



REPORT TO: PERFORMANCE AND AUDIT COMMITTEE – 24 NOVEMBER 2020
REPORT ON: GOVERNANCE ACTION PLAN PROGRESS REPORT
REPORT BY: CHIEF FINANCE OFFICER
REPORT NO: PAC34-2020

1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to provide the Performance and Audit Committee with an update on the progress of the actions set out in the Governance Action Plan.

2.0 RECOMMENDATIONS

It is recommended that the Performance and Audit Committee (PAC):

2.1 Notes the progress made in relation to the actions set out in the Governance Action Plan as outlined in Appendix 1.

3.0 FINANCIAL IMPLICATIONS

3.1 None.

4.0 MAIN TEXT

4.1 The Governance Action Plan was presented and approved at the PAC meeting of the 25 March 2019 (Article VIII of the minute of the meeting refers) in response to a recommendation within Dundee Integration Joint Board's Annual Internal Audit Report 2017/18. This action plan enables the PAC to regularly monitor progress in implementing actions and understand the consequences of any non-achievement or slippage in strengthening its overall governance arrangements. The PAC remitted the Chief Finance Officer to present an update progress report to each PAC meeting. This action plan has also been added to in order to reflect a range of actions arising from the recent Annual Governance Statement which formed part of the Annual Accounts for Dundee Integration Joint Board. The progress of the actions is noted in Appendix 1.

4.2 Members of the PAC will note that Report DIJB42/2020 was presented to the IJB at its meeting of 27 October 2020 which escalated from PAC to the IJB the delays in progressing a range of governance actions as set out in the Governance Action Plan as reported to the PAC in September 2020, while outlining how these delays will be addressed.

4.3 Members of the PAC will note a delay in progressing a range of actions as set out in the report. This includes actions to be addressed through the updated Workforce and Organisational Development Plan which was not presented to the IJB in August as originally planned. This and other delays have been due to challenges in meeting a range of priorities with limited resources available to progress within the Health and Social Care Partnership, and compounded by limited working arrangements and competing priorities in response to Covid-19. Progress is being made in strengthening the support structure and realign priorities to ensure these actions are completed over the course of this financial year. While the delay in progressing a number of improvement actions has been noted by both internal and external audit, this has not resulted in significant concerns as to the IJB's overall governance arrangements and systems of control.

4.4 Actions from two Internal Audit Reviews which were presented to the PAC in September 2020 have now been added to the action plan.

5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any policy implications in respect of Equality Impact Assessment and Risk Management. There are no major issues.

6.0 RISK ASSESSMENT

6.1 This report has not been subject to a risk assessment as it relates to the development of an action plan in line with the findings of the Annual Internal Audit Report.

7.0 CONSULTATIONS

7.1 The Chief Officer, Chief Internal Auditor and the Clerk were consulted in the preparation of this report.

8.0 BACKGROUND PAPERS

8.1 None.

Dave Berry
Chief Finance Officer

DATE: 03 November 2020

*Narrative shown in Italics denotes updated position from previous plan
Completed actions have been moved to the top of the plan for ease of use*

Performance and Audit Committee Report	Audit Recommendation	Agreed Action	Original Action By / Date	Red: Not Started Amber: In Progress Green : Complete	Remedial Action/Comments	Revised Target Completion Date
Dundee Integration Joint Board Clinical, Care and Professional Governance Internal Audit Review <i>(PAC9-2018) 13th February 2018</i>	A review should be undertaken to establish or update the remits of the PAC, R2 and Forum in relation to clinical and care governance. The remits should set out reporting lines and be translated into annual work plans for each group. This should ensure reports, both for the purpose of assurance as well as for implementation or delivery, go to the most appropriate group.	Undertake review as outlined in the Audit Recommendations, setting out the remits of the PAC, R2 and Forum, and the reporting lines between all three. This process should also be followed for the Mental Health Governance Group to ensure appropriate lines of communication into the DHSCP governance processes.	Lead Allied Health Professional (Forum) Clinical Director (R2) Chief Finance Officer (PAC) Associate Nurse Director - Mental Health and Learning Disabilities 31 March 2018	AMBER	<i>Review of the CCPG forum and the CCPG Group has led to the development of primary governance groups under each locality manager. Each Primary Governance Group is to report directly into the CCPG Group. Terms of reference are in development for the primary governance groups, which link directly through CCPG Group and Clinical Quality Forum ensuring assurance process from service level to CQF. CCPG Forum will continue to operate as an avenue for service managers to share good practice and have dedicated space to discuss</i>	March 2021

