



## **MINUTE OF MEETING OF THE INTEGRATION JOINT BOARD**

### **AUDIT, PERFORMANCE AND RISK COMMITTEE**

**Thursday, 24 June 2021**

**remote locations via video conference**

#### **PRESENT**

Mr Sandy Riddell, Councillor Theresa Coull, Councillor Frank Brown, Mr Nick Fluck, Ms Tracey Abdy, Mr Simon Bokor-Ingram, Mr Sean Coady and Mr Atholl Scott

#### **APOLOGIES**

Mr Steven Lindsay, Ms Elidh Brown and Mrs Jane Mackie

#### **IN ATTENDANCE**

Also in attendance at the above meeting was Mrs Jeanette Netherwood, Corporate Manager; Dafydd Lewis, Senior Auditor; Neil Strachan, Lead for Strategy & Performance; Peter Maclean, Service Manager – Primary Care Contracts; Dr Calum Leask, Lead for Research & Evaluation and Mrs Isla Whyte, Interim Support Manager, as clerk to the Board.

#### **1. Chair of Meeting**

The meeting was chaired by Mr Sandy Riddell.

#### **2. Welcome and Apologies**

The Chair welcomed everyone to the meeting and apologies were noted.

#### **3. Declaration of Member's Interests**

There were no declarations of Members' Interest in respect of any item on the agenda.

#### **4. Minute of Board Meeting dated 25 March 2021**

The Minute of the meeting dated 25 March 2021 was submitted for approval.

The Board agreed to approve the minute as submitted.

## **5. Action Log of Board Meeting dated 25 March 2021**

The Action Log of the meeting dated 25 March 2021 was discussed and updated accordingly at the meeting.

## **6. Quarter 4 (January - March 2021) Performance Cover Report**

A report by the Chief Financial Officer (CFO) updates the Committee on its performance as at Quarter 4.

The Committee welcomed Neil Strachan to the meeting who is now Lead for Strategy & Performance for Health & Social Care Moray.

Delayed Discharges remain a priority focus for the partnership as it impacts on the whole system. Current Delayed Discharges are well above the new target set at the end of quarter 3. Mr Coady, Head of Service, advised the Committee at times the number of Delayed Discharges is really low, have recently seen some additional challenges in flow. To reduce the number of Delayed Discharges work is ongoing and the senior team are linked in with Scottish Government leads to ensure everything that can be done is being done and there are also close working relationships with other Board areas to share learning. Mr Coady continued, adding HSCM has been able to maintain flow around Community Hospitals for some time; not had high numbers on the waiting list for months.

Hospital Readmission rate remains high for this quarter. Data is monitored regularly. The Chief Nurse for Moray recently reviewed all of the discharges and readmissions and any lessons learned identified and shared.

In response to a query, the Chief Officer assured the Committee there is no pressure on clinicians to discharge a certain number of patients, there is no policy for that. Assessments are made to ensure patient is medically fit for discharge. Timing is key however, as if someone stays in hospital longer than they need to there is a risk of their overall condition and wellbeing deteriorating.

The CFO highlighted Appendix 2 to the Committee which shows the Moray information for the National Core Suite of Integration Indicators for 2019/20. This data is produced every 2 years. There was a 35% response rate with results showing a decrease in performance. Further consideration of the results and comparison with local data is required. There will be a focus around a plan for carers.

The Chair welcomed the information in Appendix 2 of the report as it is helpful to see how services are evolving. He would like to see a way of capturing and monitoring data around adults supported at home feeling safe. Align the flow and capacity monitoring with the public feeling safe and supported.

The Chair asked about Council staff sickness levels and how they compare with NHS staff sickness levels and how they compare Scotland wide and what measures are in place to address this. The Corporate Manager responded to inform the Chair that if you remove the long term sickness absences from the figure then Moray Council absence rate is well below the target. Sickness absence levels have

generally been low during the pandemic. Care at Home Manager has highlighted a recent increase in absences, which is being monitored.

The Chief Internal Auditor informed the Committee that as a Council absence management stats were recently reviewed including what support is available for staff. It was found that arrangements to monitor and provide support to get back to work were in place. A summary of these findings can be presented to the Committee if they wish.

Variations in sickness levels depending on job profile may iron out disparity. The Chair agreed, if there are variations, it would be good to see what actions take place to support teams if colleagues are off sick.

The Committee considered and noted the performance of local indicators for Quarter 4, the analysis of the local indicators and actions being undertaken to address performance that is outside of acceptable target ranges.

The Committee noted the published National Indicators for Moray for 2019/20 and that a further update report on performance for 2020/21 will be provided to this Committee in August 2021.

The Committee further noted that the draft Annual Performance Report will be submitted to this Committee in August 2021 with the intention of submission to MIJB in September 2021.

## **7. Internal Audit Update – Annual Opinion**

A report by the Chief Internal Auditor provides the Committee with an update on audit work progressed since the last meeting of the Committee in March and an annual internal audit opinion.

Although the partnership has not been operating in normal times there is still the requirement to prepare and present reports to Committee on audit activity.

Audit work focused on key systems these are: payroll and creditor payments. An update was provided on some other projects where there has been some progress. Including exploratory meetings between the three IJBs in Grampian and NHS Grampian to assess the feasibility of joint working across internal audit teams. There will be some limitations with this piece of work due to audit resources. The Accounts Commission of Audit Scotland is coordinating a Best Value review in relation to progress with integration. The CFO sits on the National Advisory Group for it with the next meeting in August. The CFO will discuss with the Chair, initially, with regards progress.

