

NHS Board Meeting
28 April 2021

Lanarkshire NHS Board
Kirklands
Fallside Road
Bothwell
G71 8BB
Telephone: 01698 855500
www.nhslanarkshire.scot.nhs.uk



SUBJECT: IJB DIRECTIONS

1. PURPOSE

This paper is coming to the Board:

For approval	<input type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input checked="" type="checkbox"/>
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2. ROUTE TO THE BOARD

The paper has been:

Prepared	<input checked="" type="checkbox"/>	Reviewed	<input type="checkbox"/>	Endorsed	<input type="checkbox"/>
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By the Chief Officers of the North and South IJBs

Prepared	<input type="checkbox"/>	Reviewed	<input checked="" type="checkbox"/>	Endorsed	<input type="checkbox"/>
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By the NHS Lanarkshire Corporate Management Teams

3. SUMMARY OF KEY ISSUES

As part of the requirements set out in the Public Bodies (Joint Working) (Scotland) Act 2014, the Integration Joint Boards are required to direct NHS Lanarkshire to carry out the integrated functions delegated to the IJB and to confirm the resources to be allocated for the resultant services in the forthcoming year. The directions from both IJBs are included in appendices 1 and 2.

The budget allocation for the delegated functions outlined within the directions reflect the financial planning principles agreed at the North IJB meeting on 23 March 2021 and South IJB meeting on 29th March 2021. The detailed budget setting process for the financial year 2021/2022 is being finalised. Once this work has been completed, the IJBs will issue further directions confirming the final budget. This should be concluded by no later than 30 June 2021.

One of the changes included within the process is the transfer of management (and associated budget) of the Nursing components of the Community Mental Health Teams into the Localities of the two partnerships, in line with the two Commissioning Plans and direction of travel set out within the Mental Health Strategy. The aim behind this change is to create closer synergies between community teams through integrated working practices in each Locality area.

While the operational management of the Nursing teams within the CMHTs passes over to Locality management, the hosted service arrangements remain with the Mental Health and Learning Disability Unit hosted in North Lanarkshire still providing professional support, clinical governance and oversight of the community teams.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	<input type="checkbox"/>	AOP	<input type="checkbox"/>	Government policy	<input checked="" type="checkbox"/>
Government directive	<input type="checkbox"/>	Statutory requirement	<input checked="" type="checkbox"/>	Achieving Excellence/ local policy	<input type="checkbox"/>
Urgent operational issue	<input type="checkbox"/>	Other	<input type="checkbox"/>		

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Safe	<input checked="" type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input checked="" type="checkbox"/>
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Six Quality Outcomes:

Everyone has the best quality of life and is able to live longer healthier lives; (Effective)	<input checked="" type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input checked="" type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input checked="" type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input checked="" type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input checked="" type="checkbox"/>
Best use is made of available resources. (Effective)	<input checked="" type="checkbox"/>

6. MEASURES FOR IMPROVEMENT

The IJBs are measured against the nine health and wellbeing outcomes and locally have performance frameworks monitored regularly via reviews with the Chief Executives.

7. FINANCIAL IMPLICATIONS

The directions issued are within the current financial envelopes of the respective IJBs.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

Key areas of risk will continue to be reported through the Population Health and Community Care Committee.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	<input checked="" type="checkbox"/>	Effective partnerships	<input checked="" type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance Management	<input checked="" type="checkbox"/>	Equality	<input checked="" type="checkbox"/>
Sustainability Management	<input checked="" type="checkbox"/>				

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

Any significant service changes are subject to equality and diversity impact assessments.

11. CONSULTATION AND ENGAGEMENT

Both IJBs undertook extensive consultation and engagements processes in creating the Strategic Commissioning Plans.

12. ACTIONS FOR THE BOARD

The Board is asked to:

Approve	<input type="checkbox"/>	Endorse	<input type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input checked="" type="checkbox"/>	Accept the risk identified	<input type="checkbox"/>	Ask for a further report	<input type="checkbox"/>

The Board is asked to:

1. Note the updated directions from the respective IJBs; and
2. Request ongoing updates on the key elements of the Strategic Commissioning Plans continue to be routed through the Population Health and Community Care Committee.

13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact:

Ross McGuffie, Chief Officer, North Health and Social Care Partnership
01698 752 591

Val de Souza, Director Health and Social Care, South Lanarkshire Health and Social Care Partnership
01698 453 700

Mrs Neena Mahal
Chair of Lanarkshire Health Board

31st March 2021

Dear Mrs Mahal,

As part of the requirements set out in the Public Bodies (Joint Working) (Scotland) Act 2014, the North Lanarkshire Integration Joint Board (IJB) is required to continue to direct NHS Lanarkshire to carry out the integrated functions delegated to the IJB and to confirm the resources to be allocated for the resultant services in the forthcoming year.

The direction from the IJB for the financial year 2021/2022 is therefore set out in annexes 1, 2 and 3. NHS Lanarkshire is directed to continue to carry out the delegated functions and deliver services in a way which complies with and achieves the following:

- (a) The Integration Delivery Principles
- (b) The Integration Scheme
- (c) The Strategic Commissioning Plan 2020 - 2023 and Programme of Work
- (d) The National Health and Wellbeing Outcomes
- (e) All legal and regulatory requirements

This direction will remain in force until it is varied, revoked or superseded by a later direction in respect of the same function.

A summary of our commissioning intentions are outlined in our Strategic Commissioning Plan and Programme of Work at Annex 2. This was originally developed in 2019/2020 and will continue to be implemented over the course of 2021/2022. A report outlining the progress on the Remobilisation Plan and the subsequent updating of the Programme of Work for the North Lanarkshire Health and Social Care Partnership was presented to the IJB for noting on 23 March 2021.

The budget allocation for the delegated functions is outlined in annex 4 and reflects the financial planning principles agreed at the IJB on 23 March 2021. The detailed budget setting process for the financial year 2021/2022 is being finalised. Once this work has been completed, the IJB will issue a further direction confirming the final budget. This should be concluded by no later than 30 June 2021.

