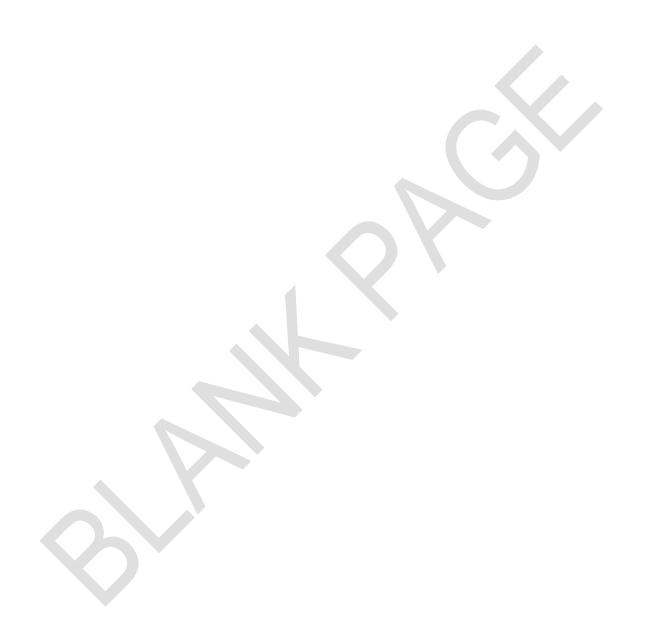






Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board				
Held on	30 January 2019				
Agenda Item	9				
Title	Audit Scotland Report: Health and social care integration: update on progress				
Summary					
This report gives an overview of the recent Audit Scotland report on progress on health and social care integration. While some improvements have been made to the delivery of health and social care services, Audit Scotland found that Integration Authorities, councils and NHS boards need to show a stronger commitment to collaborative working to achieve the real long term benefits of an integrated system. Their report contains a series of recommendations linked to 6 features that support integration.					
Presented by	Julie Murray, Chief Officer				
Action Required  The Integration Joint Board is asked to consider the findings and recommendations of the					
Audit Scotland report Health and social care integration: update on progress.					
Implications checklist – check box if applicable and include detail in report					
☐ Finance / Efficiency ☐ Policy ☐ Risk ☐ Staffing	☐ Legal ☐ Equalities   ☐ Property/Capital ☐ IT				



# **EAST RENFREWSHIRE INTEGRATION JOINT BOARD**

#### **30 January 2019**

# **Report by Chief Officer**

Audit Scotland Report: Health and social care integration: update on progress

#### **PURPOSE OF REPORT**

1. This report gives an overview of the recent Audit Scotland report on progress on health and social care integration. This report contains a number of important messages about integration and partnership arrangements that should be considered by the Integration Joint Board.

### **RECOMMENDATION**

2. The Integration Joint Board is asked to consider the findings and recommendations of the Audit Scotland report Health and social care integration: update on progress.

### **BACKGROUND**

- 3. In June 2016 Performance and Audit committee received a report on Audit Scotland's report on Changing Models of Health and Social Care, which set out some of the risks and challenges associated with transformational change in health and social care. Our local report commented that through the long standing partnership between East Renfrewshire Council and NHSGGC, East Renfrewshire is in the fortunate position of having a well-developed and integrated local health and care service. However pressures on public finance and the use of short term funding have similar implications for East Renfrewshire as elsewhere in Scotland.
- 4. In November 2018 Audit Scotland published its report Health and Social Care Integration: Update on Progress. This is the second of three national performance audits of health and social care integration following the introduction of the Act. The aim of this audit is to examine the impact public bodies are having as they integrate health and social care services. This report contains a number of important messages about integration and partnership arrangements that should be considered by the Integration Joint Board.

