



AUDIT COMMITTEE

AUDIT SCOTLAND REPORT: HEALTH AND SOCIAL CARE INTEGRATION: UPDATE ON PROGRESS

REPORT BY DEPUTE CHIEF EXECUTIVE

A. PURPOSE OF REPORT

To inform the Audit Committee of Audit Scotland's progress report on health and social care integration.

B. RECOMMENDATION

It is recommended that the Audit Committee:

1. notes Audit Scotland's findings in relation to progress against integration;
2. notes the recommendations set out by Audit Scotland as requiring to be addressed to further integration and make a meaningful difference to people in Scotland.

C. SUMMARY OF IMPLICATIONS

I Council Values	Focusing on our customers' needs; being honest, open and accountable; making best use of our resources; working in partnership.
II Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)	None.
III Implications for Scheme of Delegations to Officers	None.
IV Impact on performance and performance Indicators	The report highlights the importance of furthering integration to contribute to health and wellbeing outcomes.
V Relevance to Single Outcome Agreement	Our public services are high quality, continually improving, efficient and responsive to local people's needs.
VI Resources - (Financial, Staffing and Property)	None.
VII Consideration at PDSP	None.
VIII Other consultations	None.

D. TERMS OF REPORT

D.1 Background

Integration Authorities are collectively responsible for almost £9 billion of health and social care spending. The context for integration is increasingly challenging, with rising demand for services and increasing financial pressures on councils and NHS Boards.

The report forms part of a five-year programme of work for Audit Scotland on Integration and is the final of three performance reports Audit Scotland have carried out to better understand and to be able to assess progress with health and social care integration. The first audit report was published in December 2015. Both previous reports are listed in the reference section to this report.

The aim of this audit was to examine the impact public bodies are having as they integrate health and social care services; it does not focus in detail on local processes or arrangements.

D.2 Summary of Findings

The report found that financial planning is not integrated, long term or focused on providing the best outcomes for people who need support. It raises the concern that this limits the ability of Integration Authorities (IAs) to improve the health and social care system. Furthermore, the report found that, in most areas, the legislation that allows IAs to control some services provided by acute hospitals and their related budgets, has not been enacted.

Strategic planning needs to improve and significant barriers to this were highlighted, including: a lack of collaborative leadership and strategic capacity; a high turnover in IA leadership teams; disagreement over governance arrangements; and an inability or unwillingness to safely share data with staff and the public. Local areas that are effectively tackling these issues are making better progress.

The report also highlighted the need for appropriate leadership capacity being in place and all partners being signed up to, and engaged with, the reforms if change is to happen. There needs to be more sharing of best practice and there should be 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 required to sustain health and care services.

Part 2 of the report includes examples of where Integration is working well.

D.3 Recommendations

The report sets out six areas which need to be addressed if integration is to make a meaningful difference to the people of Scotland. The recommendations are as follows:

1. Commitment to collaborative leadership and building relationships

The 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.

2. Effective strategic planning for improvement

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, and monitor and report on Best Value in line with the requirements of the Public Bodies (Joint Working) (Scotland) Act 2014.

The Scottish Government should ensure that there is a consistent commitment to integration across government departments and in policy affecting health and social care integration.

3. Integrated finances and financial planning

The Scottish Government should commit to continued additional pump-priming funds to facilitate local priorities and new ways of working which progress integration.

The Scottish Government and COSLA should urgently resolve difficulties with the 'set-aside' aspect of the Act.

The 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.

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.

4. Agreed governance and accountability arrangements

The 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.

The 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.

5. Ability and willingness to share information

The 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.

The 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; and 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.

6. Meaningful and sustained engagement

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.

E. CONCLUSION

Audit Scotland state in the report that the findings evidence that integration can work and that the Act can be used for system change. There is evidence that integration is enabling joined up and collaborative working, leading to improvements in performance, such as a reduction in unplanned hospital activity and delays in hospital discharges. However, the report acknowledges the challenging environment IAs are operating in and finds that the remaining challenges are significant. It finds that success will depend on long term integrated financial planning and stable and effective leadership.

F. BACKGROUND REFERENCES

[Audit Scotland Report: Health and Social Care Integration dated 3 December 2015](#)

[Audit Scotland Report: What is Integration? dated 12 April 2018](#)

Appendices/Attachments: Audit Scotland report: Health and Social Care Integration: Update on Progress

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