NOT YET APPROVED AS A CORRECT RECORD

GLASGOW CITY HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD

IJB(M)2018-03

Minutes of meeting held in the Sir Peter Heatly Boardroom, Glasgow City HSCP, Commonwealth House, 32 Albion Street, Glasgow, G1 1LH at 9.30am on Wednesday, 9th May 2018

PRESENT: VOTING MEMBERS

PRESENT		
VOTING MEMBERS	Cllr Ken Andrew	Councillor, Glasgow City Council
	Bailie Ade Aibinu	Councillor, Glasgow City Council
	Simon Carr	NHSGG&C Board Member
	Cllr Michelle Ferns	Councillor, Glasgow City Council
	Ross Finnie	NHSGG&C Board Member
	Jacqueline Forbes	NHSGG&C Board Member
	Cllr Mhairi Hunter	Councillor, Glasgow City Council (Chair)
	Cllr Jennifer Layden	Councillor, Glasgow City Council
	•	Councillor, Glasgow City Council
	Cllr Kim Long	
	Trisha McAuley	NHSGG&C Board Member (Vice Chair)
	Rev. John Matthews	NHSGG&C Board Member
	Cllr Jane Morgan	Councillor, Glasgow City Council
	Rona Sweeney	NHSGG&C Board Member
NON-VOTING MEMBERS	Jonathan Best	Interim Chief Operating Officer, NHSGG&C
	Margaret Hogg	Assistant Chief Finance Officer (substitute for Sharon
		Wearing from Item 8 onwards)
	Dr Graeme Marshall	Clinical Director (substitute for Dr Richard Groden)
	Margaret McCarthy	NHSGG&C Staff Representative
	Peter Millar	Independent Sector Representative
	Susanne Millar	Chief Officer Planning, Strategy & Operations / Chief Social Work Officer
	Anne Scott	Social Care User Representative
	Dr Michael Smith	Lead Associate Medical Director Mental Health and Addictions
	Chris Sermanni	Glasgow City Staff Side Representative
	Shona Stephen	Third Sector Representative
	Ann Souter	Health Service User Representative
	David Walker	Assistant Chief Officer, Corporate Strategy
	Sharon Wearing	Chief Officer, Finance and Resources
	David Williams	Chief Officer
IN ATTENDANCE:	Graeme Bryson	Lead Pharmacist, Glasgow South
	Jim Charlton	Principal Officer, Rights and Enquiries
	Allison Eccles	Head of Business Development
	Stephen Fitzpatrick	Assistant Chief Officer, Older People's Services
	Sheena Walker	•
	Sneena walker	Governance Support Officer (Minutes)
APOLOGIES:	Jeanette Donnelly	NHSGG&C Board Member
	Patrick Flynn	Head of Housing and Regeneration, Glasgow City Council
	Cllr Archie Graham	Councillor, Glasgow City Council
	Dr Richard Groden	Clinical Director
	Elaine Love	Chief Nurse Governance and Regulation, NHS GGC
	Anne Marie Monaghan	NHSGG&C Board Member

