



Meeting of East Renfrewshire Health and Social Care Partnership	Performance and Audit Committee
Held on	21 September 2022
Agenda Item	10
Title	Policy Update
Summary	
This paper provides an overview of the policies relating to the Integration Joint Board	
Presented by	Margaret Phelps, Planning, Performance and Commissioning Manager
Action Required	
Members of Performance and Audit Committee are asked to note the report.	

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

PERFORMANCE AND AUDIT COMMITTEE

21 September 2022

Report by Chief Officer

POLICY UPDATE

PURPOSE OF REPORT

1. This paper provides an update on policies relating specifically to Integration Joint Board governance.

RECOMMENDATION

2. Performance and Audit Committee are asked to note the report and those policies which have been reviewed.

BACKGROUND

3. The Integration Joint Board has a number of policy documents which relate specifically to the governance of the IJB. These comprise:-
 - Integration Scheme
 - Standing Orders
 - Code of Conduct
 - Reserves Policy
 - Financial Regulations
 - IJB Risk Policy and Strategy
 - IJB FOI Policy
 - IJB Publication Scheme
 - IJB Records Management
 - IJB Complaints Handling Procedure
4. Performance and Audit Committee members will recall the June report where we identified that a number of policies were due for review and updates on these are included within this report.
5. Going forward this committee will receive an annual overview report showing the status of each policy. This will be presented to Performance and Audit Committee in September each year as a number of policy renewals fall at this time. Should there be any legislation or other significant change during the year, then a report will be brought to either PAC or IJB for approval.
6. As we reinstate some of our governance as part of our recovery, we have reviewed the policies outlined below and the changes made are minor and fall under housekeeping.

REPORT

7. Updates on the six policies due for review are included below. Copies of the policies are attached to this paper:

Policy	Appendix
Financial Regulations	1
Reserves	2
IJB Risk Policy and Strategy	3
IJB FOI Policy	4
IJB Publications Scheme	5
IJB Records Management Plan	6

Financial Regulations and Reserves Policy

8. The financial regulations (Appendix 1) set out the financial governance regulations under which the Integration Joint Board operates and identifies the roles and responsibilities of the IJB, the Chief Officer and the Chief Financial Officer. There are no changes to the policy, last reviewed in September 2021.
9. Members of the Performance and Audit Committee should be assured that if there are any changes in legislation between review periods the regulations will be revised as required.
10. The Reserves Policy (Appendix 2) provides the detail to support the governance in respect of reserves. Whilst the reserves policy is unchanged since last reviewed in September 2021 it is worth noting the policy has supported our reserves strategy; which has served us well over a significant and continued period of change.
11. The optimum/maximum level of general reserve we should hold per our policy is 2% of our budget, however from the outset and recognising the ongoing financial challenge to the IJB we recognise that:
1. This would take time to build
 2. There is a tension between holding free reserves with and not protecting spend on front line services and the IJB have taken clear decision on this in prior years.
12. For context, 2% of our current revenue budget, excluding set aside and Family Health Services, is £2.3 million. Our current general reserve is just under £0.3 million.
13. It would be possible to ask the IJB to un-hypothecate certain earmarked reserves should we need to and Performance and Audit Committee members will recall this was discussed in March 2022 when the IJB agreed the budget for 2022/23. We also discussed our reserves position in some detail in September 2020 and again in September 2021 when Audit Scotland presented their Annual Audit Report.
14. The committee should also note that it would not be possible to un-hypothecate the ring-fenced reserves specific to Scottish Government funding initiatives such as Covid support, Primary Care Improvement and Mental Health Action 15.

IJB Risk Policy and Strategy

15. The IJB Risk Policy and Strategy (Appendix 3) was last approved by the Integration Joint Board in January 2020. Following a recent review it has been concluded that no changes are required at this stage and the existing policy remains in place.

IJB FOI Policy

16. The Freedom of Information (Scotland) Act gives a general right of access to recorded information held by public authorities, subject to certain exemptions.
17. We have reviewed our FOI policy (Appendix 4) which was first approved in November 2015. Whilst there were no substantial changes required, some minor amendments have been made. Changes include:-
 - 2.1 and 2.2 added to provide clarity that policy relates specifically to IJB and removal of reference to contractors as any contracts are through partner organisations.
 - 3.3 updated to reflect responsible officer
 - 4.1 Removed reference to Records Management Plan to be developed as it is in place
 - 5.2 Removed reference to cross-organisation requests as the policy specifically relates to information held by the HSCP.
 - 6.2 Added contact details
 - 8.1 Added 2 yearly review period

IJB Publication Scheme

18. Section 23 of the Freedom of Information (Scotland) Act 2002 requires Scottish public authorities to produce and maintain a publication scheme. This is called the "publication scheme" duty.
19. The IJB publication scheme (Appendix 5) originally adopted in 2017 was based on the Scottish Information Commissioner's (SIC) model publication scheme. Although the SIC updated their model plan in March 2021, no substantive changes were made and they confirmed that there was no action required by authorities in response to their update.
20. The following minor changes have been made to refresh to policy locally:
 - Refreshed wording of Introduction, Availability and Formats, Charges
 - Updated contact details
 - Added further description under each class of information
 - Added class 9: open data
 - Refreshed web links and added addition links to our available information
21. We plan to review our website to make this more user friendly and accessible and will explore the possibility of hosting the guide to information on a webpage rather than as a separate document.

IJB Records Management Plan

22. The Public Records (Scotland) Act 2011 requires public authorities to prepare and implement a Records Management Plan (RMP) which must set out proper arrangements for the management of its records.
23. The IJB Records Management Plan (Appendix 6) was last reviewed in July 2022 and presented to the IJB in August 2022 where it was approved.

CONCLUSIONS

24. In order to promote transparent governance, the Performance and Audit Committee will receive an annual overview report on policies relating to IJB governance in September of each year.
25. In the event of any legislative or policy change in the interim a report will be brought to the Performance and Audit Committee and / or the Integration Joint Board and will also be reflected in the following annual overview.

RECOMMENDATIONS

26. Performance and Audit Committee are asked to note the report and those policies which have been reviewed.

REPORT AUTHOR AND PERSON TO CONTACT

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8 September 2022

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

Financial Regulations: https://www.eastrenfrewshire.gov.uk/media/6843/PAC-item-08-22-September-2021/pdf/PAC_item_08_-_22_September_2021.pdf?m=637673822311100000

Reserves Policy: https://www.eastrenfrewshire.gov.uk/media/6843/PAC-item-08-22-September-2021/pdf/PAC_item_08_-_22_September_2021.pdf?m=637673822311100000

IJB Risk Policy and Strategy: https://www.eastrenfrewshire.gov.uk/media/1436/Integration-Joint-Board-Item-14-29-January-2020/pdf/Integration_Joint_Board_Item_14_-_29_January_2020.pdf?m=637284294607930000

IJB Publication Scheme: https://www.eastrenfrewshire.gov.uk/media/3764/Performance-and-Audit-Committee-Item-05-29-March-2017/pdf/PAC_Item_05_-_29_March_2017.pdf?m=637395819250030000

IJB Records Management Plan Annual Review: [IJB Item 11 - 10 August 2022.pdf \(eastrenfrewshire.gov.uk\)](#)



East Renfrewshire Integration Joint Board

Financial Regulations

(Version 2.2)

Document Title:	Financial Regulations	Current Status	Final - V2.2
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Date first approved:	18-12-2015	Date of next Review	Sep 2023
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1.0	2015	Lesley Bairden, Chief Financial Officer	
2.0	Mar 2020	Lesley Bairden, Chief Financial Officer, Full Review	
2.1	Sep 2021	Lesley Bairden, Chief Financial Officer – Annual Review (no changes)	
2.2	Sep 2022	Lesley Bairden, Chief Financial Officer – Annual Review (no changes)	

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East Renfrewshire Integration Joint Board positively promotes the principles of sound corporate governance within all areas of the Integration Joint Board's affairs. These Financial Regulations are an essential component of the corporate governance of the Health & Social Care Partnership Integration Joint Board.

1. What the Regulations Cover

- 1.1 The Integration Joint Board is a legal entity in its own right created by Parliamentary Order, following ministerial approval of the Integration Scheme. It is accountable for the stewardship of public funds and is expected to operate under public sector best practice governance arrangements, proportionate to its transactions and responsibilities. Stewardship is a major function of management and, therefore, a responsibility placed upon the appointed members and officers of the Integration Joint Board.
- 1.2 These financial regulations should be read in conjunction with the Standing Financial Instructions of NHS Greater Glasgow and Clyde and the Financial Regulations of East Renfrewshire Council.
- 1.3 The Regulations set out the respective responsibilities of the Chief Officer and the Chief Financial Officer of the Integration Joint Board.
- 1.4 It will be the duty of the Chief Officer assisted by the Chief Financial Officer to ensure that these Regulations are made known to the appropriate persons within the Integration Joint Board and to ensure that they are adhered to.
- 1.5 If it is believed that anyone has broken, or may break, these Regulations, this must be reported immediately to the Chief Financial Officer, who may then discuss the matter with the Chief Officer, NHS Greater Glasgow and Clyde Chief Executive, East Renfrewshire Council Chief Executive or another nominated or authorised person as appropriate to decide what action to take.
- 1.6 These Regulations will be the subject of regular review by the Health & Social Care Partnership Integration Joint Board Chief Financial Officer in consultation with the NHS Greater Glasgow and Clyde Director of Finance and the Council's Section 95 Officer, and where necessary, subsequent adjustments will be submitted to the Integration Joint Board Performance & Audit Committee for approval.

2. Financial Management and Performance

- 2.1 The Integration Scheme sets out the detail of the integration arrangement agreed between NHS Greater Glasgow and Clyde and East Renfrewshire Council. In relation to financial management it specifies:
- The financial management arrangements including treatment of budget variances;
 - Reporting arrangements between the Integration Joint Board, NHS Greater Glasgow and Clyde and East Renfrewshire Council;
 - The method for determining the resources to be made available by NHS Greater Glasgow and Clyde and East Renfrewshire Council;
 - The functions which are delegated to the IJB by NHS Greater Glasgow and Clyde and East Renfrewshire Council.

Responsibility of the Chief Officer

- 2.2 The Chief Officer is the accountable officer of the Integration Joint Board in all matters except finance. The Chief Officer will discharge their duties in respect of the delegated resources by:
- Ensuring that the Strategic Plan meets the requirement for economy, efficiency and effectiveness;
 - Giving directions to NHS Greater Glasgow and Clyde and East Renfrewshire Council that are designed to ensure resources are spent in accordance with the plan; it is the responsibility of the Chief Officer to ensure that the provisions of the directions enable them to discharge their responsibilities in this respect within available resources.
- 2.3 The Chief Officer will also hold an operational role in NHS Greater Glasgow and Clyde and East Renfrewshire Council for the management of the operational delivery of services as directed by the Integration Joint Board. In this operational role the Chief Officer has no “accountable officer” status but is:
- Accountable to the Chief Executive of NHS Greater Glasgow and Clyde for financial management of the operational budget; and
 - Accountable to the Section 95 Officer of East Renfrewshire Council for financial management of the operational budget; and
 - Accountable to the Chief Executive of NHS Greater Glasgow and Clyde and the Chief Executive of East Renfrewshire Council for the operational performance of the services managed by the Chief Officer.

Responsibility of the Chief Finance Officer

- 2.4 The Integration Joint Board will appoint an officer responsible for its financial administration. The Chief Officer may be appointed to this role if the Integration Joint Board deems it appropriate. If in such circumstances the Chief Officer does not have a recognised professional accounting qualification arrangements must be put in place to provide the post holder and the Integration Joint Board with financial advice from a qualified person.
- 2.5 The Chief Financial Officer will discharge his/her duties in respect of the delegated resources by:
- Establishing financial governance systems for the proper use of the delegated resources; and,
 - Ensuring that the Strategic Plan meets the requirement for best value in the use of the Integration Joint Board’s resources.

Responsibility of the NHS Board Accountable Officer / NHS Board Director of Finance/Council Section 95 Officer

- 2.6 The NHS Board Accountable Officer and the Council’s Section 95 Officer discharge their responsibility, as it relates to the resources that are delegated to the Integration Joint Board, by setting out in the Integration Scheme the purpose for which resources are used and the systems and monitoring arrangements for financial performance management. It is their responsibility to ensure that the provisions of the Integration Scheme enable them to discharge their responsibilities in this respect.
- 2.7 The NHS Board Director of Finance and the Section 95 Officer of East Renfrewshire Council will provide specific advice and professional support to the Chief Officer and Chief Financial Officer to support the production of the Strategic Plan and also to ensure that adequate systems of internal control are established by the Integration Joint Board.

