



Date: 11 November 2022
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TO: MEMBERS OF THE EAST RENFREWSHIRE INTEGRATION JOINT BOARD PERFORMANCE AND AUDIT COMMITTEE

Dear Colleague

EAST RENFREWSHIRE INTEGRATION JOINT BOARD - PERFORMANCE AND AUDIT COMMITTEE

A meeting of the East Renfrewshire Integration Joint Board Performance and Audit Committee will be held on **Wednesday 23 November 2022 at 9.00 am.**

Please note this is a virtual meeting.

The agenda of business is attached.

Yours faithfully

COUNCILLOR KATIE PRAGNELL
Chair

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**EAST RENFREWSHIRE INTEGRATION JOINT BOARD
PERFORMANCE & AUDIT COMMITTEE
WEDNESDAY 23 NOVEMBER 2022**

VIRTUAL MEETING VIA MICROSOFT TEAMS

AGENDA

- 1 Apologies for absence**
- 2. Declaration of Interests**
- 3. Minute of meeting of 21 September 2022 (copy attached, pages 5 - 10).**
- 4. Matters Arising (copy attached, pages 11 - 14).**
- 5. Rolling Action Log (copy attached, pages 15 - 18).**
- 6. Internal Audit Annual Report (copy to follow).**
- 7. East Renfrewshire Integration Joint Board (copy attached, pages 19 - 56).**
 - (i) Annual Audit Report**
 - (ii) ISA 580 Independent Auditors' report**
- 8. Audited Annual Report and Accounts (copy attached, pages 57 - 146).**
- 9. Mid-Year performance Report (copy to follow).**
- 10. Commissioned Services (copy attached, pages 147 - 154).**
- 11. Audit Update (copy attached, pages 155 - 202).**
- 12. IJB Strategic Risk Register (copy attached, pages 203 - 218).**
- 13. Date of Next Meeting – Wednesday 29 March 2023 at 9am.**

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**Minute of virtual meeting of the
East Renfrewshire Integration Joint Board
Performance and Audit Committee
held at 9.00am on 21 September 2022**

PRESENT

Councillor Katie Pragnell, East Renfrewshire Council (Chair)

Lynsey Allan	Scottish Care
Councillor Caroline Bamforth	East Renfrewshire Council
Jacqueline Forbes	NHS Greater Glasgow and Clyde Board
Anne Marie Kennedy	Non-voting IJB member
Councillor David Macdonald	East Renfrewshire Council co-opted member
Anne-Marie Monaghan	NHS Greater Glasgow and Clyde Board

IN ATTENDANCE

Liona Allison	Assistant Committee Services Officer (East Renfrewshire Council)
Lesley Bairden	Head of Finance and Resources (Chief Financial Officer)
Michelle Blair	Chief Auditor (East Renfrewshire Council)
Eamonn Daly	Democratic Services Manager (East Renfrewshire Council)
Pamela Gomes	Governance and Compliance Officer
Tom Kelly	Head of Adult Services – Learning Disability and Recovery
Lee McLaughlin	Head of Adult Services – Communities and Wellbeing
Julie Murray	Chief Officer – IJB
Margaret Phelps	Strategic Planning, Performance and Commissioning Manager
Steven Reid	Policy, Planning and Performance Manager
Louisa Yule	Audit Scotland

DECLARATIONS OF INTEREST

1. There were no declarations of interest intimated.

MINUTE OF PREVIOUS MEETING

2. The committee considered and approved the Minute of the meeting of 22 June 2022.

MATTERS ARISING

3. The committee considered and noted a report by the Chief Officer providing an update on matters arising from discussions that had taken place at the previous meeting.

NOT YET ENDORSED AS A CORRECT ECORD

In relation to performance reporting in respect of Children and Adolescent Mental Health Services (CAMHS) it was reported that as at 21 September 100% of referrals had been seen within the target waiting time of 18 weeks. It was hoped to sustain this level of performance but this would be dependent on retaining staff.

In response to a question from Councillor Pragnell on an increase in the number of young people presenting with eating disorders the Chief Officer indicated that she would need to investigate this further but that it was a national and not a local issue.

The committee noted the report.

ROLLING ACTION LOG

4. The committee considered a report by the Chief Officer providing details of all open actions and those that had been completed, or removed from the log, since the last meeting.

The Chief Financial Officer was heard in relation to those actions that remained open. In particular she outlined the steps to be taken regarding reminders being issued to managers and confirmed that in relation to overhead allocations the Council was carrying out a mid-year exercise in the current year. This information could be brought to the seminar on overhead allocations to be arranged.

Responding to Mrs Kennedy who intimated that she had not yet received an invitation to attend the meeting of the short-life working group being set up to look at performance reporting, it was confirmed that this would be issued, and that if there had been a wider problem with the non-receipt of invitations the meeting could be rescheduled.

The committee noted the report.

ANNUAL PERFORMANCE REPORT 2021-22

5. The committee considered a report by the Chief Officer providing details of the performance of the HSCP over 2021-22.

Having referred to the legislation and guidance setting out the prescribed content of a performance report for an integration authority, and also having highlighted the delayed reporting timescales due to COVID-19, the report explained that this was the sixth Annual Performance Report that had been prepared. It was noted that the report was a high-level report principally structured around the priorities set out in the Strategic Plan, and linked to the National Health and Wellbeing Outcomes as well as those for Criminal Justice and Children and Families.

The report explained that the Annual Report, a copy of which accompanied the report, set out how the HSCP had delivered on its vision and commitments over 2021-22, recognising the continuing challenges of the pandemic, its impact on ways of working, and potential disruption to performance trends.

The main elements of the report set out the HSCP's current strategic approach; the response to the pandemic; work to deliver the strategic priorities and meet the challenges of the pandemic over the preceding 12 months; financial performance; and detailed performance information illustrating data trends against key performance indicators.

The report explained that national performance measures could be grouped into two types of complementary measures; outcome measures and organisational measures. It was noted that outcome measures were based on survey feedback available every two years from a national survey of people taken from a random sample based on GP practice populations, whilst organisational measures were taken from data that was collected across the health and care system for other reasons.

The remaining performance information in the report related to the key local indicators and targets developed to monitor progress against the Interim Strategic Plan 2021-22. These indicators illustrated progress against each of the seven strategic priorities. It was noted that Chapter 4 of the report gave trend data from 2016-17 and used a Red, Amber, Green status key to show whether targets were being met.

Having referred to the continuing impact of the pandemic, and to the performance update provided to the Board in June, the report then listed summary headline performance information across 8 service areas.

The Policy, Planning and Performance Manager was then heard further on the report following which full discussion took place.

Ms Forbes highlighted a number of typographical errors throughout the report and in relation to the chart setting out governance, relationships and links with partners suggested that this should be amended to make clearer the links between the IJB, the health board and the Council. She also reiterated a point made at other meetings regarding the challenge of any changes suggested by the committee being fully reflected on and reported to the Board as both meetings were on the same day.

In reply, officers confirmed that the governance chart would be amended and that the timing of the presentation of the report to the committee could be reviewed.

Officers also responded to questions from Ms Allan on hours of homecare service provided by partner providers and opportunities to discuss funding allocations.

Responding to Councillor Bamforth, the reason for an increase in Women's Aid referrals against a decrease of domestic abuse Request for Assistance referrals was explained.

It was also confirmed that whilst the number of emergency admissions was trending down from the previous year those admitted were remaining in hospital longer due to having more complex needs which required a longer assessment time, with a corresponding increase in delayed discharges.

The committee noted the report.

BONNYTON HOUSE CARE HOME INSPECTION REPORT

6. The committee considered a report by the Chief Officer providing an overview of the most recent inspection by the Care Inspectorate and subsequent report into Bonnyton House. A copy of the Care Inspectorate report accompanied the report as an appendix.

The report outlined the Care Inspectorate's key messages, provided examples of positive feedback from families and highlighted that overall the inspection was positive with grades of "Good" and "Very Good" awarded and no requirements made. This was an improvement on the previous inspection. Across the 5 inspection categories there had been 3 ratings of "Good"

and 2 of “Very Good”. Furthermore it was noted that the four recommendations from the previous inspection had been met and no further recommendations were made, however a number of areas for improvement had been identified and an action plan had been put in place.

The Head of Adult Services – Communities and Wellbeing, reminded the committee that Bonnyton House had been decanted during the pandemic and that the improvements that had been delivered had been achieved during particularly difficult times.

Members of the committee having congratulated staff on the report, the Head of Adult Services – Communities and Wellbeing, in response to Ms Monaghan, explained the processes in place to ensure that the service improvements were maintained.

Councillor Macdonald having reminded the committee that at one stage the closure of Bonnyton House had been actively considered, Councillor Bamforth queried if there was any evidence to suggest that families were reluctant to place family members in care homes following the events of the pandemic. In reply the Head of Adult Services – Communities and Wellbeing, suggested that whilst feedback was that people wanted to stay at home where possible, families were now more nervous about family members staying at home rather than in care homes.

The committee noted the report.

INTERNAL AUDIT PLAN 2022-23

7. The committee considered a report by the Chief Auditor, East Renfrewshire Council, providing details of the proposed 2022-23 audit plan, for which approval was sought

The report explained that 15 days had been allocated against the IJB within the ERC Annual Audit Plan. This was considered to be an adequate number of days due to the limited IJB-specific audits to be carried out.

Commenting on the proposed plan, the Chief Auditor explained that it was proposed that most of the allocated days were held in reserve and called upon if required. These could be supplemented if necessary by available contingency time.

Ms Forbes emphasised the importance of any audits carried out by either the Council or NHSGGC with implications for the IJB being presented to the committee, in response to which the Chief Financial Officer explained that the following item on the agenda provided an update on new audit activity relating to the Integration Joint Board since last reported to the Performance and Audit Committee in June 2022, and any new audit activity relating to the Health and Social Care Partnership since last reported to Performance and Audit Committee in June 2022. Notwithstanding she could work with the Chief Auditor to consider if there was a more suitable way to address Ms Forbes’ comments.

The committee approved the proposed 2022-23 Audit Plan.

AUDIT UPDATE

8. Under reference to the Minute of the previous meeting (Item 9 refers), the committee considered a report by the Chief Officer providing an update on new audit activity relating to the IJB and HSCP since last reported to the committee in June 2022, and summarising all

open audit recommendations. Accompanying the report were a series of appendices. These contained information regarding audit activity relating to the IJB and HSCP; and information on recommendations from previous audits. Summary information in relation to the appendices was contained in the report

The Chief Auditor was heard in response to comments from Councillor Pragnell regarding a shortage of auditors and how she would prioritise audits impacting on governance and assurance.

Ms Forbes welcomed the progress that had been made on verification. She suggested that new timescales were required in relation to the open actions associated with the audit into the CareFirst Finance system and that the actions in relation to the audit on emergency payments needed checked.

In reply the Chief Auditor explained that it would be for HSCP staff to provide updated timescales for completing the actions relative to CareFirst and that she would work with staff to agree actions in relation to emergency payments.

The committee noted the report.

POLICY UPDATE

9. Under reference to the Minute of the previous meeting (Item 10 refers), the committee considered a report by the Chief Officer providing details of a number of 6 policies that had been reviewed as part of the ongoing process of reviewing those policies relating specifically to the governance of the IJB. Copies of each of the policies accompanied the report.

The committee noted the report.

IJB STRATEGIC RISK REGISTER UPDATE

10. Under reference to the Minute of the previous meeting (Item 11 refers), the committee considered a report by the Chief Officer providing an update on the Integration Joint Board Strategic Risk Register. A copy of the risk register accompanied the report.

Having set out the risk matrix used to calculate risk scores, the report then referred to the meeting of the committee on 22 June 2022 and explained that since then no new risks had been added; no existing risks had been removed, and no risk scores had changed.

The committee noted the report.

CALENDAR OF MEETINGS

11. The committee considered a report by the Chief Officer with proposed meeting dates for 2023. Ms Forbes having referred to earlier comments about the issues associated with meetings of the committee and the UIJB taking place on the same day, the committee approved the meeting dates.

DATE OF NEXT MEETING

12. It was reported that the next meeting of the committee would take place on Wednesday 23 November 2022 at 9.00am.

CHAIR



Meeting of East Renfrewshire Health and Social Care Partnership	Performance and Audit Committee
Held on	23 November 2022
Agenda Item	4
Title	Matters Arising
Summary	
<p>The purpose of this paper is to update members of the Performance and Audit Committee on progress regarding matters arising from the discussion which took place at the meeting of 21 September 2022.</p>	
Presented by	Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)
Action Required	
<p>Performance and Audit Committee members are asked to note the contents of the report.</p>	

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

PERFORMANCE AND AUDIT COMMITTEE

23 November 2022

Report by Chief Officer

MATTERS ARISING

PURPOSE OF REPORT

1. To update the Performance and Audit Committee on progress regarding matters arising from the discussion that took place at the meeting of 21 September 2022.

RECOMMENDATION

2. Performance and Audit Committee members are asked to note the contents of the report.

REPORT

Annual Performance Report

3. Comments made at the Performance and Audit Committee on 23 September have been incorporated into the Annual Performance Report and the final draft was recirculated for any final comments (none received) prior to publication ahead of the Scottish Government deadline of 30 November 2022.
4. We are awaiting national guidance on timescales for publication of future reports. If possible we will present future reports to Performance and Audit Committee earlier to allow time for comments to be incorporated prior to submission to the Integration Joint Board for approval.

RECOMMENDATIONS

5. Members of the Performance and Audit Committee are asked to note the contents of the report.

REPORT AUTHOR AND PERSON TO CONTACT

Lesley Bairden, Chief Financial Officer
Lesley.Bairden@eastrenfrewshire.gov.uk

Julie Murray, IJB Chief Officer

7 November 2022

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Meeting of East Renfrewshire Health and Social Care Partnership	Performance and Audit Committee
Held on	23 November 2022
Agenda Item	5
Title	Rolling Action Log
Summary	
The attached rolling action log details all actions, including those which have been completed since the meeting on 21 September 2022.	
Presented by	Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)
Action Required	
Performance and Audit Committee members are asked to note progress.	

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ACTION LOG: Performance and Audit Committee (PAC)

November 2022

No	Meeting Date	Agenda Item	Action	Responsible Officer	Status	Date Due / Closed	Progress / Outcome
55	21.09.2022	Rolling Action Log	Check the invitation list for the meeting of the short-life working group to review performance reporting arrangements, to ensure Anne Marie Kennedy invited	Policy, Planning and Performance Manager	CLOSED	Sep-22	Invite re-issued
54	21.09.2022	Annual Performance Report 2021-22	The committee made a number of recommended changes to the report in relation to governance chart. Make sure these are incorporated in the final version of the report.	Policy, Planning and Performance Manager	CLOSED	Nov-22	Changes incorporated and report recirculated for final comment ahead of publication
53	21.09.2022	Annual Performance Report 2021-22	Comment was made on the fact that due to the timing of meetings of the committee and the Board and changes recommended by committee are not able to be incorporated into the document presented to the Board. Review the timing of the presentation of future reports to committee to see if this issue can be resolved.	Policy, Planning and Performance Manager	CLOSED	Nov-22	Members were given the opportunity for further comment, following the meeting. Going forward, due to the meeting schedule, it will be possible to present to PAC earlier, if the APR presented to IJB was delayed until August. We are awaiting national guidance on timescales for publication
52	21.09.2022	Internal Audit Plan 2022-23	Work to establish if comments from Jacqui Forbes about all IJB/HSCP related audit reports from the Chief Auditor, ERC or NHS being presented to the committee can be accommodated	Chief Financial Officer/Chief Internal Auditor	OPEN	Nov-22	Update will be provided in Internal Audit Annual Report included on PAC agenda (23.11.22)
51	21.09.2022	Audit Update	Update the timescale for completion of actions re 4.5.1 and 4.5.3 once response from management is received and (Appendix 2I) and recheck the actions re Appendix 2K	Chief Financial Officer/Chief Internal Auditor	CLOSED	Nov-22	Audit reports at appendix 2I and 2K have been superseded by the new follow-up report included in PAC Audit Update (23.11.22)
50	21.09.2022	Calendar of meetings 2023	The 2023 meetings calendar was approved. Make the necessary arrangements and circulate the meeting details to the relevant persons	Democratic Services Manager	OPEN	Nov-22	
40	16.03.2022	Rolling Action Log	Arrange for a presentation on overhead allocations at a future seminar for Board member	Chief Financial Officer	OPEN	Nov-22	This will be included as part of the budget presentation to IJB on 18 November.
35	16.03.2022	Audit Update	Arrange to meet to discuss which of the items considered implemented by the HSCP can be closed off.	Chief Financial Officer	CLOSED	Sep-22	Follow-up audits have taken place and new report issued
31	24.11.2021	Internal Audit Annual Report 2020-21 and Internal Audit Plan 2021-22	Bring details of the matter under investigation by Police Scotland to the committee at an appropriate time.	Chief Financial Officer	OPEN	Jun-22	No update as at November 2022

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East Renfrewshire Integration Joint Board

2021/22 Annual Audit Report – DRAFT



 AUDIT SCOTLAND

Prepared for East Renfrewshire Integration Joint Board and the Controller of Audit
November 2022

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Key messages

2021/22 annual accounts

- 1 Our audit opinion on the annual accounts of East Renfrewshire Integration Joint Board (the IJB) is unmodified.

Financial management and sustainability

- 2 The IJB has appropriate and effective financial management arrangements in place. The 2021/22 budget identified a funding gap of £4.380 million. Identified savings and transfers from reserves were planned to address this. At the year-end an operational underspend of £0.837 million in 2021/22 was reported. Covid 19 pressures were met through Scottish Government funding.
- 3 The IJB's year-end reserve position was £20.752 million. However, the general reserve remains unchanged from the prior year at £0.272 million and is well below the IJB's reserve policy target for uncommitted general reserves to be 2% of the IJBs revenue budget (excluding significant fixed costs such as family health service). The general reserve is currently approximately 0.15% of the 2021/22 revenue budget.
- 4 The IJB's medium-term financial outlook (MTFO) covering the period 2022/23 to 2026/27 was refreshed in March 2022. This identified a funding shortfall of around £2.9 million for 2022/23, with cost pressures of around £5.5 million from 2023/24 onwards. As part of the budget strategy review, financial assumptions have been reviewed and updated. Total cost pressures are forecast to range from £17 million to £31 million over the next three-year period based on low, medium and high cost scenarios. East Renfrewshire Integration Joint Board should continue to work with partners to develop a revised financial strategy which ensures the organisation remains financial sustainable.

Governance, Transparency and Best Value

- 5 The IJB has appropriate governance arrangements in place that supports effective scrutiny, challenge and informed decision making.
- 6 The IJB has put in place appropriate arrangements to demonstrate the achievement of Best Value. This includes effective arrangements for managing performance and monitoring progress towards strategic objectives.

Introduction

1. This report summarises the findings arising from the 2021/22 audit of East Renfrewshire Integration Joint Board (the IJB).
2. The scope of the audit was set out in our 2021/22 Annual Audit Plan presented to the 22/06/2022 meeting of the Performance and Audit Committee.
3. This report comprises the findings from:
 - the audit of the IJB's 2021/22 annual accounts; and
 - consideration of the four audit dimensions that frame the wider scope of public audit set out in the Code of Audit Practice 2016 including the arrangements in place at the IJB to secure Best Value.
4. The global coronavirus pandemic has had a considerable impact on the IJB and its partner bodies during 2021/22. This has had significant implications for services, sickness absence levels, and planned projects and activities.

Adding value through the audit

5. We add value to the IJB, through the audit by:
 - identifying and providing insight on significant risks, and making clear and relevant recommendations;
 - regular meetings with the Chief Financial Officers and Accountancy Manager (Deputy Chief Financial Officer), including discussion of any recently issued technical guidance and the impact on the accounts;
 - sharing intelligence and good practice through our national reports ([Appendix 3](#)) and good practice guides; and,
 - providing clear and focused conclusions on the appropriateness, effectiveness and impact of corporate governance, performance management arrangements and financial sustainability.

Responsibilities and reporting

6. The IJB has primary responsibility for ensuring the proper financial stewardship of public funds. This includes preparing annual accounts that are in accordance with proper accounting practices.
7. Also, the IJB is responsible for compliance with legislation, and putting arrangements in place for governance and propriety that enable it to successfully deliver its objectives.

8. Our responsibilities as independent auditor appointed by the Accounts Commission are established by the Local Government in Scotland Act 1973, the [Code of Audit Practice 2016](#) and supplementary guidance, and International Standards on Auditing in the UK.

9. As public sector auditors we give independent opinions on the annual accounts. Additionally, we conclude on:

- the effectiveness of the IJB's performance management arrangements;
- the suitability and effectiveness of corporate governance arrangements;
- the financial position and arrangements for securing financial sustainability; and,
- Best Value arrangements.

10. Further details of the respective responsibilities of management and the auditor can be found in the [Code of Audit Practice 2016](#). and supplementary guidance.

11. This report raises matters from our audit. Weaknesses or risks identified are only those which have come to our attention during our normal audit work and may not be all that exist. Communicating these does not absolve management from its responsibility to address the issues we raise and to maintain adequate systems of control.

12. Our annual audit report contains an agreed action plan at [Appendix 1](#) setting out specific recommendations, responsible officers and dates for implementation. It also includes outstanding actions from last year and the steps being taken to implement them.

Auditor Independence

13. Auditors appointed by the Accounts Commission or Auditor General must comply with the Code of Audit Practice and relevant supporting guidance. When auditing the financial statements auditors must comply with professional standards issued by the Financial Reporting Council and those of the professional accountancy bodies.

14. We can confirm that we comply with the Financial Reporting Council's Ethical Standard. We can also confirm that we have not undertaken any non-audit related services and therefore the 2021/22 audit fee of £27,960 (2020/21: £27,330) as set out in our 2021/22 Annual Audit Plan remains unchanged. John Boyd was appointed as engagement lead part way through the year. Following his appointment, a retrospective review of the audit planning and audit approach were undertaken. As the audit progressed, key areas of audit focus, areas of risk of material misstatement and audit work undertaken to obtain the relevant assurances were reviewed by the engagement lead. We are not aware of any relationships that could compromise our objectivity and independence.

15. This report is addressed to both the IJB and the Controller of Audit and will be published on Audit Scotland's website www.audit-scotland.gov.uk in due

course. We would like to thank the management and staff who have been involved in our work for their co-operation and assistance during the audit.

Audit appointment from 2022/23

16. The Accounts Commission is responsible for the appointment of external auditors to local government bodies. External auditors are usually appointed for a five-year term either from Audit Scotland's Audit Services Group or a private firm of accountants. The current appointment round was due to end in 2020/21 but this was extended for a year so that 2021/22 is the last year of the current appointment round.

17. The procurement process for the new round of audit appointments was completed in May 2022. From financial year 2022/23 Ernst & Young LLP will be the appointed auditor for East Renfrewshire Integration Joint Board. We are working closely with the new auditors to ensure a well-managed transition.

18. A new [Code of Audit Practice](#) applies to public sector audits for financial years starting on or after 1 April 2022. It replaces the Code issued in May 2016.

19. There are several significant changes introduced by the new Code, namely the audit of Best Value across the Integration Joint Board.

20. We would like to thank Board members, Performance and Audit Committee members, Executive Directors, and other staff, particularly those in finance for their co-operation and assistance over the last six years.

1. Audit of 2021/22 annual accounts

The principal means of accounting for the stewardship of resources and performance

Main judgements

Our audit opinion on the annual accounts of East Renfrewshire Integration Joint Board is unmodified.

Our audit opinion on the annual accounts is unmodified

21. The IJB's annual accounts for the year ended 31 March 2022 were approved by the Performance and Audit Committee on 23 November 2022. As reported in the independent auditor's report:

- the financial statements give a true and fair view of the state of affairs of the IJB and its income and expenditure for the year were properly prepared in accordance with the financial reporting framework.
- the management commentary, the audited part of the remuneration report and the annual governance statement were all consistent with the financial statements and properly prepared in accordance with the relevant regulations and guidance.

The annual audit report and accounts were submitted in line with our agreed audit timetable

22. Submission dates for the audited annual accounts and the annual audit report for 2019/20 and 2020/21 were deferred in line with the later dates for producing the annual accounts because of the impact of Covid-19. We agreed with senior officers of the IJB to take advantage of the flexibilities conferred under the Coronavirus (Scotland) Act 2020 and reprofile the timing and delivery of the 2021/22 audit to complete in November 2022. The annual accounts were signed off in line with the revised timetable.

23. The unaudited annual accounts were received on 22 June 2022. Finance staff provided good support to the audit team and the working papers provided electronically were of a good standard. This supported the delivery of an efficient and effective audit that meets our quality standards.

There were no objections raised to the annual accounts

24. The Local Authority Accounts (Scotland) Regulations 2014 require local government bodies to publish a public notice on its website that includes details of the period for inspecting and objecting to the accounts. This must remain on the website throughout the inspection period. The IJB complied with the regulations. There were no objections to the 2021/22 annual accounts.

Overall materiality is £3.2 million

25. We apply the concept of materiality in both planning and performing the audit and in evaluating the effect of identified misstatements on the audit and of uncorrected misstatements, if any, on the financial statements and in forming the opinion in the auditor's report. We identify a benchmark on which to base overall materiality, such as gross expenditure, and apply what we judge to be the most appropriate percentage level for calculating materiality values.

26. The determination of materiality is based on professional judgement and is informed by our understanding of the entity and what users are likely to be most concerned about in the annual accounts. In assessing performance materiality, we have considered factors such as our findings from previous audits, any changes in business processes and the entity's control environment including fraud risks.

27. Our initial assessment of materiality for the annual accounts was carried out during the planning phase of the audit. This was reviewed and revised on receipt of the unaudited annual accounts and is summarised in [Exhibit 1](#).

Exhibit 1 Materiality values

Materiality level	Planning	Final
Overall materiality	£3.0 million	£3.2 million
Performance materiality	£1.8 million	£1.9 million
Reporting threshold	£0.150 million	£0.160 million

Source: Audit Scotland

We have no significant findings to report on the audited accounts

28. International Standard on Auditing (UK) 260 requires us to communicate significant findings from the audit to those charged with governance, including our view about the qualitative aspects of the body's accounting practices. We have no issues to report from the audit

29. [Appendix 1](#) provides our assessment of risks of material misstatement in the annual accounts and any wider audit dimension risks. These risks influence our overall audit strategy, the allocation of staff resources to the audit and indicate how the efforts of the audit team are directed. [Appendix 1](#) also identifies the work we undertook to address these risks and our conclusions from this work.

30. We have obtained audit assurances over the identified significant risks of material misstatement to the financial statements. [Exhibit 2](#) sets out the significant risks of material misstatement to the financial statements we identified in our 2021/22 Annual Audit Plan (tailor if additional significant ROMMs identified during the audit) audit. It summarises the further audit procedures we performed during the year to obtain assurances over these risks and the conclusions from the work completed.

Exhibit 2

2021/22 Significant risks of material misstatement to the financial statements identified in the annual audit plan

Audit risk	Assurance procedure	Results and conclusions
<p>1. Risk of material misstatement due to fraud caused by the management override of controls</p> <p>As stated in International Standard on Auditing 240, management is in a unique position to perpetrate fraud because of management's ability to override controls that otherwise are operating effectively.</p>	<p>Service auditor assurances obtained from the external auditors (Audit Scotland) of East Renfrewshire Council and NHS Greater Glasgow and Clyde, who carry out testing of accruals and prepayments, as well as focused testing of the regularity and cut-off assertions. This is in line with the 2021/22 Integration Joint Boards Protocol for Auditor Assurances issued by Audit Scotland.</p> <p>Agreement of contributions received from partner bodies to be included in the IJB's CIES to letters of assurance provided by East Renfrewshire Council and NHS Greater Glasgow and Clyde.</p> <p>Detailed testing of journal entries used in the preparation of the annual accounts.</p>	<p>Results & Significant Judgements:</p> <p>Testing of regularity and cut-off assertions as well as accruals and prepayments was undertaken by the external auditors of the IJBs partner bodies. No issues were identified which would have an impact on the processing of IJB transactions or our audit approach.</p> <p>The assurance letters received from partner bodies were agreed to the CIES. We concluded that the testing performed by the Council and NHS auditors provided sufficient assurance for the audit of the IJB. No issues were identified.</p> <p>Inquiries were made of individuals involved in the financial reporting process around appropriate or unusual activity relating to</p>

Audit risk	Assurance procedure	Results and conclusions
	Assessment of the estimation methodology applied by the IJB and the reasonableness of the estimates contained in the financial statements.	<p>journal entries as well as a review of the journals processed within in the financial year and no issues were identified.</p> <p>No significant accounting estimates were made by the IJB in the preparation of the accounts.</p> <p>Conclusion:</p> <p>Our testing did not identify any evidence of management manipulating accounting records or overriding control.</p>

There were no identified misstatements in the audited annual accounts.

31. No misstatements were identified in the audited accounts that exceeded our reporting threshold.

32. The 2020/21 set aside figure provided by NHS Greater Glasgow and Clyde was restated within the unaudited accounts. This reduced the overall set aside figure for the prior year by £0.148 million. Our review of the restatement concluded that the movement in prior year values was not material and did not require to be restated. The IJB have removed this restatement from the final 2021/22 accounts and corrected through in year movements.

Progress continues against prior year recommendations

33. The IJB is continuing to work to address the prior year audit recommendations. The IJB recognise that the recommendations will take longer to fully implement. For actions not yet implemented, revised responses and timescales have been agreed with management, and are set out in [Appendix 1](#).

2. Financial management and sustainability

Financial management is about financial capacity, sound budgetary processes and whether the control environment and internal controls are operating effectively.

Main judgements

The IJB has appropriate and effective financial management arrangements in place. The 2021/22 budget identified a funding gap of £4.380 million. Identified savings and transfers from reserves were planned to address this. At the year-end an operational underspend of £0.837 million in 2021/22 was reported. Covid 19 pressures were met through Scottish Government funding.

The IJB's year-end reserve position was £20.752 million. However, the general reserve remains unchanged from the prior year at £0.272 million and is well below the IJB's reserve policy target for uncommitted general reserves to be 2% of the IJBs revenue budget (excluding significant fixed costs such as family health service). The general reserve is currently approximately 0.15% of the 2021/22 revenue budget.

The IJB's medium-term financial outlook (MTFO) covering the period 2022/23 to 2026/27 was refreshed in March 2022. This identified a funding shortfall of around £2.9 million for 2022/23, with cost pressures of around £5.5 million from 2023/24 onwards. As part of the budget strategy review, financial assumptions have been reviewed and updated. Total cost pressures are forecast to range from £17 million to £31 million over the next three-year period based on low, medium and high cost scenarios. East Renfrewshire Integration Joint Board should continue to work with partners to develop a revised financial strategy which ensures the organisation remains financial sustainable.

We have obtained audit assurances over the wider audit dimension risks relating to Sustainability identified in our 2021/22 Annual Audit Plan

34. [Exhibit 3](#) sets out the audit dimension risk relating to financial sustainability we identified in our 2021/22 audit. It summarises the audit procedures we

performed during the year to obtain assurances over these risks and the conclusions from the work completed.

Exhibit 4

Risks identified from the auditor's wider responsibility under the Code of Audit Practice

Audit risk	Assurance procedure	Results and conclusions
<p>1. Financial sustainability – medium and longer-term financial planning</p> <p>The medium-term financial plan presented to the Joint Board in March 2022 outlined financial challenges and uncertainties over the next five years to 2026/27, including the need to achieve savings through change and redesign.</p> <p>The 2022/23 financial plan outlined unfunded cost pressures of £3.147 million. The plan outlines that these costs will be met from identified savings of £0.272 million with the remaining balance of £2.875 million coming from the recovery and renewal programme and supported by budget phasing reserve.</p> <p>There is a risk that East Renfrewshire Integration Joint Board will be unable to achieve a sustainable outturn position going forwards, particularly given the uncertainty around Covid-19 and increasing service demands.</p>	<p>Reviewed the IJBs reported outturn position as part of the financial statements audit.</p> <p>Reviewed medium-term financial plan covering 2022/23 to 2026/27, submitted to Board in March 2022 for review and approval.</p> <p>Assessed the delivery of in-year savings programs.</p> <p>Reviewed the robustness of future savings plans identified.</p>	<p>Results & Significant Judgements</p> <p>From review of the IJBs budget monitoring reports we noted that the reported year end outturn position was an underspend. The final position as at 31 March 2022 was a surplus of £19.267 million.</p> <p>The IJBs unachieved savings for 2021/22 were £3.566 million. These were fully funded by the Scottish Government.</p> <p>The IJB's reserve position at 31 March 2022 is £20.752 million, which was an increase of £10.267 million in-year. However, £9.266 million of the total reserve balance relates to funding allocations received for covid-19.</p> <p>The medium-term financial plan covers the period 2022/23 to 2026/27. This was refreshed in March 2022 and identified a funding shortfall of around £2.9 million for 2022/23, with cost pressures of around £5.5 million from 2023/24 onwards. Further financial challenges are emerging around inflationary pressures. As outlined at paragraph 49, assumptions have been</p>

Audit risk	Assurance procedure	Results and conclusions
		<p>updated as part of the budget strategy exercise.</p> <p>Conclusion</p> <p>The IJB is likely to need in excess of £20 million of savings between 2022 – 2027 in order to deliver a balanced budget, as funding does not match the increasing demands on services and costs.</p>

Recommendation 1

The IJB should engage strategically with partner bodies to review future funding levels and service priorities to ensure service plans developed are affordable and deliver value for money.

Budget processes were appropriate

35. Detailed budget monitoring reports were submitted to the IJB Board throughout the year. The outturn to date and projected year-end outturn position were clearly stated in these reports while the actual year-end outturn position was in line with expectations.

36. The content of the budget monitoring reports reflects the financial impact of Covid-19 and includes an additional section that highlights additional Covid-19 income received and expenditure incurred. This ensured the IJB were aware of how Covid-19 impacted on the overall financial position and outturn.

37. We observed that senior management and members receive regular and accurate financial information on the IJB's financial position and have concluded the IJB has appropriate budget monitoring arrangements.

The IJB returned an underspend in 2021/22

38. The IJB does not have any assets, nor does it directly incur expenditure or employ staff, other than the Chief Officer and Chief Finance Officer. All funding and expenditure for the IJB is incurred by partner bodies and processed in their accounting records.

39. The IJB approved its 2021/22 budget of £160.251 million in March 2022. The budget identified a funding gap of £4.380 million, with planned savings and transfers from reserves as required to address this.

40. The Covid 19 pandemic had a significant impact during 2021/22. The IJB incurred a total of £8.945 million of Covid-19 related expenditure, of which

£3.145 million was drawn down from prior year earmarked reserves. The IJB received additional funding of £15.066 million in-year from the Scottish Government in relation to Covid-19. This resulted in a total of £9.266 million remaining unspent as at 31 March 2022, which was added to the ring-fenced reserves balance in year.

41. The IJB returned an underspend of £10.267 million against a budgeted underspend position of £0.544 million. The underspend includes £9.266 million of ring-fenced funding received from the Scottish Government for Covid-19 expenditure. [Exhibit 4](#) illustrates a high-level summary of funding contributions and total expenditure, which resulted in a surplus on the provision of services. It also shows the movements in reserves during the year.

Exhibit 4 Performance against budget

IJB budget summary	NHSGGC £m	ERC £m	Total £m	Financial outturn £m
Net funding contribution				
Funding contribution from partners	(126.738)	(67.288)	(194.026)	
Resource transfer			(11.934)	
Net funding contribution				(205.96)
Total expenditure				195.633
2021/22 surplus on the provision of services				(10.267)
Represented by:				
Funding received transferred to earmarked reserves			(2.272)	
Funding received transferred to ring-fenced reserves			(11.933)	
Reserves drawn down in year			3.938	(10.267)

Source: East Renfrewshire Integration Joint Board Annual Accounts

Reserve balances at the year-end have increased but the general fund reserve balance remains below the target level

42. Reserves are an integral part of the medium and longer-term financial planning of the IJB and its financial sustainability. Reserves are held as a contingency to mitigate the impact of unanticipated pressures and to meet specific future commitments. At 31 March 2022 the IJB held £11.933 million of ring-fenced funding for local and national priorities which have yet to be delivered. This includes £9.266 million of Covid-19 funding received which will be utilised going forward to support the ongoing response to the Covid-19 pandemic.

43. An additional £2.272 million was transferred to earmarked reserves for specific purposes, including budget saving phases. This brings the IJBs total earmarked reserve balance to £7.153 million.

44. Total reserves at 31 March 2022 were £20.752 million. When the reserves are analysed further, it is evident that a significant proportion of the reserve balance has been identified for a specific purpose in the future. Ring fenced reserves at 31 March 2022 totalled £13.327 million, earmarked reserves account for a further £7.153 million and the general reserve is unchanged from the prior year at £0.272 million.

45. The IJB's reserve policy aims for uncommitted general reserves of 2% of the IJBs revenue budget to be held (excluding significant fixed costs such as family health service). The general reserve is currently approximately 0.15% of the 2021/22 revenue budget. The general fund reserve balance at the year-end falls short of the targeted level.

46. The current reserves held by the IJB are considered appropriate in the short term, however there is a risk that additional general reserves may be required in the longer term given the unprecedented financial challenges facing the IJB. The IJB should consider how to align its general reserve level with its stated reserves policy.

Recommendation 2

The level of general reserves remains unchanged and is currently lower than the IJB's reserve policy target. The reserve policy should be reviewed, and appropriate action taken to bring the level of general reserves held into line with the Board's reserve strategy.

The IJB has a medium-term financial has been updated to reflect the expected impact of Covid-19. However, officers

recognise the ongoing uncertainty means financial assumptions require continuous review

47. Financial sustainability looks forward to the medium and longer term to consider whether the body is planning effectively to continue to deliver its services or the way in which they should be delivered. The IJB approved an updated five-year medium-term financial outlook in June 2021, covering the period 2022/23 – 2026/27. This was refreshed again in March 2022. The medium-term financial outlook supports the development of the current strategic plan. The financial outlook details a range of scenarios and factors that impact on the IJBs ability to deliver the strategic plan, including:

- Anticipated funding levels
- Cost pressures arising from inflation, service demand and changes in legislation
- Cost pressures arising as a result of the on-going response to the Covid-19 pandemic and the future consequences on service demand

48. The outlook is updated annually to recognise changes in the different factors and identifies a cost pressures of around £5.5 million each year from 2022/23 onwards.

49. As part of the 2022/23 budget strategy review current financial assumptions have been updated. Total cost pressures for the IJB range from £17 million to £31 million over the next three years based on scenarios of low, medium and high cost.

Future funding gaps are unlikely to be addressed through efficiency and transformation savings alone

50. The IJB has demonstrated a reasonable track record in the delivery of its agreed savings targets, although this has become increasingly difficult due to increased levels of demand and the pandemic response.

51. Savings targets have been set for 2022/23 and beyond, however efficiency savings and service reforms alone are unlikely to bridge the funding gaps identified in the longer-term without significant impact to the level of service currently delivered by the IJB.

52. The cost pressures identified within the medium-term financial outlook of around £20 million over the five years from 2022/23 is a challenging target. As a result, the IJB is required to make efficiency savings to maintain financial balance. Efficiency savings alongside service reform and prioritisation will address some of the funding gap, however with increasing demand pressures, officers consider that the longer-term gap cannot be bridged through efficiency savings alone. As per [recommendation 1](#), officers should continue to engage with partner bodies around future funding levels.

