

Borders NHS Board**ADULT HEALTH AND SOCIAL CARE INTEGRATION****Aim**

This report updates the Board on progress with the Integration programme for Health & Social Care and makes recommendations to the Board to disband the current Health and Social Care Pathfinder Board and create a Shadow Integration Board for the period 7th April 2014 until 31st March 2015.

The Public Bodies (Joint Working) (Scotland) Act was passed by the Scottish Parliament on 25 February 2014, with a proposed date for implementation of 1 April 2015. The current Health and Social Care Pathfinder Board consists of 5 Elected Members and 5 NHS Borders Board members. It is now thought to be appropriate, with the main legislation agreed by the Scottish Parliament, to progress matters beyond the scope of the current Pathfinder Board and move to a Shadow Board to operate in 2014/15, ready for the start of the Joint Integration Board from 1 April 2015.

The terms of reference for the proposed Shadow Board, as detailed in Appendix 1, makes it clear that the Shadow Board will have, as far as possible within existing legislation, the same responsibilities for services as the final Joint Integration Board will have when legislation has been fully enacted. Until the new legislation is enacted, any decisions of the Shadow Integration Board will require to be ratified at the next available meetings of both NHS Borders Board and Scottish Borders Council. Details of the initial remit and constitution of the Shadow Board are given in Appendix 2. It is proposed that the Shadow Board will be an Advisory Committee of NHS Borders and Scottish Borders Council during the shadow period. The list of functions remitted to the Shadow Board is likely to change during the shadow period as further legislation is enacted and discussions take place between NHS Borders and Scottish Borders Council. There are a number of policy statements by Scottish Government, and approval is being sought to delegate authority to the Chief Executive of NHS Borders and the Chief Executive of Scottish Borders Council (in consultation with the Leader and Member for Health Services) to add, remove or amend any services within the remit of the Shadow Board, as required and in compliance with the Public Bodies (Joint Working) (Scotland) Act 2014 and any consequential Regulations, Orders, Directions and Guidance.

The Scottish Government is currently working on secondary legislation and guidance, and this will become available over the coming months. The Scottish Government has drafted a number of Policy Statements, giving details of functions which could be defined as mandatory to include within the scope of a Joint Integration Board. These Policy Statements have yet to be consulted on but the functions which are referred to in these documents have been detailed in Appendix 3. It is proposed that the Shadow Integration Board evaluate and define the scope of these functions for future consideration.

To ensure that both NHS Borders and Scottish Borders Council complies with legislation governing the two bodies, a set of Standing Orders has been drawn up to be used by all

members of the Shadow Board. Details of these Standing Orders are contained in Appendix 4. A dispute resolution process for the Shadow Board has also been drafted and this is included at Appendix 5.

The issue surrounding finance - is more complex and budgets will require to be managed as aligned budgets rather than joint budgets in the shadow period. A set of Financial Regulations and a Scheme of Delegation are currently being drafted for the Shadow Board to ensure compliance with existing legislation during the shadow period. A budget is also being drafted for the shadow period.

Early in 2015, a further report will be brought to the Board on the changes required to establish the Joint Integration Board from 1 April 2015.

Background

The Public Bodies (Joint Working) (Scotland) Act was passed by the Scottish Parliament on 25 February 2014, with a proposed date for implementation of 1 April 2015. In March 2013, NHS Borders and Scottish Borders Council agreed to the establishment of a Pathfinder Board and the appointment of a Programme Director to lead the revised arrangements for the integration of Health and Social Care in line with legislative requirements. The legislation will require the establishment of a Joint Integration Board with members from both NHS Borders and Scottish Borders Council from 1 April 2015.

The current Health and Social Care Pathfinder Board consists of 5 Elected Members and 5 NHS Borders Board members. The Pathfinder Board is responsible for assessing and scoping the detailed arrangements required for health and social care integration in the Borders, ensuring these are developed and determined in line with legislation. The Board is also required to ensure appropriate stakeholder engagement in joint strategic policy and planning and recommends to NHS Borders and Scottish Borders Council any actions relating to the implementation of agreed commissioning strategies.

Since the Board was set up it has met 3 times and is supported by a Programme Board comprising senior officers from each organisation; as well as 5 Working Groups – Workforce Development, Finance Arrangements and Resources, Legal and Governance, Information Performance and Technology, and Commissioning and Locality Planning. The Programme Board meets monthly, agreeing strategic direction for the Groups, over-viewing progress and reporting to the Pathfinder Board.

It is now thought to be appropriate, with the main legislation agreed by the Scottish Parliament, to progress matters beyond the scope of the current Pathfinder Board and move to a Shadow Board to operate in 2014/15, ready for the start of the Joint Integration Board from 1 April 2015.

Terms of Reference for Health & Social Care Shadow Integration Board

NHS Borders and Scottish Borders Council have previously agreed to proceed with a body corporate model for April 2015 – one of the two models of operation promoted within the legislation. Under this, NHS Borders and Scottish Borders Council will delegate functions and budgets to a Joint Integration Board which will be led by a Chief Officer. This Joint Board will need to be approved by Scottish Ministers and will be a separate legal entity, with clear delegated powers and financial authority for managing a joint budget, and will be held accountable for the delivery of agreed outcomes. Both the NHS Board and Council

will need to approve an Integration plan which will set up the Body Corporate and arrangements for reporting to the parent bodies will need to be established.

The terms of reference for the proposed Shadow Board, as detailed in Appendix 1, makes it clear that the Shadow Board will have, as far as possible within existing legislation, the same responsibilities for services as the final Joint Integration Board will have when legislation has been fully enacted. Until the new legislation is enacted, any decisions of the Shadow Integration Board will require to be ratified at the next available meetings of both NHS Borders Board and Scottish Borders Council. During this shadow year, the Shadow Integration Board will direct the work-streams required to achieve integration and define the transition arrangements, it will also include the remit of the current Community Health and Care Partnership (CHCP) at its inception and ensure the CHCP Board is fundamentally disbanded by 31 March 2015 on receipt of statutory requirements to that effect.

