

ABERDEEN CITY COUNCIL

COMMITTEE	Council
DATE	17 th August 2016
LEAD OFFICER	Chief Executive
TITLE OF REPORT	Aberdeen City Integration Joint Board
REPORT NUMBER	OCE/16/028
CHECKLIST COMPLETED	Yes

1. PURPOSE OF REPORT

The report provides the Council with details of the arrangements put in place for governance of the Integration Joint Board (IJB).

2. RECOMMENDATION

That the Council:-

- i. notes the content of this report;
- ii. recommends that the chairs of the Audit Committees of Aberdeen City Council, NHS Grampian and the IJB come together to avoid duplication of effort, whilst ensuring that both parent bodies receive necessary assurances; and
- iii. agrees to receive regular updates on the governance arrangements relating to the Integration Joint Board.

3. FINANCIAL IMPLICATIONS

There are no financial implications arising directly from this report. Finance is, however, a key element of the governance arrangements of which this report provides details.

4. OTHER IMPLICATIONS

None.

5. BACKGROUND/MAIN ISSUES

The Council considered a report by the Director of Corporate Governance on 2nd March 2016 which set out the powers to be

delegated by the Council and NHS to the Integration Board for Health & Social Care (IJB). In approving the report, Council agreed to instruct the Chief Executive to provide an update report to members on matters relating to the IJB that she considers to be of interest to them at the Council meetings of 17 August and 14 December 2016 and quarterly thereafter, such reports including financial monitoring information in relation to the IJB.

In providing this first report, it is considered appropriate to set out the central elements of governance which have been established from the IJB's arrangements, giving details for each of these.

A.	Purpose
	<p>The purpose of the IJB is set out in its Strategic Plan 2016 -19 which it agreed in March 2016.</p> <p>The Strategic Plan includes:-</p> <ul style="list-style-type: none"> - A strategic vision statement - Values - Strategic priorities for the next 3 years <p>and places these in the local and national context.</p> <p>In terms of accountability, the Scottish Government have identified nine national health and wellbeing outcomes that the partnership must work towards and show what difference it is making. This is supported by a core suite of indicators which are aligned with the national outcomes. It is for these indicators, primarily, on which the IJB's annual report will provide performance information.</p>
B.	Board Governance
i.	<p>In its "Shadow" form the Board engaged the Good Governance Institute (GGI) to provide support identifying and delivering the key governance requirements in 2015/16. Key governance structures and processes have been developed with this support, including:-</p> <ul style="list-style-type: none"> - a methodology for assessing board effectiveness and establishment of a baseline using a maturity matrix; - production of a Board Assurance and Escalation Framework; - improvement and definition of the Board's organisation, behaviours, dynamics and sense of strategic purpose. <p>GGI remain engaged and have made recommendations for the further development of governance arrangements. These have been agreed by the IJB and progress is being monitored and reported.</p>
ii.	<p>As stated above, a Board Assurance and Escalation Framework (BAF) has been developed with support from GGI. The BAF describes the means by which the Board secures assurance on its activities. It states that it sets out the governance structure, systems and performance and outcome indicators through which the IJB receives assurance. (The ongoing development of the IJB's performance management systems is further discussed in section H. below.) The BAF describes the process for the escalation of concerns or risks which could</p>

