

**GLASGOW SHADOW HEALTH AND SOCIAL CARE INTEGRATION BOARD
INAUGURAL MEETING**

**Monday 23rd June 2014 at 11.00 hours
in the City Chambers, Glasgow**

- 1. Welcome, Introductions and Apologies for Absence.**
- 2. Terms of Reference and Membership of Shadow Board. (attached)**
- 3. Document Production Outline. (attached)**
- 4. HSCI Project Structure. (attached)**
- 5. Workstream Status Reports**
 - (a) Finance – Report by Sharon Wearing/ Jeanne Middleton;**
 - (b) Communications – Report by Jason Mokrovich/Gary;
Dover;**
 - (c) Governance – Report by David Williams/ Alex
MacKenzie;**
 - (d) Locality Planning – Report by Mark Feinmann/Mike
Burns;**
 - (e) Organisational Development Report by Isla
Hyslop/Tony Mackie; and**
 - (f) ICT – report by Mark Darroch, Fiona Lockhart and Shirley
Ann Moore**
- 6. Consultation on the draft regulations and orders relating to the
Public Bodies (Joint Working) (Scotland) Act 2014 – Report by
David Williams/ Alex MacKenzie. (attached)**
- 7. Non-voting Stakeholder Representation. (attached)**
- 8. Board Development. (OD resource up-date)**
- 9. Report Template. (attached for discussion / approval)**
- 10. Dates of Future Meetings.**

**22 September at 10.00 hours
17 November at 10.00 hours**

Item 2

23 June 2014

Health & Social Care Integration

Draft Remit of Glasgow Shadow Integration Joint Board

Introduction

The Public Bodies (Joint Working) (Scotland) Act 2014 was passed by the Scottish Parliament on 25th February 2014 and received Royal Assent on 1st April 2014. The Act requires that health and social care services for adults (as a minimum) must be integrated and sets out options for delegated governance arrangements through which this is to be achieved.

Glasgow City Council and NHS Greater Glasgow and Clyde have agreed that the arrangements for Glasgow should be in line with that of the body corporate. An Integration Joint Board must therefore be formally established by April 2015. In preparation for integration it has been agreed that a Shadow Integration Board shall be established by June 2014. This paper lays out the proposed remit and membership of the shadow integration board for consideration by the respective parent organisations.

Remit

The Shadow Integration Board will not be a decision making body. Legislation for integration shall be fully enacted in April 2015. At that point the Shadow Board will be endorsed as the full Integration Joint Board and assume decision making powers as defined by the Act and as agreed by Glasgow City Council and NHS Greater Glasgow and Clyde. During the interim period the Shadow Integration Board will act as an advisory body to the parent organisations and require any proposed decisions to be ratified by them.

The Shadow Board will be a full and equal partnership between Glasgow City Council and NHS Greater Glasgow and Clyde and will operate within the existing Council and NHS strategic frameworks.

General Functions

- To advise on the creation and development of an integrated Health and Social Care Partnership and Joint Integration Board for Glasgow City in terms of the Public Bodies (Joint Working) (Scotland) Bill 2014.
- To advise on the development of the Integration Scheme and the Strategic Plan and to make recommendations to the parent bodies in this regard.
- To advise on the development of specific areas of work which are delegated to the joint work streams to define transition arrangements.
- To advise on membership of the Shadow Board from stakeholder representative members.
- To have an oversight of service reform activity across both organisations

- To have an oversight of developing financial arrangements from our current financial structure to the proposed financial plan

Membership

Whilst the Shadow Board does not have decision making powers, its constitution should nonetheless mirror that which will be required of the full Integration Joint Board. There shall be three categories of membership when the IJB is in its final form;

- Voting Members - refers to elected members of the council and non-executive directors (or alternatives) from the health board.
- Non-voting stakeholder representative members – refers to various stakeholder groups with an interest in the workings of the partnership
- Non-voting professional advisory member who are appointed to the Board by virtue of the post they hold within the parent organisations.

Whilst the Shadow Board will not have voting status Appendix A proposes the composition of the Shadow Board in line with the categories noted above.

Chair

The first Chair of the full Board shall be a Council appointee and the Vice-Chair shall be an NHS Board appointee. The Transition Scheme will define rotational arrangements and term of office for the full Board effective from April 2015.

It is proposed that chairing of the Shadow Board should be rotational on a meeting by meeting basis.

