



Municipal Buildings, Greenock PA15 1LY

Ref: DS

Date: 15 March 2024

**A meeting of the Inverclyde Integration Joint Board Audit Committee will be held on Monday 25 March 2024 at 1pm within the Municipal Buildings, Greenock.**

**Members may attend the meeting in person or via remote online access. Webex joining details have been sent to Members and Officers. Members are requested to notify Committee Services by 12 noon on Friday 22 March 2024 how they intend to access the meeting.**

**In the event of connectivity issues, Members are asked to use the *join by phone* number in the Webex invitation and as noted above.**

**Please note that this meeting will be live-streamed via YouTube with the exception of any business which is treated as exempt in terms of the Local Government (Scotland) Act 1973 as amended.**

**Further information relating to the recording and live-streaming of meetings can be found at the end of this notice.**

**VICKY POLLOCK**  
Interim Head of Legal & Democratic Services

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The reports for this meeting are on the Council’s website.

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Enquiries to – <b>Diane Sweeney</b> – Tel 01475 712147
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**INVERCLYDE INTEGRATION JOINT BOARD AUDIT COMMITTEE – 25 SEPTEMBER 2023**

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**Inverclyde Integration Joint Board Audit Committee**

**Monday 25 September 2023 at 1.00pm**

**Present:**

**Voting Members:**

David Gould (Chair)	Greater Glasgow & Clyde NHS Board
Councillor Lynne Quinn (Vice Chair)	Inverclyde Council
Councillor Sandra Reynolds	Inverclyde Council
Alan Cowan	Greater Glasgow & Clyde NHS Board

**Non-Voting Members:**

Ciorstaidh Reichle	On behalf of Diana McCrone, Staff Representative, Greater Glasgow & Clyde NHS Board
Charlene Elliott	Third Sector Representative, CVS Inverclyde

**Also present:**

Chris Paisley	KPMG LLG
Kate Rocks	Chief Officer, Inverclyde Health & Social Care Partnership
Marie Keirs	On behalf of Craig Given, Chief Finance Officer, Inverclyde Health & Social Care Partnership
Andi Priestman	Chief Internal Auditor, Inverclyde Council
Vicky Pollock	Legal Services Manager, Inverclyde Council
Alan Best	Interim Head of Health & Community Care, Inverclyde Health & Social Care Partnership
Gail Kilbane	Alcohol & Drug and Homelessness Service Manager, Inverclyde Health & Social Care Partnership
Audrey Howard	Interim Head of Justice & Children's Services, Inverclyde Health & Social Care Partnership
Iain Strachan	Head of Legal, Democratic, Digital & Customer Services, Inverclyde Council
Diane Sweeney	Senior Committee Officer, Inverclyde Council
Colin MacDonald	Senior Committee Officer, Inverclyde Council

**Chair:** David Gould presided.

The meeting was held at the Municipal Buildings, Greenock, with Mr Gould, Councillor Reynolds, Ms Reichle and Ms Elliott attending remotely.

**20 Apologies, Substitutions and Declarations of Interest 20**

An apology for absence was intimated on behalf of:

Diana McCrone	Staff Representative, Greater Glasgow & Clyde NHS Board (with Ciorstaidh Reichle substituting)
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No declarations of interest were intimated.

**21 Minute of Meeting of IJJB Audit Committee of 26 June 2023 21**

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

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of 26 June 2023.

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

**Decided:** that the Minute be agreed.

### 22 Annual Accounts for the Financial Year Ended 31 March 2023

22

There was submitted a report by the Chief Officer, Inverclyde Health & Social Care Partnership appending (1) the representation letter to KPMG LLP, being the IJJB's external auditor, (2) the Audited Annual Accounts 2022/23, and (3) KPMG LLP's Annual Audit Report to the IJJB and the Controller of Audit.

The report was presented by Ms Keirs, who thanked the team responsible for completing the accounts in challenging circumstances, and Mr Paisley was then invited to present the KPMG LLP report. Mr Paisley thanked Ms Keirs and Mr Given for their efficient and comprehensive responses made during the auditing process.

The Board commented favourably on the report and acknowledged the long-standing strong governance of the IJJB.

The Chair formally thanked Mr Given, Ms Keirs, KPMG LLP and their wider teams for their work on the Audited Annual Accounts.

**Decided:**

(1) that it be recommended to the IJJB that the Chair, Chief Officer of Inverclyde Health & Social Care Partnership and Chief Financial Officer of Inverclyde Health & Social Care Partnership be authorised to accept and sign the final 2022/23 Accounts on behalf of the IJJB;

(2) that the Letter of Representation, as detailed at appendix 1 of the report, be endorsed and it be recommended to the IJJB that this be signed by the Chief Financial Officer of Inverclyde Health & Social Care Partnership;

(3) that the content of the ISA (260) report, as detailed at appendix 3 to the report, be noted;

(4) that it be noted that a further version of the ISA (260) report will be presented to the IJJB in November, following completion on the wider Scope and Best Value Work by KPMG LLP; and

that the thanks of the Committee be extended to Inverclyde Health & Social Care Partnership officers and KPMG LLP for their work on the Audited Annual Accounts.

### 23 IJJB Audit Committee Rolling Annual Workplan

23

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

**Decided:** that the Rolling Annual Workplan be noted.

### 24 Internal Audit Progress Report 5 June to 1 September 2023

24

There was submitted a report by the Chief Officer, Inverclyde Health & Social Care Partnership on the progress made by Internal Audit during the period 5 June to 1 September 2023.

The report was presented by Ms Priestman and being the regular progress report advised of updates since the last meeting. Ms Priestman also advised members that there would be an informal development session arranged for November which would include Best Value.

The Committee sought clarity on any possible duplication of work between Internal and External Audit, and Ms Priestman provided a comprehensive explanation of the governance arrangements and processes.

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**Decided:** that the progress made by Internal Audit for the period 5 June to 1 September 2023 be noted.

### 25 Status of External Audit Action Plans at 31 August 2023 25

There was submitted a report by the Chief Officer, Inverclyde Health & Social Care Partnership on the status of current actions from External Audit Action Plans at 31 August 2023.

The report was presented by Ms Priestman and being the regular progress report advised of updates since the last meeting.

**Decided:** that the progress to date in relation to the implementation of external audit actions be noted.

### 26 Inverclyde Integration Joint Board – Directions Update August 2023 26

There was submitted a report by the Chief Officer, Inverclyde Health & Social Care Partnership providing a summary of the Directions issued by the IJJB to Inverclyde Council and NHS Greater Glasgow & Clyde in the period March 2023 to August 2023.

The report was presented by Ms Pollock, this being the sixth such report.

The Board requested clarification on the frequency of Directions reports, and Ms Pollock confirmed that the IJJB Audit Committee received two reports a year and the IJJB an annual report.

**Decided:** that the contents of the report be noted.

### 27 Inverclyde Adult Support and Protection Partnership – Adult Support and Protection Quality Improvement Plan 2021-22 Update 27

There was submitted a report by the Chief Officer, Inverclyde Health & Social Care Partnership providing an update on the progress to date of the Adult Support and Protection Quality Improvement Plan 2021-22 following the 2022/23 audit to capture impact. The report was presented by Ms Rocks.

Referring to the summary of progress at paragraph 3.8 of the report, the Committee asked what actions would arise from this. Ms Rocks advised that the governance arrangements would be assessed, and emphasised that the HSCP was not responsible for external partners. It was agreed that this matter would be discussed offline by Ms Rocks and the Chair.

**Decided:**

(1) that the content of the report and progress to date of the Adult Support and Protection Quality Improvement Plan 2021-22 be noted;

(2) that the impact of the 2022/23 audit and the additional actions identified to progress further improvements be noted; and

(3) that it be noted that the 2022/23 audit and progress of the Adult Support and Protection Quality Improvement Plan will be approved at the Public Protection Chief Officers Group.

### 28 IJB Risk Register 28

There was submitted a report by the Chief Officer, Inverclyde Health & Social Care Partnership (1) providing an update on the status of the IJJB Strategic Risk Register, and (2) appending the most recent Risk Register reviewed by officers in August 2023. The report was presented by Ms Keirs.

The Committee requested that officers review the format of the Register, and consider including the previous risk score in order to show the direction of travel.

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The Board sought reassurance on the governance of risk relating to the finances of external providers, particularly if they could no longer provide services, and Ms Keirs provided an overview of the governance checks and processes in place.

The Board asked if there was a risk connected to any possible Scottish Government approved pay increases. Ms Keirs advised that previous pay increases has been funded by the Scottish Government and the expectation was that this would continue. Ms Keirs noted that should this not be the case then the financial plan would require to be updated. Ms Rocks further added that there had been a lot of work internally and that HSCP hourly rates were already over the £12 rate proposed by the Scottish Government, which reduced the risk for the HSCP overall, and that this was therefore not a significant risk for Inverclyde HSCP.

The Board commented on the slow progress of Locality Planning and sought confirmation that the two groups formed were resilient and meeting. Ms Rocks advised that the groups were meeting and were progressing and maturing. The Board further requested that officers consider if Locality Planning should have been removed from the Risk Register.

Referring to paragraph 4.1 of the report and the removal of Risk 11 'Equalities Legislation' as HSCP were now compliant with an Improvement Plan in place, the Board sought clarification on the process for removing 'live' issues and whether this should be downgraded rather than removed. Ms Rocks and Mr Best provided an overview of the governance process in place for this matter, and it was agreed that the role of the Committee in risk management, including Risk Appetite, in relation to the CIPFA Guidance for Audit Committees would be included in the informal development session that Ms Priestman had mentioned earlier in the meeting.

The Chair requested that officers consider adding narrative to the report to clarify the governance arrangements for risks which were removed due to being managed by improvement plans.

**Decided:** that the content of the report be noted.

**IIJB Audit Committee Rolling Annual Workplan – 25 March 2024****(Meeting in March, June and September each year)**

<b>Date</b>	<b>Reports</b>	<b>Lead Officer</b>
25 March 2024	<p>Internal Audit Progress Report to # February 2024</p> <p>Status of External Audit Action Plans to # January 2024</p> <p>Best Value Annual Statement Report</p> <p>Directions Update (<i>Min.Ref. IIJB 21.09.2020 - 86(3)</i>)</p> <p>Review of Risk Register</p>	<p>Chief Internal Auditor</p> <p>Chief Internal Auditor</p> <p>Chief Finance Officer</p> <p>Legal Services Manager (Procurement, Conveyancing &amp; Information Governance)</p> <p>Chief Officer (Min ref – IIJBAC 21/06/2021 22(4))</p>
24 June 2024	<p>Internal Audit Progress Report to # June 2024</p> <p>External Audit Annual Audit Plan 2023/24</p> <p>Status of External Audit Action Plans to # April 2024</p> <p>Internal Audit Annual Report and Assurance Statement 2023-24</p> <p>Internal Audit Annual Strategy and Plan 2024/25</p>	<p>Chief Internal Auditor</p> <p>External Audit</p> <p>Chief Internal Auditor</p> <p>Chief Internal Auditor</p> <p>Chief Internal Auditor</p>
TBC September 2024	<p>Internal Audit Progress Report to #</p> <p>Status of External Audit Action Plans to #</p> <p>Directions Update</p> <p>Review of Risk Register</p>	<p>Chief Internal Auditor</p> <p>Chief Internal Auditor</p> <p>Legal Services Manager (Min ref – IIJB 21/09/2020 86(3))</p> <p>Chief Officer (Min ref – IIJBAC 21/06/2021 22(4))</p>

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<b>Report To:</b>	<b>Inverclyde Integration Joint Board Audit Committee</b>	<b>Date:</b>	<b>25 March 2024</b>
<b>Report By:</b>	<b>Chief Officer Inverclyde Health and Social Care Partnership</b>	<b>Report No:</b>	<b>IJBA/01/2024/AP</b>
<b>Contact Officer:</b>	<b>Andi Priestman</b>	<b>Contact No:</b>	<b>01475 712251</b>
<b>Subject:</b>	<b>Internal Audit Progress Report 4 September 2023 to 1 March 2024</b>		

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## **1.0 PURPOSE AND SUMMARY**

- 1.1  For Decision  For Information/Noting
- 1.2 The purpose of this report is to enable the Inverclyde IJB Audit Committee members to monitor the performance of Internal Audit and gain an overview of the IJB's overall control environment.
- 1.3 The report also presents an update on the Internal Audit work undertaken at Inverclyde Council and NHS Greater Glasgow and Clyde (NHSGGC) between 4 September 2023 and 1 March 2024 that may have an impact upon the Inverclyde IJB's control environment.

## **2.0 RECOMMENDATIONS**

- 2.1 It is recommended that Inverclyde IJB Audit Committee members agree to note the progress made by Internal Audit for the period 4 September 2023 and 1 March 2024.

