



REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD –
28 FEBRUARY 2017

REPORT ON: CLINICAL, CARE AND PROFESSIONAL GOVERNANCE

REPORT BY: CHIEF OFFICER

REPORT NO: DIJB8-2017

1.0 PURPOSE OF REPORT

To inform the Dundee Health and Social Care Integration Joint Board of the implementation of Getting It Right for Everyone – A Clinical, Care and Professional Governance Framework within Dundee Health and Social Care Partnership.

2.0 RECOMMENDATIONS

It is recommended that the Integration Joint Board (IJB):

- 2.1 Note the progress made to date;
- 2.2 Instruct the Chief Officer to provide exception reporting to every Performance & Audit Committee and six-monthly reports to the IJB beginning in November 2017.

3.0 FINANCIAL IMPLICATIONS

There are no financial implications arising from this report.

4.0 MAIN TEXT

4.1 Background

- 4.1.1 There is a requirement for partnerships to have a Clinical, Care and Professional Governance framework which will assure both the IJB and their parent bodies of the quality and safety for the services delivered by their staff. The clinical, care and professional governance arrangements for all services within the scope of the three Health and Social Partnerships within Tayside were described in the document Getting It Right for Everyone – A Clinical, Care and Professional Governance Framework (the Framework) (attached as appendix 1). This Framework was adopted by the Dundee Health and Social Care Partnership Integration Board on 24 March 2015. The arrangements for clinical, care governance and professional governance described in this paper are designed to assure Tayside's three Integration Joint Boards (IJBs), NHS Tayside and the area's three Local Authorities of the quality and safety of service delivered by its staff, and the difference services are making to the lives and outcomes of the people of Tayside who need them.
- 4.1.2 The framework identifies six key domains which were chosen to reflect the core elements of business in each Integrated Authority:
 - Information Governance
 - Professional Regulation and Workforce Development
 - Patient/Service User/Carer and Staff Safety
 - Patient/Service User/Carer and Staff Experience
 - Quality and Effectiveness of Care
 - Promotion of Equality and Social Justice

4.2 Embedding the Framework within the Partnership

4.2.1 To further develop the understanding of the Framework and its application, two development sessions were held with Managers to discuss the Framework, agree application and map out current resources. These sessions identified both the strengths in each parent organisations and the gaps in the application of the Framework. Following on from these sessions key area for further development were identified and included:

- A mapping of current arrangements against the six key domains.
- Further development of the Dundee CHP Performance Clinical Forum to incorporate all relevant services at an operational level.
- A review of Health and Safety monitoring arrangements to develop an integrated approach.
- A joint complaints process for the receipt, recording and analysis of complaints.
- A staff development programme which will take forward the roll out of the Framework and embed the principles within the day to day service delivery.
- The use of local systems to support single recording and reporting arrangement. This includes the use of Dundee City Council's Covalent system to record actions and the use of NHS Tayside Datix system to record risks and incidents.

4.2.3 It is anticipated that as the partnership governance arrangements continue to develop, other systems will be explored to take an integrated approach to recording and analysis of governance data and information.

4.3 Governance and Accountability Arrangements

4.3.1 The Framework (Appendix 1 – page 13) articulates the accountability arrangements for Clinical, Care and Professional governance.

4.3.2 The Chief Executives of the three Councils and NHS Tayside hold ultimate accountability for the delivery of clinical and care governance. In developing the Framework, a proposed reporting and accountability structure was developed. This introduced levels of reporting arrangements:

R1 – Tayside Joint Forum - This forum takes overall responsibility for the monitoring of Clinical, Care and Professional governance across Tayside. It is a professional reference group, bringing together senior professional leaders across Tayside. It should provide oversight and advice in respect of clinical, care and professional governance. The membership includes Chief Social Work Officers, Medical Director, Nurse Director, Director of Public Health, Pharmacy Director, Director of Allied Health, Associate Medical Director (Primary Care and Independent Contractors) and the Chair of the Area Clinical Forum.

R2 – Local Partnership Clinical Forum – This forum will sit at a Partnership level and will be made up of a range of professionals and managers, who are responsible for the implementation of the Framework and who hold accountability to the membership of R1 for outcomes. The membership of this forum will reflect the professionals represented in R1.

R3 – Professional/Clinical Advisory forums or equivalent - These groups are either Tayside wide forums such as the Tayside Mental Health Clinical, Care and Professional Governance Group or thematic groups such as the Diabetes Managed Clinical Network. There is further work to be done to clarify communication routes between the forum and the R2 groups.

R4 – Operational Groups - While this level of governance is not defined within the Framework, there is a recognition that at a Partnership operational level and in some cases by service or theme, there are currently groups within the Partnership which hold a Clinical, Care and Professional governance role. This includes the Adult Support and Protection Committee which considers and reports on risk, performance and practice; the staff side/trade union/management meetings; the CHP quality forums and health and safety groups. These groups will be built into the local articulation of the Framework and reporting arrangements between the local R4 groups and the Dundee R2 forum are being established.

4.4 Dundee Health and Social Care Clinical, Care and Professional Governance Forum (R2)

4.4.1 The Dundee Health and Social Care Clinical, Care and Professional Governance Forum was established as an interim Forum in the shadow year of the partnership. Since the full

commencement of the Act the membership and reporting arrangements were further reviewed and the Forum has commenced a series of meetings. It is chaired by David Shaw, Clinical Director.

4.4.2 The Forum will consider the following issues where they apply to matters of clinical, care and professional governance:

- Identified risks
- Health and Safety
- Analysis of Datix reports
- Local Adverse Events Reviews (LAERS)/Significant Clinical Event Analysis (SCEA)/Significant Incident Reports
- Reports as defined by the six domains (see 4.1.2)
- Minutes of R1/R3/R4 groups as required.

4.4.3 In addition, the Forum has agreed that services will be asked to provide a report detailing any risk and issues of governance. These reports will be timetabled in over the next financial year.

4.5 Performance Reporting

4.5.1 At this early stage, the Dundee Health and Social Care Clinical, Care and Professional Governance Forum is unable to provide a fully comprehensive report to the IJB as they are still gathering and agreeing the baseline data and reporting arrangements. This work will form the basis of a routine report to the Performance & Audit Committee and a fully comprehensive report to the IJB every six months. It is our recommendation that the first six-monthly report be tabled at the IJB in November 2017 (reporting period April 2017 – October 2017).

