



**Stephen Brown (Chief Officer)**  
Orkney Health and Social Care Partnership  
01856873535 extension: 2601  
[OHACfeedback@orkney.gov.uk](mailto:OHACfeedback@orkney.gov.uk)

Agenda Item: 3

## **IJB Performance and Audit Committee**

Wednesday, 26 June 2024, 10:30.

Council Chamber, Council Offices, School Place, Kirkwall.

### **Minute**

#### **Present**

- Rona Gold, Non-Executive Director, NHS Orkney (via Microsoft Teams).
- Joanna Kenny, Non-Executive Director, NHS Orkney.
- Councillor Jean E Stevenson, Orkney Islands Council.
- Councillor P Lindsay Hall, Orkney Islands Council.

#### **Clerk**

- Sandra Craigie, Committees Officer, Orkney Islands Council.

#### **In Attendance**

##### **Orkney Health and Social Care Partnership:**

- Stephen Brown, Chief Officer, Integration Joint Board.
- Shaun Hourston-Wells, Acting Strategic Planning Lead.
- Darren Morrow, Head of Children, Families and Justice Services and Chief Social Work Officer (via Microsoft Teams).

##### **Orkney Islands Council:**

- Erik Knight, Head of Finance (for Items 1 to 6).
- Andrew Paterson, Chief Internal Auditor.
- Georgette Herd, Solicitor.
- Kirsty Groundwater, Communications Team Leader.

##### **KPMG:**

- Matthew Moore, Senior Manager (via Microsoft Teams).

## **Not Present:**

- Ryan McLaughlin, Staff-side Representative, NHS Orkney.

## **Chair**

- Joanna Kenny, Non-Executive Director, NHS Orkney.

### **1. Apologies**

Apologies for absence had been intimated on behalf of Lynda Bradford, Head of Health and Community Care, John Daniels, Head of Primary Care Services, Morven Gemmill, Associate Director of Allied Health Professions, Jim Love, Carer Representative, Taiye Sanwo, Interim Chief Finance Officer and Samantha Thomas, Director of Nursing, Midwifery, AHPs and Chief Officer Acute, NHS Orkney.

### **2. Declarations of Interest**

There were no declarations of interest intimated in respect of items of business to be discussed at this meeting.

### **3. Minute of Previous Meeting**

There had been previously circulated the draft Minute of the Meeting of the Performance and Audit Committee held on 13 March 2024 for consideration, checking for accuracy and approval.

The Minute was **approved** as a true record, on the motion of Councillor Jean E Stevenson seconded by Joanna Kenny.

### **4. Matters Arising**

There had been previously circulated the Matters Arising Log from the meeting held on 13 March 2024, for consideration and to enable the Committee to seek assurance on progress, actions due and to consider corrective action, where required.

Stephen Brown updated members regarding the Adoption Allowances and Kinship Payments and confirmed that there had been a delay with presenting the report to the April Policy and Resources Committee meeting. He confirmed that Darren Morrow was now working on the report, which would be presented to the September meeting of the Policy and Resources Committee.

Regarding Item 2 on the Matters Arising Log, Stephen Bown confirmed that the report on Governance Arrangements for Inspection Reports was on the agenda for this meeting.

### **5. External Audit – Annual Audit Plan**

There had previously been circulated a report presenting the External Audit Annual Audit Plan, for approval.

In the absence of the Interim Chief Finance Officer, Erik Knight, Head of Finance, Orkney Islands Council, informed members that this was the second year of a five-year period of KPMG's appointment as external auditors. Referring to the external audit plan for 2023/24, attached as Appendix 1 to the report, he highlighted:

- Page 4 which provided an illustration of the materiality levels that were to be applied during the audit.
- Page 5 which detailed the significant audit risks.
- Page 9 which provided a pictorial schedule concluding with the audit report in September.
- Pages 10-16 which detailed the wider scope that was to be covered during the audit.
- Page 21 which detailed the total audit fee of £33,360. He confirmed that the fee was up by 6% from the previous year which was in line with the Accounts Commission increased audit fees for councils and IJBs.

