

**Minute of virtual meeting of the East Renfrewshire Integration Joint Board
Performance and Audit Committee held on 27 March 2023 at 9.00 a.m.**

PRESENT

Councillor Katie Pragnell, East Renfrewshire Council (Chair)
Lynsey Allan, Scottish Care
Councillor Caroline Bamforth, IJB Member
Jacqueline Forbes, NHS Greater Glasgow and Clyde Board
Anne Marie Kennedy, Non-voting IJB Member
Anne-Marie Monaghan NHS Greater Glasgow and Clyde Board

IN ATTENDANCE

Lesley Bairden, Head of Finance & Resources (Chief Financial Officer)
Michelle Blair, Chief Auditor
Lesleyann Burns, Assistant Democratic Services Officer
Louise Brown, HR Business Partner
Pamela Gomes, Governance and Compliance Officer
Noleen Harte McCormick, Self-Directed Support Implementation Manager
Lee McLaughlin, Head of Adult Services (Communities and Wellbeing)
Julie Murray, Chief Officer IJB
Margaret Phelps Strategic Planning, Performance and Commissioning Manager
Steven Reid, Policy, Planning and Performance Manager
Catriona Reid, NHS Great Glasgow and Clyde
Barry Tudhope, Democratic Services Manager

ALSO IN ATTENDANCE

Grace Scanlin, Ernst and Young

APOLOGIES

None.

1. DECLARATIONS OF INTERESTS

There were no declarations of interest intimated.

2. MINUTE OF PREVIOUS MEETING: 22 NOVEMBER 2023

The minute of the meeting of the Integration Joint Board Performance and Audit Committee held on 22 November 2023 was approved.

3. MATTERS ARISING

The Committee considered a short report by the Chief Financial Officer on two matters arising from the November meeting.

The Chief Financial Officer reported that in terms of the November Performance Report, data for A&E admissions and attendance from care homes is currently being verified and will therefore be presented in the year-end report.

The Chief Financial Officer also confirmed that in terms of the November Audit Update, the default position will remain that verification of all audit recommendations will be undertaken by Internal Audit. For those actions around procedures, a rolling schedule of reminders will be developed and distributed through the staff bulletin to maintain a level of awareness. It was further highlighted that any audit recommendations will also be included on management team agendas.

The Committee agreed to note the content of the report.

4. ROLLING ACTION LOG

The Committee considered a report by the Chief Financial Officer providing details of all open actions and those that had been completed, or removed from the log, since the last meeting.

Commenting on the report, the Chief Financial Officer confirmed that Actions 75 and 77 relating to Mid-Year Performance were closed. Of the four open actions 75 and 76 were covered in terms of Matters Arising from the previous meeting and Action 64 will be reviewed as part of year end reporting.

It was highlighted that Action 31 remains with Police Scotland.

The Committee agreed to note the report.

5. ERNST AND YOUNG PROVISIONAL ANNUAL AUDIT PLAN YEAR ENDED 31 MARCH 2024

The Committee considered the East Renfrewshire Integration Joint Board Provisional Annual Audit Plan prepared by Ernst and Young, the Integration Joint Board's external auditors. The report provided details of the work that Ernst and Young would undertake as part of their audit of the Annual Accounts of the IJB for 2023/24.

It was highlighted that the report was similar to previous Audit Plan reports. However, there had been some contextual developments in that the auditors work will consider key developments in the sector such as the National Care Service Bill, the Scottish Budget and the NHS in Scotland.

Discussions took place on the risk of fraud and income/funding for public bodies.

The Chair thanked Ernst & Young for the report and commented on the ongoing good working relationship between them and the Integration Joint Board.

The Committee agreed to note the report.

6. PERFORMANCE UPDATE (QUARTER 3, 2023-24)

The Committee considered a report by the Policy, Planning and Performance Manager on key performance measures relating to the strategic priorities as set out in the HSCP Strategic Plan 2022-2025.

The report highlighted that the HSCP continues to operate at a high level of performance across services areas, including those that continue to face significant challenges and

pressures. The Policy, Planning, and Performance Manager outlined some of the key findings in the report, which were detailed at Appendix 1:

- Continuing excellent performance in CAMHS waiting times.
- Performing ahead of the national average in terms of independence and care rebalancing.
- 63% of individuals from the reablement service were discharged with reduced levels of care need;
- Alcohol brief interventions increased during the quarter and the service is on course to meet their target for the financial year.
- Emergency hospital admissions decreased during the quarter.

The Policy, Planning and Performance Manager also outlined areas of focus for the next quarter including:

- Targeted action to improve the percentage of people accessing psychological therapies within 18 weeks.
- Returning performance to target in terms of waiting times for alcohol and drug recovery services, this has been impacted due to staff absence during the quarter.
- Continued activity to minimise hospital discharge delays and bed days lost.

