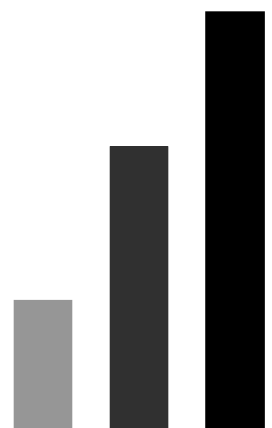


## Agenda 2017

# Inverclyde Integration Joint Board Audit Committee

For meeting on:

14	March	2017
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Municipal Buildings, Greenock PA15 1LY

**PLEASE NOTE TIME AND VENUE OF MEETING**

Ref: SL/AI

Date: 2 March 2017

**A meeting of the Inverclyde Integration Joint Board Audit Committee will be held on Tuesday 14 March 2017 at 1.30pm within the Scott Walker Room, Holiday Inn Express, Cartburn West, Greenock PA15 1AE.**

**Gerard Malone  
Head of Legal and Property Services**

**BUSINESS**

1. **Apologies, Substitutions and Declarations of Interest**
2. **Minute of Meeting of Inverclyde Integration Joint Board Audit Committee of 24 January 2017**
3. **Internal Audit Progress Report – 24 January to 17 February 2017**  
Report by Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership
4. **External Audit – Annual Audit Plan 2016/17**  
Report by Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership

Enquiries to - **Sharon Lang** - Tel 01475 712112

## INVERCLYDE INTEGRATION JOINT BOARD AUDIT COMMITTEE – 24 JANUARY 2017

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### Inverclyde Integration Joint Board Audit Committee

Tuesday 24 January 2017 at 5.25pm

**Present:** Councillors J Clocherty and L Rebecchi, Mr A Cowan, Mr S Carr, Mr I Bruce and Ms R Garcha.

**Chair:** Mr Carr presided.

**In attendance:** Mr B Moore, Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership, Ms B Culshaw, Head of Community Care & Health, Ms H Watson, Head of Planning, Health Improvement & Commissioning, Ms D Gillespie, Head of Mental Health, Addictions & Homelessness, Ms S McAlees, Head of Children's Services & Criminal Justice, Ms L Aird, Chief Financial Officer HSCP, Ms A Priestman, Chief Internal Auditor, Ms V Pollock (for Head of Legal & Property Services) and Ms S Lang (Legal & Property Services).

#### 1 **Apologies, Substitutions and Declarations of Interest** 1

No apologies for absence or declarations of interest were intimated.

#### 2 **Minute of Meeting of Inverclyde Integration Joint Board Audit Committee of 18 August 2016** 2

There was submitted the minute of the Inverclyde Integration Joint Board Audit Committee of 18 August 2016.

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

#### 3 **Financial Regulations** 3

There was submitted a report by the Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership seeking approval of revised Financial Regulations which detail the responsibilities of the Integration Joint Board for its own financial affairs.

**Decided:** that the Committee note the report and approve the revised Financial Regulations as set out in appendix 1.

#### 4 **Strategic Risk Register** 4

There was submitted a report by the Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership seeking approval of the Integration Joint Board's Strategic Risk Register.

**Decided:**

- (1) that the contents of the report be noted;
- (2) that agreement be given to a final version of the Integration Joint Board Strategic Risk Register incorporating the proposed changes set out in paragraph 5.6 of the report; and
- (3) that the final version of the Strategic Risk Register incorporating the changes as set out in (2) above be submitted to the next meeting of the Integration Joint Board for final consideration and approval.

**5 Internal Audit Annual Plan 2016-2017****5**

There was submitted a report by the Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership seeking approval of the Internal Audit Annual Plan for 2016-2017.

