

A meeting of the Inverclyde Integration Joint Board Audit Committee will be held on Monday 26 September 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

BUSINESS		
1.	Apologies, Substitutions and Declarations of Interest	Page
ITEMS FOR ACTION:		
2.	Minute of Meeting of IJB Audit Committee of 27 June 2022	P
3.	IJB Audit Committee Rolling Annual Workplan	P
4.	Internal Audit Progress Report – 28 February to 26 August 2022 Report by Chief Officer, Inverclyde Health & Social Care Partnership	P
5.	Status of External Audit Action Plans at 31 August 2022 Report by Chief Officer, Inverclyde Health & Social Care Partnership	P
6.	Internal Audit Annual Report and Assurance Statement 2021/2022 Report by Chief Officer, Inverclyde Health & Social Care Partnership	P
7.	IJB Risk Register Report by Chief Officer, Inverclyde Health & Social Care Partnership	P
8.	Inverclyde Integration Joint Board – Directions Update August 2022 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>

Please note that the meeting will be recorded for publishing on the Inverclyde Council's website. Inverclyde Council is a Data Controller under UK GDPR and the Data Protection Act 2018 and data collected during any recording will be retained in accordance with Inverclyde Council's Data Protection policy, including, but not limited to, for the purpose of keeping historical records and making those records available.

By entering the online recording please acknowledge that you may be filmed and that any information pertaining to you contained in the video and oral recording of the meeting will be used for the purpose of making the recording available to the public.

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

INVERCLYDE INTEGRATION JOINT BOARD AUDIT COMMITTEE – 27 JUNE 2022

Inverclyde Integration Joint Board Audit Committee

Monday 27 June 2022 at 1.15pm

Present:

Voting Members:

Councillor Elizabeth Robertson (Chair)	Inverclyde Council
Simon Carr (Acting Vice Chair)	Greater Glasgow & Clyde NHS Board
David Gould	Greater Glasgow & Clyde NHS Board

Non-Voting Members:

Diana McCrone	Staff Representative, Greater Glasgow & Clyde NHS Board
Charlene Elliot	Third Sector Representative

Also present:

Allen Stevenson	Interim Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership
Alan Best	Interim Head of Health & Community Care, Inverclyde Health & Social Care Partnership
Craig Given	Chief Finance Officer, Inverclyde Health & Social Care Partnership
Marie Keirs	Senior Finance Manager, Inverclyde Council
Vicky Pollock	Legal Services Manager, Inverclyde Council
Diane Sweeney	Senior Committee Officer, Inverclyde Council
Colin MacDonald	Senior Committee Officer, Inverclyde Council
Councillor Lynne Quinn (observing)	Inverclyde Council

Chair: Councillor Robertson presided.

The meeting took place via video-conference.

18 Apologies, Substitutions and Declarations of Interest 18

No apologies for absence or declarations of interest were intimated.

19 Minute of Meeting of IJB Audit Committee of 21 March 2022 19

There was submitted the Minute of the Inverclyde Integration Joint Board Audit Committee of 21 March 2022.

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

Ms Elliot advised that she had not received a copy of the agenda papers for the meeting and an apology was offered for this omission.

Decided: that the Minute be agreed.

20 2021/22 Draft Annual Accounts 20

There was submitted a report by the Interim Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership appending the draft 2021/22 Annual Accounts and Annual Governance Statement

The report was presented by Mr Given and advised that the unaudited accounts should

INVERCLYDE INTEGRATION JOINT BOARD AUDIT COMMITTEE – 27 JUNE 2022

be submitted to the external auditor by 30 June 2022, the audited accounts be submitted by 30 November 2022 and that the Annual Governance Statement be approved by the Inverclyde Integration Joint Board.

The Committee referred to the General Reserves, noted at page 33 of the Unaudited Annual Accounts as being £962,000, and (1) sought reassurance that this amount would be sufficient to meet future demands, given increasing inflation and salaries and the Scottish Government forecast on spending, and (2) enquired if the General Reserves had been risk assessed. Mr Given provided assurance that risk is assessed on a regular basis and that he was aware of pressure areas. He provided an overview of the measures taken to monitor risk, and acknowledged comments made by the Committee that they would like to see higher General Reserves than the usual, given the current uncertain economic climate. Mr Given further agreed to give the Committee sight of the risk work he is undertaking by providing a report to the next Audit Committee on this matter.

The Committee referred to the Data Indicators at page 5 of the Unaudited Annual Accounts, noting that the figures at Indicators 11, 12 and 13 were higher than the Scottish Average, and requested that background information explaining this be included within the Accounts document. Mr Given agreed to add this to the final version of the Accounts document.

The Committee referred to the further analysis of the Health and Social Care underspends at page 9 of the Accounts, specifically the 'Mental Health recovery and wellbeing additional funding – reserve created in one year' of £877,000, and requested that an explanation for this also be included within the Accounts document. Mr Stevenson advised that this underspend was largely due to difficulties with recruitment which affected all Greater Glasgow and Clyde Boards.

The Committee referred to Data Indicator 18 'Percentage of adults with intensive care needs receiving care at home' on page 5 of the Accounts document, noted as being 65.2%, and questioned what this percentage represented. Mr Best agreed to clarify this for the Committee.

The Committee requested an update on the progress of the Workforce Plan and Mr Given assured members that the Plan was progressing and that there would be a report on this matter at the next IJJB meeting. Mr Stevenson added that all Chief Officers within Greater Glasgow & Clyde Health Board were collaborating in order to provide a uniformed response and that robust recruitment processes were in place.

The Chair thanked officers for the report and noted concerns that there was more information available on Social Care matters than Health Board matters. Mr Stevenson and Mr Given provided reassurance that there were ongoing discussions with their Health Board counterparts and with trade unions, and that a Staff Partnership Forum had been established.

Decided:

- (1) that the proposed approach to complying with the Local Authority Accounts (Scotland) Regulations 2014 be noted;
- (2) that the Annual Governance statement included within the Accounts be approved;
- (3) that the unaudited accounts for 2021/22 be submitted to the IJJB;
- (4) that it be remitted to officers to provide a report detailing the work undertaken by officers to assess the risk factors pertaining to General Reserves to the next meeting; and
- (5) that officers make the changes suggested at the meeting to the final version of the Accounts.

IJOB Audit Committee Rolling Annual Workplan – 26 September 2022

Date	Reports	Lead Officer
26 September 2022	Internal Audit Annual Report and Assurance Statement 2021/22	Chief Internal Auditor
	Internal Audit Progress Report to 26 August 2022	Chief Internal Auditor
	Status of External Audit Action Plans to 31 August 2022	Chief Internal Auditor
	Directions Update	Legal Services Manager (Procurement, Conveyancing & Information Governance) <i>(Min. ref. – IJOB – 21 09 2020 – 86(3))</i>
	Review of Risk Register	Interim Chief Officer <i>(Min. ref. - IJOB AC - 21.06.2021 - 22(4))</i>
20 March 2023	Internal Audit Progress Report to 24 February 2023	Chief Internal Auditor
	Status of External Audit Action Plans to 31 January 2023	Chief Internal Auditor
	Internal Audit Annual Audit Plan 2023/24	Chief Internal Auditor
	External Audit Annual Audit Plan 2022/23	External Audit
	Best Value Annual Report	Chief Finance Officer
	Directions Update	Legal Services Manager (Procurement, Conveyancing & Information Governance)
	Assess risk factors pertaining to General Reserves - report	Chief Finance Officer <i>(Min ref – IJOB AC – 27.06.2022 – 20(4))</i>
26 June 2023	Draft Annual Accounts	Chief Finance Officer
	Internal Audit Progress Report to 2 June 2023	Chief Internal Auditor
	Internal Audit Annual Report and Assurance Statement 2022-23	Chief Internal Auditor
	Status of External Audit Action Plans to 30 April 2023	Chief Internal Auditor
No timescale -	Locality Planning Groups update report	Chief Finance Officer <i>(Min Ref - 24/01/2022 – 8(2))</i>

Report To: Inverclyde Integration Joint Board Audit Committee **Date:** 26 September 2022

Report By: Chief Officer,
Inverclyde Health & Social
Care Partnership **Report No:** IJBA/12/2022/AP

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

Subject: INTERNAL AUDIT PROGRESS REPORT – 28 FEBRUARY TO 26 AUGUST 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 28 February and 26 August 2022 that may have an impact upon the IJB's control environment.

2.0 SUMMARY

- 2.1 The audit plan for 2022/23 was approved at the IJB Audit Committee meeting in March. Two audits are scheduled to be undertaken. These will be carried out between September 2022 and March 2023.
- 2.2 In relation to Internal Audit follow up, there was one action due for completion by 31 August 2022 which has missed the deadline set by management. There are 4 actions being progressed by officers. The current status report is attached at Appendix 1.
- 2.3 In addition, since the last Audit Committee meeting in March 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.

**Appendix
1**

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 28 February and 26 August 2022.

