

MINUTE of MEETING of the WEST Lothian INTEGRATION JOINT BOARD of held within STRATHBROCK PARTNERSHIP CENTRE, 189 (A) WEST MAIN STREET, BROXBURN EH52 5LH, on 13 MARCH 2018.

Present

Voting Members – Martin Hill, Tom Conn (substitute for Harry Cartmill), Martin Connor, Alex Joyce, George Paul, Damian Timson.

Non-Voting Members – Carol Bebbington, Elaine Duncan, Jim Forrest, Mairead Hughes, Jane Houston, Jane Kellock, Mary-Denise McKernan, Martin Murray, Bridge Meisak and Patrick Welsh.

In Attendance – Marion Barton (Head of Health), Carol Bebbington (Senior Manager, Primary Care and Business Support) and Lorna Kemp (Executive Project Officer).

Apologies – Dave King and Harry Cartmill.

1. ORDER OF BUSINESS, INCLUDING NOTICE OF URGENT BUSINESS AND DECLARATIONS OF INTEREST IN ANY URGENT BUSINESS

The Chair ruled that the order of business be changed to allow the report on 'West Lothian Eligibility Criteria for Carer Support' (Agenda Item 7) to be taken before the report on 'IJB Financial Plan Update' (Agenda Item 6).

2. DECLARATIONS OF INTEREST

Update: Drug and Alcohol Service/Referrals (Agenda Item 13) - Damian Timson declared a non-financial interest as a member of the Alcohol and Drug Partnership.

3. MINUTE OF MEETING OF WEST Lothian INTEGRATION JOINT BOARD HELD ON TUESDAY 23 JANUARY 2018

The West Lothian Integration Joint Board approved the minute of its meeting held on 23 January 2018 subject to a correction to reflect that Martin Murray had given his apologies for the meeting.

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The Director informed the Board that plans to hold a Primary Care Summit were being progressed and that a date for the Summit had yet to be agreed. The item would be placed on the Workplan.

4. MINUTE OF MEETING OF WEST Lothian INTEGRATION JOINT BOARD AUDIT RISK AND GOVERNANCE COMMITTEE HELD ON

WEDNESDAY 11 OCTOBER 2017

The West Lothian Integration Joint Board noted the minute of the IJB Audit Risk and Governance Committee held on 11 October 2017.

5. WEST LOTHIAN ELIGIBILITY CRITERIA FOR CARER SUPPORT

The West Lothian Integration Joint Board considered a report (copies of which had been circulated) by the Director informing the Board of its duties under the Carers (Scotland) Act 2016 in relation to setting eligibility criteria for carer support and consulting carers and representatives of carers on the proposed eligibility criteria. The report also informed the Board of the outcome of the public consultation with carers and representatives of carers on the proposed eligibility criteria and presented the proposed eligibility criteria for approval.

The Board was informed that from 1 April 2018, the council was required to:-

- Identify the support needs of carers
- Prepare an adult carer support plan or a young carer statement if someone asked for one
- Provide support to carers based on local eligibility criteria
- Involve carers in planning services
- Establish information and advice services for carers.

The health service was required to:-

- Involve carers in the hospital discharge planning of the people they cared for
- Partnerships must also prepare a local Carers' Strategy and a Short Breaks Services Statement.

The report advised that the council had developed draft local eligibility criteria to determine what type of support carers would be offered. The proposed criteria were attached as Appendix 1 to the report and eligibility for paid support to carers was set at Level 3 – Duty to Support. The proposed criteria were joint criteria, as recommended in the statutory guidance, and could apply to both adults and young carers. This also assisted in keeping the assessment process for support consistent through transition from young carer to adulthood.

The report went on to advise that West Lothian IJB had not been delegated functions relating to children's services, therefore, the governance route for the approval of the joint criteria was the West Lothian IJB for adults and Council Executive for young carers and carers of children with additional care needs.

The report provided details of an online public consultation on the eligibility criteria. There had been 23 responses and a summary of the responses were set out in the report.

It was recommended that the Board:-

- Note the IJB's duties in relation to setting eligibility criteria for carer support where functions were delegated;
- Note the council's duties in relation to setting eligibility criteria for carer support where functions were not delegated;
- Note the outcome of the public consultation with carers and representatives of carers on the proposed eligibility criteria;
- Note the proposed eligibility criteria;
- Approve the eligibility criteria for adult carers who provided unpaid care for adults; and
- Approve that eligibility for paid support to carers would be set at Level 3 – Duty to Support.