	<p>threaten delivery of the IJB's priorities, including risks to the quality and safety of services to service users, although as seen in section E. below, the application of the system of risk management remains in development.) The BAF also describes the regulatory framework within which the IJB operates and is designed to give assurance to the Board:-</p> <ul style="list-style-type: none"> • that decision making is underpinned by principles of good governance; • on the quality of its services; • on the probity of its operations; and • on the effectiveness of its system of risk management. <p>The Assurance Framework is owned and will be regularly reviewed by the IJB's Audit and Performance Systems Committee.</p> <p>As part of its normal operations, the IJB is subject to independent assurance through the Care Inspectorate; Healthcare Improvement Scotland; the Health and Safety Executive; as well as its external auditors. All relevant external independent assurance reports will be reported to the Council.</p> <p>Members will be aware that the Care Inspectorate has undertaken a Joint Inspection of Services for Older People. The final report is expected soon and will, like all similar reports, be submitted to the Council.</p>
iii.	<p>Standing Orders for the Board and its Committees have been approved;</p>
iv.	<p>In line with the Model Code of Conduct for Devolved Public Bodies the Board has appointed Roderick MacBeath as its Standards Officer with the following duties:-</p> <ul style="list-style-type: none"> - Providing advice to the IJB on standards and conduct; - Establishing and maintaining registers of interests and registers of gifts and hospitality; - Ensuring the provision of appropriate training on ethical standards and the Code of Conduct; - Advising members on declarations of interest; - Reporting to the Board as appropriate on any matter relating to the Code of Conduct; - Dealing with complaints about the conduct of members submitted locally; - Assisting the Commissioner in any formal investigation of members; and - Generally, liaising with the Standards Commission as appropriate.
v.	<p>Clarity has been obtained via The Standards Commission, which has issued a revised dispensation to Councillors who are Board members which allows them to stay in Council meetings when IJB matters are being discussed.</p>
vi.	<p>Two Committees have been established as undernoted. Terms of reference agreed and are now meeting:</p> <ul style="list-style-type: none"> - Audit & Performance Systems - Clinical & Care Governance Committee <p>Aberdeen City Council is represented as follows:</p>

	<ul style="list-style-type: none"> • Audit & Performance Systems: Cllrs Ironside and Young; • Clinical & Care Governance Committee: Cllrs Donnelly and Cameron.
vii.	The Board has established an Integration and Transformation Programme Board to consider priorities as identified through localities and provide added value and influence strategic decision making in relation to improving health and wellbeing.
C.	Reserved and Delegated Powers
i.	<p>Aberdeen City Council and NHS Grampian have delegated a range of statutory functions in respect of health and social care to the IJB. It is important to note that these functions have been delegated and not transferred. This means that the legal responsibility for the functions still remains with the Council and NHS Grampian, under the direction of the IJB.</p> <p>A Scheme of Delegation has been developed and considered twice by the Board, although not yet approved by the Board. The draft Scheme sets out:-</p> <ul style="list-style-type: none"> - the powers which are reserved to the IJB or its committees. Comprised of those which must, in terms of statute, be reserved, and those which the IJB has, itself, chosen to reserve; - an “Operational Protocol” which specifies the remit and responsibilities of the Chief Officer and the Chief Financial Officer in respect of the operational management and deliverability of the integrated services. <p>As Chief Executive, I have twice requested further clarity on the draft Scheme with respect to the application of Aberdeen City Council’s own Scheme of Delegation to the role and authority of the Chief Officer, within the context of services provided by the Council. The Chief Officer has a dual role, in that they are accountable to the IJB for the responsibilities placed on the IJB under the Act and the Integration Scheme, and they are accountable to the NHS Board and to the Council for any operational responsibility for integrated services, as set out in the integration Scheme. In addition, the Chief Officer has powers delegated to them by virtue of their position as a Chief Official of the Council and NHS. Accordingly, Aberdeen City Council Delegated Powers applies to the Chief Officer. In exercising these Delegated Powers, the Chief Officer is accountable to the Chief Executive of the Health Board and the Council respectively.</p> <p>Members will be aware that a comprehensive review of the Council’s governance arrangements is being undertaken and revised arrangements will provide clarity on the nature and applicability of ACC’s Scheme of Delegation to the role of Chief Officer.</p> <p>Given the Joint Accountable Officer entirely reports to the IJB and not to a committee of Council, I have instructed the Director of Corporate Governance to ensure that a discipline is created within ACC where reports going to the IJB have been formally reviewed by the monitoring functions of Council in order to ensure that the Joint Accountable Officer has complied, where appropriate, with the Council’s Scheme of Delegation, Standing Orders and Financial Regulations.</p>
ii.	Legislation requires the IJB to set out a mechanism for implementing the Strategic Plan and this takes the form of Directions from the IJB to Aberdeen City Council and NHS Grampian which set out the services and functions to be delivered by each organisation and the associated budget for this.

