

# Midlothian Integration Joint Board

Midlothian Integration Joint Board  
Thursday 19 December 2024  
Item 4.1



Meeting	Date	Time	Venue
Midlothian Integration Joint Board	Thursday, 24 October 2024	2.00pm	Council Chambers, Midlothian House and Virtual Meeting held using Microsoft Teams.

## Present (voting members):

Connor McManus (Chair)	Val de Souza (Vice Chair NHS) (attended virtually)	Dr Amjad Khan (NHS Lothian)
Councillor Milligan	Andrew Fleming (NHS Lothian)	Kirsty MacDonald (NHS Lothian attended virtually)

## Present (non-voting members):

Morag Barrow (Chief Officer)	David King (Interim Chief Finance Officer)	Nick Clater (Head of Adult Services and Chief Social Work Officer)
Grace Chalmers (Partnership Representative)	Claire Ross (Chief AHP)	Dr Rebecca Green (Clinical Director)

## In attendance:

Councillor McKenzie	Gill Main (Integration Manager)	Fiona Kennedy (Group Service Manager)
Grace Cowan (Head of Primary Care and Older Peoples Services)		Jim Sherval (Consultant in Public Health) (attended virtually)

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Elouise Johnstone (Performance Manager) (attended virtually)	Martin Bonnar (attended virtually)	Ruth Flynn Public Health Practitioner
	Councillor Virgo (attended virtually)	Iina Jaara (Democratic Services Team Leader)
Hannah Forbes (Democratic Services Officer)	Maria Perez (Democratic Services Officer)	Nicola Thorburn (Democratic Services Officer)

<b>Apologies:</b>		
Councillor Parry	Christine Gardiner (External Auditor, Audit Scotland)	Fiona Stratton (Chief Nurse)

### 1. Welcome and Introductions

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The Chair welcomed everyone to this Meeting of the Midlothian Integration Joint Board (MIJB).

Apologies were received from Councillor Parry, Christine Gardiner (Audit Scotland) and Fiona Stratton (Chief Nurse).

### 2. Order of Business

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The order of business was confirmed as outlined in the agenda that had been previously circulated.

### 3. Declarations of Interest

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No declarations of interest were received.

Keith Chapman disclosed that he is a trustee of Alzheimer Scotland.

### 4. Minute of Previous Meetings

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4.1 The Minute of previous Midlothian IJB Board Meeting held on 22nd August 2024 was approved as an accurate record.

4.2 The Minute of the meeting of the MIJB – Strategic Planning Group held on 29 August 2024 was approved as an accurate record.

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4.3 The Minute of the meeting of the MIJB - Audit and Risk Committee held on 6 June 2024 was approved as an accurate record.

### 5. Public Reports

	Decision	Action Owner	Date to be Completed/Comments
<p><b>5.1 Chair's Update, presented by Councillor McManus</b></p> <p>The Chair provided a brief update, highlighting the upcoming finance workshop provided by David King in November. At the next meeting of MIJB the chair will not be able to make this meeting, Val de Souza will be chairing the meeting in the absence. The Chair reminded members of the MIJB that there are two town hall briefings coming up.</p>			
<p><b>5.2 Chief Officer's Report – Presented by Morag Barrow, Chief Officer</b></p> <p>Morag Barrow, Chief Officer, presented the report and advised the paper sets out the key strategic updates for the Board. This report is for noting.</p> <p>The Chief Officer highlighted items for the attention of the Board.</p> <ul style="list-style-type: none"> <li>• The position we are in with the Chief Finance officer, it was explained that we have failed to recruit to the deadline, there needs to be an agreed decision on the next steps.</li> <li>• The first Partner meeting since Covid has taken place and noted that they will be meeting regularly to discuss any issues. Another meeting is planned for mid-November.</li> <li>• The Pharmacy team won the NHS Lothian awards for negotiation costing and prescribing. Congratulations was passed to the team.</li> <li>• In terms of where we are regarding transformation, Dr Rebecca Green is leading some work with Fiona Stratton and Claire Ross regarding the transformation approach. The full report will be available after Christmas.</li> </ul>			

