

# **Members' Role Descriptor**

### **Integration Joint Board**

	Integration Joint Board (IJB).
Personal Role.	Being a member of the Orkney Integration Joint Board with a term of a maximum of four years for members who are not appointed by merit of holding a post designated as required membership. For members who are appointed by merit of holding a post designated as required membership the term of appointment to the IJB will run concurrently with the term of time holding the post.
Personal Responsibilities.	Attend and participate in formal meetings of the IJB. These will usually take place quarterly.
	Prepare for the formal meetings of the IJB by reading the meeting papers in advance of the meeting and considering the matters set out in these papers.
	Attend and participate in development sessions for members of the IJB as required.
	Attend and participate in sub-committees or working groups of the IJB, as an IJB member, as agreed with the Chair of the IJB. Frequency of such activity will be dependent on the specific sub-committee or piece of work agreed.
	Interface and communicate with the relevant groups, networks, or representatives within the specific role undertaken to bring an informed and objective view and analysis of issues to support the Board's governance role.
	If you are an IJB Board member by merit of holding an employed role or post, you will also have a job description /role descriptor related to that role or post. This job description / role descriptor should be read alongside any other relevant descriptor.

#### Main Tasks.

To act at all times in the interests of patients, service users, carers, the workforce and the public.

To participate actively and constructively in the IJB meetings, and in associated pieces of work, in agreement with the IJB Chair.

To embrace effective governance, accountability and stewardship of public money and demonstrate an understanding of the principles of good scrutiny.

To be part of the leadership role of the IJB by demonstrating the following leadership qualities in relation to your IJB work:

- Creating and sharing the vision effective leadership involves contributing to the creation of a compelling vision for the future and communicating this within and across organisations.
- Working with others effective leadership requires individuals to work with others in teams and networks to deliver continually improving services.
- Being person focussed this is about truly engaging and involving patients, service users, carers and communities in planning and ensuring the delivery of services.
- **Strategic Planning** able to think conceptually in order to plan flexibly for the longer term and being continually alert to finding ways to improve.
- Demonstrating positive personal qualities effective leadership requires individuals to draw upon their values, strengths and abilities and to be respectful, interested and understanding of the views of others.

Where membership arises from a position as a non-voting professional advisor, bring the appropriate professional perspective to the matters being discussed by the IJB. Appendix A sets out the different types of IJB membership.

Where membership arises from a position as a non-voting stakeholder, bring the perspective of that stakeholder group to the matter being discussed by the IJB.

Maintain a focus within the IJB on planning and delivering services that support and improve performance against the nine national health and wellbeing outcomes as established by the Scottish Government (Appendix B) and addressing the health inequalities of the population.

Demonstrate commitment to delivering the best value for money for the use of public funds.

	Take a corporate and supportive approach as a full member of the IJB and respect the code of conduct of the IJB.		
Time Commitment.	You will be asked to commit to a series of dates throughout the year.		
	The IJB will usually meet quarterly and meetings will last approximately three hours, although this will vary depending on the weight of the agenda.		
	There will be a minimum of two development sessions per year and these will be half day sessions.		
	Sub-committee and working group meetings will be of various frequencies depending on the sub-committee itself. Sub-committee meetings will be approximately two hours in length, depending on the weight of the agenda.		
	You may also be asked to attend or support various meetings or events within your remit as a Board member, in agreement with the Chair.		
	The length of time a person can be appointed to the Board is for two years in the first instance which may be extended by a further two years.		
Location.	The Board meetings and development sessions will be held in various venues within Orkney.		
	Video conferencing will be available as a virtual alternative to physical meetings, including a mix of video and in-person attendance.		
	Sub-committee meetings and working group meetings will be held at various venues in Orkney. Video conferencing will be available as a virtual alternative to physical meetings, including a mix of video and in-person attendance.		
Expenses.	If travel expenses are incurred in relation to attendance these will be met in line with Stakeholder / Representatives expenses policy (Appendix C).		
Required Skills and Experience.	You are required to have an active interest in health and social care services in Orkney and a commitment to partnership working.		
	You are required to have a positive approach to, and a commitment to, principles of integration and joint working and a willingness to work towards the success of the IJB and overcome barriers and difficulties that may be faced.		

You must have good communication skills, and the ability to communicate on behalf of those you represent, even if you do not personally share all their views.

You must be able to receive and assimilate the information provided in advance of, and at, meetings and consider and reflect on it.

You must have the ability to work in a constructive way, with Board members who represent a wide range of interests and experience.

You must have the confidence to put forward your views, in an appropriate and respectful manner, and to receive and discuss, and where appropriate challenge, the views of others in the same manner.

For those who are IJB members in a professional advisory capacity you must be able to communicate and have regard to the interests of the IJB whilst discharging your duties as a professional employed or contracted by NHS Orkney or Orkney Islands Council. Likewise, you must be able to communicate and have regard to your duties to NHS Orkney or Orkney Islands Council whilst discharging your role as a member of the IJB.

## Appendix A: IJB Membership

Voting Members.				
Orkney Islands Council.	Councillor Rachael King (Chair). Councillor Steve Sankey. Councillor John Richards.  Deputies: Councillor Stephen Clackson. Councillor Sandy Cowie. Councillor Heather Woodbridge.			
NHS Orkney.	David Drever (Vice Chair). David Campbell. Issy Grieve.  Deputies: Meghan McEwen. Caroline Evans.			
Non-Voting Members (Professional Advisors).				
The Chief Officer of the Integration Joint Board.	Gillian Morrison (Interim).			
The Chief Social Work Officer of the constituent Local Authority.	Jim Lyon (Interim).			
The Section 95 Officer of the Integration Joint Board.	Pat Robinson.			
A General Practitioner representative, appointed by the Health Board.	Dr Kirsty Cole.			
A Secondary Medical care Practitioner representative, employed by the Health Board.	Dr Louise Wilson.			
A Nurse representative, employed by the Health Board.	David McArthur.			
Non-Voting Members (Stakeholders).				
A staff-side representative.	Danny Oliver.			
A third sector representative.	Gail Anderson – Voluntary Action Orkney.			
A carer representative.	Joyce Harcus.			
A service user representative.	Janice Annal.			
Additional Non-Voting Members (Locally Agreed in Additional to Requirements).				
An Additional Staff Representative from the employer not covered above.	Fiona MacKellar – NHS Orkney Employee Director.			

Frances Troup – Head of Housing, Homelessness and Schoolcare
Accommodation Service.

### **Appendix B: Nine National Health and Wellbeing Outcomes**



People are able to look after and improve their own health and wellbeing and live in good health for longer



People, including those with disabilities or long term conditions, or who are frail, are able to live as independently as possibly or in a homely setting in the community



People who use health and social care services have positive experiences of those services, and their dignity respected



Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services



Health and care services contribute to reducing health inequalities



People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing



People using health and social care services are safe from harm



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



Resources are used effectively and efficiently in the provision of health and social care services