

**REPORT TO:** East Lothian Integration Joint Board

MEETING DATE: 26 April 2018

BY: Chief Officer

**SUBJECT:** Proposed Directions for 2018/19

### 1 PURPOSE

1.1 To present to the East Lothian Integration Joint Board a proposed set of Directions to be issued to NHS Lothian and East Lothian Council on 30 April 2018.

- 1.2 To present progress against all Directions at the end of 2017/18.
- 1.3 To present a proposed Annual Delivery Plan for 2018/19.
- 1.4 Any member wishing additional information should contact the authors of the report in advance of the meeting.

### 2 RECOMMENDATIONS

The IJB is asked to:

- 2.1 Note end of year progress against all the Directions operating through 2017-18 and approve the recommendation to either end, continue, or replace certain of these Directions (table 1).
- 2.2 Agree the proposed Directions which will apply in 2018-19 (sections 3.5 and 3.6).
- 2.3 Approve the Annual Delivery plan for 2018/19 (appendix 1).
- 2.4 Note that each partner responsible for delivering a Direction is expected to report on progress quarterly, or as frequently as required by the IJB for the purposes of monitoring achievement.
- 2.5 Note that the new Directions for 2018/19 and the revised Directions list brought forward from the preceding two years (appendix 2) are intended to reflect the work priorities for 2018/19 agreed at the 22 February 2018 IJB meeting (table 2).

### 3 BACKGROUND

- 3.1 The Public Bodies (Joint Working)(Scotland) Act 2014 sets out the process by which an Integration Joint Board delivers its Strategic Plan by issuing 'Directions' to the Local Authority and the Health Board as appropriate. The East Lothian IJB's policy states that Directions will be issued for each delegated function including the allocation of the associated financial resource.
- 3.2 At its meeting of 30 March 2017 East Lothian IJB agreed its 2017/18 Directions. The Chief Officer issued these Directions on behalf of the IJB to East Lothian Council and NHS Lothian in March 2017 for the financial year 2017/18.
- 3.3 Progress against the Directions operating in 2017/18 was reported through the year to the Integration Joint Board and the Strategic Planning Group. End of year progress is summarised in table 1 below. It should be noted that not all directions are intended to deliver in one financial year and a number concern ongoing service delivery. As with the preceding year, the Directions for 2018/19 will clearly ask for updates on progress.

Table 1 - All Directions operating in 2017/18 and outcomes at April 2018

2017/18 Directions	Outcomes
NHS Lothian Community Services: D01a*, D01b*, D01d*, D01g*	Achieved - 2 No Longer Relevant - 2 Related New Directions (for 18/19) - <b>D01h</b> , <b>D10i</b>
East Lothian Council Delegated Functions: D02d*, D02f, D02g*, D02h*	Achieved - 1 In Process - 1 No Longer Relevant – 2 Related new Direction (for 18/19) – <b>D02i</b>
NHS Lothian Transfer of IJB Resources: D03a*, D03b*	No Longer Relevant - 2 Related New Direction (for 18/19) - <b>D03c</b>
NHS Lothian Hosted Services: D04a, D04b*	In Process - 1 No Longer Relevant - 1 Related New Directions (for 18/19) - <b>D10d</b>
Resource Transfer: D05a, D05b	Achieved - 2
Integration Care Fund: D08*	Achieved
Strategic Programmes: D09	In Process

Primary Care: D10a*, D10b, D10c*	In Process - 1 Related New Direction (for 18/19) - <b>D10d</b>
Acute Services/Increasing Community Provision: D11a, D11b, D11c, D11d, D11e, D11f*	In Process - 5 Not yet achieved - 1
Shifting the Balance of Care: D12a, D12b, D12c, D12d, D12e, D12f	In Process – 6 Related New Direction (for 18/19) - <b>D12g</b>
Delivery of Modern Outpatients D13a*	Not Yet Achieved Related New Direction (for 18/19) - <b>D13b</b>
Support to Carers: D14a	In Process - 1
Drug and Alcohol Services and Mental Health D15a*, D15b, D15c, D15d	In Process - 3 Not yet achieved – 1 Related New Directions (for 18/19) - <b>D15e, D15f</b>
Community Justice: D16a	In Process - 1

<sup>\*</sup>Directions proposed for **discontinuation** at end of 2017/18 – described in more detail in appendix 2.

3.4 Following discussion in the Strategic Plan Programme Board, Strategic Planning Group and IJB concerning priorities for 2018/19 and taking into consideration the outcomes and targets applying to the IJB during 2018/19 (such as the Ministerial Strategic Group for Health and Community Care (MSG) objectives – see Appendix 3) the requirements of the Strategic Plan and service improvement requirements, a final list of Directions are proposed below in section 3.5 and 3.6.

## 3.5 Active Directions from 2016/17 and 2017/18 continuing into 2018/19

### **Directions Continuing from 2016/17**

- **D02f** Establish a housing and health and social care planning interface group.
- **D04a** Continue to work collaboratively to support and accelerate local delivery of the key recommendations of the national review of primary care out of hours services.
- **D05a** East Lothian Integration Joint Board direct NHS Lothian to make payments to East Lothian Council in line with the agreed payment schedule.

- **D05b** East Lothian Integration Joint Board directs East Lothian Council to provide social care services as outlined and within and in accordance with agreed budgets.
- D09 Provide a full analysis on the detail of human and financial resources identified within NHS Lothian's Strategic Programmes budget within the financial year 2015/16, including an analysis of resource and activity as it relates to all delegated functions.

### **Directions continuing from 2017/18**

### **Direction to NHS Lothian on Primary Care**

D10b - Support to Clusters.

# Directions to NHS Lothian and East Lothian Council on reducing use of acute services and increasing community provision:

- **D11a** Emergency Assessment Services and Emergency Admissions.
- **D11b** Occupied Bed Days.
- **D11c** Delayed Discharges.
- D11d End of Life Care.
- **D11e** Transfer of AHP resource from Secondary Care.

# Directions to NHS Lothian and East Lothian Council on shifting the balance of care for care groups:

- D12a Contracts for Care at Home.
- **D12b** Extra care housing.
- **D12c** Day services for older people.
- **D12d** reprovision of Eskgreen and Abbey care homes and Edington and Belhaven hospitals.
- D12e Integrated Care Fund Review.
- **D12f** Transfer of services of Ward 2 Belhaven Hospital to Ward 3 or Ward 1 Belhaven Hospital (**new Direction** in January 2018).

### Direction to NHS Lothian and East Lothian Council on support to carers:

**D14a** - Finalisation and implementation of the East Lothian Carers' Strategy and preparation for the Carers' Act.

### Directions to NHS Lothian on drug and alcohol services and mental health:

- **D15b** Redesign of MELDAP.
- D15c Provision of adult mental health services.
- **D15d** Provision of older adult mental health services.

### Direction to NHS Lothian and East Lothian Council on Community Justice

**D16a** - Work with the Reducing Reoffending Board.

### 3.6 New Directions for 2018/19

### **Direction to NHS Lothian on Community Services**

D01h - Deliver the new East Lothian Community Hospital within the agreed timeframe to include the agreed bed base and the agreed inpatient and outpatient services within a deliverable financial model (new Direction - replaces D01a) .

### **Direction to East Lothian Council on Delegated Services**

**D02i** – Provide 12 months of funding to organisations that passed the Section 10 grants review to support planned service redesign (**new Direction** – replaces D02h).

### Direction to NHS Lothian on Transfer of Budget from Midlothian IJB

D03c - Deliver to East Lothian IJB in the 2019/20 financial year the full effect of the financial resources released through the repatriation of East Lothian residents from Midlothian Community Hospital (new Direction - replaces D03a and D03b).

### **Directions to NHS Lothian on Primary Care**

- **D10d** To produce by July 2018 a Primary Care Improvement Plan for East Lothian covering all delivery arrangements for all aspects of the new GMS Contract (includes development of the Primary Care Strategy) (**new Direction** *replaces D04b, D10a and D10c, supersedes D01e and D01f, aligned with D01g, D04a*).
- **D10i** To deliver the Harbours Medical Practice Business Case (**new Direction -** *replaces D01d*).

# Direction to NHS Lothian and East Lothian Council on shifting the balance of care for care groups:

**D12g** - Review community services for adults with complex needs (new Direction).

# Direction to NHS Lothian to support delivery of Modern Outpatients recommendations:

D13b - Redesign of diabetes services and further development of Type 2 diabetes care in primary care. In addition, NHS Lothian to cooperate with other east region partners and the Diabetes Managed Clinical Networks to develop a regional approach to the prevention and reversal of Type 2 diabetes (new Direction - replaces D13a).

### Directions to NHS Lothian on drug and alcohol services and mental health:

- **D15e** Transfer to ELHSCP the full revenue resource for substance misuse services, including the 12% share of Scottish Government recurrent funding (**new Direction** supersedes D15a).
- **D15f** ELHSCP to support centrally delivered drug and alcohol services at the current level for 2018/19 and to indicate within quarter 3 if any changes are required to services for 2019/20 (**new Direction**).

**D15g** - ELHSCP to implement in 2018/19 locality based services to enhance assertive outreach in primary care to improve the service offer across East Lothian (**new Direction**).

# Direction to NHS Lothian and East Lothian Council to make resources available to support the production of a revised Strategic Plan:

- **D17a** The IJB intends to review its Strategic Plan and to finalise a supporting Financial Plan. The IJB requires that the partners provide appropriate financial resources to support this work (new **Direction**).
- 3.7 Further detail on the suite of 2018/19 Directions is given in Appendix 4. This is the document that will be issued to partners on 30 April 2018.
- 3.8 Table 2 below shows which of the directions operating through 2018/19 will directly contribute to the delivery of the IJB's priorities agreed at the meeting of the 22 February 2018.

Table 2 – Directions supporting the 2018/19 IJB Priorities

IJB Priorities for 2018/19*	Direction/s Contributing to Delivery of Priorities
Development and delivery of the Financial Plan for 2018/19 and beyond.	D03c, D09, D15e, D17a
Commence reprovision of Abbey and Eskgreen Care homes and Edington and Belhaven hospitals and provision of extra care housing.	D02f, D12a, D12d, D12f
Review Community Services for Adults with complex needs to develop a transformation programme.	D02i, D12a, D12c, D12e, D13b
Implement the Carers Strategy.	D14a
Deliver the Primary Care Strategy and New GP Contract Implementation Plan.	D04a, D10b, D10d, D10i, D15g

Review actions intended to deliver Delayed Discharges/ Emergency Admissions/A&E improvements.	D11a, D11b, D11c, D11d, D11e
Commence review of the IJB's 2016-19 Strategic Plan.	D17a

<sup>\*</sup> Described in more detail in Appendix 1

### 4 ENGAGEMENT

4.1 There has been significant engagement of IJB members and partners in this work. The IJB's Strategic Planning Group has been involved in discussions on the re-setting of priorities and the form of Directions. This includes internal and external stakeholders. Both NHS Lothian and East Lothian Council have been involved in discussions on the priorities and the shape of directions.

### 5 POLICY IMPLICATIONS

5.1 There are no new policy implications arising from this paper. Existing policy with regards to the production of Directions and the obligations these place on NHS Lothian and East Lothian Council remains extant.

### 6 INTEGRATED IMPACT ASSESSMENT

- 6.1 The subject of this report does not affect the wellbeing of the community or have a significant impact on equality, the environment or the economy.
- 6.2 There is an expectation that individual Directions which result in service change will be appraised by the partner/s introducing the change, with action taken accordingly.

### 7 RESOURCE IMPLICATIONS

#### Financial - Directions for 2018/19

7.1 The IJB's policy on Directions lays out that each Direction – in line with the regulations associated with the Public Bodies (Joint Working) (Scotland) Act 2014 - will show the financial resources (the budget) to be used to achieve that Direction. A format for this resource analysis has been agreed with the partners and this was used to populate the individual Directions issued in March 2016 and also to prepare a summary position. For 2017-18 the decision was taken to present the financial elements in a

- summary table but with a clear connection to the individual Direction. This approach has also been taken for 2018/19.
- 7.2 All Directions issued by East Lothian IJB use two sets of financial information:
  - The social care element was based on the formal offer from East Lothian Council based on the Council's Adult Services Budget as set on 22 February 2017. This offer included the IJB's share of the Social Care Fund and the IJB agreed with the Council as to use of that fund.
  - The health service element was based on indicative financial planning values as presented to the Finance and Resource Committee in March 2018. NHS Lothian will set its 2018/19 budget at its meeting in April 2018. It is not expected that the final position will be materially different from the indicative values.

### **Personnel**

7.3 There are no personnel implications directly associated with the recommendations contained in this paper.

#### 8 BACKGROUND PAPERS

Appendix 1 - Annual Delivery Plan for 2018/19

Appendix 2 - Directions Summary for 2018/19

Appendix 3 - 22 March 2018 IJB Paper on MSG Indicators

Appendix 4 - Proposed Suite of Directions for 2018/19

AUTHOR'S NAME	Paul Currie	David King	
DESIGNATION	Strategic Planning and Performance Manager	Chief Finance Officer	
CONTACT INFO	paul.currie@nhslothian.scot.nhs.uk		
DATE	19 April 2018		

## Appendix 1 - Annual Delivery Plan for 2018/19

# East Lothian **Integration Joint Board**















# Annual Delivery Plan 2018/19

### **East Lothian Integration Joint Board**

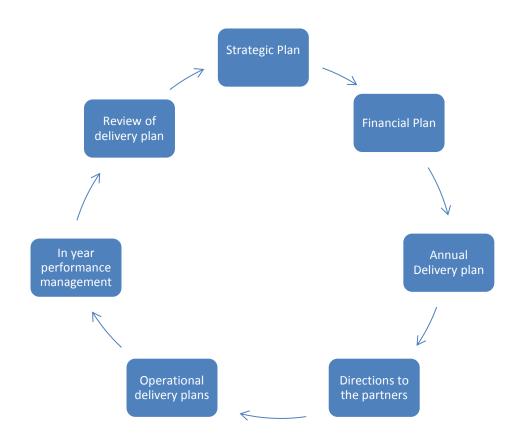
### Annual Delivery Plan - 2018/19

### 1. Introduction

- 1.1 The IJB agreed its current Strategic Plan at its meeting of 25<sup>th</sup> February 2016. The Strategic Plan is a multi-year document running from 2016 to 2019 and although the current plan remains in force until 2019 it is important to recognise that not only the environment in which the IJB delivers its delegated functions will change but also that operational constraints may mean that the plan cannot be fully delivered as envisaged.
- 1.2 Good practice suggests that the IJB should prepare an annual delivery plan that is a clear statement of how it will deliver the overall strategic plan taking into account any changes in either the operating environment or reflecting any service delivery issues.

