

Governance, Risk and Best Value Committee

10:00am, Tuesday, 19 March 2019

Internal Audit Update for the period 22 October 2018 to 15 February 2019 – referral from the Edinburgh Integration Joint Board Audit and Risk Committee

Item number 7.3
Executive/routine
Wards
Council Commitments

1. For Decision/Action

- 1.1 The Governance, Risk and Best Value Committee is requested to note the Internal Audit Update, as a number of the open Edinburgh Integration Joint Board Internal Audit findings relate to operational service delivery for the Health and Social Care Partnership by the City of Edinburgh Council.

Laurence Rockey

Head of Strategy and Communications

Contact: Jamie Macrae, Committee Officer

E-mail: jamie.macrae@edinburgh.gov.uk | Tel: 0131 553 8242

Referral Report

Internal Audit Update for the period 22 October 2018 to 15 February 2019 – referral from the Edinburgh Integration Joint Board Audit and Risk Committee

2. Terms of Referral

- 2.1 On 8 March 2019, the Edinburgh Integration Joint Board (EIJB) Audit and Risk Committee considered a report by the Chief Internal Auditor which detailed the progress of Internal Audit (IA) assurance activity on behalf of the EIJB performed by the EIJB's partners (the City of Edinburgh Council and NHS Lothian) IA teams.
- 2.2 The EIJB Audit and Risk Committee agreed:
- 2.2.1 To note progress with delivery of the EIJB 2018/19 IA plan.
 - 2.2.2 To note the challenges with delivery of the Partnership Infrastructure and Support – Integration Scheme review.
 - 2.2.3 To approve the proposed change of scope for the Strategic Planning review.
 - 2.2.4 To note progress with implementation of agreed management actions to support closure of IA findings raised.
 - 2.2.5 To note that discussions with NHSL in relation to the IA assurance approach were ongoing
 - 2.2.6 To refer the report to the City of Edinburgh Council's Governance, Risk, and Best Value Committee for its information, as a number of the open EIJB IA findings related to operational service delivery for the Health and Social Care Partnership by the Council.

3. Background Reading/ External References

None.

4. Appendices

Internal Audit Update for the period 22 October 2018 to 15 February 2019 – report by the Chief Internal Auditor

Report

Internal Audit Update for the period 22 October 2018 to 15 February 2019

IJB Audit and Risk Committee

8 March 2019

Executive Summary

1. This report provides details of progress Internal Audit (IA) assurance activity on behalf of the Edinburgh Integration Joint Board (EIJB) performed by the EIJB's partners (the City of Edinburgh Council (the Council) and NHS Lothian (NHSL)) IA teams.
2. Three of the four EIJB Internal Audits included in the Internal Audit plan approved by the Committee in July 2018 have commenced. The fourth review is currently in planning.
3. As at 15 February 2018, the EIJB had a total of 16 open Internal Audit findings (10 High; and 6 Medium). Of these, 12 (6 High; and 6 Medium) are currently overdue. Consequently, the EIJB continues to be exposed to the risks associated with these findings, as detailed in the original IA reports.
4. Discussions in relation to revised proposals for a more consolidated and effective IA assurance approach between the Council and NHSL teams are ongoing.

Recommendations

The Committee is requested to:

5. Note progress with delivery of the EIJB 2018/19 IA plan;
6. Note the challenges with delivery of the Partnership Infrastructure and Support – Integration Scheme review;
7. Approve the proposed change of scope for the Strategic Planning review;
8. Note progress with implementation of agreed management actions to support closure of IA findings raised;
9. Note that discussions with NHSL in relation to the IA assurance approach are ongoing; and
10. Refer this report to the City of Edinburgh Council's Governance, Risk, and Best Value Committee for their information, as a number of the open EIJB IA findings

relate to operational service delivery for the Health and Social Care Partnership by the Council.

Background

11. The EIJB IA plan is risk based and is developed from review of the EIJB risk register with the objective of providing assurance over all Very High and High rated risks.
12. The outcomes of the audits included in the plan will support the 2018/19 EIJB Internal Audit annual opinion and inform the annual Governance Statement included in the financial statements.
13. The Plan is delivered by the Internal Audit teams of the EIJB's partners, the City of Edinburgh Council (The Council) and NHS Lothian.
14. All EIJB IA reports prepared by the Council are presented to the EIJB Audit & Risk Committee for scrutiny, and then referred to the Council's Governance, Risk, and Best Value Committee (GRBV) for information.
15. All EIJB Reviews completed by the NHSL are presented initially to the NHSL Audit and Risk Committee for review and scrutiny, and subsequently referred to the EIJB Audit and Risk Committee.

