

EAST RENFREWSHIRE COUNCIL

25 June 2014

Report by Chief Executive

PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

**PURPOSE OF REPORT**

1. The report informs Council about the Public Bodies (Joint Working) (Scotland) Act 2014 and Scottish Government's consultation on accompanying draft regulations. The report highlights some of the major implications for the Council and proposes that it is advised on these matters by an internal ERC officer group.

**RECOMMENDATIONS**

2. Council is asked to:
- (a) approve the formation of an Integration Transition Programme Board to advise members of the implication of the Public Bodies (Joint Working) (Scotland) Act and accompanying regulations for Council Standing Orders and Scheme of Delegated Functions; and to oversee the development of transitional arrangements; and
  - (b) receive further report on the Integration Scheme for Health and Social Care in East Renfrewshire.

**BACKGROUND**

3. Council has received papers regarding Scottish Government proposals for the integration of health and social care. Integration of health and social care is the Scottish Government's ambitious programme of reform to improve services for people who use health and social care services.
4. The Public Bodies (Joint Working) (Scotland) Act puts in place the framework for integrating health and social care in Scotland. Integration will ensure that health and social care provision across Scotland is joined-up and seamless, especially for people with long term conditions and disabilities, many of whom are older people. In East Renfrewshire we have a long and successful experience of developing and running an integrated health and social care partnership.
5. Over the course of the Spring and Summer of 2014 the Scottish Government is consulting on the detailed legislation that will underpin the Public Bodies (Joint Working) (Scotland) Act, and the broader statutory guidance that will further support implementation of integrated service provision.
6. The Act allows Health Boards and Local Authorities to integrate health and social care services in two ways. NHS GGC and East Renfrewshire Council have agreed to work towards the first option of integration where each organisation delegates the responsibility for planning and resources for adult health and social care services to an

Integration Joint Board. In addition the organisations have agreed to include health and social care services for children and criminal justice services in the new arrangements.

7. In order to facilitate a smooth transition to the new integrated arrangements Council agreed that the CHCP Committee takes on the additional role of the shadow Integration Joint Board for 2014/15 operating with the current membership and under existing standing orders.

8. Council also agreed that the current CHCP Director takes on the additional role of Chief Officer designate of the shadow Health and Social Care Partnership. At the point the legislation enables the establishment of the full HSCP the Chief Officer designate will become the substantive Chief Officer for the new HSCP.

## **REPORT**

9. The Act requires that detail of the arrangements between ERC and NHSGGC for the Health and Social Care Partnership must be set out in an integration scheme. This document will set out the agreed model, functions and resources delegated to the Integration Joint Board. It must also set out the necessary governance arrangements and other processes and procedures that will be put in place. The Health Board and the Council must fully involve and engage key stakeholders in the development of the draft integration scheme and take into account the views expressed during this process.

10. Once the Health Board and the Local Authority have finalised the integration scheme it must be submitted to Scottish Ministers for approval. Once approved, Scottish Ministers will lay an Order before the Scottish Parliament to create the Integration Joint Board.

11. The Integration Joint Board's first responsibilities are to appoint a Chief Officer and an officer who is responsible for its financial administration. The Integration Joint Board must also establish a strategic planning group to develop its strategic plan for how it will achieve the national and local outcomes agreed in the integration scheme.

12. Strategic planning must include the formal establishment of locality arrangements for the partnership area. These arrangements, based round natural communities, will draw together professionals, staff, the third and independent sectors, carers and service users to lead the planning and delivery of services for their local community, based on their experience and knowledge of local needs, and feed this detail into the strategic plan.

13. Once the Integration Joint Board and the strategic planning group are satisfied that the strategic plan and the locality arrangements are fit for purpose, the Integration Joint Board should notify ERC and NHSGGC of the date on which the responsibility of integrated services and the associated resources should be delegated to the Integration Joint Board. From this date the Integration Joint Board, through its Chief Officer, now has responsibility for the planning, resourcing and operational delivery of all integrated services within the strategic plan.

14. The Scottish Government is consulting on the draft Scottish Statutory Instruments which will accompany the Public Bodies (Joint Working) (Scotland) Act 2014. The Government is issuing the regulations in two sets.

15. The first set of regulations specify the outcomes that integration authorities will be held accountable for; the health board and local authority functions that must be delegated to the new integration authorities; and the more detailed arrangements that must be set out

within partnerships' integration schemes. Consultation on the first set of draft Regulations runs for twelve weeks from Monday 12 May 2014 - Friday 1 August 2014.

16. The second set of regulations detail who partnerships must consult with and when; the required membership and proceedings of joint boards and committees; and what and when integration authorities must report in relation to their performance. Consultation on the second set of draft Regulations runs from Tuesday 27 May to Friday 18 August 2014.

17. A number of significant potential changes to standing orders and schemes of delegation have been noted to date:

### Changes to Committee

18. East Renfrewshire CHCP committee is a concurrent partnership - a subcommittee of NHSGGC and a subcommittee of ERC that meet at the same time and place with the same agenda. The Committee has five elected members from the Council. The Chair of the CHCP is an elected member who is on the Cabinet as the Convener for Social Work and Health and is also a Board Member of NHSGGC.

