



MIDLOTHIAN IJB STRATEGIC PLANNING GROUP

MS Teams

NOTES OF OUTCOMES AND ACTIONS

Tuesday 18th August 2020

PRESENT: Carolyn Hirst (Chair), Morag Barrow, Mairi Simpson, Jane Crawford, Claire Flanagan, Kaye Skey, Jim Sherval, Carly McLean, Grace Cowan, Giovanna Di Tano, Leah Friedman, Sarah Fletcher, Andrew Coull, Sarah Archibald, Simon Bain, Debbie Crerar, Matthew Curl Fiona Huffer, Jordan Miller, Keith Slight

APOLOGIES: Dervilla Bray, Sheena Wight, James Hill, Lisa Cumming, Dr Carol Levstein, Marlene Gill, Caroline Myles, Simon Bain, Aileen Murray, Jamie Megaw, Wanda Fairgrieve, Aileen Murray, Adam Duncan-Rusk, Alison White, Rebecca Miller,

| | | | ACTION |
|----------|----------------------------------|--|--|
| 1 | Welcome and Introductions | Welcome & Introductions. Carolyn Hirst welcomed members to the meeting. Apologies noted. This meeting was scheduled with limited notice to allow discussion on Terms of Reference prior to the Aug IJB. | |
| 2 | Minutes of Last Meeting | Minutes of meeting on 15 th July approved. | |
| 3 | Action Log | <p>Actions from 15 July 2020:</p> <ul style="list-style-type: none"> (i) Update Terms of Reference to allow opportunity for SPG to contribute to change programmes at earlier stage of development. (CH & MS) – complete. (ii) JC to consider, with the third sector reference group, how the third sector can be better supported to influence IJB strategic planning. Carried forward. (iii) CH and MS to consider representation from the independent sector and housing. In progress. Carry forward. (iv) CH and MS to discuss and review the Terms of Reference. Complete. (v) CH and MS to progress requirement for a vice chair from Council. See section 4. (vi) MB and MS to consider engagement in NHS Lothian Integrated Care Forum. Carry forward. | <p>JC</p> <p>MS CH</p> <p>MB MS</p> |

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|-----------|--|---|---|
| | | <p>(vii) MB to contact Colin Briggs regarding membership of NHS Lothian Strategic Planning Group. CH reported that a meeting is planned with IJB Chief Officers, IJB Chairs and Vice-Chairs to look at potential model.</p> <p>(viii) MS to arrange update to SPG on set-aside and the responsibilities of the IJB. Completed</p> <p>(ix) AC requested that the SPG inputs to Midlothian work around reshaping care home services. Agreed that GC will progress.</p> | <p>MB CH</p> <p>GC</p> |
| 4. | Strategic Planning Group Terms of Reference - Carolyn Hirst | <p>Updated Terms of Reference discussed. Mairi to remove 'formal committee' as the SPG is an advisory group. Agreed to the two elements – contribute to developments and provide assurance to the IJB regarding the implementation of the Strategic Plan. Agendas to be prepared accordingly.</p> <p>MS and AC to discuss who should be the representatives from the NHS acute sector.</p> <p>TEC Lead to be added to membership list.</p> <p>At IJB Meeting on 27 August 2020, CH to ask for Midlothian Council for a representative to take on role as SPG Vice-Chair.</p> <p>Following the amendments listed above, MS to circulate final version of the Terms of Reference. Appendix 1.</p> | <p>MS</p> <p>AC MS</p> <p>MS</p> <p>CH</p> <p>MS</p> |
| 5. | Understanding Set-aside – Claire Flanagan | <p>CF delivered a presentation explaining set-aside. Appendix 2.</p> <p>Discussed delegated functions. Some may change as a result of the review of the Scheme of Integration for the four Lothian IJBs.</p> <p>Discussed relationship between set-aside and Directions. Agreed that IJBs need to be bolder when setting Directions.</p> | |
| 6. | Midlothian IJB Directions 2020-21 – review - Mairi Simpson | <p>Agreed that Directions should be reviewed on the assumption that some timeframes or tasks may have to be amended as a result of the delay caused by the pandemic. The Directions were issued to Midlothian Council and NHS Lothian in May 2020. There has been no response as yet, which is most likely related to other priorities during the pandemic.</p> <p>Updates to be forwarded to Mairi within the next 3 weeks.</p> | ALL DIRECTION LEADS |