53. In September 2022, the Scottish Government commenced discussions with IJB's regarding the possible claw back of reserves to meet future funding

pressures. These discussions are ongoing, and the level of claw back will be reflected in the IJB quarter two return.

Financial systems of internal control operated effectively

54. The IJB does not have its own financial systems. It is reliant on the systems of partner bodies NHS Greater Glasgow and Clyde and East Renfrewshire Council for its key financial systems, including ledger and payroll. All IJB transactions are processed through the respective partners' systems and all controls over these systems are within the partner bodies, rather than the IJB.

55. As part of our audit approach, we sought assurances from the external auditors of NHS Greater Glasgow and Clyde and East Renfrewshire Council and confirmed there were no weaknesses in the systems of internal controls for either the health board or the council.

Standards of conduct and arrangements for the prevention and detection of fraud and error were appropriate

56. The IJB does not maintain its own policies relating to the prevention and detection of fraud and error but instead depends on those in place at its partner bodies. The arrangements in place at NHS Greater Glasgow and Clyde and East Renfrewshire Council were reviewed as part of the external audits and the respective teams found them to be adequate. The IJB has a Code of Conduct in place to which members subscribe and the Members' Registers of Interest are publicly available on the IJBs website.

57. We reviewed the arrangements in place at NHS Greater Glasgow and Clyde and East Renfrewshire Council through consideration of the work undertaken by partner body auditors and concluded that appropriate arrangements are in place for the prevention and detection of fraud and error. We are not aware of any specific issues we require to bring to your attention.

4. Governance, transparency and Best Value

The effectiveness of scrutiny and oversight and transparent reporting of information

Main Judgements

East Renfrewshire Integration Joint Board has appropriate governance arrangements in place that supports effective scrutiny, challenge and informed decision making.

The IJB has put in place appropriate arrangements to demonstrate the achievement of Best Value.

The IJB has effective arrangements for managing performance and monitoring progress towards strategic objectives.

Governance arrangements are appropriate and operate effectively

58. The IJB introduced emergency measures in response to the Covid-19 pandemic in March 2020. These included the establishment of a Local Resilience Management Team and the implementation of temporary decision-making arrangements. Whilst these emergency measures have been lifted, the meetings of the Joint Board and Performance and Audit Committee have continued to be held in a virtual environment through 2021/22. This has supported effective scrutiny, challenge, and informed decision-making.

59. The IJB shows a commitment to transparency with all Board and Performance and Audit committee minutes and papers being available on their website, as well as the register of members' interests, how to make a complaint and various performance and strategic reports.

60. Overall governance arrangements are appropriate and support effective scrutiny, challenge and decision making.

Performance reporting was of a good standard

61. Management Commentaries included in the annual accounts should provide information on a body, its main objectives and the principal risks faced. It should provide a fair, balanced, and understandable analysis of a body's

performance as well as helping stakeholders understand the financial statements.

62. We consider that the IJBs management commentary provides an overview of the of the activities of the partnership and the challenges faced. The management commentary reports a true reflection of the financial outturn and provides context around the impact of Covid-19 on final outturn positions and reserves.

Arrangements are in place to secure Best Value

63. Integration Joint Boards have a statutory duty to have arrangements to secure Best Value. To achieve this, IJBs should have effective processes for scrutinising performance, monitoring progress towards their strategic objectives, and holding partners to account.

64. The IJB aims to secure best value through its budget monitoring reports and performance reports, which include sufficient detail and quality to provide those making decisions with the information required. Best value criteria is considered as part of budget decisions and proposals and is an implicit part of reporting. Board members frequently challenge proposals presented to the Joint Board on the basis of what is best for users and with a view to securing best value.

65. The IJB further demonstrates its commitment to securing best value through their consideration of alternative models of service delivery. The HSCP Recovery and Renewal programme was established prior to the pandemic however was paused to enable the required response to Covid-19. Given the challenges facing the IJB and the impact of the pandemic, the focus of the programme changed to transformation with recovery being incorporated. The programme is now established and the Joint Board receive updates on the Recovery and Renewal Programme at each meeting.

66. The HSCP Recovery and Renewal consists of four overarching themes under which projects are aligned, including:

- Recovery, focussing on the transition from recovery to the new normal
- Wellbeing, focussing on staff and IJB partners. Projects include the development of a wellbeing action plan and wellbeing champions.
- Individuals experience, focussing on engagement with service users to reflect on changes to models of service delivery.
- Business systems and processes, focussing on information systems and process improvement.

Revisions to the Integration Scheme are to be concluded

67. The Integration Schemes require to be updated every five years. The integration scheme between East Renfrewshire Council and NHS Greater Glasgow and Clyde was last updated in 2018. The next update of the Integration Scheme is due in 2023. The IJB should liaise with partner bodies to ensure the required timescales are realised.

Review of adult social care services

68. An independent review of adult social care services was published in February 2021. This was requested by the Scottish Government in September 2020 with the primary aim of the review being to recommend improvements to adult social care services in Scotland. The review made a number of recommendations including the set-up of a National Care Service for Scotland that is equal to the NGS and that self-directed support must work better for people with decisions being based on their needs, rights and preferences.

69. The IJB have considered and assessed the review, as well as reporting the findings to the Board. The IJB continues to monitor developments and is actively engaged in discussions around the implementation of the review with partners and stakeholders. The IJB anticipates that the review will have significant impacts for the delivery of social care moving forward, however is ready to support any changes that are adopted and will look to include these in strategic and operational planning, as required.

The IJB was able to maintain service performance levels despite the pandemic

70. The pandemic is expected to have had a substantial impact on performance measures, particularly for services which have been temporarily suspended, are operating at a reduced level or have had to adapt to new ways of working.

71. The Public Bodies (Joint Working) (Scotland) Act 2014 requires the IJB to produce an annual performance report covering areas such as assessing performance in relation to national health and wellbeing outcomes, financial performance and best value, reporting on localities, and the inspection of services.

72. The Board has continued to monitor key performance targets throughout the year. The contents of the IJB's 2021/22 Annual Performance Report were in line with applicable requirements and guidance, and the report itself was considered by the Performance and Audit Committee on 21 September 2022.

73. The Annual Performance Report reflects the work of the Health and Social Care Partnership throughout 2021-22. There are a total of 51 key performance indicators, structured around the strategic priorities in the Interim Strategic Plan 2021/22. Of these 51 key performance indicators; 18 are at or better than target, 1 is close to target (within 5% of target), 16 are below target, 21/22 performance data for 5 of the indicators is currently unavailable and 11 of the indicators are for data only.

74. The IJB has appropriate performance management arrangements in place, which are used to target effective service delivery and support improvement activity. Performance levels are measured against a suite of key performance indicators, comparing current year with prior years. The 2021/22 Annual Performance Report highlights a number of areas where the IJBs performance has shown improvement in 2021/22, including the percentage of those whose care need has reduced following re-ablement (up from 31% in 2020/21 to 60% in 2021/22).

75. The 2021/22 Annual Performance Report also acknowledges a number of areas where improvement is required and sets out key actions the IJB will progress to achieve these improvements, including the percentage of people waiting no longer than 18 weeks for access to psychological therapies (increased from 74% in 2020/21 to 76% in 2021/22).

76. The IJBs performance reflects the impact of the pandemic on service provision. Given the medium to longer term pressures facing the health and social care sector as they look to remobilise services following the pandemic against a backdrop of increasing financial pressures, it is important that the IJBs key strategic targets and performance indicators are re-assessed to ensure they remain appropriate, achievable but challenging to meet the needs of service users in the area. The IJB has begun this work, including the establishment of a working group to review performance reporting. However, understanding the impact of the pandemic and re-basing the performance indicators is a longer-term project.

Recommendation 3

The IJB should continue to work on re-basing relevant targets, to ensure these reflect the impact of the pandemic and wider financial pressures facing the organisation on the IJBs performance.

77. The IJB has effective arrangements in place for managing performance.

National performance audit reports

78. Audit Scotland carries out a national performance audit programme on behalf of the Accounts Commission and the Auditor General for Scotland. During 2021/22 we published some reports which may be of direct interest to the IJB as outlined in [Appendix 3](#).

79. From attendance at Board and Performance and Audit Committees, we are aware that the IJB has arrangements in place for considering and reviewing national reports, including any locally agreed actions.

Appendix 1. Action plan 2021/22

2021/22 recommendations

Issue/risk	Recommendation	Agreed management action/timing
<p>1. Financial sustainability – medium and longer-term financial planning</p> <p>The medium-term financial plan presented to the Joint Board in March 2022 outlined financial challenges and uncertainties over the next five years to 2026/27, including the need to achieve savings through change and redesign.</p> <p>The 2022/23 financial plan outlined unfunded cost pressures of £3.147 million. The plan outlines that these costs will be met from identified savings of £0.272 million with the remaining balance of £2.875 million coming from the recovery and renewal programme and supported by budget phasing reserve.</p> <p>Risk - there is a risk that East Renfrewshire Integration Joint Board will be unable to achieve a sustainable outturn position going forwards, particularly given the uncertainty around Covid-19 and increasing service demands.</p>	<p>The IJB should engage strategically with partner bodies to review future funding levels and service priorities to ensure service plans developed are affordable and deliver value for money.</p> <p>Exhibit 4</p>	<p>The maturity of our IJB has allowed to us to not only recognise the long-standing financial challenges we face, but also take a pragmatic approach to our financial planning. The future uncertainties are unprecedented and still include understanding the impact Covid-19 on demand and complexity of need. The IJB recognised that the 2022/23 budget would again be an iterative process, with funding changes relating to Covid-19 and other initiatives emerging as the year progressed.</p> <p>The IJB also recognised;</p> <ul style="list-style-type: none"> • that without support for Covid-19 costs, we would most likely need to invoke financial recovery planning. • that the reserves strategy in place, pre pandemic, to phase in savings would recommence • the pre-pandemic savings plans were

Issue/risk	Recommendation	Agreed management action/timing
		<p>significantly impacted by covid demands and policy changes.</p> <p>We continue with scenario planning, financial modelling and report the financial position to every IJB meeting. We will continue to work with our partners to articulate these challenges as part of our funding and performance discussions. The Scottish Government may determine some budget conditions that must be collectively met, usually a minimum contribution per partner along with any specific policy funding.</p> <p>Responsible officer: Chief Finance Officer</p> <p>Agreed date: March 2023</p>
<p>2. General Reserve position</p> <p>The general reserve position at 31 March 2022 is £0.272 million, which is below the IJBs reserve strategy recommendation. The IJB reserves strategy recommends that the IJB hold uncommitted reserves of around 2% of the IJBs revenue budget.</p> <p>Risk – there is a risk that the uncommitted reserves held are not sufficient to meet longer-term financial pressures.</p>	<p>The level of general reserves remains unchanged and is currently lower than the IJB’s reserve policy target. The reserve policy should be reviewed, and appropriate action taken to bring the level of general reserves held into line with the Board’s reserve strategy.</p> <p>Paragraph 51</p>	<p>Whilst fully accepting we are not compliant with this policy this is a long-standing position for the IJB. As we have previously reported there is a tension between holding unallocated reserves when we have operated for a number of years with significant financial challenges. Our earmarked reserves strategy has allowed the IJB to prioritise service delivery. Without a significant increase in funding it is unlikely that the optimum 2% level of general reserve will be achieved. Given the future financial outlook it is unlikely there will be any opportunity to invest in our general reserve in the coming years.</p>

Issue/risk	Recommendation	Agreed management action/timing
		<p>Responsible officer: Chief Finance Officer</p> <p>Agreed date: March 2023</p>
<p>3. Key performance indicators</p> <p>The IJBs performance against the key performance indicators reflect the impact of Covid-19, however work is still ongoing to re-base these targets to ensure they reflect a realistic baseline position for the IJB to measure performance against.</p> <p>The IJB are currently working towards this, including establishing a working group to look at performance reporting however have noted this is a longer-term project.</p> <p>Risk – there is a risk that the key performance targets and the IJBs performance against these are not aligned, as a result of the impact of Covid-19.</p>	<p>The IJB should continue to work on re-basing relevant targets, to ensure these reflect the impact of the pandemic and wider financial pressures facing the organisation on the IJBs performance.</p> <p>Paragraph 80</p>	<p>Whilst many of our performance indicators are national or part of a wider Greater Glasgow and Clyde suite of measures we will endeavour to re-base those where we can as we work through our recovery from the pandemic. Covid-19 has had a direct impact on people's health and wellbeing. We still do not understand where we are in a post Covid demand for services. The impact on health including long Covid may still take some time to manifest. This means our performance indicators may need revision over a longer period of time.</p> <p>Responsible officer: Chief Finance Officer</p> <p>Agreed date: March 2023</p>

Follow-up of prior year recommendations

Issue/risk	Recommendation	Agreed management action/timing
<p>4. General reserve position</p> <p>The general reserve position at 31 March 2021 is £272,000 which is below the IJBs reserve strategies recommendation that it holds uncommitted reserves of around 2% of the IJBs revenue budget (excluding significant fixed costs), which equates to around £1 million.</p>	<p>The level of general reserves should be reviewed, and action taken to comply with the stated reserves policy and bring the level of general reserves held into line with the Boards target.</p>	<p>See action plan point 2 above.</p>

Issue/risk	Recommendation	Agreed management action/timing
<p>Risk – there is a risk that the uncommitted reserves held are not sufficient to meet longer-term financial pressures.</p>		
<p>5. Financial Sustainability</p> <p>The IJBs medium-term financial outlook has been updated to reflect the impact of Covid-19. Over the next five years from 2022/23 a potential funding gap has been identified of £22 million.</p> <p>It is unlikely that efficiency savings alone will be sufficient to bridge the funding gap identified over the longer-term without significant impact to the level of service currently delivered by the IJB.</p> <p>Risk – there is a risk that the IJB may not be able to deal with future financial challenges and deliver required savings without adversely impacting service delivery.</p>	<p>Continue to engage with partner bodies in relation to future funding levels, to ensure the IJB remains financially sustainable.</p>	<p>See action plan point 1 above.</p>
<p>6. Key performance indicators</p> <p>The IJBs performance against the key performance indicators reflect the impact of Covid-19, however the targets themselves have not been reviewed to ensure these reflect a realistic baseline position for the IJB to measure performance against.</p> <p>Risk – there is a risk that the key performance targets and the IJBs performance against</p>	<p>Review key performance indicators and, where appropriate, re-base relevant targets to ensure these reflect the impact of the pandemic on the IJBs performance.</p>	<p>See action plan point 3 above.</p>

Issue/risk	Recommendation	Agreed management action/timing
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these are not aligned, as a result of the impact of Covid-19.

Appendix 2. Summary of 2021/22 national performance reports and briefing papers

May

[Local government in Scotland Overview 2021](#)

June

[Covid 19: Personal protective equipment](#)

July

[Community justice: Sustainable alternatives to custody](#)

September

[Covid 19: Vaccination programme](#)

January

[Planning for skills](#)

[Social care briefing](#)

February

[NHS in Scotland 2021](#)

March

[Local government in Scotland: Financial Overview 20/21](#)

[Drug and alcohol: An update](#)

[Scotland's economy: Supporting businesses through the Covid 19 pandemic](#)

East Renfrewshire Integration Joint Board

Draft 2021/22 Annual Audit Report

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Performance and Audit Committee

23 November 2022

East Renfrewshire Integration Joint Board Audit of 2021/22 annual accounts

Independent auditor's report

1. Our audit work on the 2021/22 annual accounts is now substantially complete. Subject to receipt of a revised set of annual accounts for final review and final engagement leader quality review, we anticipate being able to issue unqualified audit opinions in the independent auditor's report on 23 November 2022 (the proposed report is attached at [Appendix A](#)).

Annual audit report

2. Under International Standards on Auditing in the UK, we report specific matters arising from the audit of the financial statements to those charged with governance of a body in sufficient time to enable appropriate action. We present for the Performance and Audit Committee's consideration our draft annual report on the 2021/22 audit. The section headed "Significant findings from the audit in accordance with ISA 260" sets out the issues identified in respect of the annual accounts.

3. The report also sets out conclusions from our consideration of the four audit dimensions that frame the wider scope of public audit as set out in the Code of Audit Practice.

4. This report will be issued in final form after the annual accounts have been certified.

Unadjusted misstatements

5. We also report to those charged with governance all unadjusted misstatements which we have identified during the course of our audit, other than those of a trivial nature and request that these misstatements be corrected.

6. We have no unadjusted misstatements to be corrected.

Fraud, subsequent events and compliance with laws and regulations

7. In presenting this report to the Performance and Audit Committee we seek confirmation from those charged with governance of any instances of any actual, suspected or alleged fraud; any subsequent events that have occurred since the date of the financial statements; or material non-compliance with laws and regulations affecting the entity that should be brought to our attention.

Representations from Section 95 Officer

8. As part of the completion of our audit, we are seeking written representations from the Chief Finance Officer on aspects of the annual accounts, including the judgements and estimates made.

9. A draft letter of representation is attached at [Appendix B](#). This should be signed and returned to us by the Section 95 Officer with the signed annual accounts prior to the independent auditor's report being certified.

Appendix A: Proposed Independent Auditor's Report

Independent auditor's report to the members of East Renfrewshire Integration Joint Board and the Accounts Commission

Reporting on the audit of the financial statements

Opinion on financial statements

I certify that I have audited the financial statements in the annual accounts of East Renfrewshire Integration Joint Board for the year ended 31 March 2022 under Part VII of the Local Government (Scotland) Act 1973. The financial statements comprise the Comprehensive Income and Expenditure Statement, Movement in Reserves Statement, Balance Sheet and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and UK adopted international accounting standards, as interpreted and adapted by the Code of Practice on Local Authority Accounting in the United Kingdom 2021/22 (the 2021/22 Code).

In my opinion the accompanying financial statements:

- give a true and fair view in accordance with applicable law and the 2021/22 Code of the state of affairs of the East Renfrewshire Integration Joint Board as at 31 March 2022 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with UK adopted international accounting standards, as interpreted and adapted by the 2021/22 Code; and
- have been prepared in accordance with the requirements of the Local Government (Scotland) Act 1973, The Local Authority Accounts (Scotland) Regulations 2014, and the Local Government in Scotland Act 2003.

Basis for opinion

I conducted my audit in accordance with applicable law and International Standards on Auditing (UK) (ISAs (UK)), as required by the Code of Audit Practice approved by the Accounts Commission for Scotland. My responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of my report. I was appointed by the Accounts Commission on 26 September 2022. The period of total uninterrupted appointment is one year. I am independent of East Renfrewshire Integration Joint Board in accordance with the ethical requirements that are relevant to my audit of the financial statements in the UK including the Financial Reporting Council's Ethical Standard, and I have fulfilled my other ethical responsibilities in accordance with these requirements. Non-audit services prohibited by the Ethical Standard were not provided to East Renfrewshire Integration Joint Board. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Conclusions relating to going concern basis of accounting

I have concluded that the use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work I have performed, I have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on East Renfrewshire Integration Joint Board's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from when the financial statements are authorised for issue.

These conclusions are not intended to, nor do they, provide assurance on East Renfrewshire Integration Joint Board's current or future financial sustainability. However, I report on East Renfrewshire Integration Joint Board's arrangements for financial sustainability in a separate Annual Audit Report available from the [Audit Scotland website](#).

Risks of material misstatement

I report in my Annual Audit Report the most significant assessed risks of material misstatement that I identified and my judgements thereon.

Responsibilities of the Head of Finance and Resources (Chief Financial Officer) and the Performance and Audit Committee for the financial statements

As explained more fully in the Statement of Responsibilities, the Head of Finance and Resources (Chief Financial Officer) is responsible for the preparation of financial statements that give a true and fair view in accordance with the financial reporting framework, and for such internal control as the Head of Finance and Resources (Chief Financial Officer) determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Head of Finance and Resources (Chief Financial Officer) is responsible for assessing East Renfrewshire Integration Joint Board's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless there is an intention to discontinue East Renfrewshire Integration Joint Board's operations.

The Joint Board is responsible for overseeing the financial reporting process.

Auditor's responsibilities for the audit of the financial statements

My objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. I design procedures in line with my responsibilities outlined above to detect material misstatements in respect of irregularities, including fraud. Procedures include:

- obtaining an understanding of the applicable legal and regulatory framework and how East Renfrewshire Integration Joint Board is complying with that framework;
- identifying which laws and regulations are significant in the context of East Renfrewshire Integration Joint Board;
- assessing the susceptibility of the financial statements to material misstatement, including how fraud might occur; and
- considering whether the audit team collectively has the appropriate competence and capabilities to identify or recognise non-compliance with laws and regulations.

The extent to which my procedures are capable of detecting irregularities, including fraud, is affected by the inherent difficulty in detecting irregularities, the effectiveness of East Renfrewshire Integration Joint Board's controls, and the nature, timing and extent of the audit procedures performed.

Irregularities that result from fraud are inherently more difficult to detect than irregularities that result from error as fraud may involve collusion, intentional omissions, misrepresentations, or the override of internal control. The capability of the audit to detect fraud and other irregularities depends on factors such as the skilfulness of the perpetrator, the frequency and extent of manipulation, the degree of collusion involved, the relative size of individual amounts manipulated, and the seniority of those individuals involved.

A further description of the auditor's responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website www.frc.org.uk/auditorsresponsibilities. This description forms part of my auditor's report.

Reporting on other requirements

Opinion prescribed by the Accounts Commission on the audited part of the Remuneration Report

I have audited the part of the Remuneration Report described as audited. In my opinion, the audited part of the Remuneration Report has been properly prepared in accordance with The Local Authority Accounts (Scotland) Regulations 2014.

Other information

The Head of Finance and Resources (Chief Financial Officer) is responsible for other information in the annual accounts. The other information comprises the Management Commentary, Annual Governance Statement, Statement of Responsibilities and the unaudited part of the Remuneration Report.

My responsibility is to read all the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or my knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If I identify such material inconsistencies or apparent material misstatements, I am required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact. I have nothing to report in this regard.

My opinion on the financial statements does not cover the other information and I do not express any form of assurance conclusion thereon except on the Management Commentary and Annual Governance Statement to the extent explicitly stated in the following opinions prescribed by the Accounts Commission.

Opinions prescribed by the Accounts Commission on the Management Commentary and Annual Governance Statement

In my opinion, based on the work undertaken in the course of the audit:

- the information given in the Management Commentary for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with statutory guidance issued under the Local Government in Scotland Act 2003; and
- the information given in the Annual Governance Statement for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with the Delivering Good Governance in Local Government: Framework (2016).

Matters on which I am required to report by exception

I am required by the Accounts Commission to report to you if, in my opinion:

- adequate accounting records have not been kept; or
- the financial statements and the audited part of the Remuneration Report are not in agreement with the accounting records; or
- I have not received all the information and explanations I require for my audit;

I have nothing to report in respect of these matters.

Conclusions on wider scope responsibilities

In addition to my responsibilities for the annual accounts, my conclusions on the wider scope responsibilities specified in the Code of Audit Practice, including those in respect of Best Value, are set out in my Annual Audit Report.

Use of my report

This report is made solely to the parties to whom it is addressed in accordance with Part VII of the Local Government (Scotland) Act 1973 and for no other purpose. In accordance with paragraph 120 of the Code of Audit Practice, I do not undertake to have responsibilities to members or officers, in their individual capacities, or to third parties.

John Boyd
Audit Director
Audit Scotland
4th Floor
8 Nelson Mandela Place
Glasgow
G2 1BT

Appendix B: Letter of Representation (ISA 580)

John Boyd, Audit Director
Audit Scotland
4th Floor
8 Nelson Mandela Place
Glasgow
G2 1BT

Dear John,

East Renfrewshire Integration Joint Board Annual Accounts 2021/22

1. This representation letter is provided in connection with your audit of the annual accounts of East Renfrewshire Integration Joint Board for the year ended 31 March 2022 for the purpose of expressing an opinion as to whether the financial statements give a true and fair view in accordance with the financial reporting framework, and for expressing other opinions on the remuneration report, management commentary and annual governance statement.
2. I confirm to the best of my knowledge and belief and having made appropriate enquiries of the Performance and Audit Committee, the following representations given to you in connection with your audit of East Renfrewshire Integration Joint Board's annual accounts for the year ended 31 March 2022.

General

3. East Renfrewshire Integration Joint Board and I have fulfilled our statutory responsibilities for the preparation of the 2021/22 annual accounts. All the accounting records, documentation and other matters which I am aware are relevant to the preparation of the annual accounts have been made available to you for the purposes of your audit. All transactions undertaken by East Renfrewshire Integration Joint Board have been recorded in the accounting records and are properly reflected in the financial statements.
4. I confirm that the effects of uncorrected misstatements are immaterial, individually and in aggregate, to the financial statements as a whole. I am not aware of any uncorrected misstatements other than those reported by you.

Financial Reporting Framework

5. The annual accounts have been prepared in accordance with the Code of Practice on Local Authority Accounting in the United Kingdom 2021/22 (2021/22 accounting code), mandatory guidance from LASAAC, and the requirements of the Local Government (Scotland) Act 1973, the Local Government in Scotland Act 2003 and The Local Authority Accounts (Scotland) Regulations 2014.
6. In accordance with the 2014 regulations, I have ensured that the financial statements give a true and fair view of the financial position of East Renfrewshire Integration Joint Board at 31 March 2022 and the transactions for 2021/22.

Accounting Policies & Estimates

7. All significant accounting policies applied are as shown in the notes to the financial statements. The accounting policies are determined by the 2021/22 accounting code, where applicable. Where the code does not specifically apply, I have used judgement in developing and applying an accounting policy that results in information that is relevant and reliable. All accounting policies applied are appropriate to East Renfrewshire Integration Joint Board's circumstances and have been consistently applied.

8. The significant assumptions used in making accounting estimates are reasonable and properly reflected in the financial statements. Judgements used in making estimates have been based on the latest available, reliable information. Estimates have been revised where there are changes in the circumstances on which the original estimate was based or as a result of new information or experience.

Going Concern Basis of Accounting

9. I have assessed East Renfrewshire Integration Joint Board's ability to continue to use the going concern basis of accounting and have concluded that it is appropriate. I am not aware of any material uncertainties that may cast significant doubt on East Renfrewshire Integration Joint Board's ability to continue as a going concern.

Liabilities

10. All liabilities at 31 March 2022 of which I am aware have been recognised in the annual accounts.

11. There are no plans or intentions that are likely to affect the carrying value or classification of the liabilities recognised in the financial statements.

Fraud

12. I have provided you with all information in relation to

my assessment of the risk that the financial statements may be materially misstated as a result of fraud

any allegations of fraud or suspected fraud affecting the financial statements

fraud or suspected fraud that I am aware of involving management, employees who have a significant role in internal control, or others that could have a material effect on the financial statements.

Laws and Regulations

13. I have disclosed to you all known instances of non-compliance or suspected non-compliance with laws and regulations whose effects should be considered when preparing financial statements.

Related Party Transactions

14. All material transactions with related parties have been appropriately accounted for and disclosed in the financial statements in accordance with the 2021/22 accounting code. I have made available to you the identity of all East Renfrewshire Integration Joint Board's related parties and all the related party relationships and transactions of which I am aware.

Remuneration Report

15. The Remuneration Report has been prepared in accordance with the Local Authority Accounts (Scotland) Regulations 2014, and all required information of which I am aware has been provided to you.

Management commentary

16. I confirm that the Management Commentary has been prepared in accordance with the statutory guidance and the information is consistent with the financial statements.

Corporate Governance

17. I confirm that East Renfrewshire Integration Joint Board has undertaken a review of the system of internal control during 2021/22 to establish the extent to which it complies with proper practices set out in the Delivering Good Governance in Local Government: Framework 2016. I have disclosed to you all deficiencies in internal control identified from this review or of which I am otherwise aware.

18. I confirm that the Annual Governance Statement has been prepared in accordance with the Delivering Good Governance in Local Government: Framework 2016 and the information is consistent with the financial statements. There have been no changes in the corporate governance arrangements or issues identified, since 31 March 2022, which require to be reflected.

Balance Sheet

19. All events subsequent to 31 March 2022 for which the 2021/22 accounting code requires adjustment or disclosure have been adjusted or disclosed.

Yours sincerely

Chief Finance Officer

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Meeting of East Renfrewshire Health and Social Care Partnership	Performance and audit Committee
Held on	23 November 2022
Agenda Item	8
Title	Audited Annual Report and Accounts 2021/22
<p>Summary</p> <p>This report provides an overview of the audited annual report and accounts for the Performance and Audit Committee (PAC) covering the period 1 April 2021 to 31 March 2022.</p> <p>The Chair of Performance and Audit Committee will advise the Integration Joint Board of:-</p> <ul style="list-style-type: none"> ▪ any matters arising from the Performance and Audit Committee ▪ the Performance and Audit Committee's decision on the remittance of the audited Annual Report and Accounts to the Integration Joint Board. <p>The Performance and Audit Committee Meeting is immediately prior to the Integration Joint Board on 23 November 2022.</p>	
Presented by	Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)
<p>Action Required</p> <p>The Performance and Audit Committee is requested to:</p> <ul style="list-style-type: none"> • Agree the audited annual report and accounts and remit to the Integration Joint Board for approval • Note and comment on the summary overview of financial performance document for 2021/22 prior to publication on the IJB website. 	
<p>Directions</p> <p><input type="checkbox"/> No Directions Required</p> <p><input type="checkbox"/> Directions to East Renfrewshire Council (ERC)</p> <p><input type="checkbox"/> Directions to NHS Greater Glasgow and Clyde (NHSGGC)</p> <p><input type="checkbox"/> Directions to both ERC and NHSGGC</p>	<p>Implications</p> <p><input checked="" type="checkbox"/> Finance</p> <p><input checked="" type="checkbox"/> Policy</p> <p><input checked="" type="checkbox"/> Workforce</p> <p><input type="checkbox"/> Equalities</p> <p><input checked="" type="checkbox"/> Risk</p> <p><input checked="" type="checkbox"/> Legal</p> <p><input type="checkbox"/> Infrastructure</p> <p><input type="checkbox"/> Fairer Scotland Duty</p>

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

PERFORMANCE AND AUDIT COMMITTEE

23 NOVEMBER 2022

Report by Chief Financial Officer

AUDITED ANNUAL ACCOUNTS 2021/22

PURPOSE OF REPORT

1. The purpose of this report is to provide an overview of the audited annual report and accounts for the Integration Joint Board (IJB) covering the period 1 April 2021 to 31 March 2022.
2. The Chair of the Performance and Audit Committee will advise the IJB of any audit findings.
3. A summary overview of the financial year is included as an easy read summary document.

RECOMMENDATION

4. The Performance and Audit Committee is requested to:
 - Agree the audited annual report and accounts and remit to the Integration Joint Board for approval
 - Note and comment on the summary overview of financial performance document for 2021/22 prior to publication on the IJB website.

BACKGROUND

5. The Public Bodies (Joint Working)(Scotland) Act 2014 was passed by the Scottish Parliament on 25 February 2014 and received Royal Assent in April 2014. This established the framework for the integration of Health and Social Care in Scotland.
6. The IJB is a legal entity in its own right, created by Parliamentary Order, following Ministerial approval of the Integration Scheme. NHS Greater Glasgow and Clyde (NHSGGC) and East Renfrewshire Council have delegated functions to the IJB which has the responsibility for strategic planning, resourcing and ensuring delivery of all integrated services.
7. The IJB is specified in legislation as a 'section 106' body under the terms of the Local Government Scotland Act 1973 and as such is expected to prepare annual accounts in compliance with the Code of Practice on Accounting for Local Authorities in the United Kingdom.

REPORT

8. The audited annual report and accounts for the IJB has been prepared in accordance with appropriate legislation and guidance.
9. The annual report and accounts of the IJB are included at Appendix 1 and, subject to IJB approval, will be signed via the Audit Scotland electronic process. The signing requirements are:

Management Commentary	Chair of the IJB, Chief Officer, Chief Financial Officer
Statement of Responsibilities	Chair of the IJB, Chief Financial Officer
Annual Governance Statement	Chair of the IJB, Chief Officer
Remuneration Report	Chair of the IJB, Chief Officer
Balance Sheet	Chief Financial Officer
Acknowledgement	Chair of the IJB, Chief Officer, Chief Financial Officer

10. It is a statutory requirement that the Chief Financial Officer (being the proper officer) provide Audit Scotland with a letter of representation (ISA580) along with the annual report and accounts. This is included at Appendix 2.
11. The Chief Internal Auditor's Annual Report and the Draft Audit Scotland Annual Report confirm the Annual Report and Accounts for 2021/22 are unqualified, unmodified, meet legislative requirements and are transparent, address best value and are appropriately governed.
12. The Chair of the Performance and Audit Committee will advise the IJB on the key points from this committee and associated presentation of audit findings.
13. The key messages from Audit Scotland are summarised:
- The IJB has appropriate and effective financial management arrangements
 - The level of general reserves the IJB holds is well below our policy level of 2%
 - The medium term financial outlook for the IJB is challenging and we should continue to work with our partners to develop a sustainable strategy
 - The IJB has appropriate governance arrangements in place
 - The IJB has appropriate arrangements in place to demonstrate best value
14. The action plans included at Appendix 1 of the Audit Scotland Annual report detail the 3 recommendations from the audit along with our response:

Recommendation	Response
The IJB should engage strategically with partner bodies to review future funding levels and service priorities to ensure service plans developed are affordable and deliver value for money.	<p>The maturity of our IJB has allowed to us to not only recognise the long standing financial challenges we face, but also take a pragmatic approach to our financial planning. The future uncertainties are unprecedented and still include understanding the impact Covid-19 on demand and complexity of need.</p> <p>The IJB recognised that the 2022/23 budget would again be an iterative process, with funding changes relating to Covid-19 and other initiatives emerging as the year progressed.</p>

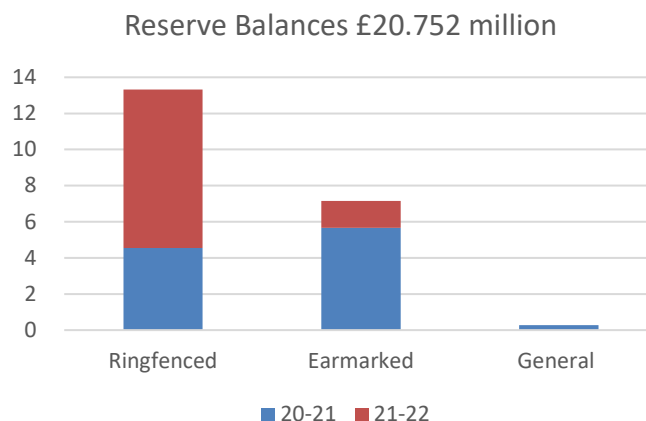
	<p>The IJB also recognised;</p> <ul style="list-style-type: none"> • that without support for Covid-19 costs, we would most likely need to invoke financial recovery planning. • that the reserves strategy in place, pre pandemic, to phase in savings would recommence • the pre-pandemic savings plans were significantly impacted by covid demands and policy changes <p>We continue with scenario planning, financial modelling and report the financial position to every IJB meeting.</p> <p>We will continue to work with our partners to articulate these challenges as part of our funding and performance discussions.</p> <p>The Scottish Government may determine some budget conditions that must be collectively met, usually a minimum contribution per partner along with any specific policy funding.</p>
<p>The level of general reserves remains unchanged and is currently lower than the IJB's reserve policy target. The reserve policy should be reviewed, and appropriate action taken to bring the level of general reserves held into line with the Board's reserve strategy.</p>	<p>Whilst fully accepting we are not compliant with this policy this is a long standing position for the IJB. As we have previously reported there is a tension between holding unallocated reserves when we have operated for a number of years with significant financial challenges. Our earmarked reserves strategy has allowed the IJB to prioritise service delivery. Without a significant increase in funding it is unlikely that the optimum 2% level of general reserve will be achieved.</p> <p>Given the future financial outlook it is unlikely there will be any opportunity to invest in our general reserve in the coming years.</p>
<p>The IJB should continue to work on re-basing relevant targets, to ensure these reflect the impact of the pandemic and wider financial pressures facing the organisation on the IJBs performance.</p>	<p>Whilst many of our performance indicators are national or part of a wider Greater Glasgow and Clyde suite of measures we will endeavour to re-base those where we can as we work through our recovery from the pandemic.</p> <p>Covid-19 has had a direct impact on people's health and wellbeing. We still do not understand where we are in a post Covid demand for services. The impact on health including long Covid may still take some time to manifest. This means our performance indicators may need revision over a longer period of time.</p>

15. As with prior years this action plan will be reported as part of our regular Audit actions progress reporting to the Performance and Audit Committee.

16. The main messages from the annual report and accounts remain unchanged from the unaudited position reported in June and summarised below:
17. We ended the year with an operational underspend of £0.837 million which was 0.54% of our budget for the year. This was marginally better than the position last reported to the IJB in March when the projected outturn was an underspend of £0.554 million.
18. The Covid-19 spend is shown as £8.945 million and we received new funding late in the year of £15.066 million with the balance taken to our reserves.
19. The main variances to the budget were:
- £1.904 million underspend within Older Peoples Nursing, Residential and Daycare Services. This reflects the ongoing trend of reduction in care home admissions but does offset the increase in community activity; predominantly Care at Home.
 - £1.715 million overspend within Intensive Services as our Care at Home costs reflect that we continued to operate a near full service in the second year of the pandemic. This is the position after we applied £0.826 million of winter funding to meet the increases in demand and complexity within this service.
 - £0.458 million underspend within Learning Disability Community Services from a combination of staff turnover and running costs.
20. Our reserves increased significantly during the year, with further allocations received in the final quarter of 2021/22 mainly for winter funding, Primary Care Improvement Plan and Covid-19. This is summarised:

Reserves Movement	£ Million	£ Million
Reserves at 31 March 2021		10.485
Planned use of existing reserves during the year	(3.937)	
Funds added to reserves during the year	14.204	
Net increase in reserves during the year		10.267
Reserves at 31 March 2022		20.752

21. The increase in our reserves is in line with the national position and the vast majority of this relates to Scottish Government ring-fenced funding.



22. We received £11.933 million during the year for ring-fenced activity and used £3.153 million. We can only spend this funding on those initiatives that the funding supports; the majority of this increase relates to Covid-19 and this will support the ongoing response to the pandemic in 2022/23.
23. The IJB are aware of the Scottish Governments intention to clawback unused Covid-19 reserve funding during 2022/23, with the mechanism still to be confirmed.
24. Our earmarked reserves are in place to support a number of projects, provide transitional funding for service redesign, provide bridging finance for in year pressures, add capacity to support services and to smooth impact of demand and timing of spend across multiple years. We spent £0.785 million supporting service pressures and delivering on projects as planned and added £2.272 million.
25. Our general reserve remains unchanged at £0.272 million and is well below the optimum level at a value of 2% of the budget we would ideally hold. The general reserve is currently just under 0.15% of the 2021/22 revenue budget.
26. Given the scale of the financial challenge we faced pre pandemic the IJB strategy to invest where possible in smoothing the impact of savings challenges had not allowed any investment into general reserves. As we have previously discussed, both PAC and the IJB have recognised that whilst this means we are below our policy level the prioritisation has been on long term sustainability and minimising the impact of savings over time on those services we provide. In the event we find ourselves unable to achieve sufficient savings delivery during 2022/23 we may need to un-hypothecate (i.e. un-earmark) reserves to meet operational costs. However the IJB will note from the revenue monitoring position the extensive use of reserves in 2022/23.
27. The unaudited accounts reported in June showed a restatement of the prior year set-aside expenditure for 2020/21, restated from £28.177 million to £28.029 million as colleagues in NHSGGC advised of an error in the previous figures. This reduction of £0.148 million was a result of eliminating expenditure relating to the Royal Hospital for Children included in error. This is notional expenditure to the IJB so has nil impact. Audit Scotland have confirmed this is not material and this restatement is not required. We have however left an explanatory note at Note 14 in the accounts for transparency.
28. As with every year we have taken the opportunity between the unaudited and final version of the Annual Report and Accounts to refine some of our narrative and update our performance information. There are no material changes, however the IJB should note that the medium term financial assumptions have been updated to reflect current thinking:

“In the MTFP published in March 2022 the funding gap in future years could range anywhere from £0 to £5.7 million per year, excluding unknown factors, recent inflation implications and any additional savings requirements in future years.