Kate Rocks
Chief Officer Inverclyde Integration Joint Board

4.0 BACKGROUND

- 4.1 In March 2022, the Audit Committee approved the current Internal Audit Annual Plan which detailed the activity to be undertaken during 2022-23.
- 4.2 Internal Audit reports findings and action plans to relevant IJB Officers and the Audit Committee as part of the annual audit plan. A follow up process is in place to allow follow up of current internal audit actions to be co-ordinated and updated by Internal Audit on a monthly basis with regular reporting to the Audit Committee.
- 4.3 In each audit, one of 4 overall opinions is expressed:

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

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

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

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

5.0 CURRENT POSITION

- 5.1 The audit plan for 2022/23 was approved at the IJB Audit Committee meeting in March. Two audits are scheduled to be undertaken. These will be carried out between September 2022 and March 2023.
- 5.2 In relation to Internal Audit follow up, there was one action due for completion by 31 August 2022 which has missed the deadline set by management. 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 March 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

An update report was provided by NHSGG&C Internal Audit in June 2022. This has been reviewed by the Chief Internal Auditor and it can be noted that there were no Grade 4 (very high exposure) recommendations made and no red rated reports.

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 Inverclyde Council.

Financial Implications:

One off Costs

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

Annually Recurring Costs/ (Savings)

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

Legal

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

Human Resources

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

Equalities

6.4 Has an Equality Impact Assessment been carried out?

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

How does this report address our Equality Outcomes?

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

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

National Wellbeing Outcomes

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

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	None
People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community	None
People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	None
People using health and social care services are safe from harm.	None
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	None

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

7.0 DIRECTIONS

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

8.0 CONSULTATIONS

8.1 N/A

9.0 LIST OF BACKGROUND PAPERS

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

**INVERCLYDE INTEGRATION JOINT BOARD
INTERNAL AUDIT REPORT TO AUDIT COMMITTEE ON
STATUS OF INTERNAL AUDIT ACTION PLAN POINTS
AT 31 AUGUST 2022**

Summary: Section 1 Summary of Management Actions due for completion by 31/08/2022

There was one action due for completion by 31 August 2022 which has missed the deadline set by management.

Section 2 Summary of Current Management Actions Plans at 31/08/2022

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

Section 3 Current Management Actions at 31/08/2022

At 31 August 2022 there were 4 current audit action points.

Section 4 Analysis of Missed Deadlines

At 31 August 2022 there were 3 audit action points where the agreed deadline had been missed.

Section 5 Summary of Audit Action Points By Audit Year

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

SUMMARY OF MANAGEMENT ACTION PLANS DUE FOR COMPLETION BY 31.8.2022

SECTION 1

No. of Actions Due	No. of Actions Completed	Deadline missed Revised date set*	Deadline missed Revised date to be set*	No action proposed
1		1		

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

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

SUMMARY OF CURRENT MANAGEMENT ACTIONS AS AT 31.08.2022

SECTION 2

Current Actions	
Due for completion November 2022	2
Due for completion May 2023	1
Due for completion June 2023	1
Total current actions:	4

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

SECTION 4

Report	Action	Original Date	Revised Date	Management Comments
Budgetary Control (March 2020)	<p>Updating the Inverclyde Integration Joint Board's (IJB) reserves strategy (Green)</p> <p>The IJB's Chief Financial Officer will update the IJB's reserves strategy to fully:</p> <ul style="list-style-type: none"> • reflect the terminology used within the IJB's annual accounts regarding reserves; and • allow for the revised Integration Scheme. 	<p>30.09.20 31.09.21 31.08.22</p>	31.06.23	<p>The reserves strategy will be impacted by the review of the integration schemes which are now due for final submission May 2023.</p> <p>It is anticipated that a revised reserves strategy will go to IJB in June 2023.</p>
IJB Integration Scheme Update – Readiness Review (December 2019)	<p>Specifying governance arrangements within the Integration Scheme (Amber)</p> <p>The Scottish Government have confirmed IJBs will be required to review their current integration schemes rather than complete a new scheme. The 6 HSCP across Greater Glasgow and Clyde will contribute to a short life working group to review collectively ensuring cross cutting issues are addressed.</p> <p>The Inverclyde HSCP has identified the appropriate officer to contribute to this work. The HSCP are also working closely with Legal Services within the Council and NHS to review our current Integration Scheme.</p>	31.07.22	31.05.23	<p>Work has continued to be developed on the integration schemes and it has been widely accepted that the July 22 completion date has been ambitious. A revised timetable has been issued by the group with an anticipated completion date of May 23 at the earliest. This will involve extensive consultation with NHS GGC Board, all Six Councils and IJB's with a final draft expected late April 23 and final submission to the Cabinet Secretary in May 23.</p>

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

SECTION 4

Report	Action	Original Date	Revised Date	Management Comments
IJB Performance Management and Reporting Arrangements (July 2021)	Reporting on progress with implementing the IJB's Strategic Plan (Amber) 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.	30.06.22	30.11.22	This will be in place once the revised IJB Strategic Plan is approved in November 2022.

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

SUMMARY OF ACTION PLAN POINTS BY AUDIT YEAR

SECTION 5

The following table sets out the total number of agreed actions raised by audit year together with their completion status as at 31 August 2022.

Audit Year	Total Agreed Actions	Total Actions Completed	Total Current Actions Not Yet Due*		
			Red	Amber	Green
2016/2017	3	3	0	0	0
2017/2018	8	8	0	0	0
2018/2019	6	5	0	1	0
2019/2020	6	5	0	0	1
2020/2021	2	2	0	0	0
2021/2022	6	4	0	1	1
Total	31	27	0	2	2

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

Report To: Inverclyde Integration Joint Board Audit Committee **Date:** 26 September 2022

Report By: Chief Officer,
Inverclyde Health & Social
Care Partnership **Report No:** IJBA/13/2022/AP

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

Subject: STATUS OF EXTERNAL AUDIT ACTION PLANS AT 31 AUGUST 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 August 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 August 2022.
- 2.3 There are 2 current external audit actions being progressed by officers. The current status report is attached at Appendix 1. **Appendix 1**

3.0 RECOMMENDATIONS

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

Kate Rocks
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 August 2022.
- 5.2 There are 2 current external audit actions being progressed by officers. The current status report is attached at Appendix 1.

**Appendix
1**

6.0 IMPLICATIONS

Finance

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

Financial Implications:

One off Costs

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

Annually Recurring Costs/ (Savings)

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

Legal

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

Human Resources

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

Equalities

- 6.4 Has an Equality Impact Assessment been carried out?

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

6.0 IMPLICATIONS (CONTINUED)

How does this report address our Equality Outcomes?

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

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

National Wellbeing Outcomes

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

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	None
People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community	None
People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	None
People using health and social care services are safe from harm.	None

People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	None
Resources are used effectively in the provision of health and social care services.	None

7.0 DIRECTIONS

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

8.0 CONSULTATIONS

8.1 N/A

9.0 LIST OF BACKGROUND PAPERS

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

**INVERCLYDE INTEGRATION JOINT BOARD
INTERNAL AUDIT REPORT TO AUDIT COMMITTEE ON
STATUS OF EXTERNAL AUDIT ACTION PLAN POINTS
AT 31 AUGUST 2022**

Summary: Section 1 Summary of Management Actions due for completion by 31/08/2022

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

Section 2 Summary of Current Management Actions Plans at 31/08/2022

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

Section 3 Current Management Actions at 31/08/2022

At 31 August 2022 there were 2 current audit action points.

Section 4 Analysis of Missed Deadlines

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

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

SUMMARY OF MANAGEMENT ACTION PLANS DUE FOR COMPLETION BY 31.08.2022

SECTION 1

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

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

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

SUMMARY OF CURRENT MANAGEMENT ACTIONS AS AT 31.08.2022

SECTION 2

CURRENT ACTIONS

Month	No of actions
Due for completion March 2023	1
Due for completion May 2023	1
Total Actions	2

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

CURRENT MANAGEMENT ACTIONS AS AT 31.08.2022

SECTION 3

Action	Owner	Expected Date
2019/2020 Annual Audit Report (October 2020)		
<p>Integration Scheme Review Recommendation: The updated Integration Scheme should be approved and submitted to the Scottish Government as soon as practicable.</p> <p>Agreed Action: 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.</p>	Chief Officer	31.05.2023*
<p>Implementation of Locality Planning Groups Recommendation: Locality Planning Groups should be implemented to oversee the development of Locality Action Plans.</p> <p>Agreed Action: This work has inevitably been delayed by Covid-19. However, work is restarting on this now. An initial virtual pilot meeting is due to take place soon for the Port Glasgow Locality Group.</p>	Planning and Performance Manager (HSCP)	31.03.2023*

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

SECTION 4

Report	Action	Original Date	Revised Date	Management Comments
2019/2020 Annual Audit Report (October 2020)	<p>Implementation of Locality Planning Groups This work has inevitably been delayed by Covid-19. However, work is restarting on this now. An initial virtual pilot meeting is due to take place soon for the Port Glasgow Locality Group.</p>	31.03.21	31.03.23	Two Locality Planning Groups have been established (Port Glasgow and Inverkip & Wemyss Bay) and last met in September 2021 with meetings scheduled quarterly. By June 2022, an evaluation of these two groups will take place and decision made by October 2022 as to whether to extend to the other four areas (as per the current model) or consider a streamlined approach of establishing two LPGs covering East and West Inverclyde with the six CEGs continuing to meet regularly.
2019/2020 Annual Audit Report (October 2020)	<p>Integration Scheme Review The Scottish Government have confirmed IJBs will be required to review their current integration schemes rather than complete a new scheme. The IJB is working with the other Greater Glasgow & Clyde IJBs around the timing of this review. It is anticipated that the six IJBs (associated with NHS Greater Glasgow and Clyde) will work together with their Council and Health Board Partners to review their schemes with a view to approving and submitting the updated Integration Schemes to the Scottish Government by July 2022.</p>	31.07.22	31.05.23	Work has continued to be developed on the integration schemes and it has been widely accepted that the July 22 completion date has been ambitious. A revised timetable has been issued by the group with an anticipated completion date of May 23 at the earliest. This will involve extensive consultation with NHS GGC Board, All Six Councils and IJB's with a final draft expected late April 23 and final submission to the Cabinet Secretary in May 23.

