



## **Guidance for Locality Improvement Groups.**

The purpose of this guidance is to provide advice and information to Locality Improvement Groups in relation to their membership, remit, responsibilities and reporting arrangements. This document is based on the [Scottish Government Locality Guidance \(2015\)](#).

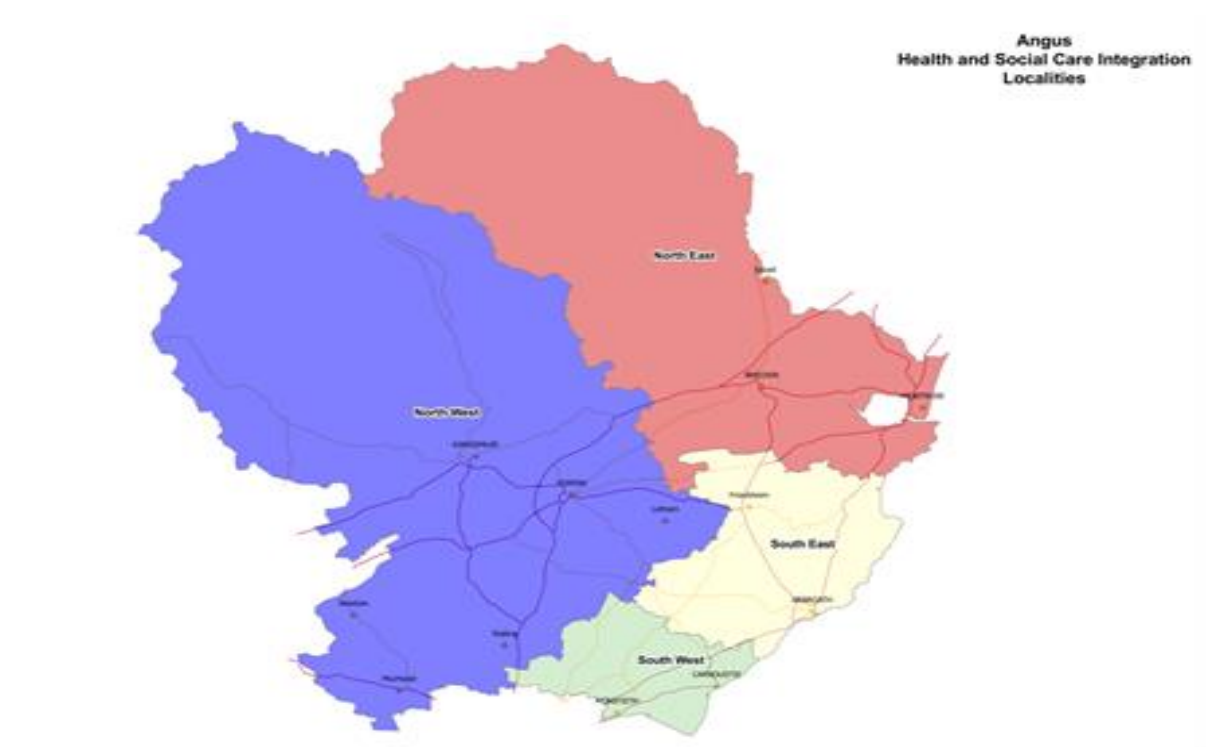
# Contents

<u>Subject</u>	<u>Page Number</u>
1. Background to Locality Working	3
2. Locality Improvement Groups	4
3. Governance	4
4. Purpose of Locality Improvement Groups	4
5. Core Business and Objectives	5
6. Accountability	6
7. Support for the Locality Improvement Group	6
8. Membership	6
9. Chair/ Vice-Chair	8
10. Responsibilities of LIG Members	8
11. Decision Making Arrangements and Quorum	9
12. Conflicts of Interest	9
13. Frequency of Meetings	9
14. Review of Terms of Reference	9
<b><u>Appendices</u></b>	
<i>Appendix 1- Angus Strategic Commissioning Plan Priorities</i>	11
<i>Appendix 2 - National Health and Wellbeing Outcomes</i>	12
<i>Appendix 3 - Framework for Locality Improvement Plans</i>	13
<i>Appendix 4 - Guidance on the Use and Management of Resources</i>	14
<i>Appendix 5 – Sharing Good Practice template</i>	28
<i>Appendix 6 - Role of Improvement and Development (I &amp; D) Support Lead</i>	29
<i>Appendix 7 - Role of Operational Lead Support Role</i>	31
<i>Appendix 8 - Role of LIG Chair and Vice Chair</i>	33
<i>Appendix 9 - Role of LIG Members</i>	36

## 1. Background to Locality Working

The Public Bodies (Joint Working) (Scotland) Act 2014 put in place the legislative framework to integrate health and social care services in Scotland. The Act required each Integration Authority to establish at least two localities within its area.

