



Aberdeen City Health & Social Care Partnership

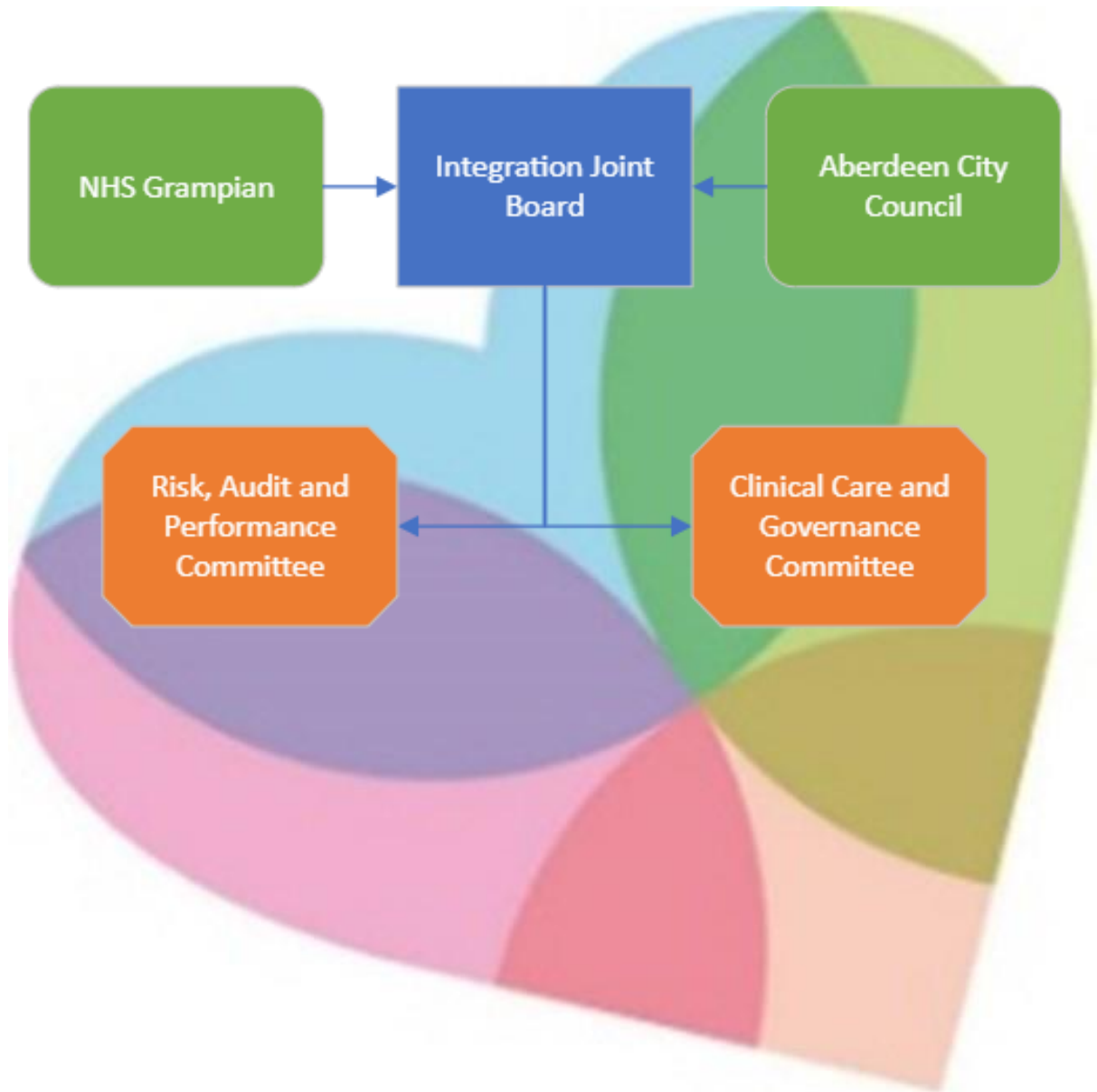
A caring partnership

Aberdeen City Integration Joint Board

Terms of Reference

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IJB Structure Chart



Introduction

1. The Integration Joint Board (IJB) ultimately derives its authority from the Public Bodies (Joint Working) (Scotland) Act 2014. It was created by Aberdeen City Council (the Council) and NHS Grampian (NHSG). Both of these partner organisations delegated functions to the IJB, which are detailed in the Integration Scheme.
2. The IJB is permitted by clause 17 of The Public Bodies (Joint Working) (Integration Joint Boards) (Scotland) Order 2014 to form committees for the purpose of carrying out such of its functions as it determines.
3. The IJB has formed two committees: the Risk, Audit and Performance Committee and the Clinical and Care Governance Committee.
4. Any decision taken by a committee is deemed to be a decision of the IJB as a whole.
5. The IJB may determine a matter which would ordinarily fall within the remit of a committee.
6. The IJB sets the Terms of Reference for its committees annually when reviewing the Scheme of Governance. As part of this process, the Chief Officer will ensure that officers will review the Terms of Reference.
7. Non-material amendments to the Terms of Reference may be made by the Chief Officer, following consultation with the Chair and Vice-Chair of the IJB and the Chairs and Vice-Chairs of the Committees. Any such amendments do not need to be approved otherwise by the IJB.
8. Any non-material amendments will be notified to the Members of the IJB when completed.

Title	Aberdeen City Integration Joint Board (IJB)		
Lead	Chief Officer		
Date	April 2023	Version	1

Quorum
Four voting Members, with at least two Members from each constituent authority

Matters Reserved to the IJB