Report To: Inverclyde Integration Joint Board Audit Committee **Date:** 26 September 2022

Report By: Chief Officer,
Inverclyde Health & Social Care Partnership **Report No:** IJBA/14/2022/AP

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

Subject: INTERNAL AUDIT ANNUAL REPORT AND ASSURANCE STATEMENT 2021/2022

1.0 PURPOSE

1.1 The purpose of this report is to present the Internal Audit Annual Report and Assurance Statement for 2021/2022 which forms part of the Integration Joint Board's Annual Governance Statement.

2.0 SUMMARY

- 2.1 The Internal Audit Annual Report 2021/2022 is attached as an Appendix to this report for consideration by the Committee. The report concludes that the majority of the IJB's established internal control procedures operated as intended to meet management's control requirements for each area reviewed by Internal Audit. The overall audit opinion is **Satisfactory**. Appendix 1
- 2.2 A follow up process has been established during 2021/2022 to monitor management's progress in implementing agreed action plans arising from Internal Audit reviews.

3.0 RECOMMENDATION

- 3.1 It is recommended that the Audit Committee review and consider the Internal Audit Annual Report and Assurance Statement.

Kate Rocks
Chief Officer
Inverclyde Integration Joint Board

4.0 BACKGROUND

4.1 Public Sector Internal Audit Standards (PSIAS) require that the Chief Internal Auditor provides a written statement to the Section 95 Officer to support the Annual Governance Statement. This report should present an opinion as to the overall adequacy and effectiveness of the organisation's internal control environment.

4.2 The report should also:

- Disclose any qualifications to that opinion, together with reasons for the qualification;
- Present a summary of the audit work undertaken to formulate the opinion including reliance placed on the work by other assurance bodies;
- Draw attention to any issues the Chief Internal Auditor judges particularly relevant to the preparation of the statement on internal control; and
- Compare the work undertaken with work planned.

4.3 The Accounting Code of Practice ("ACOP") requires that the Section 95 Officer produces a signed Annual Governance Statement as part of the Council's Annual Report. This report is subject to External Audit scrutiny as part of the year-end audit process.

5.0 CURRENT POSITION

5.1 The Internal Audit Annual Report 2021/2022 is attached as an Appendix to this report for consideration by the Committee. The report concludes that the majority of the IJB's established internal control procedures operated as intended to meet management's control requirements for each area reviewed by Internal Audit. The overall audit opinion is **Satisfactory**.

5.2 A follow up process has been established during 2021/2022 to monitor management's progress in implementing agreed action plans arising from Internal Audit reviews.

6.0 IMPLICATIONS

6.1 There are no direct 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					

Annually Recurring Costs/ (Savings)

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

Legal

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

Human Resources

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

Equalities

6.4 Has an Equality Impact Assessment been carried out?

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

How does this report address our Equality Outcomes?

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

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

National Wellbeing Outcomes

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

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	None
People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community	None
People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None

People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	None
People using health and social care services are safe from harm.	None
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	None
Resources are used effectively in the provision of health and social care services.	None

7.0 DIRECTIONS

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

8.0 CONSULTATIONS

8.1 Not applicable. This report summarises the work carried out during 2021-2022 which have been included in separate progress reports to Audit Committee.

9.0 LIST OF BACKGROUND PAPERS

9.1 Internal Audit Progress Report to the Audit Committee in September 2021, January and March 2022.

Internal Audit Annual Report and Assurance Statement 2021/2022

8 June 2022

CONTENTS	Page
SECTION 1 – INTRODUCTION	1
SECTION 2 – ASSESSMENT OF RISK MANAGEMENT, CONTROLS AND GOVERNANCE	2
SECTION 3 – INTERNAL AUDIT WORK CONDUCTED	2-6
SECTION 4 – SCOPE, RESPONSIBILITIES AND ASSURANCE	6-8

SECTION 1 – INTRODUCTION

Purpose of this report

- 1.1 The Public Sector Internal Audit Standards (PSIAS) require that the Chief Internal Auditor provides a written statement to the s95 Officer timed to support the Annual Governance Statement. This report constitutes the required statement. As required by PSIAS, this report presents the opinion of the overall adequacy and effectiveness of Inverclyde Integration Joint Board (IJB)'s risk management, control and governance processes, based on the work Internal Audit has performed. The scope of internal audit work, the responsibilities of Internal Audit, and the assurance given on the adequacy and effectiveness of the Internal Control System of the IJB are explained further in Section 4 of this report.

Main objectives of the IJB's Internal Audit Team

- 1.2 Internal Audit is an assurance function that primarily provides an independent, objective opinion to the Board on the control environment. The overall objective of Internal Audit is to review, appraise and report on the adequacy of internal controls as a contribution to the proper, economic, efficient and effective use of resources. A secondary objective is to advise management on improvements in internal control systems.

Scope of the IJB's Internal Audit Team

- 1.3 The scope of Internal Audit allows for unrestricted coverage of the IJB's activities and unrestricted access to records and assets deemed necessary by auditors in the course of an audit.

Acknowledgements

- 1.4 The assistance provided by IJB officers in the course of the work undertaken by Internal Audit during 2021/2022 is gratefully acknowledged.

SECTION 2 – ASSESSMENT OF RISK MANAGEMENT, CONTROLS AND GOVERNANCE

Scope

- 2.1 The work undertaken by Internal Audit in 2021/2022 is summarised in Section 3 of this Report.
- 2.2 The overall assessment arising from work undertaken is summarised in paragraphs 2.3 to 2.4 below. In interpreting this assessment, consideration needs to be given to the respective responsibilities of Management and Internal Audit and the related limitations on the assurance that Internal Audit can provide (as explained in Section 4).

Overall assessment

On the basis of Internal Audit work carried out in 2021/2022, the majority of the IJB's established internal control procedures appeared to operate as intended to meet Management's requirements for the individual systems reviewed by Internal Audit. On the basis of selective testing of key controls it can be concluded that, in the main, controls were generally operating as expected during the period under review, although it does need to be recognised that some recommendations were made by Internal Audit to improve controls. The overall opinion is **Satisfactory**.

Covid-19

The significant incident in late March 2020 continued to test how well the IJB's risk management, governance and internal controls framework operated during 2021/22. The Chief Officer and the senior management team were actively involved in the local resilience planning and recovery arrangements through their dual roles in Inverclyde Council and NHS Greater Glasgow and Clyde.

Other matters

- 2.3 Summaries of the issues arising in relation to each system or activity covered by Internal Audit work in 2021/2022 are reported separately to the Audit Committee. Appropriate responses to the recommendations made in internal audit reports have been obtained. When actioned, the recommendations made in the Internal Audit reports should provide management with additional comfort that the system of control operates as intended. It is therefore imperative that the agreed actions are implemented by management.
- 2.4 A follow up process is in place which ensures that all actions arising from internal audit reviews are captured within a follow up database, and are subject to follow up and validation by the Internal Audit on a regular basis, with reporting on progress to the Audit Committee.

SECTION 3 – INTERNAL AUDIT WORK CONDUCTED

Internal audit approach

- 3.1 The internal audit work has been conducted in accordance with an established methodology that promotes quality and conformance with the Public Sector Internal Audit Standards and the agreed Internal Audit annual audit plan.