#### **REPORT**

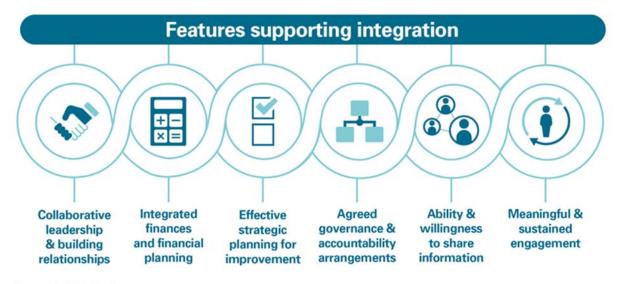
- Overall the key messages of the report are that there has been a positive start to integration across Scotland with the introduction of more collaborative ways of delivering services, reducing unplanned hospital activity and delays in discharging people from hospital. Audit Scotland considers that this shows that integration can work within the current legislative framework, but warns that Integration Authorities are operating in an extremely challenging environment and there is much more to be done.
- 6. One area of concern to Audit Scotland is that financial planning is not integrated, long term or focused on providing the best outcomes for people who need support. Financial pressures across health and care services make it difficult for Integration

Authorities to achieve meaningful change. The report also points out that most areas have not enacted the legislation that gives Integration Authorities control over some services provided by acute hospitals and their related budgets.

- 7. There is concern that strategic planning needs to improve and several significant barriers must be overcome to speed up change. These include: a lack of collaborative leadership and strategic capacity; a high turnover in leadership teams; disagreement over governance arrangements; and an inability or unwillingness to safely share data with staff and the public. Audit Scotland found that local areas that are effectively tackling these issues are making better progress.
- 8. The report comments that significant changes are required in the way that health and care services are delivered. Appropriate leadership capacity must be in place and all partners need to be signed up to, and engaged with, the reforms. Partners also need to improve how they share learning from successful integration approaches across Scotland. Change cannot happen without meaningful engagement with staff, communities and politicians. At both a national and local level, all partners need to work together to be more honest and open about the changes that are needed to sustain health and care services in Scotland.
- 9. The Audit Scotland work identified six key areas that, if addressed, should lead to broader improvements and help Integration Authorities to take positive steps toward making a systematic impact on health and care outcomes across their communities (Exhibit 7 from the report included below).

Exhibit 7
Features central to the success of integration

Six areas must be addressed if integration is to make a meaningful difference to the people of Scotland.



Source: Audit Scotland

10. Audit Scotland makes a series of recommendations to Scottish Government, Integration Authorities, councils, NHS boards, and COSLA, based on these features supporting integration. They emphasise the need for these organisations to work together to address these six areas.

# Commitment to collaborative leadership and building relationships

Scottish Government and COSLA should ensure that there is appropriate leadership capacity in place to support integration, and increase opportunities for joint leadership development across the health and care system to help leaders to work more collaboratively.

## Effective strategic planning for improvement

- 12. Integration Authorities, councils and NHS boards should work together to ensure operational plans, including workforce, IT and organisational change plans across the system, are clearly aligned to the strategic priorities of the IA.
- 13. They should monitor and report on Best Value in line with the requirements of the Public Bodies (Joint Working) (Scotland) Act 2014.
- 14. Scottish Government should ensure that there is a consistent commitment to integration across government departments and in policy affecting health and social care integration.

## Integrated finances and financial planning

- 15. Scottish Government should: commit to continued additional pump-priming funds to facilitate local priorities and new ways of working which progress integration.
- 16. Scottish Government and COSLA should: urgently resolve difficulties with the 'set-aside' aspect of the Act.
- 17. Scottish Government, COSLA, councils, NHS boards and Integration Authorities should work together to support integrated financial management by developing a longer-term and more integrated approach to financial planning at both a national and local level. All partners should have greater flexibility in planning and investing over the medium to longer term to achieve the aim of delivering more community-based care
- 18. Integration Authorities, councils and NHS boards should work together to view their finances as a collective resource for health and social care to provide the best possible outcomes for people who need support.

#### Agreed governance and accountability arrangements

- 19. Scottish Government and COSLA should support councillors and NHS board members who are also Integration Joint Board members to understand, manage and reduce potential conflicts with other roles
- 20. Scottish Government, COSLA, councils, NHS boards and Integration Authorities should work together to agree local responsibility and accountability arrangements where there is disagreement over interpretation of the Public Bodies (Joint Working) (Scotland) Act 2014 and its underpinning principles. Scenarios or examples of how the Act should be implemented should be used which are specific to local concerns. There is sufficient scope within existing legislation to allow this to happen

### Ability and willingness to share information

21. Scottish Government and COSLA should monitor how effectively resources provided are being used and share data and performance information widely to promote new ways of working across Scotland.