Main report

Progress with delivery of the EIJB annual plan

16. Three of the four EIJB Internal Audits included in the 2018/19 Internal Audit plan approved by the Committee in July 2018 have commenced. The fourth review is currently in planning. A progress update on each of the individual reviews is provided below:
 - 16.1 **Financial and Budget Management (NHSL)** – review is in progress and is scheduled to complete by the end of March 2019.
 - 16.2 **Governance Structures (Council)** - review is in progress and is scheduled to complete by the end of March 2019.
 - 16.3 **Partnership Infrastructure and Support – Integration Scheme (Council)** – the scope of this review has been subject to significant challenge from NHSL, mainly in relation to the need to access NHSL employees to support completion of the review. Discussions are ongoing in relation to the content of the terms of reference and proposed approach.

Given these unanticipated delays, the review may not be completed by end of March.

- 16.4 **Strategic Planning** – on 8 February 2019, the EIJB Board agreed that approval of the draft 2019-22 strategic plan would be delayed to enable full consideration and reflection of the impacts of the scale of EIJB budgetary pressures and emerging transformational work.

A revised draft strategic plan is to be presented to the Board on 29 March 2019 (prior to a consultation period of three months). In the interim, a formal extension of the 2016-19 plan will be implemented.

Given this decision, it is proposed that the scope of this review is reduced, to consider only the adequacy of the framework applied to support the design of the plan; the effectiveness of engagement and communication with partnership organisations; and the process applied to extend the 2016-19 plan, as it is not currently possible to assess the extent of alignment between the strategic plan and the Partnership's transformation / change programme.

Progress with implementation of agreed management actions to support closure of IA findings raised

17. When the Health and Social Care Purchasing Budget review was completed in July 2018, it was agreed that a Partnership working group (including Partnership senior management and representation from the relevant Council teams) would be established to ensure that the IA findings raised were incorporated into an overarching plan by 21 December 2018.
18. This plan has now been developed; reviewed by IA; and implementation progress will be monitored as part of our ongoing follow-up process.
19. Following completion of the Health and Social Care Commissioning review in July 2018, it was agreed that when the new Commissioning Lead Officer for the Partnership joined, a Partnership working group would be established (including Partnership senior management and representation from the relevant Council teams), to ensure that the findings raised were incorporated into an overarching plan that focuses on delivery of strategic and operational commissioning solutions, and review and redesign (where required) of the established commissioning process.
20. Following appointment of the new Interim Head of Strategic Planning for the Partnership in January 2019, an initial workshop was held on 25 February 2019. It was agreed at the workshop that management will advise IA of a date for completion of the plan to deliver the strategic and operational commissioning solutions.
21. IA will then review the plan to ensure that it addresses the findings raised in this report, and monitor implementation of the plan by raising relevant management actions and implementation dates.
22. As at 15 February 2018, the EIJB had a total of 16 open Internal Audit findings (10 High; and 6 Medium).

23. Of the 16 open findings, 12 (6 High; and 6 Medium) are currently overdue, and 4 are not yet due for closure.
24. Three of the overdue findings (2 High; and 1 Medium) are historic findings that had previously been closed, but were reopened in June 2018, as the agreed management actions had not been effectively implemented and sustained, exposing the EIJB to unnecessary risk.
25. These findings are currently recorded as overdue based on originally agreed implementation dates.
26. A graphic illustrating the open and overdue findings position is included at Appendix 1.
27. Of the 12 overdue findings:
 - 27.1 2 (Highs) are 1 - 2 months overdue;
 - 27.2 1 (Medium) is 6 - 12 months overdue; and
 - 27.3 9 (4 High; and 5 Medium) are currently more than three years overdue.
28. The 12 overdue findings are supported by a total of 20 agreed management actions. Of these:
 - 22.1 One agreed management action is currently with IA for review to confirm whether it can be closed.
 - 22.2 A total of 10 agreed management actions (4 High; and 6 Medium) have had their agreed implementation dates revised more than once since the inception of the new IA follow up system in July 2018.
29. It was agreed at the January 2019 Health and Social Care Assurance Group meeting that (whilst the Partnership is dependent on both the Council and NHSL to support closure of some EIJB IA findings) the Chief Operating Officer will own all EIJB findings, and obtain assurance (via the Assurance Oversight Group) that the Council and NHSL are satisfactorily progressing towards closure for the areas where they provide support to the EIJB.