| | | | |
|----|---|---|--------------|
| 7. | Report Schedule 2020 – Carolyn Hirst | Mairi and Carolyn to consider. | MS CH |
| 8. | AOCB | No issues raised. | |
| 9. | Future Meetings | All future meetings below are via MS Teams meantime(previously at Melville Housing, Corn Exchange,200 High Street Dalkeith) Wed 28 th October 2020 2 - 4pm Wed 25 th November 2020 2 - 4pm | |

Appendix 1 – Terms of Reference

Appendix 2 – Understanding Set-aside slides

**Midlothian Integrated Joint Board
Strategic Planning Group
Terms of Reference**

1. CONTEXT

The Public Bodies (Joint Working) (Scotland) Act 2014 (Section 32) places a duty on Integration Authorities to establish a Strategic Planning Group to support the development and review of a strategic commissioning plan (the Strategic Plan) for their area.

Effective strategic commissioning is the mechanism via which the Health & Social Care Partnership will deliver better care and support for people, and make better use of the significant resources we invest in health and social care provision. It includes involving a range of service providers, service users and their carers, representative bodies, and professionals in the strategic commissioning process.

The Scottish Government *Health and Social Care Integration - Public Bodies (Joint Working) (Scotland) Act 2014 Strategic Commissioning Plans Guidance* can be accessed [here](#).

2. NAME OF GROUP

The name of the group is the Midlothian Strategic Planning Group (SPG).

3. REMIT

The SPG will be concerned primarily with:

- a. Informing the development of the Strategic Plan, together with ongoing iterative review.
- b. Providing stakeholder advice to the Integration Joint Board (IJB) for any emerging plans, programmes and interventions.

In so doing the SPG will:

- i. Influence and shape the development of the Strategic Plan on a 3 yearly basis (with annual updating of Plan).
- ii. Consider and agree Directions to Midlothian Council and/or NHS Lothian in order to deliver the Strategic Plan and recommend these Directions to the IJB for formal adoption.
- iii. Have oversight of the implementation of the Strategic Plan including performance and financial reporting. In doing so it will:
 - a. Provide critical review and insight to emerging service change including recommendations to IJB on additional Directions

- b. Review implementation of Directions
 - c. Review implementation of approved plans – provide critical appraisal and support.
- iv. Review the strategic planning process for the IJB.
- v. Display positive behaviours which support the integration agenda to peers and other stakeholders.
- vi. Provide advice to Integration Joint Board (IJB) when developing responses to emerging Scottish Government policy and regulations.
- vii. Provide an effective conduit and feedback loop to IJB members on key proposals and service changes by linking effectively to wide groups of staff, users, carers, clinical & care professionals and locality members.
- viii. Support Midlothian IJB engagement in other strategic planning groups such as the Midlothian Community Planning Partnership and within NHS Lothian.

4. MEMBERSHIP

Where the integration authority is an integration joint board SPG membership must include:

(i) at least one person nominated by the Health Board which is a constituent authority in relation to the integration joint board (NHS Lothian)

(ii) where one local authority is a constituent authority in relation to the integration joint board, at least one person nominated by the local authority (Midlothian Council)

Standing Orders state that the IJB appoints the SPG membership (except for the members nominated by each constituent party). Membership of the SPG includes the Midlothian IJB Chief Officer and Chief Finance Officer and also includes representation from:

| | Number |
|--|--------|
| Carers | 1 |
| Public (locality representatives) | 2 |
| Service User | 1 |
| NHS Staff Side | 1 |
| Midlothian Council Union | 1 |
| Acute Hospital representatives | 4 |
| Housing (council and RSL representative) | 2 |
| Social Work (Criminal Justice, Adult Services) | 4 |
| Third Sector representative | 1 |
| Independent Health Contractors (General Practice, Community Pharmacy) | 2 |
| Health professions (Nursing, AHPs, Mental Health, Psychology, Public Health) | 5 |
| Digital Lead | 1 |
| Commercial Care Sector | 1 |

5. CHAIR AND VICE-CHAIR

The Chair of the SPG will be appointed by voting membership of the IJB.

