

Integration Joint Board 16 May 2019

Subject: **Integration Joint Board Appointments**

Purpose: To note the appointments of (i) Chair and Vice Chair of the Integration Joint Board; (ii) the appointment of new NHS Non-Executive Board members, and (iii) the appointment of Chair and Vice Chair of the Performance and Audit Committee.

Recommendation: The Integration Joint Board (IJB) note the above appointments to IJB.

Glossary of Terms	
NHS AA	NHS Ayrshire and Arran
HSCP	Health and Social Care Partnership
IJB	Integration Joint Board
SPG	Strategic Planning Group
PAC	Performance and Audit Committee

1.	EXECUTIVE SUMMARY
1.1	The Integration Joint Board is asked to agree the appointment of Councillor Robert Foster as Chair of the Integration Joint Board; and Robert Martin as Vice Chair with effect from 17 May 2019.
1.2	The Integration Joint Board is asked to agree that the Vice Chair of the IJB will be appointed as Chair of the Strategic Planning Group.
1.3	The Integration Joint Board is asked to appoint a Chair and Vice Chair of the Performance & Audit Committee.
2.	BACKGROUND
2.1	In May 2018, the Integration Joint Board appointed Robert Martin as the Chair of the Integration Joint Board.
2.2	The Integration Scheme and Integration Joint Board Standing Orders for meetings state that the appointment of Chairperson and Vice Chairperson is limited to a period of 2 years on a rotational basis between the Council and NHS Board members and, that the Council appointed Chair or Vice Chair shall be the Cabinet Portfolio Holder for Health and Social Care.
2.3	This will result in Robert Martin stepping down as Chair of the IJB and Councillor Robert Foster assuming the role of Chair, IJB with effect from 17 May 2019.

2.4	Section 32 of the Public Bodies (Joint Working)(Scotland) Act 2014 places a duty on the Integration Joint Board to establish a Strategic Planning Group (SPG). The Terms of Reference for the Strategic Planning Group state that the Chair of the SPG should be the Vice Chair of the IJB.
3.	CURRENT SITUATION
3.1	Following the resignation of Alistair McKie, NHS Non-Executive Board Member from the IJB in March 2019, a new Non-Executive will join the North Ayrshire Integration Joint Board from May 2019. Recruitment by NHS Scotland has just been concluded and Jean Ford has been appointed to the North IJB.
3.2	All of the above changes have created vacancies on the Integration Joint Board Performance and Audit Committee.
3.3	The Performance and Audit Committee (PAC) Terms of Reference were approved by IJB in March 2019 states that Committee to consist of no less than six members of the IJB, with a minimum of two voting members. The Chair and Vice Chair appointments of PAC also rotate on a 2 year cycle. IJB are asked to appoint a Chair and Vice Chair of PAC.
4.	PROPOSALS
4.1	It is proposed that in accordance with the Integration Scheme and IJB Standing Orders, Councillor Robert Foster assumes the role of the IJB for a period of 2 years, or until the next ordinary Elections for Local Government Councillors in Scotland, whichever is shorter.
4.2	It is also proposed, that Robert Martin be appointed as Vice Chair of the IJB, and subsequently appointed to Chair of the Strategic Planning Group.
4.3	The Integration Joint Board are asked to nominate an NHS Non-Executive IJB member to be Chair of Performance and Audit Committee (PAC) and an NAC Voting Member as Vice Chair of PAC.
4.4	<u>Anticipated Outcomes</u>
	N/A
4.5	<u>Measuring Impact</u>
	N/A
5.	IMPLICATIONS

Financial:	None
Human Resources:	None
Legal:	None
Equality:	None
Children and Young People	None
Environmental & Sustainability:	None
Key Priorities:	None
Risk Implications:	None
Community Benefits:	None

Direction Required to Council, Health Board or Both	Direction to :-	
	1. No Direction Required	X
	2. North Ayrshire Council	
	3. NHS Ayrshire & Arran	
	4. North Ayrshire Council and NHS Ayrshire & Arran	

For more information please contact Stephen Brown, Director/Chief Officer on [Tel. No. 01294 317723] or [sbrown@north-ayrshire.gov.uk]

