



# **CÙRAM IS SLÀINTE NAN EILEAN SIAR**

## **INTEGRATION JOINT BOARD**

### **AUDIT & RISK COMMITTEE**

Item: 4.1

**MINUTE OF MEETING HELD  
THROUGH MICROSOFT  
TEAMS ON WEDNESDAY 06  
NOVEMBER 2024 AT 10.30AM**

#### **Voting Members Present:**

Susan Thomson	Councillor, CnES/ IJB A&R Committee Chair
Calum Maclean	Councillor, CnES/ IJB Voting Member
Annetta Smith	Non-Executive Director, NHS WI/IJB Voting Member
Naomi MacDonald	Non-Executive Director/ IJB Voting Member
Julia Higginbottom	Non-Executive Director/IJB Voting Member

#### **Non-Voting Members Present:**

Debbie Bozkurt	Chief Finance Officer, IJB
Nick Fayers	Chief Officer, IJB

#### **In Attendance:**

Asif Habeeb	Audit Scotland
Martin Devenney	Audit Scotland
Stephanie Hume	Azets
Gillian McCannon	NHS, Western Isles
Shona Hadwen	Principal Administrator, CnES
Yvonne Maciver	Administrator, CnES



## 1. WELCOME

Susan Thomson took the Chair and led the meeting, welcoming those present.

## 2. APOLOGIES

Apologies were received from Michelle McPhail, Corporate Business Manager, NHS WI.

## 3. DECLARATION OF INTEREST

There were no declarations of interest.

## 4. MINUTES

### 4.1 IJB Audit & Risk Committee Minute of 4 September 2024

The Minute of the IJB Audit & Risk Committee of 4 September 2024 was approved as an accurate note of the discussion.

**Decision:** The Committee formally approved the minute of 4 September 2024.

**Action:** No actions required.

### 4.2 Matters Arising

There were no matters arising.

**Decision:** None.

**Action:** No action required.

### 4.3 Action Points

The Chair invited the Chief Officer to update members on the Action Tracker.

- Action 8.2 of 12/01/22 – regarding the Risk Register. As per meeting of 04/09/24 the draft document remains with NHSWI. The draft Scheme will then be presented to CnES before being presented to the IJB. Now pushed back to the February series of meetings in draft form and will go out to a limited consultation with key strategic partners. Amend deadline on Action Plan to February 2025.

Annetta Smith, Chair of IJB queried the paper heading as it was showing Risk Register whilst the action line referred to Scheme of Integration. Agreement was sought to amend this from the Chair.

**Action:** amend the Paper Heading from Risk Register to Scheme of Integration and amend the deadline date for the action to February 2025.



- Action 5.2.1 as of 14/06/23 – regarding Azets Workforce Management Report. The Chief Officer stated that he was unable to progress this action fully as NHSWI had not provided the required workforce data, despite multiple requests.

**Action: The Chief Officer to meet with Annetta Smith, NHSWI after the meeting to discuss the outstanding requirements. It was agreed that both would feedback to the next meeting of the IJB A&R Committee.**

- Action 7.1 as of 04/09/2024 – regarding the Scheme of Integration. The Chief Officer highlighted this was a duplication of action 8.2 and should be removed from the Action Points.

**Action: Remove item 7.1 from the Action Points as already covered in action 8.2.**

Clarification was sought in terms of the route of the items sitting on the Action Points tracker as it was not clear how actions appeared and what route they take to reach the Audit Committee. The Chief Officer explained the process as follows: initially a paper would go through either the Comhairle committee series and then onto its equivalent in NHSWI – the Corporate Management Team, or vice-versa. Once approved by both organisations, it would then go through the Integrated Corporate Management Team and then dependent on the topic of the paper, it would then either go to the IJB Audit & Risk Committee or through to the Board.

