

Health and Social Care Integration

Report by Eibhlin McHugh Director of Health and Social Care

1 Purpose of Report

This report summarises the progress made over recent months towards the establishment of a local Health and Social Care Partnership.

2 Background

- 2.1** The Public Bodies (Joint Working) (Scotland) Bill was given royal assent in April 2014. This legislation requires the creation of locally integrated health and social care services for adults either through delegation of functions between Health Boards and Local Authorities or through the establishment of a new Partnership- the “body corporate” model.
- 2.2** Following the publication of Scottish Government's Consultation on Integration of Health and Social Care in the summer 2012, Midlothian Council agreed on the 6th November 2012 to establish a Health and Social Care Partnership- the “body corporate” model- in conjunction with NHS Lothian. Initially it was agreed that this would be on a “Shadow” basis to enable the arrangements to incorporate any new requirements arising from the legislation.
- 2.3** The Government is now preparing regulations and guidance on matters such as membership, powers and proceedings. Draft regulations have recently been disseminated for consultation with the intention of publishing a final set of regulations in November 2014. The deadline for responses to Set 1 of the draft regulations is the 1st August and for Set 2 the deadline is the 18th August. The proposed responses to these two consultation documents will be considered by the Midlothian HSCP Shadow Board.
- 2.4** Following the publication of these regulations each Partnership must produce an Integration Scheme; undertake a period of formal consultation on this Scheme; obtain formal approval from the parent bodies; and then submit to Scottish Government for their approval.
- 2.5** The Government has published guidance about those services which must fall within the scope of partnerships and those which may be included. In relation to health services the scope is more extensive than originally envisaged including functions which are currently managed on a Lothian wide basis. “The policy intention is to ensure that Partnerships have sufficient control to shift the balance of care from acute to community settings” (COSLA Report)

Progress in Midlothian

- 2.6 The Shadow Board continues to meet regularly with a combination of formal meetings and workshops. An induction programme of visits to local services is now underway.
- 2.7 Progress continues to be made on a range of integration work-streams including joint financial resources; risk management; and information systems. An organisational development plan has been developed and the Partnership has been awarded £110,000 for the implementation of this plan. Progress on these matters continues to be informed by work being undertaken at both a national and Lothian-wide level.
- 2.8 Following the publication of the draft regulations work will now begin in earnest to develop the Midlothian Integration Scheme with a view to this being considered in draft form by both the Council and NHS Lothian in October. The Integration Scheme will include reference to the model adopted for integration; the scope of the Partnership; and the proposed approach to locality planning.
- 2.9 Progress is also being made in the development of joint services. The new single service for people with dementia became operational in March 2014. The Rapid Response Service is being strengthened by additional NHS staffing including a consultant geriatrician and advanced nurses. The hours of the service are also being extended to evenings and weekends. These developments will help to reduce further emergency hospital admissions. Further work is underway in considering the viability of joint services in areas such as learning disability and substance misuse-services currently operating on a Lothian-wide basis.

Strategic Commissioning Plan

- 2.10 One major task which must be completed in time for the new HSCP Board going live' in Spring 2015, is the development of a three year health and care Strategic Commissioning Plan. To encourage maximum public debate and staff involvement a *Strategic Issues Paper* has been produced and will be disseminated widely including through the Council website.
- 2.11 In developing this plan it is necessary to define how it will address the needs of localities. The minimum requirement is two localities and given the relatively small size of Midlothian, the Shadow Board is recommending that Midlothian be considered through two localities- 'East' and 'West'- with the boundaries consistent with the existing Neighbourhood Planning areas. This allows consideration of needs at a very local level without being committed to the production of a number of formal commissioning plans which would overstretch the staff capacity available.

3 Report Implications

3.1 Resource

A key dimension of the creation of HSCPs is the development of a joint approach to the use of resources. The Government's guidance on this matter has not yet been finalised while work continues in national working groups to address such technical issues as the treatment of VAT which is different between Councils and the NHS. However at a meeting held on 4th February 2014 the Council agreed in principle to the financial scope of the Partnership and further agreed that the Chief Executive in conjunction with the Leader of the Council be given delegated authority to finalise the scope of Phase 1 services to be delegated to the Board.

3.2 Risk

The Council and Midlothian CHP continue to manage risk according to their own established policies. However Risk Managers in both organisations are helping to identify and document potential risks associated with the creation of this new partnership body.

3.3 Policy

3.3.1 Strategy

The new HSCP is firmly embedded in the Community Planning Partnership with the Shadow Board assuming responsibility for the Adult Health and Care Thematic Group. The Shadow Board will have, as its primary responsibility, the remit of developing and delivering strategic commissioning plans for health and community care. This will include such key policy issues as addressing health inequalities.

3.3.2 Strategic Principles

The importance of involvement of users and carers is reflected in the decision to include representatives on the Shadow Board as well as strengthening the existing arrangements for their involvement in joint planning groups and in service redesign forums.

Prevention is widely acknowledged to be critical to the sustainability of services to older people and this is reflected in the development of local services such as tableware and the establishment of the re-ablement service. Prevention is also threaded through strategies for adult services examples being the healthy reading scheme in mental health and travel training for people with learning disabilities.

3.3.3 Consultation

As this report is essentially for information no consultation was considered necessary. However staff commitment is vital to the success of the organisational changes. In this regard a series of 6 staff engagement events were held for health and social care staff during March and April and this exercise will be repeated again in the autumn.

3.3.4 Equalities

No service changes are proposed in this report so no impact assessment is required. However one of the key objectives of the new Partnership will be to develop more effective ways of addressing the health inequalities that continue to exist in Midlothian.

3.3.5 Sustainability

This report provides an update rather than proposing a new policy or strategy, and therefore does not merit a 'Strategic Environmental Assessment'.

3.4 IT Issues

There are no immediate IT issues arising from this report. However a major piece of work is being undertaken by NHS Lothian and the four Councils to improve the technological capacity to share information.

4 Summary

Progress is being made in establishing the new Health and Social Care Partnership .A project plan is in place to enable the complexity of the programme of change to be managed effectively. The key tasks over the coming months are the development of a Strategic Commissioning Plan; the development of an Integration Scheme; and the implementation of the Organisational Development Plan. These matters will be the subject of future reports to the Council

5 Recommendations

Council is asked to

- i) Note the progress being made in establishing the Health and Social Care Partnership and in developing integrated services.
- ii) Agree in principle to the development of locality plans based on 'East' and 'West' Midlothian
- iii) Agree to receive further reports on both the Strategic Commissioning Plan and the Integration Scheme

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