

Report

Grants Review Interim Report Edinburgh Integration Joint Board

18 May 2018



Executive Summary

1. The purpose of this report is to provide the Integration Joint Board with an update on the progress made to date in respect of the review of health and social care grant programmes. An earlier version of this report was presented to the Strategic Planning Group on 13 April 2017, where the recommendations were endorsed.

Recommendations

2. The Integration Joint Board is asked to:
 - i. note the progress made in taking forward the grants review
 - ii. note how the grants review dovetails with the outline strategic commissioning plans, the development of the strategic commissioning plans, and ultimately, the revised strategic plan
 - iii. recognise the challenges and risks inherent in carrying out the review
 - iv. endorse the approach taken.

Background

3. In November 2017, the Edinburgh Integration Joint Board agreed the scope, methodology and timescale for the review of health and social care grant programmes, based upon recommendations from the Strategic Planning Group. The Grants Review Steering Group was established as agreed by the Integration Joint Board and has been meeting regularly since December 2017.
4. The Strategic Planning Service Redesign and Innovation Manager chairs the Steering Group; membership includes the three third sector representatives from the Strategic Planning Group, a representative from the Edinburgh Affordable

Housing Partnership, the Health Promotion Manager from NHS Lothian, the Chief Finance Officer, a Locality Manager, representatives from the Council's Procurement and Communications Teams and the Health and Social Care Partnership Strategic Planning and Contracts Teams.

5. To date, the work of the Steering Group has focused on four main areas:
- analysis of current usage of grants
 - identification of priorities for future funding
 - principles to underpin the operation of future grants programmes
 - engagement with stakeholders

Main report

Analysis of current use of grants

6. Most of the grants within scope of the review are in two main programmes:
- the Health and Social Care main grant programme (£1,880,186) supports projects providing services to specific service user groups, i.e. older people, carers, people with disabilities, mental health issues, and/or addictions and people with blood borne viruses.
 - the Health Inequalities Grant Programme (£1,754,573) supports a number projects delivering activities against four strategic objectives:
 - enabling all adults to maximise their capabilities and have control over their lives
 - creating and developing healthy and sustainable places and communities
 - strengthening the role and impact of ill-health prevention by increasing preventative Interventions and improving take-up of treatment services
 - ensuring a healthy standard of living for all
7. Four grants for specific purposes (£755,963) are funded through a combination of Social Justice Fund/Integrated Care Fund and Social Care Fund:
- Health inequalities communication
 - Get up and Go
 - LOOPS Hospital Discharge Project

- Third sector prevention investment fund

8. The tables below provide breakdown of the current allocation of grants and an analysis of how they split across the four localities:

Current Health and Social Care Grant spend current allocation
<ul style="list-style-type: none"> • Addictions - £97,073 • Blood borne viruses - £252,843 • Disabilities - £183,815 • Mental health - £70,218 • Older people - £1,709,617 • Unpaid carers - £223,569 • Health improvement - £97,901 • Health inequalities - £1,755,686
Total £4,390,722

Current Health and Social Care Grant spend – locality and citywide	
North West	North East
<ul style="list-style-type: none"> • Health Inequalities - £520,082 • Older People - £264,867 • Carers - £25,000 	<ul style="list-style-type: none"> • Health Inequalities - £234,238 • Older People - £187,775 • Mental Health £38,800 • Addictions £22,175
Total £809,949	Total £482,988
South West	South East
<ul style="list-style-type: none"> • Health Inequalities - £495,198 • Older People - £164,403 	<ul style="list-style-type: none"> • Health Inequalities - £111,828 • Older People - £26,192 • Carers - £48,738 • Mental Health - £9,094
Total £659,601	Total £195,852
City Wide	
<ul style="list-style-type: none"> • Health Inequalities - £447,145 • Older People - £1,014,949 • Carers - £199,833 	<ul style="list-style-type: none"> • Mental Health - £41,418 • Additions - £256,843 • Disabilities - £133,815 • Ethnic Minority - £148,329
Total £2,242,332	

Identification of priorities for future funding

9. The Grants Review Steering Group has taken as a starting point the “focus on driving forward and contributing to whole systems change to deliver on the

priorities in the strategic plan of tackling inequalities and prevention and early intervention”, as set out in the scope of the review. The priorities from the Strategic Plan 2016-19 are detailed in Appendix 1 to this report. The group has also identified other work taking place that will either impact on or be impacted by the review, including:

