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Agenda Item: 6.

Performance and Audit Committee

Date of Meeting: 19 March 2025.

Subject: Internal Audit: Strategic Commissioning.

1. Purpose

1.1. To present the internal audit report on procedures and processes for strategic commissioning.

2. Recommendations

The Performance and Audit Committee is invited to note:

2.1. That Azets has undertaken an Internal Audit of procedures and processes for strategic commissioning as part of the Integration Joint Board's annual audit plan.

2.2. The key findings of the Internal Audit of Strategic Commissioning, attached at Appendix 1 to this report, which are summarised in section 4 of this report.

3. Background

3.1. The Public Bodies (Joint Working) (Scotland) Act 2014 requires health bodies and local authorities to integrate planning for, and delivery of, certain adult health and social care services.

3.2. The objective of this audit was to evaluate the procedures and processes in place around strategic commissioning in order to assess the adequacy of and compliance with internal controls.

4. Audit Findings

4.1. The Integration Joint Board has a process in place for strategic commissioning. There were a number of good practice areas identified in Appendix 1:

- The Strategic Plan has clearly outlined Strategic Priorities and considers other relevant strategies which evidences cross working and shared goals across Orkney.
- The Strategic Priorities and decision making by the Board are clearly aligned with the Strategic Plan.

- There is a clear process of issuing directions which are detailed and understandable which makes the commissioning achievable and measurable.
- The three commissioned areas identified in Appendix 1 were related to the Strategic Priorities of the Board.

4.2. There were three areas identified as areas for Improvement which would strengthen strategic commissioning:

- Strategic Priorities and milestones should be specific and measurable.
- Strengthen monitoring arrangements for commissioning services.
- Ensuring actions within the Integration Joint Board's Matters Arising Log have realistic timescales and are completed timely.

5. Contribution to quality

Please indicate which of the Orkney Community Plan 2025 to 2030 values are supported in this report adding Yes or No to the relevant area(s):

Resilience: To support and promote our strong communities.	No.
Enterprise: To tackle crosscutting issues such as digital connectivity, transport, housing and fuel poverty.	No.
Equality: To encourage services to provide equal opportunities for everyone.	No.
Fairness: To make sure socio-economic and social factors are balanced.	No.
Innovation: To overcome issues more effectively through partnership working.	No.
Leadership: To involve partners such as community councils, community groups, voluntary groups and individuals in the process.	No.
Sustainability: To make sure economic and environmental factors are balanced.	No.

6. Resource and financial implications

6.1. There are no resource or financial implications associated directly with this report.

7. Risk and equality implications

7.1. There are no risk or equality implications associated directly with this report.

8. Direction required

Please indicate if this report requires a direction to be passed to:

NHS Orkney.	No.
Orkney Islands Council.	No.

9. Escalation required

Please indicate if this report requires escalated to:

NHS Orkney.	No.
Orkney Islands Council.	No.

10. Authors and contact information

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11. Supporting documents

11.1. Appendix 1: Internal Audit: Strategic Commissioning.



Orkney IJB

Internal Audit Report 2024/25

Strategic Commissioning

October 2024



Orkney IJB

Internal Audit Report 2024/25

Strategic Commissioning

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Audit Sponsor	Key Contacts	Audit team
<i>Stephen Brown, Chief Officer</i>	<i>Stephanie Johnston, Secretary to Chief Officer</i>	<i>David Eardley, Partner</i> <i>Rachel King, Audit Manager</i> <i>Daniyal Khan, Internal Auditor</i>

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Executive Summary

Conclusion

Orkney IJB has a process in place for strategic commissioning. We found that Orkney IJB's priorities and decision making regards commissioning are clearly aligned to the Strategic Plan 2022-25. Orkney IJB has a clear process of issuing directions that are detailed and understandable. These directions make the commissioning achievable and measurable.

We have made some recommendations around the specificity of measures within the Strategic Plan, the frequency of monitoring progress and the timeliness of actions resulting from evaluation reviews. Further detail is provided in the management action plan.

Background and scope

Orkney IJB has a Strategic Plan 2022-2025 which outlines the following priorities:

- Unpaid Carers.
- Supporting Older People to Stay in Their Homes.
- Community Led Support.
- Mental Health and Wellbeing.

