



West Lothian
Council



West Lothian Shadow Integration Joint Board

West Lothian Civic Centre
Howden South Road
LIVINGSTON
EH54 6FF

26 May 2015

A meeting of the **West Lothian Shadow Integration Joint Board** of West Lothian Council will be held within the **Strathbrock Partnership Centre, 189 (a) West Main Street, Broxburn EH52 5LH** on **Tuesday 2 June 2015** at **2:00pm**.

For Chief Executive

BUSINESS

Public Session

1. Apologies for Absence
2. Order of Business, including notice of urgent business
3. Declarations of Interest - Members should declare any financial and non-financial interests they have in the items of business for consideration at the meeting, identifying the relevant agenda item and the nature of their interest.
4. Confirm Minute of Meeting of West Lothian Community Health and Care Partnership Board held on Tuesday 07 April 2015 (herewith)
5. Membership - Arrangements for Appointment of Voting Members and Non-Voting Members - Report by Director (herewith)
6. IJB Governance and Decision-Making - Report by Director (herewith)
7. Strategic Planning Group - Report by Director (herewith)
8. Provision of Support Services and Proposed Report Template - Report by Director (herewith)

DATA LABEL: Public

9. Organisational Development and Training Session for Members of the West Lothian Integration Joint Board - Report by Head of Health Services (herewith)
10. JIT Readiness for Integration Tool - Report by Director (herewith)

NOTE **For further information contact Anne Higgins, Tel: 01506 281601 or email: anne.higgins@westlothian.gov.uk**

MINUTE of MEETING of the WEST LOTHIAN COMMUNITY HEALTH AND CARE PARTNERSHIP BOARD of WEST LOTHIAN COUNCIL held within STRATHBROCK PARTNERSHIP CENTRE, 189(A) WEST MAIN STREET, BROXBURN EH52 5LH, on 7 APRIL 2015.

Present – Frank Toner (Chair), Brian Houston, Jane Houston, John McGinty, Anne McMillan and Ed Russell-Smith

Apologies – Janet Campbell

Absent – Alison Mitchell

In attendance – Jim Forrest (CHCP Director), Jane Kellock (Interim Head of Council Services), Dr Elaine Duncan (Clinical Director), Gill Cottrell (Chief Nurse, NHS Lothian), Alan Bell (Senior Manager, Communities and Information) and Ian Buchanan (PPF)

Apologies – Marion Christie (Head of Health Services) and Carol Mitchell (Assistant Director of Finance, NHS Lothian)

1. DECLARATIONS OF INTEREST

Councillor Frank Toner declared a non-financial interest as he was the council's appointment to the Board of NHS Lothian as Non-Executive Director.

2. MINUTE

The Board approved the minute of its meeting held on 3 February 2015 as a correct record.

3. CHCP RUNNING ACTION NOTE

The Board considered the Running Action Note (which had been circulated).

Decision

To note and agree the Running Action Note.

4. NOTE MINUTE OF MEETING OF THE CHCP SUB-COMMITTEE

The Board noted the minute of the CHCP Sub-Committee held on 18 December 2014.

5. FRAIL ELDERLY PROGRAMME

The Board noted a presentation by the Senior Manager Community Care

Support and Services, providing an update on the programme of change relating to the frail elderly programme pathway.

The main objective of the frail elderly programme was to redesign the pathway to deliver a quality, financially sustainable and cost effective service provision which would meet the health and care needs of frail elderly adults, reducing hospital admissions and re-admissions and minimise delayed discharges. The Board was advised that there would be four distinct projects within the overall programme, each of which would have their own separate project organisation and controls. The projects would report to a programme board on a monthly basis.

The programme would be consistent with the requirement of the integrated health and care partnership to prepare a strategic commissioning plan, establishing the arrangements for delivery of integrated functions and how these arrangements would achieve the national health and wellbeing outcomes.

The Board commended the work carried out to redesign the delivery of the frail elderly programme service provision.

Following the conclusion of the presentation the Board considered a report (copies of which had been circulated) by the Community Health and Care Partnership Director providing details of the programme of change proposed by West Lothian to apply across the whole frailty pathway.

The report recalled that West Lothian has a positive approach to partnership working between health and social care and examined the options to build upon this solid foundation of partnership working to apply a whole system redesign across the whole frailty pathway.

The programme would result in sustainable and cost effective service provision which would meet the health and care needs of frail elderly adults, reducing hospital admission and re-admission and minimise delayed discharge. West Lothian's Frail Elderly Programme would be an important contribution to the requirement of the integrated health and care partnership to prepare a strategic commissioning plan, establishing the arrangements for delivery of integrated functions and how these arrangements would achieve the national health and wellbeing outcomes.