3 Financial Planning

Strategic Plan and Integrated Budget

- 3.1 The Integration Joint Board is responsible for the production of a Strategic Plan which sets out the services for their population over the medium term (3 years). The resources within scope of the Strategic Plan are:
- The payment made to the Integration Joint Board by East Renfrewshire Council for delegated social care services;
 - The payment from NHS Greater Glasgow and Clyde to the Integration Joint Board for delegated primary and community healthcare services and for those delegated hospital services managed by the Chief Officer.
 - The amount set aside by NHS Greater Glasgow and Clyde for delegated services provided in large hospitals for the population of the Integration Joint Board.
- 3.2 NHS Greater Glasgow and Clyde and East Renfrewshire Council will provide indicative three year rolling funding allocations to the Integration Joint Board to support the Strategic Plan and medium term planning process. Such indicative allocations will remain subject to annual approval by both organisations.
- 3.3 The Chief Officer and the Chief Financial Officer will develop a business case for the integrated budget based on the Strategic Plan and present it to NHS Greater Glasgow and Clyde and East Renfrewshire Council for consideration and agreement as part of each organisation's annual budget setting process. The business case should be evidence based with full transparency on its assumptions and take account of:
- **Activity Changes.** The impact on resources in respect of increased demand e.g. demographic pressures and increased prevalence of long term conditions, and for other planned activity changes;
 - **Cost Inflation.** Pay and supplies cost increases;
 - **Efficiencies.** All savings (including increased income opportunities and service rationalisations/cessations) should be agreed between the Integration Joint Board, East Renfrewshire Council and NHS Greater Glasgow and Clyde as part of the annual rolling financial planning process to ensure transparency;
 - **Performance on outcomes.** The potential impact of efficiencies on agreed outcomes must be clearly stated and open to challenge by East Renfrewshire Council and NHS Greater Glasgow and Clyde;
 - **Legal requirements.** Legislation may entail expenditure commitments that should be taken into account in adjusting the payment;
 - **Transfers to/from the notional budget for hospital services** set out in the Strategic Plan;

- **Adjustments to address equity.** East Renfrewshire Council and NHS Greater Glasgow and Clyde may choose to adjust contributions to smooth the variation in weighted capita resource allocations across partnerships; information to support this will be provided nationally by Information Services Division.

3.4 The Strategic Plan will determine the budgets allocated to each operational partner for operational service delivery in line with the Plan. The Integration Joint Board will publish its Strategic Plan as soon as practicable after finalisation of the plan.

Limits on Expenditure

- 3.5 No expenditure will be incurred by the Integration Joint Board unless it has been included within the approved Integration budget and Strategic plan except:
- i. Where additional funding has been approved by NHS Greater Glasgow and Clyde and/or East Renfrewshire Council and the integrated budget/strategic plan has been updated appropriately;
 - ii. Where a supplementary budget has been approved by the Integration Joint Board;
 - iii. In emergency situations in terms of any scheme of delegation;
 - iv. As provided in paragraph 3.5 below (Virement).

Virement

- 3.6 Virement is defined by CIPFA as “the transfer of an underspend on one budget head to finance additional spending on another budget head in accordance with the Financial Regulations”. In effect virement is the transfer of budget from one main budget heading (employee costs, supplies and services etc) to another, or a transfer of budget from one service to another. Where resources are transferred between the two operational arms of the Integrated Budget this will require in-year balancing adjustments to the allocations from the Integration Joint Board to East Renfrewshire Council and NHS Greater Glasgow and Clyde i.e. a reduction in the allocation to the body with the underspend and a corresponding increase in the allocation to the body with the overspend.
- 3.7 Virements require approval and they will be permitted subject to any Scheme of Delegation of the Integration Joint Board as follows:
- i. Virement must not create additional overall budget liability. One off savings or additional income should not be used to support recurring expenditure or to create future commitments including full year effects of decisions made part way through a year.
 - ii. The Chief Officer will not be permitted to vire between the Integrated Budget and those budgets that are managed by the Chief Officer, but are outwith the scope of

the Strategic Plan, unless agreed by East Renfrewshire Council and NHS Greater Glasgow and Clyde.

- iii. Any virement over £50,000 requires the approval of the Integrated Joint Board.

Budgetary Control

- 3.8 It is the responsibility of the Chief Officer and Chief Financial Officer to report regularly and timeously on all budgetary control measures, comparing projected outturn with the approved financial plan, to the Integration Joint Board and other bodies as designated by NHS Greater Glasgow and Clyde and East Renfrewshire Council.
- The NHS Greater Glasgow and Clyde Director of Finance and the Section 95 officer of East Renfrewshire Council will, along with the Integration Joint Board Chief Financial Officer put in place a system of budgetary control which will provide the Chief Officer with management accounting information for both arms of the operational budget and for the Integration Joint Board in aggregate.
- 3.9 It is the responsibility of the Integration Joint Board Chief Financial Officer, in consultation with the NHS Greater Glasgow and Clyde and the Section 95 Officer of East Renfrewshire Council, to agree a consistent basis and timetable for the preparation and reporting of management accounting information.
- 3.10 The Integration Scheme specifies how in year over/under spends will be treated. Where it appears that any heading of income or expenditure may vary significantly from the Financial Plan, it will be the duty of the Chief Officer and the Chief Finance Officer, in conjunction with the NHS Board Director of Finance and the Section 95 Officer of the Council, to report in accordance with the appropriate method established for that purpose by the Integration Joint Board, NHS Greater Glasgow and Clyde and East Renfrewshire Council, the details of the variance and any remedial action required. All actual or forecast variances over £50,000 will be reported to the Integrated Joint Board in financial monitoring reports.

Reports to Integration Joint Board

- 3.11 All reports to the Integration Joint Board and sub-committees thereof must specifically identify the extent of any financial implications. These must have been discussed and agreed with the Integration Joint Board Chief Financial Officer prior to lodging of reports.

4 Legality of Expenditure

- 4.1 It will be the duty of the Chief Officer to ensure that no expenditure is incurred, or included within the Strategic Financial Plan unless it is within the power of the Integration Joint board. In cases of doubt the Chief Officer should consult the respective legal advisers of NHS Greater Glasgow & Clyde and East Renfrewshire Council before incurring expenditure. The legality of expenditure on new service developments, initial contributions to other organisations and responses to emergency situations which require expenditure must be clarified prior to being incurred.

5 Reviewing the Financial Regulations

- 5.1 The Integration Joint Board Performance & Audit Committee will consider and approve any alterations to these Financial Regulations. The Integration Joint Board may also withdraw these financial regulations. If so, this will come into force from the first working day after the end of the Integration Joint Board meeting at which the change or withdrawal was approved.

6 Reserves

- 6.1 Legislation, under Section 106 of the Local Government (Scotland) Act 1973 as amended, empowers the Integration Joint Board to hold reserves which should be accounted for in the financial accounts and records of the Integration Joint Board. The Integration Joint Board will develop a reserves policy and a reserves strategy which will include the level of reserves required and their purpose. This will be agreed as part of the annual budget setting process and will be reflected in the Strategic Plan agreed by the Integration Joint Board.

7 VAT

- 7.1 HMRC has confirmed that there is no requirement to have a separate VAT registration for the Integration Joint Board as it will not be delivering any services within the scope of VAT. This situation should be kept under review by the Chief Financial Officer should the operational activities of the Integration Joint Board change and a need to register be established. HMRC guidance will apply to Scotland which will allow a VAT neutral outcome.

8 Procurement/Commissioning of Services

- 8.1 Public Bodies (Joint Working) (Integration Joint Boards) (Scotland) Order 2014/285 provides that the Health and Social Care Partnership Integration Joint Board may enter into a contract with any other person in relation to the provision of goods and services to the Integration Joint Board for the purpose of carrying out the functions conferred in it by the Act.
- 8.2 As a result of specific VAT and accounting issues associated with the Integration Joint Board contracting directly for the provision of goods and services the Chief Officer is required to consult with the NHS Board Director of Finance, the Section 95 Officer of the Council and the Chief Financial Officer prior to any direct procurement exercise being undertaken.

9 Financial Reporting

Accounting Procedures and Records

- 9.1 All accounting procedures and records of the Integration Joint Board will be as specified in applicable legislation and regulations. Financial Statements will be prepared following the Code of Practice on Local Authority Accounting in the UK. Statements will be signed as specified in regulations made under Section 105 of the Local Government (Scotland) Act 1973, Local Authority Accounts (Scotland) Regulations 2014, and the Local Government in Scotland Act 2003.
- 9.2 The financial statements must be completed to meet the audit and publication timetable specified under the relevant legislation. It is the primary responsibility of the Chief Financial Officer to meet these targets and of the Chief Officer to provide any relevant information to ensure that NHS Greater Glasgow and Clyde and East Renfrewshire Council meet their respective statutory audit and publication requirements for their individual and group financial statements.
- 9.3 The Integration Joint Board Chief Financial Officer will agree the financial statements timetable with the external auditors of the Integration Joint Board, NHS Greater Glasgow and Clyde and East Renfrewshire Council.

10 Internal Audit

Responsibility for Internal Audit

- 10.1 It is the responsibility of the Integration Joint Board to establish adequate and proportionate internal audit arrangements for review of the adequacy of the arrangements for risk management, governance and control of the delegated resources. This will include determining who will provide the internal audit service for the Integration Joint Board and nominating a Chief Internal Auditor.
- 10.2 The operational delivery of internal audit services within NHS Greater Glasgow and Clyde and East Renfrewshire Council will be covered by their respective internal audit arrangements as at present.
- 10.3 A Chief Internal Auditor will be appointed to act as the Integration Joint Board Chief Internal Auditor in addition to their role as Chief Internal Auditor of their respective authority.
- 10.4 The Internal Audit Service will undertake their work in compliance with the Public Sector Internal Audit Standards.
- 10.5 On or before the start of each financial year the Integration Joint Board Chief Internal Auditor will prepare and submit a strategic risk based audit plan to the Integration Joint Board for approval. The internal audit plan will consider:
 - The Strategic Plan and planning process;
 - The financial plan underpinning the Strategic Plan; and
 - Relevant issues raised from the partner Health Board and Local Authority.
- 10.6 It is recommended that the internal audit plan is shared with the relevant committees of the NHS Greater Glasgow and Clyde and East Renfrewshire Council.
- 10.7 The Integration Joint Board Chief Internal Auditor will report to the Integration Joint Board on the annual audit plan, delivery of the plan and recommendations and will provide an annual internal audit report including the audit opinion.
- 10.8 The Integration Joint Board annual internal audit report will be shared with the Audit Committees of NHS Greater Glasgow & Clyde and East Renfrewshire Council.
- 10.9 Internal audit reports carried out as part of the Integrated Joint Board internal audit plan will be submitted to the Chief Officer and the Integrated Joint Board Performance & Audit Committee for scrutiny.
- 10.10 Relevant internal audit activity carried out by partners will also be submitted to the Integration Joint Board Performance & Audit Committee for information and note. This

activity will be agreed with partner auditors, the Chief Officer and / or Chief Executives of NHS Greater Glasgow & Clyde and East Renfrewshire Council.

11 External Audit

- 11.1 The Accounts Commission will appoint the Auditors to the Integration Joint Board. This is specified under Section 13 of the legislation.
- 11.2 The Integration Joint Board should make appropriate and proportionate arrangements for consideration of external audit reports including those relating to the annual financial statements to ensure that they are compliant with relevant statutory provisions and Accounting Codes of Practice.
- 11.3 Reports on external audit activity will be submitted to the Chief Officer and the Performance & Audit Committee for scrutiny.

12 Audit Committee

- 12.1 The Integration Joint Board will put in place an Audit Committee to ensure that an effective assurance process is in place that assesses the objectives, risks and performance of the Partnership. This will include consideration of any reports from auditors.
- 12.2 It will be the responsibility of the Integration Joint Board to agree the membership having regard to the agreed remit, skills and good practice for a the audit committee. It is anticipated that members of the Integration Joint Board will serve in this capacity.

13 Risk Management and Insurance

Responsibility for Insurance and Risk

- 13.1 The Integration Joint Board will make appropriate insurance arrangements for all activities of the Integration Joint Board in accordance with the risk management strategy.
- 13.2 The Chief Officer will arrange, taking such specialist advice as may be necessary, that adequate insurance cover is obtained for all normal insurable risks arising from the activities of the Integration Joint Board for which it is the general custom to insure. This will include the provision of appropriate insurance in respect of Members of the Integration Joint Board acting in a decision making capacity.
- 13.3 The NHS Greater Glasgow & Clyde Director of Finance and the Section 95 Officer of East Renfrewshire Council will ensure that the Chief Officer has access to professional support and advice in respect of risk management.

Risk Strategy and Risk Register

- 13.4 The Chief Officer will be responsible for establishing the Integration Joint Board risk strategy and profile and developing the risk reporting arrangements; this will include arrangements for a risk register. The Risk Management strategy will be approved by the Integration Joint Board Performance & Audit Committee.
- 13.5 NHS Greater Glasgow & Clyde and East Renfrewshire Council will continue to identify and manage within their own risk management arrangements any risks they have retained under the integration arrangements. The partners will continue to report risk management to the existing committees including the impact of the integration arrangements.

Notification of Insurance Claims

- 13.6 The Chief Officer and the Chief Financial Officer will put in place appropriate procedures for the notification and handling of any insurance claims made against the Integration Joint Board.