**Decided:** that approval be given to the Internal Audit Annual Plan for 2016-2017 as detailed in the report.

Report To: IJB Audit Committee Date: 14 March 2017  
 Report By: Corporate Director (Chief Officer) Report No: IJBA/04/2017/AP  
 Inverclyde Integration Joint Board  
 Contact Officer: Andi Priestman Contact No: 01475 712251

**Subject: INTERNAL AUDIT PROGRESS REPORT – 24 JANUARY TO 17 FEBRUARY 2017**

**1.0 PURPOSE**

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

**2.0 SUMMARY**

- 2.1 One internal audit report has been finalised since the last Audit Committee meeting:-
  - Review of Governance Arrangements
- 2.2 The objective of this audit was to provide the IJB Audit Committee with an assessment of the adequacy and effectiveness of the IJB’s governance arrangements.
- 2.3 This report contains 3 issues categorised as follows:-

Red	Amber	Green
0	0	3

- 2.4 The overall control environment opinion for this review was **Satisfactory**. Areas of improvement were identified in relation to:-
  - Managing the implementation of the IJB’s governance arrangements
  - Managing IJB members’ individual training needs in governance matters
  - Managing the ongoing review and update of the IJB’s governance documents
- 2.5 An action plan is in place to address all issues by 28 February 2018.
- 2.6 The fieldwork in relation to the internal audit plan for 2016/2017 is now complete.

## 2.0 SUMMARY (CONTINUED)

2.7 During 2016/2017, the following Internal Audit Reports have been issued to Inverclyde Council, which are relevant to the IJB Audit Committee:-

Audit Report	Opinion	Number/Category of Issues		
		Red	Amber	Green
Corporate Health and Safety	Satisfactory	0	4	2
LGBF/SOLACE Indicators	Strong	0	0	3

2.8 Actions have been agreed with management and Internal Audit follow up each action when it falls due with regular reporting to the Council's Corporate Management Team and Audit Committee on the implementation of agreed actions and any matters of concern.

2.9 In addition, corporate fraud investigation reports have been issued as follows:

Year/Ref	Enquiry	Status
15/16 15-04	NFI Match – Payroll to Creditor Information	Complete – report issued and action plan agreed.
16/17 16-03	Potential misuse of Expired Blue Badge	Complete – report issued and action plan agreed.
16/17 16-04	Client Account Discrepancy	Complete – report issued and action plan agreed.
16/17 16-08	Potential Employee Conflict of Interest	Complete – report issued and action plan agreed.

2.10 During 2016/2017, the following Internal Audit Reports have been issued to NHSGGC which are relevant to the IJB Audit Committee:-

Audit Report	Opinion	Number/Category of Issues		
		High	Medium	Low
Delayed Discharge: Use of Additional Funding	Low Risk	0	2	0
Health and Social Care Partnerships: Governance Arrangements	Low Risk	0	0	4
Risk Management Arrangements	Medium Risk	0	3	1
Clinical Governance	High Risk	0	6	1
Waiting Times/TTG	High Risk	1	2	0
Key Financial Controls – Payroll	Medium Risk	0	3	2
Key Financial Controls – Accounts Payable	Low Risk	0	0	2
Key Financial Controls – General Ledger	Low Risk	0	0	1
Performance Monitoring and Reporting in Acute Services	Low Risk	0	2	0
Complaints Handling Procedures	Low Risk	0	1	3

2.11 Internal Audit has undertaken follow up work to confirm the implementation of high risk and a sample of medium risk recommendations. The results of the follow up work are reported to the Audit Committee with any matters of concern being drawn to the attention of this Committee.

### **3.0 RECOMMENDATIONS**

- 3.1 It is recommended that IJB Audit Committee members agree to note the progress made by Internal Audit in the period from 24 January to 17 February 2017.

**Brian Moore**  
**Corporate Director (Chief Officer), Inverclyde Integration Joint Board**

#### 4.0 BACKGROUND

- 4.1 In January 2017, the Audit Committee approved the current Internal Audit Annual Plan which detailed the activity to be undertaken during 2016-17.
- 4.2 Internal Audit reports findings and action plans to relevant IJB Officers and the Audit Committee as part of the annual audit plan. A follow up process is in place to allow follow up of current internal audit actions to be co-ordinated and updated by Internal Audit on a monthly basis with regular reporting to the Audit Committee.
- 4.3 In each audit, one of 4 overall opinions is expressed:-

<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.

- 4.4 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.