The Board supported the establishment of the Frail Elderly Programme.

Decision

1. To note the presentation; and
2. To approve the terms of the report.

6. HEALTH AND SOCIAL CARE INTEGRATION.

The Board considered a report (copies of which had been circulated) by the Community Health and Care Partnership Director providing an update

on the progress made relating to the implementation of the Public Bodies (Joint Working) (Scotland) Act 2014.

The report recalled the background to the Public Bodies (Joint Working) (Scotland) Act 2014 which required new arrangements to be put in place for the delivery of integrated health and social care functions. A draft integration Scheme was developed for West Lothian in line with the model issued by the Scottish Government. The agreed draft was approved for public consultation which took place from 15 January until 20 February 2015. All prescribed consultees were given the opportunity to comment on the draft scheme. The draft scheme was also posted on the West Lothian Community Health and Care Partnership website to allow wider exposure and comments invited. The draft scheme was also considered and approved by NHS Lothian at its Board meeting on 4 March 2015.

The report went on to provide details of the consultation responses received, which were reviewed and taken into consideration in the production of the final version of the scheme. No changes were considered to be necessary as a result.

The revised draft scheme was submitted to the Council Executive for approval on 10 March 2015. The Council Executive agreed the scheme subject to an amendment being made to the Chairperson's term of office. The revised wording has since been agreed with NHS Lothian and approved by Council Executive at its meeting held on 24 March 2015, a copy of which was attached as an appendix to the report. The draft Integration Scheme was therefore approved for submission to Scottish Ministers by the due date of 31 March 2015.

The Board was asked to note the progress made to date to implement the Public Bodies (Joint Working) (Scotland) Act 2014.

Decision

To note the terms of the report.

7. CLINICAL GOVERNANCE: DEVELOPMENT OF A RISK REGISTER FOR WEST LOTHIAN PRACTICES

The Board considered a report (copies of which had been circulated) by the Clinical Director providing details of the development of a risk assessment tool to identify vulnerable practices.

The report explained that over the last 1-2 years a number of practices in West Lothian found it challenging to maintain service provision and requested assistance from West Lothian CHCP. In July 2014 West Lothian CHCP carried out a workforce survey to measure the recruitment issues practices were facing. Due to the number of practices affected and further practices reaching crisis point and requiring assistance, the need to identify vulnerable practices in a timely manner and work with them to improve their resilience became a priority.

A risk register for West Lothian practices was developed and designed to

provide an indication of the practices robustness and resilience and their ability to cope with adversity. This would help to identify vulnerable practices before their ability to maintain service provision was compromised and would enable work to be carried out to strengthen the areas that were putting them at risk. Some crisis incidents could arise unexpectedly and there was little that could be done to prevent these, however other crises start out as “accidents waiting to happen” and it was these cases that would be identified through the risk register.

The Board was advised that the Risk Register was not yet fully developed and certain information was lacking for some practices. Details of how the register was constructed was provided and once completed, the register would provide the opportunity to target those practices which were “below the radar” but scoring at the higher end of the spectrum, to discuss ways of improving resilience and strengthen their ability to maintain service continuity.

The report went on to explain the next steps that would be taken to refine the register to provide more graded weightings to the different elements to enable the information to be mapped to the domains of the National Patient Safety Matrix. Within West Lothian there were a number of approaches that could be looked at which would help to strengthen the service as a whole.

The Board was asked to:

1. Note the contents of the report;
2. Be reassured that West Lothian CHCP were being pro-active in identifying and supporting practices in difficulty to maintain service continuity throughout West Lothian; and
3. Support new initiatives to maintain and develop care provision in West Lothian.

Decision

To approve the terms of the report.

8. CARE GOVERNANCE

The Board considered a report (copies of which had been circulated) by the Interim Head of Social Policy providing details of the Social Policy Management Plan 2015-2016.

The report explained that as a means of delivering outcomes effectively and efficiently, West Lothian Council identified Management Plans as an essential driver for the provision of excellent services. As such they were collated and presented at the service group level, under the responsibility of the Head of Service. The Social Policy Management Plan 2015/16 was attached as an appendix to the report and set out how the service would drive performance and be utilised by the management team and stakeholders to assess and gauge performance and improvement. The

measurers, targets and actions of the plan would be available for management monitoring and reporting on the corporate performance management system (Covalent).

The Board was asked to note the details of the Social Policy Management Plan 2015-2016.

Decision

To note the terms of the report.

9. STAFF GOVERNANCE

The Board considered a joint report (copies of which had been circulated) by the Interim Head of Social Policy and the Head of Health Services providing an update on staff issues within the Community Health and Care Partnership.