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<p>Staff were commended on the great work. A question arose regarding whether the legal opinion from the King's Council was going to be shared. Nick Clater advised that there is an 18-page opinion that and a summary from Midlothian Council's Legal Section. He will ascertain whether this can be shared. Delayed discharge status was highlighted. Grace Chalmers gave an update, and advised that there been no intervention from the Scottish Government in Midlothian</p>			
<p><b>5.3 Strategic Planning Group Update – Report presented by Andrew Fleming, SPG Chair Officer</b></p> <p>Andrew Fleming, Strategic Planning Group (SPG) Chair, presented the report and advised the paper sets out the key strategic updates for the Board. This report is for noting.</p> <p>SPG Chair reported that due to lower than anticipated engagement, planned in-person townhall sessions had been cancelled as part of the consultation on the draft Strategic Plan. Discussion took place as to engagement with the community and other options to explore, noting that other regular community events would not be happening due to resource limitations.</p> <p>The Chief Officer advised the Board, that if they haven't responded to any invitations to please respond for the upcoming virtual sessions.</p>			
<p><b>5.4 Audit and Risk Committee Update – Report presented by Val de Souza, Audit and Risk Chair</b></p> <p>Val de Souza, Vice Chair NHS presented the report. This report provides an update on Audit and Risk committee and is for noting.</p>			

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<p>The Vice Chair highlighted the key points discussed at the meeting on 19th September Audit and Risk Committee, 1) the need for a fair and transparent process whilst recruiting for an independent member. 2) the need for a Vice Chair for the Audit and risk committee to be appointed 3) The risk register was discussed, highlighting the financial risks and the details around the risk level being increased. 4)The main body of the meeting was with Audit Scotland. Audit Scotland presented their report that scrutinised the IJB governance, they were satisfied while highlighting some low-level issues. The low-level issues have now been investigated, and the auditors are satisfied. The Audit Commission report was noted, and it was expressed that the report should be circulated to members for information.</p> <p>The Chair thanked the Vice Chair NHS for the update on the Audit and Risk committee.</p>			
<p><b>For Decision</b></p> <p><b>5.5 MIJB Membership Recommendations - Paper presented by Democratic Services</b></p> <p>lina Jaara, Democratic Services Team Leader presented the paper. This report provides information about changes to non-voting membership of the Midlothian Integration Joint Board (IJB) and seeks the Board's formal endorsement of them.</p> <p><b>Members are asked to:</b></p> <ul style="list-style-type: none"> <li>• Endorse the nomination of Nick Clater as a non-voting member of the Midlothian Integration Joint Board</li> <li>• Note the formal resignation of Johanne Simpson from the role as Medical Practitioner to the Midlothian Integration Joint Board</li> </ul> <p>The report was approved by the Board.</p>			

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<p><b>For Decision</b></p> <p><b>5.6 Annual Performance Report Review for Publication - Paper presented by Elouise Johnstone, Performance Manager</b></p> <p>The Performance Manager presented the report, advising it was for decision. The purpose of the report is to update Midlothian Integration Joint Board (IJB) on the Annual Performance Report (appendix 1), providing information on the health and wellbeing of the people of Midlothian and an assessment of our performance towards achieving the 9 National Health and Wellbeing Outcomes. It also describes the financial performance of the IJB, and the quality of health and care services delivered during 2023/24.</p> <p>The Chair thanked the Performance Manager for the report and opened to any questions.</p> <p>Comments were noted on the report structure and content, with the Performance Manager and team being commended for all their hard work. The carers strategy timeline and vacancy of Board representation from carers was raised. The Integration Manager stated that the need for care has changed since the last careers strategy review. Advising this will be due for review at the publication of the next plan. The Head of Adult Services expressed the need for carers and the efforts that have been taken to fulfil the Board post. Discussions turned to the Weight Management service. The Chair asked the Chief AHP if traditional methods were still employed or if are we adapting to new methods due to the fluctuation in the area. The Chief AHP advised that the Weight Management Service is divided into 3 tiers, outlining each. Challenges around the associated costs in the current climate was stressed, restricting the adaptability we would like to have.</p> <p>The Chair thanked The Performance Manager again for the report.</p>			