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

#### 5.0 CURRENT POSITION

- 5.1 One internal audit report has been finalised since the last Audit Committee meeting in January 2017:-
- Review of Governance Arrangements
- 5.2 The objective of this audit was to provide the IJB Audit Committee with an assessment of the adequacy and effectiveness of the IJB's governance arrangements.
- 5.3 This report contain 3 issues categorised as follows:

Red	Amber	Green
0	0	3



## 5.0 CURRENT POSITION (CONTINUED)

5.4 The overall control environment opinion for this review was **Satisfactory**. Areas of improvement were identified in relation to:

- Managing the implementation of the IJB's governance arrangements
- Managing IJB members' individual training needs in governance matters
- Managing the ongoing review and update of the IJB's governance documents

5.5 An action plan is in place to address all issues by 28 February 2018.

5.6 The fieldwork for the 2016/17 plan is now complete.

5.7 During 2016/2017, the following Internal Audit Reports have been issued to Inverclyde Council, which are relevant to the IJB Audit Committee:-

Audit Report	Opinion	Number/Category of Issues		
		Red	Amber	Green
Corporate Health and Safety	Satisfactory	0	4	2
LGBF/SOLACE Indicators	Strong	0	0	3

5.8 Actions have been agreed with management and Internal Audit follow up each action when it falls due with regular reporting to the Council's Corporate Management Team and Audit Committee on the implementation of agreed actions and any matters of concern.

5.9 In addition, corporate fraud investigation reports have been issued as follows:

Year/Ref	Enquiry	Status
15/16 15-04	NFI Match – Payroll to Creditor Information	Complete – report issued and action plan agreed.
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16/17 16-04	Client Account Discrepancy	Complete – report issued and action plan agreed.
16/17 16-08	Potential Employee Conflict of Interest	Complete – report issued and action plan agreed.

5.10 During 2016/2017, the following Internal Audit Reports have been issued to NHSGGC which are relevant to the IJB Audit Committee:-

Audit Report	Opinion	Number/Category of Issues		
		High	Medium	Low
Delayed Discharge: Use of Additional Funding	Low Risk	0	2	0
Health and Social Care Partnerships: Governance Arrangements	Low Risk	0	0	4
Risk Management Arrangements (1)	Medium Risk	0	3	1
Clinical Governance (2)	High Risk	0	6	1
Waiting Times/TTG (3)	High Risk	1	2	0
Key Financial Controls – Payroll (4)	Medium Risk	0	3	2
Key Financial Controls – Accounts Payable	Low Risk	0	0	2

## 5.0 CURRENT POSITION (CONTINUED)

5.11 High Risk indicates findings that could have a:-

- Significant impact on operational performance; or
- Significant monetary or financial statement impact; or
- Significant breach in laws and regulations resulting in significant fines and consequences; or
- Significant impact on the reputation or brand of the organisation.

Medium Risk indicates findings that could have a:-

- Moderate impact on operational performance; or
- Moderate monetary or financial statement impact; or
- Moderate breach in laws and regulations resulting in significant fines and consequences; or
- Moderate impact on the reputation or brand of the organisation.

Low Risk indicates findings that could have a:-

- Low impact on operational performance; or
- Low monetary or financial statement impact; or
- Low breach in laws and regulations resulting in significant fines and consequences; or
- Low impact on the reputation or brand of the organisation.

(1) There have been a number of initiatives undertaken by NHSGGC to address recommendations made in the previous report on Risk Management, however medium risk issues were identified that are limiting the effectiveness of the actions taken to date including non-attendance at the risk management steering group of key stakeholders from Acute Services, the absence of a clear plan to fully roll out Datix in all NHSGGC areas and the absence of training and communication plans to support the revised risk management strategy and policy.

(2) This was a follow up review to the May 2015 report on Clinical Governance. The internal audit review noted that progress against Phase 1 of each action was near completing and noted the continuance of good practice during the review of clinical governance arrangements within Acute Services Division. Four medium priority actions in progress remain open – procedural/guidance documents; divisional level groups; child protection reporting; and recommendations from an enquiry including knowledge sharing arrangements.

