Sally Shaw (Chief Officer) Orkney Health and Care 01856873535 extension: 2601 OHACfeedback@orkney.gov.uk



Agenda Item: 18.

# **Integration Joint Board**

Date of Meeting: 11 December 2019.

Subject: Directions.

#### 1. Summary

1.1. The Integration Joint Board (IJB) is required to issue Directions to partners (NHS Orkney and Orkney Islands Council) relating to implementation of the Strategic Plan and the carrying out of functions by the services delegated to the IJB.

1.2. This report acts to remind members of the guidance that was issued in 2016. New draft guidance was issued in December 2018 but was retracted. The revised guidance has not, to date, been reissued and at time of writing this report, it was advised that issuing was imminent.

1.3. The IJB needs to look at its use of Directions at pace and therefore urgent work is required with the knowledge that any updated guidance issued by the Scottish Government will not have any significant changes.

1.4. There have been two previous reports to the IJB in respect of Directions. The first report being presented on 29 June 2016 and the second on 27 June 2018. Some recommendations from these reports have not been actioned as detailed at section 4.3.

#### 2. Purpose

2.1. To consider future development of how the IJB uses Directions to ensure implementation of its strategic intent and give a framework for performance reporting from both Orkney Islands Council and NHS Orkney to inform the IJB.

#### 3. Recommendations

The Integration Joint Board is invited to:

3.1. Consider the contents of this report.

3.2. Approve a review of how the Board currently structures and issues its Directions.

#### It is recommended:

3.3. That a facilitated session is arranged to consider Directions more fully.

3.4. A Directions template be designed.

3.5. A Directions Tracker be developed.

3.6. All Directions be refreshed in line with the review of the Integration Scheme, which needs to be revised and updated by July 2020.

3.7. That the Chief Officer is instructed to provide the Board with an annual report on the monitoring of Directions.

#### 4. Background

4.1. The IJB has had two previous reports presented to it in relation to Directions. The first report was presented on 29 June 2016 and this report reiterates much of the same information.

4.2. A proposal was to trial the draft directions for one year and also a draft framework was proposed. In that interim period the Chief Officer had written to the Chief Executives of both partners advising them to continue in line with the Strategic Commissioning Plan, until such time as the Directions had been approved. The Directions and framework which looked at the level of change and what the Direction would look like was approved to be trialled over the remainder of that current financial year.

4.3. A further paper was presented on 27 June 2018 recommending a facilitated session be held and a refreshed template for issuing Directions be implemented linked to the new Strategic Commissioning Plan outcomes for 2019 to 2022. Unfortunately, due to capacity and the Chief Officer vacancy there is no evidence of this work commencing.

# 5. Context

5.1. The Public Bodies (Joint Working) (Scotland) Act 2014 (the Act) places a duty on Integration Authorities to develop a "strategic plan" (also known as a strategic commissioning plan) for integrated functions and budgets under their control.

5.2. Integration Authorities require a mechanism to action their strategic intent. This mechanism takes the form of 'binding directions' from the Integration Authority to one or both of the Health Board and Local Authority.

5.3. In the case of an IJB, a direction must be given in respect of every function that has been delegated to the IJB.

5.4. A direction must set out how each integrated health and social care function is to be exercised, and the budget associated with that.

#### 6. Form and content of Directions

6.1. Directions must be in writing and should set out a clear framework for operational delivery of the functions that have been delegated to the Integration Authority.

6.2. Directions must clearly identify which of the integrated health and social care functions they relate to. The Integration Authority can direct the carrying out of those functions by requiring that a named service or services be provided. Where appropriate, the same document can be used to give directions to carry out multiple functions.

6.3. Directions must include detailed information on the financial resources that are available for carrying out the functions that are the subject of the directions, including the allocated budget and how that budget (whether this is payment, or an amount made available) is to be used.

6.4. The exercise of each function can be described in terms of delivery of services, achievement of outcomes, and/or by reference to the strategic commissioning plan.

