

# **Health and Social Care Integration Scheme for the Outer Hebrides**

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## **Preface**

Planning together for our future, in the short, medium and longer term, is essential if we are to be able to deliver, sustainable, efficient Health and Social Care services.

The Public Bodies (Joint Working) (Scotland) Act 2014 requires Health Boards and Local Authorities to integrate planning and delivery of certain adult health and social care services. They can also choose to integrate planning and delivery of other services – additional adult health and social care services beyond the minimum prescribed, and children's health and social care services:

The Act requires that the Local Authority and the Health Board jointly prepare, consult and then agree an Integration Scheme for the Local Authority Area, prior to them submitting it to Scottish Ministers for final approval. The Act states that the purpose of an integration scheme is to set out:

- which integration model is to apply; and
- the functions that are to be delegated in accordance with that model.

The Act also requires that the Health Board and the Local Authority undertake a joint consultation as part of the preparation of their integration scheme. This Integration Scheme describes how the new Act will be applied within the Scottish Western Isles.

Individuals and communities in the Outer Hebrides have benefited from the integration of designated Health and Social Care services already. This Integration Scheme has been informed by considerable local experience of developing and delivering integration in practice; and also benefitted from on-going dialogue and positive interaction with a range of stakeholders over recent years. The Health Board and the Local Authority are committed to continuing that constructive engagement, and the ongoing increased, person-centered integration of services.

The legislation supporting Health and Social Care Integration, through the Integration Joint Board, offers the opportunity for Councillors, Health Board Non-Executive Directors, the Third Sector and Independent Sector to work together to plan for a future health and care service able to meet the demands of the future. The Integration Joint Board will plan and commission services to ensure we meet our national and local outcomes all based on providing a more person-centered approach with a focus on supporting individuals, families and communities.

In line with the legislation, whilst the Integration Joint Board will predominantly plan, it requires assurance around delivery of the integrated services for which it has responsibility. In line with its Strategic Framework and annual cycle of commissioning, the Integration Joint Board will require that the Local Authority and Health Board provide services to match what is required and it will oversee performance and targets to ensure that delivery is in line with the outcomes.

## **Introduction**

The Public Bodies (Joint Working) (Scotland) Act 2014 (the Act) requires Health Boards and Local Authorities to prepare jointly an Integration Scheme setting out how joint working is to be achieved. There is a choice of ways in which they may do this: the Health Board and Local Authority can either delegate functions to each other or can both delegate to a third body called the Integration Joint Board. Delegation between the Health Board and Local Authority is commonly referred to as a “lead agency” arrangement. Delegation to an Integration Joint Board is commonly referred to as a “body corporate” arrangement.

This document uses the model Integration Scheme where the “body corporate” arrangement is used and sets out the detail as to how the Health Board and Local Authority integrate services. The Integration Scheme was approved by Scottish Ministers on 21<sup>st</sup> September 2015.

The Act requires that an Integration Scheme, once approved, must be re-submitted and follow the consultation process set out in the regulations if it is to be amended. Changes to documents referred to within the Integration Scheme (e.g. Workforce Plan) do not require the Integration Scheme to go through this process – only changes to the Integration Scheme itself.

The Integration Joint Board is a legal entity and can accordingly make its own decisions about the exercise of its functions and responsibilities. Its voting members are appointed by the Health Board and the Local Authority and consists of Councillors and NHS Non-Executive Directors. Whilst serving on the Integration Joint Board its members will carry out their functions under the Act on behalf of the Integration Joint Board itself, and not as delegates of their respective Health Board or Local Authority.

The Integration Joint Board is responsible for the future strategic planning of the functions delegated to it, and for ensuring oversight of the delivery of its functions set out within the Integration Scheme in Section 4. This scheme covers the health and wellbeing of all adults including older people and universal children’s health services in accordance with Section 29 of the Act. Further, the Act gives the Health Board and the Local Authority, acting jointly, the ability to require that the Integration Joint Board replaces their Strategic Commissioning Plan in certain circumstances.

## **Vision, Aims and Outcomes of the Integration Scheme**

Comhairle nan Eilean Siar and Western Isles Health Board continue to build on a good history of partnership working.

Working with the Third and Independent Sector, we aim to continue to provide a unified approach across the public sector with a common sense of ambition and purpose. We engage with service users, Locality Planning Groups, carers, staff and members of the public to listen and respond to individuals and communities to be positive contributors and influence how the services will be shaped and developed. In turn, we aim to deliver the best possible services that will be safe, effective, of the highest quality, person-centered, efficient and fair within the resources available to us.

## **Proactive Contributions and Influence**

The main purpose of integration is to improve the wellbeing of people who use health and social care services, particularly those whose needs are complex and involve support from health, social care, and the third sector at the same time. The Integration Joint Board has set in its Strategic Framework and Annual Commissioning Plans how it delivers the National Health and Wellbeing Outcomes prescribed by the Scottish Ministers in Regulations under Section 5(1) of the Act namely:

- People are able to look after and improve their own health and wellbeing and live in good health for longer.
- 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.
- People who use health and social care services have positive experiences of those services, and have their dignity respected.
- Health and social care services are centered on helping to maintain or improve the quality of life of people who use those services.
- Health and social care services contribute to reducing health inequalities.
- 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.
- People using health and social care services are safe from harm.
- 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.
- Resources are used effectively and efficiently in the provision of health and social care services.

