

SCH/KM

22 June 2016



**ALL MEMBERS OF ANGUS HEALTH AND  
SOCIAL CARE INTEGRATION JOINT  
BOARD**

Dear Member

**ANGUS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD MEETING**

You are requested to attend a meeting of the Angus Health and Social Care Integration Joint Board to be held in the Town and County Hall, Forfar on **Wednesday 29 June 2016 at 2.00pm**.

The agenda and papers are enclosed.

If you have any queries, please contact Karen Maillie on (01307) 476265 or e-mail [MaillieK@angus.gov.uk](mailto:MaillieK@angus.gov.uk)

Yours sincerely

SHEONA C HUNTER

Head of Legal and Democratic Services

**DISTRIBUTION:**

**Members of the Integration Joint Board**

**Voting Members of Angus Health and Social Care Integration Joint Board**

**Angus Council**

Councillor Glennis Middleton – Chair  
Councillor Jim Houston  
Councillor David May

**NHS Tayside**

Hugh Robertson, Non Executive Board Member  
Judith Golden, Non Executive Board Member  
Alison Rogers, Non Executive Board Member

**Named Proxy Members for Angus Council  
(for information)**

Councillor Colin Brown  
Councillor Lynne Devine  
Councillor Sheila Hands

**Named Proxy Members for NHS Tayside  
(for information) - tbc**

**Non Voting Members of Angus Health and Social Care Integration Joint Board**

Vicky Irons, Chief Officer  
Tim Armstrong, Chief Social Work Officer-People  
Alison Myles, Carers Representative  
Mavis Leask, Staff Representative  
Chris Curnin, Independent Sector Representative  
David Barrowman, Service User Representative

Alexander Berry, Chief Finance Officer  
Douglas Lowdon, Consultant Acute & Elderly Medicine  
GP Representative - tbc  
Neil Prentice – Third Sector Representative  
Staff Representative, NHS Tayside  
Sue Mackie, Associate Nurse Director (Development)

## **Operational Advisers**

George Bowie, Head of Community Health and Care Services – South	David Thompson, Principal Solicitor, Angus Council
Gail Smith, Head of Community Health and Care Services - North	Michelle Watts, Associate Medical Director, NHS Tayside
David Coulson, Associate Director of Pharmacy, NHS Tayside	Drew Walker, Director of Public Health, NHS Tayside



## **ANGUS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD**

**TO BE HELD IN THE TOWN AND COUNTY HALL, FORFAR  
ON WEDNESDAY 29 JUNE 2016 AT 2.00PM**

### **AGENDA**

**1. APOLOGIES**

**2. DECLARATIONS OF INTEREST**

Members are reminded that, in terms of the Code of Conduct of Members of Devolved Public Bodies, it is their responsibility to make decisions whether to declare an interest in any item on this agenda and whether to take part in consideration of that matter.

**3. MINUTE OF PREVIOUS MEETING INCLUDING ACTION LOG**

**PAGE NO.**

**(a) Previous Meeting**

Submit, for approval, as a correct record, the minute of meeting of the Angus Health and Social Care Shadow Integration Joint Board of 18 May 2016.

(1 - 6)

**(b) Action Log**

Submit Action Log of 18 May 2016.

(7 - 8)

**4. ADVISER TO THE INTEGRATION JOINT BOARD**

Submit Report IJB 49/16 by Vicky Irons, Chief Officer.

(9 - 10)

**5. ETHICAL STANDARDS IN PUBLIC LIFE ETC. SCOTLAND ACT 2000 - CODE OF CONDUCT**

Submit Report IJB 50/16 by the Proper Officer of the Integration Joint Board.

(11 - 40)

**6. FREEDOM OF INFORMATION (SCOTLAND) ACT 2002 – PUBLICATION SCHEME**

Submit Report IJB 51/16 by Vicky Irons, Chief Officer.

(41 - 96)

**7. FINANCE MONITORING REPORT – 2015/16 YEAR END**

Submit Report IJB 52/16 by Alexander Berry, Chief Finance Officer.

(97 - 106)

**8. BUDGET AGREEMENT WITH NHS TAYSIDE 2016/17**

Submit Report IJB 53/16 by Alexander Berry, Chief Finance Officer.

(107 - 118)

**9. ANGUS MENTAL HEALTH SERVICES**

Submit Report IJB 54/16 by Vicky Irons, Chief Officer.

(119 - 124)

**10. CLINICAL, CARE AND PROFESSIONAL GOVERNANCE GROUP (CCPGG) UPDATE**

Submit Report IJB 55/16 by Vicky Irons, Chief Officer.

(125 - 128)

**12. DATE OF NEXT MEETING**

The next meeting of the Angus Health and Social Care Integration Joint Board will be Wednesday 31 August 2016 at 2.00pm in the Town and County Hall, Forfar.

**13. EXCLUSION OF PUBLIC AND PRESS**

The Angus Health and Social Care Integration Joint Board will be asked to consider, in terms of paragraphs 2, 3 and 4 of Part 1 of Schedule 7A to the Local Government (Scotland) Act 1973, whether the public and press should be excluded during consideration of the following items, so as to avoid the disclosure of exempt information.

**14. CARE AT HOME CONTRACT ISSUES**

Submit Report IJB 56/16 by Alexander Berry, Chief Finance Officer. (to follow)

**15. ACCOMMODATION FOR PEOPLE WITH LEARNING DISABILITIES – FINANCIAL IMPLICATIONS**

Submit Report IJB 57/16 by Vicky Irons, Chief Officer. (129 - 136)

## **AGENDA ITEM NO 3(a)**

MINUTE of MEETING of the **HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD** held in the Town and County Hall, Forfar, on Wednesday 18 May 2016 at 2.00pm.

**Present:            Voting Members of Integration Joint Board**

Councillor GLENNIS MIDDLETON, Angus Council  
Councillor JIM HOUSTON, Angus Council  
Councillor DAVID MAY, Angus Council  
JUDITH GOLDEN, Non-Executive Board Member, NHS Tayside  
HUGH ROBERTSON, Non-Executive Board Member, NHS Tayside  
ALISON ROGERS, Non-Executive Board Member, NHS Tayside

**Non Voting Members of Integration Joint Board**

VICKY IRONS, Chief Officer  
SANDY BERRY, Chief Finance Officer  
TIM ARMSTRONG, Chief Social Work Officer, Angus Council  
DAVID BARROWMAN, Service User  
MAVIS LEASK, Staff Representative, Angus Council  
DOUGLAS LOWDON, Consultant Acute and Elderly Medicine, NHS Tayside  
SUE MACKIE, Associate Nurse Director (Development)  
ALISON MYLES, Carers Representative  
NEIL PRENTICE, Third Sector Representative

**Advisory Officers**

GEORGE BOWIE, Head of Community Health and Care Services (South), AHSCP  
GAIL SMITH, Head of Community Health and Care Services (North), AHSCP  
DAVID THOMPSON, Principal Solicitor – Resources, Angus Council  
DREW WALKER, Director of Public Health, NHS Tayside

Councillor GLENNIS MIDDLETON in the Chair.

Prior to the commencement of the meeting, the Chair, referred to the recent death of Mrs Lesley McCallum, Staff Representative, NHS Tayside. The Chair and Judith Golden, Non Executive Board Member, NHS Tayside paid tribute to her commitment to public services and expressed condolences to her family.

The Chair, on behalf of the Board also congratulated the Chief Officer on being selected for The King's Fund Top Management Programme.

**1.        APOLOGIES**

Apologies for absence were intimated on behalf of Andrew Thomson, GP representative, Michelle Watts, Associate Medical Director and David Coulson, Associate Director of Pharmacy.

**2.        DECLARATIONS OF INTEREST**

Neil Prentice declared an interest in Items 5 and 6 as he was a Board Member of Voluntary Action Angus. He indicated that he would participate in any discussion, in these items.

### **3. MINUTE OF PREVIOUS MEETING INCLUDING ACTION LOG**

#### **(a) ANGUS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD**

The minute of meeting of the Angus Health and Social Care Integration Joint Board of 23 March 2016 was submitted and approved as a correct record.

#### **(b) ACTION LOG**

The action log of the Health and Social Care Integration Joint Board of 23 March 2016 was submitted and noted.

### **4. ETHICAL STANDARDS IN PUBLIC LIFE ETC. (SCOTLAND) ACT 2000 – CODE OF CONDUCT**

There was submitted Report No IJB 39/16 by the Proper Officer of the Integration Joint Board seeking approval of a draft Code of Conduct for the Integration Joint Board, as required by the Ethical Standards in Public Life etc. (Scotland) Act 2000, for submission to the Scottish Government for approval.

The Report indicated that the Ethical Standards in Public Life etc. (Scotland) Act 2000, introduced a new ethical framework which required Scottish Ministers to issue a Code of Conduct for Councillors and a Model Code of Conduct for members of devolved public bodies.

Integration Joint Boards were “devolved public bodies” for the purposes of the 2000 Act. This meant that each Integration Joint Board must produce a Code of Conduct setting out how its members should conduct themselves in undertaking their duties. A draft Code of Conduct for the Board was based on the Model Code of Conduct and attached as Appendix 1 to the Report.

Following discussion, and having heard from the Principal Solicitor in relation to confidential papers, the Integration Joint Board agreed:-

- (i) to approve the draft Code of Conduct for Members of the Angus Integration Joint Board, as outlined in Appendix 1 to the Report, as required by the Ethical Standards in Public Life etc. (Scotland) Act 2000 for submission to the Standards Commission for approval.
- (ii) to request that the Proper Officer of the Integration Joint Board make arrangements to provide copies of NHS Tayside and Angus Council's register of interests and declaration forms for consideration at the next meeting of the Integration Joint Board on 29 June 2016.

### **5. PARTNERSHIP FUNDS**

With reference to Article 10 of the minute of meeting of the Angus Health and Social Care Integration Shadow Joint Board of 22 October 2014, there was submitted Report No IJB 40/16 by the Chief Finance Officer updating the Integration Joint Board regarding the status of a series of Partnership Funds that had, up to March 2016, been overseen by the Partnership's Finance Monitoring Group.

The Report indicated that the Finance Monitoring Group and its remit and reporting channel required to be re-confirmed in the context of the formal implementation of Angus Health and Social Care Integration Joint Board from 1 April 2016. The work of the Finance Monitoring Group was still ongoing and would continue for the duration of the current Strategic Plan.

The funds generally considered via the Finance Monitoring Group up to March 2016 included the Change Fund; Integration Care Fund; Delayed Discharge Funding; Transitional Funds and Technology Enabled Care Funding. Finance Monitoring Group oversight would continue

until it was deemed that individual funding streams had been mainstreamed from which the funds would be managed in a manner consistent with other mainstreamed funding.

Having heard from the Chief Finance Officer, the Integration Joint Board agreed:-

- (i) to the remit and reporting channels for the Finance Monitoring Group (FMG);
- (ii) to note the status of the funding streams described and, in particular, reviewed and supported the allocations agreed, in line with Strategic Plan, via the Finance Monitoring Group regarding Integrated Care Fund and Delayed Discharge Funding;
- (iii) to note the risks associated with the lack of clarity regarding the longer term future of the Integration Care Fund;
- (iv) to note the issues raised under Resource Management Issues;
- (v) to support the Procurement Exemption Requests;
- (vi) to request that half yearly updates are provided by the Strategic Planning Group to the Integration Joint Board regarding the utilisation of Partnership Funds as overseen by the Finance Monitoring Group; and
- (vii) to note that routine finance monitoring reports provided to the Integration Joint Board would include summarised reference to Partnership Funds highlighting relevant issues.

## **6. ANGUS STRATEGIC PLAN IMPLEMENTATION PRIORITIES**

With reference to Article 6 of the minute of meeting of Angus Health and Social Care Integration Joint Board of 23 March 2016, there was submitted Report No IJB 41/16 by the Chief Officer to identify for members the priority implementation issues within the Angus Strategic Plan; to provide progress reports on some of those key issues; and to seek the Board's endorsement of the outline plans.

The Report outlined the key implementation priorities from the Angus Strategic Plan and endorsed the methods by which it was intended to progress these.

Following discussion and having heard from the Chief Officer and Chief Finance Officer, the Integration Joint Board agreed:-

- (i) to note the progress of the Help to Live at Home programme (HTLH) and endorsed the identified "next steps" for further development;
- (ii) to note the recommendations made in relation to the work on developing the new sheltered housing/tenancy support delivery model, a copy of Report 186/16 to Angus Council on 12 May 2016, was attached as Appendix 1 to the Report;
- (iii) to note the main improvement issues in Primary Care development and in Prescribing and that further work would be undertaken to develop a transformation plan;
- (iv) to note and endorse the plan to roll out Enhanced Community Support in the two North Angus localities;
- (v) to note that further work would be undertaken on a Tayside basis and within Angus to progress the detail required to implement the Memorandum of Understanding for Hosted services;
- (vi) to note and endorse the approach being taken to Localities development; and

- (vii) to instruct further progress reports on key implementation issues within the Angus Strategic Plan for consideration by the Integration Joint Board on 31 August 2016.

## **7. IMPLEMENTATION PLAN FINAL REPORT**

With reference to Article 7 of the minute of meeting of the Angus Health and Social Care Integration Joint Board of 23 March 2016, there was submitted Report No IJB 42/16 by the Chief Officer, updating Integration Joint Board members on the final Integration Implementation Plan.

The Integration Joint Board agreed:-

- (i) to note progress and completion of the objectives set out in the Implementation Plan prior to formal delegation of powers; and
- (ii) to note that any ongoing issues would be carried forward into the Integration Joint Board management arrangements.

## **8. PERFORMANCE MANAGEMENT FRAMEWORK**

With reference to Article 8 of the minute of meeting of the Angus Health and Social Care Integration Joint Board of 23 March 2016, there was submitted Report No IJB 43/16 by the Chief Officer providing an update on the proposals being developed to establish an Outcomes and Performance Framework (the Framework) for the Angus Health and Social Care Partnership.

The Report indicated that the Framework would provide assurance to the Board that appropriate outcomes and performance reporting arrangements were in place within the Partnership and would allow the Board to drive and track progress towards the delivery of the Partnership's vision, strategic shifts and planned outcomes for the people of Angus.

The purpose of the performance framework was to demonstrate how performance measures related to the priorities set out in the Angus Health and Social Care Partnership's Strategic Plan.

The Head of Community Health and Care Services (North), provided a brief overview in relation to the Performance Management Framework and accompanying Tables 1 to 4 as appended to the Report.

The Integration Joint Board agreed:-

- (i) to approve the draft Performance Management Framework for Angus including the accompanying Tables 1 to 4, as appended to the Report; and
- (ii) to approve the collaboration with Dundee and Perth and Kinross partnerships in developing a common reporting platform with an agreed suite of indicators for adoption at a Tayside-wide and local level.

## **9. CLINICAL, CARE AND PROFESSIONAL GOVERNANCE FRAMEWORK**

With reference to Article 9 of the minute of meeting of the Angus Health and Social Care Integration Joint Board of 23 March 2016, there was submitted Report No IJB 44/16 by the Chief Officer advising members of progress in developing Clinical, Care and Professional Governance arrangements within the Angus Health and Social Care Partnership.

Following discussion and having heard from some members in relation to the reporting arrangements, and having also heard from the Associate Nurse Director (Intern) who highlighted that in relation to point 2.2, there was a typographical error contained within the report in that reference to "matter" should have read "imatter."

The Integration Joint Board agreed:-

- (i) to note the progress in developing the terms of reference for the Clinical, Care and Professional Governance Group;
- (ii) to note the work to date in developing an integrated assurance framework; and
- (iii) that a report would be presented to the Integration Joint Board on an annual basis and quarterly thereafter.

#### **10. RISK REGISTER UPDATE – MAY 2016**

With reference to Article 10 of the minute of meeting of the Angus Health and Social Care Integration Joint Board of 23 March 2016, there was submitted Report No IJB 45/16 by the Chief Officer updating members on the Risk Register to May 2016.

The Integration Joint Board agreed:-

- (i) to note the management actions updated in Risks 1,2,3,4,5 and 8 highlighted in blue within the Risk Management Summary, as outlined in Appendix 1 to the Report;
- (ii) to note that there were no new risks; and
- (iii) to note that work would be undertaken to refresh the corporate risks following the formal delegation of powers and a revised report would be presented by August 2016.

#### **11. FINANCIAL YEAR END UPDATE**

The Chief Officer noted the Integration Joint Board awaited confirmation of the Angus Council year end financial position but he provided an update and overview in relation to the Angus Community Health Partnership financial year end. In regards to hospital and community services, most of the spend had come in line within budget. He highlighted that there was a £1.6 million overspend in relation to prescribing and advised that it would be a significant challenge to deliver a breakeven prescribing position next year. He also confirmed that a report would be brought to the next meeting of the Integration Joint Board on 29 June 2016 covering NHS Tayside and Angus Council year end information.

The Integration Joint Board agreed to note the updated position.

#### **12. AUDIT REPORT**

With reference to Article 12 of the minute of meeting of the Angus Health and Social Care Integration Joint Board of 23 May 2016, there was submitted Report No 46/16 by the Chief Finance Officer updating Board members regarding Audit related matters to include approving the membership of and confirmation of the first meeting of the Angus Health and Social Care Audit Committee; and noting reports issued by Audit Scotland that related to Health and Social Care Integration.

Having heard from the Chief Finance Officer and also the Chair in relation to the nomination of members, the Integration Joint Board agreed:-

- (i) to approve that the membership for Angus Health and Social Care Partnership Audit Committee would be Councillor Jim Houston, Alison Rogers, David Barrowman, Neil Prentice and Alison Myles;
- (ii) to confirm that the date of the first meeting of Angus Health and Social Care Partnership Audit Committee would take place on Wednesday 29 June 2016 immediately following the conclusion of the Angus Health and Social Care Integration Joint Board of the same day; and

- (iii) to note the Audit Scotland reports issue regarding Health and Social Care Integration and the main recommendations of those reports.

### **13. EQUALITY OUTCOMES**

With reference to Article 14 of the minute of meeting of the Angus Health and Social Care Integration Joint Board of 23 May 2016, there was submitted Report No 47/16 by the Chief Officer requesting the Board to approve the Mainstreaming Equalities report following agreement of the Equalities Outcomes by the Integration Joint Board in March 2016.

The Report indicated that the Equality Act 2010 required the Integration Joint Board to prepare equality outcomes and a mainstreaming report. The equality outcomes had been drawn from the Strategic Plan. The mainstreaming equalities report included the equality outcomes and set out the commitment of the Integration Joint Board to these outcomes.

The Integration Joint Board agreed:-

- (i) to note and approve the Mainstreaming Equalities Report, as appended in Appendix 1 to the Report; and
- (ii) to request the Chief Officer to prepare an annual report on progress against the outcomes as part of the annual performance report.

### **14. DATE OF NEXT MEETING**

The Integration Joint Board noted that the next meeting would take place on Wednesday 29 June 2016 at 2.00pm in the Town and County Hall, Forfar.

### **15. EXCLUSION OF PUBLIC AND PRESS**

The Angus Health and Social Care Integration Joint Board agreed that the public and press be excluded from the meeting during consideration of the following item so as to avoid the possible disclosure of information which was exempt in terms of the Local Government (Scotland) Act 1973 Part 1, Schedule 7A, Paragraphs 2, 3 and 4.

### **16. ACCOMMODATION FOR PEOPLE WITH LEARNING DISABILITIES**

There was submitted Report No 48/16 by the Chief Officer informing members regarding the current arrangements for accommodation for adults with learning disabilities in Angus.

Following discussion, the Integration Joint Board agreed:-

- (i) to approve the planned priorities, as outlined in the Report;
- (ii) to request a further report detailing the financial implications arising from the proposals be brought for consideration to the next meeting of the Integration Joint Board on 29 June 2016; and
- (iii) to request regular progress reports, as appropriate.

## Agenda Item 3(b)

### Action Points Update from Angus Health and Social Care Shadow Integration Joint Board

Complete	On Target	Overdue
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#### Current Actions

MEETING	ACTION POINT	RESPONSIBILITY	PROGRESS	Timeline
18 May 2016	To provide copies of NHS Tayside and Angus Council's register of interests and declaration forms for consideration	Proper Officer	In progress	For IJB meeting 29 June 2016
	To provide half yearly updates by the Strategic Planning Group on the utilisation of Partnership funds as overseen by the Finance Monitoring Group	George Bowie	In progress	October 2016
	To submit further progress reports on key improvement issues within the Angus Strategic Plan	George Bowie	In progress	For IJB meeting 31 August 2016
	To present report on Clinical, Care & Professional Governance Framework on an annual basis and quarterly thereafter.	Sue Mackie	in progress	Quarterly from June 2016
	To present a refreshed report on Corporate Risks	Gail Smith	In progress	For IJB meeting 31 August 2016
	To prepare an Annual Report on progress against the Equality outcomes as part of the annual Performance Report.	Vicky Irons	In progress	April 2017

MEETING	ACTION POINT	RESPONSIBILITY	PROGRESS	Timeline
	To provide further report on proposals for accommodation for people with learning disabilities. <b>(Exempt business)</b>	George Bowie Sandy Berry	In progress	For IJB meeting 29 June 2016
<b>23 March 2016</b>	Establish financial plans with NHS Tayside to deliver required savings for consideration at June IJB meeting.	Sandy Berry	Report to be submitted to IJB meeting on 29 June 2016	30 June 2016
	To submit Performance Management report to future IJB meetings.	Gail Smith	Report to be submitted to IJB meeting on 29 June 2016	June 2016 and to agreed schedule
	To appoint members to Audit Committee arrangements.	Sandy Berry	Members now appointed	Completed



**ANGUS HEALTH AND SOCIAL CARE  
INTEGRATION JOINT BOARD – 29 JUNE 2016  
ADVISER TO THE INTEGRATION JOINT BOARD  
REPORT BY VICKY IRONS, CHIEF OFFICER**

**ABSTRACT**

The purpose of this report is to consider appointing an adviser to the Integration Joint Board.