A Vice-Chair will be appointed to ensure continuity of meetings in the Chair's absence. The Vice-Chair will be chosen from among the voting membership of the IJB.

The Chair will hold the casting vote during meetings of the SPG.

6. ROLE AND REMIT OF SPG MEMBERS

Individual members will represent stakeholder groups, constituent groups, organisations, professions or localities.

Group members will table issues arising from their own 'constituency' discussions at the SPG and will bring appropriate issues from the SPG to their own groups.

Members are expected to:

- prepare adequately for meetings by familiarising themselves with the agenda and by reading any associated papers
- develop and maintain the necessary links and networks to enable views to be sought and represented over the development, review and renewal of the Strategic Plan
- actively contribute to meeting discussions in a way that represents their community of interest, sector or professional area
- submit apologies ahead of any SPG meeting where attendance is not possible

7. DEPUTIES

Each member should have a nominated deputy who will attend meetings in their absence.

8. TERMS OF OFFICE

The membership of the SPG will be reviewed every three years in line with Strategic Planning cycles.

9. CO-OPTION

The SPG will co-opt additional members for particular pieces of work, or for specific periods of time, as appropriate.

10. LINK TO THE IJB

The SPG is an advisory group to the IJB.

The Chair of the SPG will ensure regular reporting to the IJB via the minutes of the SPG meetings. The IJB may request a particular view from the SPG for specific work areas and developments as required.

On occasions the IJB and the SPG may hold joint meetings. This would normally be at the request of the IJB.

11. SUPPORT TO THE SPG

The Chief Officer of the IJB will ensure adequate officer support for the SPG including appropriate secretarial support.

12. EXPENSES

The Health and Social Care Partnership will reimburse reasonable expenses associated with carer/service user/community members attending meetings of the SPG.



Understanding Set Aside

Strategic Planning Group

18th August 2020



HSCP v IJB

- HSCP operationally manages services some of which will be delegated functions of the IJB. Therefore operationally manages these budgets.
- IJB strategically commissions functions delegated to the IJB within its available resources.
- The IJB delegated functions fall into categories of core, hosted and set aside.



What is Set Aside?

- Set Aside budget relates to services provided by large hospitals on behalf of the IJB. The principle is illustrated in the diagram below.



What is Set Aside?

What is a set aside budget?

The budgets of integration authorities (IAs) are composed of two elements:

- Social care
- Health care – including primary and community healthcare, as well as some hospital care

The majority of integration authorities (IAs) have a 'set aside' budget. This relates to unscheduled acute hospital care.

How is the set aside budget agreed?

When setting the budget, the integration authority agrees with the NHS health board partner how much it expects to need for unscheduled acute hospital care. To do this, the partners use hospital data on levels of activity.

For IAs using the "set aside" approach, the agreed amount remains within the NHS rather than being paid to the IA (like the rest of the NHS contribution). This "set aside" budget should still remain under the control of the IA.



Source - Scottish Government Health and Sport Committee report in October 2019 "Looking ahead to the Scottish Government Health Budget 2020-21: When is hospital bad your health?"

What is Set Aside?

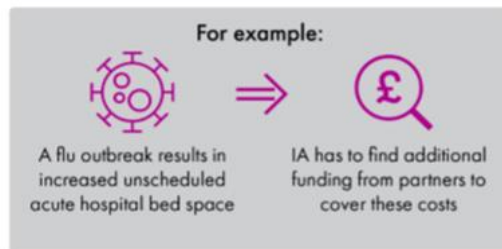
What can change the set aside budget?

In year

During the year, actual **unscheduled acute activity** might be higher or lower than anticipated.

