
Report To:	Inverclyde Integration Joint Board	Date:	4 November 2019
Report By:	Louise Long, Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership	Report No:	VP/LP/125/19
Contact Officer:	Vicky Pollock	Contact No:	01475 712180
Subject:	Scheme of Delegation to Officers		

1.0 PURPOSE

- 1.1 The purpose of this report is to seek approval from the Integration Joint Board (IJB) to adopt a Scheme of Delegation setting out powers delegated to officers.

2.0 SUMMARY

- 2.1 To ensure sound decision-making, adequate control and good governance, the IJB has approved Standing Orders governing the conduct of IJB meetings and remits and rules for the IJB Audit Committee and Strategic Working Group. It has also approved Financial Regulations and established procedures for making agendas, reports and minutes freely available on the internet.
- 2.2 To further support and implement good governance, the IJB also requires a document, known as a Scheme of Delegation to Officers, setting out and formalising the scope and rules for decisions being taken by officers on behalf of the IJB.
- 2.3 This report sets out a proposed Scheme of Delegation to Officers for the IJB's approval.

3.0 RECOMMENDATIONS

- 3.1 It is recommended that the Inverclyde Integration Joint Board:
- adopts the Scheme of Delegation to Officers as detailed in Appendix 1 to this report;
 - delegates authority to the Standards Officer to make minor administrative changes to the Scheme of Delegation to Officers as required from time to time in response to legislative changes and operational requirements;
 - notes that the Scheme of Delegation to Officers will be reviewed every three years; and
 - notes that the approved Scheme of Delegation to Officers will be published alongside the IJB's Standing Orders to provide an open and transparent set of decision making rules and procedures.

4.0 BACKGROUND

- 4.1 The purpose of the Scheme of Delegation to Officers is to set out the powers and responsibilities of significance to the IJB's discharge of its statutory duties which it has chosen to delegate to officers.
- 4.2 It does not contain any delegation of powers or duties in relation to the functions of the Council or the Health Board or their employees. The Council and the Health Board are both separate legal entities with different duties, powers and interests in relation to health and social care integration. Both parties have their own internal rules and delegated powers in relation to their own interests.
- 4.3 The Scheme records the most significant and standing delegations of powers and responsibility to officers. It is not an exhaustive list of things that officers can do on behalf of the IJB. Temporary or one-off delegations will continue to be recorded in the minutes of IJB meetings.
- 4.4 The Scheme is set out in Appendix 1. It makes it clear that in using a delegated power, officers must have regard to and comply with over-arching rules – such as legislation, the Integration Scheme, the Strategic Plan and other IJB policies.

5.0 PROPOSALS

- 5.1 It is proposed that the IJB agrees to adopt the Scheme as set out at Appendix 1.
- 5.2 Once approved, the Scheme will be published alongside the IJB's Standing Orders and Integration Scheme. The Standards Officer will also have a standing delegation to make any minor administrative changes – for example when new legislation is introduced or terminology changes.
- 5.3 The Scheme will be reviewed every three years.

6.0 IMPLICATIONS

Finance

- 6.1 None.

Financial Implications:

One Off Costs

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

- 6.2 The Scheme of Delegation to Officers supports the discharges of the IJB's statutory duties and provides a framework through which matters delegated to the IJB may be delegated to officers or its committees.

Human Resources

6.3 None.

Equalities

6.4 There are no equality issues within this report.

6.4.1 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.

6.4.2 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

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

National Wellbeing Outcomes

6.6 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	None

those services.	
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

7.0 DIRECTIONS

7.1 Direction Required to Council, Health Board or Both	Direction to:	
	1. No Direction Required	X
	2. Inverclyde Council	
	3. NHS Greater Glasgow & Clyde (GG&C)	
	4. Inverclyde Council and NHS GG&C	