It is intended that the Shadow Integration Board will be a full and equal partnership between NHS Borders and Scottish Borders Council and will operate within the wider context of Community Planning and the existing NHS and Council strategic frameworks, including joint arrangements such as the Single Outcome Agreement and Scottish Government HEAT target framework. To fulfil its remit the Shadow Integration Board will:-

- ensure adequate stakeholder engagement during the transition period;
- review and extend the services covered as appropriate during the transition period;
- be informed and consider the implications for the integration of services in Scottish Borders of national developments pertaining to the passage through Parliament of the Public Bodies (Joint Working) (Scotland) Bill, the work produced by National Working Groups, and the content of any consequential regulations or guidance issued by Scottish Ministers.

In terms of management/officer support, it is intended that the Shadow Integration Board will be supported in its work through the Chief Officer of the Integration Partnership for Scottish Borders. The Chief Officer will have financial responsibilities and will be jointly accountable to the Chief Executive of NHS Borders and to the Chief Executive of Scottish Borders Council in the shadow year. NHS Borders and Scottish Borders Council will provide sufficient resources to support the Chief Officer in his/her work.

Proposed Remit and Constitution of Shadow Integration Board

Details of the remit and constitution of the Shadow Board are given in Appendix 2. It is proposed that the Shadow Board will be an Advisory Committee of NHS Borders and Scottish Borders Council during the shadow period. To comply with existing legislation, the decisions of the Board must receive final approval from both NHS Borders and the Council. The Board will comprise 12 voting Members, 6 from the Council and 6 from NHS Borders. The 6 Elected Members from Scottish Borders Council will be:

- (a) The Leader
- (b) The Depute Leader (Finance)
- (c) The Depute Leader (Health Service)
- (d) Executive Member for Social Work
- (e) Executive Member for Education
- (f) One other Elected Member.

The 6 Health Board members shall be nominated by the Health Board and will comply with final legislation, and any consequential Regulations, Orders, Directions and Guidance.

In terms of non-voting members of the Shadow Board, these shall comprise: the Clinical Director of the Health Board, the Chief Social Work Officer, the Health Board Director of Finance, the Chief Financial Officer of the Council, a staff-side representative, a third sector representative, and a carer representative. The Chief Executives of NHS Borders and the Council shall be non voting advisors to the Shadow Integration Board. Others will be requested to attend in an advisory capacity as required.

A list of the functions referred to the Shadow Board is contained in Appendix 2. It is likely that this list will change during the shadow period as further discussions take place between NHS Borders and Scottish Borders Council, and approval is being sought to delegate authority to the Chief Executive and Chair of NHS Borders and the Chief Executive of Scottish Borders Council (in consultation with the Leader and Member for Health Services) and to the Shadow Board to add, remove or amend any services within the remit of the Shadow Board, as required and in compliance with the Public Bodies (Joint Working) (Scotland) Act 2014 and any consequential Regulations, Orders, Directions and Guidance.

The Scottish Government is currently working on secondary legislation and guidance, and this will become available over the coming months. The Scottish Government has drafted a number of Policy Statements, giving details of functions which could be defined as mandatory to include within the scope of a Joint Integration Board. These Policy Statements have yet to be consulted on but the functions which are referred to in these documents have been detailed in Appendix 3. .

Further Governance Documentation for the Shadow Integration Board

To ensure that both NHS Borders and Scottish Borders Council complies with legislation governing the two bodies, a set of Standing Orders has been drawn up to be used by all members of the Shadow Board. Details of these Standing Orders are contained in Appendix 4. Members of the Shadow Board will need to familiarise themselves with these Standing Orders. A dispute resolution process for the Shadow Board has also been drafted and this is included at Appendix 5.

A set of Financial Regulations and a Scheme of Delegation are currently being drafted for the Shadow Board to ensure compliance with existing legislation during the shadow period. A budget is also being drafted for the shadow period.

Staffing

The legislation in its current form allows for one employee of a Joint Integration Board, the Chief Officer. Staff currently employed within NHS Borders and Scottish Borders Council who work in services which either will or may be integrated will continue to be employed by their existing organisation. It is not intended that they transfer to the Joint Integration Board. Staff have been issued with a Newsletter advising of what is happening and further Newsletters will be issued as part of the communications plan.

Summary

In taking forward health and social care integration in the Scottish Borders, it is proposed that the existing Health and Social Care Pathfinder Board be disbanded and replaced with

a Shadow Integration Board from 7 April 2014 until 31 March 2015. It is intended that this Shadow Board will act in as close a manner as possible to the Joint Integration Board which will take its place from 1 April 2015. To comply with existing legislation, the Shadow Board is set up as an Advisory Committee of both Scottish Borders Council and NHS Borders, and will require any decisions or recommendations it makes to be approved by both these bodies. The issue surrounding finance - is more complex and budgets will require to be managed as aligned budgets rather than joint budgets in the shadow period. Early in 2015, a further report will be brought to the Board on the changes required to establish the Joint Integration Board from 1 April 2015.

Recommendation

The Board is asked to:-

- (a) **note** progress with the Integration Programme;
- (b) **agree** that the Health and Social Care Pathfinder Board be disbanded;
- (c) **agree** that a Health and Social Care Shadow Integration Board be established with effect from 7 April 2014 until 31 March 2015;
- (d) **agree** that the Shadow Integration Board will direct the work-streams required to achieve integration and define the transition arrangements, it will also include the remit of the current Community Health and Care Partnership (CHCP) at its inception and move the CH&CP Board into abeyance and ensure it is fundamentally disbanded by 31 March 2015 on receipt of statutory requirements to that effect;
- (e) **approve** the terms of reference of the Shadow Integration Board as detailed in Appendix 1;
- (f) **approve** the remit and constitution of the Shadow Integration Board as detailed in Appendix 2;
- (g) **agree** that the Shadow Integration Board evaluates and defines the scope of the functions detailed in Appendix 3 for future consideration;
- (h) **approve** the Standing Orders to be used by the Shadow Board as detailed in Appendix 4;
- (i) **approve** the Dispute Resolution process as detailed in Appendix 5; and
- (j) **delegate** authority to the Chief Executive and Chair of NHS Borders and the Chief Executive of Scottish Borders Council (in consultation with the Leader and Member for Health Services) to add, remove or amend any services within the remit of the Shadow Board, as required and in compliance with the Public Bodies (Joint Working) (Scotland) Act 2014 and any consequential Regulations, Orders, Directions and Guidance.

