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<b>Report To:</b>	<b>Inverclyde Integration Joint Board</b>	<b>Date:</b>	<b>7 November 2022</b>
<b>Report By:</b>	<b>Kate Rocks Chief Officer, Inverclyde Health &amp; Social Care Partnership</b>	<b>Report No:</b>	<b>VP/LS/90/22</b>
<b>Contact Officer:</b>	<b>Vicky Pollock</b>	<b>Contact No:</b>	<b>01475 712180</b>
<b>Subject:</b>	<b>Membership of the Inverclyde Integration Joint Board – Re-Appointment of Non-Voting Members</b>		

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## **1.0 PURPOSE AND SUMMARY**

1.1  For Decision  For Information/Noting

1.2 The purpose of this report is to ask the Inverclyde Integration Joint Board (“IJB”) to confirm the re-appointment of members to the IJB

1.3 The Public Bodies (Joint Working) (Integration Joint Boards) (Scotland) Order 2014 sets out the arrangements for the membership of all Integration Joint Boards, including members’ term of office.

1.4 This report recommends the re-appointment of a number of members for a further term of office.

## **2.0 RECOMMENDATIONS**

2.1 It is recommended that the Inverclyde Integration Joint Board:-

1. notes the content of this report;
2. confirms the re-appointment for a further term of the following non-voting professional advisory members:-
  - Dr Hector Macdonald
  - Laura Moore
  - Dr Chris Jones
3. agrees the re-appointment of the non-voting stakeholder representative members set out in Appendix 1 Section C of this report; and
4. agrees the re-appointment of the additional non-voting members set out in Appendix 1 Section D of this report.

The length of term of office of these members to be up to two years.

**Kate Rocks**  
**Chief Officer, Inverclyde Health and Social Care Partnership**

### **3.0 BACKGROUND AND CONTEXT**

3.1 The Public Bodies (Joint Working) (Integration Joint Boards) (Scotland) Order 2014 (“the Order”) sets out the arrangements for the membership of all Integration Joint Boards. As a minimum this must comprise:

- voting members appointed by the NHS Board and Inverclyde Council;
- non-voting members who are holders of key posts within either the NHS Board or Inverclyde Council; and
- representatives of groups who have an interest in the IJB.

### **4.0 RE-APPOINTMENT OF NON-VOTING MEMBERS**

4.1 The Order and the IJB Standing Orders also set out when members’ terms of office expire and the process for re-appointment.

4.2 The length of term of office of each member varies depending upon the category of member. For example, the Chief Social Work Officer, the Chief Officer and the Chief Financial Officer remain members of the IJB for as long as they hold office. Further, any member who has been appointed in place of a member who has resigned is appointed only for the unexpired term of the member they replaced.

4.3 The term of office of the voting members nominated by Inverclyde Council in June 2022, as set out in Appendix 1 Section A ends in June 2024.

4.4 The term of office of the voting members nominated by Greater Glasgow & Clyde NHS Board, as set out in Appendix 1 Section A also ends in June 2024.

4.5 The majority of the non-voting members of IJB, with the exception of the Chief Officer, Chief Social Work Officer and Chief Financial Officer as mentioned above, have reached the end of their two year term of office.

4.6 The Order and the IJB Standing Orders state that at the expiry of a member’s term of office, the member may be re-appointed for a further term provided that he/she remains eligible and is not otherwise disqualified from appointment.

4.7 It is therefore proposed to re-appoint those non-voting members who have reached the end of their term of office for a further term of up to two years.

### **5.0 PROPOSALS**

5.1 It is proposed that the IJB confirms the re-appointment of the Greater Glasgow & Clyde NHS Board non-voting professional advisory members set out in Appendix 1 Section B (with the exception of the Chief Officer, Chief Social Work Officer and Chief Finance Officer).

The re-appointment of the following non-voting members is also proposed:-

- the non-voting stakeholder representative members set out at Appendix 1 Section C; and
- the additional non-voting members set out at Appendix 1 Section D.

The length of term of office of these members to be up to two years.

## 6.0 IMPLICATIONS

6.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO	N/A
Financial		X	
Legal/Risk	X		
Human Resources		X	
Strategic Plan Priorities		X	
Equalities		X	
Clinical or Care Governance		X	
National Wellbeing Outcomes		X	
Children & Young People's Rights & Wellbeing			X
Environmental & Sustainability			X
Data Protection			X

## 6.2 Finance

There are no financial implications arising from this report.

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

## 6.3 Legal/Risk

The membership of the IJB is set out in the Public Bodies (Joint Working) (Integration Joint Boards) (Scotland) Order 2014.

## 6.4 Human Resources

There are no Human Resource implications arising from this report

## 6.5 Strategic Plan Priorities

This report helps deliver Strategic Plan Big Action 6 – we will build on the strengths of our people and our community.

## 6.6 Equalities

There are no equality issues within this report.

(a) Equalities

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:

	YES – Assessed as relevant and an EqIA is required.
X	NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqIA is required.

(b) Equality Outcomes

How does this report address our Equality Outcomes?

<b>Equalities Outcome</b>	<b>Implications</b>
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

6.7 **Clinical or Care Governance**

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

6.8 **National Wellbeing Outcomes**

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

<b>National Wellbeing Outcome</b>	<b>Implications</b>
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

## 7.0 DIRECTIONS

7.1	<b>Direction Required to Council, Health Board or Both</b>	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 CONSULTATION

8.1 The Chief Officer has been consulted in the preparation of this report.

## 9.0 BACKGROUND PAPERS

9.1 None.

## Inverclyde Integration Joint Board Membership as at 7 November 2022

<b>SECTION A. VOTING MEMBERS</b>		
		Proxies (Voting Members)
Inverclyde Council	Councillor Robert Moran (Vice Chair)  Councillor Martin McCluskey  Councillor Elizabeth Robertson  Councillor Lynne Quinn	Councillor Colin Jackson  Councillor Paul Cassidy  Councillor Sandra Reynolds  Councillor Drew McKenzie
Greater Glasgow and Clyde NHS Board	Mr Alan Cowan (Chair)  Mr Simon Carr  Ms Ann Cameron-Burns  Mr David Gould	
<b>SECTION B. NON-VOTING PROFESSIONAL ADVISORY MEMBERS</b>		
Chief Officer of the IJB	Kate Rocks	
Chief Social Worker of Inverclyde Council	Allen Stevenson	
Chief Finance Officer	Craig Given	
Registered Medical Practitioner who is a registered GP	Inverclyde Health & Social Care Partnership Clinical Director  Dr Hector MacDonald	
Registered Nurse	Chief Nurse  Laura Moore	
Registered Medical Practitioner who is not a registered GP	Dr Chris Jones	
<b>SECTION C. NON-VOTING STAKEHOLDER REPRESENTATIVE MEMBERS</b>		
A staff representative (Council)	Ms Gemma Eardley	
A staff representative (NHS Board)	Ms Diana McCrone	
A third sector representative	Ms Charlene Elliott Chief Executive CVS Inverclyde	Proxy - Ms Vicki Cloney Partnership Facilitator CVS Inverclyde

A service user	Mr Hamish MacLeod Inverclyde Health and Social Care Partnership Advisory Group	Proxy - Ms Margaret Moyse
A carer representative	Ms Christina Boyd	Proxy – Ms Heather Davis
<b>SECTION D. ADDITIONAL NON-VOTING MEMBERS</b>		
Representative of Inverclyde Housing Association Forum	Mr Stevie McLachlan, Head of Customer Services, River Clyde Homes	