

A meeting of the Inverclyde Integration Joint Board Audit Committee will be held on Monday 24 January 2022 at 1pm.

This meeting is by remote online access only through the videoconferencing facilities which are available to members of the Integration Joint Board Audit Committee and relevant officers. The joining details will be sent to participants prior to the meeting.

In the event of connectivity issues, participants are asked to use the *join by phone* number in the Webex invitation.

Please note that this meeting will be recorded.

Anne Sinclair
Interim Head of Legal & Democratic Services

BUSINESS		
1.	Apologies, Substitutions and Declarations of Interest	Page
ITEMS FOR ACTION:		
2.	Minute of Meeting of IJB Audit Committee of 20 September 2021	P
3.	Minute of Meeting of IJB Audit Committee of 29 November 2021	P
4.	IJB Audit Committee Rolling Annual Workplan	P
5.	Internal Audit Progress Report – 30 August to 17 December 2021 Report by Interim Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership	P
6.	Status of External Audit Action Plans at 30 November 2021 Report by Interim Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership	P

7.	Inverclyde Integration Joint Board – Directions Update September 2021 Report by Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership	P
8.	IJB Risk Register Report by Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership	P

Please note that because of the current COVID-19 (Coronavirus) emergency, this meeting will not be open to members of the public.

The papers for this meeting are on the Council's website and can be viewed/downloaded at <https://www.inverclyde.gov.uk/meetings/committees/59>

In terms of Section 50A(3A) of the Local Government (Scotland) Act 1973, as introduced by Schedule 6, Paragraph 13 of the Coronavirus (Scotland) Act 2020, it is necessary to exclude the public from this meeting of the Integration Joint Board Audit Committee on public health grounds. It is considered that if members of the public were to be present, this would create a real or substantial risk to public health, specifically relating to infection or contamination by Coronavirus.

Enquiries to – **Diane Sweeney** - Tel 01475 712147

INVERCLYDE INTEGRATION JOINT BOARD AUDIT COMMITTEE – 20 SEPTEMBER 2021

Inverclyde Integration Joint Board Audit Committee

Monday 20 September 2021 at 1.00pm

Present:

Voting Members:

Councillor Elizabeth Robertson (Chair)	Inverclyde Council
Councillor Luciano Rebecchi	Inverclyde Council
Paula Speirs (Vice Chair)	Greater Glasgow & Clyde NHS Board
Simon Carr	Greater Glasgow & Clyde NHS Board

Non-Voting Members:

Diana McCrone	Staff Representative, Greater Glasgow & Clyde NHS Board
Stevie McLachlan	Inverclyde Housing Association Forum Representative – River Clyde Homes

Also present:

Allen Stevenson	Interim Corporate Director (Chief Officer) Inverclyde Health & Social Care Partnership
Anne Glendinning	On behalf of Sharon McAlees ,Chief Social Worker, Inverclyde Council
Craig Given	Chief Finance Officer, Health & Social Care Partnership
Andi Priestman	Chief Internal Auditor, Inverclyde Council
Vicky Pollock	Legal Services Manager, Inverclyde Council
Diane Sweeney	Senior Committee Officer, Inverclyde Council
Lindsay Carrick	Senior Committee Officer, Inverclyde Council
George Barbour	Corporate Communications Manager, Inverclyde Council

Chair: Councillor Robertson presided.

The meeting took place via video-conference.

Prior to the commencement of business Councillor Robertson welcomed Mr Carr and Mr Given to the meeting, and congratulated Mr Given on his appointment as Chief Finance Officer and acknowledged that this was a return to the Audit Committee for Mr Carr.

24 Apologies, Substitutions and Declarations of Interest 24

No apologies for absence or declarations of interest were intimated.

25 Minute of Meeting of IJB Audit Committee of 29 March 2021 25

There was submitted the Minute of the Inverclyde Integration Joint Board Audit

INVERCLYDE INTEGRATION JOINT BOARD AUDIT COMMITTEE – 20 SEPTEMBER 2021

Committee of 29 March 2021.

The Minute was presented by the Chair and examined for fact, omission, accuracy and clarity.

Decided: that the Minute be agreed.

26 Minute of Meeting of IJB Audit Committee of 21 June 2021 26

There was submitted the Minute of the Inverclyde Integration Joint Board Audit Committee of 21 June 2021.

The Minute was presented by the Chair and examined for fact, omission, accuracy and clarity.

Decided: that the Minute be agreed.

27 IJB Audit Committee Rolling Annual Workplan 27

There was submitted a list of rolling actions arising from previous meetings of the IJB Audit Committee.

The Chair enquired about the progress of the entry for 24 January 2022 'Update on IJB Risk Register (After Risk Appetite Work)'. Mr Given advised that he would be setting up a short-life working group (SLWG), and it was agreed that the Chair, Mr Given, Ms Speirs and Ms McCrone would participate, and that Mr Alan Cowan, Chair of the Inverclyde Integration Joint Board, would be approached to become a member. It was acknowledged that the project may not be completed by 24 January 2022, but that the IJB Audit Committee would be informed of progress. Ms Priestman and Mr Stevenson offered assistance and support.

Decided:

(1) that the Rolling Annual Workplan be noted; and

(2) it be noted that (a) Mr Given will form a short-life working group, the membership of which will be the Chair, Mr Given, Ms Speirs, Ms McCrone, (b) Mr Cowan will be approached to join the group, and (c) a meeting will be arranged in due course.

28 Internal Audit Progress Report – 1 March to 27 August 2021 28

There was submitted a report by the Interim Chief Officer, Inverclyde Integration Joint Board on the progress made by Internal Audit during the period from 1 March to 27 August 2021.

The report was presented by Ms Priestman, being the regular progress report, and advised as follows:

a) there was one internal audit report finalised since the last Audit Committee meeting in March;

b) that the plan for 2020/2021 is complete and the plan for 2021/22 is underway;

c) in relation to Internal Audit follow up, there were no actions due for completion by 31 August 2021. There are 3 actions being progressed by officers, all as detailed in Appendix 1 to the report;

d) there have been no Internal Audit Reports relevant to the IJB reported to Inverclyde Council since the last Audit Committee meeting in March 2021;

e) Internal Audit within Inverclyde Council and NHS GGC have undertaken to follow up actions in accordance with agreed processes and will report on progress to the respective Audit Committees;

f) in relation to External Audit action plans, there were 2 actions due for completion since the last Audit Committee meeting in March, both of which have been reported as completed. The status of External Audit actions will be reviewed by External Audit as

INVERCLYDE INTEGRATION JOINT BOARD AUDIT COMMITTEE – 20 SEPTEMBER 2021

part of their 2020-21 Annual Audit Plan and reported to Audit Committee in November 2021.

The Board requested clarification on the decision-making process involved in determining what is audited. Ms Priestman provided an overview of the audit services provided by Inverclyde Council, NHS GGC and external audit and how they linked together, advising that an audit service was provided which was strategic and proportionate. It was also noted decisions were based primarily on the IJB Risk Register, and reassurance was given that any new emerging risks could be captured.

The Board enquired if Ms Priestman had access to NHS GGC Audit Plans. Ms Priestman provided reassurance that regular progress reports from NHS GGC were provided and that nationally Internal Auditors had quarterly meetings during which matters relevant to IJBs were discussed.

There was discussion on the membership of the Audit Committee and if there was scope to include audit representation from NHS GGC. Ms Priestman advised that the internal audit function of NHS GGC is provided by external firms, who had declined an offer to participate in the wider IJB Chief Internal Auditor meetings when the IJBs were initially set up. Board Members suggested inviting NHS GGC auditors to the next meeting of the Audit Committee.

Decided:

- (1) that the progress made by Internal Audit in the period 1 March to 27 August 2021 be noted; and
- (2) that an invite be extended to Azets, the current NHS GGC internal auditors, to attend the next meeting of the Audit Committee.

29 Internal Audit Annual Report and Assurance Statement 2020/2021

29

There was submitted a report by the Interim Chief Officer, Inverclyde Integration Joint Board appending the Internal Audit Annual Report and Assurance Statement for 2020/2021, which forms part of the IJB's Annual Governance Statement.

