She acknowledged the issues around transport and advised that officers were working with the partners to address the issues and improve transport links. On the issue of link workers, Ms Kerr pointed out that efficiencies were required to address the financial gap and that alternative services could be used to build on the link worker service.

David Binnie observed that many of the proposals would impact on carers. He hoped that the integrated impact assessments would assist in identifying and mitigating much of the impact, but he raised concern about unintended consequences as a result of the proposed changes and mitigations. Should the IJB decide to proceed with these proposals, he recommended that officers monitor the mitigation measures and seek to identify any unintended consequences, and report these back to the carer change board. He added that doing so would provide some assurance to the carer community.

Mr Kerr agreed to discuss this further with officers and agreed that the impact of any changes would be monitored and brought back to the change board for review.

Mr Binnie also asked whether the assurances around no redundancies within NHS Lothian and the Council, could be extended to those in the voluntary sector. Ms Kerr advised that they did not have the ability to influence the terms and conditions of other employers but that they would support these organisations as far as possible in understanding the impact of any changes.

Mr Cogan offered some general observations. He pointed out that these were proposals that no one wanted to bring forward but that were a necessary response to very exceptional circumstances. He commended the professional way in which officers had responded to these circumstances. He also reflected that integrated impact assessments were not static and would continue to be monitored and reviewed going forward. He felt assured that there had been due diligence, and that officers were as confident as they could be that the proposals would deliver the required outcomes.

Ms Allan asked further questions on the mitigations in place to ensure there was no compromise to the effectiveness of existing community services. She also commented that any cuts would have a significant impact on staff morale within the voluntary sector.

Ms Wilson said that the proposals represented a balance between maintaining service delivery and performance, managing financial constraints and delivering outcomes.

Despite the range of research, engagement and risk and impact assessments undertaken, she acknowledged that these were very difficult decisions. However, she reiterated that officers were trying to be as transparent as possible and to ensure that these decisions represented the least bad options. She hoped that today's discussion had demonstrated officer's commitment to continuing to engage and understand the ongoing impacts of any changes.

Elizabeth Gordon commented that the proposals had been thoroughly assessed, consulted on and discussed by members. The fact remained that the IJB could not spend money it did not have, and it was necessary to balance the budget. The decisions on closure of services in Dunbar and North Berwick were difficult but it was also clear that these buildings were not fit for purpose and could not serve people well into the future. She acknowledged the work of officers in drawing up the budget proposals and, given the very challenging financial position, she commended their approval by the IJB.

Mr Miller referred to challenges around transport which would also affect staff, as well as patients and families. He also pointed that Belhaven had been viewed as not fit for purpose for a number of years, but no money had been spent on it until recently. He said that the proposals were unacceptable and asked about alternative proposals for bed provision.

Ms Wilson and Ms Neill confirmed that alternatives had been looked at, but the health and safety considerations and a lack of capital funding had ruled them out, as had the need for a long-term solution which provided a home environment for residents.

In response to a further question on compulsory redundancies, Mr Hood confirmed that while NHS Lothian and the Council had their own policies, there were no plans to make any staff redundant.

Mr Gordon said he was satisfied that due diligence had been done but asked what would happen if the proposals were not accepted and whether this could lead to much more severe measures being put in place.

Ms Wilson advised that it would be necessary to come up with alternative proposals and to act in a more reactive way which could have a far more significant impact on the availability of services and the outcomes for patients and families.

Lesley Berry added that being unable to fill staff posts could impact on the ability to keep people in their homes.

Lindsey Byrne pointed out that these decisions were not made in isolation or without due consideration of their impact on the wider community. However, she assured members that staff would continue to prioritise the most vulnerable.

Sarah Gossner reiterated the point about safe staffing levels and also gave her professional assurance that time had been taken to consider these proposals and to give staff a voice.

Councillor McGuire said he concurred with some other members in their view that these proposed closures were unacceptable and would rip the heart out of communities in East Lothian. He highlighted the impact on patients, families, and staff from moving them to other hospitals, and possibility ending up in acute hospitals even further afield. He also referred to challenges with budgets and a population that was living longer and questioned whether wider health services remained fit for purpose. He reiterated his concern around the impact on communities and concluded that these proposals would deliver a poor service for people of East Lothian.