**NORTH AYRSHIRE INTEGRATION JOINT BOARD
PERFORMANCE AND AUDIT COMMITTEE
TERMS OF REFERENCE**

	INTRODUCTION
1.1	The Integration Joint Board (IJB) is required to properly manage its financial affairs, a key component to fulfilling this obligation is to have an Audit Committee.
1.2	The Performance and Audit Committee is identified as a Standing Committee of the IJB. The approved Terms of Reference and information on the composition and frequency of the Committee will be considered as an integral part of the Standing Orders.
1.3	<p>The IJB Performance and Audit Committee will have a key role with regard to:</p> <ul style="list-style-type: none"> • Ensuring sound governance arrangements are in place for the IJB; and • Ensuring the efficient and effective performance of North Ayrshire's Health and Social Care Partnership in order to deliver the outcomes set out in the Integration Scheme and Strategic Plan.
	CONSTITUTION
	Appointments
2.1	The IJB shall make all appointments to the Committee.
	Membership
2.2	The Committee will consist of not less than six members of the IJB, excluding Professional Advisors. The Committee will include a minimum of two voting members, with one from NHS Ayrshire and Arran and one from North Ayrshire Council. There will be a requirement for the IJB to appoint deputy members for the two voting members.
	Chair and Vice-Chair
2.3	The Chair and Vice Chair will be appointed by the IJB. The Chair of the Committee will be a voting Member nominated by the IJB, noting that the Chair of the IJB cannot also chair the Performance and Audit Committee.
2.4	The Chair and Vice Chair appointments will be for a two year term.
	Quorum
2.5	Three Members of the Committee will constitute a quorum, with at least one of the members being the Chair or Vice Chair (or nominated deputy).
	Frequency of Meetings
2.6	The Committee will meet at least four times each financial year. There should be at least one meeting a year, or part therefore, where the Committee meets the external auditor and Chief Internal Auditor without other seniors officers present.

	Attendance at meetings
2.7	The Chief Officer, Chief Finance Officer, Chief Internal Auditor and other Professional Advisors or their nominated representatives will attend meetings. Other persons may attend meetings by invitation of the Committee.
2.8	The IJB external auditor will be invited to attend meetings of the IJB Performance and Audit Committee.
2.9	The Committee may co-opt additional advisors as required.
2.10	The Committee may at its discretion set up working groups for specific tasks. Membership of working groups will be open to anyone whom the Committee considers will be able to assist in the task assigned. The working groups will not be decision making bodies or formal committees but will report findings and recommendations to the Performance and Audit Committee.
	POLICY AND DELEGATED AUTHORITY
3.1	The IJB Performance and Audit Committee is authorised to request reports and to make recommendations to the IJB on any matter which falls within its Terms of Reference.
3.2	The Performance and Audit Committee is responsible for setting its own work programme which will include the right to undertake reviews following input from the IJB or any other IJB Committees. This will include any areas required in order to properly advise the IJB on matters covered by the Performance and Audit Committee Terms of Reference.
3.3	The Committee will report to the Integration Joint Board, the IJB will be informed of the work of the committee through the review of minutes. The Performance and Audit Committee may report to the IJB on any matters.
	REMIT
4.1	The IJB Performance and Audit Committee will review the overall internal control arrangements of the IJB and make recommendations to the IJB regarding signing of the Governance Statement and any other matters within its Terms of Reference.
4.2	Performance and Audit Committee areas of responsibility include:
	Performance
	<ul style="list-style-type: none"> i. The monitoring of the strategy for Performance management and reporting, including monitoring the performance of the Partnership towards achieving its policy objectives and priorities in relation to all functions of the IJB. ii. Ensuring that the Chief Officer establishes and implements satisfactory arrangements for reviewing and appraising service performance against agreed objectives, levels and standards of service. iii. To consider reports on performance and to review progress against the national outcomes and the outcomes in the Strategic Plan. iv. To review inspection reports for Health and Social Care Services where appropriate on behalf of the IJB, including review of management responses and actions.

	Audit
	<ul style="list-style-type: none"> i. Approve and monitor the annual work programme of Internal Audit. ii. To oversee and review progress on actions taken on audit recommendations and report to the IJB on these as appropriate. iii. To consider matters arising from Internal and External Audit reports and review on a regular basis action planned by management to remedy any weaknesses in controls. iv. To consider matters arising and recommendations from National Audit reports ensuring oversight of appropriate planned actions. v. To have oversight of Information Governance arrangements as part of the Performance and Audit process.
	Risk
	<ul style="list-style-type: none"> i. To review risk management arrangements and receive regular risk management updates and reports. ii. To have oversight of risk management arrangements, including the Risk Management Strategy and assurance for compliance with the strategy and governance arrangements in place for recording and reporting risk within the partnership. iii. Oversight of Strategic Risks for the IJB, with regular review to inform audit activity.
	Annual Accounts
	<ul style="list-style-type: none"> i. To consider the annual financial accounts of the IJB and any related matters before submission to and approval by the IJB. ii. To consider any changes to accounting standards, regulations and guidance in relation to IJB accounts and report as required to the IJB.
	Standards
	<ul style="list-style-type: none"> i. Ensuring that the Partnership Senior Management Team, including Heads of Service, Professional Leads and Principal Managers maintain effective controls within their services which comply with financial procedures and regulations. ii. Promoting the highest standards of conduct and professional behaviour by IJB members. iii. Monitoring and keeping under review the Codes of Conduct maintained by the IJB.