The report was presented by Ms Priestman who advised the Committee that the report concluded that the majority of the IJB's established internal control procedures operated as intended to meet management's control requirements for each area reviewed by Internal Audit and that the overall audit opinion was 'satisfactory'.

Decided: that the Internal Audit Annual Report and Assurance Statement 2020/2021 be approved.

30 Inverclyde Integration Joint Board – Directions Update September 2021

30

There was submitted a report by the Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership providing a summary of the Directions issued by Inverclyde Integration Joint Board to Inverclyde Council and NHS GGC for the period March to August 2021.

The report was presented by Ms Pollock and advised that a revised IJB Directions Policy and Procedure was approved by the IJB in September 2020 and as part of the agreed procedure the IJB Audit Committee had assumed responsibility for maintaining an overview of progress with the implementation of Directions, requesting a mid-year progress report and escalating key delivery issues to the IJB. This report is the second such report and covers the period March 2021 to August 2021.

The report provided an update on the Directions issued between March and August 2021, noting that 7 Directions were issued; 6 of which were to both Inverclyde Council and the Health Board, and one of which was to the Health Board only.

The Board enquired about the governance processes in place to ensure that Directions

INVERCLYDE INTEGRATION JOINT BOARD AUDIT COMMITTEE – 20 SEPTEMBER 2021

were implemented and Ms Pollock provided an overview of the procedures in place and reassurance that the log is monitored by Mr Stevenson and his Senior Management Team and that the IJB would be advised of any necessary matters. Mr Stevenson added that the reporting template could be adjusted to include 'Review date' and 'Status' columns if members thought this would be of assistance.

Decided: that the contents of the report be noted.

INVERCLYDE INTEGRATION JOINT BOARD AUDIT COMMITTEE – 29 NOVEMBER 2021

Inverclyde Integration Joint Board Audit Committee

Monday 29 November 2021 at 1.00pm

Present:**Voting Members:**

Councillor Elizabeth Robertson (Chair)	Inverclyde Council
Councillor Luciano Rebecchi	Inverclyde Council
Paula Speirs (Vice Chair)	Greater Glasgow & Clyde NHS Board
Simon Carr	Greater Glasgow & Clyde NHS Board

Non-Voting Members:

Diana McCrone	Staff Representative, Greater Glasgow & Clyde NHS Board
Stevie McLachlan	Inverclyde Housing Association Forum Representative – River Clyde Homes

Also present:

David Jamieson	Audit Scotland
Grace Symes	Audit Scotland
Allen Stevenson	Interim Corporate Director (Chief Officer) Inverclyde Health & Social Care Partnership
Anne Glendinning	On behalf of Sharon McAlees, Chief Social Worker, Inverclyde Council
Alan Best	Interim Head of Health & Community Care, Health & Social Care Partnership
Craig Given	Chief Finance Officer, Health & Social Care Partnership
Laura Moore	Chief Nurse, NHS GG&C
Andi Priestman	Chief Internal Auditor, Inverclyde Council
Vicky Pollock	Legal Services Manager, Inverclyde Council
Diane Sweeney	Senior Committee Officer, Inverclyde Council
Colin MacDonald	Senior Committee Officer, Inverclyde Council

Chair: Councillor Robertson presided.

The meeting took place via video-conference.

31 Apologies, Substitutions and Declarations of Interest

31

No apologies for absence or declarations of interest were intimated.

Prior to discussion of the following item the Chair welcomed the representatives from Audit Scotland to the meeting.

32 Annual Report to the IJB and the Controller of Audit for the Financial Year Ended 31 March 2021

32

There was submitted a report by the Interim Corporate Director (Chief Officer) Inverclyde Health & Social Care Partnership appending the Annual Report and Auditors' Letter to the Board for the financial year ended 31 March 2021 which has been prepared by the IJB's external auditors, Audit Scotland.

The Chair invited Mr Jamieson to present the Audit Scotland Report (the Report), which had the following key findings:

- (1) the audit opinions on the annual accounts of the IJB are unmodified;
- (2) the Covid-19 pandemic had an impact on the timing of assurances provided by partner bodies;
- (3) an error in the Set Aside amount of £4 million has been corrected in the audited accounts. There is no net effect on the outturn as this is fully funded by NHS GG&C;
- (4) the IJB budget is generally delayed by NHS GG&C though indicative budgets are agreed;
- (5) additional funding and an underspend on core activities resulted in a surplus of £6.5 million in 2020/21, with the majority of savings delivered;
- (6) a £0.5 million overspend is currently forecast for 2021/22 with additional Covid-19 costs fully funded;
- (7) the IJB has a medium-term financial plan;
- (8) there was a rapid response to the pandemic and Strategic Plan priorities have been revised;
- (9) management changes in the IJB have been significant; and
- (10) review of the integration scheme has been delayed.

Mr Jamieson advised the Committee that it was a positive report and that there were no recommendations regarding the 2020/21 accounts, which he noted was unusual. Mr Jamieson further advised that of the five recommendations brought forward from the previous year, two had been implemented and a revised timescale applied to the remaining three.

Mr Jamieson noted a typographical error at page 16 of the Report within the section title 'Locality Planning Groups aim to develop further in 2020/21' (page 20 of the agenda), which should read 'Locality Planning Groups aim to develop further in 2021/22', and advised that this would be corrected.

The Committee requested further information on the Set Aside budget and the possible impact on the IJB. Mr Jamieson provided an overview of the national, NHS GG&C and Inverclyde outcomes, and advised that this matter was being monitored. The Committee asked if there was a risk to the IJB and Mr Jamieson advised that the Set Aside budget was funded by the Health Board, and therefore the £4 million adjustment had no impact on the IJB, and commented on the transfer of resources from unscheduled care to community care. Mr Given highlighted that the error in the Set Aside budget was due to incorrect information being provided by NHS GG&C, which had now been corrected, and had no effect on the bottom line, and that he would raise the matter of the Set Aside at the Chief Financial Officer network meeting.

The Committee referred to the three remaining outstanding actions from the previous year, and Mr Jamieson noted that they were progressing, that Audit Scotland were content with the new timescales applied and that this would be monitored.

The Committee commented that the Key Message at page 9 and heading at page 11 of the Report (pages 13 and 15 of the agenda) 'Set Aside has not been working well and an Unscheduled Care Improvement Programme is being developed to address this' was not an accurate reflection of the position regarding the Set Aside budget, and requested that Audit Scotland revise this.

The Committee also commented that within paragraphs 35 to 37 of the Report (page 15 of the agenda) the identified problems with Unscheduled Care are not appropriately contextualised as being national in scale, not specific to Inverclyde, and referred to the Commissioning Plan and requested this be emphasised.

The Committee also noted that there were no references to Unscheduled Care within the tables at the 'Data Indicators' and 'Outcome Indicators' sections of the Audited Annual Accounts 2020/21 (Appendix 3) document (pages 43 and 44 of the agenda).

The Committee commented that the Reserves noted in the accounts perhaps gave an inaccurate representation of the financial position of the IJJB as most were Earmarked Reserves.

Following discussion, Mr Jamieson confirmed that he would reword the heading of the Report as requested and capture the comments made regarding the broader Commissioning Plan.

The Chair commented favourably on the Report, and thanked all involved in the process.

Decided:

- (1) that the contents of the Annual Report to the IJJB and Controller of Audit for the financial year to 31 March 2021 be endorsed;
- (2) that it be recommended to the IJJB that the Chair, HSCP Chief Officer and Chief Financial Officer be authorised to accept and sign the final 2020/21 Accounts on behalf of the IJJB; and
- (3) that the Letter of Representation, as detailed at appendix 2 of the report, be endorsed and it be recommended to the IJJB that this be signed by the Chief Financial Officer.

