

Draft

FALKIRK INTEGRATION JOINT BOARD

Minute of Meeting of the Falkirk Integration Joint Board held in the Municipal Buildings, Falkirk on Friday 2 December 2016 at 9.30am.

Voting Members:

Allyson Black (Chairperson)
Dennis Goldie
Linda Gow
James King (Vice-Chairperson)
Alex Linkston
Julia Swan

Non-voting Members:

Patricia Cassidy, Chief Officer
Claire Crossan, Carer Representative
Leslie Cruickshank, GP Medical Representative
Karen Herbert, Third Sector Interface
Tracey Gillies, Medical Representative
Jane Grant, Chief Executive, NHS Forth Valley
Sara Lacey, Chief Social Work Officer (substitute)
Ewan Murray, Chief Finance Officer
Martin Murray, Service User Representative
Mary Pitcaithly, Chief Executive, Falkirk Council
Angela Wallace, Nursing Representative

Officers:

Elspeth Campbell, Head of Communications, NHS Forth Valley
Fiona Campbell, Head of Policy, Technology and Improvement, Falkirk Council
Jack Frawley, Committee Services Officer, Falkirk Council
Lesley Macarthur, Integrated Care Fund Co-ordinator, Falkirk Council
Joe McElholm, Head of Social Work Adult Services, Falkirk Council
Colin Moodie, Depute Chief Governance Officer, Falkirk Council
Kathy O'Neill, Community Services Directorate – General Manager, NHS Forth Valley
Elaine Vanhegan, Head of Performance & Governance, NHS Forth Valley

IJB62. Apologies

Apologies were received on behalf of Tom Hart, Kathy McCarroll and Angela Price.

IJB63. Declarations of Interest

There were no declarations of interest.

Martin Murray entered the meeting during consideration of the previous item.

IJB64. Minutes

Decision

- (1) The minute of meeting of the Integration Joint Board held on 7 October 2016 was approved, and**
- (2) The minute of the special meeting of the Integration Joint Board held on 18 November 2016 was approved.**

IJB65. Chief Officer Report

The Integration Joint Board considered a report by the Chief Officer which provided an update on the most recent developments within the Falkirk Health & Social Care Partnership. In terms of a whole system approach information was provided on the local delivery plan, capacity modelling, frailty model, and discharge to assess. The report also provided information on delayed discharge levels, Falkirk's integrated workforce plan and Audit Scotland publications. Patricia Cassidy provided an overview of the report.

Members discussed recruitment to the post of Chief Finance Officer (CFO) highlighting that this was a business critical post and had been the subject of discussion for too long. It was raised that the post could be advertised on a full time basis and then, for the right person, could be offered on a part time basis. Mary Pitcaithly stated that the advert could be clear that the post was open to full and part time applicants. She highlighted that this approach was not unusual and that the best candidate whether full or part time could then be appointed.

The Board asked why there had been a delay in recruitment to the post. Mary Pitcaithly advised that discussion had been ongoing regarding recruitment and that the funding of the post needed to be clear as the Stirling & Clackmannanshire partnership had indicated their preference for a full time CFO. This presented additional costs to the Health Board who would incur shared costs for each partnership. There were also concerns about recruiting a suitably skilled and experienced individual as there was scope for the post to provide additional support on work with the change agenda. Members commented on the risks that were associated with the uncertainty regarding this post.

Some members expressed concern about the implication on resources of a full time post, noting that resources should be targeted to frontline services. Members asked what approach was being taken in other partnerships where the Health Board covered more than one area. Patricia Cassidy advised that there was a mixture of approaches. In Lanarkshire there was a

shared CFO post while within the Greater Glasgow and Clyde Health Board the East Renfrewshire partnership had its own full time CFO. She advised that finance continues to feature as a high risk for the IJB. Under the current part time arrangement the CFO was mainly writing or IJB reporting and did not have capacity for the wider strategic planning and development of alternative service models. She stated that the Falkirk partnership had the slimmest management structure nationally and that this created risk for the IJB. A report on support services would be presented to a future meeting of the Board.