Policy/Strategy Implications	In compliance with the Public Bodies (Joint Working) (Scotland) Act 2014 and any consequential Regulations, Orders, Directions and Guidance.
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Consultation	Scottish Borders Council
Consultation with Professional Committees	N/A
Risk Assessment	A full risk assessment and risk monitoring process for the programme is being developed as part of the programme arrangements.
Compliance with Board Policy requirements on Equality and Diversity	An equality impact assessment will be undertaken on the new proposed arrangements for Integration when agreed.
Resource/Staffing Implications	<p>It is anticipated that the Shadow Integration Board will oversee services which have a budget of over £100m, within the existing scope. This budget will change as other functions are brought within the scope of the Shadow Integration Board.</p> <p>Work is now progressing to develop the joint resourcing arrangements required to manage the budget for the Shadow Integration Board and also the Joint Integration Board once it is established.</p>

Approved by

Name	Designation	Name	Designation
Calum Campbell	Chief Executive	Tracey Logan	Chief Executive, SBC

Author(s)

Name	Designation	Name	Designation
Iris Bishop	Board Secretary	Jenny Wilkinson	Clerk to the Council, SBC

Scottish Borders Council / NHS Borders

Health & Social Care Integration

Scottish Borders Shadow Integration Board

TERMS OF REFERENCE

1. Introduction

- 1.1 These Terms of Reference have been prepared following the decisions taken by Scottish Borders Council on 31 October 2013 and NHS Borders Board on 7 November 2013, to create a Corporate Body to take forward Health and Social Care integration in the Scottish Borders. A Shadow Integration Board will be set up from 7 April 2014 based on the likely provisions of legislation as detailed in the Public Bodies (Joint Working) (Scotland) Bill, which was passed by the Scottish Parliament on 25 February 2014.
- 1.2 The Shadow Integration Board will have, as far as possible within existing legislation, the same responsibilities for services as the final Joint Integration Board will have when legislation has been fully enacted. Until the new legislation is enacted, any decisions of the Shadow Integration Board will require to be ratified at the next available meetings of both Scottish Borders Council and NHS Borders Board.

2. Purpose

- 2.1 The Shadow Integration Board's key remit will be to take account of the Integration Planning Principles, namely to improve the wellbeing of service users, by:
- Being integrated from service user point of view
 - Take account of particular needs of service users
 - Take account of dignity of service users
 - Take account of participation by service users
 - Being planned and led locally
 - Best anticipating needs and problems that arise
 - Making best use of people and facility resources
 - Protecting and improving safety of service users
- and the National Health Wellbeing Outcomes of:
- Healthier living
 - Independent living
 - Positive experiences and outcomes
 - Carers are supported
 - Services are safe
 - Engaged workforce
 - Effective resource use
- in defining, planning and monitoring integrated Social Work Adult Care and Health Primary Care functions, along with any other functions so delegated by NHS Borders and Scottish Borders Council.
- 2.2 During the Shadow year, the Shadow Integration Board will direct the work-streams required to achieve integration and define the transition arrangements, including the removal of the current Community Health and Care Partnership (CHCP) structure by 1 April 2015.

- 2.3 The Shadow Integration Board will be a full and equal partnership between Scottish Borders Council and NHS Borders and will operate within the wider context of Community Planning and the existing Council and NHS strategic frameworks, including joint arrangements such as the Single Outcome Agreement and Scottish Government HEAT target framework.
- 2.4 The Shadow Integration Board will have the following functions:-
- delegated local authority functions as agreed by Council;
 - delegated NHS functions as agreed by the Health Board;
 - exercise NHS and Council functions relating to the development and delivery of the Partnership Integration Plan;
 - exercise NHS and Council functions relating to the development and delivery of the Integration Board's Strategic Plan;
 - development of locality planning;
 - development of a communication strategy for both internal and external use;
 - development of joint performance management arrangements; and
 - equalities impact assessment
 - finances
- 2.5 To fulfil its remit the Shadow Integration Board will
- ensure adequate stakeholder engagement during the transition period;
 - review and extend the services covered as appropriate during the transition period;
 - be informed and consider the implications for the integration of services in Scottish Borders of national developments pertaining to the passage through Parliament of the Public Bodies (Joint Working) (Scotland) Bill, the work produced by the National Working Groups, and the content of any consequential regulations or guidance issued by Scottish Ministers.
- 2.6 The Shadow Integration Board will also take on the work of the existing Scottish Borders Community Health and Care Partnership (CHCP) with any decisions ratified at a final meeting of the CHCP prior to its disbandment on 1 April 2015. The Shadow Integration Board will take cognisance of existing CHCP policy, work, and reporting Groups.
- 3. Management Support**
- 3.1 The Shadow Integration Board will be supported in its work through the Chief Officer of the Integration Partnership for Scottish Borders. The Chief Officer will have financial responsibilities and will be jointly accountable to the Chief Executive of Scottish Borders Council and to the Chief Executive of NHS Borders.
- 3.2 NHS Borders and Scottish Borders Council will provide sufficient resources to support the Chief Officer Designate in his/her work.
- 4. Professional Advice**
- 4.1 The Shadow Integration Board will have the authority to access appropriate professional advice and guidance to fulfil its remit.

5. Stakeholder Engagement

- 5.1 In addition to the involvement of professionals in its work, the Shadow Integration Board will engage with representatives drawn from staff, the third sector, users, the public and carers. The Board will discuss with the existing CHCP Forum members how to build on their work and develop the arrangements required to ensure wider stakeholder involvement being in place within the Shadow Integration Board prior to the creation of the Integration Joint Board.
- 5.2 To enable a smooth transition to the new Integration Joint Board, in common with that Board the Shadow Integration Board will have non-voting representation drawn from health and social care professionals, staff, the third sector, users, the public and carers.

19 March 2014

Public Bodies (Joint Working)(Scotland) Bill

Policy Statement – Delegation of Functions of Health Boards

Note: the following list is contained in a Policy Statement which has yet to be consulted on or finalised.