(3) This audit built on the work that was undertaken during 2014/2015 and reviewed the steps taken to address the weaknesses identified. The main weakness which the internal audit review identified was in relation to recovery plans which are required to address waiting list issues which are still to be developed to address issues which have a direct impact on performance against waiting time targets.

(4) This audit reviewed the implementation of actions to address findings arising from the 2015/2016 review. The current review identified that 2 medium risk findings remain open – transfer of data from Bank Staff Management System and the Scottish Standard Time System; and selection of staff in BSMS when booking shifts. In addition one further medium risk was identified in relation to the authorisation of bank shifts where the review identified that certain staff have system access which allows them to schedule and approve their own shift.

5.12 Internal Audit has undertaken follow up work to confirm the implementation of high risk and a sample of medium risk recommendations. The results of the follow up work is reported to the Audit Committee with any matters of concern being drawn to the attention of this Committee.

## 6.0 IMPLICATIONS

### Finance

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

#### Financial Implications:

##### One off Costs

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

##### Annually Recurring Costs/ (Savings)

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

### Legal

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

### Human Resources

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

### Equalities

- 6.4 There are no direct equalities implications arising from this report.

### Clinical or Care Governance Implications

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

### National Wellbeing Outcomes

- 6.6 There are no direct national wellbeing outcomes arising from this report.

## 7.0 CONSULTATIONS

- 7.1 N/A

## 8.0 LIST OF BACKGROUND PAPERS

- 8.1 Internal Audit Reports. Copies available from Chief Internal Auditor.

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**Report To:** Inverclyde Integration Joint Board - Audit Committee      **Date:** 14 March 2017

**Report By:** Brian Moore, Corporate Director (Chief Officer) Inverclyde Health & Social Care Partnership      **Report No:** IJBA/05/2017/LA

**Contact Officer:** Lesley Aird      **Contact No:** 01475 715381

**Subject:** EXTERNAL AUDIT – ANNUAL AUDIT PLAN 2016/17

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## **1.0 PURPOSE**

1.1 The purpose of this report is to present the External Audit Plan for 2016/17, produced by Audit Scotland.

## **2.0 SUMMARY**

2.1 Appendix 1 contains the Annual Audit Plan 2016/17 for the IJB prepared by the IJB's External Auditors, Audit Scotland.

2.2 Representatives from Audit Scotland will be in attendance at the meeting in order to present the Plan and answer any questions.

## **3.0 RECOMMENDATIONS**

3.1 It is recommended that the IJB Audit Committee notes the Annual Audit Plan 2016/17.

**Brian Moore**  
Corporate Director (Chief Officer)

**Lesley Aird**  
Chief Financial Officer

## 4.0 BACKGROUND

- 4.1 The IJB's External Auditors, Audit Scotland, have submitted their plan for the audit of the 2016/17 annual accounts. This plan is attached at Appendix 1.
- 4.2 Representatives from Audit Scotland will be in attendance at the meeting in order to present the Plan and answer any questions.

## 5.0 IMPLICATIONS

### 5.1 FINANCE

There are no financial implications arising from this report.

One off Costs

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

Annually Recurring Costs / (Savings)

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

### LEGAL

- 5.2 There are no specific legal implications arising from this report.

### HUMAN RESOURCES

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

### EQUALITIES

- 5.4 There are no equality issues within this report.

Has an Equality Impact Assessment been carried out?

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

- 5.5 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

## 5.6 CLINICAL OR CARE GOVERNANCE IMPLICATIONS

There are no governance issues within this report.

## 5.7 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes

There are no National Wellbeing Outcomes implications within this report.