IJB Audit Committee Rolling Annual Workplan – 24 January 2022

Date	Reports	Lead Officer
24 January 2022	Internal Audit Progress Report December 2021 Update on IJB Risk Register (After Risk Appetite work)	Chief Internal Auditor Chief Officer / Chief Financial Officer
21 March 2022	Internal Audit Progress Report February 2022 Internal Audit Annual Audit Plan 2022/23 External Audit Annual Audit Plan 2021/22 Best Value Annual Report Directions Update Review Risk Register	Chief Internal Auditor Chief Internal Auditor External Audit Chief Finance Officer Legal Services Manager (Procurement, Conveyancing & Information Governance) Interim Chief Officer (<i>Min. ref. – IJJB AC - 21.06.2021 - 22(4)</i>)
September 2022	Internal Audit Annual Report and Assurance Statement 2021/22 Internal Audit Progress Report Directions Update Review of Risk Register	Chief Internal Auditor Chief Internal Auditor Legal Services Manager (Procurement, Conveyancing & Information Governance) (<i>Min. ref. – IJJB – 21 09 2020 – 86(3)</i>) Interim Chief Officer (<i>Min. ref. - IJJB AC - 21.06.2021 - 22(4)</i>)
January 2023	Internal Audit Progress Report - December 2022 Status of External Audit Action Plan 2021/22	Chief Internal Auditor Chief Internal Auditor

Report To:	Inverclyde Integration Joint Board Audit Committee	Date:	24 January 2022
Report By:	Interim Chief Officer Inverclyde Integration Joint Board	Report No:	IJBA/01/2022/AP
Contact Officer:	Andi Priestman	Contact No:	01475 712251

Subject: INTERNAL AUDIT PROGRESS REPORT – 30 AUGUST TO 17 DECEMBER 2021

1.0 PURPOSE

- 1.1 The purpose of this report is to enable IJB Audit Committee members to monitor the performance of Internal Audit and gain an overview of the IJB's overall control environment.
- 1.2 The report also presents an update on the Internal Audit work undertaken at Inverclyde Council and NHS Greater Glasgow and Clyde (NHSGGC) between 1 March and 27 August 2021 that may have an impact upon the IJB's control environment.

2.0 SUMMARY

- 2.1 There was one internal audit report finalised since the last Audit Committee meeting in September:

- IJB Performance Management and Reporting Arrangements

- 2.2 The audit plan for 2021/2022 is now complete.

- 2.3 In relation to Internal Audit follow up, there were no actions due for completion by 30 November 2021. There are 8 actions being progressed by officers. The current status report is attached at Appendix 1.

**Appendix
1**

- 2.4 In addition, since the last Audit Committee meeting in September 2021, Internal Audit Reports reported to Inverclyde Council and NHSGGC which are relevant to the IJB are set out at paragraphs 5.9 to 5.12 of the report.

- 2.5 Internal Audit within Inverclyde Council and NHSGGC undertake follow up of actions in accordance with agreed processes and report on progress to the respective Audit Committees.

3.0 RECOMMENDATIONS

- 3.1 It is recommended that IJB Audit Committee members agree to note the progress made by Internal Audit in the period from 30 August to 17 December 2021.

Allen Stevenson
Interim Chief Officer Inverclyde Integration Joint Board

4.0 BACKGROUND

- 4.1 In March 2021, the Audit Committee approved the current Internal Audit Annual Plan which detailed the activity to be undertaken during 2021-22.
- 4.2 Internal Audit reports findings and action plans to relevant IJB Officers and the Audit Committee as part of the annual audit plan. A follow up process is in place to allow follow up of current internal audit actions to be co-ordinated and updated by Internal Audit on a monthly basis with regular reporting to the Audit Committee.
- 4.3 In each audit, one of 4 overall opinions is expressed:

Strong	In our opinion there is a sound system of internal controls designed to ensure that the organisation is able to achieve its objectives.
Satisfactory	In our opinion isolated areas of control weakness were identified which, whilst not systemic, put some organisation objectives at risk.
Requires improvement	In our opinion systemic and/or material control weaknesses were identified such that some organisation objectives are put at significant risk.
Unsatisfactory	In our opinion the control environment was considered inadequate to ensure that the organisation is able to achieve its objectives.

- 4.4 Individual audit findings are categorised as Red, Amber or Green:

Red	In our opinion the control environment is insufficient to address the risk and could impact the organisation as a whole. Corrective action must be taken and should start immediately.
Amber	In our opinion there are areas of control weakness which we consider to be individually significant but are unlikely to affect the organisation as a whole.
Green	In our opinion our audit highlighted areas for minor control improvement and/or areas of minor control weakness.

- 4.5 A summary is also provided in relation to internal audit work undertaken at Inverclyde Council and NHS Greater Glasgow and Clyde that may have an impact upon the IJB's control environment.

5.0 CURRENT POSITION

- 5.1 There was one internal audit report finalised since the last Audit Committee meeting in September in relation to IJB Performance Management and Reporting Arrangements.
- 5.2 In order to comply with relevant legislation, along with local and national policies, the Inverclyde IJB oversees the delivery of defined health and social care services to local residents. Those services are delivered by the Inverclyde Health & Social Care Partnership (HSCP). It is within this organisational framework that the HSCP is currently implementing the IJB's five year strategic plan. Adequate and effective performance management and reporting arrangements must be in place to gauge the progress being made with implementing the IJB's strategic plan.

5.0 CURRENT POSITION (CONTINUED)

- 5.3 The objective of this audit was to provide the IJB Audit Committee with an assessment of the adequacy and effectiveness of the governance, risk management and controls surrounding the key risks faced by Inverclyde IJB in relation to the IJB's strategic plan performance management and reporting arrangements.
- 5.4 The review focused on the high level processes and procedures in relation to the IJB's performance management and reporting arrangements and concentrated on identified areas of perceived higher risk, such as not completely and adequately monitoring implementation of the IJB's strategic plan and not providing key stakeholders with relevant and timely information regarding implementation of the IJB's strategic plan.
- 5.5 The overall control environment opinion for this audit review was **Satisfactory**. There was one AMBER issue identified as follows:

Reporting on progress with implementing the IJB's Strategic Plan (AMBER)

The Inverclyde Integration Joint Board (IJB) oversees the delivery of defined health and social care services on behalf of local residents. When implementing the IJB's Strategic Plan those services are either organised or commissioned by the Inverclyde Health & Social Care Partnership (HSCP). From our review of reporting and documentation arrangements we have identified some issues as follows:

- the content of the Strategic Plan progress report overlaps with the Annual Performance report. There is scope to effectively incorporate the progress report within Annual Performance report;
- two elements of the report format used in the first Strategic Plan progress report for 2019/20 could be re-introduced into the third progress report for 2021/22. Namely, reapplying "Red/Amber/Green" status reporting of actions and bringing back coverage of issues and related risks;
- there is scope to increase accountability as a mid-year progress report on delivery of the Strategic Plan is not submitted to the IJB;
- within Inverclyde Council's website there is no single page which consolidates key Strategic Plan documentation; and
- there is no "easy read" document which covers the progress being made with implementing the IJB's Strategic Plan.

There is some unnecessary duplication of effort and reporting due to an overlap in the content of the Strategic Plan progress report and Annual Performance report.

It is more difficult for stakeholders to gauge the progress being made with implementing the IJB's Strategic Plan when "Red/Amber/Green" status reporting is not applied to the published progress report and only annual updates on progress are formally provided to IJB members.

Effective communication with stakeholders may be diluted when key documentation regarding the Strategic Plan cannot easily be located online. Likewise when documentation assumes knowledge of health and social care provision which not all stakeholders may possess.

- 5.6 The audit identified 2 issues, one of which we consider to be individually significant and an action plan is in place to address both issues by 30 November 2022.
- 5.7 The plan for 2021/2022 is now complete.

5.0 CURRENT POSITION (CONTINUED)

5.8 In relation to Internal Audit follow up, there were no actions due for completion by 30 November 2021. The current status report is attached at Appendix 1.

5.9 Inverclyde Council – Internal Audit Progress Report Summary

Since the last Audit Committee meeting in September 2021 there were no Internal Audit Reports reported to Inverclyde Council relevant to the IJB.

5.10 Internal Audit undertakes follow up work on a monthly basis to confirm the implementation of agreed actions. A specific audit follow up report is provided to each meeting of the Council's Audit Committee to allow appropriate scrutiny of action plan implementation.

