

**East Ayrshire Health & Social Care Partnership**  
**Integration Joint Board**  
**13 December 2023 at 1pm**  
**Council Chambers, Council HQ/ MS Teams**

**Present:**

- \*Dr Sukhomoy Das, NHS Non-Executive Director (Chair)
- Mr Craig McArthur, Chief Officer
- Mr Alex McPhee, Interim Chief Financial Officer
- Dr Alexia Pellowe, Clinical Director
- Mr Neil Kerr, ADP Independent Chair
- Ms Dalene Steele, Associate Nurse Director
- \*Councillor Clare Maitland, East Ayrshire Council
- \*Councillor Jennifer Hogg, East Ayrshire Council
- \*Councillor Kevin McGregor, East Ayrshire Council (left at 2.49pm, rejoined at 3.04pm, left at 3.26pm)
- Ms Irene Clark, Stakeholder Representative
- Ms Arlene Bunton, Scottish Care Representative
- \*Councillor Neil Watts, East Ayrshire Council
- \*Neil McAleese, NHS Non-Executive Board Member
- Ms Allina Das, RCN Representative
- Ms Marion MacAulay, Chief Social Work Officer

**In Attendance:**

- Mr Erik Sutherland, Head of Locality Health & Care
- Ms Catherine Adair, Governance & Communications Manager
- Ms Moira Fenton, Health & Wellbeing Partnership Manager CVO
- Ms Vicki Campbell, Head of Primary & Urgent Care
- Ms Jo Gibson, Head of Wellbeing & Recovery
- Ms Amanda McInnes, Senior Manager Business Support
- Ms Lianne McNally, Senior Manager AHP
- Ms Lynne Rowley, Orthotics Service Manager

Aileen Anderson, Committee Secretary (Minutes)

**Observers:**

- Mr Rhys Hewitson, Graduate Intern
- Ms Hendrika Psaila, Member of the Public
- Ms Lorna McIlreavy, Engagement Officer
- Ms Judith Reid, Consultant AHP Physiotherapist

Agenda	Discussion	Action
1.	<p><b><u>Welcome &amp; Apologies</u></b></p> <p>Dr Sukhomoy Das welcomed everyone to the meeting and noted apologies from Councillor Douglas Reid, Jennifer Wilson, Sheila Cowan, Irene Allan, Kathleen Winter, Shirley Ferguson, Isabella Paton and Jim Murdoch.</p>	

2.	<p><b><u>Good News Story – HollyHealth Behavioural Change App</u></b></p> <p>Dr Alexia Pellowe delivered a presentation on the Holly Health Behavioural Change App pilot.</p> <p>It was noted that the anticipated average uptake was 2-3% and could increase to 8% in deprived areas. Two GP Practices had a higher uptake for the app and it was noted that this was through a QR code at the point of seeing patients; and targeting patients with certain long term conditions through text. Social media had already been used to promote the app however there hadn't been a high uptake through Twitter promotion.</p> <p>Councillor Maitland noted that the age demographics utilising the app may not be digitally literate and Facebook promotion may be better utilised than Twitter.</p> <p>It was recognised that the pilot had been funded through the Strategic Commissioning Board on a spend to save proposal; Dr Sabharwal had previously presented on his own GP Practice Lifestyle Intervention Work and it was noted that these could be compared at the end of the pilot to assess the cost benefits and outcome for patients.</p>	
3.	<p><b><u>Declaration of Interest</u></b></p> <p>Dr Sukhomoy Das declared an interest in the Whistleblowing Report at agenda number 8 due to his role as Whistleblowing Champion.</p>	
4.	<p><b><u>Minute of Previous Meeting held on 11 October 2023</u></b></p> <p>The minutes of the previous meeting were agreed as an accurate record of discussions.</p>	
5.	<p><b><u>Matters Arising</u></b></p> <p>Craig McArthur advised that Ewan Grant had won Support Workers of the Year at the Scottish Health Awards. Both Euan and Marchburn had been nominated from East Ayrshire and the Partnership were proud of the work and teams for their recognition.</p>	
6.	<p><b><u>Governance Report</u></b></p> <p>Mr Craig McArthur presented the report to provide the Board with an update on a change of Third Sector Representative on the Board, a proposal for nomination of an IJB representative on the Community Planning Partnership (CPP) Board, and a proposal for appointment to the membership of the Audit and Performance Committee.</p> <p>The East Ayrshire Council for Voluntary Organisations (CVO) recently advised that the previously nominated representative, Mr John Munro had moved on, and confirmed that Ms Moira Fenton, CVO Health &amp; Wellbeing</p>	

