

AUDIT AND PERFORMANCE COMMITTEE OF THE PERTH AND KINROSS INTEGRATION JOINT BOARD

Minute of hybrid meeting of the Audit and Performance Committee of the Perth and Kinross Integration Joint Board (IJB) held in the Council Chambers on Monday 11 December 2023 at 9.00am.

Present: B Hamilton (Chair) and M Black (both Tayside NHS Board),
Councillors D Illingworth (Perth and Kinross Council) and
S Watts (Third Sector Forum).

In Attendance: D Henderson, L Hunter and S Hope (all IJB Members),
J Pepper, Chief Officer – Health and Social Care Partnership,
D Mitchell, Interim Chief Financial Officer, M Grant, P Jerrard,
C Jolly, Z Robertson, K Ogilvy, C Lamont and Amanda Taylor
(all Perth and Kinross Health and Social Care Partnership);
J Clark (Chief Internal Auditor), A Brown, Adam Taylor and
R Ramsay (all Corporate and Democratic Services, Perth and
Kinross Council).

Apologies: Councillor S McCole (Perth and Kinross Council) and
B Campbell (Carer Public Partner)

B Hamilton, Chair.

1. WELCOME AND APOLOGIES

B Hamilton welcomed all those present to the meeting and apologies for absence were submitted and noted as above.

2. DECLARATIONS OF INTEREST

There were no Declarations of Interest made in terms of the Perth and Kinross Integration Joint Board Code of Conduct.

3. MINUTES

3.1 MINUTE OF MEETING OF THE AUDIT AND PERFORMANCE COMMITTEE OF 18 SEPTEMBER 2023

The minute of meeting of the Audit and Performance Committee of the Perth and Kinross Integration Joint Board of 18 September 2023 was submitted and approved as a correct record.

3.2 MINUTE OF MEETING OF THE AUDIT AND PERFORMANCE COMMITTEE OF 30 OCTOBER 2023

The minute of meeting of the Audit and Performance Committee of the Perth and Kinross Integration Joint Board of 30 October 2023 was submitted and approved as a correct record.

3.3 ACTION POINTS UPDATE

The Action Points Update (Report G/23/172) was submitted and updates provided thereon.

3.4 MATTERS ARISING

There were no matters arising.

4. PERFORMANCE

4.1 2023/24 FINANCIAL POSITION

There was submitted a report by the Interim Chief Finance Officer (G/23/173) providing an update on the projected financial position based on the period 1 April 2023 to 31 October 2023.

M Black referred to paragraph 4.25 in Report G/23/173, specifically around the staffing underspend of £0.817m in Prisons and queried whether services were still being provided using locum arrangements. In response, D Mitchell confirmed that although there are vacancies within the Prison Healthcare Service they are being partially if not fully mitigated using locum staff. Amanda Taylor also advised that some of the actions in the operational management are being mitigated using tier two support which incurs a cost.

M Black also referred to the operational responsibility for Inpatient Mental Health which the responsibility for sits with NHS Tayside but queried whether the fact that IJB can direct would have any impact on budgets. In response, D Mitchell advised there was a financial recovery plan currently being undertaken by NHS Tayside that will be presented to the IJB or a relevant committee as soon as possible which should provide some reassurance that work is underway to try and reduce the cost pressures.

Resolved:

- (i) The overall projected out-turn for 2023/24 based on financial performance to 31 October 2023, be noted.
- (ii) It be noted that the Chief Officer and Executive Management Team are working on actions to mitigate cost pressures in the current year.
- (iii) The financial risks as detailed in Section 6 of Report G/23/173, be noted.

4.2 KEY STRATEGIC PERFORMANCE INDICATOR REPORT – QUARTER 2

There was submitted a report by the Chief Officer (G/23/174) providing an update on strategic performance when considering the core set of integration indicators and the delivery of approved Strategic Delivery Plan (SDP) outcomes.

M Black queried whether there was a common theme as to why people are being re-admitted. In response, C Jolly advised that it has been a significant challenge technically to get the data on understanding re-admissions into a position that was able to be presented at this meeting due to the large datasets involved. He further advised that the next step in the investigation will be more qualitative analysis

around the actual reasons are for re-admissions which will hopefully provide a greater level of detail.