During discussion the Board heard that, at its meeting held on 6 March 2018, the Council Executive had approved the eligibility criteria for young carers and carers of children with additional care or support needs.

#### Decision

1. To note the terms of the report and
2. To approve the eligibility criteria for adult carers who provided unpaid care for adults
3. To approve that eligibility for paid support to carers would be set at Level 3 – Duty to Support.
4. To note that the decisions above would impact on the proposed Directions which would be considered by the Board separately (Agenda Item 6 – IJB Financial Plan Update).
5. To note that the Council Executive had approved the eligibility criteria for young carers and carers of children with additional care or support needs.

#### 6. IJB FINANCIAL PLAN UPDATE

The IJB considered a report (copies of which had been circulated) by the Chief Finance Officer setting out the outcome of the financial assurance process on the contributions that West Lothian Council and NHS Lothian had identified to be delegated to the IJB for 2018/19 and providing an update on progress with medium term financial planning for IJB delegated functions.

It was reported that West Lothian Council had approved its 2018/19 budget on 13 February 2018, including the 2018/19 level of resources

associated with functions delegated to the IJB of £72,879 million. This took account of additional Scottish Government funding in the Scottish Local Authority settlement of £66 million specifically for social care. West Lothian's share of this funding had been confirmed as £1.855 million. This funding was additional to the £10.190 million included in the previous Scottish Budgets in 2016/17 and 2017/18 and in total £12.045 million had been baselined as specific recurring funding from 2018/19 and had been allocated to the IJB.

The report contained a table showing the 2018/19 budget, compared to the equivalent 2017/18 and 2016/17 budget contributions reported as part of prior year financial assurance reports. Appendix 1 to the report showed further details on the split of the resources against the various adult social care functions/services in each year.

The 2018/19 budget reflected savings of £2.562 million which would require to be delivered to manage within the resources of £72.839 million. While comprehensive budget planning had been undertaken to realistically assess the additional cost demands to be budgeted for in 2018/19, and savings required as a result, there were a number of key risks and uncertainties that would require to be closely monitored during 2018/19. The key risks and uncertainties were examined in the report.

The 2018/19 budget associated with NHS delegated functions for West Lothian was £150.114 million. However, at this stage, based on initial spend forecasts and saving assumptions, there was a gap forecast of £1.953 million for 2018/19 compared to anticipated spend.

Appendix 2 to the report showed details of the split of the 2018/19 resources provided and forecast resources required to deliver IJB delegated functions across the NHS Lothian contribution.

The Board was informed that there were a number of funding streams still to be allocated to the IJB. These included a further £2 million identified across Lothian for efficient prescribing in 2018/19 and a share of funding for Acute drug pressures. Subject to agreement on the basis of allocation, West Lothian IJB would receive further funding from this source as a means of managing GP prescribing demands and acute drug pressures in 2018/19.

Additional 2018/19 funding of £175 million for NHS Boards was still to be allocated by the Scottish Government for investment in reform. Scope for this to meet existing pressures was still to be determined but this would potentially assist in increasing resources available for NHS Lothian and IJBs for investment in priority areas such as primary care and mental health. In addition, further detail was required from the Scottish Government on the allocation of an additional £20 million of investment for Alcohol and Drug services. Close management and monitoring of expenditure through NHS Lothian and IJBs working in partnership would be important in meeting the objective breakeven for 2018/19.

A number of specific risks would require to be closely monitored during 2018/19, and these were listed in the report.

Appendix 3 to the report was Directions to West Lothian Council and NHS Lothian who were operationally responsible for delivering services within the resources available.

Appendix 4 to the report was the Annual Financial Statement reflecting the 2018/19 budget contributions contained in the report.

The Chief Finance Officer recommended that the Board:-

1. Note the financial assurance work undertaken to date;
2. Agree that council and NHS Lothian 2018/19 budget contributions were allocated via Directions to Partners, to operationally deliver and financially manage IJB delegated functions from 1 April 2018
3. Agree that the Directions attached in Appendix 3 to the report were issued to West Lothian Council and NHS Lothian respectively;
4. Note the update to medium term financial planning in respect of IJB delegated functions
5. Agree the updated IJB Annual Financial Statement attached in Appendix 4.

The Chief Finance Officer then referred to the previously considered item of business and informed the Board that the Directions would require to be amended to take account of the decision taken on the carers' criteria.

During discussion, a question was raised concerning submission of a Workforce Plan by NHS Lothian. In response, the Director undertook to request submission of this to the IJB Audit Risk and Governance Committee.

