

Mr John Paul Liddle
Deputy Director, National Care Service Development & Delivery Division
Social Care and National Care Service Development Directorate
Via email

5th December 2025

Dear Mr Liddle,

I write with reference to your letter of 24th November 2025 seeking our views on the proposed extension of voting rights to lived experience members of Integration Joint Boards (IJBs). This response was drafted following discussion and consultation with the wider IJB Chairs and Vice Chairs national network so reflects varying viewpoints.

We welcome the opportunity to comment on these proposals. As key stakeholders and with lived experience of chairing and being members of IJBs, we would have welcomed an earlier opportunity to engage with yourself and Scottish Government colleagues to discuss and be fully involved in this process prior to the decision being taken by Ministers to proceed with amendments to the regulations.

As Chairs and Vice-Chairs of IJBs, we both recognise and value the contribution that our lived experience members bring to IJBs alongside all our IJB members including our professional, clinical and staff side colleagues. The short timescale to respond has limited our opportunity to have fuller engagement with our colleagues within our network and our Chairs and Vice Chairs have also highlighted that the limited timescale has significantly detracted from their ability to engage meaningfully with all their IJB members in their local areas. We have previously demonstrated our collective commitment to collaboration, proper consultation which supports equal partnership and full involvement in co-design by all stakeholders and are disappointed that we have not had the opportunity to do so on this issue.

You will know that voting members form a small but distinct part of the overall IJB membership and that it is not a common occurrence for most IJBs to vote in order to reach decisions and instead, we seek to work collaboratively across all our IJB members to reach consensus decisions and directions. It is our clear expectation that issues requiring a decision or endorsement by the IJB have already been through a process that has actively sought wider engagement with key stakeholders and the public at various levels and in different ways including through our formal Strategic Planning Groups and with reference to guidance on Planning with People.

The Public Bodies Act made a clear distinction between non-voting members of an IJB who serve in an advisory capacity – offering professional, clinical operational, outcomes and impact focused advice and the Voting Members who are informed and guided by this advice in order to reach decisions on the delivery of the Strategic Commissioning Plan. The IJB voting members are publicly accountable for these decisions. Some of our members have concerns that extending voting membership to members, not representing the accountable partners, has the risk of diluting the democratic accountability and mandate of elected

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members and the public accountability to Scottish Government of the Non-Executive NHS members.

Voting rights also carry significant responsibility. Voting decisions often relate to statutory duties, financial allocations, and the sustainability of safe clinical services. These are complex matters requiring accountability frameworks equivalent to those applied to councillors and non-executive health board members and we have some concerns around the unintended consequences of extending voting rights to other groups.

It is fair to say that the views of the network were mixed with some members strongly opposed to extension of voting rights to the groups mentioned and others were supportive of extending voting rights not just to those mentioned in your letter but also to additional or indeed, all IJB members. All of these viewpoints are valid and serve to highlight the need for further informed discussion with all stakeholders to fully explore all options and all potential consequences including how these might be mitigated in order for all our members to feel that their contributions to IJBs are recognised, respected and add value to our overall aims and objectives.

Our IJB C/C group raised a number of points which they feel need further consideration and clarity.

- Ensuring recruitment to lived experience representatives on the IJBs would be comparable with other voting board members with consideration of remuneration and more robust recruitment processes.
- Representation – a clear and transparent selection process will need to be followed in order for lived experience representatives to have credibility amongst all service users and carers and be able to represent the views of diverse groups.
- The letter makes specific reference to voting rights being extended to service users, unpaid carers and third sector representatives but we are aware that discussions are taking place with other non-voting member groups including staff side representatives and clinical and professional groups (RCN was mentioned in the letter). This raises issues around potential conflicts of interest and potential concerns around solving one group's concerns around parity but not addressing/maintaining differences between other groups within IJB membership.
- Supporting Infrastructure – how will lived experience members be supported to engage with wider lived experience groups and individuals that they seek to represent and how will they be supported to fully discharge their duties as a voting member of the IJB. Concerns were raised around whether or not the additional level of scrutiny, accountability and recruitment process would encourage more interest in these posts or potentially act as a deterrent.
- How will the effectiveness of any arrangements be evaluated?
- Conscious of other areas of emerging Public Sector Reform and wonder if this is the right time to be making these changes when we are unclear about future structures and models and if we should take time to consider how IAs/IJBs will be placed in the future and what form they should take.

We are also thoughtful that our health and social care services continue to be under significant pressures and many areas across the country are faced with significant budget shortfalls impacting on the experience of many people. We are not assured that prioritising statutory changes to the governance of IJBs will address these issues. The need for clear

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national messaging on the challenges faced and the need to focus on early intervention and prevention to mitigate these pressures and improve outcomes would provide a clearer collective focus.

We remain committed to working collaboratively with communities and their representatives recognising that all IJB members also have lived experience of health and social care services and we very much welcome an opportunity to strengthen the voice, contributions, and experience of IJB members. We are conscious that an extension of voting rights does not, in itself, enhance the experience of individual IJB Board members and would have welcomed an opportunity to explore other areas of potential good practice to ensure voices are heard and every contribution is fully recognised and valued. We note your intention to set up a short life working group to review the statutory guidance, and we welcome the opportunity to join that group.

We remain committed to working collaboratively with Scottish Government and partners to ensure meaningful participation and improved outcomes for the people we serve.

Yours sincerely



Ms Rachael King
Chair, IJB Chairs/Vice-Chairs Network
Health and Social Care Scotland

Copy:

Ms Lesley McDonald, Vice-Chair, IJB Chairs/Vice-Chairs Network
Office of Minister for Social Care and Mental Wellbeing, Mr Tom Arthur MSP

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