This list comprises those functions which Ministers intend to prescribe as functions that must be delegated in their entirety in as far as they relate to primary and community health care and the proportion of acute sector provision that will be part of integrated arrangements.

National Health Service (Scotland) Act 1978

- Duty of Health Board, Special Health Board, the Agency and HIS to promote health improvements
- Duty to encourage public involvement
- Functions of Health Boards: primary medical services
- Equal Opportunities
- Duty of quality
- Health Boards: co-operation with other Health Boards, Special Health Boards and the Agency
- Co-operation between Health Boards and other authorities
- Co-operation in planning of services for disabled persons, the elderly and others
- Assistance to voluntary organisations
- Power to make payments towards expenditure on community services
- Financial Assistance by the Secretary of State to voluntary organisations
- Personal medical or dental services
- Use of accommodation
- Arrangements for the provision of general dental services
- Arrangements for the provision of general ophthalmic services
- Arrangements for the provision of pharmaceutical services
- Arrangements for providing additional pharmaceutical services
- Remuneration for Part II services
- Accommodation and services
- Prevention of illness, care and after-care
- Care of mothers and young children
- Breastfeeding
- Family planning
- Health education
- Control of spread of infectious disease
- Permission for use of facilities in private practice
- Remission and repayment of charges and payment of travelling expenses
- Charges in respect of non-residents

Disabled Persons (Services, Consultation and Representation Act 1986

- Persons discharged from hospital

Mental Health (Care and Treatment)(Scotland) Act 2003 (asp 13)

- Duties of Scottish Ministers, local authorities and others as respects Commission
- Provision of services and accommodation for certain patients under 18
- Provision of services and accommodation for certain mothers with post-natal depression
- Assistance from Health Boards and others
- Inquiries under Section 33: co-operation
- Request for assessment of needs: duty on local authorities and Health Boards

Protection of Vulnerable Groups (Scotland) Act 2007

- Information held by public bodies etc
- Meaning of "protected adult"

Certification of Death (Scotland) Act 2011

- Duty to co-operate

Adults with Incapacity (Scotland) Act 2000

- General principles and fundamental definitions
- Application of Part 4 (Management of Residents' finances)
- Residents whose affairs may be managed
- Matters which may be managed
- Authorisation of named manager to withdraw from resident's account
- Resident ceasing to be resident of authorised establishment
- Appeal, revocation etc
- Repayment of funds
- Limitation of liability

Policy Statement – Delegation of Functions of Local Authorities

Note: the following list is contained in a Policy Statement which has yet to be consulted on or finalised.

Local authority functions which must be delegated, as they relate to, or support, adult social work, social care services.

National Assistance Act 1948

- Charges to be made for accommodation
- Charges to be made for accommodation
- Recovery in cases of misrepresentation or non-disclosure
- Duty of councils to provide temporary protection for property of persons admitted to hospitals etc

Disabled Persons (Employment) Act 1958

- Provision of sheltered employment by local authorities

Social Work (Scotland) Act 1968

- Local authorities for the administration of the Act
- Provisions relating to performance of functions by local authorities
- Powers of Secretary of State
- Research
- Financial and other assistance to voluntary organisations, etc for social work
- General social welfare services of local authorities
- Duty of local authority to assess need
- Assessment of ability to provide care
- Duty of local authority to provide information to carer
- Power of local authorities to assist persons in need in disposal of produce of their work
- Residential accommodation with nursing
- Provision of care and after-care
- Home help and laundry facilities
- Supervision and care of persons put on probation or released from prisons, etc
- Grants in respect of community service facilities
- Burial or cremation of the dead
- Power of local authority to defray expenses of parent etc visiting persons or attending funerals
- Provision of residential and other establishments by local authorities, and maximum period for repayment for sums borrowed for such provision
- Adjustments between authorities providing accommodation, etc and authority of area of residence
- Charges that may be made for services and accommodation

Local Government and Planning (Scotland) Act 1982

- Islands or district councils functions in relation to the provision of gardening assistance for the disabled and the elderly

Health and Social Services and Social Security Adjudications Act 1983

- Recovery of sums due to local authority where persons in residential accommodation have disposed of assets
- Arrears of contributions charged on interest in land in England and Wales
- Arrears of contributions secured over interest on land in Scotland

Disabled Persons (Services, Consultation and Representation) Act 1983

- Rights of authorised representatives of disabled persons
- Assessment by local authorities of needs of disabled persons
- Persons discharged from hospital
- Duty of local authority to take into account abilities of carer

Housing (Scotland) Act 1987

- Power of local authorities to provide furniture, etc
- Power of local authority to provide board and laundry facilities
- Power of local authority to provide welfare services
- Part II (Homeless persons)

Adults with Incapacity (Scotland) Act 2000

- Functions of local authorities
- Investigations
- Residents whose affairs may be managed
- Matters which may be managed
- Supervisory bodies
- Duties and functions of managers of authorised establishment
- Authorisation of named manager to withdraw from resident's account
- Statement of resident's affairs
- Resident ceasing to be resident of authorised establishment
- Appeals, revocation, etc

Housing (Scotland) Act 2000

- Homelessness strategies
- Advice on homelessness, etc
- Duty of registered social landlord to provide accommodation
- Duty of registered social landlord: further provision
- Common housing registers
- Assistance for housing purposes

Community Care and Health (Scotland) Act 2002

- Local authority arrangements for residential accommodation outwith Scotland
- Deferred payments of accommodation costs
- Payments by local authorities towards expenditure by NHS bodies on prescribed functions

Mental Health (Care and Treatment)(Scotland) Act 2003

- Duties of Scottish Ministers, local authorities and others as respects Commission
- Care and support services etc
- Services designed to promote wellbeing and social development
- Assistance with travel
- Duty to inquire
- Inquiries under Section 33: co-operation
- Request for assessment of needs: duty on local authorities and Health Boards
- Advocacy