The report provided details of the new regulations relating to Shared Parental Leave; the recently launched mediation service; details of the Lothian Pension Fund roadshow scheduled to be held in April 2015; Employee Health and Wellbeing and policies relating to Tobacco and Substance Misuse.

The Board was asked to note updates on the following:

1. Shared Parental Leave;
2. Mediation Service;
3. Lothian Pension Fund;
4. Employee Health and Wellbeing; and
5. Policies on Tobacco and Substance Misuse.

Decision

To note the contents of the report.

10. DIRECTOR'S REPORT

The Board considered a report (copies of which had been circulated) by the Community Health and Care Partnership Director providing an update on key areas of work in which the partnership had been involved since the last meeting of the Board.

Decision

To note the information and work undertaken in relation to:-

1. Head of Social Policy role;

2. Brock Garden Centre;
3. National Care Homes Falls Booklet;
4. Faith Handbook; and
5. West Life.

West Lothian Shadow Integration Joint Board

Date: 2 June 2015

Agenda Item: **5**

MEMBERSHIP – ARRANGEMENTS FOR APPOINTMENT OF VOTING MEMBERS AND NON-VOTING MEMBERS

REPORT BY DIRECTOR

A PURPOSE OF REPORT

The purpose of this report is to ask the shadow Integration Joint Board (IJB) to consider the membership requirements and arrangements of the IJB.

B RECOMMENDATION

It is recommended that the shadow IJB formally notes its prescribed membership and agrees the process to identify and approve the discretionary members.

C TERMS OF REPORT

The Public Bodies Joint Working (Integration Joint Boards) (Scotland) Order 2014 sets out requirements regarding the membership of the IJB. This includes minimum prescribed membership and provision for additional discretionary members to be appointed.

There are two categories of IJB membership. The first category is voting members, made up of representatives nominated by the Health Board and Local Authority (the Parties). The second category is non-voting (advisory) members.

West Lothian Council and NHS Lothian have confirmed the eight voting IJB members.

WEST LOTHIAN COUNCIL	NHS LOTHIAN
Frank Toner (Chair)	Julie McDowell
Anne McMillan	David Farquharson
John McGinty	Alex Joyce
Danny Logue	Alison Meiklejohn

The IJB will make decisions about how health and social care services are planned and delivered across communities in West Lothian. To do this effectively professional advice will be required to ensure decisions reflect sound clinical and care practice. It is also essential that the IJB includes key stakeholders within the decision-making processes.

The Order therefore sets out a minimum requirement for the non-voting advisory members and allows flexibility to add additional nominations as the Parties see fit (subject to those members not being a Health Board member or a Councillor). The minimum advisory membership required is

- Chief Social Work Officer
- GP
- Secondary care representative
- Nurse representative
- Staff-side representative
- Third sector representative
- Carer representative
- Service user representative
- Chief Officer of the IJB
- Section 95 Officer of the IJB

In order to assist in the integration process, West Lothian Council and NHS Lothian agreed that it would be appropriate for there to be two Board members appointed in respect of the combined staff of the Parties engaged in the provision of the delegated services covered by the scheme. That cannot be imposed on the Board as a requirement, since the Board must appoint its own additional Board members after it is established, but the Parties have agreed that they will co-operate in promoting that additional appointment.

Permission is therefore sought to proceed with the process to recruit non-voting members for consideration at the next meeting of the shadow IJB.

D CONSULTATION

None required.

E REFERENCES/BACKGROUND

The Public Bodies (Joint Working) (Integration Joint Boards) (Scotland) Order 2014 (http://www.legislation.gov.uk/ssi/2014/285/pdfs/ssi_20140285_en.pdf)

F APPENDICES

None.

G SUMMARY OF IMPLICATIONS

Equality/Health	The report has been assessed as having little or no relevance with regard to equality or the Public Sector Equality Duty. As a result, an equality impact assessment has not been conducted.
National Health and Wellbeing Outcomes	None.
Strategic Plan Outcomes	None.
Single Outcome Agreement	None.
Impact on other Lothian IJBs	None.
Resource/finance	None.
Policy/Legal	Compliance with the Public Bodies (Joint Working) (Scotland) Act 2014
Risk	None.

H CONTACT

Jim Forrest, Director
01506 281977
jim.forrest@westlothian.gov.uk

2 June 2015

West Lothian Shadow Integration Joint Board

Date: 2 June 2015

Agenda Item: **6**

IJB GOVERNANCE AND DECISION-MAKING

REPORT BY DIRECTOR

A PURPOSE OF REPORT

To set out the structures and procedures which will be required of the Board in relation to governance and decision-making, both in terms of the relevant legislation and good practice.