Localities provide a way to influence local service planning, to inform the [Angus Strategic Commissioning Plan](#) and to deliver on strategic priorities. It is important that localities are large enough to offer scope for service improvement but small enough to feel local and real for those people who live there.



Angus has four localities:

1. North West: Forfar/ Kirriemuir/ South West Angus
2. North East: Brechin/ Edzell/ Montrose
3. South West: Monifieth/ Carnoustie

4. South East: Arbroath/ Friockheim

**Our Vision**

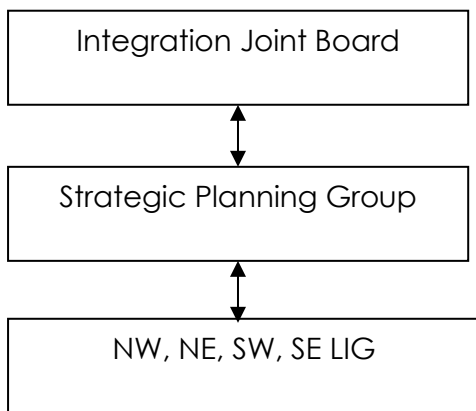
*People in Angus receive the best services possible and enjoy physical and mental health and wellbeing to their full potential.*

**2. Locality Improvement Groups**

Each locality in Angus has a Locality Improvement Group (LIG). LIGs are locally accountable forums with powers to influence how services are designed, configured and delivered. Each LIG has representative membership from the statutory, Third and Independent Sectors and the wider community.

**3. Governance**

Each LIG reports into the Strategic Planning Group and sits within the governance structures of Angus Health and Social Care Partnership (HSCP) as detailed in the Organogram below:



**4. Purpose of Locality Improvement Groups**

The purpose of the LIG is to provide a strong, effective, integrated partnership forum in order to improve provision, opportunity and health and wellbeing outcomes for all adults and young people in the locality and support the delivery of the Angus HSCP Strategic Commissioning Plan. The priorities of the Strategic Commissioning Plan are outlined in

## Appendix 1

In addition there are nine national health and wellbeing outcomes which apply to integrated health and social care and underpin locality work. These are detailed at **Appendix 2**.

## 5. Core Business and Objectives

Each LIG:

- Is the engine room of delivery and improvement at locality level, understanding and making best use of local resources, and identifying opportunities for collaborative working.
- Is responsible for co-producing and delivering the actions within a Locality Improvement Plan. See **Appendix 3**
- for the framework for Locality Improvement Plans.
- Provides a bottom up mechanism for professionals, communities and individuals to identify local priorities and actions, aligned to the Angus HSCP Strategic Commissioning Plan, which improve the health and wellbeing of the community.
- Provides the forum for the development of a strong, effective and integrated partnership in the provision of health and social care at locality level. See section 8 of guidance.
- Provides regular progress updates to the Strategic Planning Group (SPG).
- Uses local performance reports and other evidence to drive improvements in service quality, health and wellbeing outcomes and integrated working in the locality and reduce health inequalities.
- Manages a local budget for commissioning tests of change and other activity in line with the relevant guidance. Projects or activities should encourage collaborative approaches and deliver value for money. Guidance on financial processes is at **Appendix 4**
- 
- Shares learning and development across the locality and Angus-wide. The Sharing Good Practice template is at **Appendix 5**
-

- Promotes positive relationships with GP cluster groups.
- Engages and involves the local community and the local workforce to inform decision making and improve the quality of care and support and the experience of people requiring it.
- Identifies and manages risk to people who use services, staff, communities and Angus HSCP. In particular LIGs should be sighted on the activities of Angus Adult Protection Committee and the learning from case reviews.

## **6. Accountability**

Accountability for services in each locality rests with the Head of Community Health and Care Services aligned to the locality.

The LIG, via the Chair, is responsible for reporting to the Strategic Planning Group in relation to the delivery of the Locality Improvement Plan.

## **7. Support for the Locality Improvement Group**

Each LIG will receive dedicated support from a member of Angus HSCP's Improvement and Development Service and an operational Service Leader.

### **Appendix 6 and Appendix 7**

provide more details of their roles.

Administrative support is available to arrange meetings and circulate meeting papers and other relevant information to LIG members.

Support is also available to LIG Chairs via regular meetings consisting of the four LIG Chairs, planning support officers and Heads of Service.

## **8. Membership**

Each locality will determine the membership of the LIG. However, in order to ensure the quality of the localities input to strategic planning, localities should consider the involvement and leadership of the following core members:

- Health and social care professionals who are involved in the care of people who use services.
- Representatives from Community Planning.

- Representatives of the third and independent sectors.
- Carers and patient's/service user's voice.
- People managing services in the area of the Integration Authority.