Housing (Scotland) Act 2006

- Assistance for housing purposes

Adult Support and Protection (Scotland) Act 2007

- Council's duty to make inquiries
- Co-operation
- Duty to consider importance of providing advocacy and other services
- Visits
- Interviews
- Medical examinations
- Examination of records etc
- Assessment orders
- Removal orders
- Right to move adult at risk
- Protection of removed person's property
- Right to apply for banning order
- Urgent cases
- Adult Protection Committees
- Membership

Social Care (Self-directed Support)(Scotland) Act 2013

- Support for adult carers
- Choice of options: adults
- Choice of options under section 5: assistance
- Choice of options: adult carers
- Choice of options: children and family members
- Provision of information about self-directed support
- Provision of information: children under 16
- Local authority functions
- Eligibility for direct payment: review
- Further choice of options on material change of circumstances
- Misuse of direct payment recovery
- Promotion of options for self-directed support

SCOTTISH BORDERS SHADOW INTEGRATION BOARD

STANDING ORDERS FOR MEETINGS

24 March 2014

1. General

- 1.1 The Standing Orders of the Scottish Borders Shadow Integration Board as a joint Advisory Board are set up in accordance with the Health Boards (Membership and Procedures) (Scotland) Regulations 2001 legislation governing NHS Borders ("the NHS Board"); and a joint Advisory Committee of the Scottish Borders Council ("the Council") constituted in terms of Section 56(4) of the Local Government (Scotland) Act 1973. As the Board will make recommendations on functions delegated from both the NHS Board and the Council, the NHS Board and the Council have resolved that a single set of Standing Orders will apply.
- 1.2 These Standing Orders are made in accordance with the Community Health Partnership (Scotland) Regulations 2004 (SSI 2004 386), the Scottish Borders Community Health Partnership Scheme of Establishment approved by Scottish Ministers and the Local Government (Scotland) Act 1973.
- 1.3 Any statutory provision, regulation or direction issued by the Scottish Ministers shall have precedence if they are in conflict with the Standing Orders.

2. Membership

- 2.1 Membership of the Integration Board shall comprise six persons nominated by the NHS Board, and six persons appointed by the Council plus non-voting representatives drawn from health and social care professionals, staff, the third sector, users, the public and carers.
- 2.2 The term of office of voting Members of the Integration Board shall last as follows:
 - (a) for Local Government Councillors, until the day of the next ordinary Elections for Local Government Councillors in Scotland.
 - (b) for NHS Board nominees, until the day their appointment by Scottish Ministers ceases.
- 2.3 Where a Member resigns or otherwise ceases to hold office, the person appointed in his/her place shall be appointed for the unexpired term of the Member they replace.
- 2.4 On expiry of a Member's term of appointment the Member shall be eligible for re-appointment provided that he/she remains eligible and is not otherwise disqualified from appointment.
- 2.5 Any Member appointed to the Integration Board who ceases to fulfil the requirements for membership detailed in the Scheme of Establishment approved by the Scottish Ministers shall be removed from membership on the serving by the NHS Board of notice to that effect.
- 2.6 A Member of the Integration Board may resign his/her membership in writing at any time during their term of office by giving notice to

either the NHS Borders Board Secretary or the Clerk to the Council. The resignation shall take effect from the date notified in the notice or on the date of receipt if no date is notified.

- 2.7 If a Member has not attended three consecutive Ordinary Meetings of the, Integration Board, the NHS Board and the Council shall, by giving notice in writing to that Member, remove that person from office unless the Integration Board are satisfied that :-
- (a) The absence was due to illness or other reasonable cause; and
 - (b) The Member will be able to attend future Meetings within such period as the Integration Board consider reasonable.
- 2.8 The acts, meetings or proceedings of the Integration Board shall not be invalidated by any defect in the appointment of any Member.

3. Chair

- 3.1 The first Chair of the Integration Board shall be from the body not employing the Integration Board's Chief Officer, with the Vice-Chair from the body employing the Chief Officer. The Chair and Vice – Chair posts shall rotate annually between the NHS Board and Council, with the Chair being from one body and the Vice-Chair from the other.
- 3.2 The Vice-Chair may act in all respects as the Chair of the Integration Board if the Chair is absent or otherwise unable to perform his/her duties.
- 3.3 At every Meeting of the Integration Board the Chair, if present, shall preside. If the Chair is absent from any Meeting the Vice-Chair, if present, shall preside. If both the Chair and the Vice-Chair are absent, a chair shall be appointed from within the voting members present for that meeting.
- 3.5 Powers, authority and duties of Chair and Vice-Chair.

The Chair shall amongst other things: -

- (a) Preserve order and ensure that every Member has a fair Hearing;
- (b) Decide on matters of relevancy, competency and order, and whether to have a recess during the Meeting, having taken into account any advice offered by the Chief Officer or other relevant officer in attendance at the Meeting;
- (c) Determine the order in which speakers can be heard;
- (d) Ensure that due and sufficient opportunity is given to Members who wish to speak to express their views on any subject under discussion;

- (e) If requested by any Member ask the mover of a motion, or an amendment, to state its terms;
- (f) Maintain order and at his/her discretion, order the exclusion of any Member of the public who is deemed to have caused disorder or misbehaved;
- (g) The decision of the Chair on all matters within his/her jurisdiction shall be final;
- (h) Deference shall at all times be paid to the authority of the Chair. When he/she rises to speak, the Chair shall be heard without interruption and
- (i) Members shall address the Chair while speaking.

4. Meetings

- 4.1 The Integration Board shall meet at such place and such frequency as may be agreed by the Integration Board and no less than 6 times per year.
- 4.2 The Chair may convene Special Meetings if it appears to him/her that there are items of urgent business to be considered. Such Meetings will be held at a time, date and venue as determined by the Chair. If the Office of Chair is vacant, or if the Chair is unable to act for any reason the Vice-Chair may at any time call such a Meeting.
- 4.3 If the Chair refuses to call a Meeting of the Integration Board after a requisition for that purpose specifying the business proposed to be transacted, signed by at least one third of the whole number of voting Members, has been presented to the Chair or if, without so refusing, the Chair does not call a Meeting within seven days after such requisition has been presented, those Members who presented the requisition may forthwith call a Meeting provided no business shall be transacted at the Meeting other than specified in the requisition.