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1.	DECLARATION OF INTERESTS	
	Peter Millar and Shona Stephen declared an interest in Item 7, Scottish Living Wage Settlement (2018).	
2.	APOLOGIES FOR ABSENCE	
	Apologies for absence were noted as above.	
3.	MINUTES	
	The minutes of the meeting of the Integration Joint Board held on 21 st March 2018 were approved as an accurate record.	
4.	MATTERS ARISING	
	There were no matters arising raised.	
5.	INTEGRATION JOINT BOARD ROLLING ACTION LIST	
	Allison Eccles presented the IJB Rolling Action List, informing the Board that this was for noting.	
	Members raised that action reference number 18, ' <i>Financial Allocations and Budget for</i> 2017/18 - Report on capital costs due to remodelling a number of houses, due to change in service provision to be provided when appropriate' had been on the list since March 2017 and questioned the current position of this action. Officers advised that an update had been requested, but this had not been received.	Patrick Flynn
6.	IJB FINANCIAL ALLOCATIONS AND BUDGETS UPDATE FOR 2018/19	
	Sharon Wearing presented a paper to update the IJB on the budget for 2018-2019 and to direct the Health Board and Council to spend the budget in line with the Strategic Plan.	
	The background to the report was outlined and detail of the pressure areas to be funded, as per section 2 of the report. There was an improvement in the forecast to £3.13m in the prescribing pressure, as a result of a reduction in short supply. Expenditure for Glasgow City was predicted to grow to £135.4m before prescribing savings were applied. A prescribing summit had taken place, led by the Chief Officer from Renfrewshire HSCP and the Pharmacy Lead for NHS Greater Glasgow and Clyde, and the proposals and savings plan from this work would be rolled out across the six Partnerships. Prescribing was reported as a high risk due to the unpredictability of the market; therefore a contingency would be set aside to respond to pressures. The existing contingency for prescribing will reduce to £3.10m. A formal budget offer letter was received from the Health Board on 1 st May 2018 and a letter on the set aside budget would be received in due course.	
	The proposals for the IJB to consider in relation to the Corporate savings allocated to the IJB by Glasgow City Council were detailed at section 3.1 of the report; the savings of £0.579m represent the allocation to Social Work and the Care element of Cordia budget delegated to the IJB.	
	Members questioned the impact of savings, identified from the prescribing summit, on service users and where would they be reported. Officers confirmed that this was a clinically led approach and that the effectiveness and safety of the drugs was paramount, as well as being cost efficient. All six Partnerships were applying the savings.	

A member questioned if the Assisted Garden Maintenance review would still take place and raised issue with being unable to get through to the service via telephone. Officers confirmed that the review was underway and that they would feedback the challenge of getting through to the service via telephone.

Members referred to the Cordia care element savings of £240,000 and sought assurance that meaningful discussions had taken place with Cordia management to deliver these. Officers advised that discussions had taken place with Cordia Head of Finance and the Head of Corporate to look at some options and Cordia managers would generate savings options.

The Integration Joint Board:

- a) noted the contents of the report;
- b) agreed the update on the prescribing budget and the associated savings programme for 2018-19 as detailed at paragraph 2.4;
- c) agreed and accepted the delegated Budget from NHS Greater Glasgow & Clyde for 2018-19;
- d) delegated a budget to NHS Greater Glasgow & Clyde of: Total Budget 2018-19 £653,321,000 and directed that this budget is spent in line with the strategic plan of the Integration Joint Board;
- e) noted that the budget for set aside is still to be confirmed;
- f) agreed to the savings programme at 3.2 to 3.4 which will deliver £0.59m in relation to the corporate savings;
- g) agreed and accepted the delegated Budget from Glasgow City Council for 2018-19; and
- h) delegated a budget to Glasgow City Council of : Total Budget 2018-19 £411,843,000 and directed that this budget is spent in line with the strategic plan of the Integration Joint Board.

7. SCOTTISH LIVING WAGE SETTLEMENT (2018)

Sharon Wearing presented a report to advise Glasgow City Integration Joint Board that the Scottish Government settlement for 2018/19 includes provision for increase in Scottish Living Wage. This report covers the proposal for 2018/19.

The proposals presented were for the purchased sector and the IJB was asked to agree the recommendations outlined, as proposed at section 1.2 of the report. The implementation date would be backdated to 9th April 2018, which was in line with the DWP date. The Scottish Government had provided an allocation of £66m across Scotland to support the uplift in the Scottish Living Wage from £8.45 per hour to £8.75 per hour and this should be implemented from 1st May 2018; there was a requirement from providers to confirm that they will implement new rates. Section 4 of the report provided details of funding and the recommendations were outlined at section 5.