The current scale of costs pressures now look closer to £9 million to £13 million in 2023/24 and £4 million to £9 million in the following two years. This takes into account the impact of pay, inflation, utilities costs and other economic impacts since April 2022. Therefore the funding gap has significantly increased. The actual funding gap and therefore savings requirement on the IJB will be dependent on the funding settlement for each year.”
29. A summary overview of the financial year is included as an easy read summary document and this is included at Appendix 3.

30. The Chief Financial Officer would like to extend sincere thanks to audit, finance and performance colleagues for invaluable input and support in a particularly challenging period.

CONSULTATION AND PARTNERSHIP WORKING

31. This has been another challenging year with the complexities of the pandemic response; the associated reporting and accounting requirements; and significant funding changes late in the year.

IMPLICATIONS OF THE PROPOSALS

32. All finance, workforce, risk, legal and policy implications are included in the report above.

DIRECTIONS

33. There is no requirement to issue directions.

CONCLUSIONS

34. The preparation of the annual report and accounts for the IJB meets all legislative requirements. There has been no material movement to the projected outturn last reported to the IJB. There are no significant governance issues.

RECOMMENDATIONS

35. The Performance and Audit Committee is requested to:
- Agree the audited annual report and accounts and remit to the Integration Joint Board for approval
 - Note and comment on the summary overview of financial performance document for 2021/22 prior to publication on the IJB website.

REPORT AUTHOR AND PERSON TO CONTACT

Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)

Lesley.Bairden@eastrenfrewshire.gov.uk

0141 451 0746

2 November 2022

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

Annual Report and Accounts 2020/21

https://www.eastrenfrewshire.gov.uk/media/7153/PAC-Item-08-24-November-2021/pdf/PAC_Item_08_-_24_November_2021.pdf?m=637727683975070000

Annual Report and Accounts 2019/20

https://www.eastrenfrewshire.gov.uk/media/4451/IJB-audited-annual-Report-and-accounts-2019-2020/pdf/IJB_Annual_Report_and_Accounts_2019-20_FINAL_web.pdf?m=637441633455770000

Annual Report and Accounts 2018/19

https://www.eastrenfrewshire.gov.uk/media/2248/Integration-Joint-Board-Item-07-25-September-2019/pdf/Integration_Joint_Board_Item_07_-_25_September_2019.pdf?m=637351714681700000

Annual Report and Accounts 2017/18

https://www.eastrenfrewshire.gov.uk/media/2825/Integration-Joint-Board-Item-06-26-September-2018/pdf/Integration_Joint_Board_Item_06_-_26_Setpember_2018.pdf?m=637375997307930000

Annual Report and Accounts 2016/17

https://www.eastrenfrewshire.gov.uk/media/3666/Integration-Joint-Board-Item-10-27-September-2017/pdf/Integration_Joint_Board_Item_10_-_27_September_2017.pdf?m=637394072745500000

Annual Report and Accounts 2015/16

PAC Paper: 18-03-2020 - Review of Integration Joint Board Financial Regulations and Reserves Policy

The relevant legislation is The Public Bodies (Joint Working)(Scotland) Act 2014, Local Government Scotland Act 1973

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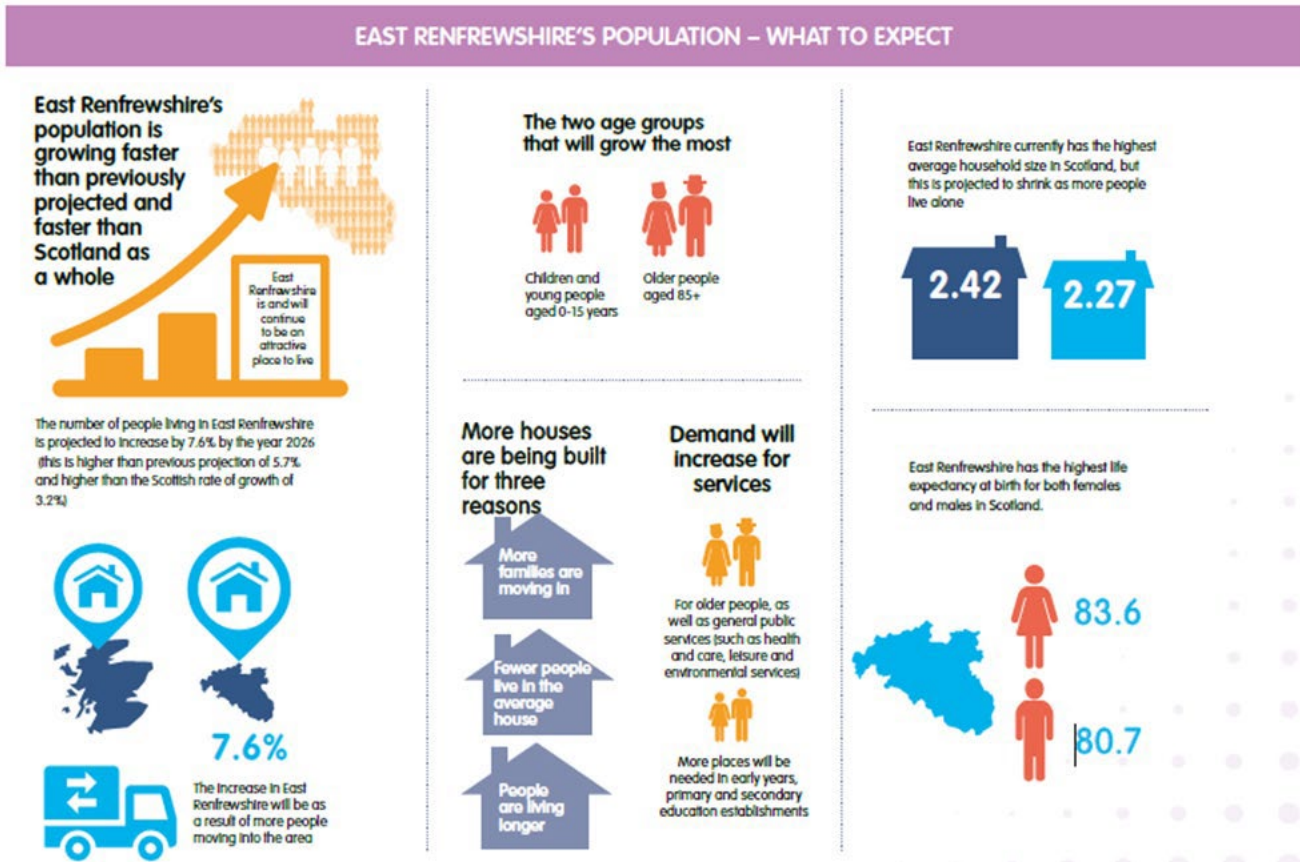
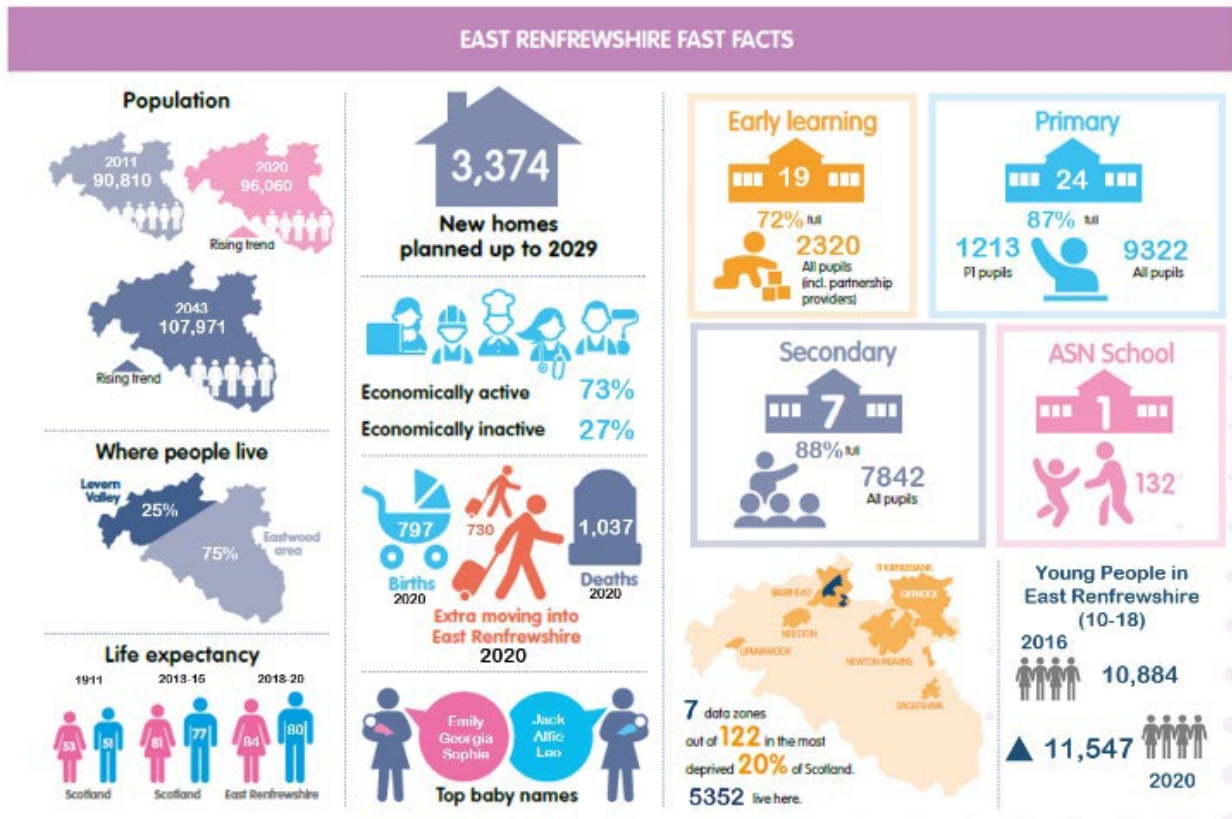
East Renfrewshire Health and Social Care Partnership Integration Joint Board

Audited Annual Report And Accounts 2021/22

Covering the period 1st April 2021 to 31st March 2022



About East Renfrewshire – Some General Facts and Figures



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East Renfrewshire covers an area of 174 square kilometres and borders the City of Glasgow, East Ayrshire, North Ayrshire, Renfrewshire and South Lanarkshire.

Our population is growing and reached 96,060 in 2020. Geographically 75% of the population live in the Eastwood area (Busby, Clarkston and Williamwood, Eaglesham and Waterfoot, Giffnock, Netherlee and Stamperland, Newton Mearns and Thornliebank) and 25% live in the Barrhead area (Barrhead, Neilston and Uplawmoor).

East Renfrewshire has an increasing ageing population with a 44% increase in the number of residents aged 85 years and over during the last decade.



Management Commentary

Introduction

East Renfrewshire Integration Joint Board (IJB), was legally established on 27th June 2015 and has the strategic responsibility for planning and delivery of health and social care services for the residents of East Renfrewshire. The vision, values, priorities and outcomes we aim to achieve through working together with the people of East Renfrewshire to improve lives are set out in our HSCP 3 Year Strategic Plan for 2022/25.

The IJB is a legal body in its own right, as set out in the legislation, the Public Bodies (Joint Working) (Scotland) Act 2014, which established the framework for the integration of health and social care in Scotland.

The Integration Scheme for the IJB sets out how we will meet the requirements of this legislation. We are responsible for planning, commissioning and delivery of services for children and adults from both of our partners, East Renfrewshire Council and NHS Greater Glasgow and Clyde, and also have the planning responsibility for our population's use of large hospital based services along with housing aids and adaptations. The Integration Scheme provides a detailed breakdown of all the services the IJB is responsible for.

The management commentary in this report discusses our;

- Strategic Planning
- Key Messages and Operational Highlights for 2021/22 including:
 1. how our services have continued to respond to the Covid-19 pandemic
 2. staffing impacts and wellbeing
 3. service highlights during the year
 4. moving towards recovery
 5. the key risks and uncertainties we are facing
- Performance Achievements for the year
- Financial Performance
- Future Challenges
- Conclusion

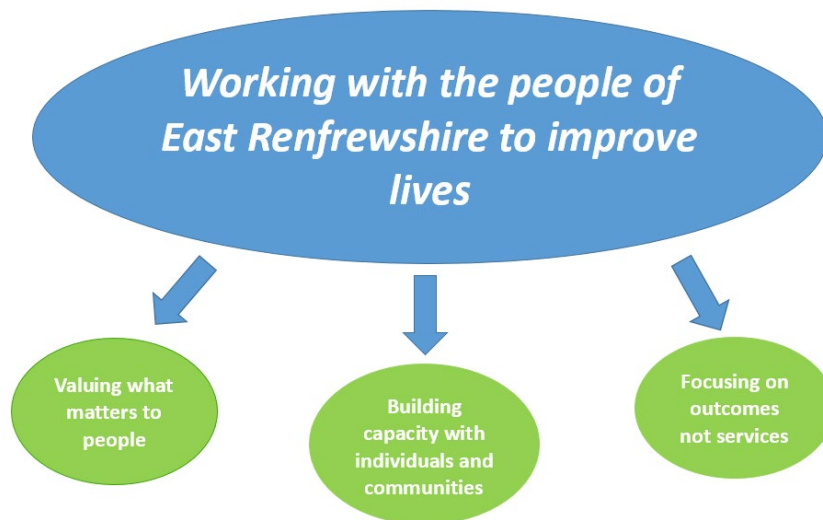
Strategic Planning

The East Renfrewshire HSCP Strategic Planning Group (SPG) has responsibility for the development of our Strategic Plan, supports ongoing review of the plan and provides oversight of the delivery of our strategic priorities. The SPG is a local forum for discussion on emerging themes and key initiatives in health and social care. The SPG is a multi-agency group made up of HSCP officers, IJB voting members, statutory stakeholders (e.g. housing colleagues), third and independent sector representatives, GPs, people who use our services and unpaid carers.

We have two localities; Eastwood and Barrhead. This best reflects hospital flows with the Eastwood Locality linking to the South Glasgow hospitals and the Barrhead Locality to the Royal Alexandra Hospital in Paisley. Our management and service structure is designed around our localities and we continue to develop planning and reporting at a locality level.

Strategic Plan 2022/25

Our current Strategic Plan covers the 3 year period 2022-2025 and sets out the shared ambitions and strategic priorities of our partnership; and how we will focus our activity to deliver high quality health and social care to the people of East Renfrewshire. Our partnership vision statement is:



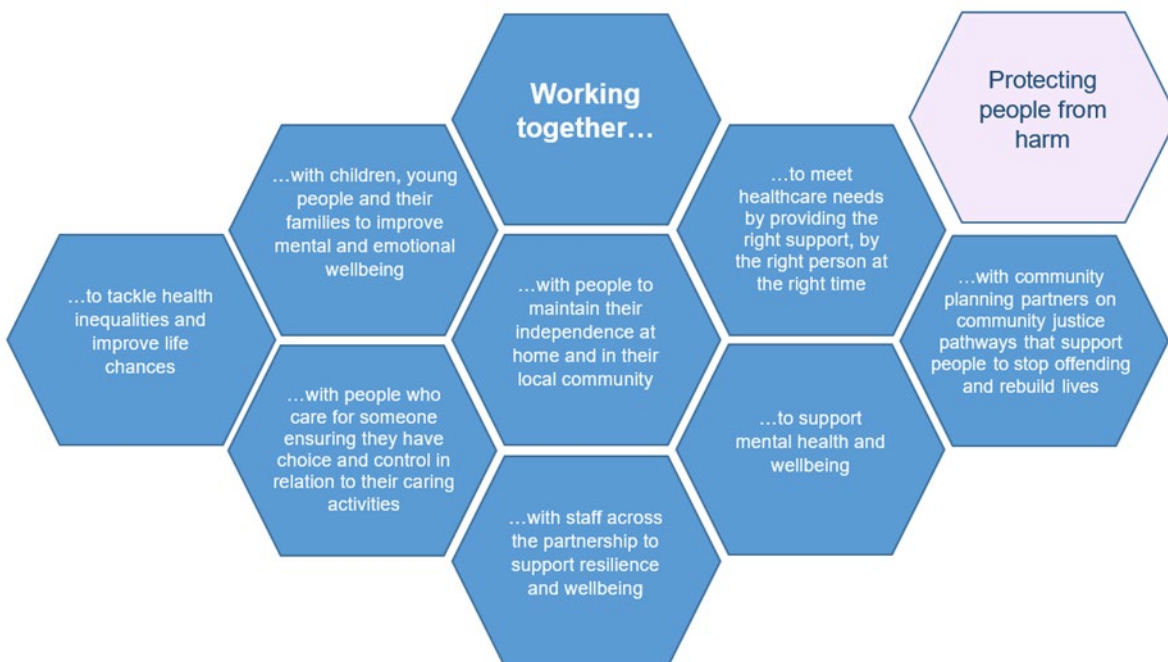
This document and our Annual Performance Report demonstrate how we have supported delivery of our strategic priorities.

Our current plan has been produced during an exceptionally challenging period as we continued to support local residents and our workforce through the Covid-19 pandemic. Our experiences over this time have reinforced the benefits of partnership working, building on our long standing 17 years of integration (as a Community Health and Care Partnership prior to 2015) and should place us well to begin to understand the lasting impacts of the pandemic.

As we work towards recovery and renewal we continue to strengthen our supportive relationships with independent and third sector partners, recognise the increased levels of participation in our communities and informal support within our localities that have developed in response to Covid-19.

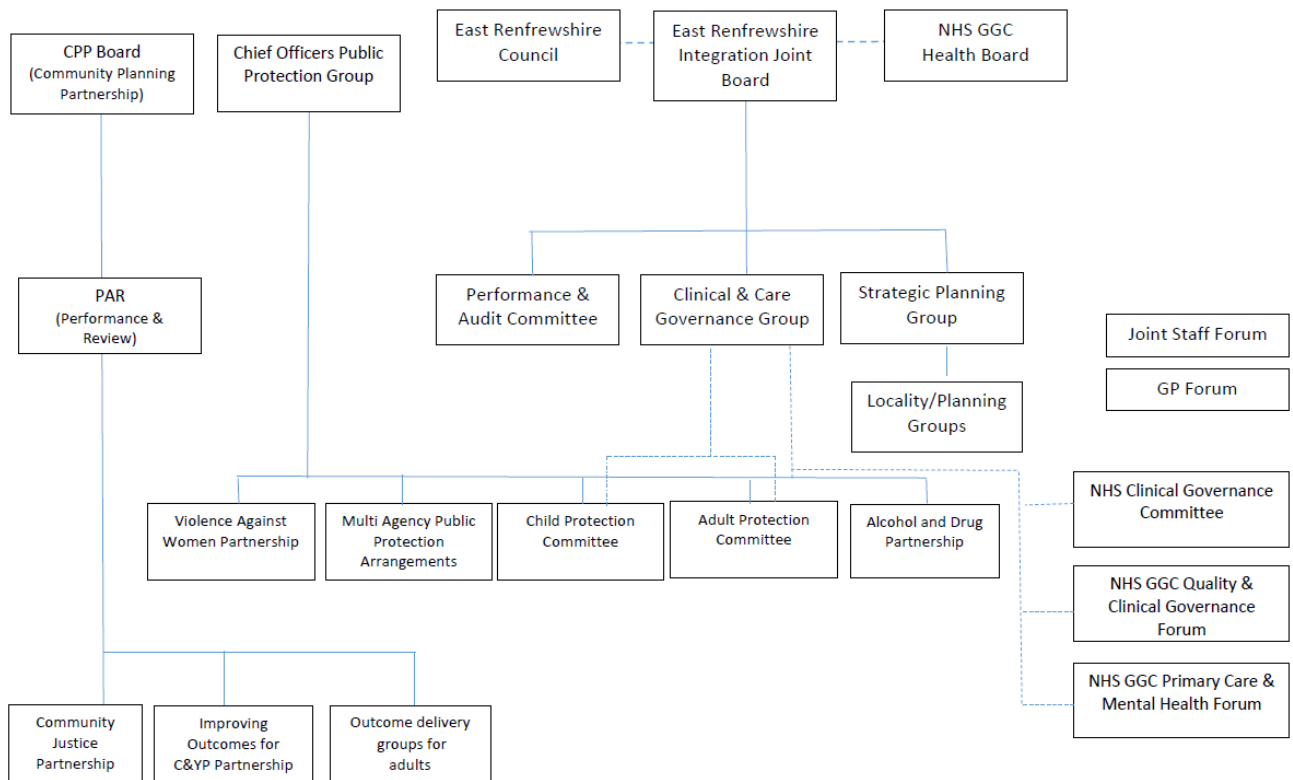
We recognise that we need to extend beyond traditional health and social care services to a long term wider partnership with our local people, carers, volunteers, community organisations, providers and community planners. Work has started to develop a collaborative commissioning model to support how we will work differently.

We have reviewed our performance in relation to the strategic priorities in our previous Strategic Plan, assessed our demographic profile and the lessons learned from the Covid-19 pandemic. In consultation with key stakeholders and communities we have reviewed our strategic priorities and areas of focus within these. The majority of our high-level priorities remain unchanged from our previous three-year plan but we agreed, as part of our 1 year interim plan for 2020/21, to widen our focus on mental health to include community wellbeing and have added a strategic priority relating to the wellbeing of our workforce. We also include a section looking at our cross-cutting, multi-agency work to protect people from harm. This activity underpins and enables the delivery of our other strategic priorities.



The IJB continues to build on the long standing delivery of integrated health and care services within East Renfrewshire and the continued and valued partnership working with our community, the third, voluntary and independent sectors, facilitating the successful operation of the Health and Social Care Partnership (HSCP).

The chart below shows the governance, relationships and links with partners which form the IJB business environment.



Key Messages and Operational Highlights for 2021/22

1. The Continued Impact of Covid-19

The year of 2021/22 was shaped by the continued challenge of the Covid-19 pandemic; another unprecedented year where our staff across the HSCP continued to respond with incredible resilience, commitment and creativity. This dedication allowed us to work through the emergence of the Omicron variant and successfully deliver services despite a very difficult and challenging winter period.

We did make a tentative start towards recovery during the year, however the emergence of the Omicron variant meant this was relatively short lived as we needed to again focus on response. The HSCP and our partner organisations experienced increased staff absence with resulting pressures within the health and social care system, which reflected the national position.

Care Home Support

Support to our care homes continued during the year using our existing support and governance mechanisms including the Care Home Collaborative Hub model developed as part of the ongoing response to the pandemic.

This model comprises three multidisciplinary teams (MDT) (Hubs) of health professionals to support care homes: one to cover Glasgow City HSCP; one hosted by Inverclyde HSCP on behalf of the remaining 5 partnerships; and, one central 'specialist' team with shared resources spanning both local Hubs. Additionally, the MDT Hubs are supported via a Corporate Hub in order to strengthen professional oversight and robust governance. The overarching purpose is to enable care home residents to live their best life aligned to what matters to them. The Hubs provide professional and practical support, oversight and leadership offering a range of additional support in key areas including, but not limited to, infection prevention and control, person centeredness, food fluid and nutrition, tissue viability, quality improvement, leadership and education.

Our local care homes experienced another challenging year with a number of outbreaks due to the new variant, although residents experienced milder symptoms with the majority reported as being asymptomatic. As community transmission was high this affected a number of staff.

The Care Home Assurance Tool (CHAT) visits are now established within East Renfrewshire, supported by the Care Home Collaborative colleagues as required. Due to the significant impact of the Omicron variant CHAT visits to the care homes were paused over the winter period. The visits are now scheduled and some have taken place since September (delayed from the initial plan of June due to a number of Covid outbreaks). These visits are supported by a new electronic version of the CHAT, as part of self-evaluation in advance of the joint visit undertaken by HSCP staff. It is expected all visits will be completed by November 2022 and initial feedback and evaluation is positive.

Covid-19 Vaccination Programme

The HSCP has delivered vaccinations to care home residents and staff, as well as housebound patients within East Renfrewshire as part of the winter vaccination programme. Based on population figures at the start of the programme, 93% of care home residents received their Covid-19 booster, and 90% also received their flu vaccine.

Care home staff were also offered vaccination alongside residents during vaccination visits in addition to accessing the mass vaccination clinics to support optimal uptake of the Covid-19 vaccination.

In total the partnership provided 27% of care home staff with Covid-19 vaccines and 43% with flu vaccines. We continue to encourage uptake of booster vaccinations for all staff.

The housebound patients' vaccination programme commenced in October 2021 for all patients fitting the eligibility criteria. Since October 1,019 covid-19 booster and 895 flu vaccinations have been administered to housebound patients.

We continue to ensure that all new admissions to care homes and new housebound patients are offered a Covid-19 vaccination and/or are up to date with the Covid-19 vaccination programme. Delivery of the second booster for over 75s and those who are assessed as clinically extremely vulnerable commenced in March 2022 and was completed within that month.

Hosted Learning Disability Service

Our service continued to operate at full capacity across our three in-patient units throughout the second year of the pandemic. Significant clinical complexity resulted in a need for very close support which meant the service had to activate contingency plans and access staff from our own community learning disability team as well as those across Greater Glasgow and Clyde. Increased Covid-19 infection rates particularly from the Omicron variant meant a particularly challenging few months for this service.

Other Support

The Personal Protective Equipment (PPE) hub set up by HSCP support staff remained in operation and continued to distribute essential protective supplies and Lateral Flow Device test kits during the year.

The HSCP supported the mass vaccination clinics run by Greater Glasgow and Clyde in partnership with East Renfrewshire Council. The weekend clinics held at Barrhead Health and Care Centre represented a significant commitment to ensure the centre worked efficiently and safely, with staff supporting the non-clinical operation through facilities management of the buildings, queue management and liaison with clinical staff.

Whilst the Community Assessment Centre within East Renfrewshire only operated for a short period during the first year of the pandemic we provided staffing, albeit limited to when we could release capacity, to those centres that remained in place until the closure of these facilities in March 2022.

Our nationally hosted service, the Scottish Centre of Technology for the Communication Impaired (STCTI) has continued to support individuals across 12 health boards in Scotland making full use of remote and virtual communication.

Governance during Covid-19

A number of governance arrangements we put in place at the beginning of the pandemic continued during the year including; drawing on business continuity plans to support critical functions and supporting prioritisation of resources, maintaining our Local Resilience Management Team, participating in local and national working groups and maintaining a Covid-19 Risk Register.

We also set up a daily huddle as part of our response to the Omicron variant and this allowed our senior managers to meet each morning to assess the situation, prioritise workloads and support service delivery in a very challenging period. This also provides an informal support network which has been invaluable.

We worked very closely with our partners' governance and response arrangements during the pandemic, including East Renfrewshire Council, NHS Greater Glasgow and Clyde, National Chief Officer, Chief Social Work Officer and Chief Financial Officer meetings.

Our IJB met as planned throughout the second year of the pandemic virtually. This allowed us to maintain our full governance requirements and ensure our statutory obligations were met. Regular communications to the IJB and to our workforce remain in place.

Our Annual Governance Statement provides a comprehensive overview of all governance and assurance activity.

Financial Impact of Covid-19 and Funding Support

The ongoing operational implications from the Covid-19 outbreak are summarised above and the mechanism for co-ordination and consolidation of our local and system wide response was reported to the Scottish Government as part of the Local Mobilisation Plan submitted by NHS Greater Glasgow and Clyde Health Board; this plan covered the community and acute response across the totality of the Health Board area.

The additional activity was significant, in line with 2020/21, and the Scottish Government provided funding to support the associated costs of responding to the pandemic. This included supporting response, sustainability and maintaining new ways of working. We continue to follow the Local Authority (Scotland) Account Advisory Committee (LASAAC) guidance on Accounting for Coronavirus (Covid-19) Grants / Funding streams and our treatment of the £15.066 million funding and associated £8.945 million of costs reflect this. The funding position is summarised:

Covid-19 Related Expenditure Summary:	£ million
Additional services and staffing including Mental Health Assessment, Community Treatment, Flu, GP, staffing across all response activity	3.689
Infrastructure, equipment, PPE	0.109
Sustainability payments to partners	1.581
Unachieved savings due to limited capacity	3.566
Total Expenditure	8.945
New Funding Received (£15.001m ERHSCP and £0.065m NHSGGC for Family Health Service spend)	15.066
Earmarked Reserve from 2020/21	3.145
Total Funding	18.211
Balance to Earmarked Reserve	9.266

The costs relating to the PPE Hub and testing activity have been met centrally and therefore do not impact the IJB.

2. Staffing and Wellbeing

We have also seen significant recruitment and retention challenges and as the pandemic continued we are also seeing an increasingly fatigued workforce; we are placing a significant focus on supporting staff health and wellbeing, both within the HSCP and with our partners to support our collective staff as best we can.

Our strong local partnerships allow us to continue to respond with innovation and collaborative working with and in support of our local communities.

The Scottish Government recognised the pressures across health and social care and provided additional funding to support winter pressures, to increase capacity and help address recruitment and retention. We received £3.124 million, of which we spent £2.112 million and will take the balance of £1.012 million into 2022/23:

Initiative	£ million	Purpose and Application
Interim Care	0.703	To support delayed discharge pathways with more appropriate care and support. This funding is non-recurring for a six month period from November 2021. We spent £0.198 million and will take £0.505 million into 2022/23.
Care at Home Capacity	1.089	To expand capacity to address increased need and acuity. This funding is recurring. We spent £1.053 million and will take £0.036 million into 2022/23.
Multi-Disciplinary Teams	0.351	To support cross system working including focus on delayed discharge. This funding is recurring. We spent £0.084 million and will take £0.267 million into 2022/23.
Social Care Pay Uplifts	0.741	To support care provider social care staff hourly rate increases. This funding is recurring. We spent the full £0.741 million.
Additional Health Care Assistants	0.240	To support capacity and increase staffing by up to 16 posts. This funding is recurring We spent £0.036 million and will take £0.204 million into 2022/23.

Our 2022/23 allocation for this funding is £3.472 million of which £0.352 million is non-recurring for Interim Care. We have also received further funding of £0.361 million in 2022/23 to strengthen Social Work. This funding has allowed us to progress activity included within the updates on 2021/22 and our plans for 2022/23 as discussed throughout the report.

Care Homes

Like a number of other services, care homes continued to face staff shortages due to the national recruitment crisis across the social care sector. They have managed to stay above minimum staffing levels by implementing contingency plans and recruiting using agency and bank staff. Care Homes have also been creative in terms of extending current staff hours and redeploying staff from non-front facing roles.

Improving Access to Our Services through our “Front Door”

We recognised the ongoing impact of the pandemic and we commissioned an independent review of the HSCP front door for adult services in partnership with individuals, families and professionals in order to ensure that the single point of access to adult services was fit for purpose as we move towards recovery.

The review noted many strengths of our approach, mainly in terms of our rapid access occupational therapy service, our talking points and the single point of access model. The report also noted some key recommendations to strengthen our front door including:

- Widening the multi-disciplinary element of our front door to include access to rehabilitation physiotherapy, rehabilitation nurse (prescriber), pharmacy, technology enabled care and money advice.
- Operating a daily huddle model to support our right support, right place, and right person approach to referrals.
- Strengthening our call handling model to free up our social work assistants to complete less complex assessments.
- Streamlining our assessment and resource allocation process to reduce duplication and make more user friendly for individuals and families.

The new front door model was launched in June 2022.

Our Support Staff

There has been continued significant work behind the scenes from our staff who support the front line service delivery illustrated in this report. Their continued dedication and hard work remains invaluable, supporting service delivery, keeping our workplaces safe, ensuring colleagues had the equipment they needed to work through the pandemic, assessing and mitigating risk and whilst continuing to deliver their day to day work.

Wellbeing

We previously recognised the enormity of the work of the HSCP in responding to the Covid-19 pandemic and the potential effects of vicarious trauma across our workforce as they support our citizens facing grief, loss and significant changes in their lives. The East Renfrewshire HSCP Wellbeing Group developed a Wellbeing Plan ‘YOU care...WE care too’ to support our workforce to cope with the emotional and physical impact on their overall health and wellbeing.

Supporting staff wellbeing was a key focus in 2021/22. The ways our staff have been working has changed significantly with home working becoming the norm for large groups of employees. The HSCP recruited a Health and Wellbeing Lead Officer; this role has been specifically designed to acknowledge the growing pressures and challenges upon the health and social care workforce, and to create resources, tools and services to support the health and wellbeing of all staff and volunteers who work for and support the HSCP.

In early 2022, we carried out a wellbeing survey to gather the views of the HSCP staff and our external partner staff groups to determine what we could provide to support their wellbeing and resilience. Based on this, a range of activities and supports have been provided including online Pilates, bespoke mindfulness groups, local staff walking groups and our Spring Kindness Challenge where we nominated and thanked staff who have gone the extra mile. The next stage was our summer of wellness with a range of wellbeing sessions and activities for staff, partners and volunteers.

3. Service Highlights during the Year

Children and Families

Our children's services are continuing to see increasing demand and complexity following the pandemic. In particular we are seeing more children with diagnosed neurodevelopmental disorders and a higher prevalence of families in crisis leading to more of these children coming under child protection and an associated increase in numbers coming into care. In 2021/22 we have seen a 30% increase in children placed on the Child Protection Register compared with the previous year. The number of children accommodated in residential care settings has increased by a quarter and 83% have a neurodevelopmental diagnosis.

The Child and Adolescent Mental Health Service (CAMHS) continued to experience high demand and an increase in urgent referrals. In 2021/22 there was a 20% increase in referrals to CAMHS duty system for urgent or crisis referrals. Referrals to our alternative (Tier 2) services, Healthier Minds and the Family Wellbeing service are increasing while monthly referrals to CAMHS have been reducing. As a result we are beginning to see more positive performance on CAMHS waiting times and the service is aiming to meet its 18 week target for the longest wait by the middle of 2022/23. Healthier Minds referrals were 435 for 2021/22 (599 since the service began in November 2020) and there were 142 referrals to the Family Wellbeing Service.

East Renfrewshire CAMHS has been responding to a significant increase in eating disorder presentations (49 in October 21 – the highest of NHS GGC CAMHS Teams) and has established a dedicated eating disorder clinic. This response has resulted in a significant reduction in hospital presentations: 5 in 2021/22; down from 14 in 2020/21.

In 2021, there was a 112% increase in referrals to the Autism Diagnostic Team compared with the pre-pandemic level. Referrals from CAMHS to East Renfrewshire School Age Autism Team have risen from 16 in 2020 to 50 in 2021. The HSCP and our partners are working together to quantify the level of need in order to be clearer on how to ensure service responses are effective and the workforce is sufficiently equipped to help children with a neurodevelopmental diagnosis and their families in the right way.

We received notification of a Joint Inspection of services for children at risk of harm in East Renfrewshire on 22nd February 2022. The Care Inspectorate published their report August 2022 and we received a grade of 'Excellent' for Quality Indicator 2.1 – Impact on Children and Young People. This quality indicator, with reference to children at risk of harm, considers the extent to which children and young people:

- Feel valued, loved, fulfilled and secure
- Feel listened to, understood and respected
- Experience sincere human contact and enduring relationships
- Get the best start in life

Community Justice

Unpaid work was significantly impacted by the pandemic with Community Payback Orders suspended on 23rd March 2020 at the beginning of the pandemic. At the end of March 2022 there remained a backlog of 6,200 hours of unpaid work for East Renfrewshire although this is low in comparison with other areas and only represents 1% of Scotland's overall backlog. During the year we increased our capacity to deliver by focusing on outdoor work activities and increasing the number of supervisors available. We were able to secure additional workshop

premises to support this activity including carpentry and joinery with items made by service users being used in community projects, nursery schools and care homes.

Supporting People at Home

Whilst our day services premises remained closed, our learning disability staff continued to work with our provider partners to maintain outreach and wraparound support for individuals and their families.

Over the last year we have continued to support people to live independently and well at home, despite additional demand pressures on our services due to more people seeking support at home as well as presenting with increased levels of frailty and complexity. 89% reporting 'living where you/as you want to live' is down slightly from 91% in the previous year.

Our Care at Home service operated under continued pressure with increased referrals and reducing capacity amongst our partner providers. Quarterly referral rates have doubled since the pre-pandemic levels of 2019/20 and this level of demand was sustained during 2021/22.

We saw a 48% reduction in support packages from partner providers between 2020/21 and 2021/22 reflecting recruitment challenges and absence levels as a result of Covid-19.

Increased frailty, complexity of need and de-conditioning has been evident with higher referrals to rehabilitation services and twice as many Care at Home service users requiring two or more carers during visits. The percentage of people with reduced care need following re-ablement / rehabilitation is now 60% which is up from 31% at the end of 2020/21 and is nearing the 67% pre-pandemic level.

We have an ongoing recruitment campaign within Care at Home to help us manage increasing demand and to mitigate as best we can recruitment and retention challenges across the sector.

Our Older Peoples Day Services staff continued to support Care at Home for much of the year however a blended model has recently been introduced building on regular discussion with carers to identify the types of support needed.

Supporting People Experiencing Mental Ill-Health and Supporting Recovery from Addiction

Our teams have continued to deal with increased demand across mental health and addiction services due to increases in complexity. With the aid of technology we have been able to offer people ongoing support throughout the pandemic, and access to treatment has been maintained. The percentage of people waiting no longer than 18 weeks for access to psychological therapies is 76%.

The HSCP has been supporting mental health and wellbeing concerns across care groups related to stress and distress related to the pandemic but also wider economic problems. There have been increased caseloads across all teams (Community Addictions, Adult Mental Health, Primary Care Mental Health, and Older Adults). For older people we are seeing overall wellbeing impacted by issues such as isolation and reduction in mobility.

Despite the challenges our mental health hospital admissions remain low (at 1.4 admissions per 1,000 population).

Reducing Unplanned Hospital Care

Patterns of accident and emergency and unplanned hospital admissions remained altered by the ongoing impact of pandemic and the HSCP has worked with other partnership and acute services in the Glasgow area to continue to develop new services and pathways to support both response and a move into recovery.

Our discharge from hospital without delay averaged 7 delays for 2021/22 despite the operational challenges and pressures.

The HSCP continues to work in partnership with Voluntary Action East Renfrewshire to investigate opportunities for the third sector to provide support for older or vulnerable people, when discharged from hospital to settle back home and re-connect/make new connections within their community. This will provide community led support for individuals who have been disproportionately affected by the pandemic and associated restrictions.

Supporting Unpaid Carers

Working with East Renfrewshire Carers Centre, we have continued to ensure that carers have had access to guidance and support throughout the year. Check-in calls to carers were delivered by ER Carers, and carers have been offered support to set up and manage a peer support Facebook Group. The Mental Health Carers group continued to run virtually.

