



RISK AUDIT AND PERFORMANCE COMMITTEE

Date of Meeting	03 December 2024
Report Title	Directions Update Report
Report Number	HSCP24.094
Lead Officer	Alison MacLeod, Strategy and Transformation Lead
Report Author Details	Name: Alison MacLeod Job Title: Strategy and Transformation Lead Email Address: alimacleod@aberdeencity.gov.uk
Consultation Checklist Completed	Yes
Directions Required	No
Exempt	No
Appendices	A. Directions Tracker B. Updated Directions Guidance and Template C. Record of Data Protection Impact Assessments (DPIAs)
Terms of Reference	6. Instruct Performance Reviews and related processes.

1. Purpose of the Report

- 1.1. This report presents the six-monthly update on the status of Directions made by the Integration Joint Board (IJB) to Aberdeen City Council (ACC) and NHS Grampian (NHSG).

2. Recommendations

- 2.1. It is recommended that the Risk, Audit and Performance Committee:



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- a) Notes the detail and updates contained within the report and the three appendices.

3. Strategic Plan Context

- 3.1. Under Section 26 of the Public Bodies (Joint Working) (Scotland) Act 2014, in order to carry out the functions delegated, the IJB must give Directions to a constituent authority. For Aberdeen City IJB the constituent authorities are ACC and NHSG. Monitoring the effectiveness of the Direction process provides assurance that activity is being undertaken to help further the delivery of the Strategic Plan. Many of the Directions made are linked directly to specific programmes or projects as set out in the Delivery Plan.

4. Summary of Key Information

- 4.1. 'Health and Social Care Integration Statutory Guidance - Directions from Integration Authorities to Health Boards and Local Authorities', published in January 2020, states that there should be a log kept of all Directions made. At its meeting on 23 September 2020, the Risk Audit and Performance Committee (RAPC) agreed that a report on Directions would be presented every 6 months to review this log and provide assurance that the Directions were being issued and actioned in accordance with the 2014 Act.
- 4.2. Members agreed at the RAPC on 23rd June 2022 to a new 'traffic lights' system with four classifications to indicate the status of Directions. The classifications are as follows;

GREEN (Ongoing) indicating where the current direction is still valid, in place and not due for renewal or completion.

AMBER (Due) indicating Directions which are due for renewal or completion within the 6 months following the date of the Committee where the report is presented, including those which are at risk of not being completed within the timescale and / or within the allocated budget. In the case of the latter, an update to RAPC is required.

RED (Concern) indicating Directions which have either

- a) Not been implemented due to issues with implementation e.g. no service available to deliver on the direction.



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- b) Directions which have expired and have not been reported as renewed or completed.

GREY (Complete) – indicating Directions where the date has expired, and the direction is either no longer required or has been superseded by a new direction. It also includes Directions which have been completed within a set timescale and will not be required to continue beyond that.

4.3. Appendix A shows all ‘open’ Directions and those Directions which were reported previously to the RAPC meeting in June 2024 but have since had a change in status. Those that are now complete will be archived for future reports. Three Directions have been added to the spreadsheet since the last report – one from the IJB meeting on 9th July 2024 for additional rental, maintenance, cleaning, utilities etc. in relation to the continued delivery of community based services from a priority intervention hub and two from the IJB meeting on 24th September 2024, one in relation to digital innovation and the other in relation to the recommissioning of the Carers Support Services. The Directions in Appendix A are sorted in chronological order of the ‘Effective To’ date, starting with the oldest date.

4.4. The total number of ‘open’ Directions reported is 36. It should be noted that some IJB decisions require a Direction to be made to both ACC and NHSG. Five (14%) of the 36 Directions are now complete (Grey category) and will be removed from the report for the next iteration. 28 (78%) are classified as Green (ongoing) , and three (7%) as Amber (due for renewal within 6 months). There are no Directions in the Red (expired) category.

4.5. One of the Amber status Directions is in relation to grant funded providers whose funding is due to end 31st March 2025. Following review it has been agreed to amend the funding of these providers from grants to ‘commissioned and contracted’, providing five year funding as opposed to year on year (as tends to be the case with grant funding). This will provide more stability to both the providers and the IJB. It will also reduce the workload for both providers and partnership staff that arises from the process of awarding grant funding annually. Arrangements are in hand for the commissioning of these services which will form part of the Annual Procurement Workplan report going to IJB on 4th February 2025. The other two Amber status Directions are in relation to the Medium Term Financial Framework (one Direction to each of our statutory partners). The MTF for 2025 onwards will be presented to the IJB on 18th March 2025 and will be accompanied by Directions which will supersede these ones.