A representative membership might include:

<b>LIG member representing</b>	<b>Comments</b>
Strategic Planning Group Representative	Where possible this will be the Chair of the LIG
GP or other practice member, from each locality GP cluster	GPs must be meaningfully and thoroughly represented, engaged and directly involved in localities; the role being to meet with the locality lead on a regular basis and to provide a clinical community of leadership.
Primary Care	Each profession in the wider primary care team should have the opportunity to participate in the development of the locality plan and local decision making that affects their profession, either via membership of the locality or via a clear mechanism that enables them to feed into and be made aware of the decision making process e.g. Practice Manager, Community Nursing Team.
Allied Health Professionals	For example, physiotherapy, occupational therapy, speech and language therapy, dietetics, podiatry.
Social work professionals	For example, representation from service user groups such as Mental Health, Alcohol and Drug Partnership, Learning and Physical Disability, Older People, Home Care and Accommodation services.
Carers	For example, the locality Carer Development Worker, and unpaid carers.
Independent sector	The Scottish Care representative for the locality.

Third Sector	Locality VAA worker and Third Sector Collaborative nominees providing services in the locality area.
Housing	For example, representatives from Angus Council housing and Registered Social Landlords (RSLs).
Users of health and social care	<p>People living locally must have a meaningful role in localities.</p> <p>Existing Public Participation Forums and local patient participation groups can play a valuable role as communities of interest, as can existing planning and consultative groups such as Community Councils or Local Area Networks. 2 user/patient voices.</p>
Communities services	Representatives from Community Planning.

Each LIG will determine its own membership and can also determine membership requirements. For example, core and extended members. Core members are expected to attend and contribute to every meeting. Extended members contribute to the work of the LIG as required and may attend all meetings if they wish or attend only when requested but contribute to specific pieces of work as necessary.

LIGs may wish to determine from their membership what members are 'core' and what members are 'extended'.

Further personnel may be invited to join a LIG on specific occasions to take forward specific work on its behalf, as required.

### **9. Chair/ Vice-Chair**

Each Locality Improvement Group (LIG) should appoint a Chair and Vice Chair. More details on their role and remit can be viewed in **Appendix 8**.

### **10. Responsibilities of LIG Members**

All members of the LIG are expected to act in accordance with the highest standards of personal and professional integrity in line with their ethical codes of



conduct in all aspects of their activities and to comply with all applicable laws and regulations. In addition, the LIG Terms of Reference include specific Rules of Conduct for members.

Each member represents their area of expertise. Deputies will be accepted to maintain consistency. If a core representative cannot attend a meeting, they are encouraged to nominate a replacement to attend to represent their area of expertise. For more on the role and remit of LIG members see **Appendix 9**

### **11. Decision Making Arrangements and Quorum**

Wherever possible, LIG decisions will be made on an informal consensus basis. If a consensus cannot be reached through discussion and a vote is required, each member will be entitled to one vote. Decisions made will be based on a majority vote and in the case of a tie, the Chair will have the casting vote. Decisions will be noted in the minutes of the meeting.

No formal business of the LIG shall be transacted unless at least one half of the whole number of members is present and at least one of either the Chair or Vice Chair is present (or, in exceptional circumstances, the LIG member they have nominated to chair the meeting).

Either the Chair, the Vice Chair or the LIG member nominated by them to chair the meeting, must be present at every meeting plus 25% of the LIG core membership. If a LIG meeting is unable to make a decision due to being inquorate, email and phone contact may be used after the meeting, to brief LIG members on the issue and reach a quorate decision.

### **12. Conflicts of Interest**

A member must disclose any direct or indirect interest in any funding bids to be discussed at each meeting. Where there is a conflict of interest, it may be appropriate for that member to remove themselves from the discussion or any vote.

It is appropriate for a LIG Chair to contribute towards funding applications, however, another representative should attend the LIG to present the proposal to the members for consideration. When considering the application, the above conflict of interest guidance would apply.

### **13. Frequency of meetings**

Meetings will be held bi-monthly and the Chair can call additional meetings if required.

### **14. Review of Terms of Reference**

These will be reviewed annually at the start of each calendar year, by the LIG planners, to ensure consistency across localities. The Terms of Reference template can be viewed in **Appendix 10**.

### **Angus HSCP Strategic Commissioning Plan Priorities**

The four priorities across Angus are:

- Prevention and proactive care
- Care closer to home
- Mental health and wellbeing & substance use recovery
- Equity of access and public protection

More details can be found in the Angus Health and Social Care [Strategic Commissioning Plan](#)

### National Health and Wellbeing Outcomes

Scottish Government has identified nine national outcomes which apply to integrated health and social care. Their purpose is to provide a consistent framework against which activities which can make a tangible difference to people's lives can be planned, reported and assessed. The outcomes are:

1. People are able to look after and improve their own health and wellbeing and live in good health for longer.
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.
3. People who use health and social care services have positive experiences of those services, and have their dignity respected.
4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
5. Health and social care services contribute to reducing health inequalities.
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 wellbeing.
7. People who use health and social care services are safe from harm.
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.
9. Resources are used effectively and efficiently in the provision of health and social care services.