5.11 NHSGGC - Internal Audit Progress Report Summary

Since the last Audit Committee meeting in September 2021, there were 3 Internal Audit Reports reported to NHSGGC which are relevant to the IJB and are set out in the undernoted table. There were no Grade 4 recommendations raised (very high exposure) and no control objectives assessed as red.

Audit Title	Rating	Number and Priority of Issues			
		4	3	2	1
Financial Systems Health Check – Procurement and Tendering	Substantial Improvement Required	-	3	4	-
HEPMA – Project Governance	Minor Improvement Required	-	-	2	-
Management Action Follow Up	N/A				
Total		-	3	6	-

(1) Areas for improvement were identified including: ensuring compliance with processes for both competitive and non-competitive tendering activity; improving arrangements for ensuring the completeness and accuracy of the contracts register; and refining processes for ensuring that procurement activity is subject to appropriate approval in line with the NHSGGC Scheme of Delegation. A new Head of Procurement started in July 2021 and progress has already started in addressing issues identified.

5.12 Internal Audit undertakes follow up work on a quarterly basis to confirm the implementation of recommendations. The results of the follow up work are reported to the NHSGCC Audit Committee with any matters of concern being drawn to the attention of this Committee.

6.0 IMPLICATIONS

Finance

- 6.1 The work required to deliver the Annual Internal Audit Plan will be contained within the existing Internal Audit budget set by Inverclyde Council.

Financial Implications:

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report	Virement From	Other Comments
N/A					

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact	Virement From (If Applicable)	Other Comments
N/A					

Legal

- 6.2 There are no direct legal implications arising from this report.

Human Resources

- 6.3 There are no direct HR implications arising from this report.

Equalities

- 6.4 Has an Equality Impact Assessment been carried out?

	YES
X	NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

How does this report address our Equality Outcomes?

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	None
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	None
People with protected characteristics feel safe within their communities.	None
People with protected characteristics feel included in the planning and developing of services.	None
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	None

Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	None
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	None

6.5 There are no direct clinical or care governance implications arising from this report.

National Wellbeing Outcomes

6.6 How does this report support delivery of the National Wellbeing Outcomes?

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	None
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	None
People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None
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.	None
People using health and social care services are safe from harm.	None
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.	None
Resources are used effectively in the provision of health and social care services.	None

7.0 DIRECTIONS

7.1 Direction Required to Council, Health Board or Both	Direction to:	
	1. No Direction Required	X
	2. Inverclyde Council	
	3. NHS Greater Glasgow & Clyde (GG&C)	
	4. Inverclyde Council and NHS GG&C	

8.0 CONSULTATIONS

8.1 N/A

9.0 LIST OF BACKGROUND PAPERS

9.1 Internal Audit Reports. Copies available from Chief Internal Auditor.

**INVERCLYDE INTEGRATION JOINT BOARD
INTERNAL AUDIT REPORT TO AUDIT COMMITTEE ON
STATUS OF INTERNAL AUDIT ACTION PLAN POINTS
AT 30 NOVEMBER 2021**

Summary: Section 1 Summary of Management Actions due for completion by 30/11/2021

There were no actions due for completion by 30 November 2021.

Section 2 Summary of Current Management Actions Plans at 30/11/2021

At 30 November 2021 there were no audit reports delayed due to management not finalising the action plan within agreed timescales.

Section 3 Current Management Actions at 30/11/2021

At 30 November 2021 there were 8 current audit action points.

Section 4 Analysis of Missed Deadlines

At 30 November 2021 there was one audit action point where the agreed deadline had been missed.

Section 5 Summary of Audit Action Points By Audit Year

**INVERCLYDE INTEGRATION JOINT BOARD
INTERNAL AUDIT REPORT TO AUDIT COMMITTEE ON
STATUS OF INTERNAL AUDIT ACTION PLAN POINTS**

SUMMARY OF MANAGEMENT ACTION PLANS DUE FOR COMPLETION BY 30.11.2021

SECTION 1

No. of Actions Due	No. of Actions Completed	Deadline missed Revised date set*	Deadline missed Revised date to be set*	No action proposed
0				

* These actions are included in the Analysis of Missed Deadlines – Section 4

**INVERCLYDE INTEGRATION JOINT BOARD
INTERNAL AUDIT REPORT TO AUDIT COMMITTEE ON
STATUS OF INTERNAL AUDIT ACTION PLAN POINTS**

SUMMARY OF CURRENT MANAGEMENT ACTIONS AS AT 30.11.2021

SECTION 2

Current Actions	
Due for completion February 2022	1
Due for completion March 2022	2
Due for completion April 2022	1
Due for completion June 2022	2
Due for completion November 2022	2
Total current actions:	8

**INVERCLYDE INTEGRATION JOINT BOARD
INTERNAL AUDIT REPORT TO AUDIT COMMITTEE ON
STATUS OF INTERNAL AUDIT ACTION PLAN POINTS**

CURRENT MANAGEMENT ACTIONS AS AT 30.11.2021

SECTION 3

Action	Owner	Expected Date
IJB Integration Scheme Update – Readiness Review (December 2019)		
<p>Specifying governance arrangements within the Integration Scheme (Amber)</p> <p>The Scottish Government have confirmed IJBs will be required to review their current integration schemes rather than complete a new scheme. The 6 HSCP across Greater Glasgow and Clyde will contribute to a short life working group to review collectively ensuring cross cutting issues are addressed.</p> <p>The Inverclyde HSCP has identified the appropriate officer to contribute to this work. The HSCP are also working closely with Legal Services within the Council and NHS to review our current Integration Scheme.</p>	<p>Interim Chief Officer IJB</p>	<p>31.03.2022</p>
Budgetary Control (March 2020)		
<p>Updating the Inverclyde Integration Joint Board’s (IJB) reserves strategy (Green)</p> <p>The IJB’s Chief Financial Officer will update the IJB’s reserves strategy to fully:</p> <ul style="list-style-type: none"> • reflect the terminology used within the IJB’s annual accounts regarding reserves; and • allow for the revised Integration Scheme. 	<p>Chief Financial Officer</p>	<p>31.03.2022*</p>
IJB Directions (July 2021)		
<p>Reviewing Directions issued by Inverclyde Integration Joint Board (IJB) (Green)</p> <p>The IJB’s Chief Officer will submit to the IJB an annual report on the review of IJB Directions. This report will be scheduled to allow for the timing of related IJB reports such as the progress being made with implementing the IJB’s strategic plan, annual performance report and draft annual accounts and annual governance statement.</p>	<p>Interim Chief Officer</p>	<p>30.06.2022</p>

* These actions are included in the Analysis of Missed Deadlines – Section 4

**INVERCLYDE INTEGRATION JOINT BOARD
INTERNAL AUDIT REPORT TO AUDIT COMMITTEE ON
STATUS OF INTERNAL AUDIT ACTION PLAN POINTS**

CURRENT MANAGEMENT ACTIONS AS AT 30.11.2021

SECTION 3

IJB Performance Management and Reporting Arrangements (July 2021)		
<p>Reporting on progress with implementing the IJB's Strategic Plan (Amber) Management will:</p> <ul style="list-style-type: none"> • Incorporate the IJB annual Strategic Plan progress update within the Annual Performance Report (APR); • Incorporate "RAG" status and reinstate appropriate related coverage of issues and risks into the annual Strategic Plan progress update. 	Head of Finance, Planning & Resources	30.06.2022
<p>Provide a mid-year (April to September) Strategic Plan progress report to IJB that includes RAG status and actions.</p>	Head of Finance, Planning & Resources	30.11.2022
<p>Update the "Health & Social Care" tab of Inverclyde Council's website to include the IJB's Strategic Plan and related documents</p>	Head of Finance, Planning & Resources	28.02.2022
<p>Produce an "easy read" document which covers the progress being made with implementing the IJB's Strategic Plan and would accompany the Annual Performance report.</p>	Head of Finance, Planning & Resources	30.06.2022
<p>Adequacy of the procedure for monitoring implementation of the IJB's Strategic Plan (Green) Management will review and update the IJB Strategic Plan Standard Operating Procedure (SOP) to incorporate all recommendations from Internal Audit.</p>	Head of Finance, Planning & Resources	30.04.2022