8.0 CONSULTATIONS

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

9.0 BACKGROUND PAPERS

9.1 N/A



Inverclyde Health & Social Care Partnership

INVERCLYDE INTEGRATION JOINT BOARD

SCHEME OF DELEGATION

OCTOBER 2019

1. Introduction

- 1.1 The Inverclyde Integration Joint Board (IJOB) is a statutory corporate body with its own legal personality. It is established under the Public Bodies (Joint Working) (Scotland) Act 2014 and has the responsibilities and powers conferred by that Act and associated statutory regulations.
- 1.2 The IJOB only has one member of staff - the Chief Officer. It has other officers who are not members of its staff but who carry out duties for it (for example, the Chief Financial Officer, the Standards Officer, the Chief Internal Auditor). It also receives support from officers and employees of the Council and the Health Board. They are not employed by the IJOB but are managed by the Chief Officer.
- 1.3 To help ensure sound decision-making, adequate control and good governance the IJOB has approved this Scheme of Delegation to its officers. The Scheme sets out the powers and responsibilities of significance to the IJOB's discharge of its statutory responsibilities which it has chosen to delegate to those officers.
- 1.4 It does not contain any delegation of powers or duties in relation to the Council or the Health Board or their members of staff. They are separate legal bodies with different duties, powers and interests in relation to the integration of health and social care. They will have their own internal rules and delegations of powers in relation to their own interests.
- 1.5 Each of the posts covered by the Scheme has its own role description that were used when the posts were first filled. It is not the Scheme's purpose to replace those or duplicate them or repeat them. The Scheme is part of a governance framework for efficient, effective and accountable decision-making amongst the IJOB, its committees and its officers.

2. General considerations

- 2.1 The Scheme is not an exhaustive list of things that officers can do on behalf of the IJOB. It records the significant and standing delegations of powers and responsibility to officers.
- 2.2 It does not record temporary or one-off instructions or delegations to officers. Those are recorded in minutes of IJOB and committee meetings. As a general rule, delegations which will last for more than six months are included, and others are not.
- 2.3 Subject to the specific provisions in the Scheme and the IJOB's Standing Orders and Financial Regulations, powers delegated include anything which is calculated to facilitate, or is conducive or incidental to, their discharge.
- 2.4 In using a delegated power, officers must have regard to and comply with the following over-arching considerations:-
 - a) They must comply with the law;
 - b) They must have regard to statutory guidance;
 - c) They must act within the terms of the Integration Scheme;

- d) They must not depart from the terms of the Strategic Plan;
- e) They must comply with the IJJB's Standing Orders and Financial Regulations;
- f) They must not act where matters are reserved to the IJJB or delegated to a committee;
- g) They must act in accordance with IJJB policies, procedures and instructions;
- h) They must not act in relation to issues which are politically sensitive or controversial.

2.5 Officers may delegate the use of their powers to other officers or employees of the Council or Health Board providing support to the IJJB. If they do so, they must ensure adequate controls and reporting arrangements are in place. Notwithstanding any such sub-delegation, they remain accountable directly and personally to the IJJB.

3. Specific Powers Reserved to the Integration Joint Board

3.1 The powers which are reserved to the IJJB or its committees are comprised of those which must, in terms of statute, be reserved, and those which the IJJB has, itself, chosen to reserve. Powers which are not reserved are delegated, in accordance with the provisions of the Integration Scheme and this Scheme.

3.2 The following is a comprehensive list of what is reserved to the IJJB or any of its committees:

- a) Any other functions or remit which is, in terms of statute or legal requirement bound to be undertaken by the IJJB itself;
- b) To establish such committees, sub-committees and joint committees as may be considered appropriate to conduct business and to appoint and remove Chairs, Vice-Chairs and members of committees and outside bodies;
- c) The approval of the annual Budget;
- d) The approval of the Financial Strategy;
- e) The approval of the IJJB's Accounts;
- f) The approval or amendment of the Standing Orders regulating meetings proceedings and business of the IJJB and Committees and contracts in so far as it relates to business services, the engagement of consultants, or external advisors for specialist advice, subject to necessary approvals through the Council and Health Board's Procurement Standing Orders, Schemes of Delegation and Procurement Regulations;
- g) The approval or amendment of the Scheme of Delegation, detailing those functions delegated by the IJJB to its officers;
- h) The decision to co-operate or combine with other Integration Joint Boards in the provision of services other than by way of collaborative agreement;

- i) The approval or amendment of the Strategic Plan including the Financial Plan;
- j) To deal with matters reserved to the IJB by Standing Orders, Financial Regulations and other schemes approved by the IJB;
- k) To issue Directions to the Council and Health Board under sections 26 and 27 of the 2014 Act, in line with the Integration Scheme and legislative framework sitting around the CEOs of the Partners;
- l) The approval of the Clinical Care Governance Framework.

