

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 30 JUNE 2016.

Present – Jane Kellock (Chair, Health Professional), Alan Bell (Social Care Professional), Carol Bebbington (Health Professional), Ian Buchanan (User of Social Care), Elaine Duncan (Health Professional), Margaret Douglas (Health Care Professional), Diane Hayley (Health Professional), Jane Houston (Union Health), Mairead Hughes (Health Professional), Pamela Main (Social Care Professional), James McCallum (Health Professional), Mary-Denise McKernan (Carer of Users of Health Care), Alistair Shaw (Non-Commercial Provider of Social Housing), Robert Telfer (Commercial Provider of Social Care) and Patrick Welsh (Chief Finance Officer)

Apologies – Marion Barton, Colin Briggs, Jim Forrest, Martin Murray, Robert Naysmith and Charles Swan

1. DECLARATIONS OF INTEREST

No declarations of interest were made.

2. MINUTE

The Group confirmed the Minute of its meeting held on 7 April 2016. The Minute was thereafter signed by the Chair.

3. HEALTH INEQUALITIES PRESENTATION BY MARGARET DOUGLAS, CONSULTANT IN PUBLIC HEALTH, NHS LOTHIAN

The Group considered the contents of a presentation carried out by Margaret Douglas, Consultant in Public Health, NHS Lothian.

The presentation commenced with a series of slides providing an overview of life expectancy in the population of West Lothian and the scale of deprivation.

There then ensued a discussion about how best to tackle health inequalities noting that it was not enough to just target deprived areas as disadvantaged people did not all live in deprived areas.

It was important to note that underlying inequalities needed a broader approach to just clinical outcomes and should include matters such as income, wealth and power.

The group discussed how best to “mitigate”, “prevent” and “undo” health inequalities and included approaches such as addressing barriers to care, workforce education & training, prioritise prevention and creation of a culture of equality & fairness. In doing so a number of issues were raised and included the importance of carrying out impact assessments to know

what did/did not work, centralisation of clinical services, lack of linkage between the DWP and health services and signposting people to services other than A&E and GP services.

The discussion concluded that there was a lot of good work being done in West Lothian communities and much to be proud of however with the continuing restraint on budgets health inequalities needed to remain a priority within the terms of the Strategic Plan. Finally it was suggested that Community Regeneration be included in any planning on health inequalities as it was not just about clinical outcomes but also about social needs in the community.

Decision

1. Noted the contents of the presentation and the themes that were emerging in terms of addressing health inequalities;
2. Noted that health inequalities were not just about clinical outcomes but were also about the social needs of individuals;
3. Noted that Regeneration Planning needed to be the heart of addressing the social needs of the population; and
4. Noted the importance of carrying out impact assessments, particularly in light of reduced budgets.

4. LOCALITY UPDATE

A report had been circulated by the Director providing an update on the development of Localities and the key themes emerging from the development event held on 10 June 2016.

The report recalled that the Integrated Joint Board Plan 2016-2026 defined two localities across which health and care services would be planned in West Lothian. In order to ensure appropriate local engagement, locality groups were being formed to including health and social care professionals, representatives of the housing sector, representatives of the third and independent sectors and care and patient representatives.

On 7 April 2016 the Strategic Planning Group agreed that a development day for the two locality groups would be held to provide background for the work of the groups and to develop work plan priorities for each locality, with an initial focus on activity in 2016-17.

The development event went ahead on 10 June 2016 and included an introduction to health and care integration and locality planning; care group commissioning; regeneration plans and work in progress with the Community Planning Partnership.

The report then provided details of the priorities emerging from the locality group discussions and whilst it was noted that there was a variety of themes emerging the one key theme that was consistent across both

groups was support for GP Services. It was also noted that another key theme emerging was ongoing housing development in West Lothian which would have a significant impact on health and social care functions, such as access to GP and hospital services.

The group continued to be advised that following the event Action Plans for both locality groups would be devised and meeting schedules had been agreed so that both groups met in the same week. Those leading the two locality groups would also meet on a regular basis.

A summary of the discussions and output from the Locality Groups were provided in Appendix 1 attached to the report.

Decision

1. To note the contents of the report;
2. To note that the two locality groups had recently met and that a schedule of meetings for both had now been agreed;
3. To note the key themes emerging from the locality groups first meeting including support for GP practices and ongoing pressures new house building; and
4. To note that Action Plans for both locality groups had still to be developed.

5. PLANNING CYCLE

A report had been circulated by the Director advising of a proposed planning cycle which would allow detailed scrutiny of the Strategic Plan and associated Care Group Commissioning Plans.

The report recalled that at the meeting of 31 March 2016 the Integration Joint Board (IJB) approved its strategic plan which included details on how high level outcomes were to be achieved through a process of strategic commissioning. The Strategic Plan also included a commitment to develop a series of care group based commissioning plans.

It was noted that the SPG meeting schedule was structured to allow the SPG to be full engaged in the development of the care group commissioning plans and to make recommendations to the IJB when appropriate.

Attached to the report at Appendix 1 was the proposed planning cycle which incorporated business processes and performance reviews.