4.5.2 R1, as defined through the Framework, will report to the Clinical and Care Governance Forum. Through this forum, NHS Tayside will provide assurance to the IJB. In addition, matters of Clinical, Care & Professional Governance will be reported by the Chief Social Work Officer through her annual report.

5.0 POLICY IMPLICATIONS

This report has been screened for any policy implications in respect of Equality Impact Assessment and Risk Management. There are no major issues.

6.0 CONSULTATIONS

The Chief Finance Officer, Clinical Director, Professional Advisers to the IJB and the Clerk were consulted in the preparation of this report.

7.0 BACKGROUND PAPERS

None.

David W Lynch
Chief Officer

DATE: 8 February 2017



Integrated Health and Social Care Partnerships

Getting it Right for Everyone - A Clinical, Care and Professional Governance Framework

“Governance is a system through which Organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in care will flourish.”

Scully and Donaldson, 1998.

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1 Introduction

The main purpose of the integration of health, social work and social care services in Scotland is to improve the wellbeing of people who use such services, in particular those whose needs are complex and who require services and supports from health and social care at the same time. The Integration Schemes drawn up for each of Tayside's three Integration Authorities are intended to achieve improved outcomes for the people of Tayside, in line with the National Health and Wellbeing Outcomes (attached at Appendix 1) that are prescribed by Scottish Ministers in Regulations under Section 5(1) of the Public Bodies (Joint Working)(Scotland) Act 2014.

The national health and wellbeing outcomes apply across all integrated health and social care services, ensuring that Health Boards, Local Authorities and Integration Authorities are clear about their shared priorities by bringing together responsibility and accountability for their delivery. The national health and wellbeing outcomes also provide the mechanism by which the Scottish Ministers will bring together the performance management mechanisms for health and social care. The national health and wellbeing outcomes, together with the integration planning and delivery principles, are grounded in a human rights based and social justice approach.

It is clearly recognised that the establishment and continuous review of the arrangements for clinical, care and professional governance for all services which are 'in scope' are essential to the delivery in Tayside of each Integration Authority's obligations and quality ambitions. The arrangements for clinical, care governance and professional governance described in this paper are designed to assure Tayside's three Integration Joint Boards (IJBs), NHS Tayside and the area's three Local Authorities of the quality and safety of service delivered by its staff, and the difference services are making to the lives and outcomes of the people of Tayside who need them.

There are a number of bodies responsible for clinical and care governance and professional governance in Tayside. This paper sets out the proposed framework for clinical, care and professional governance arrangements to be used by Tayside's three health and social care Integration Authorities in Angus, Dundee and Perth & Kinross. The framework proposed describes and shows schematically the relationship between all of the relevant bodies in Tayside and outlines the specific responsibilities they carry for governance.

The framework has been developed to ensure that there are explicit and effective lines of accountability from care settings to each authority's IJB, the NHS Tayside Board and the three local authority's Chief Executives and elected members. The proposed framework recognises that such accountability is essential to assure high standards of care and professionalism in the services provided by each Integration Authority and the Board of NHS Tayside with the aim of achieving the best possible outcomes for service users in line with the National Outcomes Framework.

This Governance Framework will evolve in the light of experience with joint working and the local requirements for governance and service development. Oversight of this process will be the remit of the Tayside Joint Professional Forum (R1 in Figure 2) in support of the strategic plans within each Integration Authority and the development needs identified through each of the three the Local Professional Fora (R2) and the Integrated Joint Boards for the Angus, Dundee and Perth & Kinross Partnerships.

Within this governance framework, accountability is viewed as a complex phenomenon with three core elements:

- Each individual's professional accountability for the quality of his or her own work, in line with the requirements of the relevant professional regulatory bodies
- The accountability of individual professionals to the requirements of the organisations in which they work
- The accountability of senior members of staff for the organisation's performance, and more widely for its provision of services to the people it serves

The Tayside Clinical, Care and Professional Governance Framework operates in the context of a developing legislative framework and alongside a wide range of policy drivers. Partner organisations across Angus, Dundee and Perth & Kinross will work to deliver services that are responsive, integrated and coordinated to meet the needs of individuals and communities in line with the strategic intentions expressed in law and policy. Improved outcomes and effective services for service users and their carers require alignment of culture, values and language.

In supporting organisational, service and staff development, the framework assumes acceptance of a range of underpinning principles. These include greater levels of anticipatory care and prevention; engagement of patients, service users and carers in the design and delivery of care; and greater co-production with third sector organisations, communities and support networks around individuals, families and communities. All managers and professionals involved in strategic planning, service development and individual care planning are required to consider and include the broad range of social support and community assets available in each community to help maximise the independence of people who need services and the supports provided to those who care for them.

This framework exists to improve performance across all the Governance domains outlined in Section 4 and the alignment of performance management systems across both Health and Local Authority services, including those that are not currently integrated.

2 Definition of Clinical and Care Governance

Clinical and care governance is the system by which Health Boards and local authorities are accountable for ensuring the safety and quality of health and social care services, and for creating appropriate conditions within which the highest standards of service can be promoted and sustained. The following definition of clinical and care governance underpins the clinical and care governance and professional governance framework for Tayside outlined in this paper.

2.1 Annex C of the Public Bodies (Joint Working) (Scotland) Act 2014 Clinical and Care Governance Framework sets out in some detail the working definition to be applied to Integrated Health and Social Care Services in Scotland. This working definition is as follows.

- a) Clinical and care governance is the process by which accountability for the quality of health and social care is monitored and assured. It should create a culture where delivery of the highest quality of care and support is understood to be the responsibility of everyone working in the organisation – built upon partnership and collaboration within teams and between health and social care professionals and managers.

- b) It is the way by which structures and processes assure Integration Joint Boards, Health Boards and Local Authorities that this is happening – whilst at the same time empowering clinical and care staff to contribute to the improvement of quality – making sure that there is a strong voice of the people and communities who use services, and their carers.
- c) Clinical and care governance should have a high profile, to ensure that quality of care is given the highest priority at every level within integrated services. Effective clinical and care governance will provide assurance to patients, service users, carers, clinical and care staff and managers, Directors alike that:
 - *Quality of care, effectiveness and efficiency drive decision-making about the planning, provision, organisation and management of services;*
 - *The planning and delivery of services take full account of the perspective of patients, service users and carers;*
 - *Unacceptable clinical and care practice will be detected and addressed.*
- d) Effective clinical and care governance is not the sum of all these activities; rather it is the means by which these activities are brought together into this structured framework and linked to the corporate agenda of Integration Authorities, NHS Boards and Local Authorities.
- e) A key purpose of clinical and care governance is to support staff in continuously improving the quality and safety of care. However, it will also ensure that wherever possible poor performance is identified and addressed. All health and social care professionals will remain accountable for their individual clinical and care decisions.
- f) Many clinical and care governance issues will relate to the organisation and management of services rather than to individual clinical decisions. All aspects of the work of Integration Authorities, Health Boards and Local Authorities should be driven by and designed to support efforts to deliver the best possible quality of health and social care. Clinical and care governance is principally concerned with those activities which directly affect the care, treatment and support people receive whether delivered by individuals or teams.

