



RISK, AUDIT AND PERFORMANCE COMMITTEE

Date of Meeting	17 November 2022
Report Title	Directions Update – Process for future reporting
Report Number	HSCP 22.089
Lead Officer	Paul Mitchell, Chief Finance Officer
Report Author Details	Name: Amy Richert Senior Project Manager Arichert@aberdeencity.gov.uk
Consultation Checklist Completed	Yes
Appendices	Appendix A – Directions spreadsheet

1. Purpose of the Report

- 1.1. This report presents the six-monthly update on the status of Directions made by the Integration Joint Board (IJB) to Aberdeen City Council (ACC) and NHS Grampian. This is the first update in the new format which was agreed by members at the RAPC on 23rd June 2022.

2. Recommendations

- 2.1. It is recommended that the Risk, Audit and Performance Committee:
- a) Notes the updates in Appendix A.

3. Summary of Key Information

- 3.1. As per the Roles and Responsibilities Protocol of the Integration Joint Board (IJB) and its Committees, the IJB are obliged, “to issue Directions to the Partners under sections 26 and 27 of the Public Bodies (Joint Working) (Scotland) Act 2014, in line with the Integration Scheme and legislative framework sitting around the CEOs of the Partners.”

As agreed by the RAPC on 23 September 2020 a report will be presented every 6 months to provide assurance to the Committee on the ongoing directions.



RISK, AUDIT AND PERFORMANCE COMMITTEE

- 3.2.** The Directions Tracker indicates when they were submitted to the constituent organisation(s), the financial commitment, and the status of each direction. Most of the Directions issued by the IJB are to incur financial expenditure and are therefore centred around commissioning or our transformation programme.
- 3.3.** The Directions Tracker is provided for review at the Chief Officers' monthly performance meeting. This ensures overview from ACC and NHSG Chief Executives and the Chair and Vice Chair of IJB. The tracker is regularly updated by the leadership team and lead officers.
- 3.4.** Members agreed at the RAPC on 23rd June 2022 to a new 'traffic lights' system with four classifications to indicate the status of Directions,
- 3.5.** The classifications are as follows;
1. GREEN (Ongoing) represents where the current direction is still valid, in place and not due for renewal or completion.
 2. AMBER (Due) Directions which are due for renewal or completion within the next 6 months including those which are at risk of not being completed within the timescale and / or within the allocated budget. Update to RAPC required.
 3. RED (Concern) Directions which have either
 - a. Not been implemented due to issues with implementation e.g. no service available to deliver on the direction.
 - b. Directions which have expired and have not been reported as renewed or completed.
 4. GREY (Complete) - represents a direction where the date has expired, and the direction is either no longer required or has been superseded by a new direction. It also includes directions which have been completed within a set timescale and will not be required to continue beyond that.
- 3.6.** As a result of the implementation of the new classifications all Directions on the tracker have been reviewed to ensure they are up to date.



RISK, AUDIT AND PERFORMANCE COMMITTEE

4. Implications for IJB

- 4.1. Equalities, Fairer Scotland and Health Inequality** – there are no direct implications arising from this report.
- 4.2. Financial** – there are no direct implications arising from this report.
- 4.3. Workforce** - there are no direct implications arising from this report.
- 4.4. Legal** – Scottish Government guidance which provides that there should be a log kept of all Directions made - Health and Social Care Integration Statutory Guidance- Directions from Integration Authorities to Health Boards and Local Authorities (Jan 2020). RAPC monitoring and reviewing Directions issued ensures that the IJB is discharging this requirement.
- 4.5. Other** – NA

5. Links to ACHSCP Strategic Plan

- 5.1.** Ensuring that the RAPC has overview of the Directions process will help ensure that the IJB achieves the strategic aims and priorities as set out in the strategic plan.

6. Management of Risk

6.1. Identified risk(s):

Good governance and ensuring that the IJB's committees are delivering on their roles and responsibilities are fundamental to the delivery of the Strategic Plan and therefore applicable to most of the risks within the Strategic Risk Register.

6.2. Link to risk number on strategic or operational risk register:

This report links to Risk 5 on the Strategic Risk Register, "There is a risk that the IJB, and the services that it directs and has operational



RISK, AUDIT AND PERFORMANCE COMMITTEE

of, fail to meet both performance standards/outcomes as set by regulatory bodies and those locally determined performance standards as set by the board itself. This may result in harm or risk of harm to people”.

6.3. How might the content of this report impact or mitigate the known risks:

This report proposes a revised reporting model for Directions as part of our governance framework, and in the discharge of or requirements within the statutory guidance outline at paragraph 4.4 above.