B RECOMMENDATION

1. To note the legislative requirements for the Board's governance and decision-making processes and procedures, and the advice in relation to good practice in governance terms
2. To note that officers will develop and prepare for approval a set of Standing Orders for Board Meetings
3. To agree that those Standing Orders should include a proposal for a committee to deal with risk, audit and governance; roles and responsibilities of Board members; and roles and responsibilities for the Board's Director and Finance Officer
4. To note and agree the proposed meeting arrangements for the shadow Board and then for the Board when formally established, as set out in Appendix 1.

C TERMS OF REPORT

Introduction

In terms of statutory rules made under the Public Bodies (Joint Working)(Scotland) Act 2014 ("the 2014 Act") the Board requires to make Standing orders regulating its proceedings. Those rules also set out certain minimum requirements to be included in such Standing Orders whilst leaving other matters for inclusion at the Board's discretion. In some areas they stipulate the particular terms which must be included, and in others they leave the detail for local decision.

In addition to the statutory rules, there are other provisions which experience shows are necessary elements of Standing Orders to ensure “good” decisions are taken, not in the sense of the merits of the decisions, but in the relation to lawfulness, efficiency, speed and promptness, accuracy and on the basis of all relevant information.

Statutory requirements

The following is a summary of the content required of Standing Orders, or related governance documents, by the 2014 Act and relevant subordinate legislation, both expressly and by implication.

- Appointment, removal and replacement of Board members
- Appointment, removal, replacement and interim replacements for the Director and Finance Officer
- Accounting arrangements
- Directions to council and health board – form, content and process for making them and issuing them
- Delegation of authority to the Director
- Voting, including proxies, where temporary vacancies exist, dispute resolution mechanism in the event of a tied vote
- Payment of travel and other expenses
- Committees, if any
- Meetings – calling meetings, notice of meetings, remote participation, quorum, minutes, public access
- Code of Conduct – adoption of model Code, register of interests, declarations of interest and non-participation in items of business, minutes
- Having regard, where required, to the national health and well-being outcomes, the integration planning principles and the integration delivery principles
- Having regard to the impact of decisions on services, facilities and resources used or to be used by other integration authorities
- Having regard to and complying with the requirements of legislation, directions and statutory guidance
- Establishment of the Strategic Planning Group
- Making of significant decisions outside the strategic plan
- Review of strategic plan

- Taking into account impacts on and views of localities
- Preparation and publication of the annual performance report and financial statement

Good practice

In addition to the express and implied statutory requirements for Standing Orders, the following matters are felt to be desirable in the interests of good decision-making and good governance:-

- Addition of urgent business or additional papers to an agenda already issued
- Chair's powers in relation to procedural matters
- Chair's duties to ensure fair, efficient and competent meetings and decisions
- Meeting procedures – presenting reports, questions and answers, motions, amendments and debate
- Obstructive or offensive conduct by members
- Adjourning a meeting, or rearranging a date or time already set
- Urgent business requiring decision between meetings
- Standard report template, and requirement for a written report in all cases
- Rights of access of Chief Social Work Office and Clinical Director to Chair, members and meetings

Risk, audit and governance

It is good practice in terms of corporate governance for a public body to maintain a committee charged with consideration of risk, audit and governance issues, providing a scrutiny function with a view to investigating, considering and advising the public body and its officers on areas of concern.

Since the Board is subject to the same financial regime as a local authority, it is required to have in place an internal audit service, to conduct a periodic review of its system of internal control, to prepare an annual governance statement and to have in place a process for consideration and approval of its unaudited financial statements and governance statement and then its audited accounts and report by its external auditor.

The inclusion of such a committee in the Board's Standing Orders will ensure compliance with both statutory and good practice aspects of these governance considerations.

Role descriptions

The Board is a new and different kind of statutory body, and its members and officers are taking on roles and responsibilities which are different to those they undertake and perform in the course of their employment by council and health board. The Director's role and responsibilities will require approval by the Scottish Ministers.

The inclusion of role descriptions and responsibilities for all Board members and the two statutory officers will assist in establishing and understanding those roles and relationships amongst them.

Meeting arrangements

A programme of proposed meeting dates, times and venues has been prepared, and is attached as Appendix 1. It covers meetings of the shadow Board prior to formal establishment and thereafter. Those arrangements and the pattern and frequency of meetings can be adjusted later, in the light of experience.

D CONSULTATION

Relevant officers in council and health board in relation to form and content of proposed Standing Orders.

