

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

Minute of Meeting of the Audit and Performance Committee of the Perth and Kinross Integration Joint Board (IJB) held via Microsoft Teams on Monday 15 February 2021 at 9.30am.

**Present:** Councillors C Purves (Chair) and J Duff (Perth and Kinross Council), P Kilpatrick and R Erskine (Tayside NHS Board), and B Campbell (Carer Public Partner) (during Item 3.2).

**In Attendance:** Councillor E Drysdale (during Item 3.2) and Councillor X McDade; G Paterson, Chief Officer, J Smith, Chief Financial Officer, C Jolly, F Low and P Jerrard (all Perth and Kinross Health and Social Care Partnership); J Clark, Chief Internal Auditor; and S Hendry, A Taylor, M Pasternak and A Brown, Corporate and Democratic Services (Perth and Kinross Council); and C Windeatt and L Preston (both KPMG).

**Apologies:** E Devine (Perth and Kinross Health and Social Partnership)  
Councillor Purves, Chair.

## **1. WELCOME AND APOLOGIES**

Councillor Purves welcomed all those present to the meeting and an apology was 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. MINUTE OF PREVIOUS MEETING**

### **3.1 MINUTE OF MEETING OF THE AUDIT AND PERFORMANCE COMMITTEE OF 30 NOVEMBER 2020**

The minute of meeting of the Audit and Performance Committee of the Perth and Kinross Integration Joint Board of 30 November 2020 was submitted and approved as a correct record.

### **3.2 ACTION POINTS UPDATE**

The Action Points Update (Report G/21/1) was submitted and updates provided thereon.

### **3.3 MATTERS ARISING**

There were no matters arising.

## **4. GOVERNANCE & ASSURANCE**

### **4.1 INTERNAL AUDIT PROGRESS REPORT**

The Chief Internal Auditor provided a verbal update on progress in relation to Internal Audit's planned activity.

The Chief Internal Auditor advised that work was continuing in line with the audit plan but with a few slight delays due to staff being currently re-tasked. She further advised that the majority of the audit reports will be presented to the June meeting allowing an Annual report to be prepared in the normal way.

The Committee noted the position.

### **4.2 STRATEGIC RISK MANAGEMENT UPDATE**

There was submitted a report by the Chief Officer (G/21/2) (1) submitting the refreshed Integration Joint Board Strategic Risk Register for consideration; and (2) updating the Committee on the further actions being taken to manage, mitigate and escalate risks.

The Chief Officer advised that a Strategic Risk Improvement Plan was currently being developed which will form an integral part of the register and will be presented to the June meeting. Committee members welcomed the report and positive feedback was provided on the readability and detail in the register.

Ronnie Erskine queried the risk appetite and if consideration has been given to agreeing this. In response, the Chief Officer advised that this is something which may be considered at a future IJB development session.

R Erskine also made reference to the updates for the strategic risk register and sought confirmation that this would be looked at in real time on an ongoing basis and not on the specific review dates against individual risks. In response, the Chief Financial Officer advised that this would happen; the associated improvement plan is currently a work in progress but this is an opportunity for the IJB to be assured that strategic risk is being managed appropriately. The Chief Officer stated that there would also be the opportunity for the IJB to consider what our statutory partners can assist with on delivering on our strategic aims if risks remain red despite all efforts.

The Chief Officer and Chair agreed that a development session on strategic risk would be beneficial and this would be progressed with a view to this taking place before September 2021.

#### **Resolved:**

The continued development of the IJB Strategic Risk Register and associated Strategic Risk Improvement Plan be noted.

S HOPE JOINED THE MEETING DURING THE ABOVE ITEM.

COUNCILLOR DRYSDALE LEFT DURING THE ABOVE ITEM.

#### **4.3 EXTERNAL AUDIT REPORT – AUDIT STRATEGY**

There was submitted a copy of the Perth and Kinross Integration Joint Board Audit Strategy (G/21/3) for the year ending 31 March 2021 produced by the External Auditors, KPMG.

C Windeatt and L Preston from KPMG provided the Committee with a summary of the main headlines of the report and answered questions from members.

**Resolved:**

The contents of Report G/21/3 be noted.

C WINDEATT AND L PRESTON LEFT THE MEETING AT THIS POINT

#### **4.4 EXTERNAL AUDIT – PROPOSED AUDIT FEE 2020/21**

There was submitted a report by the Chief Financial Officer (G/21/4) presenting the proposed Audit Scotland External Audit Fee for 2020/21 for approval.

**Resolved:**

The Committee noted the proposed fee for 2020/21 of £30,060 and authorised Officers to accept this fee.

### **5. PERFORMANCE**

#### **5.1 KEY STRATEGIC PERFORMANCE INDICATOR REPORT FOR THE PERIOD TO SEPTEMBER 2020: QUARTER 2**

There was submitted a report by the Chief Officer (G/21/5) providing an update on the Health and Social Care Partnership's performance including progress against National and Ministerial Steering Group Indicators.

Councillor Duff made reference to Indicator 16, falls in the 65+ age group and queried if we had any indication as to what could be behind the increase. In response, the Chief Officer advised some further analysis on this was currently being undertaken so that the correct response to the issue can be provided.

Councillor McDade made reference to Indicator 14, specifically the readmissions to hospital within 28 days of discharge figures and sought some clarification on the red status in comparison to the rest of Scotland. In response, C Jolly advised that all three Tayside HSCPs have a comparable performance in this indicator which seems to be at a higher level than the rest of Scotland. He further commented that some work was underway with NHS Scotland LIST colleagues to investigate this as there may be differences in the way this data is recorded resulting in inconsistencies across Scotland.

The Chief Officer stated that the Partnership will focus on the indicators where we are not performing well to ensure improvements can be made. He also stated that it should also be noted the many positive areas in the report where the Partnership are performing well.

**Resolved:**

The Health and Social Care Partnership's performance for the period to September 2020, as detailed in Appendix 1 of Report G/21/5, be noted.

R ERSKINE LEFT THE MEETING DURING THE ABOVE ITEM.

**6. FOR INFORMATION**

There were submitted and noted the following reports for information:

- 6.1 AUDIT & PERFORMANCE COMMITTEE WORK PLAN 2020/21 (G/21/6)**
- 6.2 AUDIT & PERFORMANCE COMMITTEE WORK PLAN 2021/22 (G/21/7)**
- 6.3 AUDIT & PERFORMANCE COMMITTEE RECORD OF ATTENDANCE 2020/21 (G/21/8)**

**7. DATES OF FUTURE MEETINGS**

21 June 2021 at 11.00am  
2 August at 10.30am  
13 September 2021 at 9.30am  
13 December 2021 at 9.30am  
7 March 2022 at 9.30am

**Resolved:**

The dates of meetings as detailed above were approved and noted.

**8. PRIVATE DISCUSSION**

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

**9. DATE OF NEXT MEETING**

Monday 21 June 2021 at 11.00am.