5. Notice of Meeting

- 5.1 Before every Meeting of the Integration Board a Notice of the Meeting, specifying the time, place and business to be transacted at it shall be delivered to every Member or sent by post to the usual place of residence of such Members or delivered by electronic means so as to be available to them at least seven clear days before the Meeting. Members may opt in writing addressed to the Chief Officer to have Notice of Meetings delivered to an alternative address. Such Notice will remain valid until rescinded in writing. Lack of service of the Notice on any Member shall not affect the validity of a Meeting.
- 5.2 In the case of a Meeting of the Integration Board called by Members in default of the Chair, the Notice shall be signed by those Members who requisitioned the Meeting. The meeting will

consider the business specified in the notice. Such meeting shall be held within fourteen days of receipt of the notice by the Chief Officer.

- 5.3 At all Ordinary or Special Meetings of the Integration Board, no business other than that on the Agenda shall be discussed or adopted except where by reason of special circumstances, which shall be specified in the Minutes, the Chair is of the opinion that the item should be considered at the Meeting as a matter of urgency.
- 5.4 The Chief Officer shall be responsible for giving public notice of the time and place of each Meeting of the Integration Board by posting within the main offices of the Integration Board not less than three clear days before the date of each Meeting.

6. Quorum

- 6.1 No business shall be transacted at a Meeting of the Integration Board unless there are present, and entitled to vote both Council and NHS Board members and at least half of the whole number of voting Members of the Integration Board

7. Codes of Conduct and Conflicts of Interest

- 7.1 Members of the Integration Board shall subscribe to and comply with both the Standards in Public Life - Code of Conduct for Members of Devolved Public Bodies and Councillors Code of Conduct and Guidance made in respect thereto which are incorporated into the Standing Orders. All members who are not already bound by the terms of either Code shall be obliged before taking up membership, to agree in writing to be bound by the terms of the Code of Conduct for Members of Devolved Public Bodies.
- 7.2 If any Member has a financial or non-financial interest as defined in the Councillors' Code of Conduct or the Code of Conduct of Members of Devolved Public Bodies and is present at any Meeting at which the matter is to be considered, he/she must as soon as practical, after the Meeting starts, disclose that he/she has an interest and the nature of that interest and if he/she is precluded from taking part in consideration of that matter.
- 7.3 If a Member or any business associate, relative or friend of theirs has any pecuniary or any other interest direct or indirect, in any Contract or proposed Contract or other matter and that Member is present at a Meeting of the Integration Board, that Member shall disclose the fact and the nature of the relevant interest and shall not be entitled to vote on any question with respect to it. A Member shall not be treated as having any interest in any Contract or matter if it cannot reasonably be regarded as likely to significantly affect or influence the voting by that Member on any question with respect to that Contract or matter.
- 7.4 A Member who has an interest in service delivery may participate in the business of the Integration Board, except where they have a

direct and significant interest in a matter, unless the Integration Board formally decides and records in the Minutes of the Meeting that the public interest is best served by the Member remaining in the Meeting and contributing to the discussion. During the taking of a decision by the Integration Board on such matter, the Member concerned shall absent him/herself from the Meeting.

8. Adjournment of Meetings

8.1 A Meeting of the Integration Board may be adjourned by a motion, which shall be moved and seconded and put to the Meeting without discussion. If such a motion is carried by a simple majority of those present and entitled to vote, the Meeting shall be adjourned to another day, time and place specified in the motion.

9. Disclosure of Information

9.1 No Member or Officer shall disclose to any person any information which falls into the following categories: -

- Confidential information within the meaning of Section 50(a)(2) of the Local Government (Scotland) Act 1973.
- The full or any part of any document marked "not for publication by virtue of the appropriate paragraph of Part 1 of Schedule 7A of the Local Government (Scotland) Act 1973.
- Any information regarding proceedings of the Integration Board from which the Public have been excluded unless or until disclosure has been authorised by the Council or the NHS Board or the information has been made available to the Press or to the Public under the terms of the relevant legislation.

9.2 Without prejudice to the foregoing no Member shall use or disclose to any person any confidential and/or exempt information coming to his/her knowledge by virtue of his/her office as a Member where such disclosure would be to the advantage of the Member or of anyone known to him/her or which would be to the disadvantage of the Integration Board, the Council or the NHS Board.

10. Recording of Proceedings

10.1 No sound, film, video tape, digital or photographic recording of the proceedings of any Meeting shall be made without the prior written approval of the Integration Board.

11. Admission of Press and Public

11.1 Members of the public and representatives of the Press will be admitted to every formal meeting of the Board but will not be permitted to take part in discussion (Public Bodies (Admission to Meetings) Act 1960; Local Government (Scotland) Act 1973)

- 11.2 The Board may exclude the public and press while considering any matter that is confidential. (Local Government (Scotland) Act 1973, Schedule 7; Freedom of Information (Scotland) Act 2002 (the Act) and Environmental Information (Scotland) Regulations 2004 (the Regulations)
- 11.3 The terms of any resolution specifying the part of the proceedings to which it relates and the categories of exempt information involved shall be specified in the minutes.
- 11.4 Members of the public and representatives of the press admitted to meetings shall not be permitted to make use of photographic or recording apparatus of any kind unless agreed by the Board. (Local Government (Scotland) Act 1973; Public Bodies (Admission to Meetings) Act 1960)
- 11.5 Members of the public and press should leave when the meeting moves into reserved business. It is at the discretion of the Chair of that meeting if officers can remain.
- 11.6 Subject to the extent of the accommodation available and subject to the terms of Sections 50A and 50E of the Local Government (Scotland) Act 1973, and Public Bodies (Admission to Meetings) Act 1960 meetings of the Integration Board shall be open to the public.
- 11.7 Every Meeting of the Integration Board shall be open to the public but these provisions shall be without prejudice to the Integration Board's powers of exclusion in order to suppress or prevent disorderly conduct or other misbehaviour at a Meeting. The Integration Board may exclude or eject from a Meeting a member or members of the Press and Public whose presence or conduct is impeding the work or proceedings of the Integration Board.