Progress on the 2021/2022 internal audit plan

- 3.2 The Annual Internal Audit Operational Plan 2021/2022 was discussed and agreed with the Audit Committee on 21 March 2021.
- 3.3 Progress against planned audit work for the year to 31 March 2022 can be summarised as follows:

Progress on the 2021/2022 internal audit plan (Continued)

Audit Area	Indicative Scope	Status
Performance Management and Reporting Arrangements	Performance management and reporting is a key aspect of corporate governance. Internal audit will review the adequacy and effectiveness of the performance management and reporting arrangements.	Complete
Implementation of Directions policy	The updated IJB Directions policy and guidance was approved by the IJB at its meeting in September 2020. Internal Audit will review the adequacy and effectiveness of arrangements in place to implement the new policy and procedures.	Complete
Action Plan Follow Up	To monitor the progress of implementation of agreed internal audit action plans by management.	Ongoing
Audit Planning and Management	Review and update of the audit universe and attendance at IJB Audit Committee.	Complete
Internal Audit Annual Report	Annual report on 2021-2022 audit activity.	Complete

Performance Measures

3.7 The following performance measures were in place for 2021/2022:

Measure	Description	Target	Actual
1. Final Report	Percentage of final reports issued within 2 weeks of draft report.	100%	100%
2. Draft Report	Percentage of draft reports issued within 3 weeks of completion of fieldwork.	90%	100%
3. Audit Plan Delivery	Percentage of audits completed v planned.	85%	100%
4. Audit Budget	Percentage of audits completed within budgeted days.	80%	100%
5. Audit Recommendations	Percentage of audit recommendations agreed.	90%	100%
6. Action Plan Follow Up	Percentage of action plans followed up – Internal Audit.	100%	100%
7. Customer Feedback	Percentage of respondents who rated the overall quality of internal audit as satisfactory or above.	100%	100%
8. Staff compliance with CPD	Number of training hours undertaken to support CPD	60	60
9. Management engagement	Number of meetings with Chief Officer and Chief Financial Officer as appropriate	2 per year	2

Reliance from other assurance providers

- 3.8 During 2021/2022, there were no audit reviews carried out by Inverclyde Council which impacted on the IJB.
- 3.9 In terms of audit follow up processes, Internal Audit follow up each action when it falls due with regular reporting to the Council's Corporate Management Team and Inverclyde Council Audit Committee on the implementation of agreed actions and any matters of concern.
- 3.10 In addition, corporate fraud investigations have been undertaken in relation to blue badge enquiries to establish validity of use.
- 3.11 The overall audit opinion reported in the Inverclyde Council Internal Audit Annual Audit report was as follows:-

On the basis of Internal Audit work carried out in 2021/2022, the majority of Inverclyde Council's established internal control procedures appeared to operate as intended to meet Management's requirements for the individual systems reviewed by Internal Audit. On the basis of selective testing of key controls it can be concluded that, in the main, controls were generally operating as expected during the period under review, although it does need to be recognised that a number of recommendations were made by Internal Audit to improve controls. The overall opinion is Satisfactory.

COVID-19

The significant incident in late March 2020 and the Council's responses as a Category 1 responder during the COVID-19 pandemic continued to test how well the Council's risk management, governance and internal controls framework has operated during the period. Regular COVID-19 Update reports continued to be presented to P&R Committee throughout 2021/22.

All members of the Council's Corporate Management Team and key stakeholders participated in a variety of Local Authority specific Covid-19/Business Continuity response/recovery groups supported by the Civil Contingencies Service. A comprehensive Covid-19 Risk Register was maintained covering all aspects of service delivery affected by the pandemic which has been maintained on a regular basis.

The Council also maintained its organisational and partnership recovery plans to ensure the Council can continue to meet requirements and achieve the strategic priorities set out in the Corporate Plan.

- 3.12 During 2021/2022, a number of Internal Audit Reports have been issued to NHSGGC. Update reports have been provided to the Chief Internal Auditors of the 6 Integration Joint Boards within the NHSGG&C area in relation to the work carried out to provide relevant assurances on the system of internal control.
- 3.13 Internal Audit undertake follow up work on a quarterly basis to confirm the implementation of recommendations. The results of the follow up work are then reported to the Audit Committee with any matters of concern being drawn to the attention of this Committee.
- 3.14 The overall audit opinion reported in the NHSGGC Internal Audit Annual Audit report 2021/2022 was as follows:

In our opinion NHSGGC has a framework of governance and internal control that provides reasonable assurance regarding the effective and efficient achievement of objectives.

Reliance by external audit

- 3.15 During the year under review, liaison has taken place with the IJB's External Auditors through joint attendance at the Audit Committee, meetings, ad hoc discussions and the sharing of audit plans and reports. External audit considers the work of Internal Audit throughout the year to inform their audit process.

SECTION 4 – SCOPE, RESPONSIBILITIES AND ASSURANCE

Approach

- 4.1 The internal audit work has been conducted in accordance with an established methodology that promotes quality and conformance with the Public Sector Internal Audit Standards and the agreed annual audit plans. The overall scope of the internal audit work encompasses the IJB's risk management practices, governance practices and internal controls.
- 4.2 The Annual Audit Plan is based on a formal risk assessment which is revised on an ongoing basis to reflect evolving risks and changes within the IJB. The Internal Audit Annual Audit Plan 2021/2022 was discussed and agreed at the Audit Committee on 21 March 2021. In addition, consultation on the content and coverage of the audit plan took place with the Chief Officer and the Chief Financial Officer.

Responsibility and reporting lines of the Chief Internal Auditor

- 4.3 The Chief Internal Auditor reports functionally to the IJB Audit Committee and has a right of access and freedom to report in her own name to all officers and members and particularly those charged with governance. The adoption of these arrangements enables the IJB to conform with the reporting line requirements of the International Standard on Auditing ("ISA") (UK and Ireland) 610 and the Public Sector Internal Audit Standards which were adopted by Local Government in the United Kingdom on 1 April 2013.
- 4.4 The Chief Internal Auditor also has a specific responsibility to the IJB's s95 Officer to provide assurances which informs the preparation of the Annual Governance Statement for inclusion in the IJB's Annual Report and Accounts.

The work of Internal Audit

- 4.5 Internal Audit is an independent appraisal function established by the IJB for the review of the internal control system as a service to the organisation. It objectively examines, evaluates and reports on the adequacy of internal control as a contribution to the proper, economic, efficient and effective use of resources.
- 4.6 In accordance with the principles of Corporate Governance, the Chief Internal Auditor reports with independence and impartiality to the IJB's Audit Committee on a regular basis. The Chief Internal Auditor prepares an annual report containing a view on the adequacy and effectiveness of the systems of internal controls.
- 4.7 The Internal Audit team operates in accordance with an established methodology that promotes quality and conformance with the Public Sector Internal Audit Standards. Internal Audit undertakes an annual programme of work approved by the IJB's Audit Committee. The Annual Audit Plan is based on a formal risk assessment, which is revised on an ongoing basis to reflect emerging risks and changes within the IJB. The Internal Audit Annual Audit Plan for 2021/2022 was discussed and agreed at the Audit Committee on 21 March 2021.
- 4.8 All Internal Audit reports identifying system improvements or non-compliance with expected controls are brought to the attention of management and include recommendations for improvement and agreed Action Plans. It is management's responsibility to give proper consideration to Internal Audit reports and take appropriate action on audit recommendations. The Chief Internal Auditor is required to confirm that appropriate arrangements are made to determine whether action has been taken on Internal Audit recommendations or that management has understood and accepted the risks of not taking action. Management progress on implementing actions is reported to the IJB's Audit Committee at each committee cycle.

Responsibilities of Management and Internal Audit

- 4.9 It is Management's responsibility to maintain systems of risk management, internal control and governance.
- 4.10 Internal Audit is an element of the internal control framework established by management to examine, evaluate and report on accounting and other controls over operations. Internal Audit assists management in the effective discharge of its responsibilities and functions by examining and evaluating controls. Internal Audit cannot be held responsible for internal control failures.
- 4.11 Internal Audit's role includes assessing the adequacy of the risk management, internal controls and governance arrangements put in place by management and performing testing on a sample of transactions to ensure those controls were operating for the period under review.
- 4.12 Public Sector Internal Audit Standards (PSIAS) require us to communicate on a timely basis all facts and matters that may have a bearing on our independence. We can confirm that all staff members involved in 2021/22 internal audit reviews were independent of operational processes and their objectivity was not compromised in any way.

Basis of the internal audit assessment

- 4.13 In accordance with Guidance supporting the Public Sector Internal Audit Standards, the assessment on risk management, control and governance is based upon:
- Internal Audit work undertaken by the Internal Audit Team during the year to 31 March 2022 (in accordance with the annual audit plan approved by the Audit Committee);
 - The assessments of risk completed during the preparation and updating of the annual audit plan;
 - Reports issued by Internal Auditors for Inverclyde Council and the NHSGGC;
 - Reports issued by Audit Scotland, the IJB's External Auditors; and
 - Internal Audit's knowledge of the IJB's governance, risk management and performance monitoring arrangements.

Limitations on the assurance that Internal Audit can provide

- 4.14 It should be noted that the assurance expressed within this report can never be absolute. It is not a guarantee that all aspects of risk management, control and governance are adequate. The most that internal audit can provide to the s95 Officer and Audit Committee is reasonable assurance based on the work performed.
- 4.15 There are inherent limitations as to what can be achieved by internal control and consequently limitations to the conclusions that can be drawn from this engagement. These limitations include the possibility of faulty judgment in decision making, of breakdowns because of human error, of control activities being circumvented by the collusion of two or more people and of management overriding controls. Also there is no certainty that internal controls will continue to operate effectively in future periods or that the controls will be adequate to mitigate all significant risks which may arise in future.
- 4.16 Organisations and their internal control needs differ by type, size, culture and management philosophy. One organisation's internal control system may be very different from another's in relation to similar processes. Also, decisions made in designing internal controls inevitably involve the acceptance of some degree of risk. As the outcome of the operation of internal controls cannot be predicted with absolute assurance any assessment of internal control is judgmental.

