

# Aberdeenshire Integration Joint Board Governance Handbook





This Handbook is an essential resource for IJB members, relevant officers and is a useful reference document for members of the public.

The Governance Handbook brings together a range of documents which support good governance for the Aberdeenshire Integration Joint Board. It contains the rules for how meetings are governed as well as setting out how decisions are made and how members of the public can participate.

The contents of the handbook are:-

Part 1	Standing Orders
Part 2	Scheme of Delegation
Part 3	Financial Regulations
Part 4	Interpretation
Part 5	Exempt Information
Part 6	Procedures and Guidance on Requests to Speak
Part 7	Assurance Framework

# Aberdeenshire Integration Joint Board Part 1 - Standing Orders

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#### General

- 1.1 These Standing Orders regulate the conduct and proceedings of the Aberdeenshire Integration Joint Board.
- 1.2 The terms used in these Standing Orders are defined in Appendix 1.
- 1.3 Any statutory provision, regulation or direction by Scottish Ministers shall have precedence if these Standing Orders conflict with them.
- 1.4 These Standing Orders may be amended, varied or revoked at a meeting of the IJB provided the notice for the meeting at which the proposal is to be considered states that there is a proposal to amend the Standing Orders, states what that proposal is, and the proposal itself does not result in the IJB not complying with any statutory provision or regulation.
- 1.5 Except in the case of Standing Order 2, any one or more of the Standing Orders may be suspended in any case of urgency or upon motion made on a notice duly given at any Meeting provided that two-thirds of the members present and voting shall so decide. Any motion to suspend Standing Orders shall be made with a short explanation and, on such motion being seconded, the Chair shall put the same to the Meeting without speeches or discussion. Any vote on such motion shall be by a show of hands.

# **Membership**

- 2.1 The membership of the IJB shall comprise:-
  - Those voting and non-voting members prescribed by law. and as provided for in the approved Integration Scheme being:-

#### **Voting Members**

- i) Five councillors appointed by Aberdeenshire Council
- ii) Five Health Board members appointed by NHS Grampian

#### Non-Voting Members

- i) The chief social work officer of Aberdeenshire Council
- ii) The Chief Officer of the IJB
- iii) The proper officer of the IJB appointed under s.95 of the Local Government (Scotland) Act 1973
- iv) A registered medical practitioner whose name is included in the list of primary medical services performers prepared by the Health Board in accordance with Regulations made under section 17P of the National Health Service (Scotland) Act 1978
- v) A registered nurse who is employed by the Health Board or by a person or body with which the Health Board has entered into a general medical services contract; and
- vi) A registered medical practitioner employed by the Health Board and not providing primary medical services;
- vii) Staff of the constituent authorities engaged in the provision of services provided under integration functions;
- viii) Third sector bodies carrying out activities related to health or social care in the area of the local authority;
- ix) Service users residing in the area of the local authority; and

- x) Persons providing unpaid care in the area of the local authority.
- b. Any additional non-voting members appointed by the IJB.

Non-voting members will appointed at the first meeting of the IJB and the IJB may review the non-voting membership at such times it sees fit.

- 2.2 If and when a person ceases to hold the office or post as a result of which he or she became a member of the IJB then that person shall cease to be a member of the IJB.
- 2.3 If a voting member is unable to attend a meeting of the IJB, the relevant constituent authority is to use its best endeavours to arrange for a suitably experienced substitute, who is either a councillor, or, as the case may be, a member of the health board. The substitute voting member may vote on decisions put to that meeting, but may not preside over the meeting.
- 2.4 If a non-voting member is unable to attend a meeting of the IJB, that member may arrange for a suitably experienced substitute to attend the meeting.

# Removal of Members (Voting and Non-Voting)

- 2.5 If a member has not attended three consecutive meetings of the IJB and their absence was not due to illness or other reasonable cause, as may be determined by the IJB the IJB may remove the member from office by providing the member with one month's notice in writing.
- 2.6 If a member acts in a way which brings the IJB into disrepute or in a way which is inconsistent with the proper performance of the functions of the IJB, the IJB may remove the member from office with effect from such date as the IJB may specify in writing.
- 2.7 If a member is disqualified during a term of office they are to be removed from office immediately.
- 2.8 If a member who is a councillor appointed on the nomination of the local authority ceases, for any reason, to be a councillor during a term of office, he/she is to be removed from membership of the IJB with effect from the day he/she ceases to be a councillor. If a councillor has been found by the Standards Commission to have been in breach of the Code of Conduct that necessitates a sanction more severe than censure, they will also be removed from membership of the IJB with effect from the day the sanction is issued.
- 2.9 If a member who is a health board member appointed on the nomination of NHS Grampian ceases, for any reason, to be a member of NHS Grampian Health Board, he/she is to be removed from membership of the IJB with effect from the day that he/she ceases to be a health board member.
- 2.10 Subject to paragraphs 2.5 to 2.9 a constituent authority may remove a member which it nominated to the IJB by providing sufficient notice in writing to the member and the IJB.
- 2.11 Aberdeenshire Council and NHS Grampian shall also attend to any issues relating to the resignation, removal and disqualification of their respective members in line with the Order.

# **Review of Membership**

- 2.12 The membership of the IJB shall be reviewed regularly.
  - 2.12.1 For councillor members, the review shall be three years from the date of the first Full Council following the Local Government election regardless of the date they were appointed. A report will be considered by Aberdeenshire Council who can reappoint until the date of the next Local Government election.
  - 2.12.2 For NHS Board members, the review shall be on a three yearly basis from the date of appointment or the last review whichever is sooner.
  - 2.12.3 For Non Voting Members, Professional Advisors (Chief Officer, Chief Finance Officer, Business Officer and Chief Social Work Officer), some are appointed by virtue of the office they hold and so will not be subject to review and others will be reviewed on a three yearly basis from the date of appointment.
  - 2.12.4 For Non-Voting Stakeholder members, the review shall be three years from the date of either their appointment or the last review, whichever is sooner.

#### **Chair and Vice Chair**

- 3.1 Members shall be appointed to, and shall hold the positions of, Chair and Vice-Chair for a period of 18 months in rotation in accordance with the IJB Order.
- 3.2 The Chair will preside at every meeting of the IJB that he or she attends.
- 3.3 In the absence of the Chair the Vice-Chair shall preside at the meeting of the IJB.
- 3.4 In the absence of both the Chair and Vice Chair, the voting members present at the meeting shall choose a voting IJB member to preside. In the event of an equality of votes, the decision as to who shall preside shall be determined by lot.

#### **Ordinary and Special Meetings**

- 4.1 The IJB shall at least annually approve a timetable of ordinary meetings. At least six ordinary meetings shall be held in each financial year
- 4.2 The IJB may amend or adjust that timetable of ordinary meetings from time to time, provided that at least six such meetings are held in each financial year.
- 4.3 The Chair may change the date and/or time of an ordinary meeting, but may not cancel an ordinary meeting. The meeting venue shall have the necessary facilities to enable any person to fully participate remotely and the meeting may be fully online.
- 4.4 The Chair may call a special meeting of the IJB at any time by delivering a signed requisition to the Chief Officer specifying the business to be transacted. For the avoidance of doubt, this can be by electronic means.
- 4.5 A request for a special meeting of the IJB may be made in the form of a requisition specifying the business to be transacted, signed by at least two thirds of the number of voting members, and presented to the Chief Officer. If the Chair does not call that meeting within seven days of receiving the requisition, the members who signed the

- requisition may call a meeting by delivering a notice, signed by them all, calling the meeting.
- 4.6 Upon receipt of a requisition for a special meeting, the Chief Officer shall make arrangements for the meeting to be held as soon as reasonably practicable, but in any event within 14 days of the Chair's requisition, or the members' notice, as the case may be.
- 4.7 No business shall be transacted at a special meeting other than that specified in the requisition.

# **Calling Meetings**

- 5.1 For all Meetings a notice will be published online at least seven calendar days before the date of the Meeting, which will:- a. Detail the time and, where relevant, the place of the Meeting together with access arrangements where appropriate; and b. If it is a Special Meeting, name the Members who have called the Meeting. In addition to the notice which shall be in the form of an agenda approved by the Chair, or in the absence of the Chair by the Vice Chair, a summons specifying the business to be transacted at the Meeting and signed by the Chief Officer shall be sent to:- a. Members electronically by e-mail to their Aberdeenshire Council or NHS Grampian e-mail address and b. External members electronically by secure e-mail to the e-mail address which the external member has given in writing to the Chief Officer.
- During times where it is impractical to physically meet, meetings may be held online and arrangements will be put in place to ensure that the meetings are as accessible as practicable to ensure public participation and accessibility. This may mean meetings are recorded and the recordings being made available online afterwards.
- 5.3 Reports and other supporting papers shall be attached to the notice and delivered with it
- 5.4 Reports shall be prepared using a standard template approved by the IJB from time to time.
- 5.5 The address for intimation or delivery shall be the email address notified by each member, unless a member requests that a different address is used. A paper copy shall be posted to members on the day that the electronic copy is sent.
- Lack of or a defect in the service or intimation of the notice to any member shall not affect the validity of a meeting.
- 5.7 Only the business specified in the notice shall be transacted at the meeting, unless an item of business is notified to the Chair before the meeting with a request for it to be added to the agenda, and the Chair rules to allow it to be considered on the ground of urgency. The Chair shall state the reason for such a ruling and the minute shall record the ruling and the reason given.
- 5.8 If the Chair rules that the matter is not urgent, it shall be included as an item for the next ordinary meeting, unless it is withdrawn.

# **Public Access to Meetings and Meeting Papers**

By the day after the notice calling a meeting is sent or intimated to IJB members, they shall be made available to the public through the internet.

- 6.2 Every Meeting will be open to the public, either physically or online depending on the circumstances, except in the special circumstances set out in 6.4 6.5 below. For the avoidance of doubt, the IJB considers online access to meetings is acceptable when circumstances, as determined by the Chair, dictate.
- 6.3 No person or body shall be permitted, without the permission of the IJB, to tape record, photograph, video, film or use any other form of electronic, digital or computerised sound or visual recording system during any Meeting
- 6.4 However, the public must be excluded from a Meeting when an item of business is being considered if it is likely, because of the business itself or what might be said at the Meeting, that *confidential* information (as meant by the relevant law) would be given to members of the public. Papers which contain confidential information will not be available to the general public.
- The IJB may decide, by passing a resolution at any Meeting, to exclude the public when it is considering an item of business if it is likely, because of the business itself or what might be said at the Meeting, that exempt information would be given to members of the public. The resolution to exclude the public will make clear the proceedings or which part of the proceedings of the Meeting it applies to and state the description of the exempt information. The types of information that are classed as exempt can be found in Part 5 of this Handbook. Exempt papers will not be available for the general public.
- The minute of the meeting will record the reason for any decision by the IJB to exclude the public from a meeting.

#### Quorum

- 7.1 There must be a minimum number of Members present at a Meeting. This is known as the quorum. The quorum for each Meeting shall be one-half of the whole number of its voting membership and comprise of at least two representatives from each constituent authority.
- 7.2 If, 10 minutes after the time set for the start of a Meeting a quorum is not present, the Meeting will be abandoned and the Chief Officer will record that no business was considered because there was no quorum.
- 7.3 If at any time after the start of a quorate Meeting there is a question about whether or not there continues to be a quorum, the Chair will, after allowing an interval of 10 minutes, ask the Chief Officer to count the number of Members present. If a quorum is not present, the Meeting will be adjourned to another time on the same day or to another date and time as the Chair may decide then or afterwards. The Chair may direct that any business which has not been disposed of due to a lack of quorum may be dealt with at such adjourned Meeting.
- 7.4 A member shall be regarded as being present at a meeting if he or she is able to participate from a remote location by teleconference, video conference or otherwise. A member participating in a meeting in this way will be counted for the purposes of deciding if a quorum is present.
- 7.5 If a member withdraws from a meeting then he or she shall not be counted for the purposes of a quorum. If there is as a result no quorum for that item of business then the item shall not be considered and shall be carried forward to the next ordinary meeting unless it is withdrawn.

# **Duties and Responsibilities of the Chair**

- 8.1 At all times during a Meeting, Members will respect the authority of the Chair. If the Chair speaks, any Member who is speaking to the Meeting will stop.
- 8.2 The Chair's duty is to preserve order at the Meeting and ensure that Members are given a fair hearing. If two or more Members try to speak at the same time, the Chair will decide who is to speak first.
- 8.3 The Chair will decide all matters of order, admissibility and urgency and that ruling will be final.
- 8.4 The Chair will ensure that the decision of the Meeting is clear with regard to all matters which form the business of the Meeting.
- 8.5 The Chair may allow any Member to participate in a Meeting although not actually present at the location where the Meeting is being held whether by way of teleconference, video conference or otherwise.

#### **Conduct of Members**

- 9.1 If a Member persistently misbehaves by disregarding rulings by the Chair, or behaves improperly or offensively, or wilfully obstructs the business of the Meeting, the Chair may take the following courses of action sequentially—
  - 9.1.1 Warn the Member about her/his behaviour;
  - 9.1.2 Tell the Member not to speak during the remainder of the debate on the item being discussed.
  - 9.1.3 Move that the Member should not speak again during the Meeting. The motion, if seconded, will be decided without discussion; if the motion is carried the Member will not speak again during that Meeting;
  - 9.1.4 Move that the Member should be suspended for the remainder of the Meeting. The motion, if seconded, will be decided without discussion; if the motion is carried, the Member will leave the Meeting immediately;
  - 9.1.5 Adjourn the Meeting for a short time as seems reasonable to the Chair in the circumstances.
- 9.2 If there is disorder at any Meeting, the Chair will be entitled to adjourn the Meeting to another time the same day, or to another date and time as she/he may decide then or afterwards.
- 9.3 The IJB's Register of Interests, gifts and hospitality shall be open for public inspection.

