

## Agenda Item No 3 (a)

MINUTE of MEETING of the **HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD** held in the Town and County Hall, Forfar on Wednesday 11 December 2019 at 2.00pm.

### **Present: Voting Members of Integration Joint Board**

Councillor LOIS SPEED, Angus Council - Chair  
HUGH ROBERTSON, Non-Executive Board Member, NHS Tayside – Vice Chair  
Councillor JULIE BELL, Angus Council  
Councillor BOB MYLES, Angus Council  
GRAEME MARTIN, Non-Executive Board Member, NHS Tayside

### **Non Voting Members of Integration Joint Board**

SANDY BERRY, Chief Finance Officer  
PETER BURKE, Carers Representative  
IVAN CORNFORD, Independent Sector Representative  
ALISON CLEMENT, Clinical Director, Angus IJB  
ELAINE HENRY, Consultant Gastroenterologist  
RICHARD HUMBLE, GP Representative  
VICKY IRONS, Chief Officer  
ANDREW JACK, Service User Representative  
JOHN FYFE, Service Leader, Justice (proxy on behalf of Kathryn Lindsay, CSWO)  
CHARLIE SINCLAIR, Associate Nurse Director

### **Advisory Officers**

GEORGE BOWIE, Head of Community Health and Care Services - South, AHSCP  
DAVID COULSON, Associate Director of Pharmacy, NHS Tayside  
GAIL SMITH, Head of Community Health and Care Services – North, AHSCP  
WENDY SUTHERLAND, Team Leader, Angus Council  
BILL TROUP, Head of Integrated Mental Health Services  
DREW WALKER, Director of Public Health, NHS Tayside

Councillor LOIS SPEED, in the Chair.

Prior to the commencement of the meeting, the Chair announced that Vicky Irons, Chief Officer was leaving to take up the role of Chief Officer with Dundee Health and Social Care Partnership in February 2020. The Chair on behalf of the Board, thanked Vicky for her valuable work and contributions made during her time with the Angus Health and Social Care Partnership.

Vicky intimated that a huge amount of work had been undertaken by the Angus Partnership and expressed her sadness at leaving her post. The process to appoint an Interim Chief Officer would be progressed shortly. She wished the Partnership well and highlighted there would continue to be opportunities to work more collaboratively together in the future.

## **1. APOLOGIES**

Apologies for absence were intimated on behalf of Emma-Jane Wells, Non-Executive Board Member, NHS Tayside; Chris Boyle, Staff Representative, Kathryn Lindsay, Chief Social Work Officer; both Angus Council; Gary Malone, Third Sector Representative; and Barbara Tucker, Staff Representative; NHS Tayside.

## **2. DECLARATIONS OF INTEREST**

Peter Burke declared a non-financial interest in Items 8 and 9 as the carers representative. He indicated that he would participate in any discussion.

### **3. MINUTES INCLUDING ACTION LOG**

#### **(a) PREVIOUS MEETING**

The minute of meeting of the Angus Health and Social Care Integration Joint Board of 30 October 2019 was submitted and approved as a correct record.

#### **(b) ACTION LOG**

The action log of the Health and Social Care Integration Joint Board of 30 October 2019 was submitted and noted.

### **4. STRATEGIC PLANNING PROGRESS REPORT**

There was submitted Report No IJB 76/19 by the Chief Officer summarising a number of strategic planning issues and related operational matters to provide an overview of progress in a number of key activity areas.

The Report indicated that more detailed individual reports were being submitted to today's IJB meeting regarding a number of the matters covered in the Report, including a Strategic Financial Planning update, and that some of the information contained within the Report would be fed into that plan. The overall intention was to provide a picture of the current operational and strategic "terrain" and the work that was being done to adjust in terms of changing demand, impact on service delivery and cost implications, with these being monitored and planned for in the Improvement and Change Programme Board and in the Angus Care Model Delivery Group.

In reviewing the quality of services, adapting them to meet new or changed demand, and driving improvement work into the services was a continuous activity for operational managers and strategic planning staff. Where a change was significant enough it was usually reported to the IJB individually, or collectively under a particular change programme. A summary of the overall strategic picture was provided in order that the IJB were sighted on cross-cutting themes and to better understand the interaction between the various areas of work.

The Report captured much of the work carried out through the IJB's Improvement and Change Board unless that work had already been reported separately. Updates and programmes currently being progressed were outlined in Section 3 of the Report.