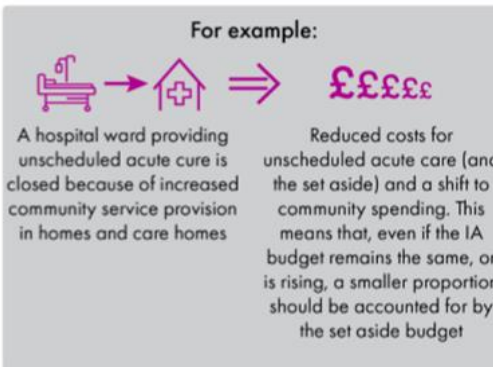
If activity is higher, the IA needs to agree with partners how these additional costs will be met.

If activity is lower, the IA should be able to decide how to spend the difference between actual and anticipated costs.



Longer term

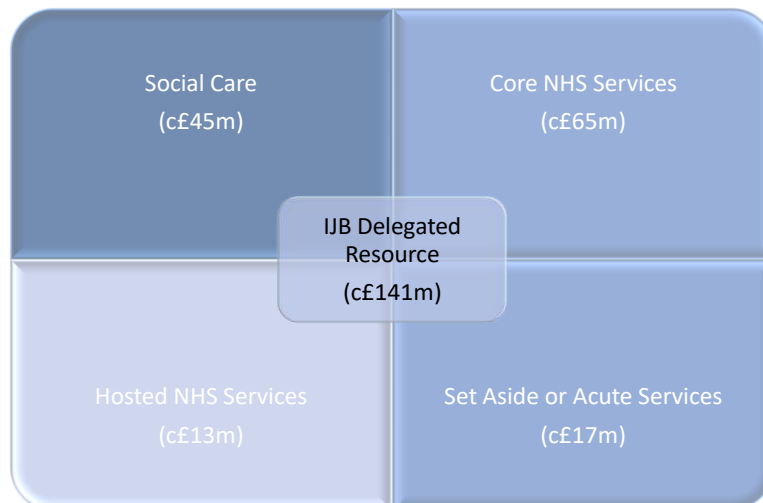
Over the longer term, changes to how services are delivered should also be aimed at reducing demand for unscheduled acute care and – in turn – the set aside budget.



Source - Scottish Government Health and Sport Committee report in October 2019 "Looking ahead to the Scottish Government Health Budget 2020-21: When is hospital bad your health? "



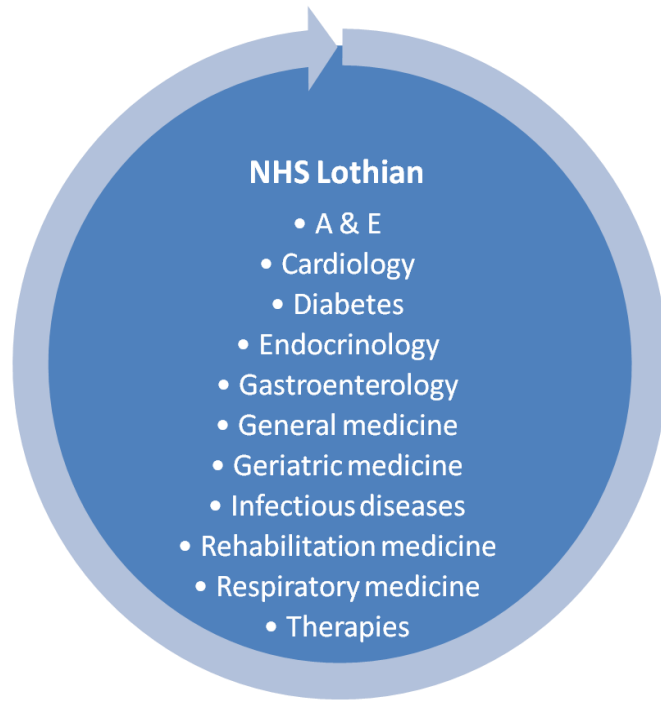
IJB Components



as at Q1 review



SET ASIDE SERVICES



HOSTED NHS SERVICES



What is Set Aside?

