

---

**To:** Renfrewshire Health and Social Care Integration Joint Board Audit, Risk and Scrutiny Committee

**On:** 19 June 2020

---

**Report by:** Chief Internal Auditor

---

**Heading:** Summary of Internal Audit Reports

---

## **1. Summary**

- 1.1 A risk based Internal Audit Plan for 2019/20 was approved by the IJB Audit Committee on 25 January 2019. In line with the Public Sector Internal Audit Standards, Internal Audit must communicate the results of each engagement to the Board. All planned reviews have been completed.
- 1.2 Appendix 1 provides details of audit engagements completed with the overall assurance rating and the number of recommendations in each risk category. The committee summary is also attached. For each audit assignment where recommendations have been made, the relevant managers have put action plans in place to address the issues raised.

---

## **2. Recommendations**

- 2.1 That the Integration Joint Board Audit, Risk and Scrutiny Committee are asked to note the content of the report.

---

## **Implications of the Report**

- 1. **Financial** - none.
- 2. **HR & Organisational Development** - none.
- 3. **Community Planning** - none.
- 4. **Legal** - none.
- 5. **Property/Assets** - none.

6. **Information Technology** - none.
  7. **Equality & Human Rights** - none
  8. **Health & Safety** - none.
  9. **Procurement** - none.
  10. **Risk** - The subject matter of this report is the progress of the risk-based Audit Plan for the IJB.
  11. **Privacy Impact** - none.
- 

**List of Background Papers** – none.

---

**Author:** Andrea McMahon, Chief Internal Auditor

## Appendix 1

### Integration Joint Board Audit, Risk and Scrutiny Committee

#### Internal Audit Service

#### Summary of Final Audit Reports Issued

Engagement	Assurance Rating (note 1)	Recommendation Ratings			
		Critical	Important	Good Practice	Service Improvement
Governance Arrangements	Substantial	0	0	0	1

Assurance Level	
Substantial Assurance	<ul style="list-style-type: none"> <li>There is a sound system of internal control designed to achieve the objectives of the area being reviewed.</li> <li>The control processes tested are being consistently applied.</li> </ul>
Reasonable Assurance	<ul style="list-style-type: none"> <li>The internal control processes are generally satisfactory with some areas of weakness being identified that could put some objectives of the area being reviewed at risk.</li> <li>There is evidence that the level of non-compliance with some of the control processes may put some of the objectives of the area being reviewed at risk.</li> </ul>
Limited Assurance	<ul style="list-style-type: none"> <li>Weaknesses in the system of internal controls are such as to put the objectives of the area being reviewed at risk.</li> <li>The level of non-compliance puts the objectives of the area being reviewed at risk.</li> </ul>
No Assurance	<ul style="list-style-type: none"> <li>Control processes are generally weak with significant risk to the achievement of the objectives of the area being reviewed.</li> <li>Significant non-compliance with control processes leaves the processes/systems open to error or abuse.</li> </ul>

Recommendation Rating	
Service Improvement	Implementation will improve the efficiency / housekeeping of the area under review.
Good Practice	Implementation will contribute to the general effectiveness of control.
Important	Implementation will raise the level of assurance provided by the control system to acceptable levels.
Critical	Addresses a significant risk, impacting on the objectives of the area under review.



# Internal Audit Report

## Integration Joint Board

### Governance Arrangements (A0114/2020/001)

Date: June 2020



#### EXECUTIVE SUMMARY

##### **Audit Objectives**

The objectives of the review were to ensure that:

- The terms of reference for the Board and the Audit Committee are appropriate for the maturity of the organisation, including agenda and frequency of meetings.
- There is an effective structure to support governance and oversight of specialist areas and allows for effective independent scrutiny.

##### **Audit Scope**

- Review the Renfrewshire IJB governance arrangements against those of other IJBs and suggest areas for consideration to improve and reflect the maturity of the organisation.
- Interview the appropriate staff, evaluate the governance arrangements and identify any possible improvements.

##### **Key Audit Assurances**

The integration scheme for the Board is the legal partnership agreement covering the matters prescribed by the Public Bodies (Joint Working) (Scotland) Act 2014, as such there are no separate terms of reference for the Board. The scheme was reviewed in February 2020 in line with the requirements of the Act and reflects the maturity of the organisation.

Officers extensively benchmarked the terms of reference for the Audit Committee with other IJBs and in conjunction with the Chief Internal Auditor reviewed and proposed revisions to those terms of reference which were approved by the IJB in January 2020 and are considered to be appropriate for the organisation.

There is an effective structure to support governance and oversight of specialist areas and allows for effective independent scrutiny.

##### **Key Risks**

There were no key risks identified during the audit.

##### **Overall Audit Opinion**

The governance arrangements in place within the IJB are operating satisfactorily. Some groups were not meeting with the frequency set out in their terms of reference in the financial year 18/19. This has improved in the financial year 19/20.

# Internal Audit Report

## Integration Joint Board

### Governance Arrangements (A0114/2020/001)

Date: June 2020



#### Detailed Report

Rec No.	Detailed Finding	Recommendation	
Recommendation 1 (Service Improvement)	<b>Governance of specialist areas</b> The auditor reviewed a sample of meeting minutes for groups in the RHSCP Quality, Care and Professional Governance Structure and noted that the Medicines Management group met less than quarterly, as stated in the terms of reference, in 2019/20 with 3 out of 4 meetings taking place.	RHSCP management should ensure that supporting governance groups meet as frequently as set out in their terms of reference.	
	Management Action to be taken	Action Owner	Completion Date
	The June 2019 meeting was scheduled but needed to be cancelled as insufficient representatives were available to allow the meeting to be quorate. Management will continue to ensure that meetings are scheduled as set out in the terms of reference.	Head of Administration	Complete

In arriving at our opinion we comply with the Public Sector Internal Audit Standards. We planned and performed our audit so as to obtain all the information and explanations which we considered necessary in order to provide us with sufficient evidence to give reasonable assurance.

For the area under review we consider the overall adequacy and effectiveness of risk management, control, and governance processes. Collectively we refer to these activities as "the system of internal control".

The audit was based on sampling and therefore errors and/ or omissions may exist which have not been identified.