



**Glasgow City Council**

**Executive Committee**

**Report by Chief Executive**

**Contact: George Black, Chief Executive**

**Item 6**

**20th February 2014**

## **INTEGRATION OF HEALTH AND SOCIAL CARE SERVICES**

### **Purpose of Report:**

To provide background on the draft legislation from the Scottish Government on the integration of health and social care services and to seek approval on proposals that will enable Glasgow to progress towards implementation by April 2015.

### **Recommendations:**

Committee is asked to:

- (a) consider the content of this report;
- (b) agree the development of a body corporate model for the integration of health and social care services in Glasgow;
- (c) agree that the scope for integration should include all current social work services including children and families services;
- (d) agree that the appointment of the Chief Officer is progressed;
- (e) agree the establishment of a shadow Integrated Joint Board from early 2014/15; and
- (f) instruct the Chief Executive to submit further reports to Executive Committee on progress on political governance implications, committee, policy development and scrutiny functions within Glasgow City Council structures and the implications relating to governance of the Integrated Joint Board.

Ward No(s):

Citywide: ✓

Local member(s) advised: Yes  No  consulted: Yes  No

## **1. Purpose of Report**

- 1.1 The purpose of the report is to provide background on the draft legislation from the Scottish Government on the integration of health and social care services and to seek approval on proposals that will enable Glasgow to progress towards implementation by April 2015.

## **2. Background**

- 2.1 The Public Bodies (Joint Working) (Scotland) Bill was published in May 2013 and sets out the intention of the Scottish Government to integrate health and social care services across Scotland. The Bill is expected to receive Royal Assent in the Spring of 2014, and be enacted from April 2015.
- 2.2 The purpose of this integration is to provide the framework which will support the improvement of the quality and consistency of health and social care services in Scotland. Crucially, the legislation requires the integration of all adult health and social care services including addictions services. In Glasgow this would also include homelessness services.
- 2.3 The legislation is permissive in relation to whether or not partnerships consider it appropriate to local need to include children and families social work services.
- 2.4 It should be noted that Criminal Justice Social Work is currently subject to a separate Scottish Government review process and is therefore not included within the integration draft legislation. It is expected, however, that partnerships will consider the location of Criminal Justice social work in deliberations on integration, albeit the status is the same as for children and families, namely permissive.
- 2.5 The Bill sets out two models for integration, namely the Delegated Lead Agency model (as adopted by Highland Council) and the Body Corporate model.
  - 2.5.1 The Lead Agency model, in summary, involves one agency taking responsibility for the delivery of all health and care services for a client group. In Highland, this has resulted in the NHS delivering all adult health and social care services with the council handing over approximately £90M of budget and resources to the Health Board including the TUPE transfer of all adult council social care staff. The local authority in the same way has full responsibility for children and family services including community health. There appears to be no appetite amongst 31 local authorities for the development of a Delegated Lead Agency model of integration.
  - 2.5.2 The Body Corporate model, in summary, involves the setting up of a Joint Integration Board made up of equal numbers of elected members and non-executive Directors of the NHS and the appointment of a single jointly accountable officer ('the Chief Officer'). This 'body' will be a strategic and commissioning body with responsibility for overseeing the delivery of Health

and Council social work services with which to meet the agreed strategic priorities. The 'body' will achieve this by focusing on service reform through integration and monitoring integrated functions.

- 2.5.3 The role of the Section 95 Officer remains unchanged within the council. In relation, therefore to the council's financial contribution to the delivery of the integrated strategy within a body corporate this ensures that the council retains control over its budget.

### **3. Options for consideration**

There are three possible options that could be adopted for integration within Glasgow using the Body Corporate model. These are:

- 3.1 **Option One** - Adult and older people services and resources only integrated with NHS services, including homelessness and addictions. For Glasgow this would involve 2,400 WTE staff and a budget of c£400M.

3.1.1 This option would require the splitting up of Social Work Services, with children and families social work services being managed elsewhere within the Council. It would also require significant changes and potential duplication to management arrangements and back office support, with the likelihood of increased financial risk to the council.