					<i>challenges across the Partnership.</i>	
	<p>In addition to the 6 domains of clinical and care governance across delegated services, this review of remits needs to give consideration to:</p> <ul style="list-style-type: none"> - Hosted services - Information Governance - Care Commission reports - Risk 	<p>Clarify and agree datasets and information to be presented at each group and associated timescales to ensure coordination of governance process.</p>	<p>Lead Allied Health Professional / Head of Service, Health and Community Care</p> <p>30 June 2018</p>	AMBER	<p>A reporting table has been developed in the Dundee Partnership outlining the expectation and reporting detail across different groups. This reporting table has been adopted by all three Partnerships.</p> <p>The Getting it Right for Everyone – A CCPG Framework is currently under review with a cross Tayside working group. This group is building on work already completed on reporting datasets which includes inspections reports, risks, adverse events etc.</p>	<p>December 2019</p> <p>December 2020</p>
	<p>It is recommended that any new arrangements be considered and approved by the IJB or a nominated Committee/group.</p>	<p>The IJB will formally request that the Chair of the R1 Group advise the IJB of performance of R1 and any new arrangements to be implemented.</p> <p>Chief Officer of DIJB to clarify reporting arrangements between R1 and IJB.</p>	<p>Chief Officer Lead Allied Health Professional / Head of Service, Health and Community Care</p> <p>31 July 2018 (To allow time for R1 meetings to run).</p>	AMBER	<p><i>Working group established at Tayside level which will support and clarify reporting arrangements.</i></p> <p><i>A regular report is provided to the CQF and the Head of Service and/or Lead</i></p>	<p>October 2019</p> <p>March 2021</p>

		Regular representation at the R1 and CQF will be provided from the R2 Group.			<i>AHP attend to speak to the report at each meeting.</i>	
	Work undertaken to map out the assurance routes for the key domains should be further augmented by a mapping to the functions set out in the Appendix to the Integration Scheme, setting out all delegated functions, with priority given to the areas of highest importance/risk.	<p>Integration scheme delegated functions will be mapped to ensure forum membership reflects the breadth of delegated functions.</p> <p>Service reports and performance data will reflect the breadth of the delegated functions ensuring that reports to the IJB also reflect the breadth of the delegated functions.</p>	<p>Lead Allied Health Professional / Head of Service, Health and Community Care</p> <p>30 April 2018</p>	AMBER	<p><i>Programme reporting covering all services will all be completed by June 2019.</i></p> <p><i>Schedule of services confirmed and membership extended to ensure all areas are considered by the R2 group.</i></p> <p><i>The development of the Primary Governance Groups will ensure comprehensive reporting across all aspects of the Partnership. There are a number of anomalies with some teams sitting outwith Locality Manager structures and these teams will report directly to CCPG Group.</i></p> <p><i>Further work to identify core and service datasets is ongoing, locally for DHSCP and across Tayside via the</i></p>	March 2021