### 2. Annual Delivery Plan

2.1 At its March 2018 meeting, the IJB was presented with a report which included a diagram laying out the strategic planning process in East Lothian. This is shown below



- 2.2 This diagram presents, as a high level summary, the annual process of the delivery of the IJB's Strategic Plan including a system of performance review of the delivery which itself will inform any changes or revision to the plan.
- 2.3 This diagram will be further developed to show its connections with and contribution to all the elements of work delivered by the HSCP.
- 2.4 In summary, the IJB's Strategic Plan is the key document which lays out the IJB's vision for the delivery of the functions that have been delegated to it by the partners. A financial plan is then prepared that shows how the delivery of the Strategic Plan will be resourced and these plans are then brought together in an annual delivery plan to drive the production of the IJB's directions to the partners in the year. The directions are, of course, the mechanism by which the IJB actually delivers its Strategic Plan and are the key interface between the IJB and its partners. The partner's service teams will then draw up operational delivery plans laying out how the directions will be delivered and these will feed into the overall performance management process which then becomes part of the feedback loop to revise and review the Strategic Plan and its priorities as necessary.
- 2.5 This delivery plan operates at a high level, laying out the areas of focus for delivery in-year. The details of actions, timescales and financial envelopes are laid out in the directions.

### 3. Revised priorities

3.1 At its February 2018 meeting, the IJB agreed to a set of revised priorities for 2018/19. This paper laid out:-

'Discussion in the Strategic Planning Programme Board and the Strategic Planning Group has acknowledged the need to ensure financial and officer resources are focussed in 2018/19 financial year on a more limited range of priorities. The priorities below are those which deliver against financial pressures and which support service change and delivery of local, regional and national priorities:

**Development and delivery of the Financial Plan for 2018/19 and beyond**, by developing the IJB role in taking the decisions required to operate within the resources available.

Commence reprovision of Abbey and Eskgreen Care homes and Edington and Belhaven hospitals and provision of extra care housing after reaching a final decision on the strategic direction and priority actions by locations following conclusion of consultation in June 2018. Establish projects to produce and implement business cases, with a target date of March 2019 for production of the first business case.

Review Community Services for Adults with complex needs to develop a transformation programme. This will encompass: day services; housing; repatriation of out of area placements; night-time support/use of technology enabled care; alternatives to statutory services; and Royal Edinburgh Hospital bed numbers.

**Implement the Carers Strategy**, in conjunction with all relevant partners.

**Deliver the Primary Care Strategy/New GP Contract Improvement Plan**, by July 2018. This will set out the phasing of clear priorities developed in agreement with GP sub-committee and NHS Lothian, covering local workforce issues and evaluation of the 2016/17 and 2017/18 Primary Care Transformation Fund and Mental Health Primary Care Fund initiatives.

Review actions intended to deliver Delayed Discharges/ Emergency Admissions/A&E improvements, including: delayed discharge trajectory; impact of Hospital at Home 24/7 on A&E and admissions; proposed use of empty beds at East Lothian Community Hospital to support whole system capacity and a review of the impact on set aside budgets.

Commence review of 2016-19 Strategic Plan, following consultation with all partners, as well as community, third sector and service users' representatives.

These priorities will be supported by the Workforce Plan, the Finance Plan and the Engagement Plan.

The continuing refocusing of work away from strategy development in the remainder of 2017/18 and through 2018/19 will slow up, but not suspend entirely, progress in the important areas of:

- Palliative Care
- Dementia
- Mental Health
- Learning Disabilities
- Physical Disabilities and Sensory Impairment
- Older People's Day provision.'

Thus, the delivery plan for 2018/19 will focus on the areas described above although, as the final paragraph notes this will not exclude work on these other areas.

## 4. Underlying Principles

4.1 The February paper also recapitulated the underlying themes which will continue to be addressed:-

'In all the work through the year care will be taken to ensure the existing cross cutting priorities of prevention and reducing inequalities articulated in the East Lothian Health and Social Care Partnership Strategic Plan will feature throughout the delivery of the priorities described above, but will not be developed as separate strategies'

### Appendix 2 - Directions Summary for 2018/19

# 'Retired'/Achieved/Replaced Directions

**Directions Continuing** from Previous Years

**New Directions** 

- D01a East Lothian Community Hospital (retired replaced by D01h).
- **D01b** 'Decant programme' from Liberton Hospital (achieved)
- **D01d** Deliver business cases for Prestonpans and Harbours Medical Practices (**retired replaced** by **D10i**).
- **D01g** Develop and implement a prescribing budget calculation (retired being replaced by new NHS Lothian budget model).
- **D01h** Finalise delivery of the new East Lothian Community Hospital (**new Direction replaces D01a**).
- **D02d** Develop and implement a new Carers Strategy for East Lothian (**retired replaced by D14a**).
- **D02f** Establish a housing and health and social care planning group (continuing Direction)
- D02h Complete a review of all current Section 10 grants (replaced by D02i).
- **D02i** provide 12 months of funding to organisations that passed the Section 10 grants review to support planned service redesign.
- **D03a** Ensure the repatriation of East Lothian residents from Liberton Hospital in Edinburgh with the associated shift in aligned financial resources to the IJB (**retired**).
- **D03b** Repatriate East Lothian residents from Midlothian Community Hospital and transfer financial resources to the IJB (**replaced by D03c**).
- **D03c** Deliver to East Lothian IJB in 2019/20 he financial resources released through the repatriation of East Lothian residents from Midlothian Community Hospital (new Direction replaces D03a and D03b).
- **D04a** Support local delivery of the national review of primary care out of hours services (continuing Direction).
- **D04b** Deliver the Transitional Quality Arrangements for the GMS contract (**replaced by D10d**).
- **D05a** NHS Lothian to make payments to East Lothian Council in line with the agreed payment schedule (**continuing Direction**)
- **D05b** East Lothian Council to provide services in accordance with agreed budgets (continuing Direction).
- **D08** NHS Lothian to delegate the Integration (Social Care) Fund to the IJB (retired).
- **D09** NHS Lothian to provide information on all resources identified within NHS Lothian's Strategic Programmes budget (**continuing Direction**).
- D10a Preparations for the New GMS Arrangements (retired replaced by D10d)
- D10b Support to Primary Care Quality Clusters (continuing Direction)
- D10c Primary Care Strategy (retired replaced by D10d)

- **D10d** Production of a Primary Care Improvement Plan for East Lothian (**New Direction** replaces **D04b**, **D10a** and **D10c**, supersedes **D01e** and **D01f** and aligned with **D01g**, **D04a**).
- **D10i** Delivery of the Harbours Medical Practice business case (**new Direction replaces D01d**).
- **D11a** Emergency Assessment Services and Emergency Admissions (**continuing Direction**).
- D11b Occupied Bed Days (continuing Direction).
- **D11c** Delayed Discharges (continuing Direction).
- D11d End of Life Care (continuing Direction).
- **D11e** Transfer of AHP resource from Secondary Care (continuing Direction).
- D12a ELC delivered care at home services (continuing Direction).
- **D12b** Extra care housing (continuing Direction).
- **D12c** Day services for older people (continuing Direction).
- **D12d** Reprovision of Eskgreen and Abbey care homes and Edington and Belhaven hospitals (**continuing Direction**).
- D12e Integrated Care Fund Review (continuing Direction).
- D12f Transfer of services within Belhaven Hospital (new Direction in January 2018).
- D12g Review community Services for adults with complex needs (new Direction).
- **D13a** Redesign of type 2 diabetes services (retired replaced by D13b).
- **D13b** Redesign of diabetes services and regional approach to prevention activities (**new Direction replaces D13a**).
- **D14a** Production of the East Lothian Carers' Strategy and Carers' Act preparation (continuing Direction).
- **D15a** Allocation to ELHSCP of the full 12% of Drug and Alcohol funding (**retired replaced by D15e**).
- **D15b** Redesign of MELDAP (continuing Direction).
- **D15c** Provision of adult mental health services (continuing Direction).
- D15d Provision of older adult mental health services (continuing Direction).
- **D15e** Transfer to ELHSCP of the full revenue resource for substance misuse services, including the 12% share of Scottish Government funding (new Direction replaces D15a).
- **D15f** ELHSCP to support centrally delivered drug and alcohol services at the current level for 2018-19 and to indicate within Quarter 3 if any changes are required to services for 2019-20 (**new Direction**).
- **D15g** ELHSCP to implement in 2018-19 locality based services to enhance assertive outreach in primary care to improve the service offer across East Lothian (**new Direction**).
- D16a Work with the Reducing Reoffending Board (continuing Direction).
- **D17a** Review of the 2016/19 Strategic Plan (new Direction).

### Appendix 3 – 22 March 2018 IJB Paper on MSG Indicators





**REPORT TO:** East Lothian Integration Joint Board

MEETING DATE: 22 March 2018

BY: Chief Officer

**SUBJECT:** Measuring Performance Under Integration –

MSG Indicators - Progress in 2017 and Objectives for 2018/19

### 5 PURPOSE

5.1 To inform the Integration Joint Board of progress in delivering the Ministerial Strategic Group for Health and Community Care (MSG) objectives in 2017/18 and the proposed objectives for 2018/19.

### 6 RECOMMENDATIONS

The IJB is asked to:

- 2.1 Note attainment to date by East Lothian Health and Social Care Partnership against the 2017/18 MSG Integration objectives (Table 2).
- 6.2 Note that Strategic Planning Group members were informed of the HSCP's performance for 2017/18 and agreed to the proposed MSG Integration objectives for the 2018/19 period (appendix 4).
- 2.3 Agree to adopt the proposed targets for the 2018/19 period (appendix 4) and for these to be formally communicated to the MSG.

### 7 BACKGROUND

- 7.1 In January 2017 a joint Scottish Government and COSLA letter (appendix 1) on behalf of the Ministerial Strategic Group for Health and Community Care (MSG) announced the intention to track performance by Integration Authorities in delivering integration through the monitoring of 6 initial measures through 2017/18 as follows:
  - (1) unplanned admissions;
  - (2) occupied bed days for unscheduled care;
  - (3) A&E performance;

- (4) delayed discharges;
- (5) end of life care; and
- (6) the balance of spend across institutional and community services.
- 7.2 Feedback to the Scottish Government noted the indicators were very health focussed and would not capture the important role of social care in improving patient outcomes. Following discussions it was agreed that other, more social care focussed measures would be developed in due course.
- 7.3 ISD (Information Services Division) is currently consulting on the merger of the Scottish Government Social Care Survey and ISD's 'Source' Team social care data collection.
- 7.4 Source is currently working on development of data items, definitions and guidance for a revised dataset to include social care.
- 7.5 At the time of the MSG measures being introduced each of the four IJBs in Lothian agreed on their local targets for the six measures. East Lothian's 2017/18 targets supplied to the Scottish Government are shown in table 1.

Table 1 – East Lothian MSG Targets for 2017/18

Unplanned	Unplanned	A&E	Delayed	End of Life	Balance of care
Admissions	bed days	performance	discharges	Care	
Reduce emergency admissions by 5% by 2018.	Reduce unscheduled bed days by 10% in 2018 compared to 2017.	Maintain 95% 4 hour compliance target from March 2018.	Reduce delayed discharges bed days by 50% in period July – Dec 2017 compared to same 2016 period. Also target to reduce number of delayed discharges by 50% by Dec 2017 compared to Dec 2016.	No more than 10.5% of L6M spent in large hospital by 2018/19.	98% of over 75s to be supported in non-acute setting

- 7.6 Through 2017/18 ISD issued regular data updates for each of the indicators. This information was processed by the Local Intelligence Support Team (LIST) colleagues attached to East Lothian HSCP and supported monitoring and reporting of progress in East Lothian.
- 7.7 By September 2017 the trend for A&E attendances continued to show rising activity along with those seen within 4 hours (with wide fluctuations in the over 65s). However, the trend for admissions from A&E was downward, unscheduled hospital bed days continued to fall, along with delayed discharge bed days (with between year and in year fluctuations).

- 7.8 Data for end of life care and balance of care proved more difficult for ISD to accurately capture and validate, meaning only 4 of the 6 measures (unplanned admissions / occupied bed days for unscheduled care / A&E performance / delayed discharges) could be looked at with any confidence at that time. Data gathering for these last two measures has improved.
- 7.9 In November 2017 a further joint Scottish Government and COSLA letter (appendix 2) was issued. This asked for Integration Authorities to report back on their agreed objectives for 2018/19 by the 31<sup>st</sup> January 2018, to allow for reporting to the 21<sup>st</sup> March MSG meeting.
- 7.10 As many IJBs (East Lothian included) did not have business meeting dates to suit this deadline the MSG Secretariat requested instead that draft objectives were provided, with final objectives to be shared with the MSG after IJB agreement. The draft 2018/19 objectives for East Lothian have been shared as requested with Scottish Government colleagues who have been informed that the approved objectives will be issued following the 22 March Integration Joint Board meeting.
- 7.11 East Lothian's draft objectives for 2018/19 are given in appendix 4. This document also reflects on attainment to date for 2017/18. This is summarised in table 2 which presents the latest data covering the period April 2017 to October 2017.

Table 2 - Attainment (April to October 2017) against the 2017/18 MSG Indicators

Unplanned Admissions	Unplanned bed days	A&E performance	Delayed discharges	End of Life Care	Balance of care
11% reduction in overall total compared to same period in 2016.  TARGET – 5% reduction	0.9% increase in unplanned bed days (acute specialties) compared to same period in 2016.  10.8% reduction in mental health specialties compared with same period in 2016.  43.3% reduction in GLS bed days compared with same period in 2016.  TARGET – 10% reduction	0.9% increase in overall total attendances compared to same period in 2016.  Average A&E compliance 93.9% seen within 4 hours compared to 93.5% for same period in 2016.  TARGET - maintain 95%	33.1% reduction in all reason delayed bed days, compared to same period in 2016 37.8% reduction in H&SC+P/C/F reasons compared to same period in 2016 73.9% increase in Code 9 reasons compared to same period 2016. TARGET – 50% reduction in delayed discharge bed days and 50% reduction in delayed discharges.	Community: 85.7% Palliative: 0.9% Community Hospital: 1.7% Large Hospital: 11.7% For 2016/17 11.7% of care in the last 6 months of life was in a large hospital TARGET - No more than 10.5% of L6M spent in large hospital	Acute Setting: 1.5%  Community Hospital: 0.3% Hospice: 0.0%  Care Home: 5.2% Home: 9.7% (supported) Home: 83.3% (unsupported) In 2016/17 total being supported out of acute settings was 98.5%  TARGET - 98% of over 75s to be supported in non-acute setting

### 4 ENGAGEMENT

4.1 No specific engagement activities are planned in the course of agreeing and delivering the proposed 2018/19 MSG Objectives.

### 5 POLICY IMPLICATIONS

5.1 The proposed objectives are supportive of the MSG's requirements, and principles and priorities in the East Lothian Health and Social Care Partnership Strategic Plan. As the 2017/18 objectives were supported by associated Directions, it is intended that this will apply for the 2018/19 Directions which are in development.

### **6 INTEGRATED IMPACT ASSESSMENT**

6.1 The recommendations within this paper have not been the subject of an Integrated Impact Assessment as any necessary change to any aspect of service delivery which arises from the proposed MSG objectives will be assessed as necessary at an appropriate stage in the year.

### 7 RESOURCE IMPLICATIONS

- 7.1 Financial there are not thought to be any financial implications associated with the recommendations as delivery of the objectives will be a direct outcome of existing service delivery.
- 7.2 Personnel there are no personnel implications arising from the proposed objectives.

