

10am, Thursday, 20 November 2014

Membership of the Integration Joint Board

Item number 7.2
Report number
Executive/routine
Wards

Executive summary

The Scottish Government has recently issued regulations governing the membership of Integration Joint Boards, as part of the Public Bodies (Joint Working) (Scotland) Act. Integration Joint Boards must comprise equal numbers of appointees from the Council and Health Boards. The number of Council appointees must not exceed ten percent of the Council's elected members.

Council is asked to agree that the Integration Joint Board comprises five elected members, the maximum possible permitted under the regulations.

Links

Coalition pledges [P36](#)
Council outcomes [CO10](#), [CO11](#), [CO13](#), [CO14](#)
Single Outcome Agreement [SO2](#)

Membership of the Integration Joint Board

Recommendations

- 1.1 It is recommended that Council agree that five elected members represent the Council on the forthcoming Integration Joint Board.

Background

- 2.1 The Public Bodies (Joint Working) (Scotland) Act puts in place the framework for integrating health and social care in Scotland. It requires Health Boards and Local Authorities to delegate a range of functions that broadly include adult social care services, adult community health services and a proportion of adult acute services. The agreed model chosen for meeting this requirement is the Integration Joint Board.

Main report

- 3.1 The Council and NHS Lothian have agreed the functions that will be delegated to the Integration Joint Board (IJB). The details will be included in the Draft Integration Scheme to be submitted for Council approval on 11 December 2014.
- 3.2 It is proposed that membership of the IJB will consist of five elected members and an equal number of Health Board appointees.
- 3.3 The interim shadow arrangements that have been in place since 2012 and consist of 7 elected members and an equal number of Health Board appointees. The shadow arrangements will cease on establishment of the IJB.

Measures of success

- 4.1 The IJB will be required to deliver against the statutory national outcomes which include ensuring that where care is needed it is of high quality and is provided in a timely, efficient and effective way in people's homes or community based settings wherever possible.

Financial impact

- 5.1 The IJB will be responsible for the planning resourcing and carrying out of around £500 million of combined health and adult social care budget.

Risk, policy, compliance and governance impact

- 6.1 A key role of the IJB will be to manage the risks associated with the expected huge rise in demand for health and social care services in the future. A joint approach to risk management will be set out in the Draft Integration Scheme.

Equalities impact

- 7.1 Delivering on the measures of success will have substantial benefits to groups with protected characteristics, including older people and people with disabilities.

Sustainability impact

- 8.1 Not applicable.

Consultation and engagement

- 9.1 The approach to integration will be set out in the statutory Draft Integration Scheme. This will include details on the role and membership of the IJB. The Draft Integration Scheme must be consulted upon. A formal consultation will take place in late 2014 and early 2015.

Background reading/external references

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Links

Coalition pledges	36. Develop improved partnership working across the Capital and with the voluntary sector to build on the “Total Craigroyston”
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	model
Council outcomes	<ul style="list-style-type: none"> 10. Improved health and reduced inequalities 11. Preventative and personalised support in place 13. People are supported to live at home 14. Communities have the capacity to help support people
Single Outcome Agreement	SO2 Edinburgh's citizens experience improved health and wellbeing, with reduced inequalities in health
Appendices	None