#### Adjournment

- 10.1 The Chair may adjourn a Meeting for a reasonable interval if she/he decides there is a good reason to do so.
- 10.2 At the end of any item of business, the Meeting may be adjourned for a reasonable interval or to another date as agreed by the Members at the Meeting, failing which as determined by the Chair at the Meeting. The vote on such a motion, on being seconded, will be taken without amendment or discussion and by

show of hands. Any subsequent motion to adjourn to another date will not be competent within a period of one hour after the decision on the earlier motion. If it is decided at the Meeting to adjourn, the remaining business will stand over until a resumed Meeting. Proceedings shall start at the point at which they were broken off at the adjournment. A fresh notice of the Meeting will not require to be issued.

#### **Items of Business and Debate**

- 11.1 The IJB may reach consensus on an item of business without taking a formal vote.
- 11.2 Every motion and amendment must be moved and seconded and must be made only by a voting Member. A Member may not move or second more than one amendment to a motion, and may not move or second an amendment if she/he has moved or seconded the motion. If a motion or an amendment is withdrawn, its mover or seconder may move or second another amendment or motion, as the case may be. The terms of any motion or amendment will be stated immediately when they are moved and seconded and before the mover and seconder speak to the motion or amendment. Every motion or amendment must be relevant to the item of business. Every amendment must be relevant to the motion.
- 11.3 If any motion or amendment is, in the opinion of the Chair, irrelevant or incompetent, she/he shall rule out such motion or amendment.
- 11.4 If the Chair decides, a motion or amendment will be written down and given to the Chief Officer who will read it to the Meeting.
  - 11.5.1 A motion or amendment which is not seconded will not be discussed nor will it be recorded in the Minutes.
  - 11.5.2. A motion or amendment which has been seconded may only be withdrawn or altered in substance by the mover and only if her/his seconder agrees
  - 11.5.3 Any Member who at any Meeting has taken part in a vote or has proposed a motion or amendment which has not been seconded will, if she/he asks, have her/his dissent from the eventual decision recorded in the Minutes, provided that the request is made immediately after the decision on the item has been made.
- 11.6 A motion for the approval of a Minute of a Meeting, or of any part of such minute, will be considered as an original motion and in such case, any proposal involving alteration or rejection of the Minute will be dealt with as an amendment.

# Voting

- 12.1 A vote will normally be taken by calling the roll, and the names of those voting for or against the motion or amendment(s) will be taken down and recorded in the minutes. Where a vote is taken by show of hands, the names will not be recorded in the Minute.
- 12.2 Except by the attendance of a substitute or in the event of a temporary vacancy, no vote may be cast by proxy for an absent voting member.
- 12.3 Where there is a temporary vacancy in the voting membership of the IJB, the vote which otherwise would have been cast by a member of the constituent authority to be appointed to the vacancy may be exercised jointly by the other members appointed by that constituent authority.

- 12.4 When there is more than one amendment to the motion, then, unless the Chair decides otherwise in order to avoid inconsistency in voting, the last amendment shall be put against that immediately preceding and then the amendment which is carried shall be put against the next preceding and so on until there remains only one amendment. A vote will then be taken between the motion and the remaining amendment, and whichever is carried will be the decision of the Meeting.
- 12.5 In the case of an equality of votes, the person presiding at the meeting does not have a second or casting vote.
- 12.6 In the case of an equality of votes, the IJB, after consideration of any potential risks in delaying a decision, will decide which of the following procedures to follow:
  - 1. To take a decision by the casting of lots, or
  - 2. To instruct the Chief Officer to bring back a further report with such clarification as may be appropriate to a future meeting of the IJB.

# **Changing a Decision**

- 13.1 A decision of the IJB cannot be altered or revoked within six months unless:-
  - 13.1.1 The IJB agrees there has been a material change of circumstance and explains the reasons for that, or
  - 13.1.2 The IJB agrees the decision was based on incorrect or incomplete information, or
  - 13.1.3 It is detailed in the terms of a report submitted to the IJB by an officer that the previous decision can no longer be implemented or its effect has been substantially altered by subsequent circumstances and this is agreed by the IJB.
- 13.2 The minute shall record the reason for the decision being changed.

#### **Minutes**

- 14.1 Minutes shall be prepared for meetings of the IJB.
- 14.2 The IJB shall receive and review its minutes for agreement at its following ordinary meeting after which they shall be signed by the Chair.

## **Committees**

- 15.1 The IJB shall appoint such committees as it thinks fit.
- 15.2 The IJB shall appoint the Chairs, Vice-Chairs and members of its committees.
- 15.3 The IJB shall approve the terms of reference, remit and powers of such committees. These Terms of Reference can be found in Part 2 of this Handbook.
- 15.4 Each committee must include voting IJB members, and must include an equal number of voting members appointed by the constituent authorities.
- 15.5 Any IJB member may substitute at a meeting for a committee member who is also an IJB member.
- 15.6 If a non-voting member is unable to attend a meeting of the committee, that

- member may arrange for a suitably experienced substitute to attend the meeting.
- 15.7 These Standing Orders relating to the calling and notice of IJB meetings shall also be applied to committee meetings.
- 15.8 A member may be regarded as being present at a meeting of a committee if he or she is able to participate from a remote location by a secure video link or other communication link approved by the IJB. A member participating in a meeting in this way will be counted for the purposes of deciding if a quorum is present.

# **Public Participation at Meetings**

16.1 The IJB welcomes public participation at its Meetings. The following arrangements are designed to provide for and regulate public participation at Meetings.

# Requests to Speak for Items Only on the Meeting Agenda

- 17.1 Requests to speak at a Meeting of a Committee or the IJB may be made by members of the public in terms of the following provisions.
- 17.2 Such requests to speak shall be in writing and shall ordinarily be received by the Chief Officer not later than noon, on the Friday before the date of the IJB and must include:-
  - 17.2.1 The subject matter of the request to speak;
  - 17.2.2 The action, if any that it is proposed that the IJB take.
- 17.3 If, in the opinion of the Chair, the subject matter of the request to speak, is
  - in the case of the IJB, competent and relevant, in terms of its remit or is a matter in which the IJB has a general interest and
  - ii. in the case of a Committee is competent and relevant, in terms of its remit, it shall be put on the agenda for the Meeting. It is at the discretion of the Chair to decide whether to put on an agenda for a Meeting a Request to Speak in terms of this provision which is received late.
- 17.4 If agreed by the IJB or the Committee at the Meeting, the Request shall be put before the Meeting for consideration. There will be permitted a period of up to 10 minutes for each request to speak to present to the Meeting. Not more than two speakers to any one request to speak shall be permitted to address the Meeting. The Chair will allow an appropriate period whereby any Member may ask a question relevant to the subject. Only when all requests to speak on the particular matter in question have concluded will Members discuss the matter.

#### **Potential Outcomes of Requests to Speak**

- 18.1 Having discussed the subject matter of the request to speak (whether with or without an accompanying request to speak), Members will determine one of two courses of action
  - 18.1.1 Whether simply to note the terms of the request to speak, or
  - 18.1.2 Whether to instruct the relevant officer to provide a report for a subsequent meeting of the IJB or a Committee, but it will not be competent for the Members to take a substantive decision in the absence of a report referred to at sub-paragraph 16.5.2 above.

# Aberdeenshire Integration Joint Board Part 2 – Scheme of Delegation

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# Section One - Integration Scheme, Remits of Committees and Sub-Committees

#### 1. Introduction

- 1.1 The Aberdeenshire Integration Joint Board (hereinafter referred to as the "IJB") is a statutory corporate body with its own legal personality. It is established under the Public Bodies (Joint Working) (Scotland) Act 2014 and has the responsibilities and powers conferred by that Act and associated statutory regulations. The IJB operate in accordance with the legislation and the Integration Scheme.
- 1.2 The IJB only has one member of staff -the Chief Officer. It has other officers who are not members of its staff but who carry out duties on it's behalf (for example, the Chief Finance Officer). It also receives support from officers and employees of both Aberdeenshire Council and NHS Grampian working together in the Aberdeenshire Health and Social Care Partnership or directly. They are not employed by the IJB and they are managed by the Chief Officer in their complementary roles in the management structures of those two organisations.
- 1.3 To help ensure sound decision-making, adequate control and good governance the IJB has approved this Scheme of Delegation to both its Committees and to the Chief Officer. The Scheme sets out the powers and responsibilities of significance to the IJB's discharge of its statutory responsibilities.
- 1.4 The IJB's governance is based upon the principles of:
  - a) openness
  - b) accountability
  - c) responsiveness and
  - d) democracy

This Scheme contributes to these fundamental principles by defining a route for certain decisions allowing the IJB to focus on key decisions which must be taken under full public scrutiny yet enabling staff and Committees to be accountable for the decisions that they take in a responsive manner.

- 1.5 It does not contain any delegation of powers or duties in relation to the council or the health board or their members of staff. They are separate legal bodies with different duties, powers and interests in relation to the integration of health and social care. They will have their own internal rules and delegations of powers in relation to their own interests.
- 1.6 Each of the posts described in this Handbook has its own role description used by the IJB Appointments Committee. It is not the purpose of this document to replace those or duplicate them or repeat them. The Handbook is part of a governance framework for efficient, effective and accountable decision-making amongst the Board, its committees and its officers.

#### 2. General Considerations

2.1 The Board has determined that all powers which are not specifically reserved to

the Board or its Committees or sub-Committees are delegated to the Chief Officer. The matters reserved to the IJB and their committees and sub- committees are the strategic policy, legal or regulatory issues requiring to be determined by the IJB while the day to day operational matters of the IJB's functions are delegated to the Chief Officer.

- 2.2 The Scheme is not an exhaustive list of things that officers can do on behalf of the Board. It records the significant and standing delegations of powers and responsibility to officers. If a specific power is not mentioned in this scheme it does not necessarily mean the Chief Officer cannot exercise that power. Unless specifically reserved to the IJB, the power will still be delegated to the Chief Officer.
- 2.3 The Scheme does not record temporary or one-off instructions or delegations to officers. Those are recorded in minutes of Board and committee meetings. As a general rule, delegations which will last for more than six months are included, and others are not.
- 2.4 Subject to the specific provisions in the Scheme and the IJB's Standing Orders and Financial Regulations, powers delegated include anything which is calculated to facilitate, or is conducive or incidental to, their discharge.
- 2.5 In using a delegated power, the Chief Officer must have regard and comply with the following over-arching considerations:-
  - 2.5.1 They must comply with the law
  - 2.5.2 They must have regard to statutory guidance
  - 2.5.3 They must act within the terms of the Integration Scheme
  - 2.5.4 They must not depart from the terms of the Strategic Plan
  - 2.5.5 They must comply with the IJB's Standing Orders and Financial Regulations
  - 2.5.6 They must not act where matters are reserved to the IJB or delegated to a committee
  - 2.5.7 They must act in accordance with IJB policies, procedures and instructions
  - 2.5.8 They must not act in relation to issues which are politically sensitive or controversial
- 2.6 The Chief Officer may delegate the use of their powers to other officers or employees of the council or health board providing support to the IJB. If they do so, they must ensure adequate controls and reporting arrangements are in place. Notwithstanding any such sub-delegation, they remain accountable directly and personally to the IJB.

# 3. Powers Reserved to the IJB

3.1 The powers which are reserved to the IJB or its committees are a mixture of those which must, in terms of statute, be reserved, and those which the IJB has, itself, chosen to reserve. Powers which are not reserved are delegated, in accordance

with the provisions of this Scheme.

- 3.2 The following is a comprehensive list of what is reserved to the IJB:
  - a) The making of directions by the IJB in terms of Section 26 and 27 of the Act;
  - b) To change the name of the IJB
  - c) To receive any certified abstract of the IJB's annual accounts;
  - d) Approval of any investment strategy and annual investment report;
  - e) The approval of any Expenses Policy and the entitlement of Members and others to such expenses;
  - f) Any other functions or remit which is, by legal or regulatory requirement, bound to be undertaken by the Board itself;
  - g) To establish such committees, sub-committees and joint committees as may be considered appropriate to conduct business;
  - h) The approval annually of the Integrated Revenue Budget and Strategic Plan;
  - The incurring of any NET new expenditure not provided for in the estimate of revenue expenditure unless, such expenditure is reported to and approved by the Board;
  - j) The approval or amendment of the Board's Standing Orders, Financial Regulations and this Scheme of Delegation;
  - k) The appointment (but not dismissal) of the Chief Officer and Chief Finance Officer subject always to the relevant policies and procedures of the Aberdeenshire Council and NHS Grampian as the case may be;
  - I) The approval of amendment of the Strategic Plan including the Integrated Revenue Financial Plan;
  - m) To fix and amend a programme of Board and committee meetings; and
  - n) Any matters reserved to the Board by Standing Orders, Financial Regulations and other schemes approved by the Board.

#### **Committees**

- 3.3 The IJB have appointed a number of Committees and Sub-Committees. The agreed Terms of Reference for these Committees are as follows:-
  - 1. Appointments Committee
  - 2. Audit Committee
  - 3. Clinical & Adult Social Work Governance Committee
    - It shall be competent for a Committee, in relation to any matter,
    - a. Instead of taking a decision, to make a recommendation to the IJB in which event that matter shall be determined by the IJB after consideration of the Committee's recommendation.
    - b. Consult with any other Committee prior to taking a decision.

All Committees should follow the Standing Orders where silent in the Terms of Reference.

# **Appointment Committee**

#### **Terms of Reference**

# Introduction

- 1.1 The Appointment Committee is a committee of the Aberdeenshire Integration Joint Board and is established to make decisions about permanent senior appointments to the Aberdeenshire Health and Social Care Partnership.
- 1.2 The Aberdeenshire Health and Social Care Partnership is the name given to the partnership comprising Aberdeenshire Council and NHS Grampian, the purpose of which is to deliver health and social care services on behalf of the Aberdeenshire Integration Joint Board.

