

AGENDA ITEM NO 3(a)

MINUTE of MEETING of the **ANGUS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD** held remotely on Wednesday 9 December 2020 at 2.00pm.

Present: Voting Members of Integration Joint Board

EMMA-JANE WELLS, Non-Executive Board Member, NHS Tayside – Chair
Councillor LOIS SPEED, Angus Council - Vice Chair
Councillor JULIE BELL, Angus Council
Councillor BOB MYLES, Angus Council
GRAEME MARTIN, Non-Executive Board Member, NHS Tayside
HUGH ROBERTSON, 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
CHRIS BOYLE, Staff Representative, Angus Council
ELAINE HENRY, Registered Medical Practitioner
ANDREW JACK, Service User Representative
KATHRYN LINDSAY, Chief Social Work Officer
HAYLEY MEARNS, Third Sector Representative (Proxy on behalf of Gary Malone)
KAREN FLETCHER, Associate Nurse Director (Proxy on behalf of Charlie Sinclair)
GAIL SMITH, Interim Chief Officer

Advisory Officers

GEORGE BOWIE, Head of Community Health and Care Services, South, AHSCP
JILLIAN GALLOWAY, Interim Head of Community Health and Care Services, North, AHSCP
DAVID THOMPSON Manager, Legal Team 1, Angus Council
FIONA MACDONALD, Legal Team 1, Angus Council
BILL TROUP, Head of Integrated Mental Health Services
ANDREW RADLEY, (Proxy on behalf of Dr Emma Fletcher, Director of Public Health)

EMMA-JANE WELLS, in the Chair.

Prior to the commencement of the meeting, the Chair advised members that this was Hugh Robertson's last meeting of the IJB and on behalf of the Board, paid tribute to Hugh for his dedication and commitment he had shown to the Board, which he had been a big part of since the beginning. She advised that Hugh had held the office of vice chair in the 2015 shadow year then was appointed Chair in October 2016 and latterly was vice chair in October 2018. She wished him well for the future and thanked him for his energy and devotion he had given to the Board over the many years and how he had helped to provide a better and stronger footing for all those who follow him.

Hugh responded by thanking David Thompson and Karen Maillie for all their help and advice they had provided to him and Councillor Lois Speed for supporting him in her capacity as both chair and vice chair. He paid tribute to the late Glennis Middleton who was instrumental in establishing the tone of the meetings and the positive relationships early on. He also thanked Gail Smith, Interim Chief Officer and her full team for their passion and commitment in carrying out their roles which in turn improves the lives and health outcomes for the people of Angus.

Hugh concluded by thanking all members of the Board for their commitment and dedication and wished them well for the future as they took forward the work of the Angus Health and Social Care Partnership Board.

1. APOLOGIES

Apologies for absence were intimated on behalf of Richard Humble, GP Representative, Gary Malone, Third Sector Representative; and Charlie Sinclair, Associate Nurse Director; Barbara Tucker, Staff Representative and Dr Emma Fletcher, Director of Public Health; all NHS Tayside.

2. DECLARATIONS OF INTEREST

Councillor Julie Bell declared a non-financial interest in Item 9 (Report No IJB 84/20) in that she was a COSLA nominated non-executive Director on the Board of Public Health Scotland and had an exclusion. She indicated that she would participate in any discussion and voting on this item.

Peter Burke declared a non-financial interest in Item 9 (Report No IJB 84/20) in that he was an unpaid carer of a service user of a resource centre. He indicated that he would participate in any discussion and voting on this item.

3. MINUTES INCLUDING ACTION LOG

(a) PREVIOUS MEETING

It was noted that the minute of meeting of the Angus Health and Social Care Integration Joint Board of 28 October 2020 would be submitted for approval, to the next meeting of the Board on 24 February 2021. The decision/outcomes of the IJB of 28 October 2020 were reported within the action log at agenda item 3 (b).

(b) ACTION LOG

The action log of the Angus Health and Social Care Integration Joint Board of 28 October 2020 was submitted and noted. The Chair highlighted the progress with regard to the actions that had been made which were all either complete or on target and commended the Interim Chief Officer and her team for all their hard work in particularly challenging times.