In providing an audit assurance opinion, there are 3 elements to consider - broader governance arrangements, risk management, and control systems. The Chief Internal Auditor draws assurances from Moray Council and NHS Grampian.

There were some difficulties in accessing some supporting information for a small number of sampled payments which mainly covered invoices from suppliers of commissioned services. Further work is required though the audit planning process when time and resource allow. The Chief Financial Officer assures the Committee there are performance review meetings in place and regular meetings with Service Managers – internal audit are included where appropriate.

The committee considered and noted this audit update and the Chief Internal Auditor's opinion that reasonable assurance can be placed on the adequacy and effectiveness of the MIJB's system of governance, risk management and internal control for the year ended 31 March 2021.

## **8. Strategic Risk Register – June 2021**

A report by the Chief Officer provides the Committee with an overview of the current strategic risks, along with a summary of actions which are in place to mitigate those risks, updated June 2021.

The cover report outlines key risk elements being experienced highlighting the delays in recruitment and selection and continuing impact of covid and potential impact of third wave.

There is an increasing risk around effective communication and engagement with stakeholders in relation to the fact that the MIJB third sector rep has stepped down from the Board and the Carer rep and Patient rep are finding it challenging to be present at all meetings. Looking to review how engagement takes place to ensure meaningful and voices are heard.

Another rising risk is around external inspections and the impact of Covid-19 and increasing workloads stretching a workforce that has been under sustained pressure for a considerable time.

The Chief Officer is seeking assurance around the implications for MIJB with regards to becoming a Category 1 Responder. The risk is on the Strategic Risk Register. There is a need to formally discharge duties of Category 1 Responder from MIJB to Chief Officer. This will outline how HSCM will function as a responder and make clear MIJB members themselves are not the people who require to be trained and respond to an incident.

The Chair asked, that as HSCM remobilises and reconfigures, if there were plans for Moray Council and NHS Grampian to work in tandem with regards to ICT infrastructure and premises. The Chief Officer has regular meetings with partners and whilst there is a commitment between NHS Grampian and the 3 Local Authorities to working together as much as possible on infrastructure and IT there is risk there. One organisation might work faster than another. The CO recognises the importance here and will continue to encourage joint discussions to take place.

The committee considered and noted the updated Strategic Risk Register and noted it will be further refined to align with the transformation plans as they evolve.

## **9. Internal Audit Plan**

A report by the Chief Internal Auditor provides the Committee with information on the proposed internal audit coverage for completion in the current 2021/22 financial year.

Two things are likely to impact on the audit plan for 2021/22 these are the pandemic and staffing.

There are a number staffing issues within Internal Audit that require to be addressed.

It was noted this was the Chief Internal Auditor's last Committee meeting. The Chair acknowledge the very significant contribution he has made to both this committee and to the MIJB.

Capacity and vacancies within internal audit to be escalated the MIJB.

The Committee considered and agreed the proposed audit coverage.

## **10. Primary Care Improvement Plan Update**

A report by Sean Coady, Head of Service, informs the Committee of progress towards implementation of the Primary Care Improvement Plan (PCIP).

PCIP progress in Moray is on track to achieve the principles outlined in the Memorandum of understanding (MoU) by 31/03/22.

The MoU is being reviewed again and there is some consultation with that – it is likely Integration Authorities will be asked to concentrate on Community Treatment and Care Services, and Vaccination Services. Transitions part is still being debated nationally.

The CFO stated the full implementation of the MoU is not affordable and there are national discussions taking place around this.

The Committee considered and noted the progress made towards implementation and the potential impact should all PCIP elements be fully implemented.

## **11. Home First Performance and Risk**

A report by Sean Coady, Head of Service, updates the Committee of the current performance and risks associated with Home First in Moray.

Dr Calum Leask, Lead for Research & Evaluation, gave a PowerPoint Presentation to the Committee on the Operation Home First portfolio focusing on evaluation and priorities for Moray.

Cllr Brown is interested to see the full cost of Home First quantified and savings identified, considering there are significant cost pressures across Grampian. The Chief Officer advised the agreement for MIJB to proceed with fully funding the scale up of Discharge to Assess (D2A) and seeking efficiencies further down the line was taken with the understanding there was a degree of risk with this. The pilot showed potential with a positive effect of social care costs, system flow and an improved patient journey.

Dr Leask advised the intention is to gather experience from service users and unpaid carers across all initiatives to help refine and make more person centred.

Mr Fluck stated when collating experience consider if there is enough there in terms of evaluation of health care utilisation? Look at whole population – is there a change

in health care utilisation and consider hard outcomes. Do initiatives change the way clients interact with the health care system? – aim to see a move out of unscheduled care to more planned care.

Mr Coady added there is a need to do a piece of work around joining work streams together under Home First umbrella and being able to evaluate healthcare utilisation.

The Chair concluded as reporting and monitoring evolve there is a need to be mindful of interdependencies. As matrixes develop it's about people's personal experience of care, quality, timing and safety of care as well. The Chair advised development of the one page flash report is really welcomed and as matters progress it will provide a snapshot of the various aspects really well.

The Committee considered and noted the information provided in the report and Appendix 1.

**Meeting closed at 12.09**