**1. RECOMMENDATION**

It is recommended that the Integration Joint Board appoint Bill Troup, Head of Integrated Mental Health Services, and his successors in office, as an adviser to the Board.

**2. REPORT**

The Board has, in the past appointed advisers who are required to attend the Board. These advisers have operational responsibility for significant areas within the Board's remit and it was considered that their attendance would assist the Board in the discharge of their functions.

Mr Bill Troup has been appointed Head of Integrated Mental Health Services for the Angus Health and Social Care Partnership. It is submitted that his attendance at Board meetings will also assist the Board in the discharge of their functions and it is recommended that Mr Troup should be appointed as an adviser to the Board.

**3. CONCLUSIONS**

It is submitted that it is appropriate for the Integration Joint Board to appoint advisers to provide professional advice and assistance in respect of the functions of the Integration Joint Board and that the recommended appointment will assist the Integration Board in the discharge of its functions.

**Vicky Irons  
Chief Officer**

**REPORT AUTHOR: David Thompson  
EMAIL DETAILS: [ThompsonD@angus.gov.uk](mailto:ThompsonD@angus.gov.uk)**

16 June 2016





## **AGENDA ITEM NO 5**

**REPORT NO. IJB 50/16**

### **ANGUS HEALTH AND SOCIAL CARE**

#### **INTEGRATION JOINT BOARD – 29 JUNE 2016**

#### **ETHICAL STANDARDS IN PUBLIC LIFE ETC. (SCOTLAND) ACT 2000 CODE OF CONDUCT**

#### **REPORT BY PROPER OFFICER OF THE INTEGRATION JOINT BOARD**

### **ABSTRACT**

The purpose of this report is to advise the Board of the approval by the Scottish Government of the Board's Code of Conduct for Members, as required by the Ethical Standards in Public Life etc. (Scotland) Act 2000, to seek approval to amend the Board's Standing Orders to incorporate this Code of Conduct for Members and of arrangements in respect of the Register of Interests of Members of the Board and declarations of interests also required by the Ethical Standards in Public Life etc. (Scotland) Act 2000.

### **1. RECOMMENDATIONS**

It is recommended that the Integration Joint Board:-

- (i) Note that the Scottish Ministers have approved the Board's Code of Conduct as approved at its meeting on 18 May 2016,
- (ii) Agree that the Board's Standing Orders be amended to delete the words "Standards in Public Life – Model Code of Conduct for Members of Devolved Public Bodies" where they appear in paragraph 7.1 with the words "Code of Conduct for Members approved by the Board at its meeting on 18 March 2016 and as subsequently approved by the Scottish Ministers",
- (iii) Note that, in terms of the Board's Standing Orders, members of the Board shall subscribe to and comply with the Board's Code of Conduct for Members, and that the Standards Officer of the Board will be contacting Members to secure this written undertaking,
- (iv) Agree that the Board adopt the Angus Council form (suitably amended) for declaring interests,
- (v) Agree that the Board adopt the Angus Council form (suitably amended) for declaring interests at meetings,
- (vi) Note that the provisions of the Ethical Standards in Public Life etc. (Scotland) Act 2000 apply to Board Members and their proxies alike; and
- (vii) Notes the terms of the Dispensations granted by the Standards Commission in March 2015 in respect of Board Members who are NHS Board Members and Councillors.

### **2. REPORT**

- 2.1 The Ethical Standards in Public Life etc. (Scotland) Act 2000 ("the 2000 Act") introduced a new ethical framework which required Scottish Ministers to issue a Code of Conduct for Councillors and a Model Code of Conduct for members of devolved public bodies.
- 2.2 Integration Joint Boards are "devolved public bodies" for the purposes of the 2000 Act. This means that each Integration Joint Board must produce a Code of Conduct for its members setting

out how its members should conduct themselves in undertaking their duties. The 2000 Act requires the Scottish Ministers to approve any Codes of Conduct.

- 2.3 The Board, at its meeting on 18 May 2016, approved a draft Code of Conduct for Members for submission to the Scottish Government (Report IJB 39/16 refers). The draft Code of Conduct was duly submitted to the Scottish Government and approval was received (subject to minor amendment to the definition of “group of companies” in Annex B) on 25 May 2016. Members are invited to agree to amend the Board’s Standing Orders to incorporate the approved Code of Conduct for Members.
- 2.4 Members are reminded that the 2000 Act obliges every devolved public body to set up, maintain and make available for public inspection a register of such interests as, under the members’ code, its members, are required to register. In addition, Regulations made under the 2000 Act require devolved public bodies to appoint a Standards Officer for the purpose of carrying out the duties of that body under the above section 7(1) of the 2000 Act, or where that body has no employees the person approved by the Standards Commission for Scotland for that purpose. The Board, at its meeting on 17 February 2016, agreed to appoint, subject to the approval of the Standards Commission, Sheona Hunter, Head of Legal and Democratic Services, Angus Council (and her successors in office as Monitoring Officer of Angus Council in terms of Section 5 of the Local Government and Housing Act 1989) to the office of Standards Officer to the Integration Joint Board (Report IJB 21/16 refers). The approval of the Standards Commission to this appointment was duly received on 29 March 2016.
- 2.5 Paragraph 7.1 of the Board’s Standing Orders requires members of the Board to subscribe to and comply with the Board’s Code of Conduct for Members. The Board is asked to note that the Standards Officer of the Board will be contacting Members to secure this written undertaking.
- 2.6 As the Board will see from the above, the 2000 Act, the Code of Conduct for Members and from the Standing Orders of the Board, there are requirements that Board Members register their interest, and declare interests at meetings as and when they arrive. The provisions of the 2000 Act apply to members of both NHS Tayside and Angus Council. A copy of the form used by NHS Tayside to record member’s interests is attached to this report as Appendix 1. A copy of the form used by Angus Council to record member’s interests is attached to this report as Appendix 2. Given that the function of the Standards Officer is performed by a Council Officer (and the staff of that Officer) it is submitted that, to ensure uniformity of approach and avoid a two system approach to the same issue, that the Angus Council form (suitable amended) is used to record members interests.
- 2.7 It is understood that it is the practice of NHS Tayside to record declarations of interest made at meetings in the minute of the meeting alone. It is the practice of Angus Council to do the same but also require the member declaring the interest to fill in a form indicating the extent and nature of that interest. A copy of this form is attached to this report as Appendix 3. Again, given that the function of the Standards Officer is performed by a Council Officer (and the staff of that officer) it is submitted that, to ensure uniformity of approach and avoid a two system approach to the same issue, that the Angus Council form (suitable amended) is used to record members interests at meetings.
- 2.8 Members are also asked to note that the Standards Officer will ensure that members receive 6 monthly reminders to review their register of interests. In addition, it should be noted that proxy members will be required to subscribe to and comply with the Board’s Code of Conduct for Members, register their interests and declare any interests at meetings.
- 2.9 Lastly, members are reminded of the dispensations granted to Board Members of NHS Tayside and Councillors by the Standards Commission in March 2015 (and attached to this report as Appendix 4 and Appendix 5 respectively). This means that members of the IJB who are NHS Board Members or Councillors do not have to declare their interest when discussions on general health and social care issues arise and can participate in discussion and voting on these issues. These Members will still be required to declare other interests, in terms of Section 5 of the Model Code.

### **3. FINANCIAL IMPLICATIONS**

3.1 There are no financial implications arising directly from this report.

### **4. CONCLUSIONS**

4.1 By agreeing with the recommendations of this report, the Board will establish a framework to permit compliance with the provisions of the 2000 Act

**Sheona Hunter**  
**Proper Officer of Angus Integration Joint Board**

**REPORT AUTHOR: David Thompson**  
**EMAIL DETAILS: [ThompsonD@angus.gov.uk](mailto:ThompsonD@angus.gov.uk)**

Appendix 1 – Copy of the form used by NHS Tayside to record member's interests

Appendix 2 - Copy of the form used by Angus Council to record member's interests

Appendix 3 – Copy of the form used by Angus Council to declare members interests at meetings

Appendix 4 – Copy of the Dispensation granted by the Standards Commission to Board Members of NHS Tayside in March 2015

Appendix 5 - Copy of the Dispensation granted by the Standards Commission to Councillors in March 2015



NHS Tayside

REGISTRATION OF INTERESTS

NAME:

OCCUPATION:

(Office, Trade, Profession or Vocation)

CURRENT EMPLOYER:

*Guidance is contained in Section C of the Code of Corporate Governance, the Standards of Business Conduct:*

- *Paragraph 7, Register of staff interests*
- *Paragraph 20, Working with the suppliers of clinical products, registration and declaration of interests*
- *Annex 4 Registration of interests relating to working with clinical suppliers*

*Each category must be completed, including NOTHING TO REGISTER.*

**1. Remuneration**

- (a) description of remuneration received by the virtue of being:- employed or self employed; the holder of an office; a director of an undertaking; a partner in a firm; and involved in undertaking a trade, profession, vocation or any other work;
- (b) any allowance received in relation to membership of any organisation;
- (c) the name, and registered name if different, and nature of any applicable employer, self-employment, business undertaking or organisation;
- (d) the nature and regularity of the work that is remunerated; and
- (e) the name of the directorship and the nature of the applicable business.

**2. Related undertakings**

A description of a directorship that is not itself remunerated, but is of a company or undertaking which is a parent or subsidiary of a company or undertaking which pays remuneration.

**3. Contracts**

A description of the nature and duration, but not the price of, of a contract which is not fully implemented where:-

- (a) goods and services are to be provided, or works are to be executed for NHS Tayside
- (b) any responsible person has a direct interest, or an indirect interest as a partner, owner or shareholder, director or officer of a business or undertaking, in such goods and services.

**4. Houses, land and buildings**

A description of any rights of ownership or other interests that may be significant to, of relevance to, or bear upon, the work or operation of NHS Tayside.

**5. Interest in Shares and securities**

A description, but not the value, of shares in a company or other body where –

- (a) The responsible person's interest in the shares may be significant to, of relevance to, or bear upon, the work or operation of NHS Tayside
- (b) The nominal value of the shares is greater than-
  - (i) 1% of the issue share capital of the company or other body; or
  - (ii) £25,000

**6. Gifts and Hospitality**

A separate Register of Hospitality is maintained by the Board Secretary and a description of any gifts and hospitality received should be recorded except –

- (a) Isolated gifts of a trivial character,
- (b) Normal hospitality associated with the responsible person's duties and which would reasonably be regarded as appropriate; or
- (c) Gifts received on behalf of NHS Tayside

**7. Non-financial interests**

A description of such interests as may be significant to, of relevance to, or bear upon, the work or operation of NHS Tayside, including without prejudice to that generality membership of or office in:-

- (a) other public bodies;
- (b) clubs, societies and organisations;
- (c) trades unions; and
- (d) voluntary organisations.

**8. Election expenses**

A description of, and statement of, any assistance towards election expenses relating to election to the Board.

**9. Joint Working arrangements with Clinical Suppliers.**

**10. Other Interests**

**Signature  
Member/Attendee**

**Date**

**Tick which applies**

- ☐ **Employee**
- ☐ **Tayside NHS Board Member**
- ☐ **Member of Group or Committee**

**Name of Group/Committee**

**Received**

**Officer of Tayside NHS Board**

**Date**



**ANGUS COUNCIL**

**THE ETHICAL STANDARDS IN PUBLIC LIFE ETC (SCOTLAND) ACT 2000  
(REGISTER OF INTERESTS) REGULATIONS 2003**

**FIRST NOTICE OF REGISTERABLE INTERESTS**

I, Councillor....., being a member of Angus Council, give you, Sheona C Hunter, Proper Officer, notice of my interests in terms of Regulation 4 of the Ethical Standards in Public Life etc (Scotland) Act 2000 (Register of Interests) Regulations 2003.

For each of the eight categories forming Schedules to this Notice, I have stated either:

- the information I am required to give of the kind described in the Councillors Code; or
- that I do not have a registerable interest.

I shall, on any change to the information contained in this Notice, give you a further Notice setting out the details of that change within one month of the change to the information.

I recognise that:

- to omit information that ought to be given in this Notice; or
- to provide information in this Notice that is materially false or misleading; or
- to fail to give further Notices of any change to the information I have given in this Notice

can lead to action by the Standards Commission for Scotland.

Councillor's Signature .....

Date .....

**RECEIVED**

Proper Officer's Signature .....

Date .....

**For office use only:**

	Date	Initial
Enter on Register		
Send to WebPublish		
Confirmation Rcvd		

**For office use only:**

	Date	Initial
Check Register Entry		
Check Web Entry		

**SCHEDULES TO NOTICE BY COUNCILLOR.....**

SCHEDULE 1        GIFTS AND HOSPITALITY

SCHEDULE 2        REMUNERATION

SCHEDULE 3        RELATED UNDERTAKINGS

SCHEDULE 4        CONTRACTS

SCHEDULE 5        ELECTION EXPENSES

SCHEDULE 6        HOUSES, LAND AND BUILDINGS

SCHEDULE 7        SHARES AND SECURITIES

SCHEDULE 8        NON-FINANCIAL INTERESTS

## **SCHEDULE 1            GIFTS AND HOSPITALITY**

(see overleaf – paragraphs 3.7-3.13 and 4.21 of the Councillors' Code)

<b>Details of Gift/Hospitality</b>	<b>Name of Donor</b>	<b>Date Received</b>	<b>Approx Value</b>

**Signed.....**

**Date.....**

## THE COUNCILLORS' CODE – SECTION 3: GENERAL CONDUCT - states

- 3.7 *You must not accept any offer by way of gift or hospitality which could give rise to real or substantive personal gain or a reasonable suspicion of influence on your part to show favour or disadvantage to any individual or organisation. You should also consider whether there may be any reasonable perception that any gift received by your spouse or cohabitee or by any company in which you have a controlling interest, or by a partnership of which you are a partner, can or would influence your judgement. The term "gift" includes benefits such as relief from indebtedness, loan concessions, or provision of services at a cost below that generally charged to members of the public.*
- 3.8 *You must never ask for gifts or hospitality.*
- 3.9 *You are personally responsible for all decisions connected with the acceptance of gifts or hospitality offered to you and for avoiding the risk of damage to public confidence in your Council and in local government. As a general guide, it is usually appropriate to refuse offers except:*
- (i) isolated gifts of a trivial character, the value of which must not exceed £50;*
  - (ii) normal hospitality associated with your duties and which would reasonably be regarded as appropriate; or*
  - (iii) civic gifts received on behalf of the Council.*
- 3.10 *You must not accept any offer of a gift or hospitality from any individual or organisation who is an applicant awaiting a decision from the Council or who is seeking to do business or to continue to do business with the Council. If you are making a visit to inspect equipment, vehicles, land or property, then as a general rule you should ensure that the Council pays for the cost of these visits.*
- 3.11 *You must only accept offers to attend social or sporting events where these are clearly part of the life of the community or where the Council would be expected to be represented.*
- 3.12 *You must not accept repeated hospitality or repeated gifts from the same source.*
- 3.13 *If it is the practice of the Council to seek sponsorship for some of its activities or events, you must ensure that your involvement with the sponsors is limited to the event in question and does not damage public confidence in the relationship between the Council and the sponsors.*
- 4.21 *You must register the details of any gifts or hospitality received, however it is not necessary to record any gifts or hospitality as described in 3.9 above. This record will be available for public inspection.*

## SCHEDULE 2 – REMUNERATION

(see overleaf – paragraphs 4.3-4.11 of the Councillors' Code)

### Employment

(state name of employer, the nature of its business and the nature of the post held)


### Self-Employment

(state the name and details of the business. For a partnership, state the name of the partnership and the nature of its business)


### Membership of Organisations

(state the name of the organisation and any allowances received)


### Trade, profession, vocation or any other work

(state the nature of the work and the regularity with which you undertake it)


### Directorships

(state the registered name of the undertaking in which the directorship is held and detail the nature of its business)


Signed.....

Date.....

## *THE COUNCILLORS' CODE – SECTION 4: REGISTRATION OF INTERESTS - states*

- 4.3 *You have a registerable interest where you receive remuneration by virtue of being:*
- *employed;*
  - *self-employed;*
  - *the holder of an office;*
  - *a director of an undertaking;*
  - *a partner in a firm; or*
  - *undertaking a trade, profession or vocation, or any other work.*
- 4.4 *You do not have a registerable interest simply because you are a councillor or a member of a joint board, a joint committee or of COSLA.*
- 4.5 *If a position is not remunerated it does not need to be registered under this category. However, unremunerated directorships may need to be registered under category two "Related Undertakings".*
- 4.6 *If you receive any allowances in relation to membership of any organisation the fact that you receive such an allowance must be registered.*
- 4.7 *When registering employment, you must give the name of the employer, the nature of its business and the nature of the post held in the organisation.*
- 4.8 *When registering self-employment, you must provide the name and give details of the nature of the business. When registering an interest in a partnership, you must give the name of the partnership and the nature of its business.*
- 4.9 *Where you otherwise undertake a trade, profession or vocation, or any other work, the detail to be given is the nature of the work and its regularity. For example, if you write for a newspaper, you must give the name of the publication and the frequency of articles for which you are paid.*
- 4.10 *When registering a directorship, it is necessary to provide the registered name of the undertaking in which the directorship is held and detail the nature of its business.*
- 4.11 *Registration of a pension is not required as this falls outside the scope of the category.*

### SCHEDULE 3 - RELATED UNDERTAKINGS

(see below – paragraphs 4.12 - 4.14 of the Councillors' Code)

Name of Company/or other undertaking	Nature of Business	Relationship (ie Subsidiary or Parent)

Signed.....

Date.....

#### THE COUNCILLORS' CODE – SECTION 4: REGISTRATION OF INTERESTS - states

- 4.12 You must register any directorships held which are themselves not remunerated but where the company (or other undertaking) in question is a subsidiary of, or a parent of, a company (or other undertaking) in which you hold a remunerated directorship.
- 4.13 You must register the name of the subsidiary or parent company or other undertaking and the nature of its business, and its relationship to the company or other undertaking in which you are a director and from which you receive remuneration.
- 4.14 The situations to which the above paragraphs apply are as follows:
- you are a director of a board of an undertaking and receive remuneration – declared under Category one – and
  - you are a director of a parent or subsidiary undertaking but do not receive remuneration in that capacity.

## SCHEDULE 4 – CONTRACTS

(see below – paragraphs 4.15-4.16 of the Councillors' Code)

Description of Contract with Council	Duration

Signed.....

Date.....

### THE COUNCILLORS' CODE – SECTION 4: REGISTRATION OF INTERESTS - states

4.15 You have a registerable interest where you (or a firm in which you are a partner, or an undertaking in which you are a director or in which you have shares of a value as described in paragraph 4.20) have made a contract with the Council of which you are a member:

- (i) under which goods or services are to be provided, or works are to be executed; and
- (ii) which has not been fully discharged.

- 4.16 *You must register a description of the contract, including its duration, but excluding the consideration.*

## SCHEDULE 5 - ELECTION EXPENSES

(see below – paragraph 4.17 of the Councillors' Code)

(detail any assistance towards election expenses within the last 12 months)


**Signed**.....

**Date**.....

*THE COUNCILLORS' CODE – SECTION 4: REGISTRATION OF INTERESTS - states*

**4.17** *You must register a statement of any assistance towards election expenses received where the value of any single donation exceeds £50.*

## **SCHEDULE 6 - HOUSES, LAND AND BUILDINGS**

(see below – paragraphs 4.18 - 4.19 of the Councillors' Code)

Address/Description of Property	State nature of interest (eg owner, tenant, sub-tenant)

**Signed**.....

**Date**.....

### ***THE COUNCILLORS' CODE – SECTION 4: REGISTRATION OF INTERESTS - states***

- 4.18** *You have a registerable interest where you own or have any other right or interest in houses, land and buildings, such as being an owner or a tenant, including council tenant.*
- 4.19** *You are required to give the address of the property, or otherwise give a description sufficient to identify it.*

## SCHEDULE 7 - SHARES AND SECURITIES

(see below – paragraph 4.20 of the Councillors' Code)

(state name of company or other body)


**Signed**.....

**Date**.....

### *THE COUNCILLORS' CODE – SECTION 4: REGISTRATION OF INTERESTS - states*

**4.20** *You have a registerable interest where you have an interest in shares comprised in the share capital of a company or other body and the nominal value of the shares is :*

- (i) greater than 1% of the issued share capital of the company or other body; or*
- (ii) greater than £25,000.*

## SCHEDULE 8 - NON-FINANCIAL INTERESTS

(see below – paragraph 4.22 of the Councillors' Code)

(describe the nature of the interest)


**Signed**.....

**Date**.....

*THE COUNCILLORS' CODE – SECTION 4: REGISTRATION OF INTERESTS - states*

*4.22 Councillors may also have significant non-financial interests and it is equally important that relevant interests such as membership or holding office in public bodies, companies, clubs, societies and organisations such as trades unions and voluntary organisations, are registered and described. In this context, non-financial interests are those which members of the public might reasonably think could influence your actions, speeches or votes in the Council which could include appointments to Committees or memberships of other organisations.*

**ANGUS COUNCIL**

**THE ETHICAL STANDARDS IN PUBLIC LIFE ETC (SCOTLAND) ACT 2000  
(REGISTER OF INTERESTS) REGULATIONS 2003**

**FURTHER NOTICE OF REGISTERABLE INTERESTS**

I, Councillor....., being a member of Angus Council, give you, Sheona C Hunter, Proper Officer, notice of the undernoted changes in my interests in terms of Regulation 4 of the Ethical Standards in Public Life etc (Scotland) Act 2000 (Register of Interests) Regulations 2003.

