
Report To:	Inverclyde Integration Joint Board	Date:	15 May 2018
Report By:	Louise Long, Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership	Report No:	VP/LP/052/18
Contact Officer:	Vicky Pollock	Contact No:	01475 712180
Subject:	Inverclyde Integration Joint Board – Integration Scheme		

1.0 PURPOSE

- 1.1 The purpose of this report is to advise the Inverclyde Integration Joint Board (“IJB”) of updates to the Integration Scheme, which have been agreed by Inverclyde Council and NHS Greater Glasgow and Clyde and approved by the Scottish Ministers.

2.0 SUMMARY

- 2.1 The Inverclyde Integration Scheme is the joint agreement between Inverclyde Council and NHS Greater Glasgow and Clyde which sets out the arrangements for the integration of health and social care services and forms the basis of the establishment and continued operation of the Inverclyde Integration Joint Board.
- 2.2 Amendments were required to the Inverclyde Integration Scheme as a result of the implementation of the Carers (Scotland) 2016. There are new duties in the Carers (Scotland) Act 2016 which require, by legislation, to be delegated to the Inverclyde Integration Joint Board.
- 2.3 The Integration Scheme has been updated and is available at <https://www.inverclyde.gov.uk/assets/attach/2456/Inverclyde%20Integration%20Scheme%20-%20FINAL%20-%20April%202018.pdf>

3.0 RECOMMENDATIONS

- 3.1 It is recommended that the Inverclyde Integration Joint Board notes the content of this report.

4.0 BACKGROUND

- 4.1 The Public Bodies (Joint Working) (Scotland) Act 2014 required all Local Authorities and Health Boards to integrate Health and Social Care Services and to jointly prepare, consult and submit for approval an Integration Scheme to the Scottish Ministers setting out the local governance arrangements for integration. The Integration Scheme sets out clearly which matters are delegated to the Integration Joint Board (“IJB”) and specifies the legislative provisions. The Integration Scheme for the Inverclyde IJB was agreed by Inverclyde Council and by NHS Greater Glasgow & Clyde in 2015. The Integration Scheme was then approved by the Scottish Government.
- 4.2 The Carers (Scotland) Act 2016 (“the 2016 Act”) came into effect on 1 April 2018. The provisions contained in the 2016 Act have implications for IJBs, Local Authorities and Health Boards as new duties have come into force which must be delegated to the Inverclyde IJB.
- 4.3 The IJB reviewed a paper on 20 March 2018 which provided an update on progress in implementing the 2016 Act. This paper is available at <https://www.inverclyde.gov.uk/meetings/documents/10894/05%20Carers%20Act.pdf>.

5.0 UPDATES TO INTEGRATION SCHEME

- 5.1 In order to comply with the provisions of the 2016 Act, both Inverclyde Council and NHS Greater Glasgow and Clyde required to amend the Inverclyde Integration Scheme to include the local authority and health board functions referred to in the 2016 Act which needed to be delegated to the IJB. These were purely technical amendments to ensure that the Carers (Scotland) Act 2016 was fully implemented and to enable the IJB, Inverclyde Council and NHS Greater Glasgow and Clyde to continue to carry out their respective roles in delivering support to carers.
- 5.2 Both Inverclyde Council and NHS Greater Glasgow and Clyde approved the necessary amendments to the Integration Scheme and the papers presented to each organisation can be found at the following links:

NHS Greater Glasgow and Clyde Board – paper 20 February 2018 (NB covers the 6 Integration Schemes within the NHS Greater Glasgow and Clyde area).

<http://www.nhsggc.org.uk/media/246293/18-1808-nhs-board-carers-act-sm-final-020218.pdf>

Inverclyde Council – paper 22 February 2018

<https://www.inverclyde.gov.uk/meetings/documents/10781/10%20Integration%20Scheme%20Amendment.pdf>

- 5.3 Following approval by both Inverclyde Council and NHS Greater Glasgow and Clyde, the revised Integration Scheme was submitted to the Scottish Government for Ministerial approval. This approval was granted on 3 April 2018 which concludes the legal process.

6.0 PROPOSALS

- 6.1 It is proposed that the IJB notes the content of this report.

7.0 IMPLICATIONS

Finance

- 7.1 None.

Financial Implications:

One Off Costs

Cost Centre	Budget	Budget	Proposed	Virement	Other Comments
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	Heading	Years	Spend this Report	From	
N/A	N/A	N/A	N/A	N/A	N/A

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact	Virement From (If Applicable)	Other Comments
N/A	N/A	N/A	N/A	N/A	N/A

Legal

- 7.2 The amendments to the Integration Scheme are a statutory requirement and reflect the additional delegated responsibilities from Inverclyde Council and NHS Greater Glasgow and Clyde to the Inverclyde Integration Joint Board in respect of the Carers (Scotland) Act 2016.

Human Resources

- 7.3 None.

Equalities

- 7.4 There are no equality issues within this report.

- 7.4.1 Has an Equality Impact Assessment been carried out?

	YES (see attached appendix)
X	NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

- 7.4.2 How does this report address our Equality Outcomes

There are no Equalities Outcomes implications within this report.

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	None
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	None
People with protected characteristics feel safe within their communities.	None
People with protected characteristics feel included in the planning and developing of services.	None
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	None
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	None
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	None

Clinical or Care Governance

- 7.5 There are no clinical or care governance issues within this report.

National Wellbeing Outcomes

7.6 How does this report support delivery of the National Wellbeing Outcomes

There are no National Wellbeing Outcomes implications within this report.

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	None
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	None
People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	None
People using health and social care services are safe from harm.	None
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.	None
Resources are used effectively in the provision of health and social care services.	None

8.0 CONSULTATIONS

9.1 The Corporate Director (Chief Officer) has been consulted in the preparation of this report.

10.0 BACKGROUND PAPERS

10.1 N/A