**Kate Rocks**  
**Chief Officer**  
**Inverclyde Health and Social Care Partnership**



### 3.0 BACKGROUND AND CONTEXT

- 3.1 The audit plan for 2023/24 was approved at the IJB Audit Committee meeting in June 2023.
- 3.2 Internal Audit reports findings and action plans to relevant Inverclyde 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.
- 3.3 In each audit, one of 4 overall opinions is expressed:

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

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

<b>Red</b>	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.
<b>Amber</b>	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.
<b>Green</b>	In our opinion our audit highlighted areas for minor control improvement and/or areas of minor control weakness.

- 3.5 Since the last Internal Audit progress report to the June meeting of the Inverclyde IJB Audit Committee, there was one audit report finalised in relation to IJB Best Value Assurance Review. The remaining audit review is at planning stage.

#### **Best Value Assurance Review (September 2023)**

- 3.6 The Inverclyde Integration Joint Board (IJB) requires the local Health & Social Care Partnership (HSCP) to deliver a range of defined services to residents. Those services are either delivered or commissioned by Inverclyde Council and Greater Glasgow & Clyde NHS Board. Under the Local Government in Scotland Act 2003, IJBs and local authorities are required to secure best value. Under separate legislation NHS Boards must use their resources economically, efficiently and effectively.
- 3.7 Best value encompasses seven themes, which include leadership, governance, the effective use of resources and partnership working. It is important that the Inverclyde IJB has appropriate arrangements in place to effectively manage its duty to secure best value whilst also acknowledging the Inverclyde HSCP's role in delivering services.

- 3.8 The objective of this audit was to provide the IJB Audit Committee with an assessment of the adequacy and effectiveness of the governance, risk management and controls surrounding the key risks faced by Inverclyde IJB in relation to managing its duty to secure best value.
- 3.9 The review focused on the high-level processes and procedures in relation to managing best value and concentrated on identified areas of perceived higher risk, such as not adequately managing the activities required to secure best value and not adequately reporting those activities.
- 3.10 The overall control environment opinion for this audit review was **Strong**. In terms of good practice, we found that the IJB's best value statement provides a solid basis to further enhance reporting of best value, however one GREEN issue was identified as follows:

### **Managing Best Value Arrangements (Green)**

The organisational relationship between the IJB and HSCP means that the IJB's duty to secure best value involves the specialist knowledge of both the IJB's Strategic Planning Group (SPG) and HSCP's Senior Management Team (SMT). We understand that members of these groups continue to undertake a wide range of activities which contribute towards securing best value. Those activities are documented within a best value statement, which is submitted to the IJB Audit Committee each Spring.

However, we found that there is scope to build upon those arrangements by more fully utilising the updated Statutory Guidance on best value by:

- formally reminding SPG and SMT participants of their distinct roles in securing best value for the IJB;
- referencing existing evidence of best value under each of the seven themes; and
- subsequently reporting a summary of that evidence within the annual best value statement.

- 3.11 An action plan is in place to address this issue by 30 April 2024.
- 3.12 In relation to Internal Audit follow up, there was one action due for completion by 31 January 2024 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.
- 3.13 In addition, since the last Internal Audit Progress report to the Audit Committee meeting in June 2023, Internal Audit Reports reported to Inverclyde Council and NHSGGC which are relevant to the Inverclyde IJB are set out at paragraphs 3.14 and 3.15 of this report.
- 3.14 **Inverclyde Council – Internal Audit Progress Report Summary**

Since the last Internal Audit Progress Report considered at the September 2023 meeting of the Audit and Performance Committee, there was one Internal Audit Report reported to Inverclyde Council which are relevant to the Inverclyde IJB.

Audit Report	Report Opinion	Category/Number of Issues		
		Red	Amber	Green
Corporate Purchase Cards – quarterly check (1)	Satisfactory	0	2	1
Attendance Management (2)	Requires Improvement	1	4	1
<b>Total</b>		<b>1</b>	<b>6</b>	<b>2</b>

- (1) The review focused on the high-level processes and procedures in relation to corporate purchase cards and concentrated on identified areas of perceived higher risk, such as not adequately recording expenditure and not completely validating monthly purchase card statements.

The overall control environment opinion for this audit was Satisfactory. There were 2 AMBER issues identified as follows:

- Currently, there is a lack of appropriate guidance for cardholders regarding the correct treatment of transactions which include VAT; and
- Currently, there is a lack of consistent sign-off by cardholders and their supervisors in respect of transaction logs and monthly statements.

- (2) The audit focussed on the high-level processes and procedures in relation to attendance management and concentrated on identified areas of perceived higher risk such as ensuring that absences were completely and accurately handled in a timely manner in line with the Supporting Employee Attendance Policy and Procedure and that management actions required under the Supporting Employee Attendance Policy and Procedure were carried out completely and accurately and in a timely manner.

The overall control environment opinion for this audit review was Requires Improvement due to systemic control weaknesses in the attendance management process. One Red and 4 Amber issues were identified as follows:

- Currently, due to system constraints within Chris21, a multi-step manual process is in place to notify, record and monitor absences which is not efficient or timely and impacts on the completeness and accuracy of absence management information. (Red)
- Not all managers have completed the face-to-face absence management training course or the e-learning training module. Face to face training is underway for HSCP managers. (Amber)
- Employee hierarchy workforce information requires to be provided to the external Occupational Health provider to allow managers to self-refer for occupational health support. Work had started such that some Services are now able to self-refer but the exercise was not yet fully complete as information was outstanding from services within HSCP. This has now been actioned by the HSCP. (Amber)
- Currently, not all managers have access to generate absence reports from Chris21. (Amber)
- Currently, some services are retaining both hard and electronic copies of attendance management documentation and are not compliant with retention and disposal requirements. (Amber)

### **3.15 NHSGGC - Internal Audit Progress Report Summary**

In relation to Internal Audit work undertaken at NHSGGC, due to staffing changes an update on work undertaken during 2023-24 has not yet been provided. There is a commitment to provide an update on the 2023-24 audit work following the audit committee meeting at NHSGGC on 12 March and on a regular basis after each audit committee thereafter.

- 3.16 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.

## **4.0 PROPOSALS**

- 4.1 The Inverclyde IJB Audit Committee is asked to note the progress made by Internal Audit for the period 4 September 2023 to 1 March 2024.

## 5.0 IMPLICATIONS

5.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO
Financial		X
Legal/Risk	X	
Human Resources		X
Strategic Plan Priorities		X
Equalities, Fairer Scotland Duty & Children and Young People		X
Clinical or Care Governance		X
National Wellbeing Outcomes		X
Environmental & Sustainability		X
Data Protection		X

## 5.2 Finance

One off Costs

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

Annually Recurring Costs/ (Savings)

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

## 5.3 Legal/Risk

Where delays arise in delivering the Internal Audit Plan, there is a risk that this may result in an inability to provide a reasonable level of assurance over the Inverclyde IJB's system of internal control to those charged with governance. The main basis for providing assurance is coverage of the planned risk-based audits. Every endeavour is therefore made to ensure that no material slippage occurs in risk-based audits by concentrating resources on these audits.

## 5.4 Human Resources

There are no human resources implications arising from this report.

## 5.5 Strategic Plan Priorities

This report relates to strong corporate governance.

## 5.6 Equalities

### (a) Equalities

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:

	YES – Assessed as relevant and an EqIA is required.
X	NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqIA is required. Provide any other relevant reasons why an EqIA is not necessary/screening statement.

### (b) Equality Outcomes

How does this report address our Equality Outcomes?

<b>Equalities Outcome</b>	<b>Implications</b>
People, including individuals from the above protected characteristic groups, can access HSCP services.	N/A
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	N/A
People with protected characteristics feel safe within their communities.	N/A
People with protected characteristics feel included in the planning and developing of services.	N/A
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	N/A
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	N/A
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	N/A

### (c) Fairer Scotland Duty

If this report affects or proposes any major strategic decision:-

Has there been active consideration of how this report's recommendations reduce inequalities of outcome?

	YES – A written statement showing how this report's recommendations reduce inequalities of outcome caused by socio-economic disadvantage has been completed.
X	NO – Assessed as not relevant under the Fairer Scotland Duty for the following reasons: Provide reasons why the report has been assessed as not relevant.

**(d) Children and Young People**

Has a Children’s Rights and Wellbeing Impact Assessment been carried out?

	YES – Assessed as relevant and a CRWIA is required.
X	NO – Assessed as not relevant as this report does not involve a new policy, function or strategy or recommends a substantive change to an existing policy, function or strategy which will have an impact on children’s rights.

**5.7 Clinical or Care Governance**

This report relates to strong corporate governance.

**5.8 National Wellbeing Outcomes**

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

<b>National Wellbeing Outcome</b>	<b>Implications</b>
People are able to look after and improve their own health and wellbeing and live in good health for longer.	N/A
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	N/A
People who use health and social care services have positive experiences of those services, and have their dignity respected.	N/A
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	N/A
Health and social care services contribute to reducing health inequalities.	N/A
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.	N/A
People using health and social care services are safe from harm.	N/A
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.	N/A
Resources are used effectively in the provision of health and social care services.	N/A

**5.9 Environmental/Sustainability**

Summarise any environmental / climate change impacts which relate to this report.

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
X	NO – This report does not propose or seek approval for a plan, policy, programme, strategy or document which is like to have significant environmental effects, if implemented.

## 5.10 Data Protection

Has a Data Protection Impact Assessment been carried out?

	YES – This report involves data processing which may result in a high risk to the rights and freedoms of individuals.
X	NO – Assessed as not relevant as this report does not involve data processing which may result in a high risk to the rights and freedoms of individuals.

## 6.0 DIRECTIONS

6.1	<b>Direction Required to Council, Health Board or Both</b>	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 CONSULTATION

7.1 The Chief Officer and the Chief Financial Officer have been consulted on this report.

## 8.0 BACKGROUND PAPERS

8.1 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 JANUARY 2024**

**Summary: Section 1 Summary of Management Actions due for completion by 31/01/2024**

There was one action due for completion by 31 January 2024 which has missed the deadline set by management.

**Section 2 Summary of Current Management Actions Plans at 31/01/2024**

At 31 January 2024 there were no audit reports delayed due to management not finalising the action plan within agreed timescales.

**Section 3 Current Management Actions at 31/01/2024**

At 31 January 2024 there were 4 current audit action points.

**Section 4 Analysis of Missed Deadlines**

At 31 January 2024 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 31.01.2024**

**SECTION 1**

<b>No. of Actions Due</b>	<b>No. of Actions Completed</b>	<b>Deadline missed Revised date set*</b>	<b>Deadline missed Revised date to be set*</b>	<b>No action proposed</b>
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 31.01.2024**

**SECTION 2**

<b>Current Actions</b>	
Due for completion April 2024	2
Due for completion July 2024	1
Due for completion September 2024	1
<b>Total current actions:</b>	<b>4</b>

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

**CURRENT MANAGEMENT ACTIONS AS AT 31.01.2024**

**SECTION 3**

<b>Recommendation/Agreed Action</b>	<b>Owner</b>	<b>Expected Date</b>
<b>IJB Integration Scheme Update – Readiness Review (December 2019)</b>		
<p><b>Recommendation:</b>  <b>Specifying governance arrangements within the Integration Scheme (Amber)</b>                      The Scottish Government have confirmed IJBs will be required to review their current integration schemes rather than complete a new scheme. The 6 HSCP across Greater Glasgow and Clyde will contribute to a short life working group to review collectively ensuring cross cutting issues are addressed.</p> <p>The Inverclyde HSCP has identified the appropriate officer to contribute to this work. The HSCP are also working closely with Legal Services within the Council and NHS to review our current Integration Scheme.</p> <p><b>Agreed Action: Recommendation accepted.</b></p>	<b>IJB Chief Officer</b>	<b>01.04.2024*</b>
<b>IJB Performance Management and Reporting Arrangements (July 2021)</b>		
<p><b>Recommendation:</b>  <b>Reporting on progress with implementing the IJB’s Strategic Plan (Amber)</b>                      Management will produce an “easy read” document which covers the progress being made with implementing the IJB’s Strategic Plan and would accompany the Annual Performance report.</p> <p><b>Agreed Action: Recommendation accepted.</b></p>	<b>IJB Chief Financial Officer</b>	<b>30.09.2024*</b>