2.2 The Process of Clinical and Care Governance

The Chief Officers in each of Tayside's three Integration Authorities, the Chief Executive Officer (CEO) for NHS Tayside and the CEOs for each of the three Local Authorities will have in place, management structures that ensure accountability and responsibility for professional, clinical and care governance in each Integration Authority. Annex C of the Health and Social Care Integration Public Bodies (Joint Working) (Scotland) Act 2014 Clinical and Care Governance Framework sets out a series of five process steps to support clinical and care governance as follows

- a) Information on the safety and quality of care is received.
- b) Information is scrutinised to identify areas for action.
- c) Actions arising from scrutiny and review of information are documented.
- d) The impact of actions is monitored, measured and reported
- e) Information on impact is reported against agreed priorities.

These five steps form the basis of the proposed performance framework described in this paper for Tayside's three Integration Authorities and this information will be used to demonstrate achievement of the nine national Health and Well-being outcomes and the local outcomes expressed in each Local Authority's Single Outcome Agreement (SOA).

- 2.3** The principles contained in this framework are designed to integrate with the Strategic 2020 Vision and the patient safety agenda. While there is no similarly overarching articulation of these, the principles for Local Authority services align closely with those articulated by the Christie Commission, in the Social Care (Self Directed Support) (Scotland) Act 2013 and the Community Empowerment Bill. Core outcome measures will be agreed in line with the principles and proposed framework to ensure consistency of approach between Local Authorities, Tayside NHS Board and the IJBs for the three Tayside Partnerships. Performance will be assessed against an agreed, prioritised common data set for each of the governance domains as described at Paragraph 4 of this paper.

3 Professional Governance

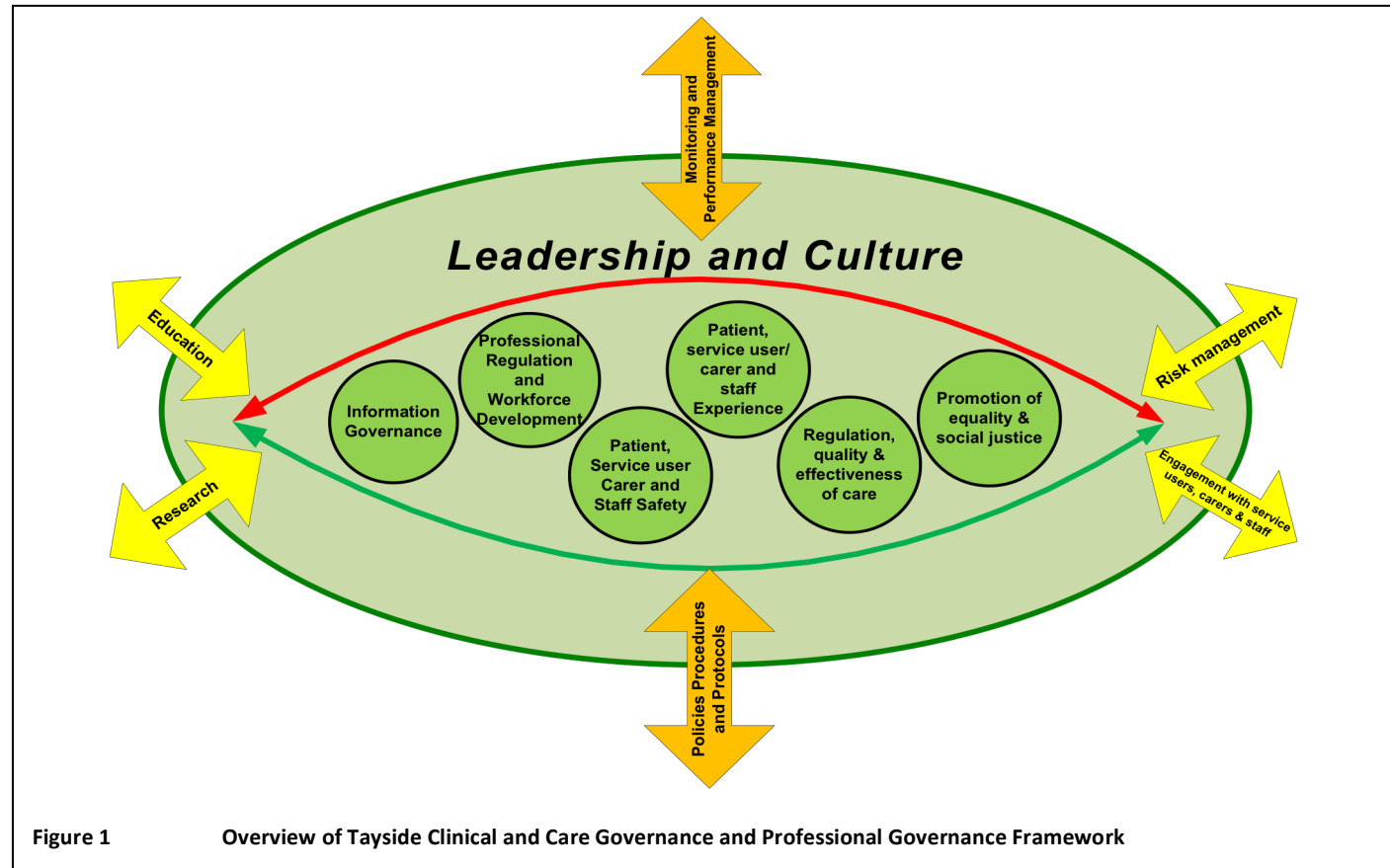
- 3.1** Professional governance is an accountability framework that empowers health and social care professionals at the front line to collaborate effectively in the delivery of integrated services. The framework for professional governance includes such core elements as codes of conduct, standards of practice, policies and procedures, resource utilisation and stewardship, evidence-based practice and research, use of technology, quality and performance improvement. The purpose of system-wide professional governance is to coordinate the activities of the health and social care workforce to achieve the health and well being outcomes for patients, service users and carers in integrated health and social care settings across Tayside.
- 3.2** The Professional Governance Framework provides assurance to the IJBs, Angus, Dundee, Perth & Kinross Councils and Tayside Health Board that effective processes for health and social care professional practice are in place and implemented to develop, support and monitor workforce compliance with agreed accountability and governance frameworks.

