
Report to Clackmannanshire Council

Date of Meeting: 18 December 2014

Subject: Health and Social Care Integration

Report by: Chief Executive & Head of Social Services

1.0 Purpose

- 1.1. The purpose of this paper is to provide elected members with an update on progress towards health and social care integration and to seek Council's approval of a number of issues which have been discussed at recent Partnership Boards involving this Council, Stirling Council and NHS Forth Valley.

2.0 Recommendations

2.1 It is recommended that Council:

- a) notes progress in taking forward health and care integration in Clackmannanshire;
- b) agrees that the composition of the Integration Joint Board should be three elected members from each of Clackmannanshire and Stirling Councils and six representatives of the Board of NHS Forth Valley;
- c) agrees that this Council's three representatives comprise two members from the political administration and one from the main opposition;
- d) nominates individuals to the three places on that basis;
- e) agrees that these individuals will also be the Council's representatives on the Transitional Board which will operate until such time as ministerial approval is given to the Integration Scheme and the Integration Joint Board can be legally established;
- f) agrees that the appointments panel for the post of Chief Officer for health and care integration comprises two elected members from each of the two councils and four representatives from the Board of NHS Forth Valley;

g) agrees that this Council's representatives on the appointments panel should comprise one elected member from the Administration and one from the main opposition;

h) nominates two members to sit on the appointments panel on that basis;

i) notes that the final draft Integration Scheme will come to Council for approval in March, 2015.

3.0 Considerations

3.1 Clackmannanshire and Stirling Councils and NHS Forth Valley have been working towards putting in place arrangements to take forward health and social care integration for several months.

3.2 In late June this year, agreement was reached to pursue the body corporate model of integration, which involves delegation by the councils and Health Board of relevant functions to a new legal entity (governed by an Integrated Joint Board) with accountability for overseeing the planning, management and delivery of all relevant functions.

3.3 Since June, considerable officer time has been invested in developing the draft Integration Scheme which is required to be submitted to the Scottish Government by April, 2015.

3.4 Six workstreams have been taking forward various aspects of the draft Scheme and at the two most recent meetings of the Partnership Board in November and December agreement was reached on a number of key aspects of the initial draft Scheme including:

a) the proposed make up of the Integration Joint Board, which is three councillors from each Council and six members of NHS Forth Valley;

b) the establishment of a Transitional Board which will take forward integration until such time as the Integration Joint Board can be legally established;

c) the remit of the Chief Officer and a process for appointing someone to that post (the role will be advertised at the start of January, 2015, and the appointment will be made by a panel of elected members and members of the Board of NHS Forth Valley); and

d) the broad scope of services to be included within the Scheme (i.e. the minimum prescribed by the legislation), although there remain some outstanding decisions around some elements of unplanned acute care which NHS Forth Valley are particularly concerned about.

3.5 Other required aspects of the Scheme covering vision, aims, outcomes, clinical and care governance, local operational delivery arrangements, workforce and organisational development, participation and engagement, and financial arrangements are currently being considered with a view to the Transitional Board reaching agreement at its meetings early in the new year.

3.6 The required Integration Scheme will be a fairly high-level documents which sets out for many issues in the form of a series of joint commitments the

detailed implementation of which will be worked through in 2015-16 with a view to implementation by April of 2016. Accordingly, no information can be provided to members at the moment on the detail of, for example, the financial arrangements and performance monitoring.

3.7 There also remain some outstanding matters which the Transitional Board will require to take decisions on at its meeting in January. These include appointing a chair and vice chair of the Transitional Board and the appointment period of these post holders.

3.8 There are requirements to consult a range of stakeholders on the draft scheme. This has already partially begun and will be taken forward more fully in January. Unfortunately, some of the regulations in respect of the Integration Scheme have not been finalised by Parliament and additional guidance continues to come out on an ad hoc basis from the Scottish Government. However, it is anticipated that a complete draft Integration Scheme for Clackmannanshire and Stirling will be available to share with all members in January, 2015.

4.0 Sustainability Implications

4.1 None

5.0 Resource Implications

5.1 Financial Details

5.2 There will be a cost to the Council for its share of the employee costs of the Chief Officer for health and care integration. The grade for the post has not finalised but it will be at chief officer level. The costs will be shared between the three partners on a basis still to be agreed.

5.3 Staffing Details

5.4 There are no direct implications for the Council's establishment from this report. However, it is possible (depending on the background of the successful candidate for the chief officer post) that the Council may be the employer. It is equally possible the employer might be NHS Forth Valley.

6.0 Exempt Reports

6.1 Is this report exempt? No

7.0 Declarations

The recommendations contained within this report support or implement our Corporate Priorities and Council Policies.

(1) **Our Priorities** (Please double click on the check box)

Health is improving and health inequalities are reducing

X

8.0 Equalities Impact

8.1 Have you undertaken the required equalities impact assessment to ensure that no groups are adversely affected by the recommendations? n/a

9.0 Legality

9.1 It has been confirmed that in adopting the recommendations contained in this report, the Council is acting within its legal powers. Yes

10.0 Appendices

10.1 Please list any appendices attached to this report. If there are no appendices, please state "none".

None.

11.0 Background Papers

11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

No

Author(s)

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Approved by

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