

## Minute of Meeting

### Renfrewshire Health and Social Care Integration Joint Board Audit, Risk and Scrutiny Committee

Date	Time	Venue
Friday, 19 June 2020	10:00	Remotely by Skype,

#### Present

Councillor Lisa-Marie Hughes (Renfrewshire Council); Margaret Kerr and Dorothy McErlean (both Greater Glasgow & Clyde Health Board); Alan McNiven (third sector representative); and David Wylie (Health Board staff member involved in service provision).

#### Chair

Margaret Kerr, Chair, presided.

#### In Attendance

Ken Graham, Head of Corporate Governance (Clerk), Andrea McMahon, Chief Internal Auditor and Tracy Slater, Senior Committee Services Officer (all Renfrewshire Council); David Leese, Chief Officer, Sarah Lavers, Chief Finance Officer, Jean Still, Head of Administration; Carron O'Byrne, Head of Health and Social Care Services, Antoni Anderson, Service Manager for Care Homes and Extra Care Housing and James Higgins, Project Officer (all Renfrewshire Health and Social Care Partnership); and John Cornett, Audit Director, Mark Ferris, Senior Audit Manager, Adam Haahr, Senior Auditor (all Audit Scotland).

#### Apology

Councillor Jennifer Adam-McGregor (Renfrewshire Council).

#### Declarations of Interest

There were no declarations of interest intimated prior to the commencement of the meeting.

Members of the public were not able to attend this meeting of the IJB as it was being held remotely by Skype.

## 1 Minute

The Minute of the meeting of the Integration Joint Board (IJB) Audit Committee held on 31 January 2020 was submitted.

**DECIDED:** That the Minute be approved.

## 2 Rolling Action Log

The rolling action log for the IJB Audit, Risk and Scrutiny Committee was submitted.

**DECIDED:** That the rolling action log be noted.

## 3 Unaudited Annual Governance Statement 2019/20

The Chief Finance Officer submitted a report relative to the Unaudited Annual Governance Statement 2019/20, a copy of which was appended to the report.

The report advised that the Integration Joint Board (IJB) was responsible for ensuring that its business was conducted in accordance with the law and appropriate standards, and that public money was safeguarded, properly accounted for, and used economically, efficiently and effectively. The IJB also fostered a culture of continuous improvement in the performance of its functions and worked to ensure Best Value. To do this, the Chief Officer relied on NHS Greater Glasgow and Clyde and Renfrewshire Council's systems of internal control which supported compliance with both organisations' policies and promoted achievement of each organisations' aims and objectives, together with those of the IJB.

The report intimated that the IJB had adopted governance arrangements consistent with the six principles of CIPFA and the Society of Local Authority Chief Executives' (SOLACE) framework, "Delivering Good Governance in Local Government", where appropriate. The Annual Governance Statement explained how the IJB had complied with these governance arrangements and met the requirements of the Code of Practice on Local Authority Accounting in the UK, which included the requirement for an Annual Governance Statement. In addition, the Annual Governance Statement, which formed a key part of the annual accounts, provided assurance that the governance framework was fit for purpose.

The Annual Governance Statement will be subject to statutory audit by the Council's External Auditors as part of their review of the annual accounts.

**DECIDED:** That the draft Annual Governance Statement, as appended to the report, be approved.

## 4 Internal Audit Annual Report 2019/20

The Chief Internal Auditor submitted a report relative to the Internal Audit Annual Report 2019/20, a copy of which was attached as Appendix 1 to the report.

The report advised that the Public Sector Internal Audit Standards (PSIAS) required the Chief Internal Auditor to deliver an annual internal audit opinion on the overall reasonable level of assurance of the internal control environment that could be used by the organisation to inform its governance statement. The internal audit opinion must

also conclude on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control.

The Annual Report, which included the Chief Internal Auditor's independent and objective opinion as to the overall reasonable level of assurance of the internal control environment, outlined the work carried out for the year ended 31 March 2020. In forming the opinion, the Chief Internal Auditor conducted a review of the internal audit reports issued to the IJB in the year, the internal audit report from Renfrewshire Council and internal audit progress reports from NHS Greater Glasgow and Clyde.

**DECIDED:** That the Internal Audit Annual Report 2019/20 be noted.

## **5 Summary of Internal Audit Reports**

The Chief Internal Auditor submitted a report providing a summary of internal audit reports issued.

The report advised that a risk-based Internal Audit Plan for 2019/20 had been approved by the IJB Audit Committee at its meeting on 25 January 2019 and, in line with the Public Sector Internal Audit Standards, Internal Audit must report the results of each engagement.

