

**Moray Integration Joint Board**  
**Audited Annual Accounts**  
**For the year ended 31 March 2024**



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Chief Finance Officer to the Moray Integration Joint Board, High Street, Elgin, IV30 1BX



[accountancy.support@moray.gov.uk](mailto:accountancy.support@moray.gov.uk)

## Table of Contents

MORAY INTEGRATION JOINT BOARD MEMBERS 2023/24 .....	1
MANAGEMENT COMMENTARY .....	2
STATEMENT OF RESPONSIBILITIES .....	25
REMUNERATION REPORT .....	27
ANNUAL GOVERNANCE STATEMENT .....	31
COMPREHENSIVE INCOME AND EXPENDITURE STATEMENT .....	42
MOVEMENT IN RESERVES STATEMENT .....	43
BALANCE SHEET .....	44
NOTES TO THE FINANCIAL STATEMENTS .....	45
Note 1 Significant Accounting Policies .....	45
Note 2 Critical Judgements and Estimation Uncertainty .....	46
Note 3 Events after the Reporting Period .....	47
Note 4 Expenditure and Income Analysis by Nature .....	47
Note 5 Taxation and Non-Specific Grant Income .....	48
Note 6 Debtors .....	48
Note 7 Usable Reserve: General Fund .....	49
Note 8 Agency Income and Expenditure .....	50
Note 9 Related Party Transactions .....	51
Note 10 VAT .....	53
Note 11 Accounting Standards That Have Been Issued but Have Yet To Be Adopted ....	53
INDEPENDENT AUDITORS REPORT .....	54

## MORAY INTEGRATION JOINT BOARD MEMBERS 2023/24

### Voting Members

Dennis Robertson (Vice-Chair)	The Grampian Health Board
Tracy Colyer (Chair)	Moray Council
Sandy Riddell	The Grampian Health Board
Derick Murray	The Grampian Health Board
Professor Siladitya Bhattacharya	The Grampian Health Board (Left 28/9/2023)
Cllr. Peter Bloomfield	Moray Council
Cllr. Scott Lawrence	Moray Council
Cllr. John Divers	Moray Council (Left 28/9/2023)
Cllr Ben Williams	Moray Council (Joined 29/9/2023)

### Non-Voting Members

Simon Bokor-Ingram*	Chief Officer Professional
Tracy Stephen*	Chief Social Work Officer
Jane Ewen	Lead Nurse
Professor Duff Bruce	Non Primary Medical Service Lead
Dr Robert Lockhart	GP Lead
Dr Malcolm Simmons	GP Lead
Graham Hilditch	Third Sector Stakeholder (Left 23/1/2024)
Val Thatcher	Public Partnership Forum Representative (Left 17/10/2023)
Ivan Augustus	Carer Representative
Stuart Falconer	Grampian Health Board Staff Partnership (left 30/11/2023)
Kevin Todd	Moray Council Staff Representative (joined 3/4/2023)
Elizabeth Robinson	Public Health Representative
Deirdre McIntyre	Grampian Health Board Staff Partnership (joined 01/12/2023)

## MORAY INTEGRATION JOINT BOARD MEMBERS 2023/24 Continued

### Co-opted Members

Sean Coady	Head of Service and Deputy Chief Officer
Deborah O'Shea	Interim Chief Finance Officer (Chief Finance Officer from 1/4/2024)
Professor Caroline Hiscox	The Grampian Health Board (Left 31/12/2023)
Adam Coldwells	The Grampian Health Board (joined 1/1/2024)
Roddy Burns*	Moray Council
Sonya Duncan	Interim Corporate Manager

\* Since the 2023/24 financial year Simon Bokor-Ingram, Tracy Stephen and Roddy Burns have left their positions. Judith Proctor was appointed as Interim Chief Officer in June 2024.

## MANAGEMENT COMMENTARY

### The Role and Remit of the Moray Integration Joint Board

The Public Bodies (Joint Working) (Scotland) Act 2014 required that Moray Council and the Grampian Health Board prepared an Integration Scheme for the area of the local authority detailing the governance arrangements for the integration of health and social care services. This legislation resulted in the establishment of the Moray Integration Joint Board (MIJB) that became operational from 1 April 2016. Moray Council and Grampian Health Board, as the parties to the Integration Scheme, each nominate voting members to the MIJB, currently, four elected members from Moray Council and four Grampian Health Board members.

Under the Public Bodies (Joint Working) (Scotland) Act 2014, a range of health and social care functions have been delegated from Moray Council and Grampian Health Board to the MIJB who has assumed responsibility for the planning and operational oversight of delivery of integrated services. MIJB also has a role to play in the strategic planning of unscheduled acute hospital based services provided by Grampian Health Board as part of the 'set aside' arrangements.

Hosted services also form part of the MIJB budget. There are a number of services which are hosted by one of the 3 IJB's within the Grampian Health Board area on behalf of all the IJBs. Responsibilities include the planning and operational oversight of delivery of services managed by one IJB on a day to day basis. MIJB has responsibility for hosting services relating to Primary Care Contracts and the Grampian Medical Emergency Department (GMED) Primary Care Out of Hours service.

## MANAGEMENT COMMENTARY (continued)

### Key Purpose and Strategy

Following review and consultation, the refreshed Strategic Plan (2022-2032) is a continuation of the 2019 Strategic Plan. The current plan emphasises the strength of integration and in addition to our two main Partners – Moray Council and the Grampian Health Board - the MIJB recognises the importance of the Third and Independent Sectors and Unpaid Carers, in facilitating the successful operation of the partnership of Health & Social Care Moray. As with all health and social care systems Moray is facing increasing demand for services at the same time as resources – both funding and workforce availability - are under pressure. These challenges will intensify in the coming years as our population ages and more people with increasing complex needs require support to meet their health and care needs. The MIJB sets the direction and strategic intent through the development and implementation of the Strategic Plan and seeks assurance on the management and delivery of services through Board level performance reporting which ensures an appropriate level of scrutiny and challenge. The Strategic Plan identifies priority areas to support strategic direction and vision.

### WE ARE PARTNERS IN CARE

**OUR VISION:** “We come together as equal and valued partners in care to achieve the best health and wellbeing possible for everyone in Moray throughout their lives.”

**OUR VALUES:** Dignity and respect; person-led; care and compassion; safe, effective and responsive

**OUTCOMES:** Lives are healthier – People live more independently – Experiences of services are positive – Quality of life is maintained/improved – Health inequalities are reduced – Carers are supported – People are safe – The workforce continually improves – Resources are used effectively and efficiently

### STRATEGIC PLAN KEY THEMES

**BUILDING RESILIENCE** – Taking greater responsibility for our health and wellbeing

**HOME FIRST** – Being supported at home or in a homely setting as far as possible

**PARTNERS IN CARE** – Supporting citizens to make choices and take control of their care and support

## MANAGEMENT COMMENTARY (continued)

The Plan purposefully places an emphasis on prevention and early intervention activities and seeks to prioritise these activities as a long term goal, actively pursuing good health and wellbeing for the population, with increased investment in this area of work. It highlights the Home First approach and the rationale for this is to assist people in understanding that “hospital is not always the best place for people”, a statement frequently used and in particular if you are frail and elderly can be counter intuitive to a successful recovery.

A business as usual approach has been undertaken in the wake of the COVID 19 pandemic but initiatives to transform services in response to high levels of demand continue. The Moray Strategic Plan was refreshed in 2023 and along with the associated delivery plan highlights key priorities for transformation.

### Population

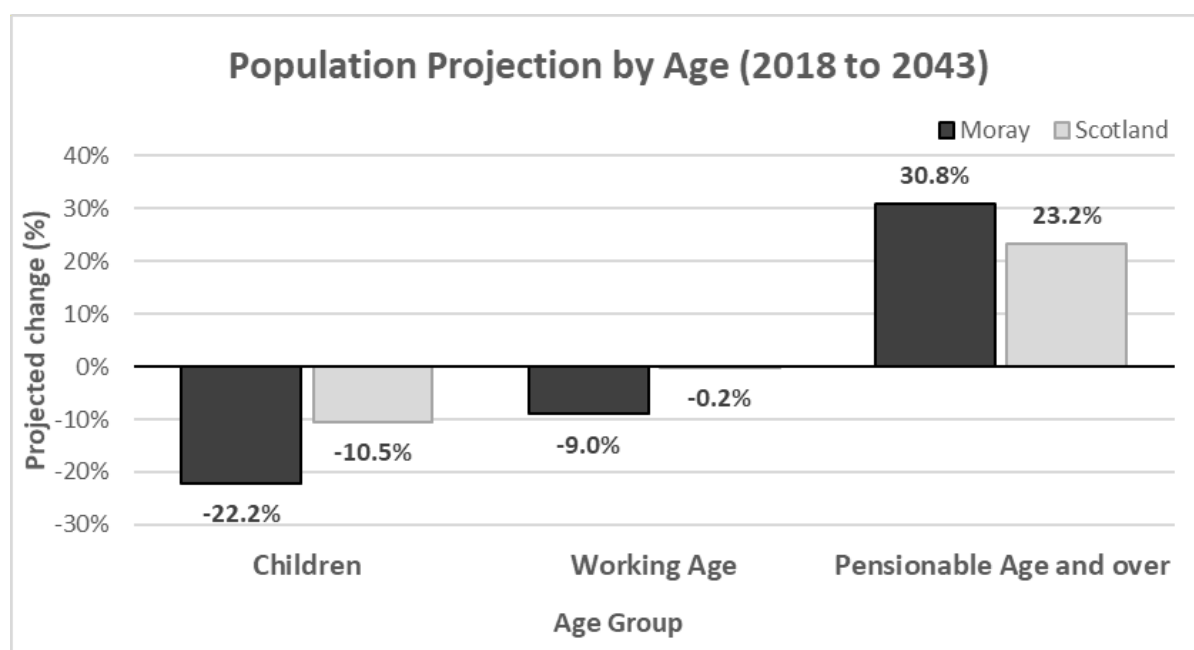
Moray is a largely rural area covering a land mass of 2,238 sq. km. It has a long coastline on the Moray Firth with harbours, fishing villages and world-class beaches. The area’s projected population for 2024 is 95,732. The main centre of population is Elgin, which is home to more than one quarter of the people living in Moray. Other towns of population between 5,000 and 10,000 are Forres, Buckie, Lossiemouth and Keith. Moray’s population has grown significantly in recent years from 87,160 in 1997. The population growth in Moray is slowing and it is projected that against the 2018 baseline<sup>1</sup> Moray will be one of the 14 councils in Scotland who will have had a population decline by 2030. This trend is forecast to continue.

The table below sets out projected population growth based on the 2018 baseline. Across Scotland there is a projected reduction in children, limited change in the working age population, but significant growth in adults of pensionable age. By comparison it is projected that Moray will have a greater decrease in children, a marked decrease in those of a working age, but a significantly higher change in those of a pensionable age.

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<sup>1</sup> <https://www.nrscotland.gov.uk/files/statistics/nrs-visual/sub-nat-pop-proj-18/pop-proj-principal-2018-infographic.pdf>

## MANAGEMENT COMMENTARY (continued)



### Performance Reporting

Performance is reported quarterly to the Audit, Performance and Risk Committee of the MIJB. In addition to the quarterly reporting, there is a requirement under the Public Sector (Joint Working) (Scotland) Act 2014 for the MIJB to produce and publish an Annual Performance Report setting out an assessment of performance in planning and carrying out the delegated functions for which they are responsible. The Annual Performance Report is due to be published by 30 September this year and will be published on the Health & Social Care Moray website, once approved by the MIJB.