The percentage of those asked reported that their 'quality of life ' needs were being met was 92% slightly up from 91% in 2020/21.

Protecting and Supporting Adults at Risk of Harm

Adult Support and Protection (ASP) activity is significantly higher than pre-pandemic levels but decreased during 2021/22 compared with 2020/21.

We have seen an increase in support required as a result of domestic abuse / violence against women. There were 125 victims and 205 children discussed at MARAC (Multi-Agency Risk Assessment Conference) - an increase of 4% and 19% respectively compared to the previous year.

Women's Aid supported 1,226 women and children; a 52% increase across the service and included the highest recorded number of women supported in outreach services in the past two years. Despite this additional demand for support we have continued to improve personal outcome measures for women and families affected by domestic abuse throughout the pandemic.

With our partner East Renfrewshire Council we have identified a new refuge property to support this activity in future years.

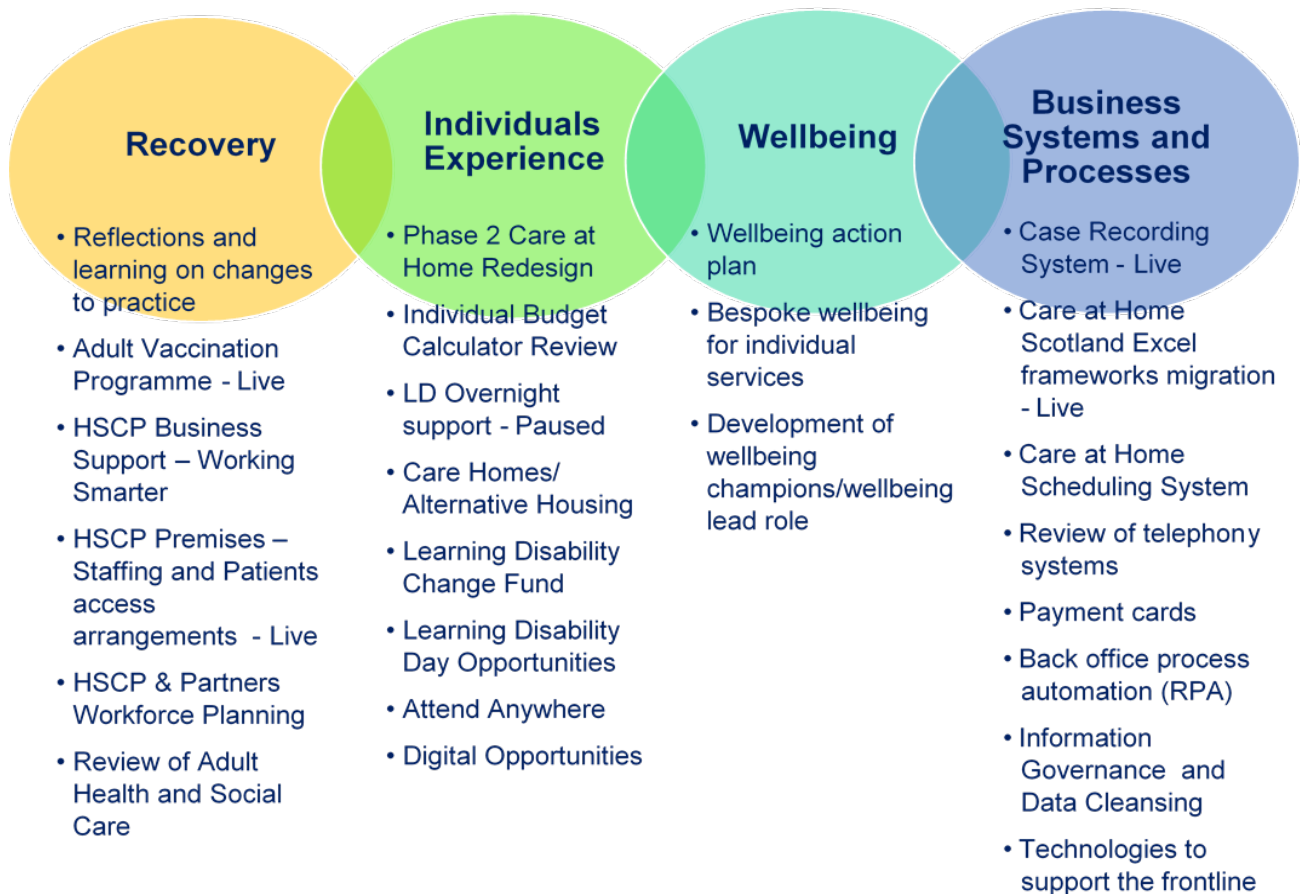
4. Moving Towards Recovery

Whilst many of the services the HSCP provides are critical and continued to operate through the pandemic, we continue to learn from the last 2 years and will use this knowledge to enhance our recovery. We also need to recognise the future landscape may change with the development of a National Care Service.

Recovery and Renewal Programme

During the year we made some progress on our Recovery and Renewal programme. Work has now fully commenced. This a complex and multi-year programme of work that will allow us to emerge from the pandemic in a stronger and more informed position to face the challenges ahead. This should not only support the significant financial challenge we are facing but will also help us to better understand and quantify the longer term impact of Covid-19 on our population.

There are currently 16 projects identified, with 9 of these live and further projects will be added as we develop the programme. Our Recovery and Renewal Programme is summarised:



Independent Review of Adult Social Care and National Care Service Consultation

The Independent Review of Adult Social Care in Scotland was published in February 2021; the principal aim of the review was to recommend improvements to adult social care in Scotland,

primarily in terms of the outcomes achieved by and with people who use services, their carers and families; and the experience of people who work in adult social care.

The Scottish Government subsequently put forward proposals for the establishment of a National Care Service for Scotland (NCS). The proposals go beyond the scope and recommendations of the review and set out how a NCS will define the strategic direction and quality standards for community health and social care in Scotland. The consultation proposes that the NCS will have reformed local delivery boards which work with the NHS, local authorities, and the third and independent sectors to plan, commission and deliver support and services.

The consultation ran from 9th August to 2nd November 2021 and sought views from stakeholders on:

- Improving Care for People
- Establishing a National Care Service
- The Scope of the National Care Service
- Reforming Integration Joint Boards (as new Community Health and Social Care Board)
- Improving Commissioning of services
- Regulation
- Valuing people who work in social care

It is expected that the findings from the consultation exercise will have significant impacts for the delivery of social care and wider supports moving forward. We will support any changes that are adopted and will look to include these in our strategic and operational planning, our governance and operational activity as required.

5. Key Risks and Uncertainties

The IJB regularly reviews its Strategic Risk Register over the course of each year; there are currently 13 risks rated red, amber or green (RAG) depending on the likelihood and severity of the impact. The table below summarises those risks and shows the RAG rating of each after mitigating actions to minimise impact.

Area of Risk	RAG
Death or significant harm to a vulnerable individual	Amber
Scottish Child Abuse Inquiry	Amber
Child, Adult and Multi-Agency Public Protection Arrangements	Green
Financial Sustainability	Red
Failure of a provider	Amber
Access to Primary Care	Amber
Increase in Older Population	Amber
Workforce Planning and Change	Amber
Increase in children & adults with additional support needs	Amber
In-House Care at Home Service	Amber
Failures within IT Systems	Green
Covid-19 & Recovery	Amber
Analogue to Digital Switchover	Amber

The link to our strategic risk register is included at the end of this document. The full risk register provides details of all the risks above and shows the risk rating pre and post mitigating actions.

The one red risk post mitigating actions is Financial Sustainability. This has been a red risk for a number of years for the HSCP given the pre-pandemic savings required to deliver a balanced budget, managing demographic and demand pressures, managing the complexity and volatility of prescribing costs, the continued impact of Covid-19 and recent economic factors including inflation, particularly fuel and utilities. The IJB members are fully aware of the challenges and risks we are facing and this is regularly discussed at meetings and seminars.

In addition to our Strategic Risk Register, each service area holds an operational risk register and business continuity plan. There is a separate risk register for Covid-19 activity. In addition to the risks shown above there are also a number of uncertainties facing the IJB and these are identified in the future challenges section within this report.

2021/22 Performance Achievements

In addition to our quarterly reports we publish an Annual Performance Report which is made publicly available on our website in line with statutory guidance. The Annual Performance report demonstrates how we review our performance for 2021/22 against local and national performance indicators and against the commitments within our Strategic Plan.

As we have outlined in this report the Covid-19 pandemic has continued to impact on how we have delivered services during the year. Despite progressing our recovery during the year, the emergence of the Omicron variant during the winter months had a significant impact on progress. The HSCP and our partner organisations experienced increased staff absence with resulting pressures within the health and social care system. As the pandemic has continued we have seen an increasingly fatigued workforce. This year we have also seen significant recruitment and retention challenges in the sector impacting on our performance. However, despite these challenges, we have maintained or improved performance in many areas. Some service areas are further forward in their recovery from the pandemic while others remain impacted by disruption.

Our performance information shows that despite the continuing pressures of the pandemic there has been strong progress across service areas. Throughout the period we have seen excellent collaboration across the HSCP and with our independent, third and community sector partners. And we are seeing positive improvement across many of our performance indicators.

Over the course of 2021/22 Covid-19 response activity has happened in addition to our planned operational priorities and our recovery work. Much of the performance data for 2021/22 reflects the direct impact of the pandemic on operational activity and changed behaviours among the population during the pandemic period.

In spite of the continuing impact of the pandemic, we note the following performance headlines including key achievements and areas where we were not able to meet normal targets:

- Strong performance on supporting permanence for our care experienced children; and positive outcomes for child protection cases. Although our balance of care for children is positive we have seen a 25% increase in the number children accommodated in residential care settings during the pandemic. The Child and Adolescent Mental Health Service (CAMHS) continues to experience high demand and an increase in urgent referrals. However, referrals to our alternative (Tier 2) services, Healthier Minds and the Family Wellbeing service are increasing while monthly referrals to CAMHS have been reducing. As a result we are beginning to see more positive performance on CAMHS waiting times at the end of 2021/22.
- Criminal justice work was significantly impacted by the pandemic. However, our services are recovering and were meeting target for completion of unpaid work placements within court timescales. Our backlog of unpaid work to be completed is currently 6,200 hours, among the lowest in Scotland, and we have increased our capacity to meet this backlog.
- Despite seeing a significant increase in referrals for support, we have continued to improve personal outcome measures for women and families affected by domestic abuse during the pandemic
- In supporting people to maintain their independence at home we saw an improvement in outcomes following re-ablement (i.e. reduced care) from 2020/21 although we have not returned to pre-pandemic performance levels and this remains an area for improvement. Performance continues to reflect increased frailty, complexity of hospital discharge, and pressures on service as a consequence of the pandemic.
- During 2021/22 we have continued to deal with increased demand across mental health and addiction services due to increases in complexity. We saw improved performance for drug and alcohol service waiting times, and the proportion of service users moving through treatment to recovery services. Waiting times for access to psychological therapies declined during the Omicron phase and were below target for the year. The service is working to build staff capacity to move back towards target.
- Despite increased unplanned hospital activity we remain ahead of target for emergency admissions and A&E attendances. During the reporting period we have seen an increase in discharges with delay. This is being driven by the pressure on care at home services which is restricting access.
- Support for our unpaid carers continued during the pandemic. Latest data shows maintained performance on outcomes for carers.
- In terms of organisational performance, sickness absence across Council and NHS staff groups increased compared with 2020/21 but remained lower than the pre-pandemic level. Performance on responding to complaints remained below target, reflecting staff pressures during the period.




The data shows that despite the ongoing challenges resulting from the pandemic we have continued to support our most vulnerable residents and have performed well against many of our outcome-focused performance indicators. Through our recovery and renewal planning and the delivery of our next Strategic Plan for 2022-2025 we will ensure that our priorities and approaches meet the changing needs of our population.

Our recovery and improvement actions as we move beyond the pandemic include the following areas; many of which are reflected in our Recovery and Renewal programme outlined in the Moving Towards Recovery section of our Management Commentary;

- Redesign of service delivery building on lessons from the pandemic e.g. Care at Home, Learning Disability, and Day Opportunities.
- Review and development of our customer journey with those who use our services
- Development of digital opportunities for connectivity and service delivery (e.g. Attend Anywhere)
- Ongoing development of our adult vaccination programmes and other winter planning
- Delivery of a Workforce Wellbeing Action Plan and support for staff wellbeing across the partnership
- Continued development of our workforce planning arrangements, including how our support functions align to service delivery
- Review how and when we use our premises ensuring we maintain safety standards, whilst meeting service requirements and maximising flexibility to allow us to continue to respond rapidly to change
- Establish arrangements to meet the priorities set out in the National Review of Adult Social Care
- Case Recording System Replacement
- Development of staff Health & Wellbeing Theme led by Lead Officer
- Migration of Care at Home and other providers to Scotland Excel Framework
- Staff Engagement Tool Scoping Exercise

The extract below shows the headline indicators we look at each year to assess our performance. The RAG status and trend arrows are explained below. Intended performance direction is given in the description of each indicator (i.e. 'increase' or 'decrease').

Key to performance status	
Green	Performance is at or better than the target
Amber	Performance is close (approximately 5% variance) to target
Red	Performance is far from the target (over 5%)
Grey	No current performance information or target to measure against

Direction of travel*	
	Performance is IMPROVING
	Performance is MAINTAINED
	Performance is WORSENING

*For consistency, trend arrows always point upwards where there is improved performance or downwards where there is worsening performance including where our aim is to decrease the value (e.g. if we successfully reduce a value the arrow will point upwards).

Strategic Priority 1 - Working together with children, young people and their families to improve mental wellbeing								
Indicator	2021/22	Current Target	2020/21	2019/20	2018/19	2017/18	2016/17	Trend from previous year
Children and young people starting treatment for specialist Child and Adolescent Mental Health Services within 18 weeks of referral (<i>INCREASE</i>)	55%	90%	61%	78%	74%	89%	90%	↓
Balance of Care for looked after children: % of children being looked after in the Community (LGBF) (<i>INCREASE</i>)	*	Data only	91.1%	94.9%	98.0%	93.6%	91.5%	↓

*2021/22 data not yet available from Public Health Scotland

Strategic Priority 2 - Working together with people to maintain their independence at home and in their local community								
Indicator	2021/22	Current Target	2020/21	2019/20	2018/19	2017/18	2016/17	Trend from previous year
Number of people self-directing their care through receiving direct payments and other forms of self-directed support. (<i>INCREASE</i>)	458	600	551	575	514	491	364	↓
Percentage of people aged 65+ who live in housing rather than a care home or hospital (<i>INCREASE</i>)	97%	97%	97%	97%	96%	97%	97%	▬
People reporting 'living where you/as you want to live' needs met (%) (<i>INCREASE</i>)	89%	90%	91%	88%	92%	84%	79%	↓

Strategic Priority 3 - Working together to support mental health and well-being								
Indicator	2021/22	Current Target	2020/21	2019/20	2018/19	2017/18	2016/17	Trend from previous year
Percentage of people waiting no longer than 18 weeks for access to psychological therapies (<i>INCREASE</i>)	76%	90%	74%	65%	54%	80%	56%	↑
% of service users moving from drug treatment to recovery service (<i>INCREASE</i>)	9%	10%	6%	16%	22%	12%	9%	↑

Strategic Priority 4 - Working together to meet people's healthcare needs								
Indicator	2021/22	Current Target	2020/21	2019/20	2018/19	2017/18	2016/17	Trend from previous year
Acute Bed Days Lost to Delayed Discharge (Aged 18+ including Adults with Incapacity) (<i>DECREASE</i>) (MSG data)	4,546	1,893	2,342	1,788	2,284	1,860	2,704	↓
No. of A & E Attendances (adults) (<i>DECREASE</i>) (MSG data)	16,877	18,335	13,677	20,159	20,234	19,344	18,747	↓
Number of Emergency Admissions: Adults (<i>DECREASE</i>) (MSG data)	7,894	7,130	6,517	7,538	7,264	7,432	8,032	↓
% of last six months of life spent in a community setting (<i>INCREASE</i>) (MSG data)	90%	86%	90%	88%	86%	85%	86%	▬

Strategic Priority 5 - Working together with people who care for someone ensuring they are able to exercise choice and control in relation to their caring activities								
Indicator	2021/22	Current Target	2020/21	2019/20	2018/19	2017/18	2016/17	Trend from previous year
People reporting 'quality of life for carers' needs fully met (%) (<i>INCREASE</i>)	92%	72%	91%	92%	78%	72%	70%	↑

Strategic Priority 6 - Working together with our partners to support people to stop offending								
Indicator	2021/22	Current Target	2020/21	2019/20	2018/19	2017/18	2016/17	Trend from previous year
Community Payback Orders - Percentage of unpaid work placement completions within Court timescale. <i>(INCREASE)</i>	81%	80%	75%	71%	84%	92%	96%	↑
% Change in women's domestic abuse outcomes <i>(INCREASE)</i>	87%	70%	84%	79%	64%	65%	66%	↑

Strategic Priority 7 - Working together with individuals and communities to tackle health inequalities								
Indicator	2021/22	Current Target	2020/21	2019/20	2018/19	2017/18	2016/17	Trend from previous year
Increase the number of smokers supported to successfully stop smoking in the 40% most deprived SIMD areas. (This measure captures quits at three months and is reported 12 weeks in arrears.) <i>(INCREASE)</i>	60	16	66	74	6	20	27	↓
Premature mortality rate per 100,000 persons aged under 75. (European age-standardised mortality rate) <i>(DECREASE)</i>	333	Data Only	334	295	308	301	297	↑

Financial Performance

Funding 2021/22

The net total health and social care funding from our partners for financial year 2021/22 was £184.536 million:

	£ Million
NHS Greater Glasgow and Clyde Primary Care	99.079
NHS Greater Glasgow and Clyde Large Hospital Services	27.892
East Renfrewshire Council Social Care	57.167
East Renfrewshire Council Housing Aids and Adaptations	0.398
Total Net Funding	184.536

The Comprehensive Income and Expenditure Statement (CIES) (page 50) shows the IJB gross income as £223.173 million, as that statement shows service income, grant funding and resource transfer which are included within the net funding from our partners in the table above. The purpose of the CIES presentation is to show the gross cost of the services we provide.

The legislation requires the IJB and Health Board to put in place arrangements to support the set aside budget requirements for unscheduled care (for large hospital services). The Greater Glasgow and Clyde wide Unscheduled Care Commissioning Plan continues to evolve and the latest plan and financial framework was last presented to the IJB in March 2022.

Resource Transfer shows NHS Greater Glasgow and Clyde specific funding for historic bed closures and is used to purchase care packages and community-based services. The historic Social Care Fund which was allocated by the Scottish Government to IJBs, via the NHS funding stream, to meet specific costs such as living wage and other fair work practices and adult demographic pressures is included within resource transfer.

Financial Performance 2021/22

The annual report and accounts for the IJB covers the period 1st April 2021 to 31st March 2022. The budgets and outturns for the operational services (our management accounts) are reported regularly throughout the year to the IJB, with the final position summarised:

Service	Budget	Spend	Variance (Over) / Under	Variance (Over) / Under
	£ Million	£ Million	£ Million	%
Children & Families	14.102	14.122	(0.020)	(0.14%)
Older Peoples Services	23.500	21.596	1.904	8.10%
Physical / Sensory Disability	5.655	5.624	0.031	0.55%
Learning Disability – Community	16.033	15.575	0.458	2.86%
Learning Disability – Inpatients	8.822	8.822	-	0.00%
Augmentative and Alternative Communication	0.226	0.226	-	0.00%
Intensive Services	13.472	15.187	(1.715)	(12.73%)
Mental Health	5.361	5.225	0.136	2.54%
Addictions / Substance Misuse	2.135	2.114	0.021	0.98%
Family Health Services	27.704	27.704	-	0.00%
Prescribing	16.588	16.588	-	0.00%
Criminal Justice	0.016	0.011	0.005	31.25%
Finance and Resources	22.632	22.615	0.017	0.08%
Net Expenditure Health and Social Care	156.246	155.409	0.837	0.54%
Housing	0.398	0.398	-	-
Set Aside for Large Hospital Services	27.892	27.892	-	-
Total Integration Joint Board	184.536	183.699	0.837	0.54%

The £0.837 million operational underspend (0.54%) is marginally better than the reporting taken to the IJB during the year and this underspend will be added to our budget phasing reserve. The main variances to the budget were:

- £1.904 million underspend in within Older Peoples Nursing, Residential and Day-care Services. This reflects the ongoing trend of reduction in care home admissions but does offset the increase in community activity; predominantly Care at Home.
- £1.715 million overspend within Intensive Services as our Care at Home costs reflect that we continued to operate a near full service in the second year of the pandemic. This is the position after we applied £0.826 million of winter funding to meet the increases in demand and complexity within this service.
- £0.458 million underspend within Learning Disability Community Services from a combination of staff turnover and running costs.

We received full Covid-19 support for unachieved savings of £3.566 million during the year as the continued focus on response meant we still did not have capacity to progress the work required to deliver redesign.

The financial performance table above includes the £8.945 million we spent on Covid-19 activity and as this was fully funded by the Scottish Government there is nil impact on the operational variance of each service.

The IJB receives regular and detailed revenue budget monitoring throughout the year.

The set aside budget is shown as nil variance as this currently is not a cash budget to the HSCP and the annual amount reported is agreed each year with NHS Greater Glasgow and Clyde. The actual expenditure share for 2021/22 was identified as £28.177 million.

Whilst Covid-19 resulted in a reduction in activity (equating to £2.9 million against our notional budget) there is nil cash impact. Increased expenditure due to Covid-19; staff costs, increased beds and pathways, cleaning, testing, equipment and PPE were fully funded by the Scottish Government. As outlined earlier, work is ongoing to agree the mechanism for bringing the set aside budget into an operational stage and this includes ensuring a balanced budget will be achieved.

A number of services are hosted by the other IJBs who partner NHS Greater Glasgow and Clyde and our use of hosted services is detailed at Note 4 (Page 58). The hosted services are accounted for on a principal basis, as detailed at Note 11 (Page 65).

The information above reflects our management accounts reporting throughout 2021/22 whilst the CIES (Page 50) presents the financial information in the required statutory reporting format; the movement between these of £9.430 million is a result of the management accounting treatment of reserves:

Reconciliation of CIES to Operational Underspend	£ Million	£ Million
IJB operational underspend on service delivery		0.837
Reserves planned use during the year	(3.938)	
Reserves added during the year	13.368	
Net movement between management accounts and CIES		9.430
IJB CIES underspend		10.267

Total Use of Reserves During 2021/22	£ Million
Reserves planned use during the year	(3.938)
Reserves added from operational underspend and new funding	14.205
Total Reserves added during 2021/22	10.267

Reserves

We used £3.938 million of reserves in year and we also invested £14.205 million into earmarked reserves, with the majority of this increase from Scottish Government ring-fenced funding (£11.933 million). The year on year movement in reserves is set out in detail at Note 8 (Page 63-64) and is summarised:

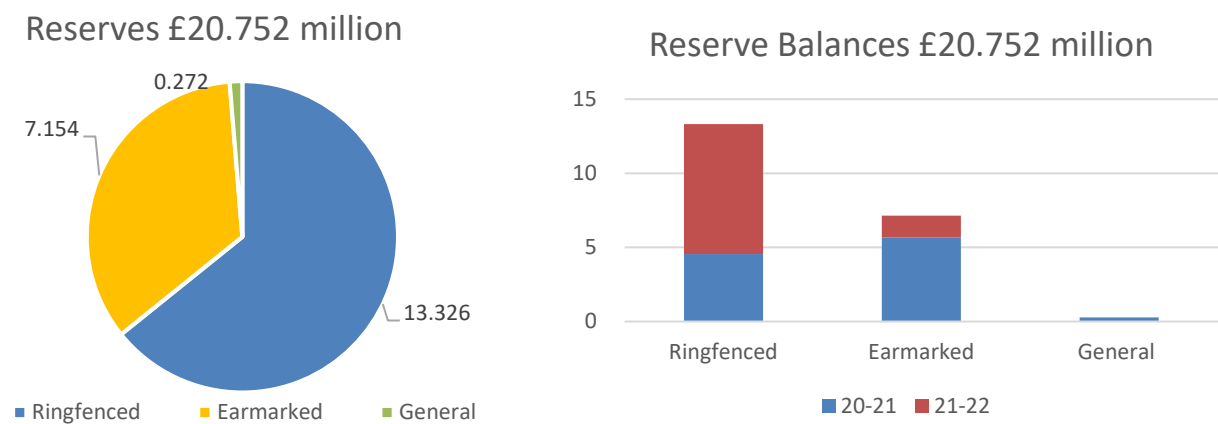
Reserves Movement	£ Million	£ Million
Reserves at 31 March 2021		10.485
Planned use of existing reserves during the year	(3.938)	
Funds added to reserves during the year	14.205	
Net increase in reserves during the year		10.267
Reserves at 31 March 2022		20.752

The purpose, use and categorisation of IJB reserves is supported by a Reserves Policy and Financial Regulations, both of which were reviewed in September 2021.

The reserves of the IJB fall into three types:

- Ring-fenced: the funding is earmarked and can only be used for that specific purpose
- Earmarked: the funding has been allocated for a specific purpose
- General: this can be used for any purpose

The current balance of £20.752 million for all reserves falls in these three reserves types:



Ring-Fenced Reserves

The majority of the increase in reserves relates to specific ring-fenced funding we have received from the Scottish Government during 2021/22 with £11.933 million added during the year and £3.153 million used. We can only spend this funding on those initiatives that the funding supports; the majority of this increase relates to Covid-19 and this will support the ongoing response to the pandemic in 2022/23.

We only spent £0.008 million of non Covid-19 ring-fenced reserves during the year and we are working on plans to utilise the balances within the scope of each area of activity during 2022/23 as we work towards recovery.

The increase in ring-fenced funding during 2021/22 is not unique to East Renfrewshire and mirrors the national position.

Earmarked Reserves

Our earmarked reserves are in place to support a number of projects, provide transitional funding for service redesign, provide bridging finance for in year pressures, add capacity to support service initiatives and to support longer term cost smoothing and timing of spend across multiple years.

Within our earmarked reserves we spent £0.785 million supporting service pressures and delivering on projects as planned. We added £2.272 million mainly from our operational underspend (£0.837 million) and in year CAMHS funding (£0.888 million) which we will use to support this service in 2022/23. The balance relates to a number of smaller projects and initiatives with the detail provided at Note 8 (page 63-64).

General Reserves

Our general reserve remains unchanged at £0.272 million and is well below the optimum level at a value of 2% of budget we would ideally hold. The general reserve is currently 0.15% of the 2021/22 revenue budget.

Given the scale of the financial challenge we have faced pre pandemic the IJB strategy to invest where possible in smoothing the impact of savings challenges has not allowed any investment into general reserves. We have recognised whilst this means we are below our policy level, the prioritisation has been on long term sustainability and minimising the impact of savings over time on those services we provide. We received Covid-19 support for unachieved savings during the pandemic and we expect to utilise the budget phasing reserve in 2022/23 as we work to deliver our legacy savings on a recurring basis.

In the event our operational costs exceed budget in 2022/23 we may need to un-hypothecate (i.e. un-earmark) reserves to meet costs.

The use of reserves is reported to the IJB within our routine revenue reporting.

Future Challenges

The IJB continues to face a number of challenges, risks and uncertainties in the coming years and this is set out in our current Medium-Term Financial Plan (MTFP) for 2022/23 to 2026/27 and our Strategic Plan for 2022/23 to 2024/25. These key strategies also inform our strategic risk register and collectively support medium-term planning and decision making.

In the MTFP published in March 2022 the funding gap in future years could range anywhere from £0 to £5.7 million per year, excluding unknown factors, recent inflation implications and any additional savings requirements in future years.

The current scale of costs pressures now look closer to £9 million to £13 million in 2023/24 and £4 million to £9 million in the following two years. This takes into account the impact of pay, inflation, utilities costs and other economic impacts since April 2022. Therefore the funding gap

has significantly increased. The actual funding gap and therefore savings requirement on the IJB will be dependent on the funding settlement for each year.

The investment in health and social care by the Scottish Government was welcomed by the IJB and whilst the majority of this new funding supports specific policy decisions such as the living wage for care providers, we were able to mitigate to some degree our pressures, including pre-pandemic savings.

Despite this investment, the 2022/23 budget settlement fell within the poor settlement range of scenario planning assumptions with cost pressures of just over £14.4 million, funding uplifts of £11.3 million and therefore required savings of £3.1 million. We were able to identify £0.5 million of immediately achievable savings so our current savings challenge for 2022/23 is £2.6 million.

The budget for the year 2022/23 was agreed by the IJB on 16th March 2022 and recognised that we have legacy savings of £2.6m from before the pandemic and that the landscape has changed, particularly around demand and complexity, the ability to introduce new charges or increase criteria for care package support. Our reserves strategy, in place before the pandemic, should see us through the year as we work towards gaining efficiencies from our Recovery & Renewal programme and also by managing, as best we can, the budget we have allowed for to meet increased demand. We are not anticipating Covid funding for unachieved savings in 2022/23.

The Recovery and Renewal Programme is a significant area of work that spans multiple years. We have recently restarted this as part of our recovery. At present there are 16 projects with 9 currently live and we expect further projects will be added over time. Our case recording system replacement project is one of the most significant and recruitment is underway to ensure key posts can support delivery.

There are currently 6 projects that should support delivery of savings as a combination of cash and efficiencies, which in turn should allow us to manage demand and release budget.

- Care at Home redesign (phase 2) – staffing and balance of in-house and purchased care
- Replacing the Scheduling system for Care at Home – more efficient use of resources
- Learning Disability redesign – use of technology as an alternative to sleepovers and more individualised approach from outreach work; better outcomes
- Replacing our case recording system – more efficient use of resources
- Reviewing the use and parameters of our individual budget calculator
- Reviewing our use of commissioned services

The programme was paused as part of our response and work has recently restarted.

In setting this budget the IJB recognised the scale of the challenge; that we were still in response mode; that there are still many unknowns as we work our way towards recovery and the impact and implications from the plans for a national care service are unknown.

The 2022/23 budget recognises that we may require to invoke financial recovery planning if we cannot close our funding gap on a recurring basis.

Demographic pressures remain a very specific challenge for East Renfrewshire as we have an increasing elderly population with a higher life expectancy than the Scottish average and a rise in the number of children with complex needs resulting in an increase in demand for services.

The wider economy has a number of concerning factors. The consequences of Brexit did not manifest in any specific issues during 2021/22 however given this period remained far from normal this will continue to be monitored. The impacts of the war in Ukraine and economic factors such as possible shortages in supplies, inflation, fuel and utilities are all of concern and will be closely monitored throughout the coming year.

Any changes relating to the National Care Service will be analysed and reflected in our future plans.

We have successfully operated integrated services for over 17 years so we have faced a number of challenges and opportunities over the years. However our funding and savings challenge take no account of this history. Whilst we have agreed a population based approach for future (NHS) financial frameworks and models this does not address the base budget.

Prescribing and the associated cost of drugs prescribed to the population of East Renfrewshire by GPs and other community prescribers is delegated to the IJB. This is a complex and volatile cost base of around £16 million per year. During 2021/22 the volume of items prescribed began to increase to the pre-pandemic trend; the post Covid-19 implication is not yet clear in terms of complexity of need, population demand and mental health impacts.

Delayed Discharge performance is a key issue for us. In order to achieve the target time of 72 hours we continue to require more community based provision. The medium-term aspiration is that the costs of increased community services will be met by shifting the balance of care from hospital services. The work to agree a funding mechanism to achieve this remains ongoing with NHS Greater Glasgow and Clyde and its partner IJBs through an Unscheduled Care Commissioning Plan.

The longer term impact on the sustainability of the care provider market following Covid-19 is unknown and we continue to work closely with all our partners to work through issues, support where we can and look to develop the best way of working building on our collaborative and ethical commissioning approach as we move forward. This will build on our work to date, including the use of national contractual frameworks along with the implications from the NCS; this may impact on how we commission services.

We will fully implement our plans for continued use of the winter and Social Work Capacity funding during 2022/23 and we will continue to implement our model for interim care including the development of our intensive support model at Bonnyton care home. This creates a step up/step down service locally, to avoid unnecessary hospital admissions and timely discharge to home/homely settings. For Care at Home, the additional resources address the ongoing demand pressures we are experiencing, increase frontline staff as well as management and

support, and increase capacity for the Home First model and Technology Enabled Care. We are continuing to enhance the capacity of our multi-disciplinary teams across the HSCP including: developing our multi-disciplinary Front Door model and leadership arrangements; additional capacity for social work and our Care Home and Community Review Team; support for the wider NHSGGC frailty hubs; and increased capacity for frailty practitioners, data and quality analysis and peripatetic business support.

The funding to strengthen Adult Social Work has allowed us to create additional leadership posts within Communities and Wellbeing. This has provided us an opportunity to create a dedicated transition team to support young people with complex needs in the transition to adulthood, and Long Term Conditions team to support the local residents with long term conditions as we recover from the pandemic.

We intend to develop our performance and financial reporting in more detail at a locality level to allow fuller reporting and understanding of future trends and service demands and include Covid-19 implications and scenarios. We were not able to progress this work during 2021/22 as our focus remained on response.

We plan to deal with these challenges in the following ways:

- Our Recovery and Renewal Programme has restarted and will be implemented in 2022/23, with regular reports to the IJB.
- We will update our Medium-Term Financial Plan on a regular basis reflecting the ongoing impact of Covid-19, the economic climate and any impact from the NCS as these become clearer. This will allow us to continue to use scenario-based financial planning and modelling to assess and refine the impact of different levels of activity, funding, pressures, possible savings and associated impacts. This will also inform our planning for our 2023/24 budget.
- We will continue to monitor the impacts of Covid-19, Brexit, economic and inflationary factors along with operational issues through our financial and performance monitoring to allow us to take swift action where needed, respond flexibly to immediate situations and to inform longer term planning.
- We will continue to report our Covid-19 activity costs through the NHS Greater Glasgow and Clyde Mobilisation Plan and to the IJB. At this stage we do not expect any further support for non-delivery of savings. This will include how we transition as funding will reduce / cease over time.
- We will continue to work through our Care at Home redesign as part of our Recovery and Renewal Programme recognising the context of significant increase in demand for services, including increased complexity of needs due to the pandemic.
- We will continue to progress and report on our Strategic Improvement Plan until fully complete; work on this was not a priority during the ongoing pandemic response.
- We will complete the review of our Integration Scheme; work had been undertaken pre pandemic and was then put on hold.
- We routinely report our performance to the IJB with further scrutiny from our Performance and Audit Committee and our Clinical and Care Governance Group. The service user and

carer representation on the IJB and its governance structures is drawn from Your Voice which includes representatives from community care groups, representatives from our localities and representatives from equality organisations including disability and faith groups. We intend to develop our performance reporting during 2022/23.

- Workforce planning will support identifying our current and future requirements. Recruitment and retention of staff is key to all service delivery and we have mitigated as far as possible by minimising the use of temporary posts and developing our workforce and organisational learning and development plans. Given the overwhelming response to the pandemic over a prolonged period our staff are tired both physically and mentally and the wellbeing of our workforce is paramount.
- Governance Code; we have robust governance arrangements supported by a Governance Code.
- The IJB continues to operate in a challenging environment and our financial, risk and performance reporting continue to be a key focus of each IJB agenda.

The future challenges detailed above and our associated response include the main areas of risk that the IJB is facing. The uncertainty of the longer term impact of Covid-19 on our population and the capacity for the HSCP and its partners to deliver services and implement our Recovery and Renewal programme whilst maintaining financial sustainability remain significant risks.

Conclusion

East Renfrewshire Integration Joint Board continued, pre Covid-19, to be well placed in the short term to meet the coming challenges, building on many years of delivering integrated health and social care services and continuing to lead on developing new and innovative models of service delivery, not only ensuring financial sustainability, but also meeting the needs of our population.

Post Covid-19 there is a greater uncertainty over the medium to longer term impact on our population and the associated demand for services, a difficult shorter term financial challenge and potential opportunities that may arise around a national care service. We continue to plan ahead and prepare for a range of scenarios.

Anne-Marie Monaghan
Chair
Integration Joint Board

23rd November 2022

Julie Murray
Chief Officer
Integration Joint Board

23rd November 2022

Lesley Bairden ACMA CGMA
Chief Financial Officer
Integration Joint Board

23rd November 2022

Statement of Responsibilities

Responsibilities of the Integration Joint Board

The IJB is required to:

- Make arrangements for the proper administration of its financial affairs and to ensure that one of its officers has the responsibility for the administration of those affairs (section 95 of the Local Government (Scotland) Act 1973). In East Renfrewshire IJB, the proper officer is the Chief Financial Officer.
- Manage its affairs to secure economic, efficient and effective use of resources and safeguard its assets.
- Ensure the annual accounts are prepared in accordance with legislation (The Local Authority Accounts (Scotland) Regulations 2014), and so far as is compatible with that legislation, in accordance with proper accounting practices (section 12 of the Local Government in Scotland Act 2003) and (Coronavirus (Scotland) Act 2020).
- Approve the annual accounts for signature.

I confirm that the audited Annual Accounts will be presented on 23rd November 2022 for approval.

Anne-Marie Monaghan
Chair

Integration Joint Board 23rd November 2022

Responsibilities of the Chief Financial Officer

The Chief Financial Officer is responsible for the preparation of the IJB's annual accounts in accordance with proper practices as required by legislation and as set out in the CIPFA/LASAAC Code of Practice on Local Authority Accounting in the United Kingdom (the Accounting Code).

In preparing these annual accounts, the Chief Financial Officer has:

- Selected appropriate accounting policies and applied them consistently.
- Made judgements and estimates that are reasonable.
- Complied with the legislation.
- Complied with the Local Authority Accounting Code (in so far as it is compatible with the legislation).

The Chief Financial Officer has also:

- Kept proper accounting records that were up-to-date.
- Taken reasonable steps for the prevention and detection of fraud and other irregularities.

I certify that the financial statements give a true and fair view of the financial position of East Renfrewshire Integration Joint Board as at 31st March 2022 and the transactions for the IJB for the period covering 1st April 2021 to 31st March 2022.

Lesley Bairden ACMA CGMA
Chief Financial Officer
Integration Joint Board 23rd November 2022

Remuneration Report

Introduction

The Local Authority Accounts (Scotland) Regulations 2014 (SSI No. 2014/200) requires local authorities and IJBs in Scotland to prepare a Remuneration Report as part of the annual statutory accounts.

The IJB does not directly employ any staff in its own right. All staff are employed through either East Renfrewshire Council or NHS Greater Glasgow and Clyde. The report contains information on the IJB's Chief Officer's remuneration together with any taxable expenses relating to voting members claimed in the year. The remuneration of senior officers is determined by the contractual arrangements of East Renfrewshire Council and NHS Greater Glasgow and Clyde.

For 2021/22 no taxable expenses were claimed by members of the IJB.

The board members are entitled to payment for travel and subsistence expenses relating to approved duties. Payment of voting board members' allowances is the responsibility of the member's individual partnership body. Non-voting members of the IJB are entitled to the payment of travel expenses.

The IJB does not provide any additional remuneration to the Chair, Vice Chair or any other board members relating to their role on the IJB.

The information in the tables below is subject to external audit. The explanatory text in the Remuneration Report is reviewed by external auditors to ensure that it is consistent with the financial statements:

Integration Joint Board

The voting members of the IJB were appointed through nomination by East Renfrewshire Council and NHS Greater Glasgow and Clyde.