Satisfactory	<p>Controls evaluated are adequate, appropriate and effective to provide reasonable assurance that risks are being managed and objectives should be met.</p> <ul style="list-style-type: none"> • A limited number of Amber rated issues may have been identified, but generally only green issues have been found in individual audit assignments. • None of the individual assignment reports have an overall opinion of <i>Requires Improvement or Unsatisfactory</i>.
Generally Satisfactory with some improvement needed	<p>A few specific control weaknesses were noted: generally however, controls evaluated are adequate, appropriate and effective to provide reasonable assurance that risks are being managed and objectives should be met.</p> <ul style="list-style-type: none"> • A number of Amber rated issues identified in individual audit assignments that collectively do not significantly impact the system of internal control. • Red rated issues that are isolated to specific systems or processes. • None of the individual assignment reports have an overall opinion of <i>Unsatisfactory</i>.
Major improvement needed	<p>Numerous specific control weaknesses were noted. Controls evaluated are unlikely to provide reasonable assurance that risks are being managed and objectives should be met.</p> <ul style="list-style-type: none"> • A high number of Amber rated issues that collectively have a significant impact on some parts of the system of internal control but are not widespread. • A number of Red rated issues that collectively have a significant impact on some parts of the system of internal control but are not widespread. • A small number of individual assignment reports have an overall opinion of <i>Requires Improvement or Unsatisfactory</i>.
Unsatisfactory	<p>Controls evaluated are not adequate, appropriate or effective to provide reasonable assurance that risks are being managed and objectives should be met.</p> <ul style="list-style-type: none"> • Amber and Red rated issues identified in individual assignments that collectively are widespread to the system of internal control. • A high number of individual assignment reports have an overall opinion of <i>Requires Improvement or Unsatisfactory</i>.

Report To:	Inverclyde Integration Joint Board Audit Committee	Date: 26 September 2022
Report By:	Kate Rocks Chief Officer Inverclyde Health & Social Care Partnership	Report No: IJBA/11/2022/CG
Contact Officer:	Craig Given Chief Financial Officer	Contact No: 01475 715381
Subject:	IJB RISK REGISTER	

1.0 PURPOSE

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

2.0 SUMMARY

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

3.0 RECOMMENDATIONS

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

Kate Rocks, Chief Officer

4.0 BACKGROUND

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

4.3 The IJB risk register is formally reviewed by the Inverclyde HSCP Senior Management Team at least twice a year, the last review took place on 24 January 2022. The IJB Risk Register and any changes then come to the IJB Audit Committee twice each year.

5.0 IJB STRATEGIC RISK REGISTER

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

- Risk 3 – Financial Sustainability / Constraints / Resource Allocation – Risk score has been increased due to potential budget reductions in Health and additional rising costs in Social Care. A formal Budget exercise will commence shortly.
- Risk 4 – Financial Implication of Response to Covid 19 - The risk score has been increased and narratives updated as no further funding has been identified beyond 2022/23 and exit plans are required for a number of our costs in Staffing and Children & Families.
- Risk 10 – Overall HSCP Workforce – This is a new risk added due to high staff turnover and staff retention issues.

6.0 DIRECTIONS

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

7.0 IMPLICATIONS

7.1 FINANCE

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

One-off Costs

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

Annually Recurring Costs / (Savings)

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

LEGAL

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

HUMAN RESOURCES

7.3 There are no specific human resources 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?

√

YES

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

7.4.2 How does this report address our Equality Outcomes

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

7.5 **CLINICAL OR CARE GOVERNANCE IMPLICATIONS**

There are no governance issues within this report.

7.6 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	None
People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community	Our continue focus on Home 1st approach ensure frail and elderly people can remain at home longer.
People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	None
People using health and social care services are safe from harm.	Provider substantiality payments ensure our most vulnerable service users receive support during the pandemic.
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	None
Resources are used effectively in the provision of health and social care services.	None

8.0 CONSULTATION

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

IJB RISK REGISTER

Organisation	Inverclyde Integration Joint Board
Date Last Reviewed by IJB/Audit Committee	24/01/2022
Date Last Reviewed by Officers	11/08/2022

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

3	<p>Financial Sustainability / Constraints / Resource Allocation Risk due to increased demand for services, potentially not aligning budget to priorities, and/or anticipated future funding cuts from our funding partners which leave the IJB with insufficient resources to meet national & local outcomes & to deliver Strategic Plan Objectives. Risk of overspending on MH Budget due to high agency costs as a result of difficulties recruiting to specialist roles. Risk of financial sustainability due potential budget reductions from both Social Care and Health. Potential Consequences: IJB unable to deliver Strategic Plan objectives, reputational damage, dispute with Partners, needs not met, risk of overspend on Integrated Budget.</p>	<p>Resources/Finance 1. Strategic Plan 2. Due Diligence work 3. Close working with Council & Health when preparing budget plans 4. Regular budget monitoring reporting to the IJB 5. Regular budget reports and meetings with budget holders 6. Regular Heads of Service Finance meetings 7. Close working with other local Authority and GG&C Finance colleagues and HSCP CFOs to deliver a whole system approach to financial planning and delivery 8. Medium to Long Term Finance Plan</p>	5	3	15	3	<p>Horizon scanning - ongoing discussions with Council and Health Board Finance Officers, national CFO network and Scottish Government. SMT discussions to develop a recovery plan going forward to help reduce future funding pressure. A staffing model that includes an Advanced Nurse Practitioner team is being progressed within Mental Health Services which will absorb some of the workload that has traditionally fallen within the remit of medical staff and be instrumental in reducing reliance on agency doctors and associated costs. It will deliver greater continuity of care for patients and provide career development for staff. A formal Budget / Savings exercise will commence shortly with the IJB with the aim of identifying our potential funding gap and developing a range of savings / efficiency options which will deliver a balanced budget.</p>	Head of Finance, Planning & Resources
4	<p>Financial Implications of Responding to Covid-19 Risk due to increased demand for services, changing service delivery models and no funding being identified by the Scottish Government beyond 22/23. The requirement will be to deliver an exit plan on any recurring costs.</p>	<p>Resources/Finance 1. Mobilisation Plan on which all costs are tracked 2. Regular engagement with Scottish Government through provision of regular mobilisation plan updates 3. Governance in place for authorisation and monitoring of costs 4. Active engagement with third and independent sectors in relation to their costs and sustainability 5. Review of any savings expected to be undeliverable in year 6. Regular reporting to the IJB 7. Close working with other local Authority and GG&C Finance colleagues and HSCP CFOs to deliver a whole system approach to financial planning and delivery</p>	4	3	12	3	<p>Horizon scanning - ongoing discussions with Scottish Government, Health Board and Council Finance Officers, other GG&C CFOs, national CFO network and Scottish Government. Officers have set aside a small staffing contingency within their EMRs to cover a potential shortfall in funding for short term covered posts if the pandemic is over while some of these contracts are still in place. Exit plan will need to be implemented especially in areas such as Childrens placement costs and Staffing.</p>	Head of Finance, Planning & Resources

5	<p>Workforce Sustainability and Implementation of the Workforce Plan Risk in not delivering the Workforce Plan objectives. Risks within specific operational service areas of recruitment gaps for suitably qualified staff leading to inability of the IJB to deliver its Strategic Objectives</p> <p>Potential Consequences: Don't attract or retain the right people, don't have an engaged & resilient workforce, service user needs not met, strategic plan not delivered, & reputational damage.</p>	<p>Resources/Workforce</p> <ol style="list-style-type: none"> 1. Workforce Plan and quarterly progress reporting 2. EKSF, TURAs monitoring 3. Training budgets 4. Workforce Planning 5. Succession Planning for Local Authority Staff 6. Staff Governance Group & reports 7. Update papers to IJB on specific issues in mental health, review of roles within MDT being undertaken. 	4	3	12		<p>Difficulties in respect of recruitment to specialist roles, using agency staff short term to address this</p> <p>Ongoing difficulties in recruiting to specialist roles despite repeated advertising, using agency staff in short term to address this. Review roles within MDT to include non-medical prescribers.</p> <p>While some recruitment was initially put on hold as a result of Covid-19 posts are now being backfilled again on a needs basis. In addition the pandemic and public focus on key services led to the HSCP running a very successful home care recruitment campaign locally and volunteering numbers have increased significantly too.</p>	Chief Officer
Risk No	*Description of RISK Concern (x,y,z)	Current Controls	IMPACT Rating (A)	L'HOOD Rating (B)	Risk Score (A*B)		Additional Controls/Mitigating Actions & Time Frames with End Dates	Who is Responsible? (name or title)
6	<p>Home Care Increased demand on services due to other areas of provision across GGC not being operational or limited operationally. Priority to support hospital discharge and inter meadiate care home placements</p>	<ol style="list-style-type: none"> 1. Monitor increasing demand and impact on core work including recruitment and retention of care at home staff 2. Triage and prioritise work to support delayed discharge 	3	3	9		<p>3 x a week review of Care & Support at Home capacity. Winter team to be established to support hospital delays. Review of recruitment processes. Review of reablement. Implement one handed care and AHP activity in wards</p>	Head of Health and Community Care
7	<p>Contingency Plans Services maintain contingency plans to maintain crucial services during current Covid Community Transmission. Priority will be internal 24/7 supported living and Homecare Service to support acute delays and critical support</p>	<p>Twice weekly LFT testing of front line staff</p> <p>Full stocks of PPE and LFDs with established procurement lines</p> <p>Implementation of Public Health & Scottish Government Guidelines</p> <p>Monthly LRMT</p> <p>Weekly Care Home /Community Services huddle</p> <p>Multidisciplinary meeting</p> <p>Monthly Care Home Mangers meeting</p>	3	3	9		<p>Daily updates on service position relating to staffing levels.</p> <p>All front line Health & Social Care staff undertaking twice weekly LFDs.</p> <p>Contingency plans in place.</p> <p>4th Vaccination to Care homes and immunosuppressed, over 50s and Health & Social Care Staff in Sept 22</p> <p>Support to care homes – status reported each week to PH and GGC</p>	Head of Health and Community Care
8	<p>Performance Management Information Risk due to lack of quality, timeous performance information systems to inform strategic & operational planning & decision making.</p> <p>Potential Consequences: Misallocate resources to non-priority areas, lack of focus, decisions based on anecdotal thinking or biased perspectives, & community needs not met.</p>	<p><u>Performance</u></p> <ol style="list-style-type: none"> 1. Performance management infrastructure and reporting cycle 2. Regular financial monitoring reports showing performance against budget and projected outturns 3. Locality planning arrangements 4. Robust budget planning processes 5. Quarterly Performance Reviews 6. Data repository regularly updated 7. Quality strategy and self evaluation processes 8. Regular review of Performance reporting frameworks 	3	3	9		<p>Annual performance Report delivered and 6 monthly reviews to IJB will be implemented. HSCP has now commissioned a new PMS system- Pentana , currently being implemented. Will track all actions/PIs and Risks</p>	Head of Finance, Planning & Resources