Quorum

Four Elected Members and four NHS Members shall constitute a quorum for the Shadow Board. If there are less than 4 members from each parent body present after 15 minutes of the start time of a meeting an adjournment will take place and no business will be transacted. The Transition Scheme will define the quorum for the full Board.

Where a vacancy arises on the Board the relevant parent organisation will be asked to nominate a replacement member.

Management Support

The legislation allows for one employee of a Joint Integration Board, the Chief Officer. During the transition period the Chief Officer will be employed by the organisation he/she is currently employed by and report to the Chief Executives of both parent bodies. The post holder will provide support to the Shadow Board and instruct other management support from the parent organisations as required. The shadow board will be supported by the Executive Director of Social Care and the Interim CHP Director until the Chief Officer comes into post. An Integration Executive Group comprising senior managers from NHS GG&C and GCC has been developed and will support the work of the Board. A number of early actions / recommendations will be required of the shadow board. These are outlined for consideration at appendix B.

Meeting Frequency

The Shadow Board will meet initially on a two monthly basis.

Appendix A – Proposed Membership

Voting Members (no voting arrangements will be required for the Shadow Board period, the proposals below reflect full board requirements and the intention is that the Shadow board compositions should work towards reflecting this)

Voting members are deemed as such to reflect the significant budgetary and statutory responsibilities of the Council and the Health Board, membership of this category is proposed as follows;

VOTING MEMBERS	
Glasgow City Council	8 Elected Members
NHS Greater Glasgow & Clyde	8 Non-Executive Directors

Professional Advisory Members

Professional Advisory Members are nominated to provide advice to the Board by virtue of the post they hold within the respective parent organisations. Interim Membership within this category is proposed as follows;

NON-VOTING PROFESSIONAL ADVISORY MEMBERS	
Joint	Chief Officer
Glasgow City Council	Director of Finance (Section 95 Officer)
NHSGG&C	Nomination of Health Board Chief Executive as accountable officer for NHS Finance
Glasgow City Council	Executive Director of Social Care / Chief Social Work Officer
NHSGG&C	Interim CHP Director
NHSGG&C	Clinical Director
NHSGG&C	Lead Nurse

Stakeholder Representative Members

Stakeholder representative members should be nominated from a range of sources in line with the relevant interest groups. Proposed membership within this category is as follows;

NON-VOTING STAKEHOLDER REPRESENTATIVE MEMBERS
1 representative representing carers
1 representative representing patient interests
1 representative representing social care user interests
1 representative representing the interests of third sector provider organisations
1 representative to be sought from Glasgow based private sector providers of social care services representing the interests of private sector care providers
1 staff side representative from each parent organisation

Appendix B – Initial Workplan Proposal

GLASGOW SHADOW JOINT INTEGRATION BOARD – INITIAL WORKPLAN			
Meeting date	Task	Preparatory Work	Completion Date
June 2014	Consider and approve Shadow Board Remit	Terms and Conditions to be drafted by Chief Officer / Project Team	August 2014 – recommendation approved by parent organisations
June 2014	Consider and approve Stakeholder Representative Members of the Shadow Board	Proposals to be developed by the Chief Officer / Project Team	August 2014 – Recommendation approved by parent organisations, engagement to achieve relevant membership to be commenced by Chief Officer / Project Team
June 2014	Consider a programme of Board Development Activity	Proposals to be developed by the OD Workstream Group	Work programme to proceed as planned with initial Board development session/s arranged over the summer for GCC and NHSGG&C members
August 2014	Consider a programme of engagement / consultation with stakeholders regarding integration and IJB development	Proposals to be drafted by Chief Officer / Project Team / Communications Workstream	Engagement programme to be completed by January 2015
August 2014	Agree nominations for membership by Stakeholder Representatives to the Shadow Board	Following agreement on categories of membership the Chief Officer / Project Team will have conducted engagement activity with the relevant forum.	Report to be presented to Board in October.
August 2014	Consider requirements for the Integration Scheme	Proposals developed by the Chief Officer / Project Team / Workstreams for consideration	Report to be presented to the Board in October 2014
August 2014	Consider requirements for the Strategic Plan	Proposals developed by the Chief Officer / Project Team / Workstreams for consideration	Report to be presented to the Board in October 2014
October 2104	Receive nominations	Report prepared by	Nominations

	for Board membership by Stakeholder Representative Groups	Chief Officer on progress / nominations	considered and passed to parent organisations for ratification.
October 2014	Progress on draft Integration Scheme to be considered.	Draft in preparation by Project Team and Workstream Groups as guided by the Chief Officer	Integration Scheme to be completed by April 2015
October 2014	Progress on Strategic Plan to be considered	Draft in preparation by Project Team and Workstream Groups as guided by the Chief Officer	Integration Scheme to be completed by April 2015
December 2014	Members from Stakeholder Representative Groups is concluded and membership completed for December meeting	Chief Officer and relevant staff will have conducted preparatory work with stakeholder Board Members	Full membership of Shadow Board is achieved - December
December 2014	Progress on Integration Scheme and Strategic Plan is considered.	Chief Officer and relevant staff to present draft documents	Shadow Board to recommend adoption of Integration Scheme and Strategic Plan to parent bodies for approval.