Senior Officers

The Chief Officer is appointed by the IJB in consultation with East Renfrewshire Council and NHS Greater Glasgow and Clyde. The Chief Officer is employed by East Renfrewshire Council and is funded equally between East Renfrewshire Council and NHS Greater Glasgow and Clyde.

The total remuneration received by the Chief Officer in 2021/22 amounted to £115,279 in respect of all duties undertaken during the financial year. The Chief Financial Officer total remuneration for 2021/22 amounted to £88,285.

2020/21			Name and Post	2021/22		
Salary, Fees & Allowances £	Taxable Expenses £	Total Remuneration £		Salary, Fees & Allowances £	Taxable Expenses £	Total Remuneration £
114,269	-	114,269	Julie Murray Chief Officer	115,279	-	115,279
87,291	-	87,291	Lesley Bairden Chief Financial Officer	88,285	-	88,285

Voting Board Members 2021/22		Total Taxable IJB Related Expenses £
Councillor Caroline Bamforth (Chair)	East Renfrewshire Council	-
Anne-Marie Monaghan (Vice Chair)	NHS Greater Glasgow & Clyde	-
Councillor Tony Buchanan	East Renfrewshire Council	-
Jacqueline Forbes	NHS Greater Glasgow & Clyde	-
Amina Khan	NHS Greater Glasgow & Clyde	-
Councillor Alan Lafferty (until June 2021)	East Renfrewshire Council	-
Provost Jim Fletcher (from June 2021)	East Renfrewshire Council	-
Councillor Jim Swift	East Renfrewshire Council	-
Flavia Tudoreanu (until November 2021)	NHS Greater Glasgow & Clyde	-
Michelle Wailes (from January 2022)	NHS Greater Glasgow & Clyde	-

The equivalent cost in 2020/21 was nil for all IJB members.

The voting members of the IJB changed following local elections in May 2022.

The Pension entitlement for the Chief Officer for the year to 31st March 2022 is shown in the table below, together with the contribution made by the employing body to this pension during the year.

2020/21			Name and Post	2021/22		
In Year Pension Contribution to 31 March £	Accrued Pension Benefits at 31 March			In Year Pension Contribution to 31 March £	Accrued Pension Benefits at 31 March	
	Pension £	Lump Sum £			Pension £	Lump Sum £
22,054	45,593	60,259	Julie Murray Chief Officer	22,249	48,214	60,686
16,847	9,006	-	Lesley Bairden Chief Financial Officer	17,039	10,849	-

The Chief Financial Officer joined the pension scheme on appointment in August 2015 and under the terms of the scheme no lump sum benefit has been identified.

In respect of officers' pension benefits the statutory liability for any future contributions to be made rests with the relevant employing partner organisation. On this basis there is no pension liability reflected on the IJB balance sheet for the Chief Officer, Chief Financial Officer, or any other officers.

However, the IJB has responsibility for funding the employer's contributions for the current year in respect of the officer time spent on fulfilling the responsibilities of their role on the IJB. The table above shows the IJB's funding during 2021/22 to support officers' pension benefits. The table also shows the total value of accrued pension benefits which may include benefits earned from a previous employment and from each officers' own contributions.

General Disclosure by Pay Bands

The regulations require the Remuneration Report to provide information on the number of persons whose remuneration was £50,000 or above. This information is provided in bands of £5,000.

General Disclosure by Pay Bands

Number of Employees 31 March 2021	Remuneration Band	Number of Employees 31 March 2022
-	£80,000 - £84,999	-
1	£85,000 - £89,999	1
-	£105,000 - £109,999	-
1	£110,000 - £114,999	-
-	£115,000 - £119,999	1

Anne-Marie Monaghan
Chair
Integration Joint Board 23rd November 2022

Julie Murray
Chief Officer
Integration Joint Board 23rd November 2022

Annual Governance Statement

Introduction

The Annual Governance Statement explains the IJB's governance arrangements and reports on the effectiveness of the IJB's system of internal control. This is in line with the Code of Corporate Governance and meets the requirements of the 'Code of Practice for Local Authority Accounting in the UK: A Statement of Recommended Practice', in relation to the Statement on the System of Internal Financial Control. This should ensure:

- A focus on the assessment of how well the governance framework is working and what actions are being taken.
- The importance of the role and responsibilities of partners in supporting IJB good governance is adequately reflected.

Scope of Responsibility

The IJB is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for and used economically, efficiently and effectively. To ensure best value the IJB commits to continuous quality improvement in performance across all areas of activity.

To meet this responsibility the IJB continues to operate the governance arrangements first put in place during 2015/16, including the system of internal control. This is intended to manage risk to a reasonable level but cannot eliminate the risk of failure to achieve policies, aims and objectives and can therefore only provide reasonable, but not absolute assurance of effectiveness.

In discharging these responsibilities, the Chief Officer has a reliance on East Renfrewshire Council and NHS Greater Glasgow and Clyde systems of internal control that support compliance with both organisations' policies and promotes achievement of each organisations' aims and objectives, as well as those of the IJB.

The Purpose of the Governance Framework

The governance framework comprises the systems and processes and culture and values by which the IJB is directed and controlled and the activities through which it accounts to, engages with, and leads the community. It enables the IJB to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate, cost-effective services.

The system of internal control is a significant part of that framework and is designed to manage risk to a reasonable level. The system of internal control is based on an ongoing process designed to identify and prioritise the risks to the achievement of the IJB's policies, aims and

objectives, to evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically.

We have robust governance arrangements in place and have consolidated these into a Governance Code.

The Governance Framework

The main features of the governance framework in place during 2021/22 are summarised below:

- The IJB, comprising all IJB Board members, is the key decision-making body.
- The scope, authority, governance and remit of the IJB is set out in constitutional documents including the Integration Scheme, Board terms of reference, scheme of administration and financial regulations and as reflected in our Code of Governance.
- The Performance and Audit Committee and Clinical and Care Governance Group provide further levels of scrutiny for the IJB.
- The IJB's purpose and vision is outlined in the IJB Strategic Plan which sets out how we will deliver the national health and wellbeing outcomes. This is underpinned by an annual implementation plan and performance indicators. Regular progress reports on the delivery of the Strategic Plan are provided to the Performance and Audit Committee and the IJB.
- The IJB has adopted a 'Code of Conduct' for all of its Board Members and employees. A register of interests is in place for all Board members and senior officers.
- The Performance and Audit Committee routinely review the Strategic Risk Register.
- The IJB has in place a continuous development programme with an ongoing series of seminars covering a wide range of topics and issues.
- The IJB has two localities Eastwood and Barrhead, aligned with hospital use and includes three clusters of GP practices. Each Locality has a dedicated Locality Manager.

The governance framework was put in place during 2015/16 when the IJB was established and the Governance Code was formalised and audited in 2017/18 and continues to operate effectively.

As a result of Covid-19 from March 2020 we needed to change some of our governance arrangements including; drawing on business continuity plans to support critical functions, establishing our Local Resilience Management Team, participating in local and national working groups and establishing a Covid-19 Risk Register. We have also worked very closely with our partners' governance and response arrangements during the pandemic, including East Renfrewshire Council, NHS Greater Glasgow and Clyde, National Chief Officer, Chief Social

Work Officer and Chief Financial Officer meetings. These arrangements continued through 2021/22.

We continued to hold our IJB meetings on a video conferencing platform and agreed with our chair and vice chair a prioritised agenda for each meeting. We held all meetings as planned during 2021/22. We held three JB seminars during the year focussing on Unpaid Carers, the National Care Service, our Strategic Plan for 2022-2025 and the Budget for 2022/23.

Best Value

The IJB has a duty of Best Value and this includes ensuring continuous improvement in performance, while maintaining an appropriate balance between the quality of those services provided by the HSCP and the cost of doing so. We need to consider factors such as the economy, efficiency, effectiveness and equal opportunities. The IJB ensures this happens through its vision and leadership and this is supported and delivered by:



The System of Internal Financial Control

The system of internal financial control is based on a framework of regular management information, financial regulations, administrative procedures (including segregation of duties), management supervision, and a system of delegation and accountability. Development and maintenance of these systems is undertaken by East Renfrewshire Council and NHS Greater Glasgow and Clyde as part of the operational delivery of the HSCP. In particular, these systems include:

- Financial regulations and codes of financial practice.
- Comprehensive budgeting systems.
- Regular reviews of periodic and annual financial reports that indicate financial performance against the forecasts.
- Setting targets to measure financial and other performance.
- Clearly defined capital expenditure guidelines.
- Formal project management disciplines.
- The IJB's financial management arrangements complies with the governance requirements of the CIPFA statement: 'The Role of the Chief Financial Officer in Local Government (2016)'.

With regard to the entries taken from East Renfrewshire Council and NHS Greater Glasgow and Clyde accounts, the IJB is not aware of any weaknesses within their internal control systems and has placed reliance on the individual Statements of Internal Financial Control where appropriate.

Review of Adequacy and Effectiveness

The IJB has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control. The review of the effectiveness of the framework is informed by the work of the Senior Management Team who have responsibility for development and maintenance of the governance environment, the annual report by the Chief Internal Auditor and reports from Audit Scotland and other review agencies.

The Chief Internal Auditor reports directly to the IJB Performance and Audit Committee on all audit matters, with the right of access to the Chief Officer, Chief Financial Officer and Chair of the Performance and Audit Committee on any matter. In accordance with the principles of the code of corporate governance, regular reports were made to the IJB's Performance and Audit Committee during 2021/22. A member of East Renfrewshire Council's Audit and Scrutiny Committee was co-opted to the IJB Performance and Audit Committee during 2016/17 to promote transparency.

The IJB's Performance & Audit Committee operates in accordance with CIPFA's Audit Committee Principles in Local Authorities in Scotland and Audit Committees: Practical Guidance for Local Authorities.

The Internal Audit function has independent responsibility for examining, evaluating and reporting on the adequacy of internal control. The IJB's internal audit arrangements comply with the governance requirements of the CIPFA statement: 'The Role of the Head of Internal Audit in Public Organisations (2019)'.

During 2021/22 the service operated in accordance with relevant professional audit standards and the Public Sector Internal Audit Standards. The Chief Internal Auditor's opinion as reported to the Audit Committee, confirmed: It is my opinion, based on the information available and assurances provided, that reasonable assurance can be placed on the framework of governance, risk management and internal controls which operated in the East Renfrewshire Integration Joint Board in the year to 31 March 2022 except for an area still under investigation by Police Scotland.

We have a formal Code of Governance and the sections in the code and our level of compliance can be summarised as detailed below:

Code Section	Level of Compliance
Integration Scheme	Full
Local Governance Arrangements & Delegation of Functions	Full
Local Operational Delivery Arrangements	Full
Performance and Audit	Full
Clinical and Care Governance	Full
Chief Officer	Full
Workforce *	Full
Finance	Full
Participation and Engagement	Full
Information Sharing and Data Handling	Full
Complaints/ Dispute Resolution Mechanism	Full
Claims Handling, Liability & Indemnity	Full
Risk Management	Full

* We are finalising our three-year Workforce Plan covering 2022-2025, in line with Scottish Government timescales.

Governance Issues during 2021/22

Whilst all operational and transactional governance issues are considered within our partner's governance frameworks, the IJB Performance and Audit Committee also take an overview on all actions resulting from both internal and external audit reports, covering all live actions whether pre or post 31st March 2022.

Regular reports on audit recommendations and associated actions are presented to and considered by the Performance and Audit Committee of the IJB. The IJB will also receive direct reports where appropriate.

Significant Governance Issues

The ongoing Covid-19 pandemic had a lesser impact on IJB meetings and associated governance than in the first year of the pandemic. The IJB continued to meet virtually throughout the year and all meetings were held as planned.

The Scottish Government introduced new legislation in 2020/21; The Health Protection (Coronavirus) (Restrictions) (Scotland) Regulations 2020. The HSCP has complied with this legislation as appropriate.

The HSCP worked with all partners at a local and national level to play our part in the ongoing response to the pandemic with the key impacts included in our management commentary.

As the situation evolved over 2021/22 we have responded to changing restrictions and many iterations of guidance on a range of Covid-19 related issues. We have outlined in this report how we have governed these changes, adapted existing and set up new services and how we have funded the associated costs. Despite the continued dynamic and challenging environment there have been no significant governance issues.

Operational Governance

Given capacity constraints across the HSCP and within the Internal Audit Team planned work for 2021/22 was delayed and rescheduled into 2022/23.

The Performance and Audit Committee received an update report to each committee that identified progress on open recommendations as well as any new audit activity and associated response (for both IJB specific and for HSCP operational). The table below summarises the number of recommendations and the status for each audit.

Audit Report	Recommendations			
	Total	Verified as implemented by Internal Audit	Considered implemented by HSCP (awaiting verification)	Total open
Debtors	2	-	2	-
Environment Follow-up	3	-	-	3
Fostering, Adoption and Kinship	3	-	1	2
Payroll	8	-	8	-
Carers Legislation	5	2	-	3
CareFinance	14	-	10	4
Emergency Payment	10	9	-	1
Self-Directed Support	10	-	8	2
Follow up of HSCP Audits	11	6	3	2

We took regular Covid-19 response updates to the IJB during 2021/22 that provided a position statement, risk and mitigation on service delivery and response activity.

We also set up a daily huddle as part of our response to the Omicron variant and this allowed our senior managers to meet each morning to assess the situation, prioritise workloads and support service delivery in a very challenging period. This also provides an informal support network which has been invaluable.

We recognised the ongoing impact of the pandemic and we commissioned an independent review of the HSCP Front Door for adult services in partnership with individuals, families and

professionals in order to ensure that the single point of access to adult services was fit for purpose as we move towards recovery.

The Care Inspectorate announced a joint inspection of services for Children at risk of Harm on 22nd February 2022. The Care Inspectorate published their report August 2022 and we received a grade of 'Excellent' for Quality Indicator 2.1 – Impact on Children and Young People.

We had a brief period during 2021/22 where we had started to look at our recovery prior to the Omicron variant of Covid-19 and this programme of work has recommenced in 2022/23.

We continue to report Covid-19 activity and costs to the Scottish Government via the NHS Greater Glasgow and Clyde Mobilisation Plan as well as to the IJB.

Action Plan

The table below shows the progress made during 2021/22 against the actions that we identified in our 2020/21 annual report and accounts. It does need to be recognised that capacity to progress these actions was impacted by the ongoing response to the pandemic including the emergence of the Omicron variant, resulting in a very challenging winter for the HSCP.

Action	Progress
Continue to report on our Care at Home redesign as part of our Recovery and Renewal programme.	Phase 2 of the redesign is one of our major projects within the programme and work will commence as we move from response to recovery.
Regularly review and refresh our Medium-Term Financial Plan (MTFP) once the implications from the Covid-19 pandemic and the national care service become clearer. This will include reporting progress on savings achieved and operational financial performance throughout the year.	We last took our MTFP to the IJB in March 2022 and will refresh as a minimum annually and more frequently as issues from the NCS and economic impacts crystallise.
Implement the commissioning arrangements for unscheduled care once the development work has been finalised.	Work is ongoing and the plan and associated financial framework was last reported to the IJB in March 2022.
Review our Best Value reporting with our Annual Performance Report.	This has not progressed during the Covid-19 response, with the exception of attendance at a national workshop in preparation for future work.
Implement our Recovery and Renewal programme with regular reporting to the IJB including the associated financial implications.	We had a brief period where we started to consider recovery during 2021/22 however the ongoing response including the Omicron variant meant there was little capacity to progress. Our Recovery and Renewal Programme has recommenced and will be regularly reported to the IJB throughout 2022/23.
Refresh our Integration Scheme as work on this was paused during 2020/21.	Work is ongoing in partnership with colleagues across Greater Glasgow and Clyde

Continue to monitor the costs associated with Covid-19 and sustainability throughout 2021/22 and beyond.	We have reported all costs associated with Covid-19 to the IJB through our budget monitoring and have fed into the NHSGGC Local Mobilisation Plan reporting for 2021/22 and for future years.
Recommence review of our Strategic Action Plan.	This work was not a priority during the pandemic response.

The actions to take in 2022/23 to improve strengthening our corporate governance arrangements are:

- Resource and deliver our Recovery and Renewal programme, with regular reporting including progress on savings to the IJB throughout 2022/23.
- Refresh our Medium Term Financial Plan and Strategic Risk Register to reflect any changes resulting from the NCS and for economic and inflation factors as required
- Continue to work to implement the Unscheduled Care Commissioning Plan in partnership with the other HSCPs across Greater Glasgow and Clyde
- Review our Best Value reporting with our Annual Performance Report and develop our performance reporting to look forward as well as report our retrospective position
- Refresh our Integration Scheme
- Continue to monitor the costs associated with Covid-19 and sustainability throughout 2022/23 and beyond
- Recommence review of our Strategic Action Plan, paused during the response to the pandemic
- Develop our Strategic Commissioning Plan and our approach to collaborative commissioning
- Implement our Strategic Plan
- We will implement plans including recruitment for winter and capacity funding
- We will report the results of the Joint Inspection of services for Children at Risk of Harm

Conclusion and Opinion on Assurance

It is our opinion that reasonable assurance can be placed upon the adequacy and effectiveness of the IJB system of governance.

We consider the internal control environment provides reasonable and objective assurance that any significant risks impacting on our principle objectives will be identified and actions taken to avoid or mitigate their impact.

Systems are in place to regularly review and improve the internal control environment.

Anne-Marie Monaghan
Chair
Integration Joint Board 23rd November 2022

Julie Murray
Chief Officer
Integration Joint Board 23rd November 2022

Appendix A: Proposed Independent Auditor's Report

Independent auditor's report to the members of East Renfrewshire Integration Joint Board and the Accounts Commission

Reporting on the audit of the financial statements

Opinion on financial statements

I certify that I have audited the financial statements in the annual accounts of East Renfrewshire Integration Joint Board for the year ended 31 March 2022 under Part VII of the Local Government (Scotland) Act 1973. The financial statements comprise the Comprehensive Income and Expenditure Statement, Movement in Reserves Statement, Balance Sheet and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and UK adopted international accounting standards, as interpreted and adapted by the Code of Practice on Local Authority Accounting in the United Kingdom 2021/22 (the 2021/22 Code).

In my opinion the accompanying financial statements:

- give a true and fair view in accordance with applicable law and the 2021/22 Code of the state of affairs of the East Renfrewshire Integration Joint Board as at 31 March 2022 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with UK adopted international accounting standards, as interpreted and adapted by the 2021/22 Code; and
- have been prepared in accordance with the requirements of the Local Government (Scotland) Act 1973, The Local Authority Accounts (Scotland) Regulations 2014, and the Local Government in Scotland Act 2003.

Basis for opinion

I conducted my audit in accordance with applicable law and International Standards on Auditing (UK) (ISAs (UK)), as required by the Code of Audit Practice approved by the Accounts Commission for Scotland. My responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of my report. I was appointed by the Accounts Commission on 26 September 2022. The period of total uninterrupted appointment is one year. I am independent of East Renfrewshire Integration Joint Board in accordance with the ethical requirements that are relevant to my audit of the financial statements in the UK including the Financial Reporting Council's Ethical Standard, and I have fulfilled my other ethical responsibilities in accordance with these requirements. Non-audit services prohibited by the Ethical Standard were not provided to East Renfrewshire Integration Joint Board. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Conclusions relating to going concern basis of accounting

I have concluded that the use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work I have performed, I have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on East Renfrewshire Integration Joint Board's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from when the financial statements are authorised for issue.

These conclusions are not intended to, nor do they, provide assurance on East Renfrewshire Integration Joint Board's current or future financial sustainability. However, I report on East Renfrewshire Integration Joint Board's arrangements for financial sustainability in a separate Annual Audit Report available from the [Audit Scotland website](#).

Risks of material misstatement

I report in my Annual Audit Report the most significant assessed risks of material misstatement that I identified and my judgements thereon.

Responsibilities of the Head of Finance and Resources (Chief Financial Officer) and the Performance and Audit Committee for the financial statements

As explained more fully in the Statement of Responsibilities, the Head of Finance and Resources (Chief Financial Officer) is responsible for the preparation of financial statements that give a true and fair view in accordance with the financial reporting framework, and for such internal control as the Head of Finance and Resources (Chief Financial Officer) determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Head of Finance and Resources (Chief Financial Officer) is responsible for assessing East Renfrewshire Integration Joint Board's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless there is an intention to discontinue East Renfrewshire Integration Joint Board's operations.

The Joint Board is responsible for overseeing the financial reporting process.

Auditor's responsibilities for the audit of the financial statements

My objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. I design procedures in line with my responsibilities outlined above to detect material misstatements in respect of irregularities, including fraud. Procedures include:

- obtaining an understanding of the applicable legal and regulatory framework and how East Renfrewshire Integration Joint Board is complying with that framework;

- identifying which laws and regulations are significant in the context of East Renfrewshire Integration Joint Board;
- assessing the susceptibility of the financial statements to material misstatement, including how fraud might occur; and
- considering whether the audit team collectively has the appropriate competence and capabilities to identify or recognise non-compliance with laws and regulations.

The extent to which my procedures are capable of detecting irregularities, including fraud, is affected by the inherent difficulty in detecting irregularities, the effectiveness of East Renfrewshire Integration Joint Board's controls, and the nature, timing and extent of the audit procedures performed.

Irregularities that result from fraud are inherently more difficult to detect than irregularities that result from error as fraud may involve collusion, intentional omissions, misrepresentations, or the override of internal control. The capability of the audit to detect fraud and other irregularities depends on factors such as the skilfulness of the perpetrator, the frequency and extent of manipulation, the degree of collusion involved, the relative size of individual amounts manipulated, and the seniority of those individuals involved.

A further description of the auditor's responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website www.frc.org.uk/auditorsresponsibilities. This description forms part of my auditor's report.

Reporting on other requirements

Opinion prescribed by the Accounts Commission on the audited part of the Remuneration Report

I have audited the part of the Remuneration Report described as audited. In my opinion, the audited part of the Remuneration Report has been properly prepared in accordance with The Local Authority Accounts (Scotland) Regulations 2014.

Other information

The Head of Finance and Resources (Chief Financial Officer) is responsible for other information in the annual accounts. The other information comprises the Management Commentary, Annual Governance Statement, Statement of Responsibilities and the unaudited part of the Remuneration Report.

My responsibility is to read all the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or my knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If I identify such material inconsistencies or apparent material misstatements, I am required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact. I have nothing to report in this regard.

My opinion on the financial statements does not cover the other information and I do not express any form of assurance conclusion thereon except on the Management Commentary and Annual Governance Statement to the extent explicitly stated in the following opinions prescribed by the Accounts Commission.

Opinions prescribed by the Accounts Commission on the Management Commentary and Annual Governance Statement

In my opinion, based on the work undertaken in the course of the audit:

- the information given in the Management Commentary for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with statutory guidance issued under the Local Government in Scotland Act 2003; and
- the information given in the Annual Governance Statement for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with the Delivering Good Governance in Local Government: Framework (2016).

Matters on which I am required to report by exception

I am required by the Accounts Commission to report to you if, in my opinion:

- adequate accounting records have not been kept; or
- the financial statements and the audited part of the Remuneration Report are not in agreement with the accounting records; or
- I have not received all the information and explanations I require for my audit;

I have nothing to report in respect of these matters.

Conclusions on wider scope responsibilities

In addition to my responsibilities for the annual accounts, my conclusions on the wider scope responsibilities specified in the Code of Audit Practice, including those in respect of Best Value, are set out in my Annual Audit Report.

Use of my report

This report is made solely to the parties to whom it is addressed in accordance with Part VII of the Local Government (Scotland) Act 1973 and for no other purpose. In accordance with paragraph 120 of the Code of Audit Practice, I do not undertake to have responsibilities to members or officers, in their individual capacities, or to third parties.

John Boyd
Audit Director
Audit Scotland
4th Floor
8 Nelson Mandela Place
Glasgow
G2 1BT

The Financial Statements

The (Surplus) or Deficit on the Income and Expenditure Statement shows the income received from and expenditure directed back to East Renfrewshire Council and NHS Greater Glasgow and Clyde for the delivery of services.

Comprehensive Income and Expenditure Statement for the year ended 31st March 2022

2020/21			2021/22				
Gross Expenditure	Gross Income	Net Expenditure	Objective Analysis	Note	Gross Expenditure	Gross Income	Net Expenditure
£000	£000	£000			£000	£000	£000
13,879	1,361	12,518	Children and Families		16,696	2,468	14,228
24,607	3,159	21,448	Older People's Services		26,757	1,884	24,873
5,923	395	5,528	Physical/Sensory Disability		6,574	308	6,266
20,305	1,703	18,602	Learning Disability – Community		21,479	905	20,574
9,818	1,128	8,690	Learning Disability – Inpatients		9,901	1,079	8,822
503	266	237	Augmentative & Alternative Communication		393	167	226
16,078	2,306	13,772	Intensive Services		18,608	2,110	16,498
6,387	492	5,895	Mental Health		6,317	303	6,014
2,488	156	2,332	Addictions / Substance Misuse		2,958	255	2,703
26,198	166	26,032	Family Health Services		28,231	527	27,704
15,858	-	15,858	Prescribing		16,589	1	16,588
696	698	(2)	Criminal Justice		864	853	11
26,874	4,007	22,867	Management and Admin		29,017	6,413	22,604
229	-	229	Corporate Services	6	232	-	232
169,843	15,837	154,006	Cost of Services Managed by ER IJB		184,616	17,273	167,343
			Set Aside for delegated services provided in large hospitals		27,892	-	27,892
28,177	-	28,177	Aids and Adaptations		398	-	398
174	-	174					
198,194	15,837	182,357	Total Cost of Services to ER IJB		212,906	17,273	195,633
			Taxation and Non Specific Grant Income	3	-	205,900	205,900
-	187,968	187,968	(Surplus) or Deficit on Provision of Services		212,906	223,173	(10,267)
198,194	203,805	(5,611)					

Movement in Reserves Statement

This statement shows the movement in the financial year on the reserve held by the IJB, analysed into 'usable reserves' (i.e. those that can be applied to fund expenditure) and 'non usable reserves'. The (Surplus) or Deficit on the Provision of Services reflects the true cost of providing services, more details of which are shown in the Comprehensive Income and Expenditure Statement.

2020/21 £000	Movement in Reserves	2021/22 £000
(4,726)	Balance as at 31 st March 2021 brought forward	(10,485)
(5,759)	Total Comprehensive Income & Expenditure	(10,267)
(5,759)	(Surplus) or Deficit on the Provision of Services	(10,267)
(10,485)	Balance as at 31st March 2022 Carried Forward	(20,752)

The reserves above are all useable.

Balance Sheet As at 31st March 2022

The Balance Sheet as at 31st March 2022 is a snapshot of the value at that reporting date of the assets and liabilities recognised by the IJB. The net assets of the IJB (assets less liabilities) are matched by the reserves held by the IJB.

31st March 2021 £000	Balance Sheet	Notes	31st March 2022 £000
11,245	Current Assets		21,130
11,245	Short Term Debtors	7	21,130
760	Current Liabilities		378
760	Short Term Creditors	7	378
10,485	Net Assets - Reserves	8	20,752

The Statement of Accounts present a true and fair view of the financial position of the IJB as at 31st March 2022 and its income and expenditure for the year then ended.

The audited annual report and accounts will be submitted for approval and issue by the IJB on 23rd November 2022.

Lesley Bairden ACMA CGMA
Chief Financial Officer
Integration Joint Board 23rd November 2022

Notes to the Financial Statements

1. Accounting Policies

1.1 General Principles

The Statement of Accounts summarises the IJB's transactions for the 2021/22 reporting period and its position as at 31st March 2022.

The East Renfrewshire IJB is formed under the terms of the Public Bodies (Joint Working) (Scotland) Act 2014 and is a joint venture between East Renfrewshire Council and NHS Greater Glasgow and Clyde.

IJBs are specified as Section 106 bodies under the Local Government (Scotland) Act 1973 and as such are required to prepare their financial statements in compliance with the Code of Practice on Local Authority Accounting in the United Kingdom 2021/22 supported by International Finance Reporting Standards (IFRS).

1.2 Accruals of Income and Expenditure

Activity is accounted for in the year it takes place not simply when cash payments are made or received. In particular:

All known specific and material sums payable to the IJB have been brought into account.

Where revenue and expenditure have been recognised but cash has not been received or paid, a debtor or creditor for the relevant amount is recorded in the Balance Sheet.

1.3 Going Concern

The accounts are prepared on a going concern basis, which assumes that the IJB will continue in operational existence for the foreseeable future.

1.4 Accounting Convention

The accounting convention adopted in the Statement of Accounts is an historic cost basis.

1.5 Funding

East Renfrewshire IJB receives contributions from its funding partners, namely East Renfrewshire Council and NHS Greater Glasgow and Clyde to fund its services. Expenditure is incurred in the form of charges for services provided to the IJB by its partners.

1.6 Reserves

Reserves are created by appropriate amounts from the Statement of Income and Expenditure in the Movement in Reserves Statement.

Reserves have been created in order to finance expenditure in relation to specific projects. When expenditure to be financed from a reserve is incurred it will be charged to the appropriate service

in that year and will be funded by an appropriation back to the Comprehensive Income and Expenditure Statement in the Movement in Reserves Statement.

A general reserve has also been established as part of the financial strategy of the East Renfrewshire IJB in order to better manage the risk of any future unanticipated events that may materially impact on the financial position of the IJB.

1.7 Events after the Balance Sheet Date

Events after the Balance Sheet date are those events, both favourable and unfavourable, that occur between the end of the reporting period and the date when the Annual Accounts are authorised.

Where events take place before the date of authorisation and provide information about conditions existing as at 31st March 2022 the figures in the financial statements and notes have been adjusted in all material aspects to reflect the impact of this information.

Events taking place after the date when the Accounts were authorised are not reflected in the financial statement or notes.

1.8 Related Party Transactions

As partners of East Renfrewshire IJB both East Renfrewshire Council and NHS Greater Glasgow and Clyde are related parties and material transactions with those bodies are disclosed in Note 5 (Page 60) in accordance with the requirements of International Accounting Standard 24.

1.9 Provisions, Contingent Assets and Liabilities

Provisions are made where an event has taken place that gives the IJB a legal or constructive obligation that probably requires settlement by a transfer of economic benefits or service potential and a reliable estimate can be made of the amount of the obligation.

Provisions are charged as an expense to the appropriate service line in the Statement of Income and Expenditure in the year that the IJB becomes aware of the obligation and measured at the best estimate at the Balance Sheet date of the expenditure required to settle the obligation, taking into account relevant risks and uncertainties.

When payments are eventually made they are charged to the provision held in the Balance Sheet. Estimated settlements are reviewed at the end of each financial year. Where it becomes less probable that a transfer of economic benefits will be required (or a lower settlement than anticipated is made) the provision is reversed and credited back to the relevant service.

A contingent asset or liability arises where an event has taken place that gives the IJB a possible obligation or benefit whose existence will only be confirmed by the occurrence or otherwise of uncertain future events not wholly within the control of the IJB. Contingent assets or liabilities also arise in circumstances where a provision would otherwise be made but, either it is not probable that an outflow of resources will be required or the amount of the obligation cannot be measured reliably.

Contingent assets and liabilities are not recognised in the Balance Sheet but are disclosed in a note to the Accounts where they are deemed material.

1.10 Indemnity Insurance

The IJB has indemnity insurance for costs relating primarily to potential claim liabilities regarding Board member and officer responsibilities. NHS Greater Glasgow and Clyde and East Renfrewshire Council have responsibility for claims in respect of the services they are statutorily responsible for and that they provide.

Unlike NHS Boards the IJB does not have any 'shared risk' exposure from participation in CNORIS. The IJB participation in the CNORIS scheme is therefore similar to normal insurance arrangements.

In the event that known claims were identified they would be assessed as to the value and probability of settlement. Where material the overall expected value of any such known claims, taking probability of settlement into consideration, would be provided for in the IJB's Balance Sheet. No such claims were identified as at 31st March 2022.

Similarly, the likelihood of receipt of an insurance settlement to cover any claims would be separately assessed, and where material, they would be presented as either a debtor or disclosed as a contingent asset. No such receipts were identified as at 31st March 2022.

The cost of participation in the CNORIS scheme was funded on our behalf by NHS Greater Glasgow and Clyde for financial year 2021/22.

1.11 Corresponding Amounts

These Financial Statements cover the period 1st April 2021 to 31st March 2022, with corresponding full year amounts for 2020/21.

1.12 VAT

The IJB is not a taxable person and does not charge or recover VAT on its functions.

The VAT treatment of expenditure and income within the Accounts depends upon which of the partners is providing the service as these bodies are treated differently for VAT purposes.

The services provided by the Chief Officer to the IJB are outside the scope of VAT as they are undertaken under a specific legal regime.

1.13 Post - Employment Benefits – Pension Costs

The accounting requirements for pension costs in respect of Post - Employment Benefits under IAS19 and FRS17 are reflected in the accounts of East Renfrewshire Council and NHS Greater Glasgow and Clyde as the respective employers of current and former staff members. The IJB does not directly employ any members of staff in its own right and accordingly has accrued no liability in regards to post employment pension benefits.

1.14 Prior Period Restatement

When items of income and expenditure are material, their nature and amount is disclosed separately, either on the face of the CIES or in the notes to the Accounts, depending on how significant the items are to the understanding of the IJB's financial performance.

Prior period adjustments may arise as a result of a change in accounting policy, a change in accounting treatment or to correct a material error. Changes are made by adjusting the opening balances and comparative amounts for the prior period which then allows for a consistent year on year comparison.

2. Expenditure and Income Analysis by Nature

There are no statutory or presentational adjustments which affect the IJB's application of funding received from partner organisations. The movement in the IJB balance sheet is therefore solely due to the transactions shown in the Comprehensive Income and Expenditure Statement. Consequently an Expenditure and Funding Analysis is not provided in these accounts.

2020/21 £000	Expenditure and Income Analysis by Nature	2021/22 £000
(188,116)	Partners funding contribution and non-specific grant income	(205,900)
(15,837)	Fees and charges and other service income	(17,273)
(203,953)	Total Funding	(223,173)
46,345	Employee Costs	51,244
1,202	Premises Costs	882
296	Transport Costs	479
20,438	Supplies & Services	23,740
57,140	Third Party Payments	61,243
2,454	Support Costs	2,499
15,708	Prescribing	16,432
26,205	Family Health Service	28,263
28,177	Acute Hospital Services	27,892
202	Corporate Costs	204
27	External Audit Fee	28
198,194	Cost of Services	212,906

3. Taxation and Non Specific Grant Income

2020/21 £000	Taxation and Non Specific Grant Income	2021/22 £000
57,531	East Renfrewshire Council	67,228
118,742	NHS Greater Glasgow and Clyde	126,738
11,843	Resource Transfer	11,934
188,116	Partners Funding Contribution & Non Specific Grant Income	205,900

The funding contribution from NHS Greater Glasgow and Clyde includes East Renfrewshire's use of set aside for delegated services provided in large hospitals (£27.892 million in 2021/22 and £28.177 million in 2020/21). These services are provided by the NHS, which retains responsibility for managing the costs of providing the service; the IJB however, has responsibility for the consumption of and level of demand placed on these services.

4. Hosted Services - Learning Disability Inpatients & Augmentative and Alternative Communication

As detailed at Note 11 the IJB has considered the basis of the preparation of the 2021/22 accounts for Learning Disability In-Patient Services and Augmentative & Alternative Communication (AAC) services hosted by the East Renfrewshire IJB for other IJBs within the NHS Greater Glasgow & Clyde Area.

The IJB is considered to be acting as a 'principal' and the 2021/22 financial statements have been prepared on this basis with the full costs of such services being reflected in the 2021/22 financial statements. The cost of the hosted service provided to other IJBs as well as that consumed by East Renfrewshire for the Learning Disability Inpatients and Augmentative and Alternative Communication is detailed in the following tables.

2020/21 £000	Learning Disability In-Patient Services Hosted by East Renfrewshire IJB	2021/22 £000
5,855	Glasgow	5,655
1,942	Renfrewshire	1,993
795	Inverclyde	551
691	West Dunbartonshire	310
-	East Dunbartonshire	-
9,283	Learning Disability In-Patients Services Provided to other IJBs	8,509
11	East Renfrewshire	313
9,294	Total Learning Disability In-Patient Services	8,822

2020/21 £000	Augmentative and Alternative Communication (AAC) Hosted by East Renfrewshire IJB	2021/22 £000
89	Glasgow	97
33	Renfrewshire	22
3	Inverclyde	26
3	West Dunbartonshire	4
19	East Dunbartonshire	22
147	AAC Services Provided to other IJBs	171
19	East Renfrewshire	40
166	Total AAC Services	211

Likewise, other IJBs act as the principal for a number of other hosted services on behalf of the East Renfrewshire IJB, as detailed below; such costs are reflected in the financial statements of the host IJB.

2020/21 £000	Services Provided to East Renfrewshire IJB by Other IJBs within NHSGGC	2021/22 £000
451	Physiotherapy	435
43	Retinal Screening	43
352	Podiatry	474
285	Primary Care Support	289
325	Continence	342
594	Sexual Health	600
1,168	Mental Health	990
867	Oral Health	789
346	Addictions	350
197	Prison Health Care	209
158	Health Care in Police Custody	171
4,644	Psychiatry	3,846
9,430	Net Expenditure on Services Provided	8,538

5. Related Party Transactions

The following financial transactions were made with East Renfrewshire Council and NHS Greater Glasgow and Clyde relating to integrated health and social care functions during 2021/22. The nature of the partnership means that the IJB may influence, and be influenced by its partners.

2020/21 £000	Income – Payments for Integrated Functions	2021/22 £000
122,395	NHS Greater Glasgow and Clyde	130,541
81,558	East Renfrewshire Council	92,632
203,953	Total	223,173

2020/21 £000	Expenditure – Payments for Delivery of Integrated Functions	2021/22 £000
122,395	NHS Greater Glasgow and Clyde	130,541
75,799	East Renfrewshire Council	82,365
198,194	Total	212,906

2020/21 £000	Closing Reserve Balance (held within ERC on behalf of IJB)	2021/22 £000
-	NHS Greater Glasgow and Clyde	-
10,485	East Renfrewshire Council	20,752
10,485	Total	20,752

6. Corporate Expenditure

2020/21 £000	Corporate Expenditure	2021/22 £000
202 27	Staff Costs Audit Fee	204 28
229	Total	232

The cost associated with running the IJB has been met in full by East Renfrewshire Council and NHS Greater Glasgow and Clyde reflecting the continuation of the arrangement for the previous Community Health and Care Partnership.

The costs charged to the IJB in respect of non-voting members include the Chief Officer and Chief Financial Officer. Details of the remuneration for post holders are provided in the Remuneration Report.

The costs of other key management staff who advise the IJB, such as the Chief Social Work Officer and the Chief Nurse are reflected within operational budgets. Those costs above reflect only the IJB statutory posts.

NHS Greater Glasgow and Clyde did not charge for any support services provided in the year ended 31st March 2022.

The support services provided through East Renfrewshire Council are included within the funding provided to the IJB as set out in the Scheme of Integration and the charge is included for 2021/22. The Covid-19 related costs within these services has been met from our Covid-19 funding.

Fees payable to Audit Scotland in respect of external audit services undertaken in accordance with Audit Scotland's Code of Audit Practice for 2021/22 amounted to £27,960. Audit Scotland did not provide any non-audit services during 2021/22.

