



Minute of Meeting Renfrewshire Health and Social Care Integration Joint Board Audit, Risk and Scrutiny Committee

Date	Time	Venue
Friday, 18 June 2021	10:00	Remotely by MS Teams,

Present

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

Chair

Margaret Kerr, Chair, presided.

In Attendance

Sarah Lavers, Chief Finance Officer, Christine Laverty, Head of Mental Health, Addictions and Learning Disability Services, Frances Burns, Head of Strategic Planning and Health Improvement, David Fogg, Service Improvement Officer, Jamie Aarons, Adult Protection Committee Lead Officer, Jim Robb, Service Manager and James Higgins, Interim Administration Manger (all Renfrewshire Health and Social Care Partnership); Ken Graham, Head of Corporate Governance (Clerk), Andrea McMahon, Chief Internal Auditor and Elaine Currie, Senior Committee Services Officer (all Renfrewshire Council); and Mark Ferris, Audit Manager (Audit Scotland).

Recording of Meeting

Prior to the commencement of the meeting the Chair intimated that this meeting of the Committee would be recorded and that the recording would be available to watch on both the Council and HSCP websites.

Apology

Diane Young (for lateness).

Declarations of Interest

Councillor Hughes declared a non-financial interest in item 11 as a family member was employed in the psychiatry service and indicated that, as the report was for noting, she would remain in the meeting.

1 Minute

The Minute of the meeting of the Integration Joint Board (IJB) Audit, Risk and Scrutiny Committee held on 12 March 2021 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 updates to the rolling action log be noted.

3 Unaudited Annual Governance Statement 2020/21

The Chief Finance Officer submitted a report relative to the Unaudited Annual Governance Statement 2020/21, a copy of which was appended to the report.

The report advised that the 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 aimed to foster a culture of continuous improvement in the performance of its functions and made arrangements to secure best value. In discharging these responsibilities, the Chief Officer relied on NHSGGC and Renfrewshire Council's systems of internal control which supported compliance with both organisations' policies and promoted achievement of each organisations' aims and objectives, as well as 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; met the requirements of the Code of Practice on Local Authority Accounting in the UK; and provided assurance that the governance framework was fit for purpose.

The Annual Governance Statement had been prepared in accordance with the relevant regulation and guidance, taking account of the Internal Audit Annual Report and the Chief Officer's evaluation of the operation of the governance arrangements within each service area and would be subject to statutory audit by the Council's External Auditors as part of their review of the annual accounts.

The Chief Finance Officer advised that the date in the first action detailed in the action plan would be amended from June 2021 to September 2021. In relation to the update on the 2019/20 action plan it was noted that the title should be amended to the draft Unscheduled Care Joint Commissioning Plan.

DECIDED: That the draft Annual Governance Statement, as amended above, be approved.

4 **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 2020/21 had been approved by this Committee at its meeting on 31 January 2020 and, in line with the Public Sector Internal Audit Standards, Internal Audit must report the results of each engagement to this Committee.

The appendix 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.

DECIDED: That the content of the report be noted.

5 **Summary of Internal Audit Activity in Partner Organisations**

The Chief Internal Auditor submitted a report providing a summary of internal audit activity relevant to the IJB, undertaken in partner organisations during 1 January to 31 May 2021.

The report intimated that the IJB directed both Renfrewshire Council and NHSGGC to deliver services that enabled the IJB to deliver on its strategic plan. Both Renfrewshire Council and NHSGGC 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 NHSGGC that impacted upon the IJB's ability to deliver the strategic plan or support corporate functions.

The report provided a summary of the internal audit activity undertaken within partner organisations.

DECIDED: That the content of the report be noted.

6 **Internal Audit Annual Report 2020/21**

The Chief Internal Auditor submitted a report relative to the Internal Audit Annual Report 2020/21, a copy of which was appended 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 adequacy and effectiveness of the internal control environment that could be used by the organisation to inform its governance statement. The internal audit opinion must 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 adequacy and effectiveness of the internal control environment, outlined the work carried out for the year ended 31 March 2021. 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 NHSGGC.