* These actions are included in the Analysis of Missed Deadlines – Section 4

**INVERCLYDE INTEGRATION JOINT BOARD
INTERNAL AUDIT REPORT TO AUDIT COMMITTEE ON
STATUS OF INTERNAL AUDIT ACTION PLAN POINTS
ANALYSIS OF MISSED DEADLINES**

SECTION 4

Report	Action	Original Date	Revised Date	Management Comments
Budgetary Control (March 2020)	<p>Updating the Inverclyde Integration Joint Board's (IJB) reserves strategy (Green)</p> <p>The IJB's Chief Financial Officer will update the IJB's reserves strategy to fully:</p> <ul style="list-style-type: none"> • reflect the terminology used within the IJB's annual accounts regarding reserves; and • allow for the revised Integration Scheme. 	<p>30.09.20 31.09.21</p>	<p>31.03.22</p>	<p>Postponed due to delay in revised integration Scheme GGC Board wide. Work has restarted on the schemes and aim to conclude 31 March 2022.</p>

**INVERCLYDE INTEGRATION JOINT BOARD
INTERNAL AUDIT REPORT TO AUDIT COMMITTEE ON
STATUS OF INTERNAL AUDIT ACTION PLAN POINTS**

SUMMARY OF ACTION PLAN POINTS BY AUDIT YEAR

SECTION 5

The following table sets out the total number of agreed actions raised by audit year together with their completion status as at 30 November 2021.

Audit Year	Total Agreed Actions	Total Actions Completed	Total Current Actions Not Yet Due*		
			Red	Amber	Green
2016/2017	3	3	0	0	0
2017/2018	8	8	0	0	0
2018/2019	6	5	0	1	0
2019/2020	6	5	0	0	1
2020/2021	2	2	0	0	0
2021/2022	6	0	0	4	2
Total	31	23	0	5	3

* This part of the table sets out the total number of current actions not yet due at the date of the follow up report.

Report To: Inverclyde Integration Joint Board Audit Committee **Date:** 24 January 2021

Report By: Interim Corporate Director (Chief Officer)
Inverclyde Health & Social Care Partnership **Report No:** IJBA/02/2022/AP

Contact Officer: Andi Priestman **Contact No:** 01475 712251

Subject: STATUS OF EXTERNAL AUDIT ACTION PLANS AT 30 NOVEMBER 2021

1.0 PURPOSE

- 1.1 The purpose of this report is to advise IJB Audit Committee members of the status of current actions from External Audit Action Plans at 30 November 2021.

2.0 SUMMARY

- 2.1 The Chief Internal Auditor co-ordinates follow up reporting on current actions arising from External Audit Action Plans on a monthly basis with regular reporting to the Audit Committee.

- 2.2 There were no actions due for completion by 30 November 2021.

- 2.3 There are 3 current external audit actions being progressed by officers. The current status report is attached at Appendix 1.

**Appendix
1**

3.0 RECOMMENDATIONS

- 3.1 It is recommended that IJB Audit Committee members note the progress to date in relation to the implementation of external audit actions.

Allen Stevenson
Interim Chief Officer Inverclyde Health & Social Care Partnership

4.0 BACKGROUND

- 4.1 External Audit regularly report findings and action plans to relevant IJB Officers and the Audit Committee as part of their annual audit plan.
- 4.2 A follow up process is in place to allow follow up of current external audit actions to be co-ordinated and updated by Internal Audit on a monthly basis with regular reporting to the Audit Committee.

5.0 CURRENT POSITION

- 5.1 There were no actions due for completion by 30 November 2021.
- 5.2 There are 3 current external audit actions being progressed by officers. The current status report is attached at Appendix 1.

**Appendix
1**

6.0 IMPLICATIONS

Finance

- 6.1 The work required to carry out audit follow up will be contained within the existing Internal Audit budget set by Inverclyde Council.

Financial Implications:

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report	Virement From	Other Comments
N/A					

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact	Virement From (If Applicable)	Other Comments
N/A					

Legal

- 6.2 There are no direct legal implications arising from this report.

Human Resources

- 6.3 There are no direct HR implications arising from this report.

Equalities

- 6.4 Has an Equality Impact Assessment been carried out?

	YES
X	NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

6.0 IMPLICATIONS (CONTINUED)

How does this report address our Equality Outcomes?

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	None
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	None
People with protected characteristics feel safe within their communities.	None
People with protected characteristics feel included in the planning and developing of services.	None
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	None
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	None
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	None

6.5 There are no direct clinical or care governance implications arising from this report.

National Wellbeing Outcomes

6.6 How does this report support delivery of the National Wellbeing Outcomes?

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	None
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	None
People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None
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.	None
People using health and social care services are safe from harm.	None

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.	None
Resources are used effectively in the provision of health and social care services.	None

7.0 DIRECTIONS

7.1	Direction Required to Council, Health Board or Both	Direction to:	
		1. No Direction Required	X
		2. Inverclyde Council	
		3. NHS Greater Glasgow & Clyde (GG&C)	
		4. Inverclyde Council and NHS GG&C	

8.0 CONSULTATIONS

8.1 N/A

9.0 LIST OF BACKGROUND PAPERS

9.1 External Audit Reports. Copies available from Chief Internal Auditor.

**INVERCLYDE INTEGRATION JOINT BOARD
INTERNAL AUDIT REPORT TO AUDIT COMMITTEE ON
STATUS OF EXTERNAL AUDIT ACTION PLAN POINTS
AT 30 NOVEMBER 2021**

Summary: Section 1 Summary of Management Actions due for completion by 30/11/2021

There were no actions due for completion by 30 November 2021.

Section 2 Summary of Current Management Actions Plans at 30/11/2021

At 30 November 2021 there were no audit reports delayed due to management not finalising the action plan within agreed timescales.

Section 3 Current Management Actions at 30/11/2021

At 30 November 2021 there were 3 current audit action points.

Section 4 Analysis of Missed Deadlines

At 30 November 2021 there were 2 audit action points where the agreed deadline has been missed.

**INVERCLYDE INTEGRATION JOINT BOARD
INTERNAL AUDIT REPORT TO AUDIT COMMITTEE ON
STATUS OF EXTERNAL AUDIT ACTION PLAN POINTS**

SUMMARY OF MANAGEMENT ACTION PLANS DUE FOR COMPLETION BY 30.11.2021

SECTION 1

No. of Actions Due	No. of Actions Completed	Deadline missed Revised date set*	Deadline missed Revised date to be set*
0			

* These actions are included in the Analysis of Missed Deadlines – Section 4

**INVERCLYDE COUNCIL INTERNAL AUDIT
REPORT TO AUDIT COMMITTEE ON
STATUS OF EXTERNAL AUDIT ACTION PLAN POINTS**

SUMMARY OF CURRENT MANAGEMENT ACTIONS AS AT 30.11.2021

SECTION 2

CURRENT ACTIONS

Month	No of actions
Due for completion March 2022	1
Due for completion July 2022	1
Due for completion March 2023	1
Total Actions	3

**INVERCLYDE COUNCIL INTEGRATION JOINT BOARD
INTERNAL AUDIT REPORT TO AUDIT COMMITTEE ON
STATUS OF EXTERNAL AUDIT ACTION PLAN POINTS**

CURRENT MANAGEMENT ACTIONS AS AT 30.11.2021

SECTION 3

Action	Owner	Expected Date
2019/2020 Annual Audit Report (October 2020)		
Savings Proposals Efficiency savings plans and proposals should continue to be developed to meet anticipated savings targets.	Chief Financial Officer	31.03.2022*
Integration Scheme Review The Scottish Government have confirmed IJBs will be required to review their current integration schemes rather than complete a new scheme. The IJB is working with the other Greater Glasgow & Clyde IJBs around the timing of this review. It is anticipated that the six IJBs (associated with NHS Greater Glasgow and Clyde) will work together with their Council and Health Board Partners to review their schemes with a view to approving and submitting the updated Integration Schemes to the Scottish Government by July 2022.	Chief Officer	31.07.2022
Implementation of Locality Planning Groups This work has inevitably been delayed by Covid-19. However, work is restarting on this now. An initial virtual pilot meeting is due to take place soon for the Port Glasgow Locality Group.	Planning and Performance Manager (HSCP)	31.03.2023*