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

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

**CURRENT MANAGEMENT ACTIONS AS AT 31.01.2024**

**SECTION 3**

<b>Recommendation/Agreed Action</b>	<b>Owner</b>	<b>Expected Date</b>
<b>IJB Workforce Planning Arrangements (February 2023)</b>		
<b>Recommendation:</b> <b>Managing Timescales within the Workforce Plan action plan (Amber)</b> The IJB Chief Financial Officer will also explore the use of the Pentana system to record milestones for actions and priorities for each action. <b>Agreed Action: Recommendation accepted.</b>	<b>IJB Chief Financial Officer</b>	<b>31.07.2024</b>
<b>IJB Best Value Assurance Review (September 2023)</b>		
<b>Recommendation:</b> <b>Managing Best Value Arrangements (Green)</b> Management will: <ul style="list-style-type: none"> <li>• formally advise all SPG and SMT participants of their distinct roles in securing best value for the IJB; and</li> <li>• update best value questionnaire and responses to reflect the seven themes specified in the statutory Guidance.</li> </ul> <b>Agreed Action: Recommendation accepted.</b>	<b>IJB Chief Financial Officer</b>	<b>30.04.2024</b>

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

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

**SECTION 4**

Report	Action	Original Date	Revised Date	Management Comments
<p><b>IJB Integration Scheme Update – Readiness Review (December 2019)</b></p>	<p><b>Specifying governance arrangements within the Integration Scheme (Amber)</b> The Scottish Government have confirmed IJBs will be required to review their current integration schemes rather than complete a new scheme. The 6 HSCP across Greater Glasgow and Clyde will contribute to a short life working group to review collectively ensuring cross cutting issues are addressed.</p> <p>The Inverclyde HSCP has identified the appropriate officer to contribute to this work. The HSCP are also working closely with Legal Services within the Council and NHS to review our current Integration Scheme.</p>	<p>31.07.22 31.05.23</p>	<p>01.04.24</p>	<p>Work has continued to be developed on the integration schemes. We continue to work with our partners at the NHS and Council around updates. Work also continues across all 6 Greater Glasgow and Clyde IJB's to find a consistent approach to our Integration Schemes.</p>
<p><b>IJB Performance Management and Reporting Arrangements (July 2021)</b></p>	<p><b>Reporting on progress with implementing the IJB's Strategic Plan (Amber)</b> Management will produce an “easy read” document which covers the progress being made with implementing the IJB's Strategic Plan and would accompany the Annual Performance report.</p>	<p>30.06.22 30.11.22 30.09.23 31.01.24</p>	<p>30.09.24</p>	<p>Management have advised that this will be updated as part of the new strategic plan with the “plan on a page” proposal.</p>
<p><b>IJB Workforce Planning Arrangements (February 2023)</b></p>	<p><b>Managing Timescales within the Workforce Plan action plan (Amber)</b> The IJB Chief Financial Officer will also explore the use of the Pentana system to record milestones for actions and priorities for each action.</p>	<p>31.12.23</p>	<p>31.07.24</p>	<p>Due to other priorities, work on this action has not started. This will now be progressed with a timescale for completion of July 2024.</p>

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

**SUMMARY OF ACTION PLAN POINTS BY AUDIT YEAR**

**SECTION 5**

The following table sets out the total number of agreed actions raised by audit year together with their completion status at 31 January 2024.

<b>Audit Year</b>	<b>Total Agreed Actions</b>	<b>Total Actions Completed</b>	<b>Total Current Actions Not Yet Due*</b>		
			<b>Red</b>	<b>Amber</b>	<b>Green</b>
2016/2017	3	3	0	0	0
2017/2018	8	8	0	0	0
2018/2019	6	6	0	0	0
2019/2020	6	5	0	1	0
2020/2021	2	2	0	0	0
2021/2022	6	5	0	1	0
2022/2023	6	5	0	1	0
2023/2024	1	0	0	0	1
<b>Total</b>	<b>38</b>	<b>34</b>	<b>0</b>	<b>3</b>	<b>1</b>

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



**AGENDA ITEM NO: 5**

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<b>Report To:</b>	<b>Inverclyde Integration Joint Board Audit Committee</b>	<b>Date:</b>	<b>25 March 2024</b>
<b>Report By:</b>	<b>Chief Officer Inverclyde Health and Social Care Partnership</b>	<b>Report No:</b>	<b>IJBA/02/2024/AP</b>
<b>Contact Officer:</b>	<b>Andi Priestman</b>	<b>Contact No:</b>	<b>01475 712251</b>
<b>Subject:</b>	<b>Status Of External Audit Action Plans at 31 January 2024</b>		

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**1.0 PURPOSE AND SUMMARY**

1.1  For Decision  For Information/Noting

1.2 The purpose of this report is to advise Inverclyde IJB Audit Committee members of the status of current actions from External Audit Action Plans at 31 January 2024.

**2.0 RECOMMENDATIONS**

2.1 It is recommended that Inverclyde IJB members note the progress to date in relation to the implementation of external audit actions.

**Kate Rocks**  
**Chief Officer**  
**Inverclyde Health and Social Care Partnership**

### 3.0 BACKGROUND AND CONTEXT

- 3.1 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.
- 3.2 There were no actions due for completion by 31 January 2024.
- 3.3 There are 5 current external audit actions being progressed by officers. The current status report is attached at Appendix 1.

### 4.0 PROPOSALS

- 4.1 The Inverclyde IJB Audit Committee is asked to note the progress to date in relation to the implementation of external audit actions.

### 5.0 IMPLICATIONS

- 5.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO
Financial		X
Legal/Risk	X	
Human Resources		X
Strategic Plan Priorities		X
Equalities, Fairer Scotland Duty & Children and Young People		X
Clinical or Care Governance		X
National Wellbeing Outcomes		X
Environmental & Sustainability		X
Data Protection		X

### 5.2 Finance

One off Costs

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

Annually Recurring Costs/ (Savings)

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



### 5.3 Legal/Risk

There is a risk that failure to implement agreed audit actions in a timely manner could result in an inability to provide a reasonable level of assurance over the Inverclyde IJB's system of internal control to those charged with governance.

### 5.4 Human Resources

There are no human resources implications arising from this report.

### 5.5 Strategic Plan Priorities

This report relates to strong corporate governance.

### 5.6 Equalities

#### (a) Equalities

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:

	YES – Assessed as relevant and an EqIA is required.
X	NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqIA is required. Provide any other relevant reasons why an EqIA is not necessary/screening statement.

#### (b) Equality Outcomes

How does this report address our Equality Outcomes?

<b>Equalities Outcome</b>	<b>Implications</b>
People, including individuals from the above protected characteristic groups, can access HSCP services.	N/A
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	N/A
People with protected characteristics feel safe within their communities.	N/A
People with protected characteristics feel included in the planning and developing of services.	N/A
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	N/A
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	N/A
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	N/A

#### (c) Fairer Scotland Duty

If this report affects or proposes any major strategic decision:-

Has there been active consideration of how this report’s recommendations reduce inequalities of outcome?

	YES – A written statement showing how this report’s recommendations reduce inequalities of outcome caused by socio-economic disadvantage has been completed.
X	NO – Assessed as not relevant under the Fairer Scotland Duty for the following reasons: Provide reasons why the report has been assessed as not relevant.

**(d) Children and Young People**

Has a Children’s Rights and Wellbeing Impact Assessment been carried out?

	YES – Assessed as relevant and a CRWIA is required.
X	NO – Assessed as not relevant as this report does not involve a new policy, function or strategy or recommends a substantive change to an existing policy, function or strategy which will have an impact on children’s rights.

**5.7 Clinical or Care Governance**

This report relates to strong corporate governance.

**5.8 National Wellbeing Outcomes**

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

<b>National Wellbeing Outcome</b>	<b>Implications</b>
People are able to look after and improve their own health and wellbeing and live in good health for longer.	N/A
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	N/A
People who use health and social care services have positive experiences of those services, and have their dignity respected.	N/A
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	N/A
Health and social care services contribute to reducing health inequalities.	N/A
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.	N/A
People using health and social care services are safe from harm.	N/A
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.	N/A
Resources are used effectively in the provision of health and social care services.	N/A

## 5.9 Environmental/Sustainability

Summarise any environmental / climate change impacts which relate to this report.

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
X	NO – This report does not propose or seek approval for a plan, policy, programme, strategy or document which is like to have significant environmental effects, if implemented.

## 5.10 Data Protection

Has a Data Protection Impact Assessment been carried out?

	YES – This report involves data processing which may result in a high risk to the rights and freedoms of individuals.
X	NO – Assessed as not relevant as this report does not involve data processing which may result in a high risk to the rights and freedoms of individuals.

## 6.0 DIRECTIONS

6.1	<b>Direction Required to Council, Health Board or Both</b>	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 CONSULTATION

7.1 Relevant Officers were asked to provide updates to the report as appropriate.

## 8.0 BACKGROUND PAPERS

8.1 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 JANUARY 2024**

**Summary: Section 1 Summary of Management Actions due for completion by 31/01/2024**

There were no actions due for completion by 31 January 2024.

**Section 2 Summary of Current Management Actions Plans at 31/01/2024**

At 31 January 2024 there were no audit reports delayed due to management not finalising the action plan within agreed timescales.

**Section 3 Current Management Actions at 31/01/2024**

At 31 January 2024 there were 5 current audit action points.

**Section 4 Analysis of Missed Deadlines**

At 31 January 2024 there was one audit action point 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 31.01.2024**

**SECTION 1**

<b>No. of Actions Due</b>	<b>No. of Actions Completed</b>	<b>Deadline missed Revised date set*</b>	<b>Deadline missed Revised date to be set*</b>
0			

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

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

**SUMMARY OF CURRENT MANAGEMENT ACTIONS AS AT 31.01.2024**

**SECTION 2**

**CURRENT ACTIONS**

<b>Month</b>	<b>No of actions</b>
Due for completion April 2024	1
Due for completion June 2024	4
<b>Total Actions</b>	<b>5</b>

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

**CURRENT MANAGEMENT ACTIONS AS AT 31.01.2024**

**SECTION 3**

<b>Action</b>	<b>Owner</b>	<b>Expected Date</b>
<b>2021/22 Annual Audit Report (November 2022)</b>		
<p><b>b/f Integration Scheme Review</b></p> <p><b>Recommendation:</b> The updated Integration Scheme should be approved and submitted to the Scottish Government as soon as practicable.</p> <p><b>Management Response:</b> The Integration Scheme is currently being reviewed. The IJB are working closely with Legal Services within Inverclyde Council and NHS Greater Glasgow and Clyde to review their current Integration Scheme. This matter has been disclosed the Governance Statement in the IJB's annual accounts.</p>	<b>Chief Officer</b>	<b>01.04.2024*</b>
<b>2022/23 Annual Audit Report (November 2023)</b>		
<p><b>Financial Regulations, Standing Orders and Scheme of Delegation (Grade 3)</b></p> <p><b>Recommendation:</b> We recommend timely review and update of all policy and procedures documents.</p> <p><b>Management Response:</b> The updated Financial Regulations will be uploaded to the website as soon as possible. We have reviewed the standing orders and scheme of delegation informally and there have been no changes to these from our partner organisations, hence we haven't put forward updated versions. We will discuss with our partner organisations and either present updated versions to the IJB in June 2024 or include an update of no required changes as part of the Chief Officers report.</p>	<b>Chief Finance Officer</b>	<b>30.06.2024</b>

\* See analysis of missed deadlines – Section 4

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

**CURRENT MANAGEMENT ACTIONS AS AT 31.01.2024**

**SECTION 3**

<b>Action</b>	<b>Owner</b>	<b>Expected Date</b>
<p><b>Longer term financial planning (Grade 2)</b> <b>Recommendation</b> We recommend that the IJB work with partners to develop longer term forecasts / plans, and saving plans to bridge the identified long-term funding gap.</p> <p><b>Management Response:</b> We are working with our partners in the Council and Health board to develop savings proposals as suggested. These will also be presented to our IJB budget working group and then presented to the full IJB as part of a development session. These will be presented as part of our budget setting exercise in March 2024. These savings will cover the next 3 years initially. Further initiatives will be looked into to deal with the medium to long term view once we know the outcome of the National Care service consultation and recommendation.</p>	<b>Chief Finance Officer</b>	<b>30.06.2024</b>
<p><b>Risk Management Strategy (Grade 3)</b> <b>Recommendation:</b> We recommend timely review and update of the IJB's Risk Management Strategy.</p> <p><b>Management Response:</b> The IJB has recently agreed to work in partnership with Inverclyde Council on updating the Risk Strategy process. The IJB and the Council will jointly fund a new post to take this forward. We still remain comfortable with the existing risk strategy and we provide regular updates to the IJB on all our main risks. We will have an updated Risk Management Strategy for June 2024.</p>	<b>Chief Finance Officer</b>	<b>30.06.2024</b>
<p><b>Performance Against National Indicators (Grade 2)</b> <b>Recommendation:</b> We recommend that a root cause analysis be carried out to investigate, and action plans developed and monitored, in respect of those areas with deteriorating performance.</p> <p><b>Management Response:</b> A root cause analysis is currently underway and we will factor this into our new 5 year strategic plan. We will also hold a development session by Jan/Feb 2024 with our IJB to analyse areas that have deteriorated in more detail.</p>	<b>Chief Finance Officer</b>	<b>30.06.2024</b>



**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
2021/22 Annual Audit Report (November 2022)	<p><b>b/f Integration Scheme Review Recommendation:</b> The updated Integration Scheme should be approved and submitted to the Scottish Government as soon as practicable.</p> <p><b>Agreed Action:</b> The Integration Scheme is currently being reviewed. The JB are working closely with Legal Services within Inverclyde Council and NHS Greater Glasgow and Clyde to review their current Integration Scheme. This matter has been disclosed the Governance Statement in the JB's annual accounts.</p>	31.05.23	01.04.24	<p>This continues to be outstanding. The Integration schemes have not been agreed across all partners yet. We continue to work with both the NHS and Council around this matter.</p> <p>Recent work has seen this issue progress where we hope to go to consultation shortly with both our partners in Health and Inverclyde Council. We are working towards an April 2024 completion.</p>

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<b>Report To:</b>	<b>Inverclyde Integration Joint Board Audit Committee</b>	<b>Date:</b>	<b>25 March 2024</b>
<b>Report By:</b>	<b>Kate Rocks Chief Officer Inverclyde Health &amp; Social Care Partnership</b>	<b>Report No:</b>	<b>IJBA/3/2024/CG</b>
<b>Contact Officer:</b>	<b>Craig Given Head of Finance, Planning &amp; Resources Inverclyde Health &amp; Social Care Partnership</b>	<b>Contact No:</b>	<b>01475 715381</b>
<b>Subject:</b>	<b>IJB Best Value Statement 2023/24</b>		

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## **1.0 PURPOSE AND SUMMARY**

1.1  For Decision  For Information/Noting

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

Appendix A contains the Draft Best Value Statement for 2023/24. This is reviewed and updated annually as part of the annual accounts process.