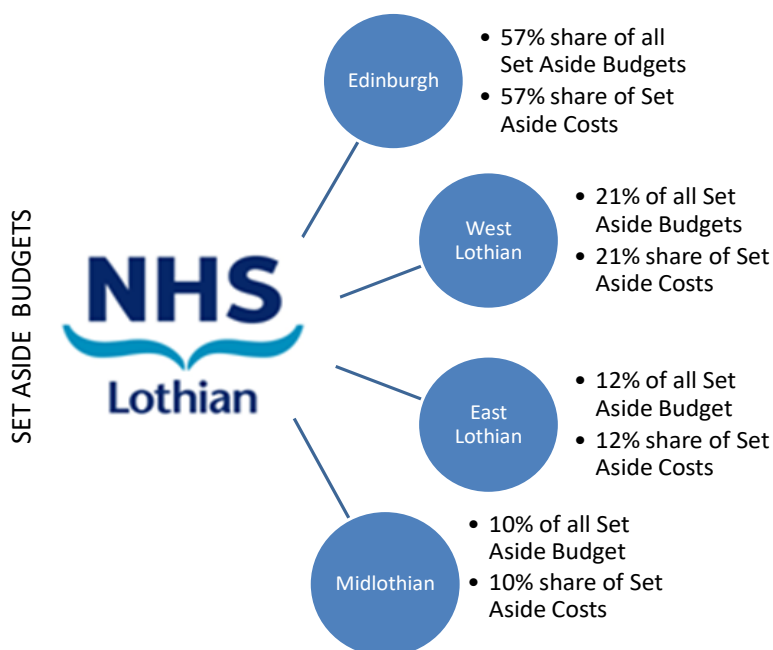
- The way NHS Lothian reports 

Identifies budgets associated with delegated functions and allocates those budgets to IJBs using an appropriate allocation tool:

- ❖ **Core** services - Partnership budgets are allocated in full to the IJB
- ❖ **Hosted** services (held within a specific Partnership on behalf of all Partnerships) - Budgets are allocated to IJBs based on appropriate shares, mainly using PCNRAC;
- ❖ **Set Aside** services (those services operationally managed within Acute services but are functions delegated to the IJB) - The same principle is applied as that used for Hosted Services.



What is Set Aside?

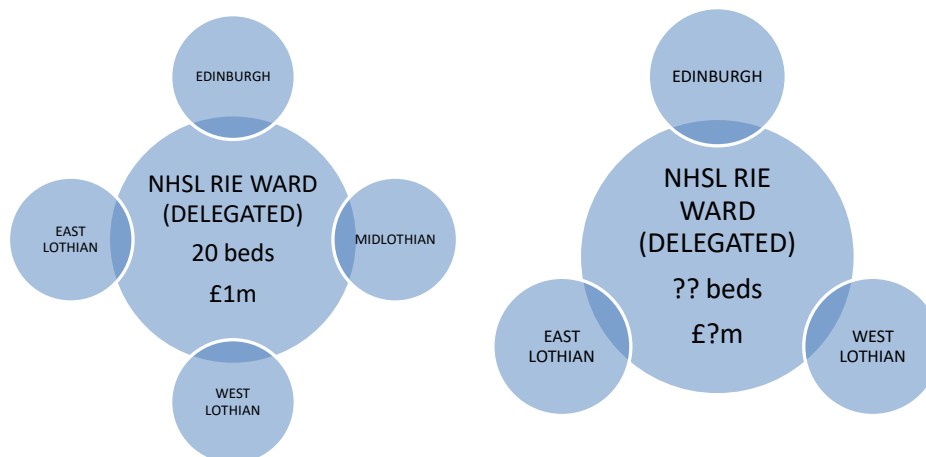


What is Set Aside?