<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
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## **6.0 CONSULTATION**

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

## **7.0 BACKGROUND PAPERS**

7.1 None.

# Inverclyde Integration Joint Board

Annual Audit Plan 2016/17



 AUDIT SCOTLAND

Prepared for Inverclyde Integration Joint Board

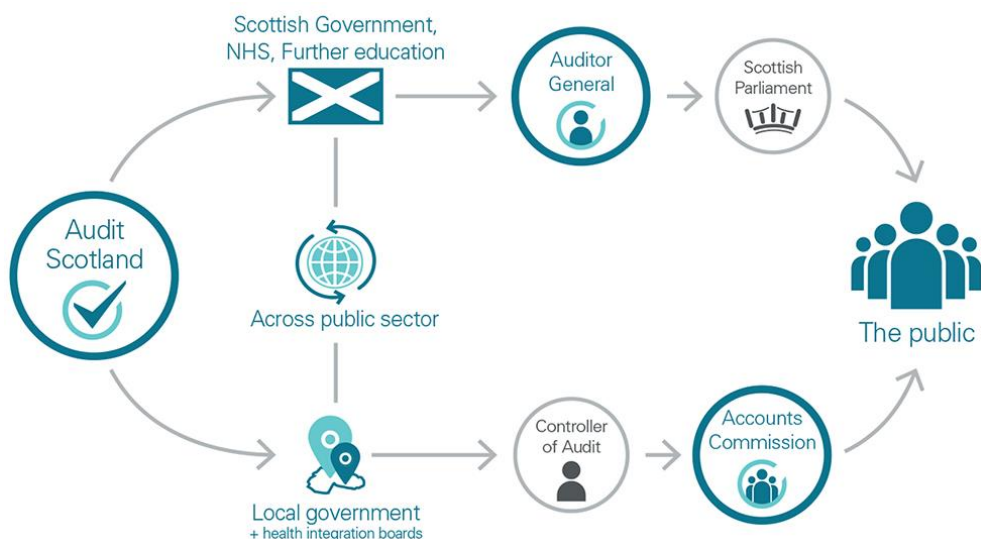
February 2017



## Who we are

The Auditor General, the Accounts Commission and Audit Scotland work together to deliver public audit in Scotland:

- The Auditor General is an independent crown appointment, made on the recommendation of the Scottish Parliament, to audit the Scottish Government, NHS and other bodies and report to Parliament on their financial health and performance.
- The Accounts Commission is an independent public body appointed by Scottish ministers to hold local government to account. The Controller of Audit is an independent post established by statute, with powers to report directly to the Commission on the audit of local government.
- Audit Scotland is governed by a board, consisting of the Auditor General, the chair of the Accounts Commission, a non-executive board chair, and two non-executive members appointed by the Scottish Commission for Public Audit, a commission of the Scottish Parliament.



## About us

Our vision is to be a world-class audit organisation that improves the use of public money.

Through our work for the Auditor General and the Accounts Commission, we provide independent assurance to the people of Scotland that public money is spent properly and provides value. We aim to achieve this by:

- carrying out relevant and timely audits of the way the public sector manages and spends money
- reporting our findings and conclusions in public
- identifying risks, making clear and relevant recommendations.

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# Risks and planned work

1. This annual audit plan contains an overview of the planned scope and timing of our audit and is carried out in accordance with International Standards on Auditing (ISAs), the [Code of Audit Practice](#), and any other relevant guidance. This plan identifies our audit work to provide an opinion on the financial statements and related matters and meet the wider scope requirements of public sector audit including the new approach to Best Value. The wider scope of public audit contributes to conclusions on the appropriateness, effectiveness and impact of corporate governance, performance management arrangements and financial sustainability.

## Audit risks

2. Based on our discussions with staff, attendance at committee meetings and a review of supporting information we have identified the following main risk areas for Inverclyde Integration Joint Board. We have categorised these risks into financial risks and wider dimension risks. The key audit risks, which require specific audit testing, are detailed in [Exhibit 1](#).

