













MINUTES OF THE MEETING OF THE EAST LOTHIAN INTEGRATION JOINT BOARD

THURSDAY 25 AUGUST 2016 COUNCIL CHAMBER, TOWN HOUSE, HADDINGTON

Voting Members Present:

Councillor S Akhtar Mr M Ash Councillor S Currie Councillor J Goodfellow Councillor D Grant Ms A Meiklejohn Mr P Murray

Non-voting Members Present:

Dr R Fairclough
Mr D Harvie
Mr D King
Mrs M McKay
Mr T Miller
Ms S Saunders
Mr D Small
Dr J Turvill

ELC/NHS Officers Present:

Ms J Ogden-Smith Ms C Lumsden Mr C Briggs

Clerk:

Mrs F Stewart

Apologies:

Mr A Joyce Ms F Duncan Ms A MacDonald Ms M McNeill Mr E Stark

Declarations of Interest:

None

1. MINUTES OF THE MEETING OF THE EAST LOTHIAN INTEGRATION JOINT BOARD OF 30 JUNE 2016

The minutes of the East Lothian Integration Joint Board meeting of 30 June 2016 were approved.

2. MATTERS ARISING FROM THE MINUTES OF THE MEETING ON 30 JUNE 2016

The following matters arising from the minutes of the meeting on 30 June 2016 were discussed:

Code of Conduct

David Small advised that the Code of Conduct, agreed by the IJB at its last meeting, had been approved by the Scottish Government. He reminded members that the Code required the setting up of a Register of Interests and that forms would be issued shortly for completion by members.

Annual Accounts

David King updated members on progress with the annual accounts. He explained that these had been reviewed by the Audit & Risk Committee prior to this meeting but that due to a change in Scottish Government guidance further amendments were required. He proposed to make the necessary changes and circulate the revised version to KPMG and Audit & Risk Committee members, before submitting the final version of the accounts to the IJB at its September meeting.

Community Hospital

Mr Small advised members that the final proposal had been submitted to the Government's Capital Investment Group with the recommendation that it go forward for approval by the Cabinet Secretary. A decision was expected within the next 2-3 weeks and, barring any delays, it was hoped that the current timetable of financial close by end September and breaking ground in October would still be met.

3. CHAIR'S REPORT

The Chair reported that there would be two further project update events for the East Lothian Community Hospital on Friday 9 September (afternoon) and Thursday 15 September (evening), both of which would be held in the Townhouse, Haddington. The Chair also encouraged members to attend the Primary Care event being arranged for Thursday 29 September. The event was open to members of all four Lothian IJBs and some members of the East Lothian IJB had already expressed an interest.

The Chair noted that this was Alison Meiklejohn's last meeting as a member of the IJB. He thanked her for her contribution to the Shadow Board and the IJB and wished her well for the future. Mike Ash added his thanks to Alison and advised that her replacement would shortly be confirmed by NHS Lothian.

4. FINAL FINANCIAL ASSURANCE 2016/17

The Chief Finance Officer had submitted a report to the IJB laying out the final financial assurance process undertaken for 2016/17 after considering the formal offer from NHS Lothian (received on 14 June 2016) and updating the position on East Lothian Council's utilisation of the Social Care Fund (SCF).

Mr King advised that a detailed discussion on financial assurance had taken place at the Audit & Risk Committee meeting held prior to this meeting and his presentation would reflect not only the recommendations contained within his report but also the recommendations of the Committee. He summarised the position following receipt of the formal offer from NHS Lothian in June and the updated position on East Lothian Council's utilisation of the SCF. He referred in particular to the implications of the higher than anticipated cost of implementing the Living Wage and the revised outturn position for Adult Wellbeing for 2015/16 being an overspend of c. £1.2m, rather than the estimated £436,000. He also outlined the outstanding issues relating to the final offer from NHS Lothian including gaps in funding for Set Aside Services and GP prescribing.

Mr King concluded that while the Audit & Risk Committee endorsed the majority of the recommendations contained in his report, the Committee had also recommended that the IJB directs the Chief Officer and Chief Finance Officer to arrange a discussion with East Lothian Council to ensure an appropriate level of 'additionality' to be delivered by the SCF.