#### Constitution

2.1 The Committee membership comprises two from Aberdeenshire Council and two from Grampian Health Board, all four being members of the Aberdeenshire Integration Joint Board (one being the chair).

#### **Functions**

- 3.1 The following functions are delegated to this Committee:
  - a) The power to decide all matters relating to the management and determination of permanent Senior Appointments to the Aberdeenshire Health and Social Care Partnership. Senior Appointments are those from (and including) the level or equivalent level of a Partnership Manager and above. Following determination the successful applicant may be employed either by Aberdeenshire Council or Grampian Health Board.

#### **Audit Committee**

#### **Terms of Reference**

#### Introduction

- 1.1 The Audit Committee is identified as a Committee of the Integration Joint Board (IJB). The approved Terms of Reference and information on the composition and frequency of the Committee will be considered as an integral part of the Standing Orders.
- 1.2 The Committee will be known as the Audit Committee of the IJB and will be a Standing Committee of the IJB.

#### Constitution

- 2.1 The IJB shall appoint the Committee. The Committee will consist of not less than six members of the IJB. Four members will be voting members of the IJB and two members will be non -voting members of the IJB. The Committee will include an equal number of voting members from NHS Grampian and Aberdeenshire Council. The Committee will follow the Integration Joint Board Standing Orders unless otherwise provided for in these Terms of Reference.
- 2.2 The term of membership should normally be a maximum of 3 years, other than to support the Committee's succession planning and maintenance of experience levels.
- 2.3 The Committee should include members with a balance of skills, knowledge and experience including financial awareness and understanding, risk and internal controls assurance, and corporate governance issues. Members should have the ability to question, probe, challenge, and seek clarification of complex issues. Members will be supported through training and development sessions to gain and enhance these skills.

#### Chair

3.1 The Committee will be chaired by a voting member of the IJB (but not the Chair or Vice Chair) and will rotate between NHS Grampian and Aberdeenshire Council on an 18 month basis, in line with the term for the Chair of the IJB, selected from the organisation which does not currently Chair the IJB.

# Quorum

# 4.1 Full Capacity

The meeting will be considered quorate when the Chair or Vice Chair and a minimum of 3 (three) other committee Members are present. There should be a minimum of one voting member from each of the constituent authorities. No business shall be transacted unless the minimum number of Members are present. For the purposes of determining whether a meeting is quorate, Members attending by either video or tele-conference link will be determined to be in attendance.

# 4.2 Temporary Vacancy

In the event that there is a temporary vacancy, and the quorum is not met as above, then a minimum of 3 (three) members will suffice provided that there is one voting member of each of the constituent authorities.

#### 4.3. Voting (Full Capacity)

Refer to principles set out in the Standing Orders.

#### 4.4 Voting (Temporary Vacancy)

In the event that Committee wish to vote on a matter and there is a temporary vacancy in the voting membership of the Audit Committee resulting in only 3 voting members being present, the Audit Committee, after consideration of any potential risks in delaying a decision, will decide which of the following procedures to follow:-

- a. If all 3 (three) members are in agreement, then a decision may be confirmed; or
- b. If there is any dissent in the decision:-
  - (i) the committee may take a decision by the casting of lots; or
  - (ii) to instruct the Chief Officer to bring back a further report with such clarification as may be appropriate to a future meeting of the Audit Committee

By way of clarification the person presiding at the meeting <u>does not</u> have a second or casting vote.

# Attendance at Meetings

- 5.1 The Chief Officer, Chief Finance Officer, Chief Internal Auditor and other Professional Advisors and senior officers will be required to attend meetings as a matter of course. External Audit or other persons shall be expected to attend meetings at the invitation of the Committee. The Chair and Vice-Chair or any other IJB member may attend meetings if they wish.
- 5.2 The external auditor will attend at least one meeting per annum.
- 5.3 The Committee may co-opt additional advisors as required.

# Meeting Frequency

- 6.1 Committee Officer support for the Audit Committee will be provided by Aberdeenshire Council.
- The Committee will meet at least four times each financial year. A calendar of meetings for each year will be agreed and distributed to Committee members. There should be at least one meeting a year, or part thereof, where the Committee is given the opportunity to meet the external and Chief Internal Auditor on an informal basis without other senior officers present.
- Agenda items and reports will be requested four weeks in advance of the meeting date and must be received by the administrator within two weeks of the meeting date. Agenda items and reports will be requested according to a pre-agreed annual timetable, to comply with agenda publication.

All papers must clearly state:

- The agenda reference;
- The author;
- The purpose of the paper;
- The matters the Committee is asked to consider;
- The actions on which the Committee is asked to advise, including whether the report is public or not public.

The agenda and associated papers will be circulated to members, a minimum of one week ahead of the meeting.

Late agenda items and reports will be sent to the Chair to determine whether they will be included at the meeting.

A formal minute of the Committee meeting will be taken. The draft minute will be included on the agenda for the next meeting of the Committee for approval. The Minute will be considered, corrected, if need be, and where they are held to be a correct record of the Meeting, they will be signed where possible, by the person presiding and given to the Committee Officer. Where the person presiding is no longer available the Minute will be signed by the current Chair.

The minutes and reports will follow an agreed template to ensure consistency with other IJB committees.

- 6.4 If the Chief Officer or Chief Finance Officer consider that a Report (or any part of a report) relates to an item of business which, in their option, the Meeting is likely to consider in private, the report (or part of that report) will either be marked:-
  - "Not for Publication" and every copy of the report (or the appropriate part of a report ) will reference a description of the exempt information the Report contains, in keeping with the law; or
  - "Confidential" and every copy of the report (or the appropriate part of the report) will state that it contains confidential information.

Papers which contain confidential information will not be available to the general public. The types of information that are classed as exempt can be found in Part 5 of this Handbook.

The Committee may arrange additional workshops and training sessions to support its work and development of members.

# **Authority**

- 7.1 The Committee may carry out investigations and call upon officers to give evidence, explanations, or provide written reports as appropriate for the purpose of providing information to assist the Audit Committee in fulfilling its role of advising the IJB and Accountable Officer.
- 7.2 The Committee has explicit authority to investigate any matter within its remit, and set its own work programme. It shall be provided with the resources it needs to do so, and shall be given full and timely access to information relevant to its function. The Committee may obtain external professional advice where considered necessary.

# **Duties**

8.1 The purpose of the Committee is to assist the IJB to deliver its responsibilities for the conduct of public business, and the stewardship of funds under its control. In particular, the Committee will seek to provide assurance to the IJB that appropriate systems of internal control are in place to ensure that: business is conducted in accordance with the law and proper standards; public money is safeguarded and properly accounted for; Financial Statements are prepared timeously, and give a true and fair view of the financial position of the IJB for the period in question; and reasonable steps are taken to prevent and detect fraud and other irregularities. The Committee will review the level of assurance provided over the internal control and corporate governance arrangements (e.g. Standing Financial Instructions) of the IJB and make recommendations to the IJB regarding the signing of the Annual Governance Statement. The Committee will also review the Strategic Planning arrangements of the IJB.

- 8.2 The Committee will approve the selection and appointment of the IJB's Internal Audit function.
- 8.3 The Committee will receive and consider the annual internal and external audit plans on behalf of the IJB, and shall receive reports on work planned, progressed, and completed by Internal and External Auditors.
- 8.4 The Committee shall consider matters arising from Internal and External Audit reports and any investigations into fraud or other irregularities, and shall review on a regular basis the implementation of actions planned by management in response to these matters.
- 8.5 The Committee will monitor the effectiveness of the risk management arrangements implemented by the IJB, including strategy, assessment, monitoring and reporting of risk.
- 8.6 The Committee will consider and approve the annual financial accounts of the IJB. The Committee will then inform the IJB that the annual financial accounts have been approved.
- 8.7 The Committee will obtain assurance that the Senior Management Team, maintain effective controls within their services which comply with financial procedures and regulations.
- 8.8 The Committee shall develop and oversee arrangements for reporting the assurance gained from its activities for the information of the relevant Scrutiny and Audit Committees within NHS Grampian and Aberdeenshire Council, and obtaining the assurance it requires from these bodies, including sharing relevant audit reports where appropriate.
- 8.9 The Committee may at its discretion set up short term working groups for review work. Membership of the working group will be open to anyone whom the Committee considers will assist in the task assigned.
  - The working groups will not be decision making bodies or formal committees but will make recommendations to the Audit Committee.
- 8.10 The Committee may make recommendations regarding improvements to the activities, internal controls and governance of the IJB and its services.
- 8.11 The Committee shall maintain awareness of relevant Audit Scotland and other national audit, inspection and regulatory advice, and consider the potential implications of the outcomes of this work for the IJB's internal control and governance arrangements.
- 8.12 The Committee may at its discretion review arrangements pertaining to Health & Safety, Information Security, Performance or specific Project Work of the IJB in order to obtain assurance of the adequacy of arrangements in these areas.

#### Review

9.1 The Terms of Reference will be reviewed once in the first year and then on an

- ongoing basis to ensure their ongoing appropriateness in dealing with the business of the IJB.
- 9.2 The Committee will review its effectiveness, and consider its development and training needs at least annually.

#### The Aberdeenshire Clinical and Adult Social Work Governance Committee

#### **Terms of Reference**

## Purpose

1.1 Aberdeenshire Integration Joint Board (IJB) has a statutory duty to ensure services directly provided or commissioned by Aberdeenshire Health and Social Care Partnership are safe, effective and person centred. This duty applies to all functions delegated to the IJB under the terms of the <a href="Public Bodies">Public Bodies</a> (Joint Working) (Scotland) Act 2014 as set out in the <a href="Health & Social Care Integration Scheme for Aberdeenshire">Health & Social Care Integration Scheme for Aberdeenshire</a>.

The national <u>Clinical and Care Governance Framework</u> defines clinical and care governance as:

"the process by which accountability for the quality of health & social care is monitored and assured"

- 1.2 The Aberdeenshire Clinical and Adult Social Work Governance Committee is a formal sub-committee of the IJB which will:
  - (i) Provide leadership for the development and implementation of clinical and adult social work governance within the Partnership
  - (ii) Ensure service users and their representatives and staff at all levels of the organisation are engaged with clinical and adult social work governance
  - (iii) Assure the IJB that appropriate clinical and adult social work governance mechanisms are in place and functioning effectively throughout the organisation

To deliver this remit, the Clinical and Adult Social Work Governance Committee will:

- Promote culture, policy and practice across the Health & Social Care
  Partnership which supports the development and delivery of safe, effective,
  person centred care
- Direct and oversee the implementation of the Clinical and Care Governance
   Framework across integrated health & social care services in Aberdeenshire
- Seek assurance that safe, effective, person centred care is delivered by the Health & Social Care Partnership by receiving and scrutinising regular reports from the Clinical and Adult Social Work Governance Group
- Seek assurance that due process has been followed in the development of policy applicable to the Health & Social Care Partnership before recommending approval to the Integration Joint Board.

- Seek assurance that relevant national policy initiatives have been implemented effectively by the Health & Social Care Partnership
- Participate in the process of approval of local clinical and adult social work guidelines and procedures where they affect a range of services or professional groups, have wider organisational significance, or differ from national guidance due to local circumstances Item:
- Monitor issues that may impact on the delivery of safe, effective, person centred care and seek assurance that identified risk is mitigated by appropriate action
- Prepare and submit a quarterly report to the Integration Joint Board, highlighting key areas of clinical and adult social work governance activity and any areas of concern
- Work with the Clinical and Adult Social Work Governance Group to develop and deliver an annual clinical and adult social work governance improvement plan 2.

## **Membership**

- 2.1 The Clinical and Adult Social Work Governance Committee membership will be representative of the functions delegated to the Integration Joint Board by NHS Grampian and Aberdeenshire Council and will include:
  - Six Aberdeenshire IJB members representative of:
    - 1. NHS Grampian 2 members
    - 2. Aberdeenshire Council 2 members
    - 3. Public, carer, third sector or staff representative 2 members
  - Professional advisors to the Committee:
    - Aberdeenshire HSCP Chief Officer (or nominated deputy)
    - Chair/Deputy Chair of Aberdeenshire Clinical and Adult Social Work Governance Group
    - Aberdeenshire Chief Social Work Officer (or nominated deputy)
    - Aberdeenshire Clinical Governance Lead (or nominated deputy)
    - o Aberdeenshire HSCP Quality Improvement & Assurance Facilitator
    - Aberdeenshire HSCP Strategic Development Officer

Other Officers may be invited to attend by invitation or by arrangement with the Chair.

The Committee will follow the Integration Joint Board Standing Orders unless otherwise provided for in these Terms of Reference.

3.1 The Chair and Deputy Chair of the Clinical and Adult Social Work Governance Committee will be appointed by the Integration Joint Board from the IJB membership at a fully constituted meeting. Tenure will be a period of two years.

## Responsibilities of Members

- 4.1 Members of the Clinical and Adult Social Work Governance Committee are expected to attend and actively participate in meetings and activities defined above to enable the Committee to fulfil its remit effectively.
- 4.2 If a Committee member is unable to attend, feedback, comments or points raised on meeting business can be submitted to the Chair for consideration.
- 4.3 The Committee may invite others with appropriate expertise, knowledge or understanding to attend the meeting to inform discussion, provide assurance and support decision making on specific agenda items where necessary.
- 4.4 It is recognised that Committee members may occasionally be called to respond to urgent matters during the meeting but it is politely requested that routine business is not carried out while in attendance.