Item 3

23 June 2014

**Health and Social Care Integration - Draft Workplan for
Production of Documents Required by the Act**

Activity	Timescale
Members of Shadow Board identified	April / May 2014
Development of Integration Scheme by Project Team, Workstreams, Chief Officer	April - December 2014
Development of Strategic Plan by Strategic Planning Group(s), Project Group, Workstreams, Chief Officer	April 2014 - February 2015
Full Council approval of Shadow Board Members from Glasgow City Council	15th May 2014
NHS GGC Board approval of Shadow Board Members from NHS GGC	May 2014
Update reports to Executive Committee and NHS GGC Board	June 2014
Shadow Board considers and approves Remit	June 2014
Shadow Board reviews paper on stakeholder engagement and involvement on Shadow Board during 2014/15	June 2014
Shadow Board agrees nominations for membership from stakeholder representatives	August 2014
Shadow Board considers requirements for Integration Scheme	August 2014
Shadow Board considers requirements for Strategic Plan	August 2014
Shadow Board updated on progress of development of Integration Scheme	October 2014
Shadow Board updated on progress of development of Strategic Plan	October 2014
Shadow Board reviews final draft Integration Scheme	December 2014

Shadow Board updated on progress of development of Strategic Plan	December 2014
Integration Scheme to Executive Committee / NHS GGC Board for Approval	January 2015
Integration Scheme to Ministers for Approval	February 2015
Shadow Board reviews final draft Strategic Plan	February 2015
Shadow Board reviews Strategic Plan Accompanying Statement	February 2015
Shadow Board reviews Annual Financial Statement	February 2015
Strategic Plan, Accompanying Statement and Annual Financial Statement to Executive Committee / NHS GGC Board for Approval	March 2015
Integration Scheme Published	March 2015
Strategic Plan Published	March 2015
Strategic Plan Accompanying Statement Published	March 2015
Financial Statement Published	March 2015

