

Scottish Borders Health and Social Care Partnership Integration Joint Board

19 July 2023



Scottish Borders
Health and Social Care
PARTNERSHIP

MINISTERIAL STEERING GROUP SELF-EVALUATION

Report by Chris Myers

1. PURPOSE AND SUMMARY

- 1.1. To seek the support of the IJB Audit Committee to endorse the process, findings and actions associated to the self-evaluation against the Ministerial Steering Group recommendations.

2. RECOMMENDATIONS

- 2.1. The Scottish Borders Health and Social Care Integration Joint Board (IJB) is asked to:-
- Endorse the enclosed self-assessment process
 - Approve the associated action plan for delivering on the proposed improvement actions, prior to submission to the Scottish Government
 - Request an update to the IJB Audit Committee on progress against the delivery of the actions outlined in March 2024 from the Chief Officer.

3. ALIGNMENT TO STRATEGIC OBJECTIVES AND WAYS OF WORKING

- 3.1. It is expected that the proposal will impact on the Health and Social Care Strategic Framework Objectives and Ways of Working below:

Alignment to our strategic objectives					
Rising to the workforce challenge	Improving access	Focusing on early intervention and prevention	Supporting unpaid carers	Improving our efficiency and effectiveness	Reducing poverty and inequalities
		X		X	

Alignment to our ways of working					
People at the heart of everything we do, and inclusive co-productive and fair	Good agile teamwork and ways of working – Team Borders approach	Delivering quality, sustainable, seamless services	Dignity and respect	Care and compassion	Openness, honesty and responsibility
X	X	X	X	X	X

4. INTEGRATION JOINT BOARD DIRECTION

- 4.1. A Direction is not required

5. BACKGROUND

- 5.1. The Ministerial Steering Group (MSG) was established in 2008 to provide a forum in which leaders from health and social care could meet to discuss matters of mutual interest and to provide leadership, direction and support in working across organisational and structural boundaries. It assumed overall responsibility for policy matters that crossed the local government / NHS Scotland interface and is a key forum for taking forward COSLA and the Scottish Government’s joint political leadership of health and social care integration.
- 5.2. The group is chaired by the Cabinet Secretary for Health and Sport and has a membership that includes three COSLA elected members, Health Board Chairs, the Scottish Council of Voluntary Organisations (SCVO), Scottish Care, Scottish Social Services Council (SSSC), Healthcare Improvement Scotland, Integrated Joint Boards, Social Work Scotland, and more recently, the Care Inspectorate.
- 5.3. Since Health and Social Care Integration went live in April 2016, the MSG has played a key role in reviewing progress and in February 2019 they produced a report entitled “Review of Progress with Integration of Health and Social Care”. In November 2018, Audit Scotland also produced a report providing an “Update of Progress” of Health and Social Care Integration. The “Review of Progress” defined 25 detailed proposals for improvement of IJBs/Partnership working.
- 5.4. Of these, 3 of the proposals were to be taken forward by the Scottish Government, with the remaining 22 to be taken forward by the individual Health and Social Care Partnerships. The MSG requested that each Partnership undertake a self-assessment against the 22 proposals, on an ongoing basis. The Scottish Borders HSCP self-evaluation against the 22 proposals was last submitted to Government in June 2020.
- 5.5. At the end of 2022, the Improvement Service was commissioned to undertake a new self-assessment process on behalf of the IJB. Following a planning process, the Improvement Service sent out a self-assessment to IJB members in March 2023, asking them to agree or disagree with statements outlining the potential effectiveness of the IJB against the 22 proposals. The results are summarised in the table below.

Theme	Agree/Strongly Agree	Disagree/Strongly Disagree	Don't Know
IJB Response to COVID-19	73%	17%	10%
Leadership and Relationships	63%	24%	13%
Governance and Accountability	50%	39%	11%
Community Engagement and Participation	70%	27%	3%
Outcomes and Impact	37%	46%	17%
Performance Management and Use of Evidence	51%	38%	11%

5.6. The highest rated statements are listed below:

- Statement 7 - IJB meetings take place within a positive spirit of transparency, openness and trust. (86% Agree)
- Statement 20 - Agreed priorities and outcomes in the Health and Social Care Strategic Plan reflect the key challenges of the area identified through any data analysis and community engagement activity. (86% Agree)
- Statement 5 - The IJB should look to permanently retain new ways of working developed during the response to COVID-19. (79% Agree)