	<p>The Directions are to be reviewed by the Audit and Performance Systems Committee as and when updates are required, and, at a minimum, on an annual basis.</p> <p>In discussions on the draft Scheme of Delegation, I have requested that it be specifically stated that it is the responsibility of the Chief Officer to ensure that the IJB Directions are made in accordance with the legislative framework and regulations which apply to NHS Grampian and Aberdeen City Council and that they are, consequently, legally competent.</p>
D.	Financial Governance
i.	A Chief Financial Officer has been appointed on a permanent basis by the IJB. An induction session has been arranged with the Council's own S95 officer and regular contact will be maintained.
ii.	<p>Financial Regulations have been approved which detail the responsibilities of the IJB for its own financial affairs. The regulations detail the financial responsibilities and policies that govern the IJB, and the regulations which members and committees would have to comply with when considering financial matters. A formal review of the Regulations will take place on a biennial basis.</p> <p>For clarity, the Financial Regulations of Aberdeen City Council apply to the role of Chief Officer. It is expected that the Chief Finance Officer (now in post) is fully inducted on ACC's Financial Regulations.</p>
iii.	<p>2016/17 budget has been approved with a supporting "Due Diligence Report". The due diligence process was based on guidance from the Integrated Resources Advisory Group (IRAG) which recommended that initial sums should be determined on the basis of existing Council and NHS budgets, in addition to actual spend and financial plans for delegated services.</p> <p>For 2017/18 the IJB, through the Chief Officer, will have the authority to make Directions to NHS Grampian and Aberdeen City Council which specify variation from previous spending patterns. I expect the Joint Accountable Officer to discuss such directions with myself and the Council's Section 95 officer as part of the regular performance meetings.</p> <p>Financial Planning for 2016/17 was assessed against actual expenditure and forecasts reported in management accounts for the three most recent financial years and savings and efficiency targets have been identified and assumptions, risks and opportunities have been made clear to all partners.</p>
iv.	The Chief Financial Officer (CFO) of the IJB will be responsible for developing the financial strategy of the IJB including the production of its Medium Term Financial Plan to link to the IJB's Strategic Plan. The CFO will also be responsible for the completion of the IJB's Annual Financial Statement, which outlines the financial resources included in the Strategic Plan and the use of those resources in each financial year of the Plan.
v.	The arrangements for financial management and financial reporting are set out within the Integration Scheme. The Scheme requires the appointment of a chief financial officer, who will be accountable for the financial management of the IJB. The CFO will also be responsible for the preparation of financial reports to

	<p>the IJB, which will be presented to the Audit & Performance Systems Committee. In order to give assurance to the Partners that the delegated budgets are being used for their intended purposes, financial monitoring updates will be reported to the Partners throughout the year. This will include monitoring the deliverability of savings and efficiency targets agreed via the budget setting process.</p> <p>The Integration Scheme also makes provision for the treatment of under or overspends on the IJB budget. In the event of a forecast underspend the IJB will need to decide if this will result in a redetermination of payments or if the surplus will contribute to the IJB's reserves. The Chief Officer and the CFO are required to prepare a reserves policy for the IJB, which must be agreed with the Director of Finance of NHS Grampian and the Section 95 Officer of the Council. In the event of a return of funds to the Parties, the split of returned payments between the Partners will be based on each Party's proportionate share of the baseline payment to the IJB.</p> <p>The Chief Officer is expected to deliver the agreed outcomes within the total delegated resources of the IJB. Where a forecast overspend against an element of the operational budget emerges during the financial year, in the first instance it is expected that the Chief Officer, in conjunction with the CFO will agree corrective action with the IJB. If this does not resolve the overspending issue then a recovery plan must be agreed with the Director of Finance of NHS Grampian and the Section 95 Officer of the Council. In the event that the recovery plan is unsuccessful and an overspend is evident at the year-end, uncommitted reserves held by the IJB, in line with the reserves policy, would firstly be used to address any overspend. In the event that an overspend is evident following the application of reserves, the following arrangements will apply for addressing that overspend:-</p> <ul style="list-style-type: none"> - In the first complete financial year of the IJB the overspend will be met by the Partners with operational responsibility for the service that overspends. - In future years either one of the Partners may make an additional one off payment to the IJB or the Partners may jointly make additional one off payments to the IJB in order to meet the overspend. The split of one off payments between Partners in this circumstance will be based on each Partner's proportionate share of the baseline payment to the IJB. - The recovery plan may include provision for the Partners to recover any such additional one off payments from their baseline payment to the IJB in the next financial year.
vi.	<p>The IJB's budget report for 2016/17 identified the following risks and opportunities:</p> <p><u>Opportunities</u></p> <ul style="list-style-type: none"> i) Use of the additional £4.75 million of funding from the Scottish Government to support the delivery of improved outcomes in social care, help drive the shift towards prevention and further strengthen our approach to tackling inequalities; ii) Confirmation of the recurring nature of the Integrated Care Fund and Delayed Discharge funding will allow these funding streams to be used for longer term commitments in support of service redesign; iii) Slippage from 2015/16 on the Integrated Care Fund and Delayed Discharge funding (currently estimated at £3.6 million) will provide the IJB with additional non-recurring resource in 2016/17.