In terms of the Scheme of Integration, this has a specific set of legal requirements. Responsibility for producing the Scheme lies with the two main partners, NHSWI and the Comhairle. The route for this in terms of development is that a draft would be prepared by one partner body, and then shared with the other partner. The draft Scheme is currently being prepared by NHSWI, then it would go to the Comhairle before then going through scrutiny of the legal officer in the Comhairle. Once the draft is finalized, it would then come back to the Board before the next steps of consultation are actioned (as per Action 8.2).

**Decision: It was agreed to note the updates provided.**

**Action: Update the Action Points with the actions detailed above.**

## **5. AUDIT & FINANCIAL GOVERNANCE**

### **5.1 Outstanding Audit Actions**

Stephanie Hume of Azets Internal Auditors submitted a Report detailing the outstanding actions from the Internal Audit Recommendations. Internal Audit undertake annual audits to provide scrutiny and evidence of the working of the IJB, as defined in an annual audit plan. The outstanding recommendations are collated and available for review, advising on how and when the recommendation will be closed provide by sufficient evidence of actions taken.

The IJB Audit and Risk Committee have continuously reviewed the outstanding recommendation action points and at the June meeting it was requested that all outstanding recommendations be closed by September 2024.



The Chief Officer, Nick Fayers, has provided evidence to Azets in support of the closure of recommendations, however it has been noted that even taking the evidence into account, a number of recommendations are still noted as partially complete.

The Report noted that it was for the Committee to discuss the report in detail and to be advised as to what type of evidence would be required by Azets to obtain sufficient evidence to be assured that the action has been completed fully.

The Summary of Outstanding Actions was included at Appendix 1 of the Report.

**Decision:**        **It was agreed to note the Report.**

**Action:**         **No action required.**

#### **5.1.1    Appendix 1 – Internal Audit Recommendation Tracker – Closure of all Recommendations**

The Chief Officer went through the Summary of outstanding actions. During discussion it was noted that although some of the actions were showing as “completed”, they had not been signed off as completed by Azets and therefore the document presented to the Committee, did not accurately reflect the current “state of play”. There was discussion around how this could be fairly reflected on the Summary to show the real position.

Members commented that some had had difficulty in reading the document in the format it was presented in Teams. It was agreed that they needed more time to understand the document and to get assurances behind what was being presented.

The Chief Officer commented that this warranted further discussion with Azets in order to ensure completion of each outstanding action, but that further support was needed from both partner bodies in order to be able to close these off. It was suggested that the future Summary sheet would include an up to date position on each action and also indicate which (if not both) partner bodies needed to respond.

In order to assist, the support of the Chief Financial Officer’s PA was offered to the Chief Officer to enable progress on the outstanding actions to be taken by the next meeting of the committee in February. This offer was welcomed by the Chief Officer. Discussion to take place after the meeting to move this forward.

**Decision:**        **It was agreed to defer further discussion of this document until the next meeting.**

**Action:**         **Chief Officer to liaise with Azets regarding outstanding action status.**  
**Chief Finance Officer to discuss further use of PA to assist in progress of outstanding actions.**



## **5.2 Financial Governance**

### **5.2.1 Chief Finance Officer Update - Verbal**

The Chief Finance Officer, Debbie Bozkurt notified members that the Comhairle were yet to close off their accounts for 2023-24 but that were close to finalizing matters. It was assumed that there would be no surprises in the Comhairle figure.

**Decision:** The verbal update was noted.

**Action:** No action required.

### **5.2.2 IJB Annual Accounts Draft**

The Chief Finance Officer, submitted a Report seeking approval of the draft annual accounts with the management commentary and annual governance statement to go forward to the IJB on 21 November 2024. The draft accounts will then be reviewed by Audit Scotland, the Board's external auditor who will sign off the annual accounts with or without an opinion thereafter.

The Report stated that IJB Annual Accounts are produced under local authority finance regulations. The normal time period for finalizing accounts in draft to the IJB Audit and IJB is June of each year and finalized Accounts by the end of September. Due to the cyber attack on CnES in November 2023, the accounts had been delayed.

