

Municipal Buildings, Greenock PA15 1LY

Ref: DS

Date: 11 March 2022

A meeting of the Inverciyde Integration Joint Board Audit Committee will be held on Monday 21 March 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.

Information relating to the recording of meetings can be found at the end of this notice.

IAIN STRACHAN Head of Legal & Democratic Services

BUS	INESS	
1.	Apologies, Substitutions and Declarations of Interest	Page
ITEN	IS FOR ACTION:	
2.	Minute of Meeting of IJB Audit Committee of 24 January 2022	Р
3.	IJB Audit Committee Rolling Annual Workplan	Р
4.	Internal Audit Progress Report – 20 December 2021 to 25 February 2022 Report by Interim Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership	Р
5.	Status of External Audit Action Plans at 31 January 2022 Report by Interim Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership	P

6.	Internal Audit – Annual Strategy and Plan 2022-2023 Report by Interim Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership	P
7.	IJB Best Value Statement 2021/22 Report by Interim Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership	P
8.	Inverclyde Integration Joint Board – Directions Update March 2022 Report by Interim Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership	P
9.	External Audit – Proposed Audit Fee 2021/22 Report by Interim Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership	P

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

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

INVERCLYDE INTEGRATION JOINT BOARD AUDIT COMMITTEE - 24 JANUARY 2022

Inverciyde Integration Joint Board Audit Committee

Monday 24 January 2022 at 1.00pm

Present:

Voting Members:

Councillor Elizabeth Robertson (Chair) Inverclyde Council
Councillor Luciano Rebecchi Inverclyde Council

Simon Carr (Acting Vice Chair) 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

Work Officer, Inverclyde Council

Alan Best Interim Head of Health & Community Care,

Inverclyde Health & Social Care Partnership

Craig Given Chief Finance Officer, Inverclyde Health &

Social Care Partnership

Andi Priestman

Vicky Pollock

Diane Sweeney

Lindsay Carrick

Andrina Hunter

Chief Internal Auditor, Inverclyde Council

Legal Services Manager, Inverclyde Council

Senior Committee Officer, Inverclyde Council

Service Manager, Corporate Policy, Planning &

Performance, Inverclyde Council

Chair: Councillor Robertson presided.

The meeting took place via video-conference.

Prior to the commencement of business the Chair advised that Ms Paula Speirs had resigned from the IIJB and IIJB Audit Committee and that Mr Simon Carr would act as Vice Chair at this meeting. The Chair acknowledged the valuable contribution Ms Speirs had made to the IIJB Audit Committee and that she would be missed.

1 Apologies, Substitutions and Declarations of Interest

1

No apologies for absence or declarations of interest were intimated.

2 Minute of Meeting of IJB Audit Committee of 20 September 2021

2

There was submitted the Minute of the Inverclyde Integration Joint Board Audit Committee of 20 September 2021.

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

INVERCLYDE INTEGRATION JOINT BOARD AUDIT COMMITTEE - 24 JANUARY 2022

Decided: that the Minute be agreed.

3 Minute of Meeting of IJB Audit Committee of 29 November 2021

3

There was submitted the Minute of the Inverclyde Integration Joint Board Audit Committee of 29 November 2021.

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

Decided: that the Minute be agreed.

4 IJB Audit Committee Rolling Annual Workplan

4

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

Decided: that the Rolling Annual Workplan be noted.

5 Internal Audit Progress Report – 30 August to 17 December 2021

5

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 30 August to 17 December 2021.

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

- 1) there was one Internal Audit report finalised since the last Audit Committee meeting in September 2021;
- 2) that the Audit Plan for 2021/22 is now complete;
- 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, all as detailed in appendix 1 to the report;
- 4) there have been no Internal Audit Reports relevant to the IJB reported to Inverclyde Council since the last Audit Committee meeting in September 2021;
- 5) there have been 3 Internal Audit Reports relevant to the IJB reported to NHS GGC since the Audit Committee meeting in September 2021;
- 6) 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.

The Board sought reassurance that they would be provided with an update on the issues identified in the Internal Audit Report 'IJB Performance Management and Reporting Arrangements' (the Report), and referred to the 30 November 2022 deadline for this as noted at paragraph 5.6. Ms Priestman advised that an update would be provided. The Board enquired if the Report had been issued yet and Ms Priestman advised that it had been issued to officers and External Auditors with a summary being contained in this report. Ms Priestman advised that she would issue a copy of the Report to IIJB Audit Committee Members.

The Board welcomed the recommendations detailed at paragraph 5.5 to align performance reports, commenting that the volume and spread of data could be difficult to assimilate. There was discussion on the outcome of incorporating reports, with the general consensus being that reporting will be streamlined. Ms Hunter advised that a new performance management system, Pentana, had been purchased by Inverclyde Council and Inverclyde HSCP which will assist with this.

Decided: that the progress made by Internal Audit in the period 30 August to 17 December 2021 be noted.

6 Status of External Audit Action Plans at 30 November 2021

6

There was submitted a report by the Interim Chief Officer, Inverclyde Integration Joint Board on the status of current actions from External Audit Action Plans at 30 November 2021.

The report was presented by Ms Priestman and advised as follows:

In relation to External Audit follow up, there were no actions due for completion by 30 November 2021. There are 3 actions being progressed by officers, all as detailed in appendix 1 to the report.

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

7 IJB Risk Appetite Development

7

There was submitted a report by the Interim Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership providing an update on the status of the IJB Risk Appetite and its progress.

The report was presented by Mr Given and detailed the work undertaken to date by the short life working group which was set up following the recommendation of the IJB Audit Committee in June 2021 to review the IJB's approach to risk. The group agreed on three overarching risk categories: (1) Strategic, (2) Financial and (3) Reputational.

The Board enquired if there was a mechanism by which identified risks might be tested. Ms Priestman advised that a review of the new risk management arrangements could be included in the Audit Plan, and that feedback could be provided on this. The Chair requested that this be added into the process.

The Board enquired if there were plans to replace Ms Speirs on the short life working group, and Mr Stevenson advised that a replacement for Ms Speirs was actively being recruited.

Decided:

- (1) that the contents of the report be noted; and
- (2) that the testing of identified risks be included in the Audit Plan with appropriate feedback to IIJB Audit Committee on this matter.

8 IJB Risk Register

There was submitted a report by the Interim Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership (1) providing an update on the status of the IJB Strategic Risk Register, and (2) appending the most recent Risk Register reviewed by officers on 16 December 2021.

The report was presented by Mr Given and noted that the Register is reviewed twice a year and advised of changes to Risk 7 (Contingency Planning), 8 (Performance Management Information) and 9 (Locality Planning) since this matter was previously reported.

The Board queried how new risks are identified and Mr Given provided an overview of the process, with Mr Stevenson advising on the checks and balances procedures before a new risk is added to the Register.

The Board referred to the appended Register and noted that within the 'Additional Controls/Mitigating Actions & Time Frames With End Dates' column there were very few either 'end dates' or 'ongoing' timescales recorded and Mr Given agreed to review this. Ms Priestman added that the new Pentana system, which has a specific risk module, will provide a more robust reporting framework.

INVERCLYDE INTEGRATION JOINT BOARD AUDIT COMMITTEE - 24 JANUARY 2022

The Board referred to the section 'Locality Planning to Better Understand the Needs of the Community' and sought clarification on the number of Locality Planning Groups (LPGs). Mr Stevenson advised on the intention for there to be 6 LPGs, and that at present 2 had been formed and had met. The 2 LPGs were scheduled to meet again in March and afterwards there would be a review of progress with the remaining LPGs commencing on a stepped basis. He further advised that 6 Communication Groups had been established. The Board asked for the remaining LPGs established and the Chair requested that an update report be provided on this matter. Mr Stevenson agreed that a report will be submitted to the IIJB when appropriate.

The Board questioned if the 'Current Controls' and 'Additional Controls' noted for item 6 (Home Care) were robust enough. Mr Best advised that recruitment of staff and service development was continually monitored, with appropriate actions taken when required.

The Board asked if there was any intention to supply staff with body cameras, and Mr Stevenson advised there were no current plans to issue staff with cameras, but there were control mechanisms in place to address any concerns that staff may have.

Decided:

- (1) that the contents of the report be noted; and
- (2) that it be remitted to officers to submit a further report on the progress of the Locality Planning Groups.

IJB Audit Committee Rolling Annual Workplan – 21 March 2022

Date	Reports	Lead Officer
21 March 2022	Internal Audit Progress Report February 2022	Chief Internal Auditor
	Status of External Audit Action Plans to 31 January 2022	Chief Internal Auditor
	Internal Audit Annual Audit Plan 2022/23	Chief Internal Auditor
	External Audit Annual Audit Plan 2021/22	External Audit
	Best Value Annual Report	Chief Finance Officer
	Directions Update	Legal Services Manager (Procurement, Conveyancing & Information Governance)
September 2022	Internal Audit Annual Report and Assurance Statement 2021/22	Chief Internal Auditor
	Internal Audit Progress Report	Chief Internal Auditor
	Status of External Audit Action Plans to 31 July 2022	Chief Internal Auditor
	Directions Update	Legal Services Manager (Procurement, Conveyancing & Information Governance) (Min. ref. – IIJB – 21 09 2020 – 86(3))
	Review of Risk Register	Interim Chief Officer (Min. ref IIJB AC - 21.06.2021 - 22(4))
January 2023	Internal Audit Progress Report to December 2022	Chief Internal Auditor
	Status of External Audit Action Plans to 30 November 2022	Chief Internal Auditor



AGENDA ITEM NO: 4

Report No:

Report To: Inverclyde Integration Joint

Board Audit Committee

Date: 21 March 2022

IJBA/05/2022/AP

Report By: Interim Chief Officer

Inverclyde Integration Joint

Board

Contact Officer: Andi Priestman Contact No: 01475 712251

Subject: INTERNAL AUDIT PROGRESS REPORT - 20 DECEMBER 2021 TO 25 FEBRUARY

2022

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 20 December 2021 and 25 February 2022 that may have an impact upon the IJB's control environment.

