

# Agenda

West Dunbartonshire  
Health & Social Care Partnership

## West Dunbartonshire Health & Social Care Partnership Board Audit Committee

**Date:** Wednesday, 30 September 2015

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**Time:** 14:00

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**Venue:** Committee Room 3,  
Council Offices, Garshake Road, Dumbarton

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**Contact:** Nuala Borthwick, Committee Officer  
Tel: 01389 737594 Email: [nuala.borthwick@west-dunbarton.gov.uk](mailto:nuala.borthwick@west-dunbarton.gov.uk)

Dear Member

Please attend a meeting of the **West Dunbartonshire Health & Social Care Partnership Board Audit Committee** as detailed above.

The business is shown on the attached agenda.

Yours faithfully

**KEITH REDPATH**

Chief Officer of the  
Health & Social Care Partnership

**Distribution:-**

Ms R. Micklem (Chair)  
Dr H. Cameron  
Mr A. Macleod  
Councillor G. Casey  
Councillor J. McColl  
Councillor M. Rooney

Senior Management Team – Health & Social Care Partnership  
Mr C. McDougall  
Ms E. Boyd  
Mr L. Slavin

Date of issue: 21 September 2015

**WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNERSHIP BOARD  
AUDIT COMMITTEE**

**WEDNESDAY, 30 SEPTEMBER 2015**

**AGENDA**

**1. APOLOGIES**

**2. DECLARATIONS OF INTEREST**

Members are invited to declare if they have an interest in any of the undernoted items of business on this agenda and, if so, state the reasons for such declarations.

**3. AUDIT COMMITTEE TERMS OF REFERENCE 1 - 10**

Submit report by the Chief Financial Officer on the above.

**4. INTERNAL AUDIT OPERATIONAL AGREEMENT 11 - 18**

Submit report by the Chief Financial Officer on the above.

**5. DRAFT STRATEGIC RISK REGISTER 19 - 26**

Submit report by the Head of Strategy, Planning and Health Improvement on the above.

**6. CARE INSPECTORATE REPORT FOR OLDER PEOPLE'S RESIDENTIAL CARE SERVICES OPERATED BY WEST DUNBARTONSHIRE COUNCIL 27 - 31**

Submit report by the Head of Community Health and Care on the above.

**7. CARE INSPECTORATE REPORTS FOR SUPPORT SERVICES OPERATED BY THE INDEPENDENT SECTOR IN WEST DUNBARTONSHIRE 32 - 37**

Submit report by the Head of Strategy, Planning and Health Improvement on the above.

**8./**

**8. FORTHCOMING AUDIT SCOTLAND REPORTS**

**38 - 44**

Submit report by the Head of Strategy, Planning and Health Improvement on the above.

**9. FUTURE MEETINGS**

Members are requested to consider the undernoted dates for future meetings of the Audit Committee as undernoted:-

Wednesday, 13 January 2016 at 2.00 p.m. in Committee Room 3, Council Offices, Garshake Road, Dumbarton G82 3PU

Wednesday, 23 March 2016 at 10.00 a.m. in Committee Room 3, Council Offices, Garshake Road, Dumbarton G82 3PU

Wednesday, 15 June 2016 at 2.00 p.m. in Committee Room 3, Council Offices, Garshake Road, Dumbarton G82 3PU

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## WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNERSHIP

**Audit Committee: 30th September 2015**

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**Subject:     Audit Committee Terms of Reference**

### **1.     Purpose**

- 1.1**    To present the proposed Terms of Reference for the Audit Committee.

### **2.     Recommendation**

- 2.1**    The Audit Committee is recommended to approve the proposed Terms of Reference.

### **3.     Background**

- 3.1**    Audit Scotland have emphasised that health and social care integration requires effective governance arrangements for the new joint bodies; and that a crucial element of governance is audit committee arrangements. The Health and Social Care Integration Public Bodies (Joint Working) (Scotland) Act 2014 Guidance for Integration Financial Assurance confirms that it is for the Partnership Board to formally agree its audit arrangements.
- 3.2**    The West Dunbartonshire Health & Social Care Partnership Board Financial Regulations confirms the responsibility of the Partnership Board to establish adequate and proportionate internal audit arrangements for review of the adequacy of the arrangements for risk management, governance and control of the delegated resources.
- 3.4**    At its meeting on the 19<sup>th</sup> August 2015, the Partnership Board approved the establishment of an Audit Committee to focus on financial and internal audit on its behalf. At that meeting it was also agreed that the Chief Financial Officer prepare the Terms of Reference for the Audit Committee, for consideration and approval at its first meeting (attached). Once approved, these Terms of Reference will then be presented to the Partnership Board for confirmation at its November 2015 meeting.

### **4.     Main Issues**

- 4.1**    The proposed Terms of Reference reflects the commitments and expectation expressed within both the Integration Scheme for West Dunbartonshire; the Partnership Board's Financial Regulations approved at its 1<sup>st</sup> July 2015 meeting; and the Partnership Board report regarding audit arrangements approved at its 19<sup>th</sup> August 2015 meeting, including that:
- The Audit Committee be composed of the voting members of the Partnership Board.

- That the Audit Committee be chaired by the Vice-Chair of the Partnership Board.
- The Chief Officer and Chief Financial Officer be required to attend meetings of the Audit Committee.
- As the Audit Committee will be responsible for overseeing the regularity of expenditure by Partnership Board, other non-voting members of the Partnership Board shall also have the right to attend. A schedule of meetings will be published for all Partnership Board members, and those non-voting members who confirm their intention to attend the meeting will be issued with papers for that meeting.
- The Audit Committee receive the formal submission of reports, findings and recommendations by the appointed Internal Audit service, external auditor, Audit Scotland and Inspectorate bodies.
- The Chief Financial Officer will nominate an Internal Audit Service, led by a named Chief Internal Auditor, to work on behalf of the Audit Committee. The appointed Chief Internal Auditor will be required to attend meetings of the Audit Committee.
- The Chief Financial Officer will prepare an Annual Governance Statement for the Audit Committee and the Partnership Board.
- The Audit Committee will meet quarterly, with a provision for additional meetings if required; and with meetings scheduled at regular intervals between the quarterly meetings of the Partnership Board.
- The minutes of the Audit Committee meetings will be routinely submitted to the Partnership Board.

**4.2** At the 19<sup>th</sup> August meeting, the Partnership Board also agreed that the internal audit service for the Partnership Board be provided by West Dunbartonshire Council's Internal Audit Section, with Colin McDougall (who is the Council's Chief Internal Auditor) appointed as Chief Internal Auditor for the Partnership Board.

**4.3** At the 19<sup>th</sup> August 2015 meeting it was also confirmed that:

- The Accounts Commission is responsible for appointing external auditors for Integration Joint Boards.
- In the first instance, the Accounts Commission has appointed Audit Scotland to undertake this role from such point as individual integration joint boards are established until the end of 2016/17.
- It has been confirmed that the Audit Scotland external audit team currently attached to West Dunbartonshire Council will similarly undertake that external audit role for the Partnership Board. Members of that Audit Scotland external audit team will attend the meetings of the Audit Committee.

**4.4** It is proposed that the Chief Financial Officer prepare Terms of Reference for the Audit Committee that reflect that span of responsibilities of the Partnership Board, i.e.:

- The Strategic Plan.

- Financial plan underpinning the Strategic Plan.
- The operational delivery of those integrated services delegated to the Partnership Board (except for NHS acute hospital services).
- Relevant issues raised from the internal auditors of the Health Board, Council and the Partnership Board.

**4.5** The Chief Internal Auditor for the Partnership Board will report to the Chief Financial Officer and the Audit Committee on an annual risk-based audit plan, delivery of the plan and recommendations; and will provide an annual internal audit report, including the audit opinion.

**4.6** The Health and Social Care Integration Public Bodies (Joint Working) (Scotland) Act 2014 Guidance for Integration Financial Assurance acknowledges that the establishment of an Integration Joint Board audit committee will have implications for the ongoing work of the Health Board and Local Authority audit committees. As confirmed at the 19<sup>th</sup> August 2015 meeting, the Chief Financial Officer will work with the internal auditors of the Health Board, Local Authority and the Partnership Board to ensure that there is clarity and consistency of appropriate scrutiny of the work of the Partnership Board and the Health & Social Care Partnership; and that the internal audit plans of the three audit committees provide necessary assurance to all three of the bodies.

## **5. People Implications**

**5.1** The Terms of Reference propose that the secretariat for the Audit Committee will be provided by West Dunbartonshire Council.

## **6. Financial Implications**

**6.1** The Chief Financial Officer will be responsible for providing assurance on the system of internal financial control to the Audit Committee on behalf of the Health Board and Council. That system of internal financial control would be based on a framework of regular management information, Financial Regulations and Standing Financial Instructions, administrative procedures (including segregation of duties), management and supervision, and a system of delegation and accountability. In doing this, the Chief Financial Officer will be reliant on both the Health Board's and Council's systems of internal control to support compliance with both organisations' policies and promotes achievement of each organisation's aims and objectives, as well as those of the Partnership Board as expressed in its Strategic Plan.