5.7. The lowest rated statements were noted as:

- Statement 24 - The IJB realigns resources in order to better deliver early intervention and prevention approaches. (93% Disagree)
- Statement 16 - The IJB holds individual Board members to account for their performance and contribution to the outcomes in the Health and Social Care Strategic Plan. (57% Disagree)
- Statement 26 - The performance information considered by the IJB is timely, relevant and provides a good measure of progress towards the desired outcomes and key time specific targets. (57% Disagree)

5.8. The Improvement Service summarised the information from the self-assessment and then held a Consensus and Improvement Planning Workshop for IJB members on 19 April 2023. As part of this, the IJB reviewed the feedback from the self-assessment, reviewed the areas for improvement identified in the checklist, and then agreed priorities for further focus.

5.9. The three areas identified by IJB members were:

- Outcomes and impact: “Consider how the IJB can further align resources to facilitate the desired shift to early intervention and prevention.”
- Governance and accountability: “Clarify the roles and responsibilities of IJB members to ensure they are clear on what is expected of them”.
- Community engagement and participation “Reflect upon the IJB’s current mechanisms for engaging with service users and the wider public to more effectively seek their views.” Despite good progress in this area noted by IJB members, it was felt that this must continue to be an ongoing priority.

5.10. Action plans were developed for each of these three areas, and these are enclosed in Appendix 1.

6. IMPACTS

Community Health and Wellbeing Outcomes

6.1. It is expected that the proposal will impact on the National Health and Wellbeing Outcomes below:

N	Outcome description	Increase / Decrease / No impact
1	People are able to look after and improve their own health and wellbeing and live in good health for longer.	No impact
2	People, including those with disabilities or long term conditions, or who are frail,	No impact

	are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.	
3	People who use health and social care services have positive experiences of those services, and have their dignity respected.	Increase
4	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	No impact
5	Health and social care services contribute to reducing health inequalities.	Increase
6	People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.	No impact
7	People who use health and social care services are safe from harm.	No impact
8	People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	Increase
9	Resources are used effectively and efficiently in the provision of health and social care services.	Increase

Financial impacts

6.2. There are no costs attached to any of the recommendations contained in this report.

Equality, Human Rights and Fairer Scotland Duty

6.3. The IJB has a statutory obligation to eliminate unlawful discrimination, harassment and victimisation; advance equality of opportunity between people who share a characteristic (age, disability, gender re-assignment, trans/transgender identity, marriage or civil partnership, pregnancy and maternity, race groups, religion or belief, sex-gender identity, and sexual orientation) and those who do not; and foster good relations between people who share a characteristic and those who do not. This involves tackling prejudice and building understanding.

6.4. Additionally, where proposals are “strategic”, the Fairer Scotland Duty requires us to show that we have actively considered how we can reduce socio-economic inequalities in the decisions that we make and to publish a short written assessment on how we have done this.

6.5. In this instance, an Integrated Impact Assessment is not required.

Legislative considerations

6.6. There are no known legislative considerations relating to this report.

Climate Change and Sustainability

6.7. There are no known climate change and sustainability impacts or considerations relating to this report.

Risk and Mitigations

6.8. No specific risks need to be raised or addressed.

7. CONSULTATION

Communities consulted

7.1. As this relates to a self-evaluation, only IJB members have been consulted to date.

Integration Joint Board Officers consulted

7.2. The IJB Board Secretary, the IJB Chief Financial Officer and the IJB Chief Officer and Corporate Communications have been consulted, and all comments received have been incorporated into the final report.

7.3. In addition, consultation has occurred with our statutory operational partners at the:

- HSCP Joint Executive

Approved by:

Chris Myers, Chief Officer

Author(s)

Chris Myers, Chief Officer

Background Papers:

Scottish Borders Health and Social Care Integration Joint Board MSG self-assessment Action Plan 2020.

Available from: <https://scottishborders.moderngov.co.uk/documents/s42389/Appendix-2020-AC3%20-%20Appendix%201%20Scottish%20Borders%20Health%20and%20Social%20Care%20Partnership%20Action%20Plan.pdf>

Scottish Borders Health and Social Care Integration Joint Board MSG self-assessment approach 2019.

Available from (Item 6e):

<https://scottishborders.moderngov.co.uk/ieListDocuments.aspx?CId=218&MId=4792&Ver=4>

Previous Minute Reference:

Minute of May 2019 IJB (Item 10) Available:

<https://scottishborders.moderngov.co.uk/documents/s36944/IJB%20Minutes%2008.05.19.pdf>

For more information on this report, contact us at Chris Myers, by email.