NORTH AYRSHIRE INTEGRATION JOINT BOARD

STRATEGIC PLANNING GROUP

TERMS OF REFERENCE

1	Introduction
1.1	The Public Bodies (Joint Working) (Scotland) 2014 Act (Section 32) requires the North Ayrshire Integration Joint Board to establish a Strategic Planning Group to support the development and review of the Board's Strategic Plan.
1.2	Integration Authorities are obliged to establish a Strategic Planning Group for the area covered by their Integration Scheme for the purposes of preparing the strategic commissioning plan for that area.
1.3	The group will be known as the North Ayrshire Strategic Planning Group (SPG).
2.	Principles
2.1	<p>The integration delivery principles are:</p> <ul style="list-style-type: none">• that the main purpose of services which are provided to meet integration functions is to improve the wellbeing of service-users,<ul style="list-style-type: none">▪ that, in so far as consistent with the main purpose, those services should be provided in a way which, so far as possible: is integrated from the point of view of service-users▪ takes account of the particular needs of different service-users▪ takes account of the particular needs of service-users in different parts of the area in which the service is being provided▪ takes account of the particular characteristics and circumstances of different service-users▪ respects the rights of service-users▪ takes account of the dignity of service-users▪ takes account of the participation by service-users in the community in which service-users live▪ protects and improves the safety of service-users▪ improves the quality of the service▪ is planned and led locally in a way which is engaged with the community (including in particular service-users, those who look after service-users and those who are involved in the provision of health or social care)▪ best anticipates needs and prevents them arising▪ makes the best use of the available facilities, people and other resources

2.2	<p>These integration delivery principles must be taken into account in the preparation of the strategic commissioning plan and in the actual carrying out of functions included in integration arrangements. The effect is to ensure a focus on integrated delivery, including consideration of the needs of different service users and different areas, the dignity of service users, the participation by service users in the community in which they live, protecting and improving the safety of service users, improving the quality of services local planning and leadership, the anticipation and prevention of need, and the effective use of resources. Consideration should be given to how adherence to these principles will be given effect in order to demonstrate effective implementation. It will require clinical and care professionals to apply the principles in all that they do in delivering integrated health and social care services.</p>
3.	Remit
3.1.1	<p>The SPG will be concerned primarily:</p> <ul style="list-style-type: none"> a) In helping to shape and define the strategic direction of the Partnership and inform the development of the strategic commissioning plan (North Ayrshire Strategic Plan) b) With oversight of the implementation and impact of the Strategic Plan (section 3.1.2) including performance monitoring c) With overseeing the influence the implementation of the plan has on the five strategic priorities contained in the Strategic Plan d) Having oversight of the Partnerships contribution to the nine National Health and Wellbeing Outcomes e) In ensuring alignment between the Strategic Plan and the plans of each of the services / partner organisations. This will include making recommendations on the commissioning and de-commissioning of service delivery models. f) In overseeing the on-going review of the Strategic Plan g) In providing advice and support on the development of locality planning structures and six Locality Plans, which are informed by Locality profiles and public engagement approaches. h) To undertake any other functions which may be delegated to it by the Integrated Joint Board i) Act as a link to Community Planning Partnership (CPP) structures as required to support the Locality Partnership arrangements
3.1.2	<p>In having oversight of the strategic plan, the SPG will give due consideration to:</p> <ul style="list-style-type: none"> a) The number of people who need service and what type b) The level, quality and cost of current service provision c) How services can improve people's lives d) How we develop services that are affordable and sustainable e) How we procure services for delivery with best impact f) How we monitor and review services

