These notes relate to the Public Bodies (Joint Working) (Scotland) Act 2014 (asp 9) which received Royal Assent on 1 April 2014

PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

EXPLANATORY NOTES

COMMENTARY ON SECTIONS

Part 1

Functions of Local Authorities and Health Boards

Integration schemes

Section 2 - Integration schemes: two or more local authorities in Health Board area

- 11. Section 2 sets out requirements which apply where more than one local authority sits within the boundary of a single Health Board area (in contrast to the requirements in section 1(2) which apply where there is a single local authority in a Health Board area).
- 12. By virtue of subsection (2), each local authority and the Health Board are to agree which of the alternative duties in subsections (3) and (4) they will comply with in respect of the local authority area (compliance with one or the other is mandatory). The options are for a local authority to jointly prepare an integration scheme with that Health Board, for its own area only (subsection (3)), or for the local authority to join together with one or more other local authorities to jointly prepare, with the Health Board, an integration scheme for the areas of those local authorities (subsection (4)). The result is that within a single Health Board area, which consists of more than one local authority area, there may be any number of single local authority schemes and/or multiple local authority schemes. For example, in an area with 3 local authorities there may be a scheme for a single area plus a scheme covering the other two areas; or in an area with 6 local authorities there could be a scheme covering three areas, plus a scheme covering two areas, plus a scheme for a single area. The effect is to provide flexibility so that planning decisions can be taken on the basis of what is appropriate for the areas in question i.e. multiple local authorities within the area of the same Health Board can plan together where appropriate or they can choose to plan separately.
- 13. Subsection (5) sets out that where two or more local authorities and a Health Board decide that the integration model mentioned in section 1(4)(c) or (d) is to apply: (a) functions must be delegated to only one of the local authorities; (b) the integration scheme must set out which local authority the functions are to be delegated to (known as the "lead authority"); (c) functions are to be delegated by the Health Board and the local authority/local authorities to the lead authority; and (d) functions are to be delegated by local authority/local authority.
- 14. Subsection (6) sets out that when preparing an integration scheme, whether between an individual local authority and a Health Board, or multiple local authorities and a Health Board, a local authority and Health Board must (a) take into account any other integration scheme that has been prepared for the same Health Board area, and (b) the

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likely effect on the Health Board of any integration schemes prepared in relation to that Health Board. This provision establishes the importance of different integration schemes within a single Health Board area having regard to their combined effect, and interaction in relation, in particular, to the effective running of the Health Board.