### 8 BACKGROUND PAPERS

8.1 Ministerial Steering Group letters:

Appendix 1 - Joint Scottish Government/COSLA Letter of January 2017

Appendix 2 - Joint Scottish Government/COSLA Letter of January 2017

Appendix 3 - MSG Guidance on Objectives Preparation

8.2 Proposed objectives for 2018/19

Appendix 4 - MSG Indicators - Progress in 2017 and Objectives for 2018/19

AUTHOR'S NAME	Paul Currie
DESIGNATION	Strategic Planning and Performance Manager
CONTACT INFO	paul.currie@nhslothian.scot.nhs.uk
DATE	07-03-18

### Appendix 1 - Joint Scottish Government/COSLA Letter of January 2017

Health and Social Care Integration Directorate Geoff Huggins, Director T: 0131-244 3210 E: geoff.huggins@gov.scot





#### COSLA

Paula McLeay, Chief Officer Health and Social Care T: 0131-474 9257 E: paula@cpsla.gov.uk

To: Chief Officers - Integration Authorities

19 January 2017

Dear Colleagues

### MEASURING PERFORMANCE UNDER INTEGRATION

The Ministerial Strategic Group for Health and Community Care (MSG) discussed how to measure progress under integration at its meetings on 16 November and 21 December.

At the meeting on 21 December MSG agreed that for 2017/18 we will track across Integration Authorities:

- unplanned admissions;
- (2) occupied bed days for unscheduled care;
- (3) A&E performance;
- (4) delayed discharges;
- (5) end of life care; and
- (6) the balance of spend across institutional and community services.

You are each invited to set out your local objectives for each of the indicators for 2017/18 by the end of February. MSG has agreed that it will receive a quarterly overview on progress across the whole system and you are asked to produce your objectives on that basis. We are meeting with the Executive Group of Chief Officers on Friday and will discuss what national support you would want us to offer for this process. Our objective will be to adapt and use existing data collection methodologies where possible and to establish a clear process for the work.

When we met on 16 December we had indicated that as a minimum we would provide data for each partnership covering each of the indicators. The data would show the position for all partnerships to enable individual Integration Authorities to understand the shape and nature of their service relative to others. We are still working on the structure and format of that data. For now, we attach high level data covering a number of the areas (Annex A). Again we would intend to use the conversation on Friday to discuss the structure and format of the data with the intention of writing shortly after to all Chief Officers with the necessary material.

MSG noted that the approach for future years may change as a consequence of the Review into Targets and Indicators being undertaken by Sir Harry Burns and also as data sources for particular areas of service delivery improvement. It also noted that most key service delivery areas under integration have a direct impact on these higher level system indicators. In particular, it is important that we are able to understand both the contribution of social care and primary care services to these higher level system indicators, but also how they support important outcomes in respect of independent living and the protection and maintenance of health.

Local partnerships are already using a wide range of data to support their commissioning and delivery activity and will continue to operate under the duties in the 2014 Act in respect of public reporting. This process is not intended to duplicate or substitute for that process.

The Local Delivery Plan (LDP) Guidance for 2017/18 has been issued to NHS Chief Executives and sets the expectation that Boards and regional planning partnerships ensure that their objectives and plans are consistent with Integration Authority plans. Similarly, given the interaction with the hospital system you will need to ensure that your objectives and plans are consistent with NHS Board and regional plans for 2017/18.

Yours sincerely

GEOFF HUGGINS

**Scottish Government** 

PAULA MCLEAY

Paula Mcleuy

Health and Social Care Integration Directorate Integration Division

T: 0131-244 5453 E: alison.taylor@epv.scot

To: Chief Officers Integration Authorities



22 November 2017

Dear Colleagues

#### UNDERSTANDING PROGRESS UNDER INTEGRATION

We are writing to provide you with an update on our work to develop a plan for sharing progress updates on integration with the Ministerial Strategic Group for Health and Community Care (MSG).

We wanted firstly to thank you for sharing your local objectives on the initial six indicators in February. As you know, we used this information to provide MSG with a summary overview of Integration Authority ambitions around these indicators, progress to date and some of the challenges facing Integration Authorities in delivering on their objectives. MSG appreciated the time you took in developing and sharing your local objectives to support them in their role in providing political leadership for, and oversight of, integration.

Since then we have been considering how best to provide regular progress updates to MSG. With the agreement of the Chief Officer network, we established a small working group comprising lead officers for strategic commissioning and performance in Integration Authorities, Chief Finance Officers, data analysts and SG officials. The group has met three times to discuss possible approaches and suggested a potential framework for providing future updates to the MSG. This framework is outlined below.

During our discussions, we've reflected in some detail on a number of issues, for instance, how best to balance the presentation of a manageable number of common data points for all areas with more bespoke narrative insights that can help to draw out the richness of local variation; how to explore specific themes such as end of life care; how to explore the quality of service user experience; how best to recognise normal fluctuations in performance, particularly between frequent reporting dates. We've also shared experiences on setting local objectives.

Based on the these discussions, the working group has suggested the following outline framework for sharing regular progress updates with MSG based on four key elements:







- Quarterly data on the six indicators but in time building on these indicators for example to reflect the contribution of primary and social care.
- b) Comparison between progress in Integration Authorities and projections set out in local plans, and also with the likely result had no changes been made
- Overarching narrative summary, drawing out emerging themes from across Integration
- d) Local illustrations, inviting individual Integration Authorities to contextualise their progress with a presentation to the group and opportunity for discussion. Over time we aim to involve a wide range of Integration Authorities depending on the purpose / theme of the MSG meeting.

Taking account of the proposed framework, we have agreed with the working group and Chief Officers that we will co-produce a paper providing an update on progress for the next MSG meeting on 13 December, drawing on the recent annual performance reports, and will invite one or two partnerships to present at the meeting.

Beyond this meeting, we have agreed with the working group and Chief Officers that it would be helpful to provide MSG with an updated overview of local objectives and ambitions relating to the six indicators. We are aware that some Integration Authorities will have reviewed and updated their objectives since sharing them in February. You are therefore each invited to share your updated objectives for 2018/19 by 31 January 2018, following which we will provide an overview, with input and support from the working group and partnerships, for MSG for their meeting on 21 March 2018. We recognise that, as before, you will want to engage a range of partners in this process.

To support the process, we have developed draft guidance and a suggested format for sharing objectives with advice from the working group. ISD and others. This should help to simplify the task locally and will provide consistency across information shared. As before we would anticipate that there would be local support for developing objectives from the LIST team and other local analysts drawing on collective advice on best practice around developing objectives.

We will work with the working group and Chief Officers to expand the range of indicators used going forward. In view of the move to a single national social care dataset, we have agreed with the working group that we should feed in views around about the social care data collected to ensure that it provides intelligence which supports the planning and delivery of integrated services.

We would be grateful if you would provide your updated 2018/19 local objectives for MSG by 31 January 2018 to be sent to NSS.Source@nhs.net. We recognise that you will want to agree these objectives with your IJB, so if that is not possible within the timescale, we would be happy to accept interim objectives. We would welcome any feedback on this approach and the guidance - please contact my colleague Fee Hodgkiss fiona hodgkiss@gov.scot or 0131 244 5429.

Yours faithfully Alison Taylor Paula Moleay.

Alison Taylor Paula McLeay

Chief Officer Health and Social Care COSLA Deputy Director

Integration Division







### **Appendix 3 - MSG Guidance on Objectives Preparation**

# 1.1 Guidance on preparing and sharing local objectives around six indicators for MSG

### 1.2 Introduction

This document provides guidance on preparing and sharing local objectives around the six indicators agreed with the Ministerial Strategic Group for Health and Community Care (MSG). We have developed this document with the advice of the MSG data working group comprising representatives from Partnerships. The objectives will be used to produce trajectories for each individual Partnership and returned by ISD on a quarterly basis alongside baseline figures and data submitted during the previous quarter e.g. SMR information.

As well as helping to illustrate the progress of Health and Social Care Integration, it is important that the indicators and the data outputs meet the needs of local areas and so feedback around this is welcomed. It is likely that, with consultation, further indicators will be included in the future but these six will allow initial analysis to be undertaken of expected future trends.

### 1.3 Assistance

Excel outputs containing figures for each of the indicators will continue to be sent by ISD on a monthly basis. The footnotes attached to these tables explain how the indicators have been defined. As before, and if desired, we would anticipate that there would be local support available from the LIST team and other local analysts, drawing on collective advice on best practice for developing objectives. These various forms of assistance may be of particular benefit to those Partnerships who did not provide objectives previously.

## 1.4 Format for sharing objectives

In order to help summarise planned objectives for each of the 6 main indicators, we have provided a suggested format in <u>Appendix A</u> for Partnerships to use to share their updated objectives. This should help to simplify the task locally and will provide consistency across information shared by Partnerships, as well as making it possible to create standard outputs for all Partnerships. The attached table provides a standard format for each Partnership to share key pieces of information but is intended to act as a summary only, with more detailed plans/objectives contained within the main body of the Partnership plan.

It is understood that some areas may set different objectives for adults (18+) and children and, where that is the case, two tables should be completed. Where all objectives are the same for both adults and children, only one table is required. If preferred, objectives can also be provided separately for 18-74 and 75+.

The information below contains guidance on how to complete each section of the table with an illustrative example available in Appendix B (this is not based on real data). This guidance does not provide an exhaustive list of ways in which the table should be completed but it does outline the type of information required to ensure accurate trajectories can be calculated. If there are no updates to plans/objectives previously provided then Partnerships can simply reattach these but they are asked to complete the table following the guidance provided in this document.

### 1.5 Indicator descriptions

Objectives should be returned for each of the following indicators:

1. Number of emergency admissions into Acute (SMR01) specialties.

- 2. Number of unscheduled hospital bed days, with separate objectives for Acute (SMR01), Geriatric Long Stay (SMR01E) and Mental Health (SMR04) specialties.
- 3. Number of A&E attendances **and** the percentage of patients seen within 4 hours.
- 4. Number of delayed discharge bed days. An objective can be provided to cover all reasons for delay or separate objectives for each reason type i.e. Health and Social Care, Patient/Carer/Family-related, Code 9.
- 5. Percentage of last 6 months of life spent in the community.
- 6. Percentage of population residing in non-hospital setting for all adults and 75+. A suggested further breakdown would be: care home, at home (supported) and at home (unsupported).

For details on how figures are derived for each of these indicators, please see the footnotes beneath the tables in the accompanying spreadsheet *Integration-performance-indicators-v0.9*. A further update to this spreadsheet will be made available at the end of November. For those Partnerships wishing to provide monthly projections, space will be made in that spreadsheet which can be returned along with the summary table in <u>Appendix A</u>.

### 1.6 Baseline

Within the baseline section, Partnerships should provide a brief summary of recent trends in the data; this should be based on the monthly Excel spreadsheets sent by ISD. It should take into account the last 1 to 3 years and will offer some context for the objectives provided in the next section. It is expected that the baseline for most Partnerships will be the year prior to Health and Social Care Integration (2015/16), but this may not be the case for all areas.

## 1.7 Objective

Each Partnership is requested to share details of how they expect activity to change in the future, focussing up until the end of 2018/19 as a minimum. In order to calculate meaningful trajectories, the following information is required:

- 1. **Expected change (increase/decrease/remain the same).** This could be a percentage change or an actual number e.g. reduce by 5%/reduce by 1,500, as long as the measure is clear
- 2. **The baseline period the change is based on.** For example, a 3% reduction in overall unscheduled bed day figures in 2017/18 *compared to 2015/16*. It is important to note whether the baseline refers to calendar or financial year and that the baseline and change measures are comparable
- 3. **Expected figures.** As a result of parts 1 and 2 above, this will be the final total figures expected during the period in question. For example, 310,000 unscheduled bed days are expected during 2018/19. Providing this figure will make it easier to see the expected final outcome.

Further examples of how this could be presented (including the change and the baseline it relates to) are:

Month to month percentage changes in emergency admissions during 17/18 and 18/19 will match those seen during 15/16. Please see attached spreadsheet for monthly breakdowns.

- Compared to 2017 calendar year, gradually reduce overall delayed discharge bed days by 10% by 2019 calendar year's end.
- Gradually increase percentage of care delivered in community to 88.5% in 2019/20.

The more detail provided in this section should reduce the need to make assumptions and increase the accuracy of the planned trajectories. Please see <u>Appendix B</u> for further detailed examples.

### 1.8 Information on how objectives will be achieved

Each Partnership is asked to provide a brief summary of specific programmes, which are planned or have already been implemented that will help to achieve these objectives. It is expected that further detail will need to be included in the main body of the Partnership plan and, if helpful, hyperlinks can be added to these sections within the table.

### 1.9 Progress

This section will be completed by ISD/LIST analysts and returned to Partnerships on a quarterly basis. As much as possible, it will focus on the same baseline as the objective, highlighting how the data has changed over the course of the last quarter(s). It will also refer to the objective to assess whether or not the desired progress has been made. Presenting this information will be reliant on receiving objectives in the appropriate format, as described in the <u>Objective</u> section.

#### **Notes**

Please include any information or background notes which are important to highlight in relation to the objectives provided. This might be to offer some form of context to the objectives or to help explain some of the nuances around local data collection. The following list contains several specific examples but Partnerships are asked to provide any information they believe to be relevant:

- SMR completeness issues due to a new IT system being implemented which affect the baseline data between September-December 2016
- Step-up and step-down beds included within the bed days figures
- Ward attenders or patients attending Combined Assessment Units included within emergency admission figures

Again, if more detail is provided in the main body of the Partnership plan then hyperlinks can be provided to those sections and a simple summary included within the table.

### 1.10 Next steps

The next update to the Excel spreadsheets will be sent by ISD at the end of November and will contain data up to September 2017; this data should be used to help develop objectives. Please look at the "Completeness" tab for information around the completeness of SMR data within each Health Board.

