PRESCRIBED GROUPS WHICH MUST BE CONSULTED WHEN PREPARING OR REVISING INTEGRATION SCHEMES; PREPARING DRAFT STRATEGIC PLANS; AND WHEN MAKING DECISIONS AFFECTING LOCALITIES RELATING TO THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

#### **CONSULTATION QUESTIONS**

Regulations?

1.	Do these draft Regulations include the right groups of people?
	Yes X
	No
2.	If no, what other groups should be included within the draft Regulations?
3.	Are there any further comments you would like to offer on these draft

With respect to adult health and social care services question 2 above, it is difficult to conceive of an interest group or constituency that has not been given legitimacy within the draft regulations.

The new HSCPs need to be empowered to operate in a manner that is locally responsive and innovative, and not bogged-down in counter-productive and costly bureaucracy. So, for example, the requirement to establish a static strategic planning group is well intended but somewhat traditional and reductive given the volume of individuals who would have to be invited to attend meetings but who themselves are unlikely to (in practice) legitimately represent wider constituencies or communities of interest.

We would suggest that in keeping with the parallel legislation being progressed in respect of community empowerment/engagement (that the HSCP will be obliged to comply with in any case), it would be more constructive to emphasise the standard consultees (already articulated within the draft regulations) who the HSCP are obliged to engage with as part of strategic or locality planning – and it is for the Integrated Joint Board to hold the Chief Officer to account for how the HSCP does that within the context of local Community Planning arrangements.

# MEMBERSHIP, POWERS AND PROCEEDINGS OF INTEGRATION JOINT BOARDS ESTABLISHED UNDER THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

#### **CONSULTATION QUESTIONS**

	re any additional non-voting members who should be included in the Joint Board?
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Yes	X
No	

2. If you answered 'yes', please list those you feel should be included:

We have a practical concern about the sheer number of non-voting members identified, not least in terms of the effective functioning of meetings. It should also be noted that the stakeholder interests set out within the regulations are only for the minimum requirements/functions (i.e. do not give consideration to an equivalent representation of interests for children's services and criminal justice).

However, if this is the model of governance that HSCPs will have to work within, then the list should also include trade union/staff side representatives as non-voting members: one for local authority employees and one for the NHS health board employees, with the condition being that both of these representatives themselves work within the HSCP concerned.

We have a principled concern that a number of specific interest groups (e.g. independent and third sector organisations) are to be given a voice at the Integration Joint Board but without any reciprocal statutory mandate provided to the Chief Officer in respect of those sectors, agencies or organisations given the Chief Officer's leadership responsibility for the health and wellbeing of their local population.

We are also concerned about the unfair expectation on specific non-voting members in being able represent the diverse perspectives of wider constituencies in any meaningful fashion, most notably in relation to service user and carer representatives (and indeed unclear how providing such a visible voice in the Integration Joint Board to such discrete individuals would satisfy the requirements of the Equalities Act). We would suggest that in keeping with the parallel legislation being progressed in respect of community empowerment/engagement (that the HSCP will be obliged to comply with in any case), it would be more constructive to emphasise that HSCP are obliged to engage with relevant communities and also relevant groups representative of the protected characteristics set out within the Equalities Act as part of strategic or locality planning – and it is for the Integration Joint Board to hold the Chief Officer to account for how the HSCP does that within the context of local Community Planning arrangements.

3. Are there any other areas related to the operation of the Integration Joint Board that should also covered by this draft Order?

The draft Order directs that "Where the Health Board is unable to fill all their places with non-executive directors they can then nominate other appropriate people, who must be members of the Health Board, to fill their spaces." We would not support that voting members should be present just to "fill spaces" and so the requirement should be that only non-executive directors can be voting members on behalf of NHS Boards.

We do support the proportion of voting members from Councils and NHS Boards who are required to attend for an Integration Joint Board meeting to be quorate.

4. Are there any further comments you would like to offer on this draft Order?

It is useful for the Scottish Government to have laid out a national model of matters to be included in the Standing Orders as this will establish and support equity and consistency across the partnerships sharing a NHS Board area as the legalities will be similar, if not the same, for most areas.