* See analysis of missed deadlines – Section 4

**INVERCLYDE INTEGRATION JOINT BOARD
INTERNAL AUDIT REPORT TO AUDIT COMMITTEE ON
STATUS OF EXTERNAL AUDIT ACTION PLAN POINTS
ANALYSIS OF MISSED DEADLINES**

SECTION 4

Report	Action	Original Date	Revised Date	Management Comments
<p>2019/2020 Annual Audit Report (October 2020)</p>	<p>Implementation of Locality Planning Groups This work has inevitably been delayed by Covid-19. However, work is restarting on this now. An initial virtual pilot meeting is due to take place soon for the Port Glasgow Locality Group.</p>	<p>31.03.21</p>	<p>31.03.23</p>	<p>Two Locality Planning Groups have been established (Port Glasgow and Inverkip & Wemyss Bay) and last met in September 2021 with meetings scheduled quarterly. By June 2022, an evaluation of these two groups will take place and decision made by October 2022 as to whether to extend to the other four areas (as per the current model) or consider a streamlined approach of establishing two LPGs covering East and West Inverclyde with the six CEGs continuing to meet regularly.</p>
<p>2019/2020 Annual Audit Report (October 2020)</p>	<p>Savings Proposals Efficiency savings plans and proposals should continue to be developed to meet anticipated savings targets.</p>	<p>31.03.21</p>	<p>31.03.22</p>	<p>Work is underway to develop savings / spend to save proposals based on estimated funding positions. In line with previous years this will be firmed up once Scottish Government public sector budgets are confirmed in December and will go to the IJB for consideration and approval between Feb and March 2022.</p>

Report To: Inverclyde Integration Joint Board Audit Committee **Date:** 24 January 2022

Report By: Allen Stevenson
Interim Corporate Director
(Chief Officer)
Inverclyde Health & Social Care Partnership **Report No:**
IJBA/03/2022/CG

Contact Officer: Craig Given **Contact No:** 01475 715381

Subject: IJB RISK APPETITE DEVELOPMENT

1.0 PURPOSE

- 1.1 The purpose of this report is to provide an update to the Audit Committee on the status of the IJB Risk Appetite and its progress.

2.0 SUMMARY

- 2.1 Following recommendations from the June 21 IJB Audit Committee a short life working group has been set up to update the IJB risk appetite. This group has commenced and work has begun on identifying the overarching risks for the IJB and initial development of the risk sub categories. Details of these risks can be seen in the report.

3.0 RECOMMENDATIONS

- 3.1 It is recommended that the Committee:
1. Notes the content of this report;

Allen Stevenson,
Interim Chief Officer

4.0 BACKGROUND

- 4.1 The Integration Joint Board (IJB) Strategic Risk Register covers the risks specific to the IJB and its operations. In addition the Health and Social Care Partnership (HSCP) has an operational register for Social Care and Health Service.
- 4.2 The IJB risk register is formally reviewed by the Inverclyde HSCP Senior Management Team at least twice a year. The IJB Risk Register and any changes then come to the IJB Audit Committee twice each year.
- 4.3 The IJB's approach to risk was last reviewed in August 2016 and at the June 2021 IJB Audit Committee there was a recommendation that a short life working group should be set up to review the IJB's approach to risk.

5.0 IJB RISK APPETITE

- 5.1 As part of the review into the IJB's approach to risk a training session was conducted by our insurance partners Gallagher Bassett in September 2021. This session was worthwhile and gave the IJB a good background into risk and built upon the IJB's existing knowledge. At the end of this session the recommendation was to set up a short life working group to develop the themes of risk directly applicable for the IJB.
- 5.2 The short life working group met in December 2021 to review the current overarching risk categories for the IJB. The group agreed on 3 overarching categories. These are:
- Strategic
 - Financial
 - Reputational

Each of these categories will have sub categories including the following:

Strategic – Inability to deliver the strategic plan, strategic priorities, business interruption / Continuity risk, legal and regulatory risk, service user risk, staffing risks,
Financial – Statutory responsibilities, Financial Governance, Level of Reserves, Financial responsibility
Reputational – engagement with stakeholders, Confidence in Commissioned Services, delivery of poor quality services.

Each of these areas will be developed at our next session and progress will be reported back to a future IJB Audit Committee.

6.0 Next Steps

- 6.1 The next meeting of the short life working group will take place in January 2022. The session will look at developing the sub risks in more detail, the risk appetite of the IJB and the risk appetite statements. Once this is completed this will then be applied to our overall risk register.

7.0 DIRECTIONS

7.1

Direction Required to Council, Health Board or Both	Direction to:	
	1. No Direction Required	X
	2. Inverclyde Council	
	3. NHS Greater Glasgow & Clyde (GG&C)	
	4. Inverclyde Council and NHS GG&C	

8.0 IMPLICATIONS

8.1 FINANCE

There are no direct financial implications within this report. Financial risks are identified in the Registers.

One-off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs / (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From	Other Comments
N/A					

LEGAL

8.2 There are no specific legal implications arising from this report.

HUMAN RESOURCES

8.3 There are no specific human resources implications arising from this report.

EQUALITIES

8.4 There are no equality issues within this report.

8.4.1 Has an Equality Impact Assessment been carried out?

	YES
√	NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

8.4.2 How does this report address our Equality Outcomes

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	All protected characteristic groups are considered as part of the risk register.
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	HSCP would act appropriately to any identified issues regarding discrimination
People with protected characteristics feel safe within their communities.	All service ensure that people using the service feel safe.

People with protected characteristics feel included in the planning and developing of services.	Service user consultation is an essential element of all services
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	HSCP complete holistic assessment to ensure individual need is identified.
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	Currently being addressed at the Learning Disability programme Board.
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	Positive attitude is promoted throughout Inverclyde.

CLINICAL OR CARE GOVERNANCE IMPLICATIONS

8.5 There are no governance issues within this report.

NATIONAL WELLBEING OUTCOMES

8.6 How does this report support delivery of the National Wellbeing Outcomes

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	None
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	Our continue focus on Home 1st approach ensure frail and elderly people can remain at home longer.
People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None
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.	None
People using health and social care services are safe from harm.	Provider substantiality payments ensure our most vulnerable service users receive support during the pandemic.
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.	None
Resources are used effectively in the provision of health and social care services.	None

9.0 CONSULTATION

9.1 This report was prepared by the Acting Head of Strategy & Support Services in consultation with other members of the Senior Management Team.

Report To:	Inverclyde Integration Joint Board Audit Committee	Date: 24 January 2022
Report By:	Allen Stevenson Interim Corporate Director (Chief Officer) Inverclyde Health & Social Care Partnership	Report No: IJBA/04/2022/CG
Contact Officer:	Craig Given Chief Financial Officer	Contact No: 01475 715381
Subject:	IJB RISK REGISTER	

1.0 PURPOSE

- 1.1 The purpose of this report is to provide an update to the Audit Committee on the status of the IJB Strategic Risk Register,

2.0 SUMMARY

- 2.1 The process for reporting risks across the HSCP and IJB has been summarised to highlight what is reported to the IJB and when.
- 2.2 The IJB Risk Register is fully reviewed at least twice a year by the Inverclyde HSCP Senior Management Team with any recommended changes taken to this Committee for approval.

3.0 RECOMMENDATIONS

- 3.1 It is recommended that the Committee:
1. Notes the content of this report;

**Allen Stevenson,
Interim Chief Officer**

4.0 BACKGROUND

4.1 The Integration Joint Board (IJB) Strategic Risk Register covers the risks specific to the IJB and its operations. In addition the Health and Social Care Partnership (HSCP) has an operational register for Social Care and Health Service operations and a Project Risk Register for the new Greenock Health Centre Capital Project.

4.2 The IJB risk register is formally reviewed by the Inverclyde HSCP Senior Management Team at least twice a year, the last review took place on 21 June 2021. The IJB Risk Register and any changes then come to the IJB Audit Committee twice each year.