VAT is not included in the costs identified.

7. Short Term Debtors and Creditors

2020/21 £000	Short Term Debtors	2021/22 £000
- 11,245	NHS Greater Glasgow and Clyde East Renfrewshire Council	- 21,130
11,245	Total	21,130

2020/21 £000	Short Term Creditors	2021/22 £000
760 -	NHS Greater Glasgow and Clyde East Renfrewshire Council	378 -
760	Total	378

As at 31st March 2022 there was a debtor balance of £9.751 million from NHSGGC to the IJB. As the cash flow and balance is held on behalf of the IJB within ERC the debtor balance is included here.

8. Reserves

As at 31st March 2022 the IJB holds earmarked reserves in order to fund expenditure in respect of specific projects. In addition a general reserve is also held to allow us to meet any unforeseen or unanticipated events that may impact on the IJB.

The reserves are part of the financial strategy of the IJB in order to better manage the costs and risks across financial years.

The reserves of the IJB fall into three types:

- Ring-fenced: the funding is earmarked and can only be used for that specific purpose
- Earmarked: the funding has been allocated for a specific purpose
- General: this can be used for any purpose

The year on year movement in reserves is summarised:

Reserves Movement	£ Million	£ Million
Reserves at 31 March 2021		10.485
Planned use of existing reserves during the year	(3.938)	
Funds added to reserves during the year	14.205	
Net increase in reserves during the year		10.267
Reserves at 31 March 2022		20.752

The table on the following page provides the detailed movement across all reserves.

2020/21 £000	Reserves	Used £000	Added £000	Transfers In / (Out) £000	2021/22 £000
156	Mental Health Action 15	-	59	-	215
191	Alcohol & Drugs Partnership	7	342	-	526
39	Drugs Death Taskforce	1	104	-	142
915	Primary Care Improvement	-	1,070	-	1,985
101	GP Premises Fund	-	80	-	181
3,145	COVID Allocations	3,145	9,266	-	9,266
-	- Winter Planning	-	1,012	-	1,012
4,547	Total Ring-Fenced Reserves	3,153	11,933	-	13,327
1,879	Budget Savings Phasing	-	837	-	2,716
165	In Year Pressures	-	-	-	165
510	Prescribing	54	-	-	456
2,554	Total Bridging Finance	54	837	-	3,337
460	Residential Accommodation	-	-	-	460
183	Health Visitors	148	-	-	35
58	Home & Belonging	-	-	-	58
687	Counselling in Schools	-	-	-	687
15	Child Healthy Weight Programme	-	-	-	15
127	Children and Young Peoples Mental Health Framework	127	-	-	-
101	Recovery Activity with Partners	101	-	-	-
-	- Children and Adolescent Mental Health Services	-	888	-	888
-	- Trauma Informed Practice	-	50	-	50
-	- Whole Family Wellbeing	-	29	-	29
-	- Unaccompanied Asylum Seekers Children	-	24	-	24
1,631	Children & Families	376	991	-	2,246
654	Transitional Funding Learning Disability Specialist Services	220	-	-	434
74	District Nursing	74	-	-	-
295	Learning Disability Community Living Change	-	-	-	295
37	Addictions Residential Rehabilitation	-	-	-	37
16	Mental Health Officer/Community Psychology/Capacity	-	45	-	61
51	Care Home Oversight Support	-	74	-	125
70	Augmentative & Alternative Communication	-	15	-	85
-	- Lead Nurse - Care Homes Allocation	-	52	-	52
-	- Armed Forces Covenant	-	60	-	60
-	- Wellbeing	-	88	-	88
-	- Dementia Funding	-	68	-	68
-	- Telecare Fire Safety	-	18	-	18
543	Adult Services	74	420	-	889
100	Renewals & Repairs Fund	-	24	-	124
92	Partnership Strategic Framework	61	-	-	31
92	Organisational Learning & Development	-	-	-	92
184	Total Capacity	61	-	-	123
5,666	Total Earmarked Reserves	785	2,272	-	7,153
272	Total General Reserves	-	-	-	272
10,485	Total All Reserves	3,938	14,205	-	20,752

9. Contingent Assets and Liabilities

There are no contingent assets or liabilities as at 31st March 2022.

10. New standards issued but not yet adopted

The Code requires the disclosure of information relating to the impact of an accounting change that will be required by a new standard that has been issued but not yet adopted. The IJB considers that there are no such standards which would have a significant impact on the 2021/22 annual accounts.

11. Critical Judgements

In applying the accounting policies set out above, the IJB has had to make a critical judgement relating to complex transactions in respect of Learning Disability Inpatients Services and AAC services hosted within the East Renfrewshire IJB for other IJB's within the NHS Greater Glasgow & Clyde area. Within NHS Greater Glasgow & Clyde each IJB has operational responsibility for services which it hosts on behalf of other IJB's. In delivering these services the IJB has primary responsibility for the provision of services and bears the risk and reward associated with this service delivery in terms of demand and the financial resources required. As such the IJB is considered to be acting as 'principal' and the full costs should be reflected within the financial statements for the services which it hosts. This is the basis on which the 2021/22 accounts have been prepared.

12. Estimation Uncertainty

There are no estimations included within the 2021/22 accounts.

13. Post Balance Sheet Events

The final annual report and accounts will be presented for approval on 23rd November 2022.

There have been no adjusting events (events which provide evidence of conditions that existed at the balance sheet date) and no such adjusting events have been reflected in the financial statements or notes. Likewise there have been no non – adjusting events, which are indicative of conditions after the balance sheet date, and accordingly the financial statements have not been adjusted for any such post balance sheet events.

14. Prior Period Restatement

There was a revision to the 2020/21 set aside figure, provided by NHS Greater Glasgow and Clyde however as this is not material no restatement is required. This related to activity from the Royal Hospital for Children and the expenditure figure reduced by £0.148 million.

Where to find more information

In This Document

The requirements governing the format and content of the IJB annual accounts follows guidance issued by the Integrated Resources Advisory Group and by The Local Authority (Scotland) Accounts Advisory Committee (LASAAC).

On Our Website

Further information on the Accounts can be obtained on East Renfrewshire Council's website <http://www.eastrenfrewshire.gov.uk/health-and-social-care-integration> or from East Renfrewshire HSCP, Eastwood Health and Care Centre, Drumby Crescent, Clarkston, G76 7HN.

Useful Links

Strategic Plan – full plan and summary

https://www.eastrenfrewshire.gov.uk/media/7569/HSCP-Strategic-Plan-2022-2025/pdf/East_Renfrewshire_HSCP_-_Strategic_Plan_2022-2025.pdf?m=637847662804030000

<https://indd.adobe.com/view/badd5a41-54e9-4205-973a-06e3b4134c9b>

Medium Term Financial Plan

https://www.eastrenfrewshire.gov.uk/media/7567/Medium-term-financial-plan-2022-23-to-2026-27/pdf/Medium_Term_Financial_Plan_-_Mar_2022.pdf?m=637846608465330000

Integration Scheme

https://www.eastrenfrewshire.gov.uk/media/7035/East-Renfrewshire-Integration-Scheme-2018-Update/pdf/East_Renfrewshire_Integration_Scheme_-_2018_Update.pdf?m=637704037531600000

Annual Performance Report

https://www.eastrenfrewshire.gov.uk/media/8149/IJB-Item-06-21-September-2022/pdf/IJB_Item_06_-_21_September_2022.pdf?m=637983202014730000

Strategic Risk Register

https://www.eastrenfrewshire.gov.uk/media/8183/Performance-and-Audit-Committee-Item-11-21-September-2022/pdf/Performance_and_Audit_Committee_Item_11_-_21_September_2022.pdf?m=637987495064500000

It should be noted that the links above relate to the associated documents as at September 2022 and there may be later versions available on our website.

Acknowledgement

I wish to record my thanks to staff within the HSCP for their co-operation in producing the audited Annual Report and Accounts in accordance with the prescribed timescale. In particular the support of the Accountancy and Policy & Performance staff within the partnership are gratefully acknowledged.

Anne-Marie Monaghan
Chair
Integration Joint Board

23rd November 2022

Julie Murray
Chief Officer
Integration Joint Board

23rd November 2022

Lesley Bairden ACMA CGMA
Chief Financial Officer
Integration Joint Board

23rd November 2022

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East Renfrewshire Health and Social Care Partnership
Eastwood Health and Care Centre, Drumby Crescent, Clarkston, G76 7HN
Phone: 0141 451 0749
Date: November 2022

John Boyd, Audit Director
Audit Scotland
4th Floor
8 Nelson Mandela Place
Glasgow
G2 1BT

Dear John

East Renfrewshire Integration Joint Board Annual Accounts 2021/22

1. This representation letter is provided in connection with your audit of the annual accounts of East Renfrewshire Integration Joint Board for the year ended 31 March 2022 for the purpose of expressing an opinion as to whether the financial statements give a true and fair view in accordance with the financial reporting framework, and for expressing other opinions on the remuneration report, management commentary and annual governance statement.
2. I confirm to the best of my knowledge and belief and having made appropriate enquiries of the Performance and Audit Committee, the following representations given to you in connection with your audit of East Renfrewshire Integration Joint Board's annual accounts for the year ended 31 March 2022.

General

3. East Renfrewshire Integration Joint Board and I have fulfilled our statutory responsibilities for the preparation of the 2021/22 annual accounts. All the accounting records, documentation and other matters which I am aware are relevant to the preparation of the annual accounts have been made available to you for the purposes of your audit. All transactions undertaken by East Renfrewshire Integration Joint Board have been recorded in the accounting records and are properly reflected in the financial statements.
4. I confirm that the effects of uncorrected misstatements are immaterial, individually and in aggregate, to the financial statements as a whole. I am not aware of any uncorrected misstatements other than those reported by you.

Financial Reporting Framework

5. The annual accounts have been prepared in accordance with the Code of Practice on Local Authority Accounting in the United Kingdom 2021/22 (2021/22 accounting code), mandatory guidance from LASAAC, and the requirements of the Local Government

(Scotland) Act 1973, the Local Government in Scotland Act 2003 and The Local Authority Accounts (Scotland) Regulations 2014.

6. In accordance with the 2014 regulations, I have ensured that the financial statements give a true and fair view of the financial position of East Renfrewshire Integration Joint Board at 31 March 2022 and the transactions for 2021/22.

Accounting Policies & Estimates

7. All significant accounting policies applied are as shown in the notes to the financial statements. The accounting policies are determined by the 2021/22 accounting code, where applicable. Where the code does not specifically apply, I have used judgement in developing and applying an accounting policy that results in information that is relevant and reliable. All accounting policies applied are appropriate to East Renfrewshire Integration Joint Board's circumstances and have been consistently applied.

8. The significant assumptions used in making accounting estimates are reasonable and properly reflected in the financial statements. Judgements used in making estimates have been based on the latest available, reliable information. Estimates have been revised where there are changes in the circumstances on which the original estimate was based or as a result of new information or experience.

Going Concern Basis of Accounting

9. I have assessed East Renfrewshire Integration Joint Board's ability to continue to use the going concern basis of accounting and have concluded that it is appropriate. I am not aware of any material uncertainties that may cast significant doubt on East Renfrewshire Integration Joint Board's ability to continue as a going concern.

Liabilities

10. All liabilities at 31 March 2022 of which I am aware have been recognised in the annual accounts.

11. There are no plans or intentions that are likely to affect the carrying value or classification of the liabilities recognised in the financial statements.

Fraud

12. I have provided you with all information in relation to

my assessment of the risk that the financial statements may be materially misstated as a result of fraud

any allegations of fraud or suspected fraud affecting the financial statements

fraud or suspected fraud that I am aware of involving management, employees who have a significant role in internal control, or others that could have a material effect on the financial statements.

Laws and Regulations

13. I have disclosed to you all known instances of non-compliance or suspected non-compliance with laws and regulations whose effects should be considered when preparing financial statements.

Related Party Transactions

14. All material transactions with related parties have been appropriately accounted for and disclosed in the financial statements in accordance with the 2021/22 accounting code. I have made available to you the identity of all East Renfrewshire Integration Joint Board's related parties and all the related party relationships and transactions of which I am aware.

Remuneration Report

15. The Remuneration Report has been prepared in accordance with the Local Authority Accounts (Scotland) Regulations 2014, and all required information of which I am aware has been provided to you.

Management commentary

16. I confirm that the Management Commentary has been prepared in accordance with the statutory guidance and the information is consistent with the financial statements.

Corporate Governance

17. I confirm that East Renfrewshire Integration Joint Board has undertaken a review of the system of internal control during 2021/22 to establish the extent to which it complies with proper practices set out in the Delivering Good Governance in Local Government: Framework 2016. I have disclosed to you all deficiencies in internal control identified from this review or of which I am otherwise aware.

18. I confirm that the Annual Governance Statement has been prepared in accordance with the Delivering Good Governance in Local Government: Framework 2016 and the information is consistent with the financial statements. There have been no changes in the corporate governance arrangements or issues identified, since 31 March 2022, which require to be reflected.

Balance Sheet

19. All events subsequent to 31 March 2022 for which the 2021/22 accounting code requires adjustment or disclosure have been adjusted or disclosed.

Yours sincerely

Lesley Bairden
Head of Finance and Resources
Chief Finance Officer

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East Renfrewshire Health and Social Care Partnership Integration Joint Board

Summary Financial Overview 2021/22

Covering the period 1st April 2021 to 31st March 2022

Introduction

This report provides a summary of the financial position for East Renfrewshire Integration Joint Board (IJB) for the financial year 1 April 2021 to 31 March 2022.

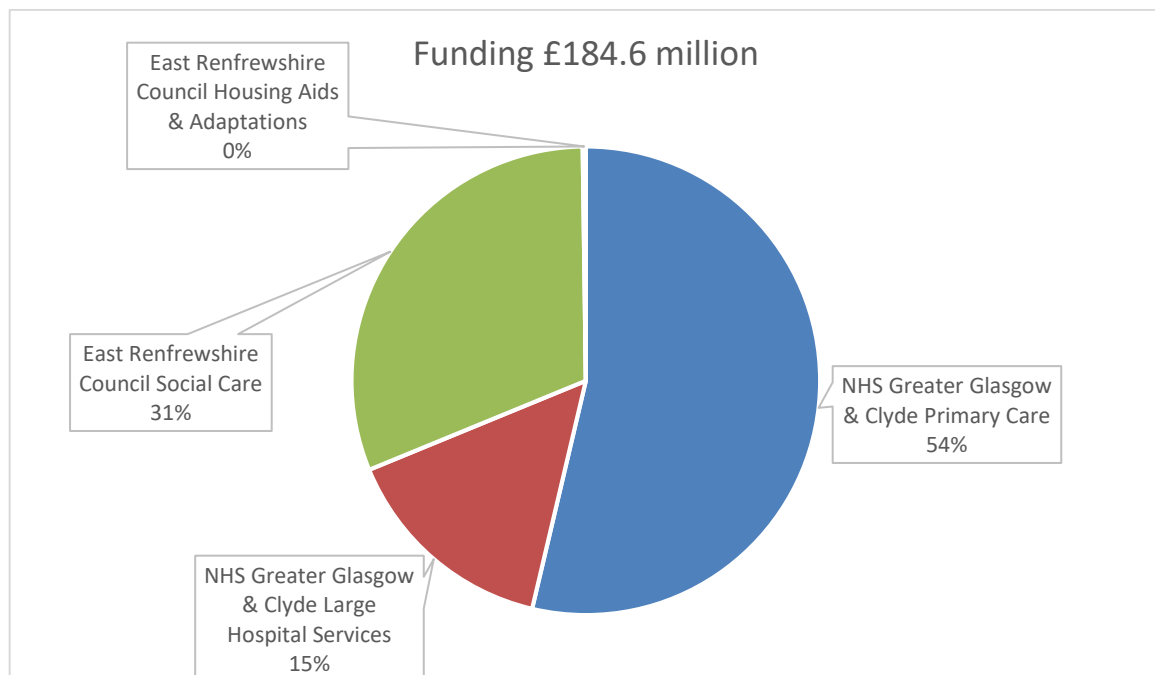
The Annual Report and Accounts for 2021/22 provides a detailed report and full version of the accounts and can be found on our website at [web address will be added following approval of IJB accounts].

The financial performance for the year includes a section on Covid-19 costs, fully funded by the Scottish Government. Our continued response to the pandemic meant we had to look at new ways of working and maintain safe delivery of services to our communities. It was another very challenging and demanding year delivering services in an ever changing environment.

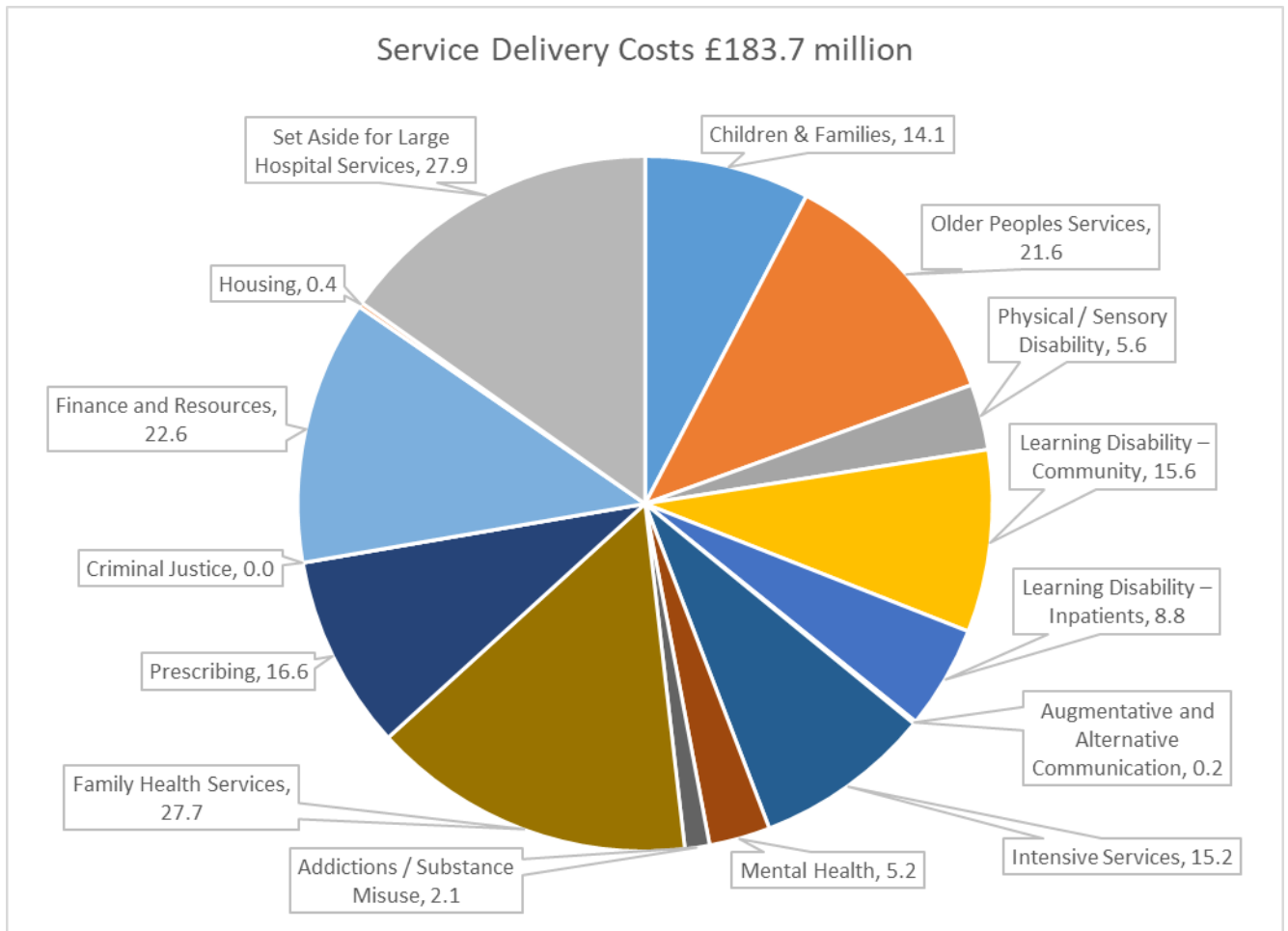
The Scottish Government recognised some of the challenges in delivering services, especially where capacity and recruitment was a factor and provided winter support funding during 2021/22 and this continued into 2022/23 as well. The detail of this is also included in full report.

Financial Performance

The IJB receives the vast majority of its funding from our two key partners East Renfrewshire Council and NHS Greater Glasgow and Clyde and this totalled £184.5 million

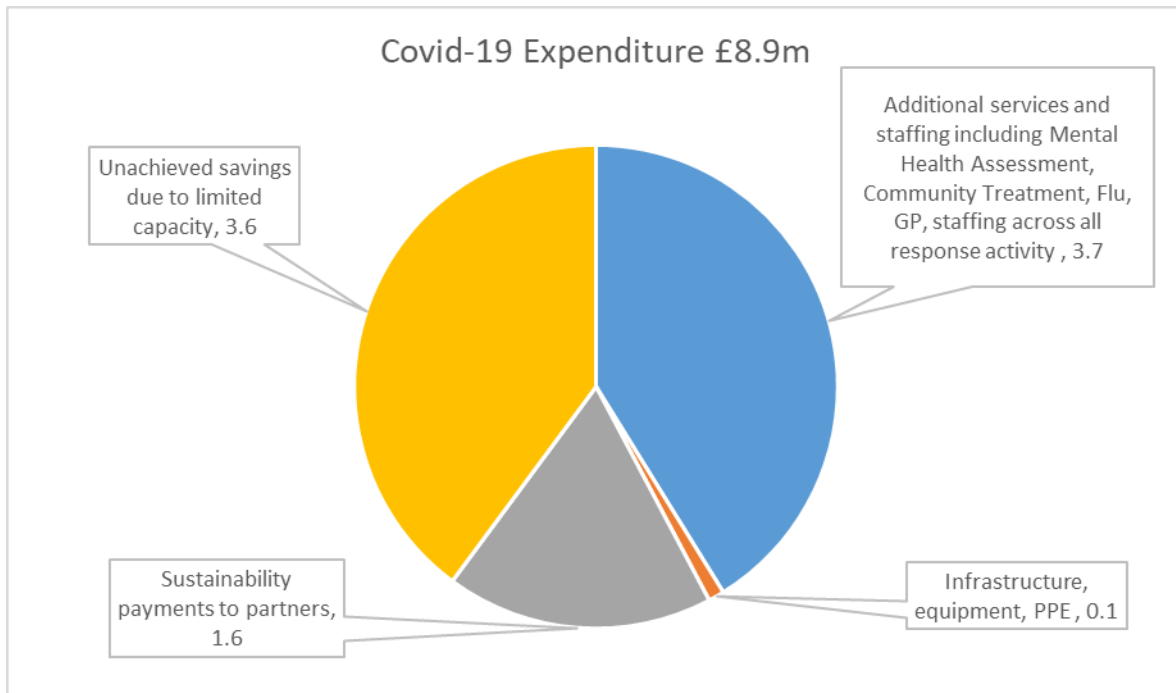


We spent £183.7 million of this funding delivering the following services:



This meant we underspent by under £0.9 million and we added this into the reserves we hold to be used in financial year 2022/23.

The IJB started 2021/22 in a challenging position as we needed to make savings of £3.6 million saving to balance our budget. However, we did not have capacity to work on redesign or change to make this saving as our focus was on responding to the pandemic. We received Covid-19 support funding for this as part of the £8.9 million we spent on Covid-19 costs over and above our “normal” spending on delivering services.



We received additional Covid-19 funding from the Scottish Government late in the financial year and this meant we took £9.3 million of this into 2022/23 to meet some of our ongoing costs. We will not get support for our legacy savings from this funding and we are required to return any unused balance to the Scottish Government.

Continuing to Respond to the Covid-19 Pandemic

The year of 2021/22 was shaped by the continued challenge of the Covid-19 pandemic; another unprecedented year where our staff across the HSCP continued to respond with incredible resilience, commitment and creativity. This dedication allowed us to work through the emergence of the Omicron variant and successfully deliver services despite a very difficult and challenging winter period.

Our local care homes experienced another challenging year with a number of outbreaks due to the new variant, although residents experienced milder symptoms. As community transmission was high this affected a number of staff so capacity to deliver care was reduced. The HSCP continue to work with and support our partners.

The HSCP has delivered vaccinations to care home residents and staff, as well as housebound patients. Care home staff were also offered vaccination alongside residents during vaccination visits support the maximum uptake of the Covid-19 vaccination.

Our demand for care at home continues to rise and we have seen an increase in the complexity of people's needs as a result of Covid-19.

We have had significant recruitment and retention challenges and as the pandemic continued our workforce are increasingly fatigued. We have a significant focus on supporting staff health and wellbeing, both within the HSCP and with our partners to support our collective staff as best we can.

The Personal Protective Equipment (PPE) hub set up by HSCP support staff remained in operation and continued to distribute essential protective supplies and Lateral Flow Device test kits during the year.

Our strong local partnerships allow us to continue to respond with innovation and collaborative working with and in support of our local communities.

Even with these challenges the HSCP has continued to deliver services and support our vulnerable children and families, adults and older people throughout the pandemic.

Moving Towards Recovery

Whilst many of the services we provide are critical and continued to operate through the pandemic we have an opportunity to learn from the last 2 years and this helps to inform our Recovery and Renewal programme; a complex and multi-year programme of work that will allow us to emerge from the pandemic in a stronger and more informed position to face the challenges ahead.

This should not only support the significant financial challenge we are facing but will also help us to better understand and quantify the longer term impact of Covid-19 on our population.

Challenges for 2022/23 and Beyond

Our funding gap in 2022/23 is £2.6 million as we were able to reduce some cost pressures coming into the year.

The IJB continues to face a number of challenges, risks and uncertainties in the coming years and this is set out in our current Medium-Term Financial Plan (MTFP) for 2022/23 to 2026/27 and our Strategic Plan for 2022/23 to 2024/25.

When we published our MTFP in March 2022 the funding gap in future years ranged from £0 to £5.7 million per year, excluding unknown factors, recent inflation implications and any additional savings requirements.

Now the current cost pressures look closer to £9 million to £13 million in 2023/24 and £4 million to £9 million in the following two years. This takes into account the impact of pay, inflation, utilities costs and other economic impacts since April 2022.

Our funding gap has significantly increased and the amount of savings we will need to make will be dependent on the funding settlement for each year. We are expecting a very difficult few years ahead.

We need to be able to set a budget that allows us enough capacity to deliver increased demand for services. Our population is growing in size, particularly our number elderly citizens and we still do not know the ongoing and long term impact of Covid-19 on peoples health.

We continue to work closely with our partner Care Providers as they are also facing similar challenges to us. By working together we will deliver the services our population needs.

We do not know what change may come from the Scottish Government consultation on a National Care Service.



Meeting of East Renfrewshire Health and Social Care Partnership	Performance and Audit Committee
Held on	23 November 2022
Agenda Item	10
Title	Commissioned Services
<p>Summary</p> <p>The purpose of this report is to provide the Performance and Audit Committee with an overview of the current arrangements in place to commission health and care with external partners.</p>	
Presented by	Margaret Phelps, Senior Manager Planning and Performance and Commissioning Manager
<p>Action Required</p> <p>It is recommended that the Performance and Audit Committee note and comment on the arrangements in place to commission health and care with external partners.</p>	

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EAST RENFREWSHIRE PERFORMANCE AND AUDIT COMMITTEE

23 November 2022

Report by Chief Officer

COMMISSIONED SERVICES

PURPOSE OF REPORT

1. The purpose of this report is to provide the Performance and Audit Committee with an overview of the current arrangements in place to commission health and care services with external partners.

RECOMMENDATION

2. It is recommended that the Performance and Audit Committee note and comment on the arrangements in place to commission health and care services with external partners.

BACKGROUND

3. The Public Bodies (Joint Working) (Scotland) Act 2014 require Integration Authorities to develop and review their strategic commissioning plan at least every three years. In doing so the Integration Joint Board sets out within their Strategic Plan how health and social care services will be delivered across East Renfrewshire.
4. The Strategic Plan describes our partnership and vision recognising the benefits of working collaboratively as a broad and inclusive partnership and includes the range of services that are commissioned and delivered by our external partners.
5. During 2020/21 the Contracts and Commissioning Team was re-established following staff turnover. The team comprises a Senior Manager: Planning, Performance and Commissioning, two Market Facilitation and Commissioning Officers and two Contract Monitoring Officers. In response to the pandemic the team's priority was to provide liaison between HSCP and our external providers and to offer assurance through our commissioning and contract monitoring arrangements. For some of our providers, particularly our care homes, this support was provided on a daily basis offering liaison and support, identifying key pressures, ensuring national guidance including access to infection, prevention and control measures and processing sustainability payments. This initial period laid strong foundations for the partnership approach that has been established with our external providers.
6. In addition the team supported care and support providers to transfer to the new Scotland Excel Care and Support framework effective from 1st April 2021. The team are leading on supporting services to ensure our contract monitoring and commissioning arrangements with external partners are fit for purpose. A programme of review is underway with the introduction of new systems and processes to support the range of contract arrangements in place.

REPORT

7. The Strategic Commissioning Plan 2018/21 identified the following commissioning intentions to support the delivery of the Strategic Plan which were aligned to service redesign and national transformational change programmes.
 - Transformation and Sustainability
 - Community Led Support
 - Prevention and Early Intervention
 - Mental Health and Recovery
 - Getting the Right Support
 - Transforming Models of Care
 - Building Capacity in Primary and Community Care
 - Digital and Technology Enabled Care and Support
8. In addition to the Commissioning Plan, the HSCP set out an ambitious change programme to transform service delivery and realise identified efficiencies. This programme was put on hold to respond to the significant challenges presented by the pandemic and by default the current plan was extended. The Recovery and Renewal Programme has now recommenced to allow for the original change programme and expand this into a broader transformation programme which incorporates recovery. There is broad alignment in relation to the work programmes identified in both the Commissioning Plan and Recovery and Renewal Programme.
9. This Commissioning Plan will be refreshed by March 2023 to reflect the renewed Strategic Plan 2022/25 and to reflect the work underway in respect of the HSCP, national and Greater Glasgow and Clyde transformation programmes including; Coming Home Implementation Report, The Promise (Independent Care Review), Primary Care Improvement and the National Care Service. Work is already underway to develop our collaborative commissioning approach for East Renfrewshire bringing partners, services and people who use services and carers together.

Partnership Working – Commissioned Services

10. The HSCP works alongside a range of external partners to deliver health and social care services as part of the following contractual arrangements. The contractual arrangements have been revised to ensure greater choice and control for individuals, sustainability for the provider sector and ensure compliance with Scottish Government policy. The report shows spend for purchased care for the 12 months from April 2021 to March 2022.
11. **Care at Home** – £4.237 million total expenditure with £4.019 million through framework providers and £0.218 million off framework.
12. **Care and Support** –£14.854 million total expenditure with £14.125 million through framework providers and £0.729 million off framework.
13. **Nursing and Residential Care Contracts** – the total expenditure for nursing and residential placements was £12.372 million.
14. **Quick Quotes** – The value of quick quotes during this period was nil. A quick quote value is between £10,000 and £49,999.
15. **Direct Awards** – The HSCP received approval to make 6 direct awards during this period, working alongside Council corporate procurement and legal services. The awards were in the area of adult services and reflect the specialist nature of the purchasing activity.

16. **Grant Payments** - the HSCP issued 28 grant awards to 20 organisations totalling £2.669 million.
17. **Scotland Excel frameworks**- a number of contracts have been revised with the introduction of the following frameworks;
 - a. Secure Care
 - b. Fostering & Continuing Care Services
 - c. Children's residential care and education including short breaks
 - d. Agency Workers (Social Care)
 - e. Care and Support
18. Wherever reasonably practicable services are commissioned using framework providers to arrange care and support. We recognise that there needs to be choice and control for individuals, families and their carers.
19. Exceptions can occur for a range of reasons including provider capacity, requiring recruitment processes to be taken forward; provider contract compliance and other quality of care related matters. In addition where care of a specialised nature is required which may include developing a bespoke package of care or with costs over £100k these will require additional approval by the Senior Management Team.

Collaborative Commissioning

20. Work is ongoing to develop a collaborative commissioning approach for East Renfrewshire HSCP and will take the form of a shared statement of intent setting out agreed principles and approach which are co-designed with wider partners and stakeholders.
21. This approach recognised the Scottish Government policy and guidance to deliver a strategic commissioning plan in support of the 2014 Public Bodies Act. More recently, the Audit Scotland Report on Progress in Integration (2019), the Independent Review of Adult Social Care and the legislative intention within the National Care Service Bill. This successive policy context describe a new way of working which will be human rights based, person centred, reflect peoples lived experience, have fair work principles, support climate and circular economy, financial transparency and deliver high quality care. These 8 care principles (Circular SPPN7/2021) focus on developing a collaborative and ethical commissioning approach with all partners and stakeholders.
22. Three collaborative commissioning events were held in June 2022, with two face to face events and one online event. Invitations were distributed through our internal and external networks to HSCP services, partner providers, community and voluntary organisations and included people and carers who use our services. The programme was planned to offer a brief overview of our East Renfrewshire context, to explore challenges, to hear from Health Improvement Service (HIS) and Coalition of Care Providers Scotland (CCPS) about work and developments across Scotland and to collectively identify opportunities for future collaboration.
23. A follow up event in October focused on key themes identified and these are set out below. The work streams will monitor progress and identify opportunities for collaborative working; Funding and transparency on budgets
 - Communication and information
 - Involving providers, partners and people
 - Culture change
 - Processes and systems
 - Staff valuing and rewarding

24. In addition a number of service redesign initiatives are bringing partners, services and people who use services together to consider future options for service delivery. The Living Well in East Renfrewshire event held on 4th November 2022 brought together care at home delivery partners to explore options for commissioning and delivering services differently. All of this work will be underpinned by the collaborative and ethical approach commissioning. The table below sets progress to date and the next steps:

April – May 2022	Map and identify key stakeholders and partners	Complete
April 2022	Identify critical friend e.g. CCPS representative and HIS	Complete
April - May 2022	Plan for Collaborative Commissioning event in late Spring/summer (May 2022)	Complete
June 2022	Collaborative Commissioning Events; 21 st June 2022 – Barrhead 27 th June 2022 – Eastwood 30 th June 2022- Online	Complete
June 2022	Issue Collaborative Commissioning reports to partners and stakeholders	Complete
May 2022 – January 2023	Develop agreed collaborative commissioning definition approach for East Renfrewshire health and social care partners	In progress
August 2022	Update on Collaborative Commissioning Events to be presented to Strategic Planning Group	Complete
September 2022	Small Working Group meeting to review feedback and to progress collaborative commissioning statement of intent.	Ongoing
October 2022 – March 2023	Follow Up meeting and work groups identified to progress local priorities	Ongoing
August 2022- March 2023	Support services to develop collaborative commissioning approach ; <ul style="list-style-type: none"> • Care at Home • Coming Home Implementation • Day opportunities redesign 	Ongoing
March 2023	Revised Strategic Commissioning Plan for East Renfrewshire (collaborative commissioning statement of intent).	In progress

25. Within the Recovery and Renewal Programme there are a number of projects that require significant input by the Commissioning Team to support service redesign and associated efficiencies. The Commissioning Team will lead the review on commissioned services with the aim to ensure all framework and contractual opportunities are maximised. Future progress on this work will be reported through the Recovery and Renewal Programme.

CONCLUSION

26. This report recognises the contribution that partners make to the delivery of health and social care services. It sets out the range of contractual arrangements currently in place to support our commissioning across the independent and third sector. The Commissioning Plan will be updated to reflect the future direction, will recognise and commit to involving partners, stakeholders and people as opportunities arise to participate in any new service planning or redesign. The 8 core principles for collaborative and ethical commissioning will underpin this approach as we develop our shared commissioning statement for East Renfrewshire. These principles will also underpin the commissioning input to the Recovery and Renewal Programme.

RECOMMENDATION

27. It is recommended that the Performance and Audit Committee note and comment on the arrangements in place to commission health and care services with external partners.

REPORT AUTHOR AND PERSON TO CONTACT

Margaret Phelps; Strategic Planning, Performance and Commissioning Manager
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Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

None

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Meeting of East Renfrewshire Health and Social Care Partnership	Performance and Audit Committee
Held on	23 November 2022
Agenda Item	11
Title	Audit Update
<p>Summary</p> <p>This report provides Performance and Audit Committee with an update on:-</p> <ul style="list-style-type: none"> • Any new audit activity relating to the Integration Joint Board since last reported to Performance and Audit Committee in September 2022 • Any new audit activity relating to the Health and Social Care Partnership since last reported to Performance and Audit Committee in September 2022 • Summary of all open audit recommendations 	
Presented by	Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)
<p>Action Required</p> <p>Performance and Audit Committee are asked to note and comment on the report.</p>	

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

PERFORMANCE AND AUDIT COMMITTEE

23 November 2022

Report by Chief Officer

AUDIT UPDATE

PURPOSE OF REPORT

1. This report provides Performance and Audit Committee with an update on:
 - Any new audit activity relating to the Integration Joint Board since last reported to Performance and Audit Committee in September 2022
 - Any new audit activity relating to the Health and Social Care Partnership since last reported to Performance and Audit Committee in September 2022
 - Summary of all open audit recommendations

RECOMMENDATION

2. Performance and Audit Committee are asked to note and comment on the report.

BACKGROUND

3. As agreed at the Performance and Audit Committee in June 2021 we will continue to submit audit update reports to all meetings, including any new audit reports along with an overview of audit activity undertaken and an update on any outstanding recommendations since last reported.
4. As previously requested, audit activity for the HSCP is provided in full and includes all current open audit actions across the HSCP and also where a Health Board or Council wide recommendation impacts on the HSCP. The specific actions from IJB audits are also detailed.
5. East Renfrewshire Council's Chief Internal Auditor undertakes the internal audit role for the Integration Joint Board. Audit Scotland also undertake an audit of the IJB Annual Report and Accounts and produce an action plan should they have any recommendations.

6. East Renfrewshire Council's internal audit assign the following risk ratings to their findings:

High	<ul style="list-style-type: none"> • Key controls absent, not being operated as designed or could be improved and could impact on the organisation as a whole. • Corrective action must be taken and should start immediately.
Medium	<ul style="list-style-type: none"> • There are areas of control weakness which may be individually significant controls but unlikely to affect the organisation as a whole. • Corrective action should be taken within a reasonable timescale.
Low	<ul style="list-style-type: none"> • Area is generally well controlled or minor control improvements needed. • Lower level controls absent, not being operated as designed or could be improved
Efficiency	<ul style="list-style-type: none"> • These recommendations are made for the purposes of improving efficiency, digitalisation or reducing duplication of effort to separately identify them from recommendations which are more compliance based or good practice.

7. NHSGGC internal audit function is undertaken by Azets. They assign the following risk ratings to their findings:

4	<ul style="list-style-type: none"> • Very high risk exposure - major concerns requiring immediate senior management attention.
3	<ul style="list-style-type: none"> • High risk exposure - absence / failure of key controls.
2	<ul style="list-style-type: none"> • Moderate risk exposure - controls not working effectively and efficiently.
1	<ul style="list-style-type: none"> • Limited risk exposure - controls are working effectively but could be strengthened.