4. Chief Officer

- 4.1 As a matter of law, the Chief Officer is employed by either Inverclyde Council or NHS Greater Glasgow and Clyde and seconded to the IJB as its only member of staff.
- 4.2 The Chief Officer is accountable to the IJB. Operationally, the Chief Officer also manages the Inverclyde Health and Social Care Partnership and therefore also holds positions of authority and responsibility in both the Council and Health Board. In that role, as manager of the Inverclyde Health and Social Care Partnership, the Chief Officer is managed jointly by the Chief Executives of the Council and the Health Board.
- 4.3 The Chief Officer has the following delegated powers and responsibilities:-
 - a) The statutory position of Chief Officer in terms of section 10 of the Public Bodies (Joint Working) (Scotland) Act 2014;
 - b) Providing corporate and strategic advice and direction to the IJB;
 - c) Liaising with the Chair and Vice-Chair in relation to meetings of the IJB and its committees, and ensuring the timeous preparation, delivery and publication of agendas and reports for those meetings;
 - d) Implementing the Integration Scheme;
 - e) Developing, implementing and reviewing the Strategic Plan and other policies determined by the IJB;
 - f) Implementing decisions, instructions and directions made by the IJB;
 - g) Establishing and supporting the Strategic Planning Group;
 - h) Appointing a competent substitute to act in his or her absence or incapacity;
 - i) In consultation with the IJB Chair, determining whether a matter is likely to be politically sensitive or controversial;

- j) Where a matter arises of such urgency that it cannot await a decision of the IJJB, in prior consultation with the IJJB Chair, Vice-Chair and Standards Officer, taking urgent action on behalf of the IJJB. All action taken under this delegated power shall be reported to the next available meeting of the IJJB;
- k) Collecting, monitoring and periodic reporting to the IJJB and the public of service performance and providing service information for the annual statutory performance report;
- l) Collating service and financial performance information and providing the annual statutory performance report for IJJB approval;
- m) Issuing directions to the Council and Health Board on the IJJB's instructions and monitoring and reporting on compliance by the Council and Health Board;
- n) Maintaining the IJJB's risk register, monitoring risk and taking mitigating action, reporting on risk to the IJJB;
- o) Representing the IJJB on the Inverclyde Alliance Board and ensuring the IJJB's participation in the community planning process;
- p) Ensuring adequate provision of professional, technical and administrative support services by the Council and/or Health Board to the IJJB;
- q) Ensuring the IJJB's compliance with statutory regimes such as best value, public sector equality duties, freedom of information, data protection, climate change, etc.;
- r) Providing and operating a complaints handling procedure and liaising with and complying with the requirements of the SPSO;
- s) Implementing a public and stakeholder engagement strategy and communications and public relations arrangements;
- t) Business continuity planning;
- u) Liaising with other IJBs in the NHS Greater Glasgow and Clyde area, and with the Council and the Health Board, in relation to both integrated and non-integrated functions;
- v) Dealing with inspections by regulatory authorities;
- w) Responding to consultations on non-controversial or technical issues, subject to those responses being reported to the IJJB for information.

4.4 The Chief Officer is a non-voting member of the IJJB, and a member of the Strategic Planning Group.

5. Chief Financial Officer

- 5.1 The Chief Financial Officer cannot be a member of staff of the IJJB and does not have to be an officer of the Council or the Health Board. It is for the IJJB to determine the appropriate appointment and contractual arrangements in consultation with the Council and the Health Board.

- 5.2 The local authority financial and accounting regime is applied as a matter of law to the IJJB. The Chief Financial Officer therefore carries the duties of what in Council terms is the “Section 95 Officer”. That position includes ensuring compliance with relevant legislation and guidance, including Part VII of the Local Government (Scotland) Act 1973, Part I of the Local Government in Scotland Act 2003 and the Local Authority Accounts (Scotland) Regulations 2014.
- 5.3 The Chief Financial Officer has the following delegated powers and responsibilities:-
- a) The statutory responsibility for the proper administration of the IJJB’s financial affairs in terms of section 95 of the Local Government (Scotland) Act 1973, as applied by section 13 of the Public Bodies (Joint Working) (Scotland) Act 2014;
 - b) Establishing, maintaining, applying and reviewing Financial Regulations;
 - c) Accounting record-keeping, financial management and accounting control systems;
 - d) Ensuring that proper accounting practices are observed in the financial administration of the IJJB;
 - e) Providing strategic financial advice, planning, forecasting and direction;
 - f) Liaising and negotiating with the Council and the Health Board in relation to their annual budget contributions, efficiencies, budget pressures and in-year and end-of-year adjustments;
 - g) Financial performance and budgets - monitoring, periodic reporting and providing financial information for the statutory annual performance report;
 - h) Provision of the annual financial statement required to accompany the Strategic Plan;
 - i) Preparing the Annual Accounts and abstract and accompanying statements, signing them and securing their submission for external audit;
 - j) Publishing the unaudited Annual Accounts for public inspection, advertising their availability and responding to any objections made to them;
 - k) Reporting the audited Annual Accounts and external auditor’s report to the IJJB for approval, arranging for their signature, submitting them to the external auditor and publishing them;
 - l) Securing compliance with relevant statutory financial regimes in relation to the financial administration of the IJJB;
 - m) Reporting to the IJJB and publishing any report or special report or the findings of the Accounts Commission following any hearing on a report or special report, in terms of Part VII of the Local Government (Scotland) Act 1973;
 - n) Liability insurance and other indemnity arrangements;

