



Aberdeen City Health & Social Care Partnership  
*A caring partnership*

## **ABERDEEN CITY INTEGRATION JOINT BOARD**

### **Roles and Responsibilities Protocol**

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## **ABERDEEN CITY INTEGRATION JOINT BOARD**

### **Roles and Responsibilities Protocol**

#### **1 INTRODUCTION AND INTERPRETATION**

- 1.1 The Roles and Responsibilities (hereinafter referred to as the “Protocol”) was approved by Aberdeen City Integration Joint Board (hereinafter referred to as the “IJB”) on ~~19<sup>th</sup> November 2019~~ **23<sup>rd</sup> March 2021**. The Protocol sets out the powers conferred on the Integration Authority (the Aberdeen City Integration Joint Board) by the Public Bodies (Joint Working) (Scotland) Act 2014 (“the Act”) and what is delegated to the IJB from the Partners. It also clarifies the remit and responsibilities of the Chief Officer, the Chief Financial Officer and Clinical Director in respect of the operational management and deliverability of the integrated services as set out in the Scheme.
- 1.2 The Interpretation Act 1978 shall apply to the interpretation of this Protocol as it applies to the interpretation of an Act of Parliament.

#### **2 CORE PRINCIPLES**

- 2.1 Aberdeen City Council and NHS Grampian (hereinafter referred to as “the Partners”) delegated various functions to the IJB on 1<sup>st</sup> April 2016 under the Aberdeen City Integration Scheme. The Partners retain overall statutory responsibility for their respective functions delegated to the IJB, as the IJB are responsible for the strategic planning and resources provision for the functions set out in the Scheme.
- 2.2 The matters reserved to the IJB or its committees are mainly the strategic policy, the making of Directions and financial or regulatory issues requiring to be decided by the IJB, while the day to day operational matters are assigned to officers. The remit of officers of the IJB detailed at Section 4 is not exhaustive.
- 2.3 The Chief Officer will have delegated responsibility from the Partners for all matters in respect of the operation, development and implementation of policy unless specifically reserved to the IJB or other Committees, together with such statutory duties as may have been specifically and personally assigned to the Chief Officer. Such delegations are at all times to be exercised in accordance with the relevant law, and any of the Partner’s Financial Regulations, approved Schemes of Delegation and Standing Orders.
- 2.4 The Partners will be required to delegate to officers from both organisations specific delegated powers under Partners approved Schemes of Delegation (Delegated Powers), duties or responsibilities to enable them to discharge the



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operational elements of health and social care to deliver the IJB's Strategic Plan. Any officer using delegated powers will be fully accountable to the Chief Officer for their own actions and or decisions, who in turn shall be accountable to the Chief Executives of the Health Board and Council respectively.

### **3 SPECIFIC POWERS RESERVED FOR THE INTEGRATION JOINT BOARD**

- 3.1 The powers which are reserved to the IJB or its committees are comprised of those which must, in terms of statute, be reserved, and those which the IJB has, itself, chosen to reserve. Powers which are not reserved are delegated, in accordance with the provisions of the Integration Scheme and this Protocol.
- 3.2 The following is a comprehensive list of what is reserved to the IJB 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 IJB itself;
  - b) to establish such committees, sub-committees and joint committees as may be considered appropriate to conduct business and to appoint and remove Conveners, Depute Conveners and members of committees and outside bodies;
  - c) the approval of the Annual Budget, the Financial Strategy and the IJB's Integration Scheme;
  - d) the approval or amendment of the Standing Orders regulating meetings proceedings and business of the IJB 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 Partners Procurement Standing Orders, Schemes of Delegation and Procurement Regulations;
  - e) the approval or amendment of the Role and Responsibilities Protocol, detailing those functions delegated by the IJB to its officers;
  - f) the decision to co-operate or combine with other Integration Joint Boards in the provision of services other than by way of collaborative agreement;



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- g) the approval or amendment of the Strategic Plan including the Financial Plan;
- h) to deal with matters reserved to the IJB by Standing Orders, Financial Regulations and other schemes approved by the IJB; and
- i) to issue Directions to the Partners under sections 26 and 27 of the 2014 Act, in line with the Integration Scheme and legislative framework sitting around the CEO's of the Partners.
- j) the approval of the Clinical Care Governance Framework.

#### **4 OPERATIONAL PROTOCOL - Specific Provisions of Directions to Officers in Accordance with the Partners Approved Schemes of Delegation**

##### **4.1 Chief Officer**

- 4.1.1 The Chief Officer will act as the principal policy adviser to the IJB on matters of general policy and to assist Members to formulate clear objectives and affordable programmes having regard to changing priorities, directions to partners, statutory and financial requirements and community needs and expectations.
- 4.1.2 The Chief Officer will be held responsible and accountable for the strategic and operational management of all delegated functions including performance of all Services that form part of the Aberdeen Health and Social Care Partnership (the "AH&SCP") delegated by the Partners through and the Integration Scheme and their respective approved Schemes of Delegation, with the exception of Acute Services.
- 4.1.3 The Chief Officer is the Leader of the IJB's Senior Leadership Team and has overall responsibility for the following:-
  - a) the delivery of health and social care services as set out in the Integration Scheme;
  - b) implementing any Direction issued by the IJB to its Partners;
  - c) strategic management of services and resources;



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- d) strategy and Policy Development; and
- e) leading Improvement.