The Integration Authorities are accountable to Health Boards and Local Authorities for delivering these outcomes. They are required to report annually on how their activities have contributed towards the outcome(s). (1)

(1) Public Bodies (Joint Working) National Health and Wellbeing Outcomes (Scotland) Regulation 2014

## **INTEGRATION SCHEME**

### **The parties:**

Comhairle nan Eilean Siar, a local authority established under the Local Government (Scotland) Act 1994 and having its principal offices at Sandwick Road, Stornoway, Isle of Lewis  
HS1 2BW.

and

**Western Isles Health Board**, established under section 2(1) of the National Health Service (Scotland) Act 1978 (operating as “NHS Western Isles”) and having its principal offices at 37 South Beach, Stornoway, Isle of Lewis, HS1 2BB.

### **1. Definitions and Interpretation**

1.1 In this Integration Scheme, the following terms shall have the following meanings:-

- “The Act” means the Public Bodies (Joint Working) (Scotland) Act 2014;
- “Integration Joint Board” means the Integration Joint Board to be established by Order under section 9 of the Act;
- “Outcomes” means the National Health and Wellbeing Outcomes prescribed by the Scottish Ministers in Regulations under section 5(1) of the Act
- “The Integration Scheme Regulations” means the Public Bodies (Joint Working) (Integration Scheme) (Scotland) Regulations 2014
- “Integration Joint Board Order” means the Public Bodies (Joint Working) (Proceedings, Membership and General Powers of Integration Joint Boards) (Scotland) Order 2014
- “Scheme” means this Integration Scheme;
- “Strategic Commissioning Plan” means the plan which the Integration Joint Board is required to prepare and implement in relation to the delegated provision of health and social care services to adults and universal children’s health services in accordance with section 29 of the Act.
- “Universal children’s health services” refers to the functions exercisable in relation to the health care services set out in paragraphs 11-15 of Appendix 2, Part 2, Section 3, which are delegated in relation to persons of any age.
- “Payment” means the term used in legislation to describe the integrated budget contribution to the Integration Joint Board. This payment does not require a cash transaction to be made. The term is also used to describe the non cash transaction the Integration Joint Board makes to the Health Board and Local Authority for carrying out the directed functions.

1.2 In implementation of their obligations under the Act, the Parties hereby agree as follows:

- In accordance with section 1(2) of the Act, the Parties agree that the integration model set out in sections 1(4)(a) of the Act will be put in place for the Outer Hebrides, namely the delegation of functions by the Parties to a body corporate that is to be established by Order under section 9 of the Act. This Scheme comes into effect on the date the Parliamentary Order to establish the Integration Joint Board comes into force.

## **2. Local Governance Arrangements**

- 2.1 Part of the remit of the Integration Joint Board is to prepare and implement a Strategic Commissioning Plan in relation to the provision of such health and social care services to people in their area in accordance with the requirements of the Act.
- 2.2 The regulations of the Integration Joint Board's procedure, business and meetings form the Standing Orders which may be considered at the first meeting of the Integration Joint Board.
- 2.3 Western Isles Health Board, Comhairle nan Eilean Siar and the Integration Joint Board are all responsible for the achievement of the outcomes. (Appendix 1). The Integration Joint Board has oversight of the functions delegated to it and of the performance of the services related to those functions. The Chief Officer is responsible for reporting to the Integration Joint Board on performance of those services in the context of a performance framework agreed by the Integration Joint Board via the Chief Officer.
- 2.4 The Chief Officer will prepare an annual report on performance and delivery of the Strategic Commissioning Plan to the Integration Joint Board and share it with Western Isles Health Board and Comhairle nan Eilean Siar.
- 2.5 The Integration Joint Board has a distinct legal personality and the independence to manage itself. There is no role for Western Isles Health Board and Comhairle nan Eilean Siar to, acting separately, sanction or veto decisions of the Integration Joint Board. In the event of a dispute arising between Western Isles Health Board and Comhairle nan Eilean Siar the dispute resolution mechanism will be followed as set out at Section 14.
- 2.6 The Integration Joint Board may create such Committees that it requires to assist it with the planning and oversight of delivery of services which are within its scope. This is provided for in legislation. The Integration Joint Board may establish an Audit and Risk Committee, to seek and secure assurance over effective governance.
- 2.7 As agreed by Western Isles Health Board and Comhairle nan Eilean Siar, the Integration Joint Board shall comprise four NHS Non-Executive Directors appointed by Western Isles Health Board, and four Councillors appointed by Comhairle nan Eilean Siar. The Integration Joint Board will include non-voting members as prescribed by Regulation 3 of the Public Bodies (Joint Working) (Proceedings,

Membership and General Powers of Integration Joint Boards) (Scotland) Order 2014.