IA Assurance approach – ongoing discussions with NHSL

30. Discussions are ongoing with a further meeting scheduled for early March that will include the Chair of the EIJB Board; the Chair of the EIJB Audit and Risk Committee; NHSL representatives on the EIJB Board; NHSL Risk Management; and the EIJB Chief Internal Auditor.

Key risks

31. The IA plan is not sufficiently comprehensive to provide the level of assurance that the Integration Board requires in all the areas that it needs.

Financial implications

32. There will be no financial impact to the Integration Joint Board should the four currently planned audits take place. Any requirement to increase assurance provision as a result of new and emerging risks may result in the need to fund additional IA resource.

Implications for Directions

33. There are no specific implications for directions arising from this report.

Equalities implications

34. There are no equalities impacts.

Sustainability implications

35. No direct sustainability implications.

Involving people

36. The IA plan is based in the EIJB's draft risk register. In preparing the risk register, the EIJB's Risk team consulted widely with senior management from the Integration Joint Board; the Council and NHSL.

Impact on plans of other parties

37. The four IA reviews currently expected to be undertaken by the Integration Joint Board's partners IA functions (3 by the City of Edinburgh Council & 1 by NHS Lothian), have been incorporated into the internal audit plans of those organisations.

Background reading/references

None

Report author

Lesley Newdall

Chief internal Auditor

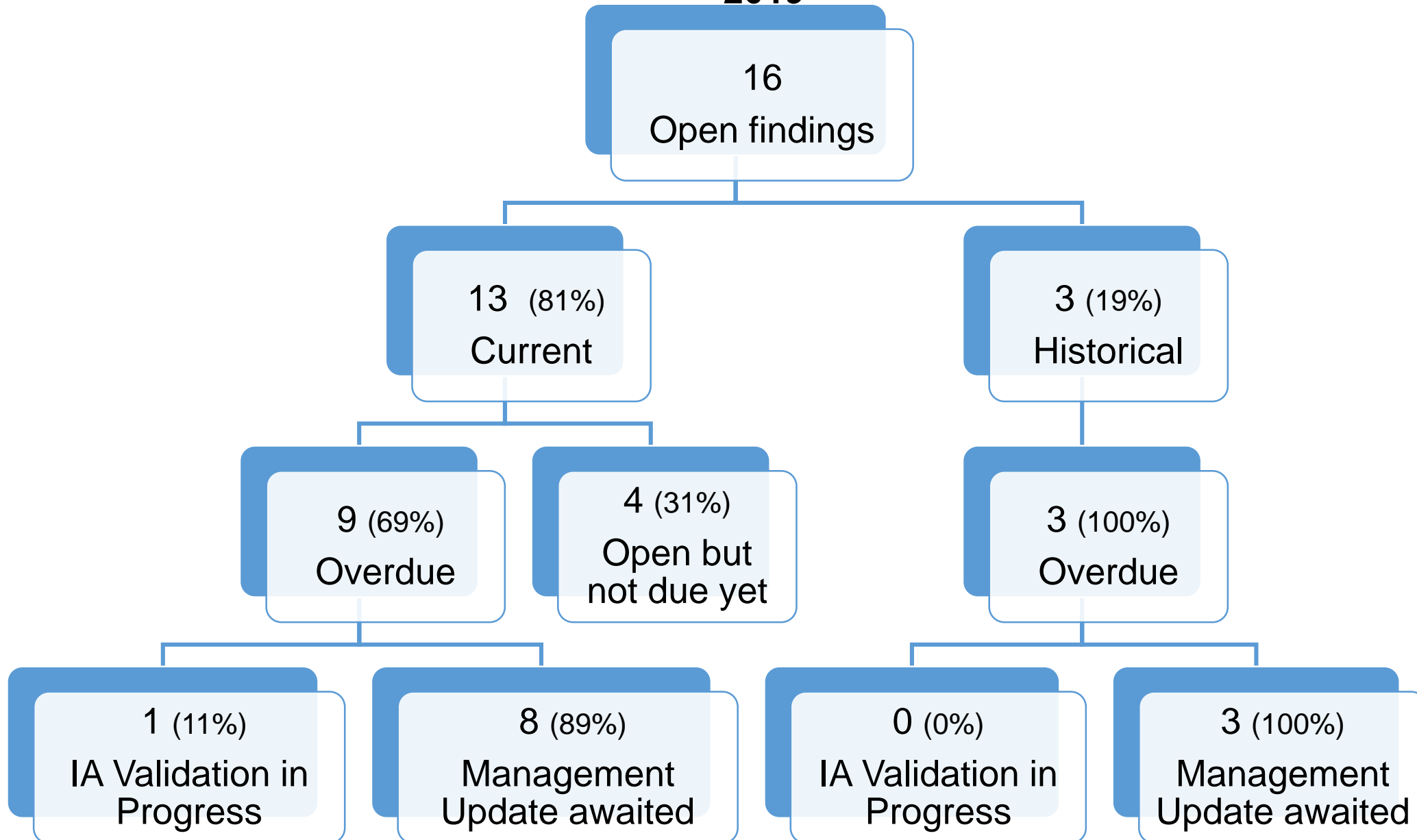
Contact: Lesley Newdall, Chief Internal Auditor

