



**East Lothian Health and Social Care Partnership
Strategic Planning Group**

Minutes

Date: 23rd August 2023
Time: 1400-1600
Venue: MS Teams

Attendees:		ACTION
Peter Murray (PM)	Non-Executive Director, NHS Lothian (IJB Vice-Chair)	
Claire Goodwin (CG)	Performance and Improvement Manager, (minutes)	
Shamin Akhtar (SA)	Vice Chair (IJB Chair)	
David Binnie (DB)	Unpaid Carers Representative	
Philip Conaglen (PC)	Consultant in Public Health Medicine	
Paul Currie (PCu)	Interim General Manager, Strategic Integration	
Katherine Davidson (KD)	Consultant in Pharmaceutical Public Health	
Claire Flanagan	Chief Finance Officer	
Jennifer Jarvis (JJ)	Senior Communications Advisor	
Alice Harpur (AH)	Public Health Register	
Fiona Ireland (FI)	Deputy Director of Nursing	
Laura Kerr (LK)	General Manager, Planning and Performance	
Caitlan McCorry (CMcC)	Service Manager, Connected Communities	
Alan Millarvie (AM)	Lead Pharmacist	
Chris Miller (CM)	Primary Care and Community Pharmacy Coordinator	
Rebecca Pringle (RP)	Team Manager – Housing Strategy	
Guy Whitehead (GW)	Clinical Lead Physiotherapist	
Fiona Wilson (FW)	Chief Officer, ELHSCP	
Apologies: Maureen Allan, Lesley Berry, Lorraine Cowan, John Hardman, Jamie Megaw, Marilyn McNeill, Gillian Neil, Sharon Saunders		
1.	Welcome and Apologies	PM
	Peter Murray (PM) welcomed everyone and invited introductions from SPG members and attendees.	
2.	Minutes of last meeting (03.05.23) and Matters Arising	PM
	The minutes of the last meeting were approved as a true and accurate record.	
	Shamin Akhtar (SA) asked for an update relating to page 2 of the previous minutes on the Carers Strategy, regarding carers respite. Laura Kerr (LK) noted it is continuing to be looked at as part of the strategy and numerous projects are being supported to provide some form of respite to carers and is being reported through the Change Board. An update will be brought to the SPG later in the year or early into 2024. Issues with residential respite are ongoing and a long-term plan is being put in place. In the meantime, work is continuing with private providers of residential homes to purchase beds for respite of older people. Other alternatives to residential respite are being put in place as well as a proposal for potential funding from the Carers Acts money for a short break's bureau.	

	David Binnie (DB) commended the work being undertaken and understands the difficulty and challenges and that longer term residential respite will be difficult to overcome in the current climate.	
3.	NHS Lothian Pharmaceutical Care Services Plan.	CM/KD
	<p>Chris Miller (CM) and Katherine Davidson (KD) presented the paper providing an update on the NHS Lothian Pharmaceutical Care Services Plan (PCSP) and asked the SPG to: -</p> <ol style="list-style-type: none"> 1. Note content of the PCSP. 2. Note progress to date on recommendations. 3. Discuss and note unmet need and opportunities to address these through future pharmacy provision and further service development. <p>CM gave a short presentation and invited questions from the SPG.</p> <p>Caitlan McCorry (CMcC) referred to slide 2 in relation to distance travelled to community pharmacies but it doesn't show public transport used and asked whether this is a gap in mapping? CM confirmed that this is information that they are looking to include in the next iteration of the PCSP through joint working with the HSCP.</p> <p>CMcC asked during covid there was mobile pharmacy delivery and if this still taking place and also how can we help promote the Pharmacy First Facility. CM noted that over the years there has been some promotion with Pharmacy First and would welcome the opportunity to work on this and help to further promote this within East Lothian. The smoking cessation offered within all community pharmacies is another programme that could benefit from wider promotion. Some pharmacies do offer a prescription delivery service but this is not part of the pharmacy contract and is a local business decision. Katherine Davidson (KD) provided a link to the group regarding the Pharmacy First promotions CM mentioned.</p> <p>PM asked that members contact Fiona Wilson (FW) and the team with any further comments and suggestions that may come to mind out with the meeting for CM and KD.</p> <p>Philip Conaglen (PC) noted that public health were also looking at travel time and suggested that they link up with KD in reference to public transport and exploring further. PC asked if there are mechanisms for pharmacies and community pharmacies linked into the East Lothian local delivery plan. CM clarified that they don't currently have those links but would like to be involved with this and also around the data and if they can work together on this with Public Health. PC also noted linking up with Jamie Megaw and other primary care links that they can follow up on outside the meeting.</p> <p>Jennifer Jarvis (JJ) offered help to promote and advertise information on the Pharmacy First services and will contact CM.</p> <p>SA referred to the slide on dispensing and the high average number for East Lothian and can this be picked up offline to further understand this. SA also reiterated that anything the SPG can do to help support the pharmacies team in identifying what the local need may be particularly related to the housing growth within East Lothian. SA asked when East Lothian Alcohol and Drugs partnership were going to get involved with the take home naloxone aspect? CM noted this should be happening imminently.</p> <p>CM asked that anyone who would like further details on the figures from the presentation or any further suggestions and comments to get in contact with himself or KD.</p> <p>Fiona Wilson (FW) asked what do we need to do to help entice pharmacies to East Lothian and in particularly where there is no out of hours pharmacy service.</p> <p>PM asked how out of hours demand is measured for East Lothian. CM noted that they are working with Lothian Unscheduled Care Service (LUCS), Community Pharmacy Development and Primary Care contract teams on what data sources are available to better understand the demand and define the minimum number of pharmacies needed. PM will discuss with FW offline and thanked CM and KD for taking the time to come and talk to the SPG.</p> <p>SPG noted the update on the NHS Lothian Pharmaceutical Care Services Plan (PCSP).</p>	
4.	Physical Activity Programme Partnership.	GW