- iv) The Scottish Government has also made other new funding streams available for transformation in Primary Care and investment in Mental Health services. Both of these can be accessed by the IJB in 2016/17.

Risks

- i) **Staff Recruitment** – the breakeven position on NHS community services is currently underpinned by a large number of vacant posts in staff groups due to recruitment difficulties. If recruitment conditions improve this will lead to a financial pressure on pay budgets.
- ii) **GP Prescribing** – this is a volatile budget which is influenced by volume and price movements which are often outwith local control.
- iii) **Primary Care Services** – recent experience has shown that some Primary Care services are in a fragile position due to recruitment difficulties and other service pressures. The fundamental requirement to provide universal access to Primary Care means there can be a need for increased investment to deal with gaps in service.
- iv) **Earmarked Funding** – the Scottish Government has announced a 7.5% budget reduction in 2016/17 on most earmarked funding streams. This will impact on areas such as dental services and public health. The IJB will be required to manage these budget reductions from within overall resource.
- v) **High Cost Referrals** – the IJB will be allocated a budget for high cost referrals based on existing patient numbers and costs. This represents both a financial opportunity and a risk. If patient numbers reduce, the IJB will achieve a saving. If patient numbers increase, this will be a cost pressure for the IJB.
- vi) **Delivery of living wage** – The Scottish Government anticipates that this can be achieved by 1 October 2016, but this will not be without a range of challenges to overcome. Given that achievement of this policy was made one of the conditions of the agreement on the 2016/17 local government funding settlement there is a risk that sanctions may be taken if this cannot be achieved.
- vii) During 2015/16 it has consistently been reported that an overspend on Learning Disability budgets had been broadly matched by underspending on older people's services due to the levels of availability of care services. Agreements had been reached with the budget holder to re-align the budgets to reflect the actual spend in these 2 areas. Similar to the risk around the recruitment to vacant posts there is a financial risk that the **changing local economy**, combined with the possible impact of the living wage and other measures may lead to greater availability of care, in which case close management would be required to ensure that the additional costs could be managed within the overall budget levels available.
- viii) **Additional social care funding** - it may not be possible to spend the entirety of the budget for additional services within the first year. This would partly result from lead-in times to introduce new measures to resource availability. There may be a reputational risk in this regard, with potential financial risk if this resulted in funding being clawed back later.