Councillor P Lindsay Hall queried whether the delay of the External Audit Annual Plan from March to June would have any bearing on the timely presentation of the actual audit. Matthew Moore, Senior Manager, KPMG, explained that the main reason for the delay of the plan from March was due to the fact the IJB did not have a Chief Finance Officer in post for a time. He confirmed that work had been ongoing in the background but KPMG had needed to meet with the new Chief Finance Officer to go over plan. He confirmed that as long as the Council and NHS audits went in line, he could see no reason why the deadline of September could not be met.

Following a further comment from Councillor P Lindsay Hall regarding slippage of audits last year, Matthew Moore confirmed that the first year issues across the Council and NHS audits had had an impact on the delivery of the IJB audit but felt that KPMG were in a better position this year to meet all of the deadlines.

Following a query from Rona Gold, Matthew Moore confirmed that the date on the first page of the External Audit Annual Plan should read 26 June 2024, rather than 26 June 2023.

Regarding a further query from Rona Gold about what was meant by accessing controls in place for the identification of related party relations and test the completeness of the related parties identified, detailed on page 7 of the report, Matthew Moore gave an example that each organisation would have a number of related party relationships. For example, the IJB was a joint arrangement between NHS Orkney and the Council so therefore the Council and NHS Orkney were related parties. Within an organisation such as that, there was the Board and Committees which comprised individuals such as Councillors and Non-Executive Directors. If the individuals had relationships wider than the Council, NHS Orkney or the IJB, for example, if the individuals had their own business that could then be a related party should the business be working with the Council, NHS Orkney or the IJB. He continued that those were the sort of related party relations that were explored. The control and the process which may be used was each Councillor and Non-Executive Director would have completed a disclosure of related parties to their respective bodies so these arrangements were reviewed to make sure they were disclosed properly within the set of accounts.

Rona Gold queried the scope of the National Risk Assessment detailed on page 11, as it stated that there were no such risks specified which she did not think was the case. Matthew Moore confirmed that the scope of the audit was what the Code of Audit Practice on Accounting for Local Authorities allowed and what Audit Scotland dictated to the auditors as the national risks. Each year Audit Scotland presented in the planning documents a number of risks that they wanted specifically investigated. What was meant on page 11 of the document was that for IJBs in 2023/24 there was nothing additional specified in the Audit Scotland guidance for wider scope work.

Joanna Kenny thanked Matthew Moore for his thorough explanation.

The Performance and Audit Committee thereafter noted the indicative external audit plan for 2023/24, prepared by KPMG, attached as Appendix 1 to the report by the Interim Chief Finance Officer.

## **6. Draft Annual Accounts**

There had previously been circulated a report presenting the draft Annual Accounts, for approval.

In the absence of the Interim Chief Finance Officer, Erik Knight, Head of Finance, Orkney Islands Council, presented the draft Annual Accounts for the financial year up to 31 March 2024 which were required to be presented to the auditors by 30 June each year. He noted that as well as seeking approval of the draft Annual Accounts, the report was also seeking approval of the draft Annual Governance Statement, which was detailed on pages 31 to 37 of the draft Annual Accounts. Referring to the draft Annual Accounts which were attached as Appendix 1, he highlighted the following:

- The background detail in the Management Commentary on pages 3 to 27.
- Pages 39 and 40 detailing the comprehensive income and expenditure statement which showed a deficit of £5.6 million for the year to 31 March 2024, with the balance sheet reflecting earmarked reserve balances of £2.7 million.

He thereafter opened for questions noting the limitations that he had not prepared the accounts nor were any NHS financial officers present to answer questions from the NHS side but would answer any questions to the best of his ability.

Joanna Kenny was mindful that at the IJB meeting, which had taken place the previous week, there had been a number of questions raised regarding the NHS side of the accounts and she was unsure whether any of the points raised had been answered.

Stephen Brown, Chief Officer, confirmed that he had spoken to Paul Corlass, Interim Recovery Director, Veridian, NHS Orkney, and had been assured that Paul Corlass had now responded to Taiye Sanwo, Interim Chief Finance Officer, regarding some of the questions which had been raised and that the final accounts would reflect those responses.