#### Decision

1. To note the terms of the report;
2. To agree that the Directions attached to the report be issued to West Lothian Council and NHS Lothian respectively – but subject to amending Directions to add a reference to the carers' criteria alongside the mention of the direct care criteria.
3. To agree the updated IJB Annual Financial Statement attached as Appendix 4 to the report.

## 7. STRATEGIC PLAN ANNUAL REVIEW

The IJB considered a report (copies of which had been circulated) by the Director outlining the annual review of the IJB Strategic Plan 2016-26, and recommending that a replacement Strategic Plan be developed to take account of new legislation, national contract changes, market and workforce factors and to drive forward transformational change in health

and social care aligned to the medium term financial plan.

The Board was informed that the Strategic Plan had been reviewed based on consistency with the policy, economic and social context and ongoing accordance with values, resources, appropriateness, feasibility and desirability. The vision and values set out in the Strategic Plan remained relevant and had a good fit with NHS Lothian and West Lothian Council, encapsulating the purpose of the partnership.

The report provided details of performance as measured against key indicators. The report also examined Capacity and Demand, Primary Care, the Carers Act, Finance, and Workforce.

The Director concluded that the annual review of the Strategic Plan 2016-26 had identified challenges which were impacting on performance and delivery of the plan outcomes. The review updated and refreshed the policy drivers for the plan and had taken account of legislative and contractual changes as well as changes within the financial plan. These challenges and changes had indicated a replacement plan was required.

It was proposed that the replacement would be developed by a small working group in conjunction with the Strategic Planning Group with first draft being brought to the Board in June 2018. Following consultation and any amendment, the final plan would be brought to the Board for approval in December 2018.

The Integration Joint Board was recommended to:-

1. Consider the annual review of the strategic plan, in context of the local market and workforce factors along with new legislation and national contract changes and requirement to align with medium term financial plan.
2. Agree that a replacement strategic plan be developed to drive forward the transformational change required in health and social care.
3. Agree the proposed plan for development and timescale for completion.

#### Decision

1. To note the terms of the report
2. To agree that a replacement strategic plan be developed.
3. To agree the proposed plan and timescale for completion as outlined in the report.

#### 8. IJB 2017/18 FINANCE UPDATE

The IJB considered a report (copies of which had been circulated) by the Chief Finance Officer providing an update on the 2017/18 budget position

for the IJB delegated health and social care functions, including an update on key risk areas.

The Chief Finance Officer advised that the forecast position in the report reflected the most recent NHS and council outturn position. West Lothian Council was forecasting an overall breakeven budget position for 2017/18, while NHS Lothian was forecasting an overspend of £1.394 million.

Appendix 1 to the report provided detail on the forecast position and Appendix 2 was a summary of the key risks and service pressures along with actions being progressed to mitigate the risks as well as information on in year and future year strategic risks.

The forecast outturn reflected the outcome of comprehensive monitoring by both the Council and Health at Quarter 3 at which point there was a forecast overspend of £1.037 million. Further updates over the course of the previous month had resulted in an increase to the forecast overspend to £1.394 million.

As part of the 2017/18 payment to the IJB from the council and NHS Lothian, there were £3.520 million of budget savings identified. The monitoring undertaken at Quarter 3 estimated that £3.048 million of this target was achievable.

In addition, the share of acute set aside budget included a share of acute savings totalling £438,000 of which £240,000 was currently estimated to be achievable. The overall forecast position for the IJB took account of the overall position on savings noted.

The summary split of these savings was shown in a table within the report, along with the actual level of savings considered to be achievable at the current stage.

While in overall terms, satisfactory progress was being made on the delivery of 2017/18 savings (83% of the savings value forecast to be achievable in 2017/18), it was vital that savings were fully achieved on a recurring basis. NHS Lothian and the council had established processes in place for monitoring and reporting on the delivery of savings and regular updates would be provided to the Board on progress with delivery of savings.

The Board was recommended to:-

1. Note the forecast outturn for 2017/18 in respect of IJB Delegated functions taking account of saving assumptions.
2. Note the key risks associated with the 2017/18 forecast position.
3. Note that further management action was required by Partner bodies in partnership with the IJB to manage the 2017/18 budget pressures.

### Decision

To note the terms of the report.

## 9. CLINICAL GOVERNANCE

The IJB considered a report (copies of which had been circulated) by the Clinical Director informing the Board of developments with regard to Primary Care and Community Services in West Lothian.