E REFERENCES/BACKGROUND

Public Bodies (Joint Working)(Scotland) Act 2014

Public Bodies (Joint Working)(Integration Joint Boards)(Scotland) Order 2014

F APPENDICES

1. Proposed meeting arrangements 2015/16

G SUMMARY OF IMPLICATIONS

Equality/Health	No assessment has been carried out in relation to this report, since it is not felt to be relevant or required to the subject-matter and proposed decisions.
National Health and Wellbeing Outcomes	None.
Strategic Plan Outcomes	None.
Single Outcome Agreement	None.
Impact on other Lothian IJBs	None.
Resource/finance	No impact.

Policy/Legal	Adoption of Standing Orders will ensure compliance with the 2014 Act and relevant subordinate legislation.
Risk	Failure to adopt Standing Orders puts at risk the administration of the Board and competent decision-making.

H CONTACT

James Millar, Solicitor/Committee Services Manager, West Lothian Council,
01506 281613
james.millar@westlothian.gov.uk

Date of meeting: 2 June 2015

APPENDIX 1

PROPOSED MEETING ARRANGEMENTS 2015/16

NOTICE OF MEETING, AGENDA AND REPORTS ISSUED	DATE OF MEETING
Wednesday 27 May	Tuesday 2 June 2015
Wednesday 19 August	Tuesday 25 August 2015
Wednesday 14 October	Tuesday 20 October 2015
Wednesday 2 December	Tuesday 8 December 2015
Wednesday 10 February	Tuesday 16 February 2016
Wednesday 30 March	Tuesday 5 April 2016
Wednesday 25 May	Tuesday 31 May 2016

All meetings at 2 pm in Strathbrock Partnership Centre, Broxburn, unless otherwise advised

West Lothian Shadow Integration Joint Board

Date: 2 June 2015

Agenda Item: **7**

STRATEGIC PLANNING GROUP

REPORT BY DIRECTOR

A PURPOSE OF REPORT

The purpose of this report is, in shadow form, to

- set out the terms of reference for the Strategic Planning Group
- agree membership of the group.

B RECOMMENDATION

To approve the establishment of the Strategic Planning Group in shadow form until approved by the full Integration Joint Board.

C TERMS OF REPORT

The Public Bodies (Joint Working) (Scotland) Act was granted royal assent on April 1, 2014. The legislation will establish local partnerships under the governance of an Integration Joint Board which will be jointly accountable to Ministers, Local Authorities, NHS Board Chairs and the public for:

- Nationally agreed outcomes, which will apply across health and social care, and for which NHS Boards and Local Authorities will be held jointly accountable
- A requirement on NHS Boards and Local Authorities to integrate health and social care budgets
- A requirement on Partnerships to strengthen the role of clinicians and care professionals, along with the third and independent sectors, in the planning and delivery of services

As set out in the regulations to the Act, the Integration Joint Board must establish a strategic planning group, which will be involved throughout the process of developing, consulting on and finalising a strategic plan.

The development of the strategic plan must be clear about the national and local outcomes to be delivered and must include the formal establishment of locality arrangements for the partnership area. These arrangements 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.

It should be noted that the Integration Joint Board, will not assume responsibility for the planning, resourcing and operational delivery of all integrated services until such time as the strategic plan and associated locality arrangements have been prepared and considered fit for purpose by the Health Board and Local Authority.

In order to avoid any unnecessary delay it will be important that the strategic planning group is established at the earliest opportunity.

Appendix 1 sets out the terms of reference and membership of the Strategic Planning Group. It should be noted that the group would operate in a shadow mode only until such times as the Integrated Joint Board is fully established and confirms the terms of reference and membership of the group.

D CONSULTATION

West Lothian CHCP Board, report to meeting of January 2015.

E REFERENCES/BACKGROUND

The Public Bodies (Joint Working) (Membership of Strategic Planning Group) (Scotland) Regulations 2014

<http://www.legislation.gov.uk/ssi/2014/308/contents/made>

F APPENDICES

1. Shadow Strategic Planning Group membership and terms of reference

G SUMMARY OF IMPLICATIONS

Equality/Health	The report has been assessed as having little or no relevance with regard to equality or the Public Sector Equality Duty. As a result, an equality impact assessment has not been conducted.
National Health and Wellbeing Outcomes	The remit of Shadow Strategic Planning Group will encompass all National health and Well-Being Outcomes.

Strategic Plan Outcomes	The remit of Shadow Strategic Planning Group will encompass all Strategic Plan Outcomes.
Single Outcome Agreement	The remit of Shadow Strategic Planning Group will encompass the Single Outcome Agreement outcomes related to health and care.
Impact on other Lothian IJBs	None.
Resource/finance	None.
Policy/Legal	The Public Bodies (Joint Working) (Scotland) Act 2014 requires the establishment of a Strategic Planning Group
Risk	None.