## **2.0 RECOMMENDATIONS**

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

**Kate Rocks  
Chief Officer  
Inverclyde Health and Social Care Partnership**

### 3.0 BACKGROUND AND CONTEXT

- 3.1 Integration Joint Boards have a statutory duty to make arrangements to secure best value. To achieve this, IJBs are required to have effective arrangements in place for scrutinising performance, monitoring progress towards achieving strategic objectives and holding partners to account.
- 3.2 Part of evidencing the work that the IJB does in relation to this is through officers reviewing and updating the Best Value Statement enclosed at Appendix A each year as part of the annual accounts process.
- 3.3 The statement considers Inverclyde's position in relation to 7 key Audit Scotland Themes of Best Value. This has been updated for 2023/24 in line with an internal audit review into Best Value in the IJB. Based on this statement and placing appropriate reliance on the Best Value arrangements in place through the Council and Health Board no additional action is required by the IJB at this time over and above the actions already taking place as detailed in the statement. These 7 questions and draft responses were sent to all IJB members during the year for comment and those comments were used to update the enclosed draft statement.
- 3.4 In compiling the response, a questionnaire was sent to all IJB members in February 2024. The survey detailed the 7 Best Value prompt questions recommended by Audit Scotland and showed the proposed responses to each of those. 8 responses were received to the questionnaire. In the main, respondents agreed with the proposed narrative. Where changes were proposed these have been shown as tracked changes on the attached appendix. The table in Appendix B details the responses received and action taken.
- 3.5 Within the responses was 1 comment which wasn't specific wording changes. The comment received was:  
General. A comment was raised around the length and potentially the overlapping of some of our responses. It was also raised that aligning our response directly with the Audit challenge (in red) would be both presentational better and would also address the point above by bringing a clearer focus and alignment to our response.  
We tried to cover all the criteria in depth to show how we met the criteria. Going forward we will take this comment into account and try to make the responses more focused.

### 4.0 PROPOSALS

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

### 5.0 IMPLICATIONS

- 5.1 The table below shows whether risks and implications apply if the recommendation(s) is (are) agreed:

SUBJECT	YES	NO
Financial		X
Legal/Risk		X
Human Resources		X
Strategic Plan Priorities		X
Equalities, Fairer Scotland Duty & Children and Young People		X
Clinical or Care Governance		X
National Wellbeing Outcomes		X
Environmental & Sustainability		X
Data Protection		X

## 5.2 Finance

There are no financial implications arising from this report.

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					

## 5.3 Legal/Risk

There are no specific legal implications arising from this report.

## 5.4 Human Resources

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

## 5.5 Strategic Plan Priorities

There are no specific strategic plan implications arising from this report.

## 5.6 Equalities

### (a) Equalities

There are no equality issues within this report.

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:

	YES – Assessed as relevant and an EqlA is required.
√	NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqlA is required. Provide any other relevant reasons why an EqlA is not necessary/screening statement.

(b) Equality Outcomes

There are no Equalities Outcomes implications within this report.

How does this report address our Equality Outcomes?

<b>Equalities Outcome</b>	<b>Implications</b>
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

## 5.7 Clinical or Care Governance

There are /are no governance issues within this report.

## 5.8 National Wellbeing Outcomes

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

There are no National Wellbeing Outcomes implications within this report.

<b>National Wellbeing Outcome</b>	<b>Implications</b>
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

## 5.9 Children and Young People

Has a Children’s Rights and Wellbeing Impact Assessment been carried out?

	YES – Assessed as relevant and a CRWIA is required.
X	NO – Assessed as not relevant as this report does not involve a new policy, function or strategy or recommends a substantive change to an existing policy, function or strategy which will have an impact on children’s rights.

## 5.10 Environmental/Sustainability

Summarise any environmental / climate change impacts which relate to this report.

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
X	NO – This report does not propose or seek approval for a plan, policy, programme, strategy or document which is like to have significant environmental effects, if implemented.

## 5.11 Data Protection

Has a Data Protection Impact Assessment been carried out?

	YES – This report involves data processing which may result in a high risk to the rights and freedoms of individuals.
X	NO – Assessed as not relevant as this report does not involve data processing which may result in a high risk to the rights and freedoms of individuals.

## 6.0 DIRECTIONS

6.1 <b>Direction Required to Council, Health Board or Both</b>	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 CONSULTATION

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

## 8.0 BACKGROUND PAPERS

8.1 None

IJB Best Value – Draft Statement 2023/24

Audit Scotland Best Value Theme		Response
1	<p><b>Theme 1 – Vision and Leadership</b></p> <p>Effective political and managerial leadership is central to delivering Best Value, through setting clear priorities and working effectively in partnership to achieve improved outcomes. Leaders should demonstrate behaviours and working relationships that foster a culture of cooperation, and a commitment to continuous improvement and innovation.</p> <p>In achieving Best Value, a local authority will be able to demonstrate the following:</p> <ul style="list-style-type: none"> <li>a) <b>Members and senior managers have a clear vision for their area that is shared with citizens, key partners and other stakeholders.</b></li> <li>b) <b>Members set strategic priorities that reflect the needs of communities and individual citizens, and that are aligned with the priorities of partners.</b></li> <li>c) <b>Effective leadership drives continuous improvement and supports the achievement of strategic objectives.</b></li> </ul>	<p>The duty of Best Value applies to all public bodies in Scotland. It is a statutory duty on local authorities (Inverclyde Council) and a formal duty on Accountable Officers, such as the Chief Executive of NHS GG&amp;C.</p> <p>The IJB is responsible via its members and its senior managers to ensure it has a clear vision and set of strategic priorities in place for the citizens of Inverclyde, key partners and other stakeholders. This clear vision and strategic priorities is set out primarily in the IJB strategic plan. At present this is seen through the achievement of the IJB's 6 big actions and its outcomes framework. This is reviewed on a yearly basis with updates given to all relevant stakeholders via quarterly and yearly updates to the IJB, regular updates to the Strategic planning group and regular updates to Inverclyde Council and GG&amp;C Health Board. The IJB is currently in the process of producing a new 3 year strategic plan. This new strategic plan is aiming to look at the IJB having 4 key priorities. These are:</p> <ul style="list-style-type: none"> <li>• Provide Early Help and Intervention</li> <li>• Improve Mental Health and Wellbeing</li> <li>• Support Inclusive, Safe and Independent Communities</li> <li>• Strengthen Support to Families and Carers.</li> </ul> <p>The IJB also directly engages with our citizens via the localities groups where we regularly report on the work of the IJB.</p> <p>As part of the strategic plan setting process we consult with all our stakeholders such as the IJB, Inverclyde Council, GG&amp;C Health Board, The Strategic Planning Group, The clinical and care</p>



	Audit Scotland Best Value Theme	Response
		<p>governance group, our major commissioned providers and our citizens as part of the overall development and consultation process.</p> <p>The IJB drives continuous improvement of our strategic objectives by reporting our progress towards our strategic objectives on a regular basis via the IJB and the strategic planning group. The IJB monitors its performance against our outcome framework which is also reported to our IJB and Strategic Planning Group. The information is also presented in our Annual Performance Review which also is reported to our IJB, Strategic Planning Group, Inverclyde Council and GG&amp;C Health Board.</p> <p>The feedback we receive is considered and then acted upon in a number of ways. Examples of this can be seen in the recent refresh of the Strategic Plan where the IJB added an outcomes framework based on the feedback at our sessions with both the IJB and Strategic Planning Group. Also, as part of the new strategic plan we have received feedback on the need to prioritise areas such as wellbeing, reducing poverty, alcohol and drug related deaths and mental health. These are all areas that will feature heavily in the new plan.</p>
2	<p><b><u>Theme 2 – Governance and Accountability</u></b></p> <p>Effective governance and accountability arrangements, with openness and transparency in decision-making, schemes of delegation and effective reporting of performance, are essential for taking informed decisions, effective scrutiny of performance and stewardship of resources.</p> <p>In achieving Best Value, a local authority will be able to demonstrate the following:</p> <p><b>a) A clear understanding and the application of the principles of good governance and transparency of</b></p>	<p>IJB directions to the Council and Health Board clearly require them to deliver services in line with our Strategic Plan and that all services must be procured and delivered in line with Best Value principles. The IJB have effective Governance and accountability arrangements in place in all our areas of decision-making, scrutiny and performance reporting.</p> <p>There are current arrangements for monitoring the delivery of the Strategic Plan and all our relevant decision making within various IJB/HSCP forums, including:</p> <ul style="list-style-type: none"> <li>• Integration Joint Board Meetings</li> <li>• Transformation Board</li> <li>• Audit Committee</li> <li>• Social Work &amp; Social Care Scrutiny Panel</li> </ul>

	Audit Scotland Best Value Theme	Response
	<p><b>decision-making at strategic, partnership and operational levels.</b></p> <p><b>b) The existence of robust arrangements for scrutiny and performance reporting.</b></p> <p><b>c) The existence of strategic service delivery and financial plans that align the allocation of resources with desired outcomes for the short, medium and long terms.</b></p>	<ul style="list-style-type: none"> <li>• Clinical &amp; Care Governance Committee</li> <li>• Strategic Planning Group</li> <li>• Senior Management Team (HSCP)</li> <li>• Corporate Management Teams of the Health Board and Council</li> <li>• Regular Meetings with Commissioned partner service Providers</li> </ul> <p>Performance is scrutinised regarding the targets met or any issues that arise from this. Systems of control within the IJB are subject to Internal Audit review and scrutiny by the IJB Audit Committee. The Committee also receives a regular summary of all internal audit reports relating to the IJBs partner organisations which provides further assurance in relation to Best Value. The IJB also places reliance on the controls and procedures of our partner organisations in terms of Best Value delivery which are also subject to regular audit and review directly through those partner organisations. Governance of our commissioned services are reported every cycle of the IJB and Social Work Scrutiny panel.</p> <p>IJB directions to the Council and Health Board clearly require them to deliver services in line with our Strategic Plan and that all services must be procured and delivered in line with Best Value principles.</p> <p>We build finance and financial reporting into all the relevant work we do with the use of regular financial monitoring, `budget setting processes, medium term financial plans and the annual financial accounts. We also provide regular financial updates on all the major projects and relevant reporting documents we provide include the Annual Performance review, the Chief Social Work Officer` annual report to name a few.</p> <p>In recent years we have not focused as much on the longer term (6-10 year) Financial planning due to the likely impact of the Care Service implementation and the financial uncertainty around this.</p>

