

AGENDA ITEM NO 7

REPORT NO IJB 20/20

ANGUS HEALTH AND SOCIAL CARE

INTEGRATION JOINT BOARD – 24 JUNE 2020

SCOTTISH GOVERNMENT GUIDANCE ON DIRECTIONS FROM INTEGRATION AUTHORITIES TO HEALTH BOARDS AND LOCAL AUTHORITIES

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ABSTRACT

The purpose of this report is to advise the Board of Statutory Guidance issued by the Scottish Government on Directions from Integration Authorities to Health Boards and Local Authorities and the implications of this Guidance on the Board's governance arrangements.

1. **RECOMMENDATIONS**

It is recommended that the Integration Joint Board: -

- (i) notes the Statutory Guidance issued by the Scottish Government on Directions from Integration Authorities to Health Boards and Local Authorities,
- (ii) notes the changes required to the Board's governance arrangements to comply with the Guidance.

2. REPORT

- 2.1 Section 53 of the Public Bodies (Joint Working)(Scotland) Act 2014 provides that local authorities, health boards and integration joint boards must have regard to any guidance issued by the Scottish Ministers about its functions under or in relation to that Act
- 2.2 The Scottish Government have issued Guidance to local authorities, health boards and integration joint boards on Directions from Integration Authorities to Health Boards and Local Authorities. This Guidance can be found here: -

https://www.gov.scot/publications/statutory-guidance-directions-integration-authorities-healthboards-local-authorities/

- 2.3 Key points of the Guidance can be summarised as: -
 - Integration Authorities require a mechanism to action their strategic commissioning plans. This mechanism takes the form of binding directions from the Integration Authority to one or both of the Health Board and Local Authority. Directions are also the means by which a record is maintained of which body decided what and with what advice, which body is responsible for what, and which body should be audited for what, whether in financial or decision-making terms.
 - A direction must set out how each integrated function is to be exercised, and identify the budget associated with that.
 - Put simply, directions are the means by which an IJB tells the Health Board and Local Authority what is to be delivered using the integrated budget and for the IJB to improve the quality and sustainability of care, as outlined in its strategic commissioning plan.
 - Directions are also the legal basis on which the Health Board and the Local Authority deliver services that are under the control of the IJB. If directions are not being provided

or they lack sufficient detail, Health Boards and Local Authorities should be actively seeking directions in order to properly discharge their statutory duties under the Act.

- Directions are a key aspect of governance and accountability between partners. This has previously been largely unrecognised, with the effect that there is a lack of transparency, governance and accountability for integrated functions that are under the control of IJBs, and delivered by Health Boards and Local Authorities. This must be a matter of concern for all parties, each of which is responsible for ensuring that they are complying with their individual duties under the Act.
- Directions are a legal mechanism and are intended to clarify responsibilities and requirements between partners, that is, between the IJB, the Local Authority and the Health Board. They are the means via which clarity on decision making is achieved under integration. Directions are therefore both a necessary and important aspect of governance under integration, providing a means by which responsibilities are made clear and evident.
- It is essential that directions are understood to be the end point of a process of decision making by the IJB. Directions should not contain surprising or completely unknown information about service change or redesign and should follow a period of wider engagement on the function(s) that are the subject of the direction. This would normally be part of the service planning and design phase of strategic commissioning.
- Directions are binding, which is why they come at the end point of a process of planning and decision making. The delivery partners are required to comply with all directions received from the IJB, and the law is clear that they may not amend, ignore, appeal or veto any direction. Neither the Local Authority nor the Health Board may use resources allocated via the Integration Authority in pursuit of a direction for any other purpose than that intended. This demands a mature and collaborative approach to the planning and delivery of change in health and social care services that delivers sustainability. It is designed to help local partners improve quality and outcomes for local populations.
- Integration Authorities have been established to put in place plans to improve the health and wellbeing of their local populations and to make best use of the total resource available to them, hitherto managed and allocated separately by Health Boards and Local Authorities. They have an agenda of change and improvement, working in partnership with their delivery partners. It can therefore reasonably be expected that a number of decisions made by IJBs will impact on delivery partners that will require directions to be issued. Otherwise, nothing would be changing – which would not help integration's purpose to improve the sustainability and quality of care.
- IJBs make decisions about service change, service redesign, and investment and disinvestment at many of their meetings. Such decisions will necessitate directions to the Health Board or Local Authority, or both, and may indeed require the delivery partners to carry out a function jointly. The issuing of directions should be taking place at any time throughout the year, as well as at the start of the financial year.
- 2.4 The Guidance also refers to the establishment of processes in relation to a directions policy, the form and content of directions, the issuing and revising of directions, multi-partnership coordination and improving practice. The Guidance suggests that IJB's adopt the practice of adding a short section to their report format that requires the author to decide and record if the report requires a direction to be issued to the Local Authority, the Health Board, to both, or that no direction is required.
- 2.5 The practice has been for the Chief Officer to only issue directions annually to require NHS Tayside and Angus Council to perform delegated functions and setting out the financial resources available to them for this purpose. It is clear from the Guidance that the Scottish Ministers expect that the use of directions is significantly greater.
- 2.6 In light of the Guidance, future reports to the Board will include a short section that requires the author to decide and record if the report requires a direction to be issued to the Local Authority, the Health Board, to both, or that no direction is required.

2.7 In addition, the practice of other integration joint boards will be examined to ascertain how they record and monitor directions issued and to identify and implement best practice. This will be a continuing process which will develop and improve over time.

3. CONCLUSION

The Scottish Ministers have issued Guidance on Directions from Integration Authorities to Health Boards and Local Authorities which the Board is required to have regard to when exercises its functions. Adhering to and implementing the Guidance will assist the Board in fulfilling its statutory obligations.

4. FINANCIAL IMPLICATIONS

There are no financial implications arising directly from this report.

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