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<p><b>For Decision</b></p> <p><b>5.7 Report on Commissioned Scoping Exercise on Employability &amp; Opportunities for Better Partnership Workforce Planning – Paper presented by Jim Sherval, Public Health Consultant</b></p> <p>Jim Sherval, Public Health Consultant, presented the report and advised it is for decision. The report sets out the result of the IJB commissioned scoping exercise, and presents the actions recommended by the Workforce Governance Board.</p> <p><b>Members are asked to:</b></p> <ul style="list-style-type: none"> <li>• Note the outcome of the commission and the actions being taken forward by the Workforce Governance Board</li> <li>• identify capacity from existing resources to take actions identified as priority and operational forward.</li> <li>• present these for discussion and agreement at the Workforce Governance Board</li> </ul> <p>The Chair thanked the Public Health Consultant for the report and welcomed questions.</p> <p>There was a question raised in relation to the benefits and when will we expect to see the outcomes of that. The Public Health Consultant advised these are currently in development with the Partnership.</p>			

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<p><b>For Discussion</b></p> <p><b>5.8 IJB Performance Report - Paper presented by Elouise Johnstone, Performance Manager</b></p> <p>Elouise Johnstone, Performance Manager, presented the report. The purpose of the report is to update the IJB on progress towards the IJB performance goals set for the financial year 2023/24. It was noted that the Performance Assurance and Governance Group has now been dissolved and going forward data scrutiny responsibility has been transferred to the Strategic Planning Group. The newly agreed strategic governance map was included as appendix 2 of the report. Appendix 1 contains published data.</p> <p>A slight improved is reported in relation to the A&amp;E attendance indicator. While unplanned admissions and days in acute beds failed to meet target, the link between unplanned admissions and unplanned days in acute beds is clear and that is a systemic challenge. It was noted that the end of life and balance of care figures are not available locally so there is no management data to discuss.</p> <p>Appendix 2 details the strategic governance map, with emphasis drawn to column 6, 'What difference does this make'. This column is aligned to the 9 National Health and Wellbeing Outcomes, making it easy to support information with data for annual reporting to the Scottish Government. Colour coding on the map indicates both progress towards our goals, and confidence in the evidence provided.</p> <p>The Chair thanked the Performance Manager for the report and opened it up for discussion.</p> <p>The Board commented on the clearly laid out report and asked whether Management Steering Group (MSG) indicators are still relevant as other metrics appear more relevant now. The Performance Manager confirmed that the MSG framework was designed to assess acute and secondary care</p>			



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<p>progress rather than the Integration Joint Board progress, but until legislation is revised it is a requirement to continue to report MSG. The report presented includes complementary and supplementary data, which is more relevant in telling of what the Health and Social Care Partnership and the Integration Joint Board does.</p> <p>Discussion ensued regarding whether this data was ever relevant given how all parts of the system interact has changed over the last ten years. It was noted it is necessary to use rationale to make sense of data and have the data that is necessary to make decisions. It was agreed that the lag in data makes it less informative with a view to strategic planning. Efforts are being made to make data less prominent in this work.</p> <p>The Board was advised outcomes are helpful to inform the IJB how well it is doing, and the Strategic Planning Group will review the strategic governance map columns in future meetings and issue new directions as they have a place in governance framework.</p> <p>The Performance Manager advised that her criticism of MSG is due to them maybe not being as timely or relevant to the MIJB but remain relevant to other parts of the system to make good decisions. Referring to a recent study where admissions data and emergency admissions data were used to create a reliable predictive tool for use in primary care, it was suggested this may be interesting as another point of view.</p> <p>The Board noted the improvement goals set in the report and the inclusion of the new Strategic Governance Map.</p>			