## **7. Professional Implications**

**7.1** The proposals here have been agreed with the Council Section 95 Officer and the Health Board Director of Finance. The Health Board Director of Finance and the Council Section 95 Officer will ensure that the Audit Committee is provided with necessary technical and corporate support in relation to its remit.

## **8. Locality Implications**

**8.1** There are no locality implications associated with this report.

## **9. Risk Analysis**

**9.1** As stated above, Audit Scotland have emphasised that health and social care integration requires effective governance arrangements for the new joint bodies; and that a crucial element of governance is audit committee arrangements.

**9.2** It is the responsibility of the Partnership Board to establish adequate and proportionate internal audit arrangements for review of the adequacy of the arrangements for risk management, governance and control of the delegated resources. The implementation of such arrangements by the Partnership Board will be subject to scrutiny.

## **10. Impact Assessments**

**10.1** None required

## **11. Consultation**

**11.1** These proposals have been shared with Audit Scotland, as the external auditors.

## **12. Strategic Assessment**

**12.1** Proper budgetary control and sound financial practice are cornerstones of good governance and support the Partnership Board and officers to pursue the strategic priorities of the HSCP Strategic Plan.

**12.2** This report links to the strategic financial governance arrangements of both the Health Board and the Council.

**Author:** Jeanne Middleton - Chief Financial Officer  
West Dunbartonshire Health & Social Care Partnership.

**Date:** 30<sup>th</sup> September 2015

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**Appendices:** West Dunbartonshire Health & Social Care Partnership Board - Audit Committee Terms of Reference

**Background Papers:** Audit Scotland (2015) An overview of local government in Scotland 2015  
[http://www.auditscotland.gov.uk/docs/local/2015/nr\\_150305\\_local\\_government\\_overview.pdf](http://www.auditscotland.gov.uk/docs/local/2015/nr_150305_local_government_overview.pdf)

WD HSCP Board Report (August 2015): Health & Social Care Partnership Board Financial Regulations

WD HSCP Board Report (August 2015): Audit Arrangements

The Health and Social Care Integration Public Bodies (Joint Working) (Scotland) Act 2014 Guidance for Integration Financial Assurance  
<http://www.gov.scot/Resource/0046/00465080.pdf>

**Wards Affected:** All

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**West Dunbartonshire**  
**Health & Social Care Partnership**

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**West Dunbartonshire Health & Social Care Partnership Board**  
**Audit Committee**  
**Terms of Reference**

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## 1. PURPOSE

- 1.1 West Dunbartonshire Health & Social Care Partnership Board is responsible for the strategic planning and reporting of a range of health and social care services delegated it by NHS Greater Glasgow & Clyde Health Board and West Dunbartonshire Council (described in full within its approved Integration Scheme). The Council and the Health Board discharge the operational delivery of those delegated services (except those related to the Health Board's Acute Division services most commonly associated with the emergency care pathway) through the partnership arrangement referred to as West Dunbartonshire Health & Social Care Partnership. The Health & Social Care Partnership Board is responsible for the operational oversight of West Dunbartonshire Health & Social Care Partnership.
- 1.2 The West Dunbartonshire Health & Social Care Partnership Board's:
- Mission is to improve the health and wellbeing of West Dunbartonshire.
  - Purpose is to plan for and ensure the delivery of high quality health and social care services to and with the communities of West Dunbartonshire.
  - Core values are protection; improvement; efficiency; transparency; fairness; collaboration; respect; and compassion.
- 1.3 The Partnership Board is a legal entity in its own right created by Parliamentary Order, following ministerial approval of the Integration Scheme. It is accountable for the stewardship of public funds and is expected to operate under public sector best practice governance arrangements, proportionate to its transactions and responsibilities. Stewardship is a major function of management and, therefore, a responsibility placed upon the appointed members and officers of the Partnership Board.
- 1.4 The Health & Social Care Partnership Board positively promotes the principles of sound corporate governance within all areas of its affairs. Its Audit Committee is an essential component of the governance of the Health & Social Care Partnership Board detailed within its Financial Regulations.
- 1.5 The West Dunbartonshire Health & Social Care Partnership Board has established this Audit Committee as a Committee of the Partnership Board to support it in its responsibilities for issues of risk, control and governance and associated assurance through a process of constructive challenge. These Terms of Reference for the Audit Committee reflect the span of responsibilities of the Partnership Board and requirements of its approved Financial Regulations, i.e.:
- The Strategic Plan.
  - Financial plan underpinning the Strategic Plan.
  - The operational delivery of those integrated services delegated to the Partnership Board (except for NHS acute hospital services).
  - Relevant issues raised by the internal auditors of the Health Board, Council and the Partnership Board.

Document Title:	WDHSCP Board Audit Committee Terms of Reference	Owner:	Chief Financial Officer
Version No.	v1	Superseded Version:	N/A
Date Effective:	30/09/2015	Review Date:	01/04/2017

## **2. MEMBERSHIP**

- 2.1 The Audit Committee will be composed of the six voting members of the Partnership Board.
- 2.2 The Audit Committee will be chaired by the Vice-Chair of the Partnership Board.
- 2.3 As the Audit Committee will be responsible for overseeing the financial governance arrangements of the Partnership Board, other non-voting members of the Partnership Board shall also have the right to attend. A schedule of meetings will be published for all Partnership Board members, and those non-voting members who confirm their intention to attend the meeting will be issued with papers for that meeting.
- 2.4 The Chief Financial Officer will nominate an Internal Audit Service, led by a named Chief Internal Auditor, to work on behalf of the Audit Committee.
- 2.5 The external auditors for the Partnership Board will be appointed by the Accounts Commission.
- 2.6 The appointed Chief Internal Auditor will normally attend meetings of the Audit Committee.
- 2.7 A representative of the external auditors will normally attend meetings of the Audit Committee.
- 2.8 The Chief Officer and Chief Financial Officer of the Health & Social Care Partnership Board will normally attend meetings of the Audit Committee.
- 2.9 The Audit Committee will be provided with a secretariat function by West Dunbartonshire Council.
- 2.10 Other officers of the Health & Social Care Partnership, West Dunbartonshire Council and NHS Greater Glasgow & Clyde may also be invited to attend meetings.

## **3. REPORTING**

- 3.1 The Audit Committee will formally provide a copy of its minutes to the Partnership Board for inclusion on the agenda's of its subsequent meetings. These minutes will be made publicly available.
- 3.2 The Audit Committee will provide the Partnership Board with an Annual Statement, timed to support finalisation of the accounts and the governance statement, summarising its conclusions from the work it has done during the year.

## **4. RESPONSIBILITIES**

- 4.1 The Audit Committee will advise the Partnership Board and its Chief Financial Officer on:
  - The strategic processes for risk, control and governance and the governance statement.
  - The financial governance and accounts of the Partnership Board, including the process for review of the accounts prior to submission for audit, levels of error identified, and management's letter of representation to the external auditors.
  - The planned activity and results of both internal and external audit as they relate to the activities of the Partnership Board.

- The adequacy of management response to issues identified by audit activity, including external audit's management letter/report.
  - The effectiveness of the internal control environment.
  - Assurances relating to the corporate governance requirements for the Partnership Board.
  - Appointment of the internal audit service or for purchase of non-audit services from contractors who provide audit services.
- 4.2 The Audit Committee will also periodically review its own effectiveness and report the results of that review to the Partnership Board

## **5. RIGHTS**

- 5.1 The Chief Financial Officer will be responsible for providing assurance on the system of internal financial control to the Audit Committee on behalf of the Health Board and Council. In doing this, the Chief Financial Officer will be reliant on both the Health Board's and Council's systems of internal control to support compliance with both organisations' policies and promote achievement of each organisation's aims and objectives, as well as those of the Partnership Board as expressed in its Strategic Plan.
- 5.2 The Audit Committee receive, scrutinise and comment upon the formal submission of reports, findings and recommendations by the appointed Internal Audit service, external auditor (as appointed by the Accounts Commission), Audit Scotland and Inspectorate bodies. The Chief Financial Officer will ensure that follow-up reports on actions required will be provided to the Audit Committee as agreed.
- 5.3 The Chief Financial Officer will prepare an Annual Governance Statement for the Audit Committee prior to its being presented to the Partnership Board.
- 5.4 The Chief Internal Auditor for the Partnership Board will report to the Chief Financial Officer and the Audit Committee on an annual risk-based audit plan in respect of the activities of the Partnership Board; delivery of the plan and recommendations; and will provide an annual internal audit report, including the audit opinion.
- 5.5 The Audit Committee may procure specialist ad-hoc advice at the expense of the Partnership Board, subject to budgets agreed by the Chief Financial Officer and confirmed by the Partnership Board.
- 5.6 The appointed Chief Internal Auditor and the representative of External Audit (as appointed by the Accounts Commission) will have free and confidential access to the Chair of the Audit Committee.

## **6. MEETINGS**

- 6.1 The procedures for meetings are that:
- 6.1.1 The Audit Committee will meet quarterly, with a provision for additional meetings if required as the discretion of the Chair of the Audit Committee; and with meetings scheduled at regular intervals between the quarterly meetings of the Partnership Board.
- 6.1.2 The meetings will be conducted in accordance with the Standing Orders of the Partnership Board, including:
- At least one half (i.e. three) of the six members of the Audit Committee will be present for the meeting to be deemed quorate.