The strategy pulls these together into two overarching priorities;

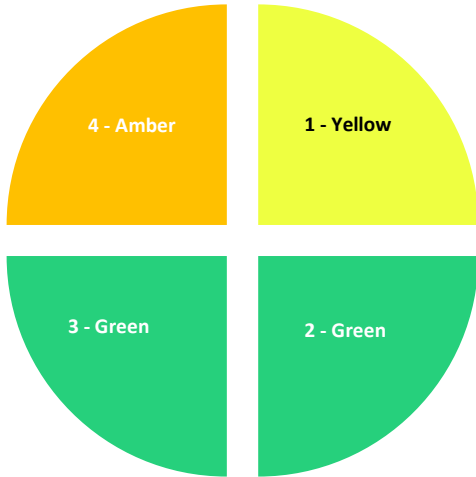
- Early intervention and prevention.
- Tackling inequalities and disadvantage.

The IJB is responsible for making decisions which are focused around these priorities. Where decisions are made to be taken forward by NHS Orkney and Orkney Islands Council, a commissioning letter is issued to these bodies. It is essential that decision making and the impact thereof is aligned to the Strategic Priorities of the IJB.

In accordance with the 2024/25 Internal Audit Plan, we performed a review of Strategic Commissioning. This review considered the extent to which decisions have demonstrably been made in line with strategy, and how well the delivery of these commissioned works have been monitored and managed by IJB.

Control assessment

- 1. The IJB Strategy clearly outlines priorities, how these will be achieved, and measures of success

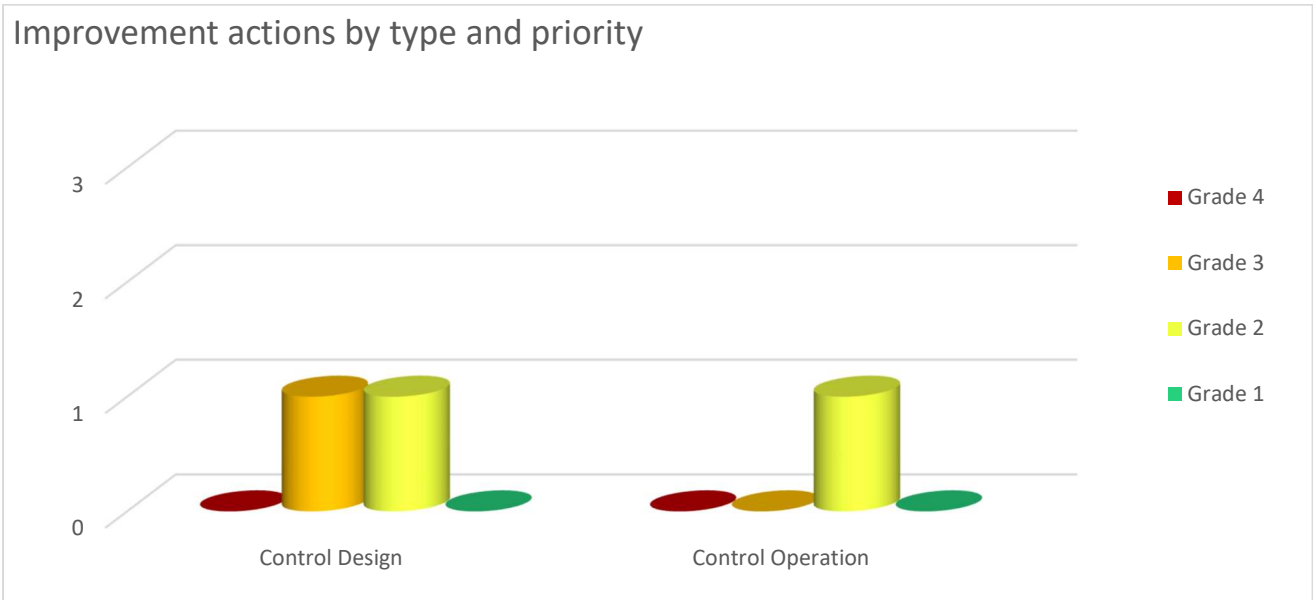


- 2. Decisions made by the IJB Board on commissioning are aligned to the strategy and clearly documented within minutes

- 3. Where work has been commissioned from NHS Orkney and/or Orkney Islands Council, clear instructions have been issued

- 4. Orkney IJB has sufficient and appropriate mechanisms to review progress of commissioned work, with scrutiny and action taken on progress against related strategic outcomes

Improvement actions by type and priority



Three improvement actions have been identified from this review; two of these relate to control design and one relates to the operation of control in place. See Appendix A for definitions of colour coding.

