## ARGYLL AND BUTE COUNCIL

### **COMMUNITY SERVICES COMMITTEE**

## **COMMUNITY SERVICES**

4 JUNE 2015

# Integration of health and social care

#### 1.0 EXECUTIVE SUMMARY

- 1.1 The purpose of this report is to provide the Community Services Committee with an update on progress of the integration of health and social care in Argyll & Bute.
- 1.2 In summary the report outlines
  - the legislative requirements for integration of health and social care:
  - the model and scope of integration in Argyll & Bute;
  - progress to date in terms of appointment of a Chief Officer, Health and Social Care
  - submission of the Integration Scheme to the Scottish Government
  - work in progress towards the development of a 3 year Strategic Plan
- 1.3 The Report recommends that the Community Services Committee:
  - Notes the legislation and timescale for integration;
  - Notes the scope of delegation, profile of services and resources
  - Notes the approval process for the Integration Scheme
  - Notes progress to date on the Strategic Plan;
  - Recommends the committee continues to monitor progress and influence, where necessary, the content of the Strategic Plan.

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#### 1.0 INTRODUCTION

- 1.1 The Public Services (Joint Working) (Scotland) Act 2014 requires that all local authorities must integrate with their local health board(s), forming a Health and Social Care Partnership by 1st April 2016.
- 1.2 Argyll & Bute Council and NHS Highland Health Board will form the Argyll & Bute Health and Social Care Partnership (HSCP). Delegated responsibility and resources will be managed by Argyll and Bute Integration Joint Board (IJB), when a 3 year Strategic Plan is agreed and adopted, which will be no later than April 1<sup>st</sup> 2016. Until then the parent bodies will retain day-to-day control of resources and service delivery, with governance being overseen by NHS Highland Board and the Community Services Committee of Argyll & Bute Council.

## 2.0 RECOMMENDATIONS

It is recommended that the Community Services Committee:

- a Notes the legislation and timescale for implementation
- b Notes the scope of delegation, approval process for the Integration Scheme and progress to date on the Strategic Plan
- c Continues to monitor progress and influence the development of the Strategic Plan.

### 3.0 DETAIL

3.1 A body corporate model was agreed as the vehicle for integration in Argyll & Bute.

The scope of delegated functions in Argyll & Bute has been agreed as:

- All health services allowed within the legislation (this excludes some functions such as professional registration)
- All Adult social work
- All Children & Families social work
- All Criminal Justice social work

The Argyll and Bute HSCP will therefore be responsible and accountable for a budget of circa £250m and a workforce of circa 3,000.

- 3.2 A Chief Officer, Health and Social Care was appointed in October 2014 and took up the position in December 2014.
- 3.3 The Argyll & Bute Integration Scheme was agreed and submitted to the Scottish Government in March 2015, the Integration Scheme is the legal document which, once approved by Parliament, allows us to form the Health & Social Care Partnership.

The Integration Scheme was signed off by the Cabinet Secretary in late April 2015 and set before Parliament for 28 days. Approval for Argyll & Bute to proceed is expected to be given by the end of June 2015.

3.4 The Integration Joint Board (IJB) has been working in shadow format and will become the Integration Joint Board when parliamentary assent is given.

Membership of the IJB is as follows:

Designation	Source
Chief Officer Health and Social Care	Through appointment
Chief Social Work Officer	Through appointment
4x Board members, NHS Highland	Agreed by NHS Highland Board
4 x elected members, Argyll & Bute Council	Agreed by Argyll and Bute Council
Independent sector representative	Through Scottish Care or Community Care providers
Third sector representative	Through Third Sector Interface
Registered Nurse	Through appointment
Registered medical practitioner who is not a GP	Through appointment
Registered General Practitioner	Through appointment
Trades Union representatives to represent staff in each organisation	Through Partnership Forum
2 x Public Representatives	Through application and interview process
Carer Representative	Through application and interview process
Finance/ Section 95 Officer	Through appointment
Other members as agreed by the voting members of the IJB	Through application and interview process
In attendance:	
Integration Programme Lead	Through appointment
Minute taker	Through appointment
Other stakeholders/officers co-opted	As required

The focus of the IJB during 2015/16 will be development, planning and oversight of the production of the 3 year Strategic Plan as well as developing and establishing the integrated management and governance arrangements, including agreeing the budget to be delegated to it in order for the IJB to be ready and able to take over operational responsibility from April 1<sup>st</sup> 2016.

