



To:
IJB Chief Officers
Chief Executives of local authorities
Chief Executives of territorial NHS boards
Paul Gray, Director General, Health and Social Care, Scottish Government
Geoff Huggins, Director of Health and Social Care Integration, Scottish Government
lona Colvin, Chief Social Work Advisor to the Scottish Government
Fiona Lees, SOLACE
Sally Louden, Convention of Scottish Local Authorities

15th June 2017

Dear Colleagues

Joint inspections of integrated health and social care

We are writing to update you on arrangements for future joint inspections of integrated health and social care. Since 2013/14, we have completed 16 joint inspections under section 115 of the Public Services Reform (Scotland) Act 2010. These have been broadly drawn and focused on a set of quality indicators in relation to the provision of services for older people.

On 1 April 2017, new statutory responsibilities for the Care Inspectorate and Healthcare Improvement Scotland commenced. These provide us with the joint responsibility to inspect, and support improvement in, the strategic planning and commissioning undertaken by integration authorities. In anticipation of these new responsibilities, we have reviewed the inspection methodology and made some important alterations. The findings and conclusions of this review and the revised approach have been agreed by the Boards of both organisations.

Our new approach takes into account, and applies learning from, previous joint inspections, consistent with our shared commitment to continuous improvement. The Public Bodies (Joint Working) (Scotland) Act 2014 is designed to deliver transformational structural change in service provision. We recognise that integration arrangements remain in their early stages and we are committed to a model of scrutiny which is proportionate, provides public assurance, and is directed at identifying and supporting any improvements that may be needed.

Future scrutiny arrangements focused on integration

To this end, we will inspect three partnerships during 2017/18 and are writing separately to those partnerships with further details and timescales. It is our intention to continue inspections into 2018/19. During 2017/18, these inspections will focus on three core areas:

improvements in the partnership's performance in both health and social care





- · operational and strategic planning arrangements, and commissioning arrangements
- the vision, values and culture across the partnership, and the leadership of strategy and direction.

Specifically, we will inspect against the quality indicators in this table:

Key scrutiny question	What key outcomes have we achieved?	How good is our management of whole systems in the partnership?	How good is our leadership?
Quality theme	1. Key performance outcomes	6. Policy development and plans to support improvement in service	9. Leadership and direction that promotes partnership
Quality indicator	1.1. Improvements in partnership performance in both healthcare and social care	6.1. Operational and strategic planning arrangements. 6.5. Commissioning	9.1. Vision, values and culture across the partnership 9.2. Leadership of
		arrangements.	strategy and direction

The inspection report will contain graded evaluations for improvements in the partnership's performance and for operational and strategic planning and commissioning. We will provide evaluative comment in respect of the partnership's vision, values, culture and leadership of strategy and direction.

Further details

In the coming weeks, we will publish quality indicators and illustrations which we hope will be helpful in understanding our intended approach further, in addition to a core documentation list which will set out the main areas of scrutiny for each quality indicator and the types of evidence partnerships may wish to provide. It is important to note, however, that we will refine and develop these further as the new model becomes established. Prior to each inspection, we write to the relevant chief officers to give notice of the inspection and set out in further detail the approach to be taken.

We are committed to ensuring that we minimise, as far as possible, the demands on the partnership whilst supporting rigorous, fair and objective assessment of performance. We will continue to use a scrutiny approach based around evidence-based self-evaluation, but are mindful that partnerships are still developing their joint approaches to self-evaluation and we are committed to being proportionate in the quantity and length of information provided. Because these inspections are more focused, we anticipate that the footprint will be smaller and shorter, with a faster period between an inspection and the publication of a report.





Other activity

In addition to these joint inspections, the Care Inspectorate will continue to inspect the quality of provision in regulated care services across Scotland, across both commissioned services and services that are not commissioned. In addition, during 2017/18 it will undertake thematic reviews of adult support and protection and self-directed support in a number of partnerships. Healthcare Improvement Scotland will continue to inspect independent health services across Scotland, and implement the Quality of Care approach in respect of NHS provision. Using the Quality of Care approach Healthcare Improvement Scotland will develop a parallel review focusing on palliative and end of life care, anticipatory care planning and if patient pathways exacerbate any health inequalities. Both of our organisations are deeply committed to supporting improvement at a strategic and local level, and many partnerships are actively engaged in such work, including work that is jointly planned and delivered.

We hope this information is of assistance to you and we look forward to working in partnership to further improvements in the quality of health and social care being delivered through integrated arrangements. Please do not hesitate to contact us if you have further queries.

Yours sincerely

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Healthcare Improvement Scotland

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