The IJB financial strategy must ensure sustainability for the current and future years whilst recognising the significant challenges for both partners currently. Efficient, effective and affordable services fit for the future will need to be developed as part of the integration and transformational change activities. The IJB Medium to Long Term Financial Plan will be updated to provide context in respect of the ongoing financial challenges for both partners and to support future shared priorities.

The Integration Scheme was revised and approved effective from 1 April 2019. For completeness, the Health Board are advised that the directions to North Lanarkshire Council correspond to the revised responsibilities delegated to the IJB by North Lanarkshire Council.

In order to monitor the progress of integration, a comprehensive performance framework has been established. This framework reports on the nine national high-level outcomes, the twenty-three associated indicators, the six Measuring Performance Under Integration indicators and the set of locally developed performance measures. This framework will continue to embed a positive performance culture across the partnership. Performance reports will continue to be available to the IJB in the year ahead.

On behalf of the officers across the partnership, I would like to thank NHS Lanarkshire for the continued support during this period of significant change. We will continue to ensure that Health Board Members, officials and stakeholders are fully involved over the forthcoming year in the implementation of our commissioning intentions to improve the health and wellbeing outcomes for the people of North Lanarkshire.

Yours sincerely

Ross McGuffie
Chief Officer
North Lanarkshire Integration Joint Board

Cc.

Cllr Paul Kelly, Chair, North Lanarkshire Integration Joint Board;

Dr Avril Osborne, Vice Chair, North Lanarkshire Integration Joint Board;

Neena Mahal, Chair, Lanarkshire Health Board;

Heather Knox, Chief Executive, Lanarkshire Health Board;

Des Murray, Chief Executive, North Lanarkshire Council.

**DIRECTIONS UNDER SECTION 26 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014 TO:
LANARKSHIRE HEALTH BOARD
31 MARCH 2021**

1. The North Lanarkshire Integration Joint Board is required to give direction¹ to Lanarkshire Health Board on the carrying out of the functions delegated to it through the North Lanarkshire Integration Scheme as approved by the Scottish Ministers effective from 1st April 2019.
2. The North Lanarkshire Integration Joint Board is required to set out in writing² how these functions are to be carried out and detail the financial resources that are available for carrying out the functions that are subject to these directions, including the allocated budget and how that budget is to be used³.
3. Lanarkshire Health Board must comply with the directions that are issued by the North Lanarkshire Integration Joint Board in respect of integrated functions⁴.
4. Pursuant to the powers under Section 26 of the 2014 Act, the North Lanarkshire Integration Joint Board directs Lanarkshire Health Board:
 - a. that these directions relate to the functions and resultant services as set out in Annex 1;
 - b. to carry out all integrated functions in line with the North Lanarkshire Integration Joint Board strategic plan and commissioning summary as set out in Annex 2;
 - c. that the carrying out of all functions will be delegated to Lanarkshire Health Board on the express understanding that Lanarkshire Health Board will delegate those functions to Officers of the Health Board in accordance with the scheme of delegations set out in Annex 3 of this direction;
 - d. that resources will be allocated to services as set out in Annex 4.
5. These directions shall remain in force until such time as the North Lanarkshire Integration Joint Board considers it appropriate to amend, revoke or supersede them.

Signed on behalf of the North Lanarkshire Integration Joint Board

Ross McGuffie
Chief Officer
North Lanarkshire Integration Joint Board
Date: 31 March 2021

¹ Section 26(1); Public Bodies (Joint Working) (Scotland) Act 2014.

² Section 27(5)(b); Public Bodies (Joint Working) (Scotland) Act 2014.

³ Section 27(1)(a),(b) & (c); Public Bodies (Joint Working) (Scotland) Act 2014.

⁴ Section 27(4); Public Bodies (Joint Working) (Scotland) Act 2014.

Functions delegated by the Health Board to The Integration Joint Board

Set out below is the list of functions that will be delegated by NHS Lanarkshire to the Integration Joint Board

Functions prescribed for the purposes of section 1(8) of the Act

<i>Column A</i>	<i>Column B</i>
<i>Enactment conferring function</i>	<i>Limitation</i>

The National Health Service (Scotland) Act 1978

All functions of Health Boards conferred by, or by virtue of, the National Health Service (Scotland) Act 1978

Except functions conferred by or by virtue of—

section 2(7) (Health Boards);

section 2CB((Functions of Health Boards outside Scotland);

section 9 (local consultative committees);

section 17A (NHS Contracts);

section 17C (personal medical or dental services);

section 17I (use of accommodation);

section 17J (Health Boards' power to enter into general medical services contracts);

section 28A (remuneration for Part II services);

section 38 (care of mothers and young children);

section 38A (breastfeeding);

section 39 (medical and dental inspection, supervision and treatment of pupils and young persons);

section 48 (provision of residential and practice accommodation);

section 55 (hospital accommodation on part payment);

section 57 (accommodation and services for private patients);

section 64 (permission for use of facilities in private practice);

section 75A (remission and repayment of charges and payment of travelling expenses);

section 75B (reimbursement of the cost of services provided in another EEA state);

section 75BA (reimbursement of the cost of services provided in another EEA state where expenditure is incurred on or after 25 October 2013);

section 79 (purchase of land and moveable property);

section 82 use and administration of certain endowments and other property held by Health Boards);

section 83 (power of Health Boards and local health councils to hold property on trust);

section 84A (power to raise money, etc., by appeals, collections etc.);

section 86 (accounts of Health Boards and the Agency);

section 88 (payment of allowances and remuneration to members of certain bodies connected with the health services);

section 98 (charges in respect of non-residents); and

paragraphs 4, 5, 11A and 13 of Schedule 1 to the Act (Health Boards);

and functions conferred by—

The National Health Service (Charges to Overseas Visitors) (Scotland) Regulations 1989 ;

The Health Boards (Membership and Procedure) (Scotland) Regulations 2001/302;

The National Health Service (Clinical Negligence and Other Risks Indemnity Scheme) (Scotland) Regulations 2000/54;

The National Health Services (Primary Medical Services Performers Lists) (Scotland) Regulations 2004/114;

The National Health Service (Primary Medical Services Section 17C Agreements) (Scotland) Regulations 2004;

The National Health Service (Discipline Committees) Regulations 2006/330;

The National Health Service (General Ophthalmic Services) (Scotland) Regulations 2006/135;

The National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009/183;

The National Health Service (General Dental Services) (Scotland) Regulations 2010/205; and

The National Health Service (Free Prescription and Charges for Drugs and Appliances) (Scotland) Regulations 2011/55.