Details of the changes are set out in the attached amended Schedule(s) to my First Notice of Registerable Interests.

Councillor's Signature .....

Date .....

**RECEIVED**

Proper Officer's Signature .....

Date .....

<b>For office use only:</b>	Date	Initial
Enter on Register		
Send to WebPublish		
Confirmation Rcvd		

<b>For office use only:</b>	Date	Initial
Check Register Entry		
Check Web Entry		



## ANGUS COUNCIL DECLARATION OF INTEREST

Councillor:- .....

Meeting:- ..... Date of Meeting:- .....

	Agenda Item	Report No
I declare an interest in the following item:-		

*Reason for declaration (please tick) (see over for category)*

<b>Financial interest</b> – Schedules 1-7 (go to Section 1)	<input type="checkbox"/>
<b>Non financial interest</b> – Schedule 8 (go to Section 2)	<input type="checkbox"/>
<b>Financial or non financial interest of other persons</b> - (go to Section 3)	<input type="checkbox"/>

### SECTION 1: FINANCIAL INTEREST - Schedules 1-7 of the Register of Interests (see over)

The nature of my interest is .....

I <b>will NOT</b> participate in discussion and voting.	<input type="checkbox"/>
I have a general dispensation which allows me to participate in discussion and voting.	<input type="checkbox"/>
I have an individual dispensation which allows me to participate in discussion and voting.	<input type="checkbox"/>

**NOTE:- When declaring a financial interest you should leave the meeting room until discussion of the item of business is concluded (unless you have a dispensation).**

### SECTION 2: NON FINANCIAL INTEREST - Schedule 8 (see over)

The nature of my interest is .....

Having considered the test set out in paragraph 5.3 of the Code (see over):-

I have decided that I <b>will NOT</b> participate in discussion and voting.	<input type="checkbox"/>
I have decided that I <b>will</b> participate in discussion and voting.	<input type="checkbox"/>
I have a general dispensation which allows me to participate in discussion and voting.	<input type="checkbox"/>
I have an individual dispensation which allows me to participate in discussion and voting.	<input type="checkbox"/>

### SECTION 3: FINANCIAL OR NON FINANCIAL INTERESTS OF OTHER PERSONS

The nature of my interest is .....

My spouse or cohabitee has a financial interest	<input type="checkbox"/>
My spouse or cohabitee has a non-financial interest	<input type="checkbox"/>
My relative or friend has a financial interest	<input type="checkbox"/>
My relative or friend has a non-financial interest	<input type="checkbox"/>

Having considered the test set out in paragraphs 5.10, 5.11 and 5.12 of the Code (see over):-

I have decided that I <b>will NOT</b> participate in discussion and voting.	<input type="checkbox"/>
I have decided that I <b>will</b> participate in discussion and voting.	<input type="checkbox"/>
I have a general dispensation which allows me to participate in discussion and voting.	<input type="checkbox"/>
I have an individual dispensation which allows me to participate in discussion and voting.	<input type="checkbox"/>

Signed ..... Date.....

**PLEASE PASS THIS DECLARATION TO THE COMMITTEE OFFICER**

SCHEDULE 1	GIFTS AND HOSPITALITY
SCHEDULE 2	REMUNERATION
SCHEDULE 3	RELATED UNDERTAKINGS
SCHEDULE 4	CONTRACTS
SCHEDULE 5	ELECTION EXPENSES
SCHEDULE 6	HOUSES, LAND AND BUILDINGS
SCHEDULE 7	SHARES AND SECURITIES
SCHEDULE 8	NON-FINANCIAL INTERESTS

**THE COUNCILLORS' CODE – SECTION 5: DECLARATION OF INTERESTS - states**

- 5.3 You may feel able to state truthfully that an interest would not influence your role as a councillor in discussion or decision-making. You must, however, always comply with the objective test ("**the objective test**") which is **whether a member of the public, with knowledge of the relevant facts, would reasonably regard the interest as so significant that it is likely to prejudice your discussion or decision making in your role as a councillor.**

**The Financial Interests of Other Persons**

- 5.10& 5.12 The Code requires only your financial interests to be registered. You also, however, have to consider whether you should declare any financial or non-financial interest of certain other persons.

You must declare if it is known to you ANY FINANCIAL OR NON-FINANCIAL INTEREST of:-

- (i) a spouse, a civil partner or a co-habitee;
- (ii) a close relative, close friend or close associate;
- (iii) an employer or a partner in a firm;
- (iv) a body (or subsidiary or parent of a body) of which you are a remunerated member or director;
- (v) a person from whom you have received a registerable gift or registerable hospitality;
- (vi) a person from whom you have received registerable election expenses.

There is no need to declare an interest if it is so remote or insignificant that it could not reasonably be taken to fall within the objective test.

You must withdraw from the meeting room until discussion of and voting on the relevant item where you have a declarable interest is concluded other than in the following circumstances.

There is no need to withdraw in the case of:-

- (i) an interest covered by a specific exclusion; or
  - (ii) an interest which is so remote or insignificant that it could not reasonably be taken to fall within the objective test.
- 5.11 This Code does not attempt the task of defining "relative" or "friend" or "associate". Not only is such a task fraught with difficulty but is also unlikely that such definitions would reflect the intention of this part of the Code. The key principle is the need for transparency in regard to any interest which might (regardless of the precise description of relationship) be objectively regarded by a member of the public, acting reasonably, as potentially affecting your responsibilities as a councillor and, as such, would be covered by the objective test.

Room T2.21, The Scottish Parliament  
Edinburgh  
EH99 1SP

**T** (0131) 348 6666

**F** (0131) 557 9243

**E** [enquiries@standardscommission.org.uk](mailto:enquiries@standardscommission.org.uk)

**W** [www.standardscommissionscotland.org.uk](http://www.standardscommissionscotland.org.uk)

N:/G&D/Disp/Joint

Chief Executive  
NHS Board

16 March 2015

Dear Chief Executive

**Dispensation under the Model Code of Conduct for NHS Membership of Integration Joint Boards**

The Standards Commission for Scotland has decided to grant a dispensation under the Model Code of Conduct for NHS Board Members who have been appointed to be a member of an Integration Joint Board, which are being established under the Public Bodies (Joint Working) (Scotland) Act 2014. This is so members do not have to declare their interest when discussions on general health and social care issues arise and can participate in discussion and voting on these issues. Members will still be required to declare other interests, in terms of Section 5 of the Model Code.

Following consideration of a request, the Standards Commission has also granted a similar dispensation under the Councillors' Code of Conduct for voting members of Integration Joint Boards who are councillors.

I would be grateful if you could write to any Board Members who had been nominated to sit on the Integration Joint Boards to advise them of this dispensation. If no Members have been nominated as yet, please advise all Board Members. It would be helpful if you could write to the Standards Commission to confirm that this has been done.

Please do not hesitate to contact the Standards Commission if you have any queries. I look forward to receipt of your confirmation that Board Members have been advised of the dispensation as requested.

Yours sincerely



**Ian A. Gordon OBE QPM LL.B (Hons)**  
**Convener**

Cc: NHS Board Standards Officer





Room T2.21, The Scottish Parliament  
Edinburgh  
EH99 1SP

📞 (0131) 348 6666  
☎ (0131) 557 9243  
✉ [enquiries@standardscommission.org.uk](mailto:enquiries@standardscommission.org.uk)  
🌐 [www.standardscommissionscotland.org.uk](http://www.standardscommissionscotland.org.uk)

N:/G&D/Disp/Joint

**CE of Councils**

13 March 2015

Dear Chief Executive

**Dispensation under the Councillors' Code of Conduct for Councillor Membership of Integration Joint Boards**

Following the consideration of a request and acceptance it met the criteria for such dispensations, the Standards Commission for Scotland has decided to grant a specific dispensation under the Councillors' Code of Conduct for councillors who have been appointed by their Council to be a member of an Integration Joint Board, which is established for the area of their council under the Public Bodies (Joint Working) (Scotland) Act 2014. This is so councillors, as voting members of the Integration Joint Board, do not have to declare their interest when discussions on general health and social care issues arise and can participate in discussions and voting on these issues. Councillors will still be required to declare other interests, in terms of Section 5 of the Code of Conduct.

The Standards Commission has also granted a similar dispensation under the Model Code for voting members of Integration Joint Boards who are members of Health Boards.

I would be grateful if you could write to any elected Members who had been nominated to sit on the Integration Joint Boards in your authority to advise them of this dispensation. If no Members have been nominated as yet, please advise all elected Members in your authority. It would be helpful if you could write to the Standards Commission to confirm that this has been done.

Please do not hesitate to contact the Standards Commission if you have any queries. I look forward to receipt of your confirmation that councillors have been advised of the dispensation as requested.

Yours sincerely



**Ian A. Gordon OBE QPM LL.B (Hons)**  
**Convener**

cc: Monitoring Officer







## **AGENDA ITEM NO 6**

**REPORT NO. IJB 51/16**

### **ANGUS HEALTH AND SOCIAL CARE**

**INTEGRATION JOINT BOARD – 29 JUNE 2016**

### **FREEDOM OF INFORMATION (SCOTLAND) ACT 2002 PUBLICATION SCHEME**

**REPORT BY VICKY IRONS, CHIEF OFFICER**

#### **ABSTRACT**

The purpose of this report is to seek approval of a draft Publication Scheme for the Integration Joint Board, as required by the Freedom of Information (Scotland) Act 2002, for publication and notification to the Scottish Information Commissioner.

#### **1. RECOMMENDATIONS**

It is recommended that the Integration Joint Board approve:-

- (i) the draft Publication Scheme of the Angus Integration Joint Board annexed as Appendix 1 to this report, as required by the Freedom of Information (Scotland) Act 2002, for publication and notification to the Scottish Information Commissioner for approval,
- (ii) the Draft Guide to Information, Draft Policies and Procedures, Draft Internal Review/Appeals Process and Draft Leaflet to staff and the public, and all annexed respectively as Appendices 2-4 hereto; and
- (iii) to delegate authority to the Chief Officer to amend the Publication Scheme, the Draft Guide to Information, Draft Policies and Procedures, Draft Internal Review/Appeals Process and Draft Leaflet to staff and the public in light of legislative changes, best practice and operational requirements.

#### **2. REPORT**

- 2.1 This report addresses legislative requirements placed on the Board relating to how the Board holds and processes information in terms of the Freedom of Information (Scotland) Act 2002. These responsibilities are separate from corresponding responsibilities held by the Council and Health Board. Under the new arrangements it will be important to distinguish if responsibilities fall to the Board, Angus Council or NHS Tayside. This will be a matter of fact to be decided in each case. It is anticipated that the volume of instances where there is a need to apply these requirements will be low.
- 2.2 The Freedom of Information (Scotland) Act 2002 - and the related Environmental Information (Scotland) Regulations 2004 - provide any applicant with the right to request – and be provided with - any recorded information held by Scotland's public authorities. If an authority considers that information should not be released it is required to justify its decisions by applying one or more defined exemptions or (under the Environmental Information (Scotland) Regulations 2004) an 'exception'.
- 2.3 Integration Joint Boards are a "public authority" for the purpose of the Freedom of Information (Scotland) Act 2002. This means they are subject to both the Freedom of Information (Scotland) Act 2002 and the related Environmental Information (Scotland) Regulations 2004, as well as other requirements of Freedom of Information legislation, and will be required to respond to information requests accordingly.

2.4 Responsibilities under the Act/Regulations are supplemented by Codes of Practice issued by the Scottish Government. Compliance with the legislation is monitored by the Scottish Information Commissioner, who also provides advice on the operation of the legislation.

2.5 The Board is required to have:-

- (i) A Publication Scheme - Section 23 of Freedom of Information (Scotland) Act 2002 requires that all Scottish public authorities subject to the Act maintain a publication scheme. A publication scheme sets out the types of information that a public authority routinely makes available. The Integration Joint Board will need to develop and put in place a publication scheme, along with a guide setting out what information it will make available. It is important that consideration is given to the publication scheme – and associated guides to information – as early as possible. A publication scheme must be approved by the Scottish Information Commissioner. It is proposed that the IJB adopt the Model Publication Scheme approved by the Commissioner, a copy of which is attached as Appendix 1.
- (ii) A guide to information which is attached as Appendix 2.
- (iii) Policies and procedures in place on how the organisation responds to requests for information. Draft Policies and Procedures are attached as Appendix 3.
- (iv) An internal review/appeals process to consider cases where an applicant is dissatisfied with a response to a request for information, or there has been a failure to respond. A draft Internal Review/Appeals Process is attached as Annex 2 to the Draft Policies and Procedures referred to above.
- (v) Arrangements in place to make staff and the public aware of the procedures to follow and to distinguish appropriately between requests that should be processed by Angus Council/NHS Tayside rather than the Board. The determining factor is who holds the information. A draft leaflet is attached as Appendix 4.

### **3. FINANCIAL IMPLICATIONS**

3.1 The Board is entitled to charge fees for certain types of requests for information.

### **4. CONCLUSIONS**

4.1 It is recommended that the Board approve the draft Publications Scheme of the Angus Integration Joint Board annexed as Appendix 1 to this report, as required by the Freedom of Information (Scotland) Act 2002, for publication and notification to the Scottish Information Commissioner. In addition, it is recommended that the Board approve the Draft Guide to Information, Draft Policies and Procedures, Draft Internal Review/Appeals Process and Draft Leaflet to staff and the public, and all annexed respectively as Appendices 2-4 hereto.

**Vicky Irons**  
**Chief Officer**

June 2016

**REPORT AUTHOR: David Thompson**  
**EMAIL DETAILS: [ThompsonD@angus.gov.uk](mailto:ThompsonD@angus.gov.uk)**

Appendix 1 – Draft Publication Scheme  
Appendix 2 – Draft Guide to Information  
Appendix 3 – Draft Policies and Procedures  
Appendix 4 - Draft Leaflet to staff and the public

# Model Publication Scheme

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**Produced and approved by the Scottish  
Information Commissioner on 29 March 2016**

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Scottish Information  
Commissioner

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### Cross-referenced VC documents (for internal use)

VC No	VC name
69812	Model Publication Scheme: Guide for Scottish Public Authorities
69676	Model Publication Scheme: Notification Form
69815	Model Publication Scheme: Self-assessment checklist

## Introduction

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1. The Freedom of Information (Scotland) Act 2002 (the Act) requires Scottish public authorities to adopt and maintain a publication scheme. Authorities are under a legal obligation to:
  - (i) publish the classes of information that they make routinely available
  - (ii) tell the public how to access the information they publish and whether information is available free of charge or on payment.
2. The Act also allows for the development of model publication schemes which can be adopted by more than one authority. **The Commissioner's Model Publication Scheme was approved on 29 March 2016.**
3. The Commissioner has issued a [Guide for Scottish Public Authorities](#) to accompany the model scheme. This is **essential reading** for authorities adopting the model scheme as it explains the requirements of the scheme in detail and provides lists of types of information the Commissioner expects authorities to publish.

## Definition of “published” information

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4. For the purposes of this Model Publication Scheme, to be “published”, information must be:
  - (i) already produced and prepared and
  - (ii) available to anyone to access easily without having to make a request for it
5. Research and information services which involve the commissioning of new information are **not** “publications”.

## Adopting this model scheme

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6. It is expected that the model scheme will be adopted by any authority which is subject to the Freedom of Information (Scotland) Act 2002. For more information about which bodies this applies to, please visit <http://www.itspublicknowledge.info/YourRights/Whocanlask.aspx>
7. Adoption commits an authority to:
  - (i) adopting the model scheme, and any updates to it, without amendment
  - (ii) publishing the information, including environmental information, that it holds and which falls within the classes of information below.
  - (iii) ensuring that the way it publishes its information meets the Model Publication Scheme Principles.
  - (iv) producing a Guide to Information which sets out the information the authority publishes through the model scheme, how to access it, whether there is a charge for it and how to get help to access information.
  - (v) notifying the Scottish Information Commissioner that it has adopted the model scheme.

8. Where an authority fails to meet the above commitments, it cannot be considered to have adopted the Commissioner's model scheme and may be failing with the duty to adopt and maintain a publication scheme in line with section 23(1) of the Act.

### **Notifying the Commissioner**

9. Authorities adopting the model publication scheme for the first time must notify the Commissioner that they have done so. Thereafter no further notification is required unless the Commissioner has revoked approval (because the authority is not complying with the scheme).
10. The Commissioner will regularly review the model scheme and will consult authorities before making any substantive changes. The Commissioner will notify authorities of any changes.
11. The Commissioner will continue to monitor the effectiveness of authorities' application of the model publication scheme. As required, she may contact individual authorities about practice issues, in line with her Enforcement Policy.

## **Model Publication Scheme principles**

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### **Principle One: Availability and formats**

12. Information published through this model scheme should, wherever possible, be made available on the authority's website.
13. There must be an alternative arrangement for people who do not wish to, or who cannot, access the information either online or by inspection at the authority's premises. An authority may e.g., arrange to send out information in paper copy on request (although there may be a charge for doing so).

### **Principle Two: Exempt information**

14. If information described by the classes cannot be published and is exempt under Scotland's freedom of information laws e.g., sensitive personal data or a trade secret, the authority may withhold the information or provide a redacted version for publication, but it must explain why it has done so.

### **Principle Three: Copyright and re-use**

15. The authority's Guide to Information must include a copyright statement which is consistent with the fair dealing provisions of the Copyright, Designs and Patents Act 1988. Where the authority does not hold the copyright in information it publishes, this should be made clear.
16. Any conditions applied to the re-use of published information must be consistent with the Re-Use of Public Sector Information Regulations 2015.
17. The Commissioner recommends that authorities adopt the Open Government Licence and/or the non-commercial Government Licence, produced by The National Archives for their published information.

### **Principle Four: Charges**

18. The Guide to Information must contain a charging schedule, explaining any charges and how they will be calculated.

19. No charge may be made to view information on the authority's website or at its premises, except where there is a fee set by other legislation e.g., for access to some registers.
20. The authority may charge for computer discs, photocopying, postage and packing and other costs associated with supplying information. The charge must be no more than these elements actually cost the authority e.g. cost per photocopy or postage. There may be no further charges for information in Classes 1 – 7 below. An exception is made for commercial publications (see Class 8 below) where pricing may be based on market value.

### **Principle Five: Contact details**

21. The authority must provide contact details for enquiries about any aspect of the adoption of the model scheme, the authority's Guide to Information and to ask for copies of the authority's published information.
22. The Act requires authorities<sup>1</sup> to provide reasonable advice and assistance to anyone who wants to request information which is not published. The authority's Guide to Information must provide contact details to access this help.

### **Principle Six: Duration**

23. Once published through the Guide to Information, the information should be available for the current and previous two financial years. Where information has been updated or superseded, only the current version need be available (previous versions may be requested from the authority).

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<sup>1</sup> Section 15 of the Freedom of Information (Scotland) Act 2002 and regulation 9 of the Environmental Information (Scotland) Regulations 2004

## The Classes of Information

	Class	Description
1	About the authority	Information about the authority, who we are, where to find us, how to contact us, how we are managed and our external relations
2	How we deliver our functions and services	Information about our work, our strategies and policies for delivering functions and services and information for our service users
3	How we take decisions and what we have decided	Information about the decisions we take, how we make decisions and how we involve others
4	What we spend and how we spend it	Information about our strategy for, and management of, financial resources (in sufficient detail to explain how we plan to spend public money and what has actually been spent)
5	How we manage our human, physical and information resources	Information about how we manage the human, physical and information resources of the authority.
6	How we procure goods and services from external providers	Information about how we procure goods and services and our contracts with external providers
7	How we are performing	Information about how we perform as an organisation and how well we deliver our functions and services
8	Our commercial publications	Information packaged and made available for sale on a commercial basis and sold at market value through a retail outlet e.g., bookshop, museum or research journal.
9	Our open data	Open data made available by the authority as described by the Scottish Government's Open Data Strategy and Resource Pack, available under an open licence.

## Document control sheet

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Date of last update	

[illegible]

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**GUIDE TO INFORMATION AVAILABLE THROUGH THE MODEL PUBLICATION SCHEME 2016**

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## Section 1: Introduction

The Freedom of Information (Scotland) Act 2002 (the Act) requires Scottish public authorities to adopt and maintain a publication scheme which has the approval of the Scottish Information Commissioner, and publish information in accordance with that scheme. The publication scheme must:

- publish the classes of information that the authority makes routinely available
- tell the public how to access the information and whether information is available free of charge or on payment

Angus Integration Joint Board has adopted the **Model Publication Scheme 2016** which has been produced and approved by the Scottish Information Commissioner.

You can see this scheme on our website at [http://www.angus.gov.uk/info/20351/health\\_and\\_social\\_care\\_integration](http://www.angus.gov.uk/info/20351/health_and_social_care_integration).

You can also contact us at the address below if you prefer a copy of the Model Publication Scheme 2015, or this Guide to Information, to be provided in a different format.

The purpose of the Guide to Information is to:

- allow you to see what information is available (and what is not available) for the Angus Integration Joint Board in relation to each class in the Model Publication Scheme 2016
- state what charges may be applied
- explain how to find the information easily
- provide contact details for enquiries and to get help with accessing the information
- explain how to request information that has not been published.

Alongside the Act, the Environmental Information (Scotland) Regulations 2004 (the EIRs) provide a separate right of access to the environmental information that we hold. This guide to information also contains details of the environmental information that we routinely make available.