<p>The powers which are reserved to the IJB are comprised of those which:</p> <ul style="list-style-type: none"> • Must be reserved by law; and • those which the IJB has chosen to reserve. <ol style="list-style-type: none"> 1. Any functions or remit which is, in terms of statute or legal requirement, bound to be undertaken by the IJB itself; 2. Establishing such committees as may be considered appropriate to conduct business and to appoint and remove Conveners, Depute Conveners and members of committees and outside bodies in accordance with the IJB's Standing Orders; 3. The approval of the Medium-Term Financial Framework. 4. The approval or amendment of the Scheme of Governance; 5. 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' own procurement rules and Schemes of Delegation; 6. The decision to co-operate or combine with other Integration Joint Boards in the provision of services other than by way of collaborative agreement; 7. The approval or amendment of the Strategic Plan and on going monitoring of its delivery through the Annual Performance Report; 8. Issuing Directions to the Partners under sections 26 and 27 of the Public Bodies (Joint Working) (Scotland) 2014 Act, in line with the Integration Scheme and legislative framework; 9. Approving the Clinical Care Governance Framework.

Clinical and Care Governance Committee

Title	Clinical and Care Governance Committee		
Executive Lead	Medical Lead		
Date	April 2023	Version	1

Purpose

The Committee shall be responsible for the oversight of clinical and care governance within Aberdeen City Health and Social Care Partnership (ACHSCP). Specifically, it will:

- a. Provide assurance to the Integration Joint Board (IJB) on the systems for delivery of safe, effective, person-centred care in line with the IJB's statutory duties for the quality of health and care services.
- b. Provide assurance to the IJB that clinical and care governance is being discharged within the Partnership in relation to the statutory duty for quality of care and that this is being led professionally and clinically with the oversight of the IJB.
- c. Escalate any risks that require executive action or that pose significant threat to patient care, service provision or the reputation of the Partnership to the IJB.

Quorum

Two voting Members, one representative each from the Council and NHSG.