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<p><b>For Discussion</b></p> <p><b>5.9 Midlothian Drug Misuse and Alcohol Specific Deaths 2023 - Paper presented by Nick Clater, Head of Adult Services and Chief Social Work Officer and Martin Bonnar, lead officer alcohol and drug partnership (MELDAP)</b></p> <p><i>Note there were slides to be shown but due to admin issues these were not available and will be presented at the next meeting.</i></p> <p>Nick Clater, Head of Adult Services and Chief Social Work Officer presented the report.</p> <p>This report highlights pertinent areas relating to Drug Misuse and Alcohol Specific Deaths in Midlothian. It was noted Midlothian operates as a joint Alcohol and Drug Misuse Partnership with East Lothian to support drug and alcohol users (MELDAP) which is unique in Scotland.</p> <p>While drug and alcohol specific death numbers are published every year, the report outlines the 5-year average to illustrate a clearer picture of the extent of the issue in Midlothian. Published figures for 2022 showing 4 drug misuse deaths, which is uncharacteristically low. The figure increased to 20 in 2023, making the 5-year average 17.</p> <p>In terms of statistical predictions, the report indicates people living in deprived areas are 15 times more likely to die from a drug related issue than those in more affluent areas. Likewise, there is a pattern of higher risk linked to polydrug use mixed with alcohol. The increased toxicity of the different drugs combined is also compounded by the existence of mental and physical health issues in the cohort the data comes from.</p> <p>It was noted there is a stark difference in terms of drug misuse figures between England and Scotland, or when Scottish figures are compared with the rest of Europe. The Head of Adult Services and Chief Social Work Officer clarified that there is a higher prevalence of drug use in Scotland (1.62%) compared</p>	<p>Report to be updated to include suggestions for amendment requested at today's meeting and presented at another forum.</p>	<p>NC / MB</p>	<p>December 2024</p>

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<p>to EU countries (0.74%), the figure of drug users in Scotland is roughly double the rate of other countries. Highlighting the effects of increased substances in circulation, new drugs entering the scene. There are also theorised links to adverse childhood experiences to account for the figures.</p> <p>In terms of alcohol specific deaths, the report authors advised caution on how these are counted and managed. The 3-year average is 15-18%, in line with the rest of the country. As it is the case with drug specific deaths, there are often patterns like poverty indexes and physical conditions often observed in connection with these figures.</p> <p>The range of services available through MELDAP has extended over the past years to include a contact service. There is also wider coverage around Naloxone, a drug that reverses the effects of opioids, but this is not always effective as opioids are not necessarily the reason behind an overdose. Naloxone becomes less effective in the case of polydrug use. There are also situations where users may need more than one dose in order to receive the appropriate strength, and as such Naloxone doesn't always manage to save users in the event of an overdose.</p> <p>A change in the substances available in Midlothian, and an increase on the number of synthetic opioids in circulation is another concerning pattern. Last July there were 5 people who died in matter of days due to substances coming from other part of the Lothians.</p> <p>Finally, the role of Number 11 as a multi-service hub working together under the same roof was highlighted as a strength, offering support to clients of the substance misuse service but also criminal justice and mental health. This was seen as a success story in terms of services working together that should be replicated in other areas of the country and is in line with the Scottish Government's recommendation to streamline services.</p> <p>The Board asked for clarification on how many of those in these figures had been involvement with Midlothian services. Recognising that the process to acquire these figures can make answering this question tricky, it was noted generally 40 to 50% of individuals in the death statistics are already known</p>			

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<p>to services. This figure can fluctuate year on year. It was stressed that professionals strive to use every opportunity services interact with clients, to draw as many individuals at risk as possible into the service. This is due to the protective factor being known to substance misuse services has. For example, Substance Misuse Service has active referrals for an average of 300 people who are known drug and alcohol users and are less likely to suffer harm as a result of this referral.</p> <p>The Head of Adult Services clarified that a fraction of the death numbers are users who were not known to substance misuse services but may have been known to other areas like criminal justice or mental health, either at the time of their death or in the past. Highlighting the need to get as many people at risk into services to maximise the chances of working constructively with them. Reducing mortality rates related to substance use presents significant challenges, primarily due to the harmful nature of drugs circulating in the community. Additionally, the impact of each death is felt acutely by staff, as often they have known the individual through the service.</p> <p>It was noted that mental health issues tend to increase as financial situations worsen for people. It was queried whether this is reflected on the year-on-year alcohol and drug death statistics. It was noted, drug and alcohol specific deaths have largely stayed the same. The service is worried about the impact of cost-of-living issues. Figures have not been impacted by policies like minimum unit alcohol pricing. The service recognised they could be doing more given the harm alcohol does.</p> <p>The Board congratulated MELDAP for achieving so much, offering approaches not being replicated elsewhere in the country and for their good engagement with service users. In terms of user experience, the Board recommended to build the feedback of users into the report as it is such a dynamic field.</p> <p>The Board acknowledged the significance of this discussion in order to evaluate the current approach and assess the impact of risk reduction on A&amp;E figures, which should be addressed in the next version of the report.</p>			