One of the major aims of integration and a key measurable target for MIJB is to reduce the number of Moray residents that are ready to be sent home from hospital but have been delayed in this process. This is referred to as a 'delayed discharge'. Delayed discharge can occur due to several reasons but quite often involves the onward provision of social care which can be complex in nature. The table below notes performance over a five year period showing the number of delayed discharge bed days occupied varying significantly and with minimal seasonal pattern up to March 2024.

Delayed discharges reduced during COVID and in particular during the lock down periods, as people stayed in their own homes as per advice at the time and there was more availability of family members to support care needs. Notably, delayed discharges began to rise in Moray and across the country in March 2022 and work commenced across the three partnerships in Grampian to address the issue. Results in this activity can be seen from March 23 onwards. However, winter 2023 saw delayed discharges increasing, in Moray and across the country.

## MANAGEMENT COMMENTARY (continued)

One of the successful actions taken in March 2023 to reduce the increasing delayed discharges was to implement a daily whole system Portfolio meeting. This multi-disciplinary meeting increases system pressure awareness and supports patient flow. Senior decision makers are present at the meeting to ensure any escalations are managed quickly and appropriately. It is an opportunity for system wide overview for both Moray and Grampian and allows participants to deploy available resources to the agreed priority areas. This has resulted in improved communication, better outcomes for patients and improved flow.

Nationally there has been a focus on Planned Date of Discharge, a system that has changed “medically fit” to “clinically fit”. This ensures that all services have been given the chance to carry out appropriate assessments and are in agreement that a person’s discharge is delayed.

The Hospital Discharge Team (Social Work Team) continue to work with all services to ensure that delayed discharges are appropriate on a daily basis and any issues or concerns are escalated to the daily Portfolio meeting.

The Number of Bed Days Occupied by Delayed Discharges 18+ at Census Datet			
Jun 23	Sept 23	Dec 23	Mar 24
732	845	1162	1501
Jun 22	Sept 22	Dec 22	Mar 23
1,207	1,197	1,063	751
Jun 21	Sept 21	Dec 21	Mar 22
592	784	1,142	1,294
Jun 20	Sept 20	Dec 20	Mar 21
242	803	672	496
Jun 19	Sept 19	Dec 19	Mar 20
768	751	971	1,208

In relation to Emergency occupied bed days, there continues to be a focus on ensuring people are getting home quickly and can maintain their independence. This had resulted in a long-term downward trend in the rate of emergency occupied bed days for over 65’s per 1,000 population from March 2020 to March 2021. However, since Mar 21 there has been a consistent quarter on quarter increase until March 2023, which saw a significant decrease, but has been starting to increase quarter on quarter to March 2024.

With an ageing population the number of people delayed at any one time could increase unless action is taken. Additional surge beds have been in place across the Moray bed base, both in Dr Grays Hospital and our community hospital bed base. Presentations to hospital are from an older population with more acuity and complexity. The number of people waiting to be discharged from hospital at census date peaked during 2023/24 at **43**. The number of bed days occupied also increased to **1501** days at the end of quarter 4, this is a significant increase from Quarter 3 and double the figure of the previous year. During the second half of 2023/24 our

## MANAGEMENT COMMENTARY (continued)

contracted partner provider faced significant constraints and was unable to accept any new cases and some cases were transferred back to Care at Home for management and delivery. Unfortunately, this situation had broader implications for various services and also resulted in Care at Home having reduced capacity to take on any new cases, all of this contributing to delays in discharge. The Scottish Government have now set targets for delayed discharges per 100,000 and for Moray the target is 26. This presents a challenge but efforts continue to review and streamline processes and improve flow across the system.

The importance of integration across the system is key to making progress, and over the year teams have enhanced communication and decision making as a Moray system. There has been further redesign of pathways and dedicated resource assigned to supporting critical decision making in social care. This has all supported the steady progress that is evident from the national comparisons of Moray's performance.

Rate of Emergency Occupied Bed Days for over 65's per 1000 Population			
Jun 23	Sept 23	Dec 23	Mar 24
2,699	2,628	2,598	2,509
Jun 22	Sept 22	Dec 22	Mar 23
2,320	2,469	2,547	2,749
Jun 21	Sept 21	Dec 21	Mar 22
1,859	1,934	2,045	2,140
Jun 20	Sept 20	Dec 20	Mar 21
2,087	2,040	1,840	1,780
Jun 19	Sept 19	Dec 19	Mar 20
2,117	2,097	2,112	2,173

### Moray Integration Joint Board (MIJB)

The MIJB has scrutinised and directed the delivery of services in line with the Integration Scheme and Strategic Plan while recognising that the cost base has to change as the level of available budget in real terms is reducing. Both funding partners (Moray Council and NHS Grampian) have significant savings to achieve, and against this backdrop the MIJB directed a series of workshops during the year to support officers in their work. The focus has continued to be on achieving the highest quality and safety possible within a diminished budget, while being most efficient, and achieving the best outcomes for our residents. The Strategic Plan aspires to increasing spend on preventative work, "upstream" to tackle issues earlier, and a key challenge going forwards will be to continue that at a time when budgets are under so much pressure.

## MANAGEMENT COMMENTARY (continued)

### Performance

The MIJB, its committees and the Health and Social Care Partnership Senior Management Team receive regular assurance reports and updates on how the Strategic Plan commitments are being progressed through work streams and individual service plans, as well as detailed financial and performance updates.

The strategic risk register is also reviewed regularly by the Senior Management Team as part of a robust risk monitoring framework in order to identify, assess and prioritise risks related to the delivery of services, particularly any which are likely to affect the delivery of the Strategic Plan.

The inherent risks being faced by the MIJB, together with a current assessment on the level of the risks and mitigating actions being taken to reduce the impact of the risks, is reported to biannually to the Audit Performance and Risk Committee for oversight and assurance.

Management teams and the Care and Clinical Governance Group review and respond to any reports produced by Audit Scotland, Healthcare Improvement Scotland, the Care Inspectorate, and the Mental Welfare Commission for Scotland and the Ministerial Strategic Group for Health and Care.

Quarterly performance reports are produced for Health and Social Care Moray (HSCM) management to review performance and to determine actions required to address areas for concern or to highlight areas showing improvement. This information is further scrutinised by the Senior Management team and then reported to the MIJB's Audit, Performance and Risk Committee. HSCM was in the top 50% for 8 of the 19 reported indicators for this reporting period. This was a decrease from the last reporting period where there were 11 in the top 50%.

Areas of particular strength were in relation to lower premature mortality rate, emergency admissions, emergency bed days, readmissions within 28 days and falls. There has been a significant reduction in the premature mortality rate (NI11) and emergency admission rate (NI-12) (per 100,000 population) in comparison to the Scottish average, with reductions of 25% and 29% respectively. Overall, we performed the same or better than Scotland for 12 of the 19 national indicators, with 7 performing worse than Scotland. This is the same as the last reporting period.

## MANAGEMENT COMMENTARY (continued)

Areas where there were reductions in performance related to percentage of adults supported at home who agree that they are supported to live as independently as possible (NI-2) with a reduction of 7% and percentage of adults supported at home who agree they had a say in how their help, care or support was provided (NI-3) which reduced by 10%. Whilst the difference between years cannot be directly compared due to the changes in wording of the survey, it is concerning that these indicators have declined.

We continue work to improve performance in these areas through our strategic delivery plan which has a focus on frailty to identify changes in support needs at early stages and to develop multi-disciplinary services in localities, which is targeted to increasing the support that can be accessed by people living independently in their communities.

The work that is ongoing to embed the Self-Directed Support (SDS) principles and to develop more guidance for people and more training for staff to ensure that information is available and understood by all those involved, should improve people feeling they have control over the support provided.

### Strategy and Plans

The MIJB is required to review their Strategic Plan every three years as per the legislation. The Strategic Plan 2022-2032 places an emphasis on prevention and early intervention with the aim of building resilience for individuals and communities. The Plan identified key aims of the MIJB and directed HSCM to work closely with communities and key partners to reform the system of health and social care in Moray. It was also recognised that progress has been made against the three strategic themes and the review of the Plan focused on what already has been achieved. The long-term strategic objectives make room for adapting to challenges and developments in health and social care over the coming years.

The current [Strategic Plan](#) sets out the following vision and priorities for health and social care services in Moray.

Health and Social Care Moray's strategic plan sets out the 3 key themes and the objectives;

- **Building Resilience** – supporting people to take greater responsibility for their health and wellbeing
- **Home First** – supporting people at home or in a homely setting as far as possible.
- **Partners in Care** – supporting citizens to make choices and take control of their care and support.

## MANAGEMENT COMMENTARY (continued)

### Staff Wellbeing

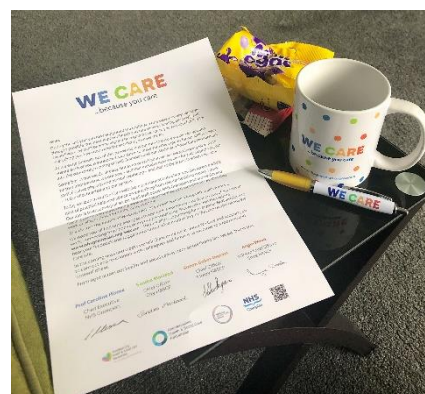
The Health Improvement Team leads on a number of staff wellbeing initiatives, such as healthy weight, mental health and smoking cessation and can provide onsite and outreach sessions to staff teams on request.

Menopause Monday – healthpoint led on the delivery of Monthly Monday drop ins for Dr Grays Hospital staff offering a range of resources and information on peri menopause, symptoms and treatment. 17 staff members have attended the sessions with positive feedback. The sessions have also generated an interest in other health and wellbeing topics.

Cedarwood Day Service contacted the team to request a health and wellbeing information session for staff with a focus on women’s health. Resources were displayed alongside information signposting and healthpoint offered free mini lifestyle checks. 35 staff members attended the session with 2 going on to access further healthpoint support around weight management.

### Promoting Health and Wellbeing

The Health Improvement Team deliver a broad range of health promotion initiatives in each locality across Moray aiming to reduce health inequalities and promote early intervention and prevention work. Activity is also supported by the use of the Mobile Information Bus allowing the team to deliver a service across Moray.



NHS Grampian healthpoint service offers free information, support and advice on a range of health and wellbeing concerns including smoking cessation and weight management. The service works proactively to tackle health issues relating to self-care offering free information and advice on a number of health concerns for professionals and members of the general public. Healthpoint also offers an outreach service, in both clinical and non-clinical settings, within each locality in Moray providing an accessible health and wellbeing support service.

The team also attended events alongside partners, such as the MacMoray Festival, Moray Pride, DWP Job Fairs, Keith Show, Mum’s Groups and community lunches, offering health and wellbeing advice and guidance in a range of settings.

The healthpoint team engaged with over 4000 people who were interested in health and wellbeing. These include health walks; confidence 2 cook; baby steps and grow well choices.

## MANAGEMENT COMMENTARY (continued)

### Service Delivery/Business as Usual

The healthcare system has responded to significant surges in demand. A pan Grampian approach to manage surge and flow through the system ensures patients/service users receive the care they require. Staff within Moray, across all sectors of health and social care, including independent providers and the third sector, have stepped up to the challenge on a daily basis. There is significant pressure in some service areas which will require a particular focus to work through the backlog of referrals, with plan being refined on how services will achieve this.

A range of initiatives are being introduced and tested as part of the wider portfolio Urgent and Unscheduled Care Improvement Plan that focuses on avoiding unnecessary hospital admissions and improving patient flow through the system. In parallel, in specialties where waiting times for elective surgery are long, e.g. Orthopaedics, General Surgery and Ophthalmology, alongside the small volume of cases we are providing locally, we are also offering Moray residents the opportunity to have their surgery provided in other regional and national centres where staffed theatre and bed capacity is available. The National Treatment Centre in Inverness has already started hip and knee replacement surgery for Grampian residents.