14 Economy, Efficiency and Effectiveness (Best Value)

- 14.1 The Chief Officer will ensure that arrangements are in place to maintain control and clear public accountability over the public funds delegated to the Integration Joint Board. This will apply in respect of:
- the resources delegated to the Integration Joint Board by NHS Greater Glasgow & Clyde and East Renfrewshire Council; and
 - the resources paid to NHS Greater Glasgow and Clyde and East Renfrewshire Council by the Integration Joint Board for use as directed and set out in the Strategic Plan.
- 14.2 The Integration Joint Board has a duty to put in place proper arrangements for securing Best Value in the use of resources and delivery of services. There will be a process of strategic planning which will have full board member involvement, in order to establish the systematic identification of priorities and realisation of Best Value in the delivery of services.
- 14.3 It will be the responsibility of the Chief Officer to deliver the arrangements put in place to secure Best Value and to co-ordinate policy in regard to ensuring that the Integration Joint Board provides Best Value.
- 14.4 The Chief Officer will be responsible for ensuring implementation of the strategic planning process. Best Value should cover the areas of human resource and physical resource management, commissioning of services, financial management and policy, performance and service delivery process reviews.



East Renfrewshire Integration Joint Board

Reserves Policy

(Version 2.2)

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2.0	Mar 2020	Lesley Bairden, Chief Financial Officer - Full Review (no changes)	
2.1	Sep 2021	Lesley Bairden, Chief Financial Officer – Annual Review (no changes)	
2.2	Sep 2022	Lesley Bairden, Chief Financial Officer – Annual Review (no changes)	

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East Renfrewshire Integration Joint Board positively promotes the principles of sound corporate governance within all areas of the Integration Joint Board’s affairs. This Reserves Policy is a component of the Financial Regulations which are an essential component of the corporate governance of the Health & Social Care Partnership Integration Joint Board.

1. Background

- 1.1 To assist local authorities (and similar bodies) in developing a framework for reserves, CIPFA have issued guidance in the form of the *Local Authority Accounting Panel (LAAP) Bulletin 55 – Guidance Note on Local Authority Reserves and Balances*. This guidance outlines the framework for reserves, the purpose of reserves and some key issues to be considered when determining the appropriate level of reserves. As the East Renfrewshire Integration Joint Board has the same legal status as a local authority, i.e. a section 106 body under the Local Government (Scotland) Act 1973 Act, and is classified as a local government body for accounts purposes by the Office of National Statistics (ONS), it is able to hold reserves which should be accounted for in the financial accounts and records of the Integration Joint Board.
- 1.2 The purpose of a reserve policy is to:
- outline the legislative and regulatory framework underpinning the creation, use or assessment of the adequacy of reserves;
 - identify the principles to be employed by the Integration Joint Board in assessing the adequacy of the Integration Joint Board's reserves;
 - indicate how frequently the adequacy of the Integration Joint Board's balances and reserves will be reviewed; and
 - set out arrangements relating to the creation, amendment and use of reserves and balances.
- 1.3 In common with local authorities, the Integration Joint Board can have reserves within a usable category.

2. Statutory/Regulatory Framework for Reserves

Usable Reserves

- 2.1 Local Government bodies, which includes the Integration Joint Board for these purposes, may only hold usable reserves for which there is a statutory or regulatory power to do so. In Scotland, the legislative framework includes:

<i>Usable Reserve</i>	<i>Powers</i>
General Fund	Local Government Scotland Act 1973

2.2 For each reserve there should be a clear protocol setting out:

- the reason / purpose of the reserve;
- how and when the reserve can be used;
- procedures for the reserves management and control; and
- the review timescale to ensure continuing relevance and adequacy.

3. Operation of Reserves

3.1 Reserves are generally held to do three things:

- create a working balance to help cushion the impact of uneven cash flows and avoid unnecessary temporary borrowing – this forms part of general reserves;
- create a contingency to cushion the impact of unexpected events or emergencies – this also forms part of general reserves; and
- create a means of building up funds, often referred to as earmarked reserves, to meet known or predicted liabilities.

3.2 The balance of the reserves normally comprises of three elements:

- funds that are earmarked or set aside for specific purposes. In Scotland, under Local Government rules, the Integration Joint Board cannot have a separate Earmarked Reserve within the Balance Sheet, but can highlight elements of the General Reserve balance required for specific purposes. The identification of such funds can be highlighted from a number of sources:
 - future use of funds for a specific purpose, as agreed by the Integration Joint Board; or
 - commitments made under delegated authority by Chief Officer, which cannot be accrued at specific times (e.g. year end) due to not being in receipt of the service or goods;
- funds which are not earmarked for specific purposes, but are set aside to deal with unexpected events or emergencies; and
- funds held in excess of the target level of reserves and the identified earmarked sums. Reserves of this nature can be spent or earmarked at the discretion of the Integration Joint Board.

4. Role of the Chief Financial Officer

- 4.1 The Chief Financial Officer is responsible for advising on the targeted optimum levels of reserves the Integration Joint Board would aim to hold (the prudential target). The Integration Joint Board, based on this advice, should then approve the appropriate reserve strategy as part of the budget process.

5. Adequacy of Reserves

- 5.1 There is no guidance on the minimum level of reserves that should be held. In determining the prudential target, the Chief Financial Officer must take account of the strategic, operational and financial risks facing the Integration Joint Board over the medium term and the Integration Joint Board's overall approach to risk management.
- 5.2 In determining the prudential target, the Chief Financial Officer should consider the Integration Joint Board's Strategic Plan, the medium term financial outlook and the overall financial environment. Guidance also recommends that the Chief Financial Officer reviews any earmarked reserves as part of the annual budget process and development of the Strategic Plan.
- 5.3 In light of the size and scale of the Integration Joint Board's responsibilities, over the medium term it is proposed that a prudent level of general reserves will represent approximately 2% of net expenditure. This value of reserves must be reviewed annually as part of the Integration Joint Board Budget and Strategic Plan; and in light of the financial environment at that time. The level of other earmarked funds will be established as part of the annual financial accounting process.

6. Reporting Framework

- 6.1 The Chief Financial Officer has a fiduciary duty to ensure proper stewardship of public funds.
- 6.2 The level and utilisation of reserves will be formally approved by the Integration Joint Board based on the advice of the Chief Financial Officer. To enable the Integration Joint Board to reach a decision, the Chief Financial Officer should clearly state the factors that influenced this advice.

6.3 As part of the budget report the Chief Financial Officer should state:

- the current value of general reserves, the movement proposed during the year and the estimated year-end balance and the extent that balances are being used to fund recurrent expenditure;
- the adequacy of general reserves in light of the Integration Joint Board's Strategic Plan, the medium term financial outlook and the overall financial environment;
- an assessment of earmarked reserves and advice on appropriate levels and movements during the year and over the medium term; and
- if the reserves held are under the prudential target, that the Integration Joint Board should be considering actions to meet the target through their budget process.

7. Accounting and Disclosure

7.1 Expenditure should not be charged direct to any reserve. Any movement within Revenue Reserves is accounted for as an appropriation and is transparent. Entries within a reserve are specifically restricted to 'contributions to and from the revenue account' with expenditure charged to the service revenue account.



East Renfrewshire Integration Joint Board

Risk Management Policy and Strategy

(Version 2.1)

Document Title:	IJB Risk Policy & Strategy		
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1.1	09/10/2019	Full Review (see PAC Paper 27.11.2019)	
2.0	29/01/2020	Approved by IJB	
2.1	31/08/2022	Reviewed August 2022 – no changes	

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Policy – the risk management approach

East Renfrewshire Integration Joint Board is committed to a culture where its workforce is encouraged to develop new initiatives, improve performance and achieve goals safely, effectively and efficiently by appropriate application of good risk management practice.

In doing so the Integration Joint Board (IJB) aims to provide safe and effective care and treatment for patients and clients, and a safe environment for everyone working within the IJB and others who interact with the services delivered under the direction of the IJB.

The Integration Joint Board believes that appropriate application of good risk management will prevent or mitigate the effects of loss or harm and will increase success in the delivery of better clinical and financial outcomes, objectives, achievement of targets, and fewer unexpected problems.

The IJB purposefully seeks to promote an environment that is risk 'aware' and strives to place risk management information at the heart of key decisions. This means that the IJB can take an effective approach to managing risk in a way that both addresses significant challenges and enable positive outcomes.

Key benefits of effective risk management:

- appropriate, defensible, timeous and best value decisions are made;
- risk 'aware' not risk 'averse' decisions are based on a balanced appraisal of risk and enable acceptance of certain risks in order to achieve a particular goal or reward;
- high achievement of objectives and targets;
- high levels of morale and productivity;
- better use and prioritisation of resources;
- high levels of user experience/ satisfaction with a consequent reduction in adverse incidents, claims and/ or litigation; and
- a positive reputation established for the Joint Board.

In normal circumstances the IJB's appetite/tolerance for risk is as follows:

Risk matrix with score and tolerance ratings

Risk Score	Overall rating
11-16	High /Red/Unacceptable
5-10	Medium /Yellow/Tolerable
1-4	Low/Green/Acceptable

The table below shows risk levels considering Likelihood and Severity

Likelihood	Score								
Certain	4	Low (Green)	Medium (Yellow)	High (Red)	High (Red)				
Likely / probable	3	Low (Green)	Medium (Yellow)	Medium (Yellow)	High (Red)				
Possible/could happen	2	Low (Green)	Low (Green)	Medium (Yellow)	Medium (Yellow)				
Unlikely	1	Low (Green)	Low (Green)	Low (Green)	Low (Green)				
Impact		Minor	1	Significant	2	Serious	3	Major	4

The IJB promotes the pursuit of opportunities that will benefit the delivery of the Strategic Plan. Opportunity-related risk must be carefully evaluated in the context of the anticipated benefits for patients, clients and the IJB.

The IJB will receive assurance reports (internal and external) not only on the adequacy but also the effectiveness of its risk management arrangements and will consequently value the contribution that risk management makes to the wider governance arrangements of the IJB.

The IJB, through the following risk management strategy, has established a Risk Management Framework, (which covers risk policy, procedure, process, systems, risk management roles and responsibilities).

Strategy – implementing the policy

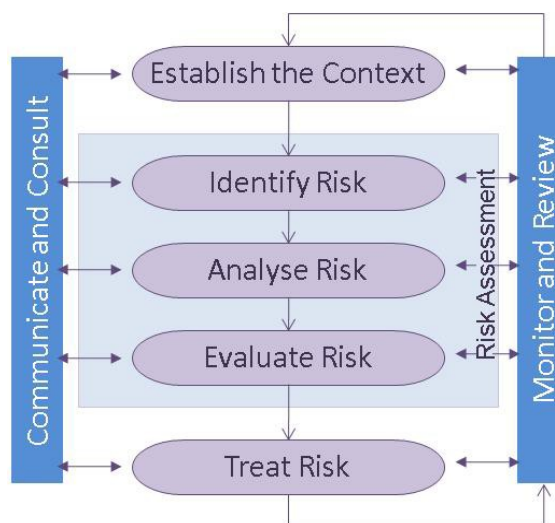
1. Introduction

- 1.1 The primary objectives of this strategy will be to:
- promote awareness of risk and define responsibility for managing risk within the Integration Joint Board;
 - establish communication and sharing of risk information through all areas of the Integration Joint Board;
 - initiate measures to reduce the Integration Joint Board's exposure to risk and potential loss; and,
 - establish standards and principles for the efficient management of risk, including regular monitoring, reporting and review.
- 1.2 This strategy takes a positive and holistic approach to risk management. The scope applies to all risks, whether relating to clinical and care environment, employee safety and wellbeing, business risk, opportunities or threats.
- 1.3 **Strategic risks** represent the potential for the Integration Joint Board (IJB) to achieve (opportunity) or fail to meet (threat) it's desired outcomes and objectives as set out within the Strategic Plan, and typically these risks require strategic leadership in the development of activities and application of controls to manage the risk. The Strategic Risks Register will be shared with East Renfrewshire Council and NHS GGC. IJB risks may be noted on those organisations' Strategic Risk Register if deemed appropriate.
- 1.4 **Operational risks** represent the potential for impact (opportunity or threat) within or arising from the activities of an individual service area or team operating within the scope of the Joint Board's activities. Parent bodies will retain responsibility for managing operational risks as operational risks will be more 'front-line' in nature and the development of activities and controls to respond to these risks can be led by local managers and team leaders. Where a number of operational risks impact across multiple service areas or because of interdependencies, require more strategic leadership, then these can be proposed for escalation to 'strategic risk' status for the IJB.
- 1.5 All risks will be analysed consistently with an evaluation of risk as being as follows; High/Red/Unacceptable, Medium/Yellow/Tolerable and Low/Green/Acceptable. Risks identified as High/Red/Unacceptable will be subject to an exception report presented to the Performance and Audit Committee.
- 1.6 This document represents the risk management framework to be implemented across the IJB and will contribute to the IJB's wider governance arrangements.