2.0 SUMMARY

- 2.1 The audit plan for 2021/2022 is complete.
- 2.2 In relation to Internal Audit follow up, there were no actions due for completion by 31 Appendix January 2022. There are 8 actions being progressed by officers. The current status 1 report is attached at Appendix 1.
- 2.3 In addition, since the last Audit Committee meeting in January 2022, Internal Audit Reports reported to Inverclyde Council and NHSGGC which are relevant to the IJB are set out at paragraphs 5.3 to 5.6 of the report.
- 2.4 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 20 December 2021 to 25 February 2022.

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 <i>isolated</i> areas of control weakness were identified which, whilst not systemic, put some
	organisation objectives at risk.
Requires	In our opinion systemic and/or material control
improvement	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 The audit plan for 2021/2022 is complete.
- 5.2 In relation to Internal Audit follow up, there were no actions due for completion by 31 January 2022. The current status report is attached at Appendix 1.

5.3 Inverclyde Council – Internal Audit Progress Report Summary

Since the last Audit Committee meeting in January 2022 there were no Internal Audit Reports reported to Inverclyde Council which are relevant to the IJB.

5.4 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.

5.5 NHSGGC - Internal Audit Progress Report Summary

Since the last Audit Committee meeting in January 2022, there were no Internal Audit reports presented to NHSGGC Audit Committee.

5.6 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 Inverciyde 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)

,	9	(04190)			
Cost Centre	Budget Heading	With Effect	Annual Net Impact	Virement From (If	Other Comments
		from		Applicable)	
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
1	None
protected characteristic groups, can access HSCP	
services.	
Discrimination faced by people covered by the	None
protected characteristics across HSCP services is	
reduced if not eliminated.	
People with protected characteristics feel safe within	None
their communities.	
People with protected characteristics feel included in	None
the planning and developing of services.	
HSCP staff understand the needs of people with	None
different protected characteristic and promote	
diversity in the work that they do.	
Opportunities to support Learning Disability service	None
users experiencing gender based violence are	
maximised.	
Positive attitudes towards the resettled refugee	None
community in Inverclyde are promoted.	

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	None
health and social care services.	

7.0 DIRECTIONS

7.1		Direction to:	
		No Direction Required	Χ
	Direction Required		
	to Council, Health	3. NHS Greater Glasgow & Clyde (GG&C)	
	Board or Both	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.

Summary: Section 1 Summary of Management Actions due for completion by 31/01/2022

There were no actions due for completion by 31 January 2022.

Section 2 Summary of Current Management Actions Plans at 31/01/2022

At 31 January 2022 there were no audit reports delayed due to management not finalising the action plan within agreed timescales.

Section 3 Current Management Actions at 31/01/2022

At 31 January 2022 there were 8 current audit action points.

Section 4 Analysis of Missed Deadlines

At 31 January 2022 there was one audit action point where the agreed deadline had been missed.

Section 5 Summary of Audit Action Points By Audit Year

SUMMARY OF MANAGEMENT ACTION PLANS DUE FOR COMPLETION BY 31.01.2022

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

^{*} These actions are included in the Analysis of Missed Deadlines - Section 4

SUMMARY OF CURRENT MANAGEMENT ACTIONS AS AT 31.01.2022

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

CURRENT MANAGEMENT ACTIONS AS AT 31.01.2022

Action	Owner	Expected Date
IJB Integration Scheme Update – Readiness Review (December 1988)	ecember 2019)	_
Specifying governance arrangements within the		31.07.2022
Integration Scheme (Amber)	Officer IJB	
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.		
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. Budgetary Control (March 2020)		
Updating the Invercive Integration Joint Board's	Chief Financial	31.08.2022*
(IJB) reserves strategy (Green)	Officer	31.00.2022
The IJB's Chief Financial Officer will update the IJB's	G	
reserves strategy to fully:		
reflect the terminology used within the IJB's annual		
accounts regarding reserves; and		
allow for the revised Integration Scheme. I.B. Directions (Integration Scheme)		
IJB Directions (July 2021) Reviewing Directions issued by Inverciyde Integration	Interim Chief	30.06.2022
Joint Board (IJB) (Green)	Officer	30.06.2022
The IJB's Chief Officer will submit to the IJB an annual	Officer	
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.		

^{*} These actions are included in the Analysis of Missed Deadlines - Section 4

CURRENT MANAGEMENT ACTIONS AS AT 31.01.2022

IJB Performance Management and Reporting Arrangem	IJB Performance Management and Reporting Arrangements (July 2021)				
Reporting on progress with implementing the IJB's Strategic Plan (Amber) Management will: 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.		30.06.2022			
Provide a mid-year (April to September) Strategic Plan progress report to IJB that includes RAG status and actions.	Head of Finance, Planning & Resources	30.11.2022			
Update the "Health & Social Care" tab of Inverclyde Council's website to include the IJB's Strategic Plan and related documents	Head of Finance, Planning & Resources	28.02.2022			
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.	Planning &	30.06.2022			
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.	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

Report	Action	Original Date	Revised Date	Management Comments
Budgetary Control (March 2020)	Updating the Inverclyde Integration Joint Board's (IJB) reserves strategy (Green)	30.09.20 31.09.21	31.08.22	Postponed due to delay in revised integration Scheme GGC Board wide. Work has restarted on the schemes and
	The IJB's Chief Financial Officer will update the IJB's reserves strategy to fully:			aim to conclude 31 July 2022.
	 reflect the terminology used within the IJB's annual accounts regarding 			
	reserves; and			
	 allow for the revised Integration 			
	Scheme.			

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 31 January 2022.

	Total	Total	Total Current Actions Not Yet Due*		
Audit Year	Agreed Actions	Actions Completed	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.



AGENDA ITEM NO: 5

Report To: Inverclyde Integration Joint

Board Audit Committee

Date: 21 March 2022

Report No: IJBA/06/2022/AP

Report By: Interim Corporate Director

(Chief Officer)

Inverclyde Health & Social

Care Partnership

Contact Officer: Andi Priestman Contact No: 01475 712251

Subject: STATUS OF EXTERNAL AUDIT ACTION PLANS AT 31 JANUARY 2022

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 31 January 2022.

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 31 January 2022.
- 2.3 There are 3 current external audit actions being progressed by officers. The current **Appendix** status report is attached at 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 31 January 2022.
- 5.2 There are 3 current external audit actions being progressed by officers. The current status report is attached at 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	None
services.	
	NI NI
Discrimination faced by people covered by the	None
protected characteristics across HSCP services is	
reduced if not eliminated.	
People with protected characteristics feel safe within	None
their communities.	
People with protected characteristics feel included in	None
the planning and developing of services.	
HSCP staff understand the needs of people with	None
different protected characteristic and promote	
diversity in the work that they do.	
Opportunities to support Learning Disability service	None
users experiencing gender based violence are	
maximised.	
Positive attitudes towards the resettled refugee	None
community in Inverclyde are promoted.	

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 to:	
		No Direction Required	Χ
	Direction Required		
	to Council, Health	3. NHS Greater Glasgow & Clyde (GG&C)	
	Board or Both	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.

Summary: Section 1 Summary of Management Actions due for completion by 31/01/2022

There were no actions due for completion by 31 January 2022.

Section 2 Summary of Current Management Actions Plans at 31/01/2022

At 31 January 2022 there were no audit reports delayed due to management not finalising the action plan within agreed timescales.

Section 3 Current Management Actions at 31/01/2022

At 31 January 2022 there were 3 current audit action points.

Section 4 Analysis of Missed Deadlines

At 31 January 2022 there were 2 audit action points where the agreed deadline has been missed.

SUMMARY OF MANAGEMENT ACTION PLANS DUE FOR COMPLETION BY 31.01.2022

No. of Actions	No. of Actions	Deadline missed	Deadline missed
Due	Completed	Revised date set*	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 31.01.2022

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

CURRENT MANAGEMENT ACTIONS AS AT 31.01.2022

Action	Owner	Expected Date
2019/2020 Annual Audit Report (October 2020)		
Savings Proposals	Chief Financial	31.03.2022*
Efficiency savings plans and proposals should continue to	Officer	
be developed to meet anticipated savings targets.		
Integration Scheme Review	Chief Officer	31.07.2022
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.		
Implementation of Locality Planning Groups	Planning and	31.03.2023*
This work has inevitably been delayed by Covid-19.	Performance	
However, work is restarting on this now. An initial virtual	Manager (HSCP)	
pilot meeting is due to take place soon for the Port		
Glasgow Locality Group.		

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

		Original	Revised	
Report	Action	Date	Date	Management Comments
2019/2020 Annual	Implementation of Locality Planning	31.03.21	31.03.23	Two Locality Planning Groups have been
Audit Report	Groups			established (Port Glasgow and Inverkip &
(October 2020)	This work has inevitably been delayed by			Wemyss Bay) and last met in September
	Covid-19. However, work is restarting on			2021 with meetings scheduled quarterly.
	this now. An initial virtual pilot meeting is			By June 2022, an evaluation of these two
	due to take place soon for the Port Glasgow			groups will take place and decision made
	Locality Group.			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.
2019/2020 Annual	Savings Proposals	31.03.21	31.03.22	Work is underway to develop savings /
Audit Report	Efficiency savings plans and proposals			spend to save proposals based on
(October 2020)	should continue to be developed to meet			estimated funding positions. In line with
	anticipated savings targets.			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.