- Members of the Audit Committee must disclose any direct or indirect pecuniary or other interest in relation to an item of business to be transacted at a meeting of the Audit Committee, before taking part in any discussion on that item. Where an interest is disclosed, the other members present at the meeting in question shall decide whether the member declaring the interest is to be prohibited from taking part in discussion of, or voting on, the item of business.
- 6.1.3 Audit Committee meetings will normally be attended by the Chief Officer, the Chief Financial Officer, appointed Chief Internal Auditor and a representative of the External Auditor.
- 6.1.4 The Audit Committee may ask any other officers from the Health & Social Care Partnership, West Dunbartonshire Council and NHS Greater Glasgow & Clyde to attend to assist it with its discussions on any particular matter.
- 6.1.5 Subject to the extent of the accommodation available and except in relation to items certified as exempt and items likely to involve the disclosure of confidential information, meetings of the Audit Committee shall be open to the public (as per the Standing Orders of the Partnership Board). The Chief Officer shall be responsible for giving public notice of the date, time and place of each meeting of the Audit Committee by posting within the main offices of the Health & Social Care Partnership not less than five days before the date of each meeting.
- 6.1.6 The Audit Committee may by resolution at any meeting exclude the press and public there from during consideration of an item of business where it is likely in view of the nature of the business to be transacted or of the nature of proceedings that if members of the press and public were present there would be a disclosure to them of exempt information as defined in Schedule 7A to the Local Government (Scotland) Act 1973 or it is likely that confidential information would be disclosed in breach of an obligation of confidence. The Audit Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.
- 6.1.7 Every meeting of the Audit Committee shall be open to the public but these provisions shall be without prejudice to the Audit Committee's powers of exclusion in order to suppress or prevent disorderly conduct or other misbehaviour at a meeting. The Audit Committee may exclude or eject from a meeting a member or members of the press or public whose presence or conduct is impeding the work or proceedings of the Audit Committee.
- 6.1.8 The Partnership Board or the Chief Financial Officer may ask the Audit Committee to convene further meetings to discuss particular issues on which they want the Audit Committee's advice.

## WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNERSHIP

**Audit Committee: 30th September 2015**

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**Subject: Internal Audit Operational Agreement**

### **1. Purpose**

- 1.1 To present the proposed Operational Agreement for the West Dunbartonshire Health & Social Care Partnership Board's Internal Audit Service.

### **2. Recommendation**

- 2.1 The Audit Committee is recommended to approve the proposed Internal Audit Operational Agreement. Terms of Reference.

### **3. Background**

- 3.1 Audit Scotland have emphasised that health and social care integration requires effective governance arrangements for the new joint bodies; and that a crucial element of governance is audit committee arrangements.
- 3.2 The Health and Social Care Integration Public Bodies (Joint Working) (Scotland) Act 2014 Guidance for Integration Financial Assurance confirms that it is for the Partnership Board to formally agree its audit arrangements.
- 3.3 The West Dunbartonshire Health & Social Care Partnership Board Financial Regulations confirms the responsibility of the Partnership Board to establish adequate and proportionate internal audit arrangements for review of the adequacy of the arrangements for risk management, governance and control of the delegated resources.
- 3.4 At its meeting on the 19<sup>th</sup> August 2015, it was agreed that the internal audit service for the Partnership Board be provided by West Dunbartonshire Council's Internal Audit Section, with Colin McDougall (who is the Council's Chief Internal Auditor) appointed as Chief Internal Auditor for the Partnership Board; and subject to the approval of an operational agreement for those arrangements. It was then agreed that the Chief Financial Officer work with the appointed Chief Internal Auditor to prepare that operational agreement for consideration at the first meeting of the Audit Committee (attached).

### **4. Main Issues**

- 4.1 The proposed Internal Audit Operational Agreement reflects the commitments and expectation expressed within both the Integration Scheme for West Dunbartonshire; the Partnership Board's Financial Regulations approved at its 1<sup>st</sup> July 2015 meeting; and the Partnership Board report regarding audit arrangements approved at its 19<sup>th</sup> August 2015 meeting.

- 4.2 This agreement sets out the arrangements for the provision of that Chief Internal Auditor function and the Internal Audit Service to be led by them. This agreement is placed within the context of partnership working between the Health Board and the Council; and the commitment given by both within their Integration Agreement to support the Partnership Board by providing the professional, technical or administrative support required for the development of the Strategic Plan, and the oversight and delivery of the integration functions.
- 4.3 This agreement relates to the period 30<sup>th</sup> September 2015 to 1<sup>st</sup> April 2017. The agreement will be reviewed annually by the Chief Financial Officer and the relevant responsible officers of the Council and the Health Board; and with provision for the duration of the agreement to be rolled forward with the agreement of the Audit Committee.

## **5. People Implications**

- 5.1 This agreement confirms that the internal audit service for the Partnership Board be provided by West Dunbartonshire Council's Internal Audit Section, with Colin McDougall (the Council's Chief Internal Auditor) appointed as Chief Internal Auditor for the Partnership Board.
- 5.2 This agreement confirms that the Chief Internal Auditor for the Partnership Board will be able to call upon a proportionate level of internal audit capacity from both West Dunbartonshire Council's Internal Audit Section and the NHS Greater Glasgow & Clyde's appointed Internal Audit provider.

## **6. Financial Implications**

- 6.1 This agreement is placed within the context of partnership working between the Health Board and the Council; and the commitment given by both within their Integration Agreement to support the Partnership Board by providing the professional, technical or administrative support required for the development of the Strategic Plan, and the oversight and delivery of the integration functions. As such, there are no direct financial implications arising from the Operational Agreement for any of the three parties involved.

## **7. Professional Implications**

- 7.1 The proposals here have been agreed with the appointed Chief Internal Auditor for the Partnership Board, the Council Section 95 Officer and the Health Board Director of Finance.

## **8. Locality Implications**

- 8.1 There are no locality implications associated with this report.



## **9. Risk Analysis**

- 9.1 As stated above, Audit Scotland have emphasised that health and social care integration requires effective governance arrangements for the new joint bodies; and that a crucial element of governance is audit committee arrangements.
- 9.2 It is the responsibility of the Partnership Board to establish adequate and proportionate internal audit arrangements for review of the adequacy of the arrangements for risk management, governance and control of the delegated resources. The implementation of such arrangements by the Partnership Board will be subject to scrutiny.

## **10. Impact Assessments**

- 10.1 None required

## **11. Consultation**

- 11.1 As confirmed in the report presented to the Partnership Board at its August 2015 meeting, the audit arrangements developed for the Partnership Board have been shared with Audit Scotland, as the external auditors, and they have confirmed that they are appropriately based.

## **12. Strategic Assessment**

- 12.1 Proper budgetary control and sound financial practice are cornerstones of good governance and support the Partnership Board and officers to pursue the strategic priorities of the HSCP Strategic Plan.
- 12.2 This report links to the strategic financial governance arrangements of both the Health Board and the Council.

**Author:** Jeanne Middleton - Chief Financial Officer  
West Dunbartonshire Health & Social Care Partnership.

**Date:** 30<sup>th</sup> September 2015

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**Appendices:** None

**Background Papers:** Audit Scotland (2015) An overview of local government in Scotland 2015  
[http://www.auditscotland.gov.uk/docs/local/2015/nr\\_150305\\_local\\_government\\_overview.pdf](http://www.auditscotland.gov.uk/docs/local/2015/nr_150305_local_government_overview.pdf)  
  
WD HSCP Board Report (August 2015): Health & Social Care Partnership Board Financial Regulations  
  
WD HSCP Board Report (August 2015): Audit Arrangements

**Wards Affected:** All

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**THE PROVISION OF INTERNAL AUDIT SERVICES FOR  
WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE  
PARTNERSHIP BOARD**