The Integration Joint Board agreed that agenda item 4 (Mental Health and Wellbeing Strategy Draft) be deferred until later on in the meeting to allow The Director of Mental Health, NHS Tayside adequate time to attend the meeting as she was currently presenting at Perth & Kinross integration Joint Board.

4. STRATEGIC PLANNING PROGRESS UPDATE

With reference to Article 4 of the minute of meeting of this Board of 11 December 2019, there was submitted Report No IJB 79/20 by the Interim Chief Officer which provided a strategic planning update about the progress in a range of change programmes as part of the Angus Care Model.

The Report indicated that the ability to deliver on the savings elements of change programmes had been compromised by the pandemic and the long-term effect of COVID-19 on most services was being given active consideration as part of the recovery work.

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

The Interim Head of Community Health and Care Services – North advised that in terms of the stroke rehabilitation pathway they were working closely with the Dundee Health and Social Care partnership to see what was required to support people following a stroke at home and an updated paper would be brought forward.

Discussion then took place on how Angus HSCP were working closely with secondary care colleagues to shape emergency and urgent care services in Angus and how individuals with a minor injury would be supported in the future.

Councillor Bell raised a question regarding the welfare of the workforce in terms of resilience and asked if appropriate support had been put in place to support tired and exhausted staff members. It was reported that staff members were being supported and specific wellbeing support was in place. Staff had also been actively encouraged to take their annual leave to avoid “burnout”.

The Interim Chief Officer paid tribute to the whole workforce including the management team for their incredible resilience, hard work, compassion and tolerance they had shown and how they had and were continuing to do a tremendous job in very challenging times.

The Integration Joint Board agreed: -

- (i) to note the content of the strategic planning update;
- (ii) to progress financial planning associated with the Carers Act by February 2021; and
- (iii) to request a progress report on the Carers Act at the February 2021 IJB meeting.

5. FINANCE REPORT – 2020/21

With reference to Article 6 of the minute of meeting of this Board of 28 October 2020, there was submitted Report No IJB 80/20 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 2020/2021 based on financial information at October 2020, and update in terms of reserves, financial planning and financial risks and governance issues.

It was noted that the information contained within the report reflected estimates for the whole of 2020/21 and consequently, given the stage in the financial year and uncertainty re impact of COVID-19 over the coming months, further reviews of projections would be undertaken which may lead to future adjustments in information.

Attached as Appendix 1 to the Report was the Integration Joint Board’s detailed projected financial position for 2020/21. This showed that the overall projected financial position for Angus IJB for year to March 2021 was for a breakeven position, after offsetting the cost of COVID-19.

The report indicated that it was important to note that should the IJB report a year end overspend then, in the first instance IJB reserves would require to be utilised to address any overspend. Beyond that there could be an impact on the IJB’s Partners. The use of significant IJB reserves in 2020/21 would undermine the longer term financial planning of the Partnership and would require a series of financial planning responses beyond those already in progress. There would be a similar requirement if the longer term financial and resource impacts of COVID-19 were not matched by an equivalent adjustment to funding available to support services.

Appendix 2 of the Report set out ongoing and emerging financial risks for the IJB. The risk register included more detail than was reflected in the associated corporate risk documentation. Many of those risks were IJB wide risks including examples such as future funding levels and the risks regarding future financial planning.

In summary, the main financial reporting issues in the Report were set out in Sections 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 managing the financial impacts of COVID-19, delivery of efficiencies 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 a number of points within the Report.

The Integration Joint Board agreed: -

- (i) to note the overall projected financial position of Angus IJB for 2020/21;
- (ii) to note the separate report capturing the Large Hospital Set Aside component of the settlement with NHS Tayside which provided a more comprehensive review;
- (iii) to note the separate detailed report on the Strategic Financial Plan's Planned Interventions progress;
- (iv) to note the risks documented in the Financial Risk Assessment and specifically noted the additional Financial Governance appendix; and
- (v) to note the update regarding reserves set out in Appendix 3 of the Report.

6. LARGE HOSPITAL SET ASIDE

With reference to Article 9 of the minute of meeting of this Board of 26 August 2020, there was submitted Report No IJB 81/20 by the Interim Chief Officer regarding the current position with regard to the term Large Hospital Set Aside (LHSA) which was introduced as part of the Scottish Government's framework for Health and Social Care Integration and Integration Joint Boards.