#### Quorum

# 5.1 Full Capacity

The meeting will be considered quorate when the Chair or Vice Chair and a minimum of 3 (three) other committee members are present. There should be a minimum of one voting member from each of the constituent authorities. No business shall be transacted unless the minimum number of Members are present. For the purposes of determining whether a meeting is quorate, Members attending by either video or tele-conference link will be determined to be in attendance.

# 5.2 Temporary Vacancy

In the event that there is a temporary vacancy, and the quorum is not met as above, then a minimum of 3 (three) members will suffice provided that there is one voting member of each of the constituent authorities.

# 5.3 Voting (Full Capacity)

Refer to principles set out in the Standing Orders.

# 5.4 <u>Voting (Temporary Vacancy)</u>

In the event that Committee wish to vote on a matter and there is a temporary vacancy in the voting membership of the Clinical and Adult Social Work Governance Committee, resulting in only 3 voting members being present, the Clinical and Adult Social Work Governance Committee, after consideration of any potential risks in delaying a decision, will decide which of the following procedures to follow:-

- If all 3 (three) members are in agreement, then a decision may be confirmed;
   or
- b. If there is any dissent in the decision:-

- (i) The committee may take a decision by the casting of lots; or
- (ii) To instruct the Chief Officer to bring back a further report with such clarification as may be appropriate to a future meeting of the Clinical and Adult Social Work Governance Committee

By way of clarification the person presiding at the meeting <u>does not</u> have a second or casting vote.

# **Meetings**

- 6.1 Committee Services support for the Clinical and Adult Social Work Governance Committee will be provided by Aberdeenshire Council.
- The Committee will meet quarterly, with meetings scheduled between those of the Clinical and Adult Social Work Governance Group. A calendar of meetings for each year will be agreed and distributed to Committee members. Additional meetings may be convened by the Chair whenever necessary. Meetings will be structured around standing agenda items to ensure that all aspects of clinical and care governance are considered.
- 6.3 Agenda items and reports will be requested according to a pre-agreed annual timetable, to comply with agenda publication deadlines.

All papers must clearly state:

- the agenda reference
- the author
- the purpose of the paper
- the matters the Committee is asked to consider
- the actions on which the Committee is asked to advise, including whether the report is public or not public.

The agenda and associated papers will be circulated to members a minimum of one week ahead of the meeting. Late agenda items and reports will be sent to the Chair to determine whether they will be included at the meeting. A formal minute of the Committee meeting will be taken. The draft minute will be circulated to the next meeting of the Committee for approval. The minutes and reports will follow an agreed template to ensure consistency with other IJB Committees.

The Minute will be considered, corrected, if need be, and where they are held to be a correct record of the Meeting, they will be signed where possible, by the person presiding and given to the Committee Officer. Where the person presiding is no longer available the Minute will be signed by the current Chair.

- 6.4 If the Chief Officer or Chief Finance Officer consider that a Report (or any part of a report) relates to an item of business which, in their option, the Meeting is likely to consider in private, the report (or part of that report) will either be marked:-
  - "**Not for Publication**" and every copy of the report (or the appropriate part of a report ) will reference a description of the exempt information the Report contains, in keeping with the law; or

"Confidential" and every copy of the report (or the appropriate part of the report) will state that it contains confidential information.

Papers which contain confidential information will not be available to the general public.

The types of information that are classed as exempt can be found in Part 5 of this Handbook.

## **Authority**

- 7.1 The Clinical and Adult Social Work Governance Committee has the authority to investigate any matter that falls within its terms of reference and to obtain professional and legal advice as required. To this end, the Committee is authorised to seek and obtain any information it requires from employees of Aberdeenshire Council, NHS Grampian or any organisation commissioned by Aberdeenshire HSCP.
- 7.2 The Committee may form one or more sub-groups to support the Clinical and Adult Social Work Governance function within the Partnership.

#### **Duties**

- 8.1 The Clinical and Adult Social Work Governance Committee is responsible for the oversight of clinical and adult social work governance within Aberdeenshire Health and Social Care Partnership. Specifically, it will:
  - 1. Agree the Partnership's clinical and adult social work governance priorities
  - 2. Monitor, scrutinise and give direction to the clinical and adult social work governance activities of the Partnership
  - 3. Check and report to the IJB that effective structures are in place to underpin clinical and adult social work governance
  - 4. Review and monitor the effectiveness of clinical and adult social work governance systems and ensure action is taken to address any areas of concern
  - 5. Ensure that an effective system is in place to manage clinical and adult social work governance risks, including emergency and service/business continuity planning, in line with the agreed Risk Management Strategy for the IJB
  - 6. Ensure that an effective system is in place to manage clinical and adult social work audit and service improvement activity
  - 7. Direct and scrutinise clinical and adult social work audit and service improvement activity
  - 8. Seek assurance of the effectiveness of mechanisms for engagement with health and social care partners, key stakeholders and the public
  - 9. Seek assurance of the effectiveness of mechanisms for the management of complaints and adverse events
  - 10. Seek assurance that accountable officers take effective action

- based on learning from adverse events and complaints
- 11. Monitor clinical and adult social work performance indicators to gain assurance across the whole health and social care system
- Monitor audit and inspection reports from external monitoring and scrutiny bodies in relation to clinical and adult social work governance
- 13. Seek assurance that effective action has been taken by accountable officers on any requirements, recommendations or issues arising from relevant audit and inspection reports
- 14. Receive reports on child and adult protection activities
- 15. Escalate to the IJB any clinical and care governance risk that is not adequately mitigated by the control measures identified

# Reporting Arrangements

- 9.1 The Chair of the Clinical and Adult Social Work Governance Committee will be a member of and will report directly to the IJB.
- 9.2 A quarterly written report will be provided to the IJB, and any other relevant bodies or individuals, on any matter which is agreed as requiring escalation
- 9.3 The role, function and membership of the Committee will be reviewed annually to ensure it continues to develop, perform its duties and fulfil its purpose effectively.
- 9.4 An organisational structure showing the main reporting and accountability lines for clinical and adult social work governance is available.

Version: This CASWG Committee ToR was approved by the IJB on the 1st June 2022

#### Section Two - Chief Officer and Key Other Officer Roles

This section narrates the key roles of officers and the delegations to the Chief Officer.

## 1. Chief Officer

- 1.1 As a matter of law, the Chief Officer is employed by either Aberdeenshire Council or NHS Grampian and seconded to the IJB as its only member of staff.
- 1.2 The Chief Officer is accountable to the IJB as its Chief Officer and also holds positions of authority and responsibility in both council and health board. They are managed jointly by the Chief Executives of the council and the health board.
- 1.3 The Chief Officer has the following delegated powers and responsibilities:
  - a) The statutory position of Chief Officer in terms of section 10 of the Public Bodies (Joint Working) (Scotland) Act 2014
  - b) Principal Advisor to and officer of the IJB and its committees providing overall strategic and operational advice to the IJB.

- Liaising with the Chair and Vice-Chair in relation to the preparation of agendas and reports for meetings of the IJB and its committees
- d) Implementing the Integration Scheme and responsibility for management and performance of services delegated to the IJB by Aberdeenshire Council and NHS Grampian with the exception of acute services.
- e) Developing, implementing and reviewing the Strategic Plan and other policies determined by the IJB
- f) Implementing decisions, instructions and directions made by the IJB, and, where specifically authorised by the IJB and after consultation with the Chair and Vice-Chair, to determine or amend the exact wording of directions within parameters set by the Board when delegating that authority
- g) Establishing and supporting the Strategic Planning Group
- h) Appointing a competent substitute to act in his or her absence or incapacity
- i) In consultation with the IJB Chair and Vice Chair, determining whether a matter is politically sensitive or controversial
- j) In consultation with the IJB Chair, Vice-Chair, taking urgent action on behalf of the IJB under section 4.5.
- Collecting, monitoring and periodic reporting to the IJB and the public of service performance and providing service information for the annual statutory performance report
- Collating service and financial performance information and providing the annual statutory performance report for IJB approval
- m) Issuing directions to the council and health board on the IJB's instructions and monitoring and reporting on compliance by the council and health board
- Liaising and negotiating with the council, health board and the other NHS Grampian IJBs in relation to the efficient and economical use of premises and other assets
- o) Maintaining the IJB's risk register, monitoring risk and taking mitigating action, reporting on risk to the IJB
- p) Representing the IJB on the Community Planning Partnership Board and ensuring the IJB's participation in the community planning process
- q) Clinical and care governance and adherence to professional standards and regulatory regimes
- r) Workforce development
- s) Ensuring adequate provision of professional, technical and administrative support services by the council or health board
- t) Ensuring the IJB's compliance with statutory regimes such as public sector equality duties, freedom of information, data protection and

- climate change
- u) Providing and operating a complaints handling procedure and liaising with and complying with the requirements of the SPSO
- v) Implementing a public and stakeholder engagement strategy and communications and public relations arrangements (including an IJB website)
- w) Business continuity planning
- x) Liaising with other IJBs in the NHS Grampian area, and with the council and the health board, in relation to both integrated and non-integrated functions
- y) Dealing with inspections by regulatory authorities
- z) Responding to consultations on non-controversial or technical issues, subject to those responses being reported to the next IJB meeting for information
- aa) Where clarification is required, determining which matters are operational or otherwise.
- 1.4 The Chief Officer has a direct line of accountability to the Chief Executives of NHS Grampian and Aberdeenshire Council for the delivery of integrated services. The Chief Officer is responsible for ensuring that progress is being made in achieving the national outcomes and that any locally delegated responsibilities for health and wellbeing and for measuring, monitoring and reporting on the underpinning measures and indicators (including financial) that will demonstrate progress.
- 1.5 The Chief Officer is responsible for ensuring that the decisions of the Board are carried out.
- 1.6 The Chief Officer shall ensure that the Financial Regulations and all associated procedure manuals and documents are made known to appropriate staff members and shall ensure full compliance with them.
- 1.7 The Chief Officer shall prepare budgets following consultation with the Chief Finance Officer. The Chief Officer is also responsible for the preparation of Service Plans and relevant business cases relating to the Services. The Chief Officer shall ensure that the Chief Finance Officer is informed of financial matters that will have a significant impact on the Services, seeking financial advice where necessary.
- 1.8 The Chief Officer is a non-voting member of the IJB, and a member and chair of the Strategic Planning Group.

#### Chief Officer Powers in Relation to Urgent Matters

- 1.9 The Chief Officer is authorised to take a decision on any matter, which in their professional judgement requires to be determined by the IJB, or any Committee or Sub-Committee but by reason of special urgency it is impractical to convene a meeting of the IJB, Committee or Sub-Committee. This power is subject to consultation with:
  - a) The Chief Executives of both NHS Grampian and Aberdeenshire

Council,

b) The Chair and Vice Chair of the IJB, or relevant Committee or Sub-Committee.

Any decision taken by the Chief Officer under this delegation which would normally be taken by the IJB, Committee or Sub-Committee should be reported to the next meeting for information.

1.10 The Chief Officer may take a decision on any matter which, in their professional judgement requires to be determined by the IJB, or any Committee or Subcommittee but, by reason of special urgency, it is impractical to convene a meeting of such, without the need for prior consultation as provided for in 1.9 where such prior consultation is not reasonably practical and such decision shall be reported to the next meeting of the IJB, Committee or Sub-Committee.

# General Restrictions on Exercise of Delegated Powers by the Chief Officer

- 1.11 a) If any decision proposed under delegated powers could lead to a budget being exceeded by more than indicated to the IJB through budget monitoring reports or other reports previously reported to the IJB, the Chief Officer must consult with the Chair and Vice Chair of the Board before exercising the delegated power unless in the circumstances provided for in 1.9.
  - b) The Chief Officer must ensure that the Chair and Vice Chair of the Board are consulted on matters of a controversial nature. Where appropriate and possible, such matters should be referred to the Board or the appropriate committee for decision.
- 1.12 Delegated powers should not be exercised by the Chief Officer where any decision would represent:
  - a) A departure from Board policy or procedure;
  - b) A departure from the Strategic Plan or would be contrary to a previous decision or standing instruction of the Board or its committees;
  - c) A significant development of policy or procedure. The only exception to this is in the case of urgency where the Chief Officer may, after consultation with the Chair and Vice Chair of the Board and the Chief Finance Officer, exercise delegated powers. Should such powers be exercised in urgent circumstances, a report will be submitted to the next appropriate meeting for noting.

# **Deputies**

1.13 Any deputy of the Chief Officer is authorised to exercise all powers delegated to the Chief officer herein in the absence of the Chief Officer or with the specific written authority of the Chief Officer.

# 2. Key Other Roles

These officers are not officers of the IJB, however they are key roles and provide professional services to the IJB. This section of this document sets out their role and

#### 2.1 Chief Finance Officer

- 2.1.1 The Chief Finance Officer cannot be a member of staff of the IJB and does not have to be an officer of the council or the health board. It is for the IJB to determine the appropriate appointment and contractual arrangements in consultation with the council and the health board.
- 2.1.2 The local authority financial and accounting regime is applied as a matter of law to the IJB. The Chief Finance Officer therefore carries the duties of what in council terms is the "Section 95 Officer". That position includes ensuring compliance with relevant legislation and guidance, including Part VII of the Local Government (Scotland) Act 1973, Part I of the Local Government in Scotland Act 2003 and the Local Authority Accounts (Scotland) Regulations 2014.
- 2.1.3 The Chief Finance Officer has the following responsibilities:-
  - a) The statutory responsibility for the proper administration of the IJB's financial affairs in terms of section 95 of the Local Government (Scotland) Act 1973, as applied by section 13 of the Public Bodies (Joint Working) (Scotland) Act 2014
  - b) Establishing, maintaining, applying and reviewing Financial Regulations
  - c) Accounting record-keeping, financial management and accounting control systems
  - d) Ensuring that proper accounting practices are observed in the financial administration of the IJB
  - e) Providing strategic financial advice, planning, forecasting and direction
  - f) Liaising and negotiating with the council and the health board in relation to their annual budget contributions, efficiencies, budget pressures and in year and end-of-year adjustments along with the Chief Officer.
  - g) Financial performance and budgets -monitoring, periodic reporting and providing financial information for the statutory annual performance report
  - h) Provision of the annual financial statement required to accompany the Strategic Plan
  - i) Preparing the Annual Accounts and abstract and accompanying statements, signing them and securing their submission for external audit
  - Publishing the unaudited Annual Accounts for public inspection, advertising their availability and responding to any objections made to them
  - k) Reporting the audited Annual Accounts and external auditor's report to the IJB Audit Committee for approval, arranging for their signature, submitting them to the external auditor and publishing them
  - Securing compliance with relevant statutory financial regimes, including Best Value and Following the Public Pound
  - m) Reporting to the IJB and publishing any report or special report or the

- findings of the Accounts Commission following any hearing on a report or special report, in terms of Part VII of the Local Government (Scotland) Act 1973
- n) Liaison with and supporting the IJB's Internal Auditor and the Audit Committee in relation to the internal audit function
- o) Liaison and cooperation with the IJB's external auditor and the Accounts Commission
- 2.1.4 The Chief Finance Officer is a non-voting member of the IJB.