- the outcomes identified in respect of health and wellbeing/social care in the Locality Improvement Plans
 - the development of the five outline strategic commissioning plans
 - the development of a new carers strategy during 2018/19
 - the expansion in social prescribing (in a variety of forms including community link working), which will generate increased demand for services and activities that people can be referred on to
 - other initiatives taking place through community planning or within the wider Council in relation to grant funding
10. Members of the Grants Review Group have met with some of the Locality Managers and with the strategic leads charged with taking forward the outline strategic commissioning plans. The purpose of these meetings was to discuss the possible future use of grants to progress the objectives emerging from the work on implementing the Locality Improvement Plans and outline strategic commissioning plans. The Steering Group has also been trying to identify whether there are core services that should be available in all localities that would be effective in tackling inequality and preventing poor outcomes in terms of health and wellbeing.
11. One key theme emerging from these discussions is that most health and social care expenditure is focused on people assessed as having ‘critical and substantial’ needs and the delivery of acute services. This often means that people with low or moderate needs cannot access support until their situation deteriorates and they meet the ‘critical and substantial’ criteria. There is therefore an emerging view that future grant funding should be focused on primary and secondary prevention to support needs that are not categorised as ‘critical or substantial’.
12. The tables in Appendix 2 summarise the relevant actions in the current Strategic Plan, the outcomes identified in the four locality plans and the emerging priorities from outline strategic commissioning plans. The Steering Group has used these documents to develop the following draft set of priorities as the basis for initial engagement with key stakeholders.
- i. Reducing social isolation
 - ii. Promoting healthy lifestyles, including physical activity and healthy eating

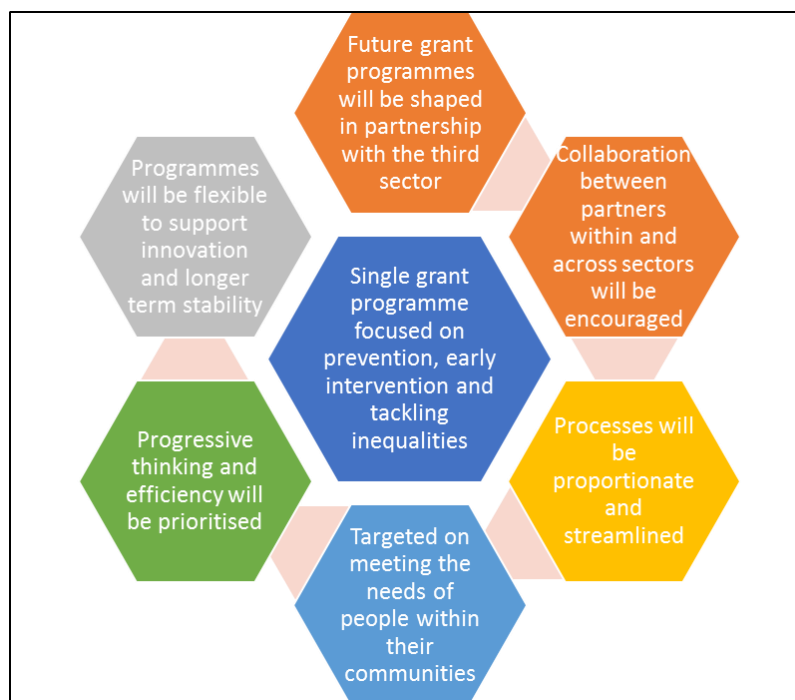
- iii. Mental wellbeing
- iv. Supported self-management of long-term conditions
- v. Information and advice – income maximisation – aligned with the overall development of advice services in Edinburgh
- vi. Reducing digital exclusion
- vii. Building strong, inclusive and resilient communities

The timing of the review is a potential challenge, as any new grants programme to commence from 1 April 2019 will need to be finalised so that applications can be made in September 2018. This is necessary to allow time for decisions to be made by the end of December 2018, in order that any current grant recipients who are not successful in their bids can meet the legal requirements in relation to the issuing of redundancy notices.