Key findings

Good practice

- The Strategic Plan 2022-25 clearly outlines six priorities. We confirmed the strategy considers other relevant strategies including the NHS Orkney Clinical Strategy, the Island Wellbeing Survey, the Draft Child Poverty Strategy, the Orkney Mental Health Strategy, and the Dementia Strategy. This evidences cross working and that there are shared goals across services in Orkney.
- When a necessary commission either to NHS Orkney or Orkney Islands Council is identified, this is proposed by the Chief Officer to the IJB Board. This is done on an ad hoc basis as identified commissions arise. The paper articulates the purpose of such decisions and the desired impact of the commissioning on the IJB's Strategic Priorities. As such the IJB Board has sufficient information to provide scrutiny in the decision making process.
- The Directions issued for Strategic Commissioning are clear and understandable. It includes all the necessary detail that is relevant to the commissioning, i.e. Service Area covered in the commissioning, aims of commissioning, relevance of commissioning to the Strategic Plan, budget allocated to commissioning, how the progress would be measured, and date of review of the commissioning. This clarity is essential for the accurate execution of the commission.
- All three commissions issued over the past year are relevant to achieving the priorities. The 'Distress Brief Intervention' and 'All Age Nurse Led Psychiatric Liaison Team' both relate to the Mental Health and Wellbeing priority while the 'Advocacy Services' commission is relevant to all six priorities.
- The IJB has a standard template in place to issue Directions that outlines the information needed to complete the commissioning. Each requirement of commissioning is filled before issuing the Directions, i.e. Purpose of commissioning, which priorities are covered, how the commissioning would be measured, and when the review would take place. The Direction letters include clear instructions.

Areas for improvement

We have identified three area for improvement which, if addressed, would strengthen Orkney IJB's control framework:

- Reviewing the measures associated with the Strategic Priorities and milestones within the Strategic Plan to ensure they are specific and measurable.
- Strengthening the monitoring arrangements for commissions to ensure there are ongoing checks on the services being provided.
- Ensuring actions arising from progress monitoring are assigned realistic timescales and are completed timely.

Acknowledgements

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

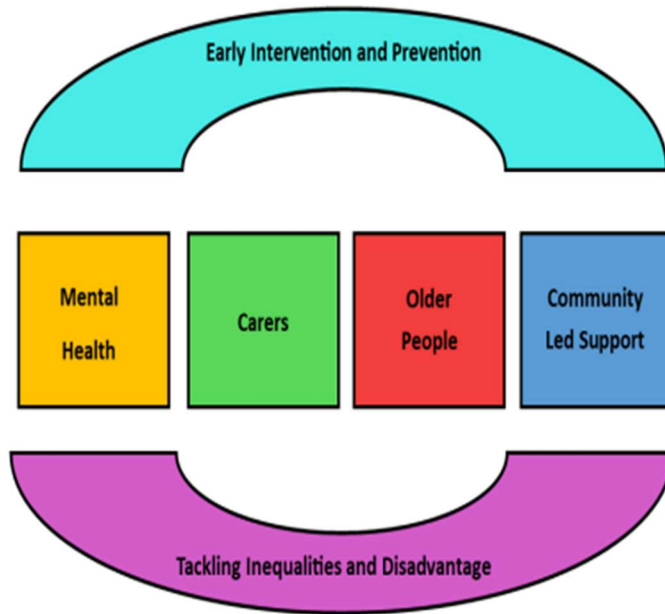
Management action plan



Control Objective 1: The IJB Strategy clearly outlines priorities, how these will be achieved, and measures of success

1.1 Strategic priorities/targets

We obtained the Strategic Plan 2022-25 and reviewed to confirm it clearly outlines priorities and how these will be achieved. The priorities are outlined within the plan are as follows:



Included for each priority is further detail including an outline, the strategic intention, the Strategic Delivery Plan outcomes it contributes to, the delivery milestones for the first year and measures for these milestones.

We reviewed the milestones and the corresponding measures to ensure these were realistic and that success against the milestones can be accurately measured. We found that milestones were clear and measures appropriate to evidence progress/completion of the milestones. However many of the measures use terminology such as 'reduce', 'increase' and 'expand' without articulating either the baseline or target performance.

An example of this for the priority 'Supporting older people to stay at home' has been outlined below:

Delivery Milestones 2023/24	Measures
<ul style="list-style-type: none"> - Engage in the Getting it Right for Everyone (GIRFE) national pathfinder programme with a focus in Orkney on Frailty and Aging Well Project. 	<ul style="list-style-type: none"> - Number of hospital avoidance due to early intervention and support for people with frailty. - Reduction in rate of falls in older people population.