2. Risk Management Process

2.1 Risk Management is about the culture, processes and structures that are directed towards realising potential opportunities whilst managing adverse effects¹. It is pro-active in understanding risk and uncertainty, it learns and builds upon existing good practice and is a continually evolving process that has an important role in ensuring that defensible and beneficial decisions are made.

2.2 The IJB embeds risk management practice by consistent application of the risk management process shown in the diagram on the right, across all areas of service delivery and business activities.



3. Application of good risk management across the IJB activities

- 3.1 Standard procedures (3.2 – 3.10) will be implemented across all areas of activity that are under the direction of the IJB in order to achieve consistent and effective implementation of good risk management.
- 3.2 Full implementation of the risk management process. This means that risk management information should (wherever possible) be used to guide major decisions in the same way that cost and benefit analysis is used.
- 3.3 Identification of risk using standard methodologies, and involving subject experts who have knowledge and experience of the activity or process under consideration.
- 3.4 Categorisation of risk under the headings below:
- Strategic Risks: such as risks that may arise from political, economical, social, technological, legislative and environmental factors that impact on the delivery of the Strategic Plan outcomes.
 - Operational Risks: such as risks that may arise from or impact on clinical care and treatment, social care and treatment, customer service, employee health, safety and wellbeing, business continuity/supply chain, information security and asset management.
- 3.5 Appropriate ownership of risk. Specific risks will be owned by/assigned to whoever is best placed to manage the risk and oversee the development of any new risk controls required.

¹ Australia/ New Zealand Risk Management Standard, AS/NZS 4360: 2004

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- 3.6 Consistent application of the agreed risk matrix to analyse risk in terms of likelihood of occurrence and potential impact, taking into account the effectiveness of risk control measures in place. The risk matrix and guide to terms and scoring to be used is detailed in Appendix 1.
- 3.7 Consistent response to risk that is proportionate to the level of risk. This means that risk may be terminated; transferred elsewhere (i.e. to another partner or third party); tolerated as it is; or treated with cost effective measures to bring it to a level where it is acceptable or tolerable for the IJB in keeping with its appetite/ tolerance for risk. In the case of opportunities, the IJB may 'take' an informed risk in terms of tolerating it if the opportunity is judged to be (1) worthwhile pursuing and (2) the IJB is confident in it's ability to achieve the benefits and manage/ contain the associated risk.
- 3.8 Implementation and maintenance of risk registers as a means of collating risk information in a consistent format allowing comparison of risk evaluations, informed decision-making in relation to prioritising resources, and ease of access to information for risk reporting.
- 3.9 Reporting of strategic risks and key operational risks to the IJB on an annual basis and to the PAC on a quarterly basis. In addition ERC Strategic Risk Registers which may contain IJB risks, are reported to East Renfrewshire Council's Audit and Scutiny Committee twice a year and Cabinet once a year. Likewise high level NHS Greater Glasgow and Clyde risks from the Strategic Risk Register are reported to the Board every quarter.
- 3.10 Operation of a procedure for movement of risks between strategic and operational risk registers will be facilitated by the Senior Management Team.
- 3.11 Routine reporting of risk information within and across teams and a commitment to a 'lessons learned' culture that seeks to learn from both good and poor experience in order to replicate good practice and reduce adverse events and associated complaints and claims.

Realising the risk management vision

4. Risk management vision and measures of success

Vision Statement:

“To ensure that risk management is clearly and consistently integrated in the culture of East Renfrewshire Integration Joint Board.”

- 4.1 In working towards this risk management vision, the IJB aims to demonstrate a level of maturity where risk management is embedded and integrated in the decision making and operations of the IJB.
- 4.2 The measures of success for this vision will be:
- *successful delivery of the strategic plan, outcomes and targets*
 - *good financial outcomes for the Integration Joint Board*
 - *successful outcomes from external scrutiny*
 - *fewer unexpected/ unanticipated problems*
 - *fewer incidents/ accidents/ complaints*
 - *fewer claims/ less litigation*

Risk leadership and accountability

5. Governance, roles and responsibilities

Integration Joint Board

- 5.1 Members of the Integration Joint Board are responsible for:
- oversight of the IJB’s risk management arrangements;
 - receipt and review of reports on strategic risks and any key operational risks that require to be brought to the IJB’s attention; and,
 - ensuring awareness of any risks linked to recommendations from the Chief Officer concerning new priorities/ policies.

Chief Officer

- 5.2 The Chief Officer has overall accountability for the IJB’s risk management framework, ensuring that suitable and effective arrangements are in place to manage the risks relating to the functions within the scope of the IJB. The Chief Officer will keep the Chief Executives of the IJB’s partner bodies informed of any significant existing or emerging risks that could seriously impact the IJB’s ability to deliver the outcomes of the Strategic Plan or the reputation of the IJB.

Chief Financial Officer

- 5.3 The Chief Financial Officer will be responsible for promoting arrangements to identify and manage key business risks, risk mitigation and insurance.

Senior Management Team

- 5.4 Members of the Senior Management Team are responsible (either collectively, or by nominating a specific member of the team) for:
- supporting the Chief Officer and Chief Financial Officer in fulfilling their risk management responsibilities;
 - arranging professional risk management support, guidance and training from partner bodies;
 - receipt and review of regular risk reports on strategic, shared and key operational risks and escalating any matters of concern to the IJB; and,
 - ensuring that the standard procedures set out in section three of this strategy are actively promoted across their teams and within their areas of responsibility.

Individual Risk Owners

- 5.5 It is the responsibility of each risk owner to ensure that:
- risks assigned to them are analysed in keeping with the agreed risk matrix;
 - data on which risk evaluations are based are robust and reliable so far as possible;
 - risks are defined clearly to make explicit the scope of the challenge, opportunity or hazard and the consequences that may arise;
 - risks are reviewed not only in terms of likelihood and impact of occurrence, but taking account of any changes in context that may affect the risk;
 - controls that are in place to manage the risk are proportionate to the context and level of risk.
 - Service Managers have a responsibility to report any changes to their service's Operational Risk Register to the Directorate Management Team.

All persons working under the direction of the IJB

- 5.6 Risk management should be integrated into daily activities with everyone involved in identifying current and potential risks where they work. Individuals have a responsibility to make every effort to be aware of situations which place them or others at risk, report identified hazards and implement safe working practices developed within their service areas. This approach requires everyone to:
- understand the risks that relate to their roles and activities;
 - understand how their actions relate to their own, their patient's, their client's and public safety;
 - understand their accountability for particular risks and how they can manage them;
 - understand the importance of flagging up incidents and/ or near misses to allow lessons to be learned and contribute to ongoing improvement of risk management arrangements; and,
 - understand that good risk management is a key part of the IJB's culture.

Partner Bodies

- 5.7 It is the responsibility of relevant specialists from the partner bodies (such as internal audit, external audit, clinical and non clinical risk managers and health and safety advisers) to attend meetings as necessary to consider the implications of risks and provide relevant advice. It is the responsibility of the partner bodies to ensure they routinely seek to identify any residual risks and liabilities they retain in relation to the activities under the direction of the IJB.

Senior Information Risk Owner

- 5.8 Responsibility for this specific role will remain with the individual partner bodies.

Resourcing risk management

6. Resourcing the risk management framework

- 6.1 Much of the work on developing and leading the ongoing implementation of the risk management framework for the IJB will be resourced through the Senior Management Team's arrangements (referred to in 5.4).
- 6.2 Wherever possible the IJB will ensure that any related risk management training and education costs will be kept to a minimum, with the majority of risk-related courses/ training being delivered through resources already available to the IJB (the partner body risk managers/ risk management specialists).

7. Resourcing those responsible for managing specific risks

- 7.1 Where risks impact on a specific partner body and new risk control measures require to be developed and funded, it is expected that the costs will be borne by that partner organisation.
- 7.2 Financial decisions in respect of the IJB's risk management arrangements will rest with the Chief Financial Officer.

Training, learning and development

8. Risk management training and development opportunities

- 8.1 To implement this policy and strategy effectively, it is essential for people to have the competence and capacity for managing risk and handling risk judgements with confidence, to focus on learning from events and past experience in relation to what has worked well or could have been managed better, and to focus on identifying malfunctioning 'systems' rather than people.

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- 8.2 Training is important and is essential in embedding a positive risk management culture across all activities under the direction of the IJB and in developing risk management maturity. The Senior Management Team will regularly review risk management training and development needs and source the relevant training and development opportunities required (referred to in 5.4).

Monitoring activity and performance

9. Monitoring risk management activity

- 9.1 The IJB operates in a dynamic and challenging environment. A suitable system is required to ensure risks are monitored for change in context and scoring so that appropriate response is made.
- 9.2 Monitoring will include review of the IJB's risk profile at Senior Management Team level.
- 9.3 All strategic and shared risks and key operational risks will be considered by the Senior Management team on a quarterly basis.
- 9.4 It is expected that partner bodies will use IJB risk reports to keep their own organisations updated on the management of the risks, highlighting any IJB risks that might impact on the partner organisation.

10. Monitoring risk management performance

- 10.1 Measuring, managing and monitoring risk management performance is key to the effective delivery of key objectives.
- 10.2 Key risk indicators (KRIs) will be linked where appropriate to specific risks to provide assurance on the performance of certain control measures. For example, specific clinical incident data can provide assurance that risks associated with the delivery of clinical care are controlled, or budget monitoring PIs (Performance Indicators) can provide assurance that key financial risks are under control.
- 10.3 The performance data linked to the Strategic Plan will also inform the identification of new risks or highlight where existing risks require more attention.
- 10.4 Reviewing the IJB's risk management arrangements on a regular basis will also constitute a PDSA (Plan/Do/Study/Act) review cycle that will shape future risk management priorities and activities of the IJB, inform subsequent revisions of this policy and strategy and drive continuous improvement in risk management across the IJB.

Communicating risk management

11. Communicating, consulting on and reviewing the risk management framework

- 11.1 Effective communication of risk management information across the IJB is essential to developing a consistent and effective approach to risk management.
- 11.2 Copies of this policy and strategy will be widely circulated via the Senior Management Team and will form the basis of any risk management training arranged by the IJB.
- 11.3 The Policy and Strategy (Version 1.0) was first approved by the Integration Joint Board at its meeting of 17 August 2016.
- 11.4 Formal reviews of the policy will be undertaken biannually. In addition regular reviews will take place to ensure that it reflects current standards and best practice in risk management and fully reflects the IJB's business environment.

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Appendix 1: Risk Matrix

Likelihood	Score								
Certain	4	Low		Medium		High		High	
Likely / probable	3	Low		Medium		Medium		High	
Possible/could happen	2	Low		Low		Medium		Medium	
Unlikely	1	Low		Low		Low		Low	
Impact		Minor	1	Significant	2	Serious	3	Major	4

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Appendix 2: Guide to terms and scoring

Risk Criteria for Impact

Factor	Score	Effect on Service	Embarrassment/reputation	Personal Safety	Personal privacy infringement	Failure to provide statutory duties/meet legal obligations	Financial	Effect on Project Objectives
Major	4	Major loss of service, including several important areas of service and /or for a protracted period. Service Disruption 5+ Days	Adverse and persistent national media coverage Adverse central government response, involving (threat of) removal of delegated powers Officer(s) and/or Members forced to resign	Death of an individual or several people	All personal details compromised/ revealed	Litigation/claims/fines from Departmental £250k+ Corporate 500k+	Costing over £500,000 Up to 75% of Budget	Complete failure of project/ extreme delay – 3 months or more
Serious	3	Complete loss of an important service area for a short period Major effect to services in one or more areas for a period of weeks Service Disruption 3-5 Days	Adverse publicity in professional/municipal press, affecting perception/standing in professional/local government community Adverse local publicity of a major and persistent nature	Major injury to an individual or several people	Many individual's personal details compromised/ revealed	Litigation/claims/fines from Departmental £50k to £125k Corporate £100k to £250k	Costing between £50,000 and £500,000 Up to 50% of Budget	Significant impact on project or most of expected benefits fail/ major delay – 2-3 months
Significant	2	Major effect to an important service area for a short period Adverse effect to services in one or more areas for a period of weeks Service Disruption 2-3 Days	Adverse local publicity /local public opinion aware Statutory prosecution of a non-serious nature	Severe injury to an individual or several people	Some individual's personal details compromised/ revealed	Litigation/claims/fines from Departmental £25k to £50k Corporate £50k to £100k	Costing between £5,000 and £50,000 Up to 25% of Budget	Adverse effect on project/ significant slippage – 3 weeks–2 months
Minor	1	Brief disruption of important service area Significant effect to non-crucial service area Service Disruption 1 Day	Contained within section/unit or Directorate Complaint from individual/small group, of arguable merit	Minor injury or discomfort to an individual or several people	Isolated individual's personal details compromised/ revealed	Litigation/claims/fines from Departmental £12k to £25k Corporate £25k to £50k	Costing less than £5,000 Up to 10% of Budget	Minimal impact to project/ slight delay less than 2 weeks

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Risk Criteria for Likelihood

Factor	Score	Threats - Description	Indicators
Certain	4	More than 75% chance of occurrence	Regular occurrence Circumstances frequently encountered – daily/weekly/monthly
Likely	3	40% - 75% chance of occurrence	Likely to happen at some point in the next 1-2 years Circumstances encountered a few times per year.
Could happen	2	10% - 40% chance of occurrence	Only likely to happen 3 or more years
Unlikely	1	Less than 10% chance of occurrence	Has rarely happened/ never before

East Renfrewshire Integration Joint Board

Freedom of Information Policy

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2.0	Aug 2022	Minor changes to wording and added contact details (2.1, 2.2, 3.3, 4.1, 5.2, 6.2, 8.1) (PG)	

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- 3. Responsibilities**
- 4. Policy Statement**
- 5. Enquiries**
- 6. Appeals**
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- 8. Review**

1 Introduction

1.1 The Freedom of Information (Scotland) Act 2002 (“the Act”) imposes a number of obligations on Scottish public authorities including East Renfrewshire Integration Joint Board. The Act gives a general right of access to recorded information held by public authorities, subject to certain exemptions. The Act also imposes additional responsibilities:-

(a) to produce a Publication Scheme which is subject to approval by the Scottish Information Commissioner. Publication schemes are high level, strategic documents in which a public authority makes binding commitments to make information available to the general public. Such schemes:-

- provide clear evidence to the public that an authority is meeting its obligations under the Act to be accessible, open & transparent;
- enable the public to see what information is already published, and to access it without having to make a formal request for information;
- give employees clear guidance about the information that they can and should give out to the public so they can respond to information requests efficiently;
- help reinforce leadership messages about openness and accountability to staff at all levels in the organisation;
- are to be easily accessible and designed to be easy to understand and to use by everyone (including those with no web access).