AGENDA ITEM NO: 6

Report To: Inverciyde Integration Joint Board Date: 21 March 2022

Audit Committee

Report By: Allen Stevenson Report No: IJBA/07/2022/AP

Interim Chief Officer

Inverclyde Integration Joint Board

Contact Officer: Andi Priestman Contact No: 01475 712251

Subject: INTERNAL AUDIT - ANNUAL STRATEGY AND PLAN 2022-2023

1.0 PURPOSE

1.1 The purpose of this report is to present the Internal Audit Annual Strategy and Plan for 2022-2023 for approval.

2.0 SUMMARY

- 2.1 The Public Sector Internal Audit Standards include the requirement for the Chief Internal Auditor to prepare a risk-based plan to determine the priorities of the internal audit activity, consistent with the organisation's goals.
- 2.2 The Chief Internal Auditor will prepare an annual internal audit plan which will be subject to consideration and approval by the IJB Audit Committee.
- 2.3 Internal Audit follows a risk-based approach and it is intended that audit work will be focused on areas of greater risk taking into account management's own view of risk, previous audit findings and any other internal or external factors affecting the Inverclyde Integration Joint Board.
- 2.4 The proposed Internal Audit Annual Strategy and Plan for 2022-2023 is set out at Appendix 1.
- 2.5 The total budget for the Internal Audit Annual Plan for 2022-2023 has been set at 45 days. The Plan does not contain any contingency provision. Where there are any unforeseen work demands that arise eg special investigations or provision of ad hoc advice, this will require to be commissioned as an additional piece of work which will be subject to a separate agreement.
- 2.6 The Public Sector Internal Audit Standards require that the annual audit plan should be kept under review to reflect any changing priorities and emerging risks. Any material changes to the audit plan will be presented to the IJB Audit Committee for approval.

3.0 RECOMMENDATIONS

3.1 It is recommended that Inverclyde IJB Audit Committee approve the Internal Audit Annual Plan for 2022-2023.

Allen Stevenson Interim Chief Officer Inverclyde Integration Joint Board

4.0 BACKGROUND

- 4.1 Internal Audit is an assurance function that primarily provides an independent and objective opinion to the organisation on the control environment comprising governance, risk management and control by evaluating its effectiveness in achieving the organisation's objectives. It objectively examines, evaluates and reports on the adequacy of the control environment as a contribution to the proper, economic, efficient and effective use of resources.
- 4.2 As stated in the IRAG (Integrated Resources Advisory Group) Guidance, it is the responsibility of the IJB to establish adequate and proportionate internal audit arrangements for review of the adequacy of the arrangements for risk management, governance and control of the delegated resources.
- 4.3 The Public Sector Internal Audit Standards include the requirement for the Chief Internal Auditor to prepare a risk-based plan to determine the priorities of the internal audit activity, consistent with the organisation's goals.
- 4.4 The Chief Internal Auditor will prepare an annual internal audit plan which will be subject to consideration and approval by the IJB Audit Committee.

5.0 CURRENT POSITION

- 5.1 Internal Audit follows a risk-based approach and it is intended that audit work will be focused on areas of greater risk taking into account management's own view of risk, previous audit findings and any other internal or external factors affecting the Inverclyde Integration Joint Board.
- 5.2 The proposed Internal Audit Annual Strategy and Plan for 2022-2023 is set out at Appendix 1.
- 5.3 The total budget for the Internal Audit Annual Plan for 2022-2023 has been set at 45 days. The Plan does not contain any contingency provision. Where there are any unforeseen work demands that arise eg special investigations or provision of ad hoc advice, this will require to be commissioned as an additional piece of work which will be subject to a separate agreement.
- 5.4 The Public Sector Internal Audit Standards require that the annual audit plan should be kept under review to reflect any changing priorities and emerging risks. Any material changes to the audit plan will be presented to the IJB Audit Committee for approval.

6.0 IMPLICATIONS

Finance

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

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

8.0 CONSULTATIONS

- 8.1 The IJB's Interim Chief Officer and Chief Financial Officer have been consulted in relation to the proposed annual audit plan coverage for 2022-2023.
- 8.2 There will be regular ongoing discussion with External Audit to ensure respective audit plans are reviewed as circumstances change in order to minimise duplication of effort and maximise audit coverage for the Inverclyde IJB.

9.0 LIST OF BACKGROUND PAPERS

9.1 None.

INTERNAL AUDIT ANNUAL STRATEGY AND PLAN 2022-2023

1. Introduction

- 1.1 The Public Sector Internal Audit Standards (PSIAS) set out the requirement for the Chief Internal Auditor to prepare a risk-based audit plan to determine the priorities of the internal audit activity, consistent with the organisation's goals.
- 1.2 The Chief Internal Auditor must review and adjust the plan as necessary in response to changes in the organisation's business, risks, operations and priorities.
- 1.3 The audit plan must incorporate or be linked to a strategic or high-level statement of how the Internal Audit Service will be delivered and developed in accordance with the Internal Audit Charter and how it links to the organisational objectives and priorities.
- 1.4 The strategy shall be reviewed on an annual basis as part of the audit planning process.

2. Internal Audit Objectives

2.1 The definition of internal auditing is contained within the PSIAS as follows:

"Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes."

- 2.2 The primary aim of the internal audit service is to provide assurance services which requires the Chief Internal Auditor to provide an annual internal audit opinion based on an objective assessment of the framework of governance, risk management and control.
- 2.3 The internal audit service also provides advisory services, generally at the request of the organisation, with the aim of improving governance, risk management and control and contributing to the overall opinion.
- 2.4 The internal audit service supports the Inverclyde IJB's Chief Financial Officer in her role as Section 95 Officer.

3. Risk Assessment and Audit Planning

- 3.1 The internal audit approach to annual audit planning is risk-based and aligns with the IJB's Corporate Risk Register.
- 3.2 There will be regular ongoing discussion with External Audit to ensure respective audit plans are reviewed as circumstances change in order to minimise duplication of effort and maximise audit coverage for the Inverclyde IJB.

4 Service Delivery

- 4.1 The provision of the internal audit service is through a directly employed in-house team.
- 4.2 In relation to the total staff days allocated to the 2022-2023 plan, each member of staff completes a resource allocation spreadsheet for the year which is split between annual leave, public holidays, training days, general administration and operational plan days. This spreadsheet is reviewed and updated each period by each member of staff against time charged to timesheets.

The operational plan is 45 days which will be resourced as follows:

Team Member

Audit Practitioner – 40

The Chief Internal Auditor does not directly carry out the assignments included in the annual audit plan but provides the quality review and delivery oversight of the overall plan as well as undertaking audit planning and relevant reporting to the Audit Committee. As such, an allocation of 5 days is included within the plan. Where there are any resource issues which may impact on delivery of the plan, this will be reported to Audit Committee at the earliest opportunity.

- 4.3 Given the range and complexity of areas to be reviewed it is important that suitable, qualified, experienced and trained individuals are appointed to internal audit positions. The PSIAS requires that the Chief Internal Auditor must hold a professional qualification such as CMIIA (Chartered Internal Auditor), CCAB or equivalent and be suitably experienced. The internal auditor posts must also be CMIIA/CCAB or equivalent with previous audit experience.
- 4.4 Internal audit staff members identify training needs as part of an appraisal process and are encouraged to undertake appropriate training, including in-house courses and external seminars as relevant to support their development. All training undertaken is recorded in personal training records for CPD purposes.
- 4.5 Internal audit staff members require to conform to the Code of Ethics of the professional body of which they are members and to the Code of Ethics included within the PSIAS. An annual declaration is undertaken by staff in relation to specific aspects of the Code.
- 4.6 Following each review, audit reports are issued in draft format to agree the accuracy of findings and agree risk mitigations. Copies of final audit reports are issued to the IJB Chief Officer, HSCP Head of Service and HSCP Service Manager responsible for implementing the agreed action plan. A copy of each final audit report is also provided to External Audit.
- 4.7 The overall opinion of each audit report feeds into the Internal Audit Annual Report and Assurance Statement which is presented to the Audit Committee and is used by the Chief Financial Officer in the preparation of the Annual Governance Statement.

5 Proposed Audit Coverage 2022-2023

5.1 The proposed audit coverage is set out in the table below.

Risk Register	Dravious Assurance Mart	Planned Assurance	Other Assurance
Reference	Previous Assurance Work	Work 2022-23	Work 2022-23
IJB Risk 1 –	16/17 – Review of	None	External Audit
Effective	Governance Arrangements	None	Annual Audit Plan
Governance	21/22 – Performance		2021/22
13L3	Management and Reporting		2021/22
Risk Score 9	Arrangements		
IJB Risk 2 –	Inverciyde Council Internal	None	Inverclyde Council
Maintaining Effective	Audit Annual Audit Plans:	TVOTIC	Internal Audit Annual
Communication and	18/19 – HSCP Contract and		Audit Plan 2022/23 –
Relationships with	Commissioning		SWIFT Replacement
Acute Partners	arrangements		System
During	18/19 - Change Management		
Transformational	Arrangements		
Change	21/22 – Project Assurance		
13L3	Review – Swift Replacement		
Risk Score 9	System		
IJB Risk 3 –	17/18 - Strategic Planning	Review of pandemic	External Audit
Financial	and Performance	recovery and response	Annual Audit Plan
Sustainability/	Management Arrangements	planning arrangements.	2021/22
Constraints/	18/19 – Financial Planning		
Resource Allocation	19/20 Budgetary Control		
14L3			
Risk Score 12	N. Bill (age)		- I A III
IJB Risk 4 –	New Risk for 2022	Review of pandemic	External Audit
Financial		recovery and response	Annual Audit Plan
Implications of		planning arrangements.	2021/22
Responding to Covid-19			
14L3			
Risk Score 12			
IJB Risk 5 –	17/18 – Workforce Planning	Interim Review of	
Workforce	Arrangements	Workforce Plan 2020 to	
Sustainability and	Arrangements	2024 implementation	
Implementation of		progress.	
People Plan		F. 19.131	
14L3			
Risk Score 12			
IJB Risk 6 –	New Risk for 2022	None	Inverclyde Council
Home Care			Internal Audit Annual
13L5			Audit Plan 2022/23 -
Risk Score 15			SWIFT Replacement
			System
IJB Risk 7 –	New Risk for 2022	Review of pandemic	
Contingency Plans		recovery and response	
13 L 4		planning arrangements.	
Risk Score 12			