The Head of Community Health and Care Services – South provided a brief overview of the Report.

Councillor Bell raised questions in terms the Strategic Planning Risks relating to insufficient corporate support and service provider failure, and in response the Head of Community Health and Care Services - South and Service Manager, Angus Health and Social Care Partnership provided an update.

The Director of Public Health suggested that future reports should be reviewed to highlight the progress and planned transformation work being undertaken in Angus to support the Transforming Tayside plan.

The Chair raised a point, for example, the closure of Linlathen Nursing Home in Dundee, particularly relating to the consultation process with key stakeholders. In response, the Head of Community Health and Care Services - South advised that the process was undertaken and that consultation processes and engagement would feature in future reports.

The Integration Joint Board agreed:-

- (i) to note the content of the Report;
- (ii) to cross reference to specific individual reports where indicated; and

- (iii) to note that a Report regarding Physical Disability would be submitted to the IJB meeting in April 2020.

## **5. THE IMPACT OF DEMOGRAPHIC CHANGE (OLDER PEOPLE'S SERVICES)**

With reference to Article 7 of the minute of meeting of this Board of 12 December 2018, there was submitted Report No IJB 77/19 by the Chief Officer highlighting that the Angus Health and Social Care Partnership (AHSCP) were experiencing increased demand for services due to demographic change.

The Report indicated that there was a direct relationship between demographic changes, demand, capacity and cost. The Report reviewed how these factors were currently presenting in Older People's Services, projects demand and cost into the future, considering the effect on service capacity.

Report IJB 86/18 provided a first analysis of the impact of demographic change and strategic change on demand for personal care. It was estimated that the additional demand compared to 2018/19, for personal care home hours from people aged over 75 would be 177,274 during 2019/20. The actual additional hours delivered in 2019/20 would not be known until May 2020 however in the full year to the end of September 2019 more than an additional 228,000 hours of personal care had been delivered, exceeding projections by nearly 51,000 hours. The reasons for the variance were outlined in Section 2 of the Report.

The aim of the Report was to provide the IJB with an illustration of the demand and financial challenges that required to be managed within the current strategic planning period whilst recognising that services for people over 65 accounted for approximately 66% of personal care demand. Demographic change in relation to people aged over 65 would increase demand for services and required additional funding of £c1.2m per year during the current strategic plan. The IJB's management team would review the figure in due course and keep the Board updated of any refinements. The increase was despite mitigation driven by the Angus Care Model. Further action to mitigate against the financial pressures required to be explored in line with the Strategic Commissioning Plan 2019-22.

The Head of Community Health and Care Services – South outlined the key areas of the Report and also highlighted that it was evident from personal care and other projections that there would be major challenges in the medium and long term in resourcing the growth and that the need to focus on demand mitigation was essential.

The Chief Finance Officer highlighted the significant connections with the Report and the Angus IJB Strategic Financial Plan 2020/21-2022/23 (Report IJB 82/19), which captured the scale of the challenges ahead. He also referred to Section 6 of the Report in terms of Demand Mitigation and Financial Management and highlighted that the Strategic Financial Plan for 2020/21-2022/23 was still under development. He indicated that the Plan had been shared with NHS Tayside and Angus Council and that discussions were ongoing.

Following discussion and questions from some members, the Head of Community Health and Care Services - South and the Principal Planning Officer provided an informative update.

The Chair emphasised the importance that the Angus community were kept fully informed and updated. The Chief Officer thereafter confirmed that future community engagement events were to be held in each locality in 2020 to focus on improvements in health and wellbeing.

The Integration Joint Board agreed:-

- (i) to note the content of the Report;
- (ii) to note the past and estimated future increased demand for services, the impact on the capacity and cost base;

- (iii) to approve consideration of the information provided as part of the strategic financial plan; and
- (iv) to approve the work being undertaken to try to manage demand and the increase in cost.

## **6. FINANCE REPORT**

With reference to Article 6 of the minute of meeting of this Board of 30 October 2019, there was submitted Report No IJB 78/19 by the Chief Finance Officer providing an update to the Board regarding the financial position of Angus Integration Joint Board including the financial projections for 2019/2020 based on financial information at October, and updates in terms of reserves and financial risks.

Appendix 1 to the Report detailed the projected financial position for 2019/20. This showed that the overall projected financial position for Angus IJB for year to March 2020 was for an underspend of £3.5m. This was after Physical Disability, Prescribing and Hosted Services overspends had been offset by Community Health and other Adult Services underspends.