	<p>Guy Whitehead (GW) presented the paper on the progress of the Physical Activity Programme Partnership. The SPG is asked to: -</p> <ol style="list-style-type: none"> Note the progress in relation to the Physical Activity Programme Partnership. <p>PM asked how sustainable the finance is. GW noted that there are 2 elements to the finance where Enjoy Leisure will develop revenue over time from referrals however there is not an NHS Lothian exit strategy in relation to finance and a core funding request will be required in 2024/2025.</p> <p>SA asked if a robust evaluation would take place. GW advised that measures are in place and the East Lothian Rehabilitation Team will be gathering lots of data for future analysis and to inform future funding requests. SA noted that having examples and referral stories is also very important in measuring success from real life case studies.</p> <p>PM asked if the information shared today can be shared with other Health & Social Care organisations. GW confirmed there is no issue with sharing the information wider as it is for the benefit of Public Health.</p> <p>SPG noted progress of the Physical Activity Programme Partnership.</p>	
5.	ELCH Ward 5 Orthopaedic Rehabilitation.	GW
	<p>GW presented the paper on the development of NHS Lothian plans regarding the use of Ward 5 of East Lothian Community Hospital (ELCH) for the provision of in-patient orthopaedic rehabilitation as part of its Orthopaedic Recovery Plan. GW asked the SPG to: -</p> <ol style="list-style-type: none"> Note the development of plans by NHS Lothian for orthopaedic rehabilitation in-patient provision at ELCH. Note the positive impact of this development for East Lothian residents and for ELCH, and that funding will be through the Elective Recovery Programme, with no direct financial implications for the East Lothian IJB. <p>FW thanked everyone involved in this good piece of work and noted that phased implementation will start on the 4th September 2023 with 8 beds and a trajectory to rapidly increase bed occupancy. The big challenge will be meeting the 30-day period of stay.</p> <p>SA asked the following questions:-</p> <ol style="list-style-type: none"> Is the resource implication on an ongoing basis? Claire Flanagan (CF) confirmed that funding comes from NHS Lothian and not from the IJB. It is built into the scheduled care funding resource for this year and the future, there will be no detriment to the IJB. Will the Integrated Impact Assessment (IIA) highlight East Lothian residents who are on the waiting list? GW mentioned that the waiting list data for East Lothian residents will not initially fall into this IIA but will be used in time as data is gathered and the programme rolled out. Can you provide further information on the governance side? FW advised that a performance framework will be in place and delivery of the performance will go through NHS Lothian to the Board. <p>PM asked if the main benefit to this is better access to orthopaedic rehabilitation for larger proportions of East Lothian residents? FW clarified that this will be available to all 4 Partnerships but over time it should benefit East Lothian residents. The programme will be triaged operationally with East Lothian holding the daily huddles.</p> <p>DB asked for clarity that the objective is to cascade from the Edinburgh Royal Infirmary (ERI) a better throughput of patients to allow increase in theatre capacity to take place at ERI. GW confirmed this is correct. DB noted that patients coming to ELCH from ERI are not necessarily East Lothian residents and will be further from home. FW confirmed this will be the case, but overall patients will have quicker throughput of procedure and rehab.</p> <p>Fiona Ireland (FI) asked in terms of the resource where the skill mix for nursing is at 43% of those registered and with the 6 AHPs considered as part of this the overall percentage will increase to 51%</p>	

	<p>which may not be suitable amount. She further asked if this is equivalent to other rehabs ward and how realistic is the recruitment to increase this. GW provided an update on the current stages of recruitment.</p> <p>FI will take forward the question to the Healthcare Governance meeting in relation to the f nurse to patient ratios.</p> <p>SPG noted the development of NHS Lothian plans regarding the use of Ward 5 of East Lothian Community Hospital (ELCH) for the provision of in-patient orthopaedic rehabilitation.</p>	
6.	East Lothian IJB Revised Joint Integration Scheme 2023.	PC
	<p>Paul Currie (PCu) presented the paper to members to highlight the approval by Scottish Ministers of a revised Joint Integration Scheme developed by NHS Lothian and East Lothian Council. PCu asked the SPG to:</p> <ol style="list-style-type: none"> 1. Note the process for the development of the revised Integration Scheme and the delays to its completion. 2. Note that although notification of the revised Scheme's approval was only formally received in July 2023, the revisions within have applied to the IJB from 15th May 2023. 3. Note that the next review of the Integration Scheme will be in 2028 unless otherwise directed by Scottish Ministers. 4. Note that the revised Scheme will be presented to the East Lothian IJB at its meeting on September 21st 2023. <p>PM invited those on the call who may not have had the opportunity yet to read of the revised Integration Scheme as it is a key document describing the duties of the IJB .</p> <p>SA asked for clarity that the minor changes are noted at 3.6 of the paper. PC confirmed this.</p> <p>SPG noted the process for the development of the scheme and reason for its delays. The revised Scheme will be presented to the East Lothian IJB at its meeting on September 21st 2023.</p>	
7.	Date of next SPG meeting – Thursday 5th October 2023, 1400-1600	