Disabled Persons (Services, Consultation and Representation) Act 1986

Section 7

(Persons discharged from hospital)

Community Care and Health (Scotland) Act 2002

All functions of Health Boards conferred by, or by virtue of, the Community Care and Health (Scotland) Act 2002.

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

All functions of Health Boards conferred by, or by virtue of, the Mental Health (Care and Treatment) (Scotland) Act 2003.

Except functions conferred by—

section 22 (Approved medical practitioners);

section 34 (Inquiries under section 33: co-operation);

section 38 (Duties on hospital managers: examination notification etc.);

section 46 (Hospital managers' duties: notification);

section 124 (Transfer to other hospital);

section 228 (Request for assessment of needs: duty on local authorities and Health Boards);

section 230 (Appointment of a patient's responsible medical officer);

section 260 (Provision of information to patients);

section 264 (Detention in conditions of excessive security: state hospitals);

section 267 (Orders under sections 264 to 266: recall);

section 281 (Correspondence of certain persons detained in hospital);

and functions conferred by—

The Mental Health (Safety and Security) (Scotland) Regulations 2005;

The Mental Health (Cross Border transfer: patients subject to detention requirement or otherwise in hospital) (Scotland) Regulations 2005;

The Mental Health (Use of Telephones) (Scotland) Regulations 2005; and

The Mental Health (England and Wales Cross border transfer: patients subject to detention requirement or otherwise in hospital) (Scotland) Regulations 2008.

Education (Additional Support for Learning) (Scotland) Act 2004

Section 23

(other agencies etc. to help in exercise of functions under this Act)

Public Services Reform (Scotland) Act 2010

All functions of Health Boards conferred by, or by virtue of, the Public Services Reform (Scotland) Act 2010

Except functions conferred by—

section 31(Public functions: duties to provide information on certain expenditure etc.); and

section 32 (Public functions: duty to provide information on exercise of functions).

Patient Rights (Scotland) Act 2011

All functions of Health Boards conferred by, or by virtue of, the Patient Rights (Scotland) Act 2011

Except functions conferred by The Patient Rights (Complaints Procedure and Consequential Provisions) (Scotland) Regulations 2012/36.

Part 2

Services currently provided by the Health Board which are to be integrated

The functions that are set out in Part 1 are delegated in relation to the services as set out below and relate to both adults and children.

Interpretation

1. In this part—

“Allied Health Professional” means a person registered as an allied health professional with the Health Professions Council;

“general medical practitioner” means a medical practitioner whose name is included in the General Practitioner Register kept by the General Medical Council;

“general medical services contract” means a contract under section 17J of the National Health Service (Scotland) Act 1978;

“hospital” has the meaning given by section 108(1) of the National Health Service (Scotland) Act 1978;

“inpatient hospital services” means any health care service provided to a patient who has been admitted to a hospital and is required to remain in that hospital overnight, but does not include any secure forensic mental health services;

“out of hours period” has the same meaning as in regulation 2 of the National Health Service (General Medical Services Contracts) (Scotland) Regulations 2004; and

“the public dental service” means services provided by dentists and dental staff employed by a health board under the public dental service contract.

Services

2. Accident and Emergency services provided in a hospital.
3. Inpatient hospital services relating to the following branches of medicine—
 - (a) general medicine;
 - (b) geriatric medicine;
 - (c) rehabilitation medicine;
 - (d) respiratory medicine; and
 - (e) psychiatry of learning disability.
4. Palliative care services provided in a hospital.
5. Inpatient hospital services provided by General Medical Practitioners.
6. Services provided in a hospital in relation to an addiction or dependence on any substance.
7. Mental health services provided in a hospital except regionally or nationally organised forensic mental health services
8. District nursing services.
9. Services provided outwith a hospital in relation to an addiction or dependence on any substance.

10. Services provided by allied health professionals in an outpatient department, clinic, or outwith a hospital.
11. The public dental service.
12. 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.
13. General dental services provided under arrangements made in pursuance of section 25 of the National Health (Scotland) Act 1978.
14. Ophthalmic services provided under arrangements made in pursuance of section 17AA or section 26 of the National Health Service (Scotland) Act 1978.
15. 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.
16. Services providing primary medical services to patients during the out-of-hours period.
17. Services provided outwith a hospital in relation to geriatric medicine.
18. Palliative care services provided outwith a hospital.
19. Community learning disability services.
20. Mental health services provided outwith a hospital.
21. Continence services provided outwith a hospital.
22. Kidney dialysis services provided outwith a hospital.
23. Services provided by health professionals that aim to promote public health.

NORTH LANARKSHIRE IJB STRATEGIC COMMISSIONING PLAN AND PROGRAMME OF WORK ANNEX 2

The North Lanarkshire IJB Strategic Commissioning Plan 2020 – 2023 and the Programme of Work are both available on the following web-site:

<https://mars.northlanarkshire.gov.uk/egenda/public/kab71.pl?cmte=HJI>

The relevant meeting is Tuesday 24 March 2020 and the agenda item number is 3 entitled Strategic Commissioning Plan 2020 – 2023 and Programme of Work.

The progress report on the Remobilisation Plan and the update in respect of the Programme of Work for the North Lanarkshire Health and Social Care Partnership is available on the following web-site:

[att95922.pdf \(northlanarkshire.gov.uk\)](#)

The relevant meeting is Tuesday 23 March 2021 and the agenda item number is 9 entitled Remobilisation Plan 2021-22 and SCP Programme of Work 2020-23.