- 2.8 The term of office of voting Members of the Integration Joint Board shall last as follows:
- (a) for Councillors, two years, thereafter Comhairle nan Eilean Siar will identify its replacement Councillor(s) on the Integration Joint Board,
  - (b) for Western Isles Health Board nominees, two years, thereafter Western Isles Health Board will identify its replacement Non Executive(s) on the Integration Joint Board.
- 2.9 At the first meeting of the Integration Joint Board it elected a Chairperson and Vice Chairperson from the voting membership of the Integration Joint Board.
- 2.10 The Chair and Vice–Chair posts rotate on a three year basis between Western Isles Health Board and Comhairle nan Eilean Siar, with the Chair being from one body and the Vice-Chair from the other.

### **3. Delegation of Functions**

- 3.1 The functions that are to be delegated by Western Isles Health Board to the Integration Joint Board are set out in Part 1 of Appendix 2. The services to which these functions relate , which are currently provided by Western Isles Health Board and which are to be integrated, are set out in Part 2 of Appendix 2.
- 3.2 Each function listed in column A of Part 1 of Appendix 2 is delegated subject to the exceptions in column B and only to the extent that:
- (a) There are a number of functions delegated at Section 3 of Part 2 of Appendix 2 which are delegated in relation to persons of any age (universal children’s health services)); and
  - (b) the function is exercisable in relation to care or treatment provided by health professionals for the purpose of health care services listed in Section 1 of Part 2 of Appendix 2; or
  - (c) The function is exercisable in relation the health and care services listed in Section 2 of Part 1 of Appendix 2.
- 3.3 The functions that are to be delegated by Comhairle nan Eilean Siar to the Integration Joint Board are set out in Part 1 of Appendix 3. The services to which these functions relate, which are currently provided by Comhairle nan Eilean Siar and which are to be integrated, are set out in Part 2 of Appendix 3.
- 3.4 Each function listed in column A of Part 1 of Appendix 3 is delegated subject to the exceptions in column B and only to the extent that it is exercisable in relation to persons of at least 18 years of age.

### **4. Local Operational Delivery Arrangements**

- 4.1 The Integration Joint Board is responsible for the strategic planning and oversight of the delivery of the services related to the functions delegated to it. This will be carried out by the development of a Strategic Commissioning Plan which will set out the arrangements for carrying out the integration functions and how these will contribute to achieving the nine National Health and Well-Being outcomes. The Integration Joint Board will give direction to Western Isles Health Board and Comhairle nan Eilean Siar to carry out each function delegated to it. Assurance to the Integration Joint Board over the performance of services delivered by Western Isles Health Board and Comhairle nan Eilean Siar will be provided by regular and frequent performance monitoring reports to the Integration Joint Board by the Chief Officer.
- 4.2 The Integration Joint Board will have provided to it, the necessary, appropriate, and reasonable resources to undertake the functions delegated by Western Isles Health Board and Comhairle nan Eilean Siar.
- 4.3 The Integration Joint Board will:-
- a. Appoint its Chief Officer.
  - b. Appoint its Chief Financial Officer.
  - c. Convene a Strategic Planning Group specifically to enable the preparation of Strategic Commissioning Plans in accordance with section 32 of the Act; inform significant decisions outside the Strategic Commissioning Plan in accordance with section 36 of the Act; and review the effectiveness of the Strategic Commissioning Plan in accordance with section 37 of the Act, in line with the obligations to meet the engagement and consultation standards.
  - d. Prepare, approve and implement a Strategic Commissioning Plan for all of its delegated functions, in accordance with the Act; supported by an integrated workforce and organisational development plan.
  - e. Establish arrangements for locality planning in support of key outcomes for the agreed localities in the context of the Strategic Commissioning Plan.
  - f. Approve the Strategic Commissioning Plan as presented by the Chief Officer, before the integration start date in accordance with the Act.
  - g. Approve the allocation of resources to deliver the Strategic Commissioning Plan within the specific revenue budget as delegated by each Party (in accordance with the standing financial instructions/orders of both Parties), and where necessary to make recommendations to either or both Parties.

- h. Prepare and publish an annual financial statement that sets out the amount that the Integration Joint Board intends to spend in implementation of the Strategic Commissioning Plan in accordance with the Act.
- i. Share an Annual Report with Western Isles Health Board and Scottish Comhairle nan Eilean Siar.
- j. Have oversight of the performance of all the services referred to in 3.1, 3.2, 3.3 and 3.4 above, through the Chief Officer.

**4.4 The Integration Joint Board may consider the following:**

- a. Establishing a standing Audit Committee to focus on financial audit and governance matters, including (where necessary) making recommendations to either or both Parties.