Further details can be found in the [National Health and Wellbeing Outcomes](#)

### Framework for Locality Improvement Plans

#### Introduction

About this plan; Who is this plan for?; What is a locality?; Locality Improvement Group; Where does this plan fit into the bigger picture?; Equality and Diversity; How will we know we are making a difference?

#### Finance

Statement from Chief Finance Officer

#### Vision and Values

Outline of the ethos underpinning the work of the Partnership, which the localities are supporting

#### About Your Locality

Population summary; Local health and wellbeing outcomes relative to other parts of Angus; Life expectancy; Deprivation; Long Term Conditions; Falls; Unpaid Carers; Accommodation and Housing; A snapshot of local support needs and activity; Examples of local assets.

#### Communication and Engagement

Mechanisms used to engage and consult with the locality; Public consultation and encouragement to give feedback.

#### What We've Done So Far

Angus-wide achievements; You Said: We Did section.

#### Priorities

Focus for the current year

#### Improvement Plan

Improvement Actions, Timescales etc

#### Consultation Questionnaire/ Link to Survey Monkey

People are asked to comment as follows:

1. Do you think we have missed anything important? If so, what?
2. How do you think we can all work together better to make sure people in the locality receive the support they need to manage their personal health and wellbeing?
3. Any other comments

### Guidance on the Use and Management of Resources

#### Background

Since 2016 Angus Health and Social Care Partnership (HSCP) has been responsible for the budget with which health and social care services are commissioned. A key element of the locality planning approach in Angus is the management of resources across and within localities, to ensure that they can meet local need aligned to the strategic plan. Resources devolved to the LIGs will enable them to identify, progress and evaluate new ways of working which deliver on Angus HSCP's priorities:

- Improving health, wellbeing and independence
- Supporting care needs at home
- Integrated and enhanced primary care and community responses
- Integrated pathways with acute and specialist providers for priorities in care

To support this, each locality will receive a budget of £25,000 annually, available from 1 April of each year, to be managed by the LIG. Annual funding

will not be carried forward from year to year, so it is essential that the timelines do not slip and the spend is contained within each year's allocated funds.

LIGs may want to consider forming a finance sub-group to oversee the management of the locality budget, depending on the variety and number of projects funded at any one time.

This guidance note aims to clarify the LIG responsibilities in relation to the allocated funds. Responsibilities are considered under the following headings:

1. Prioritisation and allocation of funding
2. Disbursement of funds and budget monitoring
3. Monitoring how funding is used

#### Prioritisation and Allocation of Funding:

All applicants for LIG funding must use the Locality Improvement Fund Application form at Appendix A.

#### Funding Criteria

Funding must be used to support projects and/ or activities which respond to local priorities in relation to the provision of health and social care.

**Funding can only be allocated to community organisations or groups. Funding cannot be allocated to private individuals.**

Projects and activities can take a whole family approach but applications must clearly demonstrate the benefits for adults who access them.

Any proposed projects or activities must also:

- directly support the delivery of at least one of the Angus HSCP's four priorities
- improve one or more of [the National Health and Wellbeing Outcomes](#).
- encourage joint approaches and deliver value for money
- meet all relevant legislative requirements e.g. Employment law if recruitment is required; and not undermine or override other Angus-wide activities.

Proposed projects or activities would not normally exceed 12 months and will clearly set out the outcomes which they will meet. Applications must consider the project or activity's sustainability at the end of the funding period or an exit strategy must be in place.

In considering funding applications, LIGs must also be aware that:

- Funding cannot support activities which an organisation's core funding should be used for.
- Funding cannot be used to purchase buildings but can be used for equipment.
- Bids for interim or stop-gap funding, where the LIG was not the original funding source, can be made via the usual process and will be considered on their merits.
- If funding has been awarded for a specific purpose and costs increase/ there are unforeseen costs, the individual LIG will make the decision on whether to increase the funding.

### Decision Making

- In the first instance, bids should be directed to the Chair and I & D Support Lead of the relevant LIG, or Chairs/ I & D Support Leads where a bid covers more than one locality
- Bids must be assessed against the funding criteria outlined above. The LIG Chair and I & D Support Lead may choose to do this at a LIG meeting or bring together a smaller group with relevant expertise to make this assessment.
- Where there are multiple bids the LIG or sub-group should undertake a prioritisation exercise and make decisions in line with its Terms of Reference
- All approved projects or activities require to submit a progress report 6 months from the start of the project, with a final report to be submitted upon completion of the project. See appendix B.
- Proposals should reflect a preference for funding to be channelled through a smaller number of larger projects rather than a large number of small ones
- Priority should be given to projects or activities that will potentially release resources in the system for reinvestment
- If the LIG or sub-group approve an application, the LIG Chair should submit the agreed project to the relevant Head of Community Health & Care Services for final sign off.
- The LIG Chair should confirm whether a proposal for funding has been successful or not to applicants in writing.