Risk Register Reference	Previ	ous Assurance Work	Planned Assurance Work 2022-23	Other Assurance Work 2022-23
IJB Risk 8 – Performance Management Information I 3 L 3 Risk Score 9	and Pe Manag 18/19 - 20/21 - new IJ 21/22 -	- Strategic Planning erformance Jement Arrangements - IJB Directions - Advisory review on B Directions Policy - Implementation of Jections	Internal Audit follow up exercises 2022/2023	
IJB Risk 9 – Locality Planning to Better Understand the Needs of the Community I 3 L 2 Risk Score 6 Other Work	and Pe	- Strategic Planning erformance ement Arrangements	Internal and External Audit follow up exercise 2022/2023	External Audit Annual Audit Plan 2021/22
Action Plan Follow L	In	To monitor the progr	ress of implementation of	agreed internal audit
Action Flam Collow C	γ γ	action plans by man		agreed internal addit
Audit Planning and Management			of the audit universe and	attendance at IJB
Internal Audit Annua	ıl		21-2022 audit activity will	
Report 2021-2022		to inform the Annual	Governance Statement f	or the IJB.
Total Staff Days				45
i Ulai Stail Days				40

6 Quality and Performance

- 6.1 The PSIAS require each internal audit service to maintain an ongoing quality assurance and improvement programme based on an annual self-assessment against the Standards, supplemented at least every five years by a full independent external assessment.
- 6.2 In addition, the performance of Internal Audit continues to be measured against key service targets focusing on quality, efficiency and effectiveness. For 2022-2023 these have been set as follows:

Me	easure	Description	Target
1.	Final Report	Percentage of final reports issued within 2 weeks of draft report.	100%
2.	Draft Report	Percentage of draft reports issued within 3 weeks of completion of fieldwork.	100%
3.	Audit Plan Delivery	Percentage of audits completed v planned.	100%
4.	Audit Budget	Percentage of audits completed within budgeted days.	100%
5.	Audit Recommendations	Percentage of audit recommendations agreed.	90%
6.	Action Plan Follow Up	Percentage of action plans followed up – Internal and External Audit.	100%
7.	Customer Feedback	Percentage of respondents who rated the overall quality of internal audit as satisfactory or above.	100%
8.	Staff compliance with CPD	Number of training hours undertaken to support CPD	20
9.	Management engagement	Number of meetings with Chief Officer and Chief Financial Officer as appropriate	2 per year

6.3 Actual performance against targets will be included in the Internal Audit Annual Assurance Report for 2022-2023.



AGENDA ITEM NO: 7

Report To: Inverclyde Integration Joint

Board - Audit Committee

Date: 21 March 2022

Report By: Allen Stevenson

(Interim Chief Officer)
Inverclyde Health & Social

Care Partnership

Report No:

IJBA/08/2022/CG

Contact Officer Craig Given Contact No: 01475 715381

Subject: IJB BEST VALUE STATEMENT 2021/22

1.0 PURPOSE

1.1 The purpose of this report is to provide a statement in relation to how the IJB has delivered Best Value during the previous financial year.

2.0 SUMMARY

2.1 Appendix A contains the Draft Best Value Statement for 2021/22. This is reviewed and updated annually as part of the annual accounts process.

3.0 RECOMMENDATIONS

3.1 It is recommended that the IJB Audit Committee approve the Best Value Statement enclosed at Appendix A.

Allen Stevenson Interim Chief Officer

Craig Given
Chief Financial Officer

4.0 BACKGROUND

- 4.1 Integration Joint Boards have a statutory duty to make arrangements to secure best value. To achieve this, IJBs are required to have effective arrangements in place for scrutinising performance, monitoring progress towards achieving strategic objectives and holding partners to account.
- 4.2 Part of evidencing the work that the IJB does in relation to this is through officers reviewing and updating the Best Value Statement enclosed at Appendix A each year as part of the annual accounts process.
- 4.3 The statement considers Inverclyde's position in relation to 10 key Audit Scotland Best Value prompts. Based on this statement and placing appropriate reliance on the Best Value arrangements in place through the Council and Health Board no additional action is required by the IJB at this time over and above the actions already taking place as detailed in the statement. These 10 questions and draft responses were sent to all IJB members during the year for comment and those comments were used to update the enclosed draft statement.
- 4.4 In compiling the response a questionnaire was sent to all IJB members in January 2021. The survey detailed the 10 Best Value prompt questions recommended by Audit Scotland and showed the proposed responses to each of those. 7 responses were received to the questionnaire. In the main respondents agreed with the proposed narrative. Where changes were proposed these have been shown as tracked changes on the attached appendix. The table in Appendix B details the responses received and action taken.
- 4.5 Within the responses were 5 comments which weren't specific wording changes. Where possible the response has been amended to reflect these. The comments received were:
 - Q1. "As BV is (Audit Scotland definition): delivering good governance, the effective management of resources, with a focus on improvement to deliver the best outcomes, it is implicit that the Board (IJB) is primarily responsible. It directs the Accountable Officer to deliver this and seeks to hold to account via its assurance and governance framework. I wonder if we might make this more explicit here!" Response wording was amended to reflect this.
 - Q3. "As this is about partner 'buy in' to our vision (in effect, our Strategic Plan and 6 Big Outcomes), I wonder if this is strengthened if we add a short sentence about the fact that both partners have historically delegated significant budget resources to deliver the integration of health and social care services, which have themselves been delegated to the IJB. Response wording was amended to reflect this.
 - Q3. "I think we still have work to do here, and I think we need to look at this question in a context that is wider than Council / Health Board there are partners who have "bought in" enough to attend the IJB but whose voices are still not necessarily heard. I would be brave enough to suggest that we would be a richer board if we paid some attention to addressing this particularly if the role of IJB's is likely to be enhanced. The IJB's role / visibility within the Alliance could also be developed further" Response wording was amended to reflect this.
 - Q4. "As this is about how VFM is demonstrated by the decisions made, you could reasonably add here by way of example that of our most recent deliberation/decision on a £1M+ contract tender [for a new 'Social Care Case Management System'] actively considered the weighting of quality and price as a means of achieving the full value of the resources being expended, weighting quality over cost." Response wording was amended to reflect this.

Q5. "I would explicitly point to the successful marriage of development work and effective risk management within the IJB context. As a board, looking at risk and viewing improvement planning with risk as a live concern has been a positive experience as an IJB member, and helps to ensure that individual improvements are cogent with a direction of travel, and are managed appropriately. It is a **culture** of continuous improvement, not a series of improvements that are haphazardly implemented." – Response wording was amended to reflect this.

5.0 DIRECTIONS

5.1		Dire	ection to:	
	Direction Required to			Χ
	Council, Health Board	2.	Inverclyde Council	
	or Both	3.	NHS Greater Glasgow & Clyde (GG&C)	
		4.	Inverclyde Council and NHS GG&C	

6.0 IMPLICATIONS

6.1 **FINANCE**

There are no financial implications arising from this report.

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

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

HUMAN RESOURCES

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

EQUALITIES

6.4 There are no equality issues within this report.

Has an Equality Impact Assessment been carried out?

YES	(see attached appendix)



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.

6.5 How does this report address our Equality Outcomes

There are no Equalities Outcomes implications within this report.

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

CLINICAL OR CARE GOVERNANCE IMPLICATIONS

6.6 There are /are no governance issues within this report.

NATIONAL WELLBEING OUTCOMES

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

There are no National Wellbeing Outcomes implications within this report.

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 CONSULTATION

7.1 This report was prepared in consultation with the Chief Officer and External Audit.

8.0 BACKGROUND PAPERS

8.1 None.

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IJB	JB Best Value – Draft Statement 2020/21	
	Audit Scotland Prompt	Response
_	Who do you consider to be accountable for securing Best Value in the IJB?	The duty of Best Value applies to all public bodies in Scotland. It is a statutory duty on local authorities (Inverclyde Council) and a formal duty on Accountable Officers, such as the Chief Executive of NHS GG&C.
		The IJB is responsible for directing its partners (the Council and Health Board) to commission all IJB services in line with the principles of Best Value. Ultimately the IJB is primarily responsible to deliver Best Value and it directs its accountable officer to deliver this and seeks to hold to account via its assurance and governance framework. However, this does not remove the accountability within partner organisations for their own responsibilities under Best Value legislation. Commissioning from third sector providers should be evaluated with Best Value principles during procurement.
7	How do you receive assurance that the services supporting the delivery of the strategic plan are securing Best Value?	IJB directions to the Council and Health Board clearly require them to deliver services in line with our Strategic Plan and that all services must be procured and delivered in line with Best Value principles.
		There are current arrangements for monitoring the delivery of the Strategic Plan this within various IJB/HSCP forums, including: Integration Joint Board Meetings Transformation Board
		 Audit Committee Inverclyde Health & Social Care Committee
		 Clinical & Care Governance Committee Strategic Planning Group Senior Management Team (HSCP)
		 Corporate Management Teams of the Health Board and Council
		Performance is scrutinised regarding the targets met or any issues that arise from this. Systems of control within the IJB are subject to Internal Audit review and scrutiny by the IJB Audit Committee. The Committee also receives a regular