Members questioned if the rates applied only to adult social care workers. Officers confirmed that it did apply to adult social care workers and also purchased services for 16-18 year olds. Assurance was also provided to members that there had been significant discussions with providers regarding the increase rates. In relation to recommendation 'f' this was a contingency and to ensure there was risk strategy in place should funding cease form the Scottish Government and to allow the Council to plan for this in budget processes.

The Integration Joint Board:

a) noted the report;

b) agreed that the Partnership will offer a 2.8% uplift to Provider rates within Glasgow Purchased Services;

Sharon Wearing

		ACTION
	 c) agreed that the Partnership will offer a revised Sleepover rate of £10.86 in recognition of Scottish Living Wage requirements; d) agreed that the Partnership will apply a 2.8% uplift to Direct Payments; e) noted that this will be subject to Providers confirming they will pay the Scottish Living Wage (including sleepover services) from 9 April 2018; f) directed the Council to include the Scottish Living Wage obligations in its financial planning, should the Scottish Government funding cease; and g) noted the increase in rates to providers to create a sustainable marketplace. 	
8.	ALCOHOL AND DRUG PARTNERSHIP (ADP): PRIORITIES FOR ADDITIONAL INVESTMENT	
	Susanne Millar presented a report to advise the Integration Joint Board of new funding from the Scottish Government for alcohol and drug services.	
	Susanne advised that the anticipated letter from the Scottish Government for additional funding had not yet been received, but was expected this month and a report would be presented to a future meeting with further detail on proposals. Consideration for the funding had been discussed at the Alcohol and Drug Partnership, with a range of strategic partners and those with lived experience. The main priorities and additional priorities for investment were outlined at section 4 of the report. Work would commence on the priorities once funds had been received and the IJB were asked to support the process and early identified priorities. Officers confirmed that the priorities were not listed in order of priority.	Susanne Millar
	Members questioned the funding for the safer drug consumption facility and if this would remain set aside given the current legal position, or would the resource be used for the other priorities for additional investment. Officers reported that there was continued support and public commitment to the resource for the safer drug consumption facility, however the funds were for a one year period and these would be used for other priorities in the meantime.	
	Members also discussed the support training programme for licensed premises and the impact of minimum unit alcohol pricing. Officers explained that work took place with licensed premises to support responsible drinking. There had also been a lot of work through the health improvement team on the minimum unit alcohol pricing, but the specific impact to the city was unclear at this point in time.	
	Members raised concern of people accessing alcohol through the 'black market' and that the minimum unit pricing would not have the desired effect as alcohol misuse would still be their priority; this would also impact upon families. Officers advised that staff were working and supporting people with alcohol misuse issues and would continue to do so; there was not expected to be added issues, but positive health benefits.	
	Members also discussed the use of the mobile injecting equipment provision and if this would be more efficient than a static service. Officers explained that following the closure of the site at Central Station it had been established that there were issues in out of hours services and that the mobile provision would respond to this, as well as providing the capacity to move location if there was a shift in site use. The service was used and worked well in North Lanarkshire.	
	The Integration Joint Board:	
	 a) noted the anticipation of new funding; b) noted early engagement with ADP members on direction of travel and key investment priorities; c) supported the process and identified priorities; and d) noted that detailed proposals will come to the IJB at a future date. 	

ACTION

9. PROVISION OF EMERGENCY ACCOMMODATION FOR HOMELESSNESS

Susanne Millar presented a report to set out an ambitious proposal by the HSCP working jointly with a range of partners to upscale the implementation of a Housing First approach in Glasgow to respond more effectively to homelessness in the City, particularly for those people with multiple and complex needs, using this evidence based approach as an alternative to building new hostel provision as had been previously planned.