SCHEME OF DELEGATIONS

ANNEX 3

That the carrying out of integrated functions that relate to the services set out in 1 and 2 below will be delegated to Officers of Lanarkshire Health Board by the Chief Executive of Lanarkshire Health Board at his discretion, in accordance with all applicable legal requirements;

1. Accident and emergency services provided in a hospital;
2. Inpatient hospital services relating to the following branches of medicine:
 - General medicine;
 - Geriatric medicine;
 - Rehabilitation medicine;
 - Respiratory medicine;
 - Palliative care services provided in a hospital;

That the carrying out of integrated functions that relate to the services set out in 3 to 29 below will be delegated to Officers of Lanarkshire Health Board by the Chief Accountable Officer for the Integration Joint Board at her discretion, in accordance with all applicable legal requirements;

3. Inpatient hospital services relating to the following branches of medicine:
 - Paediatrics;
 - Psychiatry of learning disability;
 - Inpatient hospital services provided by general medical practitioners;
 - Services provided in a hospital in relation to an addiction or dependence on any substance;
 - Mental health services provided in a hospital except regionally or nationally organised forensic mental health services.
4. District nursing services;
5. Health Visiting;
6. Allied health professionals in an outpatient department, clinic, or out with a hospital;
7. Public dental services;
8. Primary medical services;
9. General dental services;
10. Ophthalmic services;
11. Pharmaceutical services;
12. Primary care out-of-hours;
13. Geriatric medicine;
14. Palliative care;
15. Community learning disability services;
16. Kidney dialysis services provided out with a hospital;
17. Services provided by health professionals that aim to promote public health;

18. Care Home Liaison;
19. Community Children's Services;
20. Dietetics;
21. Psychology;
22. Sexual and Reproductive health and Blood Borne Viruses;
23. Speech and Language Therapy;
24. Prisoner Health Care;
25. Podiatry;
26. Mental Health and Learning Disability services;
27. Community Paediatrics;
28. Continence Services;
29. Addiction Services.

That the carrying out of integrated functions that relate to the services set out in 30 to 38 below will be delegated to Officers of Lanarkshire Health Board by the Chief Accountable Officer for the South Lanarkshire Integration Joint Board at her discretion, in accordance with all applicable legal requirements;

30. Community Dental Services;
31. Diabetes Services;
32. Health & Homelessness;
33. Primary Care Administration;
34. Palliative Care;
35. Physiotherapy;
36. GP Out of Hours;
37. Traumatic Brain injury;
38. Occupational Therapy.

BUDGET ALLOCATION FOR THE DELEGATED FUNCTIONS

ANNEX 4

The financial resources which will be delegated by the IJB to NHS Lanarkshire (NHSL) for the financial year 2021/2022 are as follows:

1. The NHSL recurring budget allocations for in-scope health care services including hosted services. For 2020/2021, based on the budget as at January 2021, the total allocation for directly managed services, including hosted services, is £498.259m. This includes the notional set-aside budget which is updated at paragraph 2. It also includes non-recurring funding as at January 2021. The financial allocation will also be subject to confirmation of the financial planning assumptions including the pay inflation estimates. The final budgets will be confirmed following the detailed budget setting process for 2021/2022. Non-recurring budgets will be adjusted as appropriate as part of this exercise.
2. In respect of the Acute Hospital Services delegated to the IJB, the notional set-aside budget will increase by the 1.5% inflation uplift of £0.946m from £63.066m to £64.012m for 2021/2022.
3. Excluding the uplift on the resource transfer, social care fund, delayed discharge fund and integrated fund (£0.778m) allocated to NLC and the uplift to NHSL Acute Services in respect of the set-aside services (£0.946m), funding of approximately £6.024m will be allocated to NHSL in 2021/2022 to support the strategic commissioning intentions and contribute to the agreed Scottish Government priorities which include the implementation of the Primary Care Improvement Plan, the Mental Health Services Strategy Action 15 and the Alcohol and Drug Partnership initiatives. In respect of the uplift of £6.024m, £5.953m is recurring and £0.071m is non-recurring.
4. NHSL will make progress towards the implementation of agreed efficiency savings plans in 2022/2023. In respect of the financial year 2021/2022, subject to IJB approval on 23 March 2021, reliance will be placed on an earmarked reserve totalling £0.781m as a non-recurring funding solution to the projected funding gap in 2021/2022.
5. Additional non-recurring funding received in-year from NHSL which is ring fenced for areas covered by the IJB will be delegated to the partner responsible for service delivery. These in-year allocations will be agreed with each partner as appropriate.
6. Notwithstanding the above allocations, the IJB is asked to note that it may be necessary for the IJB Chief Financial Officer to vary the 2021/2022 allocations to reflect the detailed budget setting process undertaken by each partner. Any such accounting adjustment to assist with budget monitoring arrangements will be undertaken in consultation with the Director of Finance of NHSL and the Head of Financial Solutions for NLC.

Appendix Two – South IJB Directions

Val de Souza
Director, Health and Social Care

Our ref: VdS/GG
Your ref:
If calling ask for: Giuliana Gustinelli
Phone: 01698 453700
Date: 27 November 2020

Dear Chief Executive,

South Lanarkshire Integration Joint Board (IJB) Directions 2020/2021

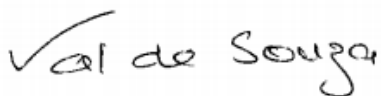
I refer to the IJB meeting of 29th March, 2021 in relation to ‘Directions’ to the Local Authority and NHS Board for 2021/22.

Integration Authorities require a mechanism to action their Strategic Commissioning Plans and this is laid out in the form of binding ‘Directions’ from the IJB to one or both of the Local Authority and NHS Board.

Since its inception, the IJB has now issued a total of 38 ‘Directions’ to support the implementation of agreed commissioning intentions set out in Strategic Commissioning Plans to date. A copy of the detail of these ‘Directions’ and how they align to existing commissioning intentions is attached with this letter.

Could I thank you in advance for your continued support and co-operation with this agenda and should you require to discuss any aspect of this, please do not hesitate to contact me.