Councillor P Lindsay Hall highlighted the date on page 3 of the draft Annual Accounts, under management commentary was wrong as it stated that Joanna Kenny had been a Proxy until 13/12/24 and a Voting Member from 14/12/23, the first date should read 13/12/23. He further commented that under the management commentary there was no mention of proxies from the Council side who he thought should be listed somewhere within the table.

Rona Gold highlighted the date on the covering report at paragraphs 2.2 and 3.3 which should read 31 March 2024, not 31 March 2023. She further highlighted that on page 5 of the draft Annual Accounts under the section Purpose and Objectives, the last paragraph stated that there had been a population increase of 100 compared to the previous year. She continued that while there was mention of demographic change there was no mention of what the impact was and where within the IJB services the impact would be impacting. While she was not looking for an answer to her query at the moment, she did feel that for future financial reports it would be helpful if when statements were made about impacts occurring that the impact was explained. Erik Knight confirmed that he would feed back her query to the Interim Chief Finance Officer.

Rona Gold queried whether the paragraph on page 6 immediately below the diagram should, in fact, be a recommendation of the Committee and subsequently tracked, Stephen Brown confirmed that she had raised a good point but wondered whether the paragraph had been lifted from the previous year's annual accounts. He confirmed that as the work had been done in relation to bringing forward and making the action plan as SMART as possible, he therefore suggested, and all members agreed, that the paragraph be removed prior to submitting the final Annual Accounts.

Following a further query from Rona Gold as to whether the Social Work and Social Care Governance Board which had been established should be referenced under the Strategic Plan section on page 5 as a further bullet point, Stephen Brown confirmed that reference could be included.

Referring to page 32 of the draft Annual Accounts, Governance Principle D, Rona Gold queried whether the Strategic Planning Group determined the interventions that were necessary to achieve the intended outcomes. She stated that she would feel more comfortable if, at that section, it referred to the operational parts of the governance system that fed into the Joint Clinical and Care Governance Committee as they would be the parts which would look at the optimised outcomes and provide assurance.

Stephen Brown confirmed that the wording of the first sentence regarding the role of the Strategic Planning Group did need to be strengthened as the Strategic Planning Group was the driver for determining what interventions were required and the recommendations then referred to the IJB. He felt it was important to keep in place the wording around the responsibility of the Joint Clinical and Care Governance Committee and the Performance and Audit Committee.

Following a comment from Rona Gold regarding whether some further wording should be added to Governance Principle F section regarding the Joint Clinical and Care Governance Committee and its role to the IJB regarding risks, Stephen Brown confirmed that he would liaise with Rona Gold and work on a form of wording to be added.

Councillor Jean E Stevenson referred to page 13 of the Annual Report and commented that the figures were still for 2022/23. She further commented that it would be helpful if rather than the figures given per 100,000 persons, given that Orkney had a population of 22,000 were those figures available. Stephen Brown commented that it may be possible to present the figures in that way but it may be more difficult for staff. However, it could be investigated for potential use in future reports.

The Performance and Audit Committee thereafter noted:

**6.1.** That, as Integration Joint Boards (IJBs) were specified in legislation as “section 106” bodies in terms of the Local Government (Scotland) Act 1973, consequently they were expected to prepare their financial statements in compliance with the Code of Practice on Accounting for Local Authorities in the United Kingdom.

**6.2.** The Management Commentary, comprising pages 3 to 25 of the draft Annual Accounts, attached as Appendix 1 to the report by the Interim Chief Finance Officer, which provided an overview of the most significant matters reported in the Annual Accounts for financial year ended 31 March 2024.

**6.3.** The draft Annual Governance Statement, comprising pages 31 to 37 of the draft Annual Accounts, attached as Appendix 1 to the report by the Interim Chief Finance Officer.

The Performance and Audit Committee thereafter scrutinised and **resolved**:

**6.4.** That, subject to the points raised during the meeting being incorporated, amended or deleted as appropriate, the draft Annual Governance Statement and draft Annual Accounts for financial year 2023/24, attached as Appendix 1 to the report by the Interim Chief Finance Officer, be approved.