					<i>Getting it Right for Everyone Review Group. This work is nearing completion.</i>	
	Agreed levels of reporting should be reviewed against the governance principles appended to this report.	Further work will be done with the reporting templates to refine areas of common risk across the HSCP to support identification and mitigation of identified risks.	Lead Allied Health Professional / Head of Service, Health and Community Care 30 June 2018	AMBER	Work continues to progress the reporting arrangements but not yet complete – revised timescale of end of December 2019.	March 2021
Dundee Integration Joint Board Workforce Internal Audit Review (PAC8-2018) 27 th March 2018	Work to fully implement the actions in the Workforce and Organisational Development Strategy should continue with regular reporting on progress towards implementation being submitted to the IJB. In addition, Locality Managers should strive towards ensuring that the DH&SCP culture becomes fully embedded. Engaging staff in developing and maintaining the partnership culture as well as sharing and embedding the guiding principles should assist with this.	The DH&SCP management team fully recognises the need to ensure the vision and objectives of the Workforce and Organisational Development Strategy become embedded within the partnership and acknowledged that this is a fundamental element of the partnership's continued development. Implementing in full the actions in the Strategy has been identified by the operational management team as one of the key actions to be delivered over the next 6 months.	Head of Health and Community Care / Head of Finance and Strategic Planning August 2018	RED	<i>Review of Workforce and Organisational development strategy as companion document to the review of Strategic Plan.</i>	March 2021

	<p>Consideration should be given to developing a formal Service Level Agreement (SLA) detailing all key corporate support services to be provided to the DH&SCP by Dundee City Council and NHS Tayside.</p> <p>The service provided should be regularly reviewed along with the SLA to ensure that the defined support is being provided and the SLA continues to be appropriate. Alternatively, in the absence of a SLA, specific details regarding the types and level of support expected should be clearly documented and formally agreed by senior management at the DH&SCP, Dundee City Council and NHS Tayside.</p> <p>In addition, regular reports on the support service requirements should be provided to the IJB.</p>	<p>The DHSCP Management Team continues to monitor the level of support being provided to the IJB from NHS Tayside and Dundee City Council on an informal basis and responds to the organisations in relation to shortfalls in service provision accordingly.</p> <p>Given the current stage in the partnership's development, with greater knowledge and awareness of what the partnership needs to support its business, the service will progress with its partners, a more formal statement of the expected level of support which can subsequently be monitored and report to the IJB.</p>	<p>Head of Finance and Strategic Planning</p> <p>August 2018</p>	<p>RED</p>	<p>Current level of resources have not enabled progress to be made.</p> <p>Proposals for enhanced IJB support functions being developed within the H&SCP to assist taking this and other governance issues forward. Review of Integration Scheme will take this area into consideration</p>	<p>March 2021</p>
	<p>Future workforce plans for DH&SCP should include plans for all areas of delegated responsibility, tailored to deliver the relevant elements of the Strategic Plan.</p>	<p>As DH&SCP continues to evolve, with the continued development of integrated locality based services and redesign of services, the shape and mix of the workforce required to deliver on the IJB's strategic</p>	<p>Head of Health and Community Care / Head of Finance and Strategic Planning</p> <p>August 2018</p>	<p>AMBER</p>	<p><i>Updated Workforce and Organisational Development Plans, compatible with the revised Strategic and Commissioning Plan due to be presented to the IJB in June 2020</i></p>	<p>March 2021</p>

	Plans should take account of demand for and availability of staff to maximise the use of resources within the DH&SCP.	objectives is becoming clearer and will be reflected in future integrated workforce plans. While acknowledging that further national guidance is awaited on this matter, the first integrated workforce plan will be developed over the next 6 months.				
Action Plan in Response to the Services for Older People (Edinburgh) Inspection Report (PAC 29-2018) 29 th May 2018	Action Plan was requested by the PAC in relation to lessons learned from the Edinburgh inspection and what improvements would be required in Dundee.	A wide range of actions are reflected in this detailed action plan therefore it is not feasible to reflect in this plan – a separate update report will be provided at the May 2019 PAC.	Various with latest timescales for completed action identified as March 2019.	RED	<i>Report to now be presented to the March 2020 PAC meeting Work on collating and rationalising improvement plans and action plans is underway in recognition that a number of issues have not been actioned.</i>	March 2021
Risk Management Action Plan (PAC8-2019) 12 th February 2019	Action Plan was required to respond to the findings of the Risk Maturity Assessment presented to the PAC on the 25 th September 2018.	A wide range of actions are reflected in this detailed action plan therefore it is not feasible to reflect in this plan. A separate update report will be provided to the September 2019 PAC meeting as agreed.	Chief Finance Officer September 2019	AMBER	Report DIJB37-2020 presented to the August 2020 IJB <i>Discussions held between risk management functions of Dundee City Council and NHS Tayside to agree way forward for actions. Follow up meetings with partners across Tayside scheduled to</i>	December 2020