Susanne provided the background to the proposal and advised that the Housing First approach had successfully been delivered by Turning Point Scotland, although with small numbers, but, this was well evaluated. The recent recommendations from the Homelessness Rough Sleeping Action Group (HRSAG) had been accepted by the Housing Minister and First Minister. The Glasgow City IJB Homelessness Strategy endorses the Housing First approach, and the HSCP have been working with partners on the potential to transition to a Housing First model.

The IJB were previously advised of the requirement to re-provision the 54 bedded emergency accommodation unit with support at Clyde Place, into two x 25 bedded purpose built units which would require significant capital investment of circa £20m. The proposal was to now cease any plans to build more hostel accommodation in the city and to pursue a Housing First model for the 54 people currently in emergency accommodation. The proposal to progress this was outlined at section 3 of the report; with the use of Rodney Street for a Housing First model and support would be provided through Salvation Army. Discussions had also taken place with Social Bite, a homelessness charity which had secured commitment from the Wheatley Group to provide up to 200 tenancies for Housing First in Edinburgh and Glasgow; and it had been agreed that the HSCP can access 54 of these tenancies. Work would continue with other RSL (Registered Social Landlords) partners in the city for medium and longterm involvement.

An initial project plan and financial framework had been developed and has identified the need of £2.5m recurring revenue, with £1.1m non-recurring revenue. The work required to be undertaken at Rodney Street for the immediate moving to the unit was estimated at £2m, with a further £4m for a permanent solution. Discussions would take place with the Scottish Government and Council. The tasks and timescales were outlined at 3.4 of the report; officers acknowledged that these were challenging but were keen to be innovative and gather momentum and energy in the proposed approach.

Susanne advised the IJB that the original planning around the re provisioning of Clyde Place was connected to the wider work on our response to people with multiple and complex needs in the city, including the specific connection to the work on a Safer Drug Consumption Facility (SDCF) and Heroin Assisted Treatment (HAT). As part of the original Clyde Place replacement programme, site investigatory work had been undertaken at Hunter Street, where HSCP services are provided to complex needs clients. As the Housing First approach now removed the original proposal of new build hostels in the city, it was proposed that the site at Hunter Street be considered as a location for the Heroin Assisted Treatment (HAT) provision.

The IJB discussed the report and raised the following comments and queries:

- The work for the provision of emergency accommodation for homelessness was praised by members. The direction of travel had real significance to the homeless population of Glasgow.
- Members raised concerns that there was no consultation with the local community or elected members regarding the preferred site for the HAT service being at Hunter Street; and there was objection to the word 'preferred' being used in recommendation 'd' as it was felt that this indicated that the location for the service was already decided with no community engagement.

	Officers advised that there was a commitment to clear community engagement for the Safer Drug Consumption Facility (SDCF) and Heroin Assisted Treatment (HAT) services. Following intensive site reviews, Hunter Street was the preferred location for the provision; the client group who currently use the service were the same group who would use the HAT provision. Clinical guidance was sought and established that the site at Hunter Street was where the service needs to be. Officers were working on the premise that both provisions would co-locate, therefore when engaging with the community it could be assumed that Hunter Street is seen as a good location for the SDCF if legislation allows for progression of this in the future. The concerns were acknowledged by officers and members informed that by naming the preferred site at this point it showed openness and transparency. Engagement would take place to establish the views of the community and elected members and the HSCP was committed to this. The IJB was not asked to approve the premise of Hunter Street, but to note the preferred location and that this meets the criteria required. The decision would be made by the Council as they have responsibility for the property.	
	Officers confirmed that there were no proposals to build emergency accommodation on Hunter Street. The client group of the HAT were similar to those who used services at Hunter Street and the staff were well equipped to serve this client group. By naming the location of the Heroin Assisted Treatment (HAT) provision, this would allow the progression of the licence application for this work.	
	Officers also stated that Councillors had been offered a briefing meeting with Jim McBride, Head of Adult Services (Homelessness / Addictions / Criminal Justice) and Dr Saket Priyadarshi, Associate Medical Director and the first meeting had taken place.	
	It was agreed that recommendation 'd' outlined in the report presented would be amended to reflect the discussions of members and officer to: 'note the HSCP's preferred location for the Heroin Assisted Treatment (HAT) provision <i>and the</i> <i>commitment to engagement with local communities.</i> '	Susanne Millar
-	Concern was also expressed due to the lack of consultation regarding the move of clients to Rodney Street and that this was a different client group than the current provision.	
	Officers confirmed that there was no change in the use of the service provided or client group at Rodney Street; this was an emergency accommodation service and was registered as such with the Care Inspectorate.	
	Cllr Andrew advised that he would inform the Woodside Community Council of the response of officers and offer, if necessary, that officers from the HSCP would meet with them. This was agreed from an information only perspective.	Cllr Andrew
-	The timescales of the tasks were discussed and the period of turnaround in August of moving clients. It was questioned if the timescales were realistic for moving clients effectively and if this also allowed sufficient time for staff to be trained properly.	
	Officers responded that there was a wider project plan and care pathway work would also take place in July prior to the moves in August. There was a deliberate approach to the pace of implementation to influence the rest of the system.	
-	Members sought more information on the support packages offered to people and that as Universal Credit would be implemented in September would there be budgeting support as well as bridging of housing costs whilst people were awaiting their Universal Credit payments.	

