

Meeting	Integration Joint Board (IJB)
Date, Time and Place	Thursday 13 July 2017 at 10am Bressay Room, NHS Shetland (NHSS) Headquarters, Montfield, Burgh Road, Lerwick, Shetland
Present [Members]	<p><u>Voting Members</u> A Duncan E Macdonald R McGregor [Substitute for M Burgess] E Watson M Williamson <i>[Chair]</i></p> <p><u>Non-voting Members</u> S Beer, Carers Link Group S Bokor-Ingram, Chief Officer/Director of Community Health and Social Care S Bowie, Senior Clinician K Carolan, Senior Clinician – Senior Nurse S Gens, Staff Representative M Nicolson, Chief Social Work Officer I Sandilands, NHS Staff Representative K Williamson, Chief Financial Officer</p>
In attendance [Observers/Advisers]	C Anderson, Senior Communications Officer, SIC J Riise, Executive Manager – Governance and Law, SIC H Sutherland, Head of Planning and Modernisation L Malcolmson, Committee Officer, SIC <i>[note taker]</i>
Apologies	<p><u>Voting Members</u> M Burgess</p> <p><u>Non-voting Members</u> C Hughson, Third Sector Representative</p> <p><u>Observers/Advisers</u> M Boden, Chief Executive, SIC J Belford, Executive Manager – Finance, SIC S Brunton, Team Leader – Legal, SIC</p>
Chairperson	<p>Mrs Williamson, Chair of the Integration Joint Board, presided.</p> <p>The Chair paid tribute to Mr Morton following his recent resignation from his role as Non-Executive Member of the NHS Board. She said that he had a lot of input into his role and that she had personally been happy to have him as a member of the IJB. She noted that Mr Morton had commented in the media on his role and acknowledged the many challenges faced by the IJB but highlighted the good delivery and performance of the IJB since it was established in 2015. The Chair said that it was</p>

	important that the IJB continues to strive to make it the best that it can be for the people of Shetland. She said that IJB members may not always agree but debate is welcome from voting and non-voting members and that she wanted to see consensus at meetings, not votes, as the IJB is different from the Council and the Health Board.
Declarations of Interest	None.
32/17	Use of Integrated Care Fund and Additionality Funding for 2017/18
Report No. CC-25-17-F	<p>The IJB considered a report by the Director of Community Health and Social Care which summarised how the Integrated Care Fund and Additionality Funding is proposed to be utilised for 2017/18 and how future initiatives can continue to be pump-primed.</p> <p>The Director of Community Health and Social Care introduced the report and in responding to questions he explained that if financial space is created for pump priming initiatives it would be for the benefit of Shetland people and therefore it was important to capitalise on efficiencies, where possible. He said that there had been a shift from hospital beds and care centres and it was about a whole change programme that looked at how services can be provided more efficiently. Concern was expressed that changes need to be evidence based. The intermediate care team was given as an example and for staff on the periphery it was important that if initiatives are to be pump primed there needs to be an evidence base behind it. It was suggested however that some measures of efficiencies may not provide the best quality of life. The IJB were advised that the intermediate care team is down 30% capacity which is concerning. An issue was highlighted around the need for nurses in care homes to provide care for more complex patient needs, where this currently rests with district nurses. Concern was also expressed around the discharge of frail patients from care homes without much medical input. Following examples provided, it was suggested that checks and balances are needed in terms of the level of disability and frailty of the patient and the level of complex medical needs after leaving the hospital, so that patients receive the correct level of care within the care home setting.</p> <p>Ms Watson declared an interest as the Service Manager for the Intermediate Care Team, and explained that in terms of evidence more information could be shared at a national level and there were many examples to draw on.</p> <p>During further discussion the IJB acknowledged comments on the need for joined up working with multi disciplinary meetings that include the views of the GP and Nurses, in terms decisions</p>

