Health and Social Care Integration

Supporting people to live well and independently at home or in a homely setting in their community for as long as possible

There’s no ward like home

Email: irc@scotland.gsi.gov.uk

View the Integration and Reshaping Care Blog at: http://careforolderpeoplescotgov.wordpress.com/

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New legislation, in the form of the Public Bodies (Joint Working) (Scotland) Act 2014, came into force on 1 April 2014. The Act requires Health Boards and Local Authorities to integrate their health and social care services.

Local teams and professionals across health and social care will work together to deliver quality, sustainable care and services resulting in improved outcomes for the people and their families who use these services.

Those individuals with long-term conditions and disabilities, many of whom are older people, will get the joined-up and seamless support and care that they need to live safely and independently in their own homes for as long as possible.

Projected percentage change in Scotland’s population by age group between 2010 – 2015
Principles of Integration

Health and social care services will be planned for and provided so that they:

- Are integrated from the point of view of service-users
- Take account of the particular needs of different service-users and the areas and local needs in which the service is being provided
- Take account of the particular characteristics and circumstances of different service-users and of the participation by service-users in the community in which they live
- Respect the rights and dignity of service-users
- Improve the quality of the services provided and protect and improve the safety of service-users
- Are planned and led locally in a way which is engaged with the community
- Best anticipate needs and prevent them arising
- Make the best use of the available facilities, people and other resources

Models of Integration

All Health Boards and Local Authorities must integrate their services for all adults in their area. They can choose locally to integrate children’s services as well. They also have the choice of integrating in two ways and will make this decision based on local need.

The models:

- The Health Board and Local Authority can delegate the responsibility for planning and resourcing service provision for health and social care services to an Integration Joint Board.
- The Health Board or the Local Authority takes the lead responsibility for planning, resourcing and delivering integrated health and social care services.

A number of NHS Boards and Local Authorities already have shadow integration arrangements in place.
Joint Strategic Commissioning of Services

Each Integrated Authority will put in place a joint strategic commissioning plan for the services and budgets under its control. This plan will be widely consulted upon with non-statutory partners, patient and service-user representatives.

Joint strategic plans will operate across the whole partnership area, and will be informed by localities, which will be made up of smaller communities within the partnership.

Planning for Local Services and Local Priorities

Each Integrated Authority will establish locality arrangements for its area. There must be at least two localities in every partnership. Localities will provide an opportunity for local professionals, staff, the third and independent sectors, carers and service-users to lead the planning and delivery of services for their communities, based on their experience and knowledge of local needs.

Locality planning groups will provide important input to partnership strategic planning, ensuring that the priorities of local professionals and people are taken into account when integrated health and social care services are planned.

Key Deadlines

| Consultation on Regulations and development of Guidance | May – Aug 2014 |
| Regulations and Guidance complete | Nov 2014 – Feb 2015 |
| Integration goes live in local areas | April 2015 |
| All local integrated arrangements to be in place | April 2016 |