Strategy							
9	<p>Locality Planning to Better Understand the Needs of the Community</p> <p>Risk of failure to effectively deliver locality planning.</p> <p>Potential consequences: Poor quality decision making, don't address health inequalities or understand root causes of why they persist, lack of understanding about future needs & service demands, unable to allocate resources appropriately to deliver the strategic plan, high levels of disease, drug & alcohol misuse consume ever more resources.</p>	<ol style="list-style-type: none"> 1. Two New Health and Social Care Locality Groups to be established- East and West Inverclyde 2. Health Improvement Programmes 3. Locality planning to enhance local targeting of services 4. Strategic Planning Group 5. Equalities Outcomes to be established 6. Strategic Needs Assessment Work which is advanced at a community and care group level 7. The above informs work across care groups and partnership working 	3	2	6	<p>Establishment of two Health and Social Care Locality Groups- East and West Inverclyde approved by IJB and will be established by October 2022</p>	<p>Planning & Performance Manager/ Head of Finance, Planning & Resources</p>
10	<p>Overall HSCP workforce: Failure to maintain agreed workforce model and agreed staff: patient ratio's, critical staffing levels throughout the HSCP and back office / professional functions. Consequences to increase in staff turnover due to demographics i.e. Ageing workforce and recruitment / retention issues.</p>	<ol style="list-style-type: none"> 1. Adhering to policy and co-ordinating the use of supplementary staffing based on the Monitoring and Escalation Guidance, Safe and effective staffing policy. 2. Compliance with the Rostering policy to ensure predicated absence allowance is adhered to. 3. Vacancies advertised timeously. 	4	3	12	<p>Daily huddle meetings with reps from all wards and disciplines to discuss areas of clinical pressure across site; identifying gaps in service and opportunity to appropriately redeploy staff across site. Weekly board wide huddle to identify specific areas of system pressures. Centralised recruitment drive of Newly Qualified Nurse (NQNs) completed with limited allocation of NQNs for Inverclyde. Regular Manager / Staff meeting / SMT discussions around critical service areas. Caseload management to maximise to use of available resources. Work to increase the efficiency of service provision through better use of resources.</p>	<p>All Heads of Service</p>

Key: see diagram

Requires active management.

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

Contingency plans.

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

Good Housekeeping.

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

Review periodically.

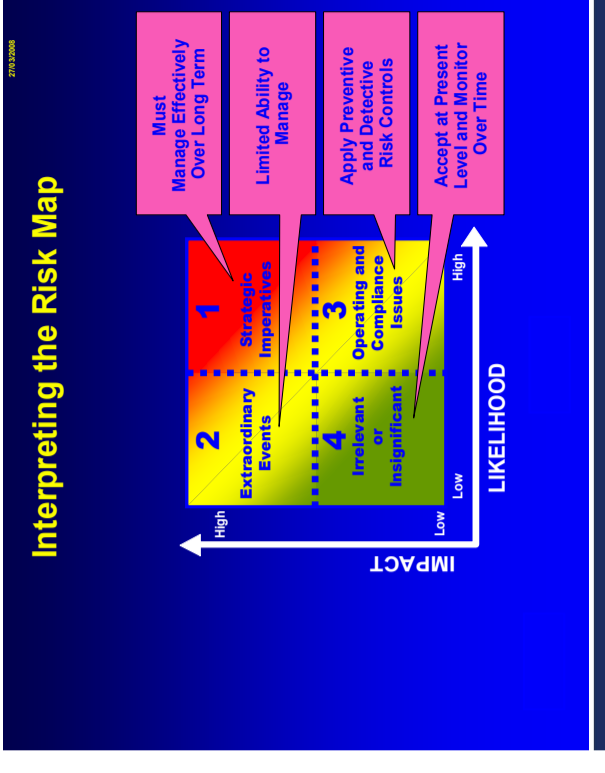
Risks are unlikely to require mitigating actions but status should be reviewed frequently to ensure conditions have not changed.

Very High
(16-25)

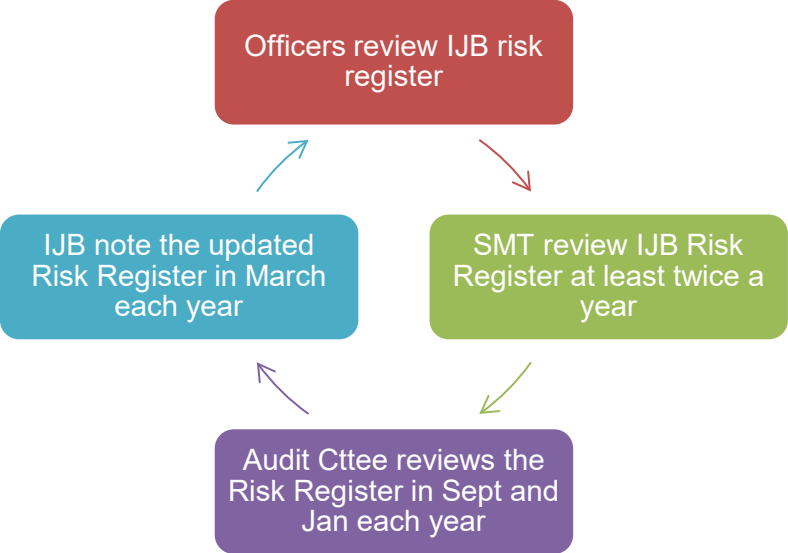
High
(10-15)

Medium
(5-9)

Low
(1-4)



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



Report To:	Inverclyde Integration Joint Board Audit Committee	Date:	26 September 2022
Report By:	Kate Rocks, Chief Officer, Inverclyde Health & Social Care Partnership	Report No:	VP/LS/065/22
Contact Officer:	Vicky Pollock	Contact No:	01475 712180
Subject:	Inverclyde Integration Joint Board – Directions Update August 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 March 2022 to August 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 fourth such report and covers the period from March 2022 to August 2022.

3.0 RECOMMENDATIONS

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

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 [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 fourth such report and covers the period from March 2022 to August 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 March 2022 to August 2022 (inclusive):
- the IJB has issued 5 Directions;
 - 2 of these were Directions to both the Council and Health Board;
 - 2 of these was Directions to the Council only; and
 - 1 of these was Directions to the Health Board only.
- 5.3 Of the 5 Directions issued by the IJB:
- 4 remain open (current); and
 - 1 is closed and has been superseded.
- 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, 2021/22 and 2022/23
- 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 in September 2022.

6.0 PROPOSALS

- 6.1 It is proposed that the IJB Audit Committee notes the content of report and the summary of Directions issued by the IJB between March and August 2022.

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?