# 2.2 Internal Auditor

- 2.2.1 The Internal Auditor cannot be a member of staff of the IJB and does not have to be an officer of the council or the health board. It is for the IJB to determine the appropriate appointment and contractual arrangements in consultation with the council and the health board.
- 2.2.2 The local authority financial and accounting regime is applied as a matter of law to the IJB. That requires the IJB to establish and maintain a professional and independent internal auditing service in accordance with recognised standards and practices in relation to internal auditing. The post is also governed by Part VII of the Local Government (Scotland) Act 1973, Part I of the Local Government in Scotland Act 2003 and the Local Authority Accounts (Scotland) Regulations 2014.
- 2.2.3 The Internal Auditor has the following delegated powers and responsibilities:-
  - 2.2.3.1 Ensuring the provision of a professional and independent internal auditing service in accordance with recognised standards and practice.
  - 2.2.3.2 Obtaining approval of the IJB Internal Audit Charter
  - 2.2.3.3 Preparing, submitting for approval, implementing and reporting on an annual Internal Audit Plan
  - 2.2.3.4 Supporting and advising the Audit Committee in fulfilling its remit
    - 2.2.3.5 Liaising with and supporting the Chair of the Audit Committee in relation to that role
    - 2.2.3.6 Conducting investigations and enquiries as required by the Internal Audit Plan
    - 2.2.3.7 Reporting to the Audit Committee on investigations carried out and on other matters within its remit
    - 2.2.3.8 Reviewing and reporting annually on the IJB's system of governance, risk management and internal control
    - 2.2.3.9 Liaising and cooperating with the Internal Auditors for the council, the health board and other IJBs in the NHS Grampian area
    - 2.2.3.10 Liaising and cooperating with the IJB external auditors
    - 2.2.3.11 Advising the IJB and its committees and officers in relation to risk
- 2.2.4 The Internal Auditor is not a member of the IJB.

# 2.3 Standards Officer

- 2.3.1 The Standards Officer cannot be a member of staff of the IJB and does not have to be an officer of the council or the health board. It is for the IJB to determine the appropriate appointment and contractual arrangements in consultation with the council and the health board.
- 2.3.2 The Standards Officer is a statutory position required under regime of ethical standard in public life in Scotland. It carries statutory duties as well as additional duties contained in guidance by the Standards Commission.
- 2.3.3 The Standards Officer has the following delegated powers and responsibilities:
  - a) The statutory role defined in the Ethical Standards in Public Life etc. (Scotland) Act 2000 (Register of Interests) Regulations 2003
  - b) Having regard to and applying the Standards Commission's Advice on the role of a Standards Officer
  - c) Ensuring IJB members are eligible for membership
  - d) Establishing, maintaining, reviewing and publishing a Register of Interests for IJB members
  - e) Maintenance and regular review of a Code of Conduct for IJB members
  - f) Advising and assisting IJB members in relation to the Register of Interests and the Code of Conduct
  - g) Ensuring IJB compliance with its other general duties under the Ethical Standards in Public Life etc. (Scotland) Act 2000 and related statutory regulations and guidance
  - h) Liaising with the Commissioner for Ethical Standards in Public Life and the Standards Commission
  - i) Arranging Clerking of the IJB and its committees and sub-committees
  - j) Making and reviewing Standing Orders for meetings of the IJB, the Strategic Planning Group and Committees, to include their remits, membership and matters reserved to the IJB
  - k) Making, reviewing and updating a Scheme of Delegated Powers to Officers with approval of the IJB

# Aberdeenshire Integration Joint Board Part 3 - Financial Regulations

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# 1. Introduction and Interpretation

- 1.1 The Public Bodies (Joint Working) (Scotland) Act 2014 was passed by the Scottish Parliament on 25 February 2014 and provides a framework for the effective integration of adult health and social care services. The Act required the submission of a partnership agreement, known as the Integration Scheme for approval by the Scottish Government. Following a detailed consultation process, the scheme was submitted for approval in December 2015. Following approval by the Cabinet Secretary for Health, Wellbeing and Sport an Order was laid before the Scottish Parliament on 8 January 2016 and the Aberdeenshire Integration Joint Board was established as an autonomous legal entity with effect from 6 February 2016.
- 1.2 Aberdeenshire Council and NHS Grampian recognise that they each have continuing financial governance responsibilities, and have agreed to establish Aberdeenshire Integration Joint Board as a 'joint arrangement' as defined by IFRS 11. IFRS 11 is the international accounting standard that clarifies the reporting procedures that apply where parties recognise the rights and obligations arising from the arrangements.
- 1.3 The main objective of these Financial Regulations is to detail the financial responsibilities and policies and procedures that govern the Integration Joint Board. Representatives and Committees of Aberdeenshire Integration Joint Board must comply with these Financial Regulations in dealing with the financial affairs of Aberdeenshire Integration Joint Board.
- 1.4 The Aberdeenshire Integration Joint Board will appoint a Chief Officer who will be the accountable officer of the Integration Joint Board in all matters except finance where there will be joint accountability with the Chief Finance Officer. The Chief Officer will be accountable to the Chief Executives of NHS Grampian and Aberdeenshire Council.
- 1.5 The Aberdeenshire Integration Joint Board will appoint a Chief Finance Officer who will be the proper officer for the purposes of Section 95 of the Local Government (Scotland) Act 1973. The Chief Finance Officer has a statutory duty to ensure that proper financial administration of the financial affairs of Aberdeenshire Integration Joint Board is maintained. The Aberdeenshire Integration Joint Board will have regard to the current CIPFA guidance on the role of the Chief Finance Officer in Local Government. http://www.cipfa.org/policy-and-quidance/reports/the-role-of-the-chief- financialofficer-in-local-government
- 1.6 Should any difficulties arise regarding the interpretation or application of these financial regulations, individuals must seek advice from the Chief Finance Officer before any action is taken.
- 1.7 The Aberdeenshire Integration Joint Board will commission services from Aberdeenshire Council and NHS Grampian. The management of services within each of these organisations will continue to be governed by the existing Standing Financial Instructions, Financial Regulations, Schedule of Reserved Decisions, Operational Scheme of Delegation and any other extant financial procedures approved by their respective Governance structures. Officers, staff, committees, councillors and non-executive members of these organisations should ensure they comply with their respective financial governance arrangements.
- 1.8 Any breach or non-compliance with these Regulations must, on discovery, be reported immediately to the Chief Officer or the Chief Finance Officer of

- Aberdeenshire Integration Joint Board. They must then consult with the NHS Grampian Chief Executive and Aberdeenshire Council Chief Executive or another nominated or authorised person as appropriate to decide what action should be taken.
- 1.9 For the avoidance of doubt the breach of or non-compliance with these Regulations may result in disciplinary action being taken against the relevant individuals in line with the policies of the employing organisation.

### 2. Financial Planning and Management

### 2.1 Annual Budget

- 2.1.1 The Chief Finance Officer will report to Aberdeenshire Integration Joint Board each year on the process, timetable, format and key assumptions in drafting the annual budget.
- 2.1.2 The Chief Finance Officer of Aberdeenshire Integration Joint Board, Section 95 Officer of Aberdeenshire Council and the Director of Finance of NHS Grampian will agree a timetable for preparation of the annual budget of Aberdeenshire Integration Joint Board and the exchange of information between Aberdeenshire Integration Joint Board, Aberdeenshire Council and NHS Grampian.
- 2.1.3 The Chief Officer will submit annually to the Board a Strategic Plan setting out proposals for the delivery of services within the remit of the Board for, at minimum, the next 3 years. This will include the Integrated Budget and the notional budget for directed hospital services. The Strategic Plan will detail the reason for any projected surplus or deficit and how this will be used / addressed.
- 2.1.4 The Chief Officer and the Chief Finance Officer will develop a case for the Integrated Budget based on the Strategic Plan and present it to the Council and NHS Grampian for consideration and agreement as part of the annual budget setting process.
- 2.1.5 The Chief Finance Officer will prepare and issue guidance, instructions and a timetable to all involved in the preparation of the annual budget.
- 2.1.6 The method for determining the final payment i.e. the initial base budget as at 1 April will be contingent on the respective financial planning processes of Aberdeenshire Council and NHS Grampian. The Integration Scheme stipulates that the baseline payment to the Board will be formally advised by the Partners by 28th February each year.
- 2.1.7 Following agreement of the Strategic Plan by the Board, and confirmation of the Integrated Budget by the Partners, the Chief Officer will provide Directions in writing to the Partners regarding operational delivery of the Strategic Plan. The Directions will include the functions that are being directed, how they are to be delivered and the resources to be used in delivery of the direction in accordance with the Strategic Plan. A log of all Directions will be kept by the Chief Officer.
- 2.1.8 The responsibility for delivering the delegated services for Aberdeenshire Integration Joint Board to Aberdeenshire Council and NHS Grampian shall lie with the Chief Officer of the Integration Joint Board.

### 2.2 Accounting Policies

2.2.1 The IJB is subject to the audit and accounts provisions of a body under section 106 of the Local Government (Scotland) Act 1973. The Chief Finance Officer is responsible for the preparation of the Board's Finance Statements following the Code of Practice on Local Authority Accounting in the UK.

### 2.3 Budget Monitoring

- 2.3.1 It is the joint responsibility of the Chief Officer and the Chief Finance Officer of the Aberdeenshire Integration Joint Board to report to the Board regularly, timeously and accurately on all matters of budget management and control. The reports should include projections for the full financial year and any implications for the following financial years. These reports will include recovery action proposed where a year end budget variance is identified.
- 2.3.1 The Director of Finance, NHS Grampian and the Section 95 Officer, Aberdeenshire Council will provide the Chief Finance Officer of the Aberdeenshire Integration Joint Board with information in accordance with a timetable drawn up at the start of the financial year, regarding the costs incurred for the services directly managed by them. Information should be provided in an agreed format.
- 2.3.2 The Director of Finance, NHS Grampian will provide the Chief Finance Officer of Aberdeenshire Integration Joint Board with financial information in accordance with a timetable drawn up at the start of the financial year, regarding the hosted services. Information should be in an agreed format and produced timely to enable inclusion in the financial monitoring reports.
- 2.3.3 The Director of Finance, NHS Grampian will provide the Chief Finance Officer of Aberdeenshire Integration Joint Board with information regarding the use of the amounts set aside for hospital services. A frequency will be formally agreed but as a minimum, information will be provided on a quarterly basis.
- 2.3.4 The Chief Finance Officer will report, in accordance with a timetable drawn up at the start of the financial year, to the Chief Officer on the financial performance and position. These reports will be timely, relevant and reliable and will include information, analysis and explanation in relation to:
  - 2.3.4.1 Reviewing budget savings proposals
  - 2.3.4.2 Actual income and expenditure
  - 2.3.4.3 Forecast outturns and annual budget
  - 2.3.4.4 Explanations of significant variances
  - 2.3.4.5 Reviewing action required in response to significant variances
  - 2.3.4.6 Identifying and analysing financial risks
  - 2.3.4.7 Use of reserves
  - 2.3.4.8 Any adjustments to the annual budget (e.g. new funding allocations)
- 2.3.5 The Chief Finance Officer will work with the Section 95 Officer of Aberdeenshire Council and Director of Finance of NHS Grampian to ensure managers are provided with regular financial reports that are timely, relevant and reliable. These reports will include information and analysis in relation to:
  - 2.3.5.1 Budget available to managers

- 2.3.5.2 Actual income and expenditure
- 2.3.5.3 Forecast outturns
- 2.3.6 The Chief Finance Officer will be consulted on all reports being submitted to the Board to ensure that any financial implications arising have been considered. Each Board report should include a Financial Implications section.
- 2.3.7 It is a requirement of the Public Bodies (Joint Working) (Scotland) Act 2014 that an annual performance report is presented to the Board and the financial contents therein should comply with the requirements as set out in the Act.