Appendix 1 to the report provided details of those audit engagements completed with the overall assurance rating and the number of recommendations in each risk category. The committee summary for each report was also appended. Where recommendations had been made, relevant managers had put action plans in place to address the issues raised.

**DECIDED:** That the report be noted.

## **6 Summary of Internal Audit Activity in Partner Organisations**

The Chief Internal Auditor submitted a report providing a summary of internal audit activity undertaken in partner organisations during 1 January to 31 May 2020.

The report intimated that the IJB directed both Renfrewshire Council and NHSGG&C to deliver services that enabled the IJB to deliver on its strategic plan. Both Renfrewshire Council and NHSGG&C had internal audit functions and conducted audits across each organisation, the findings of which were reported to the respective audit committees. Members of the IJB had an interest in the outcomes of the audits at both Renfrewshire Council and NHSGG&C that impacted upon the IJB's ability to deliver the strategic plan or support corporate functions.

In relation to internal audit activity within Renfrewshire Council, the report provided detail on reports submitted to Renfrewshire Council which were relevant to the IJB: information security – adult services; general ledger; and cloud services.

In relation to internal audit activity within NHSGG&C, the report provided detail on reports submitted to the NHSGG&C Audit Committee: IJB financial information and reporting; medicines reconciliation in hospital; sickness absence follow-up; and statutory and mandatory training.

**DECIDED:** That the report be noted.

## **7 Compliance with the Local Code of Corporate Governance**

The Chief Internal Auditor submitted a report relative to the local governance arrangements that had been developed to ensure compliance with the 'Delivering Good Governance in Local Government: Framework', published in 2016 by CIPFA in association with Solace, which set the standard for local authority governance in the UK.

The report advised that the Chief Internal Auditor had a responsibility to review independently and report to this Committee annually, to provide assurance on the adequacy and effectiveness of the Local Code of Corporate Governance and the extent of compliance with it. This annual review supported the Chief Internal Auditor's opinion included in the Internal Audit Annual Report and the Governance Statement included in the Annual Accounts. Based on the checks undertaken, as detailed in the report, it was confirmed that the IJB complied with the requirements of the Local Code of Corporate Governance.

The report intimated that the Local Code had been subject to review and updating in line with developments in best practice and no changes to the Code had been identified to maintain it and ensure its effectiveness in practice.

It was proposed that the information contained in this report be included in the Summary of Internal Audit report submitted to this Committee annually. This was agreed.

### **DECIDED:**

(a) That the report be noted; and

(b) That it be noted that in future years the information contained in this report would be included in the Summary of Internal Audit Report submitted to this Committee annually.

## **8 Local Code and Sources of Assurance for Governance Arrangements**

The Head of Administration submitted a report relative to the updated Local Code and Sources of Assurance for Governance Arrangements, a copy of which was appended to the report.

The report advised that Renfrewshire IJB operated through a governance framework based on legislative requirement, governance principles and management processes. The IJB had worked to ensure that its governance arrangements were robust and based on good practice.

At its meeting on 22 March 2019, the IJB agreed that the review of the Local Code of Governance arrangements would be undertaken by the IJB Audit Committee, now known as the IJB Audit, Risk and Scrutiny Committee, prior to being submitted to the IJB for approval. It was noted that some evidence of assurances contained in the appendix were the responsibility of NHSGG&C and/or Renfrewshire Council and this would be noted with ongoing monitoring arrangements.

Following discussion, it was proposed that the Local Code and Sources of Assurance for Governance Arrangements be approved, subject to clarification at sections B2.1 and B3.1 in relation to the term 'stakeholders'.

**DECIDED:** That the Local Code and Sources of Assurance for Governance Arrangements, which was appended to the report, be submitted to the IJB for approval, subject to clarification at sections B2.1 and B3.1, as agreed.

## **9 Review of Integration Joint Board Financial Governance Arrangements**

The Chief Finance Officer submitted a report relative to the review of the IJB's financial governance arrangements.

The report advised that, in accordance with the Public Bodies (Joint Working) (Scotland) Act 2014, the IJB was required to have its own set of financial governance arrangements. These were first approved by the Shadow IJB on 18 September 2015 for implementation from 1 April 2016, with a revised Reserves Policy being approved on 24 November 2017.

Following a review, a number of changes had been made to the Financial Regulations and Reserves Policy, attached as appendices 1 and 2 to the report, respectively, which reflected the maturity of the IJB and the updated management reporting arrangements, as these had evolved since the IJB was first established. In addition, to provide greater clarity, the Chief Finance Officer had taken the opportunity to amalgamate the previous set of Financial Regulations and Financial Governance Manual to form the revised Financial Regulations.