E-mail: lesley.newdall@edinburgh.gov.uk | Tel: 0131 469 3216

Appendices

Appendix 1	Graphic of Open and Overdue IA Findings
Appendix 2	Overdue Management Actions Detailed Analysis

Appendix 1 – EIJB Internal Audit Open and Overdue findings position as at 15th February 2019



Glossary of terms

- Project – This is the name of the audit report.
- Owner – The Executive Director responsible for implementation of the action.
- Issue Type – This is the priority of the audit finding, categorised as Critical; High; Medium; and Low
- Issue – This is the name of the finding.
- Status – This is the current status of the management action. These are categorised as:
Pending (the action is open and there has been no progress towards implementation);
Started (the action is open and work is ongoing to implement the management action); or
Implemented (the service area believes the action has been implemented and this is with Internal Audit for validation).
- Agreed Management action – This is the action agreed between Internal Audit and Management to address the finding.
- Estimated date – the original agreed implementation date.
- Revised date – the current revised date.
- Number of revisions – the number of times the date has been revised post implementation of TeamCentral. **Amber** formatting in the dates field indicates the date has been revised more than once.
- Contributor – Officers involved in implementation of an agreed management action.

Project/Owner	Issue Type	Issue/Status	Agreed Management Action	Dates	Contributor(s)
1) Personalisation SDS - Option 3 Sign offs - Personal Care Plans Judith Proctor, Chief Officer	Medium	Sign offs - Personal Care Plans Implemented	Ensure that there is a mechanism in place on SWIFT for the senior to record that they have signed off the support plan. At present any edits made by the senior at the time of the review will show that the senior has both prepared and reviewed the plan. Data quality reports will be set up to identify any support plan signed off by the assessor who produced the plan. Sector Managers and seniors to ensure appropriate oversight and sign off by senior for the personal care plans	Estimated Date: 30/06/2016 Revised Date: 30/09/2018 No of Revisions 3	Nicola Harvey Tom Cowan