### 2.4 Virement

- 2.4.1 Virement is the process of transferring budget between budget headings with no change to the overall net budget.
- 2.4.2 The Chief Officer is expected to deliver the agreed outcomes within the total delegated budget. Any virement must not create additional overall budget liability.
- 2.4.3 Any proposal for virement involving a new policy, or variation of existing policy, which will impact upon the strategic plans of the Aberdeenshire Integration Joint Board, will be subject to the approval of the Aberdeenshire Integration Joint Board.
- 2.4.4 Virement can be used in the following situations and with reference to the flow chart at APPENDIX 1;
  - 2.4.4.1 The Chief Finance Officer has been notified; and
  - 2.4.4.2 The virement does not create an additional financial commitment into future financial years.
- 2.4.5 The virement process cannot be used in the following situations:
  - 2.4.5.1 For transfers between IJB and non-IJB budgets;
  - 2.4.5.2 For expected savings on finance costs or recharges;
  - 2.4.5.3 For recurring items of expenditure in place of non-recurring savings;
  - 2.4.5.4 For staffing changes that would increase the establishment, unless approved by the Chief Officer;
  - 2.4.5.5 For property items such as rates and utilities;
  - 2.4.5.6 Any savings against a property which has been declared surplus under the Council's or NHS's surplus asset procedure;
  - 2.4.5.7 To reinstate an item deleted by the Integration Joint Board during budget considerations unless approved by the Integration Joint Board.
- 2.4.6 The Chief Finance Officer must maintain separate budgets for any hosted services managed on behalf of Grampian wide partners. Virement to and from these to Integration Joint Boards requires authorisation of all the three Integration Joint Boards before being implemented.

2.4.7 To the extent that any virement would transfer budget between Partners the Chief Finance Officer is required to notify the Partner bodies.

### 2.5 Final Accounts Preparation

- 2.5.1 The Public Bodies (Joint Working) (Scotland) Act 2014 requires that the Aberdeenshire Integration Joint Board is subject to the audit and accounts provisions of a body under Section 106 of the Local Government (Scotland) Act 1973 (Section 13). This will require audited annual accounts to be prepared with the reporting requirements specified in the relevant legislation and regulations (Section 12 of the Local Government in Scotland Act 2003 and regulations under Section 105 of the Local Government (Scotland) Act 1973).
- 2.5.2 Financial statements will be prepared to comply with the Code of Practice on Local Authority Accounting and other relevant professional guidance.
- 2.5.3 The draft annual accounts and final accounts shall be submitted to the Audit Committee for their scrutiny and review.
- 2.5.4 The timetable for audit and publication of Aberdeenshire Integration Joint Board's annual accounts shall be agreed in advance with the external auditors of Aberdeenshire Council and NHS Grampian. Audited annual accounts shall be signed and published in line with statutory deadlines.

### 2.6 Treasury Management

2.6.1 The Integration Joint Board will not undertake any cash transactions but rather these will be on a notional basis through the Direction of expenditure undertaken by the Partners. Any cash correction arising as a result of the direction by the Board will be undertaken directly between the Partners. The Integration Joint Board will not operate a bank account.

### 2.7 Reserves

- 2.7.1 The Public Bodies (Joint Working) (Scotland) Act 2014 empowers the Integration Joint Boards to hold reserves, which should be accounted for in the financial accounts and records of Aberdeenshire Integration Joint Board. Aberdeenshire Integration Joint Board may have a Reserves Policy that is held out with these Financial Regulations.
- 2.7.2 Unless otherwise agreed, any unspent budget will be transferred into the reserves of the Aberdeenshire Integration Joint Board at the end of each financial year.
- 2.7.3 A policy on reserves will be prepared by the Chief Finance Officer and submitted to the Aberdeenshire Integration Joint Board for approval. The policy will be reviewed annually.

### 2.8 Grant Funding Applications

2.8.1 Where opportunities arise to attract external funding, relevant officers shall consider the conditions surrounding the funding to ensure they are consistent with the aims and objectives of Aberdeenshire Integration Joint Board and the Strategic Plan.

- 2.8.2 The Chief Finance Officer shall ensure that arrangements are in place to:-
  - Receive and properly record such income in the accounts of the accountable body;
  - Ensure the audit and accounting arrangements are met; and
  - Ensure the funding requirements are considered prior to entering into any agreements.

### 3. Financial Systems and Procedures

### 3.1 Income

3.1.1 There is no income to the Integration Joint Board by way of cash transaction.

Transfer of resources will be made by NHS Grampian and Aberdeenshire Council in respect of the agreed delegated functions. Payment will then be made by the Integration Joint Board for the delivery of these services. The accounting for these transactions will be via book entries in the ledgers of NHS Grampian and Aberdeenshire Council.

### 3.2 Authority to Incur Expenditure

- 3.2.1 The Chief Officer shall have the authority to incur expenditure within the approved delegated resources from Aberdeenshire Integration Joint Board to Aberdeenshire Council and NHS Grampian in-line with any supplementary budget that has been approved by the Aberdeenshire Integration Joint Board, and subject to the provisions of these Financial Regulations.
- 3.2.2 Expenditure shall be aligned with the Strategic Plan.

### 3.3 Procurement and Commissioning

- 3.3.1 The Public Bodies (Joint Working) (Scotland) Act 2014 provides that the Aberdeenshire Integration Joint Board may enter into a contract with any other person in relation to the provision to the Integration Joint Board of goods and services for the purposes of carrying out functions conferred on it by the Act.
- 3.3.2 Procurement activity will be undertaken in accordance with the guidance prevailing in the Partner organisation to which the Board has given operational Direction for the use of financial resources.

### 3.4 Imprests

- 3.4.1 There will be no facility for petty cash unless authorised by the Aberdeenshire Integration Joint Board Chief Finance Officer and the necessary security arrangements have been established and have been deemed adequate.
- 3.4.2 Imprest facilities will be operated within NHS Grampian and Aberdeenshire Council and will be contained within their respective established arrangements.

### **4.1 Audit Committee**

4.1.1 Aberdeenshire Integration Joint Board is required to make appropriate and proportionate arrangements for overseeing the system of corporate governance and internal controls. This has resulted in the establishment of an audit committee with agreed terms of reference. The Audit Committee should operate in accordance with the Financial Reporting Council professional guidance for Audit Committees.

### 4.2 External Audit

- 4.2.1 The Accounts Commission will appoint the external auditors to the Aberdeenshire Integration Joint Board.
- 4.2.2 External Audit will be required to submit an annual plan to the Aberdeenshire Integration Joint Board / Audit Committee once established.
- 4.2.3 External Audit will be required to submit a final report to Aberdeenshire Integration Joint Board / Audit Committee once established.
- 4.2.4 The External Auditor appointed to Aberdeenshire Integration Joint Board for the purposes of conducting their work, shall:-
  - 4.2.4.1 Have a right of access to all records, assets, personnel and premises, including those of partner organisations in carrying out their duties in relation to IJB activity.
  - 4.2.4.2 Have access to all records, documents and correspondence relating to any financial and other transactions of the Board and those of partner organisations where it relates to their business with the Board.
  - 4.2.4.3 Require and receive such explanations as are necessary concerning any matter under examination.

### 4.3 Internal Audit - Responsibility

- 4.3.1 The role of Internal Audit is to understand the key risks faced by the Aberdeenshire Integration Joint Board and to examine and evaluate the adequacy and effectiveness of the system of risk management and internal control as in support of the governance arrangements operated by the Board.
- 4.3.2 The Aberdeenshire Integration Joint Board shall secure the provision of a continuous internal audit service to provide an independent and objective opinion on the control environment comprising risk management, governance and control of the delegated resources.
- 4.3.3 Following a decision by Aberdeenshire Integration Joint Board on who will provide the Internal Audit service, a Chief Internal Auditor will be nominated.
- 4.3.4 Where the internal audit services are provided by either NHS Grampian or Aberdeenshire Council (or indeed a shared service), such provision should be subject to a formal service level agreement and subject to periodic review.
- 4.3.5 The operational delivery of internal audit services within NHS Grampian and Aberdeenshire Council will be contained within their respective established

- arrangements.
- 4.3.6 The Internal Audit Service provided to Aberdeenshire Integration Joint board will undertake its work in compliance with the Public Sector Internal Audit Standards.
- 4.3.7 Prior to the start of each financial year the Aberdeenshire Integration Joint Board Chief Internal Auditor will prepare and submit a strategic risk based audit plan to the Aberdeenshire Integration Joint Board for approval. It is preferable that this be shared with the relevant Committees of NHS Grampian and Aberdeenshire Council.
- 4.3.8 The Chief Internal Auditor shall report to the Audit Committee at regular intervals throughout the year on the outcomes of audit work completed and on progress towards delivery of the agreed annual plan; and provide an annual assurance opinion based on the overall findings from the audit.
- 4.3.9 Such Internal Audit work shall not absolve senior management of the responsibility to ensure that all financial transactions are undertaken in accordance with the Financial Regulations and Standing Orders and that adequate systems of internal control exist to safeguard assets and secure the accuracy and reliability of records.
- 4.3.10 It shall be the responsibility of senior management to ensure that access and explanations requested by Internal Audit are provided in a timely manner.
- 4.3.11 The Chief Internal Auditor has the right to report direct to the Integration Joint Board in any instance where he or she deems it inappropriate to report to the Chief Officer, Chief Finance Officer or Audit & Risk committee.
- 4.3.12 Where recommendations resulting from Internal Audit work have been agreed, the Chief Officer shall ensure that these are implemented within the agreed timescale. Regular progress reports will be sought by Internal Audit and it is the responsibility of the Chief Officer to ensure that these are provided when requested along with explanations of any recommendations not implemented within the agreed timescale.

### 4.4 Internal Audit - Authority

- 4.4.1 The Chief Internal Auditor or their representatives shall have the authority, on production of identification to obtain entry at all reasonable times to any premises or land used or operated by Aberdeenshire Integration Joint Board in order to review, appraise and report on the areas detailed below:-
  - 4.4.1.1 The adequacy and effectiveness of the systems of financial, operational and management control and their operation in practice in relation to the business risks to be addressed.
  - 4.4.1.2 The governance arrangements in place by reviewing the systems of internal control, risk management practices and financial procedures.
  - 4.4.1.3 The extent of compliance with policies, standards, plans and procedures approved by the Board and the extent of compliance with regulations and reporting requirements of regulatory bodies.
  - 4.4.1.4 The suitability, accuracy, reliability and integrity of financial and other management information and the means used to identify, measure and report such information.

- 4.4.2 In addition, the Chief Internal Auditor or their representatives, for the purposes of conducting their work, shall:-
  - 4.4.2.1 Have a right of access to all records, assets, personnel and premises, when carrying out their duties in relation to IJB activity.
  - 4.4.2.2 Have access to all records, documents and correspondence relating to any financial and other transactions of the Board and those of partner organisations where it relates to their business with the Board.
  - 4.4.2.3 Require and receive such explanations as are necessary concerning any matter under examination.

### 4.5 Fraud, Corruption & Bribery

- 4.5.1 Every member of Aberdeenshire Integration Joint Board and its' representatives shall observe these Financial Regulations within the sphere of their responsibility. They have a duty to bring to the immediate attention of the Chief Finance Officer/Chief Internal Auditor any suspected fraud or irregularity in any matter that would contravene these regulations.
- 4.5.1 There are a range of confidential routes available to the Aberdeenshire Integration Joint Board and its representatives who wish to ask for advice or to report suspected fraudulent activity.
- 4.5.2 When a matter arises where it is suspected that an irregularity exists in the exercise of the functions of Aberdeenshire Integration Joint Board, the Chief Finance Officer in conjunction with the Chief Internal Auditor and the Chief Officer, will take such steps as may be considered necessary by way of investigation and report.

### 4.6 Insurance

- 4.6.1 The Chief Officer in conjunction with the Chief Finance Officer will ensure that the risks faced by the Board are identified and quantified and that effective measures are taken to reduce, eliminate or insure against them.
- 4.6.2 The Aberdeenshire Integration Joint Board are members of the Clinical Negligence and Other Risks Scheme (CNORIS) scheme. The cover provided will be in relation to indemnity for Aberdeenshire Integration Joint Board Members only. The cover provided is in respect of decisions made by Members in their capacity on the Board. All other cover required should be provided by NHS Grampian and Aberdeenshire Council.
- 4.6.3 The Chief Officer is responsible for ensuring that there are adequate systems in place for the prompt notification in writing to the Chief Finance Officer of any loss, liability, damage or injury which may give rise to a claim, by or against the Board.
- 4.6.4 The Chief Officer in conjunction with the Chief Finance Officer shall annually or at such other period as may be considered necessary, review all insurances. Any required changes should be reported to Aberdeenshire Integration Joint Board.
- 4.6.5 The Chief Officer in conjunction with the Chief Finance Officer of Aberdeenshire Integration Joint Board will review the requirement for membership of the Scottish

Government (CNORIS) on an annual basis.

### 4.7 VAT

- 4.7.1 HMRC have confirmed that there is no VAT registration requirement for Integration Joint Boards under the VAT act 1994 as it will not be delivering any services that fall within the scope of VAT.
- 4.7.2 Should the activities of the Board change in time and it becomes empowered to provide services, then it is essential the VAT treatment of any future activities or services delivered are considered in detail by the Chief Finance Officer to establish if there is a legal requirement for the Integration Joint Boards to register for VAT.
- 4.7.3 The Chief Officer and Chief Finance Officer must remain cognisant of possible VAT implications arising from the delivery of the Strategic Plan. The Partner organisations should be consulted in early course on proposals which may have VAT related implications for them.

### 4.8 Gifts and Hospitality / Register of Interest

- 4.8.1 Members and employees should comply with the code of conduct when offered gifts, gratuities and hospitality.
- 4.8.2 A central register of gifts and hospitality will be maintained by the Aberdeenshire Integration Joint Board. For the offers of any hospitality or gift, approval must be sought from the relevant line manager prior to acceptance and for offers exceeding £50, details must be intimated in writing for including in the register. Reference should be made to the respective codes of conduct.
- 4.8.3 A separate Register of Interests for voting members is to be maintained as arranged by the Standards Officer.

### 5. Review of Financial Regulations

5.1 These Financial Regulations shall be subject to review on an ongoing basis, and at a minimum of every 2 years by the Aberdeenshire Integration Joint Board Chief Finance Officer and where necessary, subsequent amendments will be submitted to Aberdeenshire Integration Joint Board for approval. Financial Regulations should be considered alongside other Governance documents including Standing Orders and Scheme of Delegation.

