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AGENDA ITEM No.3

Minute of virtual meeting of the East Renfrewshire Integration Joint Board Performance and Audit Committee held at 9.00am on 21 September 2022

PRESENT

Councillor Katie Pragnell, East Renfrewshire Council (Chair)

| Lynsey Allan | Scottish Care |
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| Councillor Caroline Bamforth | East Renfrewshire Council |
| Jacqueline Forbes | NHS Greater Glasgow and Clyde Board |
| Anne Marie Kennedy | Non-voting IJB member |
| Councillor David Macdonald | East Renfrewshire Council co-opted member |
| Anne-Marie Monaghan | NHS Greater Glasgow and Clyde Board |

IN ATTENDANCE

| Liona Allison | Assistant Committee Services Officer (East Renfrewshire Council) |
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| Lesley Bairden | Head of Finance and Resources (Chief Financial Officer) |
| Michelle Blair | Chief Auditor (East Renfrewshire Council) |
| Eamonn Daly | Democratic Services Manager (East Renfrewshire Council) |
| Pamela Gomes | Governance and Compliance Officer |
| Tom Kelly | Head of Adult Services – Learning Disability and Recovery |
| 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 |
| Louisa Yule | Audit Scotland |

DECLARATIONS OF INTEREST

1. There were no declarations of interest intimated.

MINUTE OF PREVIOUS MEETING

2. The committee considered and approved the Minute of the meeting of 22 June 2022.

MATTERS ARISING

3. The committee considered and noted a report by the Chief Officer providing an update on matters arising from discussions that had taken place at the previous meeting.

In relation to performance reporting in respect of Children and Adolescent Mental Health Services (CAMHS) it was reported that as at 21 September 100% of referrals had been seen within the target waiting time of 18 weeks. It was hoped to sustain this level of performance but this would be dependent on retaining staff.

In response to a question from Councillor Pragnell on an increase in the number of young people presenting with eating disorders the Chief Officer indicated that she would need to investigate this further but that it was a national and not a local issue.

The committee noted the report.

ROLLING ACTION LOG

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

The Chief Financial Officer was heard in relation to those actions that remained open. In particular she outlined the steps to be taken regarding reminders being issued to managers and confirmed that in relation to overhead allocations the Council was carrying out a mid-year exercise in the current year. This information could be brought to the seminar on overhead allocations to be arranged.

Responding to Mrs Kennedy who intimated that she had not yet received an invitation to attend the meeting of the short-life working group being set up to look at performance reporting, it was confirmed that this would be issued, and that if there had been a wider problem with the non-receipt of invitations the meeting could be rescheduled.

The committee noted the report.

ANNUAL PERFORMANCE REPORT 2021-22

5. The committee considered a report by the Chief Officer providing details of the performance of the HSCP over 2021-22.

Having referred to the legislation and guidance setting out the prescribed content of a performance report for an integration authority, and also having highlighted the delayed reporting timescales due to COVID-19, the report explained that this was the sixth Annual Performance Report that had been prepared. It was noted that the report was a high-level report principally structured around the priorities set out in the Strategic Plan, and linked to the National Health and Wellbeing Outcomes as well as those for Criminal Justice and Children and Families.

The report explained that the Annual Report, a copy of which accompanied the report, set out how the HSCP had delivered on its vision and commitments over 2021-22, recognising the continuing challenges of the pandemic, its impact on ways of working, and potential disruption to performance trends.

The main elements of the report set out the HSCP's current strategic approach; the response to the pandemic; work to deliver the strategic priorities and meet the challenges of the pandemic over the preceding 12 months; financial performance; and detailed performance information illustrating data trends against key performance indicators.

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The report explained that national performance measures could be grouped into two types of complementary measures; outcome measures and organisational measures. It was noted that outcome measures were based on survey feedback available every two years from a national survey of people taken from a random sample based on GP practice populations, whilst organisational measures were taken from data that was collected across the health and care system for other reasons.

The remaining performance information in the report related to the key local indicators and targets developed to monitor progress against the Interim Strategic Plan 2021-22. These indicators illustrated progress against each of the seven strategic priorities. It was noted that Chapter 4 of the report gave trend data from 2016-17 and used a Red, Amber, Green status key to show whether targets were being met.

Having referred to the continuing impact of the pandemic, and to the performance update provided to the Board in June, the report then listed summary headline performance information across 8 service areas.

The Policy, Planning and Performance Manager was then heard further on the report following which full discussion took place.

Ms Forbes highlighted a number of typographical errors throughout the report and in relation to the chart setting out governance, relationships and links with partners suggested that this should be amended to make clearer the links between the IJB, the health board and the Council. She also reiterated a point made at other meetings regarding the challenge of any changes suggested by the committee being fully reflected on and reported to the Board as both meetings were on the same day.

In reply, officers confirmed that the governance chart would be amended and that the timing of the presentation of the report to the committee could be reviewed.

Officers also responded to questions from Ms Allan on hours of homecare service provided by partner providers and opportunities to discuss funding allocations.

Responding to Councillor Bamforth, the reason for an increase in Women's Aid referrals against a decrease of domestic abuse Request for Assistance referrals was explained.