	<p>on the discharge of dependent patients. Where this does not happen the patient may be returned to the community too soon and end up back in hospital.</p> <p>Discussion followed on how pump priming money is used and the Director of Community Health and Social Care advised that he would provide an evaluation report, in December 2017, on the pump primed initiatives and how the money is changing services and how they connect to the Joint Strategic Commissioning Plan. He also agreed to report on when the money would be returned for use on other initiatives.</p> <p>Having received a number of financial questions the Chief Financial Officer confirmed that he would provide explanations by email following the meeting, including where the £450K has been allocated.</p>
Decision	<p>The IJB:</p> <ul style="list-style-type: none"> • APPROVED the use of the Integrated Care Fund and use of Additionality Funding for 2017/18 (Appendix 1); AGREED the intention to continue seeking opportunities to pump-prime future initiatives; and • AGREED that the Director of Community Health and Social Care evaluate and report, in December 2017, on how these initiatives are changing things, how they connect to the Joint Strategic Commissioning Plan and how long they will use the money before it is returned for use on other initiatives.
33/17	Remit of Strategic Planning Group
Report No. CC-27-17-F	<p>The IJB considered a report by the Head of Planning and Modernisation, that presented the revised remit of the Strategic Planning Group</p> <p>The Head of Planning and Modernisation introduced the report and advised that the revised remit had been presented to the Strategic Planning Group who were comfortable with the positive recommendation.</p> <p><i>(Mr Duncan declared and interest in this item as a Director of Voluntary Action Shetland)</i></p> <p>During discussion and questions, concern was expressed that the membership was weighted towards the NHS and it was agreed that Officers would consider the Membership list in terms of balance of representation and that consideration would be given to include Self Directed Support Representative and Commercial Care Provider representation. In responding to further comments it was also agreed that consideration would be given to how to avoid representatives being disadvantaged in attending meetings.</p> <p>In discussing the membership, the IJB noted that there were 5 non voting members of the IJB on the group. Following a call for the Chair and Vice-Chair of the IJB to sit on the Strategic Planning Group, the IJB approved the revised remit of the Strategic Planning Group, but sought clarification from the Executive Manager – Governance and Law on the guidance and legislation around having the Chair and Vice Chair on the Strategic Planning Group, to be reported back in August.</p>

Decision	The IJB APPROVED the revised remit of the Strategic Planning Group.
34/17	Management Arrangements for Strategic Change Programmes
Report No. CC-28-17-F	<p>The IJB considered a report by the Head of Planning and Modernisation – NHS that presented the proposed arrangements for managing the Strategic Change Programme.</p> <p>The Head of Planning and Modernisation introduced the report.</p> <p>The IJB discussed the need for better prescribing and more joined up working with social care and GPs. The Director of Community Health and Social Care assured the IJB that pharmacy staff are out working with communities and social care to reduce the level of wastage and establish what can be funded by not saving money in certain areas.</p> <p>During discussion, attention was drawn paragraph 6.9 of the report and the eleven bullet points under the transformational change programme and statement namely “poor communication to all stakeholders”. It was highlighted that many people in Shetland have travelled to Aberdeen and never been seen due to the lack of communication and no paper work in place resulting in patients returning without having attended their appointments. The total cost of such a failure was questioned and the importance of improving the situation, with immediate effect, was stressed. The Senior Clinician – Senior Nurse representative advised that every complaint is investigated and it was important that such instances are directed to her and this could be done without identifying themselves, but some collaboration would be required.</p> <p>Concern was expressed that savings were being sought from Community Nursing where it would be impossible to achieve given the elderly population and demands on the service. The Director of Community Health and Social Care advised that savings would be challenging for this service but it was important to consider savings across all services and that to leave one service out would mean that savings would be taken from other services instead. He said that the information would be brought back for the IJB to look at taking account of risk and impacts for all services providing and evidence base for members to consider.</p> <p>It was noted that 20 years ago it was thought that full integration of services would happen and that it would be better for patients and that now seems the time for proper integration moving forward to provide services better. Ms Watson advised that as Chief Nurse she could advise that redesign work was being undertaken in terms of integration and that this work would be brought to the IJB in due course. She said that in terms of</p>