### Vaccination Programme

The autumn / winter vaccination programme for Covid and Flu commenced in September 2023 and ran until the end of March 2024. Covid-19 vaccination uptake for Moray was 60% which was above the Scottish average of 56.6% with the flu vaccination uptake over the same period across Moray being 58.3%, again above the Scottish average of 53.7%. The priorities for Spring 2024 include the commencement of the Covid-19 spring booster programme which will commence on 2 April 2024 for eligible cohorts.

The shingles vaccination programme commenced in January 2024 which now requires 2 doses, with the 2nd dose offer commencing in March. The uptake of the shingles vaccine for priority groups as of 7 March detailed 65 year olds (68.3%) 70 year olds (72%) 50 year olds and those who are immunosuppressed (52.85%). Those between 71-79 years who have not been offered shingles vaccine previously have now been offered this but has to date had a lower uptake of 13.19%. The pneumococcal program was brought forward to February 2024 commencing with those who are immunocompromised. Pre School and childhood immunisation schedule is continuing and now delivered within the vaccination centre.

## MANAGEMENT COMMENTARY (continued)

There has been additional planning within the vaccination service to support requests for the MMR vaccination given the recent concerns related to measles.

### Volunteers

Health and Social Care Moray have now recruited over 200 volunteers supporting us across our NHS and Social Care services. Our volunteers support us in our hospitals, at home, and in the community. Our volunteers improve our patients journey and experience with us and support our staff through undertaking day to day non clinical tasks.

### Frailty Pathway: Focus on Frailty

As part of a national initiative, Moray joined the Frailty Governance structure is now well established locally within Moray and is working well – progress is shared from both sub groups to the overarching strategic group. The continued vision for the Focus on Frailty work in Moray is to develop a broad frailty pathway which includes a community based frailty ‘triggers’ assessment and resultant actions (utilising an adaptation of the Making Every Opportunity Count (MEOC) tool), a primary care assessment and resultant interventions; and a secondary care frailty assessment and resultant intervention. Through research and development led by the Digital Health Institute develop and test 'Person Held Data Store'. We are currently testing with a sample group of 10 Unpaid Carers.

### General Practice Visioning Programme

Health and Social Care Moray along with the other two partnerships in Grampian have taken forward a programme to deliver a vision with associated strategic objectives for General Practice in Grampian, supported by the Scottish Government and NHS Grampian. The vision and objectives were approved by the three Integration Joint Boards in March 2024. The programme is now in the delivery phase, and will manage this collectively for the three partnerships through the Grampian General Practice Vision Programme Board. Updates will be reported to the 3 IJB's.

## MANAGEMENT COMMENTARY (continued)

### Longer Term Changes to Strategies and Plans

#### Home First

Work continues to develop the Home First portfolio of projects with a focus on ensuring projects are sustainable, scalable and meet the strategic objectives of the MIJB. Work is being undertaken in a Portfolio approach, pulling on the strengths and assets at a whole system level.

Efforts include a focus on reducing delayed discharges which has been very challenging to achieve despite the significant work of the team. Additional resource was allocated with two Band 6 Nurse Practitioners joining the Hospital Without Walls Team and an addition of a Career Start GP working one day a week working with the Geriatric team at DGH and Home First Team.

To maximise opportunities to support patient flow, a Moray wide Strategic Multidisciplinary Team meets to prioritise the available resource. A strategy group and operational group reviewing the challenges of Care at Home provision have both met with action plans developed.



#### Carers Strategy

Following the development and publication of the Moray Carers Strategy 2023-2026, the high-level actions set out in the strategy have been developed into the implementation plan to deliver on the three priorities which unpaid carers identified.

Recognition for Carers - We want carers to be able to say, 'I can identify as a carer. I am able to access the information and advice I need as a carer and I know and understand my rights'.

Valuing Carers - We want carers to be able to say, 'I am listened to and valued as an equal and expert partner by people working in health and social care. I am involved in the planning and delivery of services and support for myself and for the person/s I am caring for'.

Supporting Carers - Involving Carers as Equal, Expert and Valued, we want carers to be able to say, 'I am able to manage my caring role and reduce any negative impact on my health and wellbeing. I can access the support and services which are right for me. I am able to take a break from my caring role when I need to. I am not disadvantaged because I am a carer. I am able to achieve my own goals and maintain my education and/or employment'.

## MANAGEMENT COMMENTARY (continued)

The implementation plan is a live document with new actions added as they are identified and indicators in place to support performance reporting. Project plans sit under the overarching implementation plan.

A carers voice group has been established to monitor the difference the strategy is making to unpaid carers in Moray.

### Financial Review and Performance

Financial performance forms part of the regular reporting cycle to the MIJB. Throughout the year the Board, through the reports it receives, is asked to consider the financial position at a given point and any management action deemed as necessary to ensure delivery of services within the designated financial framework. From the first quarter in the financial year, the Board was presented with financial information that included a forecast position to the end of the year. In November 2023 the Board received a financial report which forecast an expected overspend to the end of the financial year of £3.02m. This forecast remained consistent throughout the remainder of the year and in December 2023, MIJB were forecasting an overspend to the end of the year of £3.02m, the MIJB actually out turned at £3.02m overspent. Both partners in line with the Integration Scheme, put in additional funding to cover this overspend, so with the use of ear marked reserves totalling £2.697m, leaves a balance of £1.986m in ear marked reserves to be carried forward into 2024/25. In March 2023, the MIJB agreed a savings plan of £4.141m. At the end of the financial year, this had been achieved in part, with recurring savings of £2.5m.

Given the uncertainties associated with funding and the emerging overspend position at the early stage of the financial year, it was necessary to update the Board regularly on the emerging financial position. This was done formally through MIJB meetings and informally through development sessions.

## MANAGEMENT COMMENTARY (continued)

Service Area	Budget £000's	Actual £000's	Variance (Over)/ under spend £000's	Note
Community Hospitals & Services	7,605	7,942	(337)	
Community Nursing	5,544	5,702	(158)	
Learning Disabilities	15,748	18,366	(2,618)	<b>1</b>
Mental Health	11,047	11,506	(459)	
Addictions	1,849	1,726	123	
Adult Protection & Health Improvement	197	213	(16)	
Care Services Provided In-House	24,611	23,044	1,567	<b>2</b>
Older People Services & Physical & Sensory Disability	22,357	25,191	(2,834)	<b>3</b>
Intermediate Care & OT	1,640	1,881	(241)	
Care Services Provided by External Contractors	1,833	1,808	25	
Other Community Services	9,739	10,012	(273)	
Administration & Management	2,559	2,828	(269)	
Other Operational Services	1,221	1,299	(78)	
Primary Care Prescribing	18,651	21,339	(2,688)	<b>4</b>
Primary Care Services	19,776	19,939	(163)	
Hosted Services	5,359	5,936	(577)	
Out of Area Placements	720	1,777	(1,057)	<b>5</b>
Improvement Grants	940	949	(9)	
Childrens & Justice Services	19,762	19,762	-	
<b>Total Core Services</b>	<b>171,158</b>	<b>181,220</b>	<b>(10,062)</b>	
Strategic Funds & Other Resources	18,946	6,898	12,048	
<b>TOTALS (before set aside)</b>	<b>190,104</b>	<b>188,118</b>	<b>1,986</b>	
Set Aside	14,665	14,665	-	
<b>TOTAL</b>	<b>204,769</b>	<b>202,783</b>	<b>1,986</b>	

The table above summarises the financial performance of the MIJB by comparing budget against actual performance for the year.

## MANAGEMENT COMMENTARY (continued)

Significant variances against the budget were notably:

**Note 1 Learning Disabilities** – The Learning Disability (LD) service was overspent by £2.618m at the end of 2023/24. The overspend is essentially due to the purchase of care for people with complex needs which resulted in an overspend of £2,727,867, client transport of £13,589. This is offset by more income received than expected of £109,728 (partly due to deferred payments); an underspend in clinical Speech and Language services, physiotherapy and psychology services of £10,544 and other minor underspends totalling £3,671. This budget has been under pressure for a number of years due to demographic pressures, transitions from Children’s services and people living longer and getting frailer whilst staying at home. The biggest overspends was for domiciliary care and day services this enables people to stay living at home or in a homely setting for as long as possible.

**Note 2 Care Services Provided In-House** – This budget was underspent by £1.567m at the end of the year. The most significant variances relate to the Care at Home services for all client groups which are underspent predominantly due to vacancies and issues with recruitment and retention. This is reduced by overspends in internal day care services mainly due to transport costs and energy costs, software licences, uniforms and staff transport costs.

**Note 3 Older People Services and Physical & Sensory Disability** - This budget was overspent by £2.834m at the end of the year. The final position includes an overspend for domiciliary care in the area teams, which incorporates the Hanover complexes for very sheltered housing in Forres and Elgin and for permanent care due to more clients receiving nursing care than residential care and agency staff to provide care and support at Loxa Court. The ageing population requiring more complex care and local demographics also contributes to this overspend as well as the correlation between the recruitment and retention of the internal home care service provision.

**Note 4 Primary Care Prescribing** - This budget was overspent by £2.688m. The overall continuing high price has been attributed in part to the impact of short supply causing an increase in costs being sustained. This is spread across a range of products. The actual volume of items to January has been lowering compared to prior year and was estimated to continue at this level to March 2024. The position has been adjusted to include an overall 4.00% volume increase for the year to March 2024. This overall volume increase is less than previously anticipated. Medicines management practices continue to be applied on an ongoing basis to mitigate the impact of external factors as far as possible and to improve efficiency of prescribing both from clinical and financial perspectives.

**Note 5 Out of Area Placements** – This budget was overspent by £1.057m at the end of the year. This relates to an increase in patients requiring high cost individual specialised placements.

## MANAGEMENT COMMENTARY (continued)

MIJB's financial performance is presented in the comprehensive income and expenditure statement (CIES), which can be seen on page 42. At 31 March 2024 there were ear marked reserves of £1.986m available to the MIJB, compared to £4.683m at 31 March 2023. These remaining reserves of £1.986m are for various purposes as described below:

<b>Earmarked Reserves</b>	<b>Amount £000's</b>
Primary Care Improvement Plan & Action 15	33
GP Premises	229
Community Living Change Fund	319
National Drugs MAT	268
OOH Winter Pressure funding	172
Moray Cervical screening	35
Moray hospital at home	5
Moray Psychological	315
MHO Funding	138
Adult protection funding for CA	18
Adult Disability payment	45
National Trauma Training services	62
Moray ADP	22
Moray School Nurse	28
Moray Winter Fund HCSW & MDT	226
LD Annual Health Checks	69
Community Planning partnership	2
<b>Total Earmarked</b>	<b>1,986</b>
<b>General Reserves</b>	<b>0</b>
<b>TOTAL Earmarked &amp; General</b>	<b>1,986</b>

Action 15 – as part of the Mental Health Strategy 2017-2027, Scottish Government Ministers made a commitment to provide funding to support employment of 800 additional mental health workers to improve access.

Primary Care Improvement Plan – Scottish Government investment to support the GP contract that was agreed in 2018. Covers 6 priority areas identified by Government.

## MANAGEMENT COMMENTARY (continued)

GP Premises – balance of funding for improvement grants including the making of premises improvement grants to GP contractors. The continued digitalisation of paper GP records. Modifications for the purposes of improving ventilation and increase to the space available in NHS owned or leased premises for primary care multi-disciplinary teams.