	<p>Partnership Manager would assume the role of Third Sector Representative. It was also proposed that Ms Fenton be nominated as the Interim IJB Representative on the CPP Board.</p> <p>The Terms of Reference for the Audit and Performance Committee note that a representative of the IJB Stakeholder Forum should be a member of the Committee. Following the successful recruitment of Fiona Pirrie, Co-Chief Executive Officer, East Ayrshire Carers Centre, has been nominated to join the Audit and Performance Committee as the representative.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> <li>i. Note the change of Third Sector Representative on the Board;</li> <li>ii. Approve the proposal for nomination of the Interim IJB representative on the CPP Board; and</li> <li>iii. Approve the appointment of a representative of the IJB Stakeholder Forum to the Audit and Performance Committee.</li> </ol>	
7.	<p><b><u>Financial Management Report</u></b></p> <p>Mr Alex McPhee presented the report to provide details of the projected outturn position for the East Ayrshire Health and Social Care Partnership for 2023/24, based upon the current financial position as at 30 September 2023 and including movements on Annual Budget 2023/24 approved by the Board on 29 March 2023. The report highlighted progress against approved cash releasing efficiency savings for 2023/24, as well as confirmation of funds within the IJB Reserve balance. The report also provided a summary of the projected outturn on services managed under Lead Partnership/ Hosted Services arrangements, as well as information on Acute Service budgets in relation to the large hospitals Set Aside resource within the scope of the Strategic Plan, and highlighted underlying risk factors, which had the potential to impact on the projected outturn position for 2023/24 and going forward.</p> <p>The consolidated projected outturn for the Partnership on directly managed services was an overspend of £3.381m. This represented 1% of the £335.225m adjusted directly managed services budget for the year and consisted a projected overspend of £3.996m on services commissioned from East Ayrshire Council, partially offset by a projected underspend of £0.615m on services commissioned from NHS Ayrshire &amp; Arran. The month 4 Financial Management Report which was presented at the IJB Development Day on 13 September 2023 highlighted a directly managed services projected overspend of £3.221m.</p> <p>Services continued to experience legacy issues from the Covid-19 pandemic, as well as pressures from an ageing population being looked after with multiple and complex health conditions. Within the Integration Scheme, the intention was that services would be delivered within budget. Should that not be possible, a financial recovery plan required to be developed and</p>	

approved by the IJB. Work has been undertaken to develop an initial recovery plan and this was presented in a separate report to the Board.

The overall projected overspend on directly managed services £3.381m was after taking account of a projected underspend of £0.149m related to East Ayrshire hosted services managed under routine Lead Partnership arrangements. Based on latest projections, North Ayrshire Lead Partnership services were projected to outturn by £1.408m greater than budget with South Ayrshire Lead Partnership services projected to overspend by £0.360m.

The initial directly managed services approved budget £303.754m which excluded Set Aside and Lead Partnership / Hosted Services adjustments had increased to £335.225m at 30 September 2023. This included anticipated future funding to offset projected expenditure, as well as earmarked balances to be drawn down from the IJB Reserve to offset attributable costs in the current year.

Within Children's Health, Care & Justice Services there was a projected underspend of £0.316m on outwith placements. This budget was delegated by East Ayrshire Council to the IJB and is managed through the Outwith Placements Screening Group, with representatives from Social Work, Education and Health. At 30 September 2023, the number of external residential placements was 21 and accounts for the majority of the projected cost, with the remainder relating to additional educational support needs provided by the Council's Education service and recharged against the budget delegated to the IJB. The projected overspend was after taking account of the anticipated draw down of non-recurring earmarked balances £0.526m to offset costs in the current financial year.