We would be grateful if you could share your objectives by 31 January 2018. Please send to <a href="NSS.Source@nhs.net">NSS.Source@nhs.net</a>. If you have any questions about the process, please get in touch with your local LIST analyst or contact Martin McKenna in ISD <a href="NSS.Source@nhs.net">NSS.Source@nhs.net</a>

# Appendix A - Table

# MSG Improvement Objectives – summary of objectives for Adults and Children

East Lothian	Unplanned admissions	Unplanned bed days	A&E attendances	Delayed discharge bed days	Last 6 months of life	Balance of Care
Baseline						
Objective						
How will it be achieved?						
Progress (updated by ISD)						
Notes						

# Appendix B - Example

## MSG Improvement Objectives – summary of objectives for Adults and Children

Danta avalata A	Handanad	Unadamand had	A O F attandance	Dalays d disabays	Last Consulta of	Deleves of Cove
Partnership A	Unplanned	Unplanned bed	A&E attendances	Delayed discharge	Last 6 months of	Balance of Care
	admissions	days		bed days	life	
Baseline	2016/17 change:	2016/17 change:	2016/17 change:	H&SC reasons: 5%	2016/17 change:	Proportion of
	1% decrease in	2% decrease in	2% increase in	increase in 2016/17	Percentage of time	people (all ages)
	overall total	overall total	overall total	compared to	spent in community	living at home has
	compared to	compared to	compared to	2015/16	in L6M increased	gradually increased
	2015/16	2015/16	2015/16		from 86.1% in	from 97.8% in
				Patient/Carer/Family-	2015/16 to 87.2% in	2013/14 to 99.1% in
				related: 3% increase	2016/17.	2015/16. For the
				in 2016/17 compared		same time period
				to 2015/16		for 75+, there has
						been an increase
				Code 9 reasons: 2%		from 83.8% to
				increase in 2016/17		85.6%
				compared to		
				2015/16		
Objective	2017/18 change:	2017/18 acute	2017/18 change:	All reasons, 2017/18:	Increase	Expect to maintain
Objective	4% reduction in	change: 6%	4.5% reduction in	10% reduction in	percentage of time	2015/16 proportion
	overall total	reduction in acute	overall total	total compared to	spent in community	of people living at
	compared to	total compared to	compared to	2015/16	in L6M to 89.5% by	home until
	2015/16	2015/16	2015/16	Expected 2017/18	2018/19.	2018/19.
	Expected 2017/18	Expected 2017/18	Expected 2017/18	total: 85,500 bed	2020, 201	2020, 201
	total: 16,320	acute total: 291,400	total: 31,990	days		
	admissions	bed days	attendances			
				All reasons, 2018/19:		
	2018/19 change:	2018/19 acute	2018/19 change:	17% reduction in		
	7% reduction in	change: 10%	6.5% reduction in	total compared to		
	overall total	reduction in acute	overall total	2015/16		
	compared to	total compared to	compared to	Expected 2018/19		
	2015/16	2015/16	2015/16	total: 78,850 bed		

	Expected 2018/19 total: 15,810 admissions	Expected 2018/19 acute total: 279,000 bed days	Expected 2018/19 total: 30,980 attendances	days		
		Maintain number of bed days seen in GLS and Mental Health specialties in 2015/16 during 2017/18 and 2018/19	Maintain average A&E % seen within 4 hours (95.3%) in 2015/16 during 2017/18 and 2018/19			
		Expected 2017/18 GLS total: 8,000 bed days Expected 2018/19 GLS total: 8,000 bed days				
		Expected 2017/18 Mental Health total: 52,000 bed days Expected 2018/19 Mental Health total: 52,000 bed				
How will it be achieved	Falls prevention, Care and Repair, Home Safe Initiative	days				
Progress (updated by ISD)	April to September 2017 update: 3% reduction in overall total compared to same period in 2015/16	April to September 2017 update: 6% reduction in acute total compared to same period in 2015/16	April to September 2017 update: 5% reduction in overall total compared to same period in 2015/16.	April to September 2017 update: 12% reduction in all delayed bed days, compared to same period in 2015/16	Information presented annually – update will be included once data for this period becomes available.	Information presented annually – update will be included once data for this period becomes available.

		GLS and Mental Health figures similar to same quarter in 2015/16.	Average A&E % seen within 4 hours similar to same quarter in 2015/16.		
Notes	Ward attenders included within admissions	Step-up and step- down beds included within figures. See section 2.1 for details.			

## Appendix 4 - MSG Indicators - Progress in 2017 and Objectives for 2018/19

## $MSG\ Improvement\ Objectives\ -\ Planned\ 2018/19\ objectives\ for\ adults\ in\ East\ Lothian\ HSCP$

East Lothian	Unplanned admissions	Unplanned bed days	A&E attendances	Delayed discharge bed days	Last 6 months of life	Balance of Care
Baseline	2016/17 change 3.8% reduction in overall total compared to 2015/16	2016/17 change 3.3% increase in overall emergency bed days(acute specialties) compared to 2015/16 7.5% increase in unplanned bed days within mental health compared to 2015/16 40.1% reduction in Geriatric Long Stay unplanned bed days	2016/17 change 2.8% increase in A&E attendances compared to 2015/16 Average % seen within 4 hours improved to 93.1% compared to 2015/16 average of 91.7%	2016/17 change All Delay Reasons 6.7% reduction compared to 2015/16 H&SC + Patient/Carer/Family- related reasons 4.9% reduction in 2016/17 compared to 2015/16 Code 9 reasons 34.2% reduction in 2016/17 compared to 2015/16	2016/17 change Percentage of time spent in community in L6M increased from 83.5% in 2013/14 to 85.7% in 2016/17 Percentage of time spent in large hospital in L6M decreased from 13.3%% in 2013/14 to 11.7% in 2016/17	2016/17 change Proportion of people (all ages) living at home (supported and unsupported) has slightly increased from 99.1% in 2013/14 to 99.2% in 2016/17. For the same time period for those 75+, there has been an increase from 92.3% to 93.0%
Objectives in 2017/18	1. Unplanned admissions Reduce unplanned admissions by 5%.	2. Occupied bed days for unscheduled care Reduce by 10% occupied bed days for unscheduled care.	3. A&E  Maintain 95% 4 hour compliance target in accident and emergency from March 2018.	4a & 4b Delayed Discharges (including those delayed due to Adults With Incapacity)  4a. Reduce delayed discharge bed days by 50% in period Jul – Dec 2017 compared to same 2016 period.  4b. Reduce number of delayed discharges by 50% by Dec 2017 compared to Dec 2016.	5. End of Life Care (e.g. proportion of last 6 months of life spent at home or in a community setting)  No more than 10% of last 6 months of life spent in a large hospital by 2018/19.	6. Balance of care spend across institutional and community care services 98% of over 75s to be supported in non-acute setting

Progress (updated by ISD)	April to October 2017 update:  11% reduction in overall total compared to same period in 2016. (remaining data for 2017/18 is awaited)	April to September 2017 update:  0.9% increase in unplanned bed days (acute specialties) compared to same period in 2016.  10.8% reduction in mental health specialties compared with same period in 2016.  43.3% reduction in GLS bed days compared with same period in 2016. (remaining data for 2017/18 is awaited)	April to October 2017 update:  0.9% increase in overall total attendances compared to same period in 2016.  Average A&E compliance 93.9% seen within 4 hours compared to 93.5% for same period in 2016.	July to November 2017 update:  33.1% reduction in all reason delayed bed days, compared to same period in 2016  37.8% reduction in H&SC+P/C/F reasons compared to same period in 2016  73.9% increase in Code 9 reasons compared to same period 2016.	In 2016/17 location of care in the last 6 months of life was:  Community: 85.7%  Palliative: 0.9%  Community  Hospital: 1.7%  Large Hospital: 11.7%  For 2016/17 11.7% of care in the last 6 months of life was in a large hospital (2017/18 data is awaited)	In 2016/17 care for the over 75s was delivered in:  Acute Setting: 1.5%  Community Hospital: 0.3%  Hospice: 0.0%  Care Home: 5.2%  Home: 9.7% (supported)  Home: 83.3% (unsupported)  In 2016/17 total being supported out of acute settings was 98.5%  (2017/18 data is awaited)
Notes	Based on provisional data up to Nov 2017.	Based on provisional data up to Nov 2017.	This illustrates progress since 2012/13 Progress for 2017/18 was adversely affected by high winter pressures on A&E.	Progress is being made towards the target	Indicators 5 & 6 are only updated annually. Performance for full year 2017/18 will not be available until later in 2018.  This is an improvement on the 2013/14 performance of 13.3%  Progress is being made towards the target	

# **Proposed Objectives for 2018/19**

Proposed 2018/19 Objectives	1. Unplanned admissions  Reduce unplanned admissions by a further 5% in 2018/19.	2. Occupied bed days for unscheduled care Reduce by 10% in 2018/19 occupied bed days across all areas of unscheduled care.	3. A&E Reach 4 hour compliance of 95% in Accident and Emergency in 2018/19.	4a & 4b Delayed Discharges (including those delayed due to Adults With Incapacity) 4a. Continue progress towards delivering a 50% reduction in delayed discharge bed days in 2018/19 compared to 2016/17. 4b. Continue work to deliver a 50% reduction in the number of all cause delayed discharges by end of 2018/19 compared to end of 2016/17.	5. End of Life Care (e.g. proportion of last 6 months of life spent at home or in a community setting)  Achieve and maintain performance of no more than 10% of last 6 months of life spent in a large hospital by end 2018/19.	6. Balance of care spend across institutional and community care services  Maintain performance of 98% of over 75s being supported in non-acute settings through 2018/19.
How will it be achieved?	Through co-ordinated actions of: Primary Care Teams Community Teams Hospital at Home Team Care Home Team Hospital to Home Team taking a proactive role	Through co-ordinated actions of: Primary Care Teams Community Teams Hospital to Home Team	Through co-ordinated actions of:  A&E Team  Acute Team	Through co-ordinated actions of: Primary Care Teams Community Teams Hospital at Home Team Care Home Team maintaining clients in their care home whilst unwell and not admitting to acute District Nursing Team intervening early to support patients	Through co-ordinated actions of: Palliative Care Team Hospital at Home Team Care Home Team	Through co-ordinated actions of: Care of Elderly Team Primary Care Teams Community Teams Hospital to Home Team Hospital at Home Team

#### Appendix 4 - Proposed Suite of Directions for 2018/19





## East Lothian Integration Joint Board 2018/19 Directions

#### 1. Policy Context

National Guidance - The Public Bodies (Joint Working) (Scotland) Act 2014 places a duty on Integration Authorities to develop a Strategic Plan for integrated functions and budgets under their control. East Lothian Integration Joint Board (IJB) requires a mechanism to action the Strategic Plan; this mechanism takes the form of binding directions from the Chief Officer as outlined below from the Integration Joint Board to one or both of NHS Lothian and East Lothian Council. All directions issued are pursuant to Sections 26 to 28 of the Public Bodies (Joint Working) Act 2014 and the appropriate element of East Lothian IJB's Integration Scheme.

East Lothian IJB's Approach to Directions 2018/19 - For Directions to successfully deliver their expected outcomes, they need to be considered and enacted in a genuine spirit of partnership working between the IJB, East Lothian Council and NHS Lothian. There is a clear commitment by the IJB not to create financial turbulence and instability in the delivery of direct services. During 2017/18, as in the year before, the Partnership sought to work in close collaboration with both NHS Lothian and East Lothian Council to ensure delivery of the Directions without unintended consequences for other parts of the system. As the IJB moves into its third year of operation it must maintain leadership in reshaping health and social care services to continue to move towards local management and local delivery of these services, while delivering efficiencies. The Directions which operate in 2018/19 set out the ambitions of the IJB.

The <u>East Lothian Strategic Plan 2016-19</u> outlines the direction of travel for the development of health and social care services in the county. In many areas the Plan remains at a high level to allow further work to be undertaken with key partners about how to achieve desired changes, such as reducing reliance on Acute Hospitals and Care Homes by strengthening community, primary care and care at home services. NHS Lothian and East Lothian Council are asked to develop and implement action plans which will enable the direction of travel outlined in the Strategic Plan to be realised with a particular emphasis on all services taking action to address Health Inequalities in all its manifestations. East Lothian Council and NHS Lothian are also asked to fully engage in the development of approaches to realise the ambition of much stronger locality working, maintaining a focus on services to older people.

East Lothian Integration Joint Board (IJB) must ensure that mechanisms are in place to action the Strategic Plan through its binding Directions to one or both of NHS Lothian and East Lothian Council and through action arising from the Directions. The new Strategic Plan which is to be developed in the second half of 2018/19 will also require to be supported and auctioned by East Lothian Council and NHS Lothian as partners.

Addressing inequalities - There are significant pockets of poverty across East Lothian. Although there is more deprivation in the west of the county, 50% of people experiencing poor health do not live in the most deprived areas<sup>1</sup>. Also, there is evidence that being part of a specific group, including those with 'protected characteristics' under equalities legislation, for example people with disabilities, minority ethnic groups and the LGBT community can increase the likelihood of poor life chances.

East Lothian Health and Social Care Partnership will consider the impact of its policies and services on health inequalities and wider social inequalities by continuing to:

- Provide universal services which are proportionate to needs and complement these with flexible, targeted specialised services as required (e.g. for those who are most vulnerable and/or have the highest needs)
- Improve accessibility of services
- Take a person-centred, needs-driven approach to planning, delivery and evaluation of services
- Develop policies and approaches which consider the impacts upon wider determinants of health and wellbeing (income, employment, housing, transport, community resources, natural and built environments etc)
- Avoid price barriers to accessing services wherever possible and minimise price barriers where they are unavoidable
- Increase preventative and community-based resources.

<sup>&</sup>lt;sup>1</sup> As defined by the Scottish Index of Multiple Deprivation

#### 2. Financial Context

The financial resource allocated to each delegated function in a direction is a matter for the Integration Joint Board to determine. East Lothian IJB is constituted under Local Government regulations and as such, under the Local Government in Scotland Act 2003, has a duty to make arrangements to secure best value. It remains the expectation of the IJB that NHS Lothian and East Lothian Council will deliver the functions as directed in the spirit of this obligation.

The financial values ('budgets') associated with the Directions will be finalised once the offers made to East Lothian IJB by NHS Lothian and East Lothian Council are known for the 2018/19 year. It is understood that the finalisation of the 2018/19 financial plans by both partners continues and that the totality of these budgets includes efficiency schemes under development. Notwithstanding the current indicative nature of budgets, East Lothian IJB will not sanction expenditure in excess of these amounts without further discussion and agreement.

The financial position for 2018/19 will be challenging, with both NHS Lothian and East Lothian Council continuing to face major financial pressures. It is recognised that the initial proposals on allocation of the Set Aside and Hosted Services budgets for 2018/19 will require more detailed work to ensure parity but also to take account of significant differences in need and in the availability of local resources. A key direction of travel remains to disinvest in institutional care, including bed-based hospital care and care homes for older people.

The IJB is required to deliver financial balance in each and every year and to financially plan to deliver recurrent balance. Achieving a firm financial footing is critical to the success of the IJB and its Strategic Plan and to its ability to drive system-wide reforms. Central to this is the need to ensure that the IJB creates financial headroom to ensure it can maintain financial resilience. NHS Lothian and East Lothian Council are therefore required to share information on financial performance of delegated services to allow the IJB to gain assurance that said services are currently being delivered sustainably within approved resources and that the anticipated initial payments will be sufficient for the IJB to carry out its integration functions.

#### 3. Growth in demand

The IJB has examined a number of factors to estimate anticipated growth including population and non-demographic growth, estimated looking at historical trends and extrapolated. Our plans acknowledge rising year-on-year activity and growth demand. In monitoring directions, the IJB will continue to undertake further analysis of the assumptions applied as they develop including:

- Whether the total budget and activity aligned to each programme is realistic and achievable
- Whether the split of budget and activity assumed for individual programmes is sensible
- Further examination of thresholds and any assumed increases or reductions.

As a fundamental principle there should be neither disinvestment nor further investment in delegated services without being subject to full discussion and agreement with East Lothian IJB.

#### 4. Compliance and Performance Monitoring

In order to ensure East Lothian IJB fulfils its key strategic planning and scrutiny functions, and further develops and coordinates the implementation of its Strategic Plan, monitoring of our own and our partners' performance is imperative. The primary responsibility for performance management in respect of delivery of the delegated functions will rest with the IJB. NHS Lothian and East Lothian Council will provide performance information for relevant services on a regular basis through the year so that the IJB can develop a comprehensive performance management and reporting system.

In addition to the specific commitments set out in East Lothian IJB's Integration Scheme and the obligations regarding provision of information under the Act, NHS Lothian will provide the Integration Joint Board with any information which the Integration Joint Board may require from time to time to support its responsibilities regarding strategic planning, performance management, and public accountability.