4 Performance Assurance Framework

Clinical and care governance in Tayside is currently monitored through the NHS Tayside and each Council's existing performance management systems. Professional governance is achieved through the agreed accountable professional officers, namely the Medical Director, the Director of Nursing and Midwifery, the Chief Social Work Officer, the Director of Pharmacy and the Director of AHPs.

The Chief Officer in each of Tayside's three Partnerships will have in place management structures that ensure accountability and responsibility for professional, clinical and care governance in each Integration Authority. Clinical and care governance and professional governance contribute to a higher level performance improvement framework that is well established as a self-evaluation framework within Tayside's three local authorities through the Performance Improvement Model (PIM). The PIM, which was developed by Scotland's Social Work inspection agency (SWIA, now the Care Inspectorate) for use with and by social work services across Scotland, recognises the important link between scrutiny and self-evaluation. The PIM provides a clear structure for self evaluation which focuses on performance across a number of key areas of activity, as detailed in Appendix 2.

The PIM, which is based on a three year cycle of scrutiny and self-evaluation, complements the principles of Best Value through a focus on getting the right results, having the right processes to deliver these and emphasising the role of leadership and high standards of corporate governance.



A self-assessment tool for clinical and care governance and professional governance is being developed for use by Tayside's Integration Authorities that will include measures to facilitate a cycle of continuous improvement across all the domains included in Figure 1, consistent with the PIM and the performance review framework in NHS Tayside

The following domains have been chosen to reflect the core elements of business in each Integration Authority in which it is important to demonstrate appropriate and effective controls to achieve improvement in outcomes for patients, service users and carers across Tayside

- Information Governance 4.1
- Professional Regulation and Workforce Development 4.2
- Patient/Service user/Carer and Staff Safety 4.3
- Patient/Service user/Carer and Staff Experience 4.4
- Quality and effectiveness of care 4.5
- Promotion of Equality and Social Justice 4.6

4.1 Information Governance

This domain reflects the duties related to the protection of information, information sharing, records management, Information Technology management, data reporting and documentation standards, whose purpose is as follows

- Promotes a culture of openness in the sharing of information across health and social care professionals and agencies both in the design and development of shared information systems, and in the delivery of coordinated and integrated care for service users and their carers
- Simplifies and streamlines communication through shared systems and mechanisms, such as the use of a single point of contact (SPOC)
- Ensures compliance with data protection requirements and the principles of informed consent
- Ensures transparent, open, accessible and robust performance reporting
- Provides a framework to assess documentation standards, including documentation audits, using a sampling methodology
- Provides a framework for development of multi-professional electronic patient and service user records that include Integrated Care & Support Plans
- Understands and minimises unnecessary variation by the development of a shared minimum data set, the intelligent use of data, measurement and improvement science
- Ensures performance reporting is used to enable continuous improvement through the development of standard reports and system capability to meet both standard and ad hoc reporting requirements.
- Develops innovative solutions to support improved service delivery and service user experience, and make best use of resources, for example through the development of an integrated patient/service user tracking system to monitor individual progress along pathways of care

4.2 Professional Regulation and Workforce Development

This domain reflects the need for our organisations to have assurance that we have a workforce fit for purpose and sustainable into the future. This is particularly important as we move towards new models of care where professionals will need to retain their accountability through professional leads in health and social care. There are also important provisions in existence that protect professional standards in education and research that would be essential for success in the future. This domain:

- Ensures organisational development and professional practice is evidence based and continuously improved, supported by a culture of learning and high performance, in line with regulatory and continuous professional development requirements and standards
- Ensures compliance with professional standards, codes of practice and performance requirements and alignment of activities with organisational objectives and service user outcomes
- Encourages and enables staff to work in multi-disciplinary and multi-professional teams and to use reflective practice to support the delivery of improved outcomes
- Promotes the development of staff in a range of generic skills, for example skills to take on a key worker role
- Promotes the development of specialist skills to deliver services in new ways, or in different settings, across professional groups and agencies
- Promotes learning from good practice, adverse incidents, complaints and risks.
- Creates an environment that supports the contribution of staff and their safety as well as supporting and enabling innovation.
- Ensures our staff act with honesty and integrity and comply with the duty of candour.
- Recognises the value of joint education as a vehicle for more promoting and supporting integrated working

4.3 Patient/Service User/Carer and Staff Safety

This domain reflects our duties to create a safe working environment for staff along with our duty of care to patients, service users and carers.

- Ensures services are as safe and effective as possible for the people who use services and the staff who provide them
- Ensures planned, strategic approaches to innovation and development through an organisational learning and improvement culture.
- Ensures accountability, management and mitigation of risk through joint risk registers and aligned strategic, operational and service level risk assessment and management processes.
- Anticipates and prevents harm through active use of learning from near misses and demonstrates robust systems for risk assessment and management; for example, in addressing medicines management issues, use of patient, service user and carer safety plans.
- Ensures compliance with Health and Safety requirements, Adult and Child protection arrangements, Violence Against Women and other Protecting People arrangements, and makes provision for Adults with Incapacity requirements
- Requires reporting of incidents, complaints, compliments and other forms of user feedback, and promotes learning from these

- Develops a culture of openness, inter-agency coordination, communication and accountability, where learning from critical incidents and successes takes place informed by Significant Case Reviews, local adverse event reviews, Significant Adverse Event reviews, and is incorporated into training and education for staff

4.4 Patient/Service User/Carer and Staff Experience

This domain reflects the importance of involving service users and carers in the design and delivery of health and social care supports and services. It also reflects the importance of staff at the front line having the opportunity to shape services in line with specialist and best practice knowledge alongside their awareness of the needs of specific care groups and local communities. This domain:

- Provides a framework for staff and patient/service user/carers feedback, culture surveys and reported experience of service delivery
- Ensures planning, delivery and monitoring of services are informed by service user experience and that feedback is systematically sought and used to improve service quality, and user experience and outcomes
- Promotes patient, service user and carer involvement in identifying their individual outcomes; shaping individual care plans, services and organisational practices to achieve personalisation and person-centred approaches to care, in line with the requirements set out in the Social Care (Self-directed Support) (Scotland) Act 2013 .
- Promotes and develops mechanisms for the resolution of differences between professional opinion and user choice
- Promotes staff, service user and carer involvement in the planning and development of services
- Promotes the development of joint approaches to hearing and acting upon concerns before they become complaints – for example, through the delegation of authority to resolve issues as close as possible to the front line of services with the aim of improving the responsiveness of services and reducing the need for recourse to formal complaints processes
- Promotes the local development of joint approaches to managing complaints and a consistency of approach across Tayside

4.5 Quality and Effectiveness of Care

This domain reflects the drive towards evidence based practice to improve outcomes and achieve Best Value in the design, organisation and delivery of services. Good governance in this domain should deliver on the Christie Commission requirements and the 20:20 vision of person centred, high quality services for the people of Tayside. This domain:

- Establishes a system of governance that is designed to produce evidence of continuously improving outcomes for people who use, or may need services
- Promotes the development of integrated, locally developed pathways of care, within broad assurance principles for the whole of Tayside
- Delivers high quality, evidence-based care and prevention, informed by the development and monitoring of cross organisational measures and service specific outcomes

- Demonstrates willingness to learn through further integration of formal review processes, such as Morbidity & Mortality reviews, Significant Case Reviews and external scrutiny reviews with bodies such as the Care Inspectorate and Health Improvement Scotland.
- Ensures active service evaluation through individual, team-based, service or partnership level, case and practice based audit programmes self-assessment and performance review processes
- Recognises the importance of engaging patients, service users and carers in the design and delivery of care to maximise effectiveness
- Reports to Board through Clinical Governance Committee and equivalent for Council Services

4.6 Promotion of Equality and Social Justice

The national health and wellbeing outcomes, together with the integration planning and delivery principles, are grounded in a human rights based and social justice approach. A human rights based approach is described as:

“.. a way of empowering people to know and claim their rights. It increases the ability and accountability of individuals, organisations and the relevant professionals for respecting, protecting and fulfilling rights. This means giving people greater opportunities to participate in shaping the decisions that impact on their human rights.

National Health and Wellbeing Outcomes Framework, Scottish Government

This domain reflects the responsibilities of Local Authorities and Health Boards under Human Rights Legislation, and within the National Health and Well Being Outcomes Framework, to have clear strategies in place to address inequalities that have an adverse effect on wellbeing, to promote social inclusion, equity of access to services and improved outcomes for people across Tayside. There are three linked national social policy frameworks: Achieving Our Potential, Equally Well and the Early Years Framework. These policy frameworks are complementary and are underpinned by principles of fairness and social justice. Together they reflect the joint aims of tackling poverty, addressing health inequalities and giving children the best start in life.

In Tayside there is a commitment on the part of all three Authorities articulated through each Authority’s SOA and other policy documents, to address social inequalities and the impact that these have on other aspects of life in our communities, including health, employability and financial inclusion. NHS Tayside's Health Equity Strategy shares the same level of ambition by aiming to reduce health inequalities in Tayside within a generation. This domain:

- Demonstrates activities that support the improvement cycle to reduce inequalities in the delivery of services
- Ensures that impact assessments are undertaken to identify and minimise the impact of service developments on inequalities

In line with the Scottish Government’s commitment to the Scottish National Action Plan (SNAP) on Human Rights, this domain will adhere to the PANEL principles and the FAIR approach, advocated in the National Health and Wellbeing Outcomes Framework, to support the application of a human rights based approach in practice in Tayside.

PANEL Principles		FAIR Approach	
Participation	The right to participate in decisions	Facts	Individual experiences
Accountability	Effective monitoring of Human Rights standards	Analysis of rights at stake	What are the human rights or issues at stake?
Non discrimination and equality	All forms of discrimination are prohibited, prioritisation of those in greatest need	Identification of shared responsibilities	What changes are necessary, who is responsible to help?
Empowerment	People understand and are able to claim their rights	Review actions	Does review involve the individual affected?
Legality	Human Rights as legally enforceable entitlements		

5 Performance Management Framework

The national health and well-being outcomes provide a strategic framework for the planning and delivery of health and social care services. This suite of outcomes, together, focus on improving the experiences and quality of services for people using those services, carers and their families. These outcomes focus on improving how services are provided, as well as the difference that integrated health and social care services should make for the people who receive them.

Integration Authorities are required to publish an annual performance report, and each of Tayside’s three IJBs will provide performance reports in accordance with the content prescribed in regulations, as well as providing additional performance information that reflects local priorities. The IJBs will adopt the performance measurement framework developed by the Scottish Government and will use this to inform local practice development and evidence improvement.

For each of the domains described above, an agreed number of outcome performance measures will be applied. These measures will align with those specified within the National Health and Well-being Outcomes Framework, as well as the PIM and NHS Tayside’s performance improvement framework, and will be developed jointly over time to reflect the needs of, and outcomes from, services for the population of Tayside. This will be achieved through self assessment and agreed performance review processes.

6 Accountability for Clinical, Care and Professional Governance

NHS Tayside Board and the three Local Authorities have existing mechanisms to demonstrate accountability to the Scottish Government and the public. Joint boards will integrate new and existing methods of professional performance management and governance within each of the three

Integration Authorities. These will include arrangements for the protection of people of all ages, as well as strategic planning and community planning across Tayside.

6.1 Accountabilities for Clinical, Care and Professional Governance

Chief Executives

The Chief Executive officers of the three Councils and Tayside NHS Board hold ultimate accountability for the delivery of clinical and care governance.

Chief Officers (CO)

The Chief Officer is the Accountable Officer for Health and Social Care Integration to the Joint Board. Each Integration Authority's CO will report to their respective IJB for strategic planning and to both their Council's Chief Executive, as well as the Chief Executive of NHS Tayside for the operational delivery of health and social care services. Joint performance review meetings, for ensuring improvement and operational delivery, involving both Chief Executives and the Chief Officer will take place on a regular basis and at minimum quarterly intervals. The CO will be a substantive member of the senior management teams of both their respective Councils and of NHS Tayside. A key element of the CO role will be to develop close working relationships with elected members of their respective Councils and Non Executive and Executive NHS Tayside Board members. In addition the CO will establish and maintain effective working relationships with a range of key stakeholders across NHS Tayside, the Council, the third and independent sectors, service users and carers, Scottish Government, trades unions and relevant professional organisations.