The Report indicated that all information remained subject to multiple risks, particularly refinements to Prescribing, Free Personal Care Act, Carers Act and demographic growth and income level projections. The IJB's projected 2019/20 year end position would be reflected in future iterations of the IJB's Strategic Financial Plan. Currently and noting these risks, the IJB was forecasting a year end underspend so the impact of the IJB's financial position for both Angus Council and NHS Tayside would be neutral. As outlined in the Integration Scheme, the IJB would initially retain any projected year end underspend within IJB reserves. Appendix 3 to the Report described in detail the IJB's reserves position.

Appendix 2 set out ongoing and emerging financial risks for the IJB. The risk register included more detail than was held at an IJB level for Angus IJB's financial risks. Many of those risks were IJB wide risks including examples such as future funding levels and the risks regarding delivery of savings.

In terms of budget settlements, as previously noted the IJB had a clear working budget settlement with NHS Tayside for 2019/20, however there were a small number of residual issues that had not been possible or practical to resolve during the 2019/20 budget setting process. This included the lack of progress in developing the Large Hospital Set Aside budget and also in terms of devolving historic Complex Care resources to the IJB. There were concerns also regarding the adjustments made to Prescribing budgets and allocation of resources for Prescribing across Tayside.

Despite these concerns, given the IJB's position in terms of financial planning and an approaching round of further budget discussions it was now proposed that the 2019/20 NHS Tayside working budget be adopted as the overall IJB's formal budget for 2019/20.

Discussions with both partners would soon move into a formal phase in terms of the budget settlement for 2020/21 and it was anticipated that as per previous years, these would be led by the IJB Chief Officer and Chief Finance Officer with proposals being brought for consideration to the next IJB meeting in February 2020.

In summary the main financial reporting issues in the Report were set out in Section 3, 4 and 5 of the Report.

The overall financial position of the IJB had a material impact on the way Angus IJB provided services in future. By making ongoing progress with delivery of efficiencies and with cost reduction programmes alongside service redesign and modernisation, the IJB would be most able to deliver the services it required to deliver to the local population on a sustainable basis.

The Chief Finance Officer provided a brief overview of the Report, in particular highlighting that discussions were ongoing in terms of the budget settlement with NHS Tayside and Angus

Council and that he would continue these discussions with partners during January and February 2020.

Following an observation from the Vice Chair relating to the general reserves position and future planning shortfalls, the Chief Finance Officer indicated that there were proposals to increase reserves from 2% to 3% to address the shortfalls beyond 2020/21. He advised that an update in terms of the reserves position would be brought to the next IJB in February 2020.

The Consultant Gastroenterologist enquired whether the financial position of services was effected by staffing issues. In response, the Chief Finance Officer outlined and provided an update to the ongoing related workforce and recruitment issues. The Head of Community Health and Social Care - South also highlighted that there was a constant cycle of movement in core care areas.

The Chair thereafter highlighted that every opportunity in terms of staff recruitment should be explored. The Head of Integrated Mental Health Services advised that at recent school careers fayres', that some parents had been recruited into the health and social care sector.

The Integration Joint Board agreed:-

- (i) to note the overall projected financial position of Angus IJB for 2019/20;
- (ii) to note the update regarding IJB reserves;
- (iii) to note the risks documented in the Financial Risk Assessment; and
- (iv) to adopt the IJB's working Budget Settlement with NHS Tayside as the formal Budget Settlement for 2019/20 noting the caveats set out at Section 8 of the Report.

## **7. POLICY ON CHARGES APPLYING TO NON-RESIDENTIAL SOCIAL CARE SERVICES**

There was submitted Report No IJB 79/19 by the Chief Officer to consider recommending to Angus Council that it adopted two policies in relation to charges applying to non-residential social care services.

Councillor Bell raised that the COSLA guidance indicated that consideration should be given to consultation in formulation of policy and also that there was no evidence of an equalities impact assessment being completed. In terms of consultation, the Head of Community Health and Care Service - South indicated that the COSLA guidance which referred to consultation being a pre-requisite for formulation of policy had not been addressed within the Report.

The Service User Representative highlighted his concerns in terms of a number of areas of the report and requested that this be revised to ensure that the report was more coherent and transparent.

It was also highlighted that Appendix 5 to the Report, relating to disregarded income/benefits, that Universal Credit was not listed and that the Housing Benefit position should be reviewed.

