Agenda Item
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Falkirk
Health and Social Care
Partnership

Title/Subject:	**Forth Valley NHS Board Scheme of Delegation**
Meeting:	**Integration Joint Board**
Date:	**6 September 2019**
Submitted By:	**Director of Finance, NHS Forth Valley**
Action:	**For Noting**

1. INTRODUCTION

1.1 The Chief Officer report presented at the IJB meeting on 7 June 2019 highlighted that Forth Valley NHS Board Standing Orders, including Scheme of Delegation, were under review and were due to be presented to the NHS Board in June for approval. It should also be noted that a review of NHS Standing Orders including Scheme of Delegation are part of a wider NHS governance review led by John Brown, Chair of Greater Glasgow & Clyde NHS Board.

1.2 The updated Scheme of Delegation reflects changes to operational management/ delivery arrangements being delegated to the Chief Officer in their Director of Health & Social Care role. This builds on arrangements already in place (e.g. Community Mental Health and Learning Disability services). The IJB requested a report providing assurance of these arrangements.

1.3 This report sets out the financial governance arrangements in place to ensure the appropriate and effective management control of resources in line with the Forth Valley NHS Board Standing Financial Instructions and Scheme of Delegation.

2. RECOMMENDATION

The Integration Joint Board is asked to:

2.1 Note the assurance provided that appropriate processes and systems are in place to enable the Chief Officer in her Director of Health & Social Care service management and delivery role to exercise the effective management control of resources within the framework of Forth Valley NHS Board Standing Financial Instructions.

3. BACKGROUND

3.1 A joint paper by the Chief Executives of Falkirk Council and NHS Forth Valley and the Chief Officer was presented to the Falkirk IJB meeting in February 2019. The paper updated IJB members on discussions involving the two Chief Executives and Chief Officer and colleagues from Scottish Government. The outcome of these discussions was agreement that it would be helpful to have a set of high level principles on the

role of the IJB and the Chief Officer and a description of the Chief Officer in her Director of Health & Social Care operational management role within the Health Board (set out in Appendix 1) and the Council (set out in Appendix 2). Both of these were informed by Government principles appended at Appendix 3.

4. DELEGATION RESPONSIBILITY TO DIRECTOR OF HEALTH & SOCIAL CARE /CHIEF OFFICER

4.1 A clear set of rules for delegation, inclusive of financial limits is essential to ensure that effective management control of resources is exercised and is used in conjunction with the system of budgetary control and other established procedures.

4.2 Standing Orders for the proceedings and business of Forth Valley NHS Board include Standing Financial Instructions and a Scheme of Delegation which identifies the areas of responsibility and duties delegated to individual roles with NHS Forth Valley. Section 4.3 of the Forth Valley NHS Board Standing Financial Instructions sets out the financial and delegated authority arrangements for Health and Social Care integration.

4.3 Forth Valley NHS Board considered and approved the Forth Valley NHS Board Standing Orders (including Scheme of Delegation and Standing Financial Instructions) on 11 June 2019. The Scheme of Delegation had been updated to reflect the Director of Health & Social Care's delegated financial responsibility for relevant NHS Forth Valley operational service budgets as set out in the Integration Scheme.

4.4 An Authorised Signatory form, which sets out the detailed financial limits and approval authority for committing financial and staff resources within relevant delegated areas, has been completed and signed by the Director of Health & Social Care and approved by NHS FV Chief Executive.

4.5 The Director of Health & Social Care must ensure effective financial management within allocated and delegated budgets and probity in accordance with NHS Forth Valley's Standing Financial Instructions and Standing Orders.

5. CONCLUSIONS

5.1 This report sets out the NHS Forth Valley arrangements in place to enable and support the Director of Health & Social Care in the management of their operational NHS budgets.

Resource Implications
There are no resource implications arising from this report.

Impact on IJB Outcomes and Priorities
Appropriate governance arrangements will ensure the IJB outcomes and priorities are delivered in an open and transparent manner with the appropriate scrutiny required.

Legal & Risk Implications
The IJB's risk management arrangements will provide the assurance that potential negative impact on safety, service delivery or staff is mitigated.

Consultation
Relevant stakeholders will continue to be involved and consulted as required.

Equalities Assessment

N/A

Approved for Submission by: Scott Urquhart, Director of Finance

Authors: **Scott Urquhart, Director of Finance**
Sonia Kavanagh, Corporate Governance Manager
Date: 22 August 2019

List of Background Papers: The papers that may be referred to within the report or previous papers on the same or related subjects.

