



REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD –
22 OCTOBER 2025

REPORT ON: PROPOSED REVISED PERFORMANCE AND AUDIT COMMITTEE TERMS
OF REFERENCE

REPORT BY: CHIEF FINANCE OFFICER

REPORT NO: DIJB68-2025

1.0 PURPOSE OF REPORT

The purpose of this report is to review and approve the revised Terms of Reference for Dundee Integration Joint Board's Performance and Audit Committee.

2.0 RECOMMENDATIONS

It is recommended that the Integration Joint Board (IJB):

- 2.1 Reviews and approves the revised Terms of Reference for the IJB's Performance and Audit Committee as attached as Appendix 1

3.0 FINANCIAL IMPLICATIONS

None

4.0 MAIN TEXT

4.1 Background

- 4.1.1 Dundee Integration Joint Board established the Performance and Audit Committee (PAC) at its meeting of the 30 August 2016 (Article IX of the meeting refers). At this meeting, the terms of reference for the Performance and Audit Committee were agreed.
- 4.1.2 Over the period since it was established, the PAC had developed the range of issues deemed relevant and appropriate for consideration, either through best practice, internal and external audit recommendations and at the request of members of the PAC and IJB. The PAC terms of reference had not changed over this time.
- 4.1.3 As part of the IJB's 2021/22 Audit Scotland annual report, the external auditors noted three areas of improvement to ensure the terms of reference met best practice guidance as set out in CIPFA's Audit Committees Practical Guidance for Local Authorities and Police (2018). These were:

1) the terms of reference do not cover the core areas of "counter fraud and corruption" and the PAC's role in relation to these.

2) the committee does not undertake an annual evaluation to assess whether it has undertaken its duties in accordance with the terms of reference.

3) there is no formal training programme in place to support board members.

- 4.1.4 The PAC terms of reference were revised and updated to reflect this best practice guidance and the other areas of development the PAC has undertaken since 2016. These were approved by IJB at its meeting of 13 December 2023 (Article IV of the meeting refers).
- 4.1.5 Following the biennial rotation of PAC Chair (effective from October 2024), the Terms of Reference were reviewed again at the IJB meeting on 11 December 2024 (Article XIII of the minute of the meeting refers) – no material changes were proposed at this time.
- 4.1.6 As part of good practice, PAC members should have the opportunity to periodically review PAC Terms of Reference to ensure the committee continues to have the remit to operate effectively and fulfil its duties. Any proposed changes should subsequently be presented to IJB for approval.
- 4.1.7 Following the introduction of Global Internal Audit Standards, which became effective for UK Public Sector from 1 April 2025, the draft Terms of Reference have also been reviewed by the IJB's Internal Audit to ensure appropriate responsibilities and duties are documented. 3 additional Duties (Section 8) have been added to the draft document (5, 9 and 10), and wording has been amended on 2 existing Duties (7 & 8).
- 4.1.8 Two further minor wording amendments are proposed to Sections 9 and 10.
- 4.1.9 PAC members reviewed and agreed the attached revised Terms of Reference at the meeting of 24 September 2025, and confirmed these remain sufficient and appropriate to allow the Committee to operate effectively.

5.0 POLICY IMPLICATIONS

This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

6.0 RISK ASSESSMENT

Risk Description	Risk that the IJB is unable to demonstrate compliance with best practice in relation to its Performance and Audit Committee.
Risk Category	Governance
Inherent Risk Level	Likelihood 3 x Impact 3 = 9 (High Risk)
Mitigating Actions (including timescales and resources)	Adoption of revised and updated terms of reference
Residual Risk Level	Likelihood 2 x Impact 3 = 6 (Moderate Risk)
Planned Risk Level	Likelihood 2 x Impact 3 = 6 (Moderate Risk)
Approval recommendation	Given the mitigating actions in place the risk should be accepted

7.0 CONSULTATIONS

The Chief Officer and the Clerk were consulted in the preparation of this report.

8.0 DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	✓
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

9.0 BACKGROUND PAPERS

None.

Christine Jones
Acting Chief Finance Officer

DATE: 26/09/25

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**DUNDEE CITY HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD
PERFORMANCE AND AUDIT COMMITTEE
TERMS OF REFERENCE**