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- 4.6. The Committee is asked to note that a review of the Directions process has been undertaken. The Guidance Note appended to this report as Appendix B, seeks to ensure that Direction templates capture relevant information to help improve the monitoring and scrutiny of the Directions tracker. It also seeks to promote a more consistent approach to the development of Directions that is in alignment with statutory guidance. This updated Guidance and Template has been circulated to all potential report authors. Consideration is being given to Directions noted as 'ongoing'. It is thought that these areas of work may already be captured by the Direction that covers our Medium Term Financial Framework. We are currently checking whether they are or not and if they are we will clarify that on the next report and propose closing these off on the Tracker to avoid duplication.
- 4.7. As part of the 2022/23 Internal Audit Programme an audit was undertaken on Data Sharing. One of the recommendations was to ensure assurance is obtained that Data Protection Impact Assessments (DPIAs) are completed where appropriate and that a register of these is held by each Data Controller. It was agreed to add this assurance to the process of capturing and monitoring Directions. The record of Data Protection Impact Assessments (DPIAs) is attached at Appendix C.

5. Implications for Risk Audit and Performance Committee

5.1. Equalities, Fairer Scotland and Health Inequality

As this is a report on performance and no changes to service delivery are proposed, there is no requirement for an impact assessment to be undertaken and there are no direct implications in respect of Equality, Fairer Scotland or Health Inequality. The individual reports which prompted the Directions referred to within this report would have been subject to impact assessments where relevant.

5.2. Financial

There are no direct financial implications as a result of the recommendations in this report. The individual reports which prompted the Directions referred to within this report would have noted the financial implications and the budget would have been identified within the Direction.



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5.3. Workforce

There are no direct workforce implications as a result of the recommendations in this report. The individual reports which prompted the Directions referred to within this report would have noted the workforce implications and links to the Workforce Plan.

5.4. Legal

The monitoring of the Directions Log ensures that the IJB is discharging the requirement under the Health and Social Care Integration Statutory Guidance- Directions from Integration Authorities to Health Boards and Local Authorities (Jan 2020).

5.5. Unpaid Carers

There are no direct implications for Unpaid Carers as a result of the recommendations in this report.

5.6. Information Governance

There are no direct information governance implications arising from the recommendations in this report.

5.7. Environmental Impacts

There are no direct environmental implications arising from the recommendations in this report.

5.8. Sustainability

There are no direct sustainability implications arising from the recommendations in this report.

5.9. Other

None.



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6. Management of Risk

6.1. Identified risks(s)

There is a risk that if the Directions Log is not reviewed on a regular basis there would be no assurance that the IJB is discharging the requirement under the Health and Social Care Integration Statutory Guidance- Directions from Integration Authorities to Health Boards and Local Authorities (Jan 2020).

6.2. Link to risks on strategic or operational risk register:

This report links to Risk 4 on the Strategic Risk Register,

Cause: Performance standards/outcomes are set by national and regulatory bodies and those locally determined performance standards are set by the board itself.

Event: There is a risk that the IJB, and the services that it directs and has operational oversight of, fails to meet the national, regulatory and local standards.

Consequence: This may result in harm or risk of harm to people.



APPENDIX A

Direction in relation to	Total Budget	Report No. (HSCP)	Lead Officer	ACC/ NHSG	Date Approved	Effective To	Status	Narrative
Navigator/Un-scheduled Care	£146,160.00	21.086	S. Raynor	NHSG	24/08/21	30/09/23		Test of change now concluded. Direction closed.
Supplementary Workplan	£2,852,417.00	19.121	N. Stephenson	ACC	24/03/20	31/08/24		This Direction covered 4 services, all of which have been subject to review. 3 were extended under subsequent Directions and the remaining one ceased at the end of August. This Direction is therefore now closed.
Dual Sensory Impairment Service (NESS)	£215,368 (additional funding)	22.034	S. Omand-Smith	ACC	07/06/22	30/09/24		Direction complete. Following review the contract for additional funding has ended and the option to extend will not be utilised.
Contracts and Commissioning	£123,242,747.00	19.062	N. Stephenson	ACC	19/11/19	30/09/24		This Direction covered 11 services. 3 services are subject to annual review and a further 3 have been extended. All 6 of these are now subject to new Directions. 4 services have been reviewed and have ended. The one remaining service (Care at Home) has been reviewed and a new Direction was approved on 7 th May for re-tendering.
Grants	£661,227.00	23.005	S Omand-Smith	ACC	31/01/23	31/03/25		Third Sector Interface (TSI), Counselling and Support Services – on Grants Register and all currently under review