Community Living Change Fund – funding to be used over a three year period (2021-2024) to support reducing delayed discharge of those with complex needs, repatriate people inappropriately placed outside Scotland and to redesign the way service are provided for people with complex needs.

National Drugs Medication Assisted Treatment (MAT) for embedding and implementation of the standards will be overseen by the MAT implementation support team (MIST).

National Drugs Mission Moray – balance of funding for range of activities including: drug deaths, taskforce funding, priorities of national mission, residential rehabilitation, whole family approach, outreach, bear fatal overdose pathways and lived and living experience.

Out of Hours Winter Pressure funding – balance of funding to sustain GO out of hours and to support resilience to explore operational solutions.

Moray Cervical Screening – balance of funding for smear test catch up campaign.

Moray Hospital at home – development of Hospital at Home provides Acute hospital level care delivered by healthcare professionals, in a home context for a condition that would otherwise require acute hospital inpatient care.

Moray Psychological – funding streams for mental health, psychological wellbeing, facilities, post diagnostic support and psychological therapies.

Mental Health Officer (MHO) funding – funding to support additional mental health officer capacity.

Adult protection funding for care at home – balance of funding to build capacity in care at home community based services.

Adult Disability payment – funding to assist with the implementation of the adult disability payments.

National Trauma Training services – training for dealing with people affected by trauma and adversity.

Moray ADP – funding to support the delivery of services to reduce harms and deaths associated with alcohol and drugs.

Moray School nurse – funding to support NHS Grampian to retain school nurse posts.

## MANAGEMENT COMMENTARY (continued)

Moray Winter Fund Health Care Social Workers (HCSW) – additional funding for further HCSW in both the IJB and Emergency department.

Moray Winter fund Multi Disciplinary Team – additional funding for service pressures includes Discharge to Assess, Home First Frailty team and volunteer development.

Learning Disability Annual Health Checks – to implement the annual health checks.

Community Planning Partnership – funding towards community planning partnership.

All reserves are expected to be utilised for their intended purpose during 2024/25.

**Set Aside** – Excluded from the financial performance table above on page 15 but included within the Comprehensive Income & Expenditure Account is £14.665m for Set Aside services. Set Aside is an amount representing resource consumption for large hospital services that are managed on a day to day basis by the NHS Grampian. MIJB has a responsibility for the strategic planning of these services in partnership with the Acute Sector.

Set Aside services include:

- Accident and emergency services at Aberdeen Royal Infirmary and Dr Gray's inpatient and outpatient departments;
- Inpatient hospital services relating to general medicine, geriatric medicine, rehabilitation medicine, respiratory medicine, learning disabilities, old age psychiatry and general psychiatry; and
- Palliative care services provided at Roxburgh House Aberdeen and The Oaks Elgin.

The budget allocated to Moray is designed to represent the consumption of these services by the Moray population.

The figures for 2023/24 have been derived by uplifting 2019/20 figures by baseline funding uplift in 2020/21 (3.00%), 2021/22 (3.36%) ,2022/23 (6.70%), and 2023/24 (5.35%):

	<b>2023/24</b>	<b>2022/23</b>	<b>2021/22</b>	<b>2020/21</b>	<b>2019/20</b>
Budget	14.665m	13.92m	13.04m	12.62m	12.252m

## MANAGEMENT COMMENTARY (continued)

### Risks, Uncertainties and Future Developments

The MIJB Chief Officer has a responsibility to maintain a risk strategy and risk reporting framework. Risks inherent within the MIJB are monitored, managed and reported at each meeting of the Audit, Performance and Risk Committee. In addition, a risk action log is monitored and managed by the Senior Management Team.

The key strategic risks of the MIJB classed as 'High' and 'Very High' are presented below, the risk number relates to the MIJB internal risk numbering:

#### VERY HIGH

**Risk 2** - There is a risk of MIJB financial failure in that the demand for services outstrips available financial resources. Financial pressures being experienced both by the funding Partners and Community Planning Partners will directly impact on decision making and prioritisation of MIJB.

#### Mitigating Actions –

Budgets are delegated and managed by Service Managers with Head of Service oversight.

Vacancy controls are managed via the Resource Management Group.

The interim arrangement for Chief Financial Officer will cease on 31 March 2024 with the appointment being permanent from 1 April 2024.

Chief Financial Officer (CFO) and Senior Management Team (SMT) are working to continuously identify additional savings.

A reviewed Financial Framework was presented to MIJB on 30 March 2023, and a further update will be presented in March 2024.

Financial information is reported regularly to MIJB, Senior Management Team and Operational Management Team.

The Chief Officer (CO) and CFO continue to regularly engage in finance discussions with key personnel of both NHS Grampian and Moray Council.

The CO and CFO will continue to engage with partner organisations in respect of the financial position throughout the year. Cross partnership performance meetings are with partner CEOs, Finance Directors and Chair/Vice Chair of MIJB.

Additional Mitigations planned:

Regular financial workshops with Service Leads to identify further savings

Financial development session with MIJB members

Reporting from Resource Management Group to SMT for oversight of agreed spend

Financial workshops with OMT looking at savings options

(This section is in a slightly different format due to the transition to a new format for the Strategic Risk Register).

## MANAGEMENT COMMENTARY (continued)

### HIGH

**Risk 3 -** Inability to recruit and retain qualified and experience staff to provide and maintain sustainable, safe care, whilst ensuring staff are fully able to manage change resulting from response to external factors such as the impact of Covid 19 and the actions that arose from the recommendations from the Independent Review of Adult Social Care 2021.

**Mitigating Actions -** System re-design and transformation.

Organisational Development Plan and Workforce plan were updated and approved by MIJB in November 2019 The updated Workforce plan has been submitted to Scottish Government and comments were received by the HSCP in October 2022. These are currently being worked through

Staff Wellbeing is a key focus and there are many initiatives being made available to all staff including training, support, information and access to activities.

Locality Managers are developing the Multi-disciplinary teams in their areas and some project officer support has been provided to develop the locality planning model across Moray.

Lead Managers are involved in regional and national initiatives to ensure all learning is adopted to improve this position.

Lead Managers and Professional Leads are linked to University Planning for intakes and programmes for future workforce development.

**Risk 5 -** Inability to cope with unforeseen external emergencies or incidents as a result of inadequate emergency and resilience planning.

**Mitigating Actions –** Information from the updated Business Impact Assessments /Business Continuity Plans has informed elements of the Winter Preparedness Plan.

Daily Response Group continues, this allows the status of services across the whole system to provide information and contact details to the Senior Manager on Call (SMOC) over the weekend. If any potential issues are highlighted the relevant Persons at Risk Data is compiled and if appropriate, shared with relevant personnel.

NHSG have introduced system wide daily huddles to manage the flow and allocation of resources which require attendance from Dr Grays and HSCM. The format and regularity of these are under review.

HSCM continues to monitor the local situation regarding impacts on staffing and is engaged with NHSG emergency planning arrangements and Council Response and Recovery management team to be ready to escalate response if required. Work was undertaken within NHSG, Aberdeenshire HSCP and Aberdeen City HSCP to look

## MANAGEMENT COMMENTARY (continued)

### HIGH (continued)

at Surge flows and establish a mechanism that will provide easy identification of “hot spots” across the whole system in Grampian, to facilitate a collaborative approach to addressing the issues through the use of a common Operational Pressure Escalation approach. This work could underpin surge responses in winter and at other times of pressure and having a standard approach across Grampian could aid communication and understanding.

NHSG and the three Health and Social Care Partnerships completed a considerable amount of planning for potential Industrial Action from staff groups. This has allowed for testing of a range of communications and plans to be tested and will continue to develop.

A System Networking Over Winter (SNOW) Event took place 28 September, the event was attended by health and social care partners across Grampian and also some Local Resilience Partner Agencies. A tabletop exercise event was carried out to exercise how the partners might work together.

**Risk 7 -** Inability to achieve progress in relation to national Health and Wellbeing Outcomes. Performance of services falls below acceptable level.

**Mitigating Actions –** Service managers monitor performance regularly within their teams and escalate any issues to the System Leadership Group (SLG) for further discussion to provide wider support, developing shared ownership and a greater understanding across the whole system.

Key operational performance data is collated and circulated daily to all managers. A Daily dashboard is held on illuminate for managers to access to ensure any potential issues are identified quickly so action can be taken. This dashboard is being reviewed and will be further developed with the intention of further dashboards to provide a whole system overview. This has been discussed at SLG and agreed.

Performance information is presented to the Performance sub group of Practice Governance Group to inform Social Care managers of the trends in service demands so that resources can be allocated appropriately.

**Risk 8 -** Inability to progress with delivery of Strategic Objectives and Transformation projects

**Mitigating Actions -** Integrated Infrastructure Group previously established, with ICT representation from NHS Grampian and Moray Council, to consider and provide solutions to data sharing issues and ICT infrastructure matters which is an area that will be taken forward alongside the Moray Growth Deal projects. The Moray Transformation Board has recently restarted and will link to all relevant groups

## MANAGEMENT COMMENTARY (continued)

### HIGH (continued)

**Risk 9** - Requirements for support services are not prioritised by NHS Grampian and Moray Council.

**Mitigating Actions** – Membership of the Board was reviewed and revised to ensure representation of all existing infrastructure processes and funding opportunities. Process for ensuring infrastructure change/investment requests developed.

### Development Aims for 2024/25

#### Home First

The development of our Homefirst programme continues to be a priority for ongoing improvements in Moray. Delayed discharges will continue to be a focus of improvement work in relation to admission avoidance, hospital Emergency Department and front door activity, hospital pathways and discharge home. The Frailty programme and the partnership working with the Digital Health Institute brings additional opportunities to Moray.

#### Mental Health and Wellbeing

The Scottish Government Mental Health and Wellbeing Strategy and the Good Mental Health for All in Moray strategy 2016-2026 propose a comprehensive approach to mental health and wellbeing, integrating health and social care models. In partnership across Grampian further development will be taken forward to develop our service model and opportunities for improvements within the adult mental health pathway. Recognising the importance of the transitions process for children moving into adult services, further work is planned to ensure a seamless pathway between services.

#### Childrens Services

The improvement journey will require to evidence continued progress in light of the financial challenges to find new and creative ways to offer support to families and individuals. Early recognition when people need help and to prevent crises situations developing will be a priority. The recent outcome of the external inspection of Children at Risk of Harm gives us a good foundation for continuing that improvement journey, and meeting the actions we developed post that inspection will see further progress towards protecting children in Moray and giving them the best opportunities to thrive in our communities

## MANAGEMENT COMMENTARY (continued)

In addition, we will seek to:

- Focus on prevention to create a more proactive system and develop sustainable models of care rooted in communities. This will be taken forward by listening and involving our local people with support of the Putting People First programme.
- Provide leadership and participation in the GP Visioning programme for Grampian
- Further develop our governance and assurance processes, particularly to demonstrate quality, safety, outcomes and best value.
- Continue to develop how we care for our staff well-being, with staff our most valuable asset.

