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## Minute of Integration Joint Board Meeting

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**Date:** Wednesday 13<sup>th</sup> November 2024

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**Time:** 2pm

**Place:** Elgin House

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### Present

Cllr Hugh Hunter – Voting Member, SAC (Chair)  
Cllr Cameron Ramsay - Voting Member, SAC  
Cllr Julie Dettbarn – Voting Member, SAC (via surface hub)  
Neil McAleese – Voting Member, Non-Executive, NHS (via surface hub)  
Liam Gallacher – Voting Member, Non-Executive, NHS (via surface hub)  
Linda Semple – Voting Member, Interim Chair, NHS Ayrshire and Arran

### In Attendance

Tim Eltringham - Director of Health and Social Care, HSCP  
Gary Hoey - Chief Social Work Officer, HSCP  
Billy McClean – Head of Children’s Health, Care and Justice Services, HSCP  
Mark Inglis - Head of Children’s Health, Care and Justice Services, HSCP  
Lisa Duncan - Chief Finance Officer, HSCP  
Louise Gibson - Lead Allied Health Professional Advisor, HSCP  
Sheila Tyeson – Senior Manager, Planning and Performance, HSCP  
Sally Amor - Consultant in Public Health, NHS  
Glenda Hanna – Independent Sector Representative, Scottish Care  
Rosemary Robertson – Associate Nurse Director, NHS  
Elaine Young – Head of Health Improvement/ Assistant Director of Public Health, NHS  
Martin Rogan – Representative for Carers  
Faye Murfet - Alcohol and Drug Partnership Lead Officer  
Marie Oliver – Third Sector Representative, VASA (via surface hub)  
Nadine McCall - Administration Assistant (minute taker), HSCP

### Cllr Hugh Hunter - in the Chair

Agenda	Discussion	Action
1.	<p><b>Welcome/ Apologies/ Membership Updates</b></p> <p>Apologies received on behalf of Jean Ford, Frances Ewan, Billy Cooper and Ewing Hope.</p>	
2.	<p><b>Declarations of Interest</b></p> <p>There were no declarations of interest to note.</p>	
3.	<p><b>Minute of Previous Meeting</b></p> <p>Minute of previous meeting on 11<sup>th</sup> September 2024 was agreed as an accurate record of the meeting.</p>	
4.	<p><b>Matters Arising/ Action Log</b></p> <p>S Tyeson informed that the future of Locality Planning Partnership (LPP) updates to Governance Meetings was to be discussed within Directorate Management Team Meeting, where it was agreed that annual reporting of LPPs would be implemented.</p>	
5.	<p><b>Chief Officer's Update</b></p> <p>T Eltringham advised that this report provides an update to the South Ayrshire Integration Joint Board on items that do not merit a full report, but the Board may wish to note.</p> <p>T Eltringham informed that B McClean had received an invite to attend a conference in Calgary by the International Conference of Integrated Care. This was a successful trip which raised the Partnership's profile internationally.</p> <p>T Eltringham continued to advise that the Ageing Well Strategy recently launched and has been hugely successful.</p> <p>Regarding the annual iMatter Survey for NHS Ayrshire and Arran, T Eltringham advised that this was completed in July. T Eltringham explained as Chief Officer he is fully supportive of this survey as a way for staff to have their voices heard. This year, a total of 66% of staff engaged with the survey opportunity. A total of 1,901 staff were issued with the survey and 1,258 responses were submitted. T Eltringham advised that although this has decreased slightly since last year, South Ayrshire continues to have the highest response level of the three HSCPs within Ayrshire and Arran.</p> <p>T Eltringham continued to inform that the IJB has previously been informed of the successful work which Nick Bryden, Parkinson's Nurse at Biggart Hospital and the team there have achieved. This has progressed and been recognised further.</p> <p>Within the Continence Service, Laura Rose has been successfully appointed by NICE as a Specialist Committee Member. This opportunity will increase sharing innovation and knowledge from fellow NICE colleagues. The Board congratulated Laura Rose on her appointment.</p> <p>B McClean also highlighted that Stewart Marshall and Brian Christie both attended their graduation at University of West of Scotland yesterday following</p>	