Direction in relation to	Total Budget	Report No. (HSCP)	Lead Officer	ACC/ NHSG	Date Approved	Effective To	Status	Narrative
Medium Term Financial Framework (MTFF)	£131,067,000	24.012	Chief Finance Officer	ACC	01/04/24	31/03/25		Annual Budget Approval due to come back to IJB March 2025
Medium Term Financial Framework (MTFF)	£266,000,000 (of which approximately £30M relates to Hosted Services and £53M is set aside for large hospital services)	24.012	Chief Finance Officer	NHSG	01/04/24	31/03/25		Annual Budget Approval due to come back to IJB March 2025
Aberdeen City Vaccination Centre and Priority Intervention Hub	Not more than £334,300	23.090	Fiona Mitchelhill	NHSG	05/12/23	09/05/25		Direction Completed early. Contingency to cover potential shortfall from SG Funding (one off from Reserves) not required. All costs will be met from within the Vaccination budget.
First Contact Mental Health and Wellbeing	£1,462,733.00	21.045	S. Omand-Smith	ACC	25/05/21	31/08/25		Action 15 Funding – service currently under review.
Digital Innovation Programme	£1,250,000	24.071	Fraser Bell	NHSG	24/09/24	30/09/25		Budget relates to initial costs.
Rosewell House	Existing Budget	23.054	F. Mitchellhill	NHSG	22/08/23	31/12/25		Further report to be brought to IJB summer 2025 to determine the future of Rosewell House



Direction in relation to	Total Budget	Report No. (HSCP)	Lead Officer	ACC/ NHSG	Date Approved	Effective To	Status	Narrative
Rosewell House	Existing Budget	23.054	F. Mitchellhill	ACC	22/08/23	31/12/25		Further report to be brought to IJB summer 2025 to determine the future of Rosewell House
Supplementary Workplan	£3,616,748.00	20.001	N. Stephenson	ACC	09/06/20	30/06/26		Training and Skills commissioned services listed on contracts register which is reviewed at least annually. Review scheduled for January 2026.
Annual Procurement Plan	£56,205,827.00	21.008	S. Omand-Smith	ACC	23/02/21	30/09/26		Various commissioned services only two services remain open. NCHC is reviewed annually and the NESS contract which is due to end Sept 2026. Review scheduled to commence Sept 2025
Alcohol and Drugs Partnership (ADP) Investment Programme	ADP Budget	22.037	K. Dawson	NHSG	07/06/22	30/06/27		Scheduled for review a minimum of 12 months in advance of the end date.
Alcohol and Drugs Partnership (ADP) Investment Programme	ADP Budget	22.037	K. Dawson	ACC	07/06/22	30/06/27		Scheduled for review a minimum of 12 months in advance of the end date.
Morse Community Electronic Patient Record Evaluation and Contract Renewal	£913,042.00	24.030	A. MacLeod	NHSG	07/05/24	01/10/27		Approved at IJB May 2024. Budget is maximum required, could be less if Shire and Moray come on board. Contract review will be undertaken a minimum of 12 months prior to contract end date.