## **7. Strategic Plan Priorities – Progress Report**

There had previously been circulated a report presenting an update on progress made against the priorities of the Strategic Plan, associated milestones and actions, for scrutiny.

Shaun Hourston-Wells, Acting Strategic Planning Lead, presented the second quarterly update where officers advised on progress made against three of the six Strategic Priorities. The three Strategic Priorities included in this update were:

- Mental Health.
- Supporting Older People to Stay in their Own Homes.
- Supporting Unpaid Carers.

He continued that a tracker had been developed to monitor performance against each Strategic Priority, along with its associated Milestones and Measures, attached as Appendix 1 to the report. Whilst there were no risk implications arising directly from this report, there was the risk that failure to progress the actions detailed in Appendix 1 could result in the inability to deliver the Strategic Priorities identified in the Strategic Plan 2022-2025. He advised that, on 19 June 2024, when discussing the partnership’s Annual Performance Report, the Integration Joint Board had suggested that some of the RAG ratings contained within the tracker be amended, as follows:

- On Page 1, Mental Health – the status of Establish a Psychiatric Liaison Service and Deliver a Reduction in the Overall Patient Impact as a Result of Staffing the Mental Health Transfer Bed priority marked as Amber should be amended to Red.
- On Page 4, Early Intervention and Prevention – the status of Embed a New Neuro-Development Assessment Pathway priority marked as Green should be amended to Amber.

Councillor P Lindsay Hall queried the status of the Develop a Suicide Prevention Plan milestone and whether it should be amended from Green to Amber as he felt that progressing a prevention plan was not getting to the heart of the matter. Shaun Hourston-Wells advised members that the officers who had updated that section felt it was on track, but he would take away the suggestion for further consideration.

Stephen Brown advised that, as part of a national strategy, there was an expectation that all localities across Scotland have a local Suicide Prevention Plan. As Chair of the Suicide Prevention Taskforce, he did envisage the status changing to Amber the next time the report was presented, as the Plan had not yet been published but confirmed that a lot of work had taken place with Public Health Scotland and a Plan had been drafted, with the next stage to work with individuals locally who had been affected by suicide to have their input on the draft Plan.

Darren Morrow, Head of Children, Families and Justice Services and Chief Social Work Officer, indicated that he had been a stakeholder on the Suicide Prevention Taskforce for approximately one year and offered assurance that he was confident that the Suicide Prevention Plan was coming to a stage where in the very near future it would be ready to be published as there had been a lot of intensive work done on it behind the scenes.

Councillor P Lindsay Hall raised an issue that he had found the tracker difficult to read due to the blocks of colour in the status column and felt it would be easier if the status just had a dot of colour rather than the text being on top of colour. He also queried what the purple block of colour down the left-hand side indicated.

Shaun Hourston-Wells informed members that the colour of the priorities down the left-hand side of the tracker related to the corresponding colours within the Strategic Plan. Following further discussion regarding the style of report for the next update, it was agreed to leave the colours down the left-hand side but rather than a block of colour for the status, the colour should be around the edge of the box instead.

Following a query from Councillor Jean E Stevenson, Shaun Hourston-Wells confirmed that the milestones within the Support for Unpaid Carers priority related to all unpaid carers, which included young carers. He continued that when the Strategic Plan was due to be renewed in April 2025 it was hoped to include some elements which were specific to young carers. He continued that himself and a representative from Crossroads were currently working on developing a brief strategy which was specific to young carers to address the issues that affected young carers which differed from that of adult carers.

Darren Morrow offered assurance that as he was new into the post of Head of Children, Families and Justice Services, young carers was an area of focus for him. He continued that the area was different to adult carers with additional considerations and hoped to provide updates and feedback as to what the demographics looked like in an Orkney context in the future and what support strategies were in place.