3.2	<p>The SPG will</p> <ul style="list-style-type: none"> a) Influence and shape the strategic plan for the Health & Social Care Partnership b) Provide comment and influence the mid-term refresh of the Strategic Plan. c) Ensure alignment between the Strategic Plan and the plans of each of the services / partner organisations. This will include making recommendations on the commissioning and de-commissioning of service delivery models. d) Review annually the ongoing strategic planning process for the Health & Social Care Partnership, including responding to Scottish Government and other stakeholder feedback. e) Ensure links across all health and social care provision involving other Health Board and Local Authority areas, as required. This will also include discussions in relation to workforce planning f) Manage expectations between stakeholder aspirations of the Strategic Plan and the financial realities dictated by funding and political context g) Display positive behaviors which reflect the Partnership's values and support the integration agenda to peers and other stakeholders h) Provide advice and guidance to the Integration Joint Board when developing responses to emerging Scottish Government Policy and regulations i) Provide an effective conduit and feedback loop to the Integration Joint Board on key proposals and service changes by linking effectively to wide groups of staff, service users, carers, independent sector, third sector, clinical & care professionals and locality members j) Bring forward key issues of concern expressed in North Ayrshire's locality planning arrangements from the communities through robust and engaged membership k) Have final decision on progressing Locality Planning Forum recommendations to Integration Joint Board l) Act as a link to Community Planning Partnership (CPP) structures as required to support the Locality Partnership arrangements
4	Chair
4.1	The Chair for the Strategic Planning Group will be the Vice-chair of the Integration Joint Board. This will rotate in line with the rotation of the IJB chair.
4.2	The Chair will facilitate discussion and consensus within the group and ensure clarity regarding the conclusions reached for each discussion.
4.3	The Chair will hold the casting vote during meetings of the Strategic Planning Group
4.4	Vice Chair
4.4.1	A vice chair will be appointed to ensure continuity of meetings in the chair's absence.
4.4.2	The Vice Chair will be chosen from among the voting membership of the IJB.
5	Membership

5.1	<p>The membership of the SPG will comprise, as a minimum, of members representative of the following groups:</p> <ul style="list-style-type: none"> • The vice-chair of the IJB • Users of health and social care • Carers of users of health and social care • Commercial providers of health care • Non-commercial providers of health care • Health professionals (Nursing, AHPS, Mental Health, Public Health) • Independent health contractors (General Practice, Optometry, Community Pharmacy, Dentistry) • Social care professionals (Children and Families/Criminal Justice and Community Care) • Commercial providers of social care • Non-commercial providers of social care • Non-commercial providers of social housing • North Ayrshire Council elected member • North Ayrshire Housing • Third sector bodies carrying out activities related to health or social care • NHS Staff Side • Local authority unions • The six LPF Chairs and Coordinators <p>The membership is laid out more fully in appendix one.</p>
5.2	<p>The SPG is entitled to co-opt additional members for particular pieces of work as appropriate.</p>
6	Members Roles
6.1	<p>Members will be expected to:</p> <ol style="list-style-type: none"> a) Attend all SPG meetings b) Prepare adequately for all meetings by familiarising themselves with the agenda and reading any associated papers. c) Where appropriate, should discuss forthcoming meeting agendas with the group, sector or professional area they represent. d) Actively contribute to discussions in a way that represent their community of interest, sector or professional area e) Share relevant information to their peers and build effective feedback loops to the SPG. f) ensure the interests of the agreed localities are represented g) develop and maintain the necessary links and networks with groups and individuals in their community of interest to enable views to be sought and represented over the development, review and renewal of the Strategic Plan h) Help ensure the Strategic Plan reflects the needs and expectations (and that there has been an adequate assessment of those needs and expectations).

	<ul style="list-style-type: none"> i) Act as an ambassador for the Health and Social Care Partnership, displaying the values of the Partnership j) Submit apologies ahead of any SPG meeting where attendance is not possible
6.2	Attendance is required of for all members. Should a member be absent from three meetings (consecutively or across a service year) the chair will give due consideration to appointing a new representative. This includes absences covered by a deputy.
7	Deputies
7.1	Each SPG member should, where possible, have a nominated deputy who will attend meetings in their absence
7.2	Deputies should be able to adequately represent their area of interest and be able to vote on any SPG business
8	Terms of Office
8.1	The membership of the SPG will be reviewed every three years in line with Strategic Planning cycles.
8.2	Generally members will be nominated from other organisations and groups and it will be their prerogative who their representative is and how long they should serve.
8.3	As a matter of good practice, it can be helpful to have the insights of new members, notwithstanding the need for continuity. This may occur when a new Strategic Plan has been developed.
8.4	Consequently, it may be helpful if 'feeder' organisations and groups organize representation to allow for regular refreshing of membership.
8.5	If a members wishes to stand down from the SPG at any point, they should notify the Chair who will then make arrangements for the appointment of a new representative.
9	Reporting to Integration Joint Board
9.1	<p>The SPG will provide regular formal reports to the Integration Joint Board via the minutes of the meetings.</p> <ul style="list-style-type: none"> • The Integration Joint Board may request the view of the SPG on specific work areas and developments
9.2	The Strategic Planning Group, in terms of wider governance recognises the vital role of the Performance and Audit Committee in ensuring scrutiny, challenge and accountability for performance to the IJB.
10	Link to HSCP Locality Planning Forums
10.1	Each of the six Locality Planning Forums are a sub-group of the SPG

