

MINUTES OF THE MEETING OF THE EAST LOTHIAN INTEGRATION JOINT BOARD

THURSDAY 29 AUGUST 2019 ESK ROOMS, BRUNTON HALL, MUSSELBURGH

Voting Members Present:

Councillor F O'Donnell Councillor N Gilbert Ms F Ireland Mr P Murray

Non-voting Members Present:

Mr D Binnie
Ms L Cowan
Ms C Flanagan
Ms E Johnston
Ms A MacDonald
Ms M McNeill
Dr J Turvill

Officers Present from NHS Lothian/East Lothian Council:

Ms L Berry Mr P Currie Mr B Davies Ms M Goodbourn Ms J Ogden-Smith

Clerk:

Ms F Currie

Apologies:

Councillor S Akhtar Mr A Joyce Prof. M Whyte Dr R Fairclough Ms J Tait Ms J Trench

Declarations of Interest:

None

1. MINUTES OF THE MEETING OF THE EAST LOTHIAN INTEGRATION JOINT BOARD OF 27 JUNE 2019 (FOR APPROVAL)

The minutes of the meeting on 27 June were approved.

2. MATTERS ARISING FROM THE MINUTES OF 27 JUNE

Elaine Johnston asked if it would be possible for members to receive a copy of the 'Start STRiVE' project presentation given at the last meeting. The Chair agreed that this would be useful and Alison MacDonald suggested that, in future, all presentations should be circulated to the members.

Peter Murray advised members that the NHS Lothian Board would shortly be holding a development day focusing on the 'whole system approach'. Chief Officers of IJBs and others would be looking at how to work together more effectively to achieve the IJB-related actions highlighted in today's paper (Item 3).

3. NHS LOTHIAN BOARD ESCALATION

The Chief Officer had submitted a report informing the IJB of the decision to move NHS Lothian to level 3 of the NHS Scotland escalation process and setting out the main issues and recovery work being scoped and planned to improve performance.

The Chair advised members that NHS Lothian had been placed at level 3 of the escalation process by the Cabinet Secretary. The Board was facing a number of challenges and it would be essential for all Lothian IJBs to engage in the work to improve performance and outcomes for service users.

Ms MacDonald presented the report outlining some of the key issues. She explained the definition of 'level 3' and that the Scottish Ministers would now expect the Board to engage with external advisers and Scottish Government officers and draw up a recovery plan. She indicated that the situation had resulted from an amalgamation of issues including cancer waiting times, mental health services at the Royal Edinburgh Hospital and problems with the new children's hospital building.

She summarised some of the work already underway to address these issues as they affected East Lothian patients, and to relieve some of the pressure on system. In particular, support for cancer patients by offering simple chemotherapy treatments within the new community hospital, reviewing unplanned admissions/occupied bed days on a daily basis and working on preventing admissions and supporting quicker discharge. Ms MacDonald advised members that the monthly census figure for delayed discharges was currently 5; the lowest recorded. She added that the improvements to and development of community services had supported the work on delayed discharges and these services were reflected in the recovery plans proposed by NHS Lothian.

Ms MacDonald emphasised the importance of the IJB engaging fully with the recovery programme and ensuring that the East Lothian perspective was appropriately represented. She also assured members that recovery plans involving community services would not necessarily result in changes to existing services in East Lothian. Services which were already working well here, such as Hospital at Home and Home First, would remain the same but similar services in Edinburgh or Midlothian may be designed differently depending on the needs of those areas.

The Chair thanked Ms MacDonald for her report and her reassurance that East Lothian services which were already working well would not be altered as a result of the need for additional Lothian-wide recovery plans. The Chair asked about the role of Edington and Belhaven Hospitals and whether full use was already being made of these facilities.

Lorraine Cowan advised that the Patient Flow Team were making very good use of all facilities in repatriating East Lothian patients from Edinburgh Royal Infirmary. The Hospital at Home service was continuing to support patient discharge and to ensure that patients were in the right place with the right level of care. Ms Cowan reported that both Edington and Belhaven currently had beds available and that this was a testament to the level and quality of collaborative working which was now embedded within local services.

The Chair suggested that in future when reports were presented to the IJB they should include an indication of whether a new or amended Direction was required. Ms MacDonald said that while this report was for information, there may be actions resulting from it which would require new or amended Directions and these would require the approval of the IJB.

Fiona Ireland asked if officers were comfortable that they had the capacity to cover all of the identified work streams. Ms MacDonald advised that a Head of Operations had recently been appointed and would provide additional support in managing the work that would result from the recovery plans. At present it was difficult to know how much extra work would be generated.

Ms Ireland said that, going forward, it would be important to bear in mind the impact this would have on the IJB's existing work streams.

David Binnie asked if it was possible to outline the potential financial risks to the IJB from these recovery plans. Claire Flanagan explained that it was probably too early to quantify the financial risks but that part of NHS Lothian's response to the Scottish Government included a request for additional support. She said that discussions were ongoing and until these were concluded it would not be possible to know the full impact.

Jon Turvill pointed out that this could also be an opportunity to look at the programmes in the community that had been successful in reducing delayed discharges and occupied bed days and consider what more could be done to ease the pressure on inpatient services.

Mr Murray informed members that it was not only operational matters which were of importance. It was essential that the governance structures of all the Lothian IJBs and NHS Lothian were aligned to ensure a successful conclusion to the current challenges. He added that if the proposed recovery plans involved the movement of funds that may also require a greater level of involvement from the IJBs.

The Chair stated that increasing the IJB's work with the third and voluntary sectors would also be important.

Ms Ireland noted that, as a result of the issue with the children's hospital, East Lothian's new community hospital would be subject to four weeks of additional assurance work and this would include sign off by external bodies.

Ms MacDonald advised that the project board had also invited the external auditors to go through every system and sign off on each. While the children's hospital was a more complex facility than the community hospital, the intention was to resolve any potential

snagging issues by the end of the four week testing period. She acknowledged the importance of learning lessons from the children's hospital but said that this would only be possible once the work was concluded.

Decision

The IJB agreed to:

- i. Note the content of the NHS Lothian Board paper.
- ii. Agree to support a collaborative, whole system approach to addressing sustainable, longer-term change.
- iii. Note that two areas: delayed discharge and mental health are delegated functions/responsibilities that are included in the scope of work.
- iv. Direct the Chief Officer of the IJB to support the developing improvement plans, ensuring alignment to work already underway within the East Lothian Health & Social Care Partnership
- v. Receive a report in six months on progress being made, or earlier, if significant matters arise.

Signed	
	Councillor Fiona O'Donnell Chair of the East Lothian Integration Joint Board