Appendix 1

The Chief Officer and NHS Forth Valley

Governance Arrangements

The Integration Joint Board at its meeting (5 October 2018) noted that the Chief Executives and Chief Officer would resolve the outstanding issues relating to the delegation of NHS operational management arrangements and responsibilities to the Chief Officer. These included NHS governance arrangements.

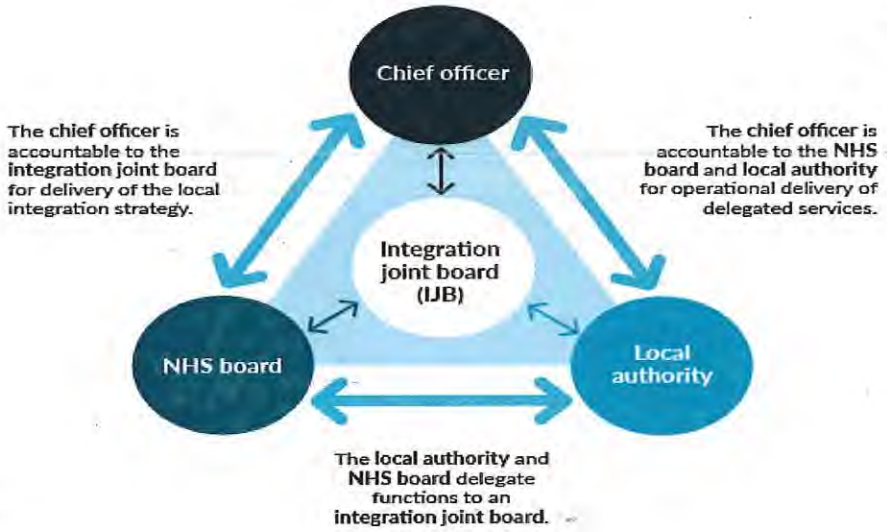
This section of the report focuses on delegation of operational management arrangements and responsibilities to the Chief Officer and the governance arrangements to enable and support the Chief Officer to fulfil their role in regard to NHS service delivery within a partnership arrangement.

The Chief Officer as previously reported (5 October 2018) has a dual role:

- The Chief Officer is directly accountable to the IJB for all of its responsibilities, notably: delivering the duty on the IJB to develop a strategic plan for integrated functions and budgets. The Strategic Planning Group (SPG) has an important role in informing this Plan, reviewing progress of the Plan, measured against the statutory outcomes of health and wellbeing, and associated indicators and is required to effectively communicate its findings to the IJB. The Chief Officer has a vital role in directing and co-ordinating this Group. The Chief Officer is also responsible for issuing Directions on behalf of the IJB to the Health Board and Council to ensure the Strategic Plan to improve health and social care outcomes for the IJB's population is delivered and preparing an Annual Performance report to quantify progress.

- The Chief Officer is accountable to the Chief Executives of the Council and Health Board for the delivery of integrated services. The dual role has been described by the Scottish Government and the King's Fund as usefully depicted below in diagram 1.

Diagram 1



Kings Fund: Leading across health and social care in Scotland (June 2018)
NHS Governance Arrangements – How will this work in practice?

The Chief Officer is a senior manager who in turn reports directly to the Chief Executives of Falkirk Council and NHS Forth Valley. As a joint appointment the Chief Officer needs to be supported and empowered to work within each of the authorising environments that in turn have their own existing and well established governance arrangements, including policies and procedures. The Chief Officer is a member of the NHS Senior Leadership Team. Like other senior managers there is an expectation that the Chief Officer will have support from their Senior Management Team and lead operational management of services with the Falkirk Health and Social Care Partnership. The Partnership brings staff employed by the Council and Health Board together to deliver improved outcomes for the people of Falkirk.

In NHS Forth Valley there are notably 4 strands of governance: clinical, finance, information and staff which are set out in statute. The NHS also has a duty to consult and work in partnership with clinical staff and staff side (recognised trade unions). Engaging the Area Clinical Forum and Area Partnership Form is a key requirement to inform and influence when undertaking organisational change. The NHS Board has a number of Scrutiny Committees that assure the NHS Board in regard to risk management and performance management arrangements aligned to each of the governance strands. The Audit Committee in turn provides assurance to the NHS Board that risk management arrangements are effective. Effective risk management arrangements are critical to good governance.