It was highlighted that sickness absence continues to be an issue. Absence panels are in place and support is targeted to service areas with highest levels of absence. The HSCP continue to deliver health and wellbeing support to staff.

Committee Members highlighted that the performance report layout had been improved and was now easier to understand. However, they noted that some of the charts were still overcrowded. The Policy, Planning, and Performance Manager agreed to address this for future reports.

Committee Members then asked questions and received responses from officers on Direct Payments spent on adults and managing staff absence.

There followed a discussion regarding the perception of inconsistency and lack of innovation in the use of Self-Directed Support. It was highlighted following the introduction of the Supporting People Framework update guidance has been supplied and coaching and support is available for social work and wider practitioners to increase creativity. The Carers Lead regularly attends team meetings and there is ongoing coaching to support professionals.

The Committee noted the report.

7. AUDIT UPDATE

The Committee considered a report by Chief Financial Officer on audit activity relating to the Integration Joint Board and Health and Social Care Partnership, as well as providing a summary of all open audit recommendations.

The Chief Financial Officer highlighted that since the last report in November 2023, there has been one new audit on emergency payments which made 10 recommendations.

A workshop session with key individuals who support the emergency payments process had taken place where amendments were made to the forms as requested and a number of actions were agreed to ensure the recommendations are fully addressed. Further work is planned to review and streamline the process for section monies.

This workshop session approach will also be used for future refresher sessions and allows a better discussion to ensuring changes are collectively understood and actioned.

The Chief Financial Officer also reported that there has been no new NHS audit activity relating to the HSCP.

She also highlighted that the table at para 14 of the report shows 75 recommendations, 53 of which are considered closed pending verification and 22 remain open.

The Committee agreed to note the report.

8. IJB STRATEGIC RISK REGISTER

The Committee considered a report by the Chief Financial Officer on the IJB Strategic Risk Register.

The Chief Financial Officer confirmed that since the committee last met there have been no new risks added, nor any removed and that the report includes updates where areas of risk have been revised. The changes are detailed in the report at paragraphs 11 through 19. She also drew the Committee's attention to two areas:

- Financial Sustainability remains red, post mitigation reflecting the ongoing challenges we are facing, including financial recovery in the current year.
- The workforce risk score has reduced given the previous staffing difficulties within Mental Health services has improved slightly.

The Chief Financial Officer highlighted that the Strategic Risk Register is continually reviewed and in particular given the challenges set out in the budget report to be considered by the Integration Joint Board, the financial sustainability and workforce risks will be continue to be closely monitored.

Board Members highlighted a discrepancy in the scoring for workforce planning. They also highlighted that they were aware of private GP Practices appearing in the west end of Glasgow and enquired if this was something that the HSCP was noticing in East Renfrewshire. The Chief Officer confirmed the presence of some private activity in the area.

Following discussion, the Committee agreed:-

(a) that the Chief Financial Officer should circulate a note confirming the scoring around workforce planning;

(b) that an update on the Scottish Child Abuse Inquiry should be included under Matters Arising at the next meeting; and

(c) to note the report.

9. CARE AT HOME INSPECTION REPORT

The Committee considered a report by the Head of Adult Services: Communities & Wellbeing which provided an overview of a recent inspection of the Care at Home Service by the Care Inspectorate in January 2024.

Inspectors had visited 40 people using the Care at Home along with some of their friends and family as well as observing practice and daily life, reviewing documents, and speaking with staff and management.

The Service was awarded 3s (adequate) across the four inspection themes:

- How well do we support people's wellbeing?
- How good is our leadership?
- How good is our staff team?
- How well is our care and support planned?

The service also received a grade 4 (good) for one area: People experience compassion, dignity and respect.

The Care Inspector has identified four areas for improvement and meetings have been arranged to develop an Action Plan to address these.

It was highlighted that there were several positive comments about the service, Care at Home staff and the service improvement journey. The Care Inspectorate acknowledged that that the service has already self-identified and are working on the areas they have noted for improvement and that the service is undergoing redesign.

Committee Members highlighted that while the service may be disappointed with the scoring in the report, it demonstrated good progress and lots of hard work when compared to the 2019 Care Inspectorate Report.

Committee Members also commented that should the inspection have been carried out later in the year it would have been a better result. They also thanked staff and management for their continued hard work in improving the service.

The Committee agreed:-

(a) to note the report; and

(b) that the Action Plan to address areas for improvement should be shared once finalised.

10. DATE OF NEXT MEETING

The next meeting of the Integration Joint Board Performance and Audit Committee will be held on Wednesday 26 June at 1.00 p.m.

CHAIR

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