The Chief Social Work Officer (CSWO)

The CSWO, through delegated authority holds professional and operational accountability for delivery of safe and innovative social work and social care services within each of Tayside's three local authority areas. The CSWO will provide professional advice to the Council, and the IJB, in respect of the delivery of social work and social care services by Council staff and commissioned care providers in each of Tayside's three Integration Authorities

Professional Leads

Each Integration CO will have an appropriate senior team of 'direct reports' in order to fulfil their accountability for the Strategic Commissioning Plan that has been developed for each of Tayside's three Integration Authorities, and for the safe, efficient and effective delivery of services to the population of the local area served by each IJB.

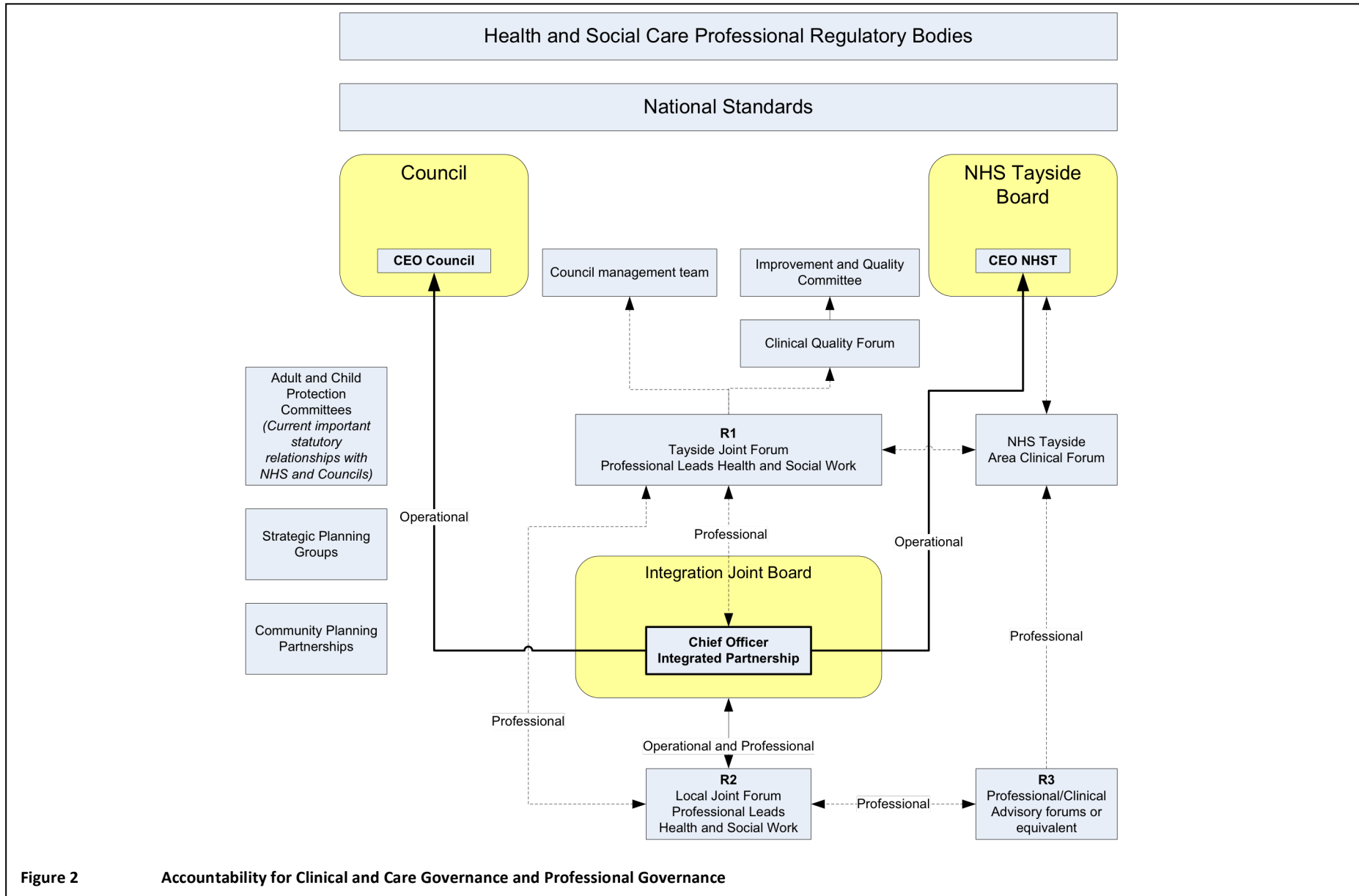


Figure 2 Accountability for Clinical and Care Governance and Professional Governance

7 Membership of the Tayside Clinical and Care Governance and Professional Governance Forum (R1)

Membership:	Roles and Responsibilities:
Chief Social Work Officer Angus Council Dundee Council Perth & Kinross Council	<ul style="list-style-type: none"> The overall objective of the CSWO is to ensure the provision of effective, professional advice to local authorities, elected members and officers in the authorities' provision of social work services. The post should assist authorities in understanding the complexities of social work service delivery, including in relation to particular issues such as corporate parenting, child protection, adult protection and the management of high risk offenders and the key role social work plays in contributing to the achievement of national and local outcomes. The CSWO also has a role to play in overall performance improvement and the identification and management of corporate risk insofar as they relate to social work services.
Medical Director NHS Tayside	<ul style="list-style-type: none"> The role and responsibility for the NHS Tayside Medical Director is to lead the formation and implementation of clinical strategy, taking lead on clinical standards, providing clinical advice to the board, providing professional leadership, and being a bridge between medical staff and the board. The Medical Director provides translation, assessing the mood and, crucially, creating alignment between the organisation and doctors. Outward-facing work with the PCT, strategic health authority and other external organisations. Other key responsibilities include; clinical governance, acting as the Responsible Officer for revalidation, quality and safety, education, medical staffing planning, disciplinary issues concerning doctors.
Nursing & Midwifery Director NHS Tayside	<ul style="list-style-type: none"> To provide leadership, assurance and professional accountability of all nursing & midwifery staff within the Health Board. Reporting and providing professional leadership, escalating and managing strategic portfolios. In addition, the incumbent will plan, organise and implement policies and procedures in cooperation with other departments and executives, and in accordance with standards of good Nursing and Midwifery practice.
Director of Public Health NHS Tayside	<ul style="list-style-type: none"> The post holder is responsible for leading the delivery of the public health functions within NHS Tayside, Angus, Dundee and Perth and Kinross Councils.
Pharmacy Director NHS Tayside	<ul style="list-style-type: none"> To provide strong and effective leadership for pharmacy through the period of radical change for the service both within NHS Tayside and nationally. To be the responsible pharmaceutical officer to Tayside NHS Board & ensure senior pharmacy representation in all parts of the organisation To encourage and facilitate new ways of delivering pharmaceutical care and to create and explore opportunities to develop roles, behaviours and ways of working to achieve consistent high standards of service for patients in all parts of the system reaching beyond NHST boundaries. To develop the focus on pharmaceutical care in the community setting and lead the cultural changes required. To assure the partnerships and the board of the overall strategic direction of the pharmacy services in Tayside
Director of Allied Health Professions (AHP) NHS Tayside	<ul style="list-style-type: none"> To provide strong and effective leadership for Allied Health Professions through the period of radical change for the service both within NHS Tayside and nationally. To be the responsible officer to Tayside NHS Board and ensure senior AHP representation in all parts of the organisation To encourage and facilitate new ways of delivering care and to create and explore opportunities to develop roles, behaviours and ways of working to achieve consistent high standards of service for patients in all parts of the system reaching beyond NHST boundaries. To develop the focus on Integrated AHP care in the community setting and lead the cultural changes required. To assure the partnerships and the board of the overall strategic direction of the AHP services in Tayside