**Operational Agreement**

**Between**

**NHS Greater Glasgow & Clyde Health Board,  
West Dunbartonshire Council**

**And**

**West Dunbartonshire Health & Social Care Partnership Board**

**From**

**30th September 2015 to 31st March 2018**

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## 1. PURPOSE

- 1.1 West Dunbartonshire Health & Social Care Partnership Board is responsible for the strategic planning and reporting of a range of health and social care services delegated to it by NHS Greater Glasgow & Clyde Health Board and West Dunbartonshire Council (described in full within its approved Integration Scheme). The Council and the Health Board discharge the operational delivery of those delegated services (except those related to the Health Board's Acute Division services most commonly associated with the emergency care pathway) through the partnership arrangement referred to as West Dunbartonshire Health & Social Care Partnership. The Health & Social Care Partnership Board is responsible for the operational oversight of West Dunbartonshire Health & Social Care Partnership.
- 1.2 The Partnership Board is a legal entity in its own right created by Parliamentary Order, following ministerial approval of the Integration Scheme. It is accountable for the stewardship of public funds and is expected to operate under public sector best practice governance arrangements, proportionate to its transactions and responsibilities.
- 1.3 The Partnership Board has established an Audit Committee as a Committee of the Partnership Board to support it in its responsibilities for issues of risk, control and governance and associated assurance through a process of constructive challenge. These Terms of Reference for the Audit Committee reflect the span of responsibilities of the Partnership Board and requirements of its approved Financial Regulations, i.e.:
- The Strategic Plan.
  - Financial Plan underpinning the Strategic Plan.
  - The operational delivery of those integrated services delegated to the Partnership Board (except for NHS acute hospital services).
  - Relevant issues raised by the internal auditors and the external auditors of the Health Board, Council and the Partnership Board.
- 1.4 The Chief Financial Officer of the Partnership Board is responsible for nominating a named Chief Internal Auditor and an Internal Audit Service, to work on behalf of the Audit Committee.
- 1.5 This agreement sets out the arrangements for the provision of that Chief Internal Auditor function and the Internal Audit Service to be led by them. This agreement is placed within the context of partnership working between the Health Board and the Council; and the commitment given by both within their Integration Agreement to support the Partnership Board by providing the professional, technical or administrative support required for the development of the Strategic Plan, and the oversight and delivery of the integration functions. As such, there are no direct financial implications arising from the Operational Agreement for any of the three parties involved.
- 1.6 This agreement relates to the period 30<sup>th</sup> September 2015 to 31st March 2018. The agreement will be reviewed annually by the Chief Financial Officer and the relevant responsible officers of the Council and the Health Board; and with provision for the duration of the agreement to be rolled forward with the agreement of the Audit Committee. Six month's notice of termination of the agreement will be required by all parties involved.

Document Title:	WDHSCP Internal Audit Operational Agreement	Owner:	Chief Financial Officer
Version No.	Final	Superseded Version:	N/A
Date Effective:	30/09/2015	Review Date:	01/04/2017

## **2. THE INTERNAL AUDIT ARRANGEMENTS**

- 2.1 The Chief Internal Auditor for the Partnership Board will provide assurance and advice on the proper stewardship of resources, including internal control; financial reporting; the effectiveness of audit arrangements (internal and external); risk management; and the governance arrangements within the Partnership Board.
- 2.2 This will be achieved by:
- Delivering an internal audit service in accordance with regulatory requirements and the Public Sector Internal Audit Standards (PSIAS).
  - Preparing an annual risk based internal audit plan for the Partnership Board.
  - Taking appropriate reliance from the annual risk based Internal Audit Plans prepared by the Internal Audit service of both the Council and the Health Board for the elements of their work which concern the delegate responsibilities of the Partnership Board and the operations of the Health & Social Care Partnership.
  - Delivering the audits in the approved audit plan in accordance with the PSIAS.
  - Submitting regular progress reports on delivery of the audit plan, including agreed action plans arising from specific assignments.
  - Providing regular reports on the progress towards completion of agreed action plans.
  - Review compliance on the Partnership Board's governance arrangements.
  - Preparing an annual audit report to the Chief Financial Officer and the Audit Committee which is timed to support the annual governance statement, providing an opinion on the overall adequacy and effectiveness of the Partnership Board's governance, risk and control framework (based upon the work done during the year).
  - Liaising with the internal audit functions of both the Council and the Health Board on specific matters as appropriate.
  - Liaising with the appointed external auditors of the Partnership Board, the Council and the Health Board on specific matters as appropriate.
- 2.3 The Chief Internal Auditor for the Partnership Board will ensure that the Partnership Board's annual internal audit plan and internal audit report are shared as deemed appropriate with the Health Board's Audit Committee and Council's Audit & Performance Review Committee through the reporting arrangements in those bodies for internal audit.
- 2.4 The Chief Internal Auditor for the Partnership Board and their team shall have unrestricted access to all documents and records relating to the activities of the Partnership Board; and be authorised to obtain such information and explanations as considered necessary to form an opinion. Further access to the staff working under the management of the Health & Social Care Partnership and the premises from which they deliver services will be subject to prior and on-going engagement with the Chief Internal Auditors for West Dunbartonshire Council and the NHS Greater Glasgow & Clyde Health Board

## **3. THE AGREEMENT**

- 3.1 That the internal audit service for the Partnership Board be provided by West Dunbartonshire Council's Internal Audit Section, with Colin McDougall (the Council's Chief Internal Auditor) appointed as Chief Internal Auditor for the Partnership Board.
- 3.2 That the Chief Internal Auditor for the Partnership Board will be able to call upon a proportionate level of internal audit capacity where it falls within the scope of both West Dunbartonshire Council's Internal Audit Section and the NHS Greater Glasgow & Clyde's appointed Internal Audit provider.

#### 4. AUTHORISATION

For West Dunbartonshire Health & Social Care Partnership Board

Name: Jeanne Middleton

Job Title: Chief Financial Officer

Signature:

Date:

For Greater Glasgow and Clyde Health Board

Name: Mark White

Job Title: Director of Finance

Signature:

Date:

For West Dunbartonshire Council

Name: Angela Wilson

Job Title: Executive Director Corporate Services

Signature:

Date:

## WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNERSHIP

**Audit Committee: 30<sup>th</sup> September 2015**

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**Subject:     Draft Strategic Risk Register**

### **1.     Purpose**

- 1.1**    To present the first Strategic Risk Register in draft for the new Health & Social Care Partnership.

### **2.     Recommendation**

- 2.1**    The Audit Committee is recommended to:
- 1) Provide comment on the content of the draft Strategic Risk Register; and
  - 2) Subject to any changes required, endorse the draft Strategic Risk Register for onward recommendation to the West Dunbartonshire Health & Social Care Partnership Board at its November 2015 meeting.

### **3.     Background**

- 3.1**    Audit Scotland have emphasised that health and social care integration requires effective governance arrangements for the new joint bodies. Such governance arrangements include systems for managing risks.
- 3.2**    The Health & Social Care Partnership Board Financial Regulations reflect the recommendations of the national Integrated Resources Advisory Group which confirms the responsibility of the Chief Officer to develop a local risk strategy and policy for approval by the Partnership Board. The Partnership Board approved the West Dunbartonshire Health & Social Care Partnership's Risk Management Strategy & Policy at its August 2015 meeting.
- 3.3**    At its August 2015 meeting, the Partnership Board also agreed that the Chief Officer to prepare a draft strategic risk register for scrutiny at the first meeting of the Audit Committee prior to its being finalised and then presented to the subsequent meeting of the Partnership Board (attached).

### **4.     Main Issues**

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

- 4.2** The Integration Scheme confirms that a key element of the required risk management process is the preparation, scrutiny, approval and then annual review of the annual strategic risk register for the Health & Social Care Partnership.
- 4.3** The attached draft Strategic Risk Register has been prepared in accordance with the aforementioned local Risk Management Policy & Strategy.
- 4.4** As per the Risk Management Policy & Strategy, *strategic risks* represent the potential for the Partnership Board to achieve (opportunity) or fail to meet (threat) its desired outcomes and objectives as set out within the Strategic Plan, and typically these risks require strategic leadership in the development of activities and application of controls to manage the risk. These are distinct from operational risks, which represent the potential for impact (opportunity or threat) within or arising from the activities of an individual service area or team operating within the scope of the Health & Social Care Partnership's activities.
- 4.5** The Chief Officer will have responsibility for managing operational risks as operational risks will be more 'front-line' in nature and the development of activities and controls to respond to these risks can be led by local managers and team leaders. Where a number of operational risks impact across multiple service areas or, because of interdependencies, require more strategic leadership, then these can be proposed for escalation to 'strategic risk' status for the Partnership Board.

## **5. People Implications**

- 5.1** Key people implications associated with the identified strategic risks identified are addressed within the *mitigating action* column of the draft Strategic Risk Register.

## **6. Financial Implications**

- 6.1** Key financial implications associated with the identified strategic risks identified are addressed within the *mitigating action* column of the draft Strategic Risk Register.

## **7. Professional Implications**

- 7.1** Key professional implications associated with the identified strategic risks identified are addressed within the *mitigating action* column of the draft Strategic Risk Register.
- 7.2** The local Risk Management Strategy and Policy supports the regulatory frameworks within which health and social care professionals practice; and the established professional accountabilities that are currently in place within the NHS and local government. All health and social care professionals remain accountable for their individual clinical and care decisions.



## **8. Locality Implications**

**8.1** None

## **9. Risk Analysis**

**9.1** Audit Scotland have emphasised that health and social care integration requires effective governance arrangements for the new joint bodies. Such governance arrangements include systems for managing risks such as the preparation and maintenance of strategic risk registers.

**9.2** It is the responsibility of Partnership Board to approve an appropriate Strategic Risk Register for the Health & Social Care Partnership that is prepared in accordance with the local Risk Management Policy & Strategy,

## **10. Impact Assessments**

**10.1** None required

## **11. Consultation**

**11.1** The draft Strategic Risk Register has been confirmed for submission to the Audit Committee for consideration by the Health & Social Care Partnership Senior Management Team.

## **12. Strategic Assessment**

**12.1** The preparation, approval and maintenance of the attached draft Strategic Risk Register will prevent or mitigate the effects of loss or harm; and will increase success in the delivery of the Strategic Plan.