12. Reception of deputations

- 12.1 Every application for the receiving of a deputation must be in writing, duly signed and delivered or e-mailed to the Chief Officer at least three clear working days prior to the date of the meeting at which the deputation wish to be received. The application must state the subject and the action which it proposes the Board or Committee should take.
- 12.2 The deputation shall consist of not more than ten people.
- 12.3 No more than two members of any deputation shall be permitted to address the meeting, and they may speak in total for no more than ten minutes.
- 12.4 Any member of the Board may put any relevant question to the deputation, but shall not express any opinion on the subject matter until all questions have been asked. If the subject matter relates to an item of business on the agenda, no debate or discussion shall

take place until the relevant minute or other item is considered in the order of business.

- 12.5 The Board may make the following decisions regarding any deputation:
- (i) refer the petition to another organisation or Officer of another organisation, with or without a recommendation or comment. That Organisation or Officer shall then make the final decision which could include taking no further action;
 - (ii) that the issue(s) raised do not merit or do not require further action.

13. Receipt of petitions

13.1 Every petition shall be delivered to the Chief Officer at least three clear working days before the meeting at which the subject matter may be considered. The Chair will be advised and will decide whether the contents of the petition should be discussed at the meeting or not.

- 13.2 The Board may make the following decisions regarding any petition:
- (i) refer the petition to another organisation or Officer of another organisation, with or without a recommendation or comment. That Organisation or Officer shall then make the final decision which could include taking no further action;
 - (ii) that the issue(s) raised do not merit or do not require further action.

14. Alteration, Deletion and Rescission of Decisions of the Partnership

14.1 Except insofar as required by reason of illegality, no motion to alter, delete or rescind a decision of the Integration Board will be competent within six months from the decision, unless a decision is made prior to consideration of the matter to suspend this Standing Order in terms of Standing Order 13.

15. Suspension, Deletion or Amendment of Standing Orders

15.1 Any one or more of the Standing Orders in the case of emergency as determined by the Chair upon motion may be suspended, amended or deleted at any Meeting so far as regards any business at such Meeting provided that two thirds of the voting Members of the Integration Board present and voting shall so decide. Any motion to suspend Standing Orders shall state the number or terms of the Standing Order(s) to be suspended.

16. Order of business

16.1 For ordinary meetings of the Board or its Committees, the business shown on the agenda shall normally proceed in the following order:

- Business determined by the Chair to be a matter of urgency by reason of special circumstances
- Reception of deputations, followed by consideration of any items of business on which the deputations have been heard
- Petitions
- Minutes of the previous meeting for approval
- Minutes of Sub-Committees
- General Business
- Questions and motions of which due notice has been given

16.2 No item of business shall be transacted at a meeting, unless either:

- It has been included on the agenda for the meeting; or
- It has been determined by the Chair to be a matter of urgency by reason of special circumstances

17. Motions, Amendment and Debate

17.1 It will be competent for any voting Member of the Integration Board at a Meeting of the Integration Board to move a motion directly arising out of the business before the Meeting.

17.2 No Member, with the exception of the mover of the motion or amendment, will speak supporting the motion or amendment until the same will have been seconded.

17.3 Subject to the right of the mover of a motion, and the mover of an amendment, to reply, no Member will speak more than once on the same question at any Meeting of the Integration Board except: -

- On a question of Order
- With the permission of the Chair
- In explanation or to clear up a misunderstanding in some material part of his/her speech.

In all of the above cases no new matter will be introduced.

17.4 The mover of an amendment and thereafter the mover of the original motion will have the right of reply for a period of not more than 5 minutes. He/she will introduce no new matter and once a reply is commenced, no other Member will speak on the subject of debate. Once these movers have replied, the discussion will be held closed and the Chair will call for the vote to be taken.

17.5 Amendments must be relevant to the motions to which they relate and no Member will be at liberty to move or second more than one amendment to any motion, unless the mover of an amendment has failed to have it seconded. The mover and seconder of the motion will not move an amendment or second an amendment, unless the mover of the motion has failed to have it seconded.

- 17.6 It will be competent for any Member who has not already spoken in a debate to move the closure of such debate. On such motion being seconded, the vote will be taken, and if a majority of the Members present vote for the motion, the debate will be closed. However, closure is subject to the right of the mover of the motion and of the amendment(s) to reply. Thereafter, a vote will be taken immediately on the subject of the debate.
- 17.7 Any Member may indicate his/her desire to ask a question or offer information immediately after a speech by another Member and it will be the option of the Member to whom the question would be directed or information offered to decline or accept the question or offer of information.
- 17.8 When a motion is under debate, no other motion or amendment will be moved except in the following circumstances:
- to adjourn the debate; or
 - to close the debate in terms of Standing Order 14(f).
- 17.9 A motion or amendment once moved and seconded cannot be altered or withdrawn unless with the consent of the majority of those present.

18. Voting

- 18.1 Every effort shall be made by Members to ensure that as many decisions as possible are made by consensus.
- 18.2 Only the six Members nominated by the NHS Board, and the six Members appointed by the Council shall be entitled to vote. Those Members drawn from health and social care professionals, staff, the third sector, users, the public and carers shall not be entitled to vote
- 18.3 Every question at a Meeting shall be determined by a majority of votes of the Members present and who are entitled to vote on the question. In the case of an equality of votes the Chair shall not have a second or casting vote. In the event of an equality of votes, the matter shall be referred to the NHS Borders Board and to Scottish Borders Council for final decision.

19. Minutes, agendas and papers

- 19.1 The Chief Officer is responsible for ensuring that Minutes of the proceedings of a meeting of the Board or its Committees, including any decision or resolution made at that meeting, shall be drawn up. The minutes shall be submitted to the next meeting of the Board, or relevant Committee, for approval by members as a record of the

meeting subject to any amendments proposed by members and shall be signed by the person presiding at that meeting. A Minute purporting to be so signed shall be received in evidence without further proof.