## Section 2: About Angus Integration Joint Board

The Angus Integration Joint Board (“the Board”) was established on 3<sup>rd</sup> October 2016 as a corporate body under the terms of the Public Bodies (Joint Working) (Scotland) Act 2014. It is one of 29 Integration Boards each created covering one or more areas coterminous with that of local authorities. The function of the Board which contains representatives of Angus Council, NHS Tayside and a number of professional and stakeholder representatives, is to provide arrangements for the development of the integration of health and social care. This integration will improve the outcome for patients, service users, carers and their families. The Board has delegated to it, in terms of the Act and an Integration Scheme approved by the Scottish Ministers, functions and resources of Angus Council and NHS Tayside.

The Board is commonly referred to as the Angus Health and Social Care Partnership. This is the public facing aspect of the Board and comprises the organisation drawing staff from the Council and Health Board which supports the Board in delivering its objectives.

## Introducing the Angus Integration Joint Board

The Board has its Principal offices at [ ].

Telephone [ ] Fax [ ] e-mail [ ]

## The Chief Officer of the Board is Vicky Irons

We cover the area of Angus Council.

We work in co-operation with other Integration Joint Boards, NHS Tayside and Angus Council and other agencies in planning and commissioning health and social care services.

The governing body is the Integration Joint Board, which comprises 6 voting members - 3 members appointed from Councillors on Angus Council; 3 members from the Non-Executive board members of NHS Tayside. Additionally there are non-voting stakeholder members and professional members. For more information on the Board see Section 10 – Classes of information - Class 1.

### **Section 3: Accessing Information under the Scheme**

#### **Availability and formats**

The information published through this Guide to Information is, wherever possible, available on our website. We offer alternative arrangements for people who do not want to, or cannot, access the information online or by inspection at our premises. For example, we can usually arrange to send information to you in paper copy (although there may be a charge for this – see Section 5: Our Charging Policy).

Information in our Guide to Information will normally be available through the routes described below. Section 10 – Classes of Information provides more details on the information available under the Guide, along with additional guidance on how the information falling within each class may be accessed.

#### **Online:**

Most information listed in our Guide to Information is available to download from our website. In many cases a link within Section 10: Classes of Information will direct you to the relevant page or document. If you are having trouble finding any document listed in our guide, then for further assistance please contact:

[ ]

Telephone: [ ]

Email: [ ]

Website: [http://www.angus.gov.uk/info/20351/health\\_and\\_social\\_care\\_integration](http://www.angus.gov.uk/info/20351/health_and_social_care_integration)

**By email:**

If the information you seek is listed in our Guide to Information but is not published on our website, we can send it to you by email, wherever possible. When requesting information from us, please provide a telephone number so that we can telephone you to clarify details, if necessary.

**By phone:**

All information in the guide will be available in hard copy form for example, paper copies. Hard copies of information can be requested from us over the telephone. Please call us to request information available under this scheme.

**By post:**

You can also request hard copies of any information in the Guide by post. Please address your request to:

[                      ]

When writing to us to request information, please include your name and address, full details of the information or documents you would like to receive, and any fee applicable (see Section 5: Our Charging Policy for further information on fees). Please also include a telephone number so we can telephone you to clarify any details, if necessary.

**Personal visits:**

If you prefer to visit us to inspect the information you may do so during our normal office hours of 9.00 am to 5.00pm Monday to Thursday and to 4.00pm on a Friday. It may avoid delay if you notify us in advance that you intend to visit. In a limited number of cases you may be required to make an appointment to view the information. In such cases, this will be set out within Section 10 – Classes of Information, and contact details will be provided within the relevant class.

**Advice and assistance:**

If you have any difficulty identifying the information you want to access, then please contact us to help you.

**Exempt information**

We will publish all the information we hold that falls within the classes of information in the Model Publication Scheme 2016. We publish this information in Section 10 of this guide. If a document contains information that is exempt under Scotland's freedom of information

laws (for example personal information or a trade secret), we will remove or redact (black out) the information before publication but we will explain why.

#### **Section 4: Information that we may withhold**

All information covered by our Guide to Information can either be accessed through our website, or will be provided promptly following our receipt of your request. Our aim in adopting the Commissioner's Model Publication Scheme 2016 and in maintaining this Guide to Information is to be as open as possible. You should note, however, that there may be limited circumstances where information will be withheld from one of the classes of information listed in "Section 10 – Classes of Information". Information will only be withheld, however, where the Act (or, in the case of environmental information, the EIRs) expressly permits it. Information may be withheld, for example, where its disclosure would breach the law of confidentiality, harm an organisation's commercial interests, or endanger the protection of the environment.

Information may also be withheld if it is another person's personal information, and its release would breach data protection legislation.

Whenever information is withheld we will inform you of this, and will set out why that information cannot be released. Even where information is withheld it will, in many cases, be possible to provide copies with the withheld information edited out. If you wish to complain about any information which has been withheld from you, please refer to Section 8 – Contact details for enquiries, feedback and complaints.

#### **Section 5: Our Charging Policy**

This section explains when we may make a charge for our publications and how any charge will be calculated.

There is no charge to view information on our website, at our premises (except where there is a statutory fee, for example to access registers), or where it can be sent to you electronically by email.

We may charge you for providing information to you, for example photocopying and postage, but we will charge you no more than it actually costs us to do so. We will always tell you what the cost is before providing the information to you.

Our photocopying charges per sheet of paper are shown in the table below:

Size of paper/alternative format	Black and White Pence per sheet	Colour Pence per sheet
A4	10p	20p
A3	20p	40p

Information provided on CD-ROM will be charged at £1.00 per computer disc.

We will recharge postage costs at the rate we paid to send the information to you. Our charge is based on for sending information by Royal Mail First Class.

When providing copies of pre-printed publications, we will charge you no more than the cost per copy of the total print run. We do not pass on any other costs to you in relation to our published information.

Details of any individual charges which differ from the above charging policy are provided within “Section 10 – Classes of information” .

## Section 6: Copyright

The Board holds the copyright for the vast majority of information in this Publication Scheme. All of this information can be copied or reproduced without our formal permission, provided it is copied or reproduced accurately, is not used in a misleading context, is not used for profit, and provided that the source of the material is acknowledged.

Providing access to information does not mean that copyright has been waived, nor does it give the recipient the right to re-use information for commercial purposes. If you intend to re-use information obtained from the Scheme, and you are unsure whether you have the right to do so, please make a request to re-use the information to:

[            ]

Telephone: [            ]  
Email: [            ]

Your request will be considered under the Re-use of Public Sector Information Regulations 2005, which may provide the right to impose a charge. In the event that a charge is payable you will be advised what this is and how it is calculated. If you require more information on the re-use of information go to [www.oqps.gov.uk](http://www.oqps.gov.uk) or contact [            ].

The Publication Scheme may contain information where the copyright holder is not the Integration Joint Board. In most cases, the copyright holder will be obvious from the documents. In cases where the copyright is unclear it is the responsibility of the person accessing the information to locate and seek the permission of the copyright holder before reproducing the material or in any other way breaching the rights of the copyright holder. This includes, for example, Ordnance Survey Maps, which are Crown Copyright.

## **Section 7: Records Management Policy**

The Board regards its records as a major asset of the organisation. It confirms that its records are one of the essential resources, which support management in the efficient and effective fulfilment of its governance, business and legal responsibilities. The Board will over coming months develop records management and retention policies which will be applied to the management of information held by the Board

## **Section 8: Contact details for enquiries, feedback and complaints**

The Act requires that we review our publication scheme from time to time. As we have adopted the Model Publication Scheme 2016, this means we will review our Guide to Information from time to time. As a result, we welcome feedback on how we can develop our guide further. If you would like to comment on any aspect of this Guide to Information, or comment or complain that information is not included then please contact us via.

[                      ]

Telephone:

Email: [                      ]

Telephone: [                      ]

Website: [http://www.angus.gov.uk/info/20351/health\\_and\\_social\\_care\\_integration](http://www.angus.gov.uk/info/20351/health_and_social_care_integration)

You may, for example wish to tell us about:

- other information that you would like to see included in the guide;
- whether you found the guide easy to use;
- whether you found the guide to information useful;
- whether our staff were helpful;
- other ways in which our guide to information can be improved.

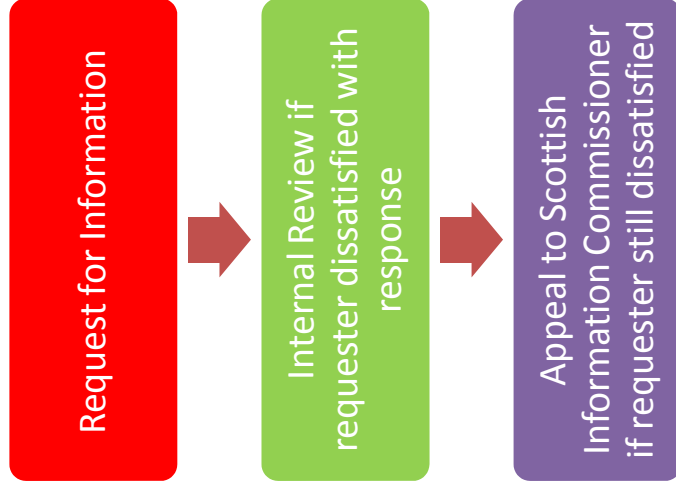
Our aim is to make our guide to information as user-friendly as possible, and we hope that you can access all the information we publish with ease. If you do wish to complain about any aspect of the Guide then please contact us and we will try and resolve your complaint as quickly as possible.

Any complaint will be acknowledged within three working days of receipt and we will respond in full within twenty working days.

You have legal rights to access information under the Model Publication Scheme 2016 (as described in this Guide to Information) and a right of appeal to the Scottish Information Commissioner if you are dissatisfied with our response. These rights apply only to information requests made in writing<sup>1</sup> or another recordable format. If you are unhappy with our response to your request you can ask us to review it and if you are still unhappy, you can make an appeal to the Scottish Information Commissioner.

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<sup>1</sup> Verbal requests for environmental information carry similar rights



The Commissioner's website has a guide to this three step process, and she operates an enquiry service on Monday to Friday from 9:00am to 5:00pm.

Her office can be contacted as follows:

Scottish Information Commissioner  
Kinburn Castle  
Doubledykes Road  
St Andrews  
Fife KY16 9DS  
Tel: 01334 464610  
Email: [enquiries@itspublicknowledge.info](mailto:enquiries@itspublicknowledge.info)  
Website: [www.itspublicknowledge.info/YourRights](http://www.itspublicknowledge.info/YourRights)

## Section 9: How to Access Information which is not available in the Guide to Information

If the information you are seeking is not available through the Model Publication Scheme 2015 (as described in this Guide) then you may wish to request it from us. The Act provides you with a right of access to the information we hold, subject to certain exemptions. The EIRs separately provide a right of access to the environmental information we hold, while the Data Protection Act 1998 (DPA) provides a right of access to any personal information about you that we hold.

Again, these rights are subject to certain exceptions or exemptions. Should you wish to request a copy of any information that we hold that is not available under the Model Publication Scheme 2016 (and described in this Guide), please write to:

### For requests under Freedom of Information and the EIRs please contact:

[ ]

Telephone: [ ]

Email: [ ]

### For requests under the Data Protection Act please contact:

[ ]

Telephone [ ]

Email: [ ]

### **Charges for information that is not available under the scheme:**

The charges for information that is available under this Guide to Information are set out under Section 5 – Our Charging Policy.

If you submit a request to us for information that is not available in this Guide the charges will be based on the following calculations:

General information requests:

- There will be no charge for information requests that cost us £100 or less to process.
- Where information costs between £100 and £600 to provide you may be asked to pay 10% of the cost in excess of £100. That is, if you were to ask for information that cost us £600 to provide, you would be asked to pay £50 calculated on the basis of a waiver for the first £100 and 10% of the remaining £500 being chargeable.
- We are not obliged to provide information in response to requests which will cost us over £600 to process.
- In calculating any fee, staff time will be calculated at actual cost per staff member hourly salary rate to a maximum of £15 per person per hour.
- We do not charge for the time to determine whether we hold the information requested, or for the time it takes to decide whether the information can be released. Charges may be made for locating, retrieving and providing information to you.
- In the event that we decide to impose a charge we will issue you with notification of the charge (a fees notice) and how it has been calculated. You will have three months from the date of issue of the fees notice in which to decide whether to pay the charge. The information will be provided to you on payment of the charge. If you decide not to proceed with the request there will be no charge to you.

### **Charges for environmental information:**

Environmental information is provided under the EIRs rather than the Act. The rules for charging for environmental information are slightly different. We do not charge for the time to determine whether we hold the environmental information requested, or deciding whether the information can be released. Charges may be made for locating, retrieving and providing information to you, for example photocopying and postage. In the event that we decide to impose a charge we will issue you with notification of the charge and how it has been calculated. The information will be provided to you on payment of the charge. If you decide not to proceed with the request there will be no charge to you.

Charges are calculated on the basis of the actual cost to the IJB of providing the information.

- Photocopying is charged at 10p per A4 sheet for black and white copying, 20p per A4 sheet for colour copying.
- Postage is charged at actual rate for Royal Mail First Class.
- Staff time is calculated at actual cost per staff member hourly salary rate to a maximum of £15 per person per hour.

The first £100 worth of information will be provided to you without charge.

Where information costs between £100 and £600 to provide, you will be asked to pay 10% of the cost. That is, if you were to ask for information that cost us £600 to provide, you would be asked to pay £50, calculated on the basis of a waiver for the first £100 and 10% of the remaining £500.

Where it would cost more than £600 to provide the information to you, however, we will ask you to pay the full cost of providing the information, with no waiver for any portion of the cost.

**Charge for request for your own personal data:**

The minimum cost is £10 rising to a maximum of £50 depending on the volume and type of information requested, plus reproduction and postage costs (both on the same basis as for FOI requests).

## Section 10 – Classes of Information

CLASS 1: ABOUT ANGUS INTEGRATION JOINT BOARD			
<b>Class description:</b> Information about Angus Integration Joint Board, who we are, where to find us, how to contact us, how we are managed and our external relations.			
The information we publish under this class includes:	Description	How to access it/details of any charges @ = to be accessible via web	
<b>About Us</b>	The Angus Integration Joint Board is a corporate body established under the Public Bodies (Joint Working) (Scotland) Act 2014. It covers the area of Angus Council	About us - @	
Organisation's Purpose, Mission Statement, Vision and Values	Our Vision Statement.	Vision Statement – @	
Contact Details	Address and contact details for Angus Integration Joint Board.	Contact details – @	
Organisational Chart	Gives details of the organisational structure of the officers working within the integrated governance arrangements	IJB Organisation Chart – @	
Our Board	Profiles of Board Members and Professional Advisers and Stakeholder	Voting Board Members - @ Non-Voting Stakeholder Members - @	

	<p>representatives.</p> <p>Programme of Meeting Papers for Board Meetings</p> <p>Board Members Declarations of Interest and their Register of Gifts and Hospitality.</p> <p>Board Members expenses are published here.</p>	<p>Non-Voting Professional Members - @</p> <p>Board Meeting Programme - @</p> <p>Board Papers - @</p> <p><a href="#">Register of Interests</a> and of Gifts and Hospitality [Also view each member's profile to see individual interests] - @</p> <p><a href="#">Expenses</a> [View each member's profile to see expenses claims] - @</p>
Governance	<p>Governance &amp; Committee Arrangements</p> <p>Standing Orders</p> <p>Code of Conduct for Board members</p> <p>Risk Management</p> <p>Scheme of Delegation</p>	<p>Governance &amp; Committee Arrangements - @</p> <p>Standing Orders - @</p> <p>Code of Conduct for Board members - @</p> <p>Risk Management - @</p> <p>Scheme of Delegation - @</p>
News	<p>News about the IJB for example news releases, newsletters.</p>	<p>Briefings - @</p> <p>Newsletters - @</p> <p>News Releases - @</p>
Accountability and Audit Relationships	<p>Details of bodies we are audited and/or regulated by, and the nature of our relationship with them.</p>	<p>Audit Scotland <a href="http://www.audit-scotland.gov.uk">http://www.audit-scotland.gov.uk</a></p> <p>Care Commission - @</p> <p>Health Improvement Scotland - @</p> <p>Healthcare Environmental Inspection - @</p> <p>Mental Welfare Commission - @</p>

<b>External relations and working with others</b>		
Partner Agencies	Information on working in partnership with.	Angus Council - @ NHS Tayside - @ Others to be added
<b>Information on rights, how to make a request</b>		
How to complain or make a comment	How to complain or make a comment, for example complaints policy, and contact details.	Making a Complaint - @ Patient Feedback - @
How to make a freedom of information request	How to request information, contacts details for FOI section/unit. Rights of appeal under FOI/EIR if you are dissatisfied.	Making an FOI Request – @ <u>Review procedure</u> - @
How to make a request for personal information	How to apply your rights under the Data Protection Act 1998 and request personal information held by the IJB about you.	<u>Information about you</u> - @
Model Publication Scheme 2016	The Scottish Information Commissioner's Model Publication Scheme 2016.	Publication Scheme - @
Guide to Information	Guide to Information it makes available under the Model Publication Scheme 2016.	Guide to information available under the Publication Scheme - @

CLASS 2: HOW WE DELIVER OUR FUNCTIONS AND SERVICES			
Class description:			
Information about our work, our strategy and policies for delivering functions and services and information for our service users.			
The information we publish under this class includes:	Description	How to access it/details of any charges	
Strategic Plan	The Strategic Plan describes how the functions delegated to the Angus IJB by Angus Council and NHS Tayside will be delivered.	Strategic Plan - @	
Corporate policies and procedures.	Policies adopted by the Angus IJB	Risk Management Strategy - @ Freedom of Information Policy - @ Public Participation and Engagement Policy - @ Others	
How to access services	Information about how to locate health services including:  Primary Care Services: Dental Services/General Dental Practitioners GPs/GP Surgeries Optometrists and Opticians Pharmacies	Hospitals and other locations - @ Accessing NHS Services - @ Accessing Social Work Services - @ Other	

### CLASS 3: HOW WE TAKE DECISIONS AND WHAT WE HAVE DECIDED

Class description: Information about the decisions we take how we make decisions and how we involve others.			
The information we publish under this class includes:	Description	How to access it/details of any charges	
IJB Board Meetings	Agendas and papers for the Board and past Boards and approved minutes of Board meetings.	Board Meeting Papers - @	
Board standing orders for the conduct of business		Standing Orders - @	
Scheme of delegation		Scheme of Delegation - @	
Public consultation and engagement strategies	Details of how we inform and engage with service users, families and key stakeholders. Details of current and previous public consultations.	Public Consultation and Engagement - @	
Reports of Regulatory Inspections	Reports of regulatory inspections, audits and investigations.	List relevant reports - @	

#### CLASS 4: WHAT WE SPEND AND HOW WE SPEND IT

Class description:		
Information about our strategy for, and management of, financial resources (in sufficient detail to explain how we plan to spend public money and what has actually been spent).		
The information we publish under this class includes:	Description	How to access it/details of any charges
Annual Accounts	<p>Statutory financial statements Directors report including Board member and senior employees' remuneration.</p> <p>Governance statement</p> <p>Independent auditors report</p>	<p>Annual Accounts (Exchequer) - @</p> <p>(The Governance statement is included within the Annual Accounts) Audit Scotland's Reports as they become available - @</p>
Public Services Reform (Scotland) Act 2010	<p>Public Relations Expenditure Overseas Travel Expenditure Hospitality and Entertainment Expenditure Supplier payments over £25,000 Employees with remuneration in excess of £150,000</p> <p>Sustainable economic growth information</p> <p>Efficiency, Effectiveness and Economy information</p>	<p>Annual Disclosures - @</p> <p>EcoSmart - @ EcoSmart Policies - @ Efficiency @</p>
Financial Plan	Revenue Financial Plan	Financial Plan 2016/17 - @
Financial Polices	Standing Financial Regulations	Standing Financial Regulations - @

	Scheme of Delegation	Scheme of Delegation - @
Financial Monitoring Reports	Overview in-year financial reports	Financial Monitoring Reports are reported to the Integration Joint Board and included in the Board Papers. See <a href="#">Board Papers</a>

## CLASS 5: HOW WE MANAGE OUR HUMAN, PHYSICAL AND INFORMATION RESOURCES

<b>Class description:</b>		
<b>Information about how we manage the human, physical and information resources of the authority.</b>		
<b>The information we publish under this class includes:</b>	<b>Description</b>	<b>How to access it/details of any charges</b>
<b>Human Resources</b>		
Current policies	The Board does not employ staff directly. Staff are employed by Angus Council or NHS Tayside. For relevant Human Resources Policies refer to these bodies web sites.	Add relevant links to Angus Council and NHS Tayside - @
Strategies	Workforce Planning	Information on development of workforce Plan
Employee relations	Information about partnership arrangements and facilities agreements in place including area partnership	Facilities Agreement - @ Partnership Agreement - @ Angus Partnership Arrangements or equivalent - @

	forums, HR forums and staff development groups	
Equality and Diversity at Angus IJB	Establishing Equality Outcome for Angus IJB	Document to be added - @
Volunteering	Working with us	Volunteering - @
Carers Strategy	Carers Strategy	Carers Strategy Review - @
<b>Information Resources</b>		
Records management	<p>Information on records management including codes of practice, records management plan, health records policy, administrative records policy, and the removal of data from vacated properties policy.</p> <p>A records management plan requires to be produced under the Public Records (Scotland) Act 2011 which should then be approved by the Keeper of the Records of Scotland. This plan will be published on our website when it becomes available.</p>	Records Management Plan - @
Information assurance and management	Information on using, protecting and the fair processing of another individual's personal information; information security, including the information assurance strategy, information governance standards, information asset	<p>How to submit subject access requests @</p> <p>How to submit Freedom of information Requests, @</p>

	registers, IG toolkit, fair processing notice, data protection principles, Caldicott guardian principles, and how to submit subject access requests. Information on these issues is held by Angus Council and NHS Tayside. A small number of procedures and policies have been agreed by the Integration Joint Board	
Freedom of Information	Information about the freedom of information policy and how to submit a request	<a href="#">Freedom of Information Policy</a> <a href="#">How to request information</a>
Knowledge management		
Statistics	Health information is published by the Information Services Division of NHS National Services Scotland (ISD). You can find statistical information here on cancer, child health, deaths, dental care, drugs and alcohol misuse, emergency care, equality and diversity, eye care, finance, general practice, health and social care, health conditions, heart diseases, hospital care, maternity and births, mental health, prescribing and medicines, public health, quality indicators, healthcare audits, sexual health, stroke and waiting times. Please note that the IJB is not responsible for the content of external	Information Services Division <a href="http://www.isdscotland.org">http://www.isdscotland.org</a>

	sites.	
Lists and registers	Information we are currently required to hold in publicly available registers:  Independent contractors:	List of Dental Practitioners - @ Performers List of GPs - @  List of Ophthalmic medical practitioners - @ Pharmaceutical List - @
<b>Physical Resources</b>		
Property or rental	Property management information, including: <ul style="list-style-type: none"> <li>• Property and Asset Management arrangements</li> <li>• Fire policy and procedures</li> <li>• Sustainability policy and annual report setting out objectives and actions on sustainability</li> </ul>	??  ??  ??