Mr Small explained that 'additionality' referred to things which were not already being done such as an increase in Care at Home services, individual high cost packages of care such as mental health, transitions from Children's services and other priorities as set out by the Government.

Councillor Currie emphasised the importance of having a clear definition of 'additionality' and of ensuring that the full 50% of the SCF was allocated to this work. In his view, he did not consider addressing budget overspends as an appropriate use of the SCF. He also commented on the importance of beginning discussions on how to do things differently, how to invest savings in existing or new services and how to measure the impact of recurring overspends on the ability of Partners to deliver efficiency savings. He advised that the Audit & Risk Committee had agreed that Mr Small and Mr King should arrange a discussion with Partners on the way forward, with a view to having a solution in place by the time of the IJB's next meeting (22 September).

Mr Ash welcomed the recommendations. On the issue of 'additionality' he agreed with Councillor Currie and expressed his own concerns that money set aside for this purpose should not be used to cover any gaps in funding or resulting reductions in services. He added that it was disappointing it had taken so long to get to this point and that it was essential that members were reassured, well before the next meeting, that these issues had been resolved.

Responding to questions from Ms Meiklejohn, Mr Small advised that the overspend included the estimated cost of introducing the Living Wage and that the contribution rate from operators had been factored in. Money from the SCF had been held back to fund the Living Wage from October 2016 but it was now clear that the cost was likely to be significantly higher. He added that although the Health Board had chosen to underwrite the funding gap in its budget, neither Partner was required to do so under the terms of the Integration Scheme.

Mr King replied to a question from Councillor Akhtar on GP prescribing. He agreed that it was a difficult issue and, should prescribing costs continue to grow at a similar rate, it was one which would continue to be a cause for concern. He said that a huge amount of work was ongoing and it would not solely be the responsibility of GPs to look at ways of managing this pressure.

Margaret McKay stated that while she supported the principle and practice of introducing the Living Wage, she felt that it was an astonishing use of public money. She enquired whether the subsidy provided through the SCF was for one year only, if officers were confident that providers who had signed up to the scheme were not also looking for further SCF subsidy in years 2 and 3, and who was taking steps to ensure

that providers changed their practices so that those who were entitled to it received the Living Wage.

Mr King advised that the cost of the Living Wage would be recurring and would be likely to cost twice as much next year. He indicated that if the Scottish Government were not prepared to cover the uplift then this would be a serious issue for the IJB. Mr Small added that the Council had written to all providers to confirm what they will be paid for the life of their contracts from 1 October 2016. These will then be replaced by new contracts next year. He also observed that the payment of the Living Wage was a Scottish Government initiative and could be written into the conditions of any new contracts.

Mrs McKay again expressed astonishment at this use of public funds. She also referred to Councillor Currie's point about 'additionality' and doing things differently and asked what was being done to consider how best to use the other half of the SCF.

Mr Small stated that the Strategic Plan set out the IJB's proposals for the development of new and additional services.

Mr Ash observed that Mrs McKay made an important point and he referred to the Integrated Care Fund and other sources of funding available to the IJB if and when it came up with the right ideas.

Peter Murray agreed with some of Mrs McKay's points but said that innovation was coming from different areas and that NHS Lothian was involved in some of that work. He added that it was not that nothing was being done but that these discussions should involve all those who need to be engaged in the process, not just the IJB, to be most productive.

Danny Harvie added that there had been discussions between the Scottish Government and care providers to ensure that contributions were in place but there was still some way to go.

Decision

The IJB agreed to:

- i) Accept the NHS Lothian offer with the following caveats:
 - That the Set Aside pressures are managed by NHS Lothian;
 - That the Partnerships can manage within their health budgets;
 - That the health budget setting model remains indicative until an appropriate baseline position is agreed;
 - That the prescribing budget setting model for 17/18 is clarified and agreed with the IJB;
 - That a proposition to manage the emerging financial pressures within the GP prescribing budgets in 2016/17 is prepared;
- ii) Conclude that the agreement it made with East Lothian Council in relation to the Social Care Fund in March 2016 has been significantly altered by the further information now available. The two key elements being:
 - A considerable increase in the projected overall costs of delivering the Living Wage – c. £800.000
 - The revised 2015/16 outturn for Adult Wellbeing which was estimated at an overspend of c. £436,000 and is now reported as an overspend of c. £1.2m.