The Chief Finance Officer provided a brief overview of the Report which covered the position regarding the current LHSA resources, mental health services, future developments and proposals and it was noted that the opportunity to move more care closer to the community on a planned basis was yet to be fully developed. Information regarding the current position was detailed further in Appendix 1 to the Report which indicated that there were some unresolved issues and the IJB required to develop a view as to if and how to progress a resolution regarding these.

The Clinical Director thereafter addressed the Board and advised that the developments were very complex but achievable if the Board continued to build on the good relationships that currently existed across the primary and secondary care interface and the proposals were about supporting clinical leadership to transform care pathways to achieve the best outcomes for individuals by aligning the workforce and infrastructure to suit them.

She advised that the main focus was individuals being able to access care in the community and specialist advice that was not dependent on a hospital bed or visiting an outpatient clinic and co-ordinating it across the whole system would be a huge opportunity and an enabler to do the right thing for the people of Tayside and empower local communities.

The Interim Head of Community Health and Care Services – North gave a brief overview of how the whole system approach had been very successful when dealing with Covid-19 and there had been many benefits from this approach. She looked forward to the opportunity to work towards a shared vision which could bring various opportunities.

A number of members expressed their interest in the proposals and were grateful to the team on their achievements so far. It was noted that patient representatives would be involved in future developments both on a Tayside and Angus level.

The Integration Joint Board agreed: -

- (i) to note the position and support the Interim Chief Officer and Chief Finance Officer in further discussions with NHS Tayside to progress an appropriate resource release from

Acute Services to Angus IJB to reflect changes in OBDs (Occupied Bed Days) to date which would, in turn, support the commensurate local investment in community resources;

- (ii) to note the position regarding Mental Health services and request the Interim Chief Officer and Chief Finance Officer to develop proposals for financially managing these resources with colleagues in NHS Tayside and neighbouring IJBs and report back to the February 2021 IJB; and
- (iii) that with regard to future developments, the Interim Chief Officer develop proposals with Acute Services and other key stakeholders, as described in sections 3.3 and 4.3 and report back to the IJB's April 2021 Board meeting.

7. ANGUS IJB STRATEGIC FINANCIAL PLAN UPDATE

With reference to Article 8 of the minute of meeting of this Board of 22 April 2020, there was submitted Report No IJB 82/20 by the Chief Finance Officer providing a further update regarding the developing Angus IJB Strategic Financial Plan for the period 2021/22 to 2023/24.

The Report indicated that as with the plan for 2020/21, the Report considered matters from a "business as usual" perspective (i.e. did not consider the premium costs of COVID-19 responses), but did to some extent reflect the refreshed strategic thinking resulting from COVID-19 experiences. The IJB continued to recognise it was not operating in a "normal" environment, but this developing plan still sought to address fundamental issues such as demographic pressures and funding constraints. While final plans would be presented to the IJB in April 2021, from the outset the Board would need to acknowledge that the short and long term impact of COVID-19 remained uncertain and would require the IJB to continue to revisit its strategic financial and commissioning plans.

The Report set out a preliminary view of the IJB's financial plan for 2021/22 to 2023/24 and captured information regarding current financial performance, funding assumptions, cost pressures and planned interventions.

It was noted that the IJB was fortunate in having reserves that could be called on to balance the plan in the short term. At April 2020, the IJB's contingency reserve was set at £4.5m (approximately 2.5% of turnover). This reflected the level of uncertainty previously foreseen. It was also noted that much of the possible longer term impacts of COVID-19 on the IJB were not addressed in the report.

The summary of the IJB's financial plan showed IJB's general reserves being consumed by the end of 2022/23. The contingency was shown factored into the table detailed in Section 10.1 but would not in any way address the underlying shortfalls outlined in Section 9 of the Report.

Whilst the IJB was presenting a balanced budget for 2021/22, but only after reliance on short term reserves, and then beyond there were significant shortfalls as seen in previous years. The position in 2021/22 was projected as being much weaker than 2019/20 and 2020/21 (excluding COVID-19) due to factors including increased demographic pressures, assumed inflationary funding being insufficient to meet inflationary pressures and an assumption that many of the service underspends seen in 2019/20 and 2020/21 would not re-appear to the same extent.