Membership:	Roles and Responsibilities:
Associate Medical Director Primary Care & Independent Contractors NHS Tayside	<ul style="list-style-type: none"> The Associate Medical Director (AMD) supports strategic objectives through oversight of high quality primary care services that are safe and efficient. Specifically the AMD will be accountable for independent contractors within Tayside and their role in provision of services. The AMD is responsible for the safety and capability of the independent contractor workforce, providing assurance to the Medical Director.
Chair Area Clinical Forum NHS Tayside	<ul style="list-style-type: none"> The function of the Clinical Area Forum Chair is to review the business of Professional Advisory Committees to ensure a co-ordinated approach to clinical matters across professions and the organisation. Other duties include providing a clinical perspective on National Policy, NHS Board plans and the strategy, engaging clinicians in service design and improvement, spreading best practice and encouraging multi-professional working

7.1 Terms of Reference

The Tayside Clinical and Care Governance and Professional Governance Forum is a professional reference group, bringing together senior professional leaders across Tayside. This group, chaired by one of its members, will oversee the delivery of integrated care and support along with change and innovation to ensure the delivery of safe and effective person-centred care within Tayside. This group will ensure that the responsibilities for Clinical and Care Governance and Professional Governance, which remain with NHS Tayside and the Council relate to the activity of the Board.

The group will provide oversight and advice and guidance to the Strategic Planning Groups, to each Integration Authority's CO and to the IJBs in respect of clinical and care and professional governance for the delivery of health and social care services across the localities identified in their strategic plans.

7.2 Roles and Responsibilities:

NHS Tayside Executive Medical, Nursing, Pharmacy and AHP Directors share accountability for Care Assurance, Clinical and Professional Governance across NHS Tayside services as a statutory duty delegated by the NHS Tayside Chief Executive. As part of their statutory duties, these officers or their designated deputies are required to attend the Joint Board to provide professional advice and assurance in respect of Clinical and Care Governance and Professional Governance in Tayside.

The Chief Social Work Officers, through delegated authority hold professional and operational accountability for the delivery of safe and innovative social work and social care services provided by the Council, as well as by external organisations from whom the Council has procured and commissioned services. An annual report on these matters will continue to be provided to the relevant committee of the Council and the Scottish Government. The Chief Social Work Officer will attend the Joint Board to provide professional advice and assurance in respect of Social Work staff and commissioned care providers.

8 Membership of the Local Clinical and Care Governance and Professional Governance Forum (R2)

This group will be made up of a range of professionals and managers who are responsible for implementation and who hold accountability to the membership of R1 for outcomes. This will include a core membership to reflect the professions represented in R1

8.1 Terms of Reference: To be agreed locally

9 Assurance Framework for Integrated Health and Social Care Partnerships in Tayside

Each Integration Authority is a board of governance, accountable for strategic planning and ensuring the operational delivery of those integrated services that are delegated to the Authority. The Health Board and Local Authority are ultimately accountable for the operational delivery of integrated services, with the Chief Executive Officer accountable for the delivery of those delegated functions and accountable for improvement responses to external inspections.

Clinical, care and professional governance arrangements for integrated services must fully align with the existing arrangements for governance within Tayside's Health Board and Local Authorities. These four public bodies must develop a consistent approach to assurance for quality and safety of care across all services, whether integrated or not. The integration scheme for each of Tayside's three integration authorities sets out the means by which each IJB will assure for the quality and safety of care in each integration authority. This framework underpins the commitments that are made in each of the three integration schemes.

Each of these domains will be underpinned by mechanisms to measure, quality, clinical and service effectiveness and sustainability. They will be compliant with statutory, legal and policy obligations strongly underpinned by human rights values and social justice. Service delivery will be evidenced based, underpinned by robust mechanisms to integrate professional education, research and development.

10 References

- *Annex C of the Public Bodies (Joint Working) (Scotland) Act 2014 Clinical and Care Governance Framework*
- *Changing Lives: Practice Governance Framework: Responsibility and Accountability in Social Work Practice (2011).*
- [Clinical Governance NHS MEL \(2000\) 29](#)
- *Codes of Practice for Social Service Workers and Employers (2014) Scottish Social Services Council <http://www.sssc.uk.com/about-the-sssc/multimedia-library/publications/60-protecting-the-public/61-codes-of-practice/1020-sssc-codes-of-practice-for-social-service-workers-and-employers>*
- *Good Medical Practice: General Medical Council (2013).*
- *Governance for Quality Social Care in Scotland – An Agreement. (2013) Social Work Scotland – available via the Social Work Scotland website <http://www.socialworkscotland.org/>*
- *Joint Statement from the Chief Executives of Statutory Regulators of Health Care Professionals: Openness and Honesty-the Professional Duty of Candour (2014).*
- *National Health and Well being Outcomes <http://www.scotland.gov.uk/Topics/Health/Policy/Adult-Health-SocialCare-Integration/Outcomes>*
- *Northern Ireland Regional Supervision Policy for Allied Health Professions <http://www.dhsspsni.gov.uk/ahp-rs-framework>*
- *Practice Governance Framework: Responsibility and Accountability in Social Work Practice (2011) <http://www.scotland.gov.uk/Resource/Doc/347682/0115812.pdf>*
- *Principles of Nursing Practice: Royal College of Nursing (2014).*
- *Professional Standards for Allied Health Professions (2014) <http://www.hcpc-uk.org.uk/aboutregistration/standards>*
- *Professional Standards: The Royal Pharmaceutical Society (2011).*
- *Standards of Conduct, Ethics and Performance: General Pharmaceutical Council (2010)*
- *The Role of Registered Social Worker in Statutory Interventions: Guidance for local authorities (2010) Scottish Government <http://www.scotland.gov.uk/Resource/Doc/304823/0095648.pdf>*
- *The Role of the Chief Social Work Officer (2010) Scottish Government <http://www.scotland.gov.uk/Publications/2010/01/27154047/0>*
- *The Scottish Government's 2020 Vision <http://www.scotland.gov.uk/Topics/Health/Policy/2020-Vision>*
- *University of California Davis Medical Centre Nursing Professional Governance Model <http://www.ucdmc.ucdavis.edu/nurse/practicemodel/governance.html>*