It was noted that the reference to Payments to Care Homes should be detailed under Renfrewshire Council and not the IJB.

DECIDED: That the content of the Internal Audit Annual Report 2020/21, as amended above, be noted.

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Diane Young joined the meeting prior to consideration of the following item of business.

7 Internal Audit Plan 2021/22 - Progress

The Chief Internal Auditor submitted a report providing progress on the annual internal audit plan 2021/22, a copy of which was appended to the report.

The report intimated that the audit plan set out a resource requirement of 35 days, including assurance work, reviewing the adequacy and compliance with the Local Code of Corporate Governance, time for follow-up of previous recommendations, ad-hoc advice and planning and reporting.

DECIDED: That the progress against the internal audit plan 2021/22 be noted.

8 Local Code and Sources of Assurance for Governance Arrangements

The Interim Chief Officer 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 a review of the Local Code of Governance arrangements 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 on an annual basis.

It was noted that a key development over the last year had been the development and approach of a new IJB Risk Management Framework. Additional governance measures were highlighted in the report, beyond the sources detailed in the appendix to the report, which had been introduced in light of the pandemic.

The Local Code and Sources of Assurance had been subject to internal audit over 2020/21 and the Chief Internal Auditor would share the findings with this Committee.

DECIDED:

(a) That the Local Code and Sources of Assurance for Governance Arrangements, as appended to the report, be submitted to the IJB for approval; and

(b) That it be noted that any recommendations arising from this audit of the Local Code and Sources of Assurance would be taken forward by the relevant officers with progress reported back to this Committee.

9 **Update on Risk Register and Implementation of Risk Management Framework**

Under reference to item 7 of the Minute of the meeting of this Committee held on 12 March 2021, the Interim Chief Officer submitted a report providing an update on the activity to implement the revised IJB Risk Management Framework and updates made to the IJB's risk register, reflecting an updated reporting structure.

The report intimated that the framework set out the principles by which the HSCP and IJB identified and managed strategic and operational risks and formed a key strand of the IJB's overall governance mechanisms.

The HSCP had progressed activity to further embed the framework and updated approach across operational services and the report provided detail on the key activities which had commenced.

It was noted that further assessment and review of the risk register had identified further risks and issues which had been incorporated within the register, a copy of which was appended to the report. The report proposed that the risk register be incorporated into a refreshed non-financial governance report which would be brought to the IJB twice yearly and that a refresher training session be held for IJB members on 10 September 2021.

DECIDED:

(a) That the implementation approach being progressed by the HSCP, including the establishment of a cross NHSGGC HSCP Risk Working Group be noted;

(b) That the updates made to currently identified risks and additional risks which had been added to the risk register following further assessment be noted;

(c) That the intention in future reports to include issues as shown separately to risks, whereby issues represent those risks which had already occurred, be noted;

(d) That the intention to incorporate the risk register into the non-financial governance reports brought to the IJB twice a year be approved; and

(e) That the proposal to undertake a risk refresher training session with IJB members in September 2021 be approved.

10 **Renfrewshire Adult Protection Committee Improvement Plan**

The Interim Chief Officer submitted a report providing an update on progress of the Renfrewshire Adult Protection Committee Improvement Plan following the Adult Support and Protection (ASP) Joint Inspection undertaken in March 2020.

The report intimated that on 7 January 2020, the Care Inspectorate, Her Majesty's Inspectorate of Constabulary in Scotland and Healthcare Improvement Scotland formally notified Renfrewshire HSCP and Renfrewshire Council that they would be undertaking a joint inspection of adult support and protection arrangements in the partnership area commencing on 16 March 2020. Due to the COVID-19 emergency not all activities were completed, however, the feedback received was balanced and highlighted key strengths and areas of improvement as detailed in the report.