**Author:** Soumen Sengupta – Head of Strategy, Planning & Health Improvement  
West Dunbartonshire Health & Social Care Partnership.

**Date:** 30<sup>th</sup> September 2015

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**Person to Contact:** Soumen Sengupta – Head of Strategy, Planning & Health Improvement, Garshake Road, Dumbarton. G82 3PU.  
Telephone: 01389 737321  
e-mail: [soumen.sengupta@ggc.scot.nhs.uk](mailto:soumen.sengupta@ggc.scot.nhs.uk)

**Appendices:** West Dunbartonshire Health & Social Care Partnership  
Strategic Risk Register (draft)

<b>Background Papers:</b>	<p>Audit Scotland (2015) An overview of local government in Scotland 2015  <a href="http://www.auditscotland.gov.uk/docs/local/2015/nr_150305_local_government_overview.pdf">http://www.auditscotland.gov.uk/docs/local/2015/nr_150305_local_government_overview.pdf</a></p> <p>HSCP Board Report (August 2015): Health &amp; Social Care Partnership Board Financial Regulations</p> <p>HSCP Board Report (August 2015): Risk Management Policy &amp; Strategy</p>
<b>Wards Affected:</b>	All

## West Dunbartonshire Health & Social Care Partnership: STRATEGIC RISK REGISTER

Owner: Chief Officer Status: DRAFT Prepared: 21<sup>st</sup> September 2015 Approval Date: - Review Date: -

The West Dunbartonshire Health & Social Care Partnership (WD HSCP) Board, the Council and the Health Board purposefully seek to promote an environment that is risk 'aware' and strives to place risk management information at the heart of key decisions – and consequently take an effective approach to managing risk in a way that both address significant challenges and enable positive outcomes. The preparation and maintenance of this Strategic Risk Register is an important element of this. It has been prepared in accordance with the WD HSCP Risk Management Policy & Strategy, with pre-mitigation risks assessed as follows:

	Likelihood				
Consequence	1	2	3	4	5
	Rare	Unlikely	Possible	Likely	Almost certain
5 Catastrophic	5	10	15	20	25
4 Major	4	8	12	16	20
3 Moderate	3	6	9	12	15
2 Minor	2	4	6	8	10
1 Negligible	1	2	3	4	5

For grading risk, the scores obtained from the risk matrix are assigned grades as follows:

1–3	Low risk
4–6	Moderate risk
8–12	High risk
15–25	Extreme risk

*Strategic risks* represent the potential for the Partnership Board to achieve (opportunity) or fail to meet (threat) its desired outcomes and objectives as set out within the Strategic Plan: typically these risks require strategic leadership in the development of activities and application of controls to manage the risk. These are distinct from *operational risks*, which represent the potential for impact (opportunity or threat) within or arising from the activities of an individual service area or team operating within the scope of the Health & Social Care Partnership's activities. The Chief Officer is responsible for managing operational risks, as they will be more 'front-line' in nature and the development of activities and controls to respond to these risks can be led by local managers and team leaders. Where a number of operational risks impact across multiple service areas or, because of interdependencies, require more strategic leadership, then these can be proposed *for escalation* to 'strategic risk' status for the Partnership Board (identified in the register with an asterix\*).

## West Dunbartonshire Health & Social Care Partnership: STRATEGIC RISK REGISTER

Risk	Likelihood	Consequence	Risk Grade	Mitigating Action	Risk Lead
1. Failure to moderate and contingency plan for flood risk for site of Dumbarton Health Centre (SEPA flood map identifies a 1:200 risk for this location).	4	5	Extreme Risk	Alternative accommodation identified to relocate staff and services in the event of a flood. Flood protection measures identified and documented to be employed as required. HSCP civil contingency and business continuity arrangements being developed in tandem with over-arching NHSGGC and WDC procedures.	Head of Community Health & Care
2. Failure to monitor and ensure the wellbeing of people in independent or WDC residential care facilities	3	4	High	Systems are in place to ensure that findings of external scrutiny (Care Inspectorate) processes are acted upon timeously. WD HSCP Quality Assurance team provide pro-active and constructive support to care facilities alongside leadership role of relevant WD HSCP operational managers. Regular reports on residential care facilities standards provided to WD HSCP Audit Committee.	Head of Community Health & Care; and Head of Strategy, Planning & Health Improvement
3. Failure to deliver efficiency savings targets and operate within allocated budgets	3	4	High	On-going process of managing and reviewing the budget by the Senior Management Team. A recovery plan will be implemented to address areas of significant in-year overspend. Anticipated savings required in 2016/17 expected to be challenging – horizon scanning being undertaken to consider implications for next Strategic Plan within context of both wider WDC and NHSGGC processes. National uncertainty regarding the treatment of VAT and potential support pay cost implications – Scottish Government addressing with HMRC.	Chief Financial Officer

Risk	Likelihood	Consequence	Risk Grade	Mitigating Action	Risk Lead
4. Failure to plan and adopt a balanced approach to manage the additional unscheduled care pressures and business continuity challenges that are faced in winter.	3	4	High	Develop and implement a WD HSCP winter plan that addresses the 12 critical areas outlined in the national Preparing for Winter Guidance.	Head of Community Health & Care
5. Failure to maintain a secure information management network so that confidentiality of information is protected from unauthorised disclosures or losses.	3	4	High	On-going data protection awareness sessions for staff, supported by continual reminders of the need to safeguard the data and information collected and stored in the course of delivering services and support.	Head of Strategy, Planning & Health Improvement
6. Failure of NHSGGC-wide MSK Physiotherapy Service to meet nationally determined waiting time target by end of March 2016.*	4	3	High	On-going review of referral criteria – national referral guidance due to be circulated to GPs by end of 2015. Continued encouragement of self management and web-based resources where appropriate.	MSK Physiotherapy Manager
7. Failure to deliver a sustainable solution to asbestos-related health & safety risks within fabric of Clydebank Health Centre.	2	5	High	On-going repair and refurbishment expenditure on premises in the immediate to short-term. WD HSCP & Health Board have confirmed that sustainable and optimal solution is to secure funding and approval for a replacement facility. Capital funding for new Clydebank Health & Care Centre has now been earmarked by Scottish Government. Development work now underway to secure funding as per prescribed process.	Head of Community Health & Care; and Head of Strategy, Planning & Health Improvement
8. Failure to meet legislative compliance in relation to child protection.	2	5	High	Child Protection procedures are in place and overseen by the local Child Protection Committee. Work plan developed addressing identified areas for improvement as informed by recent child protection inspection. All child protection cases are audited regularly.	Head of Children's Health, Care & Criminal Justice Services

Risk	Likelihood	Consequence	Risk Grade	Mitigating Action	Risk Lead
9. Failure to meet legislative compliance in relation to adult support and protection.	2	5	High	Vulnerable adult procedures are in place and overseen by the local ASP Committee and MAPPA arrangements. External inspection undertaken and recommendations acted upon. Local adult support arrangements will be subject to a bi-annual review process.	Head of Mental Health, Learning Disabilities & Addictions; and Head of Community Health & Care
10. Failure to ensure that Guardianship cases are appropriately allocated to a supervising social worker for monitoring, support and review.	3	3	High	Additional investment has been made to recruit mental health officers, alongside additional HR activities to retain recruited staff in these roles. Existing national Good Practice Guidelines on Supervising and Supporting Welfare Guardians being updated in light of new guidance on private guardianship timescales.	Head of Mental Health, Learning Disabilities & Addictions
11. Failure to mitigate risks to NHSGGC-wide Diabetic Screening Service of heavy dependence on IT systems and migration to newly procured software in 2016.*	3	3	High	Manual systems documented for use in the event of an IT failure, their application augmented by experienced staff. Support to implement new software being provided by local and national IT specialists with pre-migration testing.	Head of Community Health & Care
12. Failure to ensure that systems are in place to ensure that services are delivered by appropriately qualified and/or professionally registered staff.	2	4	High	Systems are in place to discharge this in line with NHSGGC policy & WDC requirements; and compliance with standards set by external scrutiny and registration bodies.	All Heads of Service
13. Failure to develop and timeously implement all necessary local governance requirements from the Public Bodies (Joint Working) (Scotland) Act 2014.	2	3	Moderate	Work on-going to develop and implement all governance requirements. Necessary reports have been and will be presented to the WD HSCP Board for approval as per required timescales. Work on-going within national Finance Technical Groups to finalise accounting procedures; and within NHSGGC to confirm set aside budget.	Head of Strategy, Planning & Health Improvement; and Chief Financial Officer

**WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNERSHIP****Audit Committee: 30<sup>th</sup> September 2015**

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**Subject: Care Inspectorate Reports for Older People's Residential Care Services Operated by West Dunbartonshire Council.**

**1. Purpose**

- 1.1** To provide the Audit Committee with information regarding the most recent inspection reports for two of the Council's Older People's Residential Care Home Services.

**2. Recommendations**

- 2.1** The Audit Committee is asked to note the content of this report and the work undertaken to ensure grades awarded reflect the quality levels expected.