For each service which the IJB issues Directions for, NHS Lothian and East Lothian Council will, as appropriate through its officers, provide an annual report in the final quarter of financial year 2018/19 on how it:

- Assesses the quality of services it provides on behalf of the IJB
- Ensures the regular evaluation of those services as part of an integrated cycle of service improvement.

NHS Lothian is expected to provide performance monitoring data in line with the Lothian Integration Dataset.

In addition, for each service which the IJB issues Directions for, NHS Lothian and East Lothian Council will, as appropriate through its officers, provide financial analysis, budgetary control and monitoring reports as and when requested by the IJB. The reports will set out the financial position and outturn forecast against the payments by the Integration Joint Board to NHS Lothian in respect of the carrying out of integration functions. These reports will present the actual and forecast positions of expenditure compared to Operational Budgets for delegated functions and highlight any financial risks and areas where further action is required to manage budget pressures.

The IJB also directs NHS Lothian to provide costed activity analysis for all delegated functions as they pertain to the East Lothian population.

#### 5. NHS Lothian Acute Hospitals Plan

The key objective of integration, to shift the balance of care from hospital and care home provision to community provision requires careful planning with the acute sector in collaboration with the other three IJBs in Lothian. As plans are developed the IJB will require a better understanding of East Lothian's current and expected use of all set-aside resources (beds and outpatient facilities). Following this, new or updated Directions may be issued in-year to initiate necessary changes. This approach will aim to maintain the stability of service delivery as NHS Lothian, the acute hospital service and partners work together on the finalisation and implementation of the Hospital Plan.

#### 6. NHS Hosted Services

Progress has been made in identifying opportunities for integrated management arrangements to locally deliver some services such as substance misuse. For those services which, because of economies of scale, such an approach is not considered viable, arrangements will be developed which strengthen a whole system approach within East Lothian. As arrangements develop, further Directions will be issued as appropriate. In the meantime, NHS Lothian Hosted Services are asked to take account of the general direction of travel described in the Strategic Plan.

#### 7. Impact of Directions on other Lothian IJBs

East Lothian Integration Joint Board's Strategic Plan and aligned financial plan acknowledge the need to plan collaboratively on a prudent and realistic basis; this recognises the importance of maintaining current joint planning and risk sharing strategies across Lothian.

#### 8. New Directions for 2018/19

The Directions below, which are described in more detail in the following pages, set out the new Directions it is planned to issue for 2018/19. As service development and delivery plans progress during the year and as funding allows, new or revised Directions will be issued.

For those services which are not covered by a specific Direction the expectation is that NHS Lothian and East Lothian Council will continue to provide these services to a high quality within current budgets, endeavouring to meet national and local targets and following the strategic objectives laid out in the Strategic Plan.

#### **Directions to NHS Lothian on Community Services**

**D01h** - Deliver the new East Lothian Community Hospital within the agreed timeframe to include the agreed bed base and the agreed inpatient and outpatient services within a deliverable financial model (**new Direction** - replaces D01a).

#### **Direction to East Lothian Council on Delegated Services**

**D02i** – Provide 12 months of funding to organisations that passed the Section 10 grants review to support planned service redesign.

#### Direction to NHS Lothian on Transfer of Budgets from Midlothian IJB

**D03c** - Deliver to East Lothian IJB in the 2019/20 financial year the full effect of the financial resources released through the repatriation of East Lothian residents from Midlothian Community Hospital (**new Direction** - replaces D03b).

#### **Directions to NHS Lothian on Primary Care:**

- **D10d** NHS Lothian to produce by 31<sup>st</sup> July 2018 a Primary Care Improvement Plan for East Lothian covering all delivery arrangements for all aspects of the new GMS Contract. This Plan should be used as the starting point for the development of the East Lothian Primary Care Strategy (**new Direction** replaces D04b, D10a and D10c, supersedes D01e and D01f and aligned with D01g, D04a)
- **D10i -** With the finalisation of the Prestonpans Medical Practice extension NHS Lothian and its estates department are directed to focus on the delivery of the Harbours Medical Practice business case and the planned extension (**new Direction** replaces D01d).

#### Direction to NHS Lothian on shifting the balance of care for care groups:

- **D12f** Transfer of services of Ward 2 Belhaven Hospital to Ward 3 or Ward 1 Belhaven Hospital (**new Direction** in January 2018).
- **D12g** NHS Lothian and East Lothian Council to review community Services for Adults with complex needs to develop a transformation programme (**new Direction**).

#### **Direction to NHS Lothian to support Delivery of Modern Outpatients recommendations:**

**D13b** - Redesign of diabetes services and further development of Type 2 diabetes care in primary care. In addition, NHS Lothian to cooperate with other east region partners and the Diabetes Managed Clinical Networks to develop a regional approach to the prevention and reversal of Type 2 diabetes (**new Direction**).

#### Directions to NHS Lothian on drug and alcohol services and mental health:

- **D15e** Transfer to ELHSCP of the full revenue resource for substance misuse services, including the 12% share of Scottish Government recurrent funding and additional funding for 2018/19 (**new Direction** supersedes D15a)
- D15f ELHSCP to continue to support centrally delivered drug and alcohol services at the current level for 2018-19, with a requirement that quarterly reports detailing patient activity and outcomes, plus progress towards financial targets, are produced.
  In addition, ELHSCP will indicate within Quarter 3 if any changes are required in their use of and financial commitment to centrally delivered drug and alcohol services for 2019– 20 (new Direction).
- **D15g** ELHSCP to implement in 2018-19 locality and recovery based services to enhance assertive outreach in primary care to improve the service offer across East Lothian (**new Direction**).

## Direction to NHS Lothian and East Lothian Council to make resources available to support the production of a revised Strategic Plan:

**D17a -** The IJB intends to review its Strategic Plan and to finalise a supporting Financial Plan. The IJB requires that the partners provide appropriate financial resources to support this work (**new Direction**).

#### 9. Directions continuing from 2016/17 and 2017/18

The Directions below, which continue from 2016/17 and from 2017/18, are described in more detail in the following pages.

#### 2016/17 Directions continuing through 2018/19

- **D02f** Establish a housing and health and social care planning interface group.
- **D04a -** Continue to work collaboratively to support and accelerate local delivery of the key recommendations of the national review of primary care out of hours services.
- **D05a -** East Lothian Integration Joint Board direct NHS Lothian to make payments to East Lothian Council in line with the agreed payment schedule.
- **D05b** East Lothian Integration Joint Board direct East Lothian Council to provide services as outlined and within and in accordance with the budgets outlined in Section 10 of this Direction.
- **D09 -** Provide a full analysis on the detail of human and financial resources identified within NHS Lothian's Strategic Programmes budget within the financial year 2015/16, including an analysis of resource and activity as it relates to all delegated functions.

#### 2017/18 Directions continuing through 2018-19

#### 10 - Directions to NHS Lothian on Primary Care

**D10b** - Support to Primary Care Quality Clusters.

#### 11 - Directions to NHS Lothian and ELC on reducing use of acute services and increasing community provision

- D11a Emergency Assessment Services and Emergency Admissions.
- D11b Occupied Bed Days.
- **D11c** Delayed Discharges.
- **D11d** End of Life Care.
- D11e Transfer of AHP resource from Secondary Care.

#### 12 - Directions to NHS Lothian and East Lothian Council on shifting the balance of care for care groups

- D12a ELC delivered care at home services.
- D12b Extra care housing.
- **D12c** Day services for older people.
- D12d Reprovision of Eskgreen and Abbey care homes and Edington and Belhaven hospitals.
- D12e Integrated Care Fund Review.
- D12f Transfer of patients of Ward 2 Belhaven Hospital to Ward 3 Belhaven Hospital (issued as a new Direction in January 2018).

#### 13 - Direction to NHS Lothian to support delivery of Modern Outpatients recommendations

D13a - Redesign of diabetes services and further development of care of Type 2 diabetes in primary care

#### 14 - Direction to NHS Lothian and East Lothian Council on support to carers

**D14a** - Finalisation and implementation of the East Lothian Carers' Strategy and preparation for the Carers' Act (**replaces D02d**).

#### 15 - Directions to NHS Lothian on drug and alcohol services and mental health

- D15b Redesign of MELDAP
- **D15c** Provision of adult mental health services
- D15d Provision of older adult mental health services

#### 16 - Direction to NHS Lothian and East Lothian Council on Community Justice

D16a - Work with the Reducing Reoffending Board

All Directions above will remain in place, until varied, revoked or superseded by a later direction in respect of the same function.

#### 10. Directions 'retired' or replaced for 2018/19

The Directions below have been replaced by other Directions, so will no longer operate through 2018/19.

- **D01a** Continue to support an Outline Business Case, Final Business Case and Financial Close for a new integrated East Lothian Community Hospital (**replaced by D01h**).
- **D01b** Continue to support, develop and agree a 'decant programme' from Liberton and Midlothian Hospitals. (achieved)
- **D01d** Deliver business cases for Prestonpans and Harbours Medical Practices (**replaced by D10i**).
- **D01g** Develop and implement a prescribing budget calculation which more accurately reflects demographic change and need across Lothian (being replaced by new NHS Lothian budget model).
- **D02d** Develop and implement a new Carers Strategy for East Lothian (replaced by D14a).
- **D02h** Complete a review of all current Section 10 grants against an agreed prioritisation framework to ensure strategic fit and best value and bring forward proposals for investment and disinvestment (**replaced by D02i**).
- **D03a** Ensure the repatriation of East Lothian residents from Liberton Hospital in Edinburgh with the associated shift in aligned financial resources to the IJB (**achieved**).
- **D03b** Ensure the repatriation of East Lothian residents from Midlothian Community Hospital with the associated shift in aligned financial resources to the IJB, based on agreed activity data to match this (**replaced by D03c**).
- **D04b** Continue to work collaboratively to support and accelerate local delivery of the key actions of the Transitional Quality Arrangements for the GMS contract in Scotland (**replaced by D10d**).
- **D08** NHS Lothian to delegate the agreed budget for the Integration (Social Care) Fund to the IJB in line with the proposal from East Lothian Council.
- **D10a** Preparations for the New GMS Arrangements (**replaced by D10d**).
- D10c Primary Care Strategy (replaced by D10d).
- D15a Allocation to ELHSCP of the full 12% of Drug and alcohol funding (replaced by D15e).

# **Directions Applying in 2018/19**

**Continuing Direction** 

**New Direction** 

# 01 - Direction to NHS Lothian on East Lothian Community Hospital (Direction D01h)

1	Implementation date	30 <sup>th</sup> April 2018	
2	Reference number	EL IJB/NHSL/D01h 2018 (East Lothian Community Hospital)	
3	Integration Joint Board authorisation date	26 <sup>th</sup> April 2018	
4	Direction to	NHS Lothian	
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers	
6	Does this direction supersede or amend or cancel a previous Direction?	Replaces Direction 01a	
7	Type of function	Integrated	

8	Function(s) concerned	All adult health services planned and delivered by East Lothian Integration Joint Board which are only delivered within the geographical boundaries of the East Lothian Health and Social Care Partnership as they relate to adult primary and community health services and defined as health care services as required by the Public Bodies (Joint Working) (Prescribed Health Board Functions) (Scotland) Regulations 2014. This includes additional functions exercisable in relation to health services as they relate to provision for people under the age of 18 as defined in East Lothian Integration Joint Board's Final Integration Scheme (February 2015)
9.	Required Actions / Directions	East Lothian Integration Joint Board direct NHS Lothian to continue to provide health services as delivered at time of issue of this direction in pursuance of the functions outlined in Section 7 and Section 8, with ancillary support as required for effective functioning of those services within the associated budget noted below, for the population of East Lothian.  Specifically over the course of the financial year, East Lothian Integration Joint Board direct NHS Lothian to work with the Chief Officer and officers of the IJB to ensure delivery of the following outcomes or outputs to be brought to the IJB for consideration and approval:  D01h. Deliver the new East Lothian Community Hospital within the agreed timeframe to include the agreed bed base and the agreed inpatient and outpatient services within a deliverable financial model.

# 02 - Direction to on East Lothian Council Delegated Functions (Direction D02f, D02i)

1	Implementation date	1 <sup>st</sup> April 2016
2	Reference number	EL IJB/ELC/D02f-2016 (East Lothian Council delegated functions)
3	Integration Joint Board authorisation date	31st March 2016
4	Direction to	East Lothian Council
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers
6	Does this direction supersede or amend or cancel a previous Direction?	N/A
7	Type of function	Integrated function

8	Function(s) concerned	All services planned and delivered by East Lothian Integration Joint Board which are only delivered within the geographical boundaries of the East Lothian Health and Social Care Partnership as they relate to adult social care services and defined as required by the Public Bodies (Joint Working) (Scotland) Act 2014. This includes additional functions East Lothian Council has chosen to delegate to the Integration Joint Board as defined in East Lothian Integration Joint Board's Final Integration Scheme (February 2015).
		Social work services for adults and older people Services and support for adults with physical disabilities and learning disabilities Mental health services Drug and alcohol services Adult protection and domestic abuse Carers support services Community care assessment teams Support services Care home services Adult placement services Health improvement services Aspects of housing support, including aids and adaptations Day services Local area co-ordination Respite provision Occupational therapy services Re-ablement services, equipment and telecare Criminal Justice Social Work services including youth justice The Chief Officer in East Lothian will be the lead operational director for these services
9.	Required Actions / Directions	East Lothian Integration Joint Board directs East Lothian Council to continue to provide social care services as delivered at time of issue of this direction in pursuance of the functions outlined in Section 7 and Section 8, with ancillary support as required for effective functioning of those services within the associated budget noted below, for the population of East Lothian.  Specifically over the course of the financial year 2016-2017, East Lothian Integration Joint Board direct East Lothian Council to work with the Chief Officer and officers of the IJB to ensure delivery of the following outcomes or outputs to be brought to the IJB for consideration and approval:  D02.f Establish a housing and health and social care planning interface group to deliver the key actions and priorities from the Strategic Plan's Housing Contribution Statement and needs assessment, including a clear understanding and recognition of delegated functions and budgets as they pertain to the IJB.

1	Implementation date	1 <sup>st</sup> April 2016
2	Reference number	EL IJB/ELC/D02i-2018 (East Lothian Council delegated functions)
3	Integration Joint Board authorisation date	31st March 2016
4	Direction to	East Lothian Council
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers
6	Does this direction supersede or amend or cancel a previous Direction?	N/A
7	Type of function	Integrated function

8	Function(s) concerned	All services planned and delivered by East Lothian Integration Joint Board which are only delivered within the geographical boundaries of the East Lothian Health and Social Care Partnership as they relate to adult social care services and defined as required by the Public Bodies (Joint Working) (Scotland) Act 2014. This includes additional functions East Lothian Council has chosen to delegate to the Integration Joint Board as defined in East Lothian Integration Joint Board's Final Integration Scheme (February 2015)  Social work services for adults and older people Services and support for adults with physical disabilities and learning disabilities Mental health services Drug and alcohol services Adult protection and domestic abuse Carers support services Community care assessment teams Support services Care home services Health improvement services Health improvement services Local area co-ordination Respite provision Occupational therapy services Re-ablement services, equipment and telecare Criminal Justice Social Work services including youth justice The Chief Officer in East Lothian will be the lead operational director for these services
9.	Required Actions / Directions	East Lothian Integration Joint Board direct East Lothian Council to continue to provide social care services as delivered at time of issue of this direction in pursuance of the functions outlined in Section 7 and Section 8, with ancillary support as required for effective functioning of those services within the associated budget noted below, for the population of East Lothian.  Specifically over the course of the financial year 2018-2019, East Lothian Integration Joint Board direct East Lothian Council to work with the Chief Officer and officers of the IJB to ensure delivery of the following outcomes or outputs to be brought to the IJB for consideration and approval:  D02i - Where the 2017/18 Section 10 Grant reviews showed an organisation was providing Best Value and demonstrating Strategic Fit, a further period of funding of no more than 12 months should be provided. During this period, the organisations so funded must undergo service redesign to improve their financial position as well as the outcomes of the service.