					<i>enable actions to be completed A separate report to the PAC has been presented September 2020</i>	
2017/18 Annual Internal Audit Report – Action Plan Update <i>(PAC7-2019) 12th February 2019</i>	Review of Action Plan developed to respond to the range of areas for improvement arising from the IJB's 2017/18 Annual Internal Audit Plan.	Wide range of actions detailed in the action plan. Chief Finance Officer to provide an update to the PAC by June 2019 outlining the status of the outstanding actions.	Not Applicable			
<i>The following reflects the detail of this action plan.</i>	Clarification of deputising arrangements for the Chief Officer to be presented to the IJB.	Agreement to be reached between Chief Executives of Dundee City Council and NHS Tayside.	Revised February 2019.	RED	<i>Discussion to be held between Chief Executives</i>	December 2020
	Consideration should be given to providing the IJB with reporting on workforce issues including the Workforce and Organisational Development Strategy as well as the partnership forum.	Complete review of Workforce and Organisational Development Strategy and provide update to IJB. Consider frequency and content of update report of activities of Staff Partnership Forum.	Revised April 2019	AMBER	<i>Updated Workforce and Organisational Development Plans, compatible with the revised Strategic and Commissioning Plan due to be presented to the IJB in February 2020.</i>	March 2021

<p>Development of Large Hospital Set Aside arrangements in conjunction with the Scottish Government, NHS Tayside and Angus and Perth and Kinross Integration Joint Boards.</p>	<p>Work progressing with NHS Tayside in association with the 3 Tayside IJB Chief Finance Officers and Scottish Government to conclude the methodology or determining and monitoring the Large Hospital Set Aside to inform commissioning decisions as set out within the legislation.</p>	<p>Revised - March 2019</p>	<p>AMBER</p>	<p><i>Value of Large Hospital Set Aside agreed for inclusion in 2020/21 budget including recognition of improvements made by Dundee HSCP in reducing emergency bed days resulting in the release of £1m of funding from NHS Tayside to Dundee IJB's delegated budget. Further work required to ensure robust commissioning arrangements in place for future budgets.</i></p>	<p>March 2021</p>
<p>Development of improved Hosted Services arrangements around risk and performance management for hosted services.</p>	<p>Current hosted services arrangements subject to discussion across the 3 Tayside Chief Officers and Chief Finance Officers. Proposal to be brought forward to IJB and PAC before the end of the financial year.</p>	<p>Revised June 2019</p>	<p>AMBER</p>	<p><i>Discussions ongoing with neighbouring IJB's re responsibilities around hosting arrangements.</i></p>	<p>March 2021</p>
<p>Further develop the Integration Joint Board's local Code of Governance.</p>	<p>To be developed as suggested.</p>	<p>Revised April 2019</p>	<p>AMBER</p>	<p><i>Clerk to the Board developing arrangements in conjunction with Chief Finance Officer.</i> <i>Actions postponed as a result of pandemic working restrictions</i></p>	<p>December 2020</p>

	Further develop performance report information into a delivery plan framework to ensure IJB fulfils its remit in delivering the direction of travel within the Strategic Commissioning Plan.	To be taken forward by the Strategy and Performance Team, aligned with the review of the Strategic and Commissioning Plan.	Revised July 2019	AMBER	Will form part of revised performance monitoring reporting into 2019/20 following approval of revised Strategic and Commissioning Plan. Work has started on performance against 4 high level indicators in plan. Needs further development in line with any revisions to the SPG structure.	March 2021