<ul style="list-style-type: none"> - Support more older people to live safely at home for longer. 	<ul style="list-style-type: none"> - Expand range of technology that contributes to older people living safely at home. - Increase use of telecare/Digital solutions to support early intervention and prevention and increase flexibility for individuals to remain at home. - Waiting list of unmet need hours for Care at Home provision is reduced. - The percentage of telecare users who have switched to digital from analogue is increased. - Expand the range of technology that contributes to older people living safely at home.
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In order to measure success in the reduction in number of falls in the older people population, a starting point or end target must be set. This is similar for most of the measures within the document. We have reviewed the latest annual performance report (June 2024) and can confirm that progress against the measures has been provided. The performance report for the reduction in falls notes the following:

“A snapshot of collective data from the three care homes in Orkney shows that in the 6-month period of April to June 2023 there was at the lowest 18 falls involving 13 residents and at the highest 55 falls involving 22 individuals. The Telecare Team responded to 22 individuals, across the communities, who had activated their falls monitor. Care at Home and Telecare teams continue to promote prevention of falls in line with the Care Inspectorate’s Preventing Falls booklet and, across all service areas, minimising falls is explored with the support of the Community Physio Falls Team. The Core Suite of Integration Indicators, issued by Public Health Scotland, indicate that in the year 202223, the falls rate per 1,000 population aged 65+ was 19.9, falling from 21.9 in the previously released figures, and versus a rate across the country of 22.5.”

The report has marked this as complete, however it does not evidence Orkney specific figures and data to confirm the work being done is demonstrating progress specifically against Orkney IJB strategy.

Risk

There is a risk that Orkney IJB is unable to measure sufficiently the success of the strategic work being undertaken as the measures are not specific enough, as a result the Strategic Priorities may not be met and Orkney IJB may fail to contribute against the Strategic Plan.

Recommendation

The measures within the Strategic Plan should be reviewed and more specific targets set to allow for success to be measurable.

Grade 2
(Design)

Management Action

Work is progressing in developing the new three year Strategic Plan and the associate Delivery Plan. All targets will be reviewed to ensure there are specific targets which are measurable.

Action owner: Chief Officer IJB, Stephen Brown

Due date: 30 April 2025

Control Objective 2: Decisions made by the IJB Board on commissioning are aligned to the Strategic Plan and clearly documented within minutes

Green

No reportable weaknesses identified

We selected a sample of three commissions and tested the decision making process to ensure it was robust, made in alignment with the Strategic Plan and clearly documented within the IJB Board minutes.

Advocacy Services

We obtained the commissioning letter and the corresponding meeting minutes for the IJB meeting on 13/12/2023 when the commission was agreed. This commission was issued to Orkney Islands Council and relates to the provision of advocacy services for the Integration Joint Board. The commissioning letter states that all Strategic Priorities are covered by this service. This is deemed appropriate as advocacy services are designed to ensure access to and rights with regards to the services provided by NHS Orkney, Orkney Islands Council and Orkney IJB.

Distress Brief Intervention (DBI)

The DBI commission was agreed at the IJB meeting on 13/12/2023 as evidenced by the Board minutes. We obtained the commissioning letter issued to NHS Orkney for the delivery of the Distress Brief Intervention project for two years. This was an ongoing project that was extended and further supports the Strategic Priority 'Mental Health'. We have reviewed alignment to strategy and identified that one of the milestones in the Strategic Plan for mental health is Suicide Prevention. This links to the DBI evaluation report which notes the need for this service to support the suicide prevention plan.

All Age Nurse Led Psychiatric Liaison Team (AANLPLT)

The All Age Nurse Led Psychiatric Liaison Team (AANLPLT) commission was agreed at the IJB Board meeting on 04/09/2024. We obtained the minutes of this meeting to review the discussions around this and the decision made. We also obtained the commissioning letter issued to NHS Orkney. This was a new direction for the transfer of funding from reserves to fund the AANLPLT for a two year period. One of the delivery milestones for the IJB Strategic Plan priority 'Mental Health' is to establish a Psychiatric Liaison Service. We confirmed therefore that this commission directly relates to this milestone and strategic requirement.

We confirmed that the decision making regarding commissioning is clearly documented within the IJB meeting minutes and that the sample selected reflects commissions that will contribute towards priorities outlined within IJB Strategic Plan.