During 2015/16 operational responsibility for service delivery, resources and governance remains with NHS Highland and Argyll & Bute Council until the Strategic Plan is agreed and adopted, which must be no later than April 1<sup>st</sup> 2016.

3.5 A Strategic Planning Group first met in March 2015 and will meet monthly to act as the reference group for the production of the Strategic Plan.

The Strategic Plan describes how Argyll and Bute Health and Social Care Partnership will make changes and improvements to health and social services over the next three years. It explains what our priorities are, why and how we decided them and how we intend to make a difference by working closely with partners in and beyond Argyll and Bute.

The Plan is underpinned by a number of national and local policies, strategies and action plans. It will provide the strategic direction for how health and social care services will be shaped in Argyll and Bute and describes the transformation that will be required to achieve our vision – "Helping the people in Argyll and Bute live longer, healthier, happier, independent lives."

The timescale for production of the Strategic plan is:

Item	Task	Time Scale
1	Establish Strategic Planning Group- Membership, ToR, Governance	Jan/Feb 15
2	Prepare proposals about matters the strategic plan should contain	End of Mar 15
3	Consult the Strategic planning group on proposals	End of April 15
4	Produce first draft of plan for SPG consideration	End of June 15
5	Consult the Strategic planning group first draft	End of July 15
4	Prepare second draft of Strategic Plan	End of August 15
	Consult the Strategic Planning Group and wider stakeholders on Strategic plan ( 3 months)	End of November 15
5	Prepare final strategic plan	End of December 15
6	Approved by A&B HSCP IJB, NHS Board and Council and SGHD go live date agreed, delegated responsibility passed to IJB	Jan - Feb 2016
7	A&B HSCP Go Live	April 2016

## 4.0 CONCLUSION

4.1 The Integration of Health & Social Care is a legislative requirement for the whole of Scotland, it is intended to deliver services that are person-centered, high quality and outcome focused and delivers gains in efficiency and provides

best value.

The key drivers for integration are the changing demographic profile in Scotland, the increasing demand for health and care services and the financial context for the public sector.

In addition within Argyll and Bute we are faced with a falling population, including net migration of our younger people. This makes the challenges of a sustainable and high quality health and care service with an ageing workforce and a historic configuration of services and facilities significantly greater within a remote rural and island geography.

To address this will require a transformation in the way that health and care services are delivered, our vision "Helping the people in Argyll and Bute live longer, healthier, happier, independent lives" illustrates that our approach must be about supporting people to look after and maintain their own health. To this end it is clear the transformation in service provision must be at locality level "Locality planned, Locality owned and Locality delivered" will be the key development area in the HSCP Strategic Plan. .

4.2 Argyll & Bute is on target in terms of progress towards the integration of health and social care.

## 5.0 IMPLICATIONS

5.1	Policy	Policy changes required to support the transition of responsibility to Argyll & Bute Integration Joint Board
5.2	Financial	Budgets for health and social care will be fully integrated from April 1 <sup>st</sup> 2016. Finalization of the delegated budget is yet to be confirmed by both Council and NHS Highland.
5.3	Legal	Legal implications for the council and health have been assessed and included in the Integration scheme
5.4	HR	Staff will remain with their original employer, including their respective terms and conditions, policies and procedures
5.5	Equalities	The integration of Health and Social care is part of policy to address inequalities and services and arrangements will be impact assessed as this goes forward.
5.6	Risk	Formal risk assessment and mitigation process is in operation and further development

## 5.7 Customer Service

Christina West Chief Officer, Health & Social Care Integration

**Cleland Sneddon Executive Director of Community Services** 

**Policy Lead:** 

Councillor Mary-Jean Devon, Policy Lead, Health & Social Care Integration

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