Project/Owner	Issue Type	Issue/Status	Agreed Management Action	Dates	Contributor(s)
<p>2) Edinburgh IJB - Performance Data</p> <p>Performance objectives not stated for all Directions.</p> <p>Judith Proctor, Chief Officer</p>	<p>High</p>	<p>Rec 1.1 - Performance objectives not stated for all Directions.</p> <p>Pending</p>	<p>The need for clearly stated performance objectives is agreed. The context of the development of the performance framework provides an explanation for the way that many of the directions have been expressed. The framework, developed in 2016, focused on two main areas: the findings of the inspection of older people's services in 2016 – specifically the pressures around assessment and review waiting lists and people waiting for packages of care, responding to the introduction of national performance indicators by the Ministerial Strategic Group. Regular performance reporting was developed and implemented to support these priorities, with contributions from Strategy and Insight, NHS Lothian's analytical team, and LIST. Performance monitoring and management by Senior Management Team and the Integrated Joint Board's Performance and Quality Subgroup was based on this framework, and work to support this included the development and implementation of the whole system dashboard on Tableau. Until early in 2018, the directions had not been the focus for performance management, and had not been developed in that context. Work had been undertaken to consider how progress against the directions could be assessed and this showed that many of the indicators in the performance framework were directly relevant for many of the directions, and so the existing framework provided an indirect means of assessing progress with the directions. The Management Action Current directions will be reviewed and revised to ensure that they state clear and effective performance objectives.</p>	<p>Estimated Date: 31/12/2018</p> <p>Revised Date:</p> <p>No of Revisions 0</p>	<p>Tony Duncan</p> <p>Colin Briggs</p>

Project/Owner	Issue Type	Issue/Status	Agreed Management Action	Dates	Contributor(s)
<p>3) Edinburgh IJB - Performance Data</p> <p>Not all directions have stated which committee will receive performance objective statistics, how frequently these are provided and who will provide them.</p> <p>Judith Proctor, Chief Officer</p>	High	<p>Rec.2.1 - Not all directions have stated which committee will receive performance objective statistics, how frequently these are provided and who will provide them.</p> <p>Pending</p>	<p>The Integrated Joint Board's Performance and Quality subgroup, and Health and Social Care's Senior Management Team have previously had the role of considering all performance reports; with the Integrated Joint Board considering a specific subset. Arrangements for performance scrutiny have been reviewed with the outcome being that the directions will form the focus of performance monitoring, and that the Strategic Planning Group, instead of the Performance and Quality Subgroup will take the lead on considering performance. The Management Action Reporting requirements for each direction will be explicitly stated, including which committee performance information will be reported to, who will report it, and how frequently it will be reported.</p>	<p>Estimated Date: 31/12/2018 Revised Date:</p> <p>No of Revisions 0</p>	<p>Tony Duncan Colin Briggs</p>
<p>4) Edinburgh IJB - Performance Data</p> <p>Not all directions have stated which committee will receive performance objective statistics, how frequently these are provided and who will provide them.</p> <p>Colin Briggs, Chief Strategy and Performance</p>	High	<p>Rec.2.1 - Not all directions have stated which committee will receive performance objective statistics, how frequently these are provided and who will provide them.</p> <p>Pending</p>	<p>Performance reporting will now be done on the basis of the directions, and will be reported to relevant IJB committees on a regular basis to ensure that the implementation of the directions can be monitored effectively</p>	<p>Estimated Date:31/12/2018 Revised Date:</p> <p>No of Revisions 0</p>	<p>Tony Duncan Colin Briggs</p>

Project/Owner	Issue Type	Issue/Status	Agreed Management Action	Dates	Contributor(s)
5) Social Work: Pre-Employment Verification Recruitment of Existing Employees Judith Proctor, Chief Officer	Medium	Recruitment of Existing Employees Pending	Locality Managers to obtain confirmation from their recruiting managers that nominated candidates are being requested to bring their PVG (Protection of Vulnerable Groups) certificate to the pre-employment checks meeting. This requirement has been effectively communicated to all relevant managers / staff and a mechanism will be introduced to ensure that the requirement is being adhered too. This procedure will be embedded within the Health and Social Care and Safer & Stronger Communities protocol.	Estimated Date: 31/03/2017 Revised Date: 30/04/2019 No of Revisions 2	Tom Cowan
6) Historic Unimplemented Findings HSC1603 - issue 1 Performance Management Framework in development Judith Proctor, Chief Officer	High	Recommendation 1a Started	We now monitor and have data against the 23 core indicators. However, the 2016/17 data will not be available by July 2017. This is a national issue and Scottish Government is aware of it. A Performance Board is being established as part of the overall governance framework for the Health and Social Care Partnership which will work closely with the Integrated Joint Board Performance and Quality Group. The main role of the Performance Board will be to agree the core set of performance indicators and monitor delivery against these. The Board will have its first meeting in February 2017.	Estimated Date: 28/02/2017 Revised Date: 28/02/2019 No of Revisions 1	Tony Duncan Tom Cowan Colin Briggs
7) Historic Unimplemented Findings HSC1603 - issue 1 Performance Management Framework in development Judith Proctor, Chief Officer	High	Recommendation 1b Started	An initial meeting has taken place to discuss the content of the Annual Performance Report. A core group has been identified to take this forward and a series of meetings is being arranged for early in the New Year. The intention is for a draft report to go to the Integrated Joint Board Development session in April 2017.	Estimated Date: 31/07/2017 Revised Date: 28/02/2019 No of Revisions 1	Tony Duncan Tom Cowan Colin Briggs