Yours sincerely



Val de Souza
Director, Health and Social Care Partnership



South Lanarkshire Integration Joint Board

Directions to South Lanarkshire Council and NHS Lanarkshire Board

Financial Period 2021/2022

1) Purpose and Context

In accordance with the requirements of the Public Bodies (Joint Working) (Scotland) Act, 2014, Integration Joint Boards (IJBs) are required from 01 April 2016 to issue Directions to Local Authorities and NHS Boards regarding the functions and services listed within the Act and Integration Schemes. This is set out in Sections 26 and 27 of the Act.

This document sets out the South Lanarkshire Integration Joint Board Directions to South Lanarkshire Council and NHS Lanarkshire Health Board.

2) Functions and Services to be Delivered by South Lanarkshire Council

South Lanarkshire Council are directed to continue to deliver the services specified below pursuant to the functions delegated to the IJB in line with the Integration Scheme and Integration Joint Board's Strategic Commissioning Plan. This direction will remain in force until it is varied, revoked or superseded by a later direction in respect of the same function.

The Council, will be responsible for the operational delivery of the following functions:

- Social Work Services for Adults and Older People
- services and support for adults with physical disabilities and learning disabilities
- 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
- aspects of housing support, including aids and adaptations
- Day Services
- local area co-ordination
- respite provision
- Occupational Therapy Services
- Re-ablement Services, equipment and telecare

3) Functions and Services to be Delivered by NHS Lanarkshire Health Board

NHS Lanarkshire Health Board are directed to continue to deliver the services specified below pursuant to the functions delegated to the IJB in line with the Integration Scheme and Integration Joint Board's Strategic Plan. This direction will remain in force until it is varied, revoked or superseded by a later direction in respect of the same function

NHS Lanarkshire Health Board will be responsible for the operational delivery of the following functions:

Hospital Services

- Accident and Emergency Services provided in a hospital
- Inpatient Services related to general medicine, geriatric medicine, rehabilitation medicine, respiratory medicine and palliative care service provided in a hospital
- Paediatrics
- Psychiatry of learning disability (Learning Disability Services)
- Inpatient Hospital Services provided by General Medical Practitioners
- services in relation to addiction or dependence on substances
- Mental Health Services with the exception of Forensic Mental Health Services

Community Health Services

- District Nursing Services
- Health Visiting
- Addiction Services
- Allied Health Professionals in an outpatient department, clinic, or out with a hospital
- Public Dental Services
- Primary Medical Services
- General Dental Services
- Ophthalmic Services
- Pharmaceutical Services
- Primary care out-of-hours
- Geriatric Medicine
- Palliative Care
- Community Learning Disability Services
- Mental Health Services (including Community Forensic Services)
- Continence Services
- Kidney Dialysis Services
- services provided by health professionals that aim to promote public health
- Community Paediatrics

Hosted Services

Services to be hosted by the South Lanarkshire Integration Joint Board	Services to be hosted by the North Lanarkshire Integration Joint Board
Community Dental Services Diabetes Health and Homelessness Primary Care Administration Palliative Care GP Out of Hours Traumatic Brain Injury Occupational Therapy Physiotherapy	Care Home Liaison Community Children's Services Paediatrics Dietetics Mental Health and Learning Disability Psychology Continence Services Podiatry Sexual Health Speech and Language Substance Misuse Prisoner Health Care

4) Delivering the Functions and Services

The Council and NHS Lanarkshire Health Board will carry out the functions and deliver services in a way which complies with and achieves the following:

- (f) The integration delivery principles
- (g) The Integration Scheme
- (h) The Strategic Plan
- (i) The National Health and Wellbeing Outcomes
- (j) All legal and regulatory requirements

Budget Allocation for the Delegated Functions

The financial resources which will be delegated by the IJB to each partner are as follows:

1. The NHSL recurring budget allocations for in-scope Health Care Services including Hosted Services. For 2021/2022, the total indicative budget allocation for directly managed services, including hosted services but excluding the notional set-aside budget is £370.000 million. This is based on the 2020/2021 budget as at January 2021. This indicative budget allocation will be adjusted to reflect the changes in non-recurring funding, the relevant share of the additional funding and the agreed IJB efficiency savings.
2. The South Lanarkshire Council recurring budget allocations for in-scope services. For 2021/2022, the allocation for in-scope Social Care Services is £128.413 million. The allocation for the in-scope Housing Services is £5.102 million (General Fund - £2.220m; Housing Revenue Account - £2.882m). This is based on the 2020/2021 budget as at January 2021. The total funding allocation is therefore £133.515 million. This indicative budget allocation will be adjusted to reflect the relevant share of the additional funding and the agreed IJB efficiency savings.
3. Additional funding in 2021/2022 totals £8.189m million (NHSL - £4.073m; SLC - £4.116m) and will be allocated to each partner as appropriate in line with the IJB Financial Plan for 2021/2022. Included within this additional funding is the 1.5% inflation uplift on the Resource Transfer Funding, Social Care Funding and Commissioned Services totalling £0.727m which will be transferred from NHS Lanarkshire to South Lanarkshire Council in line with normal invoice procedures.
4. Additional funding received in-year from NHS Lanarkshire which is ring-fenced for areas covered by the IJB will be delegated to the partner responsible for service delivery. These in-year allocations will be agreed with each partner as appropriate.
5. NHS Lanarkshire Health Board and South Lanarkshire Council will implement as appropriate any agreed efficiency savings plans and management actions. Where necessary, reliance will be placed on agreed reserves to manage cost pressures pending identification of a recurring funding solution.
6. The acute services set-aside budget will be adjusted to reflect the 2018/2019 activity levels and the 2021/2022 price levels in line with the Scottish Government Guidance. The notional value of the set-aside budget for 2021/2022 is £60.394 million.

Notwithstanding the above allocations, it may be necessary for the Chief Financial Officer to vary the 2021/2022 allocations to reflect the detailed budget setting process undertaken by each partner. Any such accounting adjustment to assist with budget monitoring arrangements will be undertaken in consultation with the Director of Finance of NHS Lanarkshire and the Executive Director of Finance and Corporate Resources of South Lanarkshire Council.