# Aberdeenshire Integration Joint Board Part 4 - Interpretation

## Appendix 1

Interpretation Applicable to Governance Handbook

"the Act"	means the Public Bodies (Joint
	Working) (Scotland) Act 2014;
"the IJB"	means the Aberdeenshire Integration Joint Board established by the Public Bodies (Joint Working) (Integration Joint Board Establishment) (Scotland) Amendment Order 2015;
"Chief Finance Officer"	means the Chief Financial Officer of the Board appointed by the Board in terms of section 95 of the Local Government (Scotland) Act 1973 Act.
"Chief Officer"	means the Chief Officer of the Integration Joint Board in terms of Section 10 of the Act;
Constituent Authorities	The Council and the Health Board together and individually are referred to as a constituent authority.
Council	The Aberdeenshire Council established under the Local Government etc (Scotland) Act 1994 and having its principal offices at Woodhill House, Westburn Road, Aberdeen AB16 5GB (hereinafter referred to as "the Council" which expression shall include its statutory successors)
Confidential	As defined in s.50A of the Local Government (Scotland) Act 1973 as (a) information furnished to the authority by a Government department upon terms (however expressed) which forbid the disclosure of the information to the public; and (b) information the disclosure of which to the public is prohibited by or under any enactment or by the order of a court; and, in either case, the reference to the obligation of confidence is to be construed accordingly.
Disqualification	Refer to Article 8 of the IJB Order
Direction	an instruction from the Integration Joint Board in accordance with section 26 of the Act;

Health Board	Grampian Health Board established under section 2(1) of the National Health Service
	(Scotland) Act 1978 (operating as "NHS
	Grampian") and having its principal offices
	at Summerfield House, 2 Eday Road,
	Aberdeen AB15 6RE (hereinafter referred
	to as "NHS Grampian" which expression
	shall include its statutory successors)
Exempt Information	See Part 6 for categories of information
	which may be excluded from the public

Any reference to any Act of Parliament shall be construed as a reference to the Act of Parliament from time to time amended, extended or re-enacted and shall include any byelaws, statutory instruments, rules, regulations, orders, notices, directions, consent or permissions made thereunder. Any reference to any statutory instrument, regulation or order shall be construed as a reference to that instrument, regulation or order (as the case may be) as from time to time amended, extended or re-enacted.

## **Aberdeenshire Integration Joint Board**

## Part 5 – Exempt Information

These paragraphs will be referenced at the foot of reports to indicate the reason for exemption.

### Description

- Information relating to a particular employee, former employee or applicant to become an employee of, or a particular office holder, former office-holder or applicant to become an officeholder under, the IJB, the council or the health board, where the information relates to that person in one of those capacities.
- Information relating to any particular occupier or former occupier of, or applicant for, accommodation provided by or at the expense of the IJB, council or the health board.
- Information relating to any particular applicant for, or recipient or former recipient of, any service or financial assistance provided by the IJB, the council or the health board.
- 4 Information relating to the financial or business affairs of any particular person or body (other than the IJB, the council or the health board).
- Information relating to anything done or to be done in respect of any particular person for the purposes of any of the matters referred to in section 27(1) of the Social Work (Scotland) Act 1968 (providing reports on and supervision of certain persons).
- The amount of any expenditure proposed to be incurred by the IJB, the council or the health board under any particular contract for the acquisition of property or the supply of goods or services, provided that disclosure to the public of the amount there referred to would be likely to give an advantage to a person entering into, or seeking to enter into, a contract with the authority in respect of the property, goods or services.
- Any terms proposed or to be proposed by or to the IJB, the council or the health board in the course of negotiations for a contract for the acquisition or disposal of property or the supply of goods or services, provided that disclosure to the public of the terms would prejudice the authority in those for any other negotiations concerning the property or goods or services.
- 8 Any Action taken or to be taken in connection with the prevention, investigation or prosecution of crime, or any advice received, information obtained or action to be taken in connection with—
  - (a) any legal proceedings by or against the authority, or

- (b) the determination of any matter affecting the authority, (whether, in either case, proceedings have been commenced or otherwise).
- 9. Any information furnished to the IJB and Health and Social Care Partnership that would not be made public by either NHS Grampian or Aberdeenshire Council in accordance with their information sharing procedures.

## **Aberdeenshire Integration Joint Board**

## Part 6 - Procedures and Guidance on Requests to Speak

This Guidance document aims to provide you with the information that you need if you are considering submitting a request to speak to the Aberdeenshire Integration Joint Board ("the IJB").

### What is the IJB?

The Integration Joint Board is a joint board of Aberdeenshire Council and NHS Grampian. It oversees the Aberdeenshire Health and Social Care Partnership (AHSCP). The IJB oversee adult Social Care and Health services in Aberdeenshire.

### Who are the IJB?

The IJB membership must include people who can represent the views of those using the services and unpaid carers. These representatives are stakeholder members. This means they can comment on and influence decision making but are a non-voting member.

The IJB consists of 5 Aberdeenshire Councillors and 5 NHS Grampian Board members. There are also non-voting members which include council and NHS officers as well as representatives from users of adult health and social care services, carers groups, trade unions, and the third sector.

At a meeting there will be the members of the IJB, which includes both voting and non-voting members. There will also be advisors to the IJB and in addition there may be Council and NHS officers. The meeting will be led by the Chair and there will also be a Committee officer present who takes minutes of the meeting.

Meetings are in public; however, the IJB can also choose to adjourn to consider matters in private. If there are matters being dealt with in private, you and any other members of the public may be asked to leave the meeting until these have been dealt with.

### What is the purpose of a request to speak?

The IJB welcomes public participation at its Meetings. A request to speak allows a member of the public to raise awareness from their perspective, of a particular issue for an item which is on the meeting agenda, that they want the IJB to consider.

### How do I make a request to speak?

A request to speak at the IJB must be made in writing and emailed to the following address not later than noon on the Friday before the date of the IJB.

committee.services@aberdeenshire.gov.uk

### What do I include in my request to speak?

A request to speak must include: -

- The subject matter of the request to speak
- A short statement which details what action you wish the IJB to take
- The request should also say whether you intend to speak yourself or whether you

wish someone to speak on your behalf and their name, i.e. that you are nominating someone else to be an agent on your behalf.

### What happens after I have submitted a request to speak?

You request to speak will be considered by the Chair of the IJB, and the Chair will determine whether it is competent and relevant to be added to the agenda.

If your request to speak is not accepted, you will be notified of the reasons why.

If your request to speak is accepted, you will be notified of the date and time of the meeting at which it will be considered. Please note the IJB will still have to decide at the meeting whether to accept the request to speak for consideration and may decline to do so at this meeting, in which case you will be advised on the day with the reasons for this.

### What happens at the meeting?

Prior to the meeting, an agenda will have been published online and there may be several other items for consideration at the meeting.

When the meeting reaches your item, your request to speak will be put before the meeting for consideration. If the request is granted, then the Chair of the meeting will ask for you speak to the Board. You will have up to 10 minutes to present to the meeting.

If your request is declined, then you may still listen and watch the relevant item on the agenda being determined unless the item is due to be heard in private session. If your request is declined you will not be able to speak.

The members, both voting and non-voting, may ask you questions for clarification on what you have said.

Please do not ask questions to any members of the IJB or start any discussion or debate as this is only your opportunity to put forward your view: you cannot take part in the discussion or decision.

Once members have asked you any questions, your participation in the matter is at an end. You may remain in the meeting to listen to the discussion on the subject matter but you may not speak again. If you are attending virtually, please mute yourself. This is so that members can discuss the subject matter and make their decision. Members may also ask questions to any officers or professional advisers present, to assist with their decision. The members may reach agreement on this decision with or without a formal vote.

### **Exempt and Confidential Items**

If the item is confidential in nature, you or your agent will be able to speak, but then you will be asked to leave the meeting while the item is being discussed and determined.

### What decision can be made at the meeting?

The members have options following their discussion and debate –

1. They can simply note the terms of your request to speak and do nothing further. This may be where the members consider that no action can be taken in relation to the matter you have raised;

- 2. If they consider the subject matter of your request to speak requires to be explored further, then can instruct a relevant officer to provide a report for a later meeting. Members will not be able to make a formal decision in the absence of a report, if they choose this option; or
- 3. The IJB can also consider the information that you have provided as part of their decision making. They may not always agree with your point of view.

### What happens next?

If the IJB have instructed a report for a further meeting, then you will be advised of the date and time of the next meeting.

### Where to seek advice?

If you require any further information about submitting a request to speak or any further guidance about the process by which a request to speak may be heard, please use the contact details below:

committee.services@aberdeenshire.gov.uk

# Aberdeenshire Integration Joint Board Part 7 – Assurance Framework

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### 1. Scrutiny

This document forms part of the IJB's Governance Handbook and provides information and provides guidance on monitoring and reviewing performance and service delivery and undertaking scrutiny.

### 1.1 What is Scrutiny?

Scrutiny, or challenge and review is fundamental to transparent, accountable decision making and performance improvement. Scrutiny is about assessing the impact of the Aberdeenshire Health & Social Care Partnership's strategic policy and planning on service users, staff and the performance and quality of services.

This document is complemented by the Aberdeenshire Health and Social Care Partnership's, Organisational Governance Framework which provides a comprehensive and robust approach to managing performance across the partnership.

### 1.2 Members' Responsibilities

Members' responsibility for scrutiny is underpinned by three principles:-

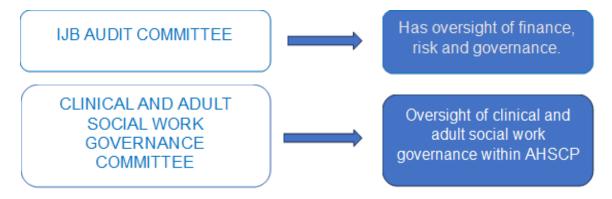
- To provide a "critical friend" challenge to decision making;
- To reflect the voice and concerns of service users and staff;
- To have a positive impact on the delivery and improvement of services;

Members will undertake both "pre-decision" and "post-decision" scrutiny.

- "Pre-decision" is where Members are scrutinising information in order to take decisions on policies and proposals
- "Post-decision" is where Members are assessing the implementation of those policies and proposals and impact on service delivery.

### 1.3 Governance

In the same way that scrutiny is the responsibility of each Member, each Committee has a scrutiny remit.



### 1.4 In Practice

Members are undertaking scrutiny continually, whether when considering performance reports, approving new policies, plans and strategies, or considering regular budget monitoring reports. Examples of formal and informal scrutiny include:

### Formal

- Performance reports (including benchmarking)
- Strategies (where these carry performance-related information for monitoring)
- Policy development/approval/review
- Capital & Revenue monitoring
- Management information
- External inspection reports
- Internal/external Audit reports
- Service user consultation/feedback
- Referral from Committee

### Informal

Performance and development sessions outwith committee

### 1.5 Delving Deeper

There will be occasions when the IJB or it's Committees will wish to further assure themselves and may want to undertake further scrutiny. Alternatively, the IJB or it's Committees may highlight particular issues in the course of their business to explore further.

When identifying what may require further scrutiny, the IJB or it's Committees should take a forward thinking approach, looking at where positive changes can be made or where continual improvement is being made to improve outcomes.

The IJB or it's Committees can seek further assurance by utilising the four step Assurance Framework.

### 1.6 Assurance Framework

### 1.6.1 IJB Committees

### Phase Zero:

The initial decision point for the Committee to determine whether they are sufficiently assured with a report. There is a focus on internal audit reports but scrutiny is not restricted to this and could be on any issue of concern. Where the Committee is assured, no further action is required. Where the Committee is not assured, they can consider whether they wish to move to Phase One of the Assurance Framework.

### Phase One – Report:

Where the Committee are not sufficiently assured, the Committee identify the specific issues where further assurance is required and request a Report back to IJB Audit Committee within an agreed timescale on the issues identified along with actions being undertaken to resolve the issues. When requesting further scrutiny, the Committee must be clear on what the matter identified for improvement is, and what improvements are expected. These must be realistic and achievable, and capable of being measured through the use of SMART (Specific, Measurable, Achievable, Realistic and Timescale) indicators. The report will then come back to the Committee for consideration. Following consideration, the Committee will then consider whether they are sufficiently assured. There are three potential routes thereafter. One is that the Committee is assured and so no further action is required. The second option is that the Committee is assured that progress is being made and there is an action plan,

however wish to monitor progress until the recommendations are signed off in the usual way or the actions are complete if the scrutiny activity is not based on audit recommendations. The third option is that the Committee is not sufficiently assured and so want to move to Phase Two of the Assurance Framework.

### Phase Two – Workshop:

A workshop session where the relevant stakeholders and IJB Audit Committee members come together to explore the issues, ask detailed questions and discussion on actions being taken to resolve the issues. A report summarising the discussion will then come back to the Committee for consideration. Following consideration, the Committee will then need to consider whether they are sufficiently assured. There are again three potential routes thereafter. One is that the Committee is assured and so no further action is required. The second option is that the Committee is assured that progress is being made however wish to monitor progress until the recommendations are signed off or the actions are complete where not based on audit recommendations. The third option is that the Committee is not sufficiently assured and so want to move to Phase Three of the Assurance Framework.

### <u>Phase Three – Referral to IJB:</u>

If the Committee is not sufficiently assured following Phase Two, the next step is to refer the matter to the IJB with a note of the concerns along with a summary of the risks and recommendations for resolution.

The IJB will then consider the matter and consider what action can be taken.

Noting that at any time the Audit Committe or Clinical and Adult Social Work Governance Committee may escalate any matter which is considered urgent to the Integration Joint Board for comment and / or direction.