<p>Audit Scotland Annual Audit Report 2018/19</p>	<p>A long-term financial strategy (5 years or more) supported by clear and detailed financial plans (3 years or more) should be prepared.</p>	<p>Build on the three year financial framework developed during 18/19, which sets out the estimated resources and anticipated increase in expenditure from rising demand and costs of providing services. Continue to work with partner bodies to align longer term financial planning processes and the development of long- term financial strategy on how to close the gap between funding and service provision.</p>	<p>Chief Finance Officer March 2020</p>	<p>AMBER</p>	<p>Work continues to develop the longer term financial framework as part of the budget setting process.</p>	<p>December 2020</p>
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	The IJB should liaise with NHS Tayside and consider the arrangements for regular attendance by a member appointed as the registered medical practitioner providing primary care.	NHS Tayside Board is responsible for appointing the role of registered medical practitioner providing primary care to the IJB. This issue has been noted by the IJB and the Clerk to the Board will formally write to the Chair of NHS Tayside Board on this issue.	Clerk to the Board December 2019	AMBER	Clerk has written to NHS Tayside and awaits a formal response. 23-01-20 NHS have not confirmed a replacement for Registered Medical Practitioner as yet. (NHS have also to confirm replacement for one voting member on Dundee IJB.	November 2020
	The IJB should liaise with its partner organisations to ensure an agreed budget is approved prior to the start of the year.	An indicative NHS Budget was provided at the IJB budget meeting of 30th March 2019. The final budget from NHS Tayside was consistent with the indicative budget. Continue to work with partner bodies to align budget setting processes as far as practicable.	Chief Finance Officer March 2020	AMBER	Continues to be discussed at budget meetings with the parties. <i>Timescale impacted by Covid-19 response for 2020/21 budget</i>	March 2021
	The IJB should seek to combine financial and performance reporting to ensure that members have clear sight of the impact of variances against budget in terms of service performance.	Continue to explore options on how to combine financial and performance reporting in a format which provide useful information to users.	Chief Finance Officer March 2020	AMBER	<i>Progressing slower than as planned as a result of Covid-19 required changes to working arrangements /pressures</i>	March 2021

	The IJB should review its reserves to ensure they are adequate	Reserves can only be accumulated through year end surpluses of funding. Ensure robust budgeting, monitoring of identified savings and financial monitoring processes in place to identify opportunities to enhance reserves position.	Chief Finance Officer March 2020	AMBER	Levels of uncommitted reserves are anticipated to reduce in response to the anticipated overspend. Reserves have been reviewed and are inadequate in terms of the Reserves Policy. IJB unlikely to be in a position of increasing reserves given current budget pressures	March 2021
	The IJB should: <ul style="list-style-type: none"> review its processes for minute taking. 	Further development of the IJB and PAC minutes and papers to ensure full transparency and accurate recording of the discussions, questions asked and assurances provided.	Chief Officer/ CFO/ Clerk to the Board September 2019	AMBER	Format of minutes reflects that of parent organisation providing this support service function. Further discussions to be held with Audit Scotland and Clerk to the Board	December 2020
	Mechanisms and reporting arrangements should be implemented to provide assurance to the Chief Officer and the Board that the IJB has arrangements in place to demonstrate that services are delivering Best Value.	Further learning from other IJB's reporting with regards to Best Value to be gained and considered for reflection in the 2019/20 Annual Performance Report.	Chief Finance Officer June 2020	GREEN		September 2020
2019/20	Implementation of and reporting on all outstanding recommendations arising from the Ministerial Steering Group		Chief officer/ Chief Finance Officer	AMBER		March 2021

	report on Health & social care Integration					
2019/20	Further development of governance arrangements considering agreed governance principles and updated advice from the Scottish Government Health & Social care Division		Chief officer/ Chief Finance Officer	AMBER		December 2020

