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Agenda number 9.6

Integration Joint Board

Date of Meeting: 29 June 2016

Subject: Directions

<p>1.</p>	<p>Summary</p> <p>1.1 The Integration Joint Board (IJB) is required to issue Directions to NHS Orkney and Orkney Islands Council relating to the implementation of the Strategic Commissioning Plan and the carrying out of functions by the services delegated to the IJB.</p> <p>1.2 This report sets out initial Directions for consideration and recommends that authority be delegated in line with the attached Directions to respond to further development opportunities that arise in line with the objectives of the IJB. The report also sets out a framework for the future approach to Directions, to be trialled over the remainder of the current year.</p>
<p>2.</p>	<p>Purpose</p> <p>2.1 To seek approval from the IJB of the appended Directions to NHS Orkney and Orkney Islands Council in relation to implementation of the Strategic Commissioning Plan and other plans and developments within the remit of the services delegated to the IJB, to seek delegated authority to respond to further development opportunities that arise in line with the objectives of the IJB, and to seek approval for the proposed framework for the Directions for the remainder of the current year.</p>
<p>3.</p>	<p>Recommendations</p> <p>The IJB is invited to:</p> <p>3.1 approve the Directions as set out in Appendix 1 to this report;</p> <p>3.2 agree delegated authority in line with the attached Directions to respond to further development opportunities that arise that are in line with the objectives of the IJB; and</p> <p>3.3 approve the framework for the approach to Directions, to be trialled over the remainder of the current year.</p>

<p>4.</p>	<p>Background</p> <p>4.1 The Public Bodies (Joint Working) (Scotland) Act 2014 (the Act) places a duty on Integration Authorities to develop a strategic commissioning plan for integrated functions and budgets under their control.</p> <p>4.2 Each Integration Authority must produce a strategic commissioning plan that sets out how they will plan and deliver services for their area over the medium term, using the integrated budgets under their control. Stakeholders must be fully engaged in the preparation, publication and review of the strategic commissioning plan, in order to establish a meaningful co-productive approach, to enable Integration Authorities to deliver the national outcomes for health and wellbeing, and achieve the core aims of integration.</p> <p>4.3 Integration Authorities require a mechanism to action their strategic commissioning plans, and this is laid out in sections 26 to 28 of the Act. This mechanism takes the form of binding¹ Directions from the Integration Authority to one or both of the Health Board and Local Authority.</p> <p>4.4 In the case of an Integration Joint Board (IJB), a direction must be issued in respect of every function that has been delegated to the IJB².</p> <p>4.5 Directions must be in writing³ and should set out a clear framework for operational delivery of the functions that have been delegated to the Integration Authority.</p> <p>4.6 Directions must clearly identify the integrated health and social care functions⁴ to which they relate. The Integration Authority can direct the carrying out of those functions by requiring that a particular named service or services be provided.</p> <p>4.7 Directions must include detailed information on the financial resources that are available for carrying out the functions that are the subject of the Directions, including the allocated budget and how that budget (whether this is payment, or an amount made available) is to be used⁵.</p> <p>4.8 The exercise of each function can be described in terms of delivery of services, achievement of outcomes, and/or by reference to the strategic commissioning plan.</p>
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¹ Section 27(4).

² Section 26(1). This requirement may be removed or varied in relation to a particular Integration Joint Board if an application under section 27(7)(a) is made by the Health Board and Local Authority for the area of the Integration Joint Board.

³ Section 27(5)(b)

⁴ The functions that have been delegated by the Local Authority and Health Board, as described in the relevant Integration Scheme.

⁵ Section 27(1)(a),(b) and (c)