- If successful, the LIG Chair should detail the value of the funding, the period over which the test of change is expected to run, and how resources will be disbursed (see below).
- The LIG I & D Support Lead will ensure that disbursement of funding is established using the correct route.

#### Disbursement of Funds and Budget Monitoring

Each locality will receive a budget of £25,000 annually, available from 1 April of each year. Annual funding will not be carried forward from year to year. All spend will need to be contained within each years allocated funds.

Applications for funding should be completed using the Locality Improvement Fund Application form at **Appendix A**.

Once a proposal has been agreed by an individual LIG then there are two methods of payment:

- Invoice
- Bank transfer

#### Monitoring How Funding is Used

Each LIG is responsible for monitoring their respective projects and activities and informing the Heads of Community Health & Care Services on the basis of successful evaluations. They must ensure that resources are used appropriately and that information and updates on progress are monitored and evaluated. Monitoring should be commensurate with the level of funding provided and at a frequency agreed by the LIG.

The Locality Improvement Group Fund Progress Report template at



## **Appendix B**

can be used to update the LIG on progress at agreed intervals. Where satisfactory progress has not been made during the project the LIG in conjunction with the Head of Community Health & Care Services will review and may revise the funding allocation.

The Locality Improvement Group Fund Final Evaluation template at

## Appendix B

should be used for the final report on the outcomes and learning from the project or activity. Recommendations to scale up projects will be discussed at the Strategic Planning Group to ensure that they are commensurate with the strategic commissioning plan.

## Appendix A



# Locality Improvement Group Funding Application

Please read the guidance below **before** completing this form, and adhere to word limits for each section

### Evidencing the success of the project or activity:

All projects and activities need to set out their outcomes and how they will evidence that they meet them in advance. The LIG can support you with this if required. This information will be agreed with the LIG and used to monitor and evaluate the project or activity. Where possible a baseline for measuring the impact of any change should be established in advance.

Evidence can include quantitative and qualitative data such as:

- number of referral forms received or people attending the activity
- things which reflect the impact on service users and the end result of doing things e.g., service users felt safer, more confident, less isolated

- any unintended consequences, including elsewhere in the system e.g., the length of hospital stay decreased, but readmission rates increased

An assessment of value for money e.g. early intervention, spend to save, improved efficiency etc.

(Double click on boxes to tick)

## SECTION A: APPLICANT INFORMATION

<b>Name of Project/ Activity:</b>	
-----------------------------------	--

### Q1. Which locality/ localities does your application apply to?

North West: Forfar/Kirriemuir/Muirhead areas      Yes  No

North East: Brechin/Edzell/Montrose areas      Yes  No

South West: Carnoustie/Monifieth areas      Yes  No

South East: Arbroath/Friockheim areas      Yes  No

### Q2. Applicant

<b>Organisation Name:</b>	
<b>Organisation Address:</b>	
<b>Organisation Email:</b>	
<b>Organisation Website:</b>	
<b>Type of Organisation:</b>	<i>voluntary / community organisation, registered charity, company, social enterprise, other (delete as appropriate)</i>
<b>Charity / Company No.</b>	

### Q3. Contact

<b>Name:</b>	
<b>Email:</b>	
<b>Telephone:</b>	
<b>Position in Organisation:</b>	

**Q4: Is this a partnership proposal?**

Yes  No

If yes, are you applying as the lead partner for a partnership proposal?

Yes  No

If yes, who are the other partners involved in this proposal? (maximum 100 words)

**Q5. Do you have a constitution, governing document, or set of rules?**

Yes  No

If yes, is this project proposal in line with the aims of the organisation?

Yes  No

**Q6. If you are not a formally constituted group please provide a brief description of your organisation, purpose, aims and activities below (maximum 100 words)**

## **SECTION B: PROJECT PROPOSAL**

**Q7: Provide a short summary of the project, outlining what service(s) you intend to offer if your application is funded (maximum 200 words)**

**Q8: How many people will benefit from your project?**

**Q9. Who are the main direct beneficiaries of your project? Please also tell us about any indirect beneficiaries where applicable (maximum 100 words)**

**Q10. Please tell us about how you identified the need for this project (maximum 100 words)**

**Q11. Please tell us who you have consulted with to identify this need, and whether people with lived experience have influenced this application (maximum 100 words)**

**Q12: Where will the activity take place? Is the proposed activity focused on a specific locality, Angus wide or for a community of interest? (Maximum 100 words)**

**Q13. Please tell us how your proposal is different from your current activities (maximum 100 words)**

**Q14. Please tell us how your proposal is different from anything else currently happening in Angus? (Maximum 100 words)**