**4.5 Targets and Performance Management**

- 4.5.1 Western Isles Health Board and Comhairle nan Eilean Siar will establish a Performance Management Framework which meets the obligations set out in legislation and will take account of targets, measures and objectives which are in force at any given time for integrated and non-integrated functions. The Integration Joint Board will receive frequent and regular monitoring reports on the agreed performance framework in pursuit of the delivery of the Strategic Commissioning Plan, including all delegated and set-aside budgets.
- 4.5.2 Both parties will develop a Performance Management Framework with a list of all relevant targets, measures and arrangements which relate to the integration functions and for which strategic planning responsibility is to transfer, in full to the Integration Joint Board. Comhairle nan Eilean Siar and Western Isles Health Board have existing performance management processes and the Integration Performance Management Framework will align reflect processes to avoid unnecessary duplication and streamline reporting and will as far as possible, draw on existing data sets and reporting mechanisms. The monitoring of and performance management of service as that related to operational delivery resides with the parties.
- 4.5.3 In meeting the delivery requirements of the national health and wellbeing outcomes, consideration will need to be given to any additional resource requirements for collecting and reporting information that is not currently collected, both in operational and support terms.

4.5.4 The Chief Officer will provide twice yearly Strategic Commissioning Plan Performance Reports to the Integration Joint Board for members to scrutinise performance and impact against planned outcomes and commissioning priorities. This will culminate in the production of an annual performance report to the Integration Joint Board.

4.5.5 The national and local performance measures and targets as they relate to the operational delivery of delegated functions outlined in 3.1, 3.2, 3.3 and 3.4 will be retained in relation to operational delivery arrangements. Strategic planning and associated financial planning is the responsibility of the Integration Joint Board which is accountable for the delivery of the Strategic Commissioning Plan and associated financial objectives.

#### **4.6 Corporate Services Support**

4.6.1 With regard to corporate services support:

- The Chief Officer shall identify the corporate resources required to deliver the delegated functions. This will be reflected in the membership of the HSCP Senior Management Team alongside those functions that are required by the IJB in meeting its Public Body obligations.

4.6.2 These support services include, but are not limited to:-

- Health Intelligence
- Finance
- Workforce
- ICT
- Administrative Support
- Internal Audit
- Performance Management
- Risk

### **5. Clinical and Care Governance**

5.1 Assurance to the Integration Joint Board and subsequently, Comhairle nan Eilean Siar and Western Isles Health Board in respect of clinical and care governance will be achieved through explicit and effective lines of accountability. This accountability begins in the care setting within an agreed clinical and care governance framework established on the basis of existing key principles appropriately linked with ?? in the governance and scrutiny arrangements of Comhairle nan Eilean Siar and Western Isles Health Board.

5.2 The Executive Directors at Western Isles Health Board level (Medical Director, Nurse/AHP Director and Chief Operating Officer, and Director of Public Health) share responsibility for clinical governance of NHS services as a responsibility/function delegated from the Chief Executive of Western Isles Health Board.

- 5.3 These Executive Directors continue to hold that responsibility for ensuring that appropriate systems and processes are in place and working effectively across Western Isles Health Board to support clinical staff who deliver care through health and social care integrated services. They attend the Western Isles Health Board Clinical Governance Committee which oversees and applies scrutiny to the clinical governance arrangements of all services delivered by health care staff employed by Western Isles Health Board and which in turn will provide assurance to the Health Board and Integration Joint Board that it has undertaken its duties in this respect.
- 5.4 As part of the integration arrangements the Chief Social Work Officer will provide oversight and advice to the Integration Joint Board on the quality of social work services delivered by Social Work Services through health and social care integrated services. The Chief Social Work Officer will continue to provide professional leadership for Social Work and be accountable for statutory decisions relating to Social Work. The Chief Social Work Officer is responsible to Comhairle nan Eilean Siar for such decisions and ensures that links are made across all Social Work services. The Chief Social Work Officer also advises Comhairle nan Eilean Siar on the delivery of social work services through an annual report which will be made available to the Integration Joint Board for assurance purposes. Comhairle nan Eilean Siar will in turn provide assurance to the Integration Joint Board via the Chief Social Work Officer.
- 5.5 An Annual Clinical Governance Report from the Board Clinical Governance Committee will go to the Integrated Joint Board. In addition, specific assurance can be requested on Clinical and Care Governance matters relating to the delegated functions as and when required.
- 5.6 As part of the regular monitoring process the Integration Joint Board may, as required, also take advice from other appropriate professional forums and groups as outlined in Scottish Government guidance, including the Public Protection Committee (which encompasses adult and child protection activity and assurance

- 5.7 The appropriate appointed Executive Directors at Western Isles Health Board level (Medical Director, Nurse/AHP Director and Chief Operating Officer, and Director of Public Health) will support the Chief Officer and the Integration Joint Board.
- 5.8 The Chief Social Work Officer will support the Chief Officer and the Integration Joint Board in the same manner they support Comhairle nan Eilean Siar. Appropriate arrangements are in place for the Chief Social Work Officer to discharge their responsibility to health and social care staff who have a professional or corporate accountability to the Chief Social Work Officer.

