



RISK, AUDIT AND PERFORMANCE COMMITTEE

Date of Meeting	23/06/2022
Report Title	Internal Audit Report AC2109: IJB Performance Management Reporting
Report Number	HSCP22.046
Lead Officer	Jamie Dale, Chief Internal Auditor
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Consultation Checklist Completed	Yes
Directions Required	No
Appendices	None

1. Purpose of the Report

- 1.1. The purpose of this report is to present the outcome from the planned audit of IJB Performance Management Reporting that was included in the 2020/21 Internal Audit Plan for Aberdeen City Council.

2. Recommendations

- 2.1. It is recommended that the Risk, Audit and Performance Committee review, discuss and comment on the issues raised within this report.

3. Summary of Key Information

Background

- 3.1. The Aberdeen City Health and Social Care Partnership (the Partnership) went live on 1 April 2016 under the governance of the Aberdeen City Integration Joint Board (IJB). In accordance with the Public Bodies (Joint Working) (Scotland) Act 2014 the IJB prepared and published its initial



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three-year Strategic Plan which identified the objectives and aims which direct its operational plans.

- 3.2. The 2019-2022 Strategic Plan that followed, sets out the IJB's ambitions for transforming health and social care in Aberdeen, particularly in terms of services in the community, self-management and prevention. The IJB's vision for Aberdeen City Health & Social Care Partnership is of being "...a caring partnership working in and with our communities to enable people to achieve fulfilling, healthier lives".
- 3.3. At the time audit fieldwork was concluded, the Partnership's next Strategic Plan was in draft for consultation and due to be presented to the IJB in March 2022. The most recent draft of the 2022 – 2025 Plan expressed the same IJB vision as its predecessor, but the operational plans involved in delivering this vision and the Performance Framework intended to measure progress have moved on. Throughout the duration of the outgoing Strategic Plan, the COVID-19 pandemic necessitated a shift in Partnership strategy towards managing demands that were not envisaged when the commitments and priorities in the Strategic Plan were approved by the IJB in March 2019.
- 3.4. Successful delivery of the Strategic Plan ensures that the Partnership fulfils its statutory and regulatory duties. Regular assurance is therefore required in respect of service performance and delivery of the Strategic Plan.

Objective

- 3.5. The objective of this audit was to provide assurance that robust data is reported accurately and timeously to the IJB in order to provide an appropriate level of assurance regarding service performance and delivery of the IJB Strategic Plan.

Assurance

- 3.6. Whilst data is generally accurate, available and being consolidated into reports and dashboards, which have been used to inform the IJB at regular intervals regarding the Partnership's response to the COVID-19 pandemic, this primary operational focus has meant there has been less oversight over other aspects of Strategic Plan delivery than plan.



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Findings and Recommendations

- 3.7. The availability of performance information has been reviewed by the Partnership, as data for key indicators was not always available or up to date. A more high-level approach to performance management is planned for alignment with the 2022-2025 Strategic Plan.
- 3.8. The focus of data and reporting has shifted over the last two years towards managing COVID-19 related risks and pressures. This has meant that except for statutory annual reporting, there has been less detailed information provided to the IJB on performance against the Partnership's other strategic objectives. A recommendation graded Significant within audited area was made to ensure the IJB has sufficiently detailed and regular information to inform its oversight of Strategic Plan delivery. Data is collected by various systems for the purpose of supporting operational service delivery. Those responsible for the veracity of data span multiple organisations and where data comes from, the checks and other processes it goes through, and how it is used thereafter, is not currently mapped out. Recommendations graded Significant within audited area have been made to map the flow of data, clarify roles and responsibilities, and ensure feedback loops are in place, to clarify and promote ownership of the various data streams and reports.

Management Response

- 3.9. The Partnership plans to return to regular reporting from 2022/23 onwards. Our Performance Framework is being developed during 2022/23 to sit alongside the Strategic Plan, and as part of that development each of the audit findings and recommendations will be taken into account.

4. Implications for IJB

- 4.1. **Equalities** – An equality impact assessment is not required because the reason for this report is for Committee to discuss, review and comment on the contents of an Internal Audit report and there will be no differential impact, as a result of this report, on people with protected characteristics.
- 4.2. **Fairer Scotland Duty** – there are no direct implications arising from this report.
- 4.3. **Financial** – there are no direct implications arising from this report.
- 4.4. **Workforce** - there are no direct implications arising from this report.
- 4.5. **Legal** – there are no direct implications arising from this report.



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4.6. Other - NA

5. Links to ACHSCP Strategic Plan

5.1. Ensuring effective performance reporting and use of Key Performance Indicators will help the IJB deliver on all strategic priorities as identified in its strategic plan.

6. Management of Risk

6.1. **Identified risks(s):** The Internal Audit process considers risks involved in the areas subject to review. Any risk implications identified through the Internal Audit process are as detailed in the resultant report.

6.2. **Link to risks on strategic risk register:** There is a risk of financial failure, that demand outstrips budget and IJB cannot deliver on priorities, statutory work, and projects an overspend.

6.3. **How might the content of this report impact or mitigate these risks:** Where risks have been identified during the Internal Audit process, recommendations have been made to management to mitigate these risks.