The Integration Joint Board agreed that the Report be deferred to allow a number of matters to be addressed and thereafter brought back for consideration to the next IJB meeting in February 2020.

## **8. DRAFT STRATEGY FOR CARERS**

There was submitted Report No IJB 80/19 by the Chief Officer providing the draft Carers Strategy which had been designed to determine the Angus approach to supporting carers, building on the principles of "Equal Partners in Care". The approach reflected the priorities in the Strategic Commissioning Plan 2019-22, and the spirit and requirements of the Carers Act.

The Report indicated that the implementation of the Carers (Scotland) Act 2016 had been progressed through the Angus Carers Strategic Partnership Group, in consultation with key stakeholders. This had now been assimilated into a Carers Strategy and Improvement Plan. The key milestones achieved in 2018/19 and further development targets were detailed in Section 2 of the Report.

Appendix 1 to the Report outlined the draft Strategy. A key objective of the Strategic was to increase carer identification in Angus. Not all carers would require formal support but it was recognised that preventative input at an early stage would mitigate the risk of a carer coming to crisis. By supporting carers to identify themselves before the role adversely impacted on their health and wellbeing the partnership could better sustain them in their role, if they were willing and able to continue in it. At present about 1800 carers (around 9% of the carer population) were receiving support from Adult Services and Angus Carers Centre. By 2022 the aim was to be supporting around 3,180, or 16% carers, in line with the expectations of the Carers Act Financial Memorandum.

The draft Carers Strategy 2019-2022 and the Improvement Plan had been built on the Angus Carer Strategy 2013-2016 and the Strategic Outcome Plan 2016-2019, and reflected feedback from carers and other stakeholders gathered through the Carers Strategic Planning Group.

The Angus Carers Centre was the Partnership's main strategic partner in delivering the Angus Carers Strategy and in particular in supporting carers requiring relatively low-level/preventative support. A grant specification and funding for the Carers Centre had been negotiated which would support the Carers Centre to undertake preventative work with carers for the period of the Carers Strategy. The funding formulae was designed to provide the Carers Centre with a secure foundation for delivering carer support with the facility to flex a proportion of funding to reflect emerging demand.

The Programme Manager, Help to Live at Home (HTLH) provided a detailed overview in terms of consultation undertaken to create the Angus Carer Strategy 2019/20 highlighting that considerable consultation had been undertaken with carers. He indicated that the Strategy was more advanced than many other local authority areas in Scotland as the majority of the requirements under the Carers (Scotland) Act 2016 were now in place. Without an effective strategy and action plan there was a risk that carers would not be supported and treated as equal partners in care and by failing to support carers greater demand would be placed on services.

Councillor Bell highlighted the significant and valuable contribution that carers provided to the Partnership and that carers should be recognised and valued as equal partners in care.

The Carers Representative commended the work of the Programme Manager and for also providing many iterations of the Strategy including the improvement plan

The Chair emphasised the demanding roles undertaken by carers and expressed that their contributions to the Angus community was recognised and greatly valued. Carers should be supported to manage their role and be respected as equal partners in care. She thereafter thanked the Head of Community Health and Care Services - South, the Programme Manager and the Carers Representative for their involvement. She also commended the work of Angus Carers Centre and the dedication of their Chief Executive Officer, Alison Myles.

The Integration Joint Board agreed:-

- (i) to note the content of the draft strategy document;
- (ii) to approve the content of the draft strategy and the publication of the final version;  
and
- (iii) to request a progress report at six monthly intervals for the first 18 months on the implementation of the strategy.

## 9. LEARNING DISABILITY PRIORITY IMPROVEMENTS

With reference to Article 13 of the minute of meeting of this Board of 26 June 2019, there was submitted Report No IJB 81/19 by the Chief Officer providing an update to the Integration Joint Board (IJB) on the current position in relation to the implementation of Learning Disability priority improvements.

The Report indicated that the update was intended to address current challenges faced by the service and aimed to implement efficiency and sustainability actions in response to inflationary and demographic changes and capacity demands, thus delivering sustainable services into the future within available resources.

The Report referred to the current Learning Disability service, which included an increasing demand for autism service provision. The needs of many adults with autism were being delivered from within the Learning Disabilities services, but this was currently being reviewed by the Transitions Group, which was a joint group between the Angus Health and Social Care Partnership and Angus Council, established in 2019 which aimed to promote joint working focussed on improvements to transition processes, systems and pathways.