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The Chair agreed on the need to move conversation to another forum and thanked everyone involved in the report.			
<p><b>For Discussion</b></p> <p><b>5.10 Public Health Update - Homeless Prevention Duty Paper by Jim Sherval, Public Health Consultant, and Ruth Flynn, Public Health Practitioner</b></p> <p>This agenda item was deferred until 19 December 2024 due to time constraints.</p>	Item deferred until 19 December 2024		
<p><b>For Discussion</b></p> <p><b>5.11 Integrated Assurance Report Paper presented by Claire Ross, Chief AHP</b></p> <p>This agenda item was deferred until 19 December 2024 due to time constraints.</p>	Item deferred until 19 December 2024.		
<p><b>For Discussion</b></p> <p><b>5.12 Darzi Report Discussion - Paper prepared by Gill Main, Integration Manager</b></p> <p>This agenda item was deferred until 19 December 2024 due to time constraints.</p>	Item deferred until 19 December 2024.		

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<p><b>For Discussion</b></p> <p><b>5.13 MIJB Finance Update - Paper prepared by David King, Interim Chief Financial Officer</b></p> <p>David King, Interim Chief Financial Officer presented the report, detailing the current financial situation. The Chief Financial Officer expressed his concern over the current situation and its challenges. An overspend identified in January/February 2024 was noted where reserves were still available, but this is no longer the case. The report stressed the need to keep the momentum of work done to create funding. An updated position was available since NHS has provided a financial forecast, and the Council has provided a Quarter 2 review, identifying an overspend of £8.4 million.</p> <p>The Chief Financial Officer pointed out two items of interest, 1) the health position has deteriorated, due to the challenges around the prescribing budget which continues to have an ever deteriorating overspend. It is a complicated model, with little scope for action in terms of practice as there are known issues with price and volumes. 2) the Social Care position, which had a forecasted overspend of £8.6 million, larger than the spillage in recovery plans. The updated forecast shows a £5.2 million overspend, which while still considerable it is an improvement over the quarter 1 forecast.</p> <p>The Chief Financial Officer stressed that the IJB is a strategic planning group and to deliver a strategic plan it has a budget. The Integration scheme that governs the IJB stipulates that it must refer to its Partners in case of an overspend to provide recovery actions. Health and Social Care was identified as the biggest of these partners, where most of the financial pressures lie. To identify recovery actions, there have been finance workshops and this report also considers the impact in people the IJB serves, what are the risks and mitigating actions.</p> <p>The Chief Financial Officer stressed that Midlothian Council, the Health and Social Care Partnership and the NHS have a great working relationship that is key to its success as an IJB. At present, it is clear that action must be taken to find £5.2 million due to the sizeable financial risk to the Council, and</p>	<p>Further workshop to be arranged in November to find further savings in order to bring a balanced budget by December</p> <p>IJB Chair to write to government in order to lobby for additional funding and raise awareness about the</p>	<p>DK</p>	<p>December 2024</p> <p>November 2024</p> <p>19 December 2024</p>