Performance and Audit Committee Report	Audit Recommendation	Agreed Action	Original Action By / Date	Red: Not Started Amber: In Progress Green : Complete	Remedial Action/Comments	Revised Target Completion Date
PAC 24-2020 Internal Audit Review – Information Governance (IG) & Technology as Enablers	Clear escalation routes should be agreed between DIJB and its partners for Information Governance and eHealth(IT)	Establish a governance route	NHS Tayside Head of Information Governance and Cyber Assurance/Data Protection Officer 31/03/2020	AMBER		March 2021
	DHSCP should identify representation to the NHST Information Governance Cyber Security Committee	Identify appropriate representation to the NHST IG Cyber Security Committee	DHSCP Chief Officer 31/03/2020	GREEN		
	We strongly recommend that the pace of getting to an agreed position is increased. A Data / Information Sharing Agreement would provide the basis for determining appropriate access to systems and as a matter of urgency requires to be agreed and disseminated as appropriate.	NHS Tayside's Head of Information Governance and Cyber Assurance/Data Protection Officer to work with DCC's Information Governance Manager to agree, disseminate and gain approval for a Data Sharing Agreement. The Data Sharing Agreement will not cover specific systems. The Data Sharing Agreement should be considered by the Systems Application Strategy and Sharing Group which should develop policies and	NHS Tayside's Head of Information Governance and Cyber Assurance/Data Protection Officer/ DCC's Information Governance Manager 31/03/2020	GREEN		

		procedures for governing access to specific systems.				
	<p>Consideration should be given to how IT services within the Council and NHS Tayside, along with representatives from DH&SCP, should meet regularly to ensure that, the needs of all parties are considered when key IT development decisions are being taken and any IT problems that arise due to the unique circumstances of the DH&SCP can be discussed and resolved timeously.</p> <p>Given the need for NHST to engage with its partners across all 3 partnerships, it may be useful to establish a Tayside wide forum for this. In the meantime, where required, the possibility of interfaces sharing information between systems should be explored.</p> <p>Key corporate support services to be provided to DH&SCP by DCC and NHS Tayside has yet to be agreed. Options should be explored in the context of the Improvement action plan developed in response to the</p>	<p>Strategic discussions will be held between all partners in conjunction with Scottish Government to help facilitate an operational solution through the provision of available funding / resources.</p> <p>Dundee HSCP's MOSAIC Project / IT Board has been focussed on developing and implementing the MOSAIC case recording system since the inception of the HSCP. As the main system features have now been implemented the focus of this group will now move to identifying, prioritising and planning the integrated IT needs of the HSCP through the development of an IT strategy. IT leads from both NHST and DCC are invited</p>	<p>Executive Director of Corporate Services DCC</p> <p>Director of Digital Technology NHST</p> <p>Chief Finance Officer, DIJB</p> <p>30 June 2020</p> <p>Chief Finance Officer DIJB</p> <p>30 June 2020</p>	<p>AMBER</p> <p>GREEN</p>		<p>March 2021</p>

	<p>MSG report and self assessment.</p>	<p>members to this Board. The Board will provide the strategic direction with the WPE providing the technical response.</p> <p>Frequency of meetings of the Workplace Enablement (WPE) group will be increased to quarterly.</p> <p>A Bi-Yearly meeting will be established which will include Angus and PKC representation.</p> <p>It was agreed that the remit of the WPE Group was to remain a technical enablement forum. The DHSCP IT Board will set out the direction including the key issues highlighted in the MSG report.</p>	<p>NHST E-Health Service Delivery Manager, DCC IT Service Manager</p> <p>30 June 2020</p> <p>Chief Finance Officer</p> <p>30 June 2020</p>	<p>GREEN</p> <p>GREEN</p>		
	<p>DH&SCP should request that NHST review and update The NHS Systems Access Policy to ensure any issues encountered in the case of DH&SCP staff are covered as well as address any other findings of this report.</p>	<p>This policy is currently under review and will be submitted to the NHS Tayside Information Governance Committee in January 2020. If agreed this will then be submitted to the Audit and Risk Committee for final approval.</p>	<p>NHS Tayside's Head of Information Governance and Cyber Assurance/Data Protection Officer</p> <p>31 March 2020</p>	<p>GREEN</p>		