Due to current and anticipated demographic demand and sustainability pressures, further improvement work was required to ensure that the service was delivered as efficiently as possible, enabling resources to be directed to the areas of most urgent need and addressing current and future service delivery requirements. Some of the main pressures outlined in Section 3 of the Report were Autism, Support and Care, Personal Care, Ageing Carers and High and Low Cost Packages

Work had commenced to research the use of Technology Enabled Care solutions, in identifying good practice models that enabled individuals to become more independent, subsequently requiring less staff support. Costs of any equipment and potential impact of equipment on staffing resources was currently being explored to identify any potential efficiencies. Future development proposals to deliver technology enabled care would require the Integration Joint Board to support the expansion of future technology enabled care models within learning disability services.

The plan was now entering the second phase, and it was necessary to refresh and create a revised improvement plan which reflected future priorities.

The Principal Officer provided an overview of the Report highlighting the increased demand for autism service provision and the challenges in managing to care for both individuals who had autism but no learning disability and for individuals who had autism and a learning disability. She indicated that in year two of the three year programme, more innovative local solutions were being identified that would better meet the needs of the individual and was an example of cost mitigation where newly emerging assessed needs were being met in a more efficient and person centred way. The review of overnight support had concluded and as a result alternative options for provision of support had been identified.

She indicated that considerable improvements were being taken forward, some of which were ahead of schedule and confirmed that an update report would be brought to the IJB in June 2020.

The Chief Officer indicated that in addition to the increase in adults with learning disability and/or autism and adults with autism, the statistics in relation to children and young people being diagnosed with autism continued to accelerate and acknowledged that there required to be further developments to provide reassurances and support to meet the needs and demands of the service.

She also highlighted that there was insufficient information contained within the Report in terms of recommendation (iv) to approve the application for eligibility criteria to existing packages, and requested that recommendation (iv) be deleted from the Report.

The Carers Representative requested that carers aged 65 years and over and who provided unpaid care for individuals, be included within future statistical information, given that carers also may no longer be able to provide unpaid care.

Following a question from the Director of Public Health, the Principal Officer confirmed that the main issue originally highlighted in the improvement programme was relating to health inequalities. The Service Leader referred to "The Keys to Life" Strategy, and that health equalities were strongly advocated for people with learning disabilities. In relation to the four strategic outcomes contained within the Strategy, she highlighted that there were over 50 individuals in Angus over 65 living with a long term condition who lived independently in the community and not in a care setting.

Also raised was the ongoing funding issues associated with complex/shared care packages with NHS Tayside that still required to be resolved. The issues remained unresolved notwithstanding the IJB being in existence for the last four years. It was recommended that the Chair of the Board write to NHS Tayside requesting a resolution.

The Integration Joint Board agreed:-

- (i) to note the progress made since the last update in June 2019, the current issues and how these were being addressed;
- (ii) to approve the revised financial assumptions from the improvement programme and to consolidate these into the IJB's Strategic Financial Plan;
- (iii) to approve the expansion of future technology enabled care models within learning disability services;
- (iv) that the Chair of the Integration Joint Board would write to NHS Tayside requesting that the funding issues associated with complex/shared care packages with NHS Tayside be resolved; and
- (v) to request further progress reports on a six monthly basis.

#### **10. ANGUS IJB STRATEGIC FINANCIAL PLAN 2020/21-2022/23 – UPDATE**

With reference to Article 7 of the minute of meeting of this Board of 24 April 2019, there was submitted Report No IJB 82/19 by the Chief Finance Officer providing a further update regarding the developing Angus IJB Strategic Financial Plan for the period 2020/21 to 2022/23.

The Report indicated that in April 2019, Angus IJB shared its most recent Strategic Financial Plan covering the period 2019/20 to 2021/22 (Report IJB21/19) refers. The Report set out a series of positions and assumptions regarding funding uplifts, inflationary, demographic and legal/contractual pressures and a series of planned interventions. Since the April version of the plan, further clarity had become available regarding budgets for 2019/20, the IJB had further information regarding its current cost base, decisions had been taken regarding Minor Injury Services and Care Homes and clearer assumptions could now be made regarding future year funding assumptions. The revised Plan was intended to be consistent with the IJB's Strategic Commissioning Plan as at April 2019.