Project/Owner	Issue Type	Issue/Status	Agreed Management Action	Dates	Contributor(s)
<p>8) Historic Unimplemented Findings</p> <p>HSC1603 - issue 1 Performance Management Framework in development</p> <p>Judith Proctor, Chief Officer</p>	High	<p>Recommendation 1c</p> <p>Started</p>	<p>A governance framework has been developed and documented setting out the roles remits and membership of the various committees and groups and the relationship between them.</p>	<p>Estimated Date: 28/02/2017 Revised Date: 28/02/2019 No of Revisions 1</p>	<p>Tony Duncan Tom Cowan Colin Briggs</p>
<p>9) Historic Unimplemented Findings</p> <p>HSC1603 - issue 2 Performance information does not meet the needs of users</p> <p>Judith Proctor, Chief Officer</p>	Medium	<p>Recommendation 2c</p> <p>Started</p>	<p>The existing Performance Improvement Meeting (PIM) will be replaced by a Performance Board, membership of which will include all members of the Integrated Joint Board Executive Team.</p>	<p>Estimated Date: 28/02/2017 Revised Date: 28/02/2019 No of Revisions 1</p>	<p>Tony Duncan Tom Cowan Colin Briggs</p>
<p>10) Historic Unimplemented Findings</p> <p>HSC1603 - issue 2 Performance information does not meet the needs of users</p> <p>Judith Proctor, Chief Officer</p>	Medium	<p>Recommendation 2d</p> <p>Started</p>	<p>The set of indicators agreed by the Performance Improvement Meeting (PIM), which includes the Locality Managers are under development and monitoring information will be available on both a citywide and locality basis.</p>	<p>Estimated Date:31/03/2017 Revised Date:28/02/2019 No of Revisions 1</p>	<p>Tony Duncan Tom Cowan Colin Briggs</p>

Project/Owner	Issue Type	Issue/Status	Agreed Management Action	Dates	Contributor(s)
11) Historic Unimplemented Findings HSC1503 - issue 3 Quality Assurance Judith Proctor, Chief Officer	High	Recommendation 3a Started	There is an existing file audit process that will pick up on overall issues of both data quality and quality of recording. In order to address the specific issues identified through this audit the Quality Assurance Team will undertake a themed audit in respect of Personal Support Plans. This will involve engaging with key managers to establish the questions that need to be answered and will include consideration of the model used in the North West Team.	Estimated Date: 31/12/2016 Revised Date: 29/03/2019 No of Revisions 1	Tony Duncan Tom Cowan Colin Briggs
12) Purchasing Budget Management EIJB1701 - Issue 2 Financial Controls Judith Proctor, Chief Officer	High	EIJB1701 - Issue 2.3a Charging policy owner Started	The Chief Finance Officer is the member of the Partnership Executive Team with responsibility for charging.	Estimated Date: 31/01/2019 Revised Date: No of Revisions 0	Moira Pringle
13) Personalisation SDS - Option 3 Data Quality Judith Proctor, Chief Officer	Medium	Data Quality Started	A change management process will be established and overseen by the Self Directed Support Infrastructure Steering Group. The inconsistencies in data recording are as a result of numerous changes to processes and trying to reduce the recording burden of implementing these on frontline practitioners. The Research and Information Team are aware of all changes to recording practice and take these into account. A summary of all changes and the impact on data extraction has also been produced.	Estimated Date: 30/06/2016 Revised Date: 31/10/2018 No of Revisions 5	Nicola Harvey Tom Cowan