	<b>Audit Scotland Best Value Theme</b> <b><u>Theme 3 – Effective Use of Resources</u></b>	<b>Response</b>
3	<p>Making the best use of public resources is at the heart of delivering Best Value. With clear plans and strategies in place, and with sound governance and strong leadership, a local authority will be well placed to ensure that all of its resources are deployed to achieve its strategic priorities, meet the needs of its communities and deliver continuous improvement.</p> <p>In achieving Best Value, a local authority will be able to demonstrate the following:</p> <ul style="list-style-type: none"> <li><b>a) It makes best use of its financial and other resources in all of its activities.</b></li> <li><b>b) Decisions on allocating resources are based on an integrated and strategic approach, are risk-aware and evidence-based, and contribute to the achievement of its strategic priorities.</b></li> <li><b>c) It has robust procedures and controls in place to ensure that resources are used appropriately and effectively, and are not misused.</b></li> <li><b>d) It works with its partners to maximise the use of their respective resources to achieve shared priorities and outcomes.</b></li> </ul>	<p>In delivering financial best value, the requirement to deliver our services within the budgeted allocation is at the heart of the work we do in the IJB. To ensure this happens we provide regular budget monitoring to the IJB and Social Care Scrutiny panel. We also provide financial updates via our partners in Inverclyde Council and GG&amp;C Health Board. We also provide regular budget monitoring updates at our Strategic planning Group and Staff Partnership Groups. Internally we provide regular financial updates at our Senior Management team meetings and provide regular budget updates to our service managers.</p> <p>To ensure best use of our financial resources we carry out detailed budget plans yearly and have these approved by our IJB and partner organisations. We also produce medium term financial strategies which are also approved by our IJB and partner organisations. All IJB papers carry a section that clearly outlines the financial implications of each proposal as well as other implications in terms of legal, HR, equality and diversity and linkage to the IJBs strategic objectives.</p> <p>All financial decisions that the IJB take link into our strategic priorities and are assessed on their level of risk. All major financial decisions require a relevant IJB paper which also need to assess its risk, be evidence based and contribute to our overall strategic priorities. Recent examples include the review of the care at home service which resulted in a significant service redesign. This was carefully planned taking into account all deliverables including link to strategic priorities, financial affordability, risk and contribution to the betterment of Inverclyde citizens.</p> <p>Robust procedures and controls are in place to ensure resources are used appropriately and effectively. These include all decision making is approved by the IJB, financial regulations are updated and set out the governance framework of allocating resources including spending limits and relevant sign off procedures. All major investment decisions</p>

	Audit Scotland Best Value Theme	Response
		<p>require review and regular reporting to all major groups including the IJB and partner organisations.</p> <p>The IJB works with its partners to maximise the use of resources by having regular participation in all major investment decisions and regular reporting. Partners direct funding to the IJB and the IJB provides services to the citizens of Inverclyde. These services are required to meet the objectives of our partners organisations and represent our main outcomes linked to our Strategic Plan.</p>
4	<p><b><u>Theme 4 – Partnerships and Collaborative Working</u></b></p> <p>The public service landscape in Scotland requires local authorities to work in partnership with a wide range of national, regional and local agencies and interests across the public, third and private sectors.</p> <p>A local authority should be able to demonstrate how it, in partnership with all relevant stakeholders, provides effective leadership to meet local needs and deliver desired outcomes. It should demonstrate commitment to and understanding of the benefits gained by effective collaborative working and how this facilitates the achievement of strategic objectives.</p> <p>Within joint working arrangements, Best Value cannot be measured solely on the performance of a single organisation in isolation from its partners. A local authority will be able to demonstrate how its partnership arrangements lead to the achievement of Best Value.</p> <p>In achieving Best Value, a local authority will be able to demonstrate the following:</p> <p><b>a) Members and senior managers have established and developed a culture that encourages</b></p>	<p>IJB meets this criteria as we have strong working relationships with all our partners. This can be evidenced via our strategic Planning Group whereby we have representation on this group from key partners such as our 3<sup>rd</sup> sector via Your Voice, our local Social Housing providers, our caring community, our voluntary sector via CVS Inverclyde and our staff side representatives.</p> <p>We also demonstrate this via our IJB board where we again have a wide range representation across our key partners. Our IJB has representations from internal officers, Staff side members, a Carers representative, our Social Landlord Providers, Local Councillors and Non-Executive members of NHS Greater Glasgow and Clyde.</p> <p>All Major decisions and reporting in the IJB need to go through these groups. These groups meet on a regular basis.</p> <p>The Market Facilitation and Commissioning Plan represents the communication we have had with service providers, service users, carers and other stakeholders about the future shape of our health and social care market. This ensures that we are responsive to the changing needs of Inverclyde service users. To deliver our commitment we need to ensure the people who use our services can choose from a number of care and support providers and have a variety of creative support options available to them.</p>

	Audit Scotland Best Value Theme	Response
	<p><b>collaborative working and service provision that will contribute to better and customer-focused outcomes.</b></p> <p><b>b) Effective governance arrangements for Community Planning Partnerships and other partnerships and collaborative arrangements are in place, including structures with clear lines of responsibility and accountability, clear roles and responsibilities, and agreement around targets and milestones.</b></p>	<p>Commissioners and providers work together, to improve quality, increase choice and deliver a more responsive and efficient commissioning process which involves our third sector partners. The market facilitation and commissioning plan provides a platform for providers and commissioners to strengthen their relationship and continue to work together to improve outcomes for Inverclyde's service users.</p> <p>We have a market facilitation group comprising HSCP, Council (procurement and legal services), NHS Greater Glasgow &amp; Clyde (procurement) and CVS representatives which enables us to agree our commissioning work plan aims and priorities. Furthermore, there is broad recognition that services that are designed and delivered in partnership with service users result in improved outcomes and user satisfaction. Services delivered in a coproduction model. We aspire for all health and care services in Inverclyde to take such an approach wherever possible.</p> <p>As such, we seek evaluation and feedback on our market facilitation arrangements and commission third sector partners (CVS and Your Voice) and the independent sector (Scottish Care) to undertake this on our behalf. They speak to service users, carers and providers to measure the impact of services and outcomes for service users and their carers.</p> <p>This evaluation feedback is used by our user intelligence group (UIG) to inform the service specification for future commissioned services that support our strategic priorities around early intervention, addressing inequalities and maximising independence. This includes finance managers to ensure best value.</p>
5	<p><b><u>Theme 5 – Working with Communities</u></b></p> <p>Local authorities, both individually and with their community planning partners, have a responsibility to ensure that people</p>	<p>Inverclyde HSCP Locality Groups are established in accordance with the Public Bodies (Joint Working) (Scotland) Act 2014, Section 29(3) (a) of the Act requires each integration Authority to establish at least two localities within its area. In addition to this and in compliance with</p>

	<b>Response</b>
<p><b>Audit Scotland Best Value Theme</b></p> <p>and communities are able to be fully involved in the decisions that affect their everyday lives. Community bodies – as defined in the Community Empowerment Act 2015 (section 4(9)) – must be at the heart of decision-making processes that agree strategic priorities and direction.</p> <p>In achieving Best Value, a local authority will be able to demonstrate the following:</p> <ul style="list-style-type: none"> <li><b>a) Early and meaningful engagement and effective collaboration with communities to identify and understand local needs, and in decisions that affect the planning and delivery of services.</b></li> <li><b>b) A commitment to reducing inequalities and empowering communities to effect change and deliver better local outcomes.</b></li> <li><b>c) That engagement with communities has influenced strategic planning processes, the setting of priorities and the development of locality plans.</b></li> </ul>	<p>The Community Empowerment Act 2015 (section 4 (9)) Inverclyde HSCP has developed an East and a West locality planning group. We will continue to build on our Locality Planning groups to support the understanding, planning and delivery of our HSCP services around communities within these localities. We are fully committed to working in partnership with our partners, third and voluntary sectors and will continue to work across our Localities in ensuring our HSCP continues to play a vital role in the vision for Inverclyde alongside our people.</p> <p>In addition to our Localities, we have longstanding community advisory networks in Inverclyde to complement our Localities, the advisory network feeds into our Localities and Strategic Planning Group (SPG). We encourage our networks to ask questions and discuss topics that focus on local issues and priorities. Our SPG is chaired by our chief officer and has a wide-ranging membership from our senior management team within the partnership to service user and care representatives, and third / voluntary sector.</p> <p>We continue to implement timelines for all our engagement processes for example, our Strategic Plan, this includes engagement with our community groups and consultation on the draft plan and allows us to understand the strategic and ‘community’ need in Inverclyde, the feedback from our engagement and consultations processes help set our local priorities.</p>
<p>6</p> <p><b><u>Theme 6 – Sustainable Development</u></b></p> <p>Sustainable development is commonly defined as securing a balance of social, economic and environmental wellbeing in the impact of activities and decisions, and seeking to meet the</p>	<p>Inverclyde HSCP is passionate about investing in the health and wellbeing of the communities of Inverclyde. Given the financial challenges facing HSCPs and other public services, it is essential that</p>

Audit Scotland Best Value Theme	Response
<p>needs of the present without compromising the ability of future generations to meet their own needs.</p> <p>Sustainable development is a fundamental part of Best Value. It should be reflected in a local authority's vision and strategic priorities, highlighted in all plans at corporate and service level, and a guiding principle for all of its activities. Every aspect of activity in a local authority, from planning to delivery and review, should contribute to achieving sustainable development.</p> <p>In achieving Best Value, a local authority will be able to demonstrate the following:</p> <ul style="list-style-type: none"> <li><b>a) Sustainable development is reflected in its vision and strategic priorities.</b></li> <li><b>b) Sustainable development considerations are embedded in its governance arrangements.</b></li> <li><b>c) Resources are planned and used in a way that contributes to sustainable development.</b></li> <li><b>d) Sustainable development is effectively promoted through partnership working</b></li> </ul>	<p>that we deliver and implement services and supports that are sustainable over the long-term.</p> <p>Ultimately, the priority for the HSCP is to secure the long-term health and wellbeing of the local population, this entails ensuring local services are fit for purpose, efficient and able to meet the needs of the local population now and in the future.</p> <p>Since 2019, sustainable development has been evident in the HSCPs Vision and the Six-Big Actions identified in the Strategic Commissioning Plan.</p> <p>The vision underlines the importance of trackline the high levels of local inequality in ensuring there are sustainable approaches to supporting people to achieve healthy, active, and fulfilling lives. To ensure the long-term wellbeing of the people of Inverclyde, solutions and services should be developed in collaboration with local people and the partner organisations in the third and independent sector. Working together ensures we are identifying the needs of local people and communities and responding appropriately.</p> <p>The actions reflect the ambitions of the HSCP to strengthen our local communities, making them more resilient to poor health and adverse events.</p> <p>The Governance Structure of the HSCP supports sustainable Development.</p> <p>Our Integration Joint Board has a broad representation from across the HSCP landscape, including local elected members, NHS board members, Health and Social Care Professionals and third and Independent sector representation.</p> <p>It is the Boards responsibility to effectively lead the HSCP ensuring that all decisions made ultimately has the long term sustainability of the HSCP and its services as a key priority.</p>

<b>Audit Scotland Best Value Theme</b>	<b>Response</b>
	<p>What is more, any paper or proposal that is submitted to IJB for consideration must be accompanied by an established cover paper. This paper asks for information on overall impact of proposals including impact on sustainability.</p> <p>Like the IJB, the HSCPs Strategic Planning Group also contains representation from across the health and social care landscape. The role of the SPG is develop the HSCP Strategic Commissioning Plan, ensuring it is appropriate to meet the local health and care needs of Inverclyde.</p> <p>In undertaking this role, the SPG will use their extensive knowledge of the local community in defining the strategic direction of the HSCP, and providing advice and guidance to the IJB on relevant policy proposals.</p> <p>Further, representatives from the HSCP sit on many Local Authority and Partner Committees and Steering Groups, for example the steering group for the local Housing Strategy. Through this representation, we can ensure the priorities of the HSCP are communicated effectively and considered in all local plans.</p> <p>The HSCP is in the process of reviewing our locality planning approaches, having now identified two distinct locality areas in Inverclyde East and West. Both varying socio-economic profiles and as such require individual considerations on how best to deliver health and care services in each area. As we progress and strengthen or locality approach, we will learn more about the needs and aspirations of local communities, which should lead to local service improvement and better sustainability around local health and care services. Our locality groups invite a wide range of representation from across Inverclyde, including HSCP Staff, Third and Independent Sector Partners and service user and community representatives.</p>



Audit Scotland Best Value Theme	Response
	<p>The partnership has a commitment to effective resource planning. Despite challenges in the financial envelope received by Government, the HSCP has effective resource planning structures in place, informed by the overall strategic plan and driven by the local Medium Term Financial Statement (MTFS). The use of the MTFS allows the HSCP to effectively plan services within budget, and prompting service improvements as required in order to achieve this.</p> <p>In addition, the HSCP Market Facilitation Plan is used to ensure the longer-term sustainability of the local health and care market. We are committed to ensuring Inverclyde service users are well cared for and that people who need help can stay safe and can exercise choice and control over their support. To deliver on this commitment we work together in partnership with providers, service users and their family/carers to increase choice, improve quality and strength and sustainability in locally commissioned Health and Social Care services.</p> <p>As highlighted above, Partnership Working is embedded in our governance structures. The HSCP has a strong track record of collaborating with local partners in the statutory, third and independent sectors as we share the common goal of improving the lives of people in Inverclyde.</p> <p>As an HSCP, we acknowledge that many of the factors that can impact on a person's health and wellbeing are out-with our immediate control. To this effect, we understand the importance of working with local partners to support in areas we can not.</p> <p>For example, it is widely recognised that quality housing can play a key factor in a person's health outcomes. For this purpose, we work closely with local housing services to work towards ensuring all local people, regardless of circumstances have access to quality homes that support their wellbeing and inclusion in the wider community.</p>