## CLASS 6: HOW WE PROCURE GOODS AND SERVICES FROM EXTERNAL PROVIDERS

<b>Class description:</b> Information about how we procure goods and services, and our contracts with external providers		
The information we publish under this class includes:	Description	How to access it/details of any charges
Procurement policies	Procurement arrangements made by	Council Procurement

	Angus Council and NHS Tayside	NHS Procurement
Invitations to Tender	<p>Invitations to tender can be found on the Public Contracts Scotland portal*</p> <p>*The IJB is not responsible for the content of external websites.</p>	<a href="#">Public Contracts Scotland*</a> <a href="#">Tender support information</a>
Contracts	<p>A list of contracts which have gone through formal tendering can be found at Public Contracts Scotland Advertising Portal*</p> <p>* The IJB is not responsible for the content of external websites.</p>	<a href="#">Public Contracts Scotland*</a>

## CLASS 7: HOW WE ARE PERFORMING

<b>Class description:</b>		
<b>Information about how we perform as an organisation, and how well we deliver our functions and services.</b>		
<b>The information we publish under this class includes:</b>	<b>Description</b>	<b>How to access it/details of any charges</b>
Key Performance Indicators	<ul style="list-style-type: none"> <li>National Health &amp; Wellbeing Outcomes</li> <li>Regulations on the content of Performance reports</li> <li>Performance Reports</li> </ul>	<p>Outcomes - @</p> <p>Regulations - @</p> <p>Performance reports are set out in the IJB Board papers.</p>

Audits & Inspections	Information about audits and inspections carried out by external bodies - for example, Healthcare Environment Inspectorate (HEI).	Add details of relevant inspections - @	
Patient feedback	Information on how to provide feedback on our services.	<a href="#">Patient Feedback</a>	
Complaints	Complaints statistics	<a href="#">Complaints Statistics (ISD)</a> <a href="#">Quarterly Complaints Reports (Board Papers)</a>	
Scottish Public Service Ombudsman (SPSO)	Findings and our responses	<a href="#">SPSO</a>	

## CLASS 8: COMMERCIAL PUBLICATIONS

### Class description:

Information packaged and made available for sale on a commercial basis and sold at market value through a retail outlet, for example bookshop, museum or research journal

The information we publish under this class includes:	Description	How to access it/details of any charges
We do not publish any information in this class		



## Freedom of Information Policy

Lead Manager	[       ]
Responsible Officer	[       ]
Approved by	Pending
Date approved	
Date for Review	[       ]
Replaces previous version	New

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# 1. Introduction

## ***General Obligation***

The Freedom of Information (Scotland) Act 2002 (as amended) (“the Act”) imposes a number of obligations on Scottish public authorities, including the Angus Integration Joint Board. Integration Joint Boards established under the Public Bodies (Joint Working) (Scotland) Act 2014 are separate responsible bodies under the Act from the date of their establishment<sup>1</sup>. The Act gives a general right of access to recorded information held by public authorities, subject to certain exemptions. The Act also imposes additional responsibilities:-

- (a) to produce a Publication Scheme subject to approval by the Scottish Information Commissioner. Publication schemes are high level, strategic documents in which a public authority makes binding commitments to make information available to the general public. Such schemes:-
  - provide clear evidence to the public that an authority is meeting its obligations under the Act to be accessible, open & transparent;
  - enable the public to see what information is already published, and to access it without having to make a formal request for information;
  - give employees clear guidance about the information that they can and should give out to the public so they can respond to information requests efficiently;
  - help reinforce leadership messages about openness and accountability to staff at all levels in the organisation;
  - are to be easily accessible and designed to be easy to understand and to use – by everyone (including those with no web access).
- (b) to respond to requests (which must be in writing or some other permanent form) made by anyone for information held by the authority within set timescales (normally 20 working days) regardless of when it was created, by whom, or the format in which it is now recorded.
- (c) to advise an applicant if information is not held.
- (d) to specify within the terms of exemptions set out in the Act if the authority refuses to release the requested information.
- (e) to charge for the provision of information only in accordance with regulations made under the Act and to decline to provide information if the cost of doing so exceeds a specified level.

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<sup>1</sup> The Freedom of Information (Scotland) Act 2002 (Scottish Public Authorities) Amendment Order 2014

(f) to make applicants aware of their right to seek a review of any decision on a request for information and of the right to pursue an appeal to the Scottish Information Commissioner if dissatisfied with the decision of the authority.

(g) to provide advice and assistance to applicants seeking information.

### ***Environmental Information***

Under Section 62 of the Act the Scottish Ministers have made the Environmental Information (Scotland) Regulations 2004 (EIRs). These make provision in Scottish law of the Aarhus Convention of June 1998 on “Access to Information, Public Participation in Decision Making and Access to Justice in Environmental Matters”. They also implement the European Commission Directive 2003/4/EC. The Convention is based on the principle ***that every person has the right to live in an environment adequate to his health and wellbeing.***

Through the Environmental Information Regulations there is a provision similar, but not identical to, Freedom of Information legislation which conveys a “right to access environmental information”. Environmental information has a wide definition. The definition from the EIRs is reproduced as an Annex 1 to this Policy. It is not an exclusive definition and may include information on the Board’s policies, plans and activities likely to affect the state of human health and safety – for example, the cleanliness of our premises and control of infection.

There are differences in the obligations on the Board under the EIRs as compared with Freedom of Information Act. Most notable relate to:-

(a) requests for information may be made orally – there is no requirement to put them in writing or other permanent form.

(b) the timescale for responding may, in certain circumstances, extend to 40 working days.

(c) the charging arrangements under EIRs allow for flexibility for the Board to recover the costs of providing information – but we cannot refuse to provide on the grounds of cost.

### **Data Protection Act 1998**

Under the Data Protection Act 1998 the subject of personal data (i.e. the person the information relates to) has a right to request access to that data. This may include health records. The rights under the Data Protection Act are not covered by this Policy. Reference should be made to relevant information security and related policies available via the Publication Scheme.

## 2. Scope of Policy

This policy sets out the arrangements that the Angus Integration Joint Board has made to ensure compliance with the Freedom of Information (Scotland) Act 2002 and the Environmental Information (Scotland) Regulations 2004.

This Policy applies to all employees engaged on the work of the Angus Integration Joint Board and to Board Members. Under the delegation arrangements entered into with Angus Council and NHS Tayside, staff are accountable to the Board for compliance with this Policy.

Contractors, proposed contractors and others communicating with the Board shall be informed of our obligations under ***freedom of information legislation***<sup>2</sup> and that we may have to disclose information which is provided to us by them.

The Policy will provide a framework within which Angus Integration Joint Board will ensure compliance with our obligations under the Act and ensure that internal procedures developed are the most effective means of complying with the Board's obligations.

The Policy will be supported by more detailed guidance on our obligations under ***freedom of information legislation***.

## 3. Responsibilities

Angus Integration Joint Board has a statutory responsibility to make information available in accordance with ***freedom of information legislation***. It is essential that all staff are aware of, and take seriously, their responsibilities under the legislation. As an organisation we are committed to meeting statutory timescales under ***freedom of information legislation*** and in supporting our staff to achieve the requirements of the legislation. Any member of staff who is unable to respond effectively to the principles set out in this Policy should advise their line manager or more senior member of staff.

**The Chief Officer** is ultimately responsible for the Board's compliance with relevant statutory provisions and shall provide strategic direction on operation of our Freedom of Information Policy, including on how this is fulfilled through Corporate Communications.

**The Proper Officer of the Integration Joint Board** (being Angus Council's Head of Legal and Democratic Services) has responsibility for advising the Chief Officer on the application of ***freedom of information legislation*** and for

<sup>2</sup> ***Freedom of Information legislation*** is to be read as reference to **both** the FOIA and EIRs

ensuring that the Board meets its obligations under this legislation. This includes responsibility for reviewing operation of the Board's compliance with ***freedom of information legislation*** and for ensuring that relevant Policy and operating procedures are in place. Performance of the Board will be reviewed annually via the Senior Management Team.

**Managers** are responsible for ensuring staff under their direction and control are aware of the freedom of information policies, procedures and guidance agreed and for ensuring that those staff understand and apply appropriately those policies, procedures and guidance in carrying out their day to day work.

**All staff** must have a general understanding of ***freedom of information legislation*** and know where to refer any issues on which they require guidance.

#### 4. Policy Statement

Angus Integration Joint Board is committed to being open and honest in the conduct of its operations and in complying fully with the Freedom of Information (Scotland) Act and the Environmental Information (Scotland) Regulations 2004. To this end Angus Integration Joint Board ensure:

- Compliance with the relevant Scottish Ministers Codes of Practice on ***Freedom of Information legislation*** and to related guidance issued by the Scottish Information Commissioner;
- a significant amount of routinely published information about Angus Integration Joint Board is made available to the public as a matter of course through its Publication Scheme;
- that the content of our Publication Scheme is reviewed quarterly and updated through the proactive identification of material for inclusion in the Scheme;
- requests for information not included in the Publication Scheme will be processed in accordance with our statutory obligations;
- we will publish via the web and elsewhere guidance on how to make a valid information request and the procedures adopted by the Board;
- advice and assistance will be actively provided to applicants seeking information;
- staff are aware of the need to be able to demonstrate the steps they have taken to identify if the Board holds information sought by any individual or if the request might more appropriately be directed to another organisation such as NHS Tayside or Angus Council. Where information cannot be located a record of searches undertaken for every request where information sought cannot be located must be completed.

- that charges for information requested are made only in accordance with the statutory requirements and a fee notice is issued prior to any charge being levied;
- due consideration is given to whether or not information is covered by an exemption (or exception under EIRs) and should not be released;
- if we claim an exemption (or exception under EIRs) the reasons for our decision will be fully explained to the applicant, unless to do so would itself result in the disclosure of exempt information;
- that if we do not hold information requested, but it is known or suspect who does, we should as a matter of good practice confirm the availability of the information with another public body and provide appropriate advice and assistance to the applicant on where the information can be obtained;
- appropriate training and information is provided to staff at all levels within the organisation of their obligations and how they can obtain assistance in ensuring they meet these;
- staff are made aware that it is an offence under the Act to alter, deface, block, erase, destroy or conceal information with the intent of preventing disclosure.
- that the Complaints Procedure – ***Requirement for Review*** – appended to this Policy will be made publicly available and will be followed in processing any Requests for Review under the Act (See Annex 2).
- that a Records Management Plan under Public Records (Scotland) Act 2011 is developed which supports the ability of the organisation to effectively manage its corporate and operational records and provides a framework for the Board's compliance with the Scottish Ministers Code of Practice on Records Management under Section 61 of the Act.
- That personal data as defined in the Data Protection Act 1998 is held securely and is not inappropriately disclosed in response to a request for information under ***freedom of information legislation***.

## 5. Communication and Training

All staff will have a general awareness of the Board's and each individual's obligations under ***freedom of information legislation***. Use will be made of an on-line training package to form part of the mandatory training for new entrants on freedom of information. Specific and focussed training will be provided on demand to specific categories of staff or staff groups.

We will make web resources available which will support staff in fulfilling their obligations. Training will be provided at three levels:-

**General Awareness** - This should be achieved through successful completion of a basic level Freedom of Information e-learning module.

**Response Training** – This is for those who are involved in responding to requests and require a full understanding of Fol procedures. This should be achieved through successful completion of a second level Freedom of Information training, to be re-validated every two years.

**Practitioner Training** – This is for those who process a wide range of Fol requests, some of which may be complex and/or spend a significant proportion of their job on Fol on-line training should be supplemented by refresher training every 2 years through attendance on short courses, formalised training or other evidence of on-going awareness of application of the legislation.

**Reviewer Training** – This is for those involved in responding to requests for review submitted.

## **6. Recording & Monitoring**

All Fol requests must be recorded promptly.

Robust arrangements must exist to ensure that in an individual's absence a nominated deputy is available to respond to requests for information and/or record requests/responses. Monitoring of activity under ***freedom of information legislation*** will include the routine collection of data on:-

- the number of requests received and whether they fall under Fol or EIR
- the number of requests for review received
- the proportion of requests answered within and outwith the statutory timescale
- the number of requests refused (or partially refused) and the reasons for this. the number of times a fee has been charged
- the outcomes of reviews
- the number of cases appealed to the Commissioner and the outcome.

This data will be published through the Publication Scheme along with statistical information produced for the Scottish Information Commissioner's Office.

Operation of the Board's policies and procedures under ***freedom of information legislation*** will be reviewed, as will decisions which are the subject of internal requests for review or external appeal to the Scottish Information Commissioner.

An annual report on the Board's compliance with legislation (including relevant statistical analysis) will be submitted to the Angus Integration Joint Board.

## 7. Social Media

With the increasing use of social media e.g. Facebook and Twitter, and blogging sites such as Blogger and Wordpress, it is recognised that more and more requests for information may be submitted using these channels rather than traditional e-mails. Messages received by these media which are directed to Integration Joint Board social media accounts will be monitored to ensure that any such requests are passed to the appropriate service for a response to be prepared and sent. Requests would only be valid if there was provided the applicant's full name, a means of responding in writing and details of the information requested in writing.

## 8. Voice Mail

Generally answer phone recordings of telephone messages are not regarded as sufficient to be a valid Fol request, but may be for the purpose of EIR. Where there is a system in place which allows a voice mail request to be stored permanently e.g. recordings to out of hours services where permanent recordings of all calls are made, this may be regarded as a valid Fol request if the information stored includes the individual's name and address for correspondence.

## 9. Procurement

In addition to the responsibilities under *freedom of information legislation* there are obligations under the Public Contracts (Scotland) Regulations 2012 and the Procurement Reform (Scotland) Act 2014 to give tenderers involved in some tendering exercises the right to ask for information e.g. right to ask why a tender was not successful. The authority has the right to withhold information in some cases, subject to conditions within the Act. In exercising any decision to withhold information cognisance should be taken of the Board's responsibilities under *freedom of information legislation*.

## 10. Impact Assessment

The legislation requires that we respond to requests from anyone without questioning their motivation. It also requires us in responding to a request to comply so far as is practical with the provision of information in the format requested. There is also a requirement to comply with the Board's duties under the Equality Act 2010, specifically in relation to discrimination in relation to disability.

As the requirements to provide information apply universally to all applicants it is not envisaged that the Policy will require any significant adjustment.

## **11. Review**

The Policy will be reviewed every two years or more frequently in the event of significant change in the legislative framework.

## Definition of Environmental Information

Any information in written, visual, aural, electronic or any other material form on –

- (a) the state of the elements of the environment, such as air and atmosphere, water, soil, land, landscape and natural sites including wetlands, coastal and marine areas, biological diversity and its components, including genetically modified organisms, and the interaction among these elements;
- (b) factors, such as substances, energy, noise, radiation or waste, including radioactive waste, emissions, discharges and other releases into the environment, affecting or likely to affect the elements of the environment referred to in paragraph (a);
- (c) measures (including administrative measures), such as policies, legislation, plans, programmes, environmental agreements, and activities affecting or likely to affect the elements and factors referred to in paragraphs (a) and (b) as well as measures or activities designed to protect those elements;
- (d) reports on the implementation of environmental legislation;
- (e) cost benefit and other economic analyses and assumptions used within the framework of the measures and activities referred to in paragraph (c); and
- (f) the state of human health and safety, including the contamination of the food chain, where relevant, conditions of human life, cultural sites and built structures inasmuch as they are or may be affected by the state of the elements of the environment referred to in paragraph (a) or, through those elements, by any of the matters referred to in paragraphs (b) and (c)

## Explanatory Note

The use of the word ‘any’ qualifying the word ‘information’ indicates a legislative intention that environmental information should be interpreted widely. Environmental information can be found in:

- documents, leaflets, reports, books, post-it notes, notes, data sets, memos, meeting notes, maps, diagrams, sketches, graphs, illustrations - basically, anything written down;
- digital and/or analogue records, such as tape recordings, answer phone recordings, recorded presentations, Dictaphone tapes, DVDs, memory sticks, compact discs or any other electronic or optical storage format;
- any type of electronic file, word-processor file, database (including GIS and related data), spreadsheet, computer models (including 3D models) and files, specially written bespoke programs, calendars, emails, archived web pages/sites, temporary or cached files and computer generated images;

- any other material form – that is, other forms not widely available, or not yet developed or invented at the time the EIRs came into force.

Public authorities are not required to acquire or create new information but may be required to compile or otherwise manipulate existing information which they hold to meet the terms of a request.

## Freedom of Information Requirement for Review or Representation

### Introduction

1. We have procedures in place to allow an individual<sup>1</sup> who is dissatisfied in any way with a decision taken by us on the provision of information under the Freedom of Information (Scotland) Act 2002 to require us to review decisions taken.
2. This note sets out the procedures we follow where someone is dissatisfied.
3. Under the Freedom of Information (Scotland) Act 2002, this procedure is known as a “Requirement for Review”. Under the Environment Information (Scotland) Regulations 2004 this is known as a “Representation”<sup>2</sup>. A requirement for review/representation can arise in circumstances where the applicant believes we have not complied with our obligations under the legislation, including (but not limited to):-
  - (a) where we indicate that we do not hold information, but the individual believes we do; or
  - (b) where the individual feels that we have not provided the advice and assistance we should have done; or
  - (c) where we have refused to provide information; or
  - (d) where we have failed to reply to a request for information; or
  - (e) where we have failed to respond to a request for information within the prescribed timescale; or
  - (f) where the individual feels the charge for providing information is higher than it should be.
4. If the applicant is dissatisfied in anyway he/she can require us to review the way the request was handled or the decision reached.
5. Whenever we reply to a request for information a copy of this Requirement for Review/Representation Procedure must accompany the response. The response must also explain to the applicant their right to seek a review of any decision taken and the subsequent right of appeal to the Scottish Information Commissioner and the Courts (see paragraphs 14 to 16 below).

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<sup>1</sup> Reference to an individual is to any person or organisation that makes a request for information.

<sup>2</sup> For our procedure under the Environmental Information (Scotland) Regulations 2004 see our separate guidance.

## Timescale

6. A requirement for review should be submitted in writing (or other permanent form) within 40 working days of either:-
  - the day the individual actually received a response from us; or
  - the end of the period within which we should have replied to a request.
7. We have the discretion to consider requests for review received beyond this timescale. It would normally be our intention to accept requirements for review outwith the 40 working days, unless there are practical difficulties in doing so e.g. relevant documentation was due for destruction and has been destroyed. It is always in the applicant's interests to submit a review request within the 40 working day period specified.

## Submission of Requirement for Review

8. Where a response is made to a request for information, the response must advise that any request for review is submitted to:-

Sheona C. Hunter  
Proper Officer of Angus Integration Joint Board  
Legal and Democratic Services  
Angus Council  
Angus House  
Orchardbank Business Park  
Forfar  
DD8 1AN

Telephone     01307 476262  
E-mail         [                     ]

9. Should the person making the request submit their requirement for review to another person within our organisation, the recipient must pass it immediately to the Proper Officer of Angus Integration Joint Board.
10. The person seeking a request for review/representation must state their name and an address for correspondence. A statement explaining why the individual feels aggrieved at the decision taken (or the lack of response) by the organisation should accompany any request for review. It is always helpful if the person seeking a review makes their dissatisfaction explicit in what they say to us and clearly sets out the grounds for requesting a review. Where the applicant is seeking further information relating to his/her original request this will normally be treated as a new request.

## Review Procedure

11. The review procedure is designed to be accessible, prompt, fair and impartial. It may result in a decision being made where no decision was made previously, confirmation of the original decision, or the making of a different decision to that originally taken being made. The decision will be binding on the organisation.
12. Requests for review have to be processed swiftly within a maximum timescale of 20 working days. During this timeframe we will review our

previous decision and provide any further information required if the review outcome requires this.