9.a	Target and Measurement of Progress	Target -	All organisations receiving an extension of grant funding must complete, within 12 months, an appropriate service review to deliver financial efficiencies and service improvements.
			The Community Support Project must complete a need assessment by October 2018 to establish what model and level of community provision is required across East Lothian. The needs assessment will be based on the premise that mainstream community services can be better used to support people to integrate into their communities and to move people away from unnecessary use of statutory services.
		Measurement –	<ul> <li>Completion of suitable servicer delivery reviews</li> <li>Amount of funding released</li> <li>Delivery of service efficiencies.</li> </ul>

# 03 - Direction to NHS Lothian on Set Aside (Direction D03c)

1	Implementation date	30 <sup>th</sup> April 2016
2	Reference number	EL IJB/NHSL/D03c-2018 (NHS Lothian Set Aside)
3	Integration Joint Board authorisation date	26 <sup>th</sup> April 2018
4	Direction to	NHS Lothian
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their
		carers.
6	Does this direction supersede or amend or cancel a previous Direction?	N/A
7	Type of function	Set aside
8	Function(s) concerned	All adult acute hospital health services planned by East Lothian Integration Joint Board and defined as hospital services as required by the Public Bodies (Joint Working) (Prescribed Health Board Functions) (Scotland) Regulations 2014 and in East Lothian Integration Joint Board's Final Integration Scheme (February 2015).  Accident and Emergency services provided in a hospital Inpatient hospital services relating to the following branches of medicine:  a) General medicine b) Geriatric medicine c) Rehabilitation medicine

		d) Respiratory med e) Psychiatry of lea	
		Mental health services provided on the	nospital in relation to an addiction or dependence on any substance provided in a hospital except secure forensic mental health services e three acute hospital sites and related hospitals within NHS Lothian (Royal Western General Hospital and St. John's Hospital) will be operationally managed
9.	Required Actions / Directions	delivered at time of issu 8, with ancillary support	Joint Board direct NHS Lothian to continue to provide health services as the of this direction in pursuance of the functions outlined in Section 7 and Section as required for effective functioning of those services within the associated the population of East Lothian.
			urse of the financial year 2016-2017, East Lothian Integration Joint Board direct th the Chief Officer and officers of the IJB to ensure delivery of the following
			othian IJB in the 2019/20 financial year the full effect of the financial resources patriation of East Lothian residents from Midlothian Community Hospital.
9.a	Target and Measurement of Progress	Target -	Identify all funds associated with East Lothian patients accommodated within Midlothian Community Hospital and reach agreement with relevant parties for transfer of these funds to East Lothian IJB within an acceptable timeframe.
		Measurement -	Amount of funding released.

# **04 - Direction to NHS Lothian on Hosted Services** (Direction D04a)

1	Implementation date	1 <sup>st</sup> April 2016	
2	Reference number	EL IJB/NHSL/D04a-2016 (NHS Lothian Hosted Services)	
3	Integration Joint Board authorisation date	31st March 2016	
4	Direction to	NHS Lothian	
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers	
6	Does this direction supersede or amend or cancel a previous Direction?	N/A	
7	Type of function	Integrated (hosted)	
8	Function(s) concerned	A range of delegated functions defined as health care services as required by the Public Bodies (Joint Working) (Prescribed Health Board Functions) (Scotland) Regulations 2014 and including additional functions as they relate to provision for people under the age of 18 as defined in East Lothian Integration Joint Board's Final Integration Scheme, require them to be provided as part of a single Lothian-wide service, commonly referred to as "hosted services". These services will be managed at a pan-Lothian level by one of the Chief Officers of the Lothian IJBs in their role as a Joint Director of NHS Lothian The services are:  Sexual Health Hosted AHP Services	

		Hosted Mental Health Rehabilitation Medicine Learning Disabilities Substance Misuse Oral Health Services Hosted Psychology Service Complex Care Lothian Unscheduled. Care Service. Other Strategic Programmes
9.	Required Actions / Directions	East Lothian Integration Joint Board direct NHS Lothian to continue to provide health services as delivered at time of issue of this direction in pursuance of the functions outlined in Section 7 and Section 8, with ancillary support as required for effective functioning of those services within the associated budget noted below, for the population of East Lothian.  Specifically over the course of the financial year 2016-2017, East Lothian Integration Joint Board direct NHS Lothian to work with the Chief Officer and officers of the IJB to ensure delivery of the following outcomes or outputs to be brought to the IJB for consideration and/or approval:  D04 a. Continue to work collaboratively to support and accelerate local delivery of the key recommendations of the national review of primary care out of hours services.

# **05 - Direction to NHS Lothian and East Lothian Council on resource Transfer** (Directions D05a, D05b)

1	Implementation date	1 <sup>st</sup> April 2016
2	Reference number	EL IJB/NHSL/D05a, D05b-2016 (Resource Transfer)
3	Integration Joint Board authorisation date	31st March 2016
4	Direction to	NHS Lothian and East Lothian Council
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  Maximise independent living Provide specific interventions according to the needs of the service user Provide an ongoing service that is regularly reviewed and modified according to need Provide a clear care pathway which connects services Contribute to preventing unnecessary hospital admission Support timely hospital discharge Prevent unnecessary admission to residential or institutional care Are personalised and self-directed, putting control in the hands of the service user and their carers
6	Does this direction supersede or amend or cancel a previous Direction?	N/A
7	Type of function	Integrated function
8	Function(s) concerned	All delegated functions as they pertain to human and financial resources incorporated within resource transfer payment budgets.

9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian and East Lothian Council as follows:
		D05a. NHS Lothian to continue to make payments to East Lothian Council in line with the agreed payment schedule.
		D05b. East Lothian Council to provide services as outlined and within and in accordance with the budgets outlined in Section 10 of this Direction.

# **09 - Direction to NHS Lothian on Strategic Programmes** (Direction D09)

1	Implementation date	1 <sup>st</sup> April 2016	
2	Reference number	EL IJB/NHSL/D09-2016 (NHS Lothian Strategic Programmes)	
3	Integration Joint Board authorisation date	31st March 2016	
4	Direction to	NHS Lothian	
5	Purpose and strategic intent	To provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living • Provide specific interventions according to the needs of the service user • Provide an ongoing service that is regularly reviewed and modified according to need • Provide a clear care pathway which connects services • Contribute to preventing unnecessary hospital admission • Support timely hospital discharge • Prevent unnecessary admission to residential or institutional care • Are personalised and self-directed, putting control in the hands of the service user and their carers	
6	Does this direction supersede or amend or cancel a previous Direction?	N/A	
7	Type of function	Integrated	
8	Function(s) concerned	All delegated functions as they pertain to human and financial resources incorporated within NHS Lothian Strategic Programmes budget	

9.	Required Actions/Directions	Specifically over the course of the financial year 2016-2017, East Lothian Integration Joint Board directs NHS Lothian to work with the Chief Officer and officers of the IJB to ensure delivery of the following outcomes:
		D09a. Provide a full analysis on the detail of human and financial resources identified within NHS Lothian's Strategic Programmes budget within the financial year 2018/19, including an analysis of resource and activity as it relates to all delegated functions. The analysis should be available by September 2018.

# 10 - Directions to NHS Lothian on Primary Care (D10b, D10d, D10i)

1	Implementation date	1 <sup>st</sup> April 2017	
2	Reference number	EL IJB/NHSL/D10b-2017 (East Lothian GP quality clusters)	
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017	
4	Direction to	NHS Lothian	
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers	
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Continuing Direction	
7	Type of function	Integrated	
8	Function(s) concerned	The development of East Lothian's two GP Quality Clusters in the west and the east of the county.	

9.	Required Actions / Directions	D10b - NHS Lothian share of all funds allo	to allocate to East Lothian Health and Social Care Partnership its proportionate ocated for the development and support of GP Quality Clusters and to work with the op quality improvement activities in general practice.
9.a	Target and Measurement of Progress	Target -	Production of a workplan by East Lothian Quality Clusters setting out planned actions to improve quality in individual practices and across the cluster areas.
		Measurement -	Monitoring of delivery of quality improvement actions within each area against the workplan and their outcomes.

1	Implementation date	30 <sup>th</sup> April 2018 – <b>New Direction</b>		
2	Reference number	EL IJB/NHSL/D10d-2017 (Primary Care Improvement Plan and Primary Care Strategy)		
3	Integration Joint Board authorisation date	26 <sup>th</sup> April 2018		
4	Direction to	NHS Lothian		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  Maximise independent living Provide specific interventions according to the needs of the service user Provide an ongoing service that is regularly reviewed and modified according to need Provide a clear care pathway which connects services Contribute to preventing unnecessary hospital admission Support timely hospital discharge Prevent unnecessary admission to residential or institutional care Are personalised and self-directed, putting control in the hands of the service user and their carers		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	New Direction for 2018/19 (replaces D04b, D10a and D10c, supersedes D01e and D01f and aligned with D01g, Do4a).		
7	Type of function	Integrated		
8	Function(s) concerned	Development of primary care, introduction of the new GP contract, primary care strategy		
9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian as follows:  D10d - NHS Lothian to produce by 31 <sup>st</sup> July 2018 a Primary Care Improvement Plan for East Lothian covering all delivery arrangements for all aspects of the new GMS Contract. This Plan should be used as the starting point for the development of the East Lothian Primary Care Strategy.		

9.a	Target and Measurement of Progress	Target -	Involvement of all stakeholders in the improvement plan development
			Production of an Improvement Plan by 31st July 2018, setting out how all GMS contract requirements will be delivered and plans for delivery of locally required service developments.
			Commence implementation of the Improvement Plan from August 2018.
		Measurement -	Production of the Improvement Plan by the due date and progress in delivering the GMS contract requirements.

within the geographical boundaries of East Lothian, promoting the highest standards of pracacordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of Ea which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of Ea which:  Maximise independent living  Provide specific interventions according to the needs of the service user  Provide an ongoing service that is regularly reviewed and modified according to need  Provide a clear care pathway which connects services  Contribute to preventing unnecessary hospital admission  Support timely hospital discharge  Prevent unnecessary admission to residential or institutional care  Are personalised and self-directed, putting control in the hands of the service user at carers  Mew Direction for 2018/19 (replaces D01d).  Type of function  Type of function  Integrated  Development of primary care premises, responding to population growth, introduction of the contract.  Part Lothian Integration Joint Board directs NHS Lothian as follows:  D10i – With the finalisation of the Prestonpans Medical Practice extension, NHS Lothian and department are directed to focus on the delivery of the Harbours Medical Practice business of the preston of the delivery of the Harbours Medical Practice business of the practice business of the practice business of the practice business of the practice with the delivery of the Harbours Medical Practice business of the practice and the practice business of the practice of the practice business of the practice of the practice business of the practice and practice business of the practice and practice business of the practice and practice and practice business of the practice and practice and practice business of the practice and	1 Implementation date	30 <sup>th</sup> April 2018 – <b>New Direction</b>		
Purpose and strategic intent    Purpose and strategic intent   In accordance with the IJB's Strategic Plan, to provide effective services to all service users within the geographical boundaries of East Lothian, promoting the highest standards of prac accordance with statutory obligations, policies and procedures. To provide services to all service users and carers within the geographical boundaries of Ea which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of Ea which:    Maximise independent living   Provide specific interventions according to the needs of the service user   Provide a clear care pathway which connects services   Prevent unnecessary admission   Support timely hospital discharge   Prevent unnecessary admission to residential or institutional care   Prevent unnecessary admission to residential or institutional care   Are personalised and self-directed, putting control in the hands of the service user at carers   Prevent unnecessary admission to residential or institutional care   Pre	2 Reference number	EL IJB/NHSL/D10i-2017 (Harbours Medical Practice Extension)		
Purpose and strategic intent  In accordance with the IJB's Strategic Plan, to provide effective services to all service users within the geographical boundaries of East Lothian, promoting the highest standards of prac accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of Ea which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of Ea which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need endowed a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user at carers  New Direction, or continuing Direction, or is it a new Direction, or continuing Direction?  Type of function  Integrated  Development of primary care premises, responding to population growth, introduction of the contract.  Page 101 – With the finalisation of the Prestonpans Medical Practice extension, NHS Lothian and department are directed to focus on the delivery of the Harbours Medical Practice business of the prestonpans medical Practice business of the prestonpans medical Practice extension, NHS Lothian and department are directed to focus on the delivery of the Harbours Medical Practice business of the prestonpans medical Practice extension, NHS Lothian and department are directed to focus on the delivery of the Harbours Medical Practice business of the prestonpans medical Practice business of the prestonpans medical Practice extension, NHS Lothian and department are directed to focus on the delivery of the Harbours Medical Practice business of the prestonpans	3 Integration Joint Board authorisation date	26 <sup>th</sup> April 2018		
within the geographical boundaries of East Lothian, promoting the highest standards of pracacordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of Ea which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of Ea which:  Maximise independent living  Provide specific interventions according to the needs of the service user  Provide an ongoing service that is regularly reviewed and modified according to need  Provide a clear care pathway which connects services  Contribute to preventing unnecessary hospital admission  Support timely hospital discharge  Prevent unnecessary admission to residential or institutional care  Are personalised and self-directed, putting control in the hands of the service user at carers  Mew Direction for 2018/19 (replaces D01d).  Type of function  Type of function  Integrated  Development of primary care premises, responding to population growth, introduction of the contract.  Part Lothian Integration Joint Board directs NHS Lothian as follows:  D10i – With the finalisation of the Prestonpans Medical Practice extension, NHS Lothian and department are directed to focus on the delivery of the Harbours Medical Practice business of the preston of the delivery of the Harbours Medical Practice business of the practice business of the practice business of the practice business of the practice with the delivery of the Harbours Medical Practice business of the practice and the practice business of the practice of the practice business of the practice of the practice business of the practice and practice business of the practice and practice business of the practice and practice and practice business of the practice and practice and practice business of the practice and	4 Direction to	NHS Lothian		
cancel a previous Direction, or is it a new Direction, or continuing Direction?  7		In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their		
cancel a previous Direction, or is it a new Direction, or continuing Direction?  7	6 Does this Direction supersede, amend or	New Direction for 2018/19 (replaces D01d).		
8 Function(s) concerned Development of primary care premises, responding to population growth, introduction of the contract.  9. Required Actions / Directions East Lothian Integration Joint Board directs NHS Lothian as follows:  D10i – With the finalisation of the Prestonpans Medical Practice extension, NHS Lothian and department are directed to focus on the delivery of the Harbours Medical Practice business of the prestonpans of the Harbours Medical Practice business of the Harbours Med	cancel a previous Direction, or is it a new			
9. Required Actions / Directions  East Lothian Integration Joint Board directs NHS Lothian as follows:  D10i – With the finalisation of the Prestonpans Medical Practice extension, NHS Lothian and department are directed to focus on the delivery of the Harbours Medical Practice business	7 Type of function	Integrated		
D10i – With the finalisation of the Prestonpans Medical Practice extension, NHS Lothian and department are directed to focus on the delivery of the Harbours Medical Practice business of the Harbours Medical Practice extension, NHS Lothian and the Harbours Medical Practice extension and the Harbours Medical Practice business of the Harbours Medical Practice busines	8 Function(s) concerned	Development of primary care premises, responding to population growth, introduction of the new GP contract.		
planned extension.	9. Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian as follows:  D10i – With the finalisation of the Prestonpans Medical Practice extension, NHS Lothian and its estates department are directed to focus on the delivery of the Harbours Medical Practice business case and the planned extension.		