In 2022/23 the financial impact of Covid-19 on Outwith Placements resulted in additional costs of £0.762m. These costs arose due to delays on scheduled moves to new placement settings and changes to support plans resulting in new Outwith Placements. These costs were wholly underwritten by Scottish Government funding. If we exclude non-recurring balances, the equivalent £0.210m projected overspend at month 6 represents a positive movement in costs in the current financial year, however it was important to recognise the unpredictable nature of demand for outwith placements going forward.

Savings of £0.465m were approved for 2023/24, including a best value service review of children's houses £0.070m, alternatives to secure accommodation £0.071m, befriender service £0.007m, external foster care £0.080m, staff turnover and posts £0.237m.

Within Locality Health and Care Services the projected overspend on Learning Disability Services £1.161m was mainly due to increased staffing costs £0.168m, greater than expected spend across care at home self-directed services (options 2 and 3) £0.708m, increased spend within

	<p>residential £0.124m and increased spend within self-directed services option 1 direct payments £0.288m.</p> <p>Physical Disabilities was projected to overspend by £0.484m and was mainly due to increased spend across residential £0.407m and non-HRA Equipment budgets £0.174m. These overspends were partially offset by savings due to vacant posts £0.096m.</p> <p>In 2022/23 the financial impact of Covid-19 within Community Health and Care Services was significant, resulting in additional costs of £2.253m. The main cost pressures were sustainability payments for care homes, PPE, additional care at home staffing costs, loss of income due to both care at home and day care services. These costs were wholly underwritten by Scottish Government funding with legacy costs having an impact on care at home and care home costs in the current year.</p> <p>Savings of £2.121m had been approved for 2023/24, including redesign of whole system intervention plans £1.241m, review of care plans (Learning Disabilities) £0.390m, staff turnover £0.050m, best value service review social supports £0.102m, review overnight model of care £0.100m, review short breaks £0.080m, ADP addiction workers £0.108m and review multi-disciplinary teams £0.050m.</p> <p>For services commissioned from NHS Ayrshire &amp; Arran, the £0.615m projected underspend on directly managed services included the assumption that financial balance would be achieved within the Primary Care prescribing budget.</p> <p>There was a projected underspend of £0.198m on the Primary Care Lead Partnership budget and included a projected underspend in Dental services totalling £0.270m, where staffing numbers were running at less than establishment. Recruitment over the remainder of the financial year has potential to impact on the projected outturn position at month 6. In addition, there were projected reduced costs within Primary Care contracting and support £0.340m, largely due to staff turnover. These reduced costs were partially offset by additional costs in the GP element of Out of Hours services, as well as additional costs in the overnight nursing service, totalling £0.470m, as well as a small overspend on projected staff costs in Primary Medical Services £0.060m. Work was ongoing to address the Out of Hours increased costs as far as possible over the course of the 2023/24 financial year and will require to be resolved going forward into 2024/25. The projected outturn position assumed funding would be allocated to fully offset Urgent Care Pathway projected costs £1.198m, as well as Covid-19 Therapeutics projected costs £0.257m.</p> <p>The IJB Reserve at 31 March 2023 were formally approved by the IJB on 11 October 2023, as part of approval of the audited Annual Accounts 2022/23. The cumulative uncommitted balance £6.986m initially reduced to £6.087m after taking account of previously agreed commitments for 2023/24. The revised uncommitted balance £6.087m represents 1.8% of the adjusted</p>	
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	<p>managed services annual budget £335.225m at month 6. This was broadly in line with the aspirational 2% contingency at the end of the three year budget cycle, per the updated Reserve Strategy approved by the IJB on 23 March 2022.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> <li>i. Note the 2023/24 projected outturn position for East Ayrshire Health and Social Care Partnership at 30 September 2023, including specific key actions on significant variances;</li> <li>ii. Note the current position in respect of IJB Reserve balances, including the indicative drawdown requirement for 2023/24;</li> <li>iii. Note progress toward achievement of cash releasing efficiency savings which had been approved for 2023/24;</li> <li>iv. Note the projected outturn position in respect of services managed under Lead Partnership/ Hosted Services arrangements;</li> <li>v. Note the current position in respect of large hospital Set Aside budgets; and</li> <li>vi. Note underlying risk factors which will potentially impact over the course of 2023/24 and going forward.</li> </ol>	
8.	<p><b><u>Financial Recovery Plan</u></b></p> <p>Mr Alex McPhee presented the report to propose a financial recovery plan for East Ayrshire Health and Social Care Partnership for 2023/24, based on the current financial position as at 30 September 2023.</p> <p>The Accounts Commission’s Integration Joint Boards Financial Analysis 2021/22 report, prepared by Audit Scotland (April 2023), highlighted that all Scotland IJBs face considerable financial challenges and immense pressures on their workforce. IJBs have reached the point where significant transformation is needed to ensure the long-term capacity, financial sustainability and quality of services individuals receive. IJBs plan and commission many community-based health and care services. Demand for these services is increasing, in part due to demographic change and support for people with increasingly complex care needs, as well as legacy issues from the Covid19 pandemic.</p> <p>As highlighted within the month 6 Financial Management Report, the Partnership was projected to overspend in the current financial year. Within the Integration Scheme, the expectation is that services should be delivered within budget. Should that not be possible, a financial recovery plan requires to be developed and approved by the IJB. Work has been undertaken to develop an initial recovery plan and this was presented within the report. The recovery plan included use of uncommitted balances within the IJB Reserve, which was held to allow the IJB flexibility to manage cost pressures, demand fluctuations and deliverability of approved savings in the current year and over the medium to longer-term.</p>	