### **Our Timescale**

<b>Event</b>	<b>Action</b>	<b>Day</b>
(a) On receipt of a request.	Send acknowledgement within two working days of receipt.	2
(b) Identify person who was handling request.	Collate relevant information about request and response (including search log).	2
(c) Notify person who was handling request that a review request has been received and provide a copy of statement in support from applicant and seek comments on rationale for decision.	Receive comments from request handler.	2-3
(d) Selection of Review Person.	Chief Officer to identify a senior member of staff with experience in Freedom of Information to conduct review of the decision previously made.	4
(e) Supply all available information to Reviewer.	Proper Officer of Angus Integration Joint Board to check all information is to hand then issue to Reviewer.	5
(f) Undertake Review	Reviewer considers request and response together with terms of review request and prepares a report on findings.	10
(g) Complete and submit review report	Provide final report to Chief Officer who notifies outcome of the review and right of further appeal. Any additional information to be provided is required to be sent by 20 <sup>th</sup> working day	20

13. If it is concluded that the applicant has been unfairly treated, an apology should be offered on behalf of the organisation.

### **Right of Further Appeal**

14. The applicant is to be advised of his/her right to raise the matter further with the Scottish Information Commissioner if he/she remains dissatisfied with the decision of the organisation. The right of appeal is to be exercised in writing (or some other permanent form) by the applicant who must provide an address for correspondence, specify the request for information to which the requirement for review relates and the reason for dissatisfaction. An appeal to the Commissioner must be made within a period of 6 months from the date of any notice on the review request made to us or within 6 months from when a decision should have been notified by us.

15. In advising of this right, the applicant should be given details of the contact address and e-mail address of the Commissioner at:-

Rosemary Agnew  
Scottish Information Commissioner  
Kinburn Castle  
Doubledykes Road  
ST ANDREWS  
Fife KY16 9DS

Tel: 01334 464610

E-Mail: [enquiries@itspublicknowledge.info](mailto:enquiries@itspublicknowledge.info)

16. The applicant should also be advised of their right to make an appeal against any decision by the Scottish Information Commissioner <sup>3</sup> on a point of law to the Court of Session.

## **Assistance to Applicants**

17. Under the spirit of the Freedom of Information (Scotland) Act 2002, the recipient of a request for review should provide assistance, if required, to any applicant who seeks it. He should also ensure that the needs of persons with a disability within the terms of the Equality Act are not unfairly disadvantaged as a consequence of the procedure described above and shall make appropriate adjustments to the procedure where appropriate under the terms of that Act.

## **Review of Requirements for Review and Decisions of the Scottish Information Commissioner**

18. Our internal procedures will provide for decisions on requirements for review and decisions by the Scottish Information Commissioner are reviewed to ensure that Board processes follow best practice in dealing with requests for information under the legislation.

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<sup>3</sup> Under Section 56 of the Act.

[illegible]

**To request a Review please return this form to The Proper Officer of the Angus Integration Joint Board Proper Officer of Angus Integration Joint Board, Legal and Democratic Services, Angus Council, Angus House, Orchardbank Business Park, Forfar, DD8 1AN.**

Information contained in this form (including applicant's name and contact details) will be held by Angus Integration Joint Board on a database and may be processed in accordance with the Data Protection Act 1998 for the purpose of monitoring our compliance with the requirements of the Freedom of Information (Scotland) Act 2002 and the Environmental Information (Scotland) Regulations 2004. By completing this form you consent to our holding this information.

<sup>1</sup> Under the Freedom of Information (Scotland) Act 2002

<sup>2</sup> Under the Environmental Information (Scotland) Regulations 2004



# Freedom of Information – A Summary of your rights

# Introduction

Angus Integration Joint Board has been established to provide for the integration of health and social care. The Board is a Scottish public body separate from NHS Tayside and Angus Council, but closely aligned to them. If you want information about the Health Board or the Council you should contact them direct (contact information is at the end of this leaflet). It is only information that is held by the Integration Board that we can assist with.

The Freedom of Information (Scotland) Act 2002 requires public bodies in Scotland to make information publicly available.

Information about the range of information available from us which we routinely publish is set out in our Publication Scheme. You can download the Publication Scheme by clicking on the link below. It explains how you can access information.

### Link to Publication Scheme

If the information you require is not listed in our Publication Scheme you can still ask us for the information.

Your request must be made in writing or another permanent form, such as email or by Fax. You should include your full name and an address for correspondence. This may be an e-mail address. If possible please also include your telephone number in case we need to contact you about your request. Your request should state as clearly as possible the information you want to receive, including any date ranges.

You can make a request in one of the following ways:

**By Email:** [ ]

**By Post.** Write to:

[ ]

**By Fax:**

If you need help in making your request or, need more information about your rights under freedom of information legislation, then please telephone [ ] so that we can assist you.

## Environmental information

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## Useful Contacts

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Telephone: 01334 464610 Fax: 01334 464611  
E-mail: [enquiries@itspublicknowledge.info](mailto:enquiries@itspublicknowledge.info)

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### Angus Council freedom of information contact

[ ]

Telephone: [ ] · E-mail [ ]

### NHS Tayside freedom of Information contact

[ ]

Telephone: [ ]. E-mail [ ]



## **AGENDA ITEM NO 7**

### **REPORT NO IJB 52/16**

#### **ANGUS HEALTH AND SOCIAL CARE**

#### **INTEGRATION JOINT BOARD – 29 JUNE 2016**

#### **FINANCE MONITORING REPORT – 2015/16 YEAR END**

#### **REPORT BY ALEXANDER BERRY, CHIEF FINANCE OFFICER**

### **ABSTRACT**

This financial year end report summarises the financial position for 2015/16 in advance of the formal devolution of resources to the Angus Integration Joint Board (Angus IJB). This report therefore sets out the year-end financial positions of Angus Community Health Partnership and Adult Care Services provided by Angus Council's People Directorate and is intended to give Board members a final summary regarding 2015/16 budgets and budgetary issues while these resources remained under the management of historic Partners.

The report consolidates information available within NHS Tayside and Angus Council financial systems noting that the 2015/16 financial implications set out in this report are managed discretely in historic Partners' accounts. The report also includes information regarding services that were previously out-with Angus CHP but will be devolved to Integration Joint Board.

Note – For ease of reference the term "Angus CHP" continues to be used in this report.

### **1. RECOMMENDATION**

To note the year-end reported financial position.

### **2. FINANCE MONITORING – FORMER ANGUS CHP AND ADULT CARE SERVICES**

The Financial Report (see Appendix 1) shows the Annual Budgets and projected year end variances for Angus Community Health Partnership and Angus Council Adult Care Services excluding those services deemed to be outwith scope based on expenditure.

#### Angus CHP

The year-end position for Angus CHP Services show an overspend of £1.446m. The figures include a notional Angus share of Continence and Speech Therapy services and not the whole of these services presently managed via Angus CHP. Resources passed to Angus Council (Resource Transfer and Change Fund) are excluded from Angus CHP figures but are included in Adult Services information.

The major features of the year-end figures are as follows:

- Overall position was a year end overspend of c£1.446m after absorbing savings targets of c£1.995m. The £1.446m overspend related to £1.67m of Prescribing overspends offset by c£200k of other underspends.
- In some financial years Angus CHP's financial position has been reliant on non-recurring under spends. This is particularly the case again in 2015/16 with temporary financial benefits from reconfigurations of services in Little Cairnie, Arbroath Infirmary and the current status of Brechin Infirmary. Therefore we can note that the service configuration that has been in place

during 2015/16 has contributed to the financial position of Angus CHP services in this financial year. The impact on the recurring financial position is less clear, due to the temporary nature of some decisions, or linked to decisions already taken regarding future reinvestments.

- Complex Care - As noted previously, Angus CHP continues to be an outlier in the context of other Tayside CHPs in having some of these costs charged to local budgets. Further discussion is still required once Integration has taken effect to normalise these budgets in line with equivalents elsewhere in Tayside.
- Adult Community Nursing – these budgets continue to significantly overspend (c£254k at year end). As part of the IJBs overall financial planning, consideration will need to be given to the underlying resource available for this service in context of Strategic Planning for Older Peoples Services with specific reviews of costs of medication administration, training of District Nurses, activity levels and increasing complexity of patients.
- Brechin General Practice – As the IJB will know, the management arrangements for Brechin General Practice were amended from 1<sup>st</sup> October 2015. While General Practice resources are generally financially managed on a Tayside basis, the situation for Brechin was revised from 1<sup>st</sup> October 2015 with those resources forming part of the Angus Primary Care budgets for 2015/16.
- Prescribing – While earlier in the year, year-end Prescribing projections had been for a c£1.3m overspend, by January accounts this had weakened to a forecast overspend of c£1.6m. The final figures were for an overspend of £1.67m. – albeit this is still reliant on estimates for February and March spend. The year end overspend reflects both growth in numbers of prescribed items being higher than anticipated and unit prices being above the budgeted level and an under delivery of recurring savings targets. Therefore, while there has been an ongoing Prescribing action plan to address the overspending position only, this has not had a visible impact on the overall Prescribing financial position. This remains an area of material risk for the IJB in the year to come.
- General Medical Services (GMS) – The Due Diligence process noted a number of GMS related cost pressures. However at the year end a combination of one-off factors resulted in a small year end under spend. Those one off factors (including lower than expected costs of recruitment of Retainer GPs, GP maternity cover and GP Seniority payments) are not assumed to be a permanent feature of GMS budgets and the underlying cost pressures will, in all probability, remain a factor in 2016/17.
- Savings Targets (2014/15) – As reflected in the Due Diligence process Angus CHP had an unmet savings target carried forward from 2014/15 of £351k. This has a direct impact on the year end position for 2015/16 but has been addressed in the budget setting process for 2016/17.
- Savings Targets (2015/16) – Angus CHP services (excluding Prescribing) had a devolved 2015/16 savings target of £1085k. While progress was made in identifying in year savings, there was limited progress in identifying recurring savings delivery against this target. At the year-end under 15% of this target has been identified on a recurring basis. This has had an effect on the budget setting discussions with NHS Tayside where NHS Tayside's unmet savings from previous years (and other legacy issues) have been a factor in deriving the 2016/17 recurring savings percentage of 5.5%.

For 2015/16, Angus CHP finances were managed within the overall level of financial resources available to NHS Tayside. NHS Tayside's financial position for 2015/16 is under significant pressure. This is partly attributable to an inability to deliver recurring savings in previous years. That is a situation that is also evident within Angus CHP Services. NHS Tayside has instigated a Transformation Programme intended to assist local Health Services improve overall financial performance.

#### Angus Council Adult Services Division

The projected financial position for Angus Council's in scope services based on the 2015/16 draft final accounts presented to Angus Council committee in June 2016 shows a year end overspend of £305k.

There are a number of over and under spends but the table below highlights the significant main variances which contributed to the projected overspend along with a short explanation as to why these variances are occurring. It should be noted that the headings used in this joint report may not be wholly consistent with the terms used in the local authority report but seeks to adopt a consistent reporting format.

<b>Service</b>	<b>Projected Over/(Under) Spend (£000)</b>	<b>Explanation</b>
<b><i>Older People Services</i></b>		
Older People Home Care	(597)	This is mainly due to staff vacancies in the Home Care teams. This is offset by an increase in demand for care at home from external providers and direct payments (see Older People Care & Assessment).
Older People Enablement	(195)	This is income from the Change Fund / Integrated Care Fund. This underspend is offset by the projected overspend within Older People Care and Assessment.
Older People Residential	645	This is due to demand for care home places not reducing as anticipated thus increasing the third party payments to service providers.
Older People Care & Assessment	949	This is due to increased demand for care at home which is provided by an external provider and an increase in direct payments.
Older People Care Homes	(314)	This underspend is mainly due to staff vacancies.
Other	(199)	Various underspends.
<b>Sub-total Older People</b>	<b>289</b>	
<b><i>Mental Health</i></b>	<b>7</b>	n/a
<b><i>Learning Disabilities</i></b>	<b>486</b>	Increase in cost of care packages as well as an increase in demand leading to an increase in third party payments.
<b><i>Physical Disabilities</i></b>	<b>84</b>	n/a
<b><i>Substance Misuse</i></b>	<b>(3)</b>	n/a
<b><i>Planning &amp; Management</i></b>		
Social Work Management / Finance / Strategy / Supp Services (inc Central recharge)& Carers Strategy	(480)	This is primarily down to an underspend in central support (£476k).
Accumulation of Other Minor Over/(Under) spends	(78)	Series of other minor variances.
<b>Total Reported Over / (Under) Spend</b>	<b>305</b>	

Adult Services delivered an outturn of £305k (overspend) in respect of the 2014/15 financial year.

The service is facing ongoing budget pressures within the Learning Disabilities service as a result of the increased demands on the service to accommodate new service users. In addition Adult Services faced increased costs from third party providers as a result of an employment tribunal ruling in relation to shift payments for care workers. The position was augmented with one-off costs attributable to the cessation of the home care service.

To mitigate the pressures being faced work continues to deliver the agreed savings plans. This will go some way to addressing service spend position.

The strategic approach to delivering sustainable savings includes working with the Council's partner EY. Specifically this includes the Help to Live at Home project which continues to look at residential care and care at home with a view to changing the delivery models for these services. Savings in this particular strand of work will deliver tangible savings in 2016/17 and are reflected in the budget settlement between Angus IJB and Angus Council.

Moving forward the impact of the living wage is currently being quantified and the board will be updated in due course as to its financial impact.

The last reported outturn presented at the Angus Health and Social Care committee on 6 January 2016, suggested a projected outturn of £940k (overspend). This was based on information available at October 2015. The movement of £635k to £304k can be in part attributed to an improved methodology introduced in February 2016 for more accurately determining third party costs. This improved system determined that third party costs would be circa £435k below that previously estimated. This position was further improved as a result additional income of circa £200k.

### **3. FINANCE MONITORING – NHS SERVICES OUTWITH ANGUS CHP**

The services that will be devolved to all Tayside IJBs have been described in the approved Integration Schemes. This notes that many Health services that are currently managed out-with Angus CHP will migrate into Angus IJB from 1<sup>st</sup> April 2016. Some will be managed directly in Angus IJB while others will be hosted in another IJB on behalf of Angus IJB. Appendix 2 describes the financial position for many of these services to be managed out-with Angus IJB. This information is shown for Tayside as a whole for the following reasons:-

- Information available to the IJB is currently limited to the information that exists in NHS Tayside reporting systems.
- There were still, at March 2016, a number of significant details that need to be resolved regarding hosting arrangements.

The information reflected in Appendix 2 covers services presently managed through NHS Tayside's Mental Health and Learning Disability Directorate and NHS Tayside's Communities Directorate. It does not include services that are hosted in other CHPs on behalf of all Tayside CHPs. Angus IJB will only be accountable for c27% of these overall resources.

#### Mental Health and Learning Disability Directorate

This information reflects 2015/16 management structures within this Directorate where a number of Tayside services were previously (until 2013/14) managed via Angus CHP. In future many of these In Patient services will be hosted in Perth & Kinross IJB. The significant risks were set out in Due Diligence papers and this correlates with the overspending areas at the year-end including Learning Disability Services and General Adult Psychiatry Medical Staffing. Mental Health Services also had significant shortfalls regarding delivery of recurring savings in 2014/15 and 2015/16. This means these services will also have a 5.5% savings target for the next financial year.

#### Communities Directorate

This information relates to services that are Tayside wide but that will be hosted by Angus CHP in future. While there are a number of operational risks regarding Out of Hours Services, there have been significant financial issues regarding Forensic Medical Services. These have mainly related to recruitment issues in 2015/16. The service is working hard to resolve those staffing issues but this will remain an area of financial risk going forward.

#### **4. PARTNERSHIP FORUM**

For information, there is an expectation that Finance reporting information will be shared with local Health and Social Care Staff Partnership Forums. The intention is that the Finance Monitoring reports issued to Angus IJB Board will be shared at the next available Angus Health and Social Care Integration Staff Partnership Forum.

#### **5. PARTNERSHIP FUNDS**

Since the last meeting of the IJB Board, plans regarding Partnership Funds (IJB Board paper 40.16) have been shared with the Angus Strategic Planning Group (SPG) and the role that group will fulfil in reporting on utilisation of Partnership Funds to the Board has been set out.

**Alexander Berry**  
**Chief Finance Officer**  
**June 2016**

**Appendix 1 – Angus CHP and Adult Services – Financial Monitoring Report 2015-16 (Final Position)**

**Appendix 2 – Tayside Mental Health & Learning Disability – Financial Report to March 2016**



Angus CHP and Adult Services - Financial Monitoring Report 2015-16 (FINAL POSITION)						
	Angus Council		NHST Angus CHP		Partnership Accounting	
	Annual Budget	Projected Over / (Under)	Annual Budget	Projected Over / (Under)	Annual Budget	Projected Over / (Under)
	£,000	£,000	£,000	£,000	£,000	£,000
<b>1 Older Peoples Services</b>						
Psychiatry Of Old Age			4,916	(290)	4,916	(290)
Medicine For The Elderly			3,267	59	3,267	59
Community Hospitals			3,984	(111)	3,984	(111)
Minor Injuries / O.O.H			2,001	(69)	2,001	(69)
Palliative Care			315	(22)	315	(22)
Joint Community Loan Store			166	(22)	166	(22)
Community Nursing			3,378	254	3,378	254
Enhanced Community Support			596	(45)	596	(45)
OP Home Care	9,792	(597)			9,792	(597)
OP Enablement Services	1,496	(195)			1,496	(195)
OP Sheltered Housing	1,568	(166)			1,568	(166)
OP Residential	17,090	645			17,090	645
OP Care & Assessment	(4,837)	949			(4,837)	949
OP Care Homes	4,723	(314)			4,723	(314)
OP Day Care	931	(51)			931	(51)
OP Community Mental Health	440	18			440	18
<b>Older Peoples Services / Community Medicine &amp; Rehabilitation</b>	<b>31,203</b>	<b>289</b>	<b>18,622</b>	<b>(246)</b>	<b>49,825</b>	<b>43</b>
<b>2 Mental Health</b>						
MH Residential	38	92			38	92
MH Care & Support	840	(43)			840	(43)
MH Management & Support	459	(44)			459	(44)
<b>Mental Health</b>	<b>1,337</b>	<b>7</b>	<b>0</b>	<b>0</b>	<b>1,337</b>	<b>6</b>
<b>3 Learning Disabilities</b>						
LD Care and Assessment	3,282	387			3,282	387
LD Day Care	2,344	142			2,344	142
LD Residential	4,226	11			4,226	11
LD Day Ops / Enabling Services	0	0			0	0
LD Management & Support	240	(54)			240	(54)
<b>Learning Disability</b>	<b>10,092</b>	<b>486</b>	<b>0</b>	<b>0</b>	<b>10,092</b>	<b>486</b>
<b>4 Physical Disabilities</b>						
PD Day Care	1,660	8			1,660	8
PD Care & Assessment	10	45			10	45
PD Management & Support	1,273	31			1,273	31
<b>Physical Disabilities</b>	<b>2,943</b>	<b>84</b>	<b>0</b>	<b>0</b>	<b>2,943</b>	<b>84</b>
<b>5 Substance Misuse</b>						
SM Drugs & Alcohol (AIDS/HIV)	22	(1)			22	(1)
SM Drugs & Alcohol	0	(19)			0	(19)
SM Alcohol & Drug Partnership	61	(13)			61	(13)
SM Assessment & Management of Care	409	30			409	30
<b>Substance Misuse</b>	<b>492</b>	<b>(3)</b>	<b>0</b>	<b>0</b>	<b>492</b>	<b>(2)</b>
<b>6 Community Services / AHP / General Adults Services</b>						
Physiotherapy			1,475	(5)	1,475	(5)
Occupational Therapy			688	(52)	688	(52)
Speech Therapy (Tayside)			335	7	335	7
Anti-Coagulation			292	(1)	292	(1)
Primary Care			472	(15)	472	(15)
Health Improvement			91	3	91	3
<b>Community Services / AHP</b>	<b>0</b>	<b>0</b>	<b>3,353</b>	<b>(63)</b>	<b>3,353</b>	<b>(63)</b>
<b>7 Other Services</b>						
Complex Care			26	(1)	26	(1)
Tayside Continence Service			489	37	489	37
Homelessness	854	(78)			854	(78)
CJS					0	0
Welfare Rights					0	0
<b>Other Clinical Services</b>	<b>854</b>	<b>(78)</b>	<b>515</b>	<b>36</b>	<b>1,369</b>	<b>(42)</b>
<b>8 Planning / Management Support</b>						
Centrally Managed Budget			240	(240)	240	(240)
C.H.P. Management			644	(27)	644	(27)
Grants Voluntary Bodies Angus			66	3	66	3
Carers Strategy - Angus			103	(0)	103	(0)
Savings Targets			(351)	351	(351)	351
Assumed In Year Improvement			0	0	0	0
Social Work Management / Finance / Strategy / Support						
Services (inc central recharges)	1,651	(480)			1,651	(480)
<b>Planning / Management Support</b>	<b>1,651</b>	<b>(480)</b>	<b>702</b>	<b>87</b>	<b>2,354</b>	<b>(393)</b>
<b>Total excluding Other Areas and Other Contractors</b>	<b>48,572</b>	<b>305</b>	<b>23,193</b>	<b>(186)</b>	<b>71,765</b>	<b>119</b>
<b>Children's Services</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Other Contractors</b>						
Prescribing (FHS)			20,955	1,670	20,955	1,670
General Medical Services			16,079	(10)	16,079	(10)
FHS - Cash Limited & Non Cash Limited			11,359	(28)	11,359	(28)
<b>Grand Total</b>	<b>48,572</b>	<b>305</b>	<b>71,586</b>	<b>1,446</b>	<b>120,158</b>	<b>1,752</b>



**Tayside Mental Health & Learning Disability - Finance Report to March 2016**

	Annual Budget	Over/Under(-) Spend
	£	£
General Adult Psychiatry	4732886	170317
Learning Disability (Tayside)	6110414	731137
Learning Disability (Angus)	458607	-46697
T.A.P.S.	1418463	-5378
Drug Problem Services	4190844	-150060
Harm Reduction	0	0
Clinical Psychology	631538	-12937
<b>Angus Integ Mental Health</b>	<b>17542752</b>	<b>686383</b>
Dundee Gap Snr Medical	1774164	279409
General Adult Psychiatry	7841288	157747
Psychotherapy (Tayside)	874464	-2341
Psychology	2444462	-326516
Eating Disorders	276445	-12740
<b>Dundee Integ Mental Health</b>	<b>13210823</b>	<b>95559</b>
Learning Disability (Dundee)	1241746	-172537
Learning Disability (Tayside)	640948	5137
<b>Dundee Learning Disability</b>	<b>1882694</b>	<b>-167400</b>
General Adult Psychiatry	6951914	-41469
Psychology	572104	17519
Learning Disability	758906	1762
<b>Perth Integ Mental Health</b>	<b>8282924</b>	<b>-22188</b>
Forensic Service (Tayside)	3554329	-141946
Forensic - Medium Secure Unit	1331890	-29416
Forensic Project Team	15258	0
<b>Forensic Services</b>	<b>4901477</b>	<b>-171363</b>
Mental Health Projects	121263	8
Medical Training Grades	1071904	123706
Mh & Ld Management	76469	-2538
<b>Mh &amp; Ld Other Services</b>	<b>1269636</b>	<b>121176</b>
<b>Centrally Managed Budget</b>	<b>-474580</b>	<b>474580</b>
<b>Total Hospital &amp; Community Health Services</b>	<b>46615726</b>	<b>1016746</b>

**Communities Directorate - Finance Report to March 2016**

	Annual Budget	Over/Under(-) Spend
	£	£
Out Of Hours	6566867	-297917
<b>Out Of Hours</b>	<b>6566867</b>	<b>-297917</b>
Forensic Service	844510	538225
<b>Forensic Service</b>	<b>844510</b>	<b>538225</b>
<b>Total Hospital &amp; Community Health Services</b>	<b>7411377</b>	<b>240308</b>





**ANGUS HEALTH AND SOCIAL CARE**  
**INTEGRATION JOINT BOARD – 29 JUNE 2016**  
**BUDGET AGREEMENT WITH NHS TAYSIDE 2016/17**  
**REPORT BY ALEXANDER BERRY, CHIEF FINANCE OFFICER**

**ABSTRACT**

The purpose of this report is to update the Integration Joint Board (IJB) regarding the status of the Budget Settlement between Angus IJB and NHS Tayside for 2016/17.