## **6. Chief Officer**

- 6.1 The Integration Joint Board shall appoint a Chief Officer in accordance with section 10 of the Act.
- 6.2 The Chief Officer will be accountable directly to the Integration Joint Board for the preparation, implementation and reporting on the Annual Commissioning Plan as guided by the Strategic Framework including overseeing the operational delivery of delegated services as set out in Appendices 2 and 3.
- 6.3 Where the Chief Officer does not have operational level management responsibility for services included in integrated functions, the parties will ensure that appropriate communication and liaison is in place between the Chief Officer and the person/s with that operational management responsibility.
- 6.4 The Chief Officer will be a member of the parties' senior management teams and be accountable to and managed by the Chief Executives of both Parties.
- 6.5 Where there is to be a prolonged period where the Chief Officer is absent or otherwise unable to carry out their responsibilities, the Comhairle nan Eilean Siar Chief Executive and Western Isles Health Board's Chief Executive will jointly propose an appropriate interim arrangement for approval by the Integration Joint Board's Chair and Vice-Chair at the request of the Integration Joint Board.

## **7. Workforce**

- 7.1 Strategic workforce planning and development will be an integrated process encompassing delegated and non-delegated function.

- 7.2 Core HR services will continue to be provided by the appropriate corporate HR functions in Comhairle nan Eilean Siar and Western Isles Health Board.
- 7.3 Organisational development plans and the outline workforce plan will be refreshed periodically by the parties and the Integration Joint Board.
- 7.4 Western Isles Health Board and Comhairle nan Eilean Siar professional/clinical supervisions arrangements for professional and clinical staff will continue until superseded by any jointly agreed arrangements.

## **8. Finance**

- 8.1 The Integration Joint Board will seek assurance from Western Isles Health Board and Comhairle nan Eilean Siar over the sufficiency of resources to carry out its delegated duties and adjust its budget and service delivery accordingly, following which it will approve the initial amount delegated to it. This will continue in future years following negotiation with the other parties.
- 8.2 The arrangements in relation to the determination of the amounts paid, or set aside, and their variation, to the Integration Joint Board by Western Isles Health Board and Comhairle nan Eilean Siar are set out below at sections 8.3, 8.4.8.5 and 8.6:-
- 8.3 Payment to the Integration Joint Board for delegated functions
  - 8.3.1 A baseline payment was established by reviewing past performance and existing plans for Western Isles Health Board and Comhairle nan Eilean Siar for the functions to be delegated.
  - 8.3.2 Delegated baseline budgets are subject to due diligence and comparison to recurring actual expenditure in the previous three years adjusted for any reasonable, appropriate and planned changes to ensure they are realistic.
- 8.4 **Payment to the Integration Joint Board for delegated functions**
  - 8.4.1 In subsequent years the Chief Officer and the Integration Joint Board Chief Financial Officer will develop a draft Integrated Joint Board Budget based on the Strategic Commissioning Plan. The draft Budget will be presented to Western Isles Health Board and Comhairle nan Eilean Siar for consideration as part of the annual and strategic budget setting process. The case should be evidenced, with full transparency demonstrating the following assumptions:-
    - Performance against outcomes
    - Activity changes



- Cost inflation
- Price changes and the introduction of new drugs/technology
- Agreed service changes
- Legal requirements
- Transfers to/from the amounts made available by Western Isles Health Board for hospital services
- Adjustments to address equity of resource allocation

8.4.2 Western Isles Health Board and Comhairle nan Eilean Siar shall consider the following when reviewing the Strategic Commissioning Plan:

- The Local Government Financial Settlement
- The uplift applied to NHS Board funding from Scottish Government
- Efficiencies to be achieved

8.4.3 Whilst the Integration Joint Board will plan, agree and deliver the Strategic Commissioning Plan and related Financial Plan, this will follow a process of joint discussion and planning with the other parties.

8.4.4 It will be the responsibility of the Council Section 95 Officer and the NHS Board Accountable Officer to comply with the agreed reporting timetable and to make available to the Integration Joint Board Chief Financial Officer the relevant financial information required for timely financial reporting to the Integration Joint Board. This will include such details as may be required to inform financial planning of revenue expenditure. The Integration Joint Board's Chief Financial Officer will manage the respective financial plan so as to deliver the agreed outcomes within the Joint Strategic Commissioning Plan viewed as a whole. Monitoring arrangements will include the impact of activity on set aside budgets.

## 8.5 In-year variations

8.5.1 Neither Western Isles Health Board nor Comhairle nan Eilean Siar may reduce the payment in-year to the Integration Joint Board to meet exceptional unplanned costs within the constituent authorities, without the express consent of the Integration Joint Board and constituent authorities for any such change. Where appropriate, specific or supplementary resources are identified or received by Western Isles Health Board or Comhairle nan Eilean Siar, these will be passed on to the Integration Joint Board through increasing the level of budgets delegated to it.

