



# Minute

## IJB Performance and Delivery Committee

**10am, Monday 16 November 2020**

virtual meeting by MS Teams

### Present

#### Voting Members

Councillor Melanie Main (Chair), Councillor Phil Doggart and Richard Williams.

#### Non-Voting Members

Helen Fitzgerald, Colin Beck.

#### In Attendance

Jenny Boyd (NHS Lothian Strategy)

Matthew Brass (Assistant Committee Officer)

Ian Brooke (EVOK)

Philip Brown (CEC Strategy & Communications)

Sarah Bryson (NHS Lothian Strategy)

Kirsty Dewar (Strategic Planning and Commissioning Officer, EHSCP)

Tony Duncan (Head of Strategic Planning, EHSCP)

Helen Elder (Executive Management Support, EHSCP)

Philip Glennie (Transformation Project Manager, EHSCP)

Linda Irvine-Fitzpatrick (Strategic Programme Manager, Mental Health and Wellbeing)

Angus McCann (Chair, IJB)

Katie McWilliam (Strategic Planning Manager, EHSCP)

Moira Pringle (Chief Finance Officer, IJB)

Jay Sturgeon (Executive Assistant)

Julie Tickle (Planning & Commissioning Officer, EHSCP)

David Walker (CEC Senior Accountant)

### Apologies

Graeme McGuire (NHS Senior Accountant)

## **1. Minutes**

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### **Decision**

To approve the minute of the 28 September 2020 and 16 October 2020 as a correct record.

## **2. Work Programme**

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The Work Programme was presented to Committee. It was agreed that the programme was not fully up-to-date, and the Chair would agree to an August 2021 meeting date following the meeting, which would complete the programme for the coming year.

Committee members noted that additional IJB meetings had been scheduled throughout 2021, therefore the Programme would need to be revised in order to align with the additional IJB meetings.

### **Decision**

- 1) To agree to a meeting date for August 2021.
- 2) To revise the programme to align with additional IJB meetings that had been scheduled for 2021.
- 3) To otherwise agree the work programme.

(Reference – Work Programme, submitted)

## **3. Outstanding Actions**

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The outstanding actions updated for this meeting were submitted. As each action recommended for closure related to an item on the agenda for this meeting – and each report had actions attached after consultation – it was agreed to leave the actions recommended for closure and note the remaining outstanding actions.

### **Decision**

To note the outstanding actions.

(Reference – Outstanding Actions, submitted)

## **4. Performance Report**

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Committee were presented with a Performance Report which updated members with an overview of the activity and performance of the Edinburgh Health and Social Care Partnership and certain functions of the EIJB.

An update on social care performance was presented firstly, with encouraging statistics showing that the number of individuals waiting for

assessment has been lower each month of 2020-21 than the corresponding month of 2019-20, and all but reduced to zero in NE and SE locality. This also correlated to the downward trend of people waiting for a package of care, as well as people waiting for a review.

Members noted an increase in sickness levels of Council-employed staff and adult protection referrals from Police Scotland. Members requested for the data on staff sickness levels to be broken down further, and reasoning behind the increase in sickness levels as well as more specific figures relating to this to be presented to members in due course.

Members were also updated on the Ministerial Strategic Group targets, which focused on data relating to A&E. It was noted that A&E data included Covid-19 data. It was agreed to separate this out in future reports. There remains an ongoing issue with data relating to emergency admissions due to the way Edinburgh A&E admits to provide treatment in A&E, and this inflates 'emergency admissions'. Work to resolve this is ongoing.

It was noted that A&E attendances, 4-hour A&E performance, the number of unscheduled occupied bed days and occupied bed days due to delayed discharge all followed a decreasing trend when compared to the previous year. Members noted that emergency admissions had increased throughout the current year and reflected a general increase when compared to the previous year.

Members noted concerns over the comparative data in the report, as it was seen to be misleading to compare Edinburgh figures to groupings throughout the country who may seem to perform better as a result of a far smaller population (eg. Shetland Islands).

If members had any further queries or comments on the data, Jennifer Boyd and Philip Brown can be contacted directly via email at [jennifer.boyd3@phs.scot](mailto:jennifer.boyd3@phs.scot) and [philip.brown@edinburgh.gov.uk](mailto:philip.brown@edinburgh.gov.uk).

## **Decision**

- 1) To consider the performance of the Partnership as detailed in the report and appendices.
- 2) To investigate what groupings the data for Edinburgh is compared to and if these are reliable.
- 3) To agree to producing a briefing note on a more in-depth analysis of staff sickness figures and the reasoning behind the increase.
- 4) To include more text in following performance reports to allow for a better understanding of the data presented.
- 5) To agree to a briefing report being produced to give a more in-depth explanation on the SDS data included in the report.