			ACTION
		Officers reported that a training package had been developed with Turning Point Scotland; and that Salvation Army staff would be trained in the Housing First approach. Turning Point Scotland would be the trainer and accreditor for the programme. A desk top exercise had been undertaken to develop a care pathway for the known service users to ensure that support was provided and streamlined. Officers were confident of planned timescales and securing tenancies. The implementation of Universal Credit and support required had been included in the revenue costs.	
	-	Work with the criminal justice population and supporting them was discussed; and officers advised that officers were working with colleagues at HMP Barlinnie.	
	-	Members highlighted the importance of providing support to clients and that this should be sufficient from the beginning of the process. Also that discussions continue with RSLs as there had to be a long-term solution.	
	-	It was agreed that a strategic report would be presented to a future meeting on the provision.	Susanne Millar
	-	It was proposed and agreed that a development day take place for IJB members on the work of the Homelessness Rough Sleeping Action Group (HRSAG) and the role of partners.	Susanne Millar
	-	The engagement process to the Safer Drug Consumption Facility (SDCF) and Heroin Assisted Treatment (HAT) would take place through the IJB Public Engagement Committee, as previously agreed; and it was requested that this be considered by the Committee soon to identify lessons learned.	Susanne Millar
	-	The frequently asked questions booklet for the SDCF and HAT would be reviewed and updated if required and available for briefings. Briefings were also offered to local elected members.	
	Th	e Integration Joint Board:	
	b) c) d)	noted this report; agreed the proposal outlined in the paper to upscale the Housing First approach in Glasgow in line with the IJB's Homelessness Strategy; directed the Council to progress the closure of Clyde Place and re-provisioning of Rodney Street; and noted the HSCP's preferred location for the Heroin Assisted Treatment (HAT) provision and the commitment to engagement with local communities.	
10.	รเ	IPPLY OF GOODS AND SERVICES WITH CITY BUILDING GLASGOW	
	wit HS	Isanne Millar presented a report to advise the IJB of the conclusion of negotiations th City Building Glasgow for the continued provision of goods and services to the SCP in pursuance of its duty to provide emergency accommodation to homeless useholds.	
	to op	e main provisions of the proposed contract and the detail of the budget were outlined members; and that the proposed period of the contract would be three years with an tion to extend this by up to two annual extensions subject to satisfactory service <i>v</i> iew outcomes.	
	fut	report on procurement and metrics for the service was requested to be presented to a ure IJB Finance and Audit Committee in order that it can be reassured that best value being delivered for the IJB.	Susanne Millar
	Th	e Integration Joint Board:	