6.5. Directions may stipulate which of the health board or local authority is to carry out a function or may require a function to be carried out jointly. The direction may also specify what the health board and/or local authority is to do in relation to carrying out a function.

6.6. The financial resource allocated to each function in a direction is a matter for the Integration Authority to determine. The Act makes particular provision in relation to the allocation of budgets for the sum "set aside" in relation to large hospital functions, which gives flexibility for the Integration Authority to direct how much of the sum set aside is to be used for large hospital services and for the balance to be used for other purposes. The guidance did not appear to be applicable to NHS Orkney as the definition covered functions that are carried out in the Health Board and provided to two or more local authorities. Late in the financial year a response was received from the Scottish Government stipulating where a Health Board and an Integration Authority are coterminous, unscheduled adult inpatient services require to be delegated to the Integration Authority, based on the functions included in the legislation.

# 7. Process for issuing and revising Directions

7.1. A direction will remain in place until it is varied, revoked or superseded by a later direction in respect of the same function.

7.2. The legislation does not set out fixed timescales for directions. This flexibility allows directions to ensure that delivery of integrated health and social care functions is consistent with the strategic commissioning plan and takes account of any changes in local circumstances. In contrast with the strategic commissioning plan, there is therefore scope for directions to include detailed operational instructions in relation to functions (and the associated services).

7.3. Directions issued at the start of the year should be subsequently revised during the year in response to developments.

7.4. For example, should an overspend be forecast on either of the operational budgets – for health or social care services provided by the Health Board and Local Authority – the Chief Officer will need to agree a recovery plan to balance the overspending budget (in line with the provisions in the Integration Scheme and statutory guidance for finance under integration). This may require an increase in the payment to either the Health Board or Local Authority, funded by either:

- Utilising an underspend on the other arm of the operational integrated budget to reduce the payment to that body.
- Utilising the balance on the general fund, if available, of the IJB.

7.5. A revision to the directions will be required in either case.

### 8. Contribution to quality

Please indicate which of the Council Plan 2018 to 2023 and 2020 vision/quality ambitions are supported in this report adding Yes or No to the relevant area(s):

Promoting survival: To support our communities.	Yes.
<b>Promoting sustainability</b> : To make sure economic, environmental and social factors are balanced.	Yes.
<b>Promoting equality</b> : To encourage services to provide equal opportunities for everyone.	Yes.
<b>Working together</b> : To overcome issues more effectively through partnership working.	Yes.
<b>Working with communities</b> : To involve community councils, community groups, voluntary groups and individuals in the process.	Yes.
Working to provide better services: To improve the planning and delivery of services.	Yes.
<b>Safe</b> : Avoiding injuries to patients from healthcare that is intended to help them.	Yes.
Effective: Providing services based on scientific knowledge.	Yes.
<b>Efficient</b> : Avoiding waste, including waste of equipment, supplies, ideas, and energy.	Yes.

# 9. Resource implications and identified source of funding

9.1. This report relates to supporting the IJB to consider how it uses Directions to achieve its strategic intent. Good use of Directions should ensure best use of resources and allow clear performance monitoring of those services directed by the IJB to both Orkney Islands Council and NHS Orkney.

#### 10. Risk and Equality assessment

10.1. Not adopting robust systems for issuing, monitoring and reviewing Directions places a significant risk on the IJB in that it will not achieve the priorities set out in the Strategic Plan.

### **11. Direction Required**

Please indicate if this report requires a direction to be passed to:

NHS Orkney.	No.
Orkney Islands Council.	No.
Both NHS Orkney and Orkney Islands Council.	No.

# **12. Escalation Required**

Please indicate if this report requires escalated to:

NHS Orkney.	No.
Orkney Islands Council.	No.
Both NHS Orkney and Orkney Islands Council.	No.

#### 13. Author

13.1. Sally Shaw (Chief Officer), Integration Joint Board.

#### 14. Contact details

14.1. Email: <u>sally.shaw@orkney.gov.uk</u>, telephone: 01856873535 extension 2601.