(Reference – Performance Report, Report by the Head of Strategic Planning, EHSCP, submitted)

## **5. EIJB Annual Performance Report 2020-2021**

The EIJB annual performance report (APR) was presented to Committee, which provided a proposed schedule for the completion of the Report for 2020/21.

Challenges in producing this schedule were presented to Committee, most notably, that the data on the core suite of national indicators is not available until late June, which allows very little time for the analysis of recent data, as the APR is to be published by 31 July each year. It was noted that the Scottish Government are aware of the challenges associated with the publication date, however, a change to current arrangements would mean an amendment to legislation.

The timeline for production of the APR was reviewed and agreed upon, and it was noted that the Interim Performance and Evaluation Manager had now been appointed and would join the Strategy and Performance team on 30 November 2020 to begin the production of the APR.

### **Decision**

- 1) To note the draft timeline for production of APR 2020-21 and the challenges associated with this.
- 2) To note that the Interim Performance and Evaluation (P&E) Manager had been recruited and will join the Edinburgh Health and Social Care Partnership (EHSCP) on 30 November 2020.

(Reference – EIJB Annual Performance Report 2020-21 – Report by the Head of Strategic Planning, EHSCP, submitted)

## **6. Edinburgh Joint Carers' Strategy 2019-2022 Strategic Key Performance Indicators**

Committee were presented with a report on the key performance indicators for the Edinburgh Joint Carers' Strategy (EJCS) 2019-2022.

In August 2019, the IJB approved the EJCS. The proposed strategic key performance indicators were presented to Committee for the six key priority areas:

- Identifying Carers
- Information and Advice
- Carer Health and Wellbeing
- Short Breaks
- Young Carers
- Personalising Support or Carers

Members noted that the progress of the strategy implementation plan will be reviewed on a 6-monthly basis by Edinburgh Carers Strategic Partnership Group, and subsequently reported to the IJB through the Performance and Delivery Committee on an annual basis, the first report being due in January 2022.

### **Decision**

- 1) To agree to the proposed Key Performance Indicators for the Edinburgh Joint Carers' Strategy 2019-2022 as laid out in Appendix 1.
- 2) To accept the proposed timelines for annual reporting on the progress and impact of the Strategy and to receive the first report in January 2022.

(Reference – Edinburgh Joint Carers' Strategy 2019-2022: Strategic Key Performance Indicators – Report by the Head of Strategic Planning, EHSCP, submitted)

## **7. Mainstreaming Equality and Equality Outcomes**

Committee were presented with the progress in mainstreaming equality and equality outcomes, which updated members on the measures taken in these fields as they worked towards achieving the Equality Outcomes set by the IJB in April 2016.

Members noted that the progress report was required in accordance with the Equality Act (2010), with this report being published to the Edinburgh Health and Social Care Partnership's website following Committee approval.

The progress of the activities and inputs for achieving the equality outcomes were presented. Members acknowledged and praised the clear development of the work being undertaken to achieve these outcomes.

Members expressed concerns over the Integrated Impact Assessments (IIAs), and further information was requested on how the assessments were undertaken, how often they occurred and how the assessments were scrutinised. For member's assurance, a briefing note was agreed to be circulated on these IIA findings.

### **Decision**

- 1) To note and agree to publish online the Mainstreaming Equality and Equality Outcomes Progress Report 2020.
- 2) To agree to circulating a briefing note on the procedures for and conduct of Integrated Impact Assessments, and the frequency of their occurrence.

(Reference – Mainstreaming Equality and Equality Outcomes – Progress Report – Report by the Chief Officer, EIJB, submitted)

## **8. Annual Review of Directions**

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A report on the Annual Review of Directions was presented to Committee which provided updated information on the rationale behind the proposals to vary, close or replace existing directions.

Committee were asked to consider the review of directions that were approved during the period October 2019 – March 2020. The report initially recommended that 7 of the existing Directions were to be retained, 3 varied, 2 closed and 1 to be superseded by two new directions. In September 2020, Committee requested more information on why these Directions were grouped into these categories above, a review was conducted, and this report presented members with updated information to aid the decision-making on the Directions before submission to the EIJB.

The report also introduced new recommendations on several Directions, with Direction EIJB-22/10/2019-10 and EIJB-22/10/2019-11 proposed for closure, and EIJB-22/10/2019-5 was recommended to be superseded by two separate directions. Again, Committee were asked to review these draft directions before their referral to the EIJB.