Remit and Responsibilities

1. Instruct further investigation on any matters which fall within its remit, reporting the findings of such an investigation to the IJB.
2. Agree the ACHSCP clinical and care governance priorities and give direction on clinical and care governance activities.
3. Oversee the work of the Clinical and Care Governance Group and Staff Governance Groups by receiving regular reporting for consideration and assurance.
4. Review unresolved risks that require executive action or that pose significant threat to patient care (including service users, patients and carers), service provision or the reputation of the ACHSCP.
5. Contribute to the regular review of the IJB Risk Register from a clinical and care governance/staff governance perspective and escalate any risks to the IJB, NHS Grampian or Aberdeen City Council, as appropriate.

Principal Advisors

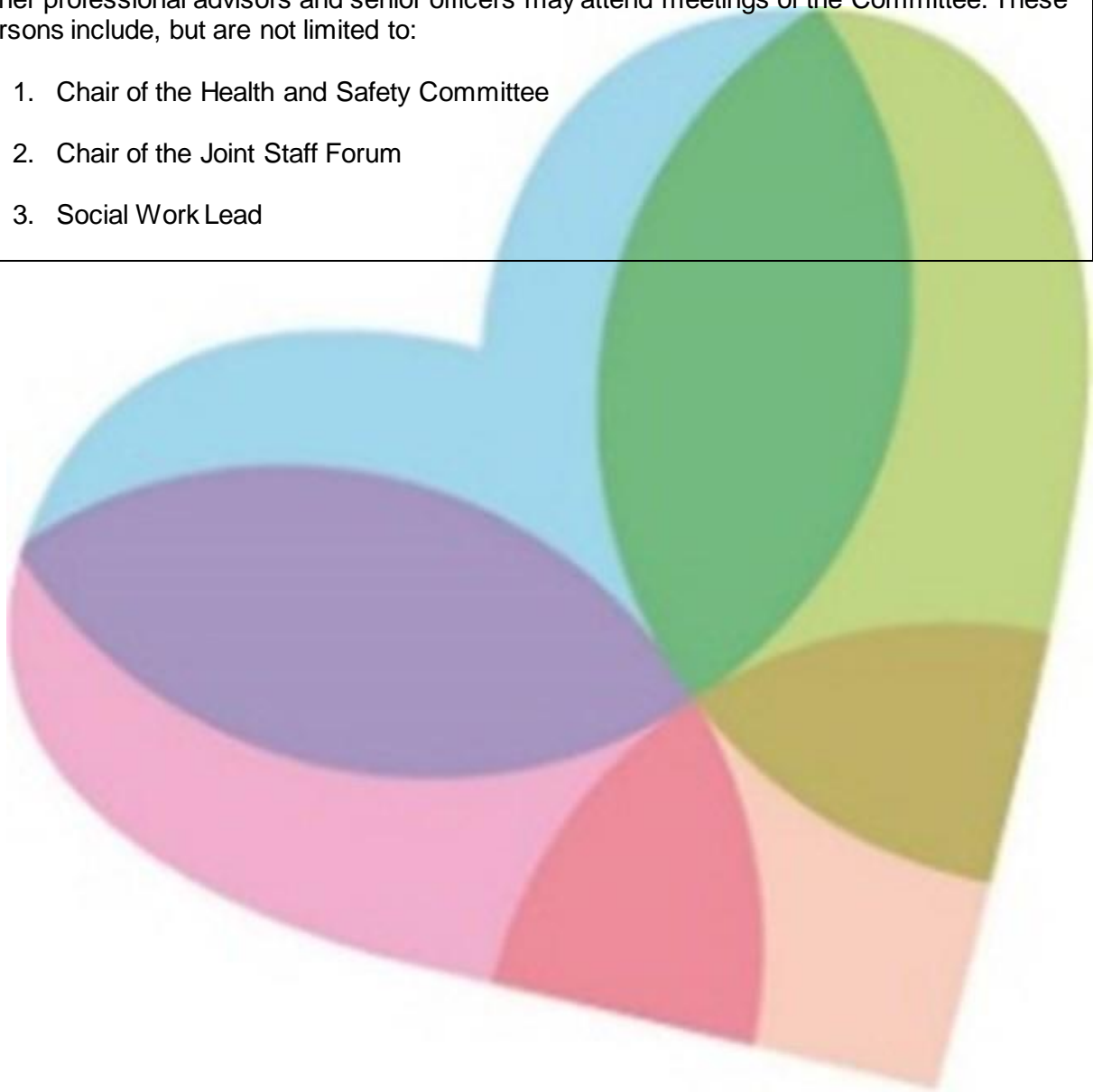
The Executive Lead to the Committee is the Medical Lead.