	<p>4.9 Directions may stipulate which of the health board or local authority is to carry out a particular function, or may require a function to be carried out jointly. The Direction may also specify what the health board and/or local authority is to do in relation to carrying out a particular function.</p> <p>4.10 A Direction will remain in place until it is varied, revoked⁶ or superseded by a later Direction in respect of the same function.</p> <p>4.11 The legislation does not set out fixed timescales for Directions. This flexibility allows Directions to ensure that delivery of integrated health and social care functions is consistent with the strategic commissioning plan, and takes account of any changes in local circumstances. In contrast with the strategic commissioning plan, there is therefore scope for Directions to include instructions in relation to particular functions (and the associated services). This enables Directions to be reviewed and updated on a rolling basis.</p> <p>4.12 The IJB sets the direction of development for the services within its remit through the Strategic Commissioning Plan. Throughout the year, various funding and/or development opportunities arise which it is necessary to be able to respond to in a timely manner. In order to strike an appropriate balance between the strategic direction setting role of the IJB and the need to have a responsive operational structure, it is necessary for there to be delegation of authority to take forward additional developments that are in line with the strategic direction of the IJB but are not of a level of significance in terms of strategic or service change that requires consideration by the IJB.</p> <p>4.13 Along with all other health and social care partnerships created by the Act, the Orkney IJB is trying to develop ways of working that are effective and efficient, for the purpose of delivering the desired outcomes, in a new and untested landscape of legislation. The approach to Directions set out in Appendix 2 to this report is proposed as a first approach for the Orkney IJB to be trialed for the remainder for the current year. There will no doubt be areas for future improvement and change and the approach will be reviewed and further developed based on experience gained at the end of the year 2016 - 2017. Every effort has been made to try to strike the right balance between meeting the requirements for Directions, and risks (such as those explicitly identified and anticipated in Orkney Islands Council's Risk Register and the NHS Orkney Risk Registers) arising from overburdening the system with bureaucracy.</p>
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⁶ Section 27(5)(a)

5.	Contribution to Quality	<p>Please indicate which of the Our Plan 2013-2018 and 2020 vision/quality ambitions are supported in this report by ticking the relevant area(s):-</p> <ul style="list-style-type: none"> • Promoting survival: to support our communities • Promoting sustainability: to make sure economic, environmental and social factors are balanced • Promoting equality: to encourage services to provide equal opportunities for everyone • Working together: to overcome issues more effectively through partnership working ✓ • Working with communities: to involve community councils, community groups, voluntary groups and individuals in the process ✓ • Working to provide better services: to improve the planning and delivery of services • Safe: avoiding injuries to patients from healthcare that is intended to help them ✓ • Effective: providing services based on scientific knowledge ✓ • Efficient: avoiding waste, including waste of equipment, supplies, ideas, and energy ✓ 	
6.	<p>Resource Implications and Identified Source of Funding</p> <p>6.1 This report relates to the utilisation of the resources of the IJB. It should be noted, however, that in light of the size and capacity of the organisations involved, a proportionate approach to the formulation and issuing of Directions will be necessary. There are evident dangers of disproportionate and unmanageable levels of resource commitment draining operational resources to an unacceptable level if an approach based on an assumption that detailed Directions are to be formulated immediately across all services is followed.</p>		
7.	<p>Risk Assessment</p> <p>7.1 There are no risks associated directly with this report.</p>		

<p>8.</p>	<p>Conclusion</p> <p>8.1 The IJB is invited to consider and approve the Directions set out at Appendix 1 to this report and to delegate authority to the Chief Officer to implement those Directions and respond to further development opportunities that arise during the course of the year that are in line with the objectives of the IJB. The report also seeks approval of the framework for the future approach to Directions, to be trialled over the remainder of the current year, as set out at Appendix 2 to this report.</p>
<p>9.</p>	<p>Author</p> <p>Caroline Sinclair Chief Officer Integration Joint Board On behalf of the Governance and Finance Work streams</p>
<p>10.</p>	<p>Contact details</p> <p>caroline.sinclair@orkney.gcsx.gov.uk 01856 873535 extension 2601</p>
<p>11.</p>	<p>Supporting Documents</p> <p>11.1 Appendix 1 – Orkney IJB Directions 2016 - 2017 (draft) 11.2 Appendix 2 – Directions Framework (draft)</p>



Orkney Integration Joint Board Directions to NHS Orkney and Orkney Islands Council.