Project/Owner	Issue Type	Issue/Status	Agreed Management Action	Dates	Contributor(s)
14) IJB Data Integration & Sharing Prioritisation process Judith Proctor, Chief Officer	High	Roadmap Started	Roadmap of Information and Communications Technology requirements to be developed based upon priorities for delivery of the Integrated Joint Board Strategic Plan.	Estimated Date: 30/09/2017 Revised Date: 31/12/2019 No of Revisions 3	Tony Duncan Tom Cowan Colin Briggs
15) IJB Data Integration & Sharing Prioritisation process Judith Proctor, Chief Officer	High	Prioritisation process Started	Prioritisation of requirements to be agreed through the Edinburgh Health and Social Care Partnership Information and Communications Technology and Information Governance Steering Group.	Estimated Date: 30/09/2017 Revised Date: 31/12/2019 No of Revisions 3	Tony Duncan Tom Cowan Colin Briggs
16) IJB Data Integration & Sharing Prioritisation process Judith Proctor, Chief Officer	High	Communication Started	Vision and goals in respect of Information and Communication Technology to be conveyed through the development and publication of an Information and Communications Technology Strategy for the Edinburgh Health and Social Care Partnership.	Estimated Date: 31/10/2017 Revised Date: 31/12/2019 No of Revisions 3	Tony Duncan Tom Cowan Colin Briggs

Project/Owner	Issue Type	Issue/Status	Agreed Management Action	Dates	Contributor(s)
<p>17) IJB Data Integration & Sharing</p> <p>Robustness of access management & data protection processes</p> <p>Judith Proctor, Chief Officer</p>	High	<p>Access management</p> <p>Started</p>	<p>The existing processes within the Council and NHS Lothian for notifying system owners of staff changes will be communicated to all managers of integrated teams. Establishing an integrated system setting out the systems access requirements for all posts and the mechanism for gaining access for new staff and notifying system owners of leavers and changes in role will be a priority for the nominated officer to be identified in respect of Information and Communications Technology and Information Governance.</p>	<p>Estimated Date: 30/09/2017</p> <p>Revised Date: 31/12/2019</p> <p>No of Revisions 2</p>	<p>Tony Duncan</p> <p>Tom Cowan</p> <p>Colin Briggs</p>
<p>18) IJB Data Integration & Sharing</p> <p>Hardware compatibility and connectivity in NHS and CEC locations</p> <p>Judith Proctor, Chief Officer</p>	Medium	<p>Connectivity and Hardware compatibility</p> <p>Started</p>	<p>The Information and Communications Technology and Information Governance Steering Group will request a review of connectivity and hardware compatibility to be conducted across all sites housing integrated teams and consider any recommendations arising from that review.</p>	<p>Estimated Date: 30/06/2017</p> <p>Revised Date: 31/12/2019</p> <p>No of Revisions 2</p>	<p>Tony Duncan</p> <p>Tom Cowan</p> <p>Colin Briggs</p>
<p>19) IJB Data Integration & Sharing</p> <p>Lack of available training, policies and guidance</p> <p>Judith Proctor, Chief Officer</p>	Medium	<p>Data Protection Training</p> <p>Started</p>	<p>The nominated officer with responsibility for Information and Communications Technology and Information Governance will work with relevant colleagues in the Council and NHS Lothian to develop an integrated approach to data protection training taking account of the role and responsibilities of the Integrated Joint Board.</p>	<p>Estimated Date: 31/12/2017</p> <p>Revised Date: 31/12/2019</p> <p>No of Revisions 2</p>	<p>Tony Duncan</p> <p>Tom Cowan</p> <p>Colin Briggs</p>

Project/Owner	Issue Type	Issue/Status	Agreed Management Action	Dates	Contributor(s)
20) IJB Data Integration & Sharing Lack of available training, policies and guidance Judith Proctor, Chief Officer	Medium	Compliance with training plan Started	A training plan will be developed to ensure all existing staff who need to access systems belonging to both the Council and NHS Lothian receive the appropriate training to enable them to use the system appropriately with due regard to data protection. Training on all systems to be used by a postholder will become part of the mandatory training for new appointments. Compliance with this arrangement will be overseen by the nominated officer with responsibility for Information and Communications Technology and Information Governance.	Estimated Date: 31/03/2018 Revised Date: 31/12/2019 No of Revisions 2	Tony Duncan Tom Cowan Colin Briggs