**Q15. What is the timescale for your project?**

**Q16. Please tell us the proposed project start/ end dates and key milestones (maximum 100 words)**

**Q17. Which strategic priorities does this project or activity support? (Please tick all that apply)**

Prevention and proactive care	<input type="checkbox"/>
Care closer to home	<input type="checkbox"/>
Mental health and wellbeing & substance use recovery	<input type="checkbox"/>

Equity of access and public protection

**Q18. Please tell us how this project will meet these outcomes and how you will measure and evidence your success (maximum 200 words)**

**Q19. What will happen at the end of the project or activity? Is it sustainable? (maximum 100 words)**

### **SECTION C: PROJECT COSTS / FINANCIAL INFORMATION**

**Q19. Please tell us how much funding you are asking us for (£)**

**Q20. Please tell us if you have applied for or received funding from any other source for this project. Please detail.**

--

**Q21. Please provide a summary costs breakdown**

Item (e.g. room hire)	Amount	Amount you are requesting from us
Total		

**DECLARATION**

I apply, on behalf of the organisation/partnership named above, for funding as outlined in this proposal to be incurred over the proposed funding period on the activities described above.

I certify that, to the best of my knowledge and belief, the statements made by me in this application are true and the information provided is correct. I understand that I may be asked for further information in line with this funding request for the purposes of fair assessment.

I understand that project monitoring will be required if funding is awarded, I agree to provide information relating to this project and application as requested.

Name	
Position	
Date	

Please now return this form to: [AHSCPLIG@angus.gov.uk](mailto:AHSCPLIG@angus.gov.uk)

Or you can return it by post to: Angus Locality Improvement Groups Administrator, Angus House, Orchardbank Business Park, Forfar DD8 1AN



*For official use only*

**LIG SUPPORT AND APPROVAL SIGN OFF**

Date of LIG review	
LIG supporting decision	Supported for approval / not supported for approval <i>(delete as appropriate)</i>
Reason if not supported	
Name of Head of Service for sign off	
Signature	
Date of signature	



**Locality Improvement Group Fund Progress/ Final Evaluation report (delete as appropriate)**

*A progress report should be submitted 6 monthly with a final report submitted on completion of the project.*

<b>Name of Project/ Activity:</b>	
-----------------------------------	--

**Q1. Which locality/ localities does your report apply to?**

- North West            Yes  No
- North East            Yes  No
- South West            Yes  No
- South East            Yes  No

**Q2. Contact**

<b>Name:</b>	
<b>Email:</b>	
<b>Telephone:</b>	
<b>Position in Organisation:</b>	

**Q3. Proposed project start/ end dates and any key milestones**

**Q4. Have you encountered any challenges with implementing your project or activity? if so what are they and how did you overcome them. (maximum 200 words)**

**Q.5. What impact has your project or activity had? Please include data, stories collected from people who have experienced the change (users and staff) and any other qualitative and quantitative information (see guidance).**

**Q.6 What have you learned from your project application, project implementation e.g., would you have done anything differently?**

**Q.7 Did the intended recipients benefit from this project?                      Yes  No**

**Q.8 Did any other unintended recipients benefit from this project? Yes  No**

**Q.9 Do you believe the project or activity has been successful?                      Yes  No**

**If so, why?**

**Q10. Please provide a summary of spending to date**

Item (e.g. room hire)	Amount you received from us	Amount you have spent
Total		

<b>Name</b>	
<b>Position</b>	
<b>Date</b>	

**For LIG use**

<b>Recommendations for Strategic Planning Group</b>
---

Please now return this form to: [AHSCPLIG@angus.gov.uk](mailto:AHSCPLIG@angus.gov.uk)

Or you can return it by post to: Angus Locality Improvement Groups Administrator,  
Angus House, Orchardbank Business Park, Forfar DD8 1AN



# SHARING GOOD PRACTICE OR LEARNING

<b>LIG NAME</b>  <b>Contact Name</b>			<b>Date:</b>
Area of Good Practice or Learning	What did we do?	What difference did we make?	What did we learn?

### **Role of Improvement and Development (I & D) Support Lead**

Each Locality Improvement Group (LIG) will receive dedicated support from a member of the Improvement and Development Service. These individuals will act as a mentor to the LIG supporting it to deliver on its core business and responsibilities.