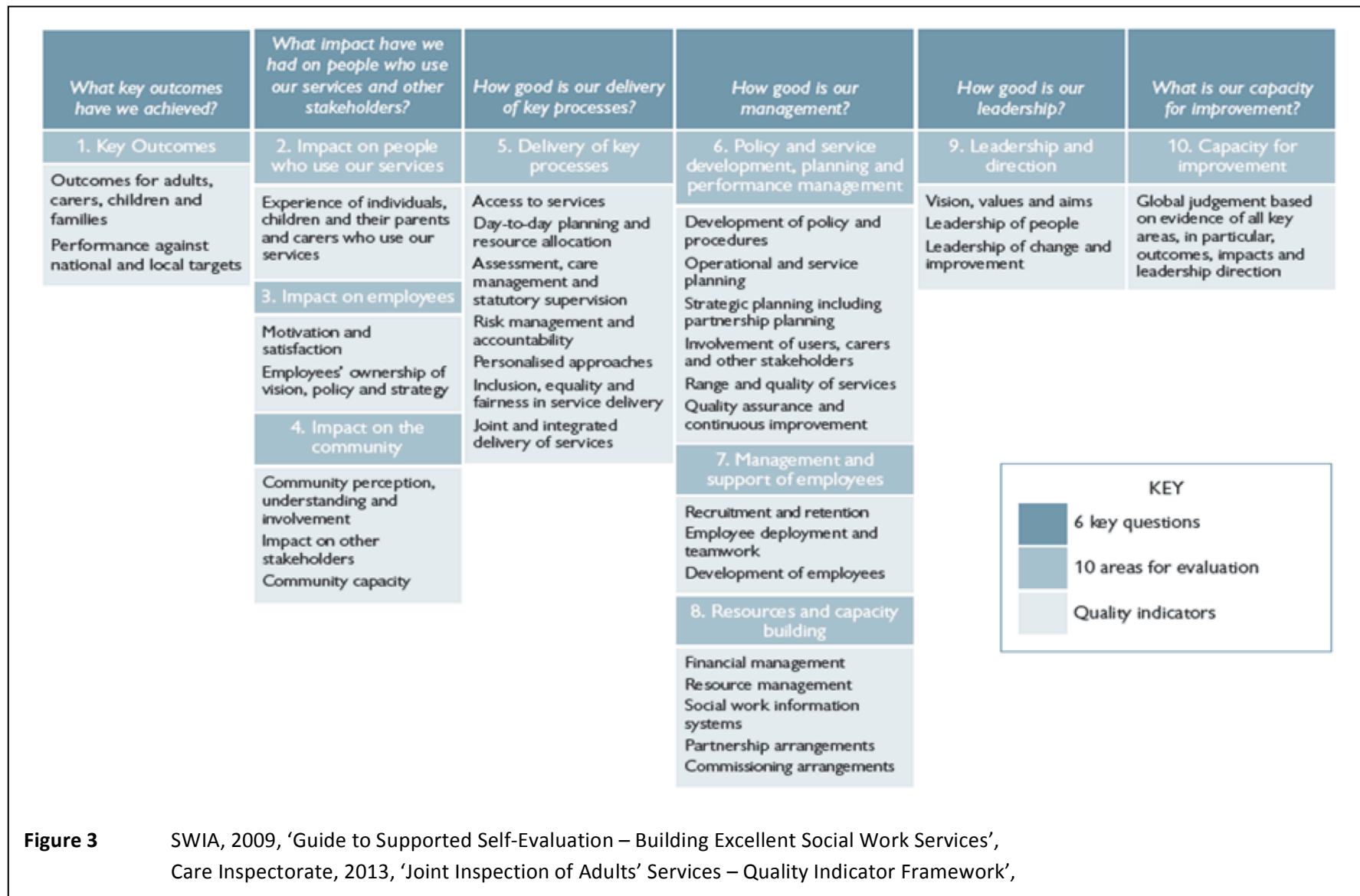
Appendix 1 Health and Well-being Outcomes under Health and Social Care Integration

The National Health and Wellbeing Outcomes are high-level statements of what health and social care partners are attempting to achieve through integration and ultimately through the pursuit of quality improvement across health and social care.

By working with individuals and local communities, Integration Authorities will support people to achieve the following outcomes:

Outcome 1:	People are able to look after and improve their own health and wellbeing and live in good health for longer.
Outcome 2:	People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.
Outcome 3.	People who use health and social care services have positive experiences of those services, and have their dignity respected.
Outcome 4.	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
Outcome 5.	Health and social care services contribute to reducing health inequalities.
Outcome 6.	People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.
Outcome 7.	People using health and social care services are safe from harm.
Outcome 8.	People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.
Outcome 9.	Resources are used effectively and efficiently in the provision of health and social care services.

Appendix 2



Appendix 3

Framework Development Group

Robert Packham	Director of AHPs	NHS Tayside	Chair
Frances Rooney	Director of Pharmacy	NHS Tayside	
Heather Gunn	Service Manager Social Work Department	Dundee City Council	
Tim Armstrong	Chief Social Work Officer	Angus Council	
John Gilruth	Head of Community Care	Perth and Kinross Council	
Cesar Rodriguez	Consultant in Psychiatry of old Age	NHS Tayside	
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