**1. RECOMMENDATIONS**

It is recommended that the Integration Joint Board:-

- (i) Formally adopt the proposed devolved budget for local Hospital and Community Health Services for 2016/17, approve the range of proposed savings measures and approve the range of proposed work programmes.
- (ii) Note the risk regarding proposed devolved budgets for services hosted by Angus IJB, still formally adopt the proposed devolved budget for these services for 2016/17, approve the range of proposed savings measures, approves the proposed work programme and shares information with other Tayside IJBs as required.
- (iii) Note the risk regarding proposed devolved budgets for services hosted elsewhere on behalf of Angus IJB, still formally adopt the proposed devolved budget for these services for 2016/17, and consider associated savings proposals at a future IJB Board meeting.
- (iv) Note the significant risk regarding proposed devolved GP Prescribing budgets, still formally adopt these budgets for 2016/17, request updates to each future IJB Board meeting via a Prescribing appendix to the Finance Monitoring report and formally notify NHS Tayside that the IJB recommends the scale of annual devolved GP Prescribing savings targets to be revised in future annual budget setting discussions such that they are commensurate with developed or realistic savings delivery plans.
- (v) Note the risk of total budgets overspending in 2016/17 and consequently inform NHS Tayside of the necessity for Angus IJB to invoke the financial risk sharing arrangements set out in the Integration Scheme whereby overspends on services delivered through NHS Tayside will revert to NHS Tayside at the end of the 2016/17 financial year.
- (vi) Noting the risk of total budgets overspending in 2016/17 and the overall shortfall regarding recurring budgets, request an update report from the Chief Finance Officer regarding delivery of recurring savings and progress towards delivery of future years savings targets at the October 2016 IJB Board meeting.
- (vii) Notes that for recommendations (i) to (iv), references to formally adopting the proposed devolved budget are subject to prior receipt of a satisfactory response from NHS Tayside to the IJB's original budget proposal letter of 24<sup>th</sup> March 2016.
- (viii) Requests that where work programmes have been approved ((i) and (ii) above) then the IJB receives reports back on these work streams as appropriate.
- (ix) Note that the IJB's Chief Finance Officer will request formal meetings with NHS Tayside's Director of Finance to assist future budget discussions.

## **2. BACKGROUND**

- 2.1 At the March 2016 IJB Board meeting (paper 26/16), the IJB received information regarding the proposed budget settlement from NHS Tayside for financial year 2016/17. The IJB agreed to accept this budget proposal in principle, subject to a series of conditions being met by NHS Tayside. A letter was issued to NHS Tayside on 24<sup>th</sup> March 2016 setting out these conditions. NHS Tayside replied on 1<sup>st</sup> April to confirm that “the Board will review and consider the conditions that were set out ...and through consultation with relevant Directors we will look to provide an early response to you.” The IJB’s Chief Finance Officer has enquired with NHS Tayside as to the status of a further NHS Tayside response but has so far not received any further feedback.
- 2.2 The IJB Board requested the Chief Finance Officer and Chief Officer to develop financial recovery plans that set out the actions required to address the financial risks that were inherent in the proposed budgetary settlement. The outcome of that process is included in this paper. The financial recovery plan is set out in the following sections:-
- Devolved savings targets for Local Hospital and Community Services for 2016/17 and beyond.
  - Devolved savings targets for services hosted in Angus IJB on behalf of Tayside IJBs for 2016/17 and beyond.
  - Devolved savings targets for services hosted elsewhere on behalf of Angus IJB for 2016/17 and beyond.
  - GP Prescribing
  - Other Budgetary issues.

## **3. DEVOLVED SAVINGS TARGETS (LOCAL HOSPITAL & COMMUNITY SERVICES) FOR 2016/17 AND BEYOND**

- 3.1 The IJB was allocated an indicative devolved savings target of £1957k against overall Hospital and Community Health budgets of £42.558m. That represented a savings target of 5.5% on relevant budgets with a necessity to ensure budgets did not overspend elsewhere on issues such as supplementary staffing (agency pay or overtime costs). Of the £1957k savings target, £1392k relates to Local Hospital and Community Services.

It is worth noting that although Angus Community Health Partnership (Angus CHP) delivered a near breakeven picture for near-equivalent Hospital and Community Health budgets in 2015/16, much of that financial position was a result of one off factors. In terms of delivering recurring savings, Angus ultimately only delivered c15% of its 2015/16 devolved savings target on a permanent basis.

It is also important to note the NHS Tayside has set up a Transformation Programme designed to help deliver NHS efficiencies across the whole of NHS Tayside for forthcoming years. While the primary responsibility for delivering local health services within agreed budgets lies with Angus IJB, NHS Tayside and Angus IJB need to ensure that the overall NHS Tayside Transformation Programme is of assistance to Angus IJB in delivering services within budget and that NHS Tayside can work productively with Angus IJB to deliver efficiencies through the overall Transformation programme.

Accepting that timescales available to develop financial recovery plans were limited, a group of managers were set challenging targets in terms of identifying and confirming savings options. These are presented in appendix 1, grouped under 2 categories and assessed by savings delivered in 2016/17 and savings delivered on a permanent basis.

- 3.2 Appendix 1 (see column A) sets out the proposed savings delivery plan describing initiatives under two categories as follows:-

### **MORE EFFICIENT WORKING**

This group of savings are generally intended to have minimal impact on service delivery and, in these instances, will be achieved with minimal impact on staffing. The intention is for the IJB to maximise this range of savings such that the impact of savings initiatives on other services is reduced. The proposals listed have all been discussed with Service Management and are

considered to be low risk and suitable for adoption. Some of the proposals have increased savings on a full year basis.

## BUDGETARY MANAGEMENT/BUDGET RE-PROFILING

This range of savings results from revisions to budgetary management. These measures are all deemed to be deliverable on either a temporary (2016/17) or permanent basis. Brief descriptions as follows:-

- (i) Staff Slippage Target – Angus CHP’s budgetary framework historically had included low levels of staff slippage (or vacancy factor), but in 2015/16 staffing levels were 4% below underlying budgets. While some of the reasons for that are addressed in other areas of this report, it is now recommended that Angus IJB (NHS Services) adopt a consistent, permanent 1% staff slippage target. Service Managers will be expected to contain this within overall budgets. The net total saving is after allowing for small level of existing staff slippage (vacancy factor) targets. Staff slippage targets are commonplace in Adult Services budgetary arrangements. Given historic levels of staff slippage it is anticipated this measure will not have a major impact on service delivery.
- (ii) Re-profile Development Funds – This proposal involves some of the Partnership’s “Partnership” funds containing spend for a small number of projects for longer than had previously been anticipated. This releases historic resources to offset savings targets.
- (iii) Temporarily Non-operational Services – During 2015/16 some Angus CHP’s services were temporarily non-operational. Assumptions on this matter have an impact on the IJBs financial forecast for 2016/17 and at the moment it is assumed that the status quo will remain for the duration of this financial year regarding services currently non-operational. A review will be undertaken of the pathways of care for patients who historically accessed these services.
- (iv) Embed Previous Under spends – NHS Tayside’s proposed devolved budget to Angus IJB was on the basis that a proportion of previous year under spends could be sustained on a permanent basis. Within Angus CHP, both Medicine for the Elderly and Psychiatry of Old Age were under spent in 2015/16. Service Managers have now agreed to lower recurring budgets and this releases budgetary resource to offset savings targets while retaining a level of service flexibility.

3.3 From Appendix 1 (see column A), it can be seen that reasonable progress has been made so far in identifying the required level of savings for 2016/17. This, along with further efficiencies identified during the year, should give the IJB the required re-assurance regarding the adequacy of these and it is therefore recommended that the IJB adopt the proposed devolved budgets for 2016/17 for local Hospital and Community Health Services and agree to the described range of 2016/17 savings measures and, where applicable, their impact on a permanent basis.

3.4 However, it can also be seen from Appendix 1 (see column E) that the position on a recurring basis (e.g. in 2017/18) overall is weaker than 2016/17 itself. This is consistent with patterns that have emerged in NHS Tayside over recent years and reflects a high reliance on savings from temporarily non-operational services in 2016/17.

After allowing for measures quantified, Appendix 1 shows that there is a shortfall on 2016/17 savings before further savings targets are considered for 2017/18. It is therefore important that Angus IJB Board now commits itself to a number of reviews that will deliver the required level of permanent savings to both close out the recurring savings shortfall against 2016/17 targets and allows the IJB to build towards a savings platform of delivery for 2017/18.

3.5 While it is difficult to determine likely levels of additional savings in future years regarding NHS related funding, Angus IJB’s Strategic Plan quoted additional savings of 1.3% in 2017/18 and a further 1.2% in 2018/19. In order to deliver increased levels of recurring savings, ensure the IJB lives within overall financial resources and deliver service improvement in line with the agreed local Strategic Plan, the IJB needs to consider and approve a series of work programmes that should now be progressed. The proposed areas for consideration include:-

- (i) Review Transport and Travel costs including reviewing links between Health and Social Care and the framework for Volunteer Drivers.
- (ii) Review non-GP Prescribing (e.g. Hospital and Community Prescribing).

- (iii) Review the implementation of locality and community support services, their impact on Delayed Discharge and demand for inpatient hospital services.
- (iv) Review IJB Management costs and further review IJB Administration costs.
- (v) Review the provision of local Minor Injury and Illness Services alongside that of core GP Out of Hours Services.
- (vi) Review Occupational Therapy Services to maximise the benefits of integrated working across Health and Social care staff. (vii) Reviewing Adult Community Nursing Services including the provision of Medication Administration.

A number of these programmes will naturally be linked to NHS Tayside Transformation programme to ensure consistency of approach and to enable Angus IJB to access the corporate support services linked to the Transformation Board efficiently.

It is recommended that the IJB Board specifically approve this range of work programmes, which will be taken forward in conjunction with localities, for early progression. Other efficiency programmes will require to be introduced either via further reports to the IJB Board or via decisions made at the IJB's management forums to ensure the IJB can identify the required level of full year savings to meet the balance of 2016/17 targets and 2017/18 targets.

#### **4 DEVOLVED SAVINGS TARGETS (SERVICES HOSTED BY ANGUS IJB ON BEHALF OF OTHER TAYSIDE IJBs) FOR 2016/17 AND BEYOND**

- 4.1 Of the £42.558m of budgets for services reflected in the IJB's budgetary settlement with NHS Tayside, approximately £10m are for services hosted in Angus IJB on behalf of all Tayside's IJBs. While ultimately the budget, spend, variance and delivery of savings regarding these budgets is apportioned across the 3 IJBs, Angus IJB has the lead responsibility to set out financial plans and savings proposals. If Angus IJB Board approves the proposals set out in appendix 1 (see column B and F) regarding hosted services, these proposals will then be shared with other IJBs via Chief Officer networks for formal collective ratification.

The hosted Services proposals set out in Appendix 1 are, as per 3.2, grouped into two categories – More Efficient Working and Budget Management / Budget Re-profiling.

For items listed under "More Efficient Working", these have been reviewed as per 3.2, are generally intended to have minimal impact on service delivery and, in these instances, will be achieved with minimal impact on staffing. The proposals listed have all been discussed with Service Management and are considered to be low risk and suitable for adoption. Some of the proposals have increased savings on a full year basis.

The single item listed under "Budgetary Management / Budget Re-Profiling", is regarding Out of Hours Staff Slippage targets. This service did have a level of unfilled GP shifts during 2015/16. It is anticipated that there will always be an element of unfilled shifts within Out of Hours arrangements however the planning assumption is these will be at a level of c2%, much lower than the levels seen in 2015/16 (i.e. funds remain in place to support a higher percentage of shifts being filled in 2016/17 than were filled in 2015/16). It is important to note that nationally Out of Hours services are awaiting details of the national implementation plan for Out of Hours services and this will have an impact on the future configuration of the service. However these budgetary proposals are being put forward in the context of the overall budget settlement with NHS Tayside and knowing that the service awaits the national implementation plan.

- 4.2 At this stage it appears that these budgets are unable to identify their full share of 2016/17 or recurring savings targets with only 42% of targets being identified for 2016/17 and only 58% identified recurrently. The Angus share of these budgets is 27.1%.
- 4.3 Angus IJB, as the hosting IJB, now needs to further develop plans to deliver savings regarding these services. As per section 3.5 above it is now recommended that the Angus IJB Board agree work programmes for future development. For Services hosted in Angus the proposed work programmes include:-
- (i) Reviewing Tayside Out of Hours Nursing Services.
- 4.4 It is important to note a Due Diligence risk was formally documented regarding the Forensic Medical Services (a service hosted in Angus IJB). This related to medical staffing. The risks previously described still exist and service management are actively seeking to manage the

medical staffing situation and contain overall costs. However potential overspends could be c£500k in 2016/17.

- 4.5 Noting the partial progress with delivering savings, and the unresolved risks regarding Forensic Medical Services, it is not possible to confirm that these budgets for services hosted in Angus will be adequate in 2016/17. However it is suggested that the IJB adopt these budgets for 2016/17, agree to the proposed savings, agree to the proposed work programmes and share information with other Tayside IJBs.

In accepting budgets that may well overspend in 2016/17, the IJB Board will need to consider the overall financial position of the IJB's devolved NHS budget.

## **5 DEVOLVED SAVINGS TARGETS (SERVICES HOSTED ELSEWHERE ON BEHALF OF ANGUS IJB) FOR 2016/17 AND BEYOND**

- 5.1 A number of services devolved to IJBs are hosted in Dundee and Perth IJBs on behalf of Angus IJB. The formal arrangements will be set out in the Tayside Hosting Memorandum of Understanding. The net value of services to the Angus population hosted elsewhere is currently estimated at £11.367m. Savings targets of 5.5%, or c£625k, have been devolved to these budgets.

Initial feedback has now been received from Dundee & Perth IJBs as follows:-

Hosted in (IJB)	Dundee	Perth	Total
Angus IJB Apportioned Budgets	£4568k	£6799k	£11367k
Savings Target	£251k	£374k	£625k
Savings Identified (2016/17)	£134k	£228k	£362k
%age of Savings Identified (2016/17)	53%	61%	58%
Savings Identified (Permanent)	£80k	£228k	£308k
%age of Savings Identified (Permanent)	32%	61%	49%

The detail of these proposals will be shared with Angus IJB Chief Officer for review and consideration. It is recommended that the Chief Officer is delegated authority to approve submission received from other IJBs where the impact on service delivery is minimal. Where service delivery is affected, then proposals will be require to be considered and formally endorsed at a future IJB Board meeting.

- 5.2 It is important to note that services hosted elsewhere include services such as Palliative Care and Sexual Health Services in Dundee IJB and Mental Health and Learning Disability Services in Perth IJB. Mental Health Services are, in particular, are under review as described in papers to recent Tayside Health Board meetings.

There are some current risks regarding services hosted elsewhere including General Adult Psychiatry and Learning Disability Services with reliance on agency medical staffing a factor within those risks. This will have a material impact of up to £200k per annum on the budgetary performance of the Angus share of these services in 2016/17 and until matters are successfully resolved.

- 5.3 Noting the partial progress with delivering savings, and the risks regarding some of these services, it is not possible to confirm that these budgets for services hosted elsewhere on behalf of Angus IJB will be adequate in 2016/17. However it is suggested that the IJB adopt these budgets for 2016/17, and consider savings proposals for services hosted elsewhere on behalf of Angus IJB at a future IJB Board meeting.

In accepting budgets that may well overspend in 2016/17, the IJB Board will need to consider the overall financial position of the IJB's devolved NHS budget.

## 6. PRESCRIBING RESOURCES

- 6.1 At the time of the IJB Board paper in March 2016, Angus Partnership's Prescribing budget was still subject to confirmation. This budget has now been confirmed via the recently initiated Tayside-wide Prescribing Management Group. The 2016/17 budget is derived from the overall Tayside budget and is:-

IJB GP Prescribing Budgets 2016/17

	Angus	Tayside
	£k	£k
Rollover Budgets from 2015/16		79243
Adjustment for Unmet Savings		3500
NHST 2016/17 Prescribing Growth		2500
NHST 2016/17 Prescribing Savings Target		-4500
Less Prescription for Excellence and SG Adjusts		-358
Total		80385
2016/17 Budget		
GP Prescribing	20145	77154
GPS Others	504	1931
Methadone	231	1300
Total	20880	80385

The overall budget is based on an NRAC (National Resource Allocation Committee) formulae for GP Prescribing and GPS (General Pharmaceutical Services) Others and patient activity for Methadone budgets.

- 6.2 Previous papers to the IJB Board suggested that there was potential for a significant shortfall in 2016/17 based on the above budget if expenditure levels were not reduced. There has been a work plan put together through the Prescribing Support Unit and a work plan has been discussed at both the Realistic Medicine work stream (part of the NHS Tayside Transformation Board) and the Prescribing Management Group (which also feeds into the Transformation Programme). Important components of that work plan include the following:-

- Quality Prescribing Visits – intended to address variation in up to 15 General Practices across Tayside.
- Reviewing centrally negotiated national price changes or rebates.
- Reviewing the utilisation of a range of specific drugs across Tayside.
- Reviewing a range of specific cost issues in prescribing such as Oral Nutritional Supplements, liquid medicines and wound dressings.

- 6.3 Medicines are a significant and increasing area of expenditure for IJBs and Health Boards in NHS Scotland. Added to this are the challenges presented by the current economic climate with tightening financial resources available to deliver current services and respond to the increasing demands for healthcare, including medicines. In line with the NHS Scotland Quality Strategy there is therefore a need to ensure that the most effective medicine is provided to everyone who will benefit and that the treatment delivers best value for the NHS.

There is a plan to continue to embed cost effective prescribing within NHS Tayside over the coming 3-5 years in order to enable positive patient outcomes through the following three overarching objectives shown below:

Objective 1: Improved Information Provision and Analysis  
 Objective 2: Building Capacity and Targeting Resources  
 Objective 3: Integrated Approach

- 6.4 To deliver this a Prescribing Management Group (PMG) jointly Chaired by Associate Medical Director, Access and Associate Medical Director Primary Care has been established at a Tayside

level comprising clinical, financial and managerial input from Clinical Groups and IJBs, supported by corporate Pharmacy and Finance colleagues. The PMG will be supported by Prescribing/medicines forums in each of the partnerships/secondary care. Delivery of actions will be supported by a Prescribing support network

- 6.5 The first meeting of the Prescribing Support Network took place on the 9<sup>th</sup> May 2016 where Pharmacy project facilitators were named against 23 work streams identified under NHS Tayside Realistic Medicine transformation programme to provide a Point of Contact for reporting and project management. Work is now underway to engage with the identified individuals and progress reports on individual work streams will be expected monthly.
- 6.6 Board members will recall that historically Angus CHP had a high level of Prescribing costs based on weighted population. In 2015/16 the cost per population was higher than the Scottish average and above the Tayside average. While there will be many factors that impact on this, the scale of these variances and the fact that Angus CHP was £1.7m overspent on GP Prescribing in 2015/16 suggested this area would be a challenge for the IJB in 2016/17. Following discussion at the Prescribing Management Group at the end of May 2016, it is now estimated that a provisional assessment of the Angus IJB Prescribing overspend for 2016/17 is that it could be c£1.9m overspent after a series of proposed interventions.
- 6.7 This confirms that further work is required to ensure the expenditure on medicines within Angus IJB more closely matches the identified budget for 2016/17. Based on the actions in progress in the plan, while the 2016/17 overspend might be c£1.9m, the recurring overspend would be lower at £1.7 due to the longer term effect of some of the measures put in place.