(b) to respond to requests (which must be in writing or some other permanent form) made by anyone for information held by the authority within set timescales (normally 20 working days) regardless of when it was created, by whom, or the format in which it is now recorded.

(c) to advise an applicant if information is not held.

(d) to specify within the terms of exemptions set out in the Act if the authority refuses to release the requested information.

(e) to charge for the provision of information only in accordance with regulations made under the Act and to decline to provide information if the cost of doing so exceeds a specified level.

(f) to make applicants aware of their right to seek a review of any decision on a request for information and of the right to pursue an appeal to the Scottish Information Commissioner if dissatisfied with the decision of the authority.

(g) to provide advice and assistance to applicants seeking information.

2 Scope

- 2.1 This policy applies specifically to recorded information held by the Integration Joint Board.
- 2.2 Requests for information held by our partners; East Renfrewshire Council and NHS Greater Glasgow and Clyde are subject to their own FOI policies.
- 2.3 The Health and Social Care Partnership (HSCP) will ensure compliance with the IJB Freedom of Information policy by developing a range of procedures and guidelines. The key documents will be:
- information request procedures;
 - a comprehensive retention schedule;
 - information management guidelines; and
 - a publication scheme;
- 2.2 This Policy applies to all NHS and Council employees working within the HSCP and to IJB members.
- 2.4 The Policy will be supported by more detailed guidance on our obligations under ***freedom of information legislation***. This guidance is produced by our partner organisations.

3 Responsibilities

- 3.1 The **IJB** has a statutory responsibility to make information available in accordance with ***freedom of information legislation***. Operationally this role will be carried out by the HSCP.
- 3.2 **The Chief Officer** is ultimately responsible for IJB compliance with relevant statutory provisions.
- 3.3 **The Governance and Compliance Officer** has responsibility for advising on the application of ***freedom of information legislation*** and for ensuring that the IJB meets its obligations under legislation.
- 3.4 **The Heads of Service and Chief Financial Officer** are responsible for quality assuring responses to information requests and for ensuring that freedom of information requests received within their services receive appropriate and timely responses from their staff consistent with the legislation.
- 3.5 **Managers** are responsible for ensuring staff under their direction and control are aware of the freedom of information policies, procedures and guidance laid down by IJB and for ensuring that those staff understand and apply appropriately those policies, procedures and guidance in carrying out their day to day work.

- 3.6 **All staff** must have a general understanding of ***freedom of information legislation*** and know where to refer any issues on which they require guidance.

4. Policy Statement

- 4.1 The IJB is committed to being open and honest in the conduct of its operations and in complying fully with the Freedom of Information (Scotland) Act. To this end the IJB will ensure:

- Compliance with the relevant Scottish Ministers Codes of Practice on ***Freedom of Information legislation*** and to related guidance issued by the Scottish Information Commissioner;
- a significant amount of routinely published information about the IJB is made available to the public as a matter of course through our Publication Scheme. This scheme will be regularly reviewed and updated.
- requests for information not included in the Publication Scheme will be processed wherever possible in accordance with our statutory obligations;
- assistance is provided to applicants seeking information;
- staff are aware of the need to be able to demonstrate the steps they have taken to identify if the IJB holds information sought by any individual;
- appropriate training and information is provided to staff at all levels within the organisation of their obligations and how they can obtain assistance in ensuring they meet these;
- staff are made aware that it is an offence under the Act to alter, deface, block, erase, destroy or conceal information with the intent of preventing disclosure.
- that personal data as defined in the Data Protection Act 1998 is held securely and is not inappropriately disclosed in response to a request for information under ***freedom of information legislation***.

5. Enquiries

- 5.1 The IJB will be responsible for dealing with enquires which relate wholly or substantially to information which it holds.
- 5.2 Enquiries will be recorded and managed through East Renfrewshire Council's customer management system.

6 Appeals

- 6.1 If an applicant is unhappy with the outcome of a request for any reason they have the right to ask the IJB to review its response. The IJB will have a further 20 working days to reconsider the request. If, after the review, the requester is still unhappy, they can appeal to the Commissioner.
- 6.2 Requests for review should be made in writing to the IJB Chief Officer at East Renfrewshire Health and Care Centre, Drumby Crescent, Clarkston, G76 7HN or by email to hscp-foi@eastrenfrewshire.gov.uk

7. Communication and Training

- 7.1 All staff will have a general awareness of the IJB and our partner organisation's obligations under ***freedom of information legislation***. We will use on-line training packages to form part of the mandatory training for new members of staff. Specific training will be provided on demand to specific categories of staff or staff groups.
- 7.2 Guidance on processing requests, including the use of exemptions and fee notices will be available in the first instance from the HSCP FOI practitioner.

8. Review

- 8.1 This Policy will be reviewed every two years.

East Renfrewshire Integration Joint Board

Publication Scheme

Version 2

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1.0	Nov 2015	New policy approved by IJB (Stuart McMinigal)	
2.0	Aug 2022	Refreshed contacts and links to available information	

Introduction

The Freedom of Information (Scotland) Act 2002 (FOISA) requires Scottish public authorities to adopt and maintain a publication scheme. Authorities are under a legal obligation to:

- (i) publish the classes of information that they make routinely available
- (ii) tell the public how to access the information they publish and whether information is available free of charge or on payment.. This is also known as a 'Guide to Information'

Individuals can therefore ask the IJB to provide any information that we hold and, if it is both legal and practical to do so, we will release it.

For the purposes of this Scheme, for information to be "published", it must be:

- (i) already produced and prepared and
- (ii) available to anyone to access easily without having to make a request for it.

Guide to Information

The purpose of this guide to information is to:

- allow the public to see what information is available and what is not available in relation to each class;
- state what charges may be applied (for most information, there is no charge);
- explain how to find the information easily;
- provide contact details for enquiries and to get help with access to the information; and
- explain how to request information that has not been published.

The Guidance is split into the following six sections:

- availability and formats;
- exempt information;
- copyright;
- charges;
- contact details; and
- the classes of information that we publish.

Availability and formats

Much of the information will be available on our website. We offer alternative arrangements for people who do not wish to, or who cannot, access the information either online or by inspection at our premises. For example, we can usually arrange to send out information in paper copy or an alternative electronic format can be requested (although there may be a charge for this).

Once published through the Guide to Information, the information should be available for the current and previous two financial years. Where information has been updated or superseded, only the current version needs to be made available (previous versions may be requested from the authority under section 1(1) of FOISA). 26.

Exempt information

We will publish the information we hold that falls within the classes of information below. If a document contains information that is exempt under Scotland's freedom of information laws (for example sensitive personal data or a trade secret), we will remove or black out the information before publication and explain why.

Copyright

Where the IJB holds the copyright in its published information, the information may be copied or reproduced without formal permission, provided that:

- it is copied or reproduced accurately;
- it is not used in a misleading context; and
- the source of the material is identified.

Where the IJB does not hold the copyright in information we publish, we will make this clear.

Charges

There is no charge to view information on our website or at our premises.

We may charge for providing information to you, but will never charge more than it actually costs us to do so. We will always tell you what the cost is before providing the information to you.

For photocopying, we will charge a standard rate of 10p per A4 side of paper (black and white copy) and 30p per A4 side of paper (colour copy).

Information provided on removable storage devices will be charged at £1.00 per computer disc.

Postage costs will be recharged at the rate we pay to send the information to you.

If providing copies of any pre-printed publications, we will charge no more than the cost per copy of the total print run.

We do not pass any other costs on to you in relation to our published information.

Information Not Published Under the Publication Scheme

There will be no charge for information requests which cost us £100 or less to produce.

Where information costs between £100 and £600 to provide to you, you may be asked to pay 10% of the cost. That is, if you were to ask for information that cost us £600 to provide, you would be asked to pay £50. That is calculated on the basis of a waiver for the first £100 and 10% of the remaining £500.

We are not obliged to respond to requests for non-environmental information which will cost us over £600 to process.

Where environmental information costs over £600 to provide to you, we may ask you to pay the additional cost over that amount in full. For example, if you were to ask us for information that costs us £800 to provide, you may be asked to pay £250. This fee would be calculated on the basis of a waiver for the first £100 costs of providing the information, 10% of the next £500 costs, and full cost recovery for cost over £600 (in this example, £200).

In calculating any fee, staff time will be calculated at actual cost per staff member hourly salary rate to a maximum of £15 per person per hour.

We do not charge for the time to determine whether we hold the information requested, nor for the time it takes to decide whether the information can be released. Charges may be made for locating, retrieving and providing information to you.

In the event that we decide to impose a charge we will issue you with notification of the charge (a fees notice) and how it has been calculated. You will have three months from the date of issue of the fees notice in which to decide whether to pay the charge. The information will be provided to you on payment of the charge. If you decide not to proceed with the request there will be no charge to you.

Contact details and how to request information not included in this guide

You can contact us for assistance with any aspect of this information guide and if you want to ask us for information that is not included in the guide:

Freedom of Information
East Renfrewshire Integration Joint Board
Eastwood Health and Care Centre,
Drumby Crescent,
Clarkston, G76 7HN

Email: hscp-foi@eastrenfrewshire.gov.uk

Tel 0141 451 0746

We will also advise you how to ask for information that we do not publish or how to complain if you are dissatisfied with any aspect of the publication scheme. If you

wish to make a request for information not contained in the publication scheme please contact us at hscp-foi@eastrenfrewshire.gov.uk

The Classes of Information

We publish information that we hold within the following classes. Once information is published under a class we will continue to make it available for the current and previous two financial years.

Where information has been updated or superseded, only the current version will be available. If you would like to see previous versions, you may make a request to us for that information.

The classes are:

- Class 1: About the IJB
 - Information about the authority, who we are, where to find us, how to contact us, how we are managed and our external relations.
- Class 2: How we deliver our functions and services
 - Information about our work, our strategies and policies for delivering our functions and services and information for our service users.
- Class 3: How the IJB takes decisions and what it has decided
 - Information about the decisions we take, how we make decisions and how we involve others.
- Class 4: What the IJB spends and how it spends it
 - Information about our strategy for, and management of, financial resources (in sufficient detail to explain how we plan to spend public money and what has actually been spent).
- Class 5: How the IJB manages its human, physical and information services
 - Information about how we manage our human, physical and information resources.
- Class 6: How the IJB procures goods and services from external providers
 - Information about how we procure goods and services and our contracts with external providers
- Class 7: How the IJB is performing
 - Information about how we perform as an organisation and how well we deliver our functions and services.
- Class 8: Our commercial publications - we do not hold or publish any information under this class
 - Information packaged and made available for sale on a commercial basis and sold at market value through a retail outlet e.g., bookshop, museum or research journal.
- Class 9: Our open data
 - The open data we make available as described by the Scottish Government's Open Data Strategy and Resource Pack, available under an open licence.