Following a query from Councillor Jean E Stevenson, Shaun Hourston-Wells explained that target figures regarding the number of unpaid carers contacting Crossroads Care Orkney had deliberately not been included in the table as when the information had first been collated, officers had not been clear on how many could be expected. He continued that he would expect the figure to be around 120-130.

Councillor Jean E Stevenson queried why Crossroads Care Orkney was the only organisation to be included in the figures giving support to unpaid carers, as there would be more support given from other organisations than the figures shown indicated. Shaun Hourston-Wells confirmed that, while he was aware that support was given by other organisations, Crossroads was the only organisation that had been commissioned by the local authority to deliver carer support services.

Councillor Jean E Stevenson further commented that one of the problems was in the term “unpaid carer” as a lot of individuals did not identify as “unpaid” carers but rather as “carers”. Shaun Hourston-Wells commented that the issue had been raised a lot by individuals, not just locally but across the country. He continued that many individuals wanted to be called “carers” which, unfortunately, was the terminology used for someone in a paid position. He was unsure what the solution to this issue would be.

Joanna Kenny wondered whether it would be possible to gather the data from wider partners, such as Age Scotland Orkney, as to the numbers that were contacting them for support as it would be interesting to find out the numbers from other organisations. This should include organisations that Young Carers would contact for support.

Rona Gold commented that her overall observation when looking at the three areas presented was that there had been really good work which was progressing well. She further commented that to her, from the information presented, mental health performance was impacted by finance and resources and requested that was noted for the record. Regarding supporting older people to stay at home section, she felt it was clear from the information provided that this was an area where extensive work was happening and that there was very good performance against some potentially high-risk areas. She suggested that in order to know how this area was performing and where the risks were, particularly around Telecare, it would be really useful to enable the Committee to do their role if there were SMART targets.

Regarding unpaid carers, Rona Gold further queried that, given there had been strategies and events to understand what needed to be done in order to perform better, when could the Committee expect to see those actions coming forward with SMART targets. If that question could not be answered, she was seeking assurance that the Committee would see SMART targets coming forward in future reports.

Stephen Brown agreed that there were a lot of positives in the report and that the work of staff should be recognised. Regarding supporting older people, he highlighted the challenges that had been faced in that section regarding recruitment, gaps that teams had to manage over lengthy periods and commended the section for being able to perform in the way it had which was testament to all teams. Regarding setting targets for Telecare, he clarified that three months ago the target would have been that everyone would have moved to digital set up by December 2025. However, that date had been extended nationally to January 2027 and agreed that perhaps the new target date should be specified in the report.



Regarding Rona Gold's query on actions, Stephen Brown clarified that the actions were reviewed on an annual basis via the Strategic Planning Group to ensure that they were still relevant. He anticipated that there would be a new suite of actions that would be coming through from that group in the next 6-12 months.

Joanna Kenny commented that the report was a very useful live document, which represented the excellent and innovative work that was happening and added her thanks to the teams involved.

Referring to the first milestone under the mental health priority, Councillor P Lindsay Hall commented that it would be better if the narrative was "develop and implement a Suicide Prevention Plan" rather than the wording which was there. Only once a plan had been implemented or there had been some form of delivery, could the action be marked as complete.

Joanna Kenny commented that there was the difficult balance of the Committee ensuring that the work was being done in a timely fashion without knowing all the detail. She took on board Councillor Hall's point and commented that it would be good if future reports could give a bit more information but without getting into the nuts and bolts of everything.

Shaun Hourston-Wells agreed that there was no reason why some of the targets could not be amended and would add SMART targets where possible.

The Performance and Audit Committee thereafter noted:

**7.1.** That, in order to ensure an update on progress was provided biannually in respect of each Strategic Priority, an update on three of the six priorities was presented every quarter to the Performance and Audit Committee.

The Performance and Audit Committee thereafter scrutinised:

**7.2.** Progress made against the three Strategic Priorities, as outlined at section 4.3 of the report and detailed in the Strategic Plan Delivery Tracker, attached as Appendix 1 to the report by the Chief Officer, Integration Joint Board, and obtained assurance that those priorities were being progressed and delivered.

