



## **Integration Joint Board Co-bhòrd an Amalachaidh**

### **Internal Audit Review**

### **Consultation, Participation and Engagement**

### **Final Report – 2021/22-IJB8**

**1 February 2022**

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<b>Draft Report Issued</b>	<b>13 January 2022</b>
<b>Management Response Received</b>	<b>30 January 2022</b>
<b>Final Report Issued</b>	<b>1 February 2022</b>

<b>Issued to:</b>	
<b>Chief Officer</b>	<b>Nick Fayers</b>
<b>Chief Finance Officer</b>	<b>Debbie Bozkurt</b>

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**SECTION 1: EXECUTIVE SUMMARY**

**Introduction**

- 1.1 The Report has been prepared following an internal audit review of Consultation, Participation and Engagement as part of the operational annual internal audit plan for 2021/22. The purpose of the Report is to provide an overview of the Integration Joint Board's arrangements for the operation and management of Consultation, Participation and Engagement in terms of the objectives noted below.

**Background Information**

- 1.2 The National Standards for Community Engagement defines community engagement as being 'a purposeful process which develops a working relationship between communities, community organisations and public and private bodies to help them to identify and act on community needs and ambitions. It involves respectful dialogue between everyone involved, aimed at improving understanding between them and taking joint action to achieve positive change'.
- 1.3 Within its engagement processes the Integration Joint Board communicates with the public through a wide range of groups including, but not limited to, Managed Clinical Networks, Locality Planning Groups, Patients Panels, Mental health forum, Outer Hebrides Community Planning Partnership, and through specific projects. The board itself has representation from a wide range of stakeholders. Each parent body also has complaints/feedback processes in place and posts consultations on their respective websites.
- 1.4 A review was previously undertaken of the Locality Planning Groups with a revised terms of reference and membership now in place. We understand that although attendance can vary across groups, these are generally working well with regular virtual meetings taking place. We also note that a resource has been implemented within Health and Social Care to provide admin support to these groups going forward.
- 1.5 It is vital that as services continue to transform and develop, the Integration Joint Board maintains a high level of community consultation, participation and engagement in order to keep the public well informed of proposals and developments and to include them in the decision making process.

**Internal Audit Objective**

- 1.6 In accordance with the remit outlined within the operational annual internal audit plan for 2021/22 and further documented within the agreed terms of reference, our internal audit work was designed to obtain assurance that the Integration Joint Board's arrangements for Consultation, Participation and Engagement were appropriate and operating as expected. In practice, we assessed whether the overall objective was being achieved by confirming that:

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- The IJB has strategies and policies in place governing communication, consultation, participation, and engagement processes and receives updates from its parent bodies on relevant consultations;
- The IJB proactively engages with its stakeholders on key issues through appropriate consultation and participation exercises;
- There are mechanisms in place to allow stakeholders to provide feedback with this considered fully throughout the decision making process;
- The National Standards for Community Engagement are adhered to along with relevant legislation;
- The results of engagement exercises are documented and clearly communicated to the public;
- Community engagement processes and exercises are reviewed with lessons learnt recorded and considered within subsequent engagements.
- The information on the IJB website is kept up to date in order to provide the public and other stakeholders with accessible and timely information.

**Areas of Good Practice**

1.7 Our review identified the following areas of good practice:

- There are a wide range of forums in place to engage with the public on an ongoing basis;
- Admin support implemented to support the Locality Planning Groups.

**Concluding Remarks**

1.8 Our detailed findings are included in the body of the Report. We would point out that the most significant issues arising from our review which require management attention are:

- The review of the Participation and Engagement Strategy should take cognisance of the updated guide on the National Standards for Community Engagement and associated review form (Para 2.2);
- The outcomes of consultation and engagement exercises undertaken should be clearly communicated on the website along with a link to the relevant partner body website where relevant (Para 2.4).

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- 1.9 Based on the audit work carried out our overall opinion is that a reasonable level of assurance can be placed upon the control environment of the service/area under review.

There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.





A full list of opinions which an auditor may provide can be seen at Appendix C.