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

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 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

8.0 DIRECTIONS

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

9.0 CONSULTATIONS

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

10.0 BACKGROUND PAPERS

10.1 None.

Ref. no.	Report Title	Direction to	Full Text	Functions Covered by Direction	Budget Allocated by IJB to carry out direction(s)	Date Issued	With Effect From	Review Date	Status	Does this supersede, revise or revoke a previous Direction	Direction Reference superseded, revised or revoked	Link to IJB paper	Responsible Officer	Service Area	Most Recent Review (Date)
17.03.20 IJB/36/20/20/LA	Indicative Inverclyde IJB Budget 2020/21	Both Council and Health Board	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.	Budget 2020-21	The budget delegated to Inverclyde Council is £52.289m and NHS Greater Glasgow and Clyde is £115.554m as per the report.	17-Mar-20	17-Mar-20	Mar-21	Superseded	No	N/A	Indicative Inverclyde IJB Budget 2020/21	Chief Finance Officer	Finance	Direction superseded by in year Financial Monitoring reports
17.03.20 IJB/17/20/20/AH	Inverclyde Alcohol and Drug Recovery Development Update	Both Council and Health Board	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.	Alcohol & Drug Recovery Services	£825k over 3 years from Transformation Fund if future funding from Scot Govt to ADP is not confirmed	17-Mar-20	17-Mar-20		Current	No	N/A	Inverclyde Alcohol and Drug Recovery Development Update	Head of MH, Addictions and Homelessness	Alcohol & Drug Recovery	
17.03.20 IJB/17/20/20/AH	Inverclyde Alcohol and Drug Recovery Development Update	Both Council and Health Board	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.	Alcohol & Drug Recovery Services	£825k over 3 years from Transformation Fund if future funding from Scot Govt to ADP is not confirmed	17-Mar-20	17-Mar-20		Current	No	N/A	Inverclyde Alcohol and Drug Recovery Development Update	Head of MH, Addictions and Homelessness	Alcohol & Drug Recovery	
17.03.20 IJB/21/20/20/SMCA	Hard Edges Scotland Report	Council only	IJB has approved the appointment of two care navigators Grade 6 posts for 12 months through Inverclyde Council	Children & Families	£81.6k new Hard Edges funding	17-Mar-20	17-Mar-20		Current	No	N/A	Hard Edges Scotland Report	Head of Children, Families and Criminal Justice	Childrens Services	
17.03.20 IJB/22/20/20/SMCA	Continuing Care	Both Council and Health Board	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.	Children & Families	£122k one off funding from Continuing Care EMR £18k recurring for running costs of the flats to be funded from existing budget	17-Mar-20	17-Mar-20		Completed	No	N/A	Continuing Care	Head of Children, Families and Criminal Justice	Childrens Services	Direction superseded by in year Financial Monitoring reports
17.03.20 IJB/31/20/20/AS	Tailored Moving & Handling Solutions	Both Council and Health Board	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.	Health & Community Care	£125.5k over 18 months	17-Mar-20	17-Mar-20		Completed	No	N/A	Tailored Moving and Handling Solutions	Head of Health & Community Care	ICIL	
17.03.20 IJB/29/20/20/AS	Review of Health & Social Care Out of Hours Services	Both Council and Health Board	Appointment of additional posts required to deliver the integrated service as outlined in the report.	Health & Community Care	£203.5k to be funded from core budgets from 2020/21 onwards	17-Mar-20	17-Mar-20		Completed	No	N/A	Private report	Head of Health & Community Care	Older People OOH Services	

Ref. no.	Report Title	Direction to	Full Text	Functions Covered by Direction	Budget Allocated by IJB to carry out direction(s)	Date Issued	With Effect From	Review Date	Status	Does this supersede, revise or revoke a previous Direction	Direction Reference superseded, revised or revoked	Link to IJB paper	Responsible Officer	Service Area	Most Recent Review (Date)
17.03.20 IJB/19/20/20/AH	Inverclyde HSCP Alcohol and Drug Service Redesign Workforce	Both Council and Health Board	Council and Health Board to implement the workforce plan in line with the ADRS review as per the report	Alcohol & Drug Recovery Services	As detailed in the report - restructure of existing service to be funded from existing budgets	17-Mar-20	17-Mar-20		Completed		N/A	Private report	Head of MH, Addictions and Homelessness	Alcohol & Drug Recovery	
17.03.20 IJB/32/20/20/AS	Social Care Case Management - Mimi Competition	Both Council and Health Board	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 agreed by the IJB through Prudential Borrowing.	HSCP	£243k through IJB prudential borrowing	17-Mar-20	17-Mar-20	Updates will be brought back to the IJB regularly as the project proceeds	Current	No	N/A	Private Report	Head of Strategy & Support Services	Performance & Information	Direction will be superseded by in year subsequent update reports in year
12.05.20 IJB/38/20/20/LA	Covid-19 Mobilisation Plan	Both Council and Health Board	Inverclyde Council and NHS GG&C jointly are directed to implement the Covid-19 Mobilisation Plan outlined within the report and Appendix 1	All functions outlined within the report and Appendix 1.	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.	12-May-20	12-May-20	May-21	Superseded	No	N/A	Covid 19 Mobilisation Plan	Chief Finance Officer	Finance	Direction superseded by in year Financial Monitoring reports covid spend & funding updates
23.06.20 IJB/44/20/20/LL	Unscheduled Care Commissioning Plan	Both Council and Health Board	Note the requirement to implement the Unscheduled Care Commissioning Plan once finalised	HSCP	N/A	23-Jun-20	23-Jun-20	Updates will be brought back to the IJB regularly as the project proceeds	Current	No	N/A	Unscheduled Care Commissioning Plan	Head of Strategy & Support Services	Commissioning	Direction will be superseded by subsequent update reports
23.06.20 IJB/45/20/20/SWGA	Champions Board/Proud2Care	Council only	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	Children & Families	£70k and £40k through the Transformation Fund	23-Jun-20	23-Jun-20	Updates will be brought back to the IJB regularly as the project proceeds	Current	No	N/A	Champions Board/Proud2Care	Head of Children, Families and Criminal Justice	Childrens Services	
23.06.20 IJB/50/20/20/DWCC	District Nursing Workforce	Health Board only	Funding provided to support 5 nurses to undertake the Specialist Practitioner Qualification in District Nursing, including backfill costs.	District Nursing	£207.3k through District Nursing Employee Costs	23-Jun-20	23-Jun-20		Completed	No	N/A	District Nursing Workforce	Head of Health & Community Care	District Nursing	
24.08.20 IJB/54/20/20/LA	HSCP Workforce Plan 2020-2024	Both Council and Health Board	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.	All functions outlined within the report and Appendix A.	As outlined in Appendix A.	24-Aug-20	24-Aug-20	Aug-21	Current	No	N/A	HSCP Workforce Plan 2020-2024	Head of Strategy & Support Services	HSCP	Direction will be superseded by in year subsequent Financial Monitoring reports

Ref. no.	Report Title	Direction to	Full Text	Functions Covered by Direction	Budget Allocated by JIB to carry out direction(s)	Date Issued	With Effect From	Review Date	Status	Does this supersede, revise or revoke a previous Direction	Direction Reference superseded, revised or revoked	Link to JIB paper	Responsible Officer	Service Area	Most Recent Review (Date)
24.08.20 IB/51/20 20/L	Health and Social Care Additional Staffing - Covid 19	Both Council and Health Board	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.	All functions outlined within Appendix A of the report.	The budget delegated to Inverclyde Council is £568,290 and NHS GG&C is £521,018 as outlined in Appendix A.	24-Aug-20	24-Aug-20	Apr-21	Superseded	No	N/A	Health and Social Care Additional Staffing - Covid 19	Chief Officer	HSCP	
21.09.20 IB/60/20 20/LA	Financial Budget Monitoring Report - 2020/21 Period to 30 June 2020 - Period 3	Both Council and Health Board	Inverclyde Council and NHS GG&C jointly are directed to deliver services in line with the JIB's Strategic Plan and within the associated budget outlined in Appendix 5	All functions outlined in Appendix 5 of the report.	As outlined in Appendix 5.	21-Sep-20	21-Sep-20	Nov-20	Superseded	Yes	17.03.2020 IB/36/2020/LA	Financial Budget Monitoring Report - 2020/21 Period 3	Chief Finance Officer	Finance	Direction will be superseded by in year subsequent Financial Monitoring reports
21.09.20 IB/68/20 20/LA	HSCP Digital Strategy 2020/21	Both Council and Health Board	Inverclyde Council and NHS GG&C jointly are directed to deliver the digital actions within the digital investment plan for 2020/21 as outlined in the report and Appendix A. (Includes SWIFT replacement).	All functions outlined in Appendix A of the report.	As outlined in Appendix A.	21-Sep-20	21-Sep-20	Sep-21	Current	No	N/A	HSCP Digital Strategy 2020/21	Head of Strategy & Support Services	HSCP	Direction will be superseded by in year subsequent Financial Monitoring reports
02.11.20 IB/65/20 20/L	Financial Budget Monitoring Report - 2020/21 Period to 31 August 2020 - Period 5	Both Council and Health Board	Inverclyde Council and NHS GG&C jointly are directed to deliver services in line with the JIB's Strategic Plan and within the associated budget outlined in Appendix 5.	All functions outlined in Appendix 5 of the report.	As outlined in Appendix 5.	02-Nov-20	02-Nov-20	25-Jan-21	Superseded	Yes	21.09.2020 IB/60/2020/LA	Financial Budget Monitoring Report - 2020/21 Period 5	Chief Finance Officer	Finance	
25.01.21 IB/07/20 20/LA	Financial Budget Monitoring Report - 2020/21 - Period to 31 October 2020 - Period 7	Both Council and Health Board	Inverclyde Council and NHS GG&C jointly are directed to deliver services in line with the JIB's Strategic Plan and within the associated budget outlined in Appendix 5.	All functions outlined in Appendix 5 of the report.	As outlined in Appendix 5.	25-Jan-21	25-Jan-21	Mar-21	Superseded	Yes	02.11.2020 IB/65/2020/L	Financial Budget Monitoring Report - 2020/21 - Period 7	Chief Finance Officer	Finance	
29.03.21 IB/15/20 21/LA	Financial Budget Monitoring Report - 2020/21 - Period to 31 December 2020 - Period 9	Both Council and Health Board	Inverclyde Council and NHS GG&C jointly are directed to deliver services in line with the JIB's Strategic Plan and within the associated budget outlined in Appendix 5.	All functions outlined in Appendix 5 of the report.	As outlined in Appendix 5	29-Mar-21	29-Mar-21	May-21	Superseded	Yes	25.01.21 IB/07/2020/LA	Financial Budget Monitoring Report - 2020/21 Period 9	Chief Finance Officer	Finance	
29.03.21 IB/13/20 21/L	Emergency Powers Decision Log to March 2021	Health Board only	Appointment of 2 additional Health Visitors required to support Children's Services as outlined in the report.	Children & Families	£120k per annum including on costs	11-Feb-21 (emergency powers)	11-Feb-21	May-21	Current	No	N/A	Emergency Powers Decision Log	Head of Children, Families and Criminal Justice	Childrens Services	