Ms Wilson acknowledged that these were not easy decisions but did not agree that people might be more likely to end up in acute hospitals. She said that the people of East Lothian were important to them, and that the IJB had invested in intermediate care, allowing the HSCP to support more people to remain in their own homes.

Councillor McFarlane said she was depressed to see the level of saving the IJB was required to make. She noted that some community services would be retained at the Edington Hospital but that the closure of the Abbey Care Home had created significant concern in the community. The residents and relatives were devastated and while the facilities may not have been the best, the care provided and the environment within the home were second to none.

Mr Miller thanked the Chair for allowing the members the opportunity to give their views.

The Chair asked about the support available to residents and families to find alternative care home beds within East Lothian. Ms Neill confirmed that residents and families would be supported when making choices and every effort would be made to maintain friendships and relationships formed in their present settings.

The Chair reflected on the discussion and the points raised by members. She commented on the funding challenges faced by health and social care at a national and local level and commended officers for their efforts to bring forward effective, long-term proposals within very challenging financial circumstances. She agreed that lessons could be learned from the engagement and assessment processes, and that the proposed closures would have a significant impact on communities. She pointed out that requests for additional funding from government had gone unanswered and the IJB was now faced with very difficult choices. She reassured members that the movement of patients from these sites would be managed as sensitively as possible and that officers would work closely with the IJB's partners to protect these sites for future health and wellbeing use. Staff would also work closely with other organisations to understand and, where possible, mitigate the impact of other changes to services. She concluded by saying that while it was a source of great regret that these decisions were necessary, to reject these proposals would lead to the possibility of even greater cuts to services later in the financial year.

A vote was taken by roll call and the recommendations were approved by a majority of 7 to 1. Councillor McFarlane voted against the recommendations.

Decision

The IJB agreed:

- i. To note the development of the 2024/25 budget setting process.
- ii. To note savings proposals described as Service redesign which were presented for information.
- iii. To approve the proposals No. 4-8 in the report that support the development of a balanced budget for 2024/25.
- iv. To review the Integrated Impact Assessments (IIAs) as set out within the proposals.
- v. To set a balanced budget for 2024/25.

POST MEETING NOTE: Councillor McGuire explained after the meeting that he had inadvertently voted in error on Item 6. He had intended to vote against the recommendations. He asked that a note be added to the minutes to reflect this.

7. NON-RESIDENTIAL CHARGING POLICY – SOCIAL CARE

A report was submitted by the general Manager Planning & Performance informing the IJB of the current position on the Non-residential Charging Policy for Social Care and the proposed changes; and seeking agreement from IJB for changes to the Non-residential Charging Policy 2024-2025.

Laura Kerr presented the report outlining the background and recommendations. She acknowledged that the changes were quite significant and would increase the income available to the IJB. She advised that there would continue to be a number of protection measures in place prevent financial hardship, as well as an appeals process.

Ms Kerr responded to questions from Mr Gordon and the Chair. She advised that there had been no increase in the number of people returning alarms due to financial issues, however, where alarms were returned contact was made with the client to discuss options before progressing to the appeals process. Information on the appeals process was provided to individuals when they made an application and support was available from social work, the alarm team and advocacy for anyone making an application or lodging an appeal. Officers in the financial assistance team were also there to assist individuals with income maximisation; ensuring they were receiving all of the financial support they were entitled to.

The Chair thanked officers for the report and noted that the IJB had used some of its Reserves to fund to move from analogue to digital alarms. She added that it was essential to ensure that the impact of the changes outlined in the report were closely monitored and could be reviewed if there was a significantly negative impact on service users.

A vote was taken via roll call and the recommendations were approved unanimously.

Decision

The IJB agreed to:

- i. Note the contents of this report.
- ii. Note the recommendations summarised in 2.2 of the report.
- iii. Note that any increase to charges requires a 1-month notice period to the payer and that charges to each individual will be limited by the income protection measures outlined in paragraph 4.3 of the report.
- iv. Approve the submission of the recommendations, set out in paragraph 2.2 of the report, to East Lothian Council for consideration.

Signed

Councillor Shamin Akhtar
Chair of the East Lothian Integration Joint Board