13. The locality improvement plans were published by the City of Edinburgh Council in December 2017, and these give some clarity regarding the priorities of local communities for services under the remit of the IJB, but for CEC-provided and managed services generally.
14. The extant EIJB Strategic Plan covers, as noted above, the 2016-19 period, and is due to be refreshed for April 2019. While the current plan is a comprehensive and coherent document, it does not provide implementation detail, nor was it intended to. This detail is crucial to ensure that the services the IJB commissions and influences are clear on what actions the IJB will take, and how it seeks to shape the various markets it engages with.
15. The Outline Strategic Commissioning Plans (OSCPs), agreed by the IJB in January and February 2018, give a clearer, more detailed starting point for this commissioning and influencing. These OSCP are useful reference points for the shaping of the grants programme going forward, and indeed the establishment of the reference boards to drive the next evolution of these plans, into full Strategic Commissioning Plans (SCPs) by December 2018, will provide the next level of detail and in turn will form the basis for an estimated 75-80% of the revised Strategic Plan.
16. The timescales noted in paragraph 12, above, do present a risk of poor alignment between the SCPs and the grants programme, but this is mitigated by the presence of the Reference Boards, and indeed that the detail of the SCPs should be clear, albeit not finalised, by the time final decisions on the grants programme need to be taken by the IJB.

Operation of future grant programmes

17. A sub-group of the Grants Review Steering Group led by the Chief Finance Officer has been considering how any future grants programme should operate to:
- streamline processes around application, award and evaluation of grants to ensure that these are proportionate
 - allow flexibility over the length of grant awards to allow both short-term funding for tests of change and longer-term funding for core services
 - prioritise both innovation and efficiency and encourage collaboration both within and across sectors
18. The Steering Group is keen to hear from current and potential grant recipients about the things they have found challenging in the way that the grants programmes operate currently and get their input in terms of how things could work better.
19. The diagram below illustrates the set of principles that the Steering Group has developed to form the basis of initial engagement with key stakeholders.



Engagement with stakeholders

20. Two engagement sessions for current and potential grant recipients took place on 26 April 2018 at Easter Road Stadium. The sessions ran for 2-2.5 hours each

and included both formal presentations and round table discussions. The purpose of the sessions was to:

- share information on the context in which the grants review is taking place, the overall vision in terms of the IJB priorities, draft priorities for future programmes and the areas for consideration in terms of the operation of future programmes
- gain the views and ideas of the participants on the information shared, the challenges and opportunities the review presents for the third sector, opportunities for improved joint working and options for delivering the 10% efficiency target.

21. To make the best possible use of the two sessions, a briefing pack was sent out to all registered participants ahead of the day to allow them to consider the proposals and how they may want to contribute to the session they attend. A copy of the pack is attached as Appendix 3.

22. In total 120 people attended the two sessions representing a range of organisations. Those attending the sessions were asked to provide feedback via a Survey Monkey questionnaire. Feedback received to date suggests that the sessions were well received, with participants indicating that they were well organised, offered transparent dialogue and were felt to be engaging and inclusive. 80% of those responding said the pre-event briefing and presentation on the day provided good information about the grant review process, 84% felt the engagement sessions helped participants to understand current thinking around the future grant programme, and almost three quarters agreed that they felt able to tell us everything we needed to know at the event.

23. Overall feedback from the sessions suggests that participants understood and saw an opportunity to change the landscape in a positive manner. There was interest in doing things differently although additional support was needed in understanding and identifying what opportunities really existed for the third sector and projects were realistic and queried whether there would be a transition period so organisations could develop realistic exit strategies.

24. Participants were invited to take part in round table discussions focused on the following issues:

- what, if anything, missing from the information presented to them
- what opportunities the review presented to their organisation
- how we could work together on whole system change to deliver efficient and effective outcomes.

25. In general participants were supportive of the overall direction of the proposed changes to the Health and Social Care Grant Programme, although concerns

still remained around a number of issues including security of current funding, whether the timescale for the review allowed sufficient time for full engagement and the development of appropriate exit strategies, clarity around opportunities for 'real' collaborative working, the treatment of core costs in a new grants programme and the impact this may have on sustainability, stability and leverage.