HEALTH AND SOCIAL CARE INTEGRATION - GOVERNANCE MODEL



SPONSOR – Robert Calderwood & George Black

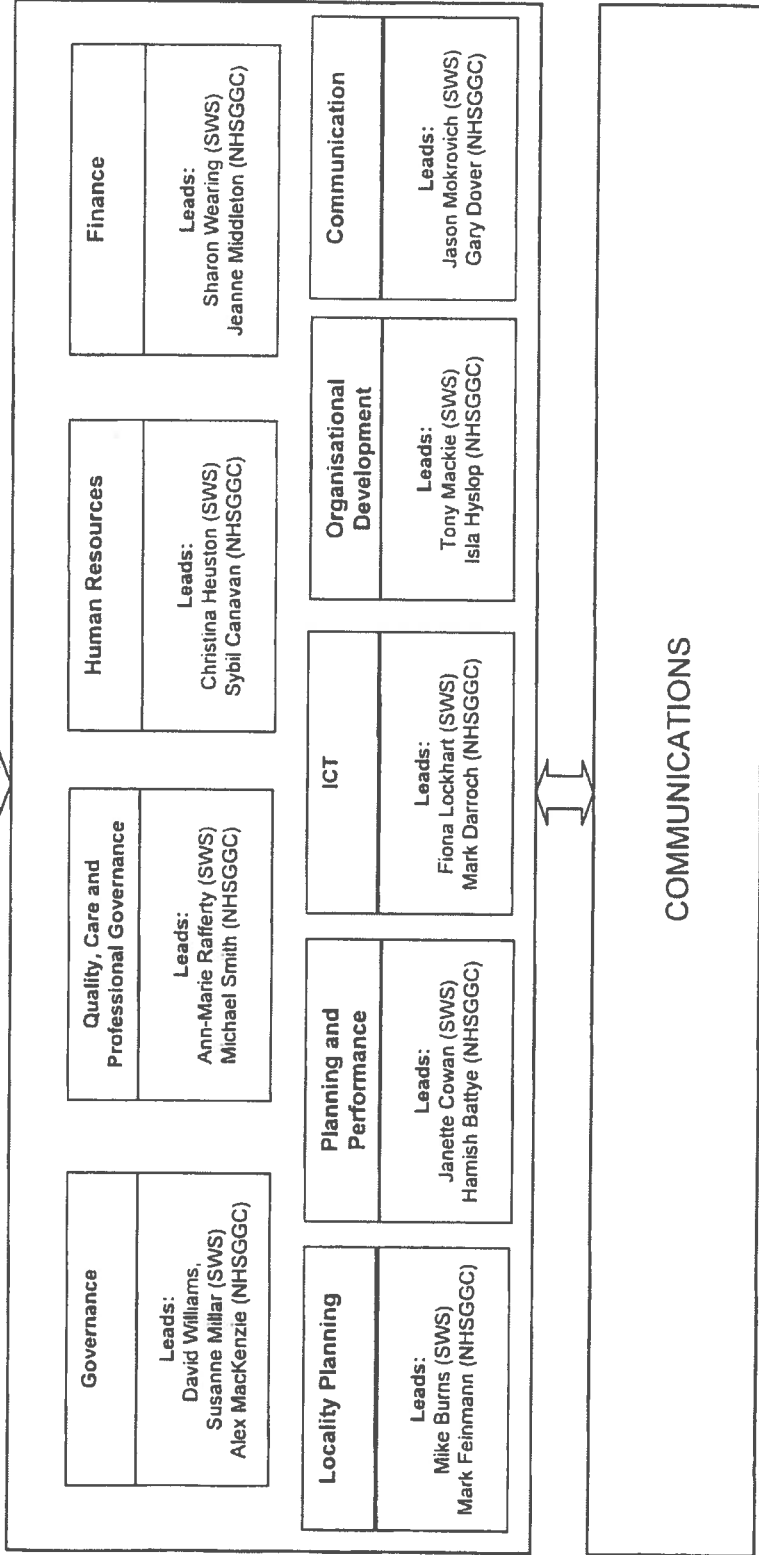
Strategic Governance Group



Integration Project Team



Steering Group



Item 4
23 June 2014



Report to: Health and Social Care Integration Steering Group

From: Sharon Wearing, Head of Service Development, Social Work Services
Jeanne Middleton, Head of Finance (Partnerships), NHSGGC

Date: 29th May 2014

Subject: Status Report May 2014 - Finance Workstream

1. Purpose of Workstream

The objectives of this workstream are to:

- Examine current Financial arrangements and determine their compatibility in an integrated structure
- Propose options that would lead to effective future integration of these arrangements
- Outline the work that would need to be undertaken to complete that integration

The workstream will cover the following areas:

- Ensure that financial recording and reporting systems are aligned and in line with secondary legislation / statutory guidance
- Ensure that arrangements for financial control, assurance and risk are in place and in line with statutory requirements and professional guidance.
- Develop the finance risk register
- Develop arrangements for financial planning and performance management including;
- Provision of detailed information in relation to partner contributions to the integrated budget
- Develop arrangements for in year budgetary control of the integrated budget

2. Membership of Workstream

The workstream is jointly chaired by Sharon Wearing and Jeanne Middleton, involving other representatives as required including representatives from corporate finance.

3. Workstream Achievements to Date

- Review draft Scottish Government financial guidance
- Review previous templates for joint reporting
- Begin to assess need for amendments, additions, clarification with aim to test against existing SFIs (Heath) and Standing Orders (LA) of both parent organisations
- Working through rules of engagement as a result of any emerging changes to SFIs/SOs
- Allocated strands of work to workstream members
- Identified number of challenging areas requiring detailed work
- Engagement with corporate group involving all partnerships within NHSGGC area to discuss a common approach to shared issues

4. Planned Activity

Over the course of 2014-15, the Finance workstream will continue to take the necessary steps to deliver on the workstream remit as outlined in section 1 above.

5. Risks and Issues

- No agreement on final structure of the organisation is the biggest sense of drift
- Minimum scope not agreed across all Partners – and will vary
- Understand dynamics and mechanics of payment contribution
- Clarity from government on timetable to move forward
- Alignment of statutory dates for Audited Accounts sign off and budget timetables.