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<p>warned that the Board must be ready to consider further actions, giving consideration to what benefit they will deliver and what impact they will have in the population of Midlothian.</p> <p>After the workshop, next steps would be explored, looking for savings and recognising the existing budget is the only resource to deliver the strategic plan. Additional factors to consider, such as the UK budget on 30 October, and the Scottish Budget in December. Local governments have also agreed to honour pay awards which they plan to fund but that may put local authorities in a difficult position finance wise. It was also noted that several health boards across Scotland are also not breaking. After these pay awards there will be little change to fund the IJB and will not cover the pressures the system is experiencing.</p> <p>The Chief Financial Officer stressed the need to consider figures and the situation by December and determine what recovery actions will be needed so that the Board does not find themselves in crisis point. The Board was reminded of the duty to break even and have a balanced budget.</p> <p>Councillor Milligan echoed the concerns and noted that as part of the Council budget consultation the public was made aware of the very difficult decisions the Council and the Midlothian IJB is faced with. As further tranches of savings are planned, this needs to be used as an opportunity to make clear to residents. Councillor Milligan warned that the £9.4 million gap assumes that the council tax will have a 5% increase, that the pay rise will be 2% and that there will be a cash flat settlement from the Scottish Government. It was stressed that if no action is taken the gap will grow exponentially unless more funding is given, so there is the need for joint working and serious conversations to determine what it is possible to achieve.</p> <p>The Chair advised the consultation was simplified and the wording regarding Health and Social Care is aimed at seeking the public's priorities on matter. In terms of more holistic approach, the Council Leader has also written to the UK and Scottish Governments. It was suggested whether the IJB may want to</p>	<p>consequences of cuts</p> <p>Partners in the IJB to look at their services to the Board and determine red button actions in order to agree to a route map</p>		

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<p>explain the choices that may need to be made. Committee members agreed the average resident may not be aware of what the cuts may mean for them and supported letters to the Government. Councillor Milligan noted that although the Health and Social Care consultations concern important decisions, past experiences have shown take up to be poor and that as it is an invisible cost for most people.</p> <p>Increased awareness amongst Elected Members was noted relating to Board funding issues thanks to briefings. It recognised that further cuts may be necessary, with the implications of these to be made clear in briefings such as closing care homes, wards, daycare or non-statutory services. It was agreed partners would meet and consider savings and come back to the Board with proposals by November. A roadmap would be created over the next two months to give purpose to the conversation. While this may not be enough to find the gap, it was recognised the budget position had improved. Demand is ever changing as the Midlothian population changes, so it is expected next year would be as challenging if not more as due to cost pressures.</p> <p>The Chief Financial Officer reminded of the importance of sharing burdens, but the statutory delivery of Social Care belongs to Midlothian Council. While there is responsibility of breaking even, it is possible that removing the gap entirely could be detrimental. The Board agreed, noting transformational actions may be cost cutting, but will require time to plan and deliver accordingly. It was also pointed out that these actions may result in protest that will become a contentious issue between the IJB and the Council.</p> <p>While it is the Board's responsibility to break even and have a balanced budget, it is also their responsibility to keep people safe.</p> <p>The Chair thanked all members for their contributions and advised that the matter will come for discussion in the December IJB meeting where all services were asked to have their red button issues noted so a roadmap could be agreed.</p>			



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<b>Report For Noting</b> <b>5.14 Community Payback Orders Justice Report - Paper presented by Fiona Kennedy, Group Service Manager</b> The Board noted the contents of the report.	Report noted		
<b>Report For Noting</b> <b>5.15 Review of Risk Register Policy - Paper presented by David King, Interim Chief Financial Officer.</b> The Board noted the contents of the report.	Report noted		

### 5 Private Reports

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No items for discussion.

### 6 Any Other Business

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No items for discussion.

### 7 Date of Next Meeting

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A Development Session for board members only will be held on Thursday 21st November 2024, 14:00 – 16:00, development session for board members only.

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The next full board meeting of the Midlothian Integration Joint Board will be held on Thursday 19th December 2024, 14:00 – 16:00. This will be chaired by Val de Souza as Councillor McManus noted he is unable to attend this meeting due to a prior engagement.

Members were also reminded there are three upcoming briefings, one on 31 October 2024 and two town hall events on 6 November 2024.

The meeting terminated at 16.08pm.