As at month 6, there is a population based projected overspend for the Health and Social Care Partnership of £4.059m. The uncommitted balance, as part of a financial recovery plan, will provide flexibility in ensuring that financial balance can be achieved for 2023/24. It was anticipated that work would be undertaken by North and South Ayrshire IJBs to reduce costs in services managed under pan-Ayrshire Lead Partnership arrangements, however there was no assumption of reduced costs included within the financial recovery plan at this stage.

To achieve overall financial balance in the current year, in addition to the proposed savings highlighted above totalling £1.280m, the recovery plan included use of uncommitted balances within the IJB Reserve totalling £2.779m. Uncommitted balances were retained in line with the IJB approved Reserve Strategy to allow greater flexibility to manage cost pressures, demand fluctuations and deliverability of approved savings in the short-term, as well as over the medium to longer-term. Work will continue to reduce non-essential expenditure as far as possible for the remainder of the financial year to minimise the draw on uncommitted balances. This will seek to ensure that uncommitted balances are maintained as far as possible, to facilitate continued budget flexibility in future years.

Following the proposed drawdown of uncommitted balances totalling £2.779m, uncommitted balances will reduce to £3.308m which represents 1% of the month 6 managed services budget.

IJBs and funding partners continue to face significant financial challenges and the financial recovery plan, set out within the report, reflected a review of budgets, financial forecasts and balances to deliver a breakeven position in the current financial year. The principles that have been applied in terms of minimising discretionary spend, vacancy control, critically reviewing earmarked funding flexibility, and taking an integrated approach to managing pressures aligns to the expectations that have also been set of NHS Boards across the country.

The 2024/25 Scottish Budget is due to be announced on 19 December 2023. It was anticipated that this will provide clarification of the Scottish Government's expectation of partner funding contributions to IJBs, as well as consequential cost implications for the forthcoming financial year. Work was underway to consider additional cost and demand pressures, aligned to savings for 2024/25, with services also now focussing on how they will need to fundamentally change over the medium to long term to maintain financial sustainability.

In advance of the Scottish Budget announcement, the Cabinet Secretary for Finance has outlined the Scottish Government's commitment to public service reform that will help deliver fiscally sustainable public services which improve outcomes and reduce inequalities. The Cabinet Secretary has also highlighted that the budget will be one of the most difficult since devolution, with some very difficult decisions to be taken.