South Lanarkshire Integrated Joint Board –Specific Directions

Strategic Priority	Strategic Commissioning Intention	Is there an existing Direction (Y/N)	Direction Complete Yes / No / Ongoing	Detail	Milestones/ Link PI	Outcomes
Early intervention, prevention and health improvement	Work with partners to deliver an increased range of activities to mitigate the negative health consequences of poverty and welfare reform	Y	Ongoing	Directs NHS Lanarkshire and South Lanarkshire Council to participate in the development of the Local Outcome Improvement Plans (LOIPS) with a particular focus on early years, tackling social isolation, health inequalities, early intervention/prevention and community capacity building	NI 2 NI 3	Outcome 1 Outcome 5
	Work with key partners to implement the Strategic ambitions of Rights, Respect and Recovery – Scotland’s strategy to improve health by preventing and reducing alcohol and drug use, harm and related deaths	Y	Ongoing	Utilise additional investment from Programme for Government 2018/19 Scottish Government to reduce the impact of problem alcohol and drug use	NI 1 NI 2	Outcome 4 Outcome 9
	Contribute to the South Lanarkshire Child Poverty Action Plan and deliver the relevant actions to address child poverty	Y	Ongoing	Directs NHS Lanarkshire and South Lanarkshire Council to participate in the development of the Local Outcome Improvement Plans (LOIPS) with a particular focus on early years, tackling social isolation, health inequalities, early intervention/prevention and community capacity building	NI 1 NI 2	Outcome 5
	Support improvement programmes identified and in practice, as part of the Children and Young People Improvement Collaborative	Y	Ongoing	Directs NHS Lanarkshire and South Lanarkshire Council to participate in the development of the Local Outcome Improvement Plans (LOIPS) with a particular focus on early years, tackling social isolation, health inequalities, early intervention/prevention and community capacity building	NI 1 NI 2	Outcome 5

Strategic Priority	Strategic Commissioning Intention	Is there an existing Direction (Y/N)	Direction Complete Yes / No / Ongoing	Detail	Milestones/ Link PI	Outcomes
	Working with VASLan and South Lanarkshire Leisure and Culture Trust, develop a local framework and pathway that offers a range of social and community based alternatives and supports from the third sector organisations that provide a flexible and innovative approach to health and care that reach the most in need of support. These supports will reduce reliance on health and social care and provide early intervention and prevention approaches that improve health and wellbeing and provide a cohesive social prescribing approach.	Y	Ongoing	Directs NHS Lanarkshire and South Lanarkshire Council to participate in the development of the Local Outcome Improvement Plans (LOIPS) with a particular focus on early years, tackling social isolation, health inequalities, early intervention/prevention and community capacity building	NI 1 NI 2	Outcome 5
				Through Integrated Care Fund Investment, increase capacity within the Third Sector and Leisure to promote alternatives to formal services	NI 1 NI 2	Outcome 5
	Provide a range of programmes in conjunction with SLL&C and other partners that support people to keep physically and mentally active, live life well, maintain community connections and so reduce isolation and the subsequent health consequence	Y	Ongoing	Directs NHS Lanarkshire and South Lanarkshire Council to participate in the development of the Local Outcome Improvement Plans (LOIPS) with a particular focus on early years, tackling social isolation, health inequalities, early intervention/prevention and community capacity building	NI 1	Outcome 5
	Deliver on the ambitions in the Green Health Partnership action plan and Our Natural Health Service ambitions given the noted benefits to mental health and wellbeing	Y	Ongoing	Directs NHS Lanarkshire and South Lanarkshire Council to participate in the development of the Local Outcome Improvement Plans (LOIPS) with a particular focus on early years, tackling social isolation, health inequalities, early intervention/prevention and community capacity building	NI 1	Outcome 4 Outcome 5
	Align our key health improvement programmes and strategies to the National Public Health Priorities	Y	N/A			
	Deliver the actions in the Lanarkshire Healthy Weight Strategy and the Diabetes Prevention Framework to support people to be of a healthy weight and reduce the incidence of	Y	Ongoing	Directs NHS Lanarkshire and South Lanarkshire Council to participate in the development of the Local Outcome Improvement Plans (LOIPS) with a	NI 1 NI 2 NI 11	Outcome 4 Outcome 5

Strategic Priority	Strategic Commissioning Intention	Is there an existing Direction (Y/N)	Direction Complete Yes / No / Ongoing	Detail	Milestones/ Link PI	Outcomes
	Diabetes			particular focus on early years, tackling social isolation, health inequalities, early intervention/prevention and community capacity building		
Delivering Statutory / Core Duties	Enhance the Self-directed Support (SDS) journey for service users and carers as part of increasing the choice and options available to people in accessing supports	N	N/A			
	Target social care resources to the most vulnerable through the implementation of a prioritisation/eligibility framework	Y	Ongoing	Implement Prioritisation Framework in line with the four national categories of Low, Moderate, Substantial and Critical	NI 9	Outcome 9
	Continue to design / develop the Primary Care Transformation plan and ensure readiness to align to the new GMS contract effectively	Y	Ongoing	Directs NHS Lanarkshire to develop alternative and sustainable models within Primary Care to address existing challenges, for example General Practitioner capacity	NI 1 NI 2 MSG 6	Outcome 8 Outcome 9
		Y	Ongoing	Reduce prescribing activity for South Lanarkshire to achieve a level which is more comparable with the national averages through: <ul style="list-style-type: none"> 1) Increased social prescribing 2) Alternative medicines and drugs 3) Changes to practice and culture 	NI 1 NI 2	Outcome 9
		Y	Ongoing	Implement Primary Care Transformation programme in relation to general practice and community redesign, urgent care, the house of care model, pharmacy support in practice and GP sustainability	NI 1 NI 2 MSG 6	Outcome 1 Outcome 3 Outcome 8 Outcome 9
		Y	Ongoing	Implement the new requirements with regards to General Medical Services 2018 Contract. Specifically the development of a Primary Care Improvement Plan (PCIP) by June 2018 to outline how existing and new services which affirm the role of GPs as expert medical generalists	NI 1 NI 2 MSG X 6	Outcome 8 Outcome 9