The board asked if the implementation of discharge to assess would assist with delayed discharges which were related to guardianship issues. Patricia Cassidy stated that there have been discussions on how best to deal with guardianship issues. There had been a suggestion that having a mental health officer in the emergency department would help to start discussions about guardianship from an early stage. She was also looking at what approach other partnerships were taking. Tracey Gillies stated that it was important to establish discharge to assess and get more straightforward cases moving through before delving into the more complicated situations.

Members stated that there was a need for increased pace on the introduction of measures to address delayed discharge issues. Further, members sought information on a business case relating to the CFO post. If there was a clear business case for full time then all members would support that. The need for evidencing significant spend was highlighted. Patricia Cassidy stated that she was unaware of an outstanding request for a business case but that she would be happy to provide one. This would not be available until the February Board and would further delay recruitment to the post.

The Board agreed to a short adjournment at 10.15am and reconvened at 10.30am with all members present as per the sederunt.

Members noted that the post would be funded 50/50 by the constituent organisations and that the job description would be subject to further discussion between the Chief Executives and Chief Officer.

Decision

The Integration Joint Board:-

- (1) noted the continued progress being made within available resources;**
- (2) remitted the Chief Officer, in conjunction with relevant officers, to bring forward a report to the February Board on the transfer of operational management for “in-scope” health services and the appropriate delegation of authority;**
- (3) remitted the Leadership Team to review the Audit Scotland report and bring back a further report to the IJB in February 2017;**
- (4) agreed that recruitment to the post of Chief Finance Officer would progress with a flexible advertisement allowing candidates to seek either full or part time hours, and**

- (5) agreed that the job description for the Chief Finance Officer would be finalised by the Chief Officer in conjunction with the Chief Executives of Falkirk Council and NHS Forth Valley.**

IJB66. Integration Joint Board Financial Report and Budget Recovery Plan Update

The Integration Joint Board considered a report by the Chief Finance Officer which provided an overview of the financial position of the partnership.

Members sought assurance that work was still being directed at trying to reduce the projected overspend. Patricia Cassidy stated that there were a number of initiatives underway and that she was working closely with colleagues in Social Work Adult Services. Ewan Murray advised that there had been growth in demand for care at home services and that negotiation was ongoing with residential home, nursing home and care at home providers. Joe McElholm stated that there were programmes underway to manage the overspend and deliver savings including more reviews of existing care packages to reduce operational costs.

Decision

The Integration Joint Board noted:-

- (1) the financial position of a reported overspend of £1.007m for the 7 month period ended 31 October 2016;**
- (2) the reduction in the current projected overspend for the year to 31 March 2017 from £1.114m, as reported to the October IJB, to £0.872m;**
- (3) the anticipated use of Integration Funding to cover the projected Adult Social Care Services overspend;**
- (4) the current position on savings programmes and other updates detailed in section 5 of the report, and**
- (5) the current position on Value Added Tax and IJBs per section 7 of the report.**

IJB67. Partnership Funding

The Integration Joint Board considered a report by the Chief Officer which provided the following information in relation to Partnership Funding; Integrated Care and Delayed Discharge Funds:-

- Detail regarding the development of a framework to enable the IJB to appropriately commission and thereafter scrutinise services to Third Sector organisations, compliant with 'Following the Public Pound' guidance;
- Conclusions and recommendations arising from initial evaluations of specific initiatives: Closer to Home, Rapid Access Frailty Clinic and

Discharge Hub, within the context of the whole system approach, detailed within Appendix 2 to the report;

- A six monthly performance review of all Partnership Funded initiatives in line with mandatory 'Following the Public Pound' requirements, along with recommendations for continuation of funding for initiatives funded until 31 March 2017, detailed within Appendix 4 to the report, and
- Funding recommendations for new proposals reviewed in accordance with the agreed Partnership Funding Governance process, detailed within Appendix 4 to the report.

Ewan Murray provided an overview of the report.

The board highlighted that further debate at a senior level was required on the use of Health Care Assistants to support care at home packages and on how to develop the best pathway model relating to the Rapid Access Frailty Clinic. Members also considered the costs relating to Advice Line For You and commented that they welcomed that a revised business case would be submitted. There was further discussion on how to get these standalone projects joined up and working in a more integrated fashion so that it was clearer to service users, families and staff when to use which service.