	Audit Scotland Prompt	Response
		summary of all internal audit reports relating to the IJBs partner organisations which provides further assurance in relation to Best Value. The IJB also places reliance on the controls and procedures of our partner organisations in terms of Best Value delivery which are also subject to regular audit and review directly through those partner organisations.
		IJB directions to the Council and Health Board clearly require them to deliver services in line with our Strategic Plan and that all services must be procured and delivered in line with Best Value principles.
က	Do you consider there to be sufficient buy-in to the IJB's longer term vision from partner officers and members?	Yes - the IJB has good joint working arrangements in place and has benefited from ongoing support from members and officers within our partner organisations over the last year in order to deliver the IJBs longer term vision. Within Inverclyde there is a wider collaborative approach to Health and Social Care with a commitment to Best Value from all relevant partners which is evidenced through their own Best Value processes and audit arrangements. Both partners have historically delegated significant budget resources to deliver the integration of health and social care services, which have themselves been delegated to the IJB
		The IJB also works closely with Community Planning Partners through the Strategic Alliance. However, there is still a feeling within the IJB that this could be improved further with more partnership engagement.
4	How is value for money demonstrated in the decisions made by the IJB?	All IJB papers carry a section that clearly outlines the financial implications of each proposal as well as other implications in terms of legal, HR, equality and diversity and linkage to the IJBs strategic objectives.
		The IJB engages in healthy debate and discussions around any proposed investment decisions and savings proposals, many of which are supported by additional IJB development sessions. In addition IJB directions to the Health Board and Council require them to deliver our services in line with Best Value principles.
		An example can be seen with the recent decision made by the IJB for the new 'Social Care Case Management System whereby the IJB actively considered the weighting of quality and price as a means of achieving the full value of the resources

	Audit Scotland Prompt	Kesponse
		being expended, weighting quality over cost.
2	Do you consider there to be a culture of continuous improvement?	Yes – IJB, SPG and SMT development sessions over the past 12 months have sought to enhance the operational effectiveness of the IJB, SPG and SMT and of the services the HSCP delivers. The IJB operates and believes in creating a culture of continuous improvement working in conjunction with its attitude towards risk as a live concern.
		Many of these development sessions have been focussed around service redesign and improvement plans within services to ensure the IJB and SPG members are fully informed and engaged in our continuous improvement process. Both the IJB and SPG have staff-side representation, so staff and trade unions are also fully involved in shaping continuous improvement.
		We have also redesigned our Transformation Board arrangements to make clearer and closer links between the work of that Board and the Strategic Plan and Strategic Planning Group. Feedback from officers has been very positive on the new Board format.
9	Have there been any service reviews undertaken since establishment – have improvements been identified? Is there any evidence of improvements in services and/or reductions in pressures as a result of joint working?	Several reviews have taken place with many still ongoing. This work is overseen operationally by Review Boards for each Service Review and the Transformation Board oversees all of the reviews and redesigns with feedback on the planned and delivered service improvements and efficiencies of each.
		Some of the major reviews include: Learning Disabilities Review, Addictions Review and AHP Review. There has also been a major review of Health Improvement Services, shifting the focus from single topic project work to more of a Public Health approach. This has been done in a bid to embed a strategic approach to tackling inequalities across the whole Community Planning Partnership (the Inverclyde Alliance). All of these redesigns have been very recent, and the impacts have not yet been evaluated.
7	Have identified improvement actions been prioritised in terms of those likely to have the	Yes – Prioritised improvement actions in Inverclyde are managed through the Service Review Boards, Heads of Service, Transformation Board and the SMT with

	A	
ω	greatest impact? What steps are taken to ensure that quality of care and service provided is not compromised as a result of costs saving measures?	the Health Board and Council CMTs involved as required. All reviews are aligned to the Health Board and Council CMTs involved as required. All reviews are aligned to the everall Strategic Planning process which is monitored and controlled through the SPG. Annual implementation plan for each of the 6 Big Actions are in place and progress reports against these implementation plans go to the SPG and IJB to provide guidance on overall performance in delivering the Strategic Plan. Staff and clinical representation is in place on all Review Boards, the SPG and IJB. All redesigns are discussed at the Clinical and Care Governance Group, and potential implications are required to be assessed and included in IJB reports. In
		addition, Equality Impact Assessments are required for savings proposals. The IJBs Clinical Care Strategy puts a firm focus on the quality and safety of care across all services. The integrated ways of working in Inverclyde ensure that residents experience a quality standard of care. As an example, one of the key emerging priorities for the HSCP is supporting the 3rd sector's readiness to bid for contracts. Working in partnership with the local TSI, this commitment to supporting partners in the 3rd sector will improve both the quality of the tender bids and the capacity of the 3rd sector.
		Given the level of savings, demographic demands is becoming more difficult to deliver savings, there is a concern that this will impact on quality in the future.
თ	Is performance information reported to the board of sufficient detail to enable value for money to be assessed?	The IJB has oversight of IJB performance both operationally and financially through regular financial and performance monitoring reports.
10	How does the IJB ensure that management of resources (finances, workforce etc.) is effective and sustainable?	Regular budget and performance monitoring reports to the IJB give oversight of this. All IJB reports contain a section outlining the financial implications of each paper. The IJBs internal control reporting mechanisms linked to the Risk Register require reporting to the Audit Committee on any High/Significant operational risks in addition to the IJB strategic risks. This additional process helps ensure the IJB has sight of any potential concerns, enabling them to manage and mitigate any resource risks.

ง	Summary of Questionnaire Responses				
ā	Question/Prompt	Survey Responses	sesuoc		
		Agree response	Disagree	Not sure/No strong opinion	Proposed change
-	Who do you consider to be accountable for securing Best Value in the IJB?	2/9	1		1/7 Response wording amended
2	How do you receive assurance that the services supporting the delivery of the strategic plan are securing Best Value?	2/2			
က်	Do you consider there to be sufficient buy-in to the IJB's longer term vision from partner officers and members?	5/7			2/7 Response wording amended
4.	How is value for money demonstrated in the decisions made by the IJB?	2/9		1	1/7 Response wording amended
5.	Do you consider there to be a culture of continuous improvement?	2/9	-		1/7 Response wording amended
Ö	Have there been any service reviews undertaken since establishment – have improvements been identified? Is there any evidence of improvements in services and/or reductions in pressures as a result of joint working?	677	1	1	
7.	Have identified improvement actions been prioritised in terms of those likely to have the greatest impact?	2/2	1		
<u>φ</u>	What steps are taken to ensure that quality of care and service provided is not compromised as a result of costs saving measures?	2/2	1		
တ်	Is performance information reported to the board of sufficient detail to enable value for money to be assessed?	7/2	1		ı
10	10. How does the IJB ensure that management of resources (finances, workforce etc.) is effective and sustainable?	2/2			



AGENDA ITEM NO: 8

Date:

Report No:

21 March 2022

VP/LS/027/22

Report To: Inverclyde Integration Joint

Board Audit Committee

Report By: Allen Stevenson, Interim Chief

Officer, Inverclyde Health & Social Care Partnership

Contact Officer: Vicky Pollock Contact No: 01475 712180

Subject: INVERCLYDE INTEGRATION JOINT BOARD - DIRECTIONS UPDATE

MARCH 2022

1.0 PURPOSE

1.1 The purpose of this report is to provide the Inverclyde Integration Joint Board Audit Committee (IJB Audit) a summary of the Directions issued by Inverclyde Integration Joint Board (IJB) to Inverclyde Council and NHS Greater Glasgow and Clyde in the period September 2021 to March 2022.

2.0 SUMMARY

2.1 A revised IJB Directions Policy and Procedure was approved by the IJB in September 2020. As part of the agreed procedure, IJB Audit has 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 is the third such report and covers the period from September 2021 to March 2022.

3.0 RECOMMENDATIONS

3.1 It is recommended that the Inverclyde Integration Joint Board Audit Committee notes the content of this report.

Allen Stevenson Interim Chief Officer Inverclyde HSCP

4.0 BACKGROUND

- 4.1 Directions are the means by which the IJB tells the Health Board and the Council what is to be delivered using the integrated budget, and for Inverclyde IJB to improve the quality and sustainability of care, as outlined in its Strategic Plan and in support of transformational change. A direction must be given in respect of every function that has been delegated to the IJB. Directions are a legal mechanism, the use of directions is not optional for IJBs, Health Boards or Local Authorities, it is obligatory.
- 4.2 A revised IJB Directions Policy and Procedure was approved by the IJB in <u>September 2020</u>. As part of the agreed procedure, IJB Audit has 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 is the third such report and covers the period from September 2021 to March 2022.
- 4.3 This report outlines a summary of the Directions issued by the IJB during the period in scope. The report does not provide detail of the Directions' content or commentary on their impacts, as it is considered that this level of oversight is facilitated through the normal performance scrutiny arrangements of the IJB and Inverclyde Health and Social Care Partnership.

5.0 Summary of Directions

- 5.1 A Directions log has been established and will continue to be maintained and updated by the Council's Legal Services.
- 5.2 Between September 2021 to March 2022 (inclusive):
 - the IJB has issued 6 Directions;
 - 4 of these were Directions to both the Council and Health Board;
 - 1 of these was Directions to the Council only; and
 - 1 of these was Directions to the Health Board only.
- 5.3 Of the 6 Directions issued by the IJB:
 - 3 remain open (current);
 - 2 are closed and have been superseded; and
 - 1 is complete.
- 5.4 The list of Directions issued by the IJB to Inverclyde Council and NHS Greater Glasgow and Clyde is set out at Appendix 1 of this report. The list is split into financial years 2020/21 and 2021/22
- 5.5 As part of their review of the IJB Directions Policy, Internal Audit have recommended that the IJB is provided with an annual report on the IJB's Directions. The second annual report will be presented to the IJB at its meeting around September 2022.