It was also confirmed that whilst the number of emergency admissions was trending down from the previous year those admitted were remaining in hospital longer due to having more complex needs which required a longer assessment time, with a corresponding increase in delayed discharges.

The committee noted the report.

BONNYTON HOUSE CARE HOME INSPECTION REPORT

6. The committee considered a report by the Chief Officer providing an overview of the most recent inspection by the Care Inspectorate and subsequent report into Bonnyton House. A copy of the Care Inspectorate report accompanied the report as an appendix.

The report outlined the Care Inspectorate's key messages, provided examples of positive feedback from families and highlighted that overall the inspection was positive with grades of "Good" and "Very Good" awarded and no requirements made. This was an improvement on the previous inspection. Across the 5 inspection categories there had been 3 ratings of "Good"

and 2 of "Very Good". Furthermore it was noted that the four recommendations from the previous inspection had been met and no further recommendations were made, however a number of areas for improvement had been identified and an action plan had been put in place.

The Head of Adult Services – Communities and Wellbeing, reminded the committee that Bonnyton House had been decanted during the pandemic and that the improvements that had been delivered had been achieved during particularly difficult times.

Members of the committee having congratulated staff on the report, the Head of Adult Services – Communities and Wellbeing, in response to Ms Monaghan, explained the processes in place to ensure that the service improvements were maintained.

Councillor Macdonald having reminded the committee that at one stage the closure of Bonnyton House had been actively considered, Councillor Bamforth queried if there was any evidence to suggest that families were reluctant to place family members in care homes following the events of the pandemic. In reply the Head of Adult Services – Communities and Wellbeing, suggested that whilst feedback was that people wanted to stay at home where possible, families were now more nervous about family members staying at home rather than in care homes.

The committee noted the report.

INTERNAL AUDIT PLAN 2022-23

7. The committee considered a report by the Chief Auditor, East Renfrewshire Council, providing details of the proposed 2022-23 audit plan, for which approval was sough

The report explained that 15 days had been allocated against the IJB within the ERC Annual Audit Plan. This was considered to be an adequate number of days due to the limited IJB-specific audits to be carried out.

Commenting on the proposed plan, the Chief Auditor explained that it was proposed that most of the allocated days were held in reserve and called upon if required. These could be supplemented if necessary by available contingency time.

Ms Forbes emphasised the importance of any audits carried out by either the Council or NHSGGC with implications for the IJB being presented to the committee, in response to which the Chief Financial Officer explained that the following item on the agenda provided an update on new audit activity relating to the Integration Joint Board since last reported to the Performance and Audit Committee in June 2022, and any new audit activity relating to the Health and Social Care Partnership since last reported to Performance and Audit Committee in June 2022. Notwithstanding she could work with the Chief Auditor to consider if there was a more suitable way to address Ms Forbes' comments.

The committee approved the proposed 2022-23 Audit Plan.

AUDIT UPDATE

8. Under reference to the Minute of the previous meeting (Item 9 refers), the committee considered a report by the Chief Officer providing an update on new audit activity relating to the IJB and HSCP since last reported to the committee in June 2022, and summarising all

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open audit recommendations. Accompanying the report were a series of appendices. These contained information regarding audit activity relating to the IJB and HSCP; and information on recommendations from previous audits. Summary information in relation to the appendices was contained in the report

The Chief Auditor was heard in response to comments from Councillor Pragnell regarding a shortage of auditors and how she would prioritise audits impacting on governance and assurance.

Ms Forbes welcomed the progress that had been made on verification. She suggested that new timescales were required in relation to the open actions associated with the audit into the CareFirst Finance system and that the actions in relation to the audit on emergency payments needed checked.

In reply the Chief Auditor explained that it would be for HSCP staff to provide updated timescales for completing the actions relative to CareFirst and that she would work with staff to agree actions in relation to emergency payments.

The committee noted the report.

POLICY UPDATE

9. Under reference to the Minute of the previous meeting (Item 10 refers), the committee considered a report by the Chief Officer providing details of a number of 6 policies that had been reviewed as part of the ongoing process of reviewing those policies relating specifically to the governance of the IJB. Copies of each of the policies accompanied the report.

The committee noted the report.

IJB STRATEGIC RISK REGISTER UPDATE

10. Under reference to the Minute of the previous meeting (Item 11 refers), the committee considered a report by the Chief Officer providing an update on the Integration Joint Board Strategic Risk Register. A copy of the risk register accompanied the report.

Having set out the risk matrix used to calculate risk scores, the report then referred to the meeting of the committee on 22 June 2022 and explained that since then no new risks had been added; no existing risks had been removed, and no risk scores had changed.

The committee noted the report.

CALENDAR OF MEETINGS

11. The committee considered a report by the Chief Officer with proposed meeting dates for 2023. Ms Forbes having referred to earlier comments about the issues associated with meetings of the committee and the UIJB taking place on the same day, the committee approved the meeting dates.

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DATE OF NEXT MEETING

12. It was reported that the next meeting of the committee would take place on Wednesday 23 November 2022 at 9.00am.

CHAIR