The Report updated the Strategic Financial plan in a way that was intended to be consistent with an updated Strategic Commissioning Plan, noting that the latter plan influenced the Strategic Financial Plan and extended financial planning a further year. It was noted that the report would be shared with both Angus Council and NHS Tayside and would be reflected in their respective financial planning.

With regard to section 8.3 of the Report, it was noted that it was proposed that an additional £100k per annum for 2 years had been included in the plans to ensure that the IJB had the capacity to deliver its operational, governance and strategic aspirations.

Discussion took place on the possibility of scenario planning being used to make the report a bit more meaningful and the Chief Finance Officer advised that this could be considered for the April Board.

The Integration Joint Board agreed: -

- (i) to note and support the content of the overall plan and note that it will be updated for April 2021;
- (ii) to request that the Interim Chief Officer streamline the oversight of approved planned interventions to ensure that the slippage evident since 2019 was addressed and existing planned interventions were delivered;
- (iii) to request that the Interim Chief Officer progress responses to the COVID-19 related issues set out in 8.3 and 8.4 of the Report;
- (iv) to progress specific pieces of work to refine assumptions and responses regarding the impact of demographics and investment in preventative approaches, financial planning associated with the Carers Act and proposals to assist with Demand Management;
- (v) that the Strategic Planning Group consider further options for change that would support the delivery of a balanced long term strategic financial plan in line with the IJB's Strategic Commissioning Plan; and
- (vi) that the Chief Finance Officer look at the possibility of providing scenario planning for the April Board.

8. PRESCRIBING MANAGEMENT

With reference to Article 12 of the minute of meeting of this Board of 24 June 2020, there was submitted Report No IJB 83/20 by the Interim Chief Officer providing an update on prescribing management in Angus.

The Report advised that prescribing governance continued through the Angus Prescribing Management Group, with good clinical engagement and buy-in. The annual work plan, attached as Appendix 1 to the Report, was now in place and was tracked and updated at each meeting. The plan was currently for noting and would be submitted to the IJB for approval on completion of the plan.

The Angus Pharmacy Lead provided an overview of the Report and reported that the prescribing costs were relatively stable despite the challenges with the pandemic and the Angus cost per weighted patient continued to fall. Previous spend within Angus had been running c5-8% above the national average and was managed down to 3-5% above national averages and was currently running at 3-6% above national averages however, it was noted that costs in 2020/21 may be slightly skewed by local COVID-19 impacts.

These costs had been achieved by implementing both a regional prescribing work plan in addition to a targeted local approach which had continued through the year despite the impact of COVID-19 maintaining clinical engagement and a multidisciplinary approach to medicines and non-medicines use.

The Tayside Prescribing Strategy for 2020-2023, which was appended as Appendix 2 to the Report had been launched and described a vision for prescribing. This strategy built on the work undertaken to transform care pathways to achieve the best outcomes for patients and Angus clinical leads had been key contributors to this important piece of work.

It was noted that the strategy focused on four key areas:

- Facilitate best practice with safe, high, quality prescribing choices
- Enable shared decision making with an informed, empowered patient
- Nurture innovation and enable change
- Ensure governance, systems and processes support quality prescribing

Councillor Speed raised a number of points in terms of catheter care and continence pathways and in response, the Clinical Director gave an update on the position and how certain issues would be taken forward once the pandemic was over.

The Integration Joint Board agreed: -

- (i) to note the content of the paper and the ongoing measures being taken to ensure efficient and effective prescribing within Angus;
- (ii) that a further update be provided to the Integration Joint Board in June 2021; and
- (iii) to note ongoing opportunities to progress the use of prescribing savings to support sustainable investment in evidence-based models of care.

9. COVID 19 UPDATE

With reference to Article 8 of the minute of meeting of this Board of 28 October 2020, there was submitted Report No IJB 84/20 by the Interim Chief Officer providing an update to the IJB on the Angus Health and Social Care Partnership response to the COVID-19 pandemic, focusing on the activity undertaken and challenges faced.

The Report indicated that the Angus HSCP Leadership Response team meetings which were attended by the Executive Management Group had been increased to twice weekly since 20 October 2020 and senior members of the team continued to contribute to NHS Tayside and Angus Council COVID 19 meetings.