26. In terms of opportunities, organisations expressed interest in developing genuine collaborative working and designing a grants programme that offered longer term funding; which would bring with it the benefits of sustainability, better quality services and greater leverage in terms of external funding. Finally, in respect of working together on whole system change; better communication developed with trust, openness, and honesty was cited most frequently. There was also a recognition of the need to develop performance indicators around savings outcomes, to demonstrate the value of third sector services to the Integration Joint Board in reducing for statutory services.
27. A follow up session is being arranged for 7 June 2018 to respond to the feedback received through the earlier engagement sessions.

Next steps

28. The table below summarises the next steps in the delivery of the grants review.

Engagement events with partners	26 April 2018
Interim report to the Integration Joint Board	18 May 2018
Follow up engagement event	7 June 2018
Development of detailed proposals for new grants programme	June/July 2018
Second report to Integration Joint Board	August 2018

Key risks

29. There is a risk that coherence between the grants programme and the broader strategic direction of the IJB, represented in OSCP, SCP, and the revised strategic plan, is not all that it could be. Paragraphs 13-16, above, describe the risk mitigation strategy in place.

30. An inevitable consequence of reshaping any grants programme is that some existing recipients of grants will not be successful in their bids for future funding or will not receive the level of funding they require. A robust risk assessment will be undertaken, including an analysis of the impact on current grant recipients.

Financial implications

31. Whilst this report details the progress in delivering the review of the existing health and social care grant programmes with a value of £4.4m, there are no direct financial implications arising from the report.

Implications for Directions

32. The proposals in this report will contribute to the delivery of Direction EDI_2017/18_16 c), which directs the City of Edinburgh Council and NHS Lothian to “collaborate with partners to review existing grant programmes”.

Equalities implications

33. An Integrated Impact Assessment will be undertaken in respect of the grants review, which will identify any equalities implications.

Sustainability implications

34. An Integrated Impact Assessment will be undertaken in respect of the grants review, which will identify any sustainability implications.

Involving people

35. Engagement with citizens has taken place in respect of the priorities set out in the Strategic Plan around tackling inequalities, prevention and early intervention. Citizens have also been engaged in the development of the Locality Improvement Plans. Plans for further citizen engagement in respect of the grants review will be developed once proposals have been drawn up.

Impact on plans of other parties

36. The outcome of the grants review is likely to impact on the plans of third sector organisations and potentially other funders. Engagement with third sector organisations has begun and discussions will take place with other funding organisations, so that they are aware that a review of health and social care grants is taking place.

Background reading/references

37. [Review of grant programmes – report to the EIJB September 2017](#)
38. [Grants review, scope, methodology and timescales – report to the EIJB November 2017](#)

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Appendices

Appendix 1	Priorities in respect of tackling inequalities and prevention and early intervention
Appendix 2	Summary of priorities from other sources
Appendix 3	Briefing pack for engagement events held on 26 April 2018

Appendix 1

Related priorities from the Strategic Plan

Tackling inequalities

Tackling inequalities by working with our partners to address the root causes, as well as supporting those groups whose health is at greatest risk from current levels of inequality:

- supporting individuals to maximise their capabilities and have control over their lives
- creating healthy and sustainable communities that can resist the effects of inequality on health and wellbeing
- ensuring that core health and social care services are delivered in such a way as to reduce and not exacerbate health inequality
- recognising that some sections of the population need targeted support in order to address the cause and effect of inequalities

Prevention and early intervention

Preventing poor health and wellbeing outcomes by supporting and encouraging people to:

- achieve their full potential, stay resilient and take more responsibility for their own health and wellbeing;
- make choices that increase their chances of staying healthy for as long as possible
- utilising recovery and self-management approaches if they do experience ill health

Appendix 2
Summary of relevant priorities from other sources

Actions to deliver on the key priorities of tackling inequalities and prevention an early intervention set out in the Strategic Plan	
Action	
11c	Engaging with a wide range of community based organisations at the locality level in a preventative approach which recognises and works alongside community assets.
13d	<ul style="list-style-type: none"> ▪ Identify local needs, gaps in services and develop co-produced and innovative solutions which build community capacity. Priority areas include (Action): <ul style="list-style-type: none"> • Reducing social isolation • Promoting healthy lifestyles including physical activity • Falls prevention • Supported self-management of long-term conditions • Support for unpaid carers • Technology enabled care and supporting older people to use technology • Transport options