They will routinely be supported by:

1. Chief Social Work Officer;
2. Professional Nursing Lead; and
3. Allied Health Professional Lead.

Other professional advisors and senior officers may attend meetings of the Committee. These persons include, but are not limited to:

1. Chair of the Health and Safety Committee
2. Chair of the Joint Staff Forum
3. Social Work Lead



Risk, Audit and Performance Committee

Title	Risk, Audit and Performance Committee		
Executive Lead	Chief Finance officer		
Date	April 2023	Version	1

Purpose
<p>To ensure that the IJB has robust arrangements for:</p> <ul style="list-style-type: none"> • risk management; • financial management; • service performance; and • governance. <p>This includes services hosted by Aberdeen City's IJB on behalf of other integration authorities.</p>

Quorum
Two voting Members, one representative each from the Council and NHSG.

Remit and Responsibilities
<p>Investigation</p> <ol style="list-style-type: none"> 1. Instruct further investigation on any matters which fall within its remit, reporting the findings of such an investigation to the IJB. <p>Audit</p> <ol style="list-style-type: none"> 2. Review and approve the annual audit plans (internal and external) on behalf of the IJB, receiving reports, overseeing and reviewing actions taken on audit recommendations and escalating to the IJB as appropriate. 3. Be aware of, and receive assurance on actions taken in response to Audit Scotland, national and UK audit findings, inspections, and regulatory advice as appropriate. <p>Performance</p> <ol style="list-style-type: none"> 4. Approve, monitor and review a performance framework for the IJB in respect of its policy objectives and priorities in relation to all functions of the IJB. This includes ensuring that the Chief Officer establishes and implements satisfactory arrangements for reviewing and appraising service performance against the national health and wellbeing outcomes, the associated core suite of indicators and other appropriate local objectives and priorities. 5. Receive and scrutinise performance reports and receive assurance that actions in respect of emerging trends are proportionate to the IJB's Risk Appetite Statement.

6. Instruct Performance Reviews and related processes.
7. Support the IJB in delivering and expecting cooperation in seeking assurance that hosted services run by partners are working.
8. Monitor the IJB's work and performance as a Category One Responder under the Civil Contingencies Act 2004.

Risk and Governance

9. Monitor the risk appetite and/or tolerance established by the Board Assurance Framework to ensure effective oversight and governance of the partnership's activities.
10. Ensure the existence of, and compliance, with an appropriate risk management strategy including: reviewing risk management arrangements; receiving biannual Strategic Risk Management updates and undertaking in-depth review of a set of risks and annually review the IJB's risk appetite document with recommendations being brought to the IJB.
11. Approve the sources of assurance used in the Annual Governance Statement.
12. Review the overall Internal Control arrangements of the Board and make recommendations to the Board regarding signing of the Governance Statement, having received assurance from all relevant Committees.

Financial

13. Consider and approve annual financial accounts and related matters
14. Receive regular financial monitoring reports
15. Approve budget virements

Principal Advisors

The Executive Lead to the Committees is the Chief Finance Officer.

Other professional advisors and senior officers may be required to attend meetings of the Committee. These persons include, but are not limited to:

1. External Audit
2. IJB Lead Strategy and Performance Manager
3. IJB Lead Transformation Manager
4. IJB Business Manager
5. IJB Commissioning Lead