	<p>financial savings that would be brought to the IJB by the end of the financial year.</p> <p>The Executive Manager – Governance and Law advised that the IJB would receive a report in August 2017 on the business programme and that would be where the need for a report would be highlighted. The Business Programme includes a section at the end where reports to be prepared could be listed but not allocated to a particular meeting date.</p> <p>The IJB unanimously approved the recommendations contained in the report.</p>
Decision	<p>The IJB:</p> <ul style="list-style-type: none"> • APPROVED the proposed arrangements for managing the Strategic Change Programmes; and • NOTED the intention to report quarterly on progress as part of the Annual Business Programme approved in May 2017.
35/17	Local Delivery Plan (LDP) 2017-20
Report No. CC-29-17-F	<p>The IJB noted a report by the Head of Planning and Modernisation, NHS, which presented the Local Delivery Plan (LDP) for 2017-20.</p> <p>The Head of Planning and Modernisation introduced the report.</p> <p>During questions the IJB were informed on the status of the specialist clinicians in gynaecology and dermatology and that these services were provided by visiting specialists. It was noted that there was a national shortage in both specialities and that a regional solution was being considered.</p> <p>Officers responded to a number of questions on matters such as the transformational change programme, GPs providing Advance Practitioner Nurse (ANP) clinics during July and August as there are not enough ANPs in Shetland, the recruitment crisis and the decisions are required now.</p> <p>The Vice-Chair noted the information in the report indicated how well the NHS had done in terms of savings and congratulations had to be extended to staff as there was a lot of good news to be found in the report. He said that £12.5m savings were to be found and this was a catastrophic amount to Shetland and the Islands Community. He said that it was time to get political and go back to the Scottish Government as there had been service cuts for the last 7 years and senior management would struggle to make more savings. He said that more savings would be detrimental to Shetland and the remote islands and this message had to be put across.</p> <p>The Director of Community Health and Social Care agreed that</p>

	<p>the savings targets had been challenging and would continue to be so but that a three year strategic plan had been formulated. He said that this was the same across Scotland for Council's, Health Boards and IJBs, and said that any plea to the Scottish Government would mean Shetland joining the queue. The Director of Community Health and Social Care said that on the mainland local authorities don't have reserves as in Shetland and it would be a case that we either retain local control or seek outside support.</p> <p>Comments were made and the IJB noted that the savings of £4.6m sought this year would be the entire primary care budget and that it was impossible to make such savings. The IJB were advised that a Ministerial visit would be made to Shetland in August and it was agreed that they be made aware that the Chair and Vice Chair of the IJB would like an opportunity to meet the Minister, to discuss the level of funding for Shetland.</p> <p>Reference was made to the sale of NHS owned properties and it was stated that housing was a barrier for recruitment and for attracting locums. Following some discussion, it was agreed that contact would be made with Council's Housing Service/ Hjaltdland Housing Association regarding accommodation for use by locums, newly appointed staff and patients from the Outer Isles.</p> <p>The IJB continued to have further discussion on the appendices under the headings of capital planning, suitability and value, information technology and on the recruitment campaign to attract doctors to Shetland.</p>
Decision	The IJB NOTED the Local Delivery Plan (LDP) for 2017-20.
36/17	Directions to Shetland Islands Council
Report No. CC-37-17-F	<p>The IJB considered a report by the Head of Planning and Modernisation, which presented the Directions to the Shetland Islands Council set out in Appendix1.</p> <p>The Head of Planning and Modernisation introduced the report and in responding to questions she confirmed that the directions were sufficient for the purposes. She advised that the IJB would see performance indicators regularly and issues would be highlighted as required.</p> <p>The Chief Financial Officer was able to provide clarification around the budget allocation for the four service areas but concern was expressed that no budget had been allocated to unpaid carers. The IJB were assured however that issues relating to budget allocation would be identified over the next year.</p>

	<p>The Director of Community Health and Social Care advised that these directions were live documents and any change of circumstance would be brought back to the IJB including budgetary matters and the Executive Manager – Governance and Law confirmed that the directions may be subject to variation.</p> <p>The IJB unanimously approved the directions to Shetland Islands Council.</p>
Decision	The IJB APPROVED the Directions to Shetland Islands Council set out in Appendix 1.

The meeting concluded at 12.30pm.

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Chair