	<b>Audit Scotland Best Value Theme</b>	<b>Response</b>
		<p>In addition, the HSCP is also committed to ensuring the sustainability of the wider environment, with a commitment to efficiencies and energy reduction.</p> <p><b>Environment and Climate</b></p> <p>As an integrated body, the HSCP follows, and is informed, by the policies and plans of its parent bodies (Inverclyde Council and NHS GG&amp;C).</p> <p>In 2018, Inverclyde Council published its Climate Change Plan, identifying how it would help reduce local carbon emissions. It implemented a number of actions to help reduce the carbon output across all Council Services and Buildings. This looked at energy reduction in buildings, reducing the number of business miles used by staff and reviewing other priority areas across Inverclyde.</p> <p>Since COVID, there has been a greater proportion of HSCP working from home under 'Hybrid' working patterns. In addition, there has also been a rise in the number of remote or on-line meetings. This has a positive impact by reducing the business miles travelled by staff and reducing the energy consumption in HSCP/Council Buildings.</p> <p>In addition, while printing options are available to all staff, a greater focus is on paper free offices, with more staff storing and accessing files digitally for use.</p> <p>In addition, the new Inverclyde Alliance Plan 2023-33, sets out a healthy environment as one of its key themes for delivery. It places a priority on looking after Inverclyde's Natural Capital and mitigating the impacts of climate change.</p> <p>As a partner within the LOIP, the HSCP also considers this a priority and understands the impact a clean environment has on the health and wellbeing of local people.</p>
7	<b><u>Theme 7 – Fairness and Equality</u></b>	<p>An Improvement Action plan was developed for our Equalities work, and this was approved at the IJB meeting in March 2023. Good progress has been made in delivering the improvement plan, and</p>

Audit Scotland Best Value Theme	Response
<p>Tackling poverty, reducing inequality and promoting fairness, respect and dignity for all citizens should be key priorities for local authorities and all of their partners, including local communities.</p> <p>In achieving Best Value, a local authority will be able to demonstrate the following:</p> <ul style="list-style-type: none"> <li>a) <b>That equality and equity considerations lie at the heart of strategic planning and service delivery.</b></li> <li>b) <b>A commitment to tackling discrimination, advancing equality of opportunity and promoting good relations both within its own organisation and the wider community.</b></li> <li>c) <b>That equality, diversity and human rights are embedded in its vision and strategic direction and throughout all of its work, including its collaborative and integrated community planning and other partnership arrangements.</b></li> <li>d) <b>A culture that encourages equal opportunities and is working towards the elimination of discrimination.</b></li> </ul>	<p>establishing key relationships within services, with partners and across other HSCPs. Some of the key achievements to date include;</p> <ul style="list-style-type: none"> <li>• Establishment of both the HSCP Strategic Equalities Group and the HSCP Equalities Champions Network.</li> <li>• A training and awareness programme developed for staff, senior managers, SPG and IJB Board members to ensure everyone understands their role in mainstreaming equalities across all our health and social care services. Forty-eight people completed Equalities training in September 2023 and a further twelve people completed Equality Impact Assessment (EQIA) reviewer training in December 2023.</li> <li>• A retrospective audit of all IJB reports since April 2021 was undertaken to ensure Equality Impact Assessments (EQIAs) were completed for all new policies/functions / strategies or substantive changes to policies /functions /strategies. Meetings and close working with individual services took place to support this process. Outstanding EQIAs have been published on our website.</li> <li>• Review of Equality Impact Assessment (EQIA) process is underway, including development of our template and guidance documents.</li> <li>• Equality Impact Assessment (EQIA) master tracker is now in place to ensure consistency and monitoring across all HSCP services, which allows for central oversight of the EQIA process.</li> <li>• A Communications and Engagement plan is in place for community engagement taking place, alongside our strategic plan engagement.</li> <li>• Professional relationships established with all other HSCP Equalities Leads, NHS Board Equalities team, Council Corporate Equalities Group and third sector colleagues.</li> </ul>

Audit Scotland Best Value Theme	Response
	<ul style="list-style-type: none"> <li>Improved communications regarding Equality, Diversity and Inclusion for our service users and for our HSCP workforce.</li> </ul> <p>As part of our strategic planning process for informing our HSCP Equalities Mainstream report and developing our new HSCP Equality outcomes, engagement with the public, partners and workforce has taken place during September 2023. This has been done in conjunction with the engagement work taken place for our HSCP Strategic Plan. The engagement works therefore focused on both informing the Equalities work and the HSCP Strategic Plan. Equality and inclusion should underpin the delivery of our Strategic Plan and the engagement work was an excellent opportunity to ensure this happens going forward. A communications group was set up to carry out this engagement work and will continue to meet throughout the process of consultation also. Further development sessions will take place in January 2024 with our Heads of Service and Service Managers to discuss strategic priorities and our Equalities action plan and workplan for 2024. At these sessions we will discuss how we will measure our strategic priorities and our new Equality outcomes. We envisage there will be maximum of 4 new Equality outcomes for 2024-2028. Our HSCP Equalities Mainstream report and our newly developed Equality outcomes will be presented to our IJB in March 2024.</p>

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<b>Report To:</b>	<b>Inverclyde Integration Joint Board Audit Committee</b>	<b>Date:</b>	<b>25 March 2024</b>
<b>Report By:</b>	<b>Kate Rocks Chief Officer, Inverclyde Health &amp; Social Care Partnership</b>	<b>Report No:</b>	<b>VP/LS/16/24</b>
<b>Contact Officer:</b>	<b>Vicky Pollock</b>	<b>Contact No:</b>	<b>01475 712180</b>
<b>Subject:</b>	<b>Inverclyde Integration Joint Board – Directions Update February 2024</b>		

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## **1.0 PURPOSE AND SUMMARY**

- 1.1  For Decision  For Information/Noting
- 1.2 The purpose of this report is to provide the Inverclyde Integration Joint Board Audit Committee (IJB Audit) a summary of the Directions issued by Inverclyde Integration Joint Board (IJB) to Inverclyde Council and NHS Greater Glasgow and Clyde in the period September 2023 to February 2024.
- 1.3 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 seventh such report and covers the period from September 2023 to February 2024.

## **2.0 RECOMMENDATIONS**

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

**Kate Rocks**  
**Chief Officer**  
**Inverclyde Health and Social Care Partnership**

### **3.0 BACKGROUND AND CONTEXT**

- 3.1 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.
- 3.2 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 seventh such report and covers the period from September 2023 to February 2024.
- 3.3 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.

### **4.0 SUMMARY OF DIRECTIONS**

- 4.1 A Directions log has been established and will continue to be maintained and updated by the Council's Legal Services.
- 4.2 Between September 2023 and February 2024 (inclusive):
- the IJB has issued 3 Directions;
  - All 3 of these were Directions to both the Council and Health Board.
- 4.3 Of the 3 Directions issued by the IJB:
- 2 remain open (current); and
  - 1 has been superseded.
- 4.4 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, 2022/23 and 2023/24.
- 4.5 As requested by the IJB Audit Committee at its meeting on 26 September 2022, Directions noted as completed or superseded in the previous financial years 2020/21, 2021/22 and 2022/23 have been removed from the Directions log.
- 4.6 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 fourth annual report will be presented to the IJB at its meeting in September 2024.

### **5.0 PROPOSALS**

- 5.1 It is proposed that the IJB Audit Committee notes the content of report and the summary of Directions issued by the IJB between September 2023 and February 2024.

## 6.0 IMPLICATIONS

6.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO
Financial		X
Legal/Risk	X	
Human Resources		X
Strategic Plan Priorities	X	
Equalities, Fairer Scotland Duty & Children and Young People		X
Clinical or Care Governance		X
National Wellbeing Outcomes		X
Environmental & Sustainability		X
Data Protection		X

## 6.2 Finance

There are no financial implications arising from this report.

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

## 6.3 Legal/Risk

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.

## 6.4 Human Resources

There are no Human Resource implications arising from this report.

## 6.5 Strategic Plan Priorities

This report helps deliver Strategic Plan Big Action 6 – we will build on the strengths of our people and our community.

## 6.6 Equalities

There are no equality issues arising from the content of this report.

(a) Equalities

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:

	YES – Assessed as relevant and an EqIA is required.
X	NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqIA is required. Provide any other relevant reasons why an EqIA is not necessary/screening statement.

(b) Equality Outcomes

How does this report address our Equality Outcomes?

<b>Equalities Outcome</b>	<b>Implications</b>
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

(c) Fairer Scotland Duty

If this report affects or proposes any major strategic decision:-

Has there been active consideration of how this report's recommendations reduce inequalities of outcome?

	YES – A written statement showing how this report's recommendations reduce inequalities of outcome caused by socio-economic disadvantage has been completed.
X	NO – Assessed as not relevant under the Fairer Scotland Duty.

(d) **Children and Young People**

Has a Children's Rights and Wellbeing Impact Assessment been carried out?



	YES – Assessed as relevant and a CRWIA is required.
X	NO – Assessed as not relevant as this report does not involve a new policy, function or strategy or recommends a substantive change to an existing policy, function or strategy which will have an impact on children’s rights.

### 6.7 Clinical or Care Governance

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

### 6.8 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	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

### 6.9 Environmental/Sustainability

Summarise any environmental / climate change impacts which relate to this report.

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
X	NO – This report does not propose or seek approval for a plan, policy, programme, strategy or document which is like to have significant environmental effects, if implemented.

## 6.10 Data Protection

Has a Data Protection Impact Assessment been carried out?

	YES – This report involves data processing which may result in a high risk to the rights and freedoms of individuals.
X	NO – Assessed as not relevant as this report does not involve data processing which may result in a high risk to the rights and freedoms of individuals.

## 7.0 DIRECTIONS

7.1	<b>Direction Required to Council, Health Board or Both</b>	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 CONSULTATION

8.1 The Chief Officer and the Chief Financial Officer has been consulted in the preparation of this report.

## 9.0 BACKGROUND PAPERS

9.1 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 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	<a href="#">Indicative Inverclyde IJB Budget 2020/21</a>	Chief Finance Officer	Finance	Direction superseded by in year Financial Monitoring reports
17.03.20 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	<a href="#">Inverclyde Alcohol and Drug Recovery Development Update</a>	Head of MH, Addictions and Homelessness	Alcohol & Drug Recovery	
17.03.20 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	<a href="#">Inverclyde Alcohol and Drug Recovery Development Update</a>	Head of MH, Addictions and Homelessness	Alcohol & Drug Recovery	
17.03.20 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		Completed	No	N/A	<a href="#">Hard Edges Scotland Report</a>	Head of Children, Families and Criminal Justice	Childrens Services	
17.03.20 20 IJB/32/20 20/AS	Social Care Case Management - Mini 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	<a href="#">Private report</a>	Head of Strategy & Support Services	Performance & Information	Direction will be superseded by in year subsequent update reports in year
12.05.20 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	<a href="#">Covid 19 Mobilisation Plan</a>	Chief Finance Officer	Finance	Direction superseded by in year Financial Monitoring reports covid spend & funding updates

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)
23.06.20 IB/44/20 20/LL	Unscheduled Care Commissioning Plan and Health Board	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	<a href="#">Unscheduled Care Commissioning Plan</a>	Head of Strategy & Support Services	Commissioning	Direction will be superseded by subsequent update reports
23.06.20 IB/45/20 20/SMCA	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	Completed	No	N/A	<a href="#">Champions Board/Proud2Care</a>	Head of Children, Families and Criminal Justice	Childrens Services	
24.08.20 IB/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	Supersede	No	N/A	<a href="#">HSCP Workforce Plan 2020-2024</a>	Head of Strategy & Support Services	HSCP	Direction will be superseded by in year subsequent Financial Monitoring reports 07.11.2022 - superseded by HSCP Workforce Plan 2022-2025 - IB/31/2022/CG
24.08.20 IB/51/20 20/LL	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	Supersede	No	N/A	<a href="#">Health and Social Care Additional Staffing - Covid 19</a>	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 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-Sep-20	21-Sep-20	Nov-20	Supersede	Yes	17.03.2020 IB/36/2020/LA	<a href="#">Financial Budget Monitoring Report - 2020/21 Period 3</a>	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 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	<a href="#">HSCP Digital Strategy 2020/21</a>	Head of Strategy & Support Services	HSCP	Direction will be superseded by in year subsequent Financial Monitoring reports
02.11.20 IB/65/20 20/LL	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 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.	02-Nov-20	02-Nov-20	25-Jan-21	Supersede	Yes	21.09.2020 IB/60/2020/LA	<a href="#">Financial Budget Monitoring Report - 2020/21 Period 5</a>	Chief Finance Officer	Finance	