6. Support Required from Other Workstreams

None at this stage



Report to: Health and Social Care Integration Steering Group

From: Communications Workstream
Jason Mokrovich, Workstream Lead
Gary Dover, Workstream Lead

Date: 29 May 2014

Subject: Status Report May 2014 – Communications Workstream

1. Purpose of Workstream

- 1.1 The purpose of the workstream is to communicate with a range of stakeholders to inform them of key messages on the development and implementation of integrated health and social care arrangements within Glasgow City. To this end, the workstream uses communication to ensure that stakeholders have good quality information so that they can contribute effectively to the integration process. The workstream also assists in taking forward communication as it relates to integration arrangements.
- 1.2 The key products to be delivered by the workstream include:
- Health and Social Care Integration (HSCI) communications strategy;
 - Connect and Staffnet web pages for HSCI;
 - HSCI all-staff briefing;
 - HSCI information brief and presentation;
 - development of brand identity for the partnership and
 - joint media protocol for the partnership.

2. Membership of Workstream

- 2.1 The workstream is jointly lead by:

Name	Designation	Organisation
Jason Mokrovich	Service Modernisation Manager	Glasgow City Council, Social Work Services
Gary Dover	Head of Planning and Performance	NHSGGC, Glasgow City CHP

- 2.2 The workstream consists of the following members with roles/responsibilities, and they attend four-weekly meetings as and when required:

Name	Designation	Organisation	Role/Responsibility
Tammy Girvan	Senior Officer	Glasgow City Council, Social Work Services	Project management and support
Paul Shields	Clerical Officer	Glasgow City Council, Social Work Services	Admin support
Karen Silver	Senior Officer	Glasgow City Council, Social Work Services	Internet/Intranet support
Alan Speirs	Senior Officer	Glasgow City Council, Social Work Services	Communications support
Marion Ballantyne	Communications and Change Manager	Glasgow City Council, Social Work Services	Communications support
Dawn Thom	Information and Publicity Officer	NHSGGC, Glasgow City CHP	Communications support
Laurina Hewson	Information and Publicity Officer	NHSGGC, Glasgow City CHP	Communications support
Tony Devine	Community Engagement Officer	NHSGGC, Glasgow City CHP	Communications support (engagement)
Stephen Fullerton	Staffside	NHSGGC, Glasgow City CHP	Trade Union representation
Claire Craig	Staffside	NHSGGC, Glasgow City CHP	Trade Union representation

3. Workstream Achievements to Date

- 3.1 The main achievements to date include:
- communications workstream project initiation document (PID);
 - communications workstream risk register;
 - HSCI communications strategy (including stakeholder matrix);
 - HSCI communications stakeholder analysis (in partnership with Locality Planning workstream);
 - Connect and Staffnet web pages for HSCI (including Q&A process);
 - HSCI all-staff briefing (5 to date);
 - staff survey on HSCI communications (including analysis and action plan);
 - HSCI information brief and presentation and
 - draft proposals for development of brand identity for the partnership.

4. Planned Activity

- 4.1 The main, current planned activity to be delivered by the workstream by April 2015 includes:
- maintenance of Connect and Staffnet web pages for HSCI;
 - co-ordination, development and dissemination of HSCI all-staff briefings;
 - dissemination of HSCI information brief and presentation;
 - development of brand identity for the partnership;
 - development of joint media protocol;

- development of publicity section for Integration Scheme and
- support in consultation and engagement activities on Strategic Plan and locality arrangements.

5. Risks and Issues

- 5.1 The Communications Workstream currently monitors eight risks that may affect the workstream meeting its objectives. They mainly consist of risks leading to communication about the development of proposals and arrangements for integration not being fit-for-purpose with the effect of repetitive messages, inaccurate/misleading information, missed opportunities, raising unrealistic expectations and/or disjointed, mixed messages. The probability and impact of these risks are mainly controlled through expertise within the workstream, links with the HSCI project and steering groups and processes that have governance around them.

6. Support Required from Other Workstreams

- 6.1 The Communications Workstream generally requires other workstreams to provide content for communications as and when required. It will also need to work with the OD Workstream in relation to the development of a brand identity for the partnership.