Directions from Orkney Integration Joint Board to Health Boards and Local Authorities

1. The Scottish Government published a Good Practice Note on Directions from Integration Authorities to Health Boards and Local Authorities in March 2016.¹
2. The Guidance Note explains that Directions from the Integration Authority (IJB) to the Council and the Health Board are required in order to action the IJB's Strategic Plan and that a Direction must be given in respect of every function that has been delegated to the IJB.
3. For the Orkney Integration Joint Board the directions are made up of the following components
 - a. The Integration Scheme
 - b. The detailed budget breakdown for services
 - c. The Strategic Commissioning Plan
 - d. The additional change / development areas identified through the NHS Local delivery Plan process and the Council's Innovation Fund
4. The full details of the functions delegated to the IJB are included in the Integration Scheme.²
5. A detailed budget breakdown setting out the financial resources that are to be available for the delivery of each service, by individual service area, is attached at annex 1.
6. The services will be managed operationally by the Chief Officer of the IJB, through the management structure of the health and social care services allocated to the IJB.
7. The IJB has identified a number of change or development areas to be progressed in the year 2016 – 2017 by the services delegated to the IJB. The details of each change area are set out in sections 3 through to 8 of the Strategic Commissioning Plan.
8. Where the IJB has not commissioned a specific service change through the strategic Commissioning Plan, the IJB expects that the service will continue to be delivered as is, in line with the budget allocation provided for that purpose.

¹ <http://www.gov.scot/Resource/0049/00498164.pdf>

² Orkney Health and Social Care Partnership Integration Scheme 2015
http://www.orkney.gov.uk/Files/OHAC/Integration_Scheme_Accessible_Version.pdf

9. In addition, a number of change or development areas have been approved in relation to the service areas delegated to the IJB by Orkney Islands Council through their change programmes as follows.

Orkney Islands Council Innovation Fund

Service	Investment	Purpose
Children & Families	£473,700 - Spend to date £105,600 leaving £368,100 available	To develop a professional foster care service to increase capacity and promote inward investment, creating a flexible and responsive service.

10. In addition, the IJB has an allocation of £410,000 from the Scottish Government in the form of the Integrated Care Fund, and a further £50k carried forward from the same fund from last year's unspent allocation. The purpose of the funding is to support the piloting and testing of new ways of working to support overall delivery of the national health and wellbeing outcomes. Additional areas of change proposed as supported this fund can be found at annex 2. The project proposals set out in the annex have been discussed at the Strategic Planning Group and comments received and incorporated. There was however a recognition from some group members that it was beyond the scope of the time available to the Strategic Planning Group to review and explore the details of each project area. Accordingly, it is proposed that pre – existing Integrated Care Fund Leads Group, a group initially established as the Change Fund leads group, the Change Fund being the predecessor to the Integrated Care Fund, continue to have a lead role for the use of this fund with scope to develop and agree the detail of each project. The group will also have a role in overseeing the results and outcomes achieved by each project. The group will report the information to the Strategic Planning Group. Group membership includes senior representatives from NHS Orkney, Orkney Islands Council and third sector services.
11. At present, the Directions from the IJB consist of a formal letter to the Chief Executives of both NHS Orkney and Orkney Islands Council advising that the IJB wishes both agencies to continue to deliver services in line with the objectives and change plans set out in the Strategic Commissioning Plan.
12. With the detailed budget breakdown that is appended and the additional change and development areas outlined above this, alongside the letters referred to at point 12 constitutes the direction of the IJB to NHS Orkney and Orkney Islands Council at this point in time.
13. There are four further areas where directions from the IJB may be anticipated, based on development submissions for delegated functions. These proposals would be brought to the IJB for further discussion prior to agreeing any changes to Directions. These are as follows:
- a. Mental Health Services – Service Review
 - b. Midwifery Service Model
 - c. Model of Nursing Care on the Isles
 - d. Health Visiting Service – Response to Implementation of Named Person Responsibilities and new Care Pathway



DIRECTIONS FUNDING

This document details the draft total resource envelope available under the new integrated arrangements of the Orkney Integration Joint Board