*Tracy Colyer*

**Tracy Colyer**

**Chair of Moray IJB**

26 September 2024

*Judith Proctor*

**Judith Proctor**

**Interim Chief Officer**

26 September 2024

*Deborah O'Shea*

**Deborah O'Shea**

**Chief Financial Officer**

26 September 2024

## STATEMENT OF RESPONSIBILITIES

### Responsibilities of the MIJB

- To make arrangements for the proper administration of its financial affairs and to secure that one of its officers has the responsibility for the administration of those affairs. In Moray Integration Joint Board, that officer is the Chief Financial Officer;
- To manage its affairs to achieve best value in the use of its resources and safeguard its assets;
- Ensure the Annual Accounts are prepared in accordance with legislation (The Local Authority Accounts (Scotland) Regulations 2014) and so far as is compatible with that legislation, in accordance with proper accounting practices (section 12 of the Local Government in Scotland Act 2003); and
- To approve the Annual Accounts

Signed on behalf of the Moray Integration Joint Board

*Tracy Colyer*

**Tracy Colyer**

**Chair of Moray IJB**

## STATEMENT OF RESPONSIBILITIES (continued)

### Responsibilities of the Chief Financial Officer

The Chief Financial Officer is responsible for the preparation of the Moray Integration Joint Board's statement of accounts in accordance with proper practices as set out in the CIPFA/LASAAC Code of Practice on Local Authority Accounting in the United Kingdom (the Code).

In preparing the Annual Accounts the Chief Financial Officer has:

- Selected suitable accounting policies and applied them consistently;
- Made judgements and estimates that were reasonable and prudent;
- Complied with legislation; and
- Complied with the local authority code (in so far as it is compatible with legislation).

The Chief Financial Officer has also:

- Kept proper accounting records that were up to date; and
- Taken reasonable steps for the prevention and detection of fraud and other irregularities.

I certify that the financial statements give a true and fair view of the financial position of the Moray Integration Joint Board as at 31 March 2024 and the transactions for the year then ended

*Deborah O'Shea*

**Deborah O'Shea FCCA**

**Chief Financial Officer**

26 September 2024

## REMUNERATION REPORT

### Introduction

This Remuneration Report is provided in accordance with the Local Authority Accounts (Scotland) Regulations 2014 (SSI2014/200) as part of the MIJB annual accounts. This report discloses information relating to the remuneration and pension benefits of specified MIJB members.

All information disclosed in the tables is subject to external audit. Other sections within the Remuneration Report will be reviewed for consistency with the financial statements.

### Moray Integration Joint Board

The voting members of MIJB are appointed through nomination by Moray Council and the Grampian Health Board. There is provision within the Order to identify a suitably experienced proxy or deputy member for both the voting and non-voting membership to ensure that business is not disrupted by lack of attendance by any individual.

### MIJB Chair and Vice-Chair

Nomination of the MIJB Chair and Vice-Chair post holders alternates every 18 months between a Councillor and a Health Board non-executive member.

The MIJB does not provide any additional remuneration to the Chair, Vice-Chair or any other board members relating to their role on the MIJB. The MIJB does not reimburse the relevant partner organisations for any voting member costs borne by the partner.

The MIJB does not have responsibilities in either the current or in future years for funding any pension entitlements of voting MIJB members. Therefore, no pension rights disclosures are provided for the Chair or Vice-Chair.

Taxable Expenses 2022/23	Name	Position Held	Nomination By	Taxable Expenses 2023/24
£				£
-	Dennis Robertson	Vice-Chair 29/04/21 – 01/10/22 Chair 1/10/22 to 31/03/24	Grampian Health Board	-
-	Cllr Tracy Colyer	Chair 15/05/22 – 01/10/22 Vice-Chair 01/10/22 – 31/03/24	Moray Council	-

## REMUNERATION REPORT (continued)

### Officers of the MIJB

The MIJB does not directly employ any staff in its own right; however specific post-holding officers are non-voting members of the Board.

### Chief Officer

Under section 10 of the Public Bodies (Joint Working) (Scotland) Act 2014 a Chief Officer for the integration joint board has to be appointed and the employing partner has to formally second the officer to the Board. The employment contract for the Chief Officer will adhere to the legislative and regulatory framework of the employing partner organisation. The remuneration terms of the Chief Officer's employment are approved by the Board.

### Other Officers

No other staff are appointed by the MIJB under a similar legal regime. Other non-voting board members who meet the criteria for disclosure are included in the disclosures below.

Total 2022/23	Senior Employees	Salary, Fees & Allowances	Total 2023/24
£		£	£
111,100	Simon Bokor-Ingram Chief Officer	122,460	122,460
80,207	Deborah O'Shea Interim Chief Financial Officer	83,476	83,476

In respect of officers' pension benefits, the statutory liability for any future contributions to be made rests with the relevant employing partner organisation. On this basis there is no pensions liability reflected on the MIJB balance sheet for the Chief Officer or any other officers.

The MIJB however has a responsibility for funding the employer contributions for the current year in respect of the officer time spent on fulfilling the responsibilities of their role on the MIJB. The following table shows the MIJB's funding during the year to support the officers' pension benefits. The table also shows the total value of accrued pension benefits which may include benefits earned in other employment positions and from each officer's own contributions.

NOTE: no bonuses, expenses allowances, compensation for loss of office or any taxable benefits were made in 2023/24

## REMUNERATION REPORT (continued)

	In Year Pension Contributions		Accrued Pension Benefits		
	Year to 31/03/23	Year to 31/03/24		As at 31/03/2024	Difference from 31/03/2023
	£	£		£ 000's	£ 000's
Simon Bokor-Ingram, Chief Officer	23,220	24,346	Pension	46	(1)
			Lump Sum	123	35
Deborah O'Shea Interim Chief Financial Officer (*)	6,943	7,179	Pension	28	3
			Lump Sum	31	2

(\*) in year pension contributions for year to 31/03/23 was incorrectly disclosed last year and has been amended.

### Disclosure by Pay bands

As required by the regulations, the following table shows the number of persons whose remuneration for the year was £50,000 or above, in bands of £5,000.

Number of Employees in Band 2022/23	Remuneration Band	Number of Employees in Band 2023/24
1	£80,000 - £84,999	1
1	£110,000 - £114,999	-
-	£120,000 - £124,999	1

## REMUNERATION REPORT (continued)

### Exit Packages

There were no exit packages agreed by the MIJB during 2023/24 financial year, or in the preceding year.

*Tracy Colyer*

.....  
**Tracy Colyer**

**Chair of Moray IJB**

26 September 2024

*Judith Proctor*

.....  
**Judith Proctor**

**Interim Chief Officer**

26 September 2024

## ANNUAL GOVERNANCE STATEMENT

The Annual Governance Statement describes the Moray Integration Joint Board's (MIJB) governance arrangements and reports on the effectiveness of the MIJB's system of internal control.

### Scope of Responsibility

The MIJB is responsible for ensuring that its business is conducted in accordance with the law and appropriate standards, and that public money is safeguarded and used efficiently and effectively in pursuit of best value.

In discharging its responsibilities, the MIJB has established arrangements for its governance which includes the system of internal control. This system is intended to manage risk and support the achievement of the MIJB's policies, aims and objectives. The system provides reasonable but not absolute assurance of effectiveness.

The MIJB places reliance on the systems of internal control of NHS Grampian systems and Moray Council, which supports organisational compliance of policies and procedures in addition to those of the MIJB. Assurances are required on the effectiveness of the governance arrangements of all three organisations, meaning a significant failure in one of the three Partners may require to be disclosed in the annual accounts of all three Partners.

### The Governance Framework

The CIPFA/SOLACE framework for 'Delivering Good Governance in Local Government' last updated in 2016 remains current and provides a structured approach in defining seven principles that underpin effective governance arrangements. Whilst the framework is written specifically for Local Government, the principles apply equally to integration authorities, and while the MIJB continues to evolve as an entity in its own right. It continues to draw on the governance assurances of NHS Grampian and Moray Council as its principal funding partners.

Given the scope of responsibility within the MIJB and the complexities surrounding the assurance arrangements, a Local Code of Corporate Governance was developed and the MIJB assesses the effectiveness of its governance arrangements against the principles set out in the document. The Code outlines the seven governance principles from the CIPFA/SOLACE guidance (as referenced below) and provides the sources of assurance for assessing compliance relative to the MIJB, Moray Council and NHS Grampian. These assurances include referencing the governance arrangements of NHS Grampian and Moray Council which are summarised annually and published in their respective Annual Governance Statements which form part of the annual accounts of each organisation. The respective governance statements can be found on the individual organisations websites: Moray Council: [Annual Accounts - Moray Council](#) and NHS Grampian: <https://www.nhsgrampian.org/about-us/annual-accounts/>

## ANNUAL GOVERNANCE STATEMENT (continued)

### Key Governance Arrangements

All of the scheduled Audit Performance and Risk and Clinical Care Governance Committee meetings were held as timetabled during 2023/24.

Health and Social Care Moray (HSCM) established an emergency response group that has been operational since the end of March 2020, this has now transformed into a Daily Response meeting. Representation on the response groups of the Partner organisations is provided by HSCM staff, ensuring the necessary links and flow of information to ensure a co-ordinated response on a pan Grampian basis and locally within Moray.

There continues to be governance standards and collaborative working across the whole system, both across the NHS Portfolios and Grampian wide system. The use of a Grampian Operation Performance Escalation System (GOPES) was established to enable senior leaders to have oversight of where pressures were located in the system and to direct responses accordingly. This development has also strengthened the identification of key metric thresholds to inform the levels for escalation.

### Evaluation of the Effectiveness of Governance

#### Governance Principle 1 – Behaving with integrity, demonstrating strong commitment to ethical values and respecting the rule of law

##### Assessment of Effectiveness

- The activities of the MIJB are directed by a Board comprising voting and non-voting members. The Board meets every two months and draws its membership from a broad range of sources. Formal Board meetings are augmented by regular development sessions that focus in detail on specific areas. The Board is also supported by an Audit, Performance and Risk Committee, and a Clinical and Care Governance Committee, each with a specific remit to support effective governance arrangements.
- The MIJB operates in line with Standing Orders that govern proceedings of the Board and its Committees, and which incorporates the Board's Scheme of Administration that deals with the Board's committee structure and working groups.
- The MIJB has appointed a Standards Officer to support compliance with an ethical standards framework in line with the Ethical Standards in Public Life etc. (Scotland) Act 2000 whereby members of devolved public bodies such as the MIJB are required to comply with Codes of Conduct, approved by Scottish Ministers, together with guidance issued by the Standards Commission.

## ANNUAL GOVERNANCE STATEMENT (continued)

### Governance Principle 2 – Ensuring openness and comprehensive stakeholder engagement

#### Assessment of Effectiveness

- Provision is made within MIJB's Standing Orders for public and press access to meetings and reports. During the 2023/24 year the meetings continued to be hybrid meetings, as the need to broadcast live Board meetings continued. A specific website has been developed for Health and Social Care Moray and is continuously monitored for improvement. Agendas, reports and minutes for all committees can be accessed via Moray Council website, in addition to all the linked strategies of the MIJB.
- Both the voting and non-voting membership arrangements of the MIJB are in line with the Public Bodies (Joint Working) (Integration Joint Boards) (Scotland) Order 2014. There are eight voting members, four are elected members appointed by Moray Council and four are non-executive members of the NHS Grampian Board. The non-voting membership comprises six professional members and five stakeholder members representing: staff, third sector bodies carrying out activities in relation to health and social care, service users and unpaid carers, and six additional non-voting members which include the Chief Executives of Moray Council and NHS Grampian in an Ex-officio capacity. The broad membership of the MIJB ensures valued input and engagement from a wide range of stakeholders.
- The Community Empowerment (Scotland) Act 2015 places a statutory duty on MIJB and its Community Planning Partners to engage with communities on the planning and delivery of services and securing local outcomes. The MIJB has an approved Communications and Engagement Strategy which recognises and promotes the active and meaningful engagement with all stakeholders.