They will be accessible and invest the time necessary to:

- Promote the use of local intelligence to inform locality service improvement priorities, fostering an environment that promotes innovation, continuous improvement and managed risk-taking.
- Champion the integration of process improvement efforts within and across the locality and encourage evidence-based decisions that are aligned with the priorities within the Angus Strategic Commissioning Plan.
- Provide strategic and operational overview of Angus-wide initiatives/ managed services to support consistency of approach across the 4 LIGs and achieve the aims of the Strategic Commissioning Plan, whilst recognising the need for local responsiveness and flexibility.
- Support improvement and redesign of health and social care services within the locality including the third and independent sectors, ensuring high quality, timely outputs whilst understanding the finances available to the LIG and contribute to ensuring best use of resources.
- Promote a culture of collaboration and teamwork across institutional boundaries and support the LIG to cultivate networks in order to broaden its expertise.
- Provide updates to the LIG on any national guidance relating to health and social care integration and Angus wide initiatives, priorities and developments.
- Take a lead role relating to developing and updating locality guidance.
- Take a lead role in developing and updating the Locality Improvement Plans.
- Attend the locality leadership group meetings and actively support the chair in agenda setting, meeting preparation and LIG developments.
- Help to facilitate discussion at LIG meetings and lead workshops/break out groups as required.
- Help LIG members to make links to people/projects as required.
- Help to assess ideas for developments and funding.

- Co-ordinate funding applications ensuring approval and payment processes are adhered to.
- Work collaboratively with the other LIG Support Leads to ensure consistency across LIG work and developments as appropriate.

Please note that the LIG I & D Support Leads should not chair meetings in the absence of the LIG chair as this may cause a role conflict of interest.

### Role of Operational Lead Support Role

Each Locality Improvement Group (LIG) will receive dedicated support from a Leader working in operational services. These individuals will support the LIG to deliver on its core business and responsibilities. They will be accessible and invest the time necessary to:

- Promote the use of local intelligence informed by operational knowledge, to inform locality service improvement priorities, fostering an environment that promotes innovation, continuous improvement and managed risk-taking.
- Champion the integration of process improvement efforts within and across the locality and encourage evidence-based decisions that are aligned with the priorities within the Angus Strategic Commissioning Plan.
- Provide an operational overview of Angus-wide initiatives/ managed services they are aware of, to support consistency of approach across the 4 LIGs and achieve the aims of the Strategic Commissioning Plan, whilst recognising the need for local responsiveness and flexibility.
- Support improvement and redesign of health and social care services within the locality including the third and independent sectors, ensuring high quality, timely outputs whilst understanding the finances available to the LIG and contribute to ensuring best use of resources.
- Promote a culture of collaboration and teamwork across institutional boundaries and support the LIG to cultivate networks in order to broaden its expertise.
- Provide updates to the LIG on any national guidance relating to health and social care integration and Angus wide initiatives, priorities and developments they are aware of from an operational perspective.
- Contribute to developing and updating the Locality Improvement Plans.



- Attend the locality leadership group meetings and actively support the chair in agenda setting, meeting preparation and LIG developments.
- Help to facilitate discussion at LIG meetings and lead workshops/break out groups as required.
- Help LIG members to make links to people/projects as required.
- Help to assess ideas for developments and funding.

### **Role of LIG Chair and Vice Chair**

#### LIG Chair – Role and Remit

Each LIG is required to have an appointed Chair. The chair should have experience of delivering health and social care services and be passionate about improving outcomes for adults in Angus. The Chair must be employed by NHS Tayside, Angus Council or be from an Independent or Voluntary Sector organisation which has a contractual arrangement with either statutory body. The role of Chair is a voluntary position.

#### Role of Chair

- To ensure the LIG is a collaborative team, supporting consensus and accomplishment of tasks.
- Contributes structure and process to interactions so the group can function effectively.
- Encourage full participation of all LIG members, promotes mutual understanding and cultivates shared responsibility.
- Enables the group to search for inclusive solutions and build sustainable agreements.
- Encourages the group to follow good meeting practices, timekeeping, following an agreed agenda, and keeping a clear record.
- In the event that a consensus cannot be reached, assists the group in understanding their differences and holds the casting vote if required.
- Represents the voice of the LIG at the Strategic Planning Group providing assurance and evidence of progress made in achieving the objectives of the Locality Plan.

## Appointment

The Chair will hold their role for two years with an option for reappointment thereafter.

When a replacement Chair is required, an external recruitment process will commence which is led by the AHSCP.

## LIG Vice Chair – Role and Remit

Each Locality Improvement Group (LIG) can appoint a Vice Chair from within its membership. In order to maintain an effective professional balance in LIGs, the Chair and Vice Chair should represent different sectors.

This is a voluntary position which involves being part of a local leadership group which convenes between meetings for planning purposes; and deputising as required in the Chair's absence. In the event of a LIG Chair resigning, the Vice Chair will assume the Chair's role on a temporary basis until formal arrangements for recruiting a new Chair are concluded.

## Role of Vice Chair

To chair the Locality Improvement Group meetings in the absence of the Chair.

To represent the voice of the LIG at the Strategic Planning Group in the absence of the Chair and provide assurance and evidence of progress made in achieving the objectives of the Locality Plan.