Control Objective 3: Where work has been commissioned from NHS Orkney and/or Orkney Islands Council, clear instructions have been issued



Green

No reportable weaknesses identified

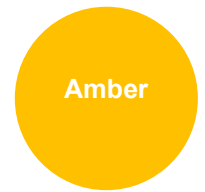
Orkney IJB uses a standard template to issue Directions to ensure that all required information is included and that instructions are clear and understandable by both parties. We obtained the template and reviewed this to test whether it appropriately outlines key procedures to be followed to complete the commissioned work.

We found that the template was approved by the IJB Board on 30 September 2020 and includes the following fields:

- The Date on which the Direction was issued.
- Date of effect.
- Direction issued to, i.e. NHS Orkney.
- Service areas covered by the Direction, i.e. Mental health.
- Detail of Direction, i.e. To commission Advocacy Services for services delegated to the Integration Joint Board.
- Budget allocated to the Commissioning.
- Alignment to the Strategic Plan and outcomes to be achieved by the commissioning.
- How the commissioning would be measured.
- Date of review.

A sample of three Directions were obtained and tested to ensure that the template had been followed and that adequate detail had been included. All three Directions followed the standard template and we confirmed that the content was fully completed and sufficient.

Control Objective 4: Orkney IJB has sufficient and appropriate mechanisms to review progress of commissioned work, with scrutiny and action taken on progress against related strategic outcomes



4.1 Monitoring arrangements

It is important for the IJB to gain assurance that commissioned work is undertaken in line with expectations, that sufficient progress is made in the agreed timescales and that the desired outcomes are achieved.

The process for monitoring commissioned work is not documented. Management advised that this is done annually via evaluation reports. We understand that this timescale is the same for commissions, irrespective of length. This means, for example, that any commissions that are in place for one year will not be monitored until the end of the commission.

Risk

There is a risk that the IJB is unable to intervene timeously where commissioned work is not progressing in line with expectations due to insufficient monitoring arrangements, which may result in the non-achievement of priorities.

Recommendation

We recommend that the IJB document a monitoring regime that considers the frequency of such activities relative to the period of commissioned work. This should ensure that the IJB has a clear understanding of progress prior to commissions ending.

Management Action

Grade 3
(Design)

A guidance document will be produced to detail the expected monitoring arrangements for new commissioned services, with clear expectations around timescales for updates and where these will be reported.

Action owner: Chief Officer, Stephen Brown

Due date: 31 March 2025

4.2 Timeliness of actions

We selected a sample of two commissions and obtained the annual evaluation reports. We reviewed these for any issues and actions required to be taken. We then sought to follow up on these actions and ensure these had been completed in a timely manner.

Home First

We obtained the annual evaluation report for Home First and confirmed that additional quarterly reports were completed for this commission which we also obtained. There were no reportable corrective actions as Home First was a successful project that saw a 71% reduction in the waiting times for a care at home package. We were satisfied with the evidence within the report around the success of the project.

Distress Brief Intervention (DBI)

At the time of testing (October 2024), the most recent project evaluation report for DBI was completed in December 2023. We obtained this and found one concern noted around the referrals being received and that these may be limited to Police Scotland and the Scottish Ambulance Service referrals. It was suggested that an action be included to increase the number of referral pathways on the matters arising log, with an initial target date of September 2024.

We obtained the matters arising logs from the February 2024 IJB Board meeting and found that the action was included in the log with a target date of September 2024. We then obtained the log for September 2024 and found that the action was still noted with a revised due date of November 2024. An update was due to the November 2024 meeting, however, there was no explanation for the delay.

Risk

There is a risk that the impact desired for the commissioned work is not achieved as actions to resolve concerns are not taken timeously, impacting patient care and ability to delivery on Strategic Priorities.

Recommendation

Comprehensive updates for the action noted within the matters arising log of the February 2024 IJB Board meeting should be provided alongside a revised due date until the action is fully complete.

