

AGENDA ITEM NO: 4

Report To:	Inverclyde Integration Joint Board Audit Committee	Date:	24 March 2025
Report By:	Chief Internal Auditor	Report No:	IJBA/19/2025/AP
Contact Officer:	Andi Priestman	Contact No:	
Subject:	Internal Audit Progress Report from	m 1 June 2024	to 28 February 2025

1.0 PURPOSE AND SUMMARY

- 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) from 1 June 2024 to 28 February 2025 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 from 1 June 2024 to 28 February 2025.

Andi Priestman Chief Internal Auditor Inverclyde Integration Joint Board

3.0 BACKGROUND AND CONTEXT

- 3.1 The audit plan for 2024/25 was approved at the IJB Audit Committee meeting in September 2024.
- 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:

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

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

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

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 Budgetary Control arrangements.

IJB Budgetary Control arrangements (February 2025)

- 3.6 Financial resources held by both Inverclyde Council and NHS Greater Glasgow & Clyde are used by Inverclyde HSCP to deliver the IJB's strategic objectives. For 2024/25 the Council and Health Board contributed £73.868m and £142.609m respectively to the IJB. During 2024/25 total net budgeted expenditure amounts to £216.477m and includes £0.709m from the IJB's general reserve.
- 3.7 The community care needs of local HSCP service users continue to grow and evolve due to demographic and changing health related factors. More service users have two or more care needs, some of which cannot easily be met or fully funded. It is therefore important that effective budgetary control and reporting arrangements are in place to manage the financial provision of local HSCP 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 in relation to the IJB's budgetary control arrangements.
- 3.9 The review focused on the high-level processes and procedures in relation to the IJB's budgetary control arrangements and concentrated on identified areas of perceived higher risk, such as not regularly providing IJB embers with timely and accurate monitoring information and not adequately explaining significant budget variances.
- 3.10 The overall control environment opinion was **Strong**. The audit identified one GREEN issue as follows:

Routinely reporting on IJB reserves in relation to CIPFA guidance (GREEN)

The IJB Reserves Strategy refers to CIPFA guidance on reserves as set out in CIPFA Bulletin 13 (March 2023). For the IJB, this guidance means that the unallocated reserve balance should sit between 2% and 4% of revenue expenditure, excluding set aside.

The Inverclyde IJB has two broad categories of financial reserve, ear-marked and general (unallocated)reserves. IJB budget monitoring reports include comprehensive updates on each category of reserve. However, the audit identified that IJB budget monitoring reports do not routinely cover the extent to which unallocated reserves sit within this guideline.

- 3.11 The review identified one GREEN issue which, if implemented by management, would enhance the control environment and an action plan is in place to address this issue by 31 March 2025.
- 3.12 In relation to Internal Audit Action plans there were 3 actions due for completion by 28 February, one has been reported as completed by management and a revised date has been set for 2 actions. The status report is attached at Appendix 1.
- 3.13 In addition, since the last Internal Audit Progress report to the Audit Committee meeting in September 2024, 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 Inverciyde Council – Internal Audit Progress Report Summary

Since the last Internal Audit Progress Report considered at the September 2024 meeting of the Audit and Performance Committee, there was one Internal Audit Report reported to Inverclyde Council which are relevant to the Inverclyde IJB.

	Report	Category/Number of Issues		
Audit Report	Opinion	Red	Amber	Green
HSCP Care and Support At Home	Satisfactory	0	2	1
Delayed Discharge Arrangements (1)				
	Total	0	2	1

- (1) The review focused on the high-level processes and procedures in relation to the Invercived HSCP's delayed discharge arrangements and concentrated on identified areas of perceived higher risk, such as not promptly co-ordinating referrals of service users who require care packages to leave hospital and not effectively managing recurring issues which impact on the levels of delayed discharge. Two Amber issues were identified as follows:
 - referrals by NHS Acute staff are not always being made timeously to the HSCP and key
 dates within the discharge planning process are not being routinely aligned and are not
 always notified to nominated HSCP officers; and
 - indicative timescales have not been set for cases which require guardianship orders and those cases are not formally tracked to identify delays and required follow-up action.