Members asked if there were any new projects under consideration. Lesley Macarthur advised that there were six potential new partners which would hopefully be presented to the February meeting of the Board. The initial interest had been high but concerns about sustainability had discouraged some partners.

Decision

The Integration Joint Board:-

- (1) agreed that the framework for commissioning Third Sector organisations in compliance to 'Following the Public Pound' is presented to the IJB in February 2017;**
- (2) noted the six monthly performance report for all Partnership Funded initiatives;**
- (3) approved continuation of funding for initiatives with a current end date of 31 March 2017, as detailed in appendix 3 to the report;**
- (4) remitted further work to be undertaken with all initiatives to ensure that performance information gathered is adequate and articulates impact, and**
- (5) approved allocations of Partnership Funding for new initiatives as presented in appendix 4 to the report.**

IJB68. Eligibility Criteria and Resource Allocation Framework

The Integration Joint Board considered a report by the Head of Social Work Adult Services which sought approval to consult with stakeholders on a draft revised Eligibility Criteria Framework. The report also sought approval for the development of a revised Resource Allocation System. The draft eligibility framework policy was appended to the report.

The board asked about the consultation process and if the third sector would be involved. Joe McElholm advised that consultation would be carried out with the independent sector, third sector, service users and potential service users.

In relation to self directed support (SDS) members commented on the impact on personalisation of service and the need for the Service to manage the budget well. They asked if there would be regular updates on the impact of the policy provided to the Board. Joe McElholm stated that it was up to the Board to determine its reporting cycle but that regular reports on SDS would incorporate information on the impact. Patricia Cassidy advised that this work was a key part of the partnership's delivery plan.

The board discussed the hesitancy of some service users to engage with SDS due to the responsibility of becoming an employer. The Board also discussed that there had been cases where an individual's indicative budget and their actual level of support had been significantly different. Discussion also included a consideration of the role of traditional supports such as day centres and their value to some service users. Joe McElholm stated that the Service aimed for accuracy when providing indicative budgets and were clear to service users that the figures provided were indicative only. There was well established support for people considering using SDS including that provided by the Independent Living Association. Compared to other areas he acknowledged that Falkirk had low levels of direct payments and highlighted that this was a significant cultural change for service users and staff.

Decision

The Integration Joint Board:-

- (1) agreed to consult on the draft revised Eligibility Criteria Framework;**
- (2) approved the development of a revised Resource Allocation System to complement a revised eligibility framework for implementation from April 2017, and**
- (3) requested a report to consider progress on the above actions to a future meeting of the Board.**

IJB69. NHS Forth Valley Winter Plan 2016/17

The Integration Joint Board considered a report by the Director of Public Health and Planning which outlined the content of the Winter Plan 2016/17, key milestones and progress against the key actions. The NHS Forth Valley Winter Plan 2016/17 was appended to the report. Tracey Gillies provided an overview of the report.

Decision

The Integration Joint Board noted the report.

IJB70. Care and Clinical Governance Group

The Integration Joint Board considered a report by the Medical Director providing an update on the first meeting of the Care & Clinical Governance meeting. The report set out a summary of the key discussion points from the meeting. Tracey Gillies provided an overview of the report. She advised the board that if they wished to have any particular topics discussed at the group these should be intimated to Joe McElholm or herself.

Members discussed the topic of drug related deaths and the rise in deaths relating to specific medications. Tracey Gillies highlighted the situation regarding one particular drug which was being increasingly prescribed while rising as a street drug of currency. Prescribing patterns and levels of street use were monitored.

Decision

The Integration Joint Board noted:-

- (1) the discussion of the Care & Clinical Governance Group, and**
- (2) that for subsequent meetings the minute of the meeting will be included as an appendix to the report.**

IJB71. Development of Visual Identity

The Integration Joint Board considered a report by the Communications & Participation Manager, Falkirk Council which provided the outcome of the development process for a consistent visual identity for the Falkirk Partnership. The process included development of a clear brief and consultation with stakeholders. Examples of the recommended style for the partnership's visual identity were appended to the report. Elspeth Campbell provided an overview of the report.

Decision

The Integration Joint Board agreed that the preferred visual identity should be adopted.