- o) Liaison with and supporting the IJB's Chief Internal Auditor and the Audit Committee in relation to the internal audit function;
- p) Reviewing the IJB's system of internal control;
- q) Preparation of the annual governance statement to accompany the Annual Accounts;
- r) Liaison and cooperation with the IJB's external auditor and the Accounts Commission.

5.4 The Chief Financial Officer is a non-voting member of the IJB.

6. Chief Internal Auditor

6.1 The Chief Internal Auditor cannot be a member of staff of the IJB and does not have to be an officer of the Council or the Health Board. It is for the IJB to determine the appropriate appointment and contractual arrangements in consultation with the Council and the Health Board.

6.2 The local authority financial and accounting regime is applied as a matter of law to the IJB. That requires the IJB to establish and maintain a professional and independent internal auditing service in accordance with recognised standards and practices in relation to internal auditing. The post is also governed by Part VII of the Local Government (Scotland) Act 1973, Part I of the Local Government in Scotland Act 2003 and the Local Authority Accounts (Scotland) Regulations 2014.

6.3 The Chief Internal Auditor has the following delegated powers and responsibilities:-

- a) Ensuring the provision of a professional and independent internal auditing service in accordance with recognised standards and practices in relation to internal auditing;
- b) Obtaining approval of the IJB Internal Audit Charter;
- c) Preparing, submitting for approval, implementing and reporting on an annual Internal Audit Plan;
- d) Supporting and advising the Audit Committee in fulfilling its remit;
- e) Liaising with and supporting the Chair of the Audit Committee in relation to that role;
- f) Conducting audits and investigations as required by the Internal Audit Plan or as directed by the Chief Officer or the Audit Committee;
- g) Reporting to the Audit Committee on audits and investigations carried out and on other matters within its remit;
- h) Liaising and cooperating with the Internal Auditors for the Council, the Health Board and other IJBs in the NHS Greater Glasgow and Clyde area;
- i) Liaising and cooperating with the IJB external auditors.

6.4 The Chief Internal Auditor is not a member of the IJJB.

7. Standards Officer

7.1 The Standards Officer cannot be a member of staff of the IJJB and does not have to be an officer of the Council or the Health Board. It is for the IJJB to determine the appropriate appointment and contractual arrangements in consultation with the Council and the Health Board.

7.2 The Standards Officer is a statutory position required under regime of ethical standard in public life in Scotland. It carries statutory duties as well as additional duties contained in guidance by the Standards Commission.

7.3 The Standards Officer has the following delegated powers and responsibilities:-

- a) The statutory role defined in the Ethical Standards in Public Life etc. (Scotland) Act 2000 (Register of Interests) Regulations 2003;
- b) Having regard to and applying the Standards Commission's Advice on the Role of a Standards Officer;
- c) Ensuring IJJB members are eligible for membership;
- d) Establishing, maintaining, reviewing and publishing a Register of Interests for IJJB members;
- e) Adoption, approval, maintenance and review of a Code of Conduct for IJJB members;
- f) Advising and assisting IJJB members in relation to the Register of Interests and the Code of Conduct;
- g) Ensuring IJJB compliance with its other general duties under the Ethical Standards in Public Life etc. (Scotland) Act 2000 and related statutory regulations and guidance;
- h) Liaising with the Commissioner for Ethical Standards in Public Life and the Standards Commission;
- i) Establishing, reviewing and reporting on a local Corporate Governance framework;
- j) Consulting with the Chief Officer in relation to the taking of urgent action on behalf of the IJJB in terms of Paragraph 4.3(j) of this Scheme;
- k) Liaising with the Internal Auditor in relation to the internal audit function

7.4 The Standards Officer is not a member of the IJJB.