	<p>completion of their master's degrees. The Board congratulated both on their achievements.</p> <p><b>The Board noted the content of the Chief Officer's Update report.</b></p>	
6.	<p><b>Summary briefing from other Governance Meetings (if available/relevant)</b></p> <p>None to note.</p>	
<b>Items for Agreement</b>		
7.	<p><b>Budget Monitoring Period 6 – 30<sup>th</sup> September 2024</b></p> <p>L Duncan advised that the purpose of this report is to advise the IJB of the projected financial outturn for the financial year as at 30<sup>th</sup> September 2024. The report will also provide an update on progress made against approved savings and movements on the annual approved budget for 2024 - 2025. Request for approval on use of reserves, and any requests for funding from the Improvement and Innovation reserve fund, and budget virements for approval are also included.</p> <p>L Duncan advised that the integrated budget for 2024 - 2025 is £299.941m, has a projected overspend of £0.990m (0.33%) as at period 6.</p> <p>L Duncan explained that the projected overspend of £0.990m will be met in year, by use of unearmarked reserves, with a recovery plan in place to address areas of recurring financial pressure included in the budget planning process for 2025 - 2026.</p> <p>L Duncan continued to inform that the projected outturn as at the end of September 2024 is an overall overspend of £0.990m a favourable movement of £0.378m. This includes the partnerships' share of the Lead Partnership's projected outturn.</p> <p>Lisa noted that the favourable movement from period 3 of £0.378m is mainly attributed to the following:</p> <ul style="list-style-type: none"> <li>• Transfer of £1.2m from reserves to meet in year demand in residential care placements within older people and physical disabilities.</li> <li>• Allied Health Professionals favourable movement of £0.285m, due to slippage in filling of vacant posts.</li> <li>• Children with additional support needs community care packages favourable movement of £0.235m, transition cases moved to adult social care team.</li> <li>• Outwith Authority children's care packages favourable movement of £0.112m due to a reduction in external foster care.</li> <li>• Intermediate Care and Rehab Team favourable movement of £0.145m mainly due to unexpected vacancies.</li> </ul> <p><b>Offset with adverse movements in the following areas: -</b></p> <ul style="list-style-type: none"> <li>• Community hospitals adverse movements of £0.160m due to staffing cost pressures.</li> <li>• Health visiting £0.114m adverse movement due to additional students not budgeted for.</li> <li>• Unaccompanied Asylum-Seeking Children (UASC) income earmarked</li> </ul>	

	<p>£0.637m for future use, not included in projection.</p> <ul style="list-style-type: none"> <li>• Council payroll turnover target adverse movement of £0.506m not expected to be achieved following review of payroll estimates.</li> <li>• Mental Health residential placements adverse movement of £0.190m, four new placements since period 3.</li> </ul> <p>L Duncan advised that the integrated budget for 2024-25 is £299.941m, has a projected overspend of £0.990m (0.33%) as at period 6.</p> <p>L Duncan noted that they are trying to minimise the financial impact in the main areas of overspend.</p> <p>Lisa Duncan highlighted some key detail from the circulated report in relation to the Improvement and Innovation Fund and also Financial Risks and explained that the risks will continue to be monitored during the year through the budget monitoring process and operational performance reports.</p> <p>It was noted that the IJB is in a position this year that reserves are available to help mitigate any financial challenges that arise, however there is a balance that needs to be achieved in utilising reserves to support transformation and to assist in longer term financial sustainability.</p> <p>L Duncan informed that a full report will be brought to IJB Meeting on 11<sup>th</sup> December 2024.</p> <p>L Duncan summarised the recommendations from the circulated report.</p> <p>G Hanna queried in relation to the stroke pathways detailed in section 4.2.6 of the circulated report.</p> <p>L Duncan noted that this in relation to the beds being currently unavailable as they are being occupied with non-stroke service users. L Duncan advised that she has requested a further update on this.</p> <p>T Eltringham advised that emergent proposals for a community based stroke service are in development.</p> <p>A discussion ensued around the reduction in finance for Multi-Disciplinary Team (MDT) working.</p> <p>L Duncan noted that the Chair of the Chief Officers Group wrote to Scottish Government to advise that to be given this information in November regarding reduction for MDT working was poor timing. More detail is required from NHS and SAC colleagues regarding pressures and where reductions in pressures could be made.</p> <p>L Semple commended the work that has been done with the Improvement and Innovation Projects.</p> <p>L Semple questioned with regards to the neurodiversity pathway work, if South Ayrshire were doing this alone or if this was joint between the three Ayrshires.</p> <p>M Inglis explained that it was agreed through the extreme team approach that the three Ayrshires would develop their own approach. M Inglis advised that this is an ongoing piece of work where they also required to look at whole life span in South Ayrshire in respect of neurodiversity and acknowledge continuing and</p>	
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	<p>growing need in terms of adult services also.</p> <p>Cllr Dettbarn asked for clarity around how members of the public can access the neurodiversity pathway, as this is something elected members are contacted about often.</p> <p>M Inglis explained that they are currently growing the approach and the pathway is developing but has been a complex area of work. M Inglis advised that a newsletter is being developed and will be circulated in the coming weeks which will contain a lot of helpful information. At this stage the main form of communication is via school.</p> <p><b>The Board noted the content of the report and approved the recommendations.</b></p>	
<p><b>8.</b></p>	<p><b>Alcohol and Drug Partnership Budget</b></p> <p>F Murfet informed that the purpose of this report is to seek approval for the expenditure of funding for alcohol and drug services as agreed by the Alcohol and Drug Partnership (ADP).</p> <p>F Murfet advised that the ADP has undertaken a Learning Review over the past 2 and a half years and the work from this is currently being concluded. F Murfet noted that the Performance Framework has taken longer than anticipated, however will be going to ADP in December 2024 and will show the clear links between strategic outcomes and service level outcomes for ADP commissioned services.</p> <p>F Murfet shared some detail around the full year spend 2023/2024 and the proposed funding allocations for 2024/2025 as detailed within the circulated report.</p> <p>In terms of the funding allocations for 2025/2026 F Murfet advised that Scottish Government funding allocations for ADPs are not yet known, however based on the assumption of standstill funding and continuing to fund existing services, the ADP is facing significant budget pressures next year. These pressures are being factored into the budget planning processes for 2025/2026.</p> <p>Cllr H expressed that if the Scottish Government are serious about rehabilitation placements, the current funding amount of £112k for residential rehabilitation placements does not seem like much.</p> <p>F Murfet advised that she has been assured that this is a discussion that has been taking place at a national government level, as currently the Scottish Government have not confirmed how much money is available for these placements, ADPs are just encouraged to apply for the funding as and required. F Murfet noted that there is usually a quick turnaround when an admission date has been agreed for a placement and funding application has been submitted.</p> <p>F Murfet informed that it is recommended that the Integration Joint Board agrees to the funding commitments detailed within the circulated report (Appendix 1) proposed by the ADP; and agrees that the Chief Officer issue the necessary Directions, on its behalf, to South Ayrshire Council and to the NHS Ayrshire and Arran Board to give practical effect to these budget proposals.</p>	

