



Item No. 7

Meeting Date Wednesday 13th December 2023

**Glasgow City
Integration Joint Board
Finance, Audit and Scrutiny Committee**

Report By: Chief Internal Auditor for the Integration Joint Board

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**Internal Audit – Update Report
(1 April 2023 – 30 November 2023)**

Purpose of Report:	To present to the Glasgow City IJB Finance, Audit and Scrutiny Committee details of the Internal Audit work undertaken at Glasgow City Council and NHS Greater Glasgow and Clyde that may have an impact upon the Glasgow City Integration Joint Board.
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Background/Engagement:	The Integration Joint Board is required to comply with Article 7 of the Local Authority Accounts (Scotland) Regulations 2014. The regulations require a local authority to operate a professional and objective internal auditing service in accordance with recognised standards and practices in relation to internal auditing.
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Governance Route:	<p>The matters contained within this paper have been previously considered by the following group(s) as part of its development.</p> <p>HSCP Senior Management Team <input type="checkbox"/></p> <p>Council Corporate Management Team <input type="checkbox"/></p> <p>Health Board Corporate Management Team <input type="checkbox"/></p> <p>Council Committee <input type="checkbox"/></p> <p>Update requested by IJB <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p> <p>Not Applicable <input checked="" type="checkbox"/></p>
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Recommendations:	<p>The IJB Finance, Audit and Scrutiny Committee is asked to:</p> <p>a) Note the content of the report.</p>
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Relevance to Integration Joint Board Strategic Plan:

To provide assurance on various aspects of the Strategic Plan.

Implications for Health and Social Care Partnership:**Reference to National Health & Wellbeing Outcome:**

n/a

Personnel:

There are no direct personnel implications as a result of the content of this paper.

Carers:

There are no direct implications for carers as a result of the content of this paper.

Provider Organisations:

There are no direct implications for provider organisations as a result of the content of this paper.

Equalities:

n/a

Fairer Scotland Compliance:

n/a

Financial:

There are no direct financial implications as a result of the content of this paper.

Legal:

The IJB will be compliant with:
– The Integrated Resource Advisory Group guidance in relation to audit provision.
– The Local Authority Accounts (Scotland) Regulations 2014.

Economic Impact:

There is no wider economic impact within the city of proceeding with the course proposed.

Sustainability:

There are no direct sustainability implications as a result of the content of this paper.

Sustainable Procurement and Article 19:

There are no direct sustainable procurement and Article 19 implications as a result of the content of this paper.

Risk Implications:

Internal Audit facilitates the reduction of risks identified during the audit process.

Implications for Glasgow City Council:

The Internal Auditors of Glasgow City Council will continue to follow up on the recommendations arising from the reviews relating to Social Work Services.

Implications for NHS Greater Glasgow & Clyde:

The Internal Auditors of NHS Greater Glasgow & Clyde will continue to follow up on the recommendations arising from the reviews relating to NHS Greater Glasgow & Clyde.

1. Purpose

- 1.1. To present to the IJB Finance, Audit and Scrutiny Committee details of the Internal Audit work undertaken at Glasgow City Council and NHS Greater Glasgow & Clyde that may have an impact upon the Glasgow City Integration Joint Board.

2. Background

- 2.1. Both Glasgow City Council (GCC) and NHS Greater Glasgow & Clyde (NHSGG&C) have Internal Audit functions that conduct audits across each organisation and report the findings of these to the respective audit committees.
- 2.2. Members of the Integration Joint Board have an interest in the outcomes of audits at both Glasgow City Council and NHS Greater Glasgow & Clyde that have an impact upon the Integration Joint Board's ability to deliver the Strategic Plan.
- 2.3. This report provides a summary to the Glasgow City Integration Joint Board's Finance, Audit and Scrutiny Committee (FASC) of the relevant Internal Audit activity at these organisations since the last update to the FASC in April 2023.

3. Glasgow City Council

- 3.1. In the period, the following Internal Audit reports which are relevant to the Integration Joint Board have been issued to Glasgow City Council. The table below shows the number of recommendations relevant, either directly or indirectly, to Social Work Services (SWS).