**3. Background**

- 3.1** Care Inspectorate inspections focus on any combination of four thematic areas. These themes are: quality of care and support, environment, staffing and management and leadership.
- 3.2** The service(s) covered in this Audit Committee report are:
- Frank Downie House
  - Mount Pleasant
- 3.3** Copies of inspection reports for all services can be accessed on the Care Inspectorate website: [www.scswis.com](http://www.scswis.com).

**4. Main Issues****4.1 Frank Downie House**

Frank Downie House was inspected on 26<sup>th</sup> June 2015 and 1<sup>st</sup> July 2015. The Inspector commented that the service has made good progress with working in partnership with residents, relatives and staff and uses this feedback to shape the on-going development and improvement of the service. They also noted that there has been a greater focus from staff on meeting the needs and preferences of residents; and that the service is overseen by a motivated and committed management team which has helped effect change and improvements.

**4.2** The Inspection focussed on four thematic areas with the following grades Awarded:

- For Care and Support - Grade 4 Good
- For Environment – Grade 4 Good
- For Staffing – Grade 5 Very Good
- For Leadership and Management – Grade 5 Very Good

**4.3** There were no requirements arising from this inspection.

**4.4** The table below sets out the movement in grades for this care home over the last two inspections.

Service	Previous Grades 16 <sup>th</sup> December 2014		
Frank Downie House	Quality Statements	Grade Awarded	Overall Grade
Care & Support	1 3	5 4	4
Environment	1 2	5 4	4
Staffing	1 3	5 5	5
Management & Leadership	1 4	5 4	4

Service	Current Grades 26 <sup>th</sup> June 2015		
Frank Downie House	Quality Statements	Grade Awarded	Overall Grade
Care & Support	1 3	5 4	4
Environment	2 3	4 4	4
Staffing	1 3	5 5	5
Management & Leadership	2 4	5 5	5

#### **4.5** Mount Pleasant House

Mount Pleasant House was inspected on 4<sup>th</sup> August 2015. The Inspector commented Mount Pleasant provides a homely and personalised service where the needs, choices and preferences of individual residents are well managed and the meaningful involvement of residents and their families is welcomed. They also noted that the staff team are experienced in the care of older people and deliver a good standard of personalised care and support within a homely environment.



**4.6** The inspection focussed on four thematic areas, with the following grades awarded.

- For Care and Support – Grade 4 Good
- For Environment – Grade 4 Good
- For Staffing – Grade 4 Good
- For Management and Leadership – Grade 4 Good

**4.7** The inspection report detailed the following requirements to be addressed:

- The provider must ensure that residents are provided with access to suitable transport and opportunities to go on trips out-with the care home. This is to support positive outcomes for residents in response to their health and wellbeing needs.
- The provider must ensure that residents on a short break (respite) have a fully complete personal plan detailing their health and welfare needs and how these are met.
- The provider must ensure that staff undertake suitable and sufficient training that informs and supports their role and this training must be refreshed within the required timescale to protect residents.

An Action Plan has been submitted to the Care Inspectorate.

**4.8** The table below sets out the movement in grades for this care home over the last three inspections.

Service	Previous Grades 12 <sup>th</sup> February 2015		
Mount Pleasant	Quality Statement	Grade Awarded	Overall Grade
Care & Support	1 3	5 4	4
Environment	1 2	5 4	4
Staffing	1 3	5 5	5
Management & Leadership	1 4	5 4	4

Service	Current Grades 29 <sup>th</sup> July 2015		
Mount Pleasant	Quality Statement	Grade Awarded	Overall Grade
Care & Support	1 5	5 4	4
Environment	3 4	4 4	4
Staffing	1 3	5 4	4
Management & Leadership	2 4	4 4	4

- 4.9** The table below summarises the movement in grades for the services over their last two inspections.

Service	Previous Grades						Current Grades					
	1	2	3	4	5	6	1	2	3	4	5	6
<b>Frank Downie House</b>	<b>16<sup>th</sup> December 2014</b>						<b>1<sup>st</sup> July 2015</b>					
<ul style="list-style-type: none"> <li>Care &amp; Support</li> <li>Environment</li> <li>Staff</li> <li>Management &amp; Leadership</li> </ul>				✓						✓		
				✓	✓					✓	✓	
	1	2	3	4	5	6	1	2	3	4	5	6
<b>Mount Pleasant</b>	<b>12<sup>th</sup> February 2015</b>						<b>29<sup>th</sup> July 2015</b>					
<ul style="list-style-type: none"> <li>Care &amp; Support</li> <li>Environment</li> <li>Staff</li> <li>Management &amp; Leadership</li> </ul>				✓						✓		
				✓	✓					✓	✓	
				✓	✓					✓	✓	

## **5. People Implications**

- 5.1** There are no people implications associated with this report.

## **6. Financial Implications**

- 6.1** There are no financial implications associated with this report.

## **7. Professional Implications**

- 7.1** There are no professional implications associated with this report.

## **8. Locality Implications**

- 8.1** There are no locality implications associated with this report.

## **9. Risk Analysis**

- 9.1** For any services inspected, failure to meet requirements within the time-scales set out in their inspection report could result in a reduction in grading or enforcement action. This may have an impact on our ability to continue to deliver the service.

## **10. Impact Assessments**

- 10.1** Not required for this report.

## **11. Consultation**

- 11.1** Not required for this report

## **12. Strategic Assessment**

- 12.1** The WD HSCP Strategic Plan 2015/16 emphasises the Partnership Board's commitment to providing high quality and appropriate care for older people; and providing quality assurance across all services

**Author:** Christine McNeill - Head of Community Health and Care

**Date:** 30<sup>th</sup> September 2015

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**Person to Contact:** Pauline Stevenson - Integrated Operations Manager  
West Dunbartonshire HSCP  
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Dumbarton, G82 3PU  
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Telephone: 01389 776891

**Appendices:** None

**Background Papers:** All the inspection reports can be accessed from  
[http://www.scswis.com/index.php?option=com\\_content&task=view&id=7909&Itemid=727](http://www.scswis.com/index.php?option=com_content&task=view&id=7909&Itemid=727)

**Wards Affected:** All

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## WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNERSHIP

**Audit Committee: 30<sup>th</sup> September 2015**

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**Subject: Care Inspectorate Reports for Support Services  
Operated by the Independent Sector in West Dunbartonshire**

### **1. Purpose**

- 1.1** To provide the Audit Committee with a routine up-date on the most recent Care Inspectorate assessments for nine independent sector support services operating within the West Dunbartonshire area.

### **2. Recommendations**

- 2.1** The Audit Committee is asked to note the content of this report.

### **3. Background**

- 3.1** Care Inspectorate inspections focus on any combination of four thematic areas. These themes are: quality of care and support, environment, staffing and management & leadership.

- 3.2** The independent sector support services reported are:

- M and J Care & Support at Home – The service is provided throughout the West Dunbartonshire Council area.
- Carman Care Housing Support – The service is provided in Renton to residents from Dumbarton and Vale of Leven.
- The Richmond Fellowship Scotland – East & West Dunbartonshire - Supported Living - The service is provided throughout the West Dunbartonshire Council area.
- Share Scotland – Glasgow – Housing Support – The service is provided throughout the West Dunbartonshire Council area.
- Joans Carers Ltd. Housing Support – The service is provided throughout the West Dunbartonshire Council area.
- Key Community Supports – Dunbartonshire – Housing Support – The service is provided in Dalmuir, Faifley and Alexandria areas.
- Carers Direct Ltd. - Support Service Care at Home – The service is provided in the Dumbarton and Alexandria area.
- Assured Care (Scotland) Ltd. – Support Service Care at Home – The service is provided throughout the West Dunbartonshire Council area.
- Dalmuir Park Housing Association - Sheltered Housing/Lynx Care – Housing Support Service is provided in the Dalmuir area.

- 3.3** Some providers, who operate multiple services across Scotland, register groups of their services with the Care Inspectorate on a 'Branch' basis rather than as individual services. In this report The Richmond Fellowship Scotland – East & West Dunbartonshire Supported Living Services, Share Scotland – Glasgow and Key Community Supports - Dunbartonshire operate in this manner.

- 3.4 Copies of the inspection report can be accessed on the Care Inspectorate website: [www.scswis.com](http://www.scswis.com).

#### 4. Main Issues

##### M and J Care & Support at Home

- 4.1 M and J Care & Support at Home provide a combined Housing Support and Care at Home service. The service is offered to a wide range of people with varying needs who live in their own homes. The service was inspected on 10 November 2014 and the report published on 29 January 2015. The following grades were awarded:

- For the theme of *Care and Support* – Grade 4/Good.
- For *Staffing* – Grade 4/Good.
- For *Management and Leadership* - Grade 4/Good.

- 4.2 There were no requirements detailed in the inspection report.

##### Carman Care Housing Support Service

- 4.3 The Carman Care service provides a housing support service to older people living in the Renton area. The service also provides very sheltered support within the sheltered housing complex in Renton town centre. The service was inspected on 19 December 2014 and the report published on 23 January 2015. The following grades were awarded:

- For the theme of *Care and Support* – Grade 6/Excellent.
- For *Staffing* – Grade 6/Excellent.
- For *Management and Leadership* - Grade 6/Excellent.