6.0 PROPOSALS

6.1 It is proposed that the IJB Audit Committee notes this report.

7.0 IMPLICATIONS

Finance

7.1 There are no financial implications arising from this report.

Financial Implications:

One Off Costs

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

Annually Recurring Costs/ (Savings)

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

Legal

7.2 The IJB is, in terms of Sections 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014, required to direct Inverclyde Council and NHS Greater Glasgow and Clyde to deliver services to support the delivery of the Strategic Plan.

Human Resources

7.3 There are no HR implications arising from this report.

Equalities

- 7.4 There are no equality issues within this report.
- 7.4.1 Has an Equality Impact Assessment been carried out?

X

NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy which has a differential impact on any of the protected characteristics. Therefore, no Equality Impact Assessment is required.

7.4.2 How does this report address our Equality Outcomes

There are no Equalities Outcomes implications within this report.

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

Clinical or Care Governance

7.5 There are no clinical or care governance issues within this report.

National Wellbeing Outcomes

7.6 How does this report support delivery of the National Wellbeing Outcomes There are no National Wellbeing Outcomes implications within this report.

National Wellbeing Outcome	Implications
People are able to look after and improve their own health	None
and wellbeing and live in good health for longer.	
People, including those with disabilities or long term	None
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	N
People who use health and social care services have	None
positive experiences of those services, and have their	
dignity respected.	N
Health and social care services are centred on helping to	None
maintain or improve the quality of life of people who use	
those services.	N
Health and social care services contribute to reducing	None
health inequalities.	
Depute who provide wanted care are comparted to leak	None
People who provide unpaid care are supported to look	None
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	None
	None
engaged with the work they do and are supported to continuously improve the information, support, care and	
treatment they provide.	
neament mey provide.	
Resources are used effectively in the provision of health	None
and social care services.	110110
and obtain out of vioco.	

8.0 DIRECTIONS

8.1 Direction Required to Council, Health Board or Both

	Dire	ection to:	
ı	1.	No Direction Required	Χ
1	2.	Inverclyde Council	
	3.	NHS Greater Glasgow & Clyde (GG&C)	
	4.	Inverclyde Council and NHS GG&C	

9.0 CONSULTATIONS

9.1 The Interim Chief Officer and Chief Financial Officer have been consulted in the preparation of this report.

10.0 BACKGROUND PAPERS

10.1 None.

			T	T	
Most Recent Review (Date)	Direction superseded by in year Financial Monitoring reports				Direction superceded by in year Financial Monitoring reports
Service Area	Finance	Alcohol & Drug Recovery	Alcohol & Drug Recovery	Childrens Services	Childrens Services
Link to IJB paper Responsible Officer	Chief Finance Officer	Head of MH, Addictions and Homelessness	Head of MH, Addictions and Homelessness	Head of Children, Families and Criminal Justice	Head of Children, Families and Criminal Justice
Link to IJB paper	https://www.inv erclyde.gov.uk/m eetings/docume nts/13252/06%2 Olndicative%20ln verclyde%201B% 20Budget%2020 20%2021.pdf	https://www.inv erclyde.gov.uk/m eetings/docume nts/13200/08%2 0ADRS%20Updat e.pdf		https://www.inv erclyde.gov.uk/m eetings/docume nts/13201/09%2 OHard%20Edges. pdf	https://www.inv erclyde.gov.uk/m eetings/docume nts/13202/10%2 0Continuing%20 Care.pdf
Direction Reference superseded, revised or revoked	Α/Ν	N/A	N/A	N/A	N/A
	<u>0</u>	O <u>N</u>	ON	ON.	ON e
	ed ed	Current	Current	Current	Complete d
Rev Dat	Mar-21				
With Effect From	17-Mar-20	17-Mar-20	17-Mar-20	17-Mar-20	17-Mar-20
Date Issued	17-Mar-20	17-Mar-20	17-Mar-20	17-Mar-20	17-Mar-20
Budget Allocated by IJB to carry out direction(s)	The budget delegated to Inverclyde Council is £52.289m and NHS Greater Glasgow and Clyde is £115.554m as per the report.	£825k over 3 years from Transformation Fund if future funding from Scot Govt to ADP is not confirmed		£81.6k new Hard Edges funding	£122k one off funding from Continuing Care EMR £18k recurringly for running costs of the flats to be funded from existing budget
Functions Covered by Direction	Budget 2020-21	Alcohol & Drug Recovery Services	Alcohol & Drug Recovery Services	Children & Families	Children & Families
Full Text	Inverclyde Council is directed to spend the delegated net budget of £52.289m in line with the Strategic Plan and the budget outlined within the report. NHS Greater Glasgow and Clyde is directed to spend the delegated net budget of £115.554m in line with the Strategic Plan and the budget outlined within the report.	Recruitment to a recovery post for 12 months to support the establishment of a recovery approach including commissioned services within Inverclyde and support development of recovery concepts within communities.	allocation of £825k across 3 years from the transformation fund to support the development of a commissioned community recovery hub, if future funding from the Scottish Government to Inverclyde Alcohol and Drug partnership is not confirmed.	IJB has approved the appointment of two care navigators Grade 6 posts for 12 months through Inverclyde Council	Inverclyde Council to adapt each children's houses to increase from 6 to 7 bedrooms and support the development of hybrid core and cluster accommodation linked to Children's residential services.
	Both Council and Health Board	Board Health Board	Both Council and Health Board	Council only	Both Council and Health Board
Report Title	Indicative Inverclyde IJB Budget 2020/21	Inverclyde Alcohol and Drug Recovery Development Update	Inverclyde Alcohol and Drug Recovery Development Update	Hard Edges Scotland Report	Continuing Care
	17.03.2 020 UB/36/2 020/LA	17.03.2 020 UB/17/2 020/AH	17.03.2 020 IIB/17/2 020/AH	17.03.2 020 UB/21/2 020/SM cA	17.03.2 020 UB/22/2 020/SM cA

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Most Recent Review (Date)				Reformance Direction will be a Information superseded by in year subsequent update reports in year	Direction superseded by in year Financial Monitoring reports covid spend & funding updates
Service Area	IOI	Older People OOH Services	Alcohol & Drug Recovery	Performance & Information	Finance
Responsible Officer	Head of Health & Community Care	Head of Health & Community Care	Head of MH, Addictions and Homelessness	Head of Strategy & Support Services	Chief Finance Officer
Link to IJB paper	https://www.inv erclyde.gov.uk/m eetings/docume nts/13203/11%2 OTailored%20Mo ving%20&%20Ha ndling%20Solutio ns.pdf	Private report	Private report	Private report	https://www.inv erclyde.gov.uk/m eetings/docume nts/13326/04%2 0%20COVID%201 9%20Mobilisatio n%20Plan.pdf
Direction Reference superseded, revised or revoked	Α/Α	N/A	Α/Ν	N/A	N/A
Does this supersede, revise or revoke a previous	ы О	te	t t	O _N	ON P:
Status	Complete d	Complete d	Complete d	Current	May-21 Supersed ed
Review Date				17-Mar-20 Updates will be brought back to the IJB regularlly as the project proceeds	
With Effect From	17-Mar-20	17-Mar-20	17-Mar-20	.7-Mar-20	12-May-20
	17-Mar-20	17-Mar-20	17-Mar-20	17-Mar-20	12-May-20
ə Ħ	£125.5k over 18 months	£203.5k to be funded from core budgets from 2020/21 onwards	As detailed in the report - restructure of existing service to be funded from existing budgets	£243k through IJB prudential borrowing	As outlined in the report and Appendix 1. £0.450m of 2019/20 and £8.404m of 2020/21 Covid 19 costs are expected to be funded through Scottish Government Covid-19 funding.
Functions Covered by Direction	Health & Community Care	Health & Community Care	Alcohol & Drug Recovery Services	НЅСР	All functions outlined within the report and Appendix 1.
Full Text	Tailored Moving and Handling Solutions project to be rolled out. 1 WTE I grade Occupational Therapist to be appointed (for 18 months initially) to sustain the focus of the work and drive this work forward, and to have the capacity to support reviews around moving and handling.	Appointment of additional posts required to deliver the integrated service as outlined in the report.	Council and Health Board to implement the workforce plan in line with the ADRS review as per the report	Inverclyde Council to oversee the procurement of a replacement Social Work Information system, subject to the Council approving £600,000 Capital funding, on top of the £243,000 agred by the IJB through Prudential Borrowing	Inverclyde Council and NHS GG&C jointly are directed to implement the Covid-19 Mobilisation Plan outlined within the report and Appenix 1
	Both Council and Health Soard	Both Council And Health Board	Both Council and Health is Board	Both Council and Health the Board line and Health the Board line and line a	Both Council I and Health i Board i I
	Tailored Moving & Handling Solutions	Review of Health & Social Care Out of Hours Services	Inverclyde HSCP Alcohol and Drug Service Redesign Workforce	Social Care Case Management - Mini Competition	Mobilisation Plan
	17.03.2 020 IIB/31/2 020/AS	17.03.2 020 IJB/29/2 020/AS	17.03.2 020 IJB/19/2 020/AH	17.03.2 020 IIB/32/2 020/AS	12.05.2 020 11B/38/2 020/LA