The Plan set out a series of sections which covered Current Financial Performance; Funding assumptions; Cost pressures – including inflationary, demographic, legal/contractual and other pressures; Planned Interventions and Hosted Services, Prescribing, Family Health Services and Large Hospital Set Aside.

In terms of the current financial performance, it was important to note that the IJB's Strategic Financial Plan for 2020/21 and beyond was being constructed during a period when the IJB was not overspending. This was not the same environment as was being faced by a number of other IJBs. It also meant that the IJB may have reserves at the start of 2020/21 that could be used to support the financial plan on a non-recurring basis only, however this did not reduce



the urgency for resolving any recurring shortfalls. The IJB's positive financial performance in 2019/20 had been influenced by a series of factors which were outlined in Section 3.2 of the Report.

Section 6 of the Report provided a detailed update regarding existing, revised and new planned interventions which were required as a response to the shortfalls within the IJB's Strategic Financial Plan. Whilst the IJB had a more positive financial outturn than some other IJBs' in Scotland in both 2018/19 and 2019/20, the long term financial expectations of the IJB were of continued financial constraints and challenge.

The Report set out the 2019/20 budget plan, also updated the Strategic Financial Plan in a way that it was intended to be consistent with the updated Strategic Commissioning Plan noting that the Strategic Commissioning Plan influenced the Strategic Financial Plan.

Whilst the IJB was presenting a balanced financial plan for 2020/21 (after an assumed reliance in part of the general reserves of £3.4m), the IJB did not have a balanced financial plan for the duration of the Strategic Commissioning Plan. The IJB needed to continue to develop the intentions within the Strategic Commissioning Plan to allow development of overall plans that would be deliverable within long term available funds. This was a key issue that the IJB would need to address in the near future. A stepped change may be needed in each of the pace of decision making, the implementation of plans and the tolerance thresholds of the IJB to potential changes that, initially at least, were expected to be as consistent with the IJB's Strategic Plan as was realistically possible. Beyond that the IJB's Strategic Commissioning Plan may require to be revisited.

The summary outlined in the table in Section 8 of the Report detailed the IJB's general reserves of c£3.4m being consumed mid-way through 2021/22 to offset financial planning shortfalls. The IJB currently holds contingency reserves of 2% of turnover (i.e. £3.4m). As part of further planning considerations, and noting the risks and shortfalls outlined in Section 8 and 9 of the Report, the IJB may consider increasing its contingency reserve level to, for example, c3% of turnover. This would allow the IJB to move close to a balanced financial plan for cumulative period to March 2022 (end of IJB's second Strategic Plan) but would not in any way address the underlying shortfalls outlined in the Report.

The Chief Finance Officer referred to the key areas of the Report, particularly in terms of the budget settlement position for 2020/21 and advised that budget figures for 2020/21 had not yet been announced. He also highlighted that there still remained a number of unresolved budget issues with NHS Tayside.

The Integration Joint Board agreed:-

- (i) to note the new IJB Strategic Financial Plan for 2020/21 to 2022/23 and request further updates to the February and April 2020 IJB Board meetings;
- (ii) to recognise the risks associated with the overall strategic financial plan; and
- (iii) to note the forecast financial shortfalls over the duration of the 2020/21 to 2022/23 Strategic Financial Plan and to request the Chief Officer to bring forward further plans including a more detailed consideration of all items listed in Section 8.2 of the Report to address these shortfalls, in line with the Strategic Plan, to the February and April 2020 IJB Board meetings.

## **11. PRESCRIBING MANAGEMENT UPDATE**

With reference to Article 6 of the minute of meeting of this Board of 26 June 2019, there was submitted Report No IJB 83/19 by the Chief Officer providing an update to the Board on prescribing management in Angus.

The Report indicated that historically Family Health Services (FHS) Prescribing had presented a financial challenge within Angus. The drivers behind prescribing spend were multifactorial

and complex with recent chronic supply issues playing a large part in variations in spend. By developing an improved understanding of the reasons for the prescribing position in conjunction with a multidisciplinary approach with strong clinical leadership and buy in, a steady and sustainable improvement was emerging.

Work continued in line with the prescribing management plan, outlined in Appendix 1 to the Report, which was approved by the IJB in February 2019.

In terms of progress since the last report, the Angus cost per waited patient continued to fall with the most recent data showing that Angus was now running c 6-9% above the national average compared to the previous spend of c8-10%.