1	Introduction
1.1	The Performance and Audit Committee is identified as a Committee of the Integration Joint Board (IJB).
1.2	The Committee will be known as the Performance and Audit Committee of the IJB and will be a Standing Committee of the IJB.
2	Constitution
2.1	The IJB shall appoint the Committee. The Committee will consist of not less than 6 members of the IJB, excluding Professional Advisors. The Committee will include at least four IJB voting members, two from NHS Tayside and two from Dundee City Council. Only voting members of the IJB will be able to vote on the Committee. The Chair of the IJB shall not be a member of the Committee.
2.2	The Committee may at its discretion set up short-term working groups for review work. Membership of the working group will be open to anyone whom the Committee considers will assist in the task assigned. The working groups will not be decision making bodies or formal committees but will make recommendations to the Audit and Performance Committee
3	Chair
3.1	The Committee will be chaired by the Vice Chair of the IJB and will rotate between a voting member nominated by NHS Tayside and a voting member nominated by Dundee City Council. In the absence of the Chair, the members present at the meeting will appoint a member to Chair the meeting. The Chair will rotate on the same frequency as the Chair of the IJB.
4	Quorum
4.1	Two voting members of the Committee will constitute a quorum consisting of one member from Dundee City Council and one member from NHS Tayside.
5	Attendance at meetings
5.1	The Chief Officer, Chief Finance Officer, Chief Internal Auditor and other Professional Advisors or their nominated representatives may attend meetings. Other persons shall attend meetings at the invitation of the Committee.
5.2	The external auditor will be invited to attend each meeting.
5.3	The Committee may invite additional advisors as appropriate.
6	Meeting Frequency

6.1	The Committee will meet at least four times each financial year with further meetings, including development events arranged if necessary.
7	Authority
7.1	The Committee is authorised to instruct further investigation on any matters which fall within Paragraph 8.
8	Duties
8.1	The Committee will review the overall Internal Control arrangements of the IJB and make recommendations to the IJB regarding signing of the Governance Statement.
	Specifically, it will be responsible for the following duties:
	1. The preparation and implementation of the strategy for Performance Review and monitoring the performance of the Partnership towards achieving its policy objectives and priorities in relation to all functions of the IJB.
	2. Ensuring that the Chief Officer establishes and implements satisfactory arrangements for reviewing and appraising service performance against set objectives, levels and standards of service and to receive regular reports on these and to review progress against the outcomes set out in the Strategic and Commissioning Plan.
	3. To consider the IJB's Annual Performance Report and approve on behalf of the IJB as necessary.
	4. Acting as a focus for Best Value and performance initiatives.
	5. To review and approve the Internal Audit Charter, including the Internal Audit Mandate
	6. To review and approve the annual Internal Audit plan on behalf of the IJB.
	7. To receive reports, monitor the implementation of agreed actions on Internal Audit recommendations findings and reporting to the IJB as appropriate.
	8. To receive monitoring reports on the activity of Internal Audit and consider the Chief Internal Auditor's annual Internal Audit Report and Assurance Statement.
	9. To consider the results of the internal audit function's quality assurance and improvement programme.
	10. To ensure that there is direct contact between the Performance and Audit Committee and Internal Audit and to meet with the Chief Internal Auditor at least once per year and as required, without the presence of Officers.
	11. To consider External Audit Plans and reports (including the annual accounts and audit certificate), matters arising from these and

	management actions identified in response including monitoring of implementation of actions.
	12. To support the IJB in ensuring that the strategic integrated assurance and performance framework is working effectively, and that escalation of notice and action is consistent with the risk appetite set by the IJB.
	13. To support the IJB in delivering and expecting co-operation in seeking assurance that lead partner services run by partners are working effectively in order to allow Dundee IJB to sign off on its accountabilities for its resident population.
	14. Review risk management arrangements, receive regular reports on risk management and an annual Risk Management report.
	15. Ensure existence of and monitor compliance with an appropriate Risk Management Strategy.
	16. To consider annual financial accounts and related matters and approve on behalf of the IJB as necessary.
	17. Ensuring that the Senior Management Team of Dundee Health and Social Care Partnership, including Heads of Service, Professional Leads and Principal Managers maintain effective controls within their services which comply with financial procedures and regulations;
	18. To be responsible for setting its own work programme in order to meet its specific duties including any matters which the Chief Officer believes would benefit from investigation.
	19. Promoting the highest standards of conduct by Board Members; and monitoring and keeping under review the Code of Conduct maintained by the IJB.
	20. Will have oversight of Information Governance arrangements as part of the Performance and Audit process.
	21. To be aware of, and act on, Audit Scotland, national and UK audit findings and inspections/regulatory advice, and to confirm that the IJB has brought itself into compliance timeously.
	22. To receive assurances in relation to Clinical Care and Professional Governance through the consideration of a report presented to each meeting of the PAC by the Clinical Director.
	23. To receive and consider performance information in relation to complaints and compliments about services provided by the Health and Social Care Partnership or about the IJB's activities, ensuring the IJB's responsibilities around Duty of Candour are met.
	24. To receive assurances that effective counter fraud and corruption arrangements are in place within the partner bodies governance arrangements.

	25. To establish a formal training programme for PAC members to ensure they are aware of their roles and responsibilities as members of the Committee.
9	Reporting
9.1	The Chair of the PAC will provide an assurance report to the next IJB meeting, outlining the areas of discussion and decisions made at the PAC meeting.
9.2	The PAC will present an annual assurance report to the IJB to reflect the activities undertaken over the year in line with its remit and terms of reference.
10	Review
10.1	The Terms of Reference will be reviewed when the Chair rotates to ensure their ongoing appropriateness in dealing with the business of the IJB.
10.2	As a matter of good practice, the Committee should allow for periodic annual review utilising best practice guidelines and external facilitation as required.