The IJB had an in-year overspend of £2.774m, this would be offset by transfer from general, specific and earmarked reserves. Gross income presented in the Annual Accounts showed a reduction of £1.177m in 2023/24 compared to 2022/23. This was due to an increase of monies via NHS of £1.4m, a reduction in the deferred grant relating to the Lewis Residential Care development of £1.569m and a reduction in income from CnES Residential and Independent Care Homes of £0.553m.

The Report went on to detail the main headline figures with full details of all accounts reported in the Appendix to the Report.

The Board were asked to approve the draft annual accounts detailed in Appendix 5.2.2.1.

#### **5.2.2.1 Appendix 1 – Detail Accounts**

Having reviewed the draft accounts presented, Asif Habeeb of Audit Scotland advised the committee that as a result of the Cyber Attack on the Comhairle in November 2023, that is "may" result in an Qualified Opinion on the IJB accounts in 23/24 and 24/25. Although the audit of the accounts had not yet begun, it was noted that this may be the result. Dialogue was ongoing with the Comhairle accountants to try to substantiate the figures provided.

The Chief Financial Officer highlighted a number of areas within the Draft Accounts in particular the cost pressures and lack of funding from the Scottish Government, this put additional pressures on all services. IJBs all over Scotland are in the same position, if not worse, there is not enough funding yet need to continue to deliver statutory services.



Mambers were afforded the opportunity to ask questions. Comment was made about the use of Reserves to ensure a break-even position and also the impact of delayed discharges both in terms of financial cost but also the personal cost and impact this had.

**Decision:** It was agreed to approve the Draft Accounts to go forward to the IJB for final approval before being submitted to Audit Scotland.

**Action:** No further action required.

## **6. PERFORMANCE**

### **6.1 Delayed Discharge & Unmet Need/ Whole System Approach Report**

The Head of Public Health Intelligence, NHS WI, Martin Malcolm, submitted a report which related to previous reports regarding Delayed discharge and Unmet Needs. Appendix 1 to the Report provided an initial system overview of the performance information of relevance to these areas of specific interest. The appendix had been drafted to assist the Corporate Management Team's refinement of a whole system approach to aid future reporting to NHS Board and the IJB. The appendix was subject to refinement through the Corporate Management Team.

The Report stated that as previously reported, Scottish Government had established a weekly Collaborative Response and Assurance Group (CRAG) jointly chaired by the Cabinet Secretary and the COSLA Health and Social Care spokesperson. The aim was to accelerate improvements in local and national delayed discharge system matters and address performance issues. The context was reinforced at the weekly CRAG meetings and through formal communications. The emphasis was on a whole system approach to reducing delayed discharges. A new target had been attributed to all Partnerships – 34.6 delays per 100,000 population (17 years and over). This produces a target for the Western Isles Partnership locally of a maximum of 7 delays. Partnership meetings with Scottish Government colleagues have been utilised to provide detailed briefings on the local system risk and associated mitigating actions being progressed. Appendix 2 provided an overview of the delayed discharge data at the most recent census point.

The Chief Officer noted that following a Multi-Disciplinary Team meeting, an individual will follow one of three paths when medically fit to be discharged:

1. assessed for long-term residential care;
2. assessed for interim placement in a care home until care at home package is available; and
3. assessed for discharge with care at home package in place

Discussion was held around the quantity of information presented in Appendix 1. It was noted that it was proposed to condense the information into meaningful data that focused on an individual's journey through the health and social care system. This should provide information to back up the figures, as in isolation, it was difficult to interpret the data as it was currently presented. The Chief Officer suggested that the next Development Session in February could focus around the whole system approach.