Most Recent Review (Date)	Direction will be superseded by subsequent update reports			Direction will be superseded by in year subsequent Financial Monitoring reports		Direction will be superseded by in year subsequent Financial Monitoring reports
Service Area Mos Revi	Commissionin Direction will be superseded by subsequent update reports	Childrens Services	sing		Δ.	Finance Direction supersed year subs Year subs Financial Monitorii reports
			n & District are Nursing	es HSCP	HSCP	
Responsible C	Head of Strategy & Support Services	Head of Children, Families and Criminal Justice	Head of Health & Community Care	Head of Strategy & Support Services	Chief Officer	Chief Finance Officer
Link to IJB paper Responsible Officer	https://www.inv erclyde.gov.uk/m eetings/docume nts/13375/10%2 OUnscheduled%2 OCare%20Commi ssioning%20Plan. pdf	https://www.inv erclyde.gov.uk/m eetings/docume nts/13376/11%2 OProud%202%20 Care.pdf	https://www.inv erclyde.gov.uk/m eetings/docume nts/13377/12%2 0%20District%20 Nursing%20Work force.pdf	https://www.inv erclyde.gov.uk/m eetings/docume nts/13444/06%2 OWorkforce%20P lan.pdf	https://www.inv erclyde.gov.uk/m eetings/docume nts/13446/08%2 0Staffing%20Covi d%2019.pdf	https://www.inv erclyde.gov.uk/m eetings/docume nts/13556/08%2 OFinancial%20M onitoring%20Rep ort.pdf
Direction Reference superseded, revised or revoked	N/N	N/A	N/A	N/A	N/A	17.03.2020 IJB/36/2020 /LA
Does this supersede, revise or revoke a previous	ON.	ON.	ON.	0	0	Yes Supersede
Status	Current	Current	Complete	Current	Supersed	Supersed ed
Review Date	Updates will be brought back to the IJB regularlly as the project proceeds	Updates will be brought back to the IJB regularlly as the project proceeds		Aug-21	Apr-21	Nov-20
With Effect Review From Date	23-Jun-20	23-Jun-20	23-Jun-20	24-Aug-20	24-Aug-20	21-Sep-20
Date Issued	23-Jun-20	23-Jun-20	23-Jun-20	24-Aug-20	24-Aug-20	21-Sep-20
Budget Allocated by IJB to carry out direction(s)	N/A	£70k and £40k through the Transformation Fund	£207.3k through District Nursing Employee Costs	As outlined in Appendix A.	The budget delegated to Inverclyde Council is £568,290 and NHS GG&C is £521,018 as outlined in Appendix A.	As outlined in Appendix 5.
Functions Covered by Direction	НЅСР	Children & Families	District Nursing	All functions outlined within the report and Appendix A.	All functions outlined within Appendix A of the report.	All functions outlined in Appendix 5 of the report.
Full Text	Note the requirement to implement the Unscheduled Care Commissioning Plan once finalised	Funding provided to continue resourcing of Proud 2 Care and to enable the Council's continued partnership with Your Voice and the Champion's Board to support continued Proud 2 Care activity	Funding provided to support 5 nurses to undertake the Specialist Practitioner Qualification in District Nursing, including backfill costs.	Inverclyde Council and NHS GG&C jointly are directed to implement the requirements of the Workforce Plan attached as Appendix B to the report and within the associated budget outlined in Appendix A.	Inverclyde Council and NHS GG&C jointly are directed to fill the posts outlined in Section 6.1 of the report and within the associated budget also outlined in Section 6.1.	Inverclyde Council and NHS GG&C jointly are directed to deliver services in line with the IJB's Strategic Plan and within the associated budget outlined in Appendix 5
Direction to	Board Health Board	Council only	Health Board only	Board Board	Both Council and Health Board	Both Council and Health Board
Ref. no. Report Title	Unscheduled Care Commissioning Plan	Champions Board/Proud2Car e	District Nursing Workforce	HSCP Workforce Plan 2020-2024	Health and Social Care Additional Staffing - Covid 19	Financial Budget Monitoring Report - 2020/21 Period to 30 June 2020 - Period 3
Ref. no.	23.06.2 020 UB/44/2 020/LL	23.06.2 020 IJB/45/2 020/SM cA	23.06.2 020 IJB/50/2 020/DM cC	24.08.2 020 IJB/54/2 020/LA	24.08.2 020 IJB/51/2 020/LL	21.09.2 020 IIB/60/2 020/LA

	a := +=				
Most Recent Review (Date)	Direction will be superseded by in year subsequent Financial Monitoring reports				
Service Area	нѕср	Finance	Finance	Finance	Childrens Services
Link to IJB paper Responsible Officer	Head of Strategy & Support Services	Chief Finance Officer	Chief Finance Officer	Chief Finance Officer	Head of Children, Families and Criminal Justice
Link to IJB paper	https://www.inv erclyde.gov.uk/m eetings/docume nts/13565/11%2 ODigital%20Strat egy%20Action%2	https://www.inv erclyde.gov.uk/m eetings/docume nts/13698/06%2 0P5%20Monitori ng%20Report.pdf	erclyde.gov.uk/m eetings/docume nts/13949/06%2 OFinancial%20M onitoring%20Rep ort.pdf	erclyde.gov.uk/m eetings/docume nts/14117/05%2 OFinancial%20M onitoring%20Rep ort.pdf	https://www.inv erclyde.gov.uk/m eetings/docume nts/14121/09%2 0Emergency%20 Decisions%20Log
Direction Reference superseded, revised or revoked	N/A	21.09.2020 IJB60/2020/ LA	02.11.2020 IJB/65/2020 /LL	25.01.21 IJB/07/2020 /LA	N/A
Does this supersede, revise or revoke a previous	ON.	Supersede	Supersede	Supersede	O _N
Status	Current	Supersec	Mar-21 Supersed ed	May-21 Supersed ed	Current
Review Date	Sep-21 C	25-Jan-21 Supersed ed	Mar-21	May-21	May-21 C
With Effect R	21-Sep-20	02-Nov-20	25-Jan-21	29-Mar-21	11-Feb-21
Date Issued	21-Sep-20	02-Nov-20	25-Jan-21	29-Mar-21	(emergency powers)
Budget Allocated by IJB to carry out direction(s)	As outlined in Appendix A.	As outlined in Appendix 5.	As outlined in Appendix 5.	As outlined in Appendix 5	£120k per annum including on costs
Functions Covered by Direction	All functions outlined in Appendix A of the report.	All functions outlined in Appendix 5 of the report.	All functions outlined in As outlined in Appendix 5 of the Appendix 5. report.	All functions outlined in As outlined in Appendix 5 of the Appendix 5 report.	Children & Families
Full Text	Inverclyde Council and NHS GG&C jointly are directed to deliver the actions within the digital investment plan for 2020/21 as outlined in the report and Appendix A. (Includes SWIFT replacement).	Inverclyde Council and NHS GG&C jointly are directed to deliver services in line with the IJB's Strategic Plan and within the associated budget outlined in Appendix 5.	Inverclyde Council and NHS GG&C jointly are directed to deliver services in line with the IJB's Strategic Plan and within the associated budget outlined in Appendix 5.	Inverclyde Council and NHS GG&C jointly are directed to deliver services in line with the IJB's Strategic Plan and within the associated budget outlined in Appendix 5.	Appointment of 2 additional Health Visitors required to support Children's Services as outlined in the report.
Direction to	Both Council and Health Board	Both Council and Health Board	Both Council and Health Board	Both Council and Health Board	only
Ref. no. Report Title	HSCP Digital Strategy 2020/21	Financial Budget Monitoring Report - 2020/21 Period to 31 August 2020 - Period 5	Financial Budget Monitoring Report 2020/21 - Period to 31 October 2020 - Period 7	Financial Budget Monitoring Report 2020/21 - Period to 31 December 2020 - Period 9	Emergency Powers Decision Log to March 2021
Ref. no. 1	21.09.2 H 020 S IJB/68/2 020/LA	02.11.2 F 0 N UB/65/2 R 020/LL P	25.01.2 F 1 1B/07/2 R 020/LA P P	29.03.2 F 1 N UB/15/2 R 021/LA P	29.03.2 E 1 1 1 1 1 1 1 1 1