- 4.4 There were no requirements detailed in the inspection report.

##### The Richmond Fellowship Scotland – East & West Dunbartonshire - Supported Living Services – Housing Support

- 4.5 The Richmond Fellowship Scotland – East & West Dunbartonshire Supported Living Services is a combined Housing Support and Care at Home service. The service is offered to individuals who have mental health issues or learning disabilities, adults with alcohol related brain damage, Autism Spectrum Disorders, Older People and people with acquired brain injury. The support is provided to people who live in their own homes, in shared accommodation or live with their families or carers. The service was inspected on 30 December 2014 and the report published on 23 February 2015. The following grades were awarded:

- For the theme of *Care and Support* – Grade 5/Very Good.
- For *Staffing* – Grade 5/Very Good.
- For *Management and Leadership* – Grade 5/Very Good.

- 4.6 There were no requirements detailed in the inspection report.

#### Share Scotland – Glasgow – Housing Support Service

**4.7** The service provides housing support to adults with complex learning and physical needs in the community, within their own accommodation either alone or within larger units with other service users. The service was inspected on 5 January 2015 and the report published on 12 February 2015. The following grades were awarded:

- For the theme of *Care and Support* – Grade 5/Very Good.
- For *Staffing* – Grade 5/Very Good.
- For *Management and Leadership* - Grade 5/Very Good.

**4.8** There were no requirements detailed in the inspection report.

#### Joans Carers Ltd – Housing Support Service

**4.9** Joans Carers Ltd. provides a service to a wide range of vulnerable adults who live in their own homes. The service was inspected on 16 January 2015 and the report published on 3 March 2015. The following grades were awarded:

- For the theme of *Care and Support* – Grade 5/Very Good.
- For *Staffing* – Grade 5/Very Good.
- For *Management and Leadership* - Grade 5/Very Good.

**4.10** There were no requirements detailed in the inspection report

#### Key Community Supports – Dunbartonshire – Housing Support Service

**4.11** Key Community Supports - Dunbartonshire provides a combined housing support and care at home service to adults who have learning disabilities. The service was inspected on 28 January 2015 with the report being published on 19 March 2015. The following grades were awarded:

- For the theme of *Care and Support* – Grade 6/Excellent.
- For *Staffing* – Grade 5/Very Good.
- For *Management and Leadership* – Grade 5/Very Good

**4.12** There were no requirements detailed in the inspection report.

#### Carers Direct Ltd – Support Service Care at Home

**4.13** The home support service is offered to elderly and less able people who live in their own homes. The service was inspected on 4 March 2015 and the report published on 15 May 2015. The following grades were awarded:

- For the theme of *Care and Support* – Grade 6/Excellent.
- For *Staffing* – Grade 5/Very Good.
- For *Management and Leadership* - Grade 6/Excellent.

**4.14** There were no requirements detailed in the inspection report.

## Assured Care (Scotland) Ltd – Support Service Care at Home

**4.15** This service supports a wide range of people with varying degrees of need who live in their own homes. The service was inspected on 19 May 2015 and the report published on 15 June 2015. The following grades were awarded:

- For the theme of *Care and Support* – Grade 5/Very Good.
- For *Staffing* – Grade 5/Very Good.
- For *Management and Leadership* - Grade 5/Very Good.

**4.16** There were no requirements detailed in the inspection report.

## Dalmuir Park Housing Association Sheltered Housing/Lynx Care – Housing Support Service

**4.17** A sheltered housing service and care at home service is provided to Older People by this organisation. The Lynx Care element of the service provides domestic and housing support to Older People living in their own homes. The service was inspected on 12 May 2015 and the report published on 9 July 2015. The following grades were awarded:

- For the theme of *Care and Support* – Grade 5/Very Good.
- For *Staffing* – Grade 5/Very Good.
- For *Management and Leadership* - Grade 5/Very Good.

**4.18** There were no requirements detailed in the inspection report.

**4.19** The undernoted table summarises grades awarded at the last two inspections:

Service	Previous Grades						Current Grades					
	1	2	3	4	5	6	1	2	3	4	5	6
<b>14 February 2014</b>							<b>10 November 2014</b>					
M and J Care & Support at Home												
• Care & Support			✓							✓		
• Environment												
• Staffing			✓							✓		
• Management & Leadership			✓							✓		
<b>22 July 2013</b>							<b>19 December 2014</b>					
Carman Care Housing Support					✓							✓
• Care & Support					✓							✓
• Environment						✓						✓
• Staffing												✓
• Management & Leadership					✓							✓
<b>18 March 2014</b>							<b>30 December 2014</b>					
Richmond Fellowship Scotland – Housing Support					✓						✓	
• Care & Support					✓						✓	
• Environment					✓						✓	
• Staffing					✓						✓	
• Management & Leadership					✓						✓	



Service	Previous Grades						Current Grades					
	1	2	3	4	5	6	1	2	3	4	5	6
<b>30 May 2013</b>							<b>5 January 2015</b>					
Share Scotland – Glasgow Housing Support • Care & Support • Environment • Staffing • Management & Leadership					✓ ✓ ✓	✓					✓ ✓ ✓	
<b>10 February 2014</b>							<b>16 January 2015</b>					
Joans Carers Ltd. Housing Support • Care & Support • Environment • Staffing • Management & Leadership					✓ ✓ ✓						✓ ✓ ✓	
<b>3 February 2014</b>							<b>28 January 2015</b>					
Key Community Supports Housing Support • Care & Support • Environment • Staffing • Management & Leadership					✓ ✓ ✓						✓ ✓	✓
<b>31 March 2014</b>							<b>4 March 2015</b>					
Carers Direct Ltd. Support Service Care at Home • Care & Support • Environment • Staffing • Management & Leadership					✓ ✓ ✓	✓					✓ ✓	✓ ✓
<b>28 May 2014</b>							<b>19 May 2015</b>					
Assured Care (Scotland) Ltd. Support Service Care at Home • Care & Support • Environment • Staffing • Management & Leadership					✓ ✓ ✓						✓ ✓ ✓	
<b>28 May 2014</b>							<b>12 May 2015</b>					
D.P.H.A./Lynx Care Housing Support • Care & Support • Environment • Staffing • Management & Leadership				✓ ✓	✓						✓ ✓ ✓	

## 5. People Implications

5.1 There are no people implications associated with this report.

## 6. Financial Implications

6.1 There are no financial implications associated with this report.

## **7. Professional Implications**

**7.1** There are no professional implications associated with this report.

## **8. Locality Implications**

**8.1** There are no relevant locality implications associated with this report.

## **9. Risk Analysis**

**9.1** Grades awarded to a service after a Care Inspectorate inspection are an important performance indicator for registered services. For any service assessed by the Care Inspectorate, failure to meet requirements within the time-scales set out could result in a reduction in grading or enforcement action. Consistently poor gradings awarded to any independent sector service would be of concern to the Audit Committee, particularly in relation to the continued referral of vulnerable people by Health & Social Care Partnership services.

## **10. Impact Assessments**

**10.1** None required.

## **11. Consultation**

**11.1** None required.

## **12. Strategic Assessment**

**12.1** The West Dunbartonshire HSCP Strategic Plan 2015 -16 emphasises the importance of quality assurance amongst independent sector providers of care; and the Partnership Board's commitment to work with independent sector provides within an agreed assurance framework.

**Author:** Soumen Sengupta – Head of Strategy, Planning & Health Improvement  
West Dunbartonshire Health & Social Care Partnership.

**Date:** 30<sup>th</sup> September 2015

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**Appendices:** None

**Background Papers:** All the inspection reports can be accessed from  
[http://www.scswis.com/index.php?option=com\\_content&task=view&id=7909&Itemid=727](http://www.scswis.com/index.php?option=com_content&task=view&id=7909&Itemid=727)

**Wards Affected:** All

## WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNERSHIP

**Audit Committee: 30<sup>th</sup> September 2015**

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**Subject: Forthcoming Audit Scotland Reports**

### **1. Purpose**

- 1.1** To bring to the Audit Committee's attention two national audits that have been initiated by Audit Scotland that are of direct relevance to the work of the Health & Social Care Partnership.

### **2. Recommendation**

- 2.1** The Partnership Board is recommended to:

- 1) Note the Audit Scotland work being undertaken with respect to health and social care integration; and changing models of health and social care.
- 2) Direct the Chief Officer to bring a report to the Audit Committee on each of the above once the final reports are published.

### **3. Background**

- 3.1** Audit Scotland undertakes a number of audits for the Auditor General for Scotland and the Accounts Commission as part of a wider public audit model. This includes reports on significant issues of public interest; and overview reports on specific sectors.
- 3.2** Audit Scotland is currently undertaking two audits of particular relevance to the work of the Health & Social Care Partnership and the remit of the Audit Committee: one on *health and social care integration*; and the other on *changing models of health and social care*. Position Statements for each of these are attached.