Audit Title	Opinion	Number and Priority of Recommendations			
		High	Medium	Low	SI*
Corporate Reviews:					
Data Breach Response Arrangements (note (i))	Reasonable	0	2	0	0
Budgetary Control and Monitoring	Satisfactory	0	0	0	0
Use of Consultants (note (ii))	Limited	2	0	0	0
Establishment Visits (note (iii))	Reasonable	0	1	0	0
Scottish Child Abuse Inquiry Response Arrangements (note (iv))	Reasonable	0	2	0	0
IT Change Management	Reasonable	0	0	2	0
Payroll (Non-Core Payments) (v)	Reasonable	0	2	0	0
Financial Services' Reviews:					
Infection Control in Care Settings (note (vi))	Reasonable	0	3	1	0

Audit Title	Opinion	Number and Priority of Recommendations			
		High	Medium	Low	SI*
Social Work Services' Reviews:					
Contract Management (note (vii))	Reasonable	0	5	0	0
Tenant Grant Fund (note (viii))	Reasonable	0	1	1	0
TOTAL		2	16	4	0

*Service Improvement

3.2. In each audit one of four opinions is expressed:

- The control environment is satisfactory i.e., audit testing found no concerns with the control environment.
- A reasonable level of assurance can be placed upon the control environment i.e., audit testing found no major weaknesses in the control environment, but some improvements could be made.
- A limited level of assurance can be placed upon the control environment i.e., improvements are necessary to ensure the control environment is fit for purpose.
- The control environment is unsatisfactory i.e., significant improvements are required before any reliance can be placed upon the control environment.

3.3. Notes:

(i) Data Breach Response Arrangements

The two medium priority recommendations relate to (1) updating the Data Security Incident and Breach Management Procedures to include a requirement to retain evidence of post-incident activities, and (2) training additional staff with the skills to assess potential data breaches, thus reducing dependency on a single officer.

The responsibility for implementing these recommendations lies with GCC's Head of Information and Data Protection Officer, however the risk of a data breach could have a significant impact on SWS.

(ii) Use of Consultants

The two high priority recommendations relate to (1) adopting the Scottish Government's Use of Consultants Good Practice Guidance across the Council when engaging with consultants, and (2) ensuring accurate use of ledger codes on the finance system to record consultancy expenditure which will allow for effective monitoring and scrutiny.

SWS are partly responsible for the implementation of the second recommendation.

(iii) Establishment Visits

The audit covered five service areas within GCC. The medium priority recommendation for SWS relates to ensuring that robust physical security arrangements are in place across service establishments.

- (iv) Scottish Child Abuse Inquiry Response Arrangements
The two medium priority recommendations relate to (1) finalising the procedures for handling abuse claims and ensuring that these have been distributed to staff, and (2) producing regular reports to identify any outstanding new claims that require an acknowledgement.

GCC's Financial Services is primarily responsible for implementing these recommendations, but support from all services is required to manage claims appropriately.

- (v) Payroll (Non-Core Payments)
SWS' employees were included within the sample of payments reviewed, however GCC's Customer and Business Services (CBS) is responsible for implementation of the recommendations.
- (vi) Infection Control in Care Settings
Infection Control arrangements within Care Settings are managed by GCC's Catering and Facilities Management (C&FM), within Financial Services.

The three medium priority recommendations relate to (1) reviewing and updating the cleaning operating procedures to ensure they are reflective of the current requirements and practice, (2) ensuring robust training records are maintained, and (3) reminding staff to ensure that complete and up to date cleaning records are maintained.

- (vii) SWS: Contract Management
The five medium priority recommendations relate to (1) reviewing documents supplied from providers and ensuring full compliance with current monitoring procedures, (2) reminding staff to utilise the Contract Management Console, (3) identifying training gaps and ensuring that these are addressed, (4) reviewing the guidance on a regular basis and ensuring this is kept up-to-date and includes the required document controls, and (5) reviewing and updating the Care Manager Concern form process and communicating changes to staff.
- (viii) SWS: Tenant Grant Fund
The medium priority recommendation relates to ensuring that the appropriate checks of applications and evidence are put in place for any similar grants in future and that the circumstances of the overpayment identified during the audit are reviewed, with action taken if required.

3.4. Update on previously reported high priority recommendations:

The table below details previously reported high and medium priority recommendations from the reviews undertaken within Glasgow City Council of relevance to the IJB. All high and medium priority recommendations have been implemented.