The Board was informed that Primary Care services in West Lothian continued to be under pressure, as the recruitment and retention challenges continued. West Lothian HSCP had taken an active role in working with GP practices to maintain service provision and develop new ways of working to assist practices in managing demand. In addition, ongoing work to develop other service areas such as Mental Health and services for the frail elderly contributed to supporting primary care teams in managing these vulnerable groups.

In relation to general practice service stabilisation and development, it was noted that following the successful return to a GMS contract, no further West Lothian practices had required direct management support over the previous 12 months. All practices were currently functioning under independent contractor status, and only one practice was operating with a restricted list.

The report explained that during the year, GP Clusters had focused on quality, benchmarking and sharing new ways of working such as:

1. Signposting
2. Enhanced Signposting training for reception staff
3. West Lothian Primary Care Bulletin

In relation to prescribing, the West Lothian Prescribing Incentive Project ran until August 2017. Practices undertook a range of actions to reduce prescribing costs. Overall, 6 practices reduced their cost per patient from baseline, and a further 8 practices contained growth to within 3% as compared to the previous year. Several additional actions had been undertaken in the current year to promote quality prescribing. These were examined in the report.

The report went on to provide details of frailty redesign and the development of REACT Hub.

In relation to Mental Health redesign, work had commenced on the development of mental health hubs in West Lothian to provide improved services for patients with mild-moderate mental health symptoms. This joint venture between primary and secondary care aimed to co-locate a range of intermediate-level services for this patient group, as well as linking to third sector services through the use of mental health link workers. Mild to moderate mental health problems were a leading cause of presentation to GP's surgeries, to the provision of alternative to GP



care for this patient group was aimed at both improving the range of options available to patients were reducing pressure on GP appointments, as well as reducing referrals to Psychiatric out patients.

Finally, the report provided an update in relation to implementation of the 2018 GMS contract.

The Board was informed that Scottish Government time frames for development and roll-out of the Primary Care Implementation and Improvement Plan were ambitious, and additional staffing would be required at HSCP level to successfully carry out this work. It was important both for patients and GP morale and engagement that work was able to progress at a reasonable pace, to secure the future of primary care services in the area.

The Board was recommended to:

- Note the contents of the report.
- Be assured that West Lothian HSCP were successfully maintaining and developing service provision.
- Be assured that plan were being developed to implement the new GP contract in West Lothian.
- Support innovative approaches to primary care and community service provision and assist on communicating the vision for the future to all stakeholders including the general public.
- Support an increase in staffing at HSCP level to facilitate the implementation of the new GP contract.

#### Decision

1. To note the terms of the report as recommended by the Clinical Director.
2. To support approaches to primary care as outlined in the report.
3. To support an increase in staffing at HSCP level as recommended in the report.

#### 10. IJB DEVELOPMENT SESSION REPORT

The IJB considered a report (copies of which had been circulated) by the Chief Officer providing a brief summary of the output of the IJB Development Day held on 19 February 2018.

The development event had been held on 19 February 2018 to discuss the financial plan, transformational change programme and development of Directions to NHS Lothian and West Lothian Council. Brief presentations were given on Financial Planning 2018/19 to 2022/23 and Strategic Change Programme.

It had been noted at the event that there were several risks and uncertainties around the modelled position that required to be kept under review including:

- Pay awards/staff costs as the Public Sector pay cap had been lifted, the 2018 pay award was still subject to consultation with the pay review bodies.
- Demographic demand associated with the rapidly growing elderly population.
- Inflation.
- Uncertainty over Scottish Government funding levels for future years and funding associated with policy commitments.
- Achievement of savings required to balance the budget.
- Overall economic growth and uncertainty over Brexit.

The challenging five-year forecast with increasing demands and funding constraints required a whole system approach to develop innovative and sustainable models of care which needed to be reflected in the Strategic Plan and in communications with and directions to partner bodies.

Performance in relation to the 4-hour A&E standard and delayed discharges were highlighted as key challenges along with the current usage of available beds with St John's Hospital, the Community Hospitals and intermediate and interim care units. Discussion at the event focussed on how the current system of health and social care operated and examined two patient stories. These patients' journeys through health and social care would be beneficial, they clearly demonstrated poor communications between teams and an overall lack of integration and care co-ordination resulting in prolonged length of stay and poorer outcomes for the patients concerned.

Proposals to move towards Single Point of Access and Discharge to Assess models had been discussed and agreed that these should be further developed for more detailed consideration.

Finally, it was noted that Board members present had agreed that a further development session should be arranged in April 2018 to have detailed discussion on unscheduled care and development of Single Point of Access, Discharge to Assess and Eligibility Criteria.

