



## INTEGRATION JOINT BOARD

<b>Date of Meeting</b>	11 <sup>th</sup> June 2019
<b>Report Title</b>	MSG Self Evaluation for the Review of progress with Integration of Health and Social Care
<b>Report Number</b>	HSCP.19.027
<b>Lead Officer</b>	Sandra Ross, Chief Officer
<b>Report Author Details</b>	Name: Alison MacLeod Job Title: Lead Strategy and Performance Manager Email Address: alimacleod@aberdeencity.gov.uk
<b>Consultation Checklist Completed</b>	Yes
<b>Directions Required</b>	No
<b>Appendices</b>	A. MSG Self Evaluation B. Action Plan

### 1. Purpose of the Report

- 1.1. The purpose of this report is to seek the IJB's endorsement of the Self Evaluation for the review of progress with integration of Health and Social Care which was submitted to the Ministerial Steering Group on 15<sup>th</sup> May 2019 and to seek approval of the associated action plan for delivering on the proposed improvement actions.

### 2. Recommendations

- 2.1. It is recommended that the IJB:
- a) Endorses the Self Evaluation for the review of progress with integration of Health and Social Care submitted to the Ministerial Steering Group on 15<sup>th</sup> May 2019.



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- b) Approves the associated action plan for delivering on the proposed improvement actions.
- c) Instructs the Chief Officer to provide an update on progress on delivery of the actions in March 2020.

### 3. Summary of Key Information

- 3.1. The Ministerial Steering Group (MSG) is a key strategic decision taking group in relation to transformational change in health and community care in Scotland.
- 3.2. The MSG was established in 2008 to provide a forum in which leaders from health and social care could meet to discuss matters of mutual interest and to provide leadership, direction and support in working across organisational and structural boundaries. It assumed overall responsibility for policy matters that crossed the local government / NHS Scotland interface and is a key forum for taking forward COSLA and the Scottish Government's joint political leadership of health and social care integration.
- 3.3. The group is chaired by the Cabinet Secretary for Health and Sport and has a membership that includes three COSLA elected members, Health Board Chairs, the Scottish Council of Voluntary Organisations (SCVO), Scottish Care, Scottish Social Services Council (SSSC), Healthcare Improvement Scotland, Integrated Joint Boards, Social Work Scotland, and more recently, the Care Inspectorate.
- 3.4. Since Health and Social Care Integration went live in April 2016, the MSG has played a key role in reviewing progress and in February 2019 they produced a report entitled "Review of Progress with Integration of Health and Social Care". In November 2018, Audit Scotland also produced a report providing an "Update of Progress" of Health and Social Care Integration.
- 3.5. The MSG agreed with the Audit Scotland recommendations and used them as "Features Supporting Integration" within their report. There are 6 of these features and these are: -
  - Collaborative Leadership and Building Relationships
  - Integrated Finances and Financial Planning
  - Effective Strategic Planning for Improvement
  - Agreed Governance and Accountability Arrangements
  - Ability and Willingness to share information



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- Meaningful and Sustained Engagement
- 3.6.** Rather than recommendations, the MSG decided to set out proposals against each of the features. In support of these proposals the MSG expect that every Health Board, Local Authority and IJB would evaluate their current position in relation to both their report and the Audit Scotland report and take action to make progress. They also made clear that they expect Health and Social Care Partnerships to make integration work, to be clear about the risks being taken, ensure mitigation of these risks and be innovative in progressing integration.
- 3.7.** On 25th March, the Chief Officer received a request to undertake a self-evaluation of the partnership against the proposals within the features. The deadline for submission to MSG was 15<sup>th</sup> May 2019. It was agreed with NHS Grampian and Aberdeen City Council that the partnership would complete one submission for Aberdeen on behalf of all three organisations. A programme of engagement with staff and partners from all organisations began to inform the completion of the template provided. During this time close liaison with partnerships in Moray and Aberdeenshire also took place to ensure the overall picture from an NHS Grampian perspective was consistent. The completed self-evaluation was supported by the Chief Executives of both NHS Grampian and Aberdeen City Council and submitted as “draft” to the MSG by their deadline. A copy of the submission is attached at Appendix A.
- 3.8.** The partnership was asked to rate itself using a 4 level system – Not Yet Established, Partly Established, Established, and Exemplary. The rating required to be backed up by evidence and/or notes and proposed improvement actions identified.
- 3.9.** There are 25 proposals in total however 3 of these were not for completion by the partnership. Our results at a glance are: -
- 10 of the 22 (45%) rated at Exemplary level
  - 9 of the 22 (41%) rated at Established level
  - 3 of the 22 (14%) rated at the Part Established level
  - None were rated at the Not Yet Established level
- 3.10.** We understand that the MSG will use the information gleaned from the self-evaluations across Scotland as a baseline benchmark for ongoing improvement activity. We also anticipate that the self-evaluation process will be repeated in future to measure progress. In preparation for that, the



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proposed improvement actions for Aberdeen City have been collated into an Action Plan which is attached at Appendix B. Lead Officers and Timescales have been allocated. Delivery of the Action Plan will be monitored throughout the year and it is proposed that an update on progress will be reported to the IJB in March 2020.

### 4. Implications for IJB

- 4.1. Equalities – this report has no direct implications in relation to equalities.
- 4.2. Fairer Scotland Duty – this report has no direct implications in relation to the Fairer Scotland Duty.
- 4.3. Financial – There are no direct financial implications arising from the recommendations of this report.
- 4.4. Workforce – There are no direct workforce implications arising from the recommendations of this report.
- 4.5. Legal – there are no direct legal implications arising from the recommendations in this report.
- 4.6. Other – none.

### 5. Links to ACHSCP Strategic Plan



- 5.1. The improvement actions support progress on integration therefore will support the delivery of the overall Strategic Plan.

### 6. Management of Risk

- 6.1. **Identified risks(s):** There is a risk that if these actions are not implemented then Aberdeen City will not see the full benefits of integrating its health and social care services.
- 6.2. **Link to risks on strategic or operational risk register:** All the risks which have been identified are strategic in support of the strategic plan
- 6.3. **How might the content of this report impact or mitigate these risks:** The improvement actions noted in the action plan support progress on integration therefore will mitigate a number of Strategic Risks.



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Approvals	
	Sandra Ross (Chief Officer)
	Alex Stephen (Chief Finance Officer)