Strategic Priority	Strategic Commissioning Intention	Is there an existing Direction (Y/N)	Direction Complete Yes / No / Ongoing	Detail	Milestones/ Link PI	Outcomes
		Y	Yes	Develop Memorandum of Understanding to support the production and implementation of the Primary Care Improvement Plan (PCIP)	NI 11	Outcome 8 Outcome 9
	Deliver all services in line with statutory requirements as set out in the legislation cover Health and Social Care Services e.g. legislation pertaining to Public Protection; Mental Health, Learning Disability and Carers	Y	Ongoing	Global Direction issued in relation to the delivery of all delegated functions	ALL NI MSG X 6	Outcomes 1 - 9
		Y	Ongoing	Maintain existing commitments to ensure that all statutory and legal duties are delivered, for example adult support and protection, child health surveillance, immunisation, Self-directed Support (SDS), Community Empowerment and mental health requirements, safeguarding the interests of the most vulnerable within our society	ALL NI MSG X 6	Outcomes 1 - 9
		N	Ongoing	Directs that South Lanarkshire Council will develop an advocacy service specification.	NI 1 NI 2	Outcome 1 Outcome 3 Outcome 4 Outcome 5 Outcome 7
		Deliver locality based home care services which support the delivery of personal care and maximise the opportunity for people to be maintained at home	Y	Ongoing	Directs that South Lanarkshire Council will deliver home care services in terms of the new contractual framework agreement; that mobile working and efficiencies in scheduling will be introduced	NI 2 NI 18 MSG 4
		Y	Ongoing	Implement the recommendations of the home care service review to maximise capacity to support people at home	NI 2 NI 18 MSG 4	Outcome 2 Outcome 4
	Support the personal outcomes and preferences of people in 'end of life' through the delivery of palliative care services which focus on being: Safe; Person centred; Accessible; Efficient; Affordable; Deliverable	Y	Y	Commission inpatient Palliative Care services (12 beds) within the South Lanarkshire geographical area	NI 15	Outcome 2 Outcome 3 Outcome 4
Mental Health and Wellbeing	Develop a single service approach for community based mental health services across the four localities of South Lanarkshire	Y	Ongoing	Integration and co-location of mental health services for health and social care across the four localities within South	NI 1 NI 2	Outcome 1 Outcome 2 Outcome 3

Strategic Priority	Strategic Commissioning Intention	Is there an existing Direction (Y/N)	Direction Complete Yes / No / Ongoing	Detail	Milestones/ Link PI	Outcomes
				Lanarkshire		Outcome 4 Outcome 5 Outcome 7
	Implement the Good Mental Health for All local action plan to support mental health and wellbeing in the population	N	N/A			
	Review the range of 'Link' workers already working across primary care and mental health service and agree model to maximise posts – and to link people to alternative supports in the community	N	N/A			
	Review the provision of mental health beds for adults and older people in South Lanarkshire.	N	N/A			
Seven Day Services	Implement a programme of work to maximise efficiency within the care at home sector	N	N/A			
	Develop the number and range of services provided over 7 days.	Y	Ongoing	Develop proposals for IJB approval which consolidate and co-locate out of hours services across health and social care	MSG 1 - 4	Outcome 9
	Work with acute hospital colleagues to maximise 7 day working and support flow across all areas	N	N/A			
	Implement a model of day opportunities which support people's personal outcomes and preferences	Y	Ongoing	Develop and commission a day opportunities model for Adult and Older People which promotes enablement, independence, self-care and self-management	NI 2	Outcome 1 Outcome 2 Outcome 9
Carers	Increase support to carers in maintaining their caring role through the implementation of the duties outlined in the Carers Act 2016 pertaining to: <ul style="list-style-type: none"> Information and advice Adult carer support plans Young carer statements Short breaks 	Y	Ongoing	Implement the requirement of the Carers (Scotland) Act 2016 pertaining to: <ul style="list-style-type: none"> A new adult carer support plan with personal outcomes focus A new young carer support plan with a personal outcomes focus A duty to support carers including by means of a local 	NI 8 NI 27	Outcome 6

Strategic Priority	Strategic Commissioning Intention	Is there an existing Direction (Y/N)	Direction Complete Yes / No / Ongoing	Detail	Milestones/ Link PI	Outcomes
				eligibility criteria <ul style="list-style-type: none"> • A duty to prepare a local Carers Strategy • A duty to provide an information and advice and publish a short breaks services statement • A duty to involve carers in the discharge from hospital of the people they care for 		
	Strengthen the 3 rd Sector support model for carers through reviewing how existing services are commissioned in relation to carers support services, information and advice, consultation and engagement, training, practical support and consultation and engagement	Y	Ongoing	to procure services which provide equitable access to carer support services, information and advice, short breaks, consultation and engagement, training, practical support and assistance for adult and young carers	NI 8 NI 27	Outcome 6
Suitable and Sustainable Housing	Increase housing supply and improve access to and choice of housing options that suit people's needs and which they are able to afford and sustain	N	N/A	Actions being picked up through Local Housing Strategy 2017-22 and Rapid Rehousing Transition Plan (RRTP)		
	Ensure people with particular needs and their carers are better supported to live independently within the community in a suitable and sustainable home, reducing requirement for institutional care and risks of homelessness	N	N/A	Actions being picked up through Local Housing Strategy 2017-22 and Rapid Rehousing Transition Plan (RRTP)		
Preventing and Reducing Homelessness	Improve and increase provision of housing support for households to live independently within communities	N	N/A	Actions being picked up through Local Housing Strategy 2017-22 and Rapid Rehousing Transition Plan (RRTP)		
	Expand the scope and capacity of Housing First approach to be the first response for households with multiple complex needs.	Y	Ongoing	Directs NHS Lanarkshire and South Lanarkshire Council to prioritise access to general medical and universal health screening services for homeless people, including those currently engaged with the Housing First model.	NI 2 MSG 6	Outcome 1 Outcome 2