Most Recent Review (Date)	20/09/2021 Superseded by Financial Monitoring Report 2021/22 - Period 3 - IIB/38/2021/C G			
Service Area	Finance	Alcohol and Drug Recovery	Childrens' Services	Alcohol and Drug Recovery
Link to IJB paper Responsible Officer	Chief Finance Officer	Head of MH, ADRS and Alcohol and Homelessness Drug Recove	Head of Children, Families and Criminal Justice	Head of MH, ADRS and Alcohol and Homelessness Drug Recove
Link to IJB paper	https://www.inv erclyde.gov.uk/ meetings/docum ents/14118/06% 2019%20Budget, pdf	https://www.inv ferciyde.gov.uk/ meetings/docum ents/14262/06% 20inverciyde%20 Alcohol%20and% 20Drug%20Partn ershp%20Updat e.pdf	https://www.inv erciyde.gov.uk/ meetings/docum/ erts/1424/09%/ 20The%20Promis e%20Partnership %20Funding.pdf	Private Report
Direction Reference Superseded, revised or revoked	N/A	N/A	N/A	4/N
Does this supersede, revise or revoke a previous Direction	ON.	O _N	O _N	O _Z
Status	Mar-22 Superse No	May-22 Comple ted	May-22 Current	May-22 Comple ted
With Effect Review Status From Date				
With Effe From	. 29-Mar-21	17-May-21	17-May-21	. 17-May-21
Date Issued	29-Mar-21	17-May-21	17-May-21	17-May-21
Budget Allocated Date by IJB to carry out Issued direction(s)	The budget delegated to inverciyde Council is £53.971m and NHS Greater Glasgow and Clyde is £121.183m as per the report.	As detailed in the report.	The Promise Partnership has been awarded one year's funding of £250,000, additional resource of £3k to be funds and Care Experienced Attainment Funding.	As detailed in the report - restructure of existing service to be funded from existing budgets
Functions Covered by Direction	Budget 2021-22	Services Services	Children & Families	Alcohol & Drug Recovery Services
	Inverciyde Council is directed to spend Budget 2021-22 the delegated net budget of £53.97 In line with the Strategic Plan and the budget outlined within the report. NHS Greater Glasgow and Clyde is directed to spend the delegated net budget of £121.183m in line with the Strategic Plan and the budget outlined within the report.	ADP funding plans to be noted and progressed. Funding allocation of £81,407 from the Scottish Government to be spent as outlined in the report. Funding bid to Corra Foundation of £441,882 for a 20 month test of change has been approved in principle and if successful, Inverciyde Council is directed to procure a third party service provider.	Funding allocation via the Promise Partnership of £250,000 to be used to establish the 1 Promise Team and conduct the discovery of (design phase of the Promise plan, including some test of change work. The Council and Health Board are directed to employ a Senior Officer at the appropriate grade, subject to job evaluation, and to fund a modern apprenticeship post. Additional staff outline in the report to be employed in partnership with third sector partners.	Council and Health Board to implement the approved changes to the workforce model in line with the ADRS review as per the report. Council is to transfer 2 posts and associated funding to the Inclusive Education, Culture and Communities directorate to deliver on the Prevention and Education agenda.
Direction to Full Text	Both Council and Health Board	=	Both Council and Health Board	Both Council and Health Board
Ref. no. Report Title	Budget 2021/22	Inverciyde Alcohol and Drug Partnership Update	The Promise Partnership Funding	ADRS - Proposed Update to Workforce Model
Ref. no.	29.03.2 021 118/16/2 021/LA	17.05.2 021 118/20/2 021/AM	17.05.2 021 IIB/23/2 021/5M CA	17.05.2

on to loon	Full Text Council and Health Board jointly are directed to implement the	irection irection irection nance, Planning &		be he	ın-21	With Effect Review Status From Date 21-Jun-21 Dec-21 Curren	late Status sate Dec-21 Current	Does this supersede, revise or revoke a previous Direction Yes	d,	Link to IJB paper I	Link to IJB paper Responsible Officer https://www.inv Head of Finance, erclyde.gov.uk/, Planning & Resources		Most Recent Review (Date)
Poor de la company de la compa	requirements of the invercipde Interim Workforce Plan as attached Appendix B of the report and within the associated budget outlined in the report	training bos (covid) mon	training bod (covid) mon	ies libeing				2 2 3 3 2 3 3 3 1 1 1 2	.0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .	Meeungs/meeun		Kessources	
All functions outlined in Appendix 5 of the report.	All functions outlined in Appendix 5 of the report.	.i	As outlined i Appendix 5.	c			Nov-21 Superse ded	Yes Supersede	3.2021 16/2021/L	https://www.inv erciyde.gov.uk/ meetings/docum erts/14566/0356 20Financial%20 Monitoring%20R	Chief Financial Officer	Finance	01/11/2021 Superseded by Financial Monitoring Report 2021/22 - Period 5 - I1B/48/2021/C G
Implementation Both Council and Health Board jointly are of Management and Health directed to implement the Senior Health & Communities report. Funded Review Board Management Team structure within Finance, Planning & within existing the HSCP as outlined in the report. Resources budgets.	Children & Families Health & Communities Finance, Planning & Resources	e.s	As detailed in report. Fund within existin budgets.	ed g	20-Sep-21	20-Sep-21 Se	Sep-22 Comple ted	O _N	N/A	Private Report	Head of Finance, Planning & Resources Chief Officer	Finance, Planning & Resources	
&C an and utlined	RC All functions outlined in rivices Appendix 5 of the report. an and atlined trlined		As outlined ir.	_	01-Nov-21 (Jan-22 Superse ded		Yes 20.09.2021 In Supersede IB/38/2021/C E E E E E E E E E	erclyde_gov.uk/ meetings/docum ents/14708/03% 20Financial%20 Monitoring%20R eport%202021- 22%20- %2031%20Period%20to %2031%20Period%20to foxogos1,%20Period%20to	Chief Financial Officer	Finance	24/01/2022 Superseded by Financial Monitoring Report 2021/22 - Period 7 - Period 7 - G G
Advanced Clinical Health Board The Health Board is directed to Practice Proposal Only Implement a team of 6 Advanced Adult and Older Adult report. Funded Nurse Practitioners to work across Inpatient from Mental mental health services as outlined in Community Services Transformation the report. Transformation Fund and Medical Staffing Budget	Mental Health Services d Adult and Older Adult oss Inpatient ed in Community Services	t t	As detailed in report. Funde from Mental Health Transformatic Fund and Mee Staffing Budge	the ed on a dical	01-Nov-21	01-Nov-21 No	Nov-22 Current	0	N/A	Private Report	Head of MH, ADRS and Mental Health Homelessness	d Mental Health	

Most Recent Review (Date)		
Service Area	Homelessness	Finance
Link to IJB paper Responsible Officer	Head of MH, ADRS and Homelessness Homelessness	https://www.inv Chief Financial Officer erciyde.gov.uk/ ents/14897/03% 20Financia%20 Monitoring%20B Monitoring%20B %20Period%2010 %2020- %208- %208- %208- %208- %208- %208- %209- %
Link to IJB paper	Private Report	Supersede IIB/48/2021/C erciyde_gov.uk/ G meetings/docum enclings/gocunk IIB/48/2021/C erciyde_gov.uk/ G meetings/docum enclings/gocunk IIB/48/2021/C erciyde_gov.uk/ IIB/48/2021/C Erciyd
Does this Direction supersede, Reference revise or superseded, revoke a revised or previous revoked Direction	N/A	01.11.2021 118/48/2021/C G
Does this supersede, revise or revoke a previous Direction	O _N	Supersede
Status	Nov-22 Current No	Current
Review Date		Mar-22
With Effect Review Status Does this Direction From Date supersede, Reference revise or supersed revoked revoked a revised or previous revoked Direction	01-Nov-21	24-Jan-22 Mar-22 Current Yes
Date Issued	01-Nov-21	24-Jan-22
Budget Allocated Date by IJB to carry out Issued direction(s)	As detailed in the report. Funded within existing budgets including from ADP, ADRS and Rapid Rehousing Transition Plan	As outlined in Appendix 5.
Functions Covered by Direction	Homelessness Service	Alf functions outlined in Appendix 5 of the report.
Full Text	12.1.2 Homeless Service Council only The Council is directed to implement the Rapid Rehousing Support Service, including the creation of an Integrated Homeless Team, with 10 additional pots, as outlined in the report in order to provision order to provide intensive, wraparound support to those with the most complex needs, often caught up in a cycle of repeat, prolonged periods of homelessness.	24.0.1.2 Financial Budget Both Council Inverciyde Council and NHS GG&C All functions outlined in Jointly are directed to deliver services. Appendix 5 of the report. 18/11/2 Report - 2021/22 Board in line with the UB's Strategic Plan and October 2021 within the associated budget outlined in Appendix 5 in Appendix 5.
Direction to Full Text	Gouncil only	alth
Ref. no. Report Title	71.1.2 Homeless Service 22.1 - Development of 118/49/2 Rapid Rehouing 22.1/AM Support Provision September 2021	24.01.2 Financial Budget Both C 222 Monitoring and He 119.11/2 Report - 2021/22 Board 2022/GG Period to 31 October 2021 - Period 7
Ref. no.	01.11.2 021 11B/49/2 021/AM	24.01.2 022 UB/11/2 022/CG



AGENDA ITEM NO: 9

Date: 21 March 2022

Report To: Inverclyde Integration Joint

Board - Audit Committee

Report No: IJBA/09/2022/CG

Allen Stevenson, Interim Corporate Director (Chief

Officer) Inverciyde Health & Social Care Partnership

Contact Officer: Craig Given Contact No: 01475 715381

Subject: EXTERNAL AUDIT – PROPOSED AUDIT FEE 2021/22

1.0 PURPOSE

Report By:

1.1 The purpose of this report is to present the proposed Audit Scotland External Audit Fee for 2021/22, for IJB approval.

2.0 SUMMARY

2.1 The proposed audit fee for 2021/22 is £27,960.

3.0 RECOMMENDATIONS

3.1 It is recommended that the IJB Audit Committee approves the proposed Audit Fee.

Allen Stevenson Interim Chief Officer

Craig Given
Chief Financial Officer

4.0 BACKGROUND & PROPOSED ACTION

4.1 The audit fee is set nationally by Audit Scotland based on an estimate of the number of days and work involved in the audit. The proposed audit fee for 2021/22 is again a flat fee which is the same for all IJBs regardless of size or audit complexity. The proposed fee is £27,960. The Committee is asked to approve the proposed fee.

5.0 **DIRECTIONS**

5.1 Dir

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

6.0 IMPLICATIONS

6.1 **FINANCE**

The financial implications are as outlined in this report. Recurring budget is in place to cover the Audit Fee.

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

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

HUMAN RESOURCES

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

EQUALITIES

There are no equality issues within this report.

Has an Equality Impact Assessment been carried out?

	YES	(see attached appendix)



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.

6.5 How does this report address our Equality Outcomes

There are no Equalities Outcomes implications within this report.

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

6.6 CLINICAL OR CARE GOVERNANCE IMPLICATIONS

There are no governance issues within this report.

6.7 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes

There are no National Wellbeing Outcomes implications within this report.

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 CONSULTATION

7.1 The draft plan was circulated by Audit Scotland to the Chief Financial Officer for comment and feedback and shared with the Chief Officer.

8.0 BACKGROUND PAPERS

8.1 None.