

Formation of Joint Improvement Partnership Board – Discussion Paper

Report to: Strategy and Performance Committee

Date: 5 March 2013

Report by: Annette Bruton, Chief Executive

Report No: SP-07-2013

Agenda Item: 10

PURPOSE OF REPORT

To bring to the attention of the Strategy and Performance Committee the announcement by Scottish Government of a Joint Improvement Partnership Board and to discuss the implications for the Care Inspectorate.

RECOMMENDATIONS

That the Strategy and Performance Committee consider this matter and instruct action to ensure that the Care Inspectorate maximises our contribution to the improvement agenda.

Version: 3.0 Status: Final Date: 14/03/2013

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Version Control and Consultation Recording Form

Version	Consultation		Manager	Brie Cha	ef inges	Descrip	tion	of	Date
	Executive tea	m	Chief Executive						14/02/13
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1.0 BACKGROUND

On 1 February 2013 the Scottish Government and COSLA issued a joint communication announcing the formation of a Joint Improvement Partnership Board. The letter is attached at Appendix 1. The stated purpose of the Board is to strengthen the position of the Joint Improvement Team (JIT), as the lead improvement partner in health, housing and care reform, to work with National Partners to accelerate the pace of transformational change and to support and challenge improvement in the delivery of integrated health and care.

It is proposed that the Joint Improvement Partnership Board and the JIT will work in partnership with other improvement organisations and Boards in order to ensure best value from the collective national improvement capacity and resources to support progress on the full range of strategic improvement priorities for health and social care. As one of those agencies with a responsibility to support the improvement of care, this new initiative will be of direct interest to the Care Inspectorate.

A Memorandum of Understanding (MoU) to support the work of the Board and JIT has been agreed between the Scottish Government, NHS Scotland, COSLA and the third sector. The MoU is attached at appendix 2. Section 2.8 makes reference to the JIT working with other partners and notes that this will include 'Collaborating with other improvement organisations and scrutiny partners to effectively target respective resources and expertise'.

2.0 CONSIDERATIONS FOR THE OPERATION OF THE CARE INSPECTORATE

2.1 The Care Inspectorate role in improvement

The Corporate Plan for the Care Inspectorate sets out four purposes for the organisation which include:

- Acting as a catalyst for change and improvement.
- Supporting improvement and signposting good practice.

It is likely, therefore, that the Care Inspectorate will wish to take all opportunities to work with other partners in bringing about improvement. The work of the JIT and the Board will provide opportunities for us to channel our evidence based support both directly to providers and through informing other national agencies about what is working well in social work and social care. We will want to clarify how partners are to work together to avoid unnecessary duplication and to maximise effectiveness.

2.2 Current and future developments for supporting improvement

Currently we support improvement in a number of ways including:

- our core inspection programme, which is designed to raise standards and improve practice
- identifying good practice in our inspection reports

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- flagging up what constitutes good and effective practice in discussions with providers
- publishing good practice and signposting materials
- giving workshops and presentation at conferences and seminars.

We can build on this and develop a more coherent and effective approach to sharing good practice and supporting improvement by carrying out the following:

- signposting good practice more clearly in our reports
- developing a good practice side to our website which includes learning pathways
- publishing a rolling programme of good practice guides to support known areas of weakness
- identifying what works will in integrated health and care and making that knowledge more readily available to practitioners
- working with the SSSC and colleges and universities to support pre-service training and undergraduate programmes
- supporting existing or emerging practitioner networks with evidence based good practice material
- developing specialist national teams
- using inspection focus areas to identify current practice then publishing findings and making recommendations for improvement
- learning from the Francis Report
- developing the research hub and how we can engage and signpost learning and good practice from the JIT.

2.3 Arrangements for collegiate working across health and social care to support improvement

Our ambition to support effective practice and improvement will need to take account of the policy drivers that are shaping care. This will require us to work closely with other scrutiny bodies to take forward our contribution to the improvement agenda. In particular, we will need to work with Education Scotland on matters and services relating to Children and Young People and with Healthcare Improvement Scotland on matters of health and social care. We will need to decide how we best work with the JIT and the new Board to co-ordinate efforts.

The Chief Executive has already discussed early engagement with the JIT team, both with our Sponsor Branch lead and the JIT team themselves. We will build on our existing quarterly meeting with the JIT senior team to take this forward.

LIST OF APPENDICES

Appendix 1 – Letter re Formation of Joint Improvement Partnership Board **Appendix 2 –** Joint Improvement Team MoU

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