B Hamilton referred to the Community Mental Health and Wellbeing Strategic Delivery Plan specifically around how far we are away from meeting the targets and queried how these are assessed and who is assessing them. In response, C Lamont confirmed the intention to try and marry up key performance indicators with what is happening nationally so that there is a consistent barometer. He also advised that these are measured by pulling information from a variety of different sources, such as patient satisfaction surveys, Public Health Scotland data and directly from our own Track Care Systems and information that is held by our own services.

Resolved:

- (i) The Health and Social Care Partnership's strategic performance in relation to the core suite of integration indicators, as detailed in Report G/23/174, be noted.
- (ii) The progress made in the delivery of the outcomes defined within the Community Mental Health and Wellbeing Strategic Delivery Plan, be noted.

5. GOVERNANCE AND ASSURANCE

5.1 STRATEGIC RISK MANAGEMENT UPDATE

There was submitted a report by the Chief Officer (G/23/175) providing updates on (1) the Integration Joint Board Strategic Risk Register; (2) the progress of the improvement actions being taken to improve the overall control environment to further mitigate risk; and (3) on new or emerging risks and any material changes to existing risks.

M Black referred to SR06 – Viability of Commissioned Providers, specifically on the recent announcements regarding potential new legislation to be introduced around salary thresholds and the impact this would have on people coming into the country from abroad to work and queried whether this will have a direct impact on the capacity for care homes and ultimately the viability of some care homes in the future. In response, C Jolly advised that as these announcements had only come to light very recently these have not been factored into this report but would be looked at closely and factored into future reports as necessary.

Resolved:

The IJB's Strategic Risk Register and Strategic Risk Improvement Plan as detailed in Report G/23/175, be approved.

5.2 INTERNAL AUDIT PROGRESS REPORT

There was submitted a report by the Chief Internal Auditor (G/23/176) providing an update on progress in relation to Internal Audit's planned activity.

Resolved:

The progress made in the delivery of the 2022/23 and 2023/24 plans, be noted.

6. CLINICAL CARE GOVERNANCE

6.1 CLINICAL AND CARE GOVERNANCE ASSURANCE

There was submitted a report by the Chief Officer (G/23/176) providing assurance in respect of Clinical, Care and Professional Governance arrangements in place for delegated and hosted services managed by Perth and Kinross Health and Social Care Partnership (PKHSCP).

M Black referred to paragraph 4.1 – bullet point 3 and queried where the evidence of effective information systems comes from. In response, K Ogilvy confirmed that the evidence is taken from the Care and Governance Forum minutes, he advised the Forum meet regularly and it gathers and assesses evidence and information from a range of other meetings such as the Care Governance meetings in localities, the Professional Care Governance meetings, information from complaints which are all fed into the Care and Professional Governance Forum which then ensures that appropriate standards are being met from the information provided.

S Watts referred to the MAT Standards 6-10 and queried whether there was any update on these noting it was due in October. In response, K Ogilvy confirmed that further evidence had been gathered on what is required to meet Standards 6-10 and work was continuing.

Resolved:

- (i) The responsibilities of Perth and Kinross Integration Joint Board in respect of Clinical, Care and Professional Governance and those of IJB's partners, as detailed in Report G/23/176, be noted.
- (ii) The arrangements in place for providing the IJB with assurance that effective and robust systems of Clinical, Care and Professional Governance are in place, as detailed in Report G/23/176, be noted.
- (iii) It be noted that Perth and Kinross Council's Scrutiny and Performance Committee received a full report regarding Clinical and Care Governance as detailed in Appendix 1 of Report G/23/176 on 13 September 2023 where it agreed the report presented demonstrated substantial assurance.
- (iv) It be noted that the exception report was presented to the NHS Tayside's Care Governance Committee on 5 October 2023.
- (v) It be noted that the Chief Officer confirms the effectiveness of the above systems in place in the IJB's partner organisations.

7. FOR INFORMATION

There were submitted and noted the following reports for information:

7.1 PERTH AND KINROSS IJB AUDIT AND PERFORMANCE COMMITTEE WORK PLAN 2022/23 (G/23/178)

7.2 PERTH AND KINROSS IJB AUDIT AND PERFORMANCE RECORD OF ATTENDANCE 2022/23 (G/23/179)

8. PRIVATE DISCUSSION

There was no private discussion between members of the Committee and the Chief Internal Auditor or External Auditor.

9. DATE OF NEXT MEETING

Monday 11 March 2024 at 9.30am.

DRAFT