Angus IJB will continue to work with Tayside forums such as the Prescribing Management Group, Prescribing Support Network, the Realistic Medicines programme and with localities and individual General Practices to increase the understanding regarding Prescribing costs and to assist bring this overall budget back towards balance. The expectation is that a dedicated group will be set up locally and given a specific remit for agreeing, implementing and monitoring a prescribing action plan in line with local and regional priorities.

- 6.8 Noting the above it is not possible to confirm that Angus IJB's GP Prescribing budgets will be adequate for 2016/17. However, in the context of the overall resources available to NHS Tayside to devolve to Angus IJB, and in the context of Angus IJB GP Prescribing spend being above the national average, the IJB may wish to adopt these budgets at the proposed level for 2016/17 only. Given the scale of the financial risk regarding Prescribing, it is suggested that the IJB Board request a Prescribing update be provided to all IJB Board meetings as an appendix to the regular Finance Monitoring Reports. Given the potential shortfalls in Prescribing savings delivery, the IJB may wish to formally notify NHS Tayside that it recommends the scale of annual devolved GP Prescribing savings targets to be revised in future annual budget setting discussions such that they are commensurate with developed or realistic savings delivery plans.

In accepting budgets that will probably overspend in 2016/17, the IJB Board will need to consider the overall financial position of the IJB's devolved NHS budget

## **7. OTHER BUDGETARY ISSUES**

- 7.1 There are a number of other budgetary issues that require to be noted as part of this paper. These are described below.

### **7.2 Large Hospitals**

While budgets for Large Hospital have now been agreed (as per March 2016 budget setting paper), progress towards developing a forum to discuss these budgets and associated issues has been limited to date to recent discussion at Chief Officer/Chief Finance Officer level. This remains an area for further development and updates will be provided to the Board in due course.

### **7.3 Risks Identified in Due Diligence**

IJB report 27/16 referred to a number of risks identified in the Due Diligence process undertaken in 2015/16 in advance of formal integration. The risks relevant to NHS services are reconsidered in appendix 2. Many of these remain unresolved and a number are significant, will form part of future discussions with NHS Tayside and will impact on service decisions during 2016/17. However in the context of the overall risks facing Angus IJB's partners (Angus Council and NHS Tayside) and the level of change and risk in public services generally, it could be suggested that

while these risks are significant they are not necessarily unusual for an organisation such as an Integration Joint Board.

Appendix 2 notes a specific risk regarding “Other Services” and the impact of an Outcomes Framework review on Forensic Medical Services funding. This risk reflects a lack of clarity generally regarding the NHS Tayside funding related to the Scottish Government “Outcomes Framework”. This has an impact on a number of services hosted elsewhere on behalf of Angus. IJB Risks regarding unmet savings are addressed elsewhere in this report and risks regarding workforce will be reflected in separate reports to the IJB.

Beyond the risks originally noted in the Due Diligence exercise it is important to note there is an emerging Partnership risk (noted in paper 40/16 “Partnership Funds” at May 2016 IJB Board) regarding the status of Integrated Care Fund funding beyond 2017/18. This would ultimately have an impact on NHS services within Angus IJB.

#### 7.4 Unresolved Budget Reconfiguration Issues

There remain a small number of unresolved budget reconfiguration issues that effect the overall scope and scale of Angus IJB’s devolved budgets. These issues were unresolved at March 2016 but should generally be resolvable through management channels. Examples include confirmation of Pharmacy budgets, clarification regarding treatment of some GP budgets, confirmation of some management resources and confirmation of treatment of some hosted service budgets. There may be some issues that do effect the financial position of Angus IJB and these would be conveyed to the IJB Board in due course if material.

#### 7.5 Hosting Arrangements

While Angus IJB’s formal budget reflects hosting arrangements between the three Tayside IJBs, the hosting arrangement itself still needs to be finalised and formally ratified on a tri-partite basis.

### 8. CONCLUSIONS

- 8.1 While it would appear that savings measures out forward for approval would be sufficient to forecast that Angus IJBs Local Hospital and Community Health budgets will be adequate in 2016/17, this cannot be said for budgets for services hosted in Angus IJB on behalf of Tayside IJBs, budgets hosted elsewhere on behalf of Angus IJB or Angus IJB’s GP Prescribing budgets.

However, given the overall resources available to NHS Tayside, it is generally recommended that after considering the financial recovery plan, the IJB approves the proposals set out in this document and subsequently formally adopts the 2016/17 budgets set out in the Angus IJB Board paper 26/16 subject to any further clarifications.

In adopting this set of proposed 2016/17 budgets, the IJB will acknowledge the risk of budgets overspending in 2016/17. Consequently Angus IJB will require to inform NHS Tayside of the potential for Angus IJB to overspend in 2016/17 and the necessity for Angus IJB to invoke the financial risk sharing arrangements set out in the Integration Scheme whereby overspends on services delivered through NHS Tayside will revert to NHS Tayside at the end of the 2016/17 financial year.

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**June 2016**

Appendix 1 – Delivering 2016/17 Savings Targets  
Appendix 2 – Risks Relevant to NHS Services

Angus - Delivering 2016/17 Savings Targets										
	2016/17 (In Year Savings)					Full Year				
	Local Hospital & Community Health Services	Services Hosted by Angus IJB	Services Hosted Elsewhere on Behalf of Angus IJB	Prescribing	Total	Local Hospital & Community Health Services	Services Hosted by Angus IJB	Services Hosted Elsewhere on Behalf of Angus IJB	Prescribing	Total
COLUMN:	A	B	C	D	E	F	G	H	I	J
	£K	£K	£K	£K	£K	£K	£K	£K	£K	£K
Savings Targets - All Cash Releasing (2016/17)	1392	153	625	1175	3345	1392	153	625	1175	3345
<u>SAVINGS DELIVERY PLAN</u>										
<u>MORE EFFICIENT WORKING</u>										
Administration Review	105	0	0	0	105	147	0	0	0	147
Management Review	57	0	0	0	57	57	0	0	0	57
Procurement - Continence	0	53	0	0	53	0	106	0	0	106
Service Review - Allied Health Professions	26	17	0	0	43	26	17	0	0	43
Service Review - Out of Hours	0	31	0	0	31	0	61	0	0	61
Service Review -Mental Health	53	0	0	0	53	53	0	0	0	53
<u>BUDGETARY MANAGEMENT / BUDGET RE-PROFILING</u>										
Staff Slippage across (1% except Out of Hours 2%)	174	134	0	0	308	174	134	0	0	308
Re-profile Development Funds	0	0	0	0	0	108	0	0	0	108
Temporarily Non-operational Services	800	0	0	0	800	0	0	0	0	0
Embed Previous Under spends - Medicine for the Elderly	27	0	0	0	27	54	0	0	0	54
Embed Previous Under spends - Psychiatry of Old Age	150	0	0	0	150	150	0	0	0	150
<u>FHS/GP Prescribing</u>										
	0	0	0	0	0	0	0	0	0	0
Existing Savings Delivery Plans	1392	235	0	0	1627	769	318	0	0	1087
Existing Savings Delivery Plans (Adjusted for Hosting)	1392	64	362	0	1818	769	86	309	0	1164
<u>Shortfall at June 2016</u>										
	0	89	263	1175	1527	623	67	316	1175	2181
Existing Savings Delivery Plans (Adjusted for Hosting)	100%	42%	58%	0%	54%	55%	56%	49%	0%	35%
Shortfall	0%	58%	42%	100%	46%	45%	44%	51%	100%	65%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



Annex	Category of Risk	Service	Value	Comment	(March)Current Status for 2016/17	Status at June 2016
<b>Remaining Risks</b>						
Mental Health	Cost Pressure	Resettlement costs associated with Mental Health and Learning Disability In Patients	Angus share of £1.52m (Medium Term)	Consideration required through strategic planning mechanisms.	Not reflected in proposals – to be considered further with NHST. May require review of In Patients Services. LD Proposals being developed via Mental Health Improvement Programme.	This remains work in progress and individual developments will be separately brought to the IJB.
Other Services (Annex I)	Cost Pressure	Forensic Medical Services - Medical Staffing issues	Angus share of £230k	Pressures related to recruitment issues.	May be time limited and may be resolved through operational reviews. Not reflect in budget proposals.	At the start of 16/17 new medical workforce plans are being put into place with intention of reducing overall financial risks but overspends could be c£500k.
Other Services (Annex I)	Cost Pressure	Forensic Medical Services - NRAC reduction of annual funding	Angus share of £70k	Potential SG Funding Issue	Not reflected in budget proposals. NHST to lead review Outcomes framework funding.	This matter is unresolved and rests with NHST. If matters do not resolve themselves satisfactorily this will be conveyed to the IJB Board.
NHST Services	Other	Impact of NHS Tayside Financial position on Partnership	Future Year Impact	To be confirmed in future discussion with NHST	This issue continues to be managed via NHST and will influence Angus IJB's overall financial planning for future years.	A mechanism for information sharing will be put in place for NHS Tayside overall financial position including confirmation of the scale of additional cost pressures that NHST is committed too.
<b>Risks to Note</b>						
Ex Angus CHP and Mental Health Resources	Cost Pressure	Review of Nurse staffing, skill mix and service delivery models.	TBC	NHST / CHP to review further.	Not reflected but assumed no further implementation. Needs to be agreed by Director of Nursing.	This matter is still current and the IJB will be informed of any issues should they not be containable.
<b>New / Emerging Replacement Risks</b>						
Ex CHP Resources	New - Cost Pressure	Additional Supplies cost transferring from Acute to Community	£12k	The IJB will discuss issue in conjunction with Directorate of Nursing and Acute Services. Tayside-wide SBAR completed.		This matter remains unresolved.
NHST Resources	New - Cost Pressures	Potential reduction of historic funding (e.g. Re Outcomes Framework, ADPs).	Not known – but High Risk	This is an area of increasing risk to AIJB and NHST generally due to the recent Scottish Government Budget.		This matter is unresolved and rests with NHST. If matters do not resolve themselves satisfactorily this will be conveyed to the IJB Board.





## AGENDA ITEM NO 9

### REPORT NO IJB 54/16

**ANGUS HEALTH AND SOCIAL CARE**  
**INTEGRATION JOINT BOARD – 29 JUNE 2016**  
**ANGUS MENTAL HEALTH SERVICES**  
**REPORT BY VICKY IRONS, CHIEF OFFICER**

#### **ABSTRACT**

To advise Integration Joint Board members of current community mental health developments and the outcome of NHS Tayside Board meeting regarding the future of Tayside Mental Health Inpatient Services.

*Our vision is that by 2020 everyone is able to live longer healthier lives at home or in a homely setting. We will have a healthcare system where we have integrated health and social care, a focus on prevention, anticipation and supported self-management. When hospital treatment is required and cannot be provided in a community setting, day case treatment will be the norm. Whatever the setting, care will be provided to the highest standards of quality and safety, with the person at the centre of all decisions. There will be a focus on ensuring that people get back to their home or community environment as soon as appropriate, with minimal risk of re-admission. "The 2020 Vision." Scottish Government 2010.*

#### **1. RECOMMENDATION**

It is recommended that the Integration Joint Board:

- (i) note the contents of this report.

#### **2. BACKGROUND**

The Mental Health Improvement Programme (MHIP) was established in 2013 with key aims for service delivery:

- to improve pathways of care for patients to support delivery of safe and effective person centred care;
- to optimise the most effective and efficient use of our hospital based estate and
- identify resources to continue to support and sustain for the future, the delivery of good quality, safe and effective services for patients.

Clinicians and professional leads in mental health have been involved in a review by NHS Tayside to deliver sustainable, safe and effective mental health services across Angus, Dundee and Perth and Kinross. The main challenge to Tayside's Mental Health future service model is professional workforce availability. Current services have difficulty recruiting both senior and junior medical staff. The age profile of nursing staff indicate at least 50% will be able to retire in the next 10 years.

### 3. CURRENT POSITION

#### Inpatient Services

A number of inpatient services are provided on one site delivering to the entire Tayside population. These include:

Child and Adolescent Mental Health Services.  
Intensive Psychiatric Care  
Rehabilitation  
Secure Care  
Substance Misuse  
Learning Disabilities.

General Adult Psychiatry and Old Age Psychiatry Inpatients are provided in Angus Dundee and Perth and Kinross.

Angus CHP opened its 25 bedded inpatient unit, Mulberry in 2011 as a replacement for Sunnyside Royal hospital. This unit provides multidisciplinary acute inpatient care for adults aged 16-65. The unit has run almost constantly at over 80% occupancy. Due to a national shortage of doctors in training, who provide a first level response, it was no longer feasible to provide out of hours emergency assessments in Angus. This transferred to Dundee in August 2015.

In March 2016 NHS Tayside Board:

- Agreed with the clinical advice that a three-site model was not sustainable for Tayside
- Approved the proposal that GAP inpatient services should be provided from two or one locations
- Agreed that an Option Appraisal should be carried out looking at two site and one site service to ascertain the most viable option
- Requested a report be produced on the process to be used for consultation with the Integrated Joint Boards
- Requested a full Business Case was to be drawn together including staffing implications, financial implication, consultation and engagement across NHS Tayside
- Noted the concerns that the clinical and professional leads have identified in terms of sustaining safe and effective General Adult Psychiatry inpatient services on three sites across Tayside

In response to the above, representatives from the three Tayside Health and Social Care Partnerships and the Scottish Health Council met and agreed that a series of workshops would be held in June incorporating an equal three way split between patients/public, clinical staff and service and administration staff. This is consistent with guidance from the Scottish Health Council on participation in option appraisal exercises.

At the first workshop on 20 June, participants will be asked to help describe what future services should look like. This will result in options being developed to provide the services on one site and on two sites in Tayside. Participants will then look at where these options can be provided from a long-list of possible accommodation solutions before reducing this to a short-list, which will reflect what is feasible to be provided in Tayside to ensure that our facilities meet the future service needs of patients and service users. The second workshop on 30 June will involve scoring the options and identifying the preferred service models.

Following the workshops, a Full Business Case will be produced. This will have supporting clinical evidence, data on local populations, a financial evaluation and impact assessments about how any change will affect service users and patients. It will also include the feedback gathered during the whole engagement process.

All this information will be shared with the Integrated Joint Boards in Angus, Dundee and Perth & Kinross and Tayside NHS Board to allow them to make a decision on the preferred model. There will then be a further period of consultation with the public and all our stakeholders.

## **Community Services**

Community Services are delivered in clinics and people's homes in each Angus locality.

As part of the review of mental health services, Angus IJB will consider the joint opportunities created through the integration of local services to provide enhanced home treatment and support, bringing care for mental health in Angus closer to people's homes, creating less dependency on an inpatient admission to gain access to the right care and support. The focus in Angus needs to be the further development of community services, working to an integrated model with all statutory and third sector partners.

Over the last 10 years Angus has an excellent record in developing its Adult Mental Health Services:

- It was one of the first areas in Scotland to integrate its community mental health teams (CMHT). (Appendix 1 describes the conditions managed by a CMHT)
- We have developed Adult Psychological Therapies which deliver clinics in every Angus burgh (see Appendix 1)
- We commission a number of third sector organisations to provide carer support, promote independent advocacy, empower service users in local and strategic planning and deliver employment services for people with mental health conditions.
- We provide specialist very supported accommodation for people with severe and enduring mental health problems.
- We are currently revising our Angus Home Treatment model which will provide intensive interventions within 24 hours of assessment to either prevent hospital admission or allow early supported discharge. Patients will be provided with short term, time limited, intensive care packages within their own homes, 365 days per year, up to twice daily if required. The service will link up with other out of hours services e.g. Dundee/Angus Crisis Team, A&E, MIUs, NHS24, and Community Alarm.

Over the past month we have met with service user groups to involve them in this development which will require further investment in nursing and medical time irrespective of the location of inpatient services.

The progress of this project will be monitored by the Angus Strategic Planning Group.

## **4. CONCLUSIONS**

Service users, staff and Integrated Joint Board Members will be given the opportunity to engage in the option appraisal regarding the future service model of Tayside's inpatient services.

Angus Mental Health Services will continue to develop its community services to provide access to high quality local mental health services closer to patients' homes and to balance the provision of any future model of specialist in-patient in Tayside.

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**June 2016**

**Appendix 1 – Conditions managed by a CMHT**



**Psychological Therapies**

Mild – moderate depression

Bulimia nervosa with no physical complications

Panic disorder

Generalised anxiety disorder

Agoraphobia

Specific phobia

Social phobia

Post-traumatic stress disorder

Obsessive compulsive disorder

Other psychological disorders where the presenting problem is likely to respond to brief psychological treatment

**Multi-Disciplinary Community Mental Health Teams**

Severe and persistent mental disorders with significant effects on day to day functioning. This will predominately be people with psychotic illness such as schizophrenia, bipolar disorder and other types of psychosis.

Other long term non-psychotic disorders which require care and treatment that require a level of support and expertise that cannot be delivered by the primary care team alone.

Any disorder where there is also a significant risk of self harm, harm to others or risk of suicide.  
Severe Personality Disorder where these can be shown to benefit from a care package involving secondary care mental health services.





**ANGUS HEALTH AND SOCIAL CARE**

**INTEGRATION JOINT BOARD – 29 JUNE 2016**

**CLINICAL, CARE AND PROFESSIONAL GOVERNANCE GROUP (CCPGG) UPDATE**

**REPORT BY VICKY IRONS, CHIEF OFFICER**

**ABSTRACT**

This report provides Board members of progress in the reporting of the Clinical, Care and Professional Governance arrangements within the Angus Health & Social Care Partnership (HSCP).

**1.0 RECOMMENDATIONS**

It is recommended that the Integration Joint Board:-

- (i) Approve the agreed process of Clinical Care and Governance within Angus IJB services.
- (ii) Consider the 15 Key Performance Indicator data presented to the Board and provide feedback if the data set presented satisfies the Board Assurance that robust processes are followed to ensure safe and effective care.

**2.0 PROGRESS OF THE CLINICAL, CARE AND PROFESSIONAL GOVERNANCE GROUP**

The group met In May 2016 to agree the following:

**2.1 Governance arrangements**

**2.1.1. Local Service Groups (known as R3)**

Commensurate with the IJB agreed Clinical, Care and Professional Governance Framework 'getting it right for everyone', each service area has identified a full range of key clinical and care governance indicators for their area headed under each of the 6 Domains within the framework.

**6 Domains**

- 1. Information Governance
- 2. Professional Regulation and Workforce Development
- 3. Patient, Service User and Staff Safety
- 4. Patient, Service user and Staff Experience
- 5. Regulation of Quality and Effectiveness of Care
- 6. Promotion of Equality and Social Justice

Each of the local frameworks will be ratified by the Angus CCPGG at the meeting in June 2016. Each identified Service Lead is responsible and accountable for the Clinical Care and Professional Governance arrangements for their Service, ensuring there are robust processes in place to monitor and improve safety and care and the public's experience of our service is the best it can be, ensuring continuous improvement within a culture of accountability, enquiry, and learning.

Each service area will self assess performance against the domains within their local framework and ensure there are regular meetings to discuss in detail, improvement strategies.

- 2.1.2** The local group Lead will attend the Angus CCPGG and exception report at each meeting, on key risks, complaints and themes alongside areas of good practice and improvement. On a scheduled programme (to be decided in June) each service area will present to the Angus CCPGG a full account of the risks and improvement activity within their service.

The Angus CCPGG will meet monthly for the first year until the processes are fully embedded, then bi-monthly.

Key themes and concerns will be discussed at the meeting; if there are areas the group is unable to influence they will be brought to the Executive Management Team for wider discussion. Minutes of the R2 meeting will be discussed at the Angus Executive Management Team meetings.

Due to large amount of audit and improvement data collected at all levels of the organisation, only a small number of key performance indicators have been selected to present to the Board for consideration and approval.

**Key headings – work to date on linking Clinical, Care & Professional Governance to the 6 domains:-**

**Domain 1 - Information Governance**

- Breaches to information governance

**Domain 2 - Professional Regulation and Workforce Development**

- Proportion of care home services rated as 'good' or above by the Care Inspectorate
- Proportion of health reports graded 3 or below

**Domain 3 - Patient, Service User and Staff Safety**

- Number and % of adult protection investigations leading to a plan (under development)
- Number of falls with harm in hospitals per month
- Number of Local Adverse Event Reviews or Incident reviews per month
- Infection control exception report on:-
  - (i) Number of Clostridium Difficile
  - (ii) Number of MRSA
  - (iii) Number of Staphylococcus Aureus Bacteraemia (SAB)

**Domain 4 - Patient, Service user and Staff Experience**

- Percentage of adults receiving any care or support who rate it as excellent or good

**Domain 5 - Regulation of Quality and Effectiveness of Care**

- Number and % of Guardianship held by Chief Social Work Officer (under development)
- Number of grade 3 or 4 avoidable pressure ulcers per month in hospital and home (robust care home data collection to be established)
- Number of complaints
  - (i) Themes
  - (ii) Response within agreed timeframes
- Number of patients per month with unintentional weight loss >10%

Domain 6 - Promotion of Equality and Social Justice

- Number of policy drivers within locality delivery plans which are intended to address issues of social inequality and depravation
- Uptake of substance misuse services in most deprived areas of Angus compared to least deprived areas of Angus
- Reduction in number of emergency admissions to hospital and presentations at Accident and Emergency from the most deprived areas of Angus

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**June 2016**