**It should be noted that our findings and conclusions are based on the information made available to us at the time of our review. The current restrictions in place as a result of Coronavirus (COVID-19), together with home working is likely to have limited our access to some staff and documentation which requires to be acknowledged when considering the contents of the Report.**

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1.10 We have graded our detailed findings and recommendations, based on the likelihood of the identified weakness occurring and the impact on the Comhairle if it should occur, using the following criteria:

Grade 1 	- <b>“Critical” – High likelihood, High impact (HH)</b>  “The weakness is almost bound to happen or is already happening (likelihood) and could have a significant impact on the Comhairle’s services, reputation, control, financial position, statutory, regulatory or constitutional compliance if not contained”
Grade 2 	- <b>“Contingent/Insurable Risk” - Low likelihood, High impact (LH)</b>  “The weakness is unlikely to happen, but would have a significant impact on the Comhairle’s services, reputation, control, financial position, statutory, regulatory or constitutional compliance if it did occur”
Grade 3 	- <b>“Housekeeping” – High likelihood, Low impact (HL)</b>  “The weakness is almost bound to happen or is already happening but is unlikely to have a material impact on the Comhairle’s services, reputation, control, financial position, statutory, regulatory or constitutional compliance, and can be contained”
Grade 4 	- <b>“Value for Money” – High likelihood, Value for money impact (HV)</b>  “The weakness is almost bound to happen or is already happening but if contained would have a positive impact on economy, efficiency and effectiveness in the use of resources”

Where we have identified isolated exceptions in our sample testing, and we consider that:-



- they are unlikely to recur; and
- would have no significant impact if they should occur;

we have classified them as low likelihood and low impact (LL), discussed them with relevant officers and detailed them in Appendix B to the Report.

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1.11 The recommendations can be summarised and prioritised as follows:

	<b>Recommendations</b>	<b>Overall Gradings</b>
2.2	The review of the Participation and Engagement Strategy takes cognisance of the updated guide on the National Standards for Community Engagement and associated review form.	
2.3	The outcomes of consultation and engagement exercises undertaken should be clearly communicated on the website along with a link to the relevant partner body website where relevant.	

1.12 We would like to thank all staff for the co-operation and goodwill we received during the course of our internal audit fieldwork.

For Integration Joint Board Internal Audit Section  
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1 February 2022

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**SECTION 2 - DETAILED FINDINGS AND RECOMMENDATIONS**

**Control Objective 1: The IJB has strategies and policies in place governing communication, consultation, participation, and engagement processes and receives updates from its parent bodies on relevant consultations.**

**2.1**

FINDINGS AND IMPLICATIONS	RISK RANKING		RECOMMENDATION	GRADE	MANAGEMENT COMMENT
	L	I			
<p>The IJB approved a Communications Strategy along with a Participation and Engagement Strategy in 2016, both covering the period up to 2019. A previous audit indicated that these were now out of date and required to be revised. We understand that, whilst the pandemic has affected progress, the relevant officers are in the process of updating and combining these documents, to incorporate various national guidance documents and frameworks spanning Health and Social Care. This matter has also already been the subject of a concurrent follow up audit report and an update will be provided in due course.</p> <p>The National Standards for Community Engagement (NSfCE) are discussed within the current strategy. These are a set of best practice principles that promote effective community engagement, helping</p>					



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**Control Objective 4: The National Standards for Community Engagement are adhered to along with relevant legislation.**

	FINDINGS AND IMPLICATIONS	RISK RANKING		RECOMMENDATION	GRADE	MANAGEMENT COMMENT
		L	I			
2.2	organisations to benchmark their own performance against each standard. A revised guide to the NSfCE was published in September 2020 in light of the Covid-19 pandemic. The guide is aimed at helping organisations engage communities during and after the pandemic in order to support recovery and renewal. The current strategy documents recognise the importance of the National Standards. However, it is important that this new guide is considered throughout the refresh of the Participation Strategy and also when planning and conducting engagement exercises. There is also a self-review form which accompanies the NSfCE. This tool helps organisations review their own performance against each standard and encourages users to reflect on key lessons that have been learned in concluding the engagement exercise and next steps to be taken. Consideration should be given to promoting its use in order to promote a consistent approach to logging lessons learned.	H	L	The review of the Participation and Engagement Strategy takes cognisance of the updated guide on the National Standards for Community Engagement and associated review form.	3	Work is planned to review the current strategy in line with new guidance. Throughout the pandemic the H&SCP has continued to engage with communities across the Western Isles through Community Partnership Forum

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**Control Objective 7: The information on the IJB website is kept up to date in order to provide the public and other stakeholders with accessible and timely information.**