As part of the review, the Chief Finance Officer had carried out an in-depth benchmarking exercise against other IJBs to ensure best practice, the results of which had been used to inform the revised Financial Regulations and Reserves Policy.

### **DECIDED:**

(a) That the updated IJB Financial Regulations, attached as Appendix 1 to the report, be approved; and

(b) That the updated IJB Reserves Policy, attached as Appendix 2 to the report, be approved.

## **10 Inspection of Care at Home Services by Care Inspectorate**

The Chief Officer submitted a report relative to the inspection of Care at Home Services undertaken by the Care Inspectorate on 31 October 2019.

The report advised that social care services were subject to a range of audit and scrutiny activities to ensure that they were undertaking all statutory duties and were providing appropriate care and support to vulnerable individuals and groups. Information was provided on the work that was undertaken by the Care Inspectorate during an inspection, the quality themes that services were assessed against and the grading scale used to award grades.

The report confirmed that Renfrewshire's Care at Home Services were inspected against three quality themes: quality of care and support; quality of staffing; and quality of management and leadership. The service was graded as 'good' for quality of care and support and quality of staffing, and 'adequate' for quality of management and leadership. One recommendation had been made in relation to the quality of care and support, which had been met immediately following the inspection. One requirement

had also been made in relation to the quality of management and leadership and work to ensure that this requirement was met was ongoing. The measures put in place from this work were being closely monitored and kept under review through a detailed action plan. The results of any inspections across Adult Services would be considered and inform the developing service delivery models, supporting structure and governance arrangements.

Following discussion, it was proposed that an update report on the areas for improvement and action plan progress, be submitted to the next meeting of this Committee. This was agreed.

**DECIDED:**

(a) That the performance of Renfrewshire Health and Social Care Partnership's Care at Home Service, with services graded as 'adequate' for quality of management and leadership and 'good' for quality of care and support of staffing, be noted; and

(b) That an update report be submitted to the next meeting of this Committee on the areas for improvement and action plan progress.

## **11 Inspection of Care Home Services by Care Inspectorate**

The Chief Officer submitted a report relative to the inspection of Care Home Services undertaken by the Care Inspectorate at Renfrew Care Home on 27 January 2020 and Hunterhill Care Home on 6 February 2020.

The report advised that social care services were subject to a range of audit and scrutiny activities to ensure that they were undertaking all statutory duties and were providing appropriate care and support to vulnerable individuals and groups. Information was provided on the work that was undertaken by the Care Inspectorate during an inspection, the quality themes that services were assessed against and the grading scale used to award grades.

The report confirmed that Renfrewshire's Care Home Services were inspected against two quality themes: quality of care and support; and supporting people's wellbeing. The services were graded as 'good' for both quality of care and support and supporting people's wellbeing. No recommendation had been made, however, some areas for improvement had been identified. Care Home services acknowledged the areas for improvement identified by the Care Inspectorate and were taking action to address these, where possible. The measures put in place would be closely monitored and kept under review through a detailed action plan.

**DECIDED:** That the outcome of the inspection of Renfrewshire Health and Social Care Partnership's Care Home Services undertaken at Renfrew Care Home and Hunterhill Care home, with both services graded as 'good' for quality of care and support and supporting people's wellbeing, be noted.

## **12 Integration Joint Board and Health and Social Care Partnership Risk Registers**

The Chief Officer submitted a report relative to the risk registers being maintained by Renfrewshire Health and Social Care Partnership (HSCP).

The report provided an update on the Renfrewshire IJB Risk Register as at 31 March 2020 and Renfrewshire HSCP Risk Register as at 31 May 2020, attached as appendices to the report. The report also advised that from March 2020, a specific COVID-19 Risk and Issues Log had been maintained and reviewed by the Senior Management Team on a weekly basis.

Following discussion, it was proposed that an update on the risk registers be submitted to this Committee prior to its meeting in December 2020 and that future dates be reviewed due to changes in reporting timescales. This was agreed.

**DECIDED:**

- (a) That the report be noted;
- (b) That the IJB Risk Register be approved;
- (c) That the Renfrewshire HSCP Risk Register be noted; and
- (d) That an update on the risk registers be submitted to this Committee prior to its meeting in December 2020 and that future meeting dates of the IJB Audit, Risk and Scrutiny Committee be reviewed due to changes in reporting timescales.

### **13 Date of Next Meeting**

**DECIDED:** That it be noted that the next meeting of the IJB Audit, Risk and Scrutiny Committee would be held at 10.00 am on 11 September 2020, to be held remotely.