5.0 IJB STRATEGIC RISK REGISTER

5.1 The updated IJB Strategic Risk Register is enclosed at Appendix A. Changes since the last report are:

- Risk 7 – Contingency Plans – This is a new risk add to the register to reflect the requirement to maintain crucial services during the emergence of the new Omicron variant.
- Risk 8 – Performance Management Information
 - updated narrative in the Additional Controls column
 - The risk score has been decrease as Annual performance management info has been updated and the Annual performance report has been delivered and 6 monthly reports will now be delivered.
- Risk 9 – Locality Planning
 - updated narrative in the Additional Controls column and risk has reduced as these planning events are now starting to take place again.

6.0 DIRECTIONS

6.1	Direction Required to Council, Health Board or Both	Direction to:	
		1. No Direction Required	X
		2. Inverclyde Council	
		3. NHS Greater Glasgow & Clyde (GG&C)	
		4. Inverclyde Council and NHS GG&C	

7.0 IMPLICATIONS

FINANCE

8.1 There are no direct financial implications within this report. Financial risks are identified in the Registers.

One-off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs / (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From	Other Comments
N/A					

LEGAL

8.2 There are no specific legal implications arising from this report.

HUMAN RESOURCES

8.3 There are no specific human resources implications arising from this report.

EQUALITIES

8.4 There are no equality issues within this report.

8.4.1 Has an Equality Impact Assessment been carried out?

√

YES

NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

8.4.2 How does this report address our Equality Outcomes

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	All protected characteristic groups are considered as part of the risk register.
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	HSCP would act appropriately to any identified issues regarding discrimination
People with protected characteristics feel safe within their communities.	All service ensure that people using the service feel safe.
People with protected characteristics feel included in the planning and developing of services.	Service user consultation is an essential element of all services
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	HSCP complete holistic assessment to ensure individual need is identified.
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	Currently being addressed at the Learning Disability programme Board.
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	Positive attitude is promoted throughout Inverclyde.

8.5 CLINICAL OR CARE GOVERNANCE IMPLICATIONS

There are no governance issues within this report.

8.6 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	None
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	Our continue focus on Home 1st approach ensure frail and elderly people can remain at home longer.
People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None
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.	None
People using health and social care services are safe from harm.	Provider substantiality payments ensure our most vulnerable service users receive support during the pandemic.
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.	None
Resources are used effectively in the provision of health and social care services.	None

9.0 CONSULTATION

9.1 This report was prepared by the Acting Head of Strategy & Support Services in consultation with other members of the Senior Management Team.

IJB RISK REGISTER

Organisation	Inverclyde Integration Joint Board
Date Last Reviewed by IJB/Audit Committee	23/06/2020
Date Last Reviewed by Officers	16/12/2021

Risk No	*Description of RISK Concern (x,y,z)	Current Controls	IMPACT Rating (A)	LTHOOD Rating (B)	Risk Score	Change in Score	Additional Controls/Mitigating Actions & Time Frames with End Dates	Who is Responsible? (name or title)
Governance								
1	<p>Effective Governance Risk through partner organisational restructures causing additional governance complexity, not having the right skills mix on the IJB, lack of clarity of role & ability to make decisions, lack of effective horizon scanning, inability to review the performance of Board, poor communications, or perceived lack of accountability by the public.</p> <p>Potential Consequences: Poor decision making, lack of critical skills lead to 'blind spots' or unanticipated risks, partners disengage from the IJB, dysfunctional behaviours, fail to deliver the strategic plan.</p>	<p>1. IJB themed development sessions carried out throughout the year to update members on key issues</p> <p>2. Code of Conduct for members</p> <p>3. Standards Officer appointed</p> <p>4. Chief Officer is a member of both Partner CMTs & has the opportunity to influence any further governance mechanism changes</p> <p>5. Regularly planning/liaison meetings between Chief Officer and Chair/Vice Chair</p> <p>6. Internal and External Audit reviews of governance arrangements</p> <p>7. IJB Self Assessment</p> <p>8. Clinical and Care Governance arrangements and staffing</p> <p>9. Development/induction programme in place for IJB members</p>	3	3	9	-3	Robust governance arrangements are in place IJB, SPG, Audit Committee all meet regularly.	Chief Officer
2	<p>Maintaining Effective Communication and Relationships with Acute Partners During Transformational Change Risk due to partnership breakdown caused by different priorities & pressures resulting from transformational change agenda leading to loss of trust or effective communication.</p> <p>Potential Consequences: relationship breakdown, dysfunctional working relationships, cannot affect or influence change or priorities, resources skewed towards acute care away from preventative, unable to deliver strategic plan.</p>	<p>1. HSCP/Acute joint working groups - regular interface meetings looking at risks, lessons learned, joint problem solving</p> <p>2. CO on HB CMT along with Acute Colleagues</p> <p>3. Developing commissioning plans in partnership with Acute colleagues</p> <p>4. Market Facilitation Statement</p> <p>5. Early referral system and clear planning in place for each service user/patient</p> <p>6. Market Facilitation Plan in place</p>	3	3	9		<p>Ongoing monitoring of the impact of the transformational plan and unscheduled care changes supporting delayed discharge and bed day reduction and their impact on the relationships with Acute.</p> <p>While this has been made more challenging by Covid 19 and timelines for some changes have had to be extended effective communication has continued to take place to maintain the existing positive relationships between partners.</p>	Head of Health and Community Care
Resources & Performance								
Risk No	*Description of RISK Concern (x,y,z)	Current Controls	IMPACT	LTHOOD	Risk Score		Additional Controls/Mitigating Actions & Time Frames with End Dates	Who is Responsible? (name or title)

3	<p>Financial Sustainability / Constraints / Resource Allocation Risk due to increased demand for services, potentially not aligning budget to priorities, and/or anticipated future funding cuts from our funding partners which leave the IJB with insufficient resources to meet national & local outcomes & to deliver Strategic Plan Objectives. Risk of overspending on MH Budget due to high agency costs as a result of difficulties recruiting to specialist roles. Also risk of overspending on Children and Families based on current projectinos</p> <p>Potential Consequences: IJB unable to deliver Strategic Plan objectives, reputational damage, dispute with Partners, needs not met, risk of overspend on Integrated Budget.</p>	<p><u>Resources/Finance</u> 1. Strategic Plan 2. Due Diligence work 3. Close working with Council & Health when preparing budget plans 4. Regular budget monitoring reporting to the IJB 5. Regular budget reports and meetings with budget holders 6. Regular Heads of Service Finance meetings 7. Close working with other local Authority and GG&C Finance colleagues and HSCP CFOs to deliver a whole system approach to financial planning and delivery 8. Medium to Long Term Finance Plan</p>	4	3	12	<p>Horizon scanning - ongoing discussions with Council and Health Board Finance Officers, national CFO network and Scottish Government. SMT discussions to develop a recovery plan going forward to help reduce future funding pressure. A staffing model that includes an Advanced Nurse Practitioner team is being progressed within Mental Health Services which will absorb some of the workload that has traditionally fallen within the remit of medical staff and be instrumental in reducing reliance on agency doctors and associated costs. It will deliver greater continuity of care for patients and provide career development for staff. A spend to save proposal is also being developed in Children & Families.</p>	Head of Finance, Planning & Resources
4	<p>Financial Implications of Responding to Covid-19 Risk due to increased demand for services, changing service delivery models and potential shortfall in Scottish Government funding to meet costs incurred.</p>	<p><u>Resources/Finance</u> 1. Mobilisation Plan on which all costs are tracked 2. Regular engagement with Scottish Government through provision of regular mobilisation plan updates 3. Governance in place for authorisation and monitoring of costs 4. Active engagement with third and independent sectors in relation to their costs and sustainability 5. Review of any savings expected to be undeliverable in year 6. Regular reporting to the IJB 7. Close working with other local Authority and GG&C Finance colleagues and HSCP CFOs to deliver a whole system approach to financial planning and delivery</p>	4	3	12	<p>Horizon scanning - ongoing discussions with Scottish Government, Health Board and Council Finance Officers, other GG&C CFOs, national CFO network and Scottish Government.</p> <p>For 21/22 we expect further costs of an estimated £7.8m. We expect this to be also funded from Scottish Government via funding already received and the Local Mobilisation Plan.</p> <p>Officers have set aside a small staffing contingency within their EMRs in 21/22 to cover a potential shortfall in funding for short term covered posts if the pandemic is over while some of these contracts are still in place. Risk has increased in light of recent projections and current pressure on the budgets. Covid has created a further demand on services which is likely to continue into 22/23 with no further Scottish Government funding being identified at present to offset. A future recovery plan will be required.</p>	Head of Finance, Planning & Resources