The group continued to be advised that what was before them was very much the first iteration of the planning cycle and that it would continue to develop and be updated to include matters such as IJB and SPG meeting dates and more up-to-date information on finance, which would be provided by the Chief Finance Officer.

Decision

1. To note the content of the report and proposed planning cycle;
2. To note that the planning cycle would continue to develop;
3. To agree the recommendation to include the IJB and SPG meeting dates;
4. To agree that the Chief Finance Officer supply further information relating to budget matters; and
5. To agree to forward any further suggestions to Carol Bebbington

6. SCHEDULE FOR PHYSICAL DISABILITY COMMISSIONING PLAN -
REPORT BY DIRECTOR (HEREWITH)

A report had been circulated by the Director seeking comments in respect of the process and schedule for the development of the strategic commissioning plan for Adults with a Physical Disability.

Attached to the report at Appendix 1 was the schedule and current progress for the development of the plan for Adults with a Physical Disability, the first phase of which, the needs assessment, had been completed.

Recommendations from the needs assessment were derived from evidence gathered and analysed from the review of literature, surveys and fieldwork, including study informants. Appendix 2 attached to the report provided the key themes and recommendations from the needs assessment.

The recommendations had been developed to match the level of commitment and desire demonstrated. A focus on the recommendations would lead to a comprehensive programme of change and improvement with improved outcomes for people with a physical disability and the communities in which they lived.

A short life working group had been established to develop the three year commissioning plan. Appendix 3 provided the Terms of Reference for the group as previously approved by the IJB.

A first draft of the plan was attached to the report at Appendix 4 and the Strategic Planning Group was being invited to comment on this.

It was the intention to finalise the plan in conjunction with the Strategic Planning Group, including relevant stakeholder engagement, and thereafter present a final draft of the commissioning plan for adults with a physical disability to the IJB meeting on 23 August 2016.

There then ensued a discussion with regards to the plan noting that there was a lack of detail in terms of the number of adults with a physical

disability and therefore it was difficult to ascertain if needs were increasing or decreasing. It was hoped that the detail on numbers would be included in the final version following further engagement with stakeholders. However the group were assured that the assessment had not identified any major gaps in the service provision at the moment.

The report concluded that the needs assessment was a very comprehensive document containing many recommendations, only some of which were relevant to the commissioning plan but the provision of services needed to be mindful of all the recommendations.

It was recommended that the Strategic Planning Group note the planning schedule as detailed in Appendix 1, in particular to the note the commitment to present a final draft of the strategic commissioning plan for Adults with a Physical Disability to the IJB meeting on 23 August 2016.

Decision

1. To note the contents of the report and the schedule for Adults with a Physical Disability Commissioning Plan;
2. To note that the needs assessment for the plan contained a great number of recommendations and would therefore require close monitoring as the plan developed; and
3. To agree that the final draft of the Commissioning Plan for Adults with a Physical Disability be presented to the IJB meeting taking place on 23 August 2016 with the recommendation that it be approved.

7. SCHEDULE FOR LEARNING DISABILITY COMMISSIONING PLAN

A report had been circulated by the Director seeking comments from the Strategic Planning Group in respect of the process and schedule for the development of the strategic commissioning plan for Adults with a Learning Disability.

Attached to the report at Appendix 1 was the schedule and current progress for the development of the plan for Adults with a Learning Disability, the first phase of which, the needs assessment, had been completed.

Recommendations from the needs assessment were derived from evidence gathered and analysed from the review of literature, surveys and fieldwork, including study informants. Appendix 2 attached to the report provided the key themes and recommendations from the needs assessment.

The recommendations had been developed to match the level of commitment and desire demonstrated. A focus on the recommendations would lead to a comprehensive programme of change and improvement with improved outcomes for people with a learning disability and the communities in which they lived.

A short life working group had been established to develop the three year commissioning plan. Appendix 3 provided the Terms of Reference for the group as previously approved by the IJB.

The intention was now to prepare the plan in conjunction with the Strategic Planning Group, including relevant stakeholder engagement and thereafter present a final draft of the strategic commissioning plan for Adults with a Learning Disability to the IJB meeting on 18 October 2016 for approval.

The group continued to be advised that this particular plan was much more complex than other plans being prepared and therefore the planning phase would take longer than the plan for Adults with a Physical Disability. This in turn would make some issues that had arisen through the needs assessment more difficult to address.

It was recommended that the group note the planning schedule as detailed in Appendix 1 and in particular note the commitment to presenting a final draft of the strategic commissioning plan for Adults with a Learning Disability to the IJB on 18 October 2016.

Decision

1. To note the contents of the report and the schedule for the Learning Disability Commissioning Plan;
2. To note that this particular commissioning plan was more complex than other plans being prepared and therefore some issues would be more difficult to address; and
3. To agree that the final draft of the Commissioning Plan for Adults with a Learning Disability be presented to the IJB meeting taking place on 18 October 2016 with the recommendation that it be approved.

8. 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 include an additional item of business for presenting to the August meeting of the Strategic Planning Group and which concerned an update on the Engagement Strategy.

Decision

1. To note the contents of the workplan; and
2. To agree to include an additional item for the August meeting and which concerned an update on the Engagement Strategy.