### Governance Principle 3 – Defining outcomes in terms of sustainable economic, social and environmental benefits

#### Assessment of Effectiveness

- The MIJB Strategic Plan 2022-2032 is a continuation of the 2019 plan and the long-term strategic objectives make room for adapting to challenges and developments in health and social care over the coming years. To deliver on these objectives a 12-month delivery plan was developed, which is supported by various documents including a medium term financial framework.
- The plan is underpinned by a performance framework, workforce plan, organisational development strategy, and a communications, engagement and participation plan. Work is ongoing to update the workforce plan, whilst considering how services can transform within the current financial envelope.
- The suite of documents are designed to identify outcomes and forward-thinking on direction over the medium term. Outcomes are closely linked to the delivery of health and social care and the planned improvements for the population of Moray.
- A climate change duties report is collated and submitted annually on behalf of the MIJB.

## ANNUAL GOVERNANCE STATEMENT (continued)

### Governance Principle 4 – Determining the interventions necessary to optimise the achievement of intended outcomes

#### Assessment of Effectiveness

- The MIJB's decision making process ensures that the members of the Board receive objective and robust analysis of a variety of options indicating how the intended outcomes will be achieved, providing information on the associated risks and opportunities.
- Board papers reflect the broad range of matters under consideration including regular update reports by the Chief Officer on topical matters and agenda items covering opportunities and challenges arising from reconfiguration of services.
- The Financial Management Code promoted by CIPFA is recognised as a means of assisting in ensuring good financial administration. A medium term financial strategy was approved by the MIJB in March 2023 and will be reviewed to ensure alignment with the strategic plan, delivery plan and to incorporate the delegation of children's services.

### Governance Principle 5 – Developing the entity's capacity, including the capability of its leadership and the individuals within it

#### Assessment of Effectiveness

- The Senior Management teams Service Managers, Officers and IJB Members attended a Development session in February to discuss the challenging financial situation. Officers presented some ideas for service transformation, including how they delivered the strategic aims of MIJB but also how they might help achieve the savings required for the forthcoming financial year.
- The MIJB has met with Officers regularly for development sessions to increase the opportunity for shared learning and constructive challenge.

## ANNUAL GOVERNANCE STATEMENT (continued)

### Governance Principle 6 – Managing risk and performance through robust internal control and strong public financial management

#### Assessment of Effectiveness

- As part of a robust risk monitoring framework, the Strategic Risk Register is reviewed and updated regularly and presented to every Audit, Performance and Risk Committee. A related action log was created for monitoring purposes and is owned and monitored by the Senior Management Team. The committee agreed in October that the register would only be presented biannually with the caveat that any emerging or increasing risks would be presented as required. The financial strategic risk register has been presented to each committee.
- A Performance Management Framework has been developed. Performance reporting falls within the scope of the Audit, Performance and Risk Committee and reporting is quarterly.
- The internal control system links closely with those of the Partners, given their operational remit for delivery of services under direction of the MIJB. The Audit, Performance and Risk committee through its consideration of reports monitors the effectiveness of internal control procedures. The MIJB Chief Internal Auditor undertakes an annual review of the adequacy of internal controls and the opinion is included within this statement.
- The MIJB has an independent S95 Officer who is a member of the MIJB, providing advice on all financial matters and ensure timely production and reporting of budget estimates, budget monitoring reports and annual accounts.
- Governance arrangements have been developed and maintained to comply with the core functions of various good framework guidelines including Code of Practice on Managing the Risk of Fraud and Corruption, Public Sector Internal Audit Standards (incorporating the principles of the Role of the Head of Internal Audit), Audit Committees: Practical Guidance for Local Authorities and Police, etc.

### Governance Principle 7 – Implementing good practices in transparency, reporting and audit to deliver effective accountability

#### Assessment of Effectiveness

- MIJB business is conducted through an approved cycle of Board meetings. During the year, recordings of Board meetings were made available to the public. Agendas, reports and minutes are available for the public to inspect. There is a standard reporting format in place to ensure consistency of approach and consideration by Members to provide transparency in decision making.
- The MIJB publishes both Annual Accounts and an Annual Performance Report following Board approval.
- The Chief Internal Auditor reports directly to the Audit, Performance and Risk committee with the right of access to the Chief Officer, Interim Chief Financial Officer and Chair of the Audit, Performance and Risk committee on any matter. The Chief Internal Auditor has continued to report to Committee during 2023/24.

## ANNUAL GOVERNANCE STATEMENT (continued)

### Review of Adequacy and Effectiveness

The MIJB has a responsibility for conducting, at least annually, a review of the effectiveness of the governance arrangements, including the system of internal control. The review is informed by the work of the Senior Management Team (which has responsibility for the development and maintenance of the internal control framework environment); the work of the Internal Auditors and the Chief Internal Auditor's annual report and the reports from the External Auditor and other review agencies and inspectorates.

### Internal Audit Opinion

Moray Council's Internal Audit Section delivers the Internal Audit Service for the Moray Integration Joint Board (MIJB), and the Council's Audit and Risk Manager holds the Chief Internal Auditor appointment to the MIJB until the 31st of March 2026. The Council's Internal Audit Section has adopted the Public Sector Internal Audit Standards (PSIAS), which require the Chief Internal Auditor to deliver an annual internal audit opinion and report, which has also been used to inform this governance statement.

The Chief Internal Auditor's evaluation of the adequacy and effectiveness of the MIJB framework of governance, risk management and internal control includes consideration of the findings from the audit work undertaken by the Chief Internal Auditor in his role as the Audit and Risk Manager for the Moray Council. Assurance is also sought from the Internal Audit Service Provider for NHS Grampian of the governance processes adopted by that organisation. In addition, reports issued by other external review agencies are considered in the opinion provided by the Chief Internal Auditor.

Internal Audit operates independently within the organisation. While there have been challenges due to changes in working practices with officers working from home, management has imposed no limitations on the scope of audit work. In accordance with PSIAS, the Chief Internal Auditor prepares a risk based Audit Plan for the MIJB, which has regard to the internal audit arrangements of both the Moray Council and NHS Grampian functions.

The Annual Audit Plan for 2023/24 agreed to the following audits to be undertaken:

- **Commissioning Services** - Review the arrangements for the commissioning of social care services for children to ensure these are designed and delivered to meet the specified needs and demonstrate best value.
- **Disabled Parking System** - Review the system for administering the disabled parking permits, also known as Blue Badges.
- **Moray Integrated Community Equipment Store** - A review of the Occupational Therapy Store, now known as the Moray Integrated Community Equipment Store, to ensure appropriate accounting systems are followed.

## ANNUAL GOVERNANCE STATEMENT (continued)

All audits have been undertaken and reported to the MIJB Audit, Performance and Risk Committee. A review of the commissioning for children's care services found that within the scope of the audit, it was well-managed. The audits of the Disabled Parking System and the Moray Integrated Community Equipment Store noted significant findings where improvements are required to current operating arrangements. In addition to the planned audits, reviews of Moray Council's financial and administrative systems were reported to the MIJB Audit, Performance and Risk Committee.

Internal Audit has also undertaken follow-up reviews to evidence the implementation of recommendations from the audits undertaken of Self-Directed Support, Client Monies, and Social Care & CareFirst System Information Governance. The demands on the Service are appreciated. However, it was found that recommendations had not been implemented within the agreed timescales. Implementation of recommendations is a key element in determining the adequacy and effectiveness of governance and internal control systems. If recommendations are not implemented in a timely manner, then weaknesses in control and governance frameworks will remain in place. It is pleasing to note that the Service has provided update reports to the MIJB Audit, Performance and Risk Committee detailing progress in implementing audit recommendations, including the review undertaken by an external auditor of the Adult Social Care Commissioning Service. This commitment to implementing audit recommendations is expected to continue in 2024/25.

The Chief Internal Auditor, after consideration of the results regarding the work carried out by Internal Audit, taken together with other sources of assurance, with specific reference to the external assessment into how the Commissioning Service manages adult social care contracts; only limited assurance can be provided that the Moray Integration Joint Board has adequate systems of governance and internal control for the year ended the 31st of March 2024. Progress reports on implementing recommendations are reported to Committee and actions on the recommendations are being acted up and implemented in a more timely basis, which will mitigate the concerns raised by the Auditor in the future.

### Prior Year Governance Issues

The Annual Governance Statement for 2022/23 highlighted a number of areas for development in looking to secure continuous improvement. An assessment of progress is provided below:

## ANNUAL GOVERNANCE STATEMENT (continued)

Area for Improvement Identified in 2022/23	Action Undertaken / Progress Made in 2023/24
Assurance and reporting for Children's Social Work and Justice services.	Move to IJB saw a shadow year with reporting to both IJB and Moray Council. The service has strengthened the work under taken by the policy and procedure team and the service has developed a data dashboard.
Performance reporting at management level and IJB APR Committee	Performance reporting continues to IJB APR Committee. Children & Justice service are also included in this reporting schedule. A new collaborative approach is being taken forward to work with Aberdeen City to develop the performance reporting.
Development of Strategic Risk Register for the IJB	The Financial Strategic risk register was developed and presented to IJB for approval in January 2024. Subsequent updates have been presented to the IJB in conjunction with the ongoing financial recovery work. The remaining registers are being developed and will be presented to IJB in June 2024.
IJB Category 1 responder status and Care for People Plan	A Care for People Operational Framework was presented to IJB in January 2024. Several training and development sessions have taken place during 2024 to provide additional support to managers. A short life working group is in the process of being set up to continue to ensure a whole partnership approach.
Delivery against the strategic objectives in IJB Strategic Plan	Across the three strategic themes progress on several programmes has evidenced the commitment to the Strategic Plan, including the work to support Unpaid Carers; the Home First and Frailty work' and the efficiency agenda that builds in resilience as we deliver better value.

## ANNUAL GOVERNANCE STATEMENT (continued)

Area for Improvement Identified in 2022/23	Action Undertaken / Progress Made in 2023/24
Compliance with audit recommendations and completion of outstanding actions.	Improvement on progress has been evidenced, however, this area of improvement requires further development and will be included for developments in 2024/25.

### Further Developments

Following consideration of the review of adequacy and effectiveness, the following action plan has been established to ensure continual improvement of the MIJB's governance arrangements and progress against the implementation of these issues will be assessed as part of the next annual review.

	Areas of focus for 2024/25
1.	GP visioning programme to deliver resilience and sustainability
2.	Financial sustainability with best value and outcomes
3.	Assurance and reporting for Children's Social Work and Justice Services
4.	Improvement in compliance with audit recommendations

## ANNUAL GOVERNANCE STATEMENT (continued)

### Key Governance challenges going forward will involve:

- Providing capacity to meet statutory obligations whilst managing expectations and rising demand for services and the wider societal economic challenges now presented that also potentially drive demand;
- As a Board, difficult decisions will be required in balancing how we meet the needs of our community whilst operating within the available resource envelope;
- Continue to address our work force challenges in respect of recruitment and retention and where persistent vacancies will necessitate the need for redesign;
- Continuing to work closely with NHS Grampian, Moray Council and Moray Community Planning Partnership to build on existing relationships and establishing collaborative leadership, and to maximise the opportunities from an expanded health and social care remit with the Portfolio approach, including Dr Grays hospital, and how the IJB contributes to the wider community planning agenda in Moray and the North East;
- Continue to implement the recommendations of internal and external audit, including learning from national reviews.
- Continue work with teams to provide assurance to MIJB as we develop the governance structures for Children's Social Work and Criminal Justice Services that support decision making on how best to tackle poverty and inequalities.
- There have been no significant events up to the authorised for issue date.

## ANNUAL GOVERNANCE STATEMENT (continued)

### Statement

In our respective roles as Chair and Chief Officer of the MIJB, we are committed to ensuring good governance and recognise the contribution it makes to securing delivery of service outcomes in an effective and efficient manner. This annual governance statement summarises the MIJB's current governance arrangements and affirms our commitment to ensuring they are regularly reviewed, developed and fit for purpose. Whilst recognising that improvements are required, as detailed earlier in the statement, it is our opinion that a reasonable level of assurance can be placed upon the adequacy and effectiveness of the MIJB's governance arrangements.