Scottish Borders IJB – PSIF Self-Assessment PSIF Improvement Plan – April 2023

Improvement actions	Lead	Implications [Risk, Cost, Resource]	Target Date	Measure	Outcomes
1. Consider how the IJB can further align resources to facilitate the desired shift to early intervention and prevention.					
<p>1. Map current expenditure on early intervention/ prevention and look to have discussion about increasing the proportion and ambition of IJB budget/resources/staff that can be allocated into prevention and early intervention, recognising the current financial context.</p> <p>- Seek views of Community Councils as part of mapping process.</p>	Hazel Robertson	<p>Risks if Improvement Action not Implemented</p> <ul style="list-style-type: none"> Costs will increase if we do not invest in prevention. <p>Risks</p> <ul style="list-style-type: none"> May have to deprioritise/disinvest other areas to be able to target resources to do this. Need to recognise balance needed between increasing focus on ‘upstream’ prevention with current operational responsibilities. Will not progress this area if we do not get public buy in. 	June 2023 (for mapping)	<p>Finance section of the Annual Report.</p> <p>Utilise Programme Budgeting in Marginal Analysis (PBMA) toolkit to measure impact of shift of resources on the prevention agenda.</p>	We want everyone in the Scottish Borders to live their lives to the full.
<p>2. Look to work with partners in the Community Planning Partnership (CPP) to align and push early intervention and prevention initiatives. Link to CPP theme of <i>Enjoying Good Health and Wellbeing</i>.</p>	Chris Myers and Sohail Bhatti	<ul style="list-style-type: none"> Need to recognise balance needed between increasing focus on ‘upstream’ prevention with current operational responsibilities. Will not progress this area if we do not get public buy in. 	May 2023 (update to CPP on <i>Health and Wellbeing</i>)	<p>CPP Community Plan/LOIP (CPP to consider how to appropriately measure activity)</p>	
<p>3. Develop a <i>Team Borders Approach</i> to engaging and commissioning with the Third Sector around early intervention and prevention. This should</p>	Brian Davies, Jen Holland and Hazel Robertson	<ul style="list-style-type: none"> Will not progress this area if we do not get public buy in. 	September 2023	<p>Once mapping done, take this to the IJB to show what spending budget on and make proposal about how we look at early</p>	

Improvement actions	Lead	Implications [Risk, Cost, Resource]	Target Date	Measure	Outcomes
include: - One path for commissioning to simplify process and funding streams; - Review one year funding for Third Sector to provide more security for the sector; - Look to join up IT systems where possible.		<ul style="list-style-type: none"> Age profile of those using services and age profile of the staff in HSCP getting older. 		intervention and prevention being more of a focus within current resource.	
4. Engage with Children and Young People’s Planning Partnership (CYPPP) to raise awareness around early intervention and prevention, and to advocate for this in the children’s delegated services (AHPs, Primary Care, School Nursing, Health Visiting, CAMHS and Young Carers).	Sarah Horan and Stuart Easingwood.		Ongoing	Link to the Promise and CYPPP measures from prevention perspective.	
5. Look to clarify outcomes for the five Locality Groups to improve and put in place tangible activity around areas such as early intervention and prevention (in particular for hard to reach groups). Adopt a designing with people approach, such as <i>‘Nothing for me, without me’</i> .	Stephen Fotheringham		July 2023 (Mapping for one Locality Group, then look at other 4 Locality Groups)	Annual Reporting and Pathfinder output.	

Improvement actions	Lead	Implications [Risk, Cost, Resource]	Target Date	Measure	Outcomes
6. Ensure that a Community Led Support (CLS) agenda is pursued around early intervention and prevention, that is inclusive and avoids a 'one professional lens' approach (i.e. inclusion of health, social work and social care).	Gwyneth Lennox		September 2023 (To IJB)	CLS agenda metrics reporting to IJB.	
7. Review our effectiveness and efficiency as partners. Look at how we are using services, what are we commissioning (IJB, CPP and partners). Need to ensure services are evidence-based and consider if these are the best use of resources to achieve strategic objective and outcomes.	All partners contributing.		September 2023	<ul style="list-style-type: none"> - Output around existing commissioning to IJB in September. - Local service measures providing info on number of people turning up for appointments and are they using the services we have, productivity of services, etc. - Ensure evidence-based. - Bring granular performance information to the Audit Committee of the IJB. 	
8. Consider what opportunities are available as a large employer to encourage better staff wellbeing around preventative agenda. - Wellbeing process begun	Sohail Bhatti		Ongoing through the Joint Staff Forum and Integrated Workforce	iMatter for the whole HSCP. Consider other measures to gather views of partners.	