Strategic Priority	Strategic Commissioning Intention	Is there an existing Direction (Y/N)	Direction Complete Yes / No / Ongoing	Detail	Milestones/ Link PI	Outcomes
	Increase awareness and reach of health and social care services to help early identification of need and subsequent prevention of homelessness	Y	Ongoing	Directs NHS Lanarkshire to deliver routine enquiry across all services, including visiting outreach, GP services and A&E to identify housing issues and requirements	NI 2 MSG 6	Outcome 1 Outcome 2
Single Points of Contact	Reducing the impact of people being delayed in hospital through the implementation of <ul style="list-style-type: none"> • rapid response short-term care at home teams • integrated care and support teams • Remodelled assessment and care management systems • Technology Enabled Services 	N	N/A			
	Across the four locality planning areas maximise opportunities to streamline how we support people who require health and social care support. This will include: <ul style="list-style-type: none"> • closer alignment of community based health and social care staff, including further co-location • integrated support planning and review • Sharing information across I.T systems • workforce planning to identify areas of need and development 	Y	Ongoing	Directs both South Lanarkshire Council and NHS Lanarkshire to implement an integrated locality planning and management model for the Partnership which has broad consistency across each of the four localities	MSG x 6	Outcomes 1 - 9
		Y	Ongoing	Develop whole system working approach to locality planning	MSG x 6	Outcomes 1 - 9
		Y	Ongoing	Implement a locality operational model across the 4 geographical localities of South Lanarkshire	MSG x 6	Outcomes 1 - 9

Strategic Priority	Strategic Commissioning Intention	Is there an existing Direction (Y/N)	Direction Complete Yes / No / Ongoing	Detail	Milestones/ Link PI	Outcomes
Intermediate Care	Implement the new care facilities model across the four localities to provide people with more choice and options to be maintained at home and in the community	Y	Y	Directs both South Lanarkshire Council and NHS Lanarkshire to complete a feasibility study which review care pathways and maximises use of existing community based resources – including all beds, regardless of setting	MSG x 6	Outcome 1 Outcome 2 Outcome 3 Outcome 9
		Y	Ongoing	Reduce reliance on Nursing and Residential Care through the development of proposals to remodel a proportion of residential care beds to focus on transitional support and the ‘home for life’ principle	MSG x 6	Outcome 1 Outcome 2 Outcome 3 Outcome 9
	Enhance community based rehabilitation and re-ablement interventions as part of shifting delivery of services away from the hospital	Y	Yes	Strengthen community based services resulting from the re-allocation of resources from acute to community as a result of the agreed IJB Direction to close the Douglas Ward in Udston Hospital (30 beds)	MSG x 6	Outcome 1 Outcome 2
		Y	Ongoing	Support people to maximise their independence through the delivery of reablement (SYI)	MSG x 6	Outcome 1 Outcome 2
		Y	Ongoing	Redesignate off-site acute hospital beds within Udston and Stonehouse hospitals to support step down intermediate care patients undergoing a guardianship (AWI) process	MSG x 6 NI 9	Outcome 1 Outcome 2 Outcome 9
		Y	Ongoing	Integrate the Hospital at Home Service with other community based intermediate care services such as Integrated Community Support Teams (ICST)	MSG x 6	Outcome 1 Outcome 2 Outcome 9
		Y	Y	Redesignation of Lockhart inpatient beds to a community based facility	MSG x 6	Outcome 1 Outcome 2 Outcome 9
Unscheduled Care	Agree target for average length of stay across South Lanarkshire HSCP with regards to Older Peoples unscheduled care to reduce	Y	Ongoing	Establish and implement an agreed average length of stay for emergency admissions related to Care of Elderly	MSG x 6	Outcome 1 Outcome 2 Outcome 9

Strategic Priority	Strategic Commissioning Intention	Is there an existing Direction (Y/N)	Direction Complete Yes / No / Ongoing	Detail	Milestones/ Link PI	Outcomes
	overall demand on the use of hospital beds					
	Agree and introduce Unscheduled Care Plan to include: <ul style="list-style-type: none"> • Frailty • Front Door Senior Decision Making • Frequent Attendees 	Y	Y	Directs NHS Lanarkshire Acute Services to work jointly with the Health and Social Care Partnership to develop proposals which more effectively supports a reduced number of A&E attendances, associated admissions and generally shifts the balance of care and reduces unplanned care requirements in a hospital setting	MSG 1 - 4	Outcome 1 Outcome 2 Outcome 9
	Implement re-ablement approach to care across acute hospital ward settings.	N	N/A			
Models of self-care and self-management	Further extend the use of Technology Enabled Care to support people to be active participants in managing their own health and wellbeing	N	N/A			
	Through improved awareness and visibility of the 'Locator' tool link local health and social care professionals to a wider network of alternative interventions and support options. Note: this would equally link to intermediate care (step down), single point of contact, mental health and wellbeing and transitions	N	N/A			
	Support the introduction of new unscheduled care pathways which maximise the use of Technology Enabled Care					
Transitional Arrangements	Review current transitional arrangements from Children's Service to Adult Services with a view to achieving better outcomes for vulnerable young people	N	N/A			
	Work with carers as key partners in the review of 'Transitional arrangements'	N	N/A			

Strategic Priority	Strategic Commissioning Intention	Is there an existing Direction (Y/N)	Direction Complete Yes / No / Ongoing	Detail	Milestones/ Link PI	Outcomes
Enablers	Ensure that integration arrangements have the necessary support services capacity to underpin the delivery of better integrated strategic and operational delivery of health and social care services	Y	Y	Develop and implement a performance management approach for the Partnership	All PIs	Outcome 9
		Y	Ongoing	Further integration of I.T and information sharing to allow access to partner I.T systems	All PIs	Outcome 9
		N	Ongoing	Directs South Lanarkshire Council to create a Commissioning and Quality Assurance Resource	All PIs	Outcome 9