10.2	The Chair and Locality Coordinator from each LPF will be a member of the SPG
10.3	LPF leads will be responsible for tabling issues and sharing views generated by forums and for disseminating information from the SPG back to groups
10.1	LPF Leads will ensure the content of Locality profiles, Locality plans and any changes thereto are fed into the SPG
11	Expenses
11.1	The Health and Social Care Partnership will reimburse all reasonable expenses associated with members attending the meetings
12	Support for the Group
12.1	<ul style="list-style-type: none"> • The Director of Health and Social Care will ensure adequate officer support for the group • The Director will also ensure the group is assisted by appropriate secretarial support
13	Standing Orders
13.1	Additional Standing Orders are still to be determined including the structure and frequency of meetings and the linked Quorum needed for meetings.

Strategic Planning Group Membership

Name	Representing
Councillor Robert Foster	Chair IJB Vice Chair
Michelle Sutherland	NAHSCP Strategic Planning and Change Lead
David Rowland	HSCP Head of Service Health & Community Care
Donna McKee	HSCP Head of Children & Families & Justice Services
Thelma Bowers	HSCP Head of Mental Health IJB Member (Non-Voting)
Caroline Whyte	Chief Finance & Transformation Officer/Section 95 Officer IJB Member (Non-Voting)
Christine Speedwell	Carers Centre
Clive Shephard	Confederation of North Ayrshire Community Associations
David Bonellie	Optometrist AOPC
David Thomson	Associate Nurse Director – Mental Health IJB Member (Non-Voting)
Dr Paul Kerr	Clinical Director IJB Member (Non-Voting)
Alistair Reid	AHP Lead IJB Member (Non-Voting)
Dr John Taylor	Associate Medical Director – Mental Health

Fiona Thomson	Service User Representative IJB Stakeholder Representative Locality Planning Forum Lead
Simon Morrow	Dental Representative
Vicki Yuill	North Ayrshire Third Sector Interface Arran CVS Locality Planning Forum Lead IJB Member (Non-Voting)
Louise Wilson	GP IJB Member (Non-Voting) Locality Planning Forum Member
Fiona Comrie	KA Leisure
Louise Gibson	Dietetic Lead Integrated Services – North AHP
Louise McDaid	NAC Staff Side Locality Planning Forum Lead
David Donaghey	NHS Staff Side
Mark Gallagher	Alcohol and Drugs Partnership
Jacqui Greenlees	Community Planning Partnership
Heather Malloy	Independent Sector
Elaine Young Lynne McNiven Brenda Knox	NHS Public Health
David MacRitchie	Chief Social Work Officer IJB Member (Non-Voting)
Helen McArthur	Locality Planning Forum Lead
Dr Janet McKay	Locality Planning Forum Lead
Sam Falconer	Pharmacy Locality Planning Forum Lead IJB Member (Non-Voting)
Marion Gilchrist	LD Manager Locality Planning Forum Lead

Isabel Marr	Locality Planning Forum Lead
Norma Bell	Locality Planning Forum Lead
Ruth Betley	Locality Planning Forum Lead
Andrew Keir	Locality Planning Forum Lead
Councillor John Sweeney	Locality Planning Forum Lead
Sharon Bleakley	Scottish Health Council
Elaine McClure	Portfolio Programme Manager
Lorna McGoran	Primary Care
Vacancy	Education Representative
Vacancy	Mental Health Practitioner Representative
Vacancy	Children & Families Practitioner Representative
Vacancy	Health & Community Care Practitioner Representative

In Attendance:	
Scott Bryan	Strategic Planning Officer, NAHSCP
Annie Robertson	Business Planning Manager, NAHSCP
Eleanor McCallum	Partnership Communication Officer, NAHSCP
Gavin Paterson	Partnership Engagement Officer, NAHSCP
Louise Harvie	Governance Assistant (Minutes) NAHSCP