The immediate challenge will be to continue to meet all operational demands as we continue to recover from the legacy of the Covid 19 pandemic that has impacted at a socioeconomic level on our community. Pressure on financial settlements is increasing, and we will continue to engage with our Partners and the wider community to agree plans and outcomes that are both sustainable and achievable. Taking those forward will be challenging as we aim to fulfil the nine Health and Wellbeing national health and well-being outcomes, and the strategic priorities identified and detailed in our Strategic Plan. Good governance remains an essential focus in delivering services in a way that both meets the needs of communities and discharges statutory best value responsibilities.

These were arrangements in place for 2023/24 and up to the date of authorised for issue.

*Tracy Colyer*

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**Tracy Colyer**  
**Chair of Moray IJB**

26 September 2024

*Judith Proctor*

.....

**Judith Proctor**  
**Interim Chief Officer**

26 September 2024

## COMPREHENSIVE INCOME AND EXPENDITURE STATEMENT

This statement shows the cost of providing services for the year ended 31 March 2024 according to generally accepted accounting practices.

2022/23		2023/24
Net Expenditure		Net Expenditure
£ 000		£ 000
5,990	Community Hospitals	7,942
5,163	Community Nursing	5,702
12,626	Learning Disabilities	18,366
10,295	Mental Health	11,506
1,588	Addictions	1,726
167	Adult Protection & Health Improvement	213
18,486	Care Services Provided In-House	23,044
23,441	Older People & Physical & Sensory Disability Services	25,191
1,768	Intermediate Care and Occupational Therapy	1,881
8,084	Care Services Provided by External Providers	1,808
9,208	Other Community Services	10,012
2,425	Administration & Management	2,828
1,286	Other Operational services	1,299
19,283	Primary Care Prescribing	21,339
19,058	Primary Care Services	19,939
5,018	Hosted Services	5,936
1,232	Out of Area Placements	1,777
888	Improvement Grants	949
-	Children & Justice Services	19,762
8,858	Strategic Funds & Other Resources	6,898
13,917	Set Aside	14,665
<b>168,781</b>	<b>Cost of Services</b>	<b>202,783</b>
(156,443)	Taxation and Non-Specific Grant Income (note 5)	(200,086)
<b>12,338</b>	<b>Deficit on provision of Services</b>	<b>2,697</b>
<b>12,338</b>	<b>Total Comprehensive Income and Expenditure</b>	<b>2,697</b>

There are no statutory or presentational adjustments which reflect the MIJB's application of the funding received from partners. The movement in the General Fund balance is therefore solely due to the transactions shown in the Comprehensive Income and Expenditure Statement. Consequently, an Expenditure and Funding Analysis is not provided in these annual accounts.

Children & Justice Services were integrated into the MIJB from 2023/24, with the first year being the shadow year meaning all financial responsibilities remained with the Council.

## MOVEMENT IN RESERVES STATEMENT

This statement shows the movement in the year on the Moray Integration Joint Boards (MIJB) reserves. The movements which arise due to statutory adjustments which affect the General Fund balance are separately identified from the movements due to accounting practices. Additional detail included within note 7 on page 49.

<b>Movement of Reserves During 2023/24</b>	<b>General Fund Balance £000</b>
<b>Opening Balance at 1 April 2023</b>	<b>(4,683)</b>
Total Comprehensive Income and Expenditure	2,697
<hr/>	
Decrease in 2023/24	<b>2,697</b>
<hr/>	
<b>Closing Balance at 31 March 2024</b>	<b>(1,986)</b>
<hr/>	
<b>Movement of Reserves During 2022/23</b>	<b>General Fund Balance £000</b>
<b>Opening Balance at 1 April 2022</b>	<b>(17,021)</b>
Total Comprehensive Income and Expenditure	12,338
<hr/>	
Decrease in 2022/23	<b>12,338</b>
<hr/>	
<b>Closing Balance at 31 March 2023</b>	<b>(4,683)</b>
<hr/>	

## BALANCE SHEET

The Balance Sheet shows the value of the Moray Integration Joint Board's (MIJB) assets and liabilities as at the balance sheet date. The net assets of the MIJB (assets less liabilities) are matched by the reserves held by the MIJB.

<b>31 March 2023 £000</b>		<b>Notes</b>	<b>31 March 2024 £000</b>
4,683	Short Term Debtors <b>Current Assets</b>	6	1,986
-	Short Term Creditors <b>Current Liabilities</b>		-
-	Provisions <b>Long Term Liabilities</b>		-
<u>4,683</u>	<b>Net Assets</b>		<u>1,986</u>
4,683	Usable Reserve General Fund	7	1,986
<u>4,683</u>	<b>Total Reserves</b>		<u>1,986</u>

The unaudited annual accounts were issued on 27 June 2024 and the audited annual accounts were authorised for issue on 26 September 2024.

The Annual Accounts present a true and fair view of the financial position of the MIJB as at 31 March 2024 and its income and expenditure for the year then ended.

*Deborah O'Shea*

**Deborah O'Shea FCCA**

**Chief Financial Officer**

26 September 2024

## NOTES TO THE FINANCIAL STATEMENTS

### Note 1 Significant Accounting Policies

#### General Principles

The Financial Statements summarise the Moray Integration Joint Board's (MIJB) transactions for the 2023/24 financial year and its position at the year-end of 31 March 2024.

The MIJB was established under the requirements of the Public Bodies (Joint Working) (Integration Joint Boards) (Scotland) Act 2014 and is a Section 106 body as defined in the Local Government (Scotland) Act 1973.

The Financial Statements are therefore prepared in compliance with the Code of Practice on Local Authority Accounting in the United Kingdom 2023/24, supported by International Financial Reporting Standards (IFRS), unless legislation or statutory guidance requires different treatment.

The accounts are prepared on a going concern basis, which assumes that the MIJB will continue in operational existence for the foreseeable future. The historical cost convention has been adopted.

#### Accruals of Income and Expenditure

Activity is accounted for in the year that it takes place, not simply when settlement in cash occurs. In particular:

- Expenditure is recognised when goods or services are received and their benefits are used by the MIJB.
- Income is recognised when the MIJB has a right to the income, for instance by meeting any terms and conditions required to earn the income, and receipt of the income is probable.
- Where income and expenditure have been recognised but settlement in cash has not taken place, a debtor or creditor is recorded in the Balance Sheet.
- Where debts may not be received, the balance of debtors is written down.

#### Funding

The MIJB is primarily funded through funding contributions from the statutory funding partners, Moray Council and the Grampian Health Board. Expenditure is incurred as the MIJB commissions' specified health and social care services from the funding partners for the benefit of service recipients in Moray area.

#### Cash and Cash Equivalents

The MIJB does not operate a bank account or hold cash. Transactions are settled on behalf of the MIJB by the funding partners. Consequently, the MIJB does not present a 'Cash and Cash Equivalent' figure on the balance sheet. The funding balance due to or from each funding partner as at 31 March is represented as a debtor or creditor on the MIJB's Balance Sheet.

## NOTES TO THE FINANCIAL STATEMENTS (continued)

### Note 1 Significant Accounting Policies (continued)

#### Employee Benefits

The MIJB does not directly employ staff. Staff are formally employed by the funding partners who retain the liability for pension benefits payable in the future. The MIJB therefore does not present a Pensions Liability on its Balance Sheet.

The MIJB has a legal responsibility to appoint a Chief Officer. More details on the arrangements are provided in the Remuneration Report. The charges from the employing partner are treated as employee costs. Where material the Chief Officer's absence entitlement as at 31 March is accrued, for example in relation to annual leave earned but not yet taken.

Charges from funding partners for other staff are treated as administration costs.

#### Reserves

The MIJB's reserves are classified as either Usable or Unusable Reserves.

The MIJB's only Usable Reserve is the General Fund. The balance of the General Fund as at 31 March shows the extent of resources which the MIJB can use in later years to support service provision.

#### Indemnity Insurance

The MIJB has indemnity insurance for costs relating primarily to potential claim liabilities regarding Board members. The Grampian Health Board and Moray Council have responsibility for claims in respect of the services that they are statutorily responsible for and that they provide.

Unlike NHS Boards, the MIJB does not have any 'shared risk' exposure from participation in the Clinical Negligence and Other Risks Indemnity Scheme (CNORIS). The MIJB participation in the CNORIS scheme is therefore analogous to normal insurance arrangements.

### Note 2 Critical Judgements and Estimation Uncertainty

In applying the accounting policies, the MIJB has had to make certain judgements about complex transactions or those involving uncertainty about future events. There are no material critical judgements or estimation uncertainty.

## NOTES TO THE FINANCIAL STATEMENTS (continued)

### Note 3 Events after the Reporting Period

The unaudited accounts were issued by Deborah O'Shea, Chief Financial Officer on 27 June 2024 and the audited accounts were authorised for issue on 26 September 2024. Events taking place after this date are not reflected in the financial statements or notes.

### Note 4 Expenditure and Income Analysis by Nature

<b>2022/23</b>		<b>2023/24</b>
£000		£000
71,899	Services commissioned from Moray Council	95,500
96,852	Services commissioned from The Grampian Health Board	107,247
30	Auditor Fee: External Audit Work	36
<b>168,781</b>	<b>Total Expenditure</b>	<b>202,783</b>
(156,443)	Partners Funding Contributions and Non-Specific Grant Income	(200,086)
<b>12,338</b>	<b>Deficit on the Provision of Services</b>	<b>2,697</b>

## NOTES TO THE FINANCIAL STATEMENTS (continued)

### Note 5 Taxation and Non-Specific Grant Income

<b>2022/23</b>		<b>2023/24</b>
£000		£000
59,517	Funding Contribution from Moray Council	84,615
96,926	Funding Contribution from The Grampian Health Board	115,471
<b>156,443</b>	<b>Taxation and Non-specific Grant Income</b>	<b>200,086</b>

The funding contribution from The Grampian Health Board shown above includes £14.665m in respect of 'set aside' resources relating to acute hospital and other resources. These are provided by The Grampian Health Board who retains responsibility for managing the costs of providing the services. The MIJB however has responsibility for the consumption of, and level of demand placed on, these resources. The funding contribution from Moray Council has increased in 2023/24 due to the integration of Children's Social Work and Justice Services.

### Note 6 Debtors

<b>31 March 2023</b>		<b>31 March 2024</b>
£000		£000
2,846	The Grampian Health Board	1,723
1,837	Moray Council	263
<b>4,683</b>	<b>Debtors</b>	<b>1,986</b>

Amounts owed by the funding partners are stated on a net basis. Creditor balances relating to expenditure obligations incurred by the funding partners but not yet settled in cash terms are offset against the funds they are holding on behalf of the MIJB.

## NOTES TO THE FINANCIAL STATEMENTS (continued)

### Note 7 Usable Reserve: General Fund

The MIJB holds a balance on the General Fund for two main purposes:

- To earmark, or build up, funds which are to be used for specific purposes in the future, such as known or predicted future expenditure needs. This supports strategic financial management.
- To provide a contingency fund to cushion the impact of unexpected events or emergencies. This is regarded as a key part of the MIJB's risk management framework.