Direct the Chief Officer and the Chief Finance Officer, reflecting on the movement in the estimates, to arrange a discussion with East Lothian Council to ensure an appropriate level of 'additionality' (for the avoidance of doubt the IJB considers that to be 50%) to be delivered by the Social Care Fund.

iii) Defer consideration of the recommendation relating to completion of the financial assurance process until its meeting on 22 September 2016.

5. PERFORMANCE REPORT FOR THE INTEGRATION JOINT BOARD - AUGUST 2016

Carol Lumsden, Transformation and Integration Manager, had submitted the East Lothian Health & Social Care Partnership Performance Report for the IJB.

She advised members that information contained in the report was currently embargoed and, when released, it would be published on the Partnership's website. In the meantime, it was thought important to bring forward to the IJB early sight of how East Lothian was performing across a range of core indicators. This information, although still incomplete, would provide the IJB with a benchmark of performance. Identifying successes and giving early notice of areas with scope for improvement. The information would also help to shape the IJB's Directions for the next year.

Ms Lumsden guided members through the document, highlighting key indicators and expanding on what each of the results represented in terms of patient care and service provision.

A lengthy debate followed with members focusing on the outcomes for several areas including delayed discharges, avoidable re-admissions, supporting carers and access to GP services. The considered the impact that increases in population and changes in the demographic across the county was having on service provision, particularly GP services. Members acknowledged that overall many of the figures were encouraging; that significant problems existed in certain areas; and that solutions would require a degree of innovative thinking and changes to the way services were delivered and funded.

Members also discussed the importance of being able to accurately track progress in addressing these challenges. Ms Lumsden indicated that, in addition to this survey which occurred every two years, she was looking into the possibility of doing an annual survey through the Citizen's Panel.

Mrs McKay asked whether it would be possible to adopt the National Health & Wellbeing Outcome (No. 6) in respect of carers, which focused on the carer as a whole person, rather than the narrower National Indicator.

Mr Small advised that these were both set by the Scottish Government but he agreed to consider whether it might be possible to make representations to the Government about amending these outcomes.

Mr Small also proposed bringing a further update on performance management to the IJB by December 2016.

Councillor Currie suggested that the IJB may want to consider setting up a Performance Management Committee to consider this information in more detail and make recommendations to the IJB.

Mr Ash observed that the IJB had previously agreed to receive two reports on performance management and then decide on what to do in future.

Decision

The IJB agreed to note the contents of the report and that a further update on performance management would be provided by December 2016.

6. BELHAVEN HOSPITAL

The Chief Officer had submitted a report asking the IJB to agree a process regarding Ward 2 at Belhaven Hospital.

Mr Small summarised his report outlining the key issues. He advised that following discussions with GPs and hospital staff it was agreed that a Working Group would be set up and would hold its first meeting in early September 2016. Mr Small also proposed that the 'Belhaven Forum' should be re-established as a vehicle for public engagement. The Working Group would engage the Forum in its recommendations and report back to the IJB in October 2016.

Responding to questions from Councillor Currie, Mr Small advised that Ward 2 was currently 50% occupied by delayed discharges. He acknowledged that this was a problem which would need to be worked on and that he hoped that the Hospital at Home service could be seen as a real alternative.

Dr John Turvill pointed out that the Hospital at Home service had been running for 18 months and had a high level of user satisfaction. He added that unless the IJB progressed with this work there would continue to be high numbers of admissions and delayed discharges.

Councillor Currie commented that the Forum would provide the community with an opportunity to thrash out these and other issues. He said it would be important for the IJB to convince local people that there could be a better alternative.

Mr Ash agreed noting that the IJB would often be required to take difficult decisions and this would be a test of how well it could deal with that responsibility.

Dr Richard Fairclough observed that the 24/7 Hospital at Home service would go some way to offering reassurance to patients and families and asked if there was a projected start date. Ms Lumsden replied that April 2017 was the planned date.

The Chair noted that this would be a significant test for the IJB as there was a great deal of affection for Belhaven Hospital.

Decision

The IJB agreed to the proposed process to manage the issues around Ward 2 at Belhaven Hospital.

Signed	
	Councillor Donald Grant
	Chair of the East Lothian Integration Joint Board