The IJB has a number of Committees notably the Care and Clinical Governance Committee which has been established to provide assurance to the IJB in regard to the quality (person centeredness, safety and effectiveness) of health care delivery.

All senior managers working within the NHS are required to comply with Standing Financial Instructions and to follow the Scheme of Delegation as set out within the Board Code of Corporate Governance known locally as the 'Standing Orders for the Proceedings and Business of Forth Valley NHS Board. In addition all staff, irrespective of their position, are required to work within policies and procedures.

The Chief Officer since February 2017 has had operational responsibility for community mental health and learning disability services and is therefore already familiar with the governance arrangements of the Health Board.

The Chief Officer and the Council

1. This appendix provides information on the governance arrangements of the Chief Officer's operational role within the Council. In many ways, it mirrors the arrangements either existing or proposed within the Health Board.

2. The Chief Officer is recognised as a chief officer within the Council. The Council's chief officers are the senior employees who are recognised within its Standing Orders and Scheme of Delegation ("the Standing Orders") as having the authority to take decisions on behalf of Council to manage the Council's resources. This authority is circumscribed to an extent by a number of caveats the obligation to consult with the relevant portfolio holder or committee convener (principally in relation to regulatory matters) and to act in compliance with council policy and its strategic plans.

3. In 2017 the Council amended its Standing Orders to recognise that the Chief Officer had some different lines of accountability from the three other Directors of the Council's Services. In particular, it was recognised that she should act in accordance with the Strategic Plan agreed by the Integration Joint Board and that there was also a requirement for consultation with the Chair of the IJB. In other respects the arrangement is the same as with other council services. The Head of Social Work Adult Services who is responsible for all of the delegated council functions reports directly to the Chief Officer and there is a straight forward management structure beneath him.

4. The Chief Officer is a member of the Council's Corporate Management Team. She attends or represented for all meetings and all items of business. She is a valued member of the team and contributes across the full range of CMT business drawing from her wide experience.

INTEGRATION OF HEALTH AND SOCIAL CARE: GOVERNANCE AND OPERATIONAL ARRANGEMENTS

Governance

The Public Bodies (Joint Working) (Scotland) Act 2014 sets out the statutory framework for integration of health and social care in Scotland. It deliberately establishes new governance and financial arrangements that are intended to change the way health and social care services are planned and delivered.

The Act is directive on the governance arrangements for planning and paying for services. It creates IJBs as new governance bodies, which are autonomous and independent decision-making bodies that bring together non-executive members of Health Boards and elected members of Councils to take responsibility for the wellbeing of their local population and to assure best value from their use of resources.

Functions are delegated to IJBs that match local authority boundaries for the purposes of strategic planning, giving directions with respect to operational delivery to the NHS Board and Council for provision of services, and allocating budgets to service delivery. These are the legal duties of the IJB. The IJB does not deliver the services because it does not employ the staff to do so.

An IJB cannot delegate a function to any other body – not to another IJB, nor to an NHS Board or Council. Every IJB in Scotland is, now and since 1 April 2016, responsible for its legal duties for all of the functions that are delegated to it, whether these are the minimum functions laid out in legislation (adult social care, adult primary care and most adult unscheduled inpatient care), or go beyond the minimum requirements.

Operational management and delivery of services

The Act is not directive about operational arrangements.

Delivery of services, via directions issued by the IJB, is for the Health Board, Local Authority and IJB to organise themselves to best suit local circumstances, assets, geographies, staffing and priorities. It may for instance make sense for neighbouring IJBs in partnership with a single Health Board to share some operational delivery teams and management arrangements.

In most places Chief Officers have a dual role as the accountable officer of the IJB (a statutory role and requirement) and as a joint Director of health and social care spanning the management structures of the Health Board and Local Authority.

Links to statutory guidance

Roles, responsibilities and membership of the IJB:
https://www2.gov.scot/Publications/2015/09/8274

Strategic Commissioning Plans: https://www2.gov.scot/Publications/2015/12/7436

Functions for integration:
https://www2.gov.scot/Topics/Health/Policy/Health-Social-Care-Integration/Statutory-Guidance-Advice/HSCFuncNote

Full suite of statutory guidance: https://www2.gov.scot/Topics/archive/Adult-Health-SocialCare-Integration/Implementation/ImplementationGuidance