Localities Improvement Plan Outcomes

(Items in lighter font relate to core health and social care services)

North West	North East
<p>LIP Priorities outcomes:</p> <p><i>Improved access to GP and Support services</i></p> <p><i>Better equipped services to support independent living</i></p> <p>Key community facilities more accessible/affordable/welcoming</p> <p>Mental health /social isolation are reduced through provision of social engagement and support measures addressing mental health</p>	<p>LIP Priorities outcomes:</p> <p>Physical activity will increase – focus on physical activity levels and access for vulnerable groups</p> <p><i>Access to health and support will be improved - identify barriers/provide solutions</i></p> <p>Loneliness and social isolation will be reduced – identifying people at risk/facilitating access/ providing community based opportunities</p>
South West	South East
<p>LIP Priorities outcomes:</p> <p><i>Improved access to GP and Support services</i></p> <p>Promoting Healthy living – coordinating preventative work</p> <p>Supporting mental health and substance misuse services for vulnerable groups</p> <p>Reducing isolation by connecting to local activities and support</p> <p><i>Supporting older people/those with dementia through accessible and affordable housing</i></p>	<p>LIP Priorities outcomes:</p> <p>People lead healthier lifestyles both physically and mentally, identify low physical activity levels & promote affordable physical activity activities such as walking/cycling, provide healthy living programmes for vulnerable groups (substance misuse), promote health eating and food growing initiatives</p> <p><i>Improved access to Health and Social Care services, provide clear contact points, improve collaboration between GPs/ Health and Social Care services and third sector</i></p> <p>Services support independent living, maximise use of community transport, support befriending/volunteer networks, improve older peoples use of IT</p>

Emerging priorities from the outline strategic commissioning plans (OSCPs) in respect of tackling inequalities and prevention and early intervention

OSCP	Priorities
Learning Disabilities	Continuing partnership approach to raising awareness of Autism
Mental Health	Place based and person-centred life course approach, improving outcomes, population health and health inequalities
Older People	Map key preventive services Expansion of falls service Develop new types of befriending services and make best use of current resources
Physical Disabilities	Increased opportunities for community involvement
Primary Care	Support for link working



Edinburgh Integration Joint Board

Review of Health and Social Care Grants from 1 April 2019 onwards

Briefing paper for the engagement event to be held on 26 April 2018

1. Purpose of the event

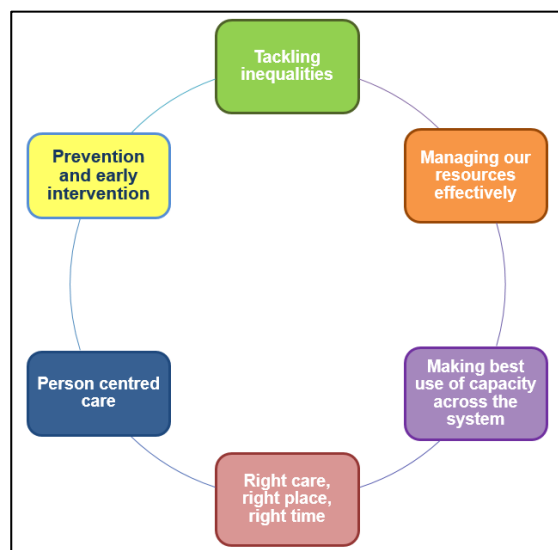
1.1 The event taking place on 26 April 2018 will provide an opportunity to explore, discuss and challenge current thinking around future health and social care grant programmes in Edinburgh. We hope that you will come along willing to share your views and help shape the proposals being developed. This pre-event briefing note is intended to provide background information so that you can come along prepared and we can make the best possible use of the time available on the day.

2. Background

- 2.1 When it came into operation on 1 April 2016, the Edinburgh Integration Joint Board inherited two grant programmes that had previously been operated by the City of Edinburgh Council and NHS Lothian along with a small number of other grants; all of which were due to expire in March 2018. The Board was keen that any new grants programmes put in place (along with all other expenditure) should reflect the priorities set out within its Strategic Plan 2016-19, emerging priorities for the new Strategic Plan 2019-22 and the new emphasis on locality working.
- 2.2 Recognising that any review of the current grant programmes would need to take place in collaboration with third sector colleagues, the Board agreed that the current grants should be extended for a further year to March 2019 to allow a full review of grant funding to take place.