19. Under the new legislation East Renfrewshire Council and NHSGGC must establish a Joint Integration Board in place of the CHCP Committee. The Act gives Ministers powers to set out the membership and proceedings of integration boards. The regulations out for consultation state that the local authority and the health board must nominate the same number of representatives to sit on the integration joint board. The Board and the local authority must agree on the number of representatives that they will each nominate. It suggests that each organisation must put forward a minimum of three nominees each, and that local authorities can insist on a maximum of 10% of their full council number. For East Renfrewshire Council this will mean a reduction to 3 members of the Integration Board unless further membership can be negotiated with NHSGGC.

20. The draft regulations suggest that Chairperson and Vice Chairperson of the Integration Joint Board will be drawn from the Health Board and Local Authority voting members. If a Local Authority member is to serve as Chairperson, then the Vice Chairperson will be a member nominated by the Health Board and vice versa. To ensure that a stalemate cannot occur, the Chairperson will have a casting vote, in addition to their Integration Joint Board membership vote.

21. The appointment to Chairperson and Vice Chairperson is time-limited and carried out on a rotational basis. This is intended to ensure equity in decision making over time. The Health Board and Local Authority have flexibility to determine how often the Chairperson and Vice Chairperson rotate, but they must rotate at least once every three years. At the end of the period determined by the Health Board and Local Authority, if a member nominated by the Local Authority has served as Chairperson, a member nominated by the Health Board will then be appointed to the Chair and vice versa.

### Delegation of functions and resources

22. The whole of the local authority social work service is managed within the CHCP. This includes (adult, children and criminal justice) as well as the majority of community health services. It has been agreed that this should continue into the new partnership arrangements. Currently the CHCP manages aligned NHS and ERC budgets for the services it delivers.

23. Under the new Act the council is expected to delegate all adult social care and may delegate other service areas if it chooses. In discussions and policy documents issued prior to the Bill being issued there was some expectation that Ministers might require councils to delegate housing support and adaptations to the Integration Joint Board. The consultation document issued in May lists a much broader range of housing functions to be delegated than previously anticipated and clarity on this is being sought.

24. East Renfrewshire CHCP is allocated funding on an agreed basis for the defined range of functions, by the Council and NHSGGC. The CHCP Committee sets budgets for its activities within the overall allocation. The CHCP health and social care budgets are not pooled but aligned, allowing a clear track of expenditure to the allocating body. While the overall financial position is monitored and reported to CHCP Committee, separate monitoring and reporting arrangements exist for NHS and Council.

25. Under the new legislation once the resources for delegated functions are allocated to the Integration Joint Board, the Integration Joint Board makes decisions on the use of the integrated finance. The Chief Officer carries out the decisions of the Integration Joint Board and the Chief Officer (or the responsible financial officer, where that is not Chief Officer) is responsible for financial governance of those resources. When the Integration Joint Board re-allocates the resources back to the Health Board and the Local Authority, for the delivery of services, the Health Board accountable officer and local authority Section 95 officer are responsible for them.

#### Work Required

26. Further work is required to scrutinise the draft regulations in detail, consider the implications for East Renfrewshire and prepare the Council's response to the consultation.

27. Preparation for the formal establishment of a Health and Social Care Partnership in April needs to include

- Review Committee arrangements and develop new standing orders for Integration Joint Board
- Consider list of Council functions to be delegated to Integration Joint Board
- Work with NHSGGC to amend schemes of delegation and Standing Financial Instructions
- Review planning and performance reporting arrangements
- Agree accounting, budget setting and financial risk management arrangements with NHSGGC
- Ensure support arrangements for support services such as finance and HR are in line with regulation guidance
- Agree joint policies and procedures for complaints handling, Freedom of Information requests, data sharing and information management

#### **CONCLUSION**

28. East Renfrewshire has over 8 years experience of running a highly successful integrated health and care partnership. Whilst the new Public Bodies (Joint Working) (Scotland) Act does not represent a major change to local health and care services it will require some significant changes to governance and resourcing arrangements. Further detail on this is emerging as the Scottish Government consults on its more detailed draft regulations.

29. The Chief Executive wishes to form a group of senior officers to consider the implications of the Act and regulations for East Renfrewshire Council and to oversee the development of transitional arrangements.

## **RECOMMENDATIONS**

30. Council is asked to:

- (a) approve the formation of an Integration Transition Programme Board to advise members of the implication of the Public Bodies (Joint Working) (Scotland Act) and accompanying regulations for Council Standing Orders and Scheme of Delegated Functions; and to oversee the development of transitional arrangements; and
- (b) receive further report on the Integration Scheme for Health and Social Care in East Renfrewshire.

## **REPORT AUTHOR**

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Chief Executive

May 2014

## **BACKGROUND PAPERS**

[Public Bodies \(Joint Working\) \(Scotland\) Act 2014](#)

[first set of draft Regulations](#)

[second set of draft Regulations and Orders](#)

Committee Paper - [Transition from Community Health and Social Care Partnerships](#) - Report by Director of Community Health and Care Partnership Item 08 – 21 August 2013

## **KEY WORDS**

“A report setting out transition preparations for the Integration of Adult Health and Social Care”

Key words: Health and Social Care, Integration, Partnerships, Governance, Public Bodies (Joint Working) (Scotland) Bill