Summary of the East Lothian Integration Scheme

This document summarises the content of the East Lothian Integration Scheme.

It summarises the key points in each section and the main differences from how health and social care services are organised in East Lothian.

Sections of Scheme
Aims and Outcome of Integration Scheme
We have described the vision for the East Lothian Integration Joint Board and the principles agreed by the East Lothian Shadow Board.
In addition the Integration Scheme must following the integration planning principles and the national health and wellbeing outcomes .
Parties and Definitions
A summary of the technical terms used in the Integration Scheme.
Type of Integration Model
This section explains that we will use the 'body corporate' model.
The 'body corporate' option allows responsibility for Health and Social Care services to move to an Integrated Joint Board. This board will be responsible for the planning of these services and will tell NHS Lothian and East Lothian Council how to provide services.
We think the 'body corporate' option is the best one for East Lothian because it makes sure that both NHS Lothian and East Lothian Council are equally involved in planning Health and Social Care services. This option also allows the Integrated Joint Board to move services between NHS Lothian and East Lothian like the 'lead agency' model so there is lots of flexibility for the future.
Local Governance Arrangements
This section details the agreed:
 the voting membership of the IJB, numbers of representatives, length of appointment and how appointments are made
 the appointment of the chairperson and vice-chairperson including procedure and length of appointment

	Sections of Scheme
	the non-voting membership
	any committees
	The voting membership will be 4 councillors and 4 non-executive NHS Lothian board members.
	The non-voting membership reflects the minimum requirements set in the Regulations. The IJB can also appoint additional non-voting members once it is established.
	Minimum non-voting members are:
	 The Chief Social Work Officer of the Council; The Chief Officer of the Integration Joint Board; The Chief Finance Officer of the Integration Joint Board; A General Practitioner (GP) A registered nurse
	 A doctor employed by NHS Lothian but not a GP A staff representative of the constituent authorities engaged in the provision of services provided under integration functions; A representative of third sector bodies carrying out activities related to health or social care in the area of the Council; A service user representative residing in the area of the Council; and A persons providing unpaid care in the area of the Council.
	The establishment of any sub-committees will also be included within the standing orders and detailed within the Scheme
5.	Delegation of Functions
	This section details the health and adult social care functions delegated to the IJB
	The list of delegated functions form an annex to the Scheme and follow what must be delegated within the regulations together with additional services from the may list which have been approved by NHS Lothian and East Lothian Council
	Delegated functions are:
	East Lothian Council:
	 Social work services for adults and older people Services and support for adults with physical disabilities and learning disabilities

Se	ctions of Scheme
•	Mental health services Drug and alcohol services
	Adult protection and domestic abuse
•	Carers support services
•	Community care assessment teams
•	Support services
•	Care home services
•	Adult placement services
•	Health improvement services
•	Aspects of housing support, including aids and adaptions
•	Day services Local area co-ordination
•	Respite provision
•	Occupational therapy services
•	Re-ablement services, equipment and telecare
In	addition East Lothian Council has decided to delegate
•	Criminal Justice Social Work services
NH	IS Lothian:
	Assident and Emergency convises provided in a beenite!
•	Accident and Emergency services provided in a hospital
•	Inpatient hospital services relating to the following branches of medicine
•	general medicine
•	geriatric medicine rehabilitation medicine
•	
	respiratory medicine
•	psychiatry of learning disability
	Palliative care services provided in a hospital
•	Inpatient hospital services provided by General Medical Practitioners
•	Services provided in a hospital in relation to an addiction or
	dependence on any substance Montal health convises provided in a heapital except secure forensis
•	Mental health services provided in a hospital, except secure forensic mental health services
	mmunity Services
•	District nursing services
•	Services provided outwith a hospital in relation to an addiction or
	dependence on any substance
•	Services provided by allied health professionals in an outpatient

	Sections of Scheme
	 department, clinic, or outwith a hospital The public dental service Primary medical services provided under a general medical services contract, and arrangements for the provision of services made under
	section 17C of the National Health Service (Scotland) Act 1978, or an arrangement made in pursuance of section 2C(2) of the National Health Service (Scotland) Act 1978
	 General dental services provided under arrangements made in pursuance of section 25 of the National Health (Scotland) Act 1978
	 Ophthalmic services provided under arrangements made in pursuance of section 17AA or section 26 of the National Health Service (Scotland) Act 1978
	 Pharmaceutical services and additional pharmaceutical services provided under arrangements made in pursuance of sections 27 and 27A of the National Health Service (Scotland) Act 1978
	 Services providing primary medical services to patients during the out- of-hours period
	 Services provided outwith a hospital in relation to geriatric medicine. Dellistive core corrigon provided outwith a hospital.
	 Palliative care services provided outwith a hospital Community learning disability services
	 Mental health services provided outwith a hospital
	 Continence services provided outwith a hospital
	 Kidney dialysis services provided outwith a hospital
	 Services provided by health professionals that aim to promote public health
	 In addition to the functions that must be delegated NHS Lothian has chosen to delegate the following health services as they relate to provision for people under the age of 18:
	 Primary Medical Services and General Medical Services (including GP Pharmaceutical services)
	 General Dental Services, Public Dental Services and the Edinburgh Dental Institute
	General Ophthalmic Services
	General Pharmaceutical Services
	Out of Hours Primary Medical Services
	Learning Disabilities
6.	Local Operational Delivery Arrangements
	This section details the operational aspects of the IJB and the relationship with the Health Board and Local Authority:

	Sections of Scheme
	 Monitoring and reporting arrangements on the delivery of the integrated services Processes to consider East Lothian Strategic Plan and the impact on the Strategic Plans on other integration authorities
	 How IJB interrelates with NHS Lothian and East Lothian Council The local outcomes, performance targets, improvement measures and reporting arrangements
7.	Clinical and Care Governance
	This section details:
	 How professional advice in respect of clinical and care governance is provided within all aspects of the Integrated Joint board's governance and management structures
	 The arrangements for the provision of professional health care and social work advice to the Integration Joint Board, the strategic planning group and localities
	 How these arrangements interrelate with the remaining arrangements for providing professional clinical governance and advice within the Health Board (including the respective responsibilities of the Health Board's medical director and nurse director) and the care governance arrangements that remain with the Local Authority
	 Information about the role of senior professional staff in the NHS and Local Authority in relation to these arrangements
	 Information about how these arrangements relate to the arrangements for the involvement of professional advisers to the Integration Joint Board
8.	Chief Officer role
	This section details:
	 The relationship between the Chief Officer and the senior management team of the Health Board and Local Authority. The Chief Officer will be a Joint Director of both NHS Lothian and East Lothian Council and shall sit on senior Management Team of each body

	Sections of Scheme
	 Information on the structures and procedures which will be used to enable the Chief Officer to work with senior management of the Parties to carry out functions in accordance with the Strategic Plan
	 Line management of the Chief Officer to ensure accountability to both parties. The Chief Officer will be accountable to both Chief Executives who will both have line management duties
9.	Workforce
	This section details:
	 The process for appointment to jointly appointed positions, arrangements for supervision and management of people who are jointly appointed
	• The arrangements for the supervision and management of staff who report to a person employed by another organisation
	 The process which the parties will follow to develop a joint Workforce Development and Support Plan, and an Organisational Development strategy in relation to teams delivering integrated services
10.	Finance
	This section details:
	 Amounts to be paid by the Health Board and the Local Authority to the Integration Joint Board in respect of each of the functions delegated by them to the Integration Joint Board
	 Amounts to be made available by the Health Board to the Integration Joint Board in respect of each of the functions delegated by the health Board which are:
	 i) carried out in a hospital in the area of the Health Board, and ii) Provided for the areas of two or more local authorities
	 Payment in the first year to the Integration Joint board for delegated functions
	Method for determining the amount set aside for hospital services
	 <u>In-year variations</u> In the following circumstances the Health Board and/or Local Authority may reduce the payment in-year by the Integrated Joint

	Sections of Scheme
	board to meet exceptional unplanned costs within the constituent authorities - conditions to be listed
	 Process for the management of the variances for the amount set aside in hospital budgets Financial management and financial reporting arrangements
11.	Participation and Engagement
	This section details the persons, groups of persons, representatives of persons consulted in development of the integration scheme and the means by which consultation took place
	A communication and engagement strategy is being developed to support this together with the Strategic Plan consultation. This will come to the Shadow Board for ratification on completion
	The persons consulted will follow the requirements detailed in the Regulations
	List of consultees include:
	 Health professionals Users of health care Carers of users of health care Commercial providers of health care Non-commercial providers of health care Social care professionals Users of social care Carer of users of social care Commercial providers of social care Staff of the Health Board and local authority who are not health professionals or social care professionals Non-commercial providers of social care Non-commercial providers of social care Third sector bodies carrying out activities related to health or social care
12.	Information Sharing and Confidentiality
	This section details:
	 A process to agree the Information Sharing Protocol – Liability issues for breaches of this will also need to be set out

	Sections of Scheme
	 Information sharing principles and the processes and procedures that will apply to information sharing
13.	Complaints
	This section details:
	 complaint handling for the services provided by the Integration Joint Board
	 complaint handling for staff working within the Integration Joint Board to include responses to SPSO
14.	Claim Handling, Liability and Indemnity
	This section details:
	 provision to the effect that each of the Parties will indemnify the other in respect of claims made by its own employees
	 provision to the effect that each of the Parties will indemnify the other in respect of claims by third parties arising from acts or omission of its own employees
	 Procedures for discussing and resolving issues of disputed liability between the Parties and the Integration Joint Board
	 Assurance arrangements including any self-assurance arrangements
15.	Risk Management
	Develop a shared risk management strategy that sets out:
	 The key risks with the establishment and implementation of the Integration Joint Board
	 An agreed risk monitoring framework
	 Any risks that should be reported on from the date of delegation

	Sections of Scheme
	of functions and resources
	 The frequency that risks should be reported on
	The method for agreeing changes to the above requirements with the Integration Joint Board
16.	Dispute Resolution
	This section details the agreed mechanism for dealing with any disputes between the Local Authority and the NHS Board