	<p><b>The Board noted the content of the report and agreed the recommendations.</b></p>	
9.	<p><b>Childrens Services Plan Annual report</b></p> <p>M Inglis advised that the purpose of this report is to discuss and take assurance of the content of the first annual report sharing progress of the Children and Young People’s Services Plan 2023-2026 over reporting period April 2023 to March 2024.</p> <p>M Inglis informed that the Children and Young People (Scotland) Act 2014 states a requirement for every local authority and relevant health board in Scotland to jointly prepare a Children’s Services Plan, detailing plans over a three-year period.</p> <p>M Inglis explained that they have a new Children’s Services Plan for 2023-2026 which has six priority areas – The Promise, Families, Included, Voice, Healthy and People. It was noted that each priority has a group which represent members of the Children’s Services Planning Partnership and are developing a specific action plan based on data and need. M Inglis advised that the progress of these plans in contained within the Annual Report.</p> <p>It is recommended that the IJB agree the content of the Children’s Services Annual Report.</p> <p>Cllr Hunter queried how the work of the 6 priority groups is scrutinised.</p> <p>M Inglis explained that Scottish Government had provided a report regarding improvements that could be made in terms of scrutiny around performance management of the 6 priority areas. M Inglis advised that there is now a higher-level group that is scrutinising the data to ensure they are able to evidence what work they are doing within the 6 priority areas.</p> <p>E Young informed that with the review of the Local Outcomes Improvement Plan (LOIP) and each of the Service Delivery Plans, they have seen real collaboration towards those. Actions will be recorded on Pentana and evidenced through case studies. There is also annual executive scrutiny around this which feels much more robust than previously.</p> <p><b>The Board noted and agreed the content of the Childrens Services Plan Annual Report.</b></p>	
<p><b>For Information to IJB</b></p>		
10.	<p><b>Working Together to Reduce Drug Related Deaths</b></p> <p>F Murfet advised that the purpose of the report is to provide members of the Integration Joint Board with an overview of the Drug Related Deaths in Scotland in 2023 report, suspected drug related deaths in 2024, and outline actions being taken forward aimed at increasing identification of, and support for, vulnerable people at high risk.</p> <p>F Murfet highlighted some data around the number of drug related deaths in Scotland between 2018 – 2023 as detailed within the circulated report.</p> <p>F Murfet informed that in relation to Activities Aimed at Improving Identification</p>	

	<p>and Reducing Risk, members of the ADP are taking forward a range of activities aimed at improving the identification of vulnerable individuals, providing support and reducing risk. F Murfet referenced some of the work that has been ongoing.</p> <p>F Murfet advised that as part of the Local Review Process, they developed an Improvement Plan which details improvement areas identified as part of the reviewing process for all suspected drug related deaths in South Ayrshire.</p> <p>F Murfet noted several other activities aimed at improving identification and reducing risk.</p> <p>B McClean expressed that the data within the circulated report relating to Maybole area was interesting and queried whether there was an opportunity to link up with some of the locality work Stewart Marshall is undertaking.</p> <p>F Murfet advised that there is more that could be done to ensure a lot of this work is connected.</p> <p>S Amor acknowledged the positive work that is being undertaken and expressed that this is very much welcomed and that a lot of the work being implemented links with the wider work they are doing within Public Health.</p> <p>S Amor noted that in terms of where drug deaths taking place, there had been some discreet mapping work undertaken which showed that the geographical locations across South Ayrshire remained the same but that drug related deaths had increased, which would indicate the drug potency is changing.</p> <p>F Murfet expressed that nationally the threat level is high and there is no indication of a reduction in this anytime soon.</p> <p><b>The Board noted the content of the report.</b></p>	
<p><b>Any Other Business</b></p>		

**Date of Next Meeting** – Wednesday 11<sup>th</sup> December 2024