### 6.1.1 Appendix 1 – Whole System Approach

As part of the Scottish Governments renewed focus on the area of 'Discharge without Delay' (DWD) via the Collaborative Response and Assurance Group (CRAG) Health Boards have been set new reduction targets to achieve a maximum of 34.6 delays per 100,00 population. In the Western Isles this would involve delivering a 53% reduction on baseline numbers to reach a maximum of 7 delayed discharges. The appendix provided an initial system overview of the performance information of relevance to these areas of specific interest.

### 6.1.2 Appendix 2 – Delayed Discharge Graphs

The appendix provided an overview of the delayed discharge data at the most recent census point.

**Decision:** The Report and Appendices were noted.

**Action:** Arrange for Development Session in February to include in-depth discussion on the Whole System Approach, data and supporting information.

## 6.2 Performance Report IJB

The Chief Officer, Nick Fayers submitted a Report for discussion in relation to the IJB performance. The IJB are required to report on the National Integration Indicators to the Scottish Government via the Ministerial Strategic Group for Health and Community Care (MSG). These are intended to provide a view of how Partnerships are progressing against a range of whole system level measures. Early notice had been given that Scottish Government were reviewing the indicators and that they were likely to change.

There are six MSG indicators:

- Emergency admissions
- Unscheduled hospital bed days
- A&E performance
- Delayed Discharges
- End of Life Care
- The balance of care across institutional and community services

A description of the data which related to each of the indicators was included in Appendix 1.

### 6.2.1 Appendix 1 – Detailed Performance Report

The Chief Officer submitted for discussion on the IJB Performance Indicators. The Report stated that the IJB was required to report on the National Integration Indicators to Scottish Government via the Ministerial Strategic Group for Health and Community Care (MSG). These were intended to provide a view of how Partnerships were progressing against a range of whole system level measures. Early notice had been given that Scottish Government were reviewing the indicators and that they were likely to change.



Currently there are six MSG indicators:

1. Emergency admissions
2. Unscheduled hospital bed days
3. A&E performance
4. Delayed discharges
5. End of life care
6. The balance of care across institutional and community services

A description of the data which related to the indicators was included at Appendix 1 of the Report. Currently the IJB receives a performance report which provides data on five of the six indicators as indicator six is under development nationally.

The Report provided a status report for May 2024 and additional trend analysis for each of the indicators over the period January 2018 – 2024. Overall, the indicators provided a limited indicator of the overall health of the population of the Western Isles.

In discussion it was noted that it would be beneficial to have a trend summary alongside the document. The report is presented each quarter so quarterly trends would be available. The year on year trends are currently available in the body of the Report. The Chief Officer suggested that further reports could include a column to show which way the trend was progressing (improving/deteriorating) with an explanation as to why this may be the case.

**Decision:**        **The Report was noted.**

**Action:**        **The Chief Officer to modify the Report to include trend summary together with commentary as to why trend is either improving or declining.**

## **7. STRATEGIC GOVERNANCE**

### **7.1 Annual Self-Assessment of the A&R Committee**

The Corporate Business Manager, NHSWI, Michelle McPhail submitted a report for discussion in relation to a self-assessment evaluation of the IJB Audit & Risk Committee. The Report stated that at the IJB Audit & Risk Committee of 5 June 2024, the Internal Audit report on Corporate Governance was presented and from this a request to undertake a self-assessment was required.

The Self-Assessment was provided at Appendix 1 and it denoted the IJB Audit & Risk Committee self-assessment collated response. Members were asked to discuss and consider the proposed actions and to establish other appropriate actions necessary to be undertaken.

In discussion it was noted that some members were new to the IJB Audit & Risk Committee and didn't have a full understanding of the workings of the Committee, they therefore felt unable to participate in the self-assessment process. It was also noted that other, more experienced members of the Committee did not fully understand what was being asked of them. It was noted therefore that, based on members comments, the results of the self-assessment and the proposed actions be reviewed as it was not based on accurate understanding of process.