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)
25.01.21 IJB/07/20 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 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.	25-Jan-21	25-Jan-21	Mar-21	Superseded	Yes Supersede	02.11.2020 IJB/65/2020/L	<a href="#">Financial Budget Monitoring Report 2020/21 - Period 7</a>	Chief Finance Officer	Finance	
29.03.21 IJB/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 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	29-Mar-21	29-Mar-21	May-21	Superseded	Yes Supersede	25.01.21 IJB/07/2020/L	<a href="#">Financial Budget Monitoring Report 2020/21 Period 9</a>	Chief Finance Officer	Finance	
29.03.21 IJB/13/20 21/LL	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	Completed	No	N/A	<a href="#">Emergency Powers Decision Log</a>	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)
01.11.20 21 IJB/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	<a href="#">Private Report</a>	Head of MH, ADRS and Homelessness	Mental Health	
01.11.20 21 IJB/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	<a href="#">Private Report</a>	Head of MH, ADRS and Homelessness	Homelessness	

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)
27.06.20 22 IB/31/20 22/CG	Proposed Use of IDEAS Project Surplus Funds	Council only	Inverclyde Council is directed to invest the £0.297m surplus funds provided by the IJB to: (a) support the appointment of 2 additional Money Advice posts for HSCP Advice Services; and (b) provide support to Financial Inclusion Partners to be agreed by the Financial Inclusion Partnership all as detailed in the report.	Advice Services	£0.297m as detailed in the report.	27-Jun-22	27-Jun-22	Jun-23	Current	No	N/A	<a href="#">IDEAS Project Surplus Funds</a>	Head of Finance, Planning and Resources	Finance, Planning and Resources	
27.06/22 IB/27/20 22/AM	Mental Health and Wellbeing Service	Health Board only	NHS Greater Glasgow and Clyde is directed to develop and implement the Inverclyde Mental Health and Well-being Service (MHWS) all as detailed in the report, including the appointment of the proposed 13 additional posts as set out in paragraph 6.3.	Primary Care Services - Mental Health Services - Young People, Adult and Older Adult	As detailed in the report. Indicative allocation from the Scottish Government: 2022/23 - £156,876.54 2023/24 - £313,263.86 2024/25 - £631,746.06	27-Jun-22	27-Jun-22	Jun-23	Current	No	N/A	<a href="#">Mental Health and Wellbeing Report</a>	Head of MH, ADRS and Homelessness	Mental Health	
20/07/22 IB/34/20 22/CG	Inverclyde Learning Disability Community Hub	Council only	Inverclyde Council is directed to proceed with the approved project on the basis of the alternative design set out in the report and through the intended procurement route via West Scotland with additional funding support of £1.117million from the IJB.	Learning Disability Day Services	£1.117million, through a combination of prudential borrowing and use of existing reserves.	20-Jul-22	20-Jul-22	26th June 2023	Current	No	N/A	<a href="#">Inverclyde Learning Disability Community Hub</a>	Head of Finance, Planning and Resources Head of Health and Community Care	Learning Disabilities	
07.11.22 IB/51/20 22/CG	HSCP Workforce Plan - 2022-2025	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 A to the report and within the associated budget outlined in the report.	All functions outlined within the report and Appendix A.	As outlined in Appendix A.	07-Nov-22	07-Nov-22	May-23	Current	Yes Supersede	24.08.2020 IJB/54/2020/LA 21.06.2021 IJB/26/2021/AM	<a href="#">HSCP Workforce Plan 2022-2025</a>	Head of Finance, Planning and Resources	Finance, Planning and Resources	
28.11.22 IB/54/20 22/CG	Cost of Living Initiatives	Council only	Inverclyde Council is directed to: 1. Extend access to Section 12 Social Work (Scotland) Act 1968 and Section 22 Children (Scotland) Act 1995 budgets to Health staff employed in Health Visiting, Family Nurse Partnership, Advice Services, Community Mental Health and Occupational Therapy in Inverclyde service users assessed as in need and in line with the Standard Operating Procedure (to be developed) to a maximum value of £0.300m. This direction does not affect access to Section 12 and Section 22 funding for staff with existing access. 2. Offer and provide an initial 500 warm boxes to service users receiving a Care at Home package from HSCP and commissioned providers through the Care at	Advice Services	£0.430m as detailed in the report	28-Nov-22	28-Nov-22	May-23	Current	No		<a href="#">Cost of Living Proposals</a>	Head of Finance, Planning and Resources	Finance, Planning and Resources	

23.01.23 IJB/08/20 23/AS	Proposal to Fund Final Year MSc Social Work Students to Commit to Work for Inverclyde HSCP for 3 Years	Council only	Inverclyde Council is directed to provide financial support to self funding MSc students by paying set fees for the final year of their education in order to attract new registered social workers to employment in Inverclyde HSCP for 3 years.	Children & Families Adult Services	£150,000 as detailed in the report	23-Jan-23	23-Jan-23	Jan-24	Current	No	<a href="#">MSc Student Funding</a>	Chief Social Work Officer	Children & Families Community Care	
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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)
26/06/2023 IJB/33/2023/AB	The Future of Care and Support at Home	Council only	Inverclyde Council is directed to implement the redesign of the Care at Home Support Service as set out in the report and within the associated budget outlined in the report, including the increase from grade 3 to grade 4 for Social Care Workers and the realignment of supervisor posts (Senior Social Care Workers).	Care at Home	As outlined in Paragraph 7.2 and Appendix 2	26-Jun-23	26-Jun-23	Jun-24	Current	No	N/A	<a href="#">The Future of Care and Support at Home</a>	Head of Health and Community Care	Health and Community Care	
22/01/2024 IJB/03/2024/CG 024/CG Period 7	Financial Monitoring Report 2023/24 - Period to 31 October 2023 - 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	22-Jan-24	22-Jan-24	Mar-24	Current	Yes Supersede	14/11/2023 IJB/50/2023/CG	<a href="#">Financial Monitoring Report 2023/24 - Period 7</a>	Chief Financial Officer	Finance	

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<b>Report To:</b>	<b>Inverclyde Integration Joint Board Audit Committee</b>	<b>Date:</b>	<b>25 March 2024</b>
<b>Report By:</b>	<b>Kate Rocks Chief Officer Inverclyde Health &amp; Social Care Partnership</b>	<b>Report No:</b>	<b>IJBAC/5/2024/CG</b>
<b>Contact Officer:</b>	<b>Craig Given Head of Finance, Planning and Resources Inverclyde Health &amp; Social Care Partnership</b>	<b>Contact No:</b>	
<b>Subject:</b>	<b>IJB Risk Register</b>		

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## **1.0 PURPOSE AND SUMMARY**

- 1.1  For Decision  For Information/Noting
- 1.2 The purpose of this report is to provide an update to the Audit Committee on the status of the IJB Strategic Risk Register.
- 1.3 The process for reporting risks across the HSCP and IJB has been summarised to highlight what is reported to the IJB and when.
- 1.4 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.

## **2.0 RECCOMENDATIONS**

- 2.1 That the IJB Audit Committee:
1. Notes the content of this report.

**Kate Rocks**  
**Chief Officer**  
**Inverclyde Health and Social Care Partnership**

### 3.0 BACKGROUND AND CONTEXT

- 3.1 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.
- 3.2 The IJB risk register is formally reviewed by the Inverclyde HSCP Senior Management Team at least twice a year, the last review took place in February 2024. The IJB Risk Register and any changes then come to the IJB Audit Committee twice each year.

### 4.0 IJB STRATEGIC RISK REGISTER

- 4.1 The updated IJB Strategic Risk Register is enclosed at Appendix A. Changes since the last report are:
- Risk 3 Financial Sustainability / Constraints / Resource Allocation – This risk has been downgraded as a result of all the savings proposals that have been developed and our clear financial strategy for the next few years.
  - Risk 5 Homecare – This risk has been downgraded to reflect the recent changes in the care home contract and increased capacity from the award of the new Care at Home tender.
  - Risk 9 National Patient Safety Alert – this risk has been added.
  - Risk 10 Availability of RSL housing at time of need – this risk has been added.

### 5.0 IMPLICATIONS

- 5.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO
Financial		X
Legal/Risk		X
Human Resources		X
Strategic Plan Priorities		X
Equalities, Fairer Scotland Duty & Children/Young People's Rights & Wellbeing		X
Clinical or Care Governance		X
Environmental & Sustainability		X
Data Protection		X

### 5.2 Finance

#### One off Costs

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

**Annually Recurring Costs/ (Savings)**

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

**5.3 Legal/Risk**

There are no identified Legal/Risk issues contained within this report.

**5.4 Human Resources**

There are no identified Human Resources issues contained within this report.

**5.5 Strategic Plan Priorities**

There are no identified Strategic risks contained within this report.

**5.6 Equalities**

(a) Equalities

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:

	YES – Assessed as relevant and an EqIA is required. The Equality Impact Assessment for the refreshed Strategic Plan can be accessed here
x	NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqIA is required. Provide any other relevant reasons why an EqIA is not necessary/screening statement.

(b) Equality Outcomes

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.

## 5.7 Clinical or Care Governance

There are no identified Clinical or Care Governance issues contained within this report.

## 5.8 National Wellbeing Outcomes

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

<b>National Wellbeing Outcome</b>	<b>Implications</b>
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

## 5.9 Children and Young People

Has a Children's Rights and Wellbeing Impact Assessment been carried out?

	YES – Assessed as relevant and a CRWIA is required.
x	NO – Assessed as not relevant as this report does not involve a new policy, function or strategy or recommends a substantive change to an existing policy, function or strategy which will have an impact on children's rights.

## 5.10 Environmental/Sustainability

Summarise any environmental / climate change impacts which relate to this report.

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
x	NO – This report does not propose or seek approval for a plan, policy, programme, strategy or document which is like to have significant environmental effects, if implemented.

## 5.11 Data Protection

Has a Data Protection Impact Assessment been carried out?

	YES – This report involves data processing which may result in a high risk to the rights and freedoms of individuals.
x	NO – Assessed as not relevant as this report does not involve data processing which may result in a high risk to the rights and freedoms of individuals.

## 6.0 DIRECTIONS

6.1

<b>Direction Required to Council, Health Board or Both</b>	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 CONSULTATION**

7.1 The report has been prepared by the Chief Officer of Inverclyde Health and Social Care Partnership (HSCP) after due consideration with relevant senior officers in the HSCP.

