



## INTEGRATION JOINT BOARD

<b>Date of Meeting</b>	11.12.2018
<b>Report Title</b>	Audit Scotland: Health & Social Care Integration – An Update on Progress.
<b>Report Number</b>	HSCP.18.119
<b>Lead Officer</b>	Sandra Ross, Chief Officer
<b>Report Author Details</b>	Alex Stephen, Chief Finance Officer
<b>Consultation Checklist Completed</b>	Yes
<b>Directions Required</b>	No
<b>Appendices</b>	a. Audit Scotland: Health & Social Care Integration – An Update on Progress.

### 1. Purpose of the Report

- 1.1. This report presents the Integration Joint Board with Audit Scotland's Report "*Health & Social Care Integration – An Update on Progress*")

### 2. Recommendations

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

a) note the content of the Audit Scotland report as attached at Appendix A.

### 3. Summary of Key Information

- 3.1. Audit Scotland published their report 'Health & Social Care Integration – Update on Progress' on the 15 November 2018.

- 3.2. The report clearly states that integration is beginning to make a demonstrable improvement to the health and social care systems and that the Act can be used to advance change. However, they also found that more needs to be done to realise its full potential. With this in mind, the report has four key messages:



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- i. Integration authorities have started to introduce more collaborative ways of delivering services but there is much more to be done.
- ii. Financial planning is not integrated, long term or focused on providing the best outcomes for people who need support. This is a fundamental issue which will limit the ability of Integration Authorities to improve the health and social care system. Financial pressures are making it difficult for Integration Authorities to achieve meaningful change.
- iii. Strategic planning needs to improve, and key barriers that must be overcome include: a lack of collaborative leadership and strategic capacity; a high turnover in leadership teams; disagreement over governance arrangements; and an inability or unwillingness to safely share data with staff and the public.
- iv. Significant changes are still required. Change cannot happen without meaningful engagement with staff, communities and politicians. At both a national and local level, all partners need to work together to be more honest and open about the changes that are needed to sustain health and care services in Scotland.

### 3.3. The report also makes a number of recommendations over six themes:

- i. Commitment to collaborative leadership and building relationships
- ii. Effective strategic planning for improvement
- iii. Integrated finances and financial planning
- iv. Agreed governance and accountability arrangements
- v. Ability and willingness to share information
- vi. Meaningful and sustained engagement

### Reference to Aberdeen City Health & Social Care Partnership

- 3.4. Aberdeen City Health & Social Care Partnership were visited by Audit Scotland in April 2018. They met with a number of colleagues and members of the Integration Joint Board, as well as undertaking a service visit to Woodend Hospital. The report pinpoints leadership, information-sharing and governance as key strengths of the Partnership.
- 3.5. The report states: “We have seen examples of good collaborative and whole-system leadership, including in Aberdeen City, where relationships



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have been built across the Partnership. Although differences of opinion still exist and there is healthy debate, Aberdeen City is now better placed to implement widespread changes to improve outcomes. We saw:

- the promotion of a clear and consistent message across the Partnership;
- a willingness to work with others to overcome differences;
- recruitment of staff to fit and contribute to a new culture;
- development of openness and appreciation of ideas;

### Collaborative Leadership

- 3.6.** A key element in the report focuses highlights that a lack of collaborative leadership and cultural differences are affecting the pace of change. As highlighted above, the report found examples of good collaborative and whole-system leadership.
- 3.7.** Additionally, in Aberdeen City HSCP, both the Integration Joint Board and the Leadership Team have committed to undertake development programmes.

### Integration Joint Board

- 3.8.** At its meeting in August 2018, the IJB agreed to tender for external support to help with the continued development of the board. The Leadership Team will undertake a review of this report to include any key areas for development within the development programme for the IJB during the financial year 2019/20. The learning from this report will be included within the tender.

### Leadership Team

- 3.9.** Following a successful initial workshop led by Insights in October, the Leadership Team have committed to a series of development sessions, which are currently being finalised into a development plan for the team. The plan will include a focus on collaborative leadership throughout.

## 4. Implications for IJB

- 4.1.** Equalities – there are no equalities implications
- 4.2.** Fairer Scotland Duty – there are no implications for the Fairer Scotland Duty



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- 4.3. Financial – there are no finance implications arising from the recommendations in this report. Further information on the financial position and pressures of IJBs is outlined in Appendix A.
- 4.4. Workforce – there are no workforce implications
- 4.5. Legal – there are no legal implications
- 4.6. Other – there are no other implications

### 5. Links to ACHSCP Strategic Plan

- 5.1. The Audit Scotland report provides a high-level review of progress with integrating health and social care. The recommendations and improvements identified in the report could help the IJB to deliver on all elements of its strategic plan.

### 6. Management of Risk

- 6.1. Identified risks(s) – NA
- 6.2. Link to risks on strategic or operational risk register: NA
- 6.3. How might the content of this report impact or mitigate these risks: NA

Approvals	
<i>These will be added once your report has final approval for submission to committee.</i>	Sandra Ross (Chief Officer)
<i>These will be added once your report has final approval for submission to committee.</i>	Alex Stephen (Chief Finance Officer)