H CONTACT

Alan Bell, Senior Manager, Community Care, Support & Services
01506 281937
Alan.Bell@westlothian.gov.uk

Date of meeting: 2 June 2015

Governance: Terms of Reference and Membership

Integrated Joint Board (IJB) Strategic Planning Group

A. Remit of group

The Strategic Planning Group will have a significant role in supporting the IJB to deliver against the National health and wellbeing outcomes:

1. People are able to look after and improve their own health and wellbeing and live in good health for longer.
2. People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.
3. People who use health and social care services have positive experiences of those services, and have their dignity respected.
4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
5. Health and social care services contribute to reducing health inequalities.
6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing.
7. People using health and social care services are safe from harm.
8. People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.
9. Resources are used effectively and efficiently in the provision of health and social care services.

The group will be responsible for the following:

- Develop the initial baseline strategic plan for the IJB. This plan will incorporate strategic commissioning priorities, organisational development, localities based activity, and include a 3 year action plan.
- Oversee the implementation of the 3 year action plan.
- Monitor performance against national outcomes and locally agreed outputs.
- Annual review of the strategic plan and 3 year action plan.
- Provide advice to the IJB in responding to emerging Scottish Government Policy and regulations.
- Support the IJB on key proposals and service changes by linking effectively with staff, users, carers, clinical & care professionals and locality members.

B. Frequency

The group will meet on a monthly basis.

C1. Lead Officer

To ensure effective governance and accountability the Chief Officer will chair the Strategic Planning Group.

C2. Contact

The Lead Officer will be supported by officers from the Commissioning and Programme Management team.

D. Reporting

A report from the Strategic Planning Group will be a standing item of the IJB agenda. This report will include regular updates on performance and the progress of defined actions or programmes of work that have been agreed.

E. Membership

A representative from each of the following groups:

- health professionals
- users of health care
- carers of users of health care
- commercial providers of health care
- non-commercial providers of health care
- social care professionals
- users of social care
- carers of users of social care
- commercial providers of social care
- non-commercial providers of social care
- non-commercial providers of social housing
- third sector bodies carrying out activities related to health care or social care

F. Review

The group remit, progress and membership will be reviewed annually in January each year by the IJB.

West Lothian Shadow Integration Joint Board

Date: 2 June 2015

Agenda Item: **8**

PROVISION OF SUPPORT SERVICES AND PROPOSED REPORT TEMPLATE

REPORT BY DIRECTOR

A PURPOSE OF REPORT

The purpose of this report is to

1. inform the shadow Integration Joint Board (IJB) of the requirement to make arrangements to provide or ensure the provision of the professional, technical, administrative and support services it reasonably requires
2. ask the shadow IJB to agree the process to develop arrangements for these services to the IJB
3. ask the shadow IJB to approve the draft report template.

B RECOMMENDATION

It is recommended that the shadow IJB

1. agrees the process to develop arrangements for the provision of support services
2. approves the draft report template.

C TERMS OF REPORT

Support Services

As part of the implementation of the Integration Scheme the IJB will be required to provide, or ensure the provision of, the professional, technical, administrative and support services it reasonably requires.

In the short term the Parties will continue to use the arrangements that have already been put in place to provide professional, technical and administrative support to Community Health Partnerships, and joint working more generally.

In order to develop a sustainable long term solution, a working party will be convened, with membership from the Health Board and the four local authorities in Lothian. This working party will develop recommendations for approval by the Health Board, the four local authorities, and the four Partnerships.

As soon as the proposals have been finalised by the working party and agreed by NHS Lothian and the four local authorities which prepared the integration schemes for the Lothian IJBs, a draft agreement will be prepared reflecting the agreed proposals. The draft agreement will be adjusted in line with discussions among the parties, and, as soon as the terms have been finalised, it is intended that the agreement will then be formally executed by NHS Lothian, the four local authorities, and the Lothian IJBs (including the IJB).

Within a year of the agreement taking effect, the Parties and the IJB will undertake a review of the support services put in place pursuant to the agreement to ensure that the IJB has available to it all necessary professional, technical or administrative services for the purpose of preparing its Strategic Plan and carrying out the integration functions. There will then follow a process of annual review on the support services required by the IJB and this process will form part of the annual budget setting process for the IJB.

Report Template

A report template has been drafted in conjunction with West Lothian Council Committee Services for use by the IJB (see Appendix). The template ensures that reports are presented in a consistent and comprehensive manner and that all relevant areas and implications are considered in the production of the report.

D CONSULTATION

None required.