The increasing number of COVID-19 positive cases in both the community and Ninewells Hospital had prompted a review of contingency planning for managing COVID-19 in Angus community hospitals and as of Monday 2 November 2020, Ward 2 Stracathro became temporarily non-operational and 10 (previously closed) side rooms in Isla unit in Whitehills were opened to admissions, the remaining patients and nursing staff in Ward 2 were transferred to Whitehills.

On 11 November 2020, both the Clova and Isla wards, Whitehills Hospital were temporarily closed to admissions due to the virus and following appropriate infection prevention and control precautions being put in place, the Isla ward opened on the 18 November and the Clova ward on the 24 November.

Following the announcement that Angus had been placed in Level 3 of the Scottish Government's coronavirus restrictions system, routine visiting had been suspended in community hospitals since 13 November 2020. Visiting could however continue in specific circumstances i.e. to support patients receiving end of life care or to support someone with a mental health issue such as dementia, a learning disability or autism where visitors not being present could cause the patient to be distressed.

With regard to the Test and Protect it was reported that in addition to Dundee and Perth testing facilities, mobile testing units would focus service provision in Angus at the Myre Car Park, Forfar and Bruce House, Arbroath. Drive through and walking access were available on 7 – 13 December and 21 – 27 December with additional dates to follow as required.

During this period of ongoing uncertainty, Angus HSCP continued to work in partnership to maintain essential services and to develop recovery and renewal plans. Angus HSCP remained flexible in their approach to respond to further external developments and to focus on the ongoing response to the pandemic.

The Interim Chief Officer provided an update on the Report highlighting the further challenges encountered since October 2020 and advised that as of Friday 11 December 2020, Angus would move from tier 3 down to tier 2 which was a welcome reduction however, precautions must continue to be taken to help avoid the spread. Since the Report had been written there had been good news on the vaccine situation, and she advised that the vaccines had arrived

on Monday 7 December 2020 in Tayside and vaccinations had commenced on Tuesday 8 December. This was a much welcomed and positive development.

The Head of Integrated Mental Health Services advised that the results of the pulse NHS staff survey, which had attracted a return of over 60%, had now been received regarding their personal happiness and he highlighted some positive feedback which had been received.

A number of Officers then gave updates on a variety of the activities undertaken since October 2020 and the general feeling was that they felt a bit more in control than in the earlier days of the pandemic and explained how working in collaboration with many services was proving beneficial in fighting this virus.

The Integration Joint Board agreed: -

- (i) to note the actions that have been advanced by the Angus Health and Social Care Partnership and key partners, in response to the COVID-19 pandemic, since the last COVID-19 update provided to the IJB on 28 October 2020; and
- (ii) to commend staff and key partners for their sustained effort and commitment as they continued to provide care to the people in Angus who relied on care and support, despite a number of challenges.

At this stage, the Chair welcomed Kate Bell, Director of Mental Health to the meeting.

10. MENTAL HEALTH AND WELL BEING STRATEGY DRAFT

With reference to Article 7 of the minute of meeting of this Board of 28 October 2020, there was submitted Joint Report No IJB 78/20 by the Interim Chief Officer and Director of Mental Health, NHS Tayside which provided a progress report toward the co-design and co-development of the Tayside Mental Health and Wellbeing Strategy.

The Report advised that the first draft strategy produced at the end of October 2020, outlined the scope, scale and content of the strategy and its development to date and had been shared with all key stakeholders who have co-created the strategy. A four-week period of further engagement had been undertaken with an iterative process of co-creation by those leading and involved in the strategy development. The first draft had also been published on the NHS Tayside website with a list of key questions and a feedback mechanism to the wider public who may not have been engaged in the process to date.

The Director of Mental Health, NHS Tayside addressed the members on the progress made in developing a Tayside Mental Health and Wellbeing Strategy and advised that the draft strategy was the culmination of six months work involving over a hundred participants who attended six separate workshops which were facilitated development sessions building each chapter of the strategy. Due to the pandemic these workshops had been held on-line and this had allowed more people the opportunity to take part in the development sessions.