## **8. Registered Services within Orkney Health and Care**

### **Inspection Assurance Report**

There had previously been circulated a report presenting details of inspection activities for registered services within the Orkney Health and Social Care Partnership for the period November 2023 to April 2024, for scrutiny.

Stephen Brown, Chief Officer, Integration Joint Board, presented the six-monthly update on registered services that had received inspections from the Care Inspectorate. He highlighted section 4 of the report which gave a summary of all inspection gradings and sections 5 to 16 which detailed each inspection. He further highlighted that members would be aware that due to the pandemic, there had been a hiatus with annual inspections which had only recommenced in the last couple of years. He continued that it was important that the Performance and Audit Committee had an opportunity to review the progress and issues which had been raised.

Following a query from Councillor P Lindsay Hall regarding fostering and adoption services, Stephen Brown confirmed that progress had been made. He continued that there had been four areas inspected but it was important to recognise that within those four areas there were 21 factors which were scored. Of the 21 factors, there had been no improvement in 7 factors, with 14 areas improving. He confirmed that an area which had been raised by the Care Inspectorate was that recruitment for foster carers had not taken place for some time but confirmed work was ongoing to enable a recruitment campaign to be launched in due course.

Darren Morrow confirmed that, following the 2023 inspection, the overarching trend was that of improvement for the majority, with a few areas improving by two grades. This showed progress but he would like to see equivalent results more consistently across all of the domains. There were active improvement plans against each of the inspections in fostering, adoption, adult support and adult placement services which were regularly being reviewed and he was confident that they were getting where they needed to be in those areas.

Following a query from Rona Gold regarding where the interventions referred to in the last bullet point of section 6.3 came from, Stephen Brown confirmed that the action point identified by the Care Inspectorate was at practitioner level, it was about social workers working with families and the young people to identify risks and put in place appropriate mitigations. He confirmed that work was underway to develop the risk templates to be used to ensure consistency. He further confirmed that senior management would be looking at all cases to see if there were service gaps, for example, was there something that did not meet the needs of a number of people and at that point it would be escalated to the Social Work and Social Care Governance Board and the Strategic Planning Group to highlight the issue.

Darren Morrow confirmed that the need for improvements had been identified in respect of risk assessment and confirmed that the social work team were reviewing the risk assessment template to ensure that it was robust and covered all areas. He further confirmed that the Social Work and Social Care Governance Board, which he Chaired, would actively review the improvement plans and, as risk was one of the identified areas, provide evidence that the Board were happy with the updated templates as well as evidence that adopted children, young people and families felt that risks were being well managed and that children were receiving the support needed post adoption.

Referring to sections 6.6 and 6.7, Rona Gold queried, in terms of governance, where the remaining requirements should report to. Darren Morrow stated that, at the end of each inspection, a designated improvement plan with SMART targets was produced. The reporting mechanism was that those targets were then tracked and mapped initially within the teams operationally and then via the Social Work and Social Care Governance Board to ensure the impact was being evidenced. It then fed into the Joint Clinical and Care Governance Committee and then to the Integration Joint Board. He continued that within the report presented today, as much as it gave an overview, he would like to enhance the report for this Committee to give more detail of the progress against the improvement plan was being evidenced.

Referring to the Summary of Inspections table, Joanna Kenny commented that there was great leadership happening and queried whether there was a way that the good leaders could support the inexperienced leaders across the service. Stephen Brown gave assurance that, where possible, mentoring between experienced and inexperienced leaders took place.

The Performance and Audit Committee thereafter scrutinised the inspection activity for registered services within Orkney Health and Care, for the period 1 November 2023 to 1 May 2024, as detailed in sections 4 to 15 of the report by the Chief Officer, and obtained assurance that, where required, action plans had been submitted to the Care Inspectorate and were being progressed where appropriate.

## **9. Governance Arrangements for Inspection Reports**

There had previously been circulated a report advising members of the governance arrangements for all inspection reports for services delegated to the Integration Joint Board, for information.

Stephen Brown, Chief Officer, advised members that the report outlined the current governance arrangements for external inspection reports for services delegated to the