Report to: Health and Social Care Integration Steering Group

From: David Williams, Executive Director Social Care Services
Alex MacKenzie, Interim Director Glasgow CHP

Date: 29th May 2014

Subject: Status Report May 2014 - Governance Workstream

1. Purpose of Workstream

The basic remit of the Governance workstream is:

- To consider the governance implications of integration with regards to
 - Political and corporate governance
 - Financial governance
 - HR governance
- To propose detailed governance arrangements for the Integration Joint Board in line with the Public Bodies (Joint Working) (Scotland) Act
- To consider the implications of the new arrangements on existing governance and scrutiny measures and to propose necessary amendments to the same as required
- To direct workstream groups on associated governance implications in relation to their work.
- To prepare relevant sections of the Integration Scheme
- Develop effective linkages with the Community Planning Partnership

2. Membership of Workstream

The workstream is jointly led by David Williams and Alex MacKenzie, and includes representatives from both Glasgow City Council and NHS Greater Glasgow and Clyde covering the following areas

- Corporate Services
- Corporate Finance
- Human Resources
- Relevant Support Staff as required

3. Workstream Achievements to Date

Tasks completed by the Governance workstream to date include:

- Agreement on schedule and structure of workstream meetings
- Development of remit for Shadow Integration Joint Board
- Initial discussions on governance and accountability structures which will be affected by the integration of health and social care
- Initial discussions on the role and functions of the IJB and the constituent organisations in the integrated arrangements

4. Planned Activity

Over the course of 2014-15, the Governance workstream will continue to take the necessary steps to deliver on the workstream remit as outlined in section 1 above and as currently represented within the overall integration project plan.

5. Risks and Issues

The key risks to this workstream are in relation to the additional regulations attached to the Public Bodies (Joint Working)(Scotland) Act, particularly around the structure and function of the Integration Joint Board. If the final approved version of the regulations differs significantly from the draft version published in May 2014 there may be a requirement to re-visit proposals which have already been developed.

6. Support Required from Other Workstreams

All workstreams will link with the Governance workstream on an as-required basis over the course of 2014-15. There is a particular requirement at this stage for input from the OD workstream to support development of the Shadow Board, and from HR and Finance to support any work required in these respective areas.



Report to: Health and Social Care Integration Steering Group

From: Mark Feinmann and Mike Burns – Locality Planning Workstream

Date: 27 May 2014

Subject: Status Report May 2014 – Locality Planning Workstream

1. Purpose of Workstream

- 1.1 The Locality Planning Workstream was tasked with developing a workplan to ensure due consideration is given to the arrangements required to support effective Locality Planning required as an integral part of the Glasgow HSCP.

2. Membership of Workstream

- 2.1 Joint leads for the workstream, providing strategic guidance and direction are;
- Mark Feinmann, Director, NE Sector Glasgow CHP and
 - Mike Burns, Area Service Manager, NW Sector, Social Work Services
- 2.2 Planning support and analysis is provided by;
- Susan Orr, Head of Children's Services, Policy and Planning, Social Work Services
 - Fiona Moss, Head of Health Improvement, Glasgow CHP
 - Alison Hodge, Change and Development Manager, NE Sector, Glasgow CHP
- 2.3 Other colleagues providing support and advice include;
- Karen McNiven, Health Improvement Senior, South Sector, Glasgow CHP
 - Jim Gray, Head of Democratic Services, Glasgow City Council
- 2.4 Good working relationships have also been fostered between members of the Locality Planning workstream and the;
- Communications workstream and
 - the OD workstream

3. Workstream Achievements to Date

- 3.1 Progress has been made in the following areas;
- 3.2 The workstream has had a number of useful initial discussions to identify;
- The key issues to be discussed.
 - The key stakeholders to be involved – see attached stakeholder analysis

- A variety of engagement mechanisms / tools / processes that may be helpful.
- 3.3 A draft workplan and draft risks have been developed and submitted to and approved by Project Team and Steering Group. Attached.
- 3.4 Mapping of existing locality planning arrangements is almost complete. These will be tested further with a broader range of stakeholders as part of the ongoing engagement work.
- 3.5 Liaised with members of the JIT to participate in a national appreciative enquiry exercise. Outcome of our local discussion will feed into the Regulations and Guidance due to be published on 27 May to support the introduction of the Public Bodies (Joint Working) Act.
- 3.6 Standard presentation material has been developed in conjunction with the Communications workstream. Colleagues will be encouraged to take opportunities to (jointly where possible) share the presentation material and feedback comments to the Locality Planning workstream.
- 3.7 Draft programme developed for initial workshop (June 2014) which will aim to produce a robust framework for engagement.

4. Planned Activity

- 4.1 Key tasks for the remainder of 2014-15 focus on engagement with a wide range of stakeholders and the development of a proposal for the future of Locality Planning within an integrated HSCP in Glasgow. This engagement is likely to take a number of forms including liaison with existing groups and representatives, large and small scale workshop/consultation events, questionnaires and other appropriate tools.

