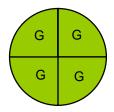
Internal Audit



Performance Targets & Reporting - IJBs

March 2017

Report Assessment



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Introduction

The Public Bodies (Joint Working) Scotland Act 2014 aims to provide better connected and co-ordinated services for adults through the integration of health and social care services. NHS Lothian participates in four Joint Boards, which are responsible for directing the provision of delegated functions.

The Scottish Government requires that each integration authority publishes an annual performance report, which sets out how effectively they are improving the National Health and Wellbeing Outcomes described within the Strategic Plan. The IJBs issue Directions to NHS Lothian to provide functions to service users and carers in line with the IJBs' strategic plans.

The IJBs must receive regular and accurate information on how effectively functions are being delivered, in particular with regard to the National Health and Wellbeing Outcome measures.

Scope

This audit considered the respective controls in place to ensure the accuracy and completeness of performance reporting information provided by NHS Lothian to the IJBs.

Acknowledgements

We would like to thank all staff consulted during this review for their assistance and cooperation.



Executive Summary

Conclusion

There is effective provision of information to the IJBs by the Local Intelligence Support Teams (LIST), who are employed by the Information Services Division's (ISD). However, not all key high-level plans contain sufficient SMART objectives, and not all state the relevant KPIs. In addition, the IJB boards have not yet formally agreed the KPIs which should be reported to them and with what frequency. The implementation of these recommendations will provide greater confidence that IJB boards are receiving information that will enable them to determine if they are performing effectively.

Summary of Findings

The table below summarises our assessment of the adequacy and effectiveness of the controls in place to meet each of the objectives agreed for this audit. Definitions of the ratings applied to each action are set out in Appendix 1.

No.	-			mber of actions by action rating		
		objective assessment	Critical	Significant	Important	Minor
1	Reporting requirements within individual care commissioning plans meet the requirements of the IJBs' overall strategic plans.	Green		1		
2	NHS Lothian provides all required performance information to the IJBs, including statutory performance measures and compliance with directions, in line with agreed schedules.	Green		1		
3	The controls in place within NHS Lothian ensure that information provided to the IJBs is accurate and complete.	Green				
4	Local arrangements are in place within NHS Lothian to monitor and improve relevant performance targets, including any action plans required.	Green		1		



Control Objective Ratings

Action Ratings	Definition
Red	Fundamental absence or failure of controls requiring immediate attention (60 points and above)
Amber	Control objective not achieved - controls in place are inadequate or ineffective (21 – 59 points)
Green	Control objective achieved – no major weaknesses in controls but may be scope for improvement (20 points or less)

Main findings

The key information source for IJB boards is the Information Services Division (ISD), who collect information from NHS Lothian and other sources before performing data quality checks. Local Intelligence Support Teams (LIST) are ISD staff who have been working within NHS Lothian and the IJBs to provide on-site information provision and analysis. Senior officers from all four IJBs informed us that LIST staff have been very responsive in meeting information requests.

We identified three significant issues for improvement during the review:

- A selection of key high-level plans for the four IJBs were reviewed, namely those related to older people, learning disabilities, physical disabilities, mental health, and alcohol & drug misuse. Some plans were used jointly by one or more IJBs. Many of the plans did not state KPIs or the expected frequency of reporting to committee
- There has been limited reporting of KPIs related to key high-level plans to the IJB boards.
 However, it should be noted that the four IJB boards have not yet formally agreed the statistics that should be reported to them regularly
- A review of the 16 high-level plans for all four IJBs was performed, and showed that SMART objectives were in place for most plans. However, 5 plans (31%) did not contain SMART objectives for all sections. In addition, 1 plan (6%) contained implementation dates which were all in the past, indicating that these objectives were no longer current.

Further details of these points are set out in the Management Action Plan.



Management Action Plan

Control objective 1: Reporting requirements within individual care commissioning plans meet the requirements of the IJBs' overall strategic plans.

1.1: High-level plans do not always include KPIs or state the frequency of reporting to committee

Significant

Observation and Risk:

Each IJB has high-level plans which are designed to guide the effective provision of healthcare to their populations, both now and in the future.

A selection of key high-level plans for the four IJBs were reviewed, namely those related to older people, learning disabilities, physical disabilities, mental health, and alcohol & drug misuse. Some plans were used jointly by one or more IJBs. Of the 16 plans reviewed:

- 8 (50%) have no KPIs stated
- 5 (31%) have either (i) some KPIs in place, (ii) KPIs which do not include numbers or percentages, or (iii) implementation dates which are in the past
- 13 (81%) do not state the frequency of reporting of KPIs to committee
- 10 (62%) do not state what committees should receive KPIs.

If KPIs are not stated and approved for individual high-level plans then there is a risk that the implementation of plans cannot be effectively monitored.