### 1.6.2 IJB Assurance Framework

If the IJB, rather than a Committee, want to undertake scrutiny via this Assurance Framework, then Phases Zero to Two are the same. If the IJB is not sufficiently assured following Phase Two, the IJB can instigate an Investigation.

### Phase Three (IJB only):

There is a formal investigation process set out below that should be followed. The IJB should identify when the investigation should take place, however if this is difficult to do when the Investigation is called for, this should be commenced within a minimum of 2 months of the decision to move to Investigation.

The IJB need to agree the scope of the Investigation and this should be based on SMART (Specific, Measurable, Achievable, Realistic and Timescale) principles.

A Lead Officer will be identified by the relevant part of the Partnership will look at preparing a background briefing, which can link to any relevant research and will identify, where appropriate, internal and external witnesses to provide evidence as part of that Investigation.

The Lead Officer will also invite witnesses to evidence gathering sessions, and support the IJB in identifying key questions for the witnesses. The Lead Officer will instigate the investigation, ensure there are notes taken for evidence gathering sessions, provide summaries of sessions and support an Investigation Group to draft

a report and their recommendation based on the evidence. This will be presented to the Senior Management Team of the HSCP to ensure oversight and engagement and then presented to the IJB.

### 1.6.3 IJB Phase 3 - Investigation Process

This section provides guidance on undertaking an investigation as specified in phase three of the scrutiny process, where it is deemed to be required.

### 1.6.3(1) Who

The Group undertaking the investigation (Investigation Group) could include all members of the IJB, a smaller group of Board Members only, a joint Board Member/Officer working group or joint group of Members and external partners but the decision on any action required should always be taken by the IJB. Where all members are appointed to the Investigation Group, the Chair of the IJB will Chair the Investigation Group and in all other cases the Chair will be appointed by members of the Investigation Group.

### 1.6.3(2) How

The investigation could be undertaken over a period of weeks, or through a rapid improvement event. The stages described below would happen in both types of investigation, however if undertaken as a rapid improvement event, the timeline would be condensed.

### 1.6.3(3) Defining the Remit

As originally proposed, a topic may be quite loosely defined. If chosen for investigation, the definition of the issue must be clarified to allow a precise focus. The previous workshop session is likely to have focused and defined the area of interest. Additional information can be sought which will further define the remit of any subsequent investigation. This work is carried out by the lead officer. A terms of reference should be completed and agreed by the Investigation Group. This will define the specific scope of the investigation, identify potential experts and witnesses who it is thought may advance the investigation, and indicate potential costs which may be incurred in completing the investigation. The terms of reference statement defines the intent, as it is perceived at the start of the process, of how the investigation will proceed, but may need to be amended to allow the Investigation Group to pursue additional evidence sources, or lines of questioning which arise during the investigation timetable.

### 1.6.3(4) Utilising external experts

In the process of agreeing the remit of the investigation, the Investigation Group may decide to engage an external expert to be part of the review. If it is decided that such assistance would benefit the investigation, a survey will be made of appropriate experts who may be able to guide the Investigation Group. These experts are generally external, accredited professionals, or academics, with a background in the topic under discussion. They have the role of being able to provide a framework of general understanding of the issue, acting as a touchstone for assessing and responding to the information gathered during the investigation process, and also sharing their experience of the issue in its context wider than Aberdeenshire. External experts must be engaged through the appropriate processes under procurement procedures and financial regulations.

### 1.6.3(5) Background papers

When an investigation remit has been agreed, the lead officer should identify any information on the topic that could be considered by the Investigation Group to provide general awareness and context. This may take the form of internal spreadsheets, policy documents or committee reports, published research, or other external information.

### 1.6.3(6) Setting in context

When the background papers have been made available to the Investigation Group, and any contextual briefing has been provided by the external expert, the investigation process should begin with a session led by the service(s) concerned, which identifies the current situation relating to the topic under discussion. This session is intended to allow members of the Investigation Group to increase their awareness of the current status of the issue under investigation, in addition to providing a service perspective. This may not be required if the phase 2 workshop has already provided this to members' expectations.

### 1.6.3(7) Gathering evidence

Evidence gathering sessions hear from witnesses, either individually, or in groups. The witnesses should have been identified in the terms of reference adopted for the investigation. Witnesses may be either external or may be drawn from staff resources.

This may include the undernoted:-

- Members and employees, at any level, asked to attend because they have particular knowledge or expertise relevant to the investigation topic,
- Representatives of the partner organisations invited to give an external viewpoint on the area being investigated. This is an important opportunity to develop relationships with partners and external organisations to increase engagement and understanding of their work.
- Representatives of service users, invited to attend to give their views on how services are meeting their needs and possible improvements,
- Officers from other bodies doing the same/academics.

All appropriate means are used to inform members of the Investigation Group of the matter under review. Investigations could involve fact-finding visits to facilities to meet service users and employees on the front line. Visits to other local authority areas, or providers of similar services may also be undertaken.

Prior to any session, the lead officer should brief witnesses appropriately. Witnesses are encouraged to provide comprehensive answers and to feel free to raise additional issues related to the topic. Notes should be taken of the session, highlighting factual, salient points of the discussion. These notes should be confirmed for factual accuracy and representation by the witness, officers and members attending the session.

Generally, evidence gathering sessions are not held in public. This is intended to allow witnesses to give comprehensive answers which may involve the disclosure of confidential information.

### 1.6.3(8) Preparing Recommendations

Once the Investigation Group has heard all the evidence, and drawn its conclusions and recommendations, a formal investigation report is prepared by the lead officer on behalf of the Investigation Group. This is best achieved through a `wrap-up' session,

where the Investigation Group meet informally, with all witness session notes available to them, and discuss what has been learnt in the investigation. The report should highlight key points, the Investigation Group's conclusions and recommendations

### 1.6.3(9) Agreeing Actions

The Senior Management Team should confirm actions to be taken in response to the recommendations. The investigation report, along with the action plan should be formally reported back to the IJB.

Monitoring

When the action plan has been approved, the IJB should be provided with progress updates as part of the annual reporting exercise, or more frequently, where requested. The IJB should formally confirm when no further progress updates are required.

### 2. Scrutiny relationship between the IJB and it's Partnership Organisations

### 2.1 Aberdeenshire Council

The Council's Audit Committee have power to receive and provide feedback on reports from the IJB Audit Committee. The Council's Audit Committee retains the power to undertake scrutiny on any matters of service delivery that sit within the remit of the Council side of the AHSCP in terms of delivering on directions from the IJB, financial monitoring of IJB spend of Council funds is also in the Audit Committees powers.

### 2.2 NHS Grampian

The IJB develops and oversees arrangements for reporting assurance gained from its activities for the information of the relevant scrutiny and audit committees within NHS Grampian, as well as Aberdeenshire Council. The IJB obtains the assurance it requires from these bodies, including sharing relevant audit reports where appropriate.

### 2.3 Communities Committee

The Communities Committee has a remit to review the effectiveness of the Council's delivery of adult social work services on behalf of and under directions from the Aberdeenshire Integration Joint Board.

The **relationship between the IJB and it's partnership organisations** can be seen in Annexe C attached.

This diagram demonstrates the relationship between the IJB, IJB Audit Committee and the Audit Committees of the parent relationships.

Aberdeenshire Council HSCP Led Services Audit Reports are presented to the IJB Audit Committee in the first instance, and then the Council Audit Committee, with the option for feedback to be provided to the Council Audit Committee upon final receipt.

NHS Grampian Led Services Audit reports are only presented to the NHS Grampian Audit Committee in the first instance, and then summaries of relevant points are shared with the IJB Audit Committee through the Chief Finance Officer.

IJB Audit Reports are presented to the Council Audit Committee in the first instance, and then IJB Audit Committee, with the option for feedback to be provided to the IJB

Audit Committee on final receipt.

These routes mean that the report is presented to the main reporting body in the final instance, along with any feedback from the relevant Audit Committee, at which point a decision can be made on any scrutiny referrals/escalation.

The Council Audit Committee would agree to only carry out scrutiny referrals for the Council HSCP Led service audits, and reports will make the route clear per report.

Any scrutiny required for IJB Audit reports would come through the IJB Audit Committee escalating to the Integration Joint Board utilising this Assurance Framework.

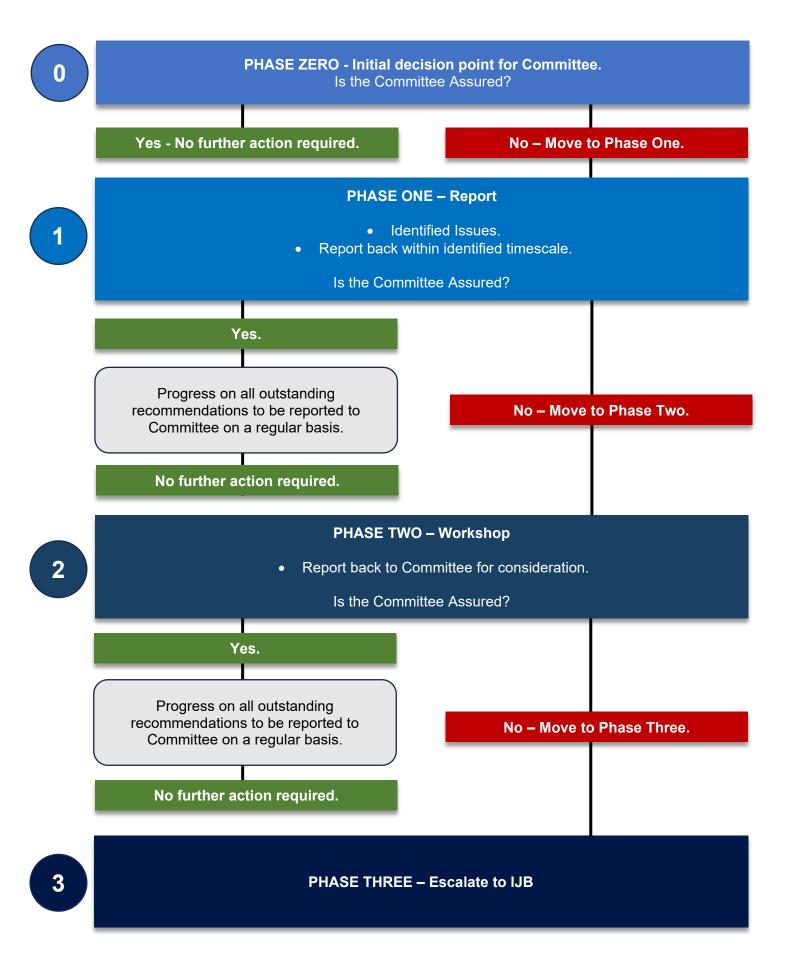
The NHS Grampian Audit Committee would lead on any escalation required for the NHS Grampian Led Services Audit reports.

Annexe A – Assurance Framework – Committees Flowchart

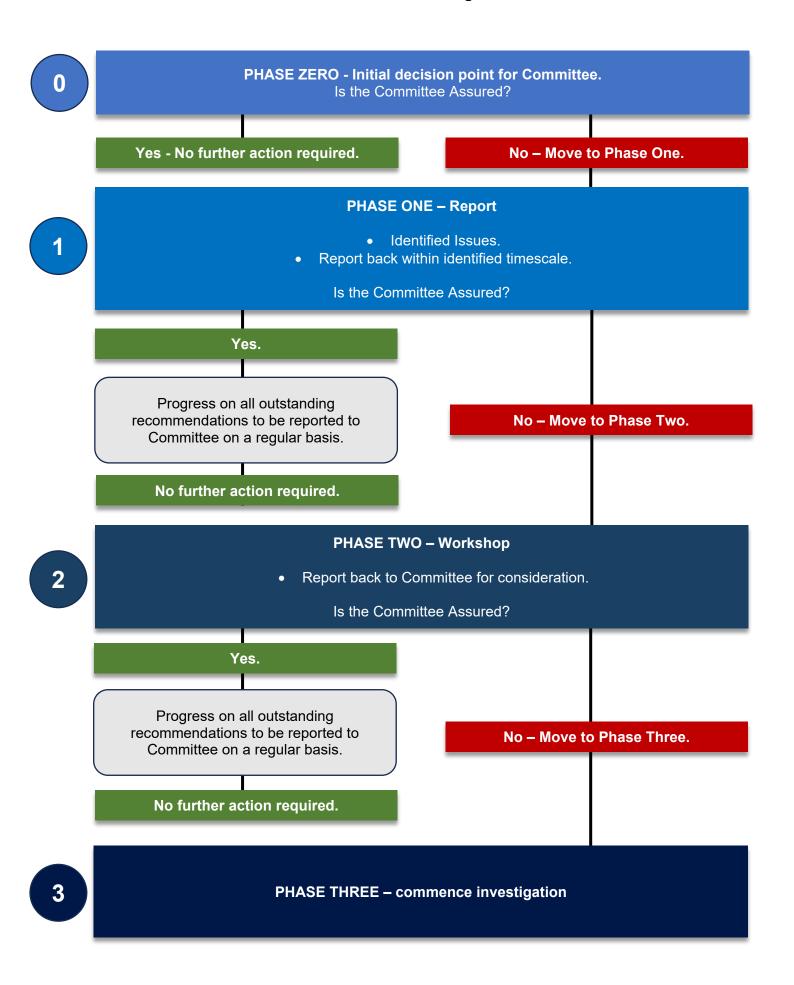
Annexe B - Assurance Framework - IJB Flowchart

Annexe C – Diagram – Relationships between IJB and its Partnership Organisations

### Annexe A - Assurance Framework Flowchart for IJB Audit Committee & CASWG Committee



### Annexe B - Assurance Framework - Aberdeenshire Integration Joint Board



Annexe C - Diagram - Relationship Between IJB and its Partnership Organisations