22. Scottish Government, COSLA, councils, NHS boards and Integration Authorities should work together to share learning from successful integration approaches across Scotland; address data and information sharing issues, recognising that in some cases national solutions may be needed; review and improve the data and intelligence needed to inform integration and to demonstrate improved outcomes in the future. They should also ensure mechanisms are in place to collect and report on this data publicly.

## Meaningful and sustained engagement

23. Integration Authorities, councils and NHS boards should work together to continue to improve the way that local communities are involved in planning and implementing any changes to how health and care services are accessed and delivered.

### FINANCE AND EFFICIENCY

- 24. Audit Scotland comment that in the past, health and social care services have not linked the resources they have to their strategic priorities or longer-term plans. IJBs, with the support of council and NHS board partner bodies, should be clear about how and when they intend to achieve their priorities and outcomes, in line with their available resources. They recommend the use of scenario planning to help build a picture of what they will need in the future. This involves looking at current trends, using this analysis to anticipate potential changes in future demand for services and any related shortfalls in available finances.
- 25. The report found that while all Integration Authorities have short-term financial plans, only a third have medium-term plans and there were no longer-term plans in place at the time of our fieldwork. This is a critical gap as the changes under integration are only likely to be achieved in the longer term.
- 26. As IJBs are local authority bodies, the statutory duty of Best Value applies to them. This means that IJBs, from the outset, must clearly demonstrate their approaches to delivering continuous improvement. We found that some aspects of Best Value are widely covered within IJBs' annual performance reports and annual accounts, including financial planning, governance and use of resources. About half of all IJBs had a section in their annual performance reports setting out how they intended to demonstrate the delivery of Best Value. Overall the coverage varies between IJBs and is often not in enough detail to allow the public to judge the IJB's activity on continuous improvement.

#### **CONSULTATION AND PARTNERSHIP WORKING**

- 27. According to the report a lack of collaborative systems leadership and difficulties in overcoming cultural differences are proving to be significant barriers to change. Partner organisations work in very different ways and this can result in a lack of trust and lack of understanding of each other's working practices and business pressures. In better performing areas, partners can identify and manage differences and work constructively towards achieving the objectives of the Integration Authority.
- 28. Throughout the report Audit Scotland recognises the challenging context Integration Authorities are operating in. This is inevitably having an impact on the extent to which they can meaningfully engage communities in discussions about improvements to services. Integration Authorities need to have in place wide-ranging and comprehensive arrangements for participation and engagement, including with local

communities. Engagement does not have to be managed and directed solely by the Integration Authority. If a local service has established relationships and means of engaging with third and independent sector providers which have proved successful, these should continue as before.

### IMPLICATIONS OF THE PROPOSALS

# **Policy**

- 29. This report is an important comment on the progress of integration. It recommends a series of actions for Integration Authorities, along with Scottish Government, Cosla NHS Boards and councils.
- 30. There are no staffing, legal, property/capital, IT or equalities implications.

### **CONCLUSIONS**

31. This report gives an overview of the recent Audit Scotland report on progress on health and social care integration. While some improvements have been made to the delivery of health and social care services, Audit Scotland found that Integration Authorities, councils and NHS boards need to show a stronger commitment to collaborative working to achieve the real long term benefits of an integrated system. Their report contains a series of recommendations linked to 6 features that support integration.

## **RECOMMENDATIONS**

32. The Integration Joint Board is asked to consider the findings and recommendations of the Audit Scotland report Health and social care integration: update on progress.