		Initial Budget 2016/17 £000
Functions	Funding Source	
Administration	OIC	468.2
Voluntary Sector	OIC	461.2
Childcare	OIC	2,645.0
Elderly Residential	OIC	4,309.2
Elderly Independent Sector	OIC	247.9
Elderly Day Centres	OIC	275.2
Disability	OIC	3,358.6
Mental Health	OIC	271.9
Other Community Care	OIC	994.9
Occupation Therapy	OIC	365.6
Home Care	OIC	2,928.8
Criminal Justice	OIC	36.9
Support Costs	OIC	958.1
Adaptions (Other Housing)	OIC	48.6
NHSO (IJB Contribution 50%)	OIC	-536.5
NHSO (IJB Contribution 50%)	NHS	1,073.0
Community Mental Health	NHS	1,024.0
Resource Transfer	NHS	2,032.0
Community Nursing	NHS	1,361.5
Primary Care	NHS	7,594.1
Occupational Therapy	NHS	215.9
Speech Therapy	NHS	105.4
Physiotherapy	NHS	468.5
Dietetics	NHS	119.0
Rehabilitation	NHS	250.0
Podiatry	NHS	164.5
Midwifery	NHS	581.5
Integration Fund	NHS	451.0
Children and Family Services	NHS	666.7
Direct Overheads and Support Services	NHS	482.4
		33,423.1

Integrated Care Fund

Available - £460k

Ongoing / Committed Projects - £154k

Scope - £ 306k

Project Options 2016/17	Cost	Recommendations
<p>Continuing the GP direct referral bed at Smiddybrae House</p> <p>Links to avoidance of hospital bed day use and improved experience of care for individuals. For further information refer to pilot evaluation circulated previous.</p>	<p>£54k G6 1.4wte plus 10% shift uplift and backfill</p>	<p>Yes – well supported by the group</p>
<p>Community Worker to mirror and support Patient Flow Co-ordinator role</p> <p>Links to avoidance of hospital bed day use and improved experience of care for individuals. Builds on experience of third sector Liaison Worker role in 2015/16 and case study work.</p>	<p>£40k approx. for full year post costs at G10 Band 7</p>	<p>Yes – well supported by the group</p>
<p>Anticipatory Care Plan</p> <p>Funding to support ongoing development of the local approach to ACPs and to support work to ensure they are accessible to the right staff at the right time</p>	<p>£5k</p>	<p>Not supported by all group members present. Some concern that ACPs do not really impact on care and treatment decisions. Would this project help address that? If the challenge is much bigger does the funding need to be more?</p>

Project Options 2016/17	Cost	Recommendations
<p>Locality Innovation Pot</p> <p>Direct access pot to be available to localities to support small scale projects or tests of change that align with overall objectives.</p>	£5k	Yes – small cost good outcomes
<p>Funding to Support Locality development</p> <p>A small amount available to facilitate the development of locality level working and planning.</p>	£5k	Yes
<p>Community Development Worker / Local Area Co-ordinator</p> <p>A pilot post in a locality area to work with local groups to maximise and join up the possible assets in a community to provide support to individuals without the need to utilise statutory service inputs</p>	£15k	Not a consensus in the group on this idea but a sense that it might be worth testing as a pilot as a spend to save activity
<p>Community Equipment</p> <p>Funding for additional equipment to support people at home.</p> <p>Year on year overspends in this area linked to increased demand. Evidenced need for this</p>	£10k	Yes – supported on basis that increased needs in the community require increased equipment
<p>AHP Additional Time</p> <p>Various areas to support reablement additional work throughout other projects such as GP Beds. Reablement focussed case review and care planning to ensure services that are required in an ongoing way are based on reablement principals</p> <p>Details of this not fully developed – requires work, costs to be considered as an upper limit</p>	£40k	Yes - supported

Project Options 2016/17	Cost	Recommendations
<p>Social Care Medicine administration support</p> <p>To provide one day per week of pharmacy technician support to improve medicine administration processes and governance arrangements within social care settings</p>	£5.5k	Yes – well supported as a spend to save activity
<p>Review of totality of Out of Hours work and services</p> <p>A review of the range of staff who are working providing an out of hours service with a view ensuring we are deploying the right people with the right skills in the right places to provide the right support. Review to include both health and social care services with an aim of understanding the totality of the service and rationalising it appropriately. Potential significant improved joint working and also financial savings opportunities. An individual who is familiar with out of hours work in Orkney and who has undertaken similar review work in another area is available to do this.</p>	£6k	<p>Not discussed in the group – raised as a separate issue after the meeting</p> <p>Suggest support for this as there are clear potential benefits</p>
<p>Pilot a model of isles care which sees a Nurse supported by a Rural Generic Support Worker</p> <p>There is an opportunity to pilot a skill mixed model of care and to trial the Rural Generic Support Worker in an isles setting. If successful this would have to become mainstream budget item and not be an ongoing ICF commitment</p>	£30k	Not discussed in the group – raised as a separate issue after the meeting
<p>VAO Peer network support to ensure appropriate election and representation at various workstreams of the IJB</p>	£5K	Yes



