



Integration Joint Board
Strategic Planning, Finance and Commissioning Committee

3rd March 2026

This Report relates to
Item 7 on the Agenda

Impacts of the Revised Dumfries and Galloway Integration Scheme on the Integration Joint Board’s Supporting Documentation Framework

Paper presented by Viv Gration

For Approval

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Approved for Submission by:	<ul style="list-style-type: none"> • Garreth Marr, Chief Officer
List of Background Papers:	<ul style="list-style-type: none"> • 4th March 2025 – Dumfries and Galloway Integration Joint Board (IJB) Workshop - Dumfries and Galloway Integration Scheme • 3rd June 2025 - IJB Paper, Review of the Dumfries and Galloway Integration Scheme • 16th December 2025 - IJB Paper, Dumfries and Galloway, Integration Scheme Revisions
Appendices:	Appendix 1 - List of health services retained by Dumfries and Galloway NHS Board (the NHS Board) and list of health services delegated to the IJB

<p>1.</p> <p>1.1</p>	<p>Introduction</p> <p>The purpose of this report is to highlight that the recent significant changes to the Integration Scheme means that the IJB will need to review supporting documentation framework including the Strategic Commissioning Plan (SCP) and Performance Management Framework (PMF).</p>
<p>2.</p> <p>2.1</p>	<p>Recommendations</p> <p>The IJB Strategic Planning, Finance and Commissioning Committee is asked to:</p> <ul style="list-style-type: none"> • Note the need to review the current SCP and PMF • Approve a recommendation to the IJB to replace the SCP and PMF
<p>3.</p> <p>3.1</p> <p>3.2</p> <p>3.3</p> <p>3.4</p> <p>3.5</p>	<p>Background and Main Report</p> <p>In accordance with the requirements of the Public Bodies (Joint Working) (Scotland) Act 2014 (the Act), the Parties, undertook a review of the Dumfries and Galloway Integration Scheme in response to changes proposed in relation to integration arrangements.</p> <p>On conclusion of the review, significant changes to the Dumfries and Galloway Integration Scheme were agreed. These changes include a reconfiguration of the NHS functions and services (see appendix one) delegated to the IJB and retained by the NHS Board.</p> <p>As a result, there is need to review the IJB supporting documentation framework, including the SCP and PMF to ensure that they remain aligned with the new Integration Scheme. This means making sure it reflects changes made and that priorities, resource allocation and delivery models continue to be coherent, legally compliant and effective in achieving improved outcomes for communities.</p> <p>Strategic Commissioning Plan (SCP)</p> <p>In anticipation of the Integration Scheme being approved an indicative timeline for development of a new SCP is provided. The IJB will be asked to approve this at their meeting on 24 March 2026.</p>

Activity	Month
Community led engagement through Delivering Change	Feb/March 2026
Analysis of community feedback Strategic Planning Group (SPG) discussion	April 2026
Develop Strategic Commissioning Plan (SCP)	May 2026
Integration Joint Board (IJB) decision on draft SCP for consultation	June 2026
Consultation period	July/August/September 2026
IJB Performance Management Report (PMR) published	September 2026
Analysis of consultation comments and PMR Development of final draft Workshop with IJB	October/November 2026
Formal approval of SCP 2027 – 2030 by IJB	December 2026

3.6 The SCP will be informed by the Delivering Change Programme participation activities, Annual Performance Report (APR) (September 2026), shaped and influenced by the Strategic Planning Group and subject to full consultation and Equalities Impact Assessment (EQIA).

3.7 **Performance Management Framework**

3.8 Developing a new performance management framework is essential to ensure the HSCP can effectively measure progress, demonstrate accountability and drive improvement under the revised Scheme of Integration and SCP. As governance, responsibilities and delivery expectations evolve, a refreshed framework will provide clear, consistent ways to track outcomes, monitor system pressures, and assess the impact of commissioned services. This will support more transparent decision-making and ensure that performance reporting remains aligned with strategic priorities and the needs of communities.

3.9 Ministerial approval for the Integration Scheme is awaited. It is intended that the Integration Scheme will be implemented from 1st April 2026.

4. **Conclusions**

4.1 Changes to the Integration Scheme are significant and will have impacts on the IJB supporting documentation framework and directions.