The Classes of Information – East Renfrewshire Integration Joint Board

	Class	Description
1	About The IJB	Information about the authority, who we are, where to find us, how to contact us, how we are managed and our external relations.
1.1	who we are	The background as to how and why The IJB was established is on our website: http://www.eastrenfrewshire.gov.uk/health-and-social-care-integration
1.2	how to contact us, where to find us,	If you would like more information about the IJB or health and social care integration or you would like to share your thoughts with us then please contact us: By email: hscp-foi@eastrenfrewshire.gov.uk By telephone: 0141 451 0746 Address: East Renfrewshire Integration Joint Board, Eastwood Health and Care Centre, Drumby Crescent, Clarkston, G76 7HN
1.3	how we are managed and our external relations	The Integration Joint Board became legally responsible for the effective delivery of a large range of services within health and social care in April 2016. The membership of the IJB is largely prescribed by the Scottish Government in terms of numbers and the organisations that they represent. The members outlined below are the 8 voting members that make up the IJB. Additional 12 non-voting members are currently in the place. Membership of the IJB can be found here Code of Conduct Register of interests for all members can be found online .
2	How we deliver our functions and services	How the IJB operates is set out in the Integration Scheme . Standing Orders
2.1	Our strategies and policies	Strategic Plan Financial Regulations Reserves Policy IJB Risk Policy and Strategy IJB FOI Policy IJB Records Management Plan IJB Complaints Handling Policy
2.2	Information for service users:	Information for our service users can be found on our partner websites
3	How we take decisions and what we have decided	How we make decisions will be set out in the Integration Scheme, see 2 above. Our decisions, including the minutes of the Board Meetings and sub-committees, will be published on our web pages,

		which are here .
4	What we spend and how we spend it	<p>The IJB has a statutory duty to provide an Annual Report and Accounts. Our latest audited annual report and accounts is available here</p> <p>Regular revenue monitoring reports are also produced and are available within the IJB papers section of our website</p> <p>Financial Regulations</p> <p>Reserves Policy</p>
5	How we manage our human, physical and information resources	
5.1	Our human resources	The IJB does not employ staff directly. The staff who provide the services will either be employed by East Renfrewshire Council or NHS Greater Glasgow and Clyde. Information about their terms and conditions of staff are available on the websites of the Council and the NHS:
5.2	Our information resources	<p>IJB Records Management Plan</p> <p>IJB FOI Policy</p> <p>The services commissioned by the IJB will be delivered by the Council and the NHS and both organisations have their own Information Governance Policies and procedures.</p> <p>The Council has Records Management, Data Protection and Freedom of Information policies and procedures. Freedom of Information requests for services delivered by the Council can be sent via the Council using the contact details on the Council website.</p> <p>The NHS has Information Governance, Data Protection and Freedom of Information policies and procedures. Freedom of Information requests for services delivered by the NHS can be sent using the contact details on the NHS website.</p>
5.3	Our physical resources	The physical resources used by those providing services that the IJB has commissioned will be owned by the Council or the NHS who will each follow their own procedures.
6	How we procure goods and services from external providers	Goods and services will be procured using both NHSGGC and East Renfrewshire Council procurement processes and procedures
7	How we are performing	<p>IJB Annual Performance Report</p> <p>Audited Annual Report and Accounts</p> <p>Audit updates and quarterly performance reports are also provided to our Performance and Audit Committee</p> <p>Complaints Information</p>

8	Our commercial publications	The IJB does not have any commercial publication.
	Open data	The IJB does not hold any information in this area



**EAST RENFREWSHIRE
HEALTH AND SOCIAL CARE
PARTNERSHIP**



East Renfrewshire Integration Joint Board

Records Management Plan

Version 2 – July 2022

This plan is fully endorsed by the Chief Officer of East Renfrewshire Integration Joint Board who will ensure compliance with the Public Records (Scotland) Act 2011 through the corporate implementation of this Records Management Plan.

Document Control Information

Revision	Date	Revision Description
1.0	22/10/2018	Draft circulated for comment
1.1	20/01/2019	No changes, approved by IJB Jan 2019
2	10/10/2022	Review – Elements 15 and 16 added in line with changes to Council's Records Management Plan. Links updated Approved by IJB Aug 2022

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Records Management Plan

Summary

This Records Management Plan (RMP) conforms to the model Records Management Plan as set out by the Keeper of the Records of Scotland, in accordance with the provisions of the Public Records (Scotland) Act 2011. This RMP covers East Renfrewshire Integration Joint Board, referred to as 'the IJB' throughout.

The RMP outlines and evidences the IJB's policies and procedures regarding the creation, use, management and disposal of the public records it creates and uses in pursuance of its statutory functions.

In line with the model plan, the IJB's RMP addresses 14 elements:

Element 1: Senior management responsibility

Element 2: Records manager responsibility

Element 3: Records management policy statement

Element 4: Business classification

Element 5: Retention schedule

Element 6: Destruction arrangements

Element 7: Archiving and transfer arrangements

Element 8: Information security

Element 9: Data protection

Element 10: Business continuity and vital records

Element 11: Audit trail

Element 12: Competency framework for records management staff

Element 13: Assessment and review

Element 14: Shared Information

Element 15: Third party information

Element 16: Guidance

The IJB is fully committed to compliance with the requirements of the Public Records (Scotland) Act, 2014 which came into force on the 1st January 2016. The IJB will therefore follow procedures that aim to ensure that all of its officers employees of constituent authorities supporting its work, contractors, agents, consultants and other trusted third parties who create public records on behalf of the authority, or manage public records held by the authority, are fully aware of and abide by this plan's arrangements.

About the Public Records (Scotland) Act 2011

The Public Records (Scotland) Act 2011 (the act) came fully into force in January 2013. The Act requires names public authorities to submit a Records Management Plan (RMP) to be agreed by the Keeper of the Records of Scotland. Integration Joint Boards were added to the Act's schedule by the Public Bodies (Joint Working) (Scotland) Act 2014. This document is the Records Management Plan of Midlothian Integration Joint Board.

This RMP sets out and evidences proper arrangements for the management of the IJB's public records and is submitted for agreement by the Keeper of the Records of Scotland under Section 1 of the Public Records (Scotland) Act 2011. It will be reviewed by the IJB annually.

<http://www.nas.gov.uk/recordKeeping/publicRecordsActIntroduction.asp>

<http://www.scottish.parliament.uk/parliamentarybusiness/Bills/22476.aspx>

About Integration Joint Boards

The integration of health and social care is part of the Scottish Government's programme of reform to improve care and support for those who use health and social care services. It is one of the Scottish Government's top priorities.

The Public Bodies (Joint Working) (Scotland) Act provides the legislative framework for the integration of health and social care services in Scotland.

It will put in place:

Nationally agreed outcomes, which will apply across health and social care, in service planning by Integration Joint Boards and service delivery by NHS Boards and Local Authorities.

A requirement on NHS Boards and Local Authorities to integrate health and social care budgets.

A requirement on Partnerships to strengthen the role of clinicians and care professionals, along with the third and independent sectors, in the planning and delivery of services.

About East Renfrewshire Integration Joint Board

The East Renfrewshire Integration Joint Board was established under the Public Bodies (Joint Working) Scotland Act 2014.

The order to establish the IJB was laid in the Scottish Parliament on Friday 29 May and came in to force on Saturday 27th June 2015.

From 1st April 2016 East Renfrewshire IJB became responsible for the planning and oversight of delivery of health and social care functions delegated to it by NHS Greater Glasgow and Clyde and East Renfrewshire Council.

These include children and families, adult social care services, criminal justice services and adult health community. The area covered by East Renfrewshire IJB is coterminous with the East Renfrewshire Local Authority.

The IJB operates as a body corporate (a separate legal entity), acting independently of NHS Greater Glasgow and Clyde and East Renfrewshire Council. The IJB consists of eight voting members appointed in equal number by NHS Greater Glasgow and Clyde and East Renfrewshire Council, with a number of non-voting representative members who are drawn from the third sector, independent sector, staff, carers and service users. The IJB is advised by a number of professionals including the Chief Officer, Clinical Director, Chief Nurse and Chief Social Work Officer.

The IJB's key functions are to:

- Prepare a Plan for integrated functions that is in accordance with national and local outcomes and integration principles
- Allocate the integrated budget in accordance with the Plan
- Oversee the delivery of services that are within the scope of the Partnership.

Information underpins the IJB's over-arching strategic objective and helps it meet its strategic outcomes. Its information supports it to:

- Demonstrate accountability.
- Provide evidence of actions and decisions.
- Assist with the smooth running of business.
- Help build organisational knowledge.
- Good recordkeeping practices lead to greater productivity as less time is taken to locate information. Well managed records will help the IJB make:
 - Better decisions based on complete information.
 - Smarter and smoother work practices.
 - Consistent and collaborative workgroup practices.
 - Better resource management.
 - Support for research and development.
 - Preservation of vital and historical records.

In addition we are more accountable to the public now than ever before through the increased awareness of openness and transparency within government. Knowledge and information management is now formally recognised as a function of government similar to finance, IT and communications. It is expected that the Board is fully committed to creating, managing, disclosing, protecting and disposing of information effectively and legally.

Review

Section 5 (1) of the Act requires authorities to keep their plans under review to ensure its arrangements remain fit for purpose.

RMP Principles

What does the Records Management Plan cover?

Records management covers records of all formats and media. This includes paper and computer records. Records management is needed throughout the lifecycle of a record, and the process begins when the decision to create the record is taken.

Why is records management important?

Records are vital for the effective functioning of the IJB: they support the decision-making; document its aims, policies and activities; and ensure that legal, administrative and audit requirements are met.

For records to perform their various functions, some form of management is needed. Management includes control over what is created, development of effective and efficient filing systems to store records, and procedures for retention of records.

Records management principles

Security – Records will be secure from unauthorised or inadvertent alteration or erasure, that access and disclosure will be properly controlled and audit trails will track all use and changes. Records will be held in a robust format which remains readable for as long as records are required.

Accountability – Adequate records are maintained to account fully and transparently for all actions and decisions in particular:

To protect legal and other rights of staff or those affected by those actions

To facilitate audit or examination

To provide credible and authoritative evidence

Quality – Records are complete and accurate and the information they contain is reliable and its authenticity can be guaranteed.

Accessibility – Records and the information within them can be efficiently retrieved by those with a legitimate right of access, for as long as the records are held by the organisation.

Retention and disposal – There are consistent and documented retention and disposal procedures, including provision for permanent preservation of archival records.

Training – that all staff are informed of their record-keeping responsibilities through appropriate training and guidance and if required further support as necessary.

East Renfrewshire IJB Records Management Plan

The context of this plan is that most records including employment, service user and internal policies and procedures will continue to be managed in the parent body organisations, i.e. East Renfrewshire Council and NHS Greater Glasgow and Clyde and as such will be covered by their respective record management plans.



As such, this RMP relates to the IJB committees (Integration Joint Board, Audit and Performance and Committee and Strategic Planning Group) and plans and policies such as the Annual Performance Report and the Strategic Plan. All of this information is already in the public domain via the IJB pages on East Renfrewshire Council's website

<https://www.eastrenfrewshire.gov.uk/health>

<https://www.eastrenfrewshire.gov.uk/article/8044/East-Renfrewshire-Integration-Joint-Board>

The IJB has agreed with East Renfrewshire Council that all of the IJB's records will be managed by East Renfrewshire Council. The plan will be continuously reviewed and updated.

RMP Element Description	East Renfrewshire Integration Joint Board (IJB) Compliance Statement	Evidence	Further Development
<p>Element 1: Senior management responsibility</p> <p>Section 1(2)(a)(i) of the Act specifically requires a RMP to identify the individual responsible for the management of the authority's public records. An authority's RMP <u>must</u> name and provide the job title of the senior manager who accepts overall responsibility for the RMP that has been submitted.</p> <p>It is vital that the RMP submitted by an authority has the approval and support of that authority's senior management team. Where an authority has already appointed a Senior Information Risk Owner, or similar person, they should consider making that person responsible for the records management programme. It is essential that the authority identifies and seeks the agreement of a senior post-holder to take overall responsibility for records management. That person is unlikely to have a day-to-day role in implementing the RMP, although they are not prohibited from doing so.</p> <p>As evidence, the RMP could include, for example, a covering letter signed by the senior post-holder. In this letter the responsible person named should indicate that they endorse the authority's record management policy (See Element 3).</p> <p>Read further explanation and guidance about element 1.</p>	<p>The Chief Officer, Julie Murray, has senior responsibility for all aspects of the IJB's Records Management, and is the corporate owner of this document.</p> <p>The Chief Officer chairs the HSCP Management Team, which has strategic responsibility for the Health and Social Care Partnership.</p>	<p>Job Description and IJB appointment paper of Chief Officer</p>	<p>No further development required. The Keeper agrees that the IJB has identified an appropriate individual to this role.</p>