Recommendation:

KPIs should be stated for all objectives contained within the IJBs' key plans, including the plans for older people, learning disabilities, physical disabilities, mental health, and alcohol & drug misuse. These KPIs should then be approved by each IJB board.

Management Response: Accepted.

Management Action: KPIs will be stated for all objectives contained within the IJBs' key plans, including the plans for older people, learning disabilities, physical disabilities, mental health, and alcohol & drug misuse. Approval for the use of these KPIs will then be sought from the IJB Board.

Responsibility: IJB Chief Officer Target date: 30 September 2017



Control objective 2: NHS Lothian provides all required performance information to the IJBs, including statutory performance measures and compliance with directions, in line with agreed schedules.

2.1: The KPIs to be reported to IJB boards have not yet been agreed

Significant

Observation and Risk:

It is the responsibility of each IJB board to determine the information it wishes to receive. This information can come in the form of discussion with key NHS Lothian and local authority officers, and the receipt of statistics covering, for example, national outcome measures and the implementation of strategic plans.

Key statistics relate to performance against the National Health and Wellbeing Outcomes (NHWO) indicators, which are required by the Scottish Government to be provided to IJB boards at least annually. The statistics for the first quarter of 2016-17 have only recently been provided to the HSCPs in January 2017 due to delays by ISD. As such, there has been limited reporting of NHWO statistics to the IJB boards.

In addition, there has been limited reporting of KPIs related to key high-level plans (see Issue 1.1). However, it should be noted that the four IJB boards have not yet formally agreed the statistics that should be reported to them regularly.

If key statistics are not reported to the IJB boards regularly there is an increased risk that high-level plans are not implemented effectively.

Recommendation:

The IJB chief officers should provide their IJB boards with a proposed list of key statistics relating to each high-level plan which they should receive reports on. Once the IJB boards have chosen which statistics they wish to receive, the statistics should be reported to them with the agreed regularity.

Management Response: Accepted.

Management Action: The IJB chief officer will provide the IJB boards with a proposed list of key statistics relating to each high-level plan which they should receive reports on. Once the IJB board has chosen which statistics they wish to receive, the statistics should be reported to them with the agreed regularity.

Responsibility: IJB Chief Officer Target date: 30 September 2017



Control objective 3: The controls in place within NHS Lothian ensure that information provided to the IJBs is accurate and complete.

We identified no significant issues in relation to this control objective.

The key information source for IJB boards is the Information Services Division (ISD), who collect information from NHS Lothian and other sources before performing data quality checks. Local Intelligence Support Teams (LIST) are ISD staff who have been working within NHS Lothian and the IJBs to provide on-site information provision and analysis. Senior officers from all four IJBs have stated that LIST staff have been very responsive in meeting information requests.



Control objective 4: Local arrangements are in place within NHS Lothian to monitor and improve relevant performance targets, including any action plans required.

4.1: High-level plans do not always include all necessary SMART objectives

Significant

Observation and Risk:

SMART objectives are used in plans to help ensure that objectives are specific, measurable, achievable, relevant, and time-bounded. By stating objectives based on these criteria, they are more likely to aid the effective implementation of plans.

A review of the 16 high-level plans for all four IJBs was performed, and showed that SMART objectives were in place for most plans. However, 5 plans (31%) did not contain SMART objectives for all sections. In addition, 1 plan (6%) contained implementation dates which were all in the past, indicating that these objectives were no longer current.

If SMART objectives are not stated for all relevant sections of high-level plans there is a reduced likelihood that these plans are achieved.

Recommendation:

The chief officer for each IJB should agree with their respective IJIB board what the key high-level plans are. For each of these plans, the chief officers should ensure that all key actions are phrased as SMART objectives. These objectives should then be approved by the IJB boards.

Management Response: Accepted.

Management Action: The IJB chief officer will agree with the IJIB board what the key high-level plans are. For each of these plans, the chief officer will ensure that all key actions are phrased as SMART objectives. These objectives will then be approved by the IJB board.

Responsibility: IJB Chief Officer Target date: 30 September 2017



Appendix 1 - Definition of Ratings

Management Action Ratings

Action Rat	ings	Definition
Critical	l	The issue has a material effect upon the wider organisation – 60 points
Significa	ınt	The issue is material for the subject under review – 20 points
Importar	nt	The issue is relevant for the subject under review – 10 points
Minor		This issue is a housekeeping point for the subject under review – 5 points

Control Objective Ratings

Action Ratings	Definition
Red	Fundamental absence or failure of controls requiring immediate attention (60 points and above)
Amber	Control objective not achieved - controls in place are inadequate or ineffective (21 – 59 points)
Green	Control objective achieved – no major weaknesses in controls but may be scope for improvement (20 points or less)