## REPORT AUTHOR AND PERSON TO CONTACT

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Chief Officer, IJB: Julie Murray

## **BACKGROUND PAPERS**

Audit Scotland Report: Health and social care integration: update on progress http://www.audit-scotland.gov.uk/report/health-and-social-care-integration-update-on-progress



Recommendation	Owner	Local Response
• Integration Authorities, councils and NHS boards should work together to ensure operational plans, including workforce, IT and organisational change plans across the system, are clearly aligned to the strategic priorities of the IA.		The HSCP links to workforce planning activity within East Renfrewshire Council feeding in strategic priorities with links to national workforce planning. An IT Business Partner links the HSCP to East Renfrewshire Council and NHSGGC provides a named person.
	IJB Chief Officer	HSCP officers will provide updated information to ERC and NHSGCC regarding the new Strategic Planning priorities and work together to ensure operational plans reflect these.
<ul> <li>They should monitor and report on Best Value in line with the requirements of the Public Bodies (Joint Working) (Scotland) Act 2014.</li> </ul>		We have tested a couple of ways of reporting on Best Value in the annual performance reports. LASAAC (The Local Authority (Scotland) Accounts Advisory Committee) guidance on accounting for the integration of health and social care. The content of this guidance has been adhered to in the production of the IJB annual report and accounts.
	IJB Chief Finance Officer.	HSCP staff will ensure Best Value monitoring and reporting is reflected in the annual performance report with supporting documents available.
<ul> <li>Scottish Government, COSLA, councils, NHS boards and Integration Authorities should work together to support integrated financial management by developing a longer-</li> </ul>		The IJB CFO is a member of the national IJB CFO Section which meets bi- monthly and the agenda includes a standing update session with both Scottish government and COSLA colleagues.
term and more integrated approach to financial planning at both a national and local level. All partners should have greater flexibility in planning and investing over the medium to longer term to achieve the aim of delivering more		The six CFOs for the IJBs which are coterminous with NHSGGC meet monthly as a group and also as a group meet monthly with NHSGGC Assistant Director of Finance.
community-based care.	IJB Chief Finance Officer.	Utilise existing meeting arrangements to progress integrated financial management and planning agenda.
		We are not aware of any regular discussion between NHS Board and Council finance leads, although there have been some national meetings.

•	Integration Authorities, councils and NHS boards should work together to view their finances as a collective resource for health and social care to provide the best possible outcomes for people who need support.	IJB Chief Officer IJB Chief Financial Officer	There will need to be discussion and agreement as to the treatment of budgets and reporting to respective partner bodies in order to develop a more integrated approach.  IJB Chief Officer will seek views on health board and council intentions in this regard. Auditors could also assist in this regard.
	Scottish Government, COSLA, councils, NHS boards and Integration Authorities should work together to agree local responsibility and accountability arrangements where there is disagreement over interpretation of the Public Bodies (Joint Working) (Scotland) Act 2014 and its underpinning principles. Scenarios or examples of how the Act should be implemented should be used which are specific to local concerns. There is sufficient scope within existing legislation to allow this to happen	IJB Chief Officer	There are no specific local issues to address at this point.
•	Scottish Government, COSLA, councils, NHS boards and Integration Authorities should work together to share learning from successful integration approaches across Scotland; address data and information sharing issues, recognising that in some cases national solutions may be needed; review and improve the data and intelligence needed to inform integration and to demonstrate improved outcomes in the future. They should also ensure mechanisms are in place to collect and report on this data publicly.	IJB Chief Officer	At a national level Health and Social Care Health and Social Care Scotland – a collaborative national identity through which those in a leadership role in the integrated arrangements for health and social care can work together through shared ownership to further progress this reform agenda- was launched at an inaugural on 7th December 2018. The conference was a celebration of integrated partnership working, which showcased exemplar projects from across the country, heard from senior figures in health and social care and deliberated on the future direction of travel for our services. This included a presentation from East Renfrewshire on the Family Wellbeing service.  There have been further national discussions since then. Greater Glasgow & Clyde partnerships currently share good practice. We will continue to work together with other partnerships nationally and across Greater Glasgow & Clyde.
•	Integration Authorities, councils and NHS boards should work together to continue to improve the way that local communities are involved in planning and implementing any changes to how health and care services are accessed and delivered.		The IJB has received reports on the innovative work of the Care Collaborative and work to involve local people in the review of the strategic priorities and plan for 2018-2019. HSCP officers on behalf of the IJB participate in community planning, which includes a focus on health and wellbeing and tackling inequalities with local communities. The HSCP works with NHGCC colleagues to support local community Moving Forward Together engagement events.
		IJB Chief Officer	A report on new locality planning arrangements will be presented shortly.