3 Priorities within the Strategic Plan

3.1 There are six linked key priorities set out within the Edinburgh Integration Joint Board's Strategic Plan 2016-19 that reflect the dual role of the Board to meet current need whilst managing future demand.



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3.2 The scope of the grants review agreed by the Integration Joint Board is to focus on two of the six priorities:

- i. **Tackling inequalities** by working with our partners to address the root causes, as well as supporting those groups whose health is at greatest risk from current levels of inequality:
 - supporting individuals to maximise their capabilities and have control over their lives
 - creating healthy and sustainable communities that can resist the effects of inequality on health and wellbeing
 - ensuring that core health and social care services are delivered in such a way as to reduce and not exacerbate health inequality
 - recognising that some sections of the population need targeted support in order to address the cause and effect of inequalities
- ii. **Preventing poor health and wellbeing outcomes** by supporting and encouraging people to:
 - achieve their full potential, stay resilient and take more responsibility for their own health and wellbeing;
 - make choices that increase their chances of staying healthy for as long as possible
 - utilise recovery and self-management approaches if they do experience ill health

4 Current challenges

4.1 The biggest single challenge for the Edinburgh Integration Joint Board is the significant increase in demand for services alongside unprecedented financial pressures. Even if budgets were not seriously stretched, there is a substantial gap between the capacity of the health and social care workforce and the volume of service required to support growing numbers of people with health and social care needs to live as independently as possible in the community.

4.2 The current models of health and social care services are not sustainable. If we are to support all citizens to live as independently as possible for as long as possible a new emphasis is required focused on prevention, early intervention and tackling inequalities, to improve levels of health and wellbeing within our communities.

5 Scope of the review

5.1 The scope of the review as agreed by the Integration Joint Board is to have a focus on driving forward and contributing to whole systems change to deliver on the priorities within the strategic plan of tackling inequalities and prevention and early intervention. This will help to reduce the dependency on acute

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services and crisis support. Without this shift the care and support system will become unsustainable in the near future.

5.2 Consideration is also to be given to:

- the purpose of grants and when they should be used as opposed to other forms of procurement/ funding mechanisms
- the need to support communities of both place and interest
- the outcomes relating to health and wellbeing/social care set out in the [Locality Improvement Plans](#)
- the priorities within the Outline Strategic Commissioning Plans currently being developed for [learning disabilities, mental health, older people, physical disabilities and primary care](#)
- the priorities within the new carers strategy that will be developed during 2018/19
- options for delivering efficiencies equivalent to 10% of the value of the grants in the scope of the review
- the growth in 'social prescribing' in various forms and the need for services to be available to 'link' people to

6 Current use of grants

6.1 The existing grants programmes that are part of this review are:

- the main health and social care grant programme previously funded by the City of Edinburgh Council, which includes grants to organisations providing services for older people, unpaid carers, people with disabilities, mental health issues and/or addictions and people with Blood Borne Viruses (Total value £1,880,186)
- the health inequalities grant programme, previously funded by both the Council and NHS Lothian (Total value £1,754,575)
- a small number of grants previously funded through the Council's Social Justice Fund (Total value £28,273); and
- grants funded through the Integrated Care Fund and Social Care Fund (Total value £727,690).

The total value of these grants is £4,390,724.

6.2 The move to locality working and development of the Locality Improvement Plans has led us to look at the current spread of grants across the localities

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where possible, given that some grants fund citywide services. This is something that has not been done previously. Further work is being undertaken to allocate citywide services across localities in this analysis where it makes sense to do so, in order to better understand the current profile of grant allocation across the city.