### **4. Main Issues**

- 4.1** The national audit on health and social care integration is looking at the new arrangements that councils and NHS boards are putting in place to integrate adult health and care services. Audit Scotland will lead on an assessment of the progress made in implementing the reforms, working closely with the Care Inspectorate and Healthcare Improvement Scotland. The aim of the audit is to establish if integration authorities are making good progress in integrating health and social care services, in line with the provisions and requirements set out by the Scottish Government. The report will set out what progress councils and NHS boards have made to integrate health and social care services; if they are establishing clear and appropriate governance and

financial arrangements; and what challenges and risks are emerging to the development of effective integrated health and social care services.

- 4.2** The national audit on changing models of health and social care aims to provide a better understanding of the pressures NHS boards and councils are facing. It intends to show how resources could be used to provide different models of care and support in the future to better match needs using modelling, taking into account service users' views and highlighting good practice.

**5. People Implications**

- 5.1** None associated with this report.

**6. Financial Implications**

- 6.1** None associated with this report.

**7. Professional Implications**

- 7.1** None associated with this report.

**8. Locality Implications**

- 8.1** None associated with this report.

**9. Risk Analysis**

- 9.1** None associated with this report.

**10. Impact Assessments**

- 10.1** None required.

**11. Consultation**

- 11.1** None required.

**12. Strategic Assessment**

- 12.1** The reports on the above national audits will provide important evidence and context for the development of the next Strategic Plan.

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West Dunbartonshire Health & Social Care Partnership.

**Date:** 30<sup>th</sup> September 2015

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**Appendices:** Audit Scotland Position Statement: Health and Social Care Integration  
  
Audit Scotland Position Statement: Changing Models of Health and Social Care

**Background Papers:** None

**Wards Affected:** All

# Health and social care integration

## Position statement



Prepared by Audit Scotland

### Background

In February 2014, the Public Bodies (Joint Working) (Scotland) Act 2014 was passed by the Scottish Parliament. It set out the framework for councils and NHS boards to integrate adult health and care services.<sup>1</sup> Audit Scotland will lead on an initial assessment of the progress that is being made in implementing the reforms. In doing so, Audit Scotland will work closely with the Care Inspectorate (CI) and Healthcare Improvement Scotland (HIS) to scrutinise this significant programme of reform.

Councils and NHS boards were required to submit their proposed schemes for integration for approval

by Scottish Ministers by 1 April 2015, with the new arrangements to be in place by 1 April 2016. The Act requires councils and NHS boards to establish an integration authority (IA) to plan, resource and oversee the delivery of adult health and social care services in their area. Councils and NHS boards had to set out which of two models they would implement:

- **Lead agency** – councils and NHS boards delegate functions to each other.
- **Body corporate** – councils and NHS boards delegate functions and resources to an Integration Joint Board (IJB).

<sup>1</sup> This includes adult social care services, adult community health services and some adult acute health services. NHS boards and councils may also decide to integrate other services, such as children's services or criminal justice services.

## Why is this audit important?

Health and social care integration is a major reform which aims to provide better outcomes for people who need health and social care support by improving joint working and sharing resources. Our audit will establish what progress councils and NHS boards are making towards integrating health and social care services. The implications for health and social care resources are significant – at least £7 billion will be delegated to IAs.

The legislation requires each IA to develop a strategic plan, identify resources, and put arrangements in place to govern and oversee the delivery of services in its area. Our audit will provide an update on progress in meeting these requirements.

## What the audit will look at

The overall aim of the audit is to establish if IAs are making good progress in integrating health and social care services, in line with the provisions and requirements set out in the Act and subsequent regulations. Specific audit questions are:

- What progress are councils and NHS boards making in integrating health and social care services?
- Are IAs establishing clear and appropriate governance and financial arrangements?
- What are the challenges and risks to the development of effective integrated health and social care services and what good practice is there in how IAs are addressing these?

## How we will carry out the audit

This audit will build on evidence from the local financial audit and from work by the CI and HIS. In addition we will:

- review documents including integration schemes, strategic plans (where available) internal audit reports and local reports on integration arrangements

- analyse council and NHS board information from financial audits
- interview a range of local stakeholders, including IA board members and interim bodies
- liaise with stakeholders in the Scottish Government, the Joint Improvement Team, the Convention of Scottish Local Authorities and Information Services Division.

## What do we want to happen as a result of our audit?


The position statement will set out the resources and services involved in the new arrangements and detail progress and how IAs will operate. We will raise issues for councils and NHS boards to consider as local arrangements mature.

Two further audits on health and social care integration involving Audit Scotland, the Care Inspectorate and Healthcare Improvement Scotland are planned:


- We will produce a national report after the new arrangements have been fully in place for at least a year.
- Later we will conduct an audit looking at the long-term effects of the new arrangements in terms of achieving a shift towards prevention, progress with integration and improvements to outcomes for local people using health and social care services.

## Timetable and contacts

We plan to publish a report in December 2015. Audit Scotland is carrying out the work on behalf of the Auditor General for Scotland and the Accounts Commission.

For further information please contact Andra Laird at [alaird@audit-scotland.gov.uk](mailto:alaird@audit-scotland.gov.uk) .



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# Changing models of health and social care



Prepared by Audit Scotland

## Health and social care in Scotland

NHS boards and councils face increasingly difficult financial challenges. Over the last few years, Scottish Government funding for councils has decreased and health spending per head of population has decreased slightly in real terms (taking inflation into account). Further reductions in council funding are likely in the next few years and the overall health budget is likely to decrease slightly.<sup>1,2</sup> Over the next few years, further reductions in council funding are likely and the overall health budget is likely to face smaller percentage increases compared to previous years. This includes, the growing population of elderly and very elderly people; the number of people with long-term health conditions; and people's rising expectations of care.

To tackle these challenges, the Scottish Government set out an ambitious vision in September 2011 for health and social care to enable everyone to live longer, healthier lives at home or in a homely setting by 2020. Major reform is now under way to integrate health and social care services in Scotland, requiring NHS boards and councils to redirect resources and move towards more community-based and preventative care. Under these arrangements NHS boards and councils will be required, as a minimum, to combine their budgets for adult social care, adult primary healthcare and aspects of adult secondary healthcare. Recent legislation on self-directed support places a duty on councils, from April 2014, to offer people newly assessed as needing social care a wider range of options for choosing and controlling their support.

1. [An overview of local government in Scotland 2015 \[PDF\]](#) Audit Scotland, March 2015

2. [NHS in Scotland 2013/14 \[PDF\]](#) Audit Scotland, October 2014



## Auditing health and social care pressures and potential new models

There is limited evidence of evaluating whether health and care services can adapt to changes in demand and if there is sufficient capacity to implement the Scottish Government's 2020 Vision for health and social care. We aim to examine these issues, using a series of scenarios and case studies, to examine the implications for social care and NHS resources over the longer term.

This work will:

- provide a better understanding of the pressures NHS boards and councils are facing
- show how resources could be used to provide different models of care and support in the future to better match needs using modelling, taking into account service users' views
- highlight good practice
- attempt to provide an estimate of the scale of change required and the resource implications for NHS boards and councils of implementing the 2020 Vision.

This work will complement other performance audits Audit Scotland is carrying out during 2015/16 for the Auditor General for Scotland and the Accounts Commission, including a position statement on the arrangements for health and social care integration, the annual financial and performance overview of the NHS in Scotland, and a review of social work.

### Why is this audit important?

The NHS and councils in Scotland are facing significant pressures due to tightening budgets and increasing demand at the same time as implementing significant reforms to services for improving outcomes for people needing care and support. We have found through previous work that NHS boards and councils are finding it increasingly difficult to cope with these pressures. Progress towards the 2020 Vision for health and social care has been slow and more significant change is needed to provide care and support differently to allow people to live longer healthier lives in a community setting. Our work will help to provide a

better understanding of the financial implications of implementing the 2020 Vision and the current reforms of the health and social care system.

### How will we carry out this audit?


This audit will build on key pressures identified in the demand and capacity work undertaken as part of the NHS in Scotland 2013/14 audit. We will analyse national and local information, including performance, activity and financial data for hospitals, councils and community-based services to identify pressures in the system. We will carry out modelling work to identify the scale and types of changes required, and the financial implications. We will identify good practice and work closely with Information Services Division (ISD) Scotland, NHS boards and councils, and others with expertise in this area, to develop the modelling. We will supplement this desk-based research with interviews with staff from NHS boards, councils, COSLA, the Scottish Government and other relevant organisations, such as scrutiny bodies. We will draw on NHS boards and councils' consultation with patients and service users, and other research on the support and care that people need to live in a community setting.

### What do we want to happen as a result of our audit?

Our audit will build a picture of some of the key pressures in NHS board and council areas and highlight the main challenges and barriers that they face in providing services differently to ensure people receive the support and care they need in the community. We will share good practice and carry out modelling work to identify what changes could be made to services, resources and funding to better meet demand and provide better care and support in the community.

### Audit timetable and contact

We plan to publish a report and other outputs by January 2016. Audit Scotland is carrying out the work on behalf of the Auditor General for Scotland and the Accounts Commission.

If you have any questions, please get in touch with Jillian Matthew, Audit Manager, on 0131 625 1844 or at [jmatthew@audit-scotland.gov.uk](mailto:jmatthew@audit-scotland.gov.uk) 



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