3.15 NHSGGC - Internal Audit Progress Report Summary

Since the last IA Progress Report considered at the June 2024 meeting of the Audit and Performance Committee, there were five Internal Audit Reports reported to NHSGGC which are relevant to the IJB and are set out in the undernoted table. There were no Grade 4 recommendations raised (very high exposure) and no control objectives assessed as red.

Audit Title		Number and Priority of Issues			f Issues
	Rating	4	3	2	1
Hospital Discharges (1)	Substantial	0	2	3	0
	Improvement				
	Required				
Property Transactions	Effective	0	0	0	0
Sustainability and Value	Substantial	0	2	1	1
Programme (2)	Improvement				
	Required				
Succession Planning	N/A – advisory	0	0	0	0
Cyber Security Remote Access	Minor	0	0	2	0
	Improvement				
	Required				
Total		0	4	6	1

- (1) The Grade 3 recommendations relate to improvements to the review and update of planned dates of discharge and the process for referring patients to the relevant HSCP teams.
- (2) The Grade 3 recommendations relate to improvements in the processes for the identification, monitoring and reporting of savings.
- 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 1 June 2024 to 28 February 2025.

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		Х
Legal/Risk	Х	
Human Resources		Х
Strategic Plan Priorities		Х
Equalities, Fairer Scotland Duty & Children and Young People		Х
Clinical or Care Governance		Х
National Wellbeing Outcomes		Х
Environmental & Sustainability		Х
Data Protection		Х

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 (lf 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.
х	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
We have improved our knowledge of the local population who identify as belonging to protected groups and have a better understanding of the challenges they face.	N/A
Children and Young People who are at risk due to local inequalities, are identified early and supported to achieve positive health outcomes.	N/A
Inverclyde's most vulnerable and often excluded people are supported to be active and respected members of their community.	N/A
People that are New to Scotland, through resettlement or asylum, who make Inverclyde their home, feel welcomed, are safe, and able to access the HSCP services they may need.	N/A

(c) Fairer Scotland Duty

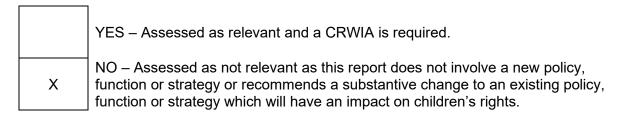
If this report affects or proposes any major strategic decision:-

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.
Х	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?



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?

National Wellbeing Outcome	Implications
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.
х	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.
х	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		Direction to:	
	Direction Required		Х
	to Council, Health	2. Inverclyde Council	
	Board or Both	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 FROM 1 JUNE 2024 TO 28 FEBRUARY 2025

Summary: Section 1 Summary of Management Actions due for completion by 28/2/25

There were three actions due for completion by 28 February 2025. One action has been reported as completed by management and a revised date has been set for 2 actions.

Section 2 Summary of Current Management Actions Plans at 28/2/25

At 28 February 2025 there were no audit reports delayed due to management not finalising the action plan within agreed timescales.

Section 3 Current Management Actions at 28/2/25

At 28 February 2025 there were 3 current audit action points.

Section 4 Analysis of Missed Deadlines

At 28 February 2025 there were 2 audit action points where the original deadline has been missed.