Improvement actions	Lead	Implications [Risk, Cost, Resource]	Target Date	Measure	Outcomes
and will be rolled out in council and the college in summer. Staged roll out to other organisations later.			Planning Group.		
2. Clarify the roles and responsibilities of IJB members to ensure they are clear on what is expected of them.					
<p>1. Develop an information resource which can be used by Board members, the wider workforce and the public that clearly defines:</p> <ul style="list-style-type: none"> the roles and responsibilities of the Board; the roles and responsibilities of Board members; Board structure and processes. <p>Ensure this resource is co-produced with all Board members.</p>	Led by Chris Myers with all partners contributing, with support from Iris Bishop.	<p>Risks if Improvement Action not Implemented</p> <ul style="list-style-type: none"> IJB will continue to risk ineffective operation via lack of scrutiny. Members not able to make the best contribution they can. Risk of doing this badly perpetuates inequalities between constituencies. Ongoing confusion for people on where roles and responsibilities sit in relation to the IJB. National Care Service 	September 2023	Information resource developed. Feedback from Board members, workforce and public.	Improved clarity and transparency of roles and responsibilities of IJB members.
2. Organise face to face development session with Board members to share the resource – what it contains, etc.	Iris Bishop		October 2023	Development session held.	

Improvement actions	Lead	Implications [Risk, Cost, Resource]	Target Date	Measure	Outcomes
<p>3. As part of Communications Plan, ensure information resource is communicated to wider workforce and public. This will ensure transparency of what we are doing, who is in what role, what function they are executing in attendance at the IJB, etc.</p>	<p>Chris Myers and Clare Oliver</p>	<p>implementation may impact on this.</p> <p>Costs</p> <ul style="list-style-type: none"> • No money or staff resource currently to undertake this work. • Staff resource costs for development of information resource but also member time costs to co-produce. 	<p>October 2023</p>	<p>Feedback from workforce and public.</p>	
<p>4. Review the way minutes of meetings are written to ensure member's roles for particular papers are clearly defined.</p> <p>Also, chair to ask members to clarify in which capacity they are presenting a paper if they have more than one role on the Board.</p>	<p>Chair and Iris Bishop</p>		<p>Next meeting – May 2023</p>	<p>Board meetings are minuted reflecting member's roles for particular papers.</p>	

Improvement actions	Lead	Implications [Risk, Cost, Resource]	Target Date	Measure	Outcomes
3. Reflect upon the IJB's current mechanisms for engaging with service users and the wider public to more effectively seek their views.					
1. Ensure our Locality Working Groups (Community Integration Groups) facilitate diversity and inclusivity to ensure representation from the wider population and all stakeholder networks.	Stephen Fotheringham	<p>Risks</p> <ul style="list-style-type: none"> If actions don't work then public will not be involved. If there is a lack of oversight on activity, then could be uncoordinated approach. If resources aren't available then we will be unable to undertake quality engagement. If we don't use the equality and diversity lens then it will not be reflective of our population (Particularly action 1) <p>Costs</p> <ul style="list-style-type: none"> There will be costs to undertake engagement. 	September 2023	<ul style="list-style-type: none"> Increased numbers engaging. Equalities monitoring. User satisfaction on community engagement. Press take up and greater profile. To check – community engagement tools. Evidence of co-production through each IJB Paper. 	<p>Greater public engagement.</p> <p>Provision of the right service for the right people.</p> <p>Co-production of services.</p> <p>Longer term - Delivery of services is evident and less having to explain the detail.</p>
2. Utilise our developed Locality Working Groups (Community Integration Groups) to design our approach to engagement to ensure wider population representation.	Stephen Fotheringham		December 2023		
3. Align engagement strategies and activities across partners to ensure partnership approach.	Clare Oliver/ Laura Jones		December 2023		
4. Consider how we engage through existing groups and activity e.g. staff and their wider family network.	Clare Oliver/ Sue Bell/ Lesley Horn/ Brian Davies		September 2023		