- ✓ Simple
- ✓ Relatively easy to produce
- ✓ No turbulence
- × Difficult to understand reasons for variance
- × Does not reflect actual usage of services
- × Difficult to make changes and move money
- × Difficult for IJBs to plan

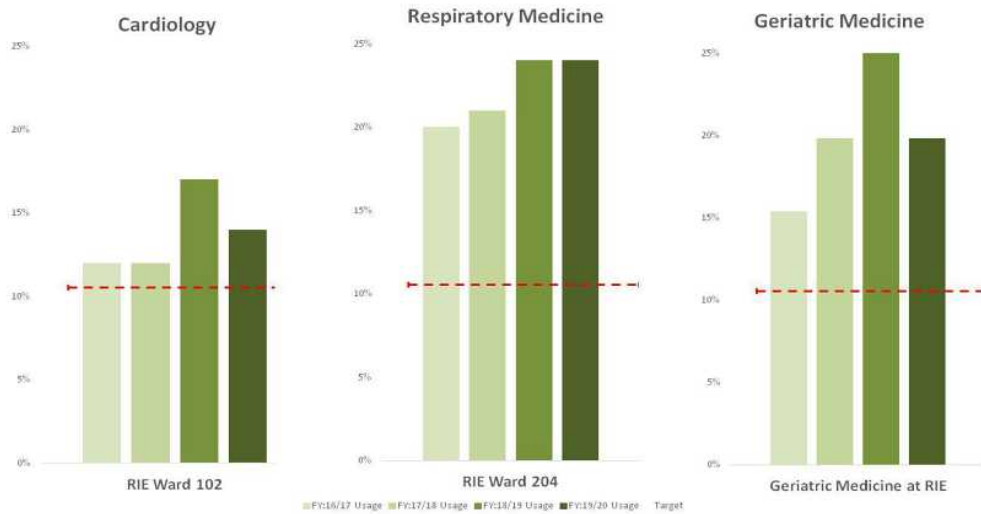


What is Set Aside?



What is Set Aside?

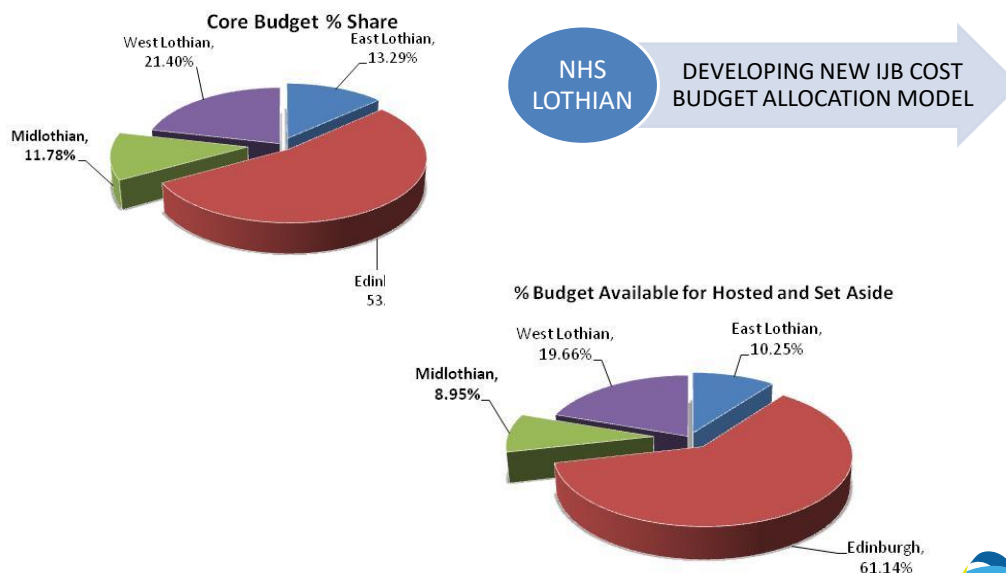
MIDLOTHIAN ACTIVITY ANALYSIS



as at November 2019



What is Set Aside?



as at November 2019



What is Set Aside?

- Balance between IJB working
- Directions & Strategic Plan
- Forums for wider collaboration
 - CO Meeting – Lothian COs, CFOs meet monthly
 - Integrated Care Forum