		ACTION
	 a) noted the contents of the report; b) noted the Council's intention to execute the agreement in respect of the functions that are delegated to the IJB in relation to the provision of temporary furnished accommodation under the Housing (Scotland) Act 1987 and the storage of homeless persons' goods; c) requested the Head of Adult Service: Homelessness, Addictions and Criminal Justice ensure adequate contract monitoring arrangements are maintained throughout the life of the contract for the good and services that are procured for the purposes of accommodating homeless households; and d) directed the Council to put in place arrangements for the repair and maintenance (etc.) of temporary furnished flats. 	
11.	ACHIEVING EXCELLENCE IN PHARMACEUTICAL CARE: A STRATEGY FOR SCOTLAND	
	Graeme Bryson presented a paper to inform the Integration Joint Board of the National Strategy for Pharmaceutical Care published in August 2017, and progress we are making on the commitments in the strategy and the areas we are working towards.	
	Graeme explained that the strategy linked to a number of national policies and was published following engagement with a range of stakeholders over a two year period. The purpose of the strategy is to present a revitalised focus and the patient is at the heart of this. The IJB was asked to approve the two commitments of improved and increased use of community pharmacy services; and pharmacy teams integrated into GP practices, as priority areas of focus for the HSCP. The pharmaceutical profession would also have an opportunity to input and shape the Primary Care Improvement Plan, and this was welcomed. It was proposed that a progress report would be presented to the IJB Performance Scrutiny Committee, by the Chief Officer, before end 2018.	David Williams
	Members welcomed the report and questioned how the GP contract impacted upon other services, as per section 4.4 of the report; and also how resource would be spent. The risks of delivery were also highlighted and if delay in national work would impact upon Glasgow. Officers advised that a paper had previously been presented to the IJB on the GP contract and the commitment to the Primary Care Improvement Plan and that this had to be developed in tandem with the GP Sub Committee. This would be a three year plan and would be presented to the IJB in June on the progress to date; with the final plan presented in September for approval. Due to funding allocation arrangements, decisions would be shown on an incremental basis. The Primary Care Improvement Plan would also manage expectation and there would be dialogue and connectivity at a national level. There was also a requirement to be involved in discussions and influence the delivery of the GP contract.	David Walker
	The Integration Joint Board:	
	 a) noted the strategic direction for pharmacy; b) approved the two commitments as priority areas of focus for HSCP staff in implementing the national strategy within Glasgow; c) noted the involvement and role of pharmacy in development of Primary Care Improvement Plan; and d) instructed the Chief Officer to provide a progress report to the IJB Performance Scrutiny Committee before the end of 2018. 	
12.	COUNCIL FAMILY REVIEW: CORDIA	
	Susanne Millar presented a report to advise the Integration Joint Board of the content of a report on the Council Family Review agreed by the City Administration Committee on 19 April 2018, the potential implications for HSCP regarding Cordia, and the proposed implementation arrangements.	
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	The report to the City Administration Committee is appended to the report and it is recommended that the Cordia homecare and associated services are transferred back to Social Work and this will be managed through the HSCP by September 2018. Engagement will take place for implementation and the Chief Finance and Resources Officer will lead GSHCP engagement. The detail of the internal work that will be undertaken was outlined at section 3.2 of the report; including routine engagement with Trade Unions and to agree their involvement in GCHSCP current liaison arrangements. The work from the corporate and GCHSCP implementation process will be reported into senior management and IJB Finance and Audit Committee prior to 30 September 2018. The report was presented to the IJB to ensure members were aware of issues and how these would be managed.	David Williams
	The report and direction of travel was welcomed by members. Members questioned how the savings allocated to the care element of Cordia, as advised in item 6, would be taken forward and what the incentive to achieve these would be if the service was transferring. Officers advised that this would be taken in to account at transition and this was part of the work being undertaken by the Chief Finance and Resources Officer to provide assurance to the IJB.	
	The options appraisal process to the decision by the Council was discussed and members advised that the information was freely available in the members' library. Cllr Hunter would also send the papers to Peter Millar.	Clir Hunter
	The scale of organisational change was discussed and the impact this would have upon service users, as well as management time. Officers advised that a methodology for service evaluation was established and for the management of change; the initial feedback would be reported to the IJB Finance and Audit Committee.	David Williams
	The Integration Joint Board:	
	 a) noted the report; and b) directed the Council and HSCP Chief Officers to ensure successful transfer of those Cordia functions due to transfer to the HSCP; and c) instructed the Chief Officer to provide an update report to the September IJB Finance and Audit Committee. 	
13.	GENERAL DATA PROTECTION REGULATIONS (GDPR) REQUIREMENTS FOR INTEGRATION JOINT BOARD	
	Jim Charlton presented a report to provide the IJB with an overview of the changes and implications arising from new Data Protection laws and the implementation of Public Records (Scotland) Act 2011. The guidance from Glasgow City Council and NHS Greater Glasgow and Clyde was appended to the report for information. Section 3 of the report outlined the key action for the IJB; two of which required approval, the appointment of a Data Protection Officer and application of GCC processes to data handling and record management activities.	
	The report and responsibility of the Board was discussed; and also if regulations would change again following Brexit. Officers advised that the GDPR requirements would still apply to European citizens residing in the UK.	
	The Integration Joint Board:	
	a) noted the actions outlined in the report; b) read and noted the requirement to comply with the attached guidance; and c) approved the proposed arrangements for appointment of a Data Protection Officer and application of GCC processes to data handling and record management activities.	
14.	UNSCHEDULED CARE PERFORMANCE UPDATE	