At this point in the meeting the Director provided a verbal update concerning the demand for hospital beds in recent weeks. Since the update given at the January meeting, the position had been exacerbated with immense pressure at the ERI and other community hospitals. Additional capacity had been provided by St John's Hospital and action had been taken to commission beds with Care Homes.

The Board was recommended to:-

1. Acknowledge the challenges being faced in delivery of health and social care that were driving the need for change.
2. Support the management team in taking forward the improvement actions identified.
3. Agree the development of revised Strategic Plan to take account of the drivers and actions required to achieve strategic objectives.
4. Agree the development of more detailed and explicit Strategic Directions to support service redesign and transformational change programmes.
5. Support future development event planned for April 2018.

#### Decision

1. To note the terms of the report.
2. To support the management team in taking forward the improvement actions identified.
3. To agree the development of revised Strategic Plan to take account of the drivers and actions required to achieve strategic objectives.
4. To agree the development of more detailed and explicit Strategic Directions to support service redesign and transformational change programmes.
5. To support future development event planned for April 2018.

#### 11. PROPOSED MEETING DATES 2018/19

A paper had been circulated providing a list of proposed meeting dates for 2018/19 for the Board's approval.

#### Decision

To agree the list of proposed meeting dates as undernoted:-

Tuesday 14 August 2018 at 2.00 pm  
Monday 24 September 2018 at 2.00 pm  
Wednesday 21 November 2018 at 2.00 pm  
Tuesday 29 January 2019 at 2.00 pm  
Tuesday 12 March 2019 at 2.00 pm  
Wednesday 26 June 2019 at 2.00 pm

#### 12. UPDATE: DRUG AND ALCOHOL SERVICE/REFERRALS

The Board considered a report (copies of which had been circulated) by

the Director advising the Board of the current performance of the HEAT A11 target.

The report advised that the HEAT (Health improvement, Efficiency, Access to services and Treatment) A11 standard set by the Scottish Government stated that by March 2013, 90% of clients would wait no longer than three weeks from referral received to appropriate drug or alcohol treatment that supported their recovery. This remained one of the main performance measures for ADP commissioned services.

The performance of West Lothian IJB, together with comparative figures for Lothian, was set out in a table within the report. The percentages reported for Lothian and for each IJB covered all drug and alcohol services funded by the Local ADP – NHS, CEC and Third Sector. Over performance in one service would compensate under performance in another.

The table showed that performance for West Lothian had been dropping each quarter, partly due to staffing problems and data entry/clean up. West Lothian had been working with some vacancies and staffing issues on both the nursing and medical side which had affected performance. Work was underway to stabilise the nursing staffing and medical staff were currently being recruited.

A redesign of the service was being planned for 2018, with greater integration of the social work and NHS elements being key. Some early work had already been done in relation to how work was prioritised and allocated, and it was anticipated that the Quarter 3 figures for the West Lothian IJB area would show a modest improvement in performance. The redesign would also seek to establish whether the balance of work across the three partners – NHS, Social Policy and third sector – was optimal.

The Board was recommended to support the approach taken by services to reduce waiting times and achieve optimal performance.

### Decision

To support the approach as recommended in the report.

## 13. COMPLAINTS AND INFORMATION REQUESTS - QUARTER 3 OF 2017/18

The IJB considered a report (copies of which had been circulated) by the Director providing statistics on complaints and information requests made to the Board in Quarter 3 of 2017/18.

The report recalled that its meeting in December 2017, the Board had agreed that the Complaints Handling Procedure be amended in line with recommendations from the Complaints Standards Authority. This included a requirement to report on complaints received by the Board on a quarterly basis.

The Board was also required to submit quarterly statistics on requests for

information to the Office of the Scottish Information Commissioner (OSIC) and therefore a quarterly update on requests for information would be reported alongside complaints.

The Board was informed that an internal procedure for processing requests for information relating to the Board was in place. Requests for information would be recorded on council systems, as would complaints, and there was signposting on the IJB pages of the Health and Social care Partnership website explaining how to make a complaint or request information.

The Board was asked to note:-

1. That no complaints had been received in quarter 3 or since the establishment of the IJB;
2. Note that no requests for information had been received in quarter 3 or since the establishment of the IJB; and
3. Note that complaints and requests for information would be reported on a quarterly basis.

#### Decision

To note the terms of the report.

#### 14. WOKRPLAN

A copy of the Workplan had been circulated for information.

#### Decision

To note the Workplan and that 'Primary Care Summit' would be included as an item of the Workplan.