	<p>It is inevitable that this will impact at a local level. It is intended that the transformational change programme funding retained within the IJB Reserve will be used to mitigate, as far as possible, a number of financial risks associated with cost and volume budget pressures as part of the work being taken forward through the Strategic Commissioning Board and Budget Working Group. There will however, be difficult decisions for the IJB around service provision going-forward, to ensure the sustainable and effective delivery of health and social care services aligned to the Strategic Plan.</p> <p>Taking cognisance of the challenges summarised in the report, it was clear that setting a balanced budget for 2024/25 will require a number of difficult options to be considered. The scale of the financial challenge will be clearer following the Scottish Budget announcement on 19 December 2023, however baseline pressures in 2023/24, as well as additional cost and demand pressures for 2024/25 were already significant. As a consequence, areas such as eligibility criteria for services, assessment, management of demand, and cross-cutting themes are all being critically reviewed.</p> <p>It was anticipated that the IJB Development Day on 28 February 2024 will focus on the budget for the forthcoming financial year, with initial consideration of how financial balance is to be achieved within constrained financial resources for 2024/25 and going forward. The proposed budget for 2024/25 will be presented for final consideration and formal approval at the IJB on 20 March 2024.</p> <p>Mr Craig McArthur highlighted the flexibility of reserves and recognised that this wouldn't be available in future financial years with further budget pressures anticipated.</p> <p>Councillor Maitland queried if there were any plans to increase the Reserves back to 2% however it was recognised that this was an aspirational target which took several years to reach through underspent budgets in previous years.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> <li>i. Note the 2023/24 projected outturn position for East Ayrshire Health and Social Care Partnership as at 30 September 2023, including the projected outturn position in respect of services managed under Lead Partnership/ Hosted Services arrangements;</li> <li>ii. Consider and approve the initial financial recovery plan to achieve financial balance in the current financial year; and</li> <li>iii. Note the current drawdown position in respect of IJB Reserve balances, including the indicative drawdown requirements for 2023/24.</li> </ol>	
9.	<p><b><u>Q2 Whistleblowing Report</u></b></p> <p>Ms Amanda McInnes presented the report to provide the Board with the NHS Ayrshire &amp; Arran Whistleblowing Report for Quarter 2, July to 30 September 2023.</p>	



	<p>The report noted that there were two concerns received during the period.</p> <p>Having been reviewed by the Whistleblowing Decision Team it was agreed that one of the concerns raised was not appropriate to be reviewed using the Standards as it related to personal experience. The individual who raised the concern was advised the most appropriate route to take their concerns forward. These included the use of the NHS Scotland Workforce Investigation Policy.</p> <p>The concern taken forward is a monitored referral from the Independent National Whistleblowing Officer, this is as a result of the individual contacting the INWO for advice. The concern taken forward in Q2 in ongoing, due to the complexity of the concern raised. The investigation period has been extended beyond the 20 working day timescale. The Whistleblower is aware of the need to extend the investigation period. The concern received related to Ayrshire Central Hospital and North Ayrshire Health and Social Care Partnership.</p> <p>The Board noted the report.</p>	
<p><b>10.</b></p>	<p><b><u>Community Nursing Review Update</u></b></p> <p>Ms Dalene Steele presented the report to update the Board on the outputs from the Pan-Ayrshire Community Nursing Review.</p> <p>The Community Nursing Review, which took place late 2021/early 2022, reviewed the community nursing care models being delivered across Ayrshire &amp; Arran with the aim to develop care models which meet the needs of the changing demographics. This review covered 24 hour/ 7 day per week community nursing services.</p> <p>Through the Pan Ayrshire Community Nursing Governance Group we have been progressing the work identified through the four main recommendations of the review; new models of care, workforce planning and workforce competence; IT and Digital; and governance.</p> <p>The Community Nursing review commenced in September 2021 with a focus on the current nursing care delivery models across Ayrshire and Arran with the aim to develop a model which better meets the changing needs of the people in our communities. Related to this, the review highlighted the need for improved workforce planning with clear career progression pathways for both registered and unregistered staff.</p> <p>The review included all levels of Community Nursing staff (in hours and out of hours) across teams within District Nursing, Primary Care, Community Treatment and Care (CTAC), Integrated Care Teams (ICT), General Practice Nursing (GPn) and Community Advanced Nurse Practitioners (ANPs) across NHS Ayrshire &amp; Arran.</p>	