Committee noted that there was an outstanding action to set a direction reflecting the decision of EIJB on the Professional Advisory committee decisions in July 2020

### **Decision**

- 1) To consider the review of directions approved during the period October 2019 – March 2020 and the updated information on directions proposed for variation or closure.
- 2) To agree to the recommendations for retaining, varying, closing, or superseding existing directions prior to onward referral to the Edinburgh Integration Joint Board provided at Appendix 1.
- 3) To agree to the revised draft directions provided at Appendix 2 prior to onward referral to the EIJB.
- 4) To agree to circulating a briefing note produced by Mark Grierson on the slippage of timescales of the disability service Directions.
- 5) To request a Direction covering membership of the college of ETC.

(Reference – Annual Review of Directions – Update Report - Report by the Head of Strategic Planning, EHSCP, submitted)

## **9. Health and Social Care Grant Programme Evaluation 2019- 20**

Committee were presented with a report giving an evaluation of Health and Social Care Grant Programme for 2019/20. The report included the key findings of the evaluation, which members noted and deemed a success, especially considering this was the first three-year Health and Social Care Grant Programme.

The report noted that the Grant Programme invested £4.6m in activities which benefitted approximately 51,000 people across a range of different activities including; disadvantaged communities, enhanced community resilience, improving individual's mental health and wellbeing and contributing to mitigating, preventing and undoing the causes of health inequality. It was noted that the measurement of the Programme's success was calculated through standard impact assessment questions (SIAQs), with figures taken from assessments suggesting an average of 83% of service users agreed or strongly agreed that the service they used had had a positive impact.

Members noted the positives of the Grant Programme, but also highlighted that there were several groups who provided services for ethnic minorities who were unsuccessful in their grant application, requested a follow-up with these groups to check the progress of their work, and what was being done to ensure ethnic minorities were accessing services and community support

Committee recognised that the time required for this grant process had been three years, and there was no less that three years until the current grants run out.

### **Decision**

- 1) To note the findings of the Health and Social Care Grant Programme Evaluation Report 2019/20.
- 2) To request for the Community Investment Strategy to be brought forward by the Strategic Planning Group Committee to ensure delivery of funding by April 2022.

(Reference – Health and Social Care Grant Programme Evaluation 2019-20 – Report by the Chief Finance Officer, EIJB, submitted)

## **10. Mental Health Services – Planning and Operational Arrangements**

Committee members previously requested clarification on mental health services that are managed by the Partnership, are hosted on behalf of the Partnership by REAS, or developed and delivered by REAS on behalf of NHS Lothian. As a result, this report was presented to Committee to

produce a better understanding of planning and operational arrangements of mental health services.

The report clarified to members what the mental health services were, who they were commissioned by, and who was responsible for the operational management.

The report also focused on the Thrive Programme and explained to members the six workstreams of the programme that are incorporated in the Strategic Plan 2019-2022. Members also noted that the Thrive workstreams membership is split between service users and carers through Collective Advocacy, with the work delivered by the programme including the reviewing, monitoring and commissioning of services detailed in the Commissioning Plan.

The report updated members on more recently commenced work, including the commitment to support additional mental health workers in key settings, such as A&E departments, GP practices, police station custody suites and prisons. The delegation of workers was reported alongside the ongoing recruitment of 17 additional WTE staff to help deliver a backlog of psychological therapies. Members noted that 14 of those 17 WTE staff have been recruited, with the remaining positions currently in recruitment.

## **Decision**

- 1) To note the current planning and operational arrangements for mental health services.
- 2) To acknowledge that the Thrive Edinburgh Commissioning Plan provides clear direction for service redesign, development and delivery involving all the necessary stakeholders reflecting operational delivery structure.
- 3) To note that the Chief Officer agreed to update the EIJB on progress with the improvement of services put into special measures level 3 by the Scottish Government.
- 4) To agree to more information being circulated on interventions, and for this information to be built into Mental Health Services framework.

(Reference – Mental Health Services: Planning and Operational Arrangements – Report by the Head of Strategic Planning, EHSCP, submitted)

## **11. Public Health Scotland Publication – Insights in Social Care 2018-19**

Due to time constraints, this report was not presented to Committee. Members expressed their desire to set up a separate online briefing to



cover any comments and questions on the report, which was agreed to be set up before the Christmas break.

### **Decision**

To agree to having an online briefing prior to the Christmas break to allow for member's comments and any questions arising on the report. Philip Brown will contact members and arrange.

### **12. Date of Next Meeting**

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Wednesday 20 January 2021 at 10am to be held virtually via Microsoft Teams.