9.a	Target and Measurement of Progress	Target -	Conclusion of full business case in 2018/19 and agreement on timeline for building work to commence.
		Measurement -	Availability of business case and project timeline.

# 11 - Directions to NHS Lothian and East Lothian Council on reducing use of acute services and increasing community provision (D11a, D11b, D11c, D11d and D11e)

1	Implementation date	1 <sup>st</sup> April 2017	
2	Reference number	EL IJB/NHSL/D11a-2017 (review of emergency assessment services)	
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017	
4	Direction to	NHS Lothian	
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers	
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Continuing Direction	
7	Type of function	Set-aside	
8	Function(s) concerned	All Emergency Department (accident and emergency) services planned by East Lothian Integration Joint Board and defined as hospital services, as required by the Public Bodies (Joint Working) (Prescribed Health Board Functions) (Scotland) Regulations 2014 and in East Lothian Integration Joint Board's Final Integration Scheme (February 2015).	
		Specifically the services concerned are:	

		<ul> <li>Emergency adm</li> </ul>	essment services in Edinburgh nissions arising from attendance at the Emergency Departments in the two acute Minor Injuries Unit at the Western General Hospital.
9.	Required Actions / Directions	East Lothian Integration	on Joint Board directs NHS Lothian as follows:
			ue to provide Emergency Department services for the population of East Lothian e of issue of this direction.
		NHS Lothian to work v	ourse of the financial year 2017-2018, East Lothian Integration Joint Board direct with the Chief Officer and officers of the IJB to ensure delivery of the following o be brought to the IJB for consideration and approval:
		Care Partnership and	ond its acute services to work with officers of the East Lothian Health and Social other HSCPs to review the provision of emergency assessment services in streamlining this provision.
		Lothian residents to se Partnership to develop	cute services to provide data on the pattern of emergency admission of East econdary care and to work with officers of the East Lothian Health and Social Care alternatives, where appropriate, to such admissions. Any resource freed up by a cy admissions will be used to support alternative, community based services.
9.a	Target and Measurement of Progress	Target -	10% reduction in emergency assessment activity and emergency admissions for East Lothian residents
		Measurement -	Emergency assessment numbers and emergency admissions arising from A&E presentation

1	Implementation date	1 <sup>st</sup> April 2017	
2	Reference number	EL IJB/NHSL/D11b-2017 (reduction in occupied bed days)	
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017	
4	Direction to	NHS Lothian	
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian	
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	which:  Maximise independent living Provide specific interventions according to the needs of the service user Provide an ongoing service that is regularly reviewed and modified according to need Provide a clear care pathway which connects services Contribute to preventing unnecessary hospital admission Support timely hospital discharge Prevent unnecessary admission to residential or institutional care Are personalised and self-directed, putting control in the hands of the service user and their carers  Continuing Direction	
7	Type of function	Set-aside	
8	Function(s) concerned	Occupied bed days for East Lothian residents arising from all episodes of unscheduled care.	
9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian as follows::  D11b - NHS Lothian to reduce the length of stay for all patients admitted following unscheduled admission. This is to be achieved by a reduction in delayed discharges, avoidable admission and inappropriately long stays in acute hospital and through the development of locally available community services and facilities.	
9.a	Target and Measurement of Progress	Target - Reduce occupied bed days by 10% for 2018 compared to 2017.	
		Measurement - Occupied Bed Days.	

1	Implementation date	1 <sup>st</sup> April 2017
2	Reference number	EL IJB/NHSL/D11c-2017 (delayed discharges)
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017
4	Direction to	NHS Lothian
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Superseded by D07
7	Type of function	Set-aside Set-aside
8	Function(s) concerned	All actions intended to reduce delayed discharges (defined as 'a hospital inpatient who is clinically ready for discharge from inpatient hospital care and who continues to occupy a hospital bed beyond the ready for discharge date') of East Lothian residents from acute hospital beds.  Also, through these actions move towards delivering reductions in delayed discharges to reliably achieve timely discharge from hospital in order to meet the 2 week standard.

		Measurement -	Monthly national census reflecting performance by the partnership.
9.a	Target and Measurement of Progress	Target -	Deliver zero delays over 2 weeks by the end of 2017-18 while working towards no delays over 72 hours.
		<b>D11c -</b> NHS Lothian to delegate to the IJB the agreed budget for the Delayed Discharge Fund and working with East Lothian Council to continue to make progress towards delivery of delayed discharge targets and a reduction in occupied bed days, through the provision of alternatives to inpatient care.	
9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian as follows:	

1	Implementation date	1 <sup>st</sup> April 2017	
2	Reference number	EL IJB/NHSL/D11d-2017 (end of life care)	
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017	
4	Direction to	NHS Lothian	
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  Maximise independent living  Provide specific interventions according to the needs of the service user  Provide an ongoing service that is regularly reviewed and modified according to need  Provide a clear care pathway which connects services  Contribute to preventing unnecessary hospital admission  Support timely hospital discharge  Prevent unnecessary admission to residential or institutional care  Are personalised and self-directed, putting control in the hands of the service user and their carers	
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Continuing Direction	
7	Type of function	Integrated	
8	Function(s) concerned	Palliative care delivered to East Lothian residents by the East Lothian community palliative care teams, hospice-provided specialist palliative care community services and hospital-based specialist palliative care teams.	
9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian as follows:	
		<b>D11d -</b> NHS Lothian to work with the Managed Clinical Network for Palliative Care, hospital, community and third sector palliative care services to provide specialist assessment of East Lothian patients in their own homes, care homes or community hospitals to maximise the delivery of patient-centred end of life care at home or in a homely setting.	

9.a	Target and Measurement of Progress	Target -	Reduce by 10% the number of occupied bed days in the last six months of life that are spent in acute hospital settings
		Measurement -	Location of care for people receiving end of life care.

1	Implementation date	1 <sup>st</sup> April 2017		
2	Reference number	EL IJB/NHSL/D11e-2017 (Transfer of AHP Resource from Secondary Care)		
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017		
4	Direction to	NHS Lothian		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Continuing Direction		
7	Type of function	Set-aside Set-aside		
8	Function(s) concerned	Acute service based Allied Health Professional (AHP) posts and associated services delivered in acute settings.		
9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian as follows:  D11e - NHS Lothian to provide information on the numbers of AHPs and associated resources in acute settings and to work with East Lothian HSCP to plan for the redeployment of appropriate numbers of these AHPs and associated resources to community settings to avoid admission and to support discharge of East Lothian residents.		
9.a	Target and Measurement of Progress	Target - East Lothian to receive a proportionate share of the identified AHP resource by the last quarter of 2017/18		

	Measurement -	The increase in whole time equivalent AHP numbers in community settings resulting from staff redeployment.

# 12 - Directions to NHS Lothian and East Lothian Council on shifting balance of care for care groups (Directions 12a, 12b, 12c, 12d, 12e)

1	Implementation date	1 <sup>st</sup> April 2017
2	Reference number	EL IJB/NHSL/D12a-2017 (East Lothian Council delivered care at home services)
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017
4	Direction to	East Lothian Council
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  Maximise independent living Provide specific interventions according to the needs of the service user Provide an ongoing service that is regularly reviewed and modified according to need Provide a clear care pathway which connects services Contribute to preventing unnecessary hospital admission Support timely hospital discharge Prevent unnecessary admission to residential or institutional care Are personalised and self-directed, putting control in the hands of the service user and their carers
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Continuing Direction - supersedes D02a and D02b
7	Type of function	Integrated
8	Function(s) concerned	All care at home services delivered by East Lothian Council
9.	Required Actions / Directions	East Lothian Integration Joint Board directs East Lothian Council as follows:  D12a - East Lothian Council to develop its protocols to simplify and speed up the process for assessing and acting on an individual client's needs for care at home.

9.a	Target and Measurement of Progress	Targets -	<ol> <li>Clients to be assessed for care at home within 7 days of request/referral.</li> <li>If, following assessment, care at home is required this will be provided within 7 days.</li> </ol>
		Measurement -	3. Reassessment of clients will be carried out every 3 months  Number of days each client waits for assessment, number of days awaiting care following assessment and percentage reviewed every 3 months.

1	Implementation date	1 <sup>st</sup> April 2017		
2	Reference number		17 (extra care housing)	
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017		
4	Direction to	East Lothian Council		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Continuing Direction		
7	Type of function	Integrated		
8	Function(s) concerned	All extra care housing for	All extra care housing for all client groups across East Lothian.	
9.	Required Actions / Directions	East Lothian Integration Joint Board directs East Lothian Council as follows:  D12b - East Lothian Council to finalise the extra care housing report and to develop a plan with partners to deliver all its recommendations to improve housing provision for people with care needs.		
9.a	Target and Measurement of Progress	Target -	To finalise by June 2017 the report, associated workplan and delivery timetable.	
		Measurement -	Report production and delivery of recommendations within the agreed timeframe.	

1	Implementation date	1 <sup>st</sup> April 2017		
2	Reference number		17 (day services for older people)	
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017		
4	Direction to	East Lothian Council		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Continuing Direction - Superseded D02e		
7	Type of function	Integrated		
8	Function(s) concerned	East Lothian Council and East Lothian Health and Social Care Partnership delivered day services for older people.		
9.	Required Actions / Directions	East Lothian Integration Joint Board directs East Lothian Council as follows:  D12c - East Lothian Council to finalise and implement the strategy for day services for older people in order to improve access to and quality of day services across the county while delivering service efficiencies.		
9.a	Target and Measurement of Progress	Target -	Deliver increased capacity across all areas so reducing waiting times for day services.	
		Measurement -	Percentage of older people assessed as needing day services that are in receipt of a service.	

1	Implementation date	1 <sup>st</sup> April 2017		
2	Reference number	<b>EL IJB/NHSL/D12d-2017</b> (reprovision of Eskgreen and Abbey care homes and Edington and Belhaven hospitals)		
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017		
4	Direction to		othian Council	
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Are personalised and self-directed, putting control in the hands of the service user and their carers  Continuing Direction - Superseded D01c and D02c		
7	Type of function	Integrated		
8	Function(s) concerned	All services currently delivered through Eskgreen Care Home and Abbey Care Home and Edington Hospital and Belhaven Hospital.		
9.	Required Actions / Directions	East Lothian Integration  D12d - NHS Lothian and	Joint Board directs NHS Lothian and East Lothian Council as follows:  d East Lothian Council to set up projects to deliver the reprovision of Eskgreen and Edington and Belhaven Hospitals and to deliver on the recommendations of the	
9.a	Target and Measurement of Progress	Target -	Complete by January 2018 all reviews of provision across the 4 settings and prepare a plan to develop and coordinate future service provision.	
		Measurement -	Completion of reviews and production of an agreed delivery plan.	

1	Implementation date	1 <sup>st</sup> April 2017	
2	Reference number	EL IJB/NHSL/D12e-2017 (Integrated Care Fund review)	
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017	
4	Direction to	NHS Lothian	
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers	
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Continuing Direction - supersedes D06	
7	Type of function	Integrated	
8	Function(s) concerned	All delegated functions as they pertain to the annual East Lothian Integrated Care Fund Plan.	
9.	Required Actions / Directions	East Lothian Integration Joint Board has previously directed NHS Lothian (Direction D06) to delegate the agreed budget for the Integrated Care Fund to the IJB in line with the agreed annual Integrated Care Fund Plan.  East Lothian Integration Joint Board now directs NHS Lothian as follows:  D12e - NHS Lothian to delegate the agreed budget for the Integrated Care Fund to the IJB, to review the achievements of the Integrated Care Fund in 2016/17 and based on this, to develop a revised Integrated Care Fund Plan for 2017/18.	

9.a	Target and Measurement of Progress	Target -	Complete by June 2017 a review of the 2016/17 integrated care fund and prepare a revised Integrated Care Fund plan.
		Measurement -	Completion of the review and production of a revised plan.

1	Implementation date	31st December 2017 – New Direction		
2	Reference number	EL IJB/NHSL/D12f-2017 (transfer of patients of Ward 2 Belhaven Hospital to Ward 3 Belhaven Hospital)		
3	Integration Joint Board authorisation date	21st December 2017		
4	Direction to	NHS Lothian and East Lothian Council		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  Maximise independent living Provide specific interventions according to the needs of the service user Provide an ongoing service that is regularly reviewed and modified according to need Provide a clear care pathway which connects services Contribute to preventing unnecessary hospital admission Support timely hospital discharge Prevent unnecessary admission to residential or institutional care Are personalised and self-directed, putting control in the hands of the service user and their carers.		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	<b>New Direction</b> - seeking to deliver elements of existing Direction D12d - reprovision of Eskgreen and Abbey care homes and Edington and Belhaven hospitals.		
7	Type of function	Integrated		
8	Function(s) concerned	All services currently delivered through Ward 2 and Ward 3 of Belhaven Hospital.  Hospital at Home, Hospital to Home and Community Nursing support for the Dunbar area.		
9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian and East Lothian Council as follows:  D12f - NHS Lothian to transfer all patients of Ward 2 Belhaven Hospital to Ward 3 Belhaven Hospital, to work with East Lothian Council to provide current Ward 3 patients with suitable alternative care and		
		accommodation to meet their needs and to convert the vacated Ward 2 premises into a Community Hub for the ELSIE (East Lothian Service for Integrated Care for the Elderly) team to use in serving the Dunbar area		

d transfer.
r

1	Implementation date	30 <sup>th</sup> April 2018 – <b>New Direction</b>		
2	Reference number	EL IJB/NHSL/D12g-2017 (Review of Community Services for complex adults)		
3	Integration Joint Board authorisation date	26 <sup>th</sup> April 2018		
4	Direction to	NHS Lothian and East Lothian Council		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	New Direction for 2018/19		
7	Type of function	Integrated		
8	Function(s) concerned	Services for adults with complex needs		
9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian and East Lothian Council as follows:  D12g – NHS Lothian and East Lothian Council to review community services for adults with complex needs to develop a transformation programme.		
9.a	Target and Measurement of Progress	Targets - Completion of the review and any associated consultation by September 2018.		
		Implementation of review recommendations by the end of 2018-19.		