The Vice Chair is also responsible for supporting the chair with the following:

- Ensuring the LIG is a collaborative team, supporting consensus and accomplishment of tasks.
- Contributing structure and process to interactions so the group can function effectively.
- Encouraging full participation of all LIG members, promoting mutual understanding and cultivating shared responsibility.

- Enabling the group to search for inclusive solutions and build sustainable agreements.
- Encouraging the group to follow good meeting practices: timekeeping, following an agreed agenda, and keeping a clear record.
- In the absence of the Chair and in the event that a consensus cannot be reached, assisting the group in understanding their differences and holding the casting vote if required. The Vice Chair will only hold the casting vote in the absence of the Chair, otherwise it will be the Chair that holds the casting vote.

The Chair can nominate someone in the absence of both the chair and the vice chair, when, in exceptional circumstances, neither are able to attend a meeting. This should be an exception however and should not extend to the chairing of several consecutive meetings

### Role of LIG Members

Members of the LIG accept the responsibility of representing their community of interest and will ensure that they collect and feedback information from and to their peers.

Tasks expected of members:

- Attend the LIG meetings as a core member or attend these as required as an extended member.
- Read any papers circulated before each meeting and come to the meeting fully prepared to take part in and contribute to the discussions.
- Participate and contribute to the development and monitoring of the Locality improvement Plan and action plan.
- Engage with the service/people/community you are representing, keeping them up to date with LIG work and developments and informing the LIG of relevant information and developments from your represented area.
- Take an active role in workshops, projects and improvements.
- Ensure confidentiality is adhered to and do not discuss personal or sensitive information outside meetings.
- Provide apologies if you are unable to attend any meetings to ensure that meetings can be postponed in a timely manner if not likely to be quorate.

# TERMS OF REFERENCE



<b>Date approved:</b>		<b>Agenda Item:</b>
<b>Approved by:</b>	<b>Locality Improvement Group Chairs</b>	

## Locality Improvement Group

### Established by

Angus Integration Joint Board (IJB)

### Purpose

The purpose of the XXX Locality Improvement Group is to provide a strong, effective integrated partnership forum in order to improve provision, opportunity & health and wellbeing outcomes for all adults and young people in the locality and support the delivery of the Angus Health and Social Care Partnership (AHSCP) strategic plan.

### Objectives or Responsibilities

- Knowledge of and making best use of local resources.
- Informing the strategic plan with our local priorities.
- Driving improvements & quality outcomes.
- Managing a local budget for tests of change.
- Developing our Locality Improvement Plan.
- Managing & monitoring service pathways & redesign.
- Engaging & involving local communities and the local workforce.
- Promoting effective links with G.P. cluster groups.
- Identifying opportunities for collaborative working.
- Reducing inequalities.

## Scope

In Scope	Not in Scope
This plan is for everyone 16 years and over who work and live in the XXX locality. It is for those who currently use health and social care services and people who want to maintain or improve their health and well-being, including unpaid carers. It is for all adults and young people in the XXX community.	Children under the age of 16.

## Chairperson

## Lead Officer or Support Officer

## Membership

Name	Job Title





make a decision due to being inquorate, email and phone contact may be used after the meeting, to brief LIG members on the issue and reach a quorate decision.

## Frequency of Meetings

Meetings will be held 2 monthly.

The chair can call additional meetings if required.

## Reporting Arrangements

Group Reported To	Frequency
Strategic Planning Group	6 weekly

## Order of Business

<b>Standing Items:</b>	<ul style="list-style-type: none"> <li>• Welcome and Apologies</li> <li>• Approval of Action Note from Previous Meeting</li> <li>• Action Points Update</li> <li>• Communication Updates</li> <li>• Locality Priorities</li> <li>• Bids and Funding</li> <li>• Workshops</li> </ul>
<b>Scheduled Reports for Decision:</b>	<ul style="list-style-type: none"> <li>• As required</li> </ul>
<b>Scheduled Reports for Information:</b>	<ul style="list-style-type: none"> <li>• Performance Reports - quarterly</li> </ul>

## Monitoring and Review

- Monitoring of the Locality Improvement Group will be undertaken through regular reporting to the Strategic Planning Group.
- The TOR will be reviewed annually at the start of each year.

## Rules of Conduct

- We will treat each other with dignity and respect.
- We recognise the skills, knowledge and attributes of each individual member and utilise these.
- We network effectively with each other.
- We call on the expertise of each other and work collaboratively.
- We involve and engage each other and share decision making at all levels.
- We utilise and respect diversity and encourage innovation and creativity.
- We collaborate widely and build networks and positive working relationships.
- We are accountable for ourselves.
- We are open and honest with each other.
- We are a structure of support.
- We deliver on our commitments.
- We will contribute information relative to our area of expertise for the benefit of all LIG members.
- We will take responsibility for sharing information from the LIG with relevant others.
- We will talk in language that everyone understands.