5. **Resource Implications**

5.1 Changes to the Integration Scheme means that the NHS Board will need to 'set aside' amounts in respect of large hospitals for use by the Integration Joint Board

6.	Impact on Integration Joint Board Outcomes, Priorities and Policy
6.1	The recently agreed changes to the Integration Scheme will impact positively on the IJBs intention to deliver against the <u>National Health and Wellbeing Outcomes for Health and Social Care</u>
6.2	The work to review to the SCP will include a review of the IJBs 7 Strategic Commissioning Intentions (page 6, <u>IJB Strategic Commissioning Plan 2022-2025</u>)
7.	Legal and Risk Implications
7.1	The integration arrangements that the Parties have laid out in the Integration Scheme are in accordance with all relevant legislation, regulations and guidance.
8.	Consultation
8.1	Representatives of <ul style="list-style-type: none"> • Health and Social Care Senior Management Team and • NHS Board
9.	Equality Impact Assessment
9.1	The Integration Scheme is fully equality impact assessed. No negative impacts, 10 positive impacts and 10 neutral impacts have been identified. Impact assessments - Dumfries and Galloway Council (dumgal.gov.uk)
10.	Consumer Duty
10.1	The Integration Scheme is fully equality impact assessed (see above) to ensure that consumer protections such as fairness and accessibility are embedded into integration arrangements.
11.	Glossary
ACP	Annual Commissioning Plan
A Party/the Parties	NHS Dumfries and Galloway and Dumfries and Galloway Council
EQIA	Equalities Impact Assessment
IJB	Integration Joint Board
PMF	Performance Management Framework
SCP	Strategic Commissioning Plan
The Act	Public Bodies (Joint Working) (Scotland) Act 2014

The Dumfries and Galloway Integration Scheme	The Dumfries and Galloway Integration Scheme means the Dumfries and Galloway Integration Scheme for Dumfries and Galloway approved by Scottish Ministers in August 2024
The Integration Scheme	The Revised Dumfries and Galloway Integration Scheme awaiting approval from Scottish Ministers
The NHS Board	NHS Dumfries and Galloway Board
The Regulations	Public Bodies (Joint Working) (Prescribed Health Board Functions) (Scotland) Regulations 2014

Health Services Retained by the NHS Board

All health services not included within Schedule 3 Part 2 and Part 3 of the Public Bodies (Joint Working) (Prescribed Health Board Functions) (Scotland) Regulations 2014 (the Regulations), will be retained by the NHS Board including;

- Anesthetics
- Cardiology
- Neurology
- General Surgery
- Vascular
- Gastroenterology
- Orthopaedics
- Rheumatology
- Urology
- Dermatology
- ENT
- Oncology
- Oral/Max
- Gynaecology
- Ophthalmology
- Haematology

and

- Maternity and Children's Services

N.B. This list is not exhaustive

Services Relating to functions delegated by NHS Dumfries and Galloway to the Integration Joint Board

The following services relating to NHS Dumfries and Galloway functions delegated pursuant to Part 1 of Annex 1 apply to adults over the age of 18

- (a) accident and emergency services provided in a hospital;
- (b) inpatient hospital services relating to the following branches of medicine—
 - (i) general medicine;
 - (ii) geriatric medicine;
 - (iii) rehabilitation medicine;
 - (iv) respiratory medicine; and
 - (v) psychiatry of learning disability,
- (c) palliative care services provided in a hospital;
- (d) inpatient hospital services provided by general medical practitioners;
- (e) services provided in a hospital in relation to an addiction or dependence on any substance;
- (f) mental health services provided in a hospital, except secure forensic mental health services.

PART 3

3. The health care services listed for the purpose of regulation 3(3)(c) are

- (a) district nursing services;
- (b) services provided outwith a hospital in relation to an addiction or dependence on any substance;
- (c) services provided by allied health professionals in an outpatient department, clinic, or outwith a hospital;
- (d) the public dental service;
- (e) primary medical services provided under a general medical services contract, and arrangements for the provision of services made under section 17C of the National Health Service (Scotland) Act 1978, or an arrangement made in pursuance of section 2C(2) of the National Health Service (Scotland) Act 1978(56);
- (f) general dental services provided under arrangements made in pursuance of section 25 of the National Health (Scotland) Act 1978(57);
- (g) ophthalmic services provided under arrangements made in pursuance of section 17AA or section 26 of the National Health Service (Scotland) Act 1978(58);
- (h) pharmaceutical services and additional pharmaceutical services provided under arrangements made in pursuance of sections 27 and 27A of the National Health Service (Scotland) Act 1978(59);
- (i) services providing primary medical services to patients during the out-of-hours period;

- (j) services provided outwith a hospital in relation to geriatric medicine;
- (k) palliative care services provided outwith a hospital;
- (l) community learning disability services;
- (m) mental health services provided outwith a hospital;
- (n) continence services provided outwith a hospital;
- (o) kidney dialysis services provided outwith a hospital;
- (p) services provided by health professionals that aim to promote public health.