8.5.2 The Chief Officer of the Integration Joint Board will deliver the agreed outcomes within the total agreed delegated resources. Where there is an unplanned unforeseen financial pressure which results in a forecast outturn overspend against an element of the operational budget the Chief Officer and the



Chief Financial Officer of the Integration Joint Board must agree a recovery plan to balance the overspending budget with the relevant finance officer of the constituent authority. The recovery plan will need to be approved by the Integration Joint Board.

- 8.5.3 Should the recovery plan be unsuccessful the Integration Joint Board may request that the payment from Western Isles Health Board and Comhairle nan Eilean Siar be adjusted, to take account of any revised assumptions. It will be the responsibility of the authority which originally delegated the budget to consider whether an additional payment should be made to cover the shortfall.
- 8.5.4 In the case of joint services any additional payment will be agreed *pro rata* the original budget level.
- 8.5.5 The Integration Joint Board should make repayment in future years following the same methodology as the additional payment. If the shortfall is related to a recurring issue the Integration Joint Board should make appropriate provision in the Strategic Commissioning Plan and financial plan for the following year.
- 8.5.6 Additional adjustments may be required, for example, when errors in the methodology used to determine the delegated budget are found. In these circumstances the payment for this element should be recalculated using the revised methodology.
- 8.5.7 Where there is a planned underspend in operational budgets arising from specific action by the Integration Joint Board it will be retained in reserves by the Integration Joint Board. This underspend may be used to fund additional capacity in-year or, with agreement with the partner organisations, carried forward to fund capacity in subsequent years. The carry forward will be held in an ear-marked balance within Comhairle nan Eilean Siar general reserve. If an underspend arises from a material error in the assumptions made to determine the initial budget, the methodology of the payment may need to be recalculated using the revised assumptions.
- 8.5.8 Any unplanned underspend will be returned to Western Isles Health Board or Comhairle nan Eilean Siar by the Integration Joint Board either in the proportion that individual pressures have been funded or based on which service the savings are related to.
  - The Integration Joint Board will have financial accountability for the funding received as payments from Western Isles Health Board and Comhairle nan Eilean Siar. This financial accountability will not apply to notional funding for Set Aside Budgets included within the Strategic Commissioning Plan.
  - The Integration Joint Board will follow best practice guidelines for audit;
    - The Integration Joint Board and their Chief Financial Officer will receive financial management support from Western Isles Health Board and Comhairle nan Eilean Siar who will:
    - Record all financial information in respect of the Integration Joint Board in an integrated database, and use this information as the basis for preparing regular, comprehensive reports to the Integration Joint Board.

- Support the Chief Financial Officer of the Integration Joint Board to support preparation of the annual accounts, financial statement prepared under section 39 of the Act, the financial elements of the Strategic Commissioning Plan and other reports that may be required.
- Ensure bi-monthly financial monitoring reports relating to the performance of the Integration Joint Board against the delegated budget will be submitted to ICMT and Integration Joint Board.
- Ensure regular reports will be prepared on the financial performance against the agreed annual budget. Strategic Commissioning Plan.
- In advance of each financial year a timetable of financial reporting will be included within the IJB committee workplan.

## 8.6 **Capital Assets:**

- 8.6.1 The Integration Joint Board will not own any capital assets but will have use of such assets which will continue to be owned by Western Isles Health Board and Comhairle nan Eilean Siar who will have access to sources of funding for capital expenditure. In line with guidance, the Integration Joint Board will not receive any capital allocations, grants or have the power to borrow to invest in capital expenditure.
- 8.6.2 The Chief Officer will consult with Western Isles Health Board and Comhairle nan Eilean Siar to identify need for asset improvement owned by either party and where investment is identified, will submit a business case to the appropriate party which will be considered as part of each party's existing capital planning and asset management arrangements.

## 8.7 **Year-end balances:**

- 8.7.1 In line with guidance, a process for jointly agreeing, reporting and carrying forward any unused balances at the end of the financial year will operate.

## 9. **Participation and Engagement**

- 9.1 Section 6(2)(a) of the Public Bodies (Joint Working) (Scotland) Act 2014 requires Local Authorities and Health Boards to prepare an Integration Scheme. Before submitting the Integration Scheme to Scottish Ministers for approval, the Local Authority and Health Boards have consulted with:-

- Staff of the Local Authority likely to be affected by the Integration Scheme;
- Staff of the Health Board likely to be affected by the Integration Scheme;
- 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; and
- Third sector bodies carrying out activities related to health or social care.

9.2 Feedback from all of the above has been used to inform the refresh of the Scheme of Integration.

9.3 There are national standards for community engagement and participation which underpin how Comhairle nan Eilean Siar and Western Isles Health Board operate.

9.4 Timely and effective communications and engagement is a key component in the development, review and renewal of the Strategic Commissioning Plan. A communications and engagement strategy and action plan will be developed, in conjunction with the Strategic Planning Group to support this work.

## **10. Information-Sharing**

10.1 Comhairle nan Eilean Siar, the Western Isles Health Board and the Integration Joint Board agree to be bound by the Memorandum of Understanding between CnES and NHSWI in relation to the sharing of information for the purposes of integrated health and social care services in Western Isles areas.