Ref. no.	Report Title	Direction to	Full Text	Functions Covered by Direction	Budget Allocated by IJB to carry out direction(s)	Date issued	With Effect From	Review Date	Status	Does this supersede, revise or revoke a previous Direction	Direction Reference superseded, revised or revoked	Link to IJB paper	Responsible Officer	Service Area	Most Recent Review (Date)
29.03.20 21 IJB/16/2 021/LA	Inverclyde IJB Budget 2021/22	Both Council and Health Board	Inverclyde Council is directed to spend the delegated net budget of £53.971m 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.	Budget 2021-22	The budget delegated to Inverclyde Council is £53.971m and NHS Greater Glasgow and Clyde is £121.183m as per the report.	29-Mar-21	29-Mar-21	Mar-22	Superseded	No	N/A	Inverclyde IJB Budget 2021/22	Chief Finance Officer	Finance	20/09/2021 Superseded by Financial Monitoring Report 2021/22 - Period 3 - IJB/38/2021/CG
17.05.20 21 IJB/20/2 021/AM	Inverclyde Alcohol and Drug Partnership Update	Both Council and Health Board	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, Inverclyde Council is directed to procure a third party service provider.	Alcohol & Drug Recovery Services	As detailed in the report.	17-May-21	17-May-21	May-22	Completed	No	N/A	Inverclyde Alcohol and Drug Partnership Update	Head of MH, ADRS and Homelessness	Alcohol and Drug Recovery	
17.05.20 21 IJB/23/2 021/SMC A	The Promise Partnership Funding	Both Council and Health Board	Funding allocation via the Promise Partnership of £250,000 to be used to establish the I Promise Team and conduct the discovery of/design phase of the I 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.	Children & Families	The Promise Partnership has been awarded one year's funding of £250,000, additional resource of £3k to be utilised via ADP funds and Care Experienced Attainment Funding.	17-May-21	17-May-21	May-22	Current	No	N/A	The Promise Partnership Funding	Head of Children, Families and Criminal Justice	Children's Services	
17.05.20 21	ADRS - Proposed Update to Workforce Model	Both Council and Health Board	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.	Alcohol & Drug Recovery Services	As detailed in the report - re-structure of existing service to be funded from existing budgets	17-May-21	17-May-21	May-22	Completed	No	N/A	Private Report	Head of MH, ADRS and Homelessness	Alcohol and Drug Recovery	

Ref. no.	Report Title	Direction to	Full Text	Functions Covered by Direction	Budget Allocated by IJB to carry out direction(s)	Date issued	With Effect From	Review Date	Status	Does this supersede, revise or revoke a previous Direction	Direction Reference superseded, revised or revoked	Link to IJB paper	Responsible Officer	Service Area	Most Recent Review (Date)
21.06.20 21 IB/26/2 021/AM	HSCP Interim Workforce Plan 2021/22	Both Council and Health Board	Council and Health Board jointly are directed to implement the requirements of the Inverclyde Interim Workforce Plan as attached to Appendix B of the report and within the associated budget outlined in the report	Finance, Planning & Resources	As detailed in the report. £100,000 training board. £50,000 wellbeing (Covid) monies	21-Jun-21	21-Jun-21	Dec-21	Current	Yes Supersede	Supersedes Interim Workforce Plan 2020/21 - this is a supporting document to the overarching Workforce Strategy 2020/24 - see 24.06.2020 IB/54/2020/LA	HSCP Interim Workforce Plan 2021/22	Head of Finance, Planning & Resources	Finance, Planning & Resources	
20.09.20 21 IB/38/2 021/CG	Financial Budget Monitoring Report - 2021/22 Period to 30 June 2021 - Period 3	Both Council and Health Board	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	All functions outlined in Appendix 5 of the report.	As outlined in Appendix 5.	20-Sep-21	20-Sep-21	Nov-21	Superseded	Yes Supersede	29.03.2021 IB/16/2021/LA	Financial Budget Monitoring Report 2021/22 Period 3	Chief Financial Officer	Finance	01/11/2021 Superseded by Financial Monitoring Report 2021/22 - Period 5 - IB/48/2021/CG
20.09.20 21 IB/25/2 021/LL	Implementation of Management Review	Both Council and Health Board	Council and Health Board jointly are directed to implement the Senior Management Team structure within the HSCP as outlined in the report.	Children & Families Health & Communities Finance, Planning & Resources	As detailed in the report. Funded within existing budgets.	20-Sep-21	20-Sep-21	Sep-22	Completed	No	N/A	Private Report	Head of Finance, Planning & Resources Chief Officer	Finance, Planning & Resources	
01.11.20 21 IB/48/2 021/CG	Financial Budget Monitoring Report - 2021/22 Period to 31 August 2021 - Period 5	Both Council and Health Board	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	All functions outlined in Appendix 5 of the report.	As outlined in Appendix 5.	01-Nov-21	01-Nov-21	Jan-22	Superseded	Yes Supersede	20.09.2021 IB/38/2021/CG	Financial Budget Monitoring Report 2021/22 Period 5	Chief Financial Officer	Finance	24/01/2022 Superseded by Financial Monitoring Report 2021/22 - Period 7 - IB/11/2022/CG
01.11.20 21 IB/50/2 021/AM	Advanced Clinical Practice Proposal	Health Board only	The Health Board is directed to implement a team of 6 Advanced Nurse Practitioners to work across mental health services as outlined in the report.	Mental Health Services Adult and Older Adult Inpatient Community Services	As detailed in the report. Funded from Mental Health Transformation Fund and Medical Staffing Budget	01-Nov-21	01-Nov-21	Nov-22	Current	No	N/A	Private Report	Head of MH, ADRS and Homelessness	Mental Health	
01.11.20 21 IB/49/2 021/AM	Homeless Service - Development of Rapid Rehousing Support Provision September 2021	Council only	The Council is directed to implement the Rapid Rehousing Support Service, including the creation of an integrated Homeless Team, with 10 additional posts, as outlined in the report in 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.	Homelessness Service	As detailed in the report. Funded within existing budgets including from ADP, ADRS and Rapid Rehousing Transition Plan	01-Nov-21	01-Nov-21	Nov-22	Current	No	N/A	Private Report	Head of MH, ADRS and Homelessness	Homelessness	
24.01.20 22 IB/11/2 022/CG	Financial Budget Monitoring Report - 2021/22 Period to 31 October 2021 - Period 7	Both Council and Health Board	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	All functions outlined in Appendix 5 of the report.	As outlined in Appendix 5.	24-Jan-22	24-Jan-22	Mar-22	Superseded	Yes Supersede	01.11.2021 IB/48/2021/CG	Financial Budget Monitoring Report 2021/22 Period 7	Chief Financial Officer	Finance	21/03/2022 Superseded by Financial Monitoring Report 2021/22 - Period 9 - IB/20/2022/CG

Ref. no.	Report Title	Direction to	Full Text	Functions Covered by Direction	Budget Allocated by IJB to carry out direction(s)	Date issued	With Effect From	Review Date	Status	Does this supersede, revise or revoke a previous Direction	Direction Reference superseded, revised or revoked	Link to IJB paper	Responsible Officer	Service Area	Most Recent Review (Date)
21.03.2022	Financial Budget Monitoring Report - 2021/22 Period to 31 December 2021 - Period 9	Both Council - and Health Board	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	All functions outlined in Appendix 5 of the report.	As outlined in Appendix 5.	21-Mar-22	21-Mar-22	Jun-22	Superseded	Yes Supersede	24.01.2022 IJB/14/2022/CG	Financial Budget Monitoring Report 2021/22 Period 9	Chief Financial Officer	Finance	