Key outputs will include;

- Action Plan – attached
- Risk register – see below
- Stakeholder analysis – attached
- Mapping of existing arrangements – due May 2014
- Framework for Engagement – due June 2014
- Response to Scottish Government Regulations / Guidance consultation – August 2014
- Output of Engagement – Report December 2014

5. Risks and Issues

- 5.1 Key risks identified include;

Risk	Mitigating Actions
1. Confusion and / or disengagement by those currently involved in Locality Planning.	Ongoing programme of Locality Planning events to build awareness and engagement among key stakeholders. Work with Communications Workstream to ensure consistent and regular communication is achieved.

<p>2. There is a risk that current connective working between adult / children services and other corporate departments (eg Education) or partners (eg voluntary sector) is damaged leading to poorer outcomes for service users.</p>	<p>Mitigating action to be developed to ensure that the current cross working arrangements remain in place.</p>
<p>3. Disconnect between national guidance and local thinking on developing Locality Planning</p>	<p>Ensure connection with national guidance as it develops. Respond to consultation once issued.</p>

6. Support Required from Other Workstreams

6.1 Key relationships have already been established with the Communications and OD workstreams. We anticipate these will continue. The need to engage with other workstreams will be identified as the work progresses. It is likely that the outputs from the Governance and Performance Workstreams in particular may have a direct impact on the developing arrangements for Locality Planning.

In addition, we will continue to take cognisance of the Regulations and Guidance published by the Scottish Government and contribute to the consultation as appropriate.



Report to: Health and Social Care Integration Steering Group
From: Isla Hyslop and Tony Mackie OD Work stream
Date: 28 May 2014
Subject: Status Report May 2014 - OD Work stream

1. Purpose of Workstream

1.1 The principal objective of the OD work stream is to provide planned and systematic interventions that will enable the people in the partnership to establish and embed their shared vision for health and social care provision across Glasgow. This will include supporting the steering group by advising on the organisational development approach to change and integration and by identifying a consistent OD approach across the project work streams.

Each project to be advised to consider if necessary approaches to

- Engagement
- Quality Performance and Change
- Leadership
- Partnership working
- Climate, purpose, values and behaviours
- Service Improvement

The OD approach will then:

- support shared ownership of the vision for integrated health and social care in Glasgow City Council with all staff
- enable the development of a shared culture based on mutual respect to deliver the highest quality of services to Glasgow's citizens
- provide appropriate OD interventions at all levels across the partnership to facilitate constructive dialogue to achieve agreed shared outcomes.

2. Membership of Workstream

2.1 Joint leads

Isla Hyslop Head of Organisation Development Partnerships – NHS Greater Glasgow & Clyde

Tony Mackie Principal Officer learning & Development Glasgow City Social Work Services

3. Workstream Achievements to Date

- Initially this work stream will arrange a joint leadership team session for our senior management teams (guided by the Executive Director Social Work Services and the Director of Glasgow City CHP)
- Outline OD plan for integration
- Identification of resource to support the plan and the means to identify ROI

4. Planned Activity

4.1 see attached OD plan

5. Risks and Issues

5.1 Risk assessment not yet undertaken

6. Support Required from Other Workstreams

6.1 This work stream exists to collaborate and support all the other project work streams and will provide advice and direction in relation to the organisational development approach to Integration



Item 6
23 June 2014

**Glasgow City Council / NHS Greater Glasgow and Clyde
Shadow Integration Joint Board**

Report By: David Williams, Alex Mackenzie

Contact: 0141 287 6724 / 0141 314 6240

CONSULTATION ON THE DRAFT REGULATIONS RELATING TO PUBLIC BODIES (Joint Working)) (Scotland) Act 2014

Purpose of Report: To inform the Shadow Board of the consultation process on the draft regulations relating to the Public Bodies (Joint Working) (Scotland) Act 2014 and to seek views on our approach to responding to this.

Recommendations:

Implications:	For Glasgow HSCP	For Glasgow City Council	For NHS GGC
Financial:	none	none	none
Personnel:	none	none	none
Legal:	none	none	none
Economic Impact:	none	none	none
Sustainability:	none	none	none
Sustainable Procurement and Article 19:	none	none	none
Equalities:	none	none	none

1. Background

- 1.1 The Public Bodies (Joint Working) (Scotland) Bill received Royal Assent on 1 April 2014, thereby concluding the parliamentary process. The first set of Draft Regulations relating to the Bill has been published and consultation on these commenced on 12th May and will conclude on 1 August 2014.
- 1.2 The second set of Regulations and Orders was published on 27th May and consultation will conclude on 18th August 2014.