Further discussion highlighted the need for an induction and awareness session on the function and remit of the audit committee. Stephanie Hume (SH) of Azets agreed that this was something that they could support with and would be happy to discuss further in terms of training and support required. It was noted that the template used was from the Audit and Assurance Committee handbook for Public Sector Organisations. SH agreed to send link to handbook to members for information. SH also agreed to discuss with Shetland NHS about members of the committee joining a training session to be held in the next week.

#### **7.1.1 Appendix 1 – Collective Response & Proposed Actions**

Members agreed that the responses in their current form should be used as a learning tool. All members agreed that an in depth induction and awareness session on the roles and responsibilities of a member of the Audit Committee was required. It was also agreed that a separate one hour session should be organized – after the next audit committee – to discuss the self-assessment questions and answers and gain a better understanding of the requirements of the role on the audit committee.

**Decision:** It was agreed by members to note the Report.

**Action:** Arrange for an in depth Induction for any members of the Audit Committee to attend and arrange a separate one hour session to review the questions and answers of the Self-Assessment.

#### **7.2 Strategic Framework – Revised Mission Statement**

The Chief Officer submitted a Report for awareness on the Revised Mission Statement. The Western Isles IJB is a commissioning body that was created in 2015. It works in close partnership with communities and its delivery partners, and commissions within its financial framework.

A Strategic Framework covering the period 2024-2027 has been developed to guide how the Integrated Joint Board approaches population health challenges and in turn informs the annual cycle commissioning planning. It is designed deliberately with a degree of flexibility in response to the dynamic changes in population health.

On reviewing the Strategic Framework In June 2024, the Board approved the Framework in principle noting a revision to the Mission Statement. The revised Mission Statement was included on page 12 of Appendix 1.

##### **7.2.1 Appendix 1 – Strategic Framework**

The draft Strategic Framework had undergone public consultation and has been subject to an EQIA report previously prepared by the IJB.

Revised Mission Statement:

Our Mission is “To work with individuals and communities to enable people of the Western Isles to live well, using our collective resource effectively. We will transform services to ensure these are safe, timely, effective, high-quality and person-centred based on achieving positive personal outcomes.”



**Decision:** The Committee agreed to note the revised Mission Statement and the context and purpose of the Strategic Framework.

**Action:** Forward decision to IJB Meeting for approval.

## 8. BOARD GOVERNANCE

### 8.1 Draft Meeting Schedule 2025

The Corporate Business Manager, NHSWI, Michelle McPhail submitted a Report for approval of the Integration Joint Board Timetable 2025.

In reviewing the draft schedule of meetings, congruence was taken to the proposed partner body meetings of CnES and Western Isles Health Board. An amended paper had been submitted to the Committee for their approval.

**Decision:** It was agreed to approve the amended timetable of meeting dates.

**Action:** Schedule meetings as per the amended timetable.

## 9. EVALUATION

	YES	NO	COMMENTS
Were you satisfied with the content of the agenda?	X		
Was there sufficient time to review the papers between receipt and the meeting date?	X		Documents issued by deadline but some members reported difficulty reviewing documentation in Teams Channel.
Were the agenda items placed in the correct order/ prioritization?	X		
Was there sufficient time allocated to all agenda items?	X		
Were the Executive Summaries an accurate reflection of the detailed paper?	X		
Was there sufficient refreshment breaks?	X		
Are there any significant issues which should be escalated?		X	
Did you consider that the Board/ Committee discharged its duty in respect of:	X		



<ul style="list-style-type: none"><li>• Proper Scrutiny</li><li>• Relevant questioning</li><li>• Constructive challenging</li></ul>			
Do you have any suggestions for improvement or additional comments about this meeting?			Comments should be made to Michelle McPhail.

**10. DATE OF NEXT MEETING**

**The next meeting of the IJB Audit & Risk Committee will be held on Wednesday 11 February 2025 at 10.00am.**