- 19.2 The names of members present at a meeting of the Board or of a Sub-Committee of the Board shall be recorded in the Minute, together with the apologies for absence from any member.
- 19.3 Minutes of Meetings shall be submitted by the Chief Officer or an officer so designated by him/her to the Council and the NHS Board for ratification of all decisions or agreement of any recommendations.
- 19.4 The Freedom of Information (Scotland) Act 2002 gives the public a general right of access to all recorded information held. Therefore, when minutes of meetings are created, it should be assumed that what is recorded will be made available to the public. This does not apply to Minutes of private section of any meeting.
- 19.5 The Minute of a meeting being held where authority or approval is being given by the committee and the Minutes are intended to act as a record of the business of the meeting, then the Minute should contain:
- A summary of the Committee's discussions
 - A clear and unambiguous statement of all decisions taken
 - If no decision is taken, a clear and unambiguous statement of where the matter is being referred or why the decision has been deferred
 - Where options are presented, a summary of why options were either accepted or rejected
 - Reference to any supporting documents relied upon
 - Any other relevant points which influenced the decision or recommendation
 - Any recommendations which require approval by a higher authority
- 19.6 The contents of a Minute will depend upon the purpose of the meeting.

If the meeting agrees actions they will be recorded in an Action Tracker:

- A description of the task, including any phases and reporting requirements
 - The person accepting responsibility to undertake the task
 - The time limits associated with the task, its phases and agreed reporting
- 19.7 The agendas and papers for all Board, Committee and Sub-Committee meetings shall be circulated to members by post or electronic means at least 7 days before any given meeting.

19.8 The draft minutes and action trackers from all Board, Committee and Sub-Committee meetings shall be issued as soon as possible following a meeting, ideally within 5 working days.

20. Freedom of Information (Scotland) Act 2002

20.1 The Freedom of Information (Scotland) Act 2002 (FOI(S)A) was introduced by the Scottish Parliament to ensure that people have the right to access information held by Scottish public authorities. The Act states that any person can receive information that they request from a public authority, subject to certain exemptions such as protection of personal data and commercial interests, or national security. It came into force on 1 January 2005 and is retrospective.

Under FOI(S)A NHS Borders and Scottish Borders Council are required to:

- Provide applicants with help and assistance in finding the information they require within a given timescale
- Maintain a publication scheme of information to be routinely published
- Put in processes for responding to enquiries and undertaking appeals against decisions to withhold information

20.2 Information as defined under FOI(S)A includes copies or extracts, including drafts, of any documents such as:

- reports and planning documents
- committee minutes and notes
- correspondence including e-mails
- statistical information

20.3 The FOI(S)A provides a range of exemptions which may be applied allowing the public authority to withhold information. Exemptions must be considered on a case by case basis and may be applied to all or only part of the information requested.

- All documents will be scrutinised for information which may be withheld under an exemption to the Act prior to release.
- Full details of the FOI(S)A exemptions and how to apply them can be found in the Freedom of Information (Scotland) Act 2002.
- Briefings on how to apply exemptions can be found on the Scottish
- Information Commissioners website
<http://www.itspublicknowledge.info/ScottishPublicAuthorities/ScottishPublicAuthorities.asp>.

21. Records management

21.1 Under the Freedom of Information (Scotland) Act 2002, NHS Borders and Scottish Borders Council must have comprehensive records management systems and process in place which must give clear guidance on time limits for the retention of records and documents.

22. Reserved Business

22.1 A Private meeting of the Board may be called at any time by the Chair, or one third of the Members. Generally a minimum notice period of three days should be observed. However, in exceptional circumstances and provided the majority of Board members are present and given the opportunity to attend, appropriate matters pertaining to a Private session may be conducted at the conclusion of a Board meeting. To allow for appropriate notice periods to be observed the wording "At the conclusion of the Board meeting, the board will reconvene for any matters of reserved business." should be clearly stated at the bottom of each Board meeting agenda.

23. Suspension and Disqualification

23.1 Any Member of the Integration Board may on reasonable cause shown be suspended from the Integration Board or disqualified from taking part in any business of the Integration Board in circumstances specified for NHS Board appointed nominees by the NHS Board, and for Council appointed nominees by the Council.

24. Working Groups

- 24.1 The Integration Board may establish any Sub-Committee or Working Group as may be required from time to time but each Working Group shall have a limited time span as may be determined by the Integration Board.
- 24.2 The Membership, Chair and quorum of any Sub-Committee or Working Groups will be determined by the Integration Board.
- 24.3 The Terms of Reference of the Sub-Committee or Working Group will be determined by the Integration Board.
- 24.4 A Sub-Committee or Working Group does not have any delegated powers to implement its findings and will prepare a Report for consideration by the Integration Board
- 24.5 Agendas for consideration at a Sub-Committee or Working Group will be issued by electronic means to all Members no later than seven working days prior to the start of the Meeting.

Dispute Resolution Process for Shadow Integration Board

1. All disputes between partners arising out of, or relating to, Integration arrangements may be escalated - by either Partner (Scottish Borders Council and NHS Borders) – initially to the Chief Executive of each of the Partners for resolution.
2. If a dispute which has been escalated to the Chief Executive(s) cannot be resolved within 14 days, the dispute may be escalated to the Shadow Integration Board for resolution.
3. If the dispute cannot be resolved by the Shadow Integration Board, the dispute may be referred to an expert (“the Expert”) who shall be deemed to act as expert, and not as arbiter; and,
 - (a) the Expert shall be selected by mutual agreement;
 - (b) within 14 days of the Expert accepting the appointment, the Partners shall submit to the Expert a written report of the dispute;
 - (c) both Partners will then give the Expert all necessary assistance and further information which the Expert requires to consider the dispute;
 - (d) the Expert shall be instructed to deliver his/her determination to the Partners within 14 days after submission of the written reports;
 - (e) save in the case of manifest error, decisions of the Expert shall be final and binding and shall not be subject to appeal;
 - (f) the Expert shall have the same powers to require any Partner to produce any documents or information to him/her and the other Partner as an arbiter and each Partner shall in any event supply to him such information which it has and is material to the matter to be resolved and which it could be required to produce on discovery; and
 - (g) the fees of the Expert shall be borne by the Parties in such proportion as shall be determined by the Expert having regard (amongst other things) to the conduct of the parties.
4. It should be noted that separate dispute resolution processes for all staff is in place within their employing organisation. It is not intended that such staff disputes will be considered by the Shadow Integration Board.