E.	System of Risk Management
i.	<p>A Risk Management Framework has been developed and approved by the Board. This includes:</p> <ul style="list-style-type: none"> a. A Risk Management Policy; b. Both strategic and corporate operational risk registers; c. A “Statement of Risk Appetite”, developed with the support of “The Good Governance Institute”. <p>Both the Risk Management Policy and the “Statement of Risk Appetite” will be reviewed during 2016/17.</p> <p>As stated above, the Board Assurance and Escalation Framework also describes the process for the escalation of concerns or risks.</p> <p>Strategic and Operational Risk Registers were reported to the Board in June 2016, but, at that time, were described as developmental and, therefore, I will continue to monitor the development of the registers to ensure they adequately reflect the risks being carried by the IJB on behalf of the Council.</p>
ii.	<p>Internal Audits are being conducted by the Joint Aberdeen City Council/ Aberdeenshire Council Internal Audit Team on the basis of the Annual Plan approved by Aberdeen City Council for 2016/17. With the Council’s Chief Internal Auditor, I have agreed that it remains a responsibility of the Council, through its Audit, Risk & Scrutiny Committee, to assess risks and commission internal audit reviews on the control environment for the delivery of adult social care. Therefore the Council’s Audit, Risk & Scrutiny Committee should expect senior management representation from the IJB to be in attendance.</p> <p>The Board have not made a formal appointment of Internal Auditors, but will be considering a paper at its next meeting on the 30th of August.</p>
iii.	<p>The Board has directed the Chief Officer to apply to Scottish Ministers to join the Clinical Negligence and Other Risks Indemnity Scheme (CNORIS) for Directors and Officers cover. The CNORIS Scheme is established and underwritten by the Scottish Government and provides indemnity cover for the IJB should any significant claims be made against the Board. The Board have instructed that membership of CNORIS be monitored and reviewed on a regular basis.</p> <p>In becoming Members of the IJB, Board members remain employees or elected representatives of the partner organisations (NHS Grampian and Aberdeen City Council), and as such they may at any point be asked to do something or make a decision that goes against their partner organisations normal business. The cover would step in at that point to cover any decisions of this nature that they have made.</p>
iv.	<p>A Civil Contingencies Plan has been prepared and agreed by the IJB. Whilst a focus on civil contingencies is welcome, these arrangements sit within the broader context of the emergency planning arrangements of NHS Grampian and Aberdeen City Council, which are both Category 1 responders, as well as the Local Resilience and Regional Resilience Partnerships. It is not appropriate, therefore, for the IJB to take assurance on civil contingencies without the perspective and agreement of the “whole system” emergency planning</p>

	<p>governance.</p> <p>As Chief Executive and Chair of the Local Resilience Partnership I have instructed that the Civil Contingencies Plan be reviewed by the City's Emergency Planning officers and referred to the Council, NHS Grampian and the Local Resilience Partnership for agreement.</p>
F.	Information Governance
i.	The IJB has formally registered with the Information Commissioner's Office as a joint data controller with the Council and NHS Grampian under the Data Protection Act 1998;
ii.	The Chief Officer is the Nominated Representative for the IJB and the main point of contact for the Information Commissioner's Office;
iii.	The Board has adopted the Scottish Information Commissioner's Model Publication Scheme 2015;
iv.	The Chief Officer is the main point of contact for subject access requests and this is "signposted" on the Partnership's website;
v.	Work is ongoing between the Council and NHS Grampian to develop a streamlined complaints process and implement a uniform way to resolve complaints which relate to integrated service delivery. The statutory process for dealing with Social Work complaints remains in place and statutory complaints which reach the Complaints Review Committee stage are brought to the IJB for noting, after they have been considered by the Council.
G.	Clinical Care Governance
i.	Through an interim Clinical and Care Governance Framework, based on existing systems and processes, arrangements have been put in place by the IJB to comply with the National Framework for Clinical and Care Governance .
ii.	A Clinical and Care Governance Group and a Clinical and Care Governance Committee have been established to oversee the Clinical and Care Governance Framework . Specifically, a review of the Framework's fitness for purpose will be completed by the Clinical and Care Governance Committee within its first year of operation.
iii.	The Clinical and Care Governance Committee provides assurance to the IJB in relation to the quality and safety of services planned and/or delivered by the IJB. Its key role is to ensure that there are effective structures, processes and systems of control for the achievement of the IJB's priorities, where these relate to regulator compliance, service user experience, safety and the quality of service outcomes. To support this role, the CCGC is informed by the clinical and care governance arrangements in place across NHS Grampian and Aberdeen City Council. It also assures the IJB that services respond to requirements arising from regulation, accreditation and other inspections' recommendations. The Committee will consider and approve high value clinical and care risks, consider the adequacy of mitigation, the assurance provided for that mitigation and refer residual high risks to the Board. It has a key role in assuring the Board that learning from governance systems across services, including learning arising from incidents, complaints and identified risks, is shared and embedded as widely as possible.