Risk No	*Description of RISK Concern (x,y,z)	Current Controls	IMPACT Rating (A)	L'HOOD Rating (B)	Risk Score (A*B)	Additional Controls/Mitigating Actions & Time Frames with End Dates	Who is Responsible? (name or title)
5	<p>Workforce Sustainability and Implementation of the Workforce Plan Risk in not delivering the Workforce Plan objectives. Risks within specific operational service areas of recruitment gaps for suitably qualified staff leading to inability of the IJB to deliver its Strategic Objectives</p> <p>Potential Consequences: Don't attract or retain the right people, don't have an engaged & resilient workforce, service user needs not met, strategic plan not delivered, & reputational damage.</p>	<p>Resources/Workforce 1. Workforce Plan and quarterly progress reporting 2. EKSF, TURAs monitoring 3. Training budgets 4. Workforce Planning 5. Succession Planning for Local Authority Staff 6. Staff Governance Group & reports 7. Update papers to IJB on specific issues in mental health, review of roles within MDT being undertaken.</p>	4	3	12	<p>Difficulties in respect of recruitment to specialist roles, using agency staff short term to address this Ongoing difficulties in recruiting to specialist roles despite repeated advertising, using agency staff in short term to address this. Review roles within MDT to include non-medical prescribers. While some recruitment was initially put on hold as a result of Covid-19 posts are now being backfilled again on a needs basis. In addition the pandemic and public focus on key services led to the HSCP running a very successful home care recruitment campaign locally and volunteering numbers have increased significantly too.</p>	Chief Officer
6	<p>Home Care Increased demand on rehabilitation services due to other areas of provision across GGC not being operational or limited operationally.</p>	<p>1. Monitor increasing demand and impact on core work. 2. Triage and prioritise work.</p>	3	5	15	<p>Funding for new system identified and currently service are working with procurement to advertise.</p>	Head of Health and Community Care
7	<p>Contingency Plans Services maintain contingency plans to maintain crucial services during current increase in Omicron Community Transmission. Priority will be internal 24/7 supported living and Homecare Service</p>	<p>Daily testing of front line staff Full stocks of PPE and LFDs with established procurement lines Implementation of Public Health & Scottish Government Guidelines LRMT Two x weekly Care Home /Community Services huddle Multidisciplinary meeting Weekly Care Home Mangers meeting</p>	3	4	12	<p>Daily updates on service position relating to staffing levels. All front line Health & Social Care staff undertaking daily LFDs. Contingency plans in place. Encouragement of all staff to get a covid booster. Support to care homes – all at a green status as of 15/12/21</p>	Head of Health and Community Care
8	<p>Performance Management Information Risk due to lack of quality, timeous performance information systems to inform strategic & operational planning & decision making. Potential Consequences: Misallocate resources to non-priority areas, lack of focus, decisions based on anecdotal thinking or biased perspectives, & community needs not met.</p>	<p>Performance. 1. Performance management infrastructure and reporting cycle 2. Regular financial monitoring reports showing performance against budget and projected outturns 3. Locality planning arrangements 4. Robust budget planning processes 5. Quarterly Performance Reviews 6. Data repository regularly updated 7. Quality strategy and self evaluation processes 8. Regular review of Performance reporting frameworks</p>	3	3	9	<p>Annual performance Report delivered and 6 monthly reviews will be implemented</p>	Head of Finance, Planning & Resources
Strategy							

9	<p>Locality Planning to Better Understand the Needs of the Community Risk of failure to effectively deliver locality planning.</p> <p>Potential consequences: Poor quality decision making, don't address health inequalities or understand root causes of why they persist, lack of understanding about future needs & service demands, unable to allocate resources appropriately to deliver the strategic plan, high levels of disease, drug & alcohol misuse consume ever more resources.</p>	<p>1. Community Engagement led by Council CLD partners 2. Health Improvement Programmes 3. Locality planning to enhance local targeting of services 4. Strategic Planning Group 5. Equalities Outcomes as part of the Strategic Plan 6. Strategic Needs Assessment Work which is advanced at a community and care group level 7. The above informs work across care groups and partnership working</p>	3	6	<p>Communication and engagement groups meeting virtually. Port Glasgow locality group meeting and Inverkip and Wemyss Bay now met</p>	<p>Planning & Performance Manager/ Head of Finance, Planning & Resources</p>
---	---	--	---	---	---	---

Key: see diagram

Requires active management.

High impact/high likelihood: risk requires active management to manage down and maintain exposure at an acceptable level.

Contingency plans.

A robust contingency plan may suffice together with early warning mechanisms to detect any deviation from plan.

Good Housekeeping.

May require some risk mitigation to reduce likelihood if this can be done cost effectively, but good housekeeping to ensure the impact remains low should be adequate. Reassess frequently to ensure conditions remain the same.

Review periodically.

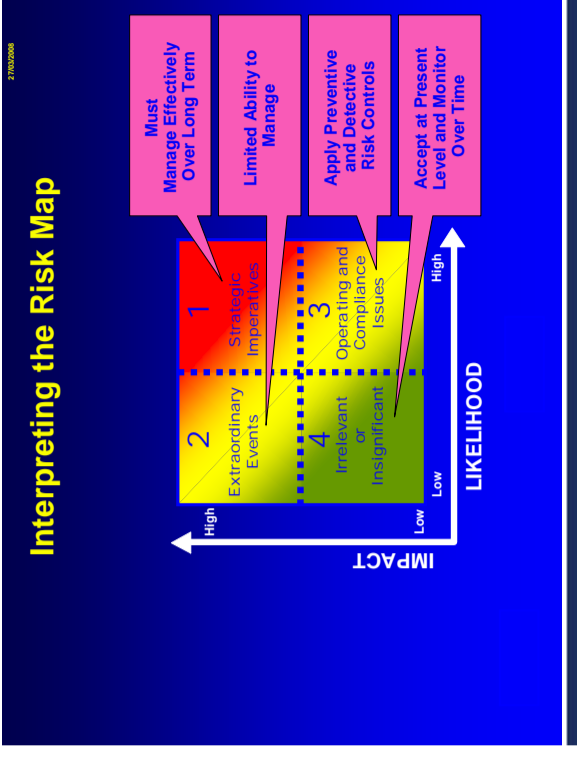
Risks are unlikely to require mitigating actions but status should be reviewed frequently to ensure conditions have not changed.

Very High
(16-25)

High
(10-15)

Medium
(5-9)

Low
(1-4)



Risk Impact	1	2	3	4	5
	Insignificant	Minor	Moderate	Major	Catastrophic
Financial	<£100k	£100k-£250k	£250k-£500k	£500k-£1,000k	£1,000k>
Reputation	Individual negative perception	Local negative perception	Intra industry or regional negative perception	National negative perception	Sustained national negative perception
Legal and Regulatory	Minor regulatory or contractual breach resulting in no compensation or loss	Breach of legislation or code resulting in a compensation award	Regulatory censure or action, significant contractual breach	Breach of regulation or legislation with severe costs/fine	Public fines and censure, regulatory veto on projects/ withdrawal of funding. Major adverse corporate litigation
Operational/ Continuity	An individual service or process failure	Minor problems in specific areas of service delivery	Impact on specific customer group or process	Widespread problems in business operations	Major service of process failure impacting majority or major customer groups
Likelihood					
	1	2	3	4	5
	Rare	Unlikely	Possible	Probable	Almost Certain
Definition	Not likely to happen in the next 3 years	Unlikely to happen in the next 3 years	Possible to occur in the next 3 years	Likely to occur in the next year	Very likely to occur in the next 6 months