	<p>Agreement should be reached through the Workplace Enablement Group (WEG), with DIJB management to ensure that the process that HSCP staff follow to request access to partner's systems, operates effectively and that the required support is provided by the partners.</p>	<p>This recommendation is already in progress. Workflows are required to be tested around off boarding of staff.</p>	<p>NHST E-Health Service Delivery Manager, DCC IT Service Manager 31 March 2020</p>	<p>GREEN</p>		
	<p>The role of this group should be reviewed with clear terms of reference established. The group should have appropriate membership and be supported by both senior leadership commitment and clear escalation routes within the wider structures of DH&SCP, DCC and NHST.</p> <p>Future meetings of this group should also include discussion on an IT helpdesk agreement for DH&SCP staff as well as agreement on the processes for sharing information on DH&SCP staff active directory users.</p> <p>Given the need for NHST to engage with its partners across all 3 partnerships, it may be useful to establish a Tayside wide forum for this.</p>	<p>Terms of Reference for the Workplace Enablement Group to be drawn up and agreed at the next meeting at the end of January 2020.</p> <p>This agreement and process has already been agreed and is now in place.</p> <p>A Bi-Annual Meeting to be arranged.</p>	<p>NHST E-Health Service Delivery Manager, DCC IT Service Manager 31 January 2020</p> <p>Complete</p> <p>NHST E-Health Service Delivery Manager 30/11/2020</p>	<p>GREEN</p> <p>GREEN</p> <p>AMBER</p>		

<p>PAC28-2020 Internal Audit Review – Governance Mapping</p>	<p>The DHSCP management team should review attendance at groups based on agreed principles. We suggest these principles should be primarily focused on groups which make strategic and service planning decisions impacting on the HSCP/ IJB. Equally, attendance at partner groups should be based on a consideration of whether this is necessary to provide assurance to allow the partner body to fulfil their agreed responsibilities in line with their accountabilities.</p>	<p>The evolving complexity of integrated arrangements are such that the capacity of the management team of the Health and Social Care Partnership in its widest sense is insufficient to effectively contribute to all the demands placed on it through partner groups in particular. The development of a range of principles as recommended will provide a better structured approach and through the shared understanding of the partners of priorities, provide the necessary assurances to them. This will be actioned as recommended.</p>	<p>Chief Officer, Dundee HSCP 31/03/2021</p>	<p>RED</p>		
	<p>A best practice guidance document is developed to ensure the operation of all groups conforms to the following principles: <ul style="list-style-type: none"> - A clear purpose and remit is documented for each group, including how this purpose aids the achievement of DIJB's corporate objectives and this is reviewed annually - Membership (including deputising arrangements) and quorum for decision making is considered and documented in the remit </p>	<p>A best practice guidance document would be beneficial and will be developed as recommended</p>	<p>Head of Finance & Strategic Planning, Dundee HSCP 31/03/2021</p>	<p>RED</p>		

	<ul style="list-style-type: none">· Scheduling (frequency and timing) of meetings takes into account the reporting lines of each group· Following each meeting, sufficient detail should be recorded to demonstrate the process and rationale for reaching a decision as well as any agreed actions. An update on the actions agreed should be a standing agenda item at the next meeting of any group.· Where a group reports on to another group or committee, it should prepare an annual workplan for approval by the parent committee. In addition, they should prepare an annual report for presentation to the parent Committee, providing assurance that the group has fulfilled its remit and noting any actions required.· A corporate database/ joint calendar showing all relevant groups and meetings might help to administer this. Once these principles are in place, the groups in place should be reviewed to ensure there is no duplication.					
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	An in depth review should be undertaken to update the strategic risk in relation to Increased Bureaucracy. This should include updating the controls to refer to any actions to be taken in response to this audit report.	The risk and associated controls will be reviewed as recommended	Head of Finance and Strategic Planning, Dundee HSCP 31/03/2021	RED		
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