

1. Welcome and Apologies

1.1 Including the order of business and any additional items of business notified to the Chair in advance.

Thanks to Shulah for all her work and wishing her well for the future.

2. Declaration of Interests

2.1. Members should declare any financial and non-financial interests they have in the items of business for consideration, identifying the relevant agenda item and the nature of their interest.

None.

3. Deputations

None.

4. Minutes and Updates

4.1. Minute of the Edinburgh Integration Joint Board of 17 November 2017 (circulated) submitted for approval as a correct record

Approved

4.2. Sub-Group Updates

4.2.1 Audit and Risk Committee

(a) Note of Meeting of 1 December 2017 (circulated)

noted and thanks to Mike Ash for chairing at short notice.

4.2.2 Performance and Quality Sub-Group

Noted – reviewing benchmarks to ensure consistency and meaningful measurements

4.2.3 Professional Advisory Group

Meeting has happened and minute will be circulated in due course

4.2.4 Strategic Planning Group

(a) Note of Meeting of 3 November 2017 (circulated)

Noted

5. Reports

5.1. Rolling Actions Log – December (circulated)

Noted. Further staff info/consultation events planned

5.2. Business Resilience Arrangements and Planning – report by the IJB Interim Chief Officer (circulated)

On-going work for last year bringing together the 2 approaches to business resilience. This integrated approach will be the first in the country. Still further work to be done. Needs to include independent contractors. Agreed recommendations

5.3. Winter Plan 2017-18 – report by the IJB Interim Chief Officer (circulated)

recruited to cover plan. Hub for north and south of city will be fully live this weekend. AHP capacity has been enhanced. Nurse liaison nurses more difficult so using existing personnel as much as possible. Collecting data as go to evaluate what works well. Unexpected bad weather this week has resulted in significant impact at front door. Noted that should really start winter planning much earlier. Noted that the increased spend does seem to be incredibly health care orientated and need to extend this to social care to do even more preventative care. Need to consider how to include this better. Period of additional support? Timeframe = some 13 weeks; some 17 weeks. Input from other partners? VOCAL = additional support; continue to work as is with 3rd sector but hope this will be more explicitly detailed in the future. If something works well is there scope to continue some of the work beyond winter? Will review and hopefully will be able to carry things forward if it has significant impact. ES noted that outline strategic commissioning plans will have third sector and carers woven through them and therefore they will be explicitly visible next winter. Impact of short term additional funding is very welcome but reality is that we need to consider how we can make best use of the learning to maximise use of resources throughout the year. An evaluation report will come back in spring. Agreed recommendations including directions and evaluation report.

5.4. Whole System Delays – Recent Trends – report by the IJB Interim Chief Officer (circulated)

There have been some minor changes to the statistics but not sustainable as dependent on staff working very intensively – need to have some systemic changes. Blocks throughout the system e.g. interim care (Gylemuir) not able to move people on quickly same with reablement. OSCP – will provide more systemic consideration of issues. Recommendations agreed

5.5. Financial Performance and Outlook – report by the IJB Interim Chief Officer (circulated)

financial outlook: first half of report in year to date. Not significant changes over month to reach balance rely on NHS agreeing to shortfall. Financial outlook – consideration of the Scottish government budget impact being worked on. Care of elderly – expectation of Scottish government is this will come to IJB for allocation. Lifting of pay cap will also have

implications. Carers act and new GP contracts will also impact. ES – outsourced contracts – will they be increased to take account of salaries etc: budget has been forecast at high level and does take account of increased costs.

5.6. Health and Social Care Improvement Programme and Short-term Resource Implications (circulated)

This report is directly linked to action plan for the older people's services, however while the recommendations within the inspection report are IJB also needs to take responsibility for improvement plan for all people. Last IJB re-approved resources not be spent this year focused on 3 more pressing priorities – delayed discharge, assessments, definitive move to localities. This work has begun. X refed back to previous discussion re frantic activity and continuing to do what we've always done (which will result in on-going difficulty to meet need). Shulah Allan – what different models are we really considering. Michelle Miller – tests of change from 3rd sector have been eye opening and really need to make these business as usual; previous good work on SDS really needs to be built on – it has been moribund for too long; better use of technology also needs to be factored into the improvement plan and become "business as usual". Richard Williams: Is there contingency plan if people don't come out of hospital – take account of new treatments etc. and if there are beds we will fill them? Michelle Miller: The whole business model is predicated on moving resources from hospital to community – need to take that leap because if we don't it will result in different but no less impactful blockages. Melanie Main: Media questions re these actions and noted that it would be useful if IJB members were kept up to speed so we are prepared if there are any approaches from the media for comment. NHS Lothian has one of the highest readmission rates in the country so need to be aware if people are being sent home pre-package of care being fully in place we need to be aware that this could adversely impact at other points in system. Discussion re prescribing costs and cost of drugs and what is within our gift.

Unison recently undertook a survey of workforce and how they are feeling about the changes. Findings of that survey will be taken account of within the action plan.

Carers support – both on going and when "picking up slack" when people come out of hospital when full package of support not in place.

Recommendations agreed.

5.7. Appointments

(a) Joint Board Membership and Appointments to Committees and Sub- Groups – report by the IJB Interim Chief Officer (circulated)

(b) Recruitment of Citizen Members – report by the IJB Interim Chief Officer (circulated)

5.7 a: appointments: recommendations agreed. Reference to audit and risk chair: need to progress this quickly as there is significant risk if this place is not filled asap. Mike Ash can continue on a temporary basis. Agreed to advertise for independent chair – need to ensure that we have a worked up role and remit. Agreed recommendations

5.7b: recruitment of citizen's members: short life working group Carolyn Hirst to chair.
Suggestions to January meeting. Agreed to run both recruitments in parallel.