Direction in relation to	Total Budget	Report No. (HSCP)	Lead Officer	ACC/ NHSG	Date Approved	Effective To	Status	Narrative
Supplementary Workplan	£42,391,380.00	22.098	N. Stephenson	ACC	29/11/22	31/03/28		Various commissioned services all listed on Contracts Register which is reviewed at least annually. Review date will be noted on 2027/28 Annual Procurement Workplan.
Supplementary Procurement Workplan 2024/25	£146,096,300	24.007	Fiona Mitchelhill	ACC	01/04/24	31/03/28		Bon Accord Support Services including variation to detail (not timescale) of original Direction in relation to Rosewell House
Aberdeen City Vaccination and Wellbeing Hub	c £300,000	24.047	Sandy Reid	NHSG	09/07/24	09/05/28		Continued delivery of community based services from a priority intervention hub. Budget in relation to additional rental, maintenance, cleaning, utilities etc. only.
Supplementary Workplan	£12,887,689.00	22.066	N. Stephenson	ACC	30/08/22	30/11/28		ADP and MH commissioned services all listed on Contracts Register which is reviewed at least annually. Review date will be noted on 2028/29 Annual Procurement Workplan.
Annual Procurement Workplan	£110,536,534.00	23.002	N. Stephenson	ACC	31/01/23	31/03/29		Various commissioned services all listed on Contracts Register which is reviewed at least annually. Review date will be noted on 2028/29 Annual Procurement Workplan.
Independent Advocacy	£2,059,612.00	23.018	N. Stephenson	ACC	25/04/23	30/09/29		On Grants Register which is reviewed at least annually. Review date will be noted on 2029/30 Annual Procurement Workplan.
Procurement Workplan (MH Community)	£4,824,046.00	23.056	N. Stephenson	ACC	22/08/23	31/10/29		Listed on Contracts Register which is reviewed at least annually. Review date will be noted on 2029/30 Annual Procurement Workplan.



Direction in relation to	Total Budget	Report No. (HSCP)	Lead Officer	ACC/ NHSG	Date Approved	Effective To	Status	Narrative
Intervention Services)								
Link Practitioner Service	£6,129,974.00	22.062	A.MacLeod	NHSG	30/08/22	31/03/30		Funded by PCIP – on Programme for review prior to end of contract.
Annual Procurement Workplan 2024/25	£220,737,528	24.004	Fiona Mitchelhill	ACC	01/04/24	31/03/31		Various commissioned services including NCHC, Housing Support, Complex Care Support Services which are listed on the Contracts Register and Grant Funded Services which are listed on the Grants Register. Both of these are reviewed at least annually. Review date will be noted on 2030/31 Annual Procurement Workplan.
Supplementary Procurement Workplan 2024/25	£117,716,381	24.026	Fiona Mitchelhill	ACC	07/05/24	31/10/31		Care and Support at Home Services. Listed on the contracts Register which is reviewed at least annually. Review date will be noted on 2031/32 Annual Procurement Workplan. – contract will be reviewed a minimum of one year prior to contract expiry date.
Supplementary Procurement Workplan 2024/25	£200,250 (extension) + £7,103,102 (re-tender)	24.066	Fiona Mitchelhill	ACC	24/09/24	31/03/32		Carers Support Services – 4 month extension to Adult Carers Support Service and retendering of both Adult and young Carers Support Services.
Chaplaincy Listening Service	£178,369 p.a.	18.151	K. Dawson	NHSG	26/03/19	Ongoing		The service continues on an ongoing basis and is funded by Action 15 (PCIP) monies. Original Direction indicates the ongoing nature.



Direction in relation to	Total Budget	Report No. (HSCP)	Lead Officer	ACC/ NHSG	Date Approved	Effective To	Status	Narrative
Immunisations	£55,558,291.81	21.066	F. Mitchellhill	NHSG	24/08/21	Ongoing		Ongoing business as usual.
Alcohol and Drugs Partnership (ADP) Investment Programme	ADP Budget	21.119	S. Omand-Smith	ACC	15/12/21	Ongoing		Ongoing funding from ADP Budget.
Alcohol and Drugs Partnership (ADP) Investment Programme	ADP Budget	21.119	S. Omand-Smith	NHSG	15/12/21	Ongoing		Ongoing funding from ADP Budget.
ADP/Blood Borne Viruses (BBV) Partnership Update	£65,000.00	20.068	S. Omand-Smith	ACC	01/12/20	Ongoing		Ongoing funding from ADP Budget.
ADP/Blood Borne Viruses (BBV) Partnership Update	£65,000.00	20.068	S. Omand-Smith	NHSG	01/12/20	Ongoing		Ongoing funding from ADP Budget.
ADP - Tele Healthcare	£70,000.00	20.068	S. Omand-Smith	ACC	01/12/20	Ongoing		Ongoing funding from ADP Budget.
ADP - Tele Healthcare	£70,000.00	20.068	S. Omand-Smith	NHSG	01/12/20	Ongoing		Ongoing funding from ADP Budget.