## Exhibit 1

Audit Risk	Management assurance	Planned audit work
<b>Financial statement issues and risks</b>		
<p><b>1 Risk of management override of controls</b></p> <p>ISA 240 requires that audit work is planned to consider the risk of fraud, which is presumed to be a significant risk in any audit. This includes consideration of the risk of management override of controls in order to change the position disclosed in the financial statements.</p>	<p><i>Owing to the nature of this risk, assurances from management are not applicable</i></p>	<p>Detailed testing of journal entries.</p> <p>Service auditor assurances will be obtained from the auditors of Inverclyde Council and NHS Greater Glasgow &amp; Clyde over the completeness, accuracy and allocation of the income and expenditure</p>
<p><b>2 Financial statements preparation</b></p> <p>The 2016/17 financial statements will require income, expenditure and year end balances to be agreed with Inverclyde Council and NHS Greater Glasgow and Clyde. There is a risk that the procedures for agreeing the year end balances are not fully embedded and the financial statements are not delivered to the agreed timescale and format.</p>	<ul style="list-style-type: none"> <li>• Monthly monitoring of financial information.</li> <li>• Officers review guidance issued by the Integrated Resource Advisory Group and the Local Authority (Scotland) Accounts Advisory Committee.</li> <li>• Processes and procedures have been agreed to ensure information is provided in a timely manner to support the delivery of the financial statements.</li> </ul>	<p>Continued engagement with officers prior to the financial statements preparation to ensure the relevant information is disclosed and timetable achieved.</p> <p>Service auditor assurances will be obtained from the auditors of Inverclyde Council and NHS Greater Glasgow &amp; Clyde over the completeness, accuracy and allocation of the income and expenditure.</p>

Audit Risk	Management assurance	Planned audit work
<b>Wider dimension risks</b>		
<p><b>3 Financial management and budget overspends</b></p> <p>Based on the budget monitoring report for the period to 31 January 2017, there is a projected overspend of £0.256million. There is a risk that an overspend is incurred which has to be distributed to the council and the health board.</p>	<ul style="list-style-type: none"> <li>Ongoing financial monitoring will ensure that all areas are monitored closely.</li> <li>Where an overall overspend is incurred, the Board will be required to come to an agreement with the council and health board to confirm the nature and amount of any additional financial support required.</li> </ul>	<p>Ensure budget monitoring arrangements are robust and accurately reflect the financial position.</p> <p>Confirmation of agreement of funding and balances with host bodies.</p>

## Reporting arrangements

**3.** Audit reporting is the visible output for the annual audit. All annual audit plans and the outputs as detailed in [Exhibit 2](#), and any other outputs on matters of public interest will be published on our website: [www.audit-scotland.gov.uk](http://www.audit-scotland.gov.uk).

**4.** Matters arising from our audit will be reported on a timely basis and will include agreed action plans. Draft management reports will be issued to the relevant officer(s) to confirm factual accuracy.

**5.** We will provide an independent auditor's report to Inverclyde Integration Joint Board, and Accounts Commission summarising the results of the audit of the annual accounts. We will provide the Accountable Officer and Accounts Commission with an annual report on the audit containing observations and recommendations on significant matters which have arisen in the course of the audit.

## Exhibit 2

### 2016/17 Audit outputs

Audit Output	Target date	Audit Committee / Board Date
Annual Audit Report including ISA 260 requirements	September 2017	September 2017
Signed Independent Auditor's Report	September 2017	September 2017

## Audit fee

**6.** The proposed audit fee for the 2016/17 audit of Inverclyde Integration Joint Board is £17,400. In determining the audit fee we have taken account of the risk exposure of Inverclyde Integration Joint Board, the planned management assurances in place and the level of reliance we plan to take from the work of internal audit. Our audit approach assumes receipt of the unaudited financial statements, with a complete working papers package by 30 June.

**7.** Where our audit cannot proceed as planned through, for example, late receipt of unaudited financial statements, a supplementary fee may be levied. An additional fee may also be required in relation to any work or other significant exercises outwith our planned audit activity.

## **Responsibilities**

### **Inverclyde Integration Joint Board Audit Committee and Accountable Officer**

**8.** Audited bodies have the primary responsibility for ensuring the proper financial stewardship of public funds, compliance with relevant legislation and establishing effective arrangements for governance, propriety and regularity that enable them to successfully deliver their objectives.

**9.** The audit of the financial statements does not relieve management or the Audit Committee, as those charged with governance, of their responsibilities.

### **Appointed auditor**

**10.** Our responsibilities as independent auditor are established by the 1973 Act for local government, (LG bodies) and the Code of Audit Practice, and guided by the auditing profession's ethical guidance.