The table below shows the movements on the General Fund balance:

	<b>Earmarked Reserves</b>				<b>Total</b>
	<b>General Reserves</b>	<b>PCIP &amp; Action 15</b>	<b>Covid 19</b>	<b>Other Earmarked</b>	
	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>
Balance at 1 April 2022	1,257	2,331	9,016	4,417	17,021
Transfers (out) in 2022/23	(1,257)	(1,394)	(9,016)	(671)	(12,338)
<b>Balance at 31 March 2023</b>	<b>-</b>	<b>937</b>	<b>-</b>	<b>3,746</b>	<b>4,683</b>
Transfer out 2023/24	-	(904)	-	(1,793)	(2,697)
<b>Balance at 31 March 2024</b>	<b>-</b>	<b>33</b>	<b>-</b>	<b>1,953</b>	<b>1,986</b>

**Primary Care Improvement Fund (PCIP)** - The purpose of this fund is to ring fence funding received from the Scottish Government as part of its Primary Care Transformation Plan, this includes Action 15 funding as part of this plan.

**Covid 19** – are funds received by Scottish Government during 2021/22 being held in an earmarked reserve to support the MIJB through the pandemic and remobilisation. The balance of which was repaid back to Scottish Government in 2022/23.

Other earmarked reserves are noted in detail on pages 17 to 19.

## NOTES TO THE FINANCIAL STATEMENTS (continued)

### Note 8 Agency Income and Expenditure

On behalf of all IJB's within The Grampian Health Board, the MIJB acts as the lead manager for Grampian Medical Emergency Department (GMED) and Primary Care Contracts. It commissions services on behalf of the other IJBs and reclaims the costs involved. The payments that are made on behalf of the other IJBs, and the consequential reimbursement, are not included in the Comprehensive Income and Expenditure Statement (CIES) since the MIJB is not acting as principal in these transactions.

The amount of expenditure and income relating to the agency arrangement is shown below:

<b>2022/23</b>		<b>2023/24</b>
£000		£000
10,139	Expenditure on Agency Services	10,615
(10,139)	Reimbursement for Agency Services	(10,615)
<b>-</b>	<b>Net Agency Expenditure excluded from the CIES</b>	<b>-</b>

## NOTES TO THE FINANCIAL STATEMENTS (continued)

### Note 9 Related Party Transactions

The MIJB has related party relationships with The Grampian Health Board and Moray Council. In particular the nature of the partnership means that the MIJB may influence, and be influenced by, its partners. The following transactions and balances included in the MIJB's accounts are presented to provide additional information on the relationships.

#### Transactions with the Grampian Health Board

<b>2022/23</b>		<b>2023/24</b>
£000		£000
(96,926)	Funding Contributions received from the NHS Board	(115,471)
96,695	Expenditure on Services Provided by the NHS Board	107,064
157	Key Management Personnel: Non-Voting Board Members	183
<b>(74)</b>	<b>Net Transactions with The Grampian Health Board</b>	<b>(8,224)</b>

Key Management Personnel: The Chief Officer and Chief Financial Officer, are non-voting Board members and are both employed by The Grampian Health Board and recharged to the MIJB. Details of the remuneration of both officers are provided in the Remuneration Report. The Chief Officer is a joint appointment made by Moray Council and The Grampian Health Board and is jointly accountable to the Chief Executives of both organisations, as such this post is jointly funded. The Chief Financial Officer, whilst a Board appointment, does not share this arrangement of funding.

#### Balances with the Grampian Health Board

<b>31 March</b>		<b>31 March</b>
<b>2023</b>		<b>2024</b>
£000		£000
2,846	Debtor balances: Amounts due from The Grampian Health Board	1,723
<b>2,846</b>	<b>Net Balance due from The Grampian Health Board</b>	<b>1,723</b>

## NOTES TO THE FINANCIAL STATEMENTS (continued)

### Note 9 Related Party Transactions (continued)

#### Transactions with Moray Council

<b>2022/23</b>		<b>2023/24</b>
£000		£000
(59,517)	Funding Contributions received from the Council	(84,615)
71,852	Expenditure on Services Provided by the Council	95,455
77	Key Management Personnel: Non-Voting Board Members	81
<b>12,412</b>	<b>Net Transactions with Moray Council</b>	<b>10,921</b>

#### Balances with Moray Council

<b>31 March</b>		<b>31 March</b>
<b>2023</b>		<b>2024</b>
£000		£000
1,837	Debtor balances: Amounts due from Moray Council	263
<b>1,837</b>	<b>Net Balance due from Moray Council</b>	<b>263</b>

## NOTES TO THE FINANCIAL STATEMENTS (continued)

### Note 10 VAT

The MIJB is not registered for VAT and as such VAT is settled or recovered by the partners. The VAT treatment of expenditure in the MIJB accounts depends on which of the partners is providing the services as each of these partners are treated differently for VAT purposes.

VAT payable is included as an expense only to the extent that it is not recoverable from His Majesty's Revenue and Customs. VAT receivable is excluded from income.

### Note 11 Accounting Standards That Have Been Issued but Have Yet To Be Adopted

The Code requires the MIJB to identify any accounting standards that have been issued but have yet to be adopted and could have material impact on the accounts. This applies to the adoption of the following new or amended standards within the 2023/24 Code:

- Disclosure of Accounting Policies (Amendments to IAS 1 and IFRS Practice Statement 2);
- Updating a Reference to the Conceptual Framework (Amendments to IFRS 3).
- Definition of Accounting Estimates (Amendments to IAS 8);
- Deferred Tax (Amendments to IAS 12);
- Leases (Amendments to IFRS 16)

The Code requires implementation from 1 April 2024 and there is, therefore, no impact on the 2023/24 financial statements.

The above amendments are not anticipated to have a material impact on the information provided in the financial statements.

## INDEPENDENT AUDITOR'S REPORT

### Independent auditor's report to the members of Moray Integration Joint Board and the Accounts Commission

#### Reporting on the audit of the financial statements

##### Opinion on financial statements

We certify that we have audited the financial statements in the annual accounts of Moray Integration Joint Board for the year ended 31 March 2024 under Part VII of the Local Government (Scotland) Act 1973. The financial statements comprise the Comprehensive Income and Expenditure Statement, Movement in Reserves Statement, Balance Sheet and notes to the financial statements, including material accounting policy information. The financial reporting framework that has been applied in their preparation is applicable law and UK adopted international accounting standards, as interpreted and adapted by the Code of Practice on Local Authority Accounting in the United Kingdom 2023/24 (the 2023/24 Code).

In our opinion the accompanying financial statements:

- give a true and fair view of the state of affairs of the body as at 31 March 2024 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with UK adopted international accounting standards, as interpreted and adapted by the 2023/24 Code; and
- have been prepared in accordance with the requirements of the Local Government (Scotland) Act 1973, The Local Authority Accounts (Scotland) Regulations 2014, and the Local Government in Scotland Act 2003.

##### Basis for opinion

We conducted our audit in accordance with applicable law and International Standards on Auditing (UK) (ISAs (UK)), as required by the [Code of Audit Practice](#) approved by the Accounts Commission for Scotland. Our responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of our report. We were appointed by the Accounts Commission on 18 May 2022. Our period of appointment is five years, covering 2022/23 to 2026/27. We are independent of the body in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. Non-audit services prohibited by the Ethical Standard were not provided

## INDEPENDENT AUDITOR'S REPORT (Continued)

to the body. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

### Conclusions relating to going concern basis of accounting

We have concluded that the use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the body's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from when the financial statements are authorised for issue.

These conclusions are not intended to, nor do they, provide assurance on the body's current or future financial sustainability. However, we report on the body's arrangements for financial sustainability in a separate Annual Audit Report available from the [Audit Scotland website](#).

### Risks of material misstatement

We report in our Annual Audit Report the most significant assessed risks of material misstatement that we identified and our judgements thereon.

### Responsibilities of the Chief Financial Officer and Moray Integration Board for the financial statements

As explained more fully in the Statement of Responsibilities, the Chief Financial Officer is responsible for the preparation of financial statements that give a true and fair view in accordance with the financial reporting framework, and for such internal control as the Chief Financial Officer determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Chief Financial Officer is responsible for assessing the body's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless there is an intention to discontinue the body's operations.

The Moray Integration Joint Board is responsible for overseeing the financial reporting process.

## INDEPENDENT AUDITOR'S REPORT (Continued)

### Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities outlined above to detect material misstatements in respect of irregularities, including fraud. Procedures include:

- using our understanding of the local government sector to identify that the Local Government (Scotland) Act 1973, The Local Authority Accounts (Scotland) Regulations 2014, and the Local Government in Scotland Act 2003 are significant in the context of the body;
- inquiring of the Chief Financial Officer as to other laws or regulations that may be expected to have a fundamental effect on the operations of the body;
- inquiring of the Chief Financial Officer concerning the body's policies and procedures regarding compliance with the applicable legal and regulatory framework;
- discussions among our audit team on the susceptibility of the financial statements to material misstatement, including how fraud might occur; and
- considering whether the audit team collectively has the appropriate competence and capabilities to identify or recognise non-compliance with laws and regulations.

The extent to which our procedures are capable of detecting irregularities, including fraud, is affected by the inherent difficulty in detecting irregularities, the effectiveness of the body's controls, and the nature, timing and extent of the audit procedures performed.

Irregularities that result from fraud are inherently more difficult to detect than irregularities that result from error as fraud may involve collusion, intentional omissions, misrepresentations, or the override

## INDEPENDENT AUDITOR'S REPORT (Continued)

of internal control. The capability of the audit to detect fraud and other irregularities depends on factors such as the skilfulness of the perpetrator, the frequency and extent of manipulation, the degree of collusion involved, the relative size of individual amounts manipulated, and the seniority of those individuals involved.

A further description of the auditor's responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website [www.frc.org.uk/auditorsresponsibilities](http://www.frc.org.uk/auditorsresponsibilities). This description forms part of our auditor's report.

### Reporting on other requirements

Opinion prescribed by the Accounts Commission on the audited parts of the Remuneration Report

We have audited the parts of the Remuneration Report described as audited. In our opinion, the audited parts of the Remuneration Report have been properly prepared in accordance with The Local Authority Accounts (Scotland) Regulations 2014.

Other information

The Chief Financial Officer is responsible for the other information in the annual accounts. The other information comprises the Management Commentary, Annual Governance Statement, Statement of Responsibilities and the unaudited part of the Remuneration Report.

Our responsibility is to read all the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon except on the Management Commentary and Annual Governance Statement to the extent explicitly stated in the following opinions prescribed by the Accounts Commission.

## INDEPENDENT AUDITOR'S REPORT (Continued)

### Opinions prescribed by the Accounts Commission on the Management Commentary and Annual Governance Statement

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Management Commentary for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with statutory guidance issued under the Local Government in Scotland Act 2003; and
- the information given in the Annual Governance Statement for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with the Delivering Good Governance in Local Government: Framework (2016).

### Matters on which we are required to report by exception

We are required by the Accounts Commission to report to you if, in our opinion:

- adequate accounting records have not been kept; or
- the financial statements and the audited part of the Remuneration Report are not in agreement with the accounting records; or
- we have not received all the information and explanations we require for our audit.

We have nothing to report in respect of these matters.

### Conclusions on wider scope responsibilities

In addition to our responsibilities for the annual accounts, our conclusions on the wider scope responsibilities specified in the Code of Audit Practice, including those in respect of Best Value, are set out in our Annual Audit Report.

### Use of our report

This report is made solely to the parties to whom it is addressed in accordance with Part VII of the Local Government (Scotland) Act 1973 and for no other purpose. In accordance with paragraph 108 of the Code of Audit Practice, we do not undertake to have responsibilities to members or officers, in their individual capacities, or to third parties.

*Angela Pieri*

Angela Pieri, (for and on behalf of Grant Thornton UK LLP),  
110 Queen Street  
Glasgow  
G1 3BX

Date 26 September 2024 .....