Guidance on Directions, October 2024

Introduction

Under Section 26 of the Public Bodies (Joint Working) (Scotland) Act 2014, in order to carry out the functions delegated, the IJB must give Directions to a constituent authority. 'Health and Social Care Integration Statutory Guidance - Directions from Integration Authorities to Health Boards and Local Authorities', published in January 2020 states that it would be helpful for IJBs to develop a Directions Policy, based on the guidance and this document forms Aberdeen City IJB's Directions Policy as per that recommendation.

For Aberdeen City IJB the constituent authorities are Aberdeen City Council (ACC) and NHS Grampian (NHSG). The Aberdeen City Integration Scheme sets out the governance arrangements within which the Integration Joint Board (IJB) and its two statutory partners – ACC and NHSG – interact to enable the delivery of delegated services and achieve the overall vision of integrated health and social care. The full list of services delegated to the IJB can be found in the Annexes to the [Integration Scheme](#)

The IJB is responsible for the planning of delegated services and achieves this through the Strategic Plan. The IJB does not employ staff or own buildings or assets, nor does it have the legal status to enter into contracts. Excluding budgets in relation to Set Aside, Hosted Services and Primary Care (including Prescribing), 96% of the Aberdeen City IJB's budget is spent on either staffing or commissioning costs. In discharging its function in relation to planning of delegated services it must therefore have a mechanism whereby it can instruct its partners to action its planning decisions particularly if these relate to a change in the way resources such as staff or assets are utilised or if one of the partners is required to enter into a contractual agreement. It does this by issuing Directions. This policy confirms the importance of Directions in supporting integration, details when Directions should be issued, confirms the form and content of Directions, the process for developing a Direction and how progress of Directions are monitored.



What are Directions?

- Directions are both a necessary and important aspect of **governance and accountability** under integration, providing a means by which responsibilities are made clear and evident.
- Directions are a **legal requirement** and are **binding**, they are the legal basis on which NHSG and ACC can properly discharge their statutory duties to deliver services that are under the control of Aberdeen City IJB.
- Directions are the means by which Aberdeen City IJB tells NHSG and ACC what is to be delivered using the integrated budget and for the IJB to improve the quality and sustainability of care, as outlined in the Strategic Plan. As such, Directions must contain **sufficient detail** to enable NHSG and/or ACC to understand exactly what is being asked of them.
- Directions are the **end point of a process** of decision making by the IJB. The issuing of a Direction should follow a period of wider engagement and consultation on the function(s) that are the subject of the Direction including an Integrated Impact Assessment if relevant. This is part of the normal approach to service design, planning and delivery.
- Directions ensure a **record is maintained** of which partner decided what (and with what advice), which partner is responsible for what, and which partner should be audited for what (whether in financial or decision making terms).

Partner Responsibilities in relation to Directions

- Aberdeen City IJB, ACC and NHSG must each take **individual and several responsibility** for complying with their statutory duties, and for being clear about the lines of accountability between one another.
- ACC and NHSG are **required to comply** with all Directions received from Aberdeen City IJB. The law is clear that NHSG and ACC may not amend, ignore, appeal or veto any Direction issued to them by Aberdeen City IJB.
- Neither ACC nor NHSG **may use resources** allocated via Aberdeen City IJB in pursuit of a Direction **for any other purpose than that intended**.

Multi-partnership Co-ordination

The statutory guidance also covers Directions issued in relation to 'arrangements between neighbouring IJBs within a Health Board area where Directions for acute care are under consideration'. This is most likely to be in relation to Hosted Services i.e. delegated services which are delivered by one IJB on behalf of the others. The guidance refers to the need for collaboration and co-ordination between all parties through regular meetings of joint forums, and joint planning. It also highlights that all decisions about delegated functions still require to be made by constituent IJBs, whatever the operational delivery arrangements that are in place, and that an IJB cannot delegate its responsibilities to another IJB, or back to a Health Board or Local Authority. It suggests this situation may be best managed by the same decision being considered by each



relevant IJB supplemented with any additional information or reflections required by each, to ensure very localised matters are taken account of. Although, this describes in practice what is already happening, by referencing it in this new Policy, we are committing to ensuring joint communication and planning continues to take place.

When should Directions be issued?