Angus prescribing leads were currently contributing to the Transforming Tayside Programme which aimed to support the redesign of services across Tayside, including prescribing. A draft prescribing strategy was in development which would continue to support the transformation in prescribing across Tayside. The draft strategy was agreed by the NHS Tayside Prescribing Management Group and shared with the Patient and Public Forum for Medicines (PPFM) with further consultation being undertaken with a view to a final version being approved in March 2020.

Two priority areas identified for focusing investment through the Transforming Tayside programme were chronic pain service improvement and the prescribing of non-medicines.

Chronic pain plans were in place to support improved options for people experiencing pain with a proposal to redirect resources currently committed to medications through reduced reliance on those medicines. An evidence based pathway for non-pharmalogical approach to pain which was community facing was about to be introduced across Tayside. Through a variety of initiatives, it was planned that there would be a reduction in prescribing of gabapentinoids and opiates towards the Scottish average. Whilst much of the work was currently funded by short term income streams, the intention was to redirect resources currently committed to medications towards providing sustainable investment in alternative evidence based models of care including social prescribing.

The Clinical Director provided an overview of the Report, in particular highlighting the specific work undertaken in terms of chronic pain plans and the intention to invest committed prescribing resources to provide sustained investment in alternative models of care including social prescribing. She also referred to the Prescribing of Non-Medicines Advisory Group (PONMAG) chaired by Dr Scott Jamieson, which was currently working through the extensive work plan which aimed to seek assurance of spend on non-medicines across the whole system.

The Service User Representative advised he had attended an NHS Tayside hosted event in partnership with the Patient and Public Forum for Medicines as the representative for service users. He indicated that the event was informative and well attended and that personally he had gained considerable benefit from attending.

Councillor Bell highlighted the significant achievements of the recently completed Internal Audit of Prescribing Management. She referred to the benefits of social prescribing and the opportunity that by empowering individuals to improve their own health and wellbeing would enable a shift away from a "pill for every ill" culture.

The Integration Joint Board agreed:-

- (i) to note the content of the Report and the ongoing measures being taken to ensure efficient and effective prescribing within Angus;
- (ii) to request a further update to be provided to the Integration Joint Board in June 2020; and
- (iii) to endorse the use of prescribing savings to provide sustainable investment in evidence-based models of care including social prescribing.

**12. MID YEAR STRATEGIC PROGRESS AND PERFORMANCE REPORT**

With reference to Article 8 of the minute of meeting of this Board of 26 June 2019, there was submitted Report No IJB 84/19 by the Chief Officer providing an update to the Board on the performance of the partnership in relation to key measures.

The 2019/20 mid year performance report aimed to demonstrate the strategic level against the ambitions set out in the Strategic Commissioning Plan 2019/22 which included some national core indicators indicating progress against the national outcomes as well as local measures.

The Head of Community Health and Care Services - North advised that the format of the Report, in consultation with the Vice Chair, had been reviewed.

The Head of Community Health and Care Services – North and the Consultant Gastroenterologist highlighted the key areas of the Report relating to falls admissions; issues relating to data coding; decline in the uptake of telecare equipment post introduction of charges; admission rates within 28 days (N14); decline in complex delay cases and delayed discharges. It was also reported that the longest hospital stay was within the Mental Health Services.

Having heard from Councillor Bell and the Service User Representative and in response having heard from the Principal Planning Officer who provided an update, the Integration Joint Board agreed to approve the Mid-Year Performance Report for Angus 2018/19 as outlined in Appendix 1 to the Report.

**13. EXCLUSION OF PUBLIC AND PRESS**

The Angus Health and Social Care Integration Joint Board agreed that the public and press be excluded from the meeting during consideration of the following item so as to avoid the possible disclosure of information which was exempt in terms of the Local Government (Scotland) Act 1973 Part 1, Schedule 7A, Paragraph 4.

**14. CARE ABOUT ANGUS (CAA)**

With reference to Article 14 of the minute of meeting of this Board of 26 June 2019, there was submitted Report No IJB 85/19 by the Chief Officer providing an update in terms of Care About Angus (CAA).

The Head of Community Health and Care Services – South provided an overview of the Report and following a question from Councillor Bell, and having heard from the Principal Planning Officer, the Integration Joint Board agreed to approve the recommendations as detailed in the Report.

**15. DATE OF NEXT MEETING**

The Integration Joint Board noted that the next meeting would take place on Wednesday 26 February 2020 at 2.00pm in the Town and County Hall, Forfar.