	Measurement -	Conclusion of the review and consultation.
		Progress in delivering recommendations.

### 13 - Direction to NHS Lothian to support delivery of the Modern Outpatients report recommendations

1	Implementation date	30 <sup>th</sup> April 2018 – <b>New Direction</b>		
2	Reference number	EL IJB/NHSL/D13b-2017 (Local diabetes service improvements and regional work on prevention of Type		
		2 diabetes)		
3	Integration Joint Board authorisation date	26 <sup>th</sup> April 2018		
4	Direction to	NHS Lothian		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.		
		To provide services to all service users and carers within the geographical boundaries of East Lothian which:		
		Maximise independent living  Provide an additional according to the provide of the particle year.		
		Provide specific interventions according to the needs of the service user      Provide an engaing convice that is regularly reviewed and modified according to need.		
		<ul> <li>Provide an ongoing service that is regularly reviewed and modified according to need</li> <li>Provide a clear care pathway which connects services</li> </ul>		
		Contribute to preventing unnecessary hospital admission		
		Support timely hospital discharge		
		Prevent unnecessary admission to residential or institutional care		
		Are personalised and self-directed, putting control in the hands of the service user and their carers		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	New Direction for 2018/19		
7	Type of function	Integrated		
8	Function(s) concerned	All adult diabetes health services planned for and delivered to residents of East Lothian, within the geographical boundaries of the East Lothian Health and Social Care Partnership and elsewhere across Lothian as well as primary care, community and public health functions covering the same area.		

9.	Required Actions / Directions	East Lothian Integration	Joint Board directs NHS Lothian as follows:
		D13b - NHS Lothian and its diabetes specialist services to work with officers of the East Lothian Health and Social Care Partnership to maintain delivery of diabetes outpatient clinics within Roodlands hospital and to develop local primary care delivery of high quality diabetes diagnosis, care, treatment and patient education to improve outcomes for people living with diabetes. In carrying out this work all opportunities should be taken to redesign local diabetes services and to redirect diabetes resources from acute hospital services to community services. In addition, In addition, NHS Lothian to cooperate with other east region partners and the Diabetes Managed Clinical Networks to develop a regional approach to the prevention and reversal of Type 2 diabetes (new Direction).	
9.a	Target and Measurement of Progress	Target -	By the end of 2018/19, all non-complex Type 2 patients from East Lothian currently receiving diabetes care in acute hospital clinics will receive this care in a primary care setting, with appropriate resource following the patient.  Target for regional action will be agreed at regional and local level following the
		conclusion of regional discussions in early 2018.	
		Measurement -	The SCI-DC diabetes register will be used to identify Type 2 patients receiving care in acute settings at the beginning of 2018/19 and to monitor progress in these patients transferring to primary care.
			The measurement for regional action to be agreed at regional and local level following the conclusion of regional discussions in early 2018.

# 14 - Direction to NHS Lothian and East Lothian Council on support to carers

1	Implementation date	1 <sup>st</sup> April 2017		
2	Reference number	EL IJB/NHSL/D14a-2017 (support to carers)		
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017		
4	Direction to	NHS Lothian and East Lothian Council		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Continuing Direction - aligned with D02d		
7	Type of function	Integrated function		
8	Function(s) concerned	All NHS Lothian, East Lothian Council and East Lothian Health and Social Care Partnership delivered services in support of carers.		
9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian and East Lothian Council as follows:  D14a - NHS Lothian and East Lothian Council to finalise and implement the East Lothian Carers' Strategy, working with East Lothian Health and Social Care Partnership, third sector and other partners to plan delivery of the strategy's priorities.		

		In addition, partners are to work together to assess unpaid carers' needs, to deliver a range of relevant support services in order to help to reduce any negative impact of a caring role on an individual's own health and well-being and to prepare for the Carers' Act in 2018.	
9.a	Target and Measurement of Progress	Targets -	1 - Produce a Carers' Strategy by the third quarter of 2017-18
			2 - Deliver a needs assessment of unpaid carers' needs by the third quarter of 2017-18
			3 - Ensure all unpaid carers receive an assessment of their needs within 4 weeks of referral or self-referral.
		Measurement -	Number of needs assessments each month and outcome of assessments.

# 15 - Directions to NHS Lothian on drug and alcohol services and mental health (Directions 15a, 15b, 15c, 15d)

1	Implementation date	1 <sup>st</sup> April 2017		
2	Reference number	EL IJB/NHSL/D15b-2017 (redesign of MELDAP)		
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017		
4	Direction to	NHS Lothian		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Continuing Direction		
7	Type of function	Integrated		
8	Function(s) concerned	Alcohol and Drug services for residents of East Lothian		
9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian as follows:  D15b - NHS Lothian to allocate the available share of ADP and NHS Lothian core funding for the development by MELDAP (within the finances available) of redesigned and locally managed and community delivered prevention, recovery and treatment services to meet the needs of East Lothian		
		residents who are dependent on any substance.		

9.a	Target and Measurement of Progress	Target -	To maintain service delivery while completing the service redesign exercise by August 2017
		Measurement -	Recording of client numbers and client location following the service redesign in comparison with numbers over the previous year. Ongoing monitoring of service uptake.

1	Implementation date	1 <sup>st</sup> April 2017		
2	Reference number	EL IJB/NHSL/D15c-2017 (adult mental health services)		
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017		
4	Direction to	NHS Lothian and East Lothian Council		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  Maximise independent living Provide specific interventions according to the needs of the service user Provide an ongoing service that is regularly reviewed and modified according to need Provide a clear care pathway which connects services Contribute to preventing unnecessary hospital admission Support timely hospital discharge Prevent unnecessary admission to residential or institutional care Are personalised and self-directed, putting control in the hands of the service user and their carers		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Continuing Direction		
7	Type of function	Integrated		
8	Function(s) concerned	Mental health services for residents of East Lothian		
9.	Required Actions / Directions	<ul> <li>East Lothian Integration Joint Board directs NHS Lothian and East Lothian Council as follows:</li> <li>D15c - NHS Lothian and East Lothian Council to develop an integrated Mental Health Team with a single point of referral and triage to ensure mental health service users receive the right support by the right people at the right time, closer to home. This team is to:</li> <li>Develop an assertive in-reach model to Hermitage Ward, to support bed closures at the Royal Edinburgh Hospital and to ensure that inpatients from East Lothian have a safe, timely discharge process, with an appropriate social care package determined by their assessed</li> </ul>		

		needs.	
		<ul> <li>Develop mental health service input to the Musselburgh Primary Care Centre to mental health support in primary care, in partnership with primary care tean mental health teams, NHS 24 and HSCP and East Lothian Council Strategy C</li> </ul>	
			vith East Lothian HSCP and Police Scotland to develop mental health 'street triage' as responses to the national driver for distress brief interventions.
9.a	Target and Measurement of Progress	Target -	To maintain all elements of service delivery while developing the street triage approach by April 2017, the assertive in-reach model by May 2017 and the single point of referral by June 2017.
		Measurement -	Progress against all developments will be assessed using quality improvement methodology (test of change) activity levels and location of service delivery.

1	Implementation date	1 <sup>st</sup> April 2017		
2	Reference number	EL IJB/NHSL/D15d-2017 (older adult mental health services)		
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017		
4	Direction to	NHS Lothian		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.		
		To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living		
		Provide specific interventions according to the needs of the service user		
		Provide an ongoing service that is regularly reviewed and modified according to need		
		Provide a clear care pathway which connects services		
		Contribute to preventing unnecessary hospital admission		
		Support timely hospital discharge		
		Prevent unnecessary admission to residential or institutional care		
		Are personalised and self-directed, putting control in the hands of the service user and their carers		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Continuing Direction		
7	Type of function	Integrated		
8	Function(s) concerned	Older Adults' Mental Health Services for residents of East Lothian		
9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian as follows:		
		D15d – NHS Lothian to:		
		<ul> <li>Work towards closure of Hopetoun Day Unit and the review and redesign of resources to develop an integrated Mental Health Service which will deliver person centred holistic care to older residents of East Lothian.</li> </ul>		
		Redesign the East Lothian and Midlothian Psychiatric Assessment Team (EMPAT) to further		

		<ul> <li>develop the provision of education to all nursing and care homes across the two areas, in support of roll-out of the Newcastle model of Stress and Distress</li> <li>Develop Dementia Diagnosis within Primary Care and the provision of support from Alzheimer link workers, or Community Psychiatric Nurse on the day of diagnosis. The approach should initially be piloted in two GP practices, one in Tranent and one in Ormiston.</li> </ul>		
9.a	9.a Target and Measurement of Progress	Target -	To develop the availability of primary care based dementia diagnosis as well as the provision of one year of post diagnostic support.  To work towards application of the 5 pillars approach.	
		Measurement -	The number of dementia diagnoses and the proportion receiving post-diagnostic support.	

1	Implementation date	30 <sup>th</sup> April 2018 – <b>New Direction</b>		
2	Reference number	EL IJB/NHSL/D15e-2017 (drug and alcohol funding)		
3	Integration Joint Board authorisation date	26 <sup>th</sup> April 2018		
4	Direction to	NHS Lothian		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	New Direction for 2018/19 - supersedes D15a		
7	Type of function	Integrated		
8	Function(s) concerned	Alcohol and Drug services for residents of East Lothian		
9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian as follows:  D15e – NHS Lothian to transfer to ELHSCP the full revenue resource for substance misuse services on a local PCNRAC basis, including the 12% share of Scottish Government recurrent funding and additional funding for 2018/19 (new Direction – supersedes D15a)		
9.a	Target and Measurement of Progress	Target - East Lothian IJB to receive in 2018/19 its full local PCNRAC share of all drug and alcohol monies, both locally allocated and Scottish Government recurrent and additional funds.		

		The total target amount for 2018/19 is <b>£2,390,861</b> .
	Measurement -	Budget amount provided by NHS Lothian and by Scottish Government.

1	Implementation date	30 <sup>th</sup> April 2018 – <b>New Direction</b>		
2	Reference number	EL IJB/NHSL/D15f-2017 (use of centrally provided drug and alcohol services)		
3	Integration Joint Board authorisation date	26 <sup>th</sup> April 2018		
4	Direction to	NHS Lothian		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	New Direction for 2018/19		
7	Type of function	Integrated		
8	Function(s) concerned	Alcohol and Drug services for residents of East Lothian		
9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian as follows:  D15f - ELHSCP to continue to support centrally delivered drug and alcohol services at the current level for 2018-19, with a requirement that quarterly reports detailing patient activity and outcomes, plus progress towards financial targets, are produced.  In addition, ELHSCP will indicate within Quarter 3 if any changes are required in their use of and financial commitment to centrally delivered drug and alcohol services for 2019-20.		

9.a	Target and Measurement of Progress	Target -	Ongoing, timely and appropriate provision to East Lothian residents of the full range of centrally provided drug and alcohol services.	
		Measurement -	Waiting times for East Lothian residents seeking support from centrally provided services.	
			Quarterly activity and outcome reports for centrally provided services.	

1	Implementation date	30 <sup>th</sup> April 2018 – <b>New Direction</b>		
2	Reference number	EL IJB/NHSL/D15g-2017 (drug and alcohol outreach in primary care)		
3	Integration Joint Board authorisation date	26 <sup>th</sup> April 2018		
4	Direction to	NHS Lothian		
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers		
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	New Direction for 2018/19		
7	Type of function	Integrated		
8	Function(s) concerned	Alcohol and Drug services for residents of East Lothian		
9.	Required Actions / Directions	East Lothian Integration Joint Board directs:  D15g - ELHSCP to implement in 2018-19 locality and recovery based services to enhance assertive outreach in primary care to improve the service offer across East Lothian (new Direction).		
9.a	Target and Measurement of Progress	Target - Establishment during 2018-19 of outreach services within primary care settings.		
		Measurement - Service activity and outcomes for clients in primary care settings across East Lothian. Service user and referrer satisfaction with service provision.		

# 16 - Direction to NHS Lothian and East Lothian Council on Community Justice

1	Implementation date	1 <sup>st</sup> April 2017
2	Reference number	EL IJB/NHSL/D16a-2017 (community justice)
3	Integration Joint Board authorisation date	30 <sup>th</sup> March 2017
4	Direction to	NHS Lothian and East Lothian Council
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care
		Are personalised and self-directed, putting control in the hands of the service user and their carers
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	Continuing Direction
7	Type of function	Integrated
8	Function(s) concerned	All Health and Social Care Services for people who have committed offences including (but not exclusive to):  Criminal Justice Social Work Alcohol & Drug Services Mental Health Services GPs Public Health Services A&E Services Prison Health Services.

9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian and East Lothian Council as follows:  D16a - To work with the Reducing Reoffending Board over the course of the financial year 2018-2019, to ensure delivery of:	
		<ul> <li>Improved Community Understanding and Participation in Community Justice</li> <li>Strategic Planning and Partnership Working</li> <li>Equitable Access to Services</li> <li>Evidence Based Interventions.</li> </ul>	
9.a	Target and Measurement of Progress	Target -	Delivery in the year of agreed Community Justice outcomes.
		Measurement -	A range of Community Justice performance indicators and service outcome measures

# 17 - Direction to NHS Lothian and East Lothian Council to Deliver a Revised Strategic Plan

1	Implementation date	30 <sup>th</sup> April 2018 – <b>New Direction</b>
2	Reference number	EL IJB/NHSL/D17a-2017 (strategic plan)
3	Integration Joint Board authorisation date	26 <sup>th</sup> April 2018
4	Direction to	NHS Lothian and East Lothian Council
5	Purpose and strategic intent	In accordance with the IJB's Strategic Plan, to provide effective services to all service users and carers within the geographical boundaries of East Lothian, promoting the highest standards of practice in accordance with statutory obligations, policies and procedures.  To provide services to all service users and carers within the geographical boundaries of East Lothian which promote the health, wellbeing and quality of life of an individual.  To provide services to all service users and carers within the geographical boundaries of East Lothian which:  • Maximise independent living  • Provide specific interventions according to the needs of the service user  • Provide an ongoing service that is regularly reviewed and modified according to need  • Provide a clear care pathway which connects services  • Contribute to preventing unnecessary hospital admission  • Support timely hospital discharge  • Prevent unnecessary admission to residential or institutional care  • Are personalised and self-directed, putting control in the hands of the service user and their carers
		71 3
6	Does this Direction supersede, amend or cancel a previous Direction, or is it a new Direction, or continuing Direction?	New Direction for 2018/19
7	Type of function	Integrated
8	Function(s) concerned	Development of, consultation on and delivery of a new strategic plan to set out strategic priorities for the IJB for the period 2019-2022.
9.	Required Actions / Directions	East Lothian Integration Joint Board directs NHS Lothian and East Lothian Council as follows:  D17a - The IJB intends to review its Strategic Plan and to finalise a supporting Financial Plan. The IJB requires that the partners provide appropriate financial resources to support this work (new Direction).

9.a	Target and Measurement of Progress	Target - Production of an agreed Strategic Plan by end March 2019	
		Measurement-	Completion of appropriate consultation regarding the strategy and collaborative working with partners in the development of the strategy.