10.2 This protocol describes the key principles the parties must adhere to for information to be shared lawfully, securely and confidentially. Other signatories will be added as appropriate.

10.3 Procedures for sharing information between Comhairle nan Eilean Siar, NHS Western Isles, and, where applicable, the Integration Joint Board will be drafted as Information Sharing Agreements and procedure documents, as required.

10.4 **Information-Sharing and Confidentiality** All staff are bound by the data confidentiality policies of their employing organisations and the requirements of the Information Sharing Protocol that is in place.

- 10.5 **Information Sharing and data handling** With respect to person identifiable material, data and information will be held in both electronic and paper format and only be accessed by authorised personnel in order to provide the service user with the appropriate service within the partnership.. In order to comply with the UK Data Protection Act 2018 all parties will always ensure that any personal data that is processed will be handled fairly, lawfully and with justification.
- 10.6 Comhairle nan Eilean Siar and NHS Western Isles will continue to be Data Controller for their respective records (electronic and manual), and will detail arrangements for control and access. The Integration Joint Board may require to be Data Controller for personal data where it is not held by either Comhairle nan Eilean Siar or NHS Western Isles.
- 10.7 Roles and responsibilities for third party organisations will be detailed in contracts with respective commissioning bodies, and access to shared records agreed in advance.
- 10.8 Following consultation, Information Sharing Protocols and procedure documents will be recommended for signature by the Chief Executives of Western Isles Health Board and Comhairle nan Eilean Siar.
- 10.9 Once established, Agreements and Procedures will be reviewed every two years, or more frequently if required.
- 10.10 **The Public Records (Scotland) Act:** Both parties are scheduled Public Authorities under the Public Records (Scotland) Act and have a duty to create and have approved a records management plan. The Integration Joint Board also has a records management plan in compliance with the requirements of the Act. Reference to information management procedures of the integrated service will be recorded in both parties plans, including information sharing and other record keeping arrangements and duties that pertain to services contracted out to third party service providers or external agencies will also be included.

- 10.11 Responsibility for records created, retained and disposed by each organisation remains with that organisation. Each party will maintain their existing records according to their own policies and disposal schedule. The Records Management Code of Practice for Health and Social Care (2024) sent out criteria and guidance around what constitutes a record and the records lifecycle, governance and responsibilities. [Records Management Code of Practice for Health and Social Care v4.0 \(scot.nhs.uk\)](https://scot.nhs.uk/records-management-code-of-practice-for-health-and-social-care-v4.0)
- 10.12 **Security:** The success of information sharing relies on a common understanding of security. The information sharing protocol refers to the expected standard but each party must maintain its own guidance to ensure it meets that standard and that controls to manage the following elements are included:-
- Safe storage of documents transported between work and site. Access to electronic and physical records. Use of laptops, memory sticks and other portable data devices when working off site (including at home);
  - Confidential destruction;
  - Security marking on electronic communications when applicable
- 10.13 **Access to information - Freedom of Information (FOI):** Both NHS Western Isles and Comhairle nan Eilean Siar will receive Freedom of Information requests and will manage these requests through their own existing processes. Both parties process involves a central FOI system for each organisation, and will work to their own timescales and processes, as separate legal entities.
- 10.14 Should one organisation receive a request that also relates to the other, this requester will be signposted by the receiving organisation to the partner organization if they do not hold the requested data.
- 10.15 Both organisations will use the same performance measures and report regularly and separately to the Scottish Information Commissioner (OSIC).
- 10.16 F.O.I requests that relate specifically to the Strategic Planning Commissioning by the IJB will be managed by the Chief Officer.
- 10.17 **Subject Access Requests:** As each organization is a legal entity, individual requests to view or access records held by each respective organization will be dealt with separately.

Therefore, each party will manage its requests following that organisation's procedures, under the Data Protection Act 2018..

**10.18 Privacy and confidentiality:** Most of the information the integrated services will handle will be personal and confidential in nature. All staff with access to shared information will

1. receive regular training in handling personal data compliantly;
2. have access to systems and records removed as soon as they leave the post that allows them to share information;

**10.19 Information Governance:** The Information Governance reporting arrangements for each party are as follows:

1. NHS Western Isles: The Information Governance Steering Group reports to the NHS Western Isles Board.
2. Comhairle nan Eilean Siar: The Information Governance Group reports to the Corporate Management Team.