Orkney Integration Joint Board Directions Framework

This Directions framework seeks to maintain the strategic planning rights and responsibilities of the IJB at a Board level and ensure an approach and a structure of delegation that enables operational developments that are not strategic in level to be progressed on the authority of the formal committees of the IJB or officers of the IJB.

In taking this approach it is recognised that the work of health and social care services is not static, between each annual plan, rather it is a rolling programme of work that must be flexible and responsive to the circumstances, demand, opportunity and risk.

It is not the intention of the legislation, or the IJB, to create barriers to change, and bureaucratic process that encumber effective working, therefore a graded approach to Directions is proposed.

Level of Change	Examples of how the level is assessed	How the directions will be dealt with	What a direction will look like
Strategic level change	A strategic decision that sees a new service started or increased, or an existing service stopped or reduced, where there is a budget implication that cannot be managed from within an existing budget, or sees the budget for a service changed through an	Reported in full to the IJB informed by the Strategic Planning Group (SPG) Considered and authorised by the IJB	A description of the service change setting out the current service (if applicable) and change that is to be delivered. Detailed budget information

Level of Change	Examples of how the level is assessed	How the directions will be dealt with	What a direction will look like
	<p>investment or disinvestment decision</p> <p>Examples: Stop a current service Start a new service Change the eligibility criteria for access to a service so that the service grows or reduces Significantly change anticipated outcomes</p>	<p>Decisions of this level will form part of the Strategic Commissioning Plan (SCP) cycle</p>	<p>Performance report will form part of the overall performance reporting process</p>
<p>Operational level service change – with budget implications and no funding identified to match</p>	<p>An operational decision that sees a service change that cannot be managed from within an existing budget</p> <p>Examples: Respond to an identified risk in a service that requires increase / change with a cost implication Respond to an identified risk that sees the need for a new service with a cost implication</p>	<p>Reported in full to the IJB informed by the SPG</p> <p>Considered and authorised by the IJB</p> <p>Decisions of this level should normally form part of the SCP cycle but may arise ‘in-year’ as a result of changing circumstances</p>	<p>A risk assessment and risk management plan / ‘business case’ document setting out the circumstances and the change</p> <p>Detailed budget information</p> <p>Performance report will form part of the overall performance reporting process</p>
<p>Operational level service change – with budget implications and identified funding to match</p>	<p>An operational decision that sees a service change that can be managed from within either an existing budget or for which there is additional funding identified through a bid process or through additional in year allocation from</p>	<p>Considered and authorised by the Chief Officer of the IJB</p> <p>Reported to the SPG and / or any other relevant sub committee of the IJB</p>	<p>A ‘business case’ document setting out the change or the funding bid document that was required in relation to the funding opportunity</p> <p>Performance report will form</p>

Level of Change	Examples of how the level is assessed	How the directions will be dealt with	What a direction will look like
	a specific funding source	Reported to the IJB via the sub committee	part of the overall performance reporting process
Operational level service change – with no budget implications	A change within a service that seeks to improve the outcomes delivered that can be managed from within the existing service budget.	<p>Considered and authorised by the operational level staff, following discussion with line managers</p> <p>Outcomes reported to the appropriate sub committee of the IJB</p>	<p>A change plan in an appropriate format</p> <p>Performance report in an appropriate format to the relevant sub committee of the IJB</p>
Emergency scenarios	A service change or the need to deliver a service in an emergency scenario that incurs cost outwith the available resources for which time pressures do not allow for any formal reporting to the IJB or an appropriate sub committee prior to taking action	<p>Considered and authorised on behalf of the IJB by the Chief Officer of the IJB on receipt of agreement of one or both Chief Executives of the service delivery partners (as the service delivery scenario dictates)</p> <p>Reported to the IJB through the next available meeting</p>	The format of the supporting documentation will depend on the circumstances