It was noted that the next phases of the Strategy involved: -

- Draft for Endorsement and Approvals process – December 2020
- Strategy publication and launch January 2021
- Further period of Public Engagement January to March 2021

The Head of Integrated Mental Health Services advised that the Strategy set down bold and ambitious improvements and various questions were asked during which it was noted that the Board members did not have access to the most updated version of the final draft Strategy.

On the motion of the Chair seconded by Councillor Bell the Integration Joint Board agreed to defer consideration of this item to an adjourned Board which would take place by remote access on Monday 14 December 2020 at 3pm. The correct version of the draft Mental Health and Wellbeing Strategy would be sent to all members.

11. PERFORMANCE UPDATE

With reference to Article 13 of the minute of meeting of this Board of 24 June 2020, there was submitted Report No IJB 85/20 by the Interim Chief Officer updating the Integration Joint Board on the progress made towards delivering the outcomes of the national indicators and supporting the delivery of the strategic plan. The report demonstrated the performance against key performance indicators for Quarter 1 and Quarter 2 for 2020/2021 as detailed in Appendix 1 to the Report and described the impact of some of the improvements being made across the partnership and how progress was being made towards delivering the vision, strategic shifts and planned improved outcomes for the people of Angus.

The Report advised that the aim of the Angus Health and Social Care Partnership (AHSCP) Strategic Commissioning Plan 2019-22 was to progress approaches that supported individuals to live longer and healthier lives. This included having access to information and support within communities. The focus for Angus HSCP's was on health improvement and disease prevention including addressing health inequalities; building capacity within our communities; supporting carers and supporting the self-management of long-term conditions.

The Interim Head of Community Health and Care Services – North highlighted that performance remained good however, the impact of Covid-19 on the overall performance was still to be investigated and a report on the findings would be presented to a future Board. She advised that work was still on going in relation to supporting and increasing access to telecare services and other digital services that could provide support to individuals at home.

The Head of Community Health and Care Services – South gave a brief update regarding the increase in demand for personal care services at home following which a number of members made comment.

The Integration Joint Board agreed: -

- (i) to note the current performance within Angus HSCP for 2020/2021; and
- (ii) to note the work to progress further improvement where the targets have not been achieved.

12. REVIEW OF THE INTEGRATION JOINT BOARD'S GUIDE TO INFORMATION

There was submitted Report No IJB 86/20 by the Clinical Director seeking approval from the Board for the adoption of a revised Guide to information for the Board in compliance with its duties under section 23 of the Freedom of information (Scotland) Act 2002.

The Report advised the guide had been updated to ensure all data which was required to be freely available, was published on the Angus HSCP's website with a consistent approach, accessibility to the public would be improved in line with the requirements of the Information Commissioner and quality of information provided could be better assured.

A revised Guide to Information had now been produced following consultation within the Health and Social Care Partnership and was set out in Appendix 1 to the Report.

It was noted that the new guide was now consistent with the minimum standards expected by the Scottish Information Commissioner and committed the Board to publish a much wider range of information than it had hitherto. All the information which would be published under the new guide was information which was currently available to the public by means of a freedom of information request. By making it available proactively on the partnership's website it was anticipated that the volume of freedom of information requests received by the partnership or by Angus Council and NHS Tayside in relation to the partnership would be reduced.

The publication of an expanded range of information would serve to further demonstrate the Board's commitment to the principles of openness and transparency in the way it conducted its business and empowered the residents and communities of Angus to engage and contribute to the work of the partnership.

The Clinical Director addressed the Board and advised that there was a significant amount of work required to develop the partnership's website to collate and present the information set out in the guide in a way which was easy to access, navigate, and understand.

It was proposed that this would be carried out incrementally over the period to June 2021. This timescale has been selected in the light of the continuing demand on staff resources arising from the current pandemic and uncertainty as to how long those pressures would continue.

Having heard from the Carers Representative, the Clinical Director advised that she would endeavour to provide hard copies of the documents which could be made available for individuals through access offices and libraries.

The Integration Joint Board agreed: -

- (i) to approve the revised Guide to Information; and
- (ii) to approve the timescale for implementation of the guide.

13. DATE OF NEXT MEETING

The Integration Joint Board noted that the next meeting would take place on Wednesday 24 February 2021 at 2.00pm.