Section 5 Summary of Audit Action Points By Audit Year

SUMMARY OF MANAGEMENT ACTION PLANS DUE FOR COMPLETION BY 28.02.2025

SECTION 1

No. of Actions Due	No. of Actions Completed	Deadline missed Revised date set*	Deadline missed Revised date to be set*	No action proposed
3	1	2		

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

SUMMARY OF CURRENT MANAGEMENT ACTIONS AS AT 28.02.2025

SECTION 2

Current Actions	
Due for completion March 2025	1
Due for completion September 2025	1
Due for completion September 2026	1
Total current actions:	3

CURRENT MANAGEMENT ACTIONS AS AT 28.02.2025

SECTION 3

Recommendation/Agreed Action	Owner	Expected Date	Status
IJB Integration Scheme Update – Re	adiness Review (Dec		
Recommendation:	IJB Chief Officer	30.09.2025*	Ongoing
Specifying governance			
arrangements within the Integration			
Scheme (Amber)			
The Scottish Government have			
confirmed IJBs will be required to			
review their current integration			
schemes rather than complete a new			
scheme. The 6 HSCP across Greater			
Glasgow and Clyde will contribute to a			
short life working group to review collectively ensuring cross cutting			
issues are addressed.			
The Inverclyde HSCP has identified			
the appropriate officer to contribute to			
this work. The HSCP are also working			
closely with Legal Services within the			
Council and NHS to review our current			
Integration Scheme.			
Agreed Action: Decommendation			
Agreed Action: Recommendation accepted.			
IJB Performance Management and R	eporting Arrangeme	nts (July 2021)	
Recommendation:	IJB Chief Financial	30.09.2024	Complete
Reporting on progress with	Officer		•
implementing the IJB's Strategic			
Plan (Amber)			
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.			
Agreed Action: Recommendation			
accepted.			
	1	I	

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

CURRENT MANAGEMENT ACTIONS AS AT 28.02.2025

SECTION 3

Recommendation/Agreed Action	Owner	Expected Date	Status
IJB Workforce Planning Arrangemen	its (February 2023)		0.0000
Recommendation: Managing Timescales within the Workforce Plan action plan (Amber) The IJB Chief Financial Officer will also explore the use of the Pentana system to record milestones for actions and priorities for each action. Agreed Action: Recommendation accepted.	IJB Chief Financial Officer	30.09.2026*	Ongoing
Budgetary Control Arrangements (Fe	ebruary 2025)		
Recommendation: Reporting on IJB Reserves (Green) The IJB's Chief Financial Officer should use an IJB development session to discuss how CIPFA's guidance on reserves relates to the IJB. IJB finance reports should be updated to show the percentage in which the IJB operates its unallocated reserve at and when compared to the guidance. Agreed Action: Recommendation accepted.		31.03.2025	Ongoing

* 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
IJB Integration Scheme Update – Readiness Review (December 2019)	Specifying governance arrangements within the Integration Scheme (Amber) The Scottish Government have confirmed IJBs will be required to review their current integration schemes rather than complete a new scheme. The 6 HSCP across Greater Glasgow and Clyde will contribute to a short life working group to review collectively ensuring cross cutting issues are addressed. The Inverclyde HSCP has identified the appropriate officer to contribute to this work. The HSCP are also working closely with Legal Services within the Council and NHS to review our current Integration Scheme.	31.07.22 31.05.23 30.09.24	30.09.25	This action is ongoing. Work continues on a collective agreement across all IJB's with regular meetings taking place. The new timescale for this is August/ September 2025.
IJB Workforce Planning Arrangements (February 2023)	Managing Timescales within the Workforce Plan action plan (Amber) The IJB Chief Financial Officer will also explore the use of the Pentana system to record milestones for actions and priorities for each action.	31.12.23 31.07.24	30.09.26	The current HSCP Workforce Plan is due to expire in 2025 and will be superseded by a new Workforce plan. When complete, all identified actions will be added to the Ideagen system for improved collation of updates and progress reporting.

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 28 February 2025.

	Total	Total	Total Current Actions Not Yet Due*		
Audit Year	Agreed Actions	Actions Completed	Red	Amber	Green
2019/2020	6	5	0	1	0
2020/2021	2	2	0	0	0
2021/2022	6	6	0	0	0
2022/2023	6	5	0	1	0
2023/2024	1	1	0	0	0
2024/2025	1	0	0	0	1
Total	22	19	0	2	1

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