REPORT

Audit Activity relating to the Integration Joint Board Audit (Appendix 1)

8. With the exception of the audit of the Annual Report and Accounts, no new audits have been undertaken in relation to the Integration Joint Board since last reported in September.
9. Outstanding recommendations relating to the Integration Joint Board are detailed in Appendix 1. These are from the following audit reports:-
- a) IJB Follow up (MB1163FM) (Appendix 1A)
 - The recommendation is considered closed, pending verification by internal audit
 - b) Audit Scotland annual audit plan (Appendix 1B)
 - The existing action plan will be superseded by that included in the Audit Scotland report earlier on the agenda following PAC and IJB governance.

East Renfrewshire Council Internal Audit Activity relating to the Health and Social Care Partnership (Appendix 2)

10. Since last reported, there have been 3 new audits undertaken by the Council's internal audit team which impact on the HSCP. Two relate solely to the HSCP and one which contains council wide recommendations.
11. As the responses to the audit action plans for the following three audits were submitted at the beginning of November, the 'latest note' column has not been updated and full updates will be provided to the next meeting of the Performance and Audit Committee.

Follow-up of Business Operations and Partnerships Audits - MB1177MB

12. A follow-up of previous reports issued to the Council's Business Operations and Partnerships department was issued on 22 September 2022 however only the section relating to *Mobile Phones (MB/1084/NS)* is relevant to the HSCP. The extract of this section is included at Appendix 2A, along with the HSCP response to the 2 recommendations.

Audit report on Barrhead Centre - MB1173NS

13. An audit of Barrhead Centre was carried out as part of the Annual Audit Plan for 2022/23. The report was issued on 30 September 2022 and is included at Appendix 2B.
14. The scope of the audit was to ensure that all income and expenditure is correctly accounted for and proper financial records are maintained. Audit testing covered the period December 2021 to May 2022. The audit focussed on the following areas:
 - Petty cash
 - Service User Funds
 - Purchasing
 - Staff existence and absence monitoring checks
 - Security Checks
 - Inventory
15. The report made a total of 11 recommendations; 5 low, 3 medium and 3 high.
16. It is acknowledged that a number of these recommendations fall within good housekeeping and partly due to how the service has operated during the pandemic, some of this rigour is not as strong as it should have been. Local discussions have taken place and an action plan is in place to deal with these recommendations on a timely basis.

Audit report on Follow-up of HSCP Audits - MB1168FM

17. A follow-up audit of previous reports for the Health and Social Care Partnership was issued on 30 September 2022 and is included at Appendix 2C. This report reviewed recommendations from the following audits:
 - CareFirst Finance
 - Homecare
 - Emergency Payments
 - Follow-up of HSCP Audits
 - Bonnyton House
 - Carers Legislation
18. This means that any open recommendations previously reported under the above audits have now been superseded.

Recommendations from previous audits (Appendices 2D-2G)

19. Members will recall from the last meeting that a number of recommendations had been verified as implemented, including all recommendations in relation to the following audits:
 - Follow up of Corporate and Community Services Audits
 - Data Protection Act / GDPR
 - Homecare

20. In addition, the recommendations from Procurement Red Flags were superseded by the Follow up of Environment Department Audits as reported at the last meeting.
21. This means, all historic audit recommendations which we were previously reporting on have now been either verified, or re-recommended by Internal Audit as part of their follow-up work, as noted above.
22. The table below summarises the total number of recommendations and the status for all current audits which impact on the HSCP. The total number of recommendations has reduced by 46 since last reported. Further detail is included on the relevant appendix

Audit Report and Appendix		Changes since last reported to PAC	Recommendations			
			Total no. for HSCP	Verified as implemented by Internal Audit	Considered implemented by HSCP (awaiting verification)	Total open
Follow up of Business Operations and Partnerships Department	2A	New	2	0	0	2
Barrhead Centre	2B	New	11	0	0	11
HSCP Follow-up	2C	New	20	0	0	20
Debtors	2D	No	2	0	2	0
Environment Follow-up	2E	No	3	0	0	3
Fostering, Adoption and Kinship	2F	No	3	0	1	2
Payroll	2G	No	8	0	8	0
TOTAL			49	0	11	38
Summary of Changes since September 2022			-46	-46	-21	+21

NHS Internal Audit Activity relating to the Health and Social Care Partnership

23. The Chief Internal Auditor has undertaken some benchmark analysis of reporting to other IJB audit committees within NHS Greater Glasgow and Clyde and will propose to PAC the level of information to be reported in future.

CONCLUSIONS

24. We will continue to report on all open audit recommendations relating to both the IJB and HSCP to provide assurance of control and enable oversight of previous audits and demonstrate progress.

RECOMMENDATIONS

25. Performance and Audit Committee are asked to note and comment on the report.

REPORT AUTHOR AND PERSON TO CONTACT

Lesley Bairden, Chief Financial Officer
Lesley.Bairden@eastrenfrewshire.gov.uk

7 November 2022

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

PAC Paper: 22.09.2022 – Audit Update

https://www.eastrenfrewshire.gov.uk/media/8181/Performance-and-Audit-Committee-Item-09-21-September-2022/pdf/Performance_and_Audit_Committee_Item_09_-_21_September_2022.pdf?m=63798749505200000

PAC Paper: 22.06.2022 – Audit Update

https://www.eastrenfrewshire.gov.uk/media/7782/Performance-and-Audit-Committee-item-10-22-June-2022/pdf/Performance_and_Audit_Committee_item_10_-_22_June_2022.pdf?m=637909081004700000

PAC Paper: 16.03.2022 – Audit Update

https://www.eastrenfrewshire.gov.uk/media/7490/PAC-Item-08-16-March-2022/pdf/PAC_Item_08_-_16_March_2022.pdf?m=637825962397570000

PAC Paper: 22.09.2021 – Audit Update

https://www.eastrenfrewshire.gov.uk/media/6842/PAC-item-07-22-September-2021/pdf/PAC_item_07_-_22_September_2021.pdf?m=637673822306700000

PAC Paper: 23.06.2021 – Audit Update

https://www.eastrenfrewshire.gov.uk/media/5749/PAC-Item-10-23-June-2021/pdf/PAC_Item_10_-_23_June_2021.pdf?m=637596213484470000

PAC Paper: 27.11.2019 - Audit Actions Update

https://www.eastrenfrewshire.gov.uk/media/1985/Performance-and-Audit-Committee-item-06-27-November-2019/pdf/Performance_and_Audit_Committee_Item_06_-_27_November_2019.pdf?m=637356832021000000

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Appendix	1A
Title	IJB follow up (MB1163FM)
Area	Internal Audit Activity relating to the Integration Joint Board
Status	No change since last reported to PAC Sep-22

Appendix 1A: MB/1163/FM – Follow up IJB Audits

Ref/ Risk Rating	Recommendation	Comments (if appropriate)	Timescale for completion	Status	Latest Note
4.1.1 (Low)	At the forthcoming SMT risk session, officers should be advised that the most recent version of the ERC operational risk register should be used in all cases.	We will reschedule a session on risk and will reissue the current template for use.	30 June 2022	Closed (pending verification by internal audit)	Discussion on risk registers at LRMT on 12.08.2022 (delayed to maximise attendance) and template shared. Development work taking place to streamline service planning, business continuity and risk.

Appendix	1B
Title	Audit Scotland 2020/21 Action Plan
Area	Internal Audit Activity relating to the Integration Joint Board
Status	No change since last reported to PAC Sep-22

Appendix 1B: Audit Scotland 2020/21 Action Plan

No	Issue	Risk	Recommendation	Agreed Management Action	Responsible Officer	Timing	Comments
1	General Reserve position						
	The general reserve position at 31 March 2021 is £272,000 which is below the IJBs reserve strategies recommendation that it holds uncommitted reserves of around 2% of the IJBs revenue budget (excluding significant fixed costs), which equates to around £1 million.	There is a risk that the uncommitted reserves held are not sufficient to meet longer-term financial pressures.	The level of general reserves should be reviewed, and appropriate action taken to comply with the stated reserves policy and bring the level of general reserves held into line with the Boards target. Paragraph 35	Whilst fully accepting we are not compliant with this policy this is a long-standing position for the IJB. As we have previously reported there is a tension between holding unallocated reserves when we have operated for a number of years with significant financial challenges. Our earmarked reserves strategy has allowed the IJB to prioritise service delivery. Without a significant increase in funding it is unlikely that the optimum 2% level of general reserve will be achieved.	Chief Financial Officer	31-Mar-22	Please see management actions - no change
2	Financial Sustainability						
	The IJBs medium-term financial outlook has been updated to reflect the impact of COVID-19. Over the next five years from 2022/23 a potential funding gap has been identified of £22 million. It is unlikely that efficiency savings alone will be sufficient to bridge the funding gap identified over the longer-term without significant impact to the level of service currently delivered by the IJB.	There is a risk that the IJB may not be able to deal with future financial challenges and deliver required savings without adversely impacting service delivery.	Continue to engage with partner bodies in relation to future funding levels, to ensure the IJB remains financially sustainable. Paragraph 40	The maturity of our IJB has allowed us to not only recognise the long-standing financial challenges we face, but also take a pragmatic approach to our financial planning. The future uncertainties have never been greater including understanding the impact Covid-19 on demand and complexity of need. The IJB recognised that the 2021/22 budget would be an iterative process, with funding changes relating to Covid-19 and other initiatives emerging as the year progressed. The IJB also recognised that without support for Covid-19 costs, including unachieved savings, that we would most likely need to invoke financial recovery planning. We will continue with our scenario planning, financial modelling and report our position to every IJB meeting. We will continue to work with our partners to articulate these challenges as part of our funding and performance discussions.	Chief Financial Officer	31-Mar-22	A refreshed MTFP is being taken to IJB on 16 March 2022 subject to agreement of the IJB Budget for 2022/23

3	Key performance indicators The IJBs performance against the key performance indicators reflect the impact of COVID-19, however the targets themselves have not been reviewed to ensure these reflect a realistic baseline position for the IJB to measure performance against.	Risk – There is risk that the key performance targets and the IJBs performance against these are not aligned, as a result of the impact of COVID-19.	Review key performance indicators and, where appropriate, re-base relevant targets to ensure these reflect the impact of the pandemic on the IJBs performance. Paragraph 60	Whilst many of our performance indicators are national or part of a wider Greater Glasgow and Clyde suite of measures we will endeavour to re-base those where we can. Covid-19 has had a direct impact on people's health and wellbeing. The indirect effects on other conditions as well as long Covid may take some time to manifest. This means our performance indicators may need revision over a longer period of time	Chief Financial Officer	31-Mar-22	The development of the new HSCP Strategic Plan for 2022-25 with associated implementation plan will include the review of the performance framework and performance reporting in consultation with the PAC. This work will commence following approval of the Strategic Plan by the IJB in March 2022.
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Appendix	2A
Title	Follow-up of Business Operations and Partnerships Department Audits (MB1177MB)
Type	East Renfrewshire Council Internal Audit Activity relating to the Health and Social Care Partnership
Status	New

EXTRACT FROM REPORT ON FOLLOW-UP OF BUSINESS OPERATIONS AND PARTNERSHIPS DEPARTMENT AUDITS (MB1177MB)

MOBILE PHONES (MB/1084/NS)

4.5 Central Inventory Records

The original audit highlighted missing information from the central records maintained by ICT for mobile devices issued across the Council. The records contain details of all SIM cards which the department will be recharged directly for. This is based on usage and standing charges and this will cover SIMs for laptops and mobile phones.

The anomalies previously reported generally related to former employees showing on the central record. This is still the case and departmental lists recently reviewed contain the names of employees who left several years ago. The accuracy of these records is dependent on the departments notifying ICT of leavers and when a device has been re-allocated to a different employee.

A brief review of current lists also indicate that some employees have multiple devices and it is not obvious why.

Additionally in the original audit it was also noted that in some cases the phones were not assigned to an individual. There continues to be allocations of this type.

Devices held on these inventories will also impact on central ICT recharges so it is important that the inventory records are kept up to date and accurate.

Recommendation

4.5.1 Robust checks should be carried out by departments to ensure that the inventory records are accurate and that:

- **the assigned user details are accurate, up to date and only include names of current employees**
- **individual users do not have more than one mobile or one laptop**
- **clarification is provided to ICT promptly of any devices on the lists which are no longer needed or which need to be re-assigned to a different employee**
- **clarification is provided to ICT of the reasons for devices where a named employee is not assigned to it. (eg pool phone) and this should be noted on the inventory.**

Action: All Directors

4.6 Additional Charges outwith Contract

When the original audit was followed up in June 2021 it was recognised that the usage of mobile devices had increased particularly in relation to Covid restrictions requiring employees to work from home, and therefore the number of employees exceeding their allowance had increased. Now that many employees have returned to the office, mostly on a hybrid model, the packages in place should be reviewed to minimise costs to the council. As mentioned above, the reports provided to departments detail SIMs in mobile phones and laptops.

It is now expected that employees when working from home will use their own broadband and that this must be capable of meeting business needs. Intranet guidance (FAQ32) states that “as it is a choice to work from home, it is expected

that all employees should use their own broadband. Any employee who does not want to use their own broadband for these purposes will be required to work from council premises”.

The Way we Work document on the Council’s intranet states: *“Increasingly we need to be able to gain access to our network when we are not in a council office, are working from home or are on the move. Working from home for at least some of the time is now viable and attractive for many people. If working from home, it is our responsibility to ensure we have an appropriate broadband connection to get the best performance and stability and to enable us to work effectively. Security of remote access from home is provided by technology installed in council devices, this is managed and supported by ICT. In exceptional circumstances it will be possible to connect to the internet through the SIM card which most laptops have enabled, however the performance and stability achieved via this method is likely to be inconsistent.”*

The SIM packages provided to each individual now require to be checked to ensure that only the minimal SIM package required to allow them to do their job is provided, taking into account the guidance mentioned above.

Recommendation

4.6.1 Reports should be reviewed to ensure that only minimal SIM packages are provided for each employee and that employees are advised to return to work from council premises if they do not have adequate home broadband to meet work requirements.

Action: All Directors

Appendix 2A – Follow-up of Business Operations and Partnerships Audits - MB1177MB

Ref. / Risk Rating	Recommendation	Comments (if appropriate)	Timescale for completion	Status	Latest Note
4.5.1 (Med)	<p>Robust checks should be carried out by departments to ensure that the inventory records are accurate and that:</p> <ul style="list-style-type: none"> • the assigned user details are accurate, up to date and only include names of current employees. • individual users do not have more than one mobile or one laptop • clarification is provided to ICT promptly of any devices on the lists which are no longer needed or which need to be re-assigned to a different employee • clarification is provided to ICT of the reasons for devices where a named employee is not assigned to it. (eg pool phone) and this should be noted on the inventory. 	A full review of this year's inventories will be undertaken to ensure each point has been addressed.	March 2023	Open	
4.6.1 (Med)	Reports should be reviewed to ensure that only minimal SIM packages are provided for each employee and that employees are advised to return to work from council premises if they do not have adequate home broadband to meet work requirements.	We will continue to review billing and address high users on an individual basis, with regular overview reports to SMT	December 2022	Open	

Appendix	2B
Title	Barrhead Centre (MB1173NS)
Type	East Renfrewshire Council Internal Audit Activity relating to the Health and Social Care Partnership
Status	New

REPORT ON AUDIT OF BARRHEAD CENTRE

Contents	<u>Page No</u>
Introduction	1
Scope	1
General Conclusion	1
Findings & Recommendations	2-5
Action Plan	6-7

Chief Auditor
MB/1173/NS

30 September 2022



REPORT ON AUDIT OF BARRHEAD CENTRE

1. INTRODUCTION

As part of the Annual Audit Plan for 2022/23, a regularity audit of Barrhead Centre was carried out. The centre sits within the Learning Disabilities Team which has an overall budget of £9.5m, of which Barrhead Centre accounts for £606k.

The main risks associated with this area are that if the correct procedures are not in place for the income received from clients using the service, this could be misappropriated. There are also funds held in respect of services operated by the clients, namely the committee fund, brew crew and other activities such as the Cycle Workshop, which require to be appropriately documented to ensure all money can be accounted for.

The previous audit report of the Centre was issued in April 2016 and at that time the main weaknesses related to the petty cash imprest and the lack of a clear audit trail to support the amounts being claimed in respect of client activities and the level of cash being held in the centre. The co-operation and assistance given to the auditor during the audit is gratefully acknowledged.

2. SCOPE

The scope of the audit was to ensure that all income and expenditure is correctly accounted for and proper financial records are maintained. Audit testing covered the period December 2021 to May 2022. The audit focussed on the following areas:

- Petty cash
- Service User Funds
- Purchasing
- Staff existence and absence monitoring checks
- Security Checks
- Inventory

This audit has been conducted in conformance with the Public Sector Internal Audit Standards

3. GENERAL CONCLUSION

The petty cash imprest bank account was not being operated at the time of the audit checks as the bank did not hold signatory details for any of the centre employees. This has been the case since April 2022 and appears to be an error made by the bank as opposed to the centre, however corrective action needs to be taken to regain control of the funds held in the account.

As a result of the issues with the bank accounts it is noted that a larger level of cash is being held in the centre than would normally be the case.

The records held to support the income and expenditure for the various activities operated by the centre were found to be cumbersome and there is no clear audit trail in place between individual records and bank statements to confirm all monies can be accounted for.

A review of the attendance record cards and corresponding sickness documentation showed that there is scope of improvement in the audit trail available for sickness absence to ensure compliance with Council procedures.

The following recommendations are made and require to be addressed.

4. **FINDINGS AND RECOMMENDATIONS**

PETTY CASH IMPREST

4.1 **Supporting Documentation for Expenditure**

The Creditor petty cash imprest claims covering the period 20/12/2021 to 13/04/2022 were reviewed and a sample of 15 items of expenditure was taken to ensure supporting records were held to evidence the nature of the spend.

In one case there was a receipt for provisions totalling £73.88 which had been split across three separate entries on the claim for reimbursement. It had been split to show each transaction as less than the £25 limit. For two of the transactions, the supporting record was a photocopy of the original receipt. 4.1

The petty cash procedures state that ***“Payments from imprest accounts shall be limited to minor items of expenditure and to such other items as the Chief Financial Officer may approve. The upper limit in respect of individual items of expenditure shall be £25 unless authorised by the Chief Financial Officer or the Chief Accountant.”***

Recommendations

4.1.1 Expenditure incurred should be recorded as one entry on the petty cash claim and not split across multiple entries.

4.1.2 If the expenditure incurred from petty cash is regularly exceeding the £25 limit the Chief Financial Officer or Chief Accountant should be asked to approve an increase in the limit.

4.2 **Bank Account Signatories**

During the audit, the Business Support Assistant highlighted that the centre were currently operating an emergency imprest that was being reimbursed from the Council Payment Centre, with a maximum of £400 being withdrawn each time.

The emergency imprest is being used as a result of the bank not recognising any of the current centre employees as signatories despite them operating the account for a number of years without an issue. Access to the account has not been possible since April 2022 and this was raised with the Head of Accountancy as they were showing as a signatory on the account along with two other employees both of whom have no connection to the centre.

At the time of the audit, emergency claim number 13 was being worked on and there had been no solution to accessing the bank account. The cash count and reconciliation carried out on the Creditor imprest showed that the current bank balance that cannot be accessed is £863.84.

Recommendations

4.2.1 The Learning Disability Manager should ensure that the appropriate action is taken to ensure that bank signatories for the petty cash imprest are updated and access is gained to the account.

4.2.2 A full review of bank accounts and the number of signatories should be carried out to ensure access is not at risk of being lost.

4.3 **Bank Statements**

The petty cash claims were reviewed for completeness and this included the transactions that were recorded in the bank section of these claims.

A sample of transactions were taken and traced to the bank statements held at the centre and this highlighted that a number of the statements were not available. The claims reviewed covered the period December 2021 to April 2022 however only the statements for December, January, March and May were available.

Recommendation

4.3.1 The Business Support Assistant should ensure that all bank statements are available for review and that they are being received from the bank to allow for monthly reconciliations to be completed.

4.4 **Claiming VAT on Emergency Petty Cash Fund Expenditure**

Due to the issues accessing the petty cash imprest bank account, the centre have been operating an emergency cash fund as approved by the Head of Accountancy. A fund of £400 was created through a withdrawal from the payment centre and subsequent replenishments of this amount have been carried out since April 2022.

At the time of the audit checks there had been 13 claims made against the emergency fund totalling £3,119.34 with a total VAT amount of £131.31.

The Business Support Assistant clarified that the claim forms were being emailed to the Accountancy Manager within HSCP as opposed to Creditors. Discussions with the Accountancy Manager confirmed that the claims had been received but had not been processed to the financial ledger. As the amounts have not been processed to the ledger, the total VAT at the time of the audit of £131.31 had not been include in any VAT claims and reclaimed from HMRC.

Recommendation

4.4.1 The Accountancy Manager should ensure that appropriate action is taken to process the emergency imprest claims to the financial ledger and the VAT elements are coded to allow subsequent inclusion in claims to HMRC.

EMPLOYEE EXISTENCE AND ABSENCE MONITORING

4.5 Completion of Employee Attendance Record Cards

The attendance record cards for employees based at Barrhead Centre are maintained by staff at Thornliebank Resource Centre. A review of the cards showed that the cards were all up to date and generally showed all required information.

However, in three cases there was no record of the date of continuous service which is used to calculate the number of days annual leave entitlement for the year and in another case the national insurance number was not shown.

If attendance record cards are going to be used then it is essential that all information is shown and that they are kept up to date.

Recommendations

4.5.1 All record cards should be reviewed to ensure that appropriate information such as national insurance numbers and continuous service date are recorded.

4.6 Sickness Absence Forms

The attendance record cards were reviewed for periods of absence and efforts were made to agree these to the payroll report and supporting documentation.

In total, three period of absence had been recorded on payroll however there were four shown on record cards. These checks were carried out on the attendance record cards for 2022. In one case there was no paperwork for the absence.

Recommendation

4.6.1 A review of the attendance record cards should be carried out for all periods of absence recorded and a check completed to ensure supporting documentation is held for all periods of absence.

SERVICE USER FUNDS

4.7 Records held and Bank Accounts

Currently there are a number of funds designated for different client activities.

These are as follows:

- Artistic creations group
- Cycle workshop
- Garden group
- Committee
- Jewellery group
- Kitchen

The transactions for each of these funds is maintained on a spreadsheet however there is no running balance. It is acknowledged that periodic reconciliations of cash and bank balances for

each of these funds is carried out, however it would to add a column to calculate the running balance each day to facilitate ease of reconciliation. Despite reconciliations being held it is not transparent how the bank balances link to each of the groups with the cycle workshop appearing to be a balancing figure for the bank.

It is also noted that there are only two bank accounts used to hold the balances of these groups, one is referred to as the committee account and the other as the supersellers account. For example, the bank balance for the Artistic creations group is held across the two bank accounts.

Across the two bank accounts it is estimated that approximately £18k is held with £10k held in the Committee bank account which is operated by passbook with the latest date on the passbook being July 2019.

The Accountancy Manager within HSCP confirmed that the existence of these funds and the amounts held were known to him and that preliminary discussions with the relevant parties had taken place. Audit recognises that these may supersede the recommendations being made but it is still essential that all monies are accounted for prior to moving to any new system.

Recommendations

4.7.1 A full review of the funds held for client activities should be carried out and efforts made to ensure that these clearly show the amounts being held.

4.7.2 A clearer audit trail needs to be established so there is a clear link between the bank amounts and the balances held in each of the group spreadsheets.

4.7.3 A column which calculates the running balance on a daily basis should be added to the spreadsheets used to record transactions for each of these groups.

Chief Auditor
30 September 2022

Appendix 2B: Audit report on Barrhead Centre - MB1173NS

Ref. / Risk Rating	Recommendation	Comments (if appropriate)	Timescale for completion	Status	Latest Note
4.1.1 (Low)	Expenditure incurred should be recorded as one entry on the petty cash clam and not split across multiple entries.	We are currently trialling prepaid cards with 8 members of staff and will review this by end of year. If successful this will be rolled out and will negate the need for frequent/high amount petty cash. Any residual use of petty cash will be within policy.	30 November 2022	Open	
4.1.2 (Low)	If the expenditure incurred from petty cash is regularly exceeding the £25 limit the Chief Financial Officer or Chief Accountant should be asked to approve an increase in the limit.	As above, the roll-out of prepaid cards should reduce the need for use of petty cash. However we will undertake a full review of petty cash activity and the volume of expenditure over £25. Should an increase be required, this will be submitted by the Service Manager. Other non-cash options will also be considered.	30 November 2022	Open	
4.2.1 (High)	The Learning Disability Manager should ensure that the appropriate action is taken to ensure that bank signatories for the petty cash imprest are updated and access is gained to the account.	Contact will be made with bank to ensure current signatories are added and those that are obsolete deleted	30 November 2022	Open	
4.2.2 (Med)	A full review of bank accounts and the number of signatories should be carried out to ensure access is not at risk of being lost.	A review will be undertaken by the Service Manager and the process to support will be refreshed.	30 November 2022	Open	
4.3.1 (Med)	The Business Support Assistant should ensure that all bank statements are available for review and that they are being received from the bank to allow for monthly reconciliations to be completed.	Business support will ensure process for storing bank statements is in place.	30 November 2022	Open	
4.4.1 (Low)	The Accountancy Manager should ensure that appropriate action is taken to process the emergency imprest claims to the financial ledger and the VAT elements are coded to allow subsequent inclusion in claims to HMRC.	The accountancy team are reviewing this and we aim to have VAT adjustment in place by the end of the calendar year.	31 December 2022	Open	

Appendix 2B: Audit report on Barrhead Centre - MB1173NS

4.5.1 (Low)	All record cards should be reviewed to ensure that appropriate information such as national insurance numbers and continuous service date are recorded.	All paper copy record cards will be reviewed and updated whilst we explore options for online system.	30 November 2022	Open	
4.6.1 (Low)	A review of the attendance record cards should be carried out for all periods of absence recorded and a check completed to ensure supporting documentation is held for all periods of absence.	As above.	30 November 2022	Open	
4.7.1 (High)	A full review of the funds held for client activities should be carried out and efforts made to ensure that these clearly show the amounts being held.	We have agreed that Voluntary Action will manage these independent funds and are in the process of transfer.	31 March 2023	Open	
4.7.2 (High)	A clearer audit trail needs to be established so there is a clear link between the bank amounts and the balances held in each of the group spreadsheets.	Will be included as part of the transfer to Voluntary Action. In the meantime transaction analysis will be maintained.	31 March 2023	Open	
4.7.3 (Med)	A column which calculates the running balance on a daily basis should be added to the spreadsheets used to record transactions for each of these groups.	A column to calculate the running balance will be added to the spreadsheet, however these will no longer be required once the funds transfer to Voluntary Action.	31 March 2023	Open	

Appendix	2C
Title	Follow-up of HSCP Audits (MB1168FM)
Type	East Renfrewshire Council Internal Audit Activity relating to the Health and Social Care Partnership
Status	New

REPORT ON FOLLOW-UP OF HSCP AUDITS

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Chief Auditor
MB/1168/FM
30 September 2022



REPORT ON FOLLOW-UP OF HSCP AUDITS

4. INTRODUCTION

As part of the 2022/23 audit plan, a follow-up audit of five previous reports issued to HSCP was carried out. This audit had originally been scheduled for 2019/20 but due to the coronavirus pandemic it was not possible to proceed due to changes in working environment and the unavailability of essential staff who were focused on dealing with the emerging situation.

5. SCOPE

The scope of the audit was to ensure that all of the recommendations which were accepted in the departmental responses had been implemented in the timescales stated. The following reports were included in the audit:

- Audit of CareFirst Finance System (MB/1044/EL – issued April 2018)
- Audit of Homecare (MB/1060/EL – issued October 2018)
- Audit of Emergency Payments S12 & S22 (MB/1077/NS – issued December 2018)
- Follow Up of HSCP Audits (MB/1087/FM issued April 2019)
- Audit of Bonnyton House (MB/1105/NS issued October 2019)
- Audit of Carers Legislation (MB/1128/FM issued February 2021)

A total of 63 recommendations were made in the above reports of which one was not accepted in the departmental response and two were partially accepted.

6. GENERAL CONCLUSION

Follow-up checks carried out during the audit showed that efforts had been made to implement most of the recommendations, with 20 recommendations that still require to be addressed.

Of the previously accepted recommendations, the following points are still outstanding and require attention.

PREVIOUS RECOMMENDATIONS NOT IMPLEMENTED

4 Audit of CareFirst Finance System (MB/1044/EL)

4.1 Vary Reports

It was previously recommended that operational managers take action to ensure that varies processed are appropriate to the client and that service agreements reflect clients' needs accurately. In addition, it was recommended that operational managers should also prioritise the checking of vary reports to approve all varies processed and to take action to update service agreements where appropriate.

Audit were advised that a report was developed and sent to managers. However, the feedback from managers was that the report was data intensive and not user friendly. Due to the covid pandemic and the changes it brought, no further work was done for a period however, with recovery underway the aim is to restart reporting. HSCP also advised that a significant piece of work is ongoing with migration to the Scotland Excel national framework and that this will act as an additional review of the data and that HSCP will continue to develop reporting to best meet the needs of the stakeholders. . An update should be provided to Audit when a suitable report has been developed and implemented in line with the original recommendations below.

Recommendation

4.1.1 Action is required by operational managers to ensure that varies processed are appropriate to the client and that service agreements reflect clients' needs accurately. Operational managers should prioritise checking of vary reports to approve all varies processed and to take action to update service agreements where appropriate.

4.1.2 A positive response should be obtained by the Finance Team from each operational manager regarding review and approval of vary reports to ensure that each case is addressed and the manager is confirming an awareness of the differences and any required actions. This could be combined with the quarterly client verification check (which covers existence of client, commitment value and provider) and signed off within budget monitoring to avoid numerous verification checks.

4.2 Matching Invoices

In the previous audit it was recommended that a review of the uprating process should take place to address the processing of varies where a rate has been approved to be paid but needs to be updated on a service agreement and that service agreements should be identified and subjected to independent review and update prior to processing the next period invoice.

HSCP advised that an exercise is underway to address all service agreements on the system to ensure rates transition to the Scotland Excel Framework correctly. The annual uplift of rates is an ongoing process and this includes non-framework rate changes. HSCP confirmed that a new business support post was recently filled and this exercise will fall within their remit.

It was also recommended that housekeeping checks should be implemented ensuring that all of the adjustments processed that are intended to be offset at a later date are actually matched up and cleared. HSCP advised that this has not been fully implemented, although invoice processors regularly complete a tidy action for their allocated providers, ensuring any un-invoiced periods are promptly raised with the provider. The updating of service agreements for the Scotland Excel framework will remove the need for many of these varies.

As such, the original recommendations are again included below and HSCP should provide an update when the exercise is complete.

Recommendation

4.2.1 A review of the uprating process for non-framework service agreements should take place to address the processing of varies where a rate has been approved to be paid but needs to be updated on a service agreement. Service agreements should be identified and subject to independent review and update prior to processing the next period invoice.

4.2.2 Housekeeping checks should be implemented ensuring that all of the adjustments processed that are intended to be offset at a later date are actually matched up and cleared.

4.3 Timeous authorisation of service agreements

A report was run listing active service agreements as at 6 September 2022 and this listed 3,049 authorised service agreements in total excluding Children & Families, Adoption & Fostering and Telecare agreements.

There were 1,203 new service agreements started from January 2022. An assessment of the time taken from start of the agreement to authorisation on the system found that 394 service agreements were entered onto the system and authorised prior to the service agreement starting. 809 service agreements were authorised after the service agreement start date. Of these, 293 were authorised within 28 days of the service agreement starting and in 516 cases the service agreement was not authorised until more than 28 days after the service agreement had started.

Of the 1,203 new service agreements started from January 2022, 1,079 of these were authorised within 28 days of the agreement being entered onto the system, however as noted above, most were not put onto the system until after the agreement started.

The Client Finance Manager advised that a person was recruited to enable the centralisation of service agreements entry however, the person has recently left the post but it is hoped that a new person will be in post in the near future. In the meantime, social workers will enter the service agreements onto the CareFirst system.

Recommendations

4.3.1 Operational Managers should be reminded that service agreements must be authorised as a priority to avoid backlogs in payments.

4.3.2 Social workers should be instructed that updating the CareFirst system is essential and that this must be done before the service agreement commences where possible.

4.4 Annual Review of Care Packages and therefore Service Agreements

It was previously noted that a key requirement of the CareFirst system is that cases are reviewed at least annually. It is important that this review takes place in order that service agreements are checked and updated to be in line with current services received. If a service agreement is authorised on the system, then this is clear authorisation to pay the provider charges up to the limit of the service agreement.

It was recommended at the time of the original audit that priority should be given to ensure that an annual review takes place for each client with an authorised service agreement however, it was noted that this was not possible and reviews would take place on a risk based approach. It was recommended that details of the risk based approach needed to be documented and approved by the IJB. Evidence has not been provided to demonstrate that this has been documented or approved by the IJB and therefore the recommendation is included again below.

Recommendations

4.4.1 Details of the risk based approach used to identify the care packages which are prioritised for an annual review should be documented and approved by the IJB.

4.4.2 Operational Managers need to review and prioritise cases to ensure that those most likely to have changed are addressed first

6 Audit of Emergency Payments (MB/1077/NS)

6.1 Completion and Authorisation of Application Forms

It was highlighted at the time of the last audit that often the application forms were not

signed by the required people. A sample of three application forms for at least £50 each were selected and a review carried out to ensure that the forms had been signed by the appropriate people. In two cases, the S22 application form had not been signed by the Team Manager however the Senior Manager Intensive Services and Justice advised that if the form has been signed by a Service Manager then there is no requirement for it to be signed by a Team Manager. In the remaining case the S22 form had not been signed by the Service Manager despite the amount being in excess of £50.

Recommendation

6.1.1 All Social Workers and Managers should be reminded of the requirement to ensure that all application forms are correctly authorised by the required officers.

7 Follow Up of HSCP Audits (MB/1087/FM)

7.1 Debtors Accounts

It was previously noted that clients with unpaid debt from previous play-schemes were still being allocated a place on future play-schemes despite having overdue debt. Currently, it is still the case that having overdue debt does not prevent clients booking a place on the play-scheme. HSCP have advised that the children attending the play-scheme are prioritised based on a multi-agency assessment of need.

Recommendation

7.1.1 Consideration should be given to amending the policy and procedures to reflect current HSCP view on factors to be considered when allocating places.

7.2 Kirkton Bank Details

It was previously noted that the name and address shown on the bank statements were incorrect and that they should be amended to reflect the correct details. The Unit manager at Bonnyton House advised that this account is no longer in use and has been closed. Proof of the account closure was requested but has not been provided to date. The Unit manager advised that all the records relating to Kirkton House are in storage and it will take some time to retrieve the information requested.

Recommendation

7.2.1 Proof of closure of the Kirkton Bank Account should be provided to audit.

7.3 Procedures for Discretionary Payments

It was previously highlighted that there were no procedures covering discretionary payments to kinship and residence allowance carers, therefore effectively no boundaries on appropriate amounts and/or typical items etc that may be purchased so variation will occur due to interpretation or judgement by different social workers. Audit were advised that HSCP would amend the Kinship Care guidance and distribute this to all staff.

Audit was provided with a copy of the Kinship Care guidance and on review of the document it was noted that there were no details advising boundaries on appropriate amounts and/or typical items that may be purchased to eliminate variations due to interpretation or judgement by different social workers. As such, the original recommendation is included again below.

Recommendation

7.3.1 Evidence that procedures covering payment of discretionary monies to carers are available and have been distributed to all staff in order that they are aware of typical examples of where discretionary payments may be made and improve consistency between cases should be provided to audit.

7.4 Recording and Disposal of Inventory – St Andrews House

It was previously highlighted that inventory items disposed of during the course of the year were not recorded in the disposals column of the inventory sheets and inventory deletion forms were not available. A sample of two disposals were selected from the 2021/22 inventory sheet and both disposals were traced to the disposals form. However, it was noted that the forms had not been authorised by a manager/supervisor.

Recommendation

7.4.1 The disposal of inventory forms should be signed by a manager/supervisor for all disposals.

8 Audit of Bonnyton House (MB/1105/NS)**8.1 Bonnyton Resource Centre Imprest**

A copy of the imprest accounts were obtained from accountancy and it was noted that there were still two imprest accounts relating to Bonnyton House. The imprest account called “Bonnyton House – Clothing” for £600 is the petty cash account that is operated for Bonnyton House. “Bonnyton Resource Centre” imprest for £200 is the petty cash account used for Day Services. Day Services has not been fully operational since covid and it is hoped that notification will be received in the near future about the plan for Day Services so that a decision can be made on whether the petty cash should be held or returned.

Recommendation

8.1.1 Management should ensure that the imprest named Bonnyton Resource Centre is returned if it is no longer required for Day Services.

8.2 Petty Cash Expenditure

A sample of five entries were selected from the April 2022 petty cash expenditure reimbursement sheet to ensure that there was appropriate supporting documentation. It was confirmed that valid receipts were available for all five items of expenditure in the sample.

It was however noted that in one instance in the sample, the gross amount reclaimed was £34.40 which is in excess of the upper limit of £25 set in the Petty Cash Procedures. The Unit manager advised that they had unexpectedly suffered an interruption to their gas supply and were unable to provide the residents with a hot meal and therefore had to purchase take-away food from petty cash. As this is an exceptional situation a further recommendation is not considered necessary.

8.3 Bank Account Signatories

It was previously recommended that the petty cash bank account and the independent funds bank account should be reviewed to ensure that there are a sufficient number of signatories for each account to cover any absences. The Management response indicated that this would be implemented by 30 November 2019.

The Unit Manager advised that the independent funds bank account was no longer operational and was closed in 2019. Audit requested proof of closure but this has not been provided to date. There are still only two signatories for the petty cash bank account but the Unit Manager advised that they are taking steps to add signatories to the account.

Recommendation

8.3.1 The bank signatories for the petty cash bank account should be reviewed and appropriate action taken to ensure that all accounts can continue to be accessed.

8.3.2 Proof that the Independent Funds bank account has been closed should be provided to audit. A final bank statement or confirmation of closure letter from the bank would be appropriate.

8.4 Level of Cash Held at the Location

It was previously reported that a large sum of cash (in excess of £5,000) was being held in the safe at the time of the last audit. The cash was counted again and it showed that there was £2,995.84 cash held on behalf of residents, £222.23 relating to petty cash and £2,163.17 relating to Independent Funds. The total cash was £5,381.24. There was one resident in particular with a balance of over £1,200 and this residents balance has been at that level for approximately one year.

Recommendation

8.4.1 Management should carry out a review of all cash held at the location and take appropriate action to ensure that levels of cash held are minimal and only required for operational purposes.

9 Audit of Carers Legislation (MB/1128/FM)

9.1 Assessment of Carers

At the time of the last audit, the Carers Lead advised that that the Adult Carers Support Plan (ACSP) should be reviewed annually, however this requirement was not specified in the Carers Eligibility Framework and there was no sample evidence in the one case where a support plan was identified that it had been reviewed.

As part of the follow up audit, a sample of five carers who had completed an ACSP were selected and enquiries made to see if a review of the ACSP had been carried out. An ACSP review had not been carried out in any of the cases in the sample. All ACSP's in the sample were carried out between a year and five months ago. This was raised with the Carers Lead and it was noted that in all of the cases in the sample and in most of the population, the review date entered was the same as the date the ACSP was originally completed rather than a valid review date. The Carers Lead was not aware that the CareFirst system would allow this and has now raised the issue with the CareFirst system administrators and team managers to make them aware of this.