## **8.0 BACKGROUND PAPERS**

8.1 There are no background papers to this report.p

**IJB RISK REGISTER**

Organisation	Inverclyde Integration Joint Board
Date Last Reviewed by IJB/Audit Committee	25/09/2023
Date Last Reviewed by Officers	21/02/2024

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)
<b>Governance</b>								
1	<p><b>Effective Governance</b></p> <p>Risk through partner organisational restructures causing additional governance complexity, not having the right skills mix on the IJB, lack of clarity of role &amp; 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 &amp; 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	0	No additional controls required. This risk is continuously monitored.	Chief Officer
2	<p><b>Maintaining Effective Communication and Relationships with Acute Partners During Transformational Change</b></p> <p>During winter pressure period there is a risk due to partnership breakdown caused by different priorities &amp; 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 interface 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. Daily delayed discharge meetings lead by CO across GGC and departmental winter pressure meetings reacting real time to service pressures</p> <p>4. Market Facilitation Statement -Developing commissioning plans in partnership with Acute colleagues</p> <p>5. Early referral system and clear planning in place for each service user/patient - Weekly Delay meetings across NHSGGC.</p> <p>6. 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>	3	3	9	0	All controls are current. The approach to winter planning is reviewed at the end of each winter(April) and at the beginning of each new winter cycle (November). This review activity allows us to make adjustments to our developing approach to winter planning with particular focus this year on avoiding admission.	Head of Health and Community and Community Care
Risk No	*Description of RISK Concern (x,y,z)	Current Controls	IMPACT Rating	L'HOOD Rating	Risk Score	Change in Score	Additional Controls/Mitigating Actions & Time Frames with End Dates	Who is Responsible? (name or title)
<b>Resources &amp; Performance</b>								



3	<p><b>Financial Sustainability / Constraints / Resource Allocation</b>                  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 &amp; local outcomes &amp; 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><b>Resources/Finance</b>                  1. Strategic Plan                  2. Due Diligence work                  3. Close working with Council &amp; 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&amp;C Finance colleagues and HSCP CFOs to deliver a whole system approach to financial planning and delivery                  8. Medium to Long Term Finance Plan</p>	4	3	12	-3	<p>It is expected 24/26 budget gap will be closed through an extensive budget savings exercise which will focus on Service Reductions, Service Redesigns and increased charging. This risk has reduced to reflect our savings proposals developed and currently being debated by the IJB. We have a clear plan in place to help us through the next few years.</p>	Head of Finance, Planning & Resources
4	<p><b>Workforce Sustainability and Implementation of the Workforce Plan</b>                  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                  Potential Consequences: Don't attract or retain the right people, don't have an engaged &amp; resilient workforce, service user needs not met, strategic plan not delivered, &amp; reputational damage.</p>	<p><b>Resources/Workforce</b>                  1. Workforce Plan and quarterly progress reporting                  2. EKSF, TURAs monitoring                  3. Training budgets                  4. Workforce Planning                  5. Succession Planning for NHS &amp; Local Authority Staff                  6. Staff Governance Group &amp; reports                  7. Update papers to IJB on specific issues in mental health, review of roles within MDT being undertaken.</p>	3	3	9	0	<p>Update report approved at June IJB with updated Action Plan and timescales. One year progress update to Nov IJB</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)
5	<p><b>Home Care</b>                  Increased demand on Home Care services. Priority to support hospital discharge and inter mediate care home placements. New Care at Home contract has increased capacity of external providers.</p>	<p>1. Monitor increasing demand and impact on core work including recruitment and retention of within both internal and external service provision care at home staff                  2. Triage and prioritise work to support delayed discharge.                  3. Daily review of Care &amp; Support at Home capacity.                  4. Winter team established to support hospital delays.                  5. Review of reablement and implementation of one handed care and AHP activity in wards.                  6. Commissioning team continue to work with external care and support at home services in conjunction with the Care Inspectorate to support external service provision.                  7. New Care at home contract from 01.04.24, which has attracted new providers to the area.</p>	2	3	6	-3	<p>A further report on the conclusion of the Care at Homereview by June 2024. Review of impact of new providers on external care at home capacity</p>	Head of Health and Community Care

6	<p><b>Workforce Mental Health In patients:</b> Risk of failure to maintain workforce model and ward staffing levels including increased observations. Consequences to increase in staff turnover due to demographics i.e. Ageing workforce and recruitment / retention issues.</p>	<p>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. 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.                  5. Weekly board wide huddle to identify specific areas of system pressures.                  6. Centralised recruitment drive of Newly Qualified Nurse (NQNs) completed with limited allocation of NQNs for Inverclyde.</p>	4	3	12	0	<p>Inpatient areas will be participating in board wide test of change to move to "from observation to interventions" which should change how enhanced observations are prescribed and delivered reducing pressure on staffing, this test of change due to commence summer 2024</p>	<p>Interim Head of Mental Health, ADRS and Homelessness</p>	
7	<p><b>Performance Management Information</b>                  Risk due to lack of quality, timeous performance information systems to inform strategic &amp; operational planning &amp; decision making.                   Potential Consequences: Misallocate resources to non-priority areas, lack of focus, decisions based on anecdotal thinking or biased perspectives, &amp; community needs not met.</p>	<p><u>Performance</u>                  1. Performance management infrastructure and reporting cycle                  2. Regular financial monitoring reports showing performance against budget and projected outcomes                  3. Locality planning arrangements - developed.                  4. Robust budget planning processes                  5. Quarterly Performance Reviews - being developed.                  6. Data repository regularly updated                  7. Quality strategy and self evaluation processes                  8. Regular review of Performance reporting frameworks</p>	3	3	9	0	<p>Annual Performance Report (APR) and 6 monthly reviews to IJB as a new control. HSCP commissioned a new PMS system - Pentana , there has been a delay in implementing Pentana (original deadline September 2023) This will now be prioritised in line with the new Strategic plan. A new outcomes framework will be developed in conjunction with the strategic plan. This will be used to monitor performance going forward.                  It is also anticipated that pentane will also be used for reporting against other HSCP plans and strategies.</p>	<p>Head of Finance, Planning &amp; Resources</p>	
<b>Strategy</b>									
8	<p><b>New Strategic Plan 2024 onwards</b>                  New Strategic Plan to be in place from May 2024. Risk of failure to develop and implement a new Strategic Plan which meets the requirement to deliver on the 9 National Health and wellbeing Outcomes.</p>	<p>1. Development session for Strategic Planning Group and IJB held on 6th November                  2. Timeline for development and engagement developed                  3. Engagement with communities integral to developing key priorities                  4. Statutory guidance received from SG                  5. Progress update to IJB in March 2024, to be provide in CO Report                  6. Consultation timeline identified                  7. Approval date for IJB May 2024</p>	3	3	9	New Risk	<p>Strategic Planning Group (SPG) will oversee development of the plan. The new Strategic Plan will be submitted to IJB for approval in May 2024.                  Development is ongoing with consultation on new priorities complete and engagement with HSCP service areas ongoing.</p>	<p>Head of Finance, Planning &amp; Resources</p>	
9	<p><b>National Patient Safety Alert</b>                  In August 2023 a National Patient Safety Alert was issued regarding Medical beds, trolleys, bed rails, bed grab handles and lateral turning devices: risk of death from entrapment or falls alongside updated guidance from MHRA. We have approximately 3,000 patients in the community with these pieces of equipment. Work is underway to develop a risk assessment that meets MHRA sign off across GGC. The guidance is for a professional written risk assessment for each patient. We do not have the staff capacity to carry out retrospective assessments. (Impact on Occupational Therapy, Physiotherapy and District Nursing and acute referrers.</p>	<p>1. Staff representation at GGC working group 2. Board guidance/risk assessment likely to be approved by end of March 2024. 3. Risk assessment and training will be required across all assessment staff. 4. New processes to be developed across systems for recording of risk assessments.</p>	4	3	12	New Risk	<p>UK wide issue , no area has identified currently that they have capacity to complete this</p>	<p>Head of Health &amp; community Care</p>	
10	<p><b>Availability of RSL housing at time of need</b>                  Risk of homelessness across all population groups e.g. those with positive asylum decisions, older people which is increasing delayed discharges and those with specific bail conditions.</p>	<p>1. Hotels &amp; Airbnb's used at point of homelessness                  2. Homelessness service to provide drop in support at Holiday inn Express to aid prevention</p>	4	3	12	New Risk	<p>Longer term approaches require to be part of the new housing strategy workstreams</p>	<p>Head of Health &amp; community Care</p>	

**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.**

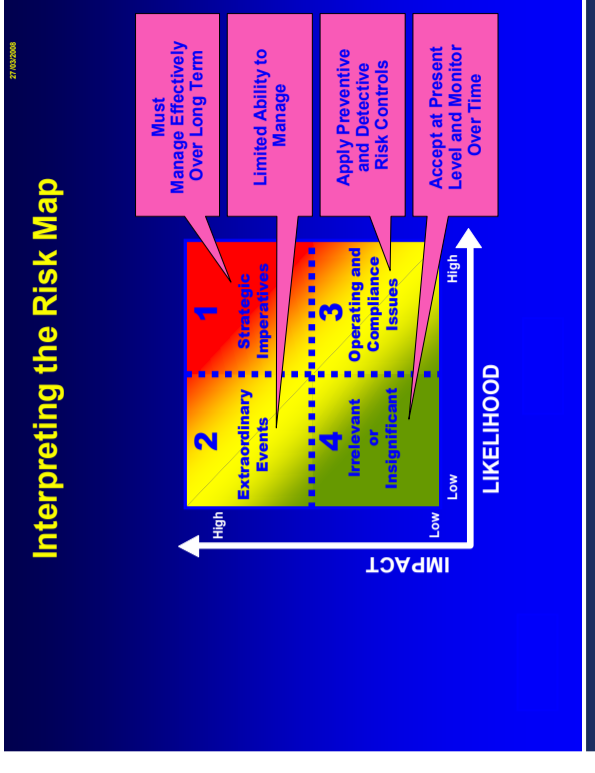
Risks are unlikely to require mitigating actions but status should be reviewed frequently to ensure conditions have not changed.

Very High  
(16-25)

High  
(10-15)

Medium  
(5-9)

Low  
(1-4)



Risk Impact	1	2	3	4	5
	<b>Insignificant</b>	<b>Minor</b>	<b>Moderate</b>	<b>Major</b>	<b>Catastrophic</b>
<b>Financial</b>	<£100k	£100k-£250k	£250k-£500k	£500k-£1,000k	£1,000k>
<b>Reputation</b>	Individual negative perception	Local negative perception	Intra industry or regional negative perception	National negative perception	Sustained national negative perception
<b>Legal and Regulatory</b>	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
<b>Operational/ Continuity</b>	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
<b>Likelihood</b>					
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
	<b>Rare</b>	<b>Unlikely</b>	<b>Possible</b>	<b>Probable</b>	<b>Almost Certain</b>
<b>Definition</b>	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

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<b>Report To:</b>	<b>Inverclyde Integration Joint Board Audit Committee</b>	<b>Date:</b>	<b>25 March 2024</b>
<b>Report By:</b>	<b>Kate Rocks, Chief Officer Inverclyde Health &amp; Social Care Partnership</b>	<b>Report No:</b>	<b>IJBAC/04/2024/CG</b>
<b>Contact Officer:</b>	<b>Craig Given</b>	<b>Contact No:</b>	<b>01475 715381</b>
<b>Subject:</b>	<b>External Audit – Audit Fee 2023/24</b>		

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## **1.0 PURPOSE AND SUMMARY**

1.1  For Decision  For Information/Noting

1.2 The purpose of this report is to present the KPMG External Audit Fee for 2023/24, for IJB approval.

The proposed audit fee for 2023/24 is £33,360.

## **2.0 RECOMMENDATIONS**

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

**Kate Rocks**  
**Chief Officer**  
**Inverclyde Health and Social Care Partnership**

### 3.0 BACKGROUND AND CONTEXT

3.1 The audit fee is set based on an estimate of the number of days and work involved in the audit. This will be our second year of audit with our external auditors KPMG.

3.2 The proposed audit fee for 2023/24 is £33,360, which is a 6% increase on the 2022/23 fee. The below shows the fees paid over the last few years for comparison:

2023/24 £33,360  
2022/23 £31,470  
2021/22 £27,960  
2020/21 £27,330

### 4.0 PROPOSALS

4.1 The proposed fee is £33,360. The Committee is asked to approve the proposed fee.

### 5.0 IMPLICATIONS

5.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO
Financial	X	
Legal/Risk		X
Human Resources		X
Strategic Plan Priorities		X
Equalities, Fairer Scotland Duty & Children and Young People		X
Clinical or Care Governance		X
National Wellbeing Outcomes		X
Environmental & Sustainability		X
Data Protection		X

### 5.2 Finance

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

#### One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report	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					

### 5.3 Legal/Risk

There are no specific legal implications arising from this report.

### 5.4 Human Resources

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

### 5.5 Strategic Plan Priorities

There are no Strategic Plan implications arising from this report.

### 5.6 Equalities

#### (a) Equalities

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:

There are no equality issues within this report.

	YES – Assessed as relevant and an EqIA is required.
√	NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqIA is required. Provide any other relevant reasons why an EqIA is not necessary/screening statement.

#### (b) Equality Outcomes

How does this report address our Equality Outcomes?

There are no Equalities Outcomes implications within this report.

<b>Equalities Outcome</b>	<b>Implications</b>
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

### 5.7 Clinical or Care Governance

There are no governance issues within this report.

### 5.8 National Wellbeing Outcomes

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

There are no National Wellbeing Outcomes implications within this report.

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

### 5.9 Children and Young People

Has a Children’s Rights and Wellbeing Impact Assessment been carried out?

	YES – Assessed as relevant and a CRWIA is required.
X	NO – Assessed as not relevant as this report does not involve a new policy, function or strategy or recommends a substantive change to an existing policy, function or strategy which will have an impact on children’s rights.

### 5.10 Environmental/Sustainability

Summarise any environmental / climate change impacts which relate to this report.

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
X	NO – This report does not propose or seek approval for a plan, policy, programme, strategy or document which is like to have significant environmental effects, if implemented.

### 5.11 Data Protection

Has a Data Protection Impact Assessment been carried out?

	YES – This report involves data processing which may result in a high risk to the rights and freedoms of individuals.
X	NO – Assessed as not relevant as this report does not involve data processing which may result in a high risk to the rights and freedoms of individuals.

## 6.0 DIRECTIONS

6.1	<b>Direction Required to Council, Health Board or Both</b>	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 CONSULTATION

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

## 8.0 BACKGROUND PAPERS

8.1 None.