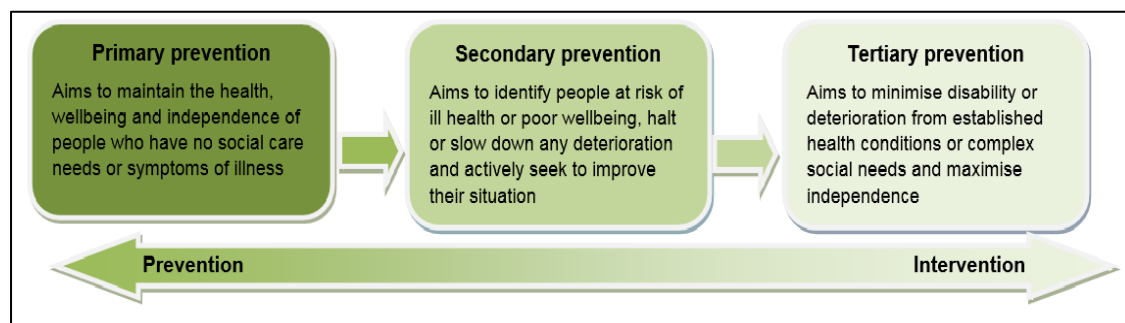
6.3 The table below shows the breakdown of the grants in scope by service user group and priority within localities where possible and where not on a citywide basis.

Current Health and Social Care Grant spend split by localities and city wide	
North West	North East
<ul style="list-style-type: none"> • Health Inequalities - £520,082 • Older People - £264,867 • Carers - £25,000 <p>Total £809,949</p>	<ul style="list-style-type: none"> • Health Inequalities - £234,238 • Older People - £187,775 • Mental Health £38,800 • Addictions £22,175 <p>Total £482,988</p>
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Citywide	
<ul style="list-style-type: none"> • Health Inequalities - £447,145 • Older People - £1,014,949 • Carers - £199,833 <p>Total £2,242,332</p>	<ul style="list-style-type: none"> • Mental Health - £41,418 • Additions - £256,843 • Disabilities - £133,815 • Ethnic Minority - £148,329
Total value: £4,390,724	

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7 Future priorities for grants

7.1 The Strategic Plan recognises a continuum of prevention as illustrated in the diagram below:



7.2 Most of the overall health and social care budget is currently spent at the 'intervention' end of this spectrum supporting people who have 'critical and substantial needs'. The current pressures on the public purse have made it very difficult to divert funding to initiatives intended to prevent people getting to the point where they have a 'critical or substantial need'. ***It is proposed that any future grants programme funded by the Integration Joint Board should be focused on primary and secondary prevention to support needs that are not 'critical or substantial'. Although people who have critical and substantial needs may access grant funded services.***

7.3 The current Health and Social Care main grants programme is focused on meeting the needs of people in defined service user groups e.g. older people, carers, people with disabilities. ***It is proposed that any future programme should focus on meeting the needs of people within their communities of place or interest.*** This will allow grants programmes to support the delivery of priorities identified within the Locality Improvement Plans and to meet the needs of the whole range of service user groups.

7.4 Possible priorities for the award of grants based upon priorities within the Strategic Plan 2016-19, the Locality Improvement Plans and emerging priorities from the outline strategic commissioning plans being produced in respect of learning disabilities, mental health, older people, physical disabilities and primary care, include:

- i. Reducing social isolation
- ii. Promoting healthy lifestyles, including physical activity and healthy eating
- iii. Mental wellbeing
- iv. Supported self-management of long-term conditions
- v. Information and advice – income maximisation – aligned with the overall development of advice services in Edinburgh
- vi. Reducing digital exclusion