RMP Element Description	East Renfrewshire Integration Joint Board (IJB) Compliance Statement	Evidence	Further Development
<p>Element 2: Records Manager Responsibility</p> <p>Section 1(2) (a)(ii) of the Act specifically requires a RMP to identify the individual responsible for ensuring the authority complies with its plan. An authority's RMP must name and provide the job title of the person responsible for the day-to-day operation of activities described in the elements in the authority's RMP. This person should be the Keeper's initial point of contact for records management issues.</p> <p>It is essential that an individual has overall day-to-day responsibility for the implementation of an authority's RMP. There may already be a designated person who carries out this role. If not, the authority will need to make an appointment. As with element 1 above, the RMP must name an individual rather than simply a job title. It should be noted that staff changes will not invalidate any submitted plan provided that the all records management responsibilities are transferred to the incoming post holder and relevant training is undertaken. This individual might not work directly for the scheduled authority.</p> <p>It is possible that an authority may contract out their records management service. If this is the case an authority may not be in a position to provide the name of those responsible for the day-to-day operation of this element.</p> <p>The authority must give details of the arrangements in place and name the body appointed to carry out the records management function on its behalf. It may be the case that an authority's records management programme has been developed by a third party. It is the person operating the programme on a day-to-day basis whose name should be submitted.</p> <p>Read further explanation and guidance about element 2</p>	<p>The Operational Officer responsible for records management is:</p> <p>East Renfrewshire Council: Craig Geddes , Senior Information and Improvement Officer</p> <p>Responsibilities include oversight of:</p> <ul style="list-style-type: none"> ▪ Managing the IJB's records; ▪ Reviewing and implementing operational policies and procedures in line with the RMP; ▪ Ensuring relevant health and social care staff have records management training 	<p>The MoU accompanying this document nominates this role within East Renfrewshire Council, as the lead with operational responsibility.</p> <p>Job description of Senior Information and Improvement Officer demonstrates that the named individual has the skills required and can access all IJB records.</p> <div style="text-align: center;">  <p>Senior Information and Improvement Off</p> </div> <p>The MoU sets out that the IJB's records are created and managed by the partner body, East Renfrewshire Council. It indicates that the CO is satisfied that the partner body has appropriate records management arrangements in place.</p> <div style="text-align: center;">  <p>RMP MoU_.pdf</p> </div>	<p>No further development required. The Keeper has agreed an appropriate individual has been appointed. A signed copy of the MoU was shared with the Keeper</p>

RMP Element Description	East Renfrewshire Integration Joint Board (IJB) Compliance Statement	Evidence	Further Development
<p>Element 3: Records Management Policy Statement</p> <p>The Keeper expects each authority's plan to include a records management policy statement. The policy statement should describe how the authority creates and manages authentic, reliable and useable records, capable of supporting business functions and activities for as long as they are required. The policy statement should be made available to all staff, at all levels in the authority. The statement will properly reflect the business functions of the public authority. The Keeper will expect authorities with a wide range of functions operating in a complex legislative environment to develop a fuller statement than a smaller Authority.</p> <p>The records management statement should define the legislative, regulatory and best practice framework, within which the authority operates and give an overview of the records management processes and systems within the authority and describe how these support the authority in carrying out its business effectively. For electronic records the statement should describe how metadata is created and maintained.</p> <p>It should be clear that the authority understands what is required to operate an effective records management system which embraces records in all formats.</p> <p>The records management statement should include a description of the mechanism for records management issues being disseminated through the authority and confirmation that regular reporting on these issues is made to the main governance bodies. The statement should have senior management approval and evidence, such as a minute of the management board recording its approval, submitted to the Keeper.</p> <p>The other elements in the RMP, listed below, will help provide the Keeper with evidence that the authority is fulfilling its policy.</p> <p>Read further explanation and guidance about element 3.</p>	<p>East Renfrewshire Council and NHS Greater Glasgow and Clyde work in partnership, governed by the East Renfrewshire Integration Joint Board (IJB).</p> <p>East Renfrewshire IJB is responsible for planning health and care services for the East Renfrewshire population.</p> <p>The context of this plan is that most records including employment, service user and internal policies and procedures will continue to be managed in the parent body organisations, i.e. East Renfrewshire Council and NHS Greater Glasgow and Clyde and as such will be covered by their respective record management plans.</p> <p>The records covered by this plan constitute IJB business in terms of:</p> <ul style="list-style-type: none"> • IJB Meetings - agendas and papers, including Directions • IJB Strategies and Policies, including the Annual Performance Report, Strategic Plan and Delivery Plan <p>All of this information is already in the public domain via the IJB's pages on East Renfrewshire Council's website</p> <p>https://www.eastrenfrewshire.gov.uk/integration-joint-board</p>	<p>East Renfrewshire Council Records Management Policy</p> <p>https://www.eastrenfrewshire.gov.uk/records-management-policy</p>	<p>The Keeper agrees that the IJB has adopted a suitable management policy</p> <p>The Council's Records Management policy will be reviewed every two years (next due 2023)</p>

RMP Element Description	East Renfrewshire Integration Joint Board (IJB) Compliance Statement	Evidence	Further Development
<p>Element 4: Business classification</p> <p>The Keeper expects an authority to have properly considered business classification mechanisms and its RMP should therefore reflect the functions of the authority by means of a business classification scheme or similar.</p> <p>A business classification scheme usually takes the form of a hierarchical model or structure diagram. It records, at a given point in time, the informational assets the business creates and maintains, and in which function or service area they are held. As authorities change the scheme should be regularly reviewed and updated. A business classification scheme allows an authority to map its functions and provides a structure for operating a disposal schedule effectively.</p> <p>Some authorities will have completed this exercise already, but others may not. Creating the first business classification scheme can be a time-consuming process, particularly if an authority is complex, as it involves an information audit to be undertaken. It will necessarily involve the cooperation and collaboration of several colleagues and management within the authority, but without it the authority cannot show that it has a full understanding or effective control of the information it keeps.</p> <p>Although each authority is managed uniquely there is an opportunity for colleagues, particularly within the same sector, to share knowledge and experience to prevent duplication of effort.</p> <p>All of the records an authority creates should be managed within a single business classification scheme, even if it is using more than one record system to manage its records.</p> <p>An authority will need to demonstrate that its business classification scheme can be applied to the record systems which it operates.</p> <p>Read further explanation and guidance about element 4</p>	<p>As the IJB has only been in operation since 1st April 2016, the type and volume of record keeping specific to the IJB is evolving rapidly.</p> <p>The IJB will follow the corporate Business Classification Scheme (BCS) adopted by East Renfrewshire Council which identifies its high-level functions and activities. These functions cut across the divisional structures of the Council, enabling the BCS to remain relevant in the event of structural changes to the organisation. East Renfrewshire's BCS has been updated to include IJB records.</p> <p>This has been discussed and agreed as a sensible approach by NHS Greater Glasgow and Clyde and East Renfrewshire Council</p>	<p>The link to East Renfrewshire Council BCS is attached below</p> <p>https://www.eastrenfrewshire.gov.uk/business-classification-scheme</p>	<p>Ongoing reassessment involving department information asset owners will ensure that it's kept accurate and up-to-date.</p>

RMP Element Description	East Renfrewshire Integration Joint Board (IJB) Compliance Statement	Evidence	Further Development
<p>Element 5: Retention schedules</p> <p>Section 1(2) (b)(iii) of the Act specifically requires a RMP to include provision about the archiving and destruction or other disposal of the authority's public records.</p> <p>An authority's RMP must demonstrate the existence of and adherence to corporate records retention procedures.</p> <p>The procedures should incorporate retention schedules and should detail the procedures that the authority follows to ensure records are routinely assigned disposal dates, that they are subsequently destroyed by a secure mechanism (see element 6) at the appropriate time, or preserved permanently by transfer to an approved repository or digital preservation programme (See element 7).</p> <p>The principal reasons for creating retention schedules are:</p> <ul style="list-style-type: none"> ▪ to ensure records are kept for as long as they are needed and then disposed of appropriately ▪ to ensure all legitimate considerations and future uses are considered in reaching the final decision. ▪ to provide clarity as to which records are still held by an authority and which have been deliberately destroyed. <p>"Disposal" in this context does not necessarily mean destruction. It includes any action taken at the agreed disposal or review date including migration to another format and transfer to a permanent archive.</p> <p>A retention schedule is an important tool for proper records management. Authorities who do not yet have a full retention schedule in place should show evidence that the importance of such a schedule is acknowledged by the senior person responsible for records management in an authority (see element 1). This might be done as part of the policy document (element 3). It should also be made clear that the authority has a retention schedule in development.</p> <p>An authority's RMP must demonstrate the principle that retention rules are consistently applied across all of an authority's record systems.</p> <p>Read further explanation and guidance about element 5.</p>	<p>A retention schedule is a list of records for which pre-determined disposal dates have been established</p> <p>The corporate records including formal IJB reports and minutes will be managed in accordance with the IJB Board Servicing Committee Protocol.</p> <p>The Business Records Retention Scheme used by East Renfrewshire Council determines how long documents should be retained.</p> <p>Schedule 18 of the retention scheme relates specifically to the Integration Joint Board</p>	<p>East Renfrewshire Council Retention Schedule Document</p> <p>https://www.eastrenfrewshire.gov.uk/retention-schedule</p>	<p>As above</p>

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<p>Element 6: Destruction arrangements</p> <p>Section 1(2) (b)(iii) of the Act specifically requires a RMP to include provision about the archiving and destruction, or other disposal, of an authority's public records.</p> <p>An authority's RMP must demonstrate that proper destruction arrangements are in place.</p> <p>A retention schedule, on its own, will not be considered adequate proof of disposal for the Keeper to agree a RMP. It must be linked with details of an authority's destruction arrangements. These should demonstrate security precautions appropriate to the sensitivity of the records. Disposal arrangements must also ensure that all copies of a record – wherever stored – are identified and destroyed.</p> <p>Read further explanation and guidance about element 6.</p>	<p>The destruction of IJB records, in all formats, will be undertaken by East Renfrewshire Council.</p> <p>All IJB Records will be held electronically on East Renfrewshire Council's system therefore no hard copies will require destruction with the exception of signed copies of minutes which will be held as part of ERC destruction policy.</p> <p>Destruction of electronic media and digital hardware is carried out in accordance with ERC policies</p>	<p>East Renfrewshire Council Records Disposal Policy</p> <p>https://www.eastrenfrewshire.gov.uk/destruction-arrangements</p>	<p>Continue to monitor destruction arrangements as new records systems are developed</p>

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<p>Element 7: Archiving and transfer arrangements</p> <p>Section 1(2)(b)(iii) of the Act specifically requires a RMP to make provision about the archiving and destruction, or other disposal, of an authority's public records.</p> <p>An authority's RMP must detail its archiving and transfer arrangements and ensure that records of enduring value are deposited in an appropriate archive repository. The RMP will detail how custody of the records will transfer from the operational side of the authority to either an in-house archive, if that facility exists, or another suitable repository, which must be named. The person responsible for the archive should also be cited.</p> <p>Some records continue to have value beyond their active business use and may be selected for permanent preservation. The authority's RMP must show that it has a mechanism in place for dealing with records identified as being suitable for permanent preservation. This mechanism will be informed by the authority's retention schedule which should identify records of enduring corporate and legal value.</p> <p>An authority should also consider how records of historical, cultural and research value will be identified if this has not already been done in the retention schedule.</p> <p>The format/media in which they are to be permanently maintained should be noted as this will determine the appropriate management regime.</p> <p>Read further explanation and guidance about element 7.</p>	<p>All IJB Records will be held electronically on East Renfrewshire Council's system so no hard copies will be archived as per element 6</p> <p>Electronic archiving policies will be determined at a later date. At this stage there is only a limited volume of records specific to the IJB.</p> <p>In terms of a procedure, the IJB will follow the Council's plans whereby records are moved into a secure offsite location</p> <p>IJB records will be managed with regard to ERC archiving policies</p>	<p>The agreed arrangement between the Board and East Renfrewshire Council for IJB records to be included in the archiving and transferring arrangements established by East Renfrewshire Council.</p> <p>https://www.eastrenfrewshire.gov.uk/archiving-and-transfer-arrangements</p>	<p>The provision for physical archives continues to be under review, and policies and provision for electronic archiving will need to be developed. An Archives Service Standards document is being drafted.</p>

RMP Element Description	East Renfrewshire Integration Joint Board (IJB) Compliance Statement	Evidence	Further Development
<p>Element 8: Information Security</p> <p>Section 1(2) (b)(ii) of the Act specifically requires a RMP to make provision about the archiving and destruction or other disposal of the authority's public records.</p> <p>An authority's RMP <u>must</u> make provision for the proper level of security for its public records. All public authorities produce records that are sensitive. An authority's RMP <u>must</u> therefore include evidence that the authority has procedures in place to adequately protect its records. Information security procedures would normally acknowledge data protection and freedom of information obligations as well as any specific legislation or regulatory framework that may apply to the retention and security of records.</p> <p>The security procedures must put in place adequate controls to prevent unauthorised access, destruction, alteration or removal of records. The procedures will allocate information security responsibilities within the authority to ensure organisational accountability and will also outline the mechanism by which appropriate security classifications are linked to its business classification scheme.</p> <p>Read further explanation and guidance about element 8.</p>	<p>Information security is the process by which an authority protects its records and ensures they remain available. It is the means by which an authority guards against unauthorised access and provides for the integrity of the records. Robust information security measures are an acknowledgement that records represent a risk as well as an asset. A public authority should have procedures in place to assess and contain that risk.</p> <p>The IJB will rely on NHS Greater Glasgow and Clyde and East Renfrewshire Council arrangements in terms of systems, devices, information sharing platforms etc.</p> <p>All staff will remain employees of either NHS Greater Glasgow and Clyde or East Renfrewshire Council. As such they will be subject to the policies and procedures of their employer, i.e.</p> <p>NHS Greater Glasgow and Clyde Information Security Policy</p> <p>http://library.nhsggc.org.uk/mediaAssets/library/InformationGovernancePolicy09Jul02.pdf</p> <p>or East Renfrewshire Council Information Security Policy</p> <p>https://www.eastrenfrewshire.gov.uk/information-security</p>	<p>East Renfrewshire Council Information Security Policy</p> <p>https://www.eastrenfrewshire.gov.uk/information-security</p> <p>East Renfrewshire Information Security Group Remit:</p>	<p>A new Information Asset Register system, which will enable the linking of security classifications with its business classification scheme is being introduced. Information securities policies and related assessments are instigated by the ERC Information Security and Digital Risk Officer</p>