E REFERENCES/BACKGROUND

West Lothian Integration Scheme

F APPENDICES

Draft Report Template

G SUMMARY OF IMPLICATIONS

Equality/Health	The report has been assessed as having little or no relevance with regard to equality or the Public Sector Equality Duty. As a result, an equality impact assessment has not been conducted.
National health and Well-Being Outcomes	None.
Strategic Plan Outcomes	None.
Single Outcome Agreement	None.

**Impact on other
Lothian IJBs** None.

Resource/finance None.

Policy/Legal None.

Risk None.

H CONTACT

Jim Forrest, CHCP Director
01506 281977
jim.forrest@westlothian.gov.uk

2 June 2015

West Lothian Shadow Integration Joint Board

Date:

Agenda Item:

REPORT TITLE

REPORT BY

A PURPOSE OF REPORT

(A brief introduction explaining the reasons for and purpose of the report)

(Note - use a new cell for each new paragraph)

B RECOMMENDATION

(Carefully worded to achieve the decision sought, separated and numbered as appropriate)

(Note - use a new cell for each new paragraph)

C TERMS OF REPORT

(Type the terms of the report here)

(Note - use a new cell for each new paragraph)

D CONSULTATION

(Summarise who was consulted, how, feedback/comments)

(Note - use a new cell for each new paragraph)

E REFERENCES/BACKGROUND

(To include reference and/or hyperlinks to all relevant items, including a hyperlink to any published EIA undertaken)

(Note - use a new cell for each new paragraph)

F APPENDICES

(None, or else list by number and title)

(Note - use a new cell for each new paragraph)

G SUMMARY OF IMPLICATIONS

Equality/Health

The report has been assessed as having little or no relevance with regard to equality or the Public Sector Equality Duty. As a result, equality impact assessment has not been conducted. The relevance assessment can be viewed via the background references to this report.

The report has been assessed as relevant to equality and the Public Sector Equality Duty. An equality impact assessment has been conducted. The assessment can be viewed via the background references to this report.

(Delete whichever statement does not apply)

National Health and Wellbeing Outcomes

Strategic Plan Outcomes

Single Outcome Agreement

Impact on other Lothian IJBs

Resource/finance *(Insert text here - state "none" if none apply)*

Policy/Legal *(Insert text here - state "none" if none apply)*

Risk *(Insert text here - state "none" if none apply)*

(Note - use a new cell for each new paragraph)

H CONTACT

(Author of report, phone number, email address)

(Insert Date of Meeting)

West Lothian Shadow Integration Joint Board

Date: 2 June 2015

Agenda Item: **9**

ORGANISATIONAL DEVELOPMENT AND TRAINING SESSION FOR MEMBERS OF THE WEST LOTHIAN INTEGRATION JOINT BOARD

REPORT BY HEAD OF HEALTH SERVICES

A PURPOSE OF REPORT

The purpose of this report is to provide information on organisational development (OD) for integration Joint Board Members and to consider how member's needs should be met.

B RECOMMENDATION

That the Shadow Integration Board notes the contents of this report and considers what arrangements should be made for induction, training and organisational development.

C TERMS OF REPORT

The purpose of integrating health and social care services is to improve the lives of the people that use them.

The underpinning aim of the legislation is to get health and social care to work as one joined up system with the same focus and an agreed way to deliver services to the people that need them.

This is a huge change and will require clear and cohesive leadership across all levels of the partnership. Confident and focussed governance will be critical to getting this right.

An Organisational Development training programme will seek to support IJB members to be confident in understanding :

How can the IJB make a difference to people's lives in delivering integrated health and social care services through the principles of integration?

What may be different about being a member of the IJB and what that means in terms of personal and collective responsibilities and conduct?

How can members as individuals make a difference on the IJB? What do you and other board members bring?

A programme for induction and development for IJB members is being progressed within NHS Lothian through NES. It will be open to all IJB members and relevant senior officers for all four Lothian IJBs. It will set the scene in terms of the common areas of interest (for example, the legal structures, IJB members' roles and responsibilities, Codes of Conduct, finances). The intention is to make it available on several dates so that all the Lothian IJBs' members have the chance to attend. It will provide a good grounding for IJB members and senior officers in how things are to work in the new IJB regime.

In addition to that central programme, it is proposed to hold a local West Lothian away-day in August, with a view to covering local aspects of integration, to add an understanding of local arrangements and services to the common ground being covered at the NES sessions.

IJB members will therefore have the opportunity to attend complementary induction and briefing sessions on the common and the local aspects of integration. It is strongly recommended that IJB members, as well as senior officers who will be involved in managing and delivering integrated functions, attend these sessions to ensure as full an understanding of all aspects of integration from the outset.