- A Direction must be issued in respect of **every function** that has been delegated to Aberdeen City IJB. This can be done annually at budget setting via the approval of the Medium Term Financial Framework (MTFF).
- Aberdeen City IJB may, however, make decisions about service change, service redesign, investment or disinvestment **at any of their meetings throughout the year**. If these decisions utilise additional monies received out with the approved MTFF; if they require a material and permanent change in the way resources such as staff or assets are utilised; or if one of the partners is required to enter into a contractual agreement; a Direction will be required to be issued to the relevant partner to enable that function to be carried out.
- Directions should be issued to the **relevant statutory partner** responsible for the function referred to within the description of the service change. Directions can be issued to one of the partners or to both, although the description of what has to be delivered within the Direction may be different for each depending on the functions referred to.
- Directions should not be issued **unnecessarily** and should be **proportionate**.
- A Direction should always be **prompted by a decision made by the IJB** which will be based on the recommendations within a comprehensive and formal report to the IJB, on the agreed report template, which provides key information upon which the decision will be based, and confirms the alignment of the decision to the Strategic Plan, and the relevant implications and risks.
- Any Direction issued by the IJB **must meet all clinical and care governance requirements and standards** to ensure patient safety and public protection as well as to ensure staff and financial governance. The senior professional, clinical and financial advisors on the IJB should be appropriately experienced and supported to provide scrutiny of these aspects as part of their role.



Form and Content of Directions

Directions must be **in writing and should be sufficiently detailed** to ensure the intention of the IJB is adequately captured and effectively communicated. The Direction should include information on the required delivery of the function, for example changing the model of care, as well as the financial resources that are available for carrying out the function. The Direction may specify in some detail what NHSG and ACC or both are to do in relation to carrying out a particular function. A lack of detail or specificity in a Direction may cause difficulties in performance monitoring and hamper the effective delivery of a function.

Directions must clearly identify **which of the integrated health and social care functions they relate to**. The IJB can direct the carrying out of those functions by requiring that a particular named service or services be provided. Where appropriate, the same document can be used to give Directions to carry out multiple functions however it is useful, for the purposes of the performance monitoring of Directions, if the start and end dates of the functions are the same.

Directions must include detailed information on the **financial resources** that are available for carrying out the functions that are the subject of the Directions, including the allocated budget and how that budget (whether this is external monies received or a sum set aside and made available from existing budgets) is to be used. Our Medium Term Financial Framework (MTFF) is reported annually to IJB and is covered by a Direction with the start and end dates of the relevant financial year. If funding for a service is of an ongoing nature it should form part of the MTFF Direction and not a separate one.

Directions are intended to provide **clear advice to delivery partners on the expected delivery of any given function, together with the identified resource available**. The exercise of each function can be described in terms of delivery of services, achievement of outcomes and/or by reference to the Strategic Plan.

The content of a Direction should be **informed by the content of a report on the function(s) submitted to and approved by the IJB**. The Direction should **draw on the report's content**.

The Direction should be **contained in the same report**, using a **standard format**, in order that it can be **approved by the IJB at the same time as the report and its recommendations are approved**.

The IJB are able to **raise queries about the clarity or content of a Direction** as part of their consideration of the accompanying report at its meetings and these queries can **prompt action by officers** to make any necessary amendments to the Direction.

A Direction will remain in place **until it expires, is varied, revoked or superseded** by a later Direction in respect of the same functions.



Development of Directions

The following is the process to be followed when developing Directions: -

1) IJB Report will be drafted by a Lead Officer on the appropriate IJB report template

The report will contain:

- a) reason and rationale for recommendation
- b) integrated impact assessment if required
- c) links and impacts to risk register along with any possible mitigations
- d) financial, HR, legal and other relevant implications as per report template
- e) links to IJB strategic plan

2) The Lead Officer will determine whether a Direction needs to be issued in respect of the report recommendations having due regard to this Policy. If a Direction is considered necessary, the next steps are: -

- a) confirm the requirement in the appropriate section on the IJB Report template
- b) identify which partner the Direction(s) need to be issued to
- c) complete the appropriate Direction Template and append that to the IJB Report

3) Following approval of the recommendations in the report the Chief Officer (or their nominee) will send the approved Direction to the Chief Executive of either ACC or NMSG (or both if appropriate) within 2 weeks of the IJB meeting where the Direction was approved, when the draft minutes of the meeting are available. The following will be sent along with the Direction: -

- a) copy of the IJB report
- b) draft minute of the IJB meeting

4) The relevant Chief Executive instructs the Chief Officer to implement the Direction taking into consideration:

- a) compliance with the relevant financial and procurement regulations
- b) any approval process required by the partner organisations (e.g. completion of IJB procurement request form for ACC)

5) The Lead Officer should monitor the implementation of the Direction and determine and instigate the revocation, variation or supersession of this if appropriate. All of these situations require a report to IJB seeking approval to issue a revised Direction.