**11.** Auditors in the public sector give an independent opinion on the financial statements. We also review and report on the arrangements within the audited body to manage its performance, regularity and use of resources. In doing this, we aim to support improvement and accountability.

# Audit scope and timing

## Financial statements

**12.** The statutory financial statements audit will be the foundation and source for the majority of the audit work necessary to support our judgements and conclusions. We also consider the wider environment and challenges facing the public sector. Our audit approach includes:

- understanding the business of Inverclyde Integration Joint Board and the associated risks which could impact on the financial statements
- identifying major transaction streams, balances and areas of estimation and understanding how Inverclyde Integration Joint Board will include these in the financial statements
- consideration of assurances obtained from the auditors of Inverclyde Council and NHS Greater Glasgow & Clyde over the completeness, accuracy and allocation of the income and expenditure
- assessing the risks of material misstatement in the financial statements
- determining the nature, timing and extent of audit procedures necessary to provide us with sufficient audit evidence as to whether the financial statements are free of material misstatement.

**13.** We will give an opinion on the financial statements as to whether they:

- give a true and fair view of the financial position of the Inverclyde Integration Joint Board and their expenditure and income
- have been properly prepared in accordance with the IFRSs as adopted by the European Union and adapted by the 2016/17 Code
- have been prepared in accordance with the requirements of the Local Government (Scotland) Act 1973, the Local Authority Accounts (Scotland) Regulations 2014 and the Local Government in Scotland Act 2003.

## Materiality

**14.** Materiality defines the maximum error that we are prepared to accept and still conclude that that our audit objective has been achieved. It helps assist our planning of the audit and allows us to assess the impact of any audit adjustments on the financial statements. We calculate materiality at different levels as described below. The calculated materiality values for Inverclyde Integration Joint Board are set out in [Exhibit 3](#).



### Exhibit 3

#### Materiality values

Materiality level	Amount
<b>Planning materiality</b> - This is the calculated figure we use in assessing the overall impact of audit adjustments on the financial statements. It has been set at 1% of gross expenditure for the year ended 31 March 2017 based on the latest financial monitoring report for 2016/17.	£1.4 million
<b>Performance materiality</b> - This acts as a trigger point. If the aggregate of errors identified during the financial statements audit exceeds performance materiality this would indicate that further audit procedures should be considered. Using our professional judgement we have calculated performance materiality at 75% of planning materiality.	£1.0 million
<b>Reporting threshold</b> - We are required to report to those charged with governance on all unadjusted misstatements in excess of the 'reporting threshold' amount. This has been calculated at 5% of planning materiality.	£0.07 million



**15.** We review and report on other information published with the financial statements including the management commentary, annual governance report and the remuneration report. Any issue identified will be reported to the Audit Committee.

#### Timetable

**16.** To support the efficient use of resources it is critical that a financial statements timetable is agreed with us for the production of the unaudited accounts. An agreed timetable is included at [Exhibit 4](#) which takes account of submission requirements and planned Audit Committee dates:

### Exhibit 4

#### Financial statements timetable

 Key stage	 Date
Consideration of unaudited financial statements by those charged with governance	June 2017
Latest submission date of unaudited financial statements with complete working papers package	30 June 2017
Latest date for final clearance meeting with Chief Financial Officer	25 August 2017
Agreement of audited unsigned financial statements; Issue of Annual Audit Report including ISA 260 report to those charged with governance	September 2017
Independent auditor's report signed	September 2017

## Internal audit

17. Auditing standards require internal and external auditors to work closely together to make best use of available audit resources. We seek to rely on the work of internal audit wherever possible and as part of our planning process we carry out an assessment of the internal audit function. Internal audit is provided by a team from Council overseen by a Chief Internal Auditor.

### Adequacy of Internal Audit

18. Our assessment of the internal audit function concluded that it has sound documentation standards and reporting procedures in place and complies with the main requirements of the Public Sector Internal Audit Standards (PSIAS). We will consider the work of internal audit throughout the year to inform our audit processes.

## Audit dimensions

19. Our audit is based on four audit dimensions that frame the wider scope of public sector audit requirements as shown in [Exhibit 5](#).