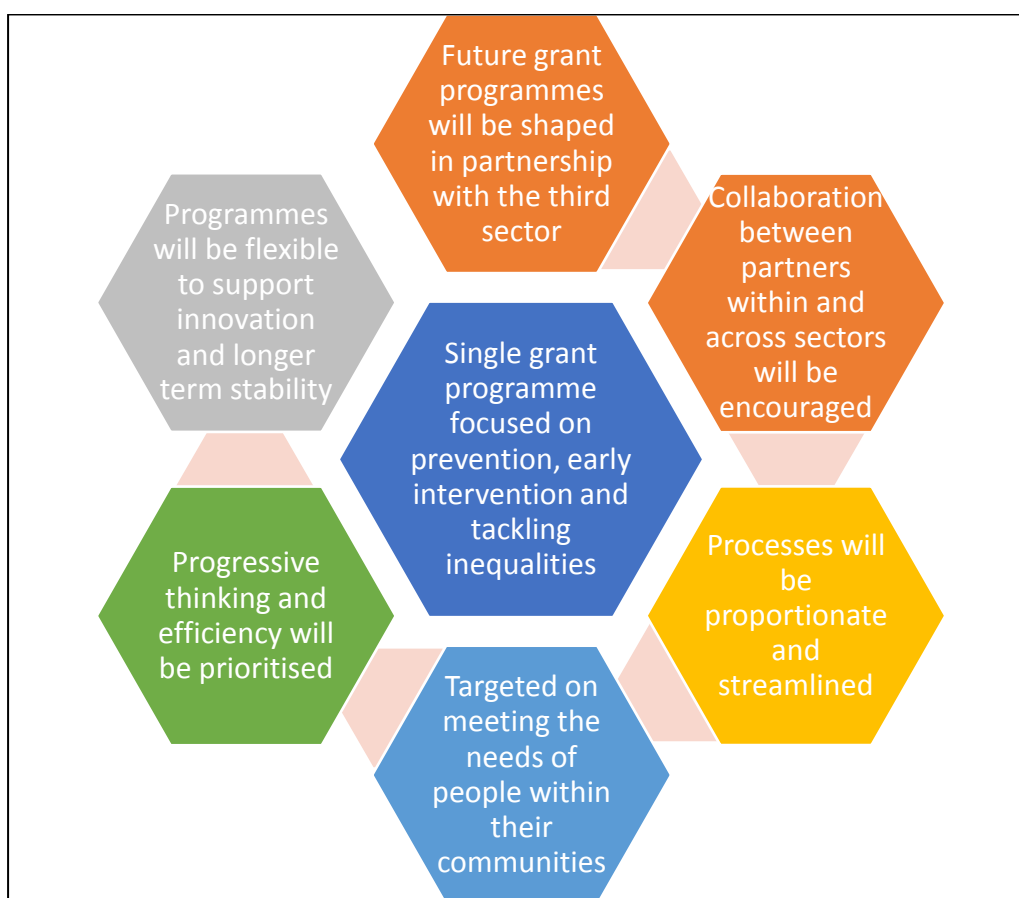
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vii. Building strong, inclusive and resilient communities

7.5 Given the importance of developing new and different approaches to supporting people to live independently within their communities, ***it is also proposed to establish an Innovation Fund to provide short-term funding for tests of change.*** This Fund will be set up in such a way that there is access to ongoing funding for those tests of change that evidence the benefits of ongoing investment.

8 Principles that will underpin any future grants programme

8.1 The diagram below sets out the principles that will underpin any future grant programmes:



9 Options for the delivery of efficiencies

9.1 The current financial pressures being experienced by the Integration Joint Board, City of Edinburgh Council and NHS Lothian will continue for the foreseeable future. By 2023 the projected shortfall in the Integration Joint Board's budget will be in excess of £100 million. In this context it is vital that we make every penny count and make best use of capacity across the whole system to operate as efficiently as possible.

9.2 The Integration Joint Board has stipulated that the review of the existing grants programmes should deliver efficiencies equivalent to 10% of the value

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of the grants in scope from 1 April 2019. This equates to £439,000. A real opportunity exists to deliver this 'efficiency' by doing things differently through whole system change rather than taking a 'salami slicing' approach to deliver savings. We could deliver more for the same amount of money or develop proposals that allow savings to be made elsewhere in the system.

10 The role of the Integration Joint Board in respect of grants

- 10.1 The role of the Integration Joint Board is to produce a strategic plan setting out how health and social care services should be delivered in Edinburgh and to oversee the implementation of that plan. The Council and NHS Lothian are jointly responsible for the delivery of health and social care services through the Edinburgh Health and Social Care Partnership under the direction of the Integration Joint Board.
- 10.2 The review is being led by a steering group, membership of which includes the three representatives of the third sector who sit on the Integration Joint Boards' Strategic Planning Group and a representative of Edinburgh Affordable Housing Partnership.

11 Next steps

Engagement events with partners	26 April 2018
Interim report to the Integration Joint Board	18 May 2018
Follow up engagement event	7 June 2018
Development of detailed proposals for new grants programme	June/July 2018
Second report to Integration Joint Board	August 2018

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23 April 2017