The Directions Template

A copy of the Directions Template can be found at Appendix A to this Policy.

The Template includes confirmation of : -

- which partner (or partners) the Direction is being issued to.
- that the service(s) detailed within the Direction should be provided in line with Aberdeen City IJB's Strategic Plan for the duration, and within the associated budget, noted pending the Direction being varied, revoked or superseded by a later Direction in respect of the same functions.
- the delegated service as noted within the Integration Scheme
- whether the Direction is a new one, or whether it varies, revokes or supersedes a previous Direction
- the date of the IJB meeting where the Direction was approved
- the reference number and title of the report that the Direction relates to
- the reference number, report title and IJB meeting date relevant to the previous Direction that the new Direction varies, revokes or supersedes
- a detailed description to the instruction to the relevant partner (drawn from the content of the IJB report)
- the link to the IJB Strategic Plan
- the timescale (start and end date) that the Direction relates to in the format DD/MM/YYYY. The Act does not set out fixed timescales for Directions. This flexibility ensures that the delivery of integrated health and social care functions is consistent with the strategic plan and takes account of any changes in local circumstances. Our Medium Term Financial Framework (MTFF) is reported annually to IJB and is covered by a Direction with the start and end dates of the relevant financial year. If funding for a service is of an ongoing nature it should form part of the MTFF Direction and not a separate one. Directions can relate to multiple instructions to partners however if each Direction relates to activities that have the same start and end date this makes monitoring the progress of delivery of the Direction easier.
- the associated budget relating to the Direction NB: this should be the value in £s of the total budget that the Direction covers (value of services multiplied by number of years); plus the name of the existing budget line or external funding source, and, in terms of an external funding source, whether this is recurring or non-recurring; plus the name of the budget holder who confirms the availability of the funding source.



- a reminder to report authors that the Direction is subject to audit and therefore the information they provide should be comprehensive and accurate.

Recording and Monitoring Directions

'Health and Social Care Integration Statutory Guidance - Directions from Integration Authorities to Health Boards and Local Authorities', published in January 2020, states that a **log** of all Directions issued, revised, revoked and completed should be maintained, ensuring that it is checked for accuracy and kept up-to-date. This log should include, as a minimum, **the function(s) covered, any identifier (such as a log number), date of issue, identify to which delivery partner(s) issued, any delivery issues and the total resource committed**. The log should be **regularly monitored and reviewed** by the IJB and used as part of performance management, including audit and scrutiny. This should include monitoring the implementation and/or status of directions that have been approved by the IJB.

ACHSCP maintains a Directions Tracker. At its meeting on 23 September 2020, RAPC agreed that a report on Directions would be presented every 6 months to review the Tracker and provide assurance that the Directions were being issued and actioned in accordance with the 2014 Act.

In addition to this bi-annual reporting to RAPC, the report is also considered as part of the quarterly IJB performance meeting which includes the Chief Executives of both ACC and NHSG.

At the RAPC meeting on 23rd June 2022, members agreed to a new 'traffic lights' system with four classifications to indicate the status of Directions. The classifications are as follows;

GREEN (Ongoing) indicating where the current direction is still valid, in place and not due for renewal or completion.

AMBER (Due) indicating Directions which are due for renewal or completion within the 6 months following the date of the Committee where the report is presented, including those which are at risk of not being completed within the timescale and / or within the allocated budget. In the case of the latter, an update to RAPC is required.

RED (Concern) indicating Directions which have either

- Not been implemented due to issues with implementation e.g. no service available to deliver on the direction.
- Directions which have expired and have not been reported as renewed or completed.

GREY (Complete) – indicating Directions where the date has expired, and the direction is either no longer required or has been superseded by a new direction. It also includes Directions which have been completed within a set timescale and will not be required to continue beyond that.



These classifications are used as part of the bi-annual report.



INTEGRATION JOINT BOARD

DIRECTION

ISSUED UNDER S26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

The **ABERDEEN CITY COUNCIL/NHS GRAMPIAN** is hereby directed to deliver for the Aberdeen City Integration Joint Board, the services noted below in pursuance of the functions noted below, for the time period noted below and within the associated budget noted below.