iv.	Work is required to bring the processes for Health and Safety assurance together. A workshop to take this forward has been proposed at the Clinical and Care Governance Committee.
v.	<p>Functions of the Chief Social Work Officer. The Social Work (Scotland) Act 1968 requires Local Authorities to appoint a single Chief Social Work Officer (CSWO) for the purposes of listed social work functions. The role provides a strategic and professional leadership role in the delivery of social work services. In addition there are certain functions conferred by legislation directly on the CSWO by name.</p> <p>The Public Bodies (Joint Working) (Scotland) Act 2014 provides for the delegation of certain social work functions by a local authority to an integration authority. The CSWO's responsibilities in relation to local authority social work functions continue to apply to functions which are being delivered by other bodies under integration arrangements. However, the responsibility for appointing a CSWO cannot be delegated and must be exercised directly by the local authority itself.</p> <p>The CSWO must be empowered and enabled to provide professional advice and contribute to decision-making in the local authority and health and social care partnership arrangements, raising issues of concern with the local authority Elected Members or Chief Executive, or the Chief Officer of the Integration Joint Board as appropriate (or the Chief Executive of a Health Board if appropriate in the context of a lead agency model), in regard to:</p> <ul style="list-style-type: none"> (a) effective governance arrangements for the management of the complex balance of need, risk and civil liberties, in accordance with professional standards; (b) appropriate systems required to 1) promote continuous improvement and 2) identify and address weak and poor practice. (c) the development and monitoring of implementation of appropriate care governance arrangements; (d) approaches in place for learning from critical incidents, which could include through facilitation of local authority involvement in the work of Child Protection Committees, Adult Support and Protection Committees and Offender Management Committees where that will result in the necessary learning within local authorities taking place; (e) requirements that only registered social workers undertake those functions reserved in legislation or are accountable for those functions described in guidance; (f) workforce planning and quality assurance, including safe recruitment practice, probation/mentoring arrangements, managing poor performance and promoting continuous learning and development for staff; (g) continuous improvement, raising standards and evidence-informed good practice, including the development of person-centred services that are focussed on the needs of people who use services and support; (h) the provision and quality of practice learning experiences for social work students and effective workplace assessment arrangements, in accordance with the SSSC Code of Practice for Employers of Social Service Workers. <p>In the light of the new delivery arrangements created by the formation of the IJB and my need to receive robust assurance around our adult and child protection arrangements, I have instructed an independent review which will examine our</p>

	existing arrangements and make recommendations for improvement. I will share the findings of the review with Council in due course.
H.	System of Performance Management
i.	<p>Legislative guidance requires partnerships to produce an annual report on performance using a 'core suite of indicators' developed by the Scottish Government. The IJB has accepted a recommendation from the Chief Officer and the Good Governance Institute that an integrated reporting approach will be undertaken so that the report narrative reflects the breadth and complexity of the delegated functions and services.</p> <p>The Annual Report will be submitted to Council. What other performance information will be reported through Aberdeen City Council's own performance management arrangements, at both officer and member level, has not been finalised at this stage.</p>
ii.	The Audit and Performance Systems Committee performs the role of reviewing and reporting on the effectiveness of the governance structures in place and on the quality of the assurances the Board receives. It has a moderation role in relation to the consistency of risk assessment. It also has oversight of information governance issues.
iii.	<p>The IJB has committed itself to producing a system of tiered intelligence so that information is presented appropriately to support effective service delivery, performance improvement, strategic planning and governance.</p> <p>An officer working group has been established to review and develop performance management arrangements. This includes representation from Council and Health Board colleagues. It is overseeing four main areas of work:</p> <ul style="list-style-type: none"> • Identifying the data, information and intelligence required; • Systems architecture and information governance; • Intelligent Board processes; • Evaluation. <p>A Joint Information Sharing Group has endorsed a proposed Data Sharing Agreement with National Services Scotland (NSS) and consideration is now being given as to how Council and NHSG approve this agreement.</p> <p>Work is ongoing to develop an evaluation framework to evaluate all of the Partnership's transformational activities to evidence the extent to which these are attaining their specific objectives and contributing to the implementation of the strategic plan.</p>
iv.	Regular one to one meetings between Joint Accountable Officer and ACC and NHS Grampian CEOs are held and attended by the Council's S95 Officer where the financial and non-financial performance of the IJB is reviewed. The structure of these one to one's is developing.
H.	Procurement Governance
i.	'The IJB's Strategic Plan, which was published on 1st April 2016, outlines a high level narrative on how the delegated functions and services will be set out in order for the Partnership to evidence attainment of the national health and wellbeing outcomes.