It was also noted at the time of the last audit that there was no evidence that 12 carers, out of a sample of 15 carers identified on the CareFirst system, had been offered an ACSP. HSCP responded by informing audit that a new process (the Carer's Tracker) was being built into assessments that would ensure and evidence, on a carer being identified, they are offered an ACSP. The Carers Lead provided an update and advised that the Carer's Tracker did not prove to be the solution that was originally anticipated. The Carer's Tracker was implemented for a three month test period and was unsuccessful with only three entries being completed. It is noted that frontline staff have been dealing with additional pressures over recent years and it was not an ideal time to ask staff to engage in testing new documents/processes. The Carers Lead advised that the Practice, Policy and Improvement Manager is taking the issue forward in their review and streamlining of HSCP paperwork.

Recommendation

9.1.1 The frequency of which carers support plans are reviewed should be documented and evidence of the review and the outcome should be recorded on the CareFirst system or the system and documents maintained by the Carers Centre.

9.1.2 Officers should be instructed not to enter the date of the original ASCP as the review date on the CareFirst system. The review date should be set in accordance with the documented frequency.

9.1.3 A system must be put in place to evidence that all carers recorded on the CareFirst system or within the Carers Centre records have been offered an ACSP in accordance with the Carers Eligibility Framework.

9.2 E-Learning

It was previously recommended that staff who come into direct contact with carers as part of their day to day job should complete the Equal Partners in Care (EPiC) learning resource available on the e-learning page. The Carers Lead advised that Learning and Development had recently confirmed that the link to the Carers Rights Awareness e-module will be included in the HSCP induction suite of learning for both Adult and Children's Services and will be introduced as part of the corporate induction at a later date. An in-person half day session will be adapted from the existing material and this will be hosted twice a year. Learning and Development aim to implement this within six months.

Audit will revisit this area at a later to date to ensure that Carers Rights Awareness has been included in the e-learning module and as part of the HSCP induction. As such, no recommendation is required at this time.

Chief Auditor

30 September 2022

Appendix 2C: Follow-up of HSCP Audits - MB1168FM

Ref. / Risk Rating	Recommendation	Comments (if appropriate)	Timescale for completion	Status	Latest Note
4.1.1 (High)	Action is required by operational managers to ensure that varies processed are appropriate to the client and that service agreements reflect clients' needs accurately. Operational managers should prioritise checking of vary reports to approve all varies processed and to take action to update service agreements where appropriate.	A new report will be developed following the imminent finance restructure which will allow time to allocate to this task. This will be circulated to operational managers with instruction on approval process.	31 January 2023	Open	
4.1.2 (High)	A positive response should be obtained by the Finance Team from each operational manager regarding review and approval of vary reports to ensure that each case is addressed and the manager is confirming an awareness of the differences and any required actions. This could be combined with the quarterly client verification check (which covers existence of client, commitment value and provider) and signed off within budget monitoring to avoid numerous verification checks.	Once the new report has been developed, quarterly meeting will be re-established with operation managers to review.	31 March 2023	Open	
4.2.1 (Low)	A review of the uprating process for non-framework service agreements should take place to address the processing of varies where a rate has been approved to be paid but needs to be updated on a service agreement. Service agreements should be identified and subject to independent review and update prior to processing the next period invoice.	The contracts team will continue to work with all non-framework providers to obtain new rates. The timeframe for change in rates is dependent on a number of factors. Opening rates for the financial year will be confirmed in April however there will be changes throughout the year. On receipt of new rates these will be passed to CareFirst to update the system.	30 April 2023	Open	

Appendix 2C: Follow-up of HSCP Audits - MB1168FM

4.2.2 (Med)	Housekeeping checks should be implemented ensuring that all of the adjustments processed that are intended to be offset at a later date are actually matched up and cleared.	Invoice processors now regularly complete a tidy action for their allocated providers, ensuring any un-invoiced periods are promptly raised with the provider. Given the dynamics of care package profiles and actual spend there are a large volume of varies which are often not significant. Due to staff turnover the central updating of service agreements, which will ensure accurate information is recorded on the system, was unable to be progressed however this will be prioritised once the new Business Support Assistance is in place.	31 March 2023	Open	
4.3.1 (Med)	Operational Managers should be reminded that service agreements must be authorised as a priority to avoid backlogs in payments	Reminders have been issued however another reminder will be issued to operational managers. Managers receive a weekly report detailing service agreements awaiting authorisation.	30 November 2022	Open	
4.3.2 (High)	Social workers should be instructed that updating the CareFirst system is essential and that this must be done before the service agreement commences where possible.	A reminder will be issued however it is not always possible to have service agreements in advance, for instance if care has to arranged in an emergency situation or when care has been put in place pending assessment process.	30 November 2022	Open	
4.4.1 (High)	Details of the risk based approach used to identify the care packages which are prioritised for an annual review should be documented and approved by the IJB.	The majority of reviews have been undertaken. A policy will be developed through our clinical and care governance group outlining our approach to reviews and will be shared with IJB	31 March 2023	Open	
4.4.2 (Med)	Operational Managers need to review and prioritise cases to ensure that those most likely to have changed are addressed first	As above	31 March 2023	Open	
6.1.1 (Med)	All Social Workers and Managers should be reminded of the requirement to ensure that all application forms are correctly authorised by the required officers.	During the pandemic approvals were agreed via email. Going forward either wet signatures or email approval will be appended to all applications. The procedure will be reviewed and agreed with internal audit.	30 November 2022	Open	

Appendix 2C: Follow-up of HSCP Audits - MB1168FM

7.1.1 (Low)	Consideration should be given to amending the policy and procedures to state that places on the play-scheme will be prioritised on an assessment of need and any overdue debt will not be taken account of when allocating places.	The policy will be reviewed	30 November 2022	Open	
7.2.1 (Low)	Proof of closure of the Kirkton Bank Account should be provided to audit	We will contact the Bank to obtain proof of closure	30 November 2022	Open	
7.3.1 (Low)	Evidence that procedures covering payment of discretionary monies to carers are available and have been distributed to all staff in order that they are aware of typical examples of where discretionary payments may be made and improve consistency between cases should be provided to audit.	Procedures have been reviewed and will be re-issued following final approval by Senior Management.	30 November 2022	Open	
7.4.1 (Low)	The disposal of inventory forms should be signed by a manager/supervisor for all disposals.	We will ensure all disposal forms are signed for the appropriate Business Manager for each area.	31 March 2023	Open	
8.1.1 (Low)	Management should ensure that the imprest named Bonnyton Resource Centre is returned if it is no longer required for Day Services.	We may require this for Day Service when re-established however we will undertake a full review of all accounts	31 March 2023	Open	
8.3.1 (Med)	The bank signatories for the petty cash bank account should be reviewed and appropriate action taken to ensure that all accounts can continue to be accessed.	We will arrange for additional signatories for account when staff available on shift	30 November 2022	Open	
8.3.2 (Med)	Proof that the Independent Funds bank account has been closed should be provided to audit. A final bank statement or confirmation of closure letter from the bank would be appropriate.	We will contact the Bank to obtain proof of closure.	30 November 2022	Open	
8.4.1 (Med)	Management should carry out a review of all cash held at the location and take appropriate action to ensure that levels of cash held are minimal and only required for operational purposes.	A review will be undertaken.	31 December 2022	Open	

Appendix 2C: Follow-up of HSCP Audits - MB1168FM

9.1.1 (Med)	The frequency of which carers support plans are reviewed should be documented and evidence of the review and the outcome should be recorded on the CareFirst system or the system and documents maintained by the Carers Centre.	<p>Assessment and Review of Adult Carer Support Plans (ACSP) has now been incorporated into the wider assessment and process working group.</p> <p>The group have produced a combined assessment template, incorporating the outcomes assessment and the individual budget calculator, this also reflect engagement with the carer and discussion of the ACSP. Work is underway to link recording and referrals to the carers centre through carefirst to support compliance and improve reporting.</p> <p>The draft assessment was tested by Social Workers across adult services in the month of October. Analysis of this testing will be used to improve the assessment template before it is presented to the wider adults' services team for comment and implementation. Once agreed the assessment template will be used to develop a review template and support review of the ACSP in partnership with the carers centre.</p>	31 March 2023	Open	
9.1.2 (Low)	Officers should be instructed not to enter the date of the original ASCP as the review date on the CareFirst system. The review date should be set in accordance with the documented frequency.	<p>HSCP ACSPs have review date set by allocated worker on Carefirst and review is recorded on Carefirst.</p> <p>HSCP Carers 'Tracker' linked to Cared-for person's review will ensure each carer receiving a service has their outcomes reviewed and this is recorded in tracker.</p> <p>A reminder will be issued regarding review dates, and will be supported by ongoing awareness raising (both informal communication and formal training) on ACSP process.</p>	30 November 2022	Open	

Appendix 2C: Follow-up of HSCP Audits - MB1168FM

<p>9.1.3 (Med)</p>	<p>A system must be put in place to evidence that all carers recorded on the CareFirst system or within the Carers Centre records have been offered an ACSP in accordance with the Carers Eligibility Framework.</p>	<p>Work is underway to link recording and referrals to the carers centre through carefirst to support compliance and improve reporting.</p> <p>Every carer newly referred to Carers Centre is offered an ACSP (400 in past year). The Carers Centre are installing a new management information system in January 2023 which will significantly improve data capture and reporting.</p> <p>022</p>	<p>31 March 2023</p>	<p>Open</p>	
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<p>Appendix</p>	<p>2D</p>
<p>Title</p>	<p>Debtors MB/1158/FM</p>
<p>Type</p>	<p>East Renfrewshire Council Internal Audit Activity relating to the Health and Social Care Partnership</p>
<p>Status</p>	<p>All recommendations considered closed pending verification No changes since last reported to PAC Sep-22</p>

Appendix 2D: MB1158FM - Debtors

Ref. / Risk Rating	Recommendation	Comments (if appropriate)	Timescale for completion	Status	Latest Note
4.2.1 (Med)	Departments must ensure that invoices are raised in advance of the service being provided where possible to minimise the risk of bad debts.	The HSCP invoices highlighted in the report relate to community alarm and residential services. These are always billed in arrears in the event of a death of a service user to allow us to bill for the correct period.	N/A	Closed (pending verification by internal audit)	Will be discussed with Chief Internal Auditor as part of follow up work.
4.2.2 (Low)	To ensure that the charges being levied are clear to the customer, the exact period for which charges are being raised should be clearly stated on the invoice. This should include the start and end period.	This will be included depending on system limitations and further information can be provided to service users if required.	N/A	Closed (pending verification by internal audit)	<p>We have explored system options and this is not possible with the current system. As there is an ongoing project to replace our case recording system we will consider this for future developments.</p> <p>Given the current set up has been in place for a significant number of years we would propose to continue as is in the interim. Where any service user or their family have an issue, we will of course address directly.</p>

Appendix	2E
Title	Follow up of Environment Department Audits MB1166NS
Type	East Renfrewshire Council Internal Audit Activity relating to the Health and Social Care Partnership
Status	No changes since last reported to PAC Sep-22

Appendix 2E: (MB1166NS)

Ref. / Risk Rating	Recommendation	Comments (if appropriate)	Timescale for completion	Status	Latest Note
6.1.1 (Low)	Where possible, there should be separation of duties between those who evaluate tenders and those who are responsible for writing the tender specification.	Ensure new guidance for tenders is available to staff and that full understanding of requirements is clear. Separation of duties will be allowed for where possible, recognising that for any specialist services this may not always be practical.	Guidance will be issued by August 2022 and support and training will be offered. Implementation dependant on tender timescales	Open	Updated guidance is available as part of the tender documentation and services will be supported to complete this by the Commissioning Team to ensure new guidance is adhered to.
6.1.2 (Low)	In accordance with current corporate procurement guidance, all tender specifications should be checked by another officer and readily available evidence kept that this has been done.	Ensure new guidance for tenders is available to staff, as above. Strategic Planning, Performance & Commissioning Manager will co-ordinate and ensure checks are in place.	Guidance will be issued by August 2022 and support and training will be offered. Implementation dependant on tender timescales	Open	Please see above
6.2.1 (Low)	Evidence should be sought from the successful bidder(s) of their relevant staff qualifications/ training stated in their bid. It could be made clear in the tender wording that this will be required of the winning contractor thus incentivising the bid stating those qualifications held by personnel which are only the most relevant.	This requirement will be included in all tender wording.	Dependant on tender timescales	Open	Please see above and procurement advice will be sought during each tender process.

Appendix	2F
Title	Fostering, Adoption and Kinship Care (MB/1154/NS)
Type	East Renfrewshire Council Internal Audit Activity relating to the Health and Social Care Partnership
Status	Note updated at 1.1.1

Appendix 2F: MB1154NS – Fostering, Adoption and Kinship Care

Ref. / Risk Rating	Recommendation	Comments (if appropriate)	Timescale for completion	Status	Latest Note
1.1.1 (Low)	Procedures covering payment of discretionary monies to carers should be produced and distributed to all relevant staff in order that they are aware of typical examples of where discretionary payments may be made.	By their nature discretionary payments are based on the individual and specific needs of children in placement. Therefore payments are unique and not typical. This is consistent with the authority's statutory corporate parenting duty. Clarification of the approval process will be re-issued to managers as a reminder and will confirm the requirement of additional Head of Service sign off if a payment is above a value of £10,000.	August 2022	Open	Procedures have been reviewed and will be re-issued by 30 November following final approval by Senior Management. See also HSCP Follow-up Audit MB1168FM - 7.3.1
1.1.2 (Low)	A Standard Operating Procedure should be created and issued to all relevant staff documenting the steps involved from the start to end of a placement in care.	We do agree a procedure should be used and the existing CareFirst guidance documents the steps from the start to end of a placement. The CareFirst Guidance will be re-issued to staff.	August 2022	Considered closed (pending verification by internal audit)	Carefirst guidance shared with internal audit 19.05.2022
1.2.1 (Low)	An annual report should be presented and approved by the IJB detailing the carer rates to be paid for within each financial year.	Either a specific report will be issued or this will be incorporated into the budget or revenue monitoring report depending on timing. The annual budget report to the IJB allows for budget increases for allowances.	September 2022	Open	The current year budget allowed for an inflationary increase. The service will determine if any further change is proposed during this year and if so detail will be brought to IJB.

Appendix	2G
Title	Payroll (MB/1151/FM)
Type	East Renfrewshire Council Internal Audit Activity relating to the Health and Social Care Partnership
Status	No change since last reported to PAC All recommendations considered closed pending verification

Appendix 2G: Payroll (MB/1151/FM)

Ref/Risk Rating	Recommendation	Comments (if appropriate)	Timescale for completion	Status	Latest Note
4.3.1 (High)	Line managers must ensure that the online leavers form is fully completed and submitted in advance of the employee leaving.	A reminder will be issued to Managers. We have requested from HR colleagues whether a compliance report can be produced.	May 2022	Considered closed (pending verification by internal audit)	Reminder issued to Managers 06.05.2022. System only able to report on who forms have been completed for.
4.3.2 (Med)	Line managers must ensure that the Exit Procedures Leavers Checklist is actioned and saved to Information at Work for all leavers.	As above	May 2022	Considered closed (pending verification by internal audit)	Reminder issued to Managers 06.05.2022. System unable to generate reports
4.4.1 (Med)	Line managers must ensure that all employees on 35 hours contracts or part-time contracts have worked 37 hours in the week before overtime at time and a half can be claimed.	A reminder will be issued to Managers	May 2022	Considered closed (pending verification by internal audit)	Reminder issued to Managers 06.05.2022
4.4.2 (Med)	Line managers must ensure that care is taken to look at overtime claimed according to the week in which it was worked to ensure that the correct rate of pay is claimed.	A reminder will be issued to Managers	May 2022	Considered closed (pending verification by internal audit)	Reminder issued to Managers 06.05.2022
4.4.3 (Low)	Line managers must ensure that where an employee at grade 10 or above is claiming overtime that the claim is authorised by an employee at grade 18 or above. Consideration must also be given to whether an overtime payment is appropriate or whether time off in lieu at plain time is more appropriate.	A reminder will be issued to Managers	May 2022	Considered closed (pending verification by internal audit)	Reminder issued to Managers 06.05.2022
4.5.1 (Low)	Double time should only ever be paid for hours worked on a public holiday and there should be no exceptions to this policy.	The example quoted in the report was an exceptional circumstance in an unprecedented pandemic situation and this was agreed to ensure capacity to safely deliver services and protect our residents. The authorising manager has now left however this was discussed with trade unions at the time and steps put in place to ensure it would not happen again.	N/A		
4.10.1 (Low)	Line managers should be reminded of the managing absence policy and their responsibilities as managers.	A reminder will be issued to Managers	May 2022	Considered closed (pending verification by internal audit)	Reminder issued to Managers 06.05.2022
4.10.2 (Low)	Line managers must ensure that all absence documentation is filed in the appropriate manner promptly.	A reminder will be issued to Managers	May 2022	Considered closed (pending verification by internal audit)	Reminder issued to Managers 06.05.2022



Meeting of East Renfrewshire Integration Joint Board	Performance and Audit Committee
Held on	23 November 2022
Agenda Item	12
Title	IJB Strategic Risk Register
<p>Summary</p> <p>This report provides the Performance and Audit Committee with an update on the IJB Strategic Risk Register.</p>	
Presented by	Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)
<p>Action Required</p> <p>Performance and Audit Committee is asked to note and comment on the IJB Strategic Risk Register.</p>	

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

PERFORMANCE AND AUDIT COMMITTEE

23 November 2022

Report by Chief Financial Officer

IJB STRATEGIC RISK REGISTER UPDATE

PURPOSE OF REPORT

1. This report provides the Performance and Audit Committee with an update on the IJB Strategic Risk Register.

RECOMMENDATION

2. Performance and Audit Committee is asked to note and comment on the IJB Strategic Risk Register.

BACKGROUND

3. In accordance with the agreed monitoring policy this report provides the Performance and Audit Committee with an update on the strategic risk register.
4. Good practice in the area of risk management suggest that a risk register should contain between six to eight of the most significant risk to make it a useful working document.
5. The risk register uses a simple, clear and effective 4 x 4 likelihood and severity risk matrix as shown below.

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

6. In normal circumstances the policy states the tolerance for risk is as follows:

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

REPORT

7. The Strategic Risk Register is a 'live' document; the latest version is attached at Appendix 1.
8. The Strategic Risk Register was reported to the last meeting of the Performance and Audit Committee which took place on 21 September 2022. Since last reported:-
 - No new risks have been added
 - No risks have been removed
 - No risk scores have changes
9. Risk control measures have been reviewed and updated to reflect any proposed mitigation which has been completed, or where the expected date for completion has been extended.
10. Members are asked to note the following:-

Child Protection, Adult protection and Multi-Agency Public Protection Arrangements (3)

11. We have removed the action to introduce a rolling 3yr PVG check as the care inspectorate retracted this guidance given the pressures on Disclosure Scotland and care services and have advised we longer need to routinely review PVG Scheme membership every three years. Where an existing employee moves into a new role we continue to undertake PVG/disclosures as required.

Failure of a Provider

12. We have revised the target date to reshape our strategic commissioning plan to March 2023 to reflect the timetable for engagement work with stakeholders.

Increase in frail/elderly Population

13. The project brief for the Care at Home redesign is being presented to the Programme Board in November with a go live date of December 2022.

In-house Care at Home Service

14. Timescales to conclude work on shift patterns and improvements to data reporting have been revised to March 2023. Work is also taking place at an NHS GGC level to look at consistent reporting across partnerships.
15. The implementation of the new scheduling and monitoring system solution, which will maximise efficient resource usage, is due to be implemented by 15 December 2022.

Workforce Planning and Change

16. We recognise the potential impact on capacity from industrial action as a risk. This is mitigated through Business Continuity Planning.
17. The overall workforce risk remains high due to the ongoing capacity constraints within mental health services.
18. We continue to offer a range of wellbeing activities for our staff and wider partners.

Covid-19 and Recovery

19. We are working with a healthcare planner from NHS Greater Glasgow and Clyde as part of the health board's property strategy, including GP practices. This will help support our local strategy and future service planning. Our local Accommodation Strategy Group will recommence in December 2022

Analogue to Digital Switchover

20. The digital Alarm Receiving Centre (ARC) went live in October 2022 as planned.

Post Mitigation - Red and Significant Risks Exception Report

21. Risks which score between 11-16 and rated as High/Red/Unacceptable and those which the Health and Social Care Partnership Management Team considers significant, following mitigation, should be brought to attention of the Performance and Audit Committee by an 'exception report'.

Financial Sustainability

22. Financial Sustainability remains a high/red risk as last reported. Whilst the budget agreed by the IJB on 16 March 2022 recognised the significant investment by Scottish Government in health and social care we still have legacy savings of £2.6 million that we need to achieve on a recurring basis.
23. As noted above, the current economic climate, fuel and utilities, pay and inflation in particular, combined with the unknown impact of Covid-19 in the longer term are also cause for concern. Therefore this risk is still considered red post mitigation.
24. There remains risk that the HSCP could become unsustainable due to one of the following causes:
 - Unable to deliver in full the existing savings on a recurring basis
 - Unable to influence future funding to recognise demographic and other pressures, or realise future efficiencies and savings
 - Implications from hosted services should current arrangements change
 - Prescribing volatility
 - Any unfunded Covid-19 costs will add to our pressures

RECOMMENDATIONS

25. Performance and Audit Committee is asked to note and comment on the IJB Strategic Risk Register.

REPORT AUTHOR AND PERSON TO CONTACT

Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)

lesley.bairden@eastrenfrewshire.gov.uk

0141 451 0746

10 November 2022

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

PAC Paper: September 2022: IJB Strategic Risk Register Update

https://www.eastrenfrewshire.gov.uk/media/8183/Performance-and-Audit-Committee-Item-11-21-September-2022/pdf/Performance_and_Audit_Committee_Item_11_-_21_September_2022.pdf?m=637987495064500000

PAC Paper: June 2022: IJB Strategic Risk Register Update

https://www.eastrenfrewshire.gov.uk/media/7784/Performance-and-Audit-Committee-item-12-22-June-2022/pdf/Performance_and_Audit_Committee_item_12_-_22_June_2022.pdf?m=637909081010470000

PAC Paper: March 2022: IJB Strategic Risk Register Update

https://www.eastrenfrewshire.gov.uk/media/7491/PAC-Item-09-16-March-2022/pdf/PAC_Item_09_-_16_March_2022.pdf?m=637825962402470000

PAC Paper: November 2021: IJB Strategic Risk Register Update

https://www.eastrenfrewshire.gov.uk/media/7155/PAC-Item-11-24-November-2021/pdf/PAC_Item_11_-_24_November_2021.pdf?m=637727683985700000

IJB Paper: January 2020: IJB Risk Management 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

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

STRATEGIC RISK REGISTER

DATE ORIGINATED: 09.11.2015

DATE REVIEWED: 10.11.2022

ERC Ref	No.	Risk Status S/C/N (Same, Changed, New)	Risk (Threat/Opportunity to achievement of business objective)- include the consequence of the risk in this description)	Risk Control Measures currently in Place (need to be SMART e.g. detail of what type of training took place with dates in evidence column)	Assessment of Risk (As it is now)			Proposed Risk Control Measures (should be SMART with detail included)	Completion date for proposed Risk Control Measure	Assessment of Residual Risk (with proposed control measures implemented)			Risk Owner
					Risk Score	Overall rating				Likelihood (probability)	Impact (Severity)	Risk Score (LxI)	
						11-16	HIGH						
						5-10	MEDIUM						
						1-4	LOW						
						L	I				L	I	LxI
n/a	1	S	Death or significant harm to vulnerable individual										
			Risk of death or significant harm to a service user/ patient as a result of HSCP actions or omissions. Consequences could include: - Loss of life or long term damage and impact on service user & family. - Possible perception of failure of care. - Poor workforce morale. - Reputational damage.	Professional leadership for social work practice strengthened We continue to operate within Clinical and Care Governance Framework ASP Quality Assurance Framework continues to be implemented and reported to APC Quality assurance of Adult Service Improvement Plans Senior Management rota for chairing ASP implemented Continual audit against compliance of MHO standards Professional supervision policy adopted for social work and social care staff. Review of rising demands and pressure points across adult services. Rolling training programme.				New Governance Framework providing assurance to CSWO being developed. Review risk management frameworks as we move towards recovery.	31/12/2022 31/12/2022				Head of Adult Services / Chief Social Work Officer
						3	3	9			2	3	6

4.4	2	S	Scottish Child Abuse Inquiry									
			<p>Children accommodated by East Renfrewshire Council and legacy areas from 1930 may have been the victims of historical abuse whilst in foster care.</p> <p>Capacity to meet the demands of the S21 notice and the possibly increased demand of access to records and potential claims against the Council as Inquiry work progresses.</p>	<p>Adult Protection Committee and Child Protection Committee have been sighted on these issues.</p> <p>Final s21 submission made to the Inquiry in July 2020 in relation to the foster care case study. The Inquiry requested further information which was submitted in Jan-22. The Inquiry will begin to take evidence from Jun-22 onwards – it is unclear at this point whether ER will be cited to court</p> <p>Key learning from S21 work shared with managers</p> <p>Identified leads in HSCP working alongside legal services to manage the progress of any allegations/claims made.</p>	3	3	9				3	3
4.1	3	S	Child Protection, Adult protection and Multi-Agency Public Protection Arrangements									
			<p>Inconsistent assessment and application of the public protection agenda (Child Protection, Adult Protection and Multi-Agency Public Protection Arrangements- MAPPA) may result in risk of children or vulnerable adults being harmed and lead to non-compliance with legislative standards.</p>	<p>The operation of Child Protection Committee (CPC), Adult Protection Committee (APC) and MAPPA meetings deal with strategic and practice issues.</p> <p>"Safe Together" model implemented in HSCP.</p> <p>Regular reporting to COPP in place for adult, children and high risk offenders.</p>	2	4	8	<p>Strengthen reporting arrangements around SSSC registrations. (<i>Short-life working group established Mar-22 - progressing action plan</i>)</p> <p>Roll out "Safe Together" across Council</p>	31/12/2022	31/12/2022	1	4

4	C	Financial Sustainability										
		<p>Risk of being unsustainable due to one of the following causes:</p> <p>1) Unable to deliver in full the existing savings and achieve new savings to deliver a balanced budget.</p> <p>2) Unable to influence future funding to recognise demographic and other pressures, or realise future efficiencies & savings.</p> <p>3) Implications of cessation of prescribing risk share and changes from hosted services funding structure.</p> <p>4) Financial Impacts relating to Brexit and other wider economic issues. Financial risks relate to staffing, purchase of care, drugs, equipment, consumables and food and utilities/other inflation</p> <p>5) Financial risks relating to Covid-19 There is a significant financial implication to the IJB if the costs of the response to the crisis are not fully funded. There are likely to be longer term implications with associated financial impact. The post Covid landscape is unclear</p> <p>6) Complexity of funding sources with some allocations late in the year and some instability from non-recurring funding.</p>	<p>The CFO provides regular financial advice and reporting to IJB, including savings progress.</p> <p>Detailed financial planning and monitoring for COVID 19 is in place and costs are considered by the Scottish Government as part of the NHSGCC response.</p> <p>Budget seminars are held with IJB Members.</p> <p>The regular budget updates and medium term financial plan set out funding pressures and scenarios. The HSCP is involved in the budget setting process with each of our partners.</p> <p>Medium Term Financial Plan latest revision March 22</p> <p>A local network and the National CFO Section meeting provide a discussion and decision making forum for wider issues impacting on partnerships, including prescribing and hosted services.</p> <p>The use of earmarked reserves allows us to deal with prescribing volatility in any one year.</p> <p>Review of hosted services is ongoing and this is a longer term review across all six HSCPs within NHSGCC.</p> <p>Ongoing monitoring of wider economic factors and inflation impacts</p> <p>Regular monitoring and planning combined with our reserves strategy allows us to maximise funding streams.</p>	3	4	12	<p>Conclude review of hosted service arrangements (indicative date)</p> <p>Refresh Medium Term Financial Plan for any significant changes during 2022/23 (including impact of fuel, utilities, pay award, prescribing short supply and other inflation costs)</p> <p>Develop the tri-partite financial planning discussions with partners as included in Strategic Improvement Action Plan.</p> <p>Covid funding exit strategy being discussed locally and nationally to manage the cessation of Covid support funding and the mechanism for clawback of Covid reserve balances</p>	<p>31/03/2023</p> <p>Ongoing (review 31/03/2023)</p> <p>Ongoing (review 31/03/2023)</p> <p>31/03/2023</p>	3	4	12	Chief Financial Officer

5.2	5	C	Failure of a Provider											
			<p>Risk of failure of a key care provider, including care home, care at home and other care providers due to significant care concerns financial instability, staff recruitment and retention difficulties.</p> <p>Consequences could include:</p> <ul style="list-style-type: none"> - disruption to service delivery - requirement to implement contingency plans - impact on individuals and families with potential disruption to care arrangements 	<p>We work with the Care Inspectorate to ensure robust action plans for improvement are in place.</p> <p>We work with providers at risk to agree phased and managed approach to closure if required. Escalation process in place.</p> <p>Work with Scottish Government, Scotland Excel and Cosla on care home market.</p> <p>Scotland Excel framework provides larger provider base to mitigate risk.</p> <p>Care Home assurance group established May 2020 (meets twice weekly).</p> <p>Care homes reporting key information which is reviewed by the care home assurance group to allow management of risk and support.</p> <p>Two community hubs established to provide range of support to care homes within Greater Glasgow and Clyde e.g. nursing, infection control support.</p>	4	3	12	<p>Reshape strategic commissioning plan based on outcome of the work exploring models of service delivery. Annual progress will inform our longer term approach.</p> <p>Increased monitoring by Commissioning and Contracts service (reviewed Sep22)</p>	31/03/2023	Ongoing (Review-31.03.2023)	3	3	9	Chief Financial Officer / Heads of Service

6	S	Access to Primary Care										
		<p>Insufficient primary care practice list capacity due to increased population size. This is a result of new housing developments which include family housing, increasing the number of children in the area and specific developments for older people.</p> <p>Inability to recruit/cover posts resulting in poor access for local residents.</p>	<p>Primary Care Improvement Plan agreed by IJB.</p> <p>Local practices are supported to manage list size by encouraging patients from out with the practice's contracted catchment area to register with a GP more local to them.</p> <p>Work with practices to maximise premises capacity to enable them to extend primary care team.</p> <p>Back scanning completed for practices to ensure all East Renfrewshire practices notes are scanned to free up space.</p>	3	3	9	<p>Work with planning department to consider impact and mitigation for new housing developments.</p> <p>Support GPs in practices most likely to be impacted by rise in new registrations due to new housing development to agree short term measures and discuss and longer term options to increase capacity.</p> <p>Signpost new residents to Practices registering patients for postcode area.</p> <p>Scoping ways to increase capacity for PCIP staff at existing sites, and exploring potential other sites</p> <p>Exploring revenue funded solutions around GP space in Newton Mearns and Neilston</p> <p>Working with NHSGG to developing strategy to support GP practice sustainability</p>	<p>Ongoing (reviewed Sep 22)</p> <p>Ongoing (reviewed Sep 22)</p> <p>Ongoing (reviewed Sep 22)</p> <p>Ongoing (review Sep 22)</p> <p>Ongoing (review Mar 23)</p>	3	2	6	Clinical Director
5.1	7	Increase in frail older population										
		<p>Increase in frail older people, particularly very old, due to demographic changes leads to an over demand on certain services and failure to meet legislation, overspend and negative publicity.</p>	<p>Scottish Government provides additional resources (winter planning) for Health and Social Care with emphasis on managing demographic pressures.</p> <p>Monthly reporting to Scottish Government on winter planning funding.</p> <p>Outcome Delivery Plan (ODP) and HSCP strategic plans build on foundation of wider council prevention and early intervention strategy for older people.</p> <p>UCC Delivery Plan approved by IJB in March-22.</p>	3	3	9	<p>Review Talking Points approach as part of winter planning.</p> <p>Project to support Care at Home redesign will go live in December 2022</p>	<p>31/10/22</p> <p>31/12/22</p>	3	2	6	Chief Officer HSCP

			<p>Concluded redesign work focusing on rehabilitation</p> <p>Annual budget setting takes account of demographic projections.</p> <p>Reviewed front door arrangements to ensure fit for purpose in terms of recovery – new model launched Summer and making significant positive impact on waiting list for assessment</p> <p>Re-started Talking Points as part of Community Led Support programme, diverting people to community resources and building own assets.</p>										
8	C	Workforce Planning and Change											
		<p>Lack of appropriately skilled workforce due to combination of loss of experience from retirement of ageing workforce and changes to registration and job requirements leads to a reduction in service levels and inability to deliver redesigns in line with Strategic Plan requirements. Use of temporary contracts as mitigation for financial uncertainty impacts on ability to recruit and retain staff.</p> <p>Risk of further reduction in workforce capacity due to industrial action</p>	<p>Workforce planning group restarted and includes 3rd / independent sector reps</p> <p>HSCP management team actively review all request to recruit and the number of temporary contracts have been minimised.</p> <p>Overarching workforce workstream in our recovery plan (as we have had some capacity issues resulting from Covid-19 and our response to the emergency).</p> <p>Recovery and Renewal Programme established (Jun 21)</p> <p>HSCP 3 year Workforce Plan developed</p> <p>Trauma Steering Group continues to meet regularly</p> <p>Working with professional leads and MH Clinical Directors to explore medium and longer term cover. In addition re-</p>				<p>Medium term cover arrangements in place for MH, however longer term recruitment plan to be developed board wide and we continue to work closely with the associated medical director.</p>	31/03/23				<p>Chief Officer HSCP</p>	
				4	4	16				2	4	8	

			<p>advertising vacant posts and close monitoring.</p> <p>HSCP Staff Wellbeing Group chaired by HoS meets bi-monthly to co-ordinate a range of wellbeing supports for staff. This includes bespoke 1-1 and team supports.</p> <p>Our Business Continuity plans will support prioritisation where required and cover a range of events including possible industrial action.</p>									
2.2	10	S	Increase in children & adults with additional support needs									
			<p>Increase in the number of children and adults with additional support requirements leading to a rise in demand on services.</p>	<p>Advanced Practitioner post to improve practice across adult and children services in preparing young people with additional support needs for adulthood.</p> <p>Analysis of demographic changes and increased financial forecasting.</p> <p>Education Resource Group manage specialist resources and admission to specialist provision.</p> <p>Resource Allocation Group (RAG) strengthened membership to include educational psychologist and occupational therapist.</p> <p>Concluded work to review transitions and new strategy developed</p>	4	3	12	<p>Present Transitions Strategy to Children Services Partnership Group for sign off</p> <p>30/12/2022</p> <p>Implement Transitions Strategy - transition team to be developed to lead delivery of strategy – transitions team currently being recruited and transition planning to feature in R&R programme (reviewed Sep)</p> <p>30/12/2022</p> <p>Continued monitoring and Covid support to partly offset increased demand. (reviewed Sep)</p> <p>Ongoing (review Mar 23)</p>	4	2	8	Chief Officer HSCP

5.3	11	C	In-House Care at Home Service										
			<p>Ongoing pressures and limited service capacity impacts on service delivery and quality standards Impact on service users and carers</p>	<p>Increased resource to support robust absence management.</p> <p>Single base operating for Care at Home</p> <p>Ongoing quality assurance and monitoring activity.</p> <p>Significant frontline recruitment progressing</p> <p>Increased OT resource to maximise outcomes and reduce supports required</p> <p>Payment of carried over annual leave made to increase staff availability</p> <p>Enhanced recruitment and advertising arrangements continuing</p>	2	4	8	<p>Project to support Care at Home redesign will go live in December 2022</p> <p>Conclude work to realign staff work patters in order to maximise resource</p> <p>Enhance data availability and reporting capability of hospital referrals</p> <p>Implement new scheduling and monitoring system solution to maximise efficient resource usage</p>	<p>31/12/2022</p> <p>31/03/2023</p> <p>31/03/2023</p> <p>15/12/2022</p>	2	3	6	Chief Officer HSCP
	12	S	Failures within IT System										
			<p>Critical information not been received due to failures in IT system</p> <p>Emails from outside the East Renfrewshire domain have been blocked or receipt failed due to ERC and 3rd party technical system issues.</p>	<p>Specific email addresses can be added to whitelist if required.</p> <p>Emails can be manually released.</p> <p>Analysis completed of referral source and destination mapping, to ensure information can be shared with ICT mailboxes and specific senders / emails prioritised, should an issue arise.</p> <p>Phase 1 of ICT Clearswift Review (looking at setup of rules and configuration within the email gateway solution) concluded 14.4.20 with changes to rules that should reduce some of the technical complexity with regards to email blocking.</p> <p>HSCP continue to work with ICT BRMs for both partner organisations to highlight and address both intermittent and known ICT issues</p>	3	2	6	<p>Conclusion of ICT Clearswift Review (Phase 2) on the Clearswift Gateway infrastructure.</p>	TBC	2	2	4	IT Business Partner

13	C	COVID19 & RECOVERY										
		<p>The significant impact of the pandemic on our workforce, supply chain, demand for and availability of services, delayed discharge targets, IT, accommodation, and resultant impact on financial and service planning.</p>	<p>Business Continuity and Operational Recovery Plans are in place and are reviewed by senior management regularly. Resilience Management Team continues to meet fortnightly.</p> <p>HSCP represented at local and national groups as well as integral part of our partners (ERC & NHSGGC) response and recovery.</p> <p>Testing regimes remain in place for care homes and health and social care staff Majority of staff fully vaccinated</p> <p>Use of intermediate care beds to allow discharge from hospital for those awaiting care at home service.</p> <p>Increased communication and intelligence sharing with partners other statutory bodies implemented.</p> <p>Ongoing engagement and reporting with partner providers including Care Homes.</p> <p>Revised Initial Contact Team procedures to alleviate pressures at 'front door' with further review underway</p> <p>Infection control procedures and arrangements for PPE in place.</p> <p>Regular Covid-19 cost monitoring informs our revenue reporting as well as reporting to the Scottish Government through NHSGGC.</p> <p>Recommended Recovery and Renewal Programme – new team now in place.</p> <p>Removal of social distancing restrictions at the end of August is allowing more staff to adopt hybrid approach to working</p>	4	3	12	<p>Restart accommodation strategy group (responsible for monitoring demand and capacity across HSCP buildings)</p> <p>We will contribute to the development of our local HSCP property strategy with our partners. This should help support strong future service planning.</p>	30/12/2022	31/03/203	3	3	9

	14	C	ANALOGUE TO DIGITAL SWITCHOVER										
			<p>Vulnerable adults left without access to Telecare as a means of support due to accelerated switch from analogue to digital phone lines and associated financial implications.</p>	<p>Programme board established and full project team in place to take forward the transition to analogue to digital.</p> <p>HSCP representation on programme board.</p> <p>Analogue to digital implementation plan.</p> <p>ARC (Alarm Receiving Centre) system procured Nov 21</p> <p>Decision made re first tranche of dispersed alarm units</p> <p>Recruited HSCP Senior User</p> <p>Digital ARC went live October 2022.</p>	3	3	9	<p>There is a Capital Project with our partner East Renfrewshire Council to manage replacement of analogue devices and peripherals within people's houses.</p> <p>Monitoring global supply issues in relation to chip shortages</p>	<p>Ongoing</p> <p>Ongoing</p>	2	3	6	