Over the last year, not only have our front line clinicians explored new and innovative ways of designing and delivering our health and care services, but our administrative team members, Caring for Ayrshire Quality Improvement team and Programme Management have been key in supporting the rollout of the outputs from the review. Each of the four work streams have a work plan which feeds into the main Community Nursing Governance group, and the management representatives from the Health and Care Partnerships (HSCPs) are responsible for communicating this work into their governance arrangements.

A joint initiative, between Pharmacy and Community Nursing, was progressing the adherence to a wound formulae and electronic Professional Electronic Commerce Online System (PECOS) ordering of wound products. NHS Fife and NHS Tayside have been using PECOS to order both wound products and catheter supplies for a number of years. They have demonstrated cost efficiency and reduction in waste by changing the way that dressings are supplied to patients by district nurses, treatment room nurses in GP practices and Care homes by ordering through PECOS. Only formulary items are available via the PECOS system thus improving formulary compliance.

The main staff advantages identified from the Fife experience included stock delivered to base, no prescription writing, no waiting for GPs to sign prescriptions, monitoring of dressing usage, improved budget control, right product right time.

The Workforce Planning Test of Change commenced formally in September 2023 for a period of 3 months. Six staff from the clinical team agreed to be included in this initial test of change. Staffing ratios were monitored on a daily basis. The outcomes of this test, including any benefits to both patients and staff, will be brought to the Community Nursing Governance group in early 2024 for agreement for next steps.

East Ayrshire HSCP led on the IT/ Digital Work test of moving from patients and carers leaving voice messages for District Nurses to return their call to an admin colleague providing a live call service. There had been excellent feedback since it was implemented from both a service user and staff perspective. It has improved patient experience, with 12- 15% of patients who have called in being dealt with at point of call and this resulted in additional time being released for the nursing teams to provide care.

In early October 2023, positive feedback was received via a District Nurse from a palliative patient's family about how the SPOC admin team supported them during a very challenging and upsetting time.

The family member said "every single person she spoke to on the phone were very supportive, kind and made her feel at ease when she was looking to get in touch with the DN Team urgently (she mentioned \*\*\*\*\* name a couple of times too). She wanted to pass on how greatly appreciative her and the family are.

	<p>Dr Sukhomoy Das welcomed the report and the financial savings in the current financial situation.</p> <p>Discussion took place regarding the cost implications for the replacement phones for Community Nurses and it was noted that this wasn't written into the budgets but can be managed through some slippage money and is a requirement for the staff to undertake their full role.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> <li>i. Note the progress of the outputs from the Community Nursing Review whilst noting the current identified risks.</li> </ol>	
11.	<p><b><u>MAPPA Annual Report</u></b></p> <p>Ms Marion MacAulay presented the report to highlight to the Board the Annual Multi-Agency Public Protection Arrangements (MAPPA) report which was published on 27 October 2023.</p> <p>The report provided an overview and brief summary of South West Scotland MAPPA Annual Report 2022-23. East Ayrshire are statutory MAPPA partner and member of South West Scotland MAPPA.</p> <p>For governance, the MAPPA Strategic Oversight Group (SOG) report to each of the four area Chief Officers Groups (COG) on a quarterly basis, providing an overview of activity, emerging themes and any areas for development.</p> <p>The way in which people are managed is based on the risk level that multi-agency partners have agreed upon based on multi-agency information sharing and discussion. There are three MAPPA levels and they are:</p> <ul style="list-style-type: none"> <li>• Level 1 - Where a person can be safely managed, mainly by one agency;</li> <li>• Level 2 - Where more than one agency is required to implement the risk management plan;</li> <li>• Level 3 - Where a range of agencies are involved at a senior level to allocate the necessary resources to manage the case</li> </ul> <p>While the report set out the statistics for South West Scotland the latest numbers for East Ayrshire would profile that there were 189 people subject to MAPPA (both in the community and in custody). Breaking this down further there were 148 people managed in the community in September 2023, with all being registered sex offenders. In terms of MAPPA levels the following information was available; 144 - MAPPA level 1; 4 – MAPPA level 2; and 0 – MAPPA level 3.</p> <p>The annual report profiled some key activity and areas of focus for 2023-2024, in particular; Electronic Monitoring – engage in a consultation that is considering the extension of electronic monitoring which will likely lead to more people being managed in the community; Sexual Harm Prevention Orders – one of two new orders that are available to support enhanced</p>	