	 Stephen Fitzpatrick presented a report to update the IJB on progress in taking forward the strategic commissioning plan for unscheduled care approved by the IJB in March 2017, and report on the key measures being used to monitor performance. The programme focused on three themes as detailed at 2.1 of the report. Officers continued to work with Acute colleagues and a detailed report on performance was presented to the IJB Finance and Audit Committee in February 2018. The appendices to the report provided information on key national indicators and Ministerial Strategic Group for Health and Community Care (MSG) Improvement Objectives. Officers reported that progress in unscheduled care was encouraging and work was continuing to respond to significant demand on the system. The progress had also been discussed at the Health and Sport Committee the previous day. Jonathan Best advised that although progress was good and joint structures in place, challenges remained and there were 59 delays in Glasgow City that day; and a 1.7% increase in A&E attendance over the last year. Joint working would continue and efforts would contribute to progress going forward. David Williams reported that the Health and Sport Committee were praiseworthy of the HSCP, the Health Board and five other Partnerships on the issue of delayed discharges. There was also commendation at Health and Sport Committee on other work taking place including the proposed national power of attorney campaign, which had the commitment of 30 Chief Officers in Scotland and initiated in Glasgow. There was a requirement for joint and collaborative working; including the Independent and Voluntary sectors. 	
	Officers would continue to monitor performance, as well as the impact on community services, as a result of the shift in the balance of care.	Stephen Fitzpatrick
	The Integration Joint Board:	
	a) noted the progress made in taking forward the IJB's strategic commissioning plan for unscheduled care; and b) noted the associated performance measures and trajectories.	
15.	GLASGOW CITY INTEGRATION JOINT BOARD - DIRECTIONS	
	The Integration Joint Board noted the summary of current directions.	
16.	GLASGOW CITY INTEGRATION JOINT BOARD – FUTURE AGENDA ITEMS	
	The Integration Joint Board noted the future agenda items.	
17.	NEXT MEETING	
	The next meeting was noted as Wednesday, 20 th June 2018 at 9.30am in the Boardroom, Commonwealth House, 32 Albion Street, Glasgow, G1 1LH.	
	The meeting ended at 12.40pm	