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<p>Element 9: Data protection</p> <p>The Keeper will expect an authority's RMP to indicate compliance with its data protection obligations. This might be a high level statement of public responsibility and fair processing.</p> <p>If an authority holds and process information about stakeholders, clients, employees or suppliers, it is legally obliged to protect that information. Under the Data Protection Act, an authority must only collect information needed for a specific business purpose, it must keep it secure and ensure it remains relevant and up to date. The authority <u>must</u> also only hold as much information as is needed for business purposes and only for as long as it is needed. The person who is the subject of the information <u>must</u> be afforded access to it on request.</p> <p>Read further explanation and guidance about element 9.</p>	<p>The Information Commissioner has confirmed that the IJB can be a data controller albeit that it will not hold any personal records of service users/patients.</p> <p>Any personal data held by the IJB is therefore limited and would be handled in line with East Renfrewshire Council's data protection policy.</p> <p>The IJB is registered as a body which will be subject to Freedom of Information applies to the IJB and a local policy has been established albeit that most requests will be addressed directly by the parent bodies.</p> <p>Legislation changed on 25/05/18 which increased the rights of individuals and increase fines for data breaches.</p> <p>The IJB has its own complaints policy.</p> <p>IJB records are properly managed for the purposes of Data Protection</p>	<p>East Renfrewshire IJB is not registered as a Data Controller on the ICO website</p> <p>ERC Data Protection Policy</p> <p>Privacy Policy</p> <p>IJB Complaints Policy</p> <p>ERC Complaints Policy</p> <p>IJB FOI Policy and Publication scheme</p> <p>Ongoing training is provided via NHS learnpro and ERC online training modules.</p>	<p>The Council's Data Protection policy will be reviewed every 2 years or to reflect changes in staffing as appropriate</p>

RMP Element Description	East Renfrewshire Integration Joint Board (IJB) Compliance Statement	Evidence	Further Development
<p>Element 10: Business continuity and vital records</p> <p>The Keeper will expect an authority's RMP to indicate arrangements in support of records vital to business continuity. Certain records held by authorities are vital to their function. These might include insurance details, current contract information, master personnel files, case files, etc. The RMP will support reasonable procedures for these records to be accessible in the event of an emergency affecting their premises or systems.</p> <p>Authorities should therefore have appropriate business continuity plans ensuring that the critical business activities referred to in their vital records will be able to continue in the event of a disaster. How each authority does this is for them to determine in light of their business needs, but the plan should point to it.</p> <p>Read further explanation and guidance about element 10.</p>	<p>A business continuity and vital records plan serves as the main resource for the preparation for, response to, and recovery from, an emergency that might affect any number of crucial functions in an authority.</p> <p>The IJB's records will be subject to the policies and procedures of the partner body in relation to business continuity.</p> <p>The MoU sets out that the IJB's records are managed in accordance with East Renfrewshire Council's Business Continuity and vital records arrangements.</p> <p>All services will continue to be provided or commissioned directly by NHS Greater Glasgow and Clyde or East Renfrewshire Council. As such there is no direct requirement for the IJB to have its own arrangements for business continuity of vital records.</p> <p>Both NHS Greater Glasgow and Clyde and East Renfrewshire Council have adequate business continuity arrangements to ensure the sustainability of health and social care services for which the IJB has overall responsibility.</p>	<p>East Renfrewshire Council Business Continuity Plan</p> <p>https://www.eastrenfrewshire.gov.uk/business-continuity-and-vital-records</p>	<p>The Business Continuity Policy is due to be refreshed once the Covid-19 outbreak and associated lockdown measures have passed.</p> <p>Vital records within the archives and records store will be defined as part of a records store disaster plan</p>

RMP Element Description	East Renfrewshire Integration Joint Board (IJB) Compliance Statement	Evidence	Further Development
<p>Element 11: Audit trail</p> <p>The Keeper will expect an authority's RMP to provide evidence that the authority maintains a complete and accurate representation of all changes that occur in relation to a particular record. For the purpose of this plan 'changes' can be taken to include movement of a record even if the information content is unaffected. Audit trail information must be kept for at least as long as the record to which it relates.</p> <p>This audit trail can be held separately from or as an integral part of the record. It may be generated automatically, or it may be created manually.</p> <p>Read further explanation and guidance about element 11</p>	<p>The IJB's records are created by NHS Greater Glasgow and Clyde and East Renfrewshire Council and are managed via East Renfrewshire Council.</p>	<p>The MoU sets out the IJB's Audit Trail arrangements</p> <p>As per Element 2</p>	<p>No further development required.</p>

RMP Element Description	East Renfrewshire Integration Joint Board (IJB) Compliance Statement	Evidence	Further Development
<p>Element 12: Competency framework for records management staff</p> <p>The Keeper will expect an authority's RMP to detail a competency framework for person(s) designated as responsible for the day-to-day operation of activities described in the elements in the authority's RMP. It is important that authorities understand that records management is best implemented by a person or persons possessing the relevant skills.</p> <p>A competency framework outlining what the authority considers are the vital skills and experiences needed to carry out the task is an important part of any records management system. If the authority appoints an existing non- records professional member of staff to undertake this task, the framework will provide the beginnings of a training programme for that person.</p> <p>The individual carrying out day-to-day records management for an authority might not work for that authority directly. It is possible that the records management function is undertaken by a separate legal entity set up to provide functions on behalf of the authority, for example an arm's length body or a contractor. Under these circumstances the authority must satisfy itself that the supplier supports and continues to provide a robust records management service to the authority.</p> <p>Read further explanation and guidance about element 12.</p>	<p>The IJB will rely upon the records manager of the partner body for compliance under this element.</p> <p>Training for records management staff will remain the responsibility of the employing body East Renfrewshire Council</p> <p>Our Senior Information and Improvement Officer can offer advice on records issues, and guidance on data protection and information security is available from the Business Operations & Partnerships Department.</p> <p>A new records management competencies and training framework has been developed</p>	<p>East Renfrewshire Council Competency Framework</p> <p>https://www.eastrenfrewshire.gov.uk/records-management-training</p>	<p>Online training module will be refreshed and further role-based corporate and departmental records management training will be developed as part of the implementation of the Council's records management competencies and training framework</p>

RMP Element Description	East Renfrewshire Integration Joint Board (IJB) Compliance Statement	Evidence	Further Development
<p>Element 13: Assessment and review</p> <p>Section 1(5) (i)(a) of the Act says that an authority must keep its RMP under review.</p> <p>An authority's RMP <u>must</u> describe the procedures in place to regularly review it in the future.</p> <p>It is important that an authority's RMP is regularly reviewed to ensure that it remains fit for purpose. It is therefore vital that a mechanism exists for this to happen automatically as part of an authority's internal records management processes.</p> <p>A statement to support the authority's commitment to keep its RMP under review must appear in the RMP detailing how it will accomplish this task.</p> <p>Read further explanation and guidance about element 13.</p>	<p>The IJB relies on East Renfrewshire Council to ensure that the systems, policies and procedures that govern its records are regularly assessed.</p> <p>The record management plan will be reviewed and updated through the HSCP Management Team. During the first year any gaps in this plan will be identified as issues arise and solutions agreed.</p> <p>East Renfrewshire Council have committed to periodic review of the RMP by ERC internal Audit and by participation in the Keeper of Scottish Records self-assessment program</p>	<p>East Renfrewshire Council Records Management Policy</p> <p>https://www.eastrenfrewshire.gov.uk/records-management-policy</p>	<p>The Council's Records Management Plan has defined review dates and policy and guidance will continue to be assessed and reviewed going forward</p>

RMP Element Description	East Renfrewshire Integration Joint Board (IJB) Compliance Statement	Evidence	Further Development
<p>Element 14: Shared information</p> <p>The Keeper will expect an authority's RMP to reflect its procedures for sharing information. Authorities who share, or are planning to share, information must provide evidence that they have considered the implications of information sharing on good records management.</p> <p>Information sharing protocols act as high level statements of principles on sharing and associated issues, and provide general guidance to staff on sharing information or disclosing it to another party. It may therefore be necessary for an authority's RMP to include reference to information sharing protocols that govern how the authority will exchange information with others and make provision for appropriate governance procedures.</p> <p>Specifically the Keeper will expect assurances that an authority's information sharing procedures are clear about the purpose of record sharing which will normally be based on professional obligations. The Keeper will also expect to see a statement regarding the security of transfer of information, or records, between authorities whatever the format.</p> <p>Read further explanation and guidance about element 14.</p>	<p>As part of its function the IJB must utilise the records of other partners and therefore information sharing is a key part of its business therefore an information sharing protocol has been agreed between NHS Greater Glasgow and Clyde Council and East Renfrewshire Council</p> <p>The IJB relies on East Renfrewshire Council to ensure that the systems, policies and procedures that govern its records are regularly assessed.</p> <p>The record management plan will be reviewed and updated through the Department Management Team. During the first year any gaps in this plan will be identified as issues arise and solutions agreed.</p> <p>East Renfrewshire Council have committed to periodic review of the RMP by ERC internal Audit and by participation in the Keeper of Scottish Records self-assessment program</p>	<p>An information sharing protocol has been agreed between NHS Greater Glasgow and Clyde Council and East Renfrewshire Council to enable the safe and effective sharing of information.</p>	<p>Arrangements are place to ensure sharing agreements are reviewed. The Council are implementing an Information Asset Register which will allow for greater clarity and control in relation to the responsibility for records and how they can be shared.</p>

RMP Element Description	East Renfrewshire Integration Joint Board (IJB) Compliance Statement	Evidence	Further Development
<p>Element 15: Third Party Records</p> <p>Section 3 of the Act describes the meaning of ‘public records’ for the purposes of the Act. It says that public records in relation to a named authority means records created by or on behalf of the authority in carrying out its functions. This is extended to records created by or on behalf of a contractor carrying out the authority’s functions and includes records that have come into the possession of the authority or contractor in carrying out the authority’s functions. Records created or held by a third party contractor that are not done so in relation to that contractor carrying out the function of the public authority are not public records under the Act.</p> <p>An authority’s plan must include reference as to what public records are being created and held by a third party carrying out a function of the authority and how these are being managed to the satisfaction of the authority. This does not mean the authority must impose its own arrangements on the third party.</p> <p>Authorities should take a risk-based approach to the arrangements it puts in place with third parties to ensure that these are relevant and proportionate to the public records that fall within the scope of each contract type. Records management requirements, and evidence of assurance that prospective contractors will be able to meet these, should be included in the procurement exercise.</p> <p>An authority will wish to ensure the scope of its proposed arrangements include sub-contractors. It will further wish to ensure that arrangements are in place to allow it to meet statutory obligations under other information legislation, for example, to FOI(S)A and data protection legislation (see Element 9). There may be other regulatory obligations that an authority will wish to consider in relation to the function being carried out by the third party.</p>	<p>Public records created by third parties are covered within the scope of all relevant components of our Records Management Plan including the Records Management Policy, Corporate Records Management Procedures and the integrated Business Classification Scheme and Record Retention Schedule.</p> <p>As contracted services are procured and commissioned directly by NHS Greater Glasgow and Clyde or East Renfrewshire Council there are no IJB records which have been created or held by third parties.</p>	<p>As statutory functions carried out by third parties are commissioned by either ERC or NHSGGC</p> <p>https://www.eastrenfrewshire.gov.uk/public-records-and-third-parties</p>	<p>No further development identified</p>

RMP Element Description	East Renfrewshire Integration Joint Board (IJB) Compliance Statement	Evidence	Further Development
<p>Element 16: Guidance</p> <p>This is an additional element which has been added to ER IJB RMP</p> <p><i>This is not a statutory element</i></p>	<p>This new area comprises the following guidance notes which are either new or have been substantially refreshed and revised from previous versions (as at 2021)</p> <ul style="list-style-type: none"> ▪ Managing your files ▪ Email Guidance ▪ Version Control ▪ Using the Records Store ▪ Records Store Procedures ▪ Scanning Guidelines ▪ Meta-data guidance ▪ Taking care of our digital records ▪ Redaction Guidance 	<p>https://www.eastrenfrewshire.gov.uk/records-management-guidance</p>	<p>Policy and guidance will continue to be assessed and reviewed in line with review dates identified as part of the Council's RMP</p>

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