	<p>monitoring in the community and which supersedes the Sexual Offence Prevention Order (SOPO). This order can be used outwith the UK and the threshold for application is lower; and Sexual Risk Orders – extends protection to children and adults, whereas this was previously not the case and less prescriptive in threshold requirements.</p> <p>There were risks to the IJB if the responsibilities for the management of category 1 (Registered Sex Offenders), 2 (Restricted Patients), and 3 (Other Risk of Serious Harm Offenders) subject to MAPPA as required through the MAPPA Guidance are not met. However the annual report and regular reporting to COG provides an overview as to how these duties and responsibilities are being discharged.</p> <p>The Board noted the report and agreed the following recommendation:</p> <ul style="list-style-type: none"> <li>i. Note the work undertaken by MAPPA partners to safely manage people subject to MAPPA and keep communities safe.</li> </ul>	
12.	<p><b><u>My Health, My Care, My Home – Annual Report</u></b></p> <p>Mr Erik Sutherland presented the report to provide a summary of the Annual Progress Report for My Health, My Care, My Home – healthcare framework for adults living in care homes.</p> <p>The report presented a summary of the Annual Progress Report on the Framework considering each of the six key factors in turn. The report also provided a self-assessment against the Framework for East Ayrshire.</p> <p>The importance of MDT working was emphasised in the progress report echoing the Framework. Good practice examples illustrated this with General Practice to Care Home liaison arrangements and alignment underlined and wider pharmacy and geriatrician input also highlighted. Similarly, the report focused on the use of the Recommended Summary Plan for Emergency Care and Treatment (ReSPECT) and collaboration related to future planning. Preventative and proactive care via MDTs was shown in the report to have a positive impact on reducing Emergency Department attendances and fewer hospital admissions for care home residents.</p> <p>The role of Flow Navigation Centres was underlined in particular the access to a senior clinical decision-maker that this gives and NHS Ayrshire and Arran’s model is specifically mentioned in the progress report. Similarly, the report pointed to the work that had been undertaken in NHS Ayrshire and Arran to put in place an enhanced ‘Red Bag’ which follows the individual and included the future care plan and other key information to assist with transfers of care in urgent and emergency circumstances.</p> <p>In addition to the six core elements, the Framework contained two key enablers – a skilled and sustainable workforce, and data, digital and technology. The main developments pertaining to these enablers were the development of a post-graduate certificate in Advanced Care Home Practice,</p>	