2. Draft Regulations

- 2.1 Set one of the Draft Regulations calls for comment on regulations relating to;
 - 2.1.1 Prescribed information to be included in the Integration Scheme
 - 2.1.2 Prescribed functions that must be delegated by Local Authorities
 - 2.1.3 Prescribed functions that may or must be delegated by a Health Board
 - 2.1.4 Prescribed National Health and Wellbeing Outcomes
 - 2.1.5 Interpretation of what is meant by the terms health and social care professionals
 - 2.1.6 Prescribed functions conferred on a Local Authority Officer
- 2.2 Set two of the Draft Regulations calls for comment on regulations and orders relating to;
 - 2.2.1 Establishment, membership and proceedings of the joint monitoring committee in lead agency arrangements
 - 2.2.2 Membership, powers and proceedings of integration joint boards in body corporate arrangements
 - 2.2.3 Prescribed groups which must be consulted when drafting integration schemes, prescribed consultees for draft strategic plans, prescribed consultees for localities, prescribed consultees for revised integration schemes

3. Responding to the Consultation

- 3.1 It is likely that there will be common responses from the Health Board and the Council in relation to a significant number of the regulations. However, there may be issues or concerns specific to each organisation.
- 3.2 It may, therefore be appropriate to develop a joint response to the consultation and include appendices outlining any specific organisational comments from the Health Board and Council, if these become apparent.
- 3.3 The process of consultation has already commenced with comments sought from within the parent organisations and from stakeholders relevant to both partners.
- 3.4 The timescale for responding to the two sets of regulations are 1 August and 18th August.

4. Recommendations

- 4.1 The Shadow Board is asked to consider the merits of submitting a joint response to the consultation on the draft regulations and make a recommendation in this regard.
- 4.2 It is recommended that the response to the consultations should be conducted as one, rather than two separate exercises with the responses due for submission to the Scottish Government on the earlier date of 1st August.

Item 7

23 June 2014

Non Voting Stakeholder Representative Members

The legislation requires that the Integration Joint Board has a number of essential non voting members to represent a range of interests including that of carers, patients and providers.

Whilst the inclusion of these representatives will be crucial to the workings of the board, it will be challenging to achieve a workable membership which fully satisfies the wish for inclusion by the constituent elements of the Board.

It is likely, for example, that patients, carers and providers will request more than one place on the Board. The challenge in that regard is that the Board needs to be of a manageable size in order that it can function effectively.

In the short term it will be essential to engage with and include on an interim basis stakeholder members in the shadow board. In the longer term it will be necessary to fully engage and work with these stakeholders to ensure that we have acceptable and inclusive processes for membership selection of the full board in 2015.

There are already a number of groupings in the city which are well established as representative networks in Glasgow and it is proposed that the Shadow Board considers utilising these networks to secure interim representation from these stakeholders.

Interim stakeholder representative members should be nominated from Glasgow based stakeholder fora that have an interest in the development of health and care policy relevant to Glasgow. Interim membership within this category is proposed as follows;

NON-VOTING STAKEHOLDER REPRESENTATIVE MEMBERS	
Carers Reference Group	1 representative representing carers
Public Partnership Forum	1 representative representing patient interests
Voices for Change	1 representative representing social care user interests
Third Sector Interface	1 representative representing the interests of third sector provider organisations

Social Care Ideas Factory	1 representative to be sought from Glasgow based private sector providers of social care services representing the interests of private sector care providers
Staff Side Representatives	1 staff side representative from each parent organisation

Recommendation:

The Shadow Board is asked to consider the inclusion of non-voting stakeholder representative members and to make a recommendation to the parent bodies with regards to this category of membership.



Item 9
23 June 2014

**Glasgow City Council / NHS Greater Glasgow and Clyde
Shadow Integration Joint Board**

Report By: _____

Contact: _____

Ext: _____

REPORT TITLE

Purpose of Report:

Recommendations:

Implications:	For Glasgow HSCP	For Glasgow City Council	For NHS GGC
Financial:			
Personnel:			
Legal:			
Economic Impact:			
Sustainability:			
Sustainable Procurement and Article 19:			
Equalities:			

Recommended Structure:

- Purpose of report
- Background
- Body of report
- Summary
- Recommendations

DRAFT