4.1.4 The Chief Officer shall discharge his/her duties in accordance with the powers as delegated to them by the Partners under their respective approved Schemes of Governance. In discharging his/her duties and in making any recommendation to the IJB, the Chief Officer will demonstrate to the IJB that he/she have followed relevant Partner procedures and sought approval, where this is required.

4.1.5 To discharge their duties, the Chief Officer shall:

- a) ensure that a corporate approach to the management and execution of the IJB's affairs is maintained and that advice to the IJB is given on a co-ordinated basis;
- b) monitor the performance of members of the Senior Leadership Team and their direct reports;
- c) give direction on the applicability of this Scheme and where appropriate that any officer shall not exercise a delegated function;
- d) appoint or make recommendations as to the engagement of consultants, external advisors or specialists pursuant to any decision taken by the IJB;
- e) consider and deal with any urgent issues arising;
- f) maintain good internal and external public relations;
- g) ~~the~~ lead the identification, planning and mitigation of risks affecting the IJB;
- h) provide for the provision of business continuity including identification of issues, business continuity planning, liaison with external bodies and putting in place arrangements to deal with business continuity issues;
- i) ensure compliance with duties under the Health and Safety at Work Act 1974 and other legislation relating to health and safety;



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- j) be the primary point of contact with the Health and Safety Executive in matters relating to the health and safety of premises or services;
- k) exercise all powers ancillary to or reasonably necessary for the proper performance of the Chief Officer's general duties and responsibilities, in line with Partner Schemes of Delegation;
- l) ensure that any Directions given by the IJB are legally competent;
- ~~m) set a legal budget and manage spend within this;~~
- ~~n)m) ensure safe services are delivered; and~~
- ~~e)n) comply with service statutory and regulatory requirements in terms of service delivery responsibilities.~~

4.1.6 Subject to future designation of the Aberdeen City Integration Joint Board as a Category 1 Responder under the Civil Contingencies Act 2004, to direct and ensure that coordinated and appropriate arrangements are in place to discharge the requirements of that Act and other relevant legislation.

#### 4.2 Chief Finance Officer

- 4.2.1 The Chief Finance Officer has overall responsibility for Finance including Audit; Financial Management; and any Procurement by the Health and Social Care Partnership
- 4.2.2 The financial limits as set by the terms of this Scheme shall be reviewed by the Chief Finance Officer in April each year and any proposed amendment reported to the IJB.
- 4.2.3 The Chief Financial Officer shall discharge his/her duties in accordance with the powers as delegated to them by the Partners under their respective approved Schemes of Delegation. In discharging his/her duties and in making any recommendation to the IJB, the Chief Financial Officer will demonstrate to the IJB that he/she have followed relevant Partner procedures and sought approval, where this is required.
- 4.2.4 The Chief Finance Officer shall:-



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- a) act as the Proper Officer responsible for the administration of the financial affairs of the IJB in terms of section 95 of the Local Government (Scotland) Act 1973;
- b) adhere to IJB and Partner Financial Regulations and relevant Codes of Practice of the Board for the control of all expenditure and income;
- c) monitor of the IJB's capital and revenue budgets during the course of each financial year and reporting thereon to the IJB;
- d) determine all accounting procedures and financial record keeping of the IJB, to ensure the IJB is fully compliant with the CIPFA Statement of Recommended Practice;
- e) subject to the approval of the Chief Officer and in conformity with any Financial Regulations and any approved policy, authorise the transfer of approved estimates from one head of expenditure to another, within a Service estimate, unless it is considered to materially affect the approved budget, in which case authorisation of the IJB will be sought. It is the Financial Regulations of the Partners which set out the rules in Virement;
- f) arrange the necessary insurances through CNORIS to protect the interests of the IJB (Directors and Officers cover) and make arrangements with CNORIS concerning claims handling and settlement of claims;
- g) have financial oversight of any procurement for the engagement of consultants, external advisors for specialist advice entered into directly by the Health and Social Care Partnership or the Chief Officer (but not procurement carried out on behalf of the Partnership or Chief Officer by a Council or Health Board); and
- h) be the primary point of contact with both internal and external audit and provide information as appropriate.

#### **4.3 Clinical Director**

##### **4.3.1 The Clinical Director shall:**

- a) be the Clinical Lead of the IJB and the Clinical and Care Governance Committee.
- b) be a member of the Senior Leadership Team within ACHSCP; and



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- c) will report directly to the Chief Officer of the IJB.
- 4.3.2 The Clinical Director will be expected to provide leadership, advice and support to:
- a) the ACHSCP Senior Leadership Team;
  - b) staff working within ACHSCP services, and particularly medical practitioners and those working across primary and community care and within services hosted by or on behalf of the ACHSCP; NHS Grampian Medical Director and Medical Directorate colleagues and clinicians; in relation to clinical and care safety.
  - c) GPs and other NHS external contractors working within Aberdeen City and in partnership with those across all 3 Grampian ACHSCPs as required; and
  - d) the Integration Joint Board as a formal advisor to the Board on clinical and care matters.