	<p>the Project ECHO learning hubs, working with NHS National Education Service and the Scottish Social Services Council in foundation induction programmes and for developing resources such as the MyLearning app.</p> <p>Councillor Maitland welcomed the report and highlighted the need to raise awareness around families discussing their future care with the families and the importance of having a Power of Attorney in place.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> <li>i. Receive the Annual Progress Report on the Framework;</li> <li>ii. Note and comment on the contents of the report; and</li> <li>iii. Note the local self-assessed position in relation to the Framework.</li> </ol>	
13.	<p><b><u>Orthotics Options Appraisal</u></b></p> <p>Ms Lianne McNally presented the report to provide a summary of the Orthotics Service Options Appraisal for the pan Ayrshire Orthotics Service. The report was to seek approval from the Board to proceed with the recommendation to deliver an in-house Orthotics Service.</p> <p>Currently the Orthotics Service is commissioned via a private contractor. Following the options appraisal process, it was recommended that the service should move to an in-house Model.</p> <p>The Orthotics Service is delivered by Allied Health Professions (AHP) Services in East Ayrshire HSCP under the lead partnership arrangement. The service is commissioned via a private contractor and the current service level agreement expires in March 2024.</p> <p>The current service configuration includes an Orthotics Service Manager (1 WTE) employed by NHS Ayrshire and Arran who provides 0.3 WTE service management to NHS Dumfries and Galloway via service level agreement. The clinical component of the Orthotics service pan Ayrshire is delivered via a service level agreement with NHS Ayrshire and Arran and a private contractor.</p> <p>The NP610 Orthotics Framework for previous contracts was coordinated by NHS National Procurement Services Scotland. In January 2023, following a review of their current framework spend and the context that most Health Boards had brought the service in-house, it was concluded not to renew this framework.</p> <p>NHS Ayrshire and Arran extended the framework to consider the options and this framework terminates in February 2024.</p> <p>The current Orthotics service MSK 4 week waiting time performance is 23%. The performance target is 90%.</p> <p>In addition to the options appraisal outlined in the report there was improvement work to address business systems and processes. This</p>	

	<p>includes specific focus on electronic patient records and procurement of equipment and wigs.</p> <p>The options appraisal recommended an in-house model (on budget) in place of the current commissioned model.</p> <p>Following the appraisal process there were a number of financial factors that required consideration, including increasing session pricing and NHS staffing costs. Additional session funding agreed via system pressures work stream was also included.</p> <p>Due to changes in session fees and NHS pay awards, a finance review took place to ensure that the information contained in the options appraisal was robust to meet future need.</p> <p>Further session fee increases were anticipated with session fees rising by up to 20%. Based on the session costs the service would cost £179,801 to maintain the current staffing level. NHS staff costs have also increased due to recent pay awards.</p> <p>A high percentage of orthotics equipment costs were commissioned to the current private contractor. Work was being undertaken to improve systems and processes related to ordering and it was anticipated that there will be savings on equipment budget that would offset increased staff costs.</p> <p>Some posts may be subject to TUPE arrangements if the in-house model be approved.</p> <p>It was noted that the service would be require an Equality Impact Assessment however it was not anticipated that there would be an adverse impact to patients.</p> <p>A report will be taken to the NHS Board for information around changes to the service.</p> <p>The Board noted the report and agreed the following recommendations:</p> <ol style="list-style-type: none"> <li>i. Review the content of the Orthotics Service Options Appraisal report;</li> <li>ii. Comment on the recommendations of the report; and</li> <li>iii. Approve the recommendation to deliver an in-house Orthotics Service.</li> </ol>	
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**EXCLUSION OF PRESS & PUBLIC**

14.	<p><b><u>Learning Disability and Mental Health Commissioned Services BVSr</u></b></p> <p>Ms Jo Gibson presented the report to advise of the outcome of the Best Value Service Review – Learning Disability and Mental Health Commissioned Services and to seek approval to proceed with the final recommendations.</p> <p>The Board noted the report and agreed the following recommendations:</p>	
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	<ul style="list-style-type: none"> <li>i. Approve the recommendations set out in the report, noting the proposed potential saving of approximately £1,060,593; and</li> <li>ii. Task the Implementation Officer to progress final recommendations, noting the Communication and Procurement Timeline set out in the report.</li> </ul>	
15.	<p><b><u>Governance Papers</u></b></p> <p>The minutes of the following meetings were available for information:</p> <ul style="list-style-type: none"> <li>• Audit &amp; Performance Committee – 3 October 2023</li> <li>• Health &amp; Care Governance Group – 29 August 2023</li> <li>• Resilience Group – 12 September 2023</li> <li>• Risk Management Group – 10 August 2023</li> </ul>	
16.	<b><u>AOCB</u></b>	
17.	<p><b><u>Date of Next Meeting</u></b></p> <p>07 February 2024 at 2pm Council Chambers/ MS Teams</p>	