Joint Working with Glasgow City Council  
– Community and Health Care Partnerships

Recommendation:

The NHS Board is asked to agree:

1. to the establishment of the Joint Partnership Board and that its NHS membership includes the five Vice Chairs of the CHCPs, together with the Vice Chair of the NHS Board, who will act as Vice Chair of the Joint Partnership Board;

2. that the Joint Partnership Board should include within its remit the consideration of budgets for identified service and care groups and oversee their devolution to CHCPs from 1 April 2010;

3. that a revised Scheme of Establishment be prepared and submitted to NHS Board Members for approval.

BACKGROUND

1. The June 2009 NHS Board Meeting had received a verbal update from the Chair when he advised that discussions had continued to be held with the Glasgow City Council Leader and Chief Executive about the refinement of the working arrangements for Glasgow’s Community and Health Care Partnerships (CHCPs). He reported that progress had been made and that the matter would be considered internally by Glasgow City Council and also the NHS Board’s Performance Review Group at its meeting to be held on 7 July 2009. The priority at that time was to receive the necessary financial information about the totality of budgets for services and care groups being devolved and aligned to CHCPs from the Council by 1 April 2010 and, thereafter, move to the creation of the proposed Joint Partnership Board.

2. The paper submitted to the Performance Review Group on 7 July set out the objectives which the Board had established in October 2008: these had been intended to enable the NHS Board to address a number of issues with the development of CHCPs and included the limited levels of delegation and resource devolution, intended progress in integrating NHS and Social Work services and the potential issues with the governance arrangements.

3. There had been a further series of exchanges between the Chief Executive of the NHS Board and Chief Executive of the Council in order to assess whether a positive way forward could be achieved which reflected the Board’s continuing commitment to achieve the model of CHCPs originally agreed.

4. The Performance Review Group had acknowledged that the Leader of the Council remained fully supportive of CHCPs with a fully devolved responsibility but there continued to be concerns about concluding the financial issues which had led to concerns about proceeding to the establishment of the Joint Partnership Board. Members, at that stage, had affirmed their continuing support for the direction of travel and, in particular, to the introduction of the Joint Partnership Board which would enable Non-Executives and Councillors to work closely together.
5. The Performance Review Group required reassurance of the Council’s commitment to devolve the totality of the budgets for the services and care groups which would provide the confidence to proceed to the establishment of the Joint Partnership Board. The Chair and officers were to continue to seek the financial information required to give confidence in the Council’s commitment to full devolution and if that position could be reached and a revised Scheme of Establishment presented, the Joint Partnership Board could then be established without further delay.

6. The Chief Executives have continued to meet in order to achieve the level of reassurance required. At the NHS Board Seminar on 4 August 2009 it was made clear that the NHS Board Members remained very positive and committed to the integrated model of CHCPs and were encouraged by the Deputy Council Leader’s comments that the Council remained committed to the CHCP model and had taken its own decision about the establishment of how to reach devolved arrangements for budgets from 1 April 2010.

7. The Chief Executive met with the Council’s Chief Executive and reached agreement on the substantive devolution of the budgets of the relevant service and care groups, together with the early establishment of the Joint Partnership Board in order to, amongst other things, oversee the devolution of further identified care group budgets. The Council’s position has on the face of it given greater discretion of devolution to the Joint Partnership Board, while seeking to affirm that their aim remains to achieve devolution of budgets by 1 April 2010. The Chief Executive and Chair acknowledged that in accepting this position, this was not fully consistent with the NHS Board’s intentions: however, recognised that a further degree of negotiation was required in order to maintain NHS Board Members’ desires for the continuation of the integrated CHCPs within Glasgow.

8. George Black, Chief Executive, Glasgow City Council has been invited to attend the NHS Board meeting on 18 August 2009 for this item.

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