	<p>Following on from this, a complementary commissioning strategy will be developed showing, in more detail, the IJB's commitment to transform the configuration and delivery of the integrated health and social care services across all sectors to meet the needs of the local population. Specific client group policies and plans will be developed and aligned with both the Strategic Plan and the accompanying Commissioning Strategy.</p> <p>The substance and detail of this commissioning strategy will influence future directions that the IJB gives to Council and Health Board in respect of delegated services that they deliver on behalf of the IJB.</p>
ii.	<p>Bon Accord Care remains an ALEO of Aberdeen City Council. The establishment of Aberdeen Health and Social Care Partnership means:-</p> <ul style="list-style-type: none"> a. that the strategic priorities for social care will be determined by the IJB, who then make Directions to NHS Grampian and Aberdeen City Council with regard to the services and functions to be delivered, as well as the associated budget; b. following this Direction, Aberdeen City Council commissions services, as appropriate, from Bon Accord Care; c. the Council's governance with respect to its ALEO - Bon Accord Care - is managed through the Governance Hub, both for issues of finance, risk, HR, etc as well as service delivery. <p>In practice, however, roles and responsibilities are more complex. The IJB is advised on strategic priorities and supported in issuing Directions by the Joint Accountable Officer (Chief Officer). It is also the Joint Accountable Officer who commissions services from Bon Accord Care, on behalf of the Council and the Joint Accountable Officer who supports the Governance Hub undertake scrutiny and give assurance on the service delivery provided by Bon Accord Care.</p>
I.	Equalities
i.	<p>The Equality Act 2010 was amended in 2015 so that IJBs were included in the definition of what constitutes a public authority and as such must comply with the general public sector equality duty as set out in the act. The IJB also has other more specific duties in that it has a duty to report progress on mainstreaming the public sector equality duty and a duty to publish a set of equality outcomes which it considers will enable it to better perform the equality duty. The IJB published these reports on the Partnership's website before the required date set by the required date of 30th April 2016.</p>

Additional notes:-

1.	Audit Scotland National Report
i.	<p>Audit Scotland published a national report in March 2016 which found that significant risks needed to be addressed if integration is to fundamentally change the way health and care services are delivered.</p> <p>The recommendations of this report, see below, were submitted to the Council's Audit, Risk & Scrutiny Committee in June 2016.</p> <p><i>"NHS boards and councils should work with integration authorities during their first</i></p>

	<p>year of integration to:</p> <ul style="list-style-type: none"> <i>i. carry out a shared analysis of local needs, and use this as a basis to inform their plans to redesign local services, drawing on learning from established good practice.</i> <i>ii. ensure new ways of working, based on good practice from elsewhere, are implemented in their own areas to overcome some of the barriers to introducing new care models.</i> <i>iii. move away from short-term, small-scale approaches towards a longer-term approach to implementing new care models. They should do this by making the necessary changes to funding and the workforce, making best use of local data and intelligence, and ensuring that they properly implement and evaluate the new models.</i> <i>iv. ensure, when they are implementing new models of care, that they identify appropriate performance measures from the outset and track costs, savings and outcomes.</i> <i>v. ensure clear principles are followed for implementing new care models.”</i> <p>Assurance, to elected members, that these specific recommendations are being implemented falls to the Joint Accountable Officer.</p> <p>In the above example it is, therefore, possible that the Joint Accountable Officer would be reporting and attending the Audit Committee of the IJB, ACC and NHSG. Whilst, clearly, not wishing to dilute the assurance all 3 bodies receive, we will need to be mindful of the burden this places on the Joint Accountable Officer. I would recommend that the chairs of the 3 Audit Committees come together to avoid duplication of effort, whilst ensuring that both parent bodies receive the necessary assurances.</p>
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6. IMPACT

Improving Customer Experience –
None direct.

Improving Staff Experience –
None direct.

Improving our use of Resources –
None direct.

Corporate –
The report supports the awareness of Council of the developing arrangements for the IJB.

Public –

The report may be of public interest as the new arrangements are developed and embedded.

7. MANAGEMENT OF RISK

Any significant risks will be identified and managed as appropriate. The report includes details of the system of risk management as well as identified financial risks.

8. BACKGROUND PAPERS

“Aberdeen: the Smarter City”

“Aberdeen City Health and Social Care Partnership Strategic Plan”

“Aberdeen City Health & Social Care Partnership – Integration

Scheme”

9. REPORT AUTHOR DETAILS

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