



## **PERTH & KINROSS INTEGRATION JOINT BOARD**

**29 September 2021**

### **CLINICAL CARE GOVERNANCE ASSURANCE ARRANGEMENTS**

**Report by Chief Officer & Legal Advisor to PKIJB  
(Report No. G/21/124)**

#### **PURPOSE OF REPORT**

The purpose of this report is to set out the arrangements for providing assurance to Perth & Kinross Integration Joint Board (PKIJB) in respect of Clinical Care Governance.

#### **1. RECOMMENDATIONS**

The Board is asked to:-

- I. Note the responsibilities of PKIJB in respect of Clinical Care Governance and those of NHS Tayside and Perth & Kinross Council;
- II. Note the arrangements for providing assurance to PKIJB in 2021/22;
- III. Agree that a PKIJB Clinical, Care & Professional Governance Committee is no longer required;
- IV. Agree the amendments proposed to the Terms of Reference of the Audit & Performance Committee attached as Appendix 1.
- V. Note that the arrangements will be reviewed annually as part the annual review of governance and will be confirmed through the revision of the Integration Scheme.

#### **2. BACKGROUND**

- 2.1 Clinical Care Governance is defined as 'the system by which organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence will flourish' (Scully and Donaldson 1998)
- 2.2 While Perth and Kinross IJB has a strategic commissioning role, the operational responsibility for delegated and hosted services lies with NHS Tayside and Perth and Kinross Council, as the employing bodies of the staff

delivering these services and for the fulfilment of their respective statutory duties.

- 2.3 In this regard, the partners are responsible for providing the necessary assurance to PKIJB that risks are being appropriately managed and monitored by the parties and for escalating operational risks that may have an impact on delivery of the IJB's strategic objectives.
- 2.4 The Perth & Kinross Health & Social Care Partnership (PKHSCP) Care & Professional Governance Forum (CPGF) was established at the inception of integration and has met regularly. It is chaired jointly by the Clinical Director and the Chief Social Work Officer and provides assurance on the quality, safety and effectiveness of all delegated and hosted services. This is achieved through detailed annual reporting on all aspects of service delivery which is linked to the domains for effective clinical and care governance and the Health and Social Care Standards; along with a monthly process for the escalation of factors which are inhibiting safe care, issues and concerns; risk management; adult protection; and complaints.
- 2.5 Whilst risks were being appropriately managed and monitored through the CPGF, it lacked a formal mechanism for onward reporting to the statutory partners to enable them to give the necessary assurance to the PKIJB that operational risks were being appropriately managed and monitored.
- 2.6 This gap in assurance around Clinical Care Governance was a significant concern to PKIJB Members and to seek to address this, the Board agreed in November 2018 to establish a Clinical, Care & Professional Governance Committee. Capacity issues and then the need to direct and prioritise resources to responding to the COVID 19 pandemic over the last 18 months, has resulted in a delay in progressing the establishment of the Committee.
- 2.7 In the interim NHS Tayside has reviewed its governance processes, enhancing the role of the NHS Tayside Care Governance Committee to provide assurance that robust risk management systems are in place and effective throughout the whole NHS Tayside system in respect of operational services including the health services being managed by the 3 HSCP's. Operational risks, their management and any mitigation measures in respect of services within the PKHSCP are now reported by the CPGF to the NHS Tayside Care Governance Committee.
- 2.8 The establishment and operation of the NHS Tayside Care Governance Committee now provides a formal mechanism for NHS Tayside to manage and mitigate operational risks and to thereby provide appropriate assurance to the PKIJB in that regard.

In particular the NHS Tayside Care Governance Committee 2020/21 Annual Report provided assurance to PKIJB Audit & Performance Committee held on 13 September 2021 as part of its wider consideration of PKIJB's governance arrangements in 2020/21.

- 2.9 In parallel to the establishment of these new arrangements within NHS Tayside, discussions have commenced with Perth & Kinross Council around the extension to the role of the PKC Scrutiny Committee to provide assurance around the systems and processes in place in respect of adult social work and social care services.
- 2.10 Agreement in principle has been reached with the Convener of PKC Scrutiny Committee in this regard and more detailed discussions are now underway.

### **3. 2021/22 ARRANGEMENTS**

- 3.1 Whilst operational risks are managed by the partners providing the services, PKIJB need to be assured that a robust process is in place and that there is an appropriate escalation process for operational risks which create a consequential risk to the ability of the IJB to deliver its strategic objectives. Accordingly it is proposed that the following will be reported to the PKIJB Audit & Performance Committee throughout the year:-
- Minutes of the NHS Tayside Care Governance Committee (for noting);
  - The PKHSCP Clinical Care Governance Report to the NHS Tayside Care Governance Committee (for noting);
  - Risk Escalation Report from the Chief Officer identifying those significant operational clinical care governance risks which are likely to impact on PKIHB's Strategic Objectives and which therefore requires to be included in the IJB Strategic Risk Register, together with mitigating actions aligned to the strategic planning responsibilities of the IJB;
  - The NHS Tayside Care Governance Committee Annual Report will be provided to PKIJB each year to provide assurance that robust systems and processes have been in place and are effective;
  - The Chief Officer and Chief Social Work Officer will work with the Convener of PKC Scrutiny Committee to develop the necessary arrangements that will ensure PKC can fulfil its responsibility and the necessary assurance can be provided to PKIJB including an Annual Report.

These arrangements are fully consistent with the Tayside Risk Management Strategy approved by Perth & Kinross IJB in April 2021. The arrangements follow the advice of the PKIJB Legal Advisor and are fully supported by PKIJB's Chief Internal Auditor and External Auditor. The arrangements are also considered to maximise openness and transparency.

These new/proposed operational arrangements are the most appropriate mechanism to provide the necessary assurance to the IJB as to the management of risk and the quality of clinical and care services.

- 3.2 Accordingly the potential need for a Clinical and Care Governance Committee has now been superseded. The Terms of Reference of the IJB Audit & Performance Committee have been reviewed and amendments are proposed at Appendix 1 to better reflect the responsibilities of the Committee in respect of Clinical Care Governance. The IJB are asked to approve these

amendments. The opportunity has been taken to make a number of small housekeeping amendments for which approval is also sought.

#### **4. CONCLUSION**

- 4.1 The above arrangements will ensure that PKIJB can effectively fulfil its responsibilities in respect of Clinical Care Governance.
- 4.2 As part of the 2021/22 annual review of governance, these arrangements will be subject to ongoing review by officers and Internal and External Audit to ensure their continued effectiveness.

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#### **Appendices**

Appendix 1 - Revised Terms of Reference Perth & Kinross IJB Audit & Performance Committee

**NOTE:** No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information), were relied on to any material extent in preparing this report