### ANNEX 3(C)

ESTABLISHMENT, MEMBERSHIP AND PROCEEDINGS OF INTEGRATION JOINT MONITORING COMMITTEES ESTABLISHED UNDER THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

#### RESPONDENT INFORMATION FORM

Please Note this form must be returned with your response to ensure that we handle your response appropriately. If you are responding to more than one set of regulations at the same time, you only need to complete this form once.

This section relates to only areas partnerships that have opted for a lead agency model, so is therefore not relevant for comment from or in relation to West Dunbartonshire.

### PRESCRIBED MEMBERSHIP OF STRATEGIC PLANNING GROUPS ESTABLISHED UNDER THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) AC

## CO

CT 2014		
ONSULTATION QUESTIONS		
1. The draft Regulations prescribe the groups of people that should be represented on the strategic planning group. Do you think the groups of people listed are the right set of people that need to be represented on the strategic planning group?		
Yes X		
2. If no, what changes would you propose?		
With respect to question 1 above, it is difficult to conceive of an interest group or constituency that has not been given legitimacy within the draft regulations.		
The new HSCPs need to be empowered to operate in a manner that is locally responsive and innovative, and not bogged-down in counterproductive and costly bureaucracy. So, for example, the requirement to establish a static strategic planning group is well intended but somewhat traditional and reductive given the volume of individuals who would have to be invited to attend meetings but who themselves are unlikely to (in practice) legitimately represent wider constituencies or communities of interest; or in the case of professional staff, be fully representative of all the disciplines or regulated groups that will employed within the HSCP.		
We would suggest that in keeping with the parallel legislation being progressed in respect of community empowerment/engagement (that the HSCP will be obliged to comply with in any case), it would be more constructive to emphasise the standard consultees (already articulated within the draft regulations) who the HSCP are obliged to engage with as part of strategic or locality planning – and it is for the Integration Joint Board to hold the Chief Officer to account for how the HSCP does that within the context of local Community Planning arrangements.		
3. Are there any further comments you would like to offer on these draft Regulations?		

## ANNEX 5(D)



# PRESCRIBED FORM AND CONTENT OF PERFORMANCE REPORTS RELATING TO THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

#### **CONSULTATION QUESTIONS**

1.	Do you agree with the prescribed matters to be included in the performance report?
	Yes X
	No L
2.	If no, please explain why:
3.	Are there any additional matters you think should be prescribed in the performance report?
	Yes
	No X
4.	If yes, please tell us which additional matters should be prescribed and why:
5.	Should Scottish Ministers prescribe the form that annual performance reports should take?
	Yes
	No X

6.	If you answered yes, what form should Scottish Ministers prescribe?

7. Are there any further comments you would like to offer on these draft Regulations?

It is important that performance is reported and can be robustly scrutinised, and we believe that the draft prescribed content should enable this. However, it is also important to recognise – which the regulations as drafted currently do not – that for those HSCPS that incorporate more than the minimum functions their annual performance reports will also have to address those wider remits in a manner that is accessible (and which are prepared in a manner that does not encourage the creation or resourcing of a burdensome and complicated performance reporting "industry").

We welcome the opportunity to de-clutter the wider performance information - such as HEAT and SOLACE targets - within the framework as this is an already busy landscape which would benefit from streamlining for purposes of clarity of accountability and minimisation of bureaucracy. As such, we would suggest that prescribed reports are given the status by Scottish Government of being Statutory Performance Reports, and as such would *replace* - rather than be in addition - to the current returns required of local authorities and NHS Boards.

In a similar vein, we would encourage the Scottish Government to consider a reduction in the number of currently silo-ed and increasingly over-lapping national audit/inspection/improvement bodies: such a reduction could be used to free-up much needed resource to be transferred to the new HSCPs to assist in meeting the costs of care given the predicted demographic changes over the coming years and the on-going period of fiscal austerity in which the public sector will be operating.