**2.3**

FINDINGS AND IMPLICATIONS	RISK RANKING		RECOMMENDATION	GRADE	MANAGEMENT COMMENT
	L	I			
<p>There have been a number of consultations/engagement exercises undertaken in recent years, however, the IJB website appears to contain limited information on the results of these and only references previous consultations on advocacy and the care units. Although we understand that feedback is given through various methods including the groups mentioned above, the outcome of all consultation and engagement exercises undertaken by the IJB should be included on the website or through signposting to the relevant partner's website.</p> <p>Previous audits have also shown that the website contains out of date documents in some cases. Furthermore, the site contains a section, where previously, regular service development updates had been posted, however, the last entry is dated 27 June 2019. Similarly, the press release section contains only one article from 2017 relating to a Dementia Strategy Engagement Event.</p>					

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**Control Objective 7: The information on the IJB website is kept up to date in order to provide the public and other stakeholders with accessible and timely information.**

**2.3**

FINDINGS AND IMPLICATIONS	RISK RANKING		RECOMMENDATION	GRADE	MANAGEMENT COMMENT
	L	I			
<p>We recognise that given the current pressures faced by the IJB, updating the website may not be a priority task. However, this is something that should be progressed as resources allow in order to provide a further platform where regular updates on developments within Health and Social Care can be communicated to the public.</p> <p>We take cognisance, however, that not all members of the public will have access to the website and other methods may be more appropriate depending on the target group. As discussed above, a number of methods are currently used to engage with the public, however, given the 'virtual' nature of the current climate, the website should still be a key consideration for development.</p>	H	L	The outcomes of consultation and engagement exercises undertaken should be clearly communicated on the website along with a link to the relevant partner body website where relevant.	3	THE H&SCP plans to redevelop its website to deliver on the recommendations of the audit. This work will commence at the point the system moves out of emergency footing.

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**SECTION 3 - ACTION PLAN**

<b>REF.</b>	<b>RECOMMENDATION</b>	<b>RESPONSIBLE OFFICER</b>	<b>DATE OF IMPLEMENTATION</b>
2.2	The review of the Participation and Engagement Strategy takes cognisance of the updated guide on the National Standards for Community Engagement and associated review form.	Chief Officer H&SCP	Once the system moves out of emergency footing
2.3	The outcomes of consultation and engagement exercises undertaken should be clearly communicated on the website along with a link to the relevant partner body website where relevant.	Chief Officer H&SCP	Once the system moves out of emergency footing

## **RESPECTIVE RESPONSIBILITIES OF MANAGEMENT AND INTERNAL AUDIT**

### **Responsibility in Relation to Internal Controls**

It is the responsibility of the Comhairle's management to maintain adequate and effective financial systems and to arrange for a system of internal controls. Our responsibility as internal auditors is to evaluate the financial systems and associated internal controls. In practice, we cannot examine every financial implication and accounting procedure within an activity, and we cannot substitute for management's responsibility to maintain adequate systems of internal controls over financial systems. We therefore may not identify all weaknesses that exist in this regard.

It is the responsibility of the Comhairle's management to consider the detailed findings of this Report, where such findings have a specific impact on risk registers. This may include a risk that has not yet been identified, or current risk controls which may be required to be updated to reflect any changes as a result of the findings contained in this report.

### **Responsibilities in Relation to Fraud and Corruption**

The prime responsibility for the prevention and detection of fraud and irregularities rests with management. They also have a duty to take reasonable steps to limit the opportunity for corrupt practices. It is our responsibility to review the adequacy of these arrangements, but our work does not remove the possibility that fraud, corruption or irregularity may have occurred and remained undetected.

We nevertheless endeavour to plan our internal audit work so that we have reasonable expectation of detecting material fraud, but our examination should not be relied upon to disclose all such material frauds that may exist.

ISOLATED EXCEPTIONS TO EXPECTED PROCEDURES AND CONTROLS

ITEM	ISOLATED EXCEPTION	RESPONSIBLE OFFICER	AGREED Y/N	DATE OF DISCUSSION

**DEFINITION OF AUDIT OPINIONS**

The standard definitions for internal audit assurance over an engagement are as follows:

Level of Assurance	Definition
Substantial Assurance	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.
Reasonable Assurance	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
Limited Assurance	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
No Assurance	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.