Sessions will be designed to stimulate discussion, affirm purpose and create conditions for effective team working.

The underpinning aims of a development programme will be to:

- Develop reflective thinking in order to support Collective and individual roles in carrying out the responsibilities of the integrated joint board.
- Legal framework for integration
- Status, powers and role of the IJB
- Role and responsibilities of IJB members (voting and non-voting)
- Code of Conduct
- Role of Director
- Financial arrangements, including budget-setting, accounting services, financial reporting and Finance Officer role.
- Strategic Planning
- Performance management, scrutiny, audit, managing risk and governance
- Reflection on how individuals will exercise collaborative leadership to achieve the outcomes for integration.
- Individual Leadership roles
- The principles of integration being visible throughout all board work.
- Discussion on how, as board members, individuals can make a difference

- The development of a shared understanding and appreciation of integration and how collective thinking can contribute to improving outcomes from people.
- Acknowledgement that all board members come with rich but sometimes differing experience and perspectives.

D CONSULTATION

Discussion relating to content of OD training sessions for IJB Members has been undertaken at the NHSL Integration Group; ; SG; West Lothian Integration Board and within the Sub set West Lothian OD Board.

E REFERENCES/BACKGROUND

Public Bodies (Joint Working) (Scotland) Act 2014 and related statutory instruments and guidance

F APPENDICES

None.

G SUMMARY OF IMPLICATIONS

Equality/Health	There are no equalities issues arising from any decisions made on this report.
National Health and Wellbeing Outcomes	None.
Strategic Plan outcomes	None.
Single Outcome Agreement	None.
Impact on other Lothian IJBs	None.
Resource/finance	The cost of the event will be met within the approved revenue budget.
Policy/Legal	There are no legal implications arising from consideration of this report.
Risk	Clarity of understanding of the legal framework, members' roles and responsibilities, health and council services and strategic planning risks effective implementation of integration and delivery of integrated functions and services.

H CONTACT

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Date of meeting: 2 June 2015

West Lothian Shadow Integration Joint Board

Date: 2 June 2015

Agenda Item: **10**

JIT READINESS FOR INTEGRATION TOOL

REPORT BY DIRECTOR

A PURPOSE OF REPORT

The purpose of this report is to make members aware of a new self-evaluation tool produced by the Joint Improvement Team for IJBs to highlight actions needed to meet the requirements of the Public Bodies (Joint Working) (Scotland) Act 2014.

B RECOMMENDATION

Members are asked to

1. note the JIT Readiness for Integration Tool
2. consider how it might be used in West Lothian.

C TERMS OF REPORT

The Joint Improvement Team (JIT) is a strategic improvement partnership between the Scottish Government, NHSScotland, COSLA (Convention of Scottish Local Authorities) and the Third, Independent and Housing Sectors.

It provides a range of practical improvement support and challenge including knowledge exchange, developmental innovation and improvement capacity and direct practical support to local health, housing and social care partnerships across Scotland.

Self-evaluation is widely undertaken across public services already. It allows organisations to discern clearly their strengths and the areas in which improvements can be made, culminating in planned improvement actions which are then monitored for progress.

The Readiness for Integration Tool (see appendix) covers key themes that partnerships have previously and continue to identify as important, for successful integration, which are supported in recent literature

- Outcomes
- Leadership
- Decision Making
- Structure
- Engagement
- Communication
- Roles
- Behaviours
- Skills, Knowledge and Capability
- Resources – Money
- Resources – Information
- Resources – Time
- Improvement and Scrutiny

The tool may be used as part of a self-evaluation programme, or as a stand-alone assessment. Some health and social care partnerships may choose to use specific sections to supplement their current self-evaluation programme, or where particular areas of development may be considered.

It is for health and social care partnerships to decide how to use this tool to best effect. This will include what sections to use, who to involve, how regularly, and how the findings are reported and utilised for your own improvement agenda.

D CONSULTATION

None.

E REFERENCES/BACKGROUND

Public Bodies (Joint Working) (Scotland) Act 2014

F APPENDICES

The Readiness for Integration Tool can be accessed by clicking on

<http://www.jitscotland.org.uk/resource/jit-readiness-integration-tool/>

G SUMMARY OF IMPLICATIONS

Equality/Health	The report has been assessed as having little or no relevance with regard to equality or the Public Sector Equality Duty. As a result, equality impact assessment has not been conducted.
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**National Health
and Wellbeing
Outcomes** None.

**Strategic Plan
Outcomes** None.

**Single Outcome
Agreement** None

**Impact on other
Lothian IJBs** None

Resource/finance None.

Policy/Legal None.

Risk None.

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2 June 2015