3.1.2 This option is likely to result in severe disruption to the continuity of service provision to service users particularly within families where our adult and children's services need to work very closely to ensure vulnerable children are protected, eg families where parents have addictions, mental health problems, criminal justice involvement.

- 3.2 **Option Two** - All Social Work Services are part of integration from the outset. For Glasgow this would involve 3,690 WTE staff and a budget of over £550M (includes Criminal Justice). This would mitigate the risks of disconnection across Social Work Services which are outlined in Option One.

3.2.1 This would be a voluntary inclusion by the council of children and families services and would require clearly defined and established safeguards for the council in respect of its duties to governance and accountability.

- 3.3 **Option Three** - Adult and older people services and resources initially move to integration, with children and families social work services to follow at a later date. This option can realistically be discounted from the outset due to the impracticability of separating social work services only to reconnect them at a later stage.

### **4. Progress to date**

- 4.1 The Chief Executive and Executive Director for Social Care Services have been involved in monthly discussions with their counterparts within the NHS

for several months in order to establish accepted principles for progressing the integration of services.

- 4.2 It is considered that a body corporate model would best meet the circumstances for Glasgow.
- 4.3 This will involve the establishment of an Integrated Joint Board with 8 elected members of the council and 8 non-executive Directors of the NHS as the voting representatives on the Joint Board. The Board is also expected to have non-voting stakeholder members including from the voluntary and independent sectors, service users and carers in attendance.
- 4.4 It is clear that the political control over decisions made in relation to children and family services within an integrated partnership involving all social work provision, will remain with the elected members on the Joint Board. This is a critical safeguard that would be required should this option be approved. These elected members will be required to ensure that appropriate authorisation within the council's existing governance and accountability processes has been provided prior to notification of any decision about children and family services within the Joint Board.
- 4.5 It is also expected that the decision making within the Joint Board in relation to adult services will be on the basis of consensus within all Joint Board members with a clear emphasis on meeting service users needs as the primary driver for decision making and activity. This will effectively entail a 'bottom-up' approach to decision making within both parent organisations whereby the Chief Officer will need to ensure agreement to substantive change on both policy and resource by both parent organisations prior to ratification by the Joint Board.
- 4.6 The Health and Social Care Partnership will be an active participant in community planning. The role of the Partnership is to plan and deliver effective health and social care services. Community Planning provides the mechanism by which public sector providers can effectively coordinate the planning of public services, hence, active participation in these complimentary planning processes will be essential, and the strategic plan agreed by the Joint Board will be congruent with the SOA.
- 4.7 It is expected that there will be a substantial period of shadow Joint Board operation in the year leading up to full implementation and this should be in place by early Summer 2014.
- 4.8 The draft legislation also sets out that within a Body Corporate model, a Chief Officer (a joint accountable officer) is appointed to lead the integrated arrangements. In order to service the shadow Joint Board and ensure that the integrated arrangements are in place for April 2015, the appointment to the post of Chief Officer designate is progressed at as early a point as possible. The permanent position can only be made by the Integrated Joint Board proper from 1<sup>st</sup> April 2015 and as such, an early appointment would be made by a specially convened joint selection panel of the Council and NHS.

## 5. Council Strategic Plan Implications

<i>Economic Impact:</i>	There is no immediate economic impact.
<i>Sustainability:</i>	There is no immediate impact in terms of sustainability.
<i>Financial:</i>	The recommendations related to this report will have no immediate impact on the finances of the council. The appointment of the Chief Officer will be met within existing resources.
<i>Legal:</i>	There is no immediate legal impact related to the recommendations of this report. The progress of the Bill through to enactment and accompaniment of statutory guidance will be monitored by the council's legal officers to ensure clarity on any future legal implications for the council.
<i>Personnel:</i>	There is no immediate impact on personnel and Unison are actively involved in work-streams progressing the integration agenda.
<i>Sustainable Procurement and Article 19:</i>	No impact.

## 6. Recommendations

### 6.1 Committee is asked to:

- (a) consider the content of this report;
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