Audit Title	Opinion	Number of Recommendations		
		High/ Medium Priority	Complete	Outstanding
Corporate Reviews				
Capital Project Management and Governance Arrangements	Limited	1	1	0
Education Services, Financial Services and Social Work Services – Protection of Vulnerable Group Arrangements	Limited	3	3	0
TOTAL		4	4	0

4. NHS Greater Glasgow & Clyde

4.1. In the period, the following Internal Audit reports, which are relevant to the Integration Joint Board, have been issued to NHS Greater Glasgow & Clyde:

Audit Title	Report Classification	Number of Issues per Grading			
		4	3	2	1
Public Protection Arrangements (note ix)	Substantial Improvement	0	4	3	1
Workforce Planning (note x)	n/a	-	-	-	-
Property Transaction Monitoring	Effective	0	0	0	0
Moving Forward Together Implementation (note xi)	Bespoke	0	3	3	0
Use of Agency Staff (note xii)	Substantial Improvement	0	2	3	0
Cyber Resilience (note xii)	Minor Improvement	0	1	6	0
TOTAL		0	10	15	1

4.2. The ratings below describe the overall opinion on the control frameworks reviewed during each audit:

- Immediate, major improvement required: Controls evaluated are not adequate, appropriate, or effective to provide reasonable assurance that risks are being managed and objectives should be met.
- Substantial improvement required: Numerous specific control weaknesses were noted. Controls evaluated are unlikely to provide reasonable assurance that risks are being managed and objectives should be met.
- Minor improvement required: A few specific control weaknesses were noted; generally however, controls evaluated are adequate, appropriate and effective to provide reasonable assurance that risks are being managed and objectives should be met.
- Effective: Controls evaluated are adequate, appropriate, and effective to provide reasonable assurance that risks are being managed and objectives should be met.

Ranking Definition:

4. Very high-risk exposure - major concerns requiring immediate senior management attention.
3. High risk exposure - absence / failure of key controls.
2. Moderate risk exposure - controls not working effectively and efficiently.
1. Limited risk exposure - controls are working effectively but could be strengthened.

4.3. None of the audits completed since the last update have been rated as 'immediate, major' improvement required.

4.4. Notes:

(ix) Public Protection Arrangements

The four grade 3 recommendations relate to (1) ensuring that training for new staff is completed within the mandatory timeframes, (2) introducing a timeline for when staff in clinical roles complete the Level 3 Public Protection training, (3) ensuring that automated training reminder emails are flagged as 'important' so as to increase the likelihood that staff take note, and (4) improvements in record keeping arrangements in relation to the Adult Protection Referral (AP1) and the Notification of Concern (NOC) forms, including adding the requirement to record the date and time of completion on the NOC form and when submitted on the individual's record.

(x) Workforce Planning

The Workforce Planning audit was a consultancy style review and, as such, there is no report classification or recommendations.

(xi) Moving Forward Together Implementation

A bespoke classification of "High risk associated with the nature of the programme and challenging external factors" was considered appropriate for this report due to the significant challenges involved in delivering a programme on the scale of Moving Forward Together (MFT).

The three grade 3 recommendations relate to (1) developing detailed project plans with clearly articulated timescales for each component of the MFT Programme, (2) agreeing on a series of performance assessment measures, and (3) assessing the capacity of each Executive Lead to deliver on commitments.

(xii) Use of Agency Staff

The two grade 3 recommendations relate to (1) investigating the correlation between agency shifts and planned leave/existing vacancies to determine the financial impact of high demand for agency staff, and (2) investigating the data quality issues highlighted, taking corrective action where required, and briefing staff on the correct timesheet recording procedures.

(xiii) Cyber Resilience

The grade 3 recommendation relates to development of a supplier incident playbook that will standardise existing plans and procedures and act as a checklist in supporting the organisation's response to a supplier cyber security incident.

4.5. Update on previously reported high priority recommendations

The table below details previously reported grade four / three recommendations from the reviews undertaken within NHSGGC of relevance to the IJB. These recommendations have now been implemented.

Audit Title	Report Classification	Number of Issues per Grading				
		Grade 4	Grade 3	Complete	Due	Not yet due
Financial Systems Health Check (Payroll)	Minor Improvement	0	1	1	0	0
Time of Day Discharge	Substantial Improvement	0	1	1	0	0
TOTAL		0	2	2	0	0

5. Recommendations

5.1. The IJB Finance, Audit and Scrutiny is asked to:

- a) Note the content of the report.