Services will be provided in line with the Board's Strategic Plan and existing operational arrangements for the duration of this Direction pending it expiring, being varied, revoked or superseded by a later Direction in respect of the same functions.

This Direction relates to the following integrated health and social care function as noted in the Integration Scheme: -

This Direction: -

Is a new Direction*

Varies a previous Direction*

Revokes a Previous Direction*

Supersedes a Previous Direction*

*delete as appropriate

Approval was received in relation to this Direction from IJB at its meeting on:-
[Please insert relevant date]

The IJB Report Number and Title relevant to this Direction is [Please insert related Report Number and Title of Report]:-

If this Direction varies, revokes or supersedes a previous Direction please note the IJB Report Number, Title of Report, and IJB Meeting Date relating to the previous Direction: -

Description of services/functions to which this Direction is relevant (as they appear in the Integration Scheme):-

Detailed description of instruction to ABERDEEN CITY COUNCIL/NHS GRAMPIAN (delete as appropriate) (NB: be specific, tell relevant statutory partner exactly what the IJB is directing them to do, draw on the content of the report and the recommendations approved, clarify exactly what is the new service delivery model or service change you expect our partner to deliver. For procurement



exercises reference can be made to the Business Case (quote reference number). The exercise of each function can be described in terms of delivery of services or achievement of outcomes).

Link to Strategic Aim or Priority in the IJB's Strategic Plan:-

Timescale of this Direction:-

Start date:- [DD/MM/YYYY]

End date:- [DD/MM/YYYY]

Please note if there are multiple actions on Statutory partners it is helpful if the Direction has the same start and end date. If that is not the case please consider issuing multiple Directions in order to ensure progress on the delivery of each Direction can be monitored effectively.

Associated Budget in relation to this Direction:-

- Value (in £s of the **total** budget required to deliver this service change throughout the timescale of the Direction): -
- Name of Budget Line:- [Service and Sub Service, or confirmation of external funding source and whether this is recurring on non-recurring – be specific): -
- Name the Budget Holder who has confirmed availability of the funding source for this purpose:-

Note to IJB Report Authors – the Direction you are completing is subject to audit, not only from the point of view of the IJB but also from our statutory partners. Please complete this Direction Template with that in mind and ensure that the information you report here is comprehensive, accurate and auditable from beginning to end of the Directions process.



APPENDIX C

Record of DPIAs

Topic and relevant Delivery Plan Project Reference	Service	Partner	Date Submitted	Date Approved	Comments
Adult Mental Health Mapping – AFHL09 Grampian wide MHLD Transformation	MHLD	NHSG	09/02/24	12/02/24	
Community Mental Health Interventions Commissioning – SE30 Consolidation/streamlining of existing MHLD commissioned services	MHLD	ACC	Oct 2023	Oct 2023	
Complex Care – AFHL09 Grampian wide MHLD Transformation	MHLD	ACC	06/06/2024	-	Currently with the DPO for review.
Post Diagnostic Support – AFHL15 Review arrangements for delivery of PDS	MHLD	NHSG	-	-	Being revisited by Royal Cornhill Hospital.
Transitions Survey – AFHL07 Future Needs and Transition	MHLD	ACC	06/06/23	06/06/23	
GIRFE Pathfinder (Older People) – KPS28 Community Prevention approaches to Frailty	ASW	ACC			
GIRFE Pathfinder (Transitions) – AFHL07 Future Needs and Transition	MHLD	ACC			
Assisted Care Robots – SE07 Seek to expand use of TEC	ASW	ACC	-	-	Project on hold
MORSE Integration with TrakCare – SE10 review future use of MORSE	Nursing, AHPs	NHSG	June 2023	April 2024 (conditionally)	Approved with conditions. Conditions have been met, awaiting final approval
MORSE Calendar Sync with O365 – SE10 review future use of MORSE	Nursing AHPs	NHSG	-	-	On hold pending other priorities
Shared Federated Vision – CT15 Deliver the Strategic Intent for PCIP	Primary Care	NHSG	26/08/24		Approval Pending
eMAR – SE07 Seek to expand use of TEC	ASW	ACC	-	-	Being prepared



Aberdeen City Health & Social Care Partnership
A caring partnership