The areas of improvement formed the basis of the Improvement Plan developed in consultation with partners which was amalgamated with the Renfrewshire Adult Protection Committee (RAPC) Improvement Plan to ensure a cohesive approach to improvement, a copy of which was appended to the report. Further work was being undertaken to align the objectives with those of the Scottish Government National ASP Improvement Plan.

It was noted that the Cabinet Secretary for Health and Sport had issued a letter on 3 March 2021 advising that the Adult Support and Protection Joint Inspection Programme would resume at the end of March 2021. This letter referred to the completion of the first inspection in January 2021 which was understood to refer to Renfrewshire, therefore, it was not anticipated that any further ASP joint inspection activity would be undertaken until phase 2 of the national programme.

DECIDED: That the contents of the report be noted.

11 **Mental Welfare Commission Older People Themed Visit 2020**

The Interim Chief Officer submitted a report relative to the development of an Older Peoples Mental Health Action Plan 2020/21, a copy of which formed Appendix 1 to the report.

The report intimated that in 2019, the Mental Welfare Commission (MWC) carried out a series of themed visits across all NHS Scotland wards which provided assessment and treatment for older people with a functional mental illness. On 16 April 2020, the findings and recommendations were published in the Older People's Functional Mental Health Wards in Hospitals: Themed Visit Report 2020 which made seven recommendations for Integration Authorities as detailed in section 3.4 of the report.

In response to the MWC report, the HSCP had developed an Older Peoples Mental Health Action Plan 2020/21 which set out the actions taken to meet the recommendations, the factors affecting the delivery of those actions, timescales and the next steps.

DECIDED:

(a) That the content of the report be noted; and

(b) That the content of the Older Peoples Mental Health Action Plan 2020/21, which formed Appendix 1 to the report, and which detailed the required actions and timescales that were necessary to comply with the recommendations and findings of the Mental Welfare Commission Themed Visit 2020 be noted.

12 **Mental Welfare Commission: 'Authority to Discharge - Report into decision making for people in hospital who lack capacity'**

The Interim Chief Officer submitted a report relative to the publication of a report entitled 'Authority to Discharge: Report into decision making for people in hospital who lack capacity' by the Mental Welfare Commission for Scotland on 20 May 2021.

The report intimated that The Adults with Incapacity (Scotland) Act 2000 introduced a system for safeguarding the welfare and managing the finances and property of adults who lacked capacity to make some or all decisions for themselves. The Mental Welfare Commission had a statutory safeguarding role in respect of adults whose capacity to make decisions or to take actions to promote or safeguard their welfare was impaired due to a mental disorder.

During the pandemic, a number of stakeholders raised concerns with the Mental Welfare Commission as to whether the appropriate legal authority had been used to safeguard people being discharged from hospital to care homes who did not have the capacity to make an informed decision to agree to the move. The focus of the Commission's report was to examine the detail of a sample number of hospital to care home moves across Scotland to check that those moves were done in accordance with the law during the early stages of the pandemic. The Commission sought information from HSCPs across Scotland in relation to people who had moved from hospital to a registered care home setting during 1 March to 31 May 2020.

The Commission's report highlighted that 11 HSCPs moved individuals without legal authority and it was noted that this was not the case in Renfrewshire as all moves were underpinned by the legal authority of a Welfare Guardianship Order or a Welfare Power of Attorney.

The report detailed the Mental Welfare Commission's recommendations together with the next steps.

DECIDED:

- (a) That the content of the Mental Welfare Commission report be noted; and
- (b) That the next steps, as detailed in section 4 of the report, be agreed.

13 **Date of Next Meeting**

DECIDED: That it be noted that the next meeting of this Committee would be held at 10.00 am on 10 September 2021.

At the conclusion of the meeting, in terms of the Committee's terms of reference, members of the Committee met with the Chief Internal Auditor without officers present.