## **11. Complaints**

**11.1** The Parties agree that complaints in relation to the delegated functions as set out in Part 2 Appendix 2, and Part 2 Appendix 3, will be received, managed and responded to by the appropriate lead organisation and agree to the following arrangements in respect of this:-

- Complaints in relation to integrated services or Comhairle nan Eilean Siar services can be made to Comhairle nan Eilean Siar, Council Offices, Sandwick Road, Stornoway, Isle of Lewis HS1 2BW.
- Complaints in relation to integrated services or Western Isles Health Board services can be made to NHS Western Isles, Health Board Offices. 37 South Beach, Stornoway, Isle of Lewis, HS1 2BB.
- Complaints in relation to the strategic planning process, the Strategic Commissioning Plan, or the functioning of the IJB itself as they relate to delegated services, should be made to the Chief Officer, IJB, c/o NHS Western Isles, Health Board Offices. 37 South Beach, Stornoway, Isle of Lewis, HS1 2BB
- Each organisation will have a clearly defined description of what constitutes a complaint contained within their organisations complaints handling documentation.
- A framework has been developed that clearly shows the lead organisation for each integrated service and the contact details for those who will be responsible for progressing any complaints received. The lead organisation will take

responsibility for the triage of the complaint, and liaise with the other organisation to develop a joint response where required.

- Where the complaint is multi-faceted and has a multi-agency dimension to it, the Chief Officer will designate one of the existing processes to take the lead for investigating and coordinating a response. The Chief Officer will have an overview of complaints related to integrated services and will provide a commitment to joint working, wherever necessary, between the parties when dealing with complaints about integrated services.
- If a complaint remains unresolved through the defined complaints-handling procedure, complainants will be informed of their right to go either to the Scottish Public Services Ombudsman for services provided by Western Isles Health Board, or to the Social Work Complaints Review Committee following which, if their complaint remains unresolved, they have the right to go to the Scottish Public Services Ombudsman for services provided by Scottish Comhairle nan Eilean Siar
- There will be three established processes for a complaint to follow depending on the lead organisation.
  1. Statutory Social Work.
  2. NHS.
  3. Independent Contractors – All Independent Contractors involved with the Integration Joint Board, will be required to have a Complaints Procedure in place. Where complaints are received that relate to a service provided by an Independent Contractor, the lead organisation will refer the complainant to the Independent Contractor for resolution of their complaint. This may be done by either provision of contact details or by the lead organisation passing the complaint on, depending on the approach preferred by the complainant.
- The current process for gathering service user/patient/carer feedback within Western Isles Health Board and Comhairle nan Eilean Siar, how it has been used for improvement, and how it is reported will continue.

## **12. Claims Handling, Liability & Indemnity**

- 12.1 Western Isles Health Board will continue to follow their CNORIS programme for their services and Comhairle nan Eilean Siar will continue with their current insurance processes. This will be applied to all integrated services.
- 12.2 Where there is a shared liability negotiations will take place as to the proportionality of each parties liability on a claim by claim basis.

## **13. Risk Management**

- 13.1 The parties will have in place systems for the assessment, identification, management, mitigation and or removal of risks, as they relate to the operational planning and delivery of services.



The integration authority will have in place the same system in relation to its strategic planning, commissioning and associated functions.



- 13.2 The Chief Officer will be responsible for the assessment, identification, mitigation and or removal of risks as they relate to the Strategic Planning and commissioning Functions of the IJB.
- 13.3 The Chief Officer will develop and IJB Corporate Risk Register for approval by the IJB Audit and Risk Committee
- 13.4 As part of the risk management strategy the Chief Officer will be responsible for drawing to the attention of the Integration Joint Board any new or escalating risks and associated mitigations to ensure appropriate oversight and action.
- 13.5 Business Continuity plans will be developed and tested on a regular basis for the integrated services.

#### **14. Dispute resolution mechanism**

- 14.1 Where either of the Parties fails to agree with the other on any issue related to this Scheme, then they will follow the process as set out below:
  - (a) The Chief Executives of Western Isles Health Board and Comhairle nan Eilean Siar, will meet to resolve the issue;
  - (b) If unresolved, the Western Isles Health Board, and Comhairle nan Eilean Siar will each prepare a written note of their position on the issue and exchange it with the others. This will be actioned within 10 working days.
  - (c) In the event that the issue remains unresolved, the Chief Executives (or their representatives) of Western Isles Health Board and Comhairle nan Eilean Siar will proceed to mediation with a view to resolving the issue.
  - (d) A professional independent mediator will be appointed. The mediation process will commence within 28 calendar days of the agreement to proceed.
  - (e) The Mediator shall have the same powers to require any Partner to produce any documents or information to him/her and the other Partner as an arbiter and each Partner shall in any event supply to him such information which it has and is material to the matter to be resolved and which it could be required to produce on discovery; and
  - (f) The fees of the Mediator shall be borne by the Parties in such proportion as shall be determined by the Mediator having regard (amongst other things) to the conduct of the parties.
- 14.2 Where the issue remains unresolved after following the processes outlined above, the Parties agree the following process to notify Scottish Ministers that agreement cannot be reached.
- 14.3 The Chief Executives shall write to Scottish Ministers detailing the unresolved issue, the process followed and findings of the mediator and seek resolution from Scottish Ministers.

**APPENDIX OF DOCUMENTS – HEALTH AND SOCIAL CARE SCHEME OF INTEGRATION**

Appendix No	Document
	Functions delegated by the Health Board to the Integration Joint Board – I think pages 33-42 from our existing
	Functions delegated by the Local Authority to the Integration Joint Board – from our existing