

MINUTE of MEETING of the WEST LOTHIAN INTEGRATION STRATEGIC PLANNING GROUP of WEST LOTHIAN COUNCIL held within STRATHBROCK PARTNERSHIP CENTRE, 189(A) WEST MAIN STREET, BROXBURN EH52 5LH, on 23 FEBRUARY 2016.

Present – Jim Forrest (Chair, Health Professional), Marion Barton (Health Professional), Carol Bebbington (Health Professional), Alan Bell (Social Care Professional), Ian Buchanan (User of Social Care), Margaret Douglas (Health Professional), Jane Houston (Unison Health), Mairead Hughes (Health Professional), Jane Kellock (Social Care Professional), Pamela Main (Social Care Professional), Martin Murray (Unison Public Sector), Charles Swan (Social Care Professional) and Robert Telfer (Commercial Provider of Social Care)

Apologies – Jacqui Campbell, Elaine Duncan, David Farquharson, James McCallum and Mary-Denise McKernan

1. DECLARATIONS OF INTEREST

No declarations of interest were made.

2. MINUTE

The Group confirmed the Minute of its meeting held on 4 February 2016. The Minute was thereafter signed by the Chair.

3. STRATEGIC PLAN

A report had been circulated by the Director providing an update on the development of the Strategic Plan, a copy of which was attached to the report.

It was recognised that there was still work to be done to finalise the plan however it was anticipated that the final draft of the plan would be presented to the March meeting of the Integrated Joint Board (IJB).

The report continued to advise that there were 23 National indicators agreed to measure performance of Integration of Health and Social Care. A baseline performance report had been prepared which provided a summary position for West Lothian based on the data available. The West Lothian performance was compared to Scotland for each indicator except for indicator 22 which was compared to the other three Lothian partnerships.

Additionally the Scottish Government had made a strong recommendation that the localities within integration areas should be based on 2011 datazones instead of 2001 datazones. Therefore in line with this recommendation a revised map of the West Lothian localities was circulated at the meeting.

It was also reported that the Performance Data would continue to be

updated and it was proposed that it would form an integral part of the Strategic Plan.

The group were also advised that the Strategic Plan contained a number of Strategic Priorities but it was intended that these would be expanded to provide more details on how each of these would be addressed as part of the integration of health and social care.

Finally the group were advised that the Locality Groups would start to be populated once the Strategic Plan had been finalised and signed off by the IJB.

Decision

1. To note the contents of the draft Strategic Plan;
2. Agreed to include the revised localities in the Strategic Plan;
3. Agreed to include the Performance Data, including targets in the Strategic Plan; and
4. Agreed to further develop the Strategic Priorities to provide a detailed brief for each one along with an explanation on how it would be addressed as part of the integration of health and social care.

4. JOINT COMMISSIONING PLAN UPDATE

A report had been circulated by the Director providing an update on the schedule of the development of care group commissioning for specific plans.

The report explained that the joint commissioning of health and care services within West Lothian was well established under the auspice of the former West Lothian Community Health and Care Partnership (CHCP). As a result of this the West Lothian IJB was well placed to meet the requirements for strategic commissioning under the new legislation.

The previous joint commissioning plans developed within the remit of the CHCP had been developed by the management group appropriate to the client care group. This same general structure was also being proposed within the draft Strategic Plan. It was also being recommended that the terms of reference including membership be drafted to cover the remit of these commissioning groups and be presented to the IJB for approval.

The report then provided a summary of the various commissioning groups noting that a Needs Assessment was still to be completed for some of them and that this would require to be tendered for as the resources were not available elsewhere.

Therefore it was recommended that the Group :-

1. Note the progress of the development of various care group

commission plans;

2. Agree that a report on the progress of the various care group commissioning plans be presented to the Integrated Joint Board (IJB) meeting on 23 March 2016; and
3. Agree that terms of reference including membership be drafted to cover the remit of the commissioning groups who would be responsible for drafting the relevant commissioning plan for approval by the IJB.

Decision

To approve the terms of the report.

5. ORGANISATIONAL DEVELOPMENT AND WORKFORCE PLAN

A report had been circulated by the Head of Health outlining the plan for organisational and workforce development to support the integration of health and social care and contribute to the achievement of the national health and well-being outcomes.

The purpose of the Organisational Development and Workforce Plan was to ensure that a planned and systematic approach was adopted to support the organisational change required to contribute fully to improving healthcare and reducing inequalities in West Lothian.

West Lothian had a proven track record of successful partnership working across health and social care boundaries and it was planned to build on this foundation to ensure services were developed and delivered more innovatively and effectively and were designed to meet local needs and priorities.

There would be a clear emphasis on person-centred planning and delivery ensuring that those who used services got the right care and support whatever their needs, at any point in their care journey.

For integration of health and social care to be successful it was essential that those working in health and social care were equipped to make best use of their collective skills and resources to improve outcomes. This would require individuals, teams and organisations to develop new ways of working together to deliver the vision underpinned by strong leadership, evolving management arrangements, processes and relationships.

The plan for workforce development would focus on five key outcomes :-

- Understand, promote and achieve better outcomes for people;
- Engage in meaningful co-production with people and communities;
- Affirm professional values and identity and to take responsibility for career long development;

- Demonstrate authentic and collaborative leadership behaviours; and
- Actively engage in locality planning and service improvement.

Local support networks would be put in place to ensure staff were engaged and support to continually improve the information, support, care and treatment they provided. The development plan focussed on a number of themes including; locality planning, change management and joint strategic commissioning.

A series of road shows had been held across health and social care to provide information to staff on the integration of health and social care and to provide an opportunity for staff to discuss and raise any questions they had. These events had been successful and well attended by staff across the partnership.

The plan would be considered a working document and would evolve over time to reflect strategic developments, responsiveness to local needs and availability of resources.

The group continued to be advised that challenges remained with workforce planning particularly as the workforce got older. A dialogue with education providers would need to be had to ensure that workforce planning for the future was underway. It was noted that a similar situation within the private sector also existed with the recruitment and retention of staff.

As the integration of health and social care progressed engagement with staff would continue to be central to the whole process to ensure resources were used effectively and efficiently in the provision of services.

The Strategic Planning Group were asked to :-

1. Note the contents of the report; and
2. Support the key activities required for delivery of the organisational development and workforce plan.

Decision

1. Noted the contents of the report;
2. Noted that challenges remained with regards to workforce planning in both the public and private sector; and
3. Noted that engagement with staff as integration progressed was crucial.

6. WORKPLAN

A workplan had been circulated which provided details of the work of the

Strategic Planning Group over the coming months.

It was agreed to also include the following items :-

- Strategic plan priorities
- Joint commissioning plans progress report
- Budget update
- Locality Group update

It was also noted that the item concerning Oral Health Strategy would be delayed beyond the April meeting due to a member of staff being on long-term absence.

Decision

1. Noted the contents of the workplan;
2. Agreed to include a number of additional items; and
3. Noted that the Oral Health Strategy would be delayed.