Management Action

Leads will ensure that actions contained within the Matters Arising Log have an adequate timescale for completion. Should timescales slip, Leads will ensure that information on the revised date including progress to date will be provided

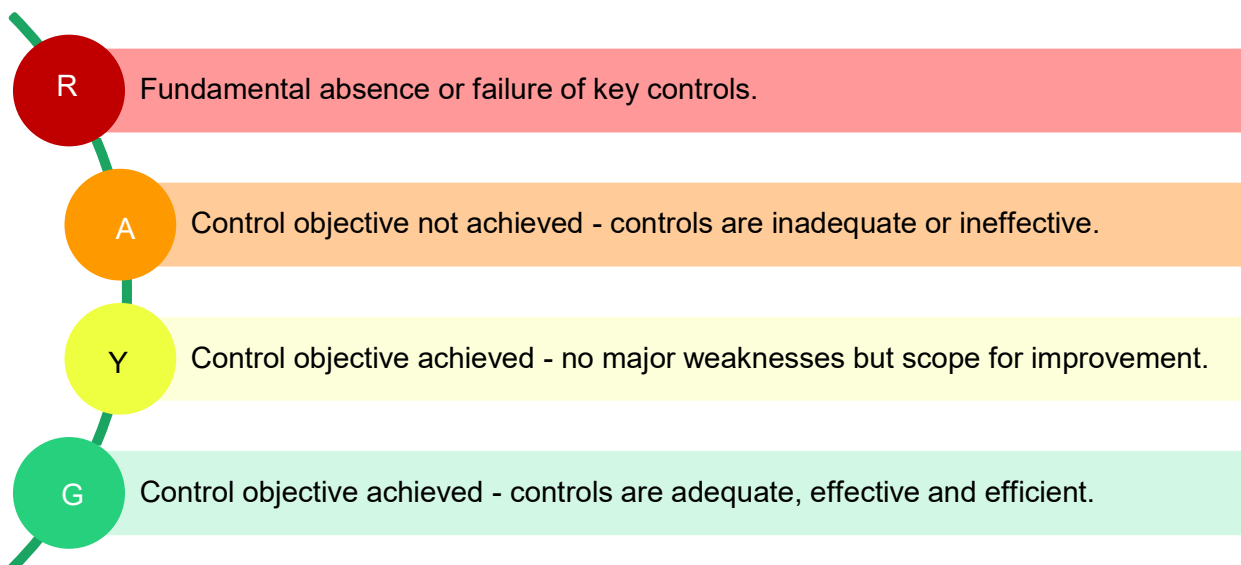
Grade 2
(Operation)

Action owner: Chief Officer, Stephen Brown

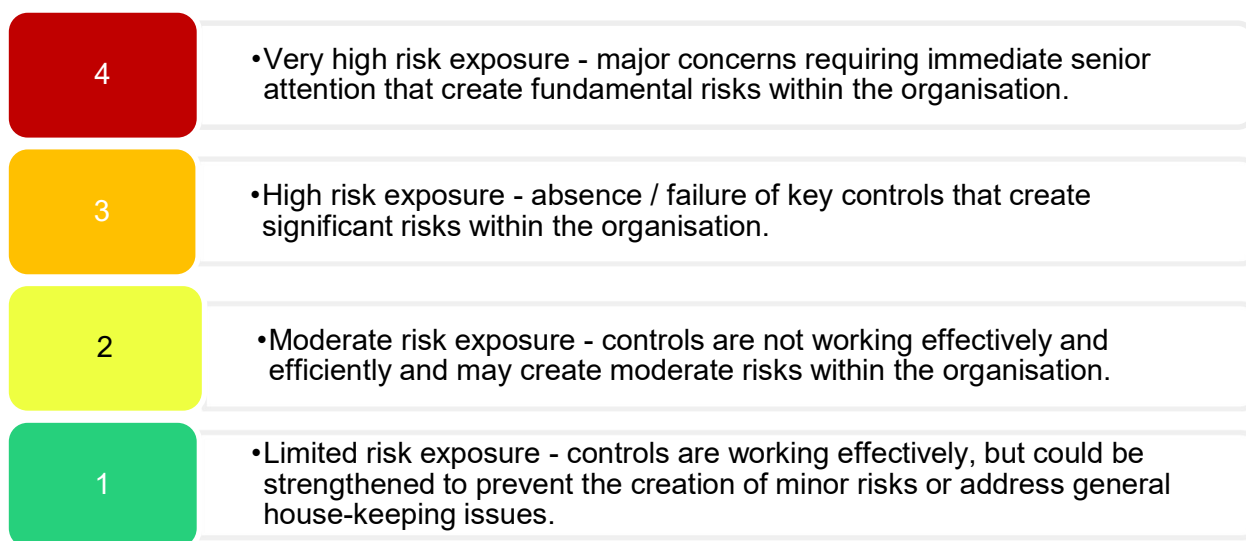
Due date: 30 April 2025

Appendix A – Definitions

Control assessments



Management action grades



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