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### Exhibit 5

#### Audit dimensions




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20. The appointed auditor's annual conclusions on these four dimensions will contribute to an overall assessment and assurance on best value.

### Financial sustainability

21. As auditors we consider the appropriateness of the use of the going concern basis of accounting as part of the annual audit. We will also comment on the body's financial sustainability in the medium term (two to five years) and longer term (longer than five years). We will carry out work and conclude on the following in 2016/17:

- the effectiveness of financial planning in identifying and addressing risks to financial sustainability in the short, medium and long term
- the appropriateness and effectiveness of arrangements in place to address any identified funding gaps



## Financial management

**22.** Financial management is concerned with financial capacity, sound budgetary processes and whether the control environment and internal controls are operating effectively including:

- the arrangements in place to ensure systems of internal control are operating effectively
- whether Inverclyde Integration Joint Board can demonstrate the effectiveness of the budgetary control system in communicating accurate and timely financial performance
- how assurance has been gained that the financial capacity and skills are appropriate
- whether appropriate and effective arrangements for the prevention and detection of fraud and corruption have been established.

## Governance and transparency

**23.** Governance and transparency is concerned with the effectiveness of scrutiny and governance arrangements, leadership and decision-making and transparent reporting of financial and performance information. We will review, conclude and report on:

- Whether Inverclyde Integration Joint Board can demonstrate that the governance arrangements in place are appropriate and operating effectively.
- whether there is effective scrutiny, challenge and transparency on the decision-making and finance and performance reports.

## Value for money

**24.** Value for money refers to using resources effectively and continually improving services. We will review, conclude and report on whether Inverclyde Integration Joint Board can provide evidence that it is demonstrating value for money in the use of its resources and achievement of outcomes.

## Strategic Plan for the five year appointment

**25.** As part our responsibility to report on the audit dimensions over the current audit appointment we have identified the following areas of proposed audit work (this will be subject to annual review):

## Exhibit 6

### Strategic plan

Dimension	2016/17*	2017/18	2018/19 to 2020/21
Financial sustainability		Financial planning	
Financial management	Financial governance & resource management		
Governance and transparency			Leadership, governance and scrutiny
Value for money			Operational efficiency

## Independence and objectivity

**26.** Auditors appointed by Audit Scotland must comply with the Code of Audit Practice. When auditing the financial statements auditors must also comply with professional standards issued by the Financial Reporting Council and those of the professional accountancy bodies. These standards impose stringent rules to ensure the independence and objectivity of auditors. Audit Scotland has in place robust arrangements to ensure compliance with these standards including an annual “fit and proper” declaration for all members of staff. The arrangements are overseen by the Assistant Auditor General, who serves as Audit Scotland’s Ethics Partner.

**27.** The engagement lead for Inverclyde Integration Joint Board is Brian Howarth, Assistant Director. Auditing and ethical standards require the appointed auditor Audit Scotland to communicate any relationships that may affect the independence and objectivity of audit staff. We are not aware of any such relationships pertaining to the audit of Inverclyde Integration Joint Board.

## Quality control

**28.** International Standard on Quality Control (UK and Ireland) 1 (ISQC1) requires that a system of quality control is established, as part of financial audit procedures, to provide reasonable assurance that professional standards and regulatory and legal requirements are being complied with and that the independent auditor’s report or opinion is appropriate in the circumstances.

**29.** The foundation of our quality framework is our Audit Guide, which incorporates the application of professional auditing, quality and ethical standards and the Code of Audit Practice issued by Audit Scotland and approved by the Auditor General for Scotland. To ensure that we achieve the required quality standards Audit Scotland conducts peer reviews, internal quality reviews and is currently reviewing the arrangements for external quality reviews.

**30.** As part of our commitment to quality and continuous improvement, Audit Scotland will periodically seek your views on the quality of our service provision. We welcome feedback at any time and this may be directed to the engagement lead.

# Inverclyde Integration Joint Board

## Annual Audit Plan 2016/17

If you require this publication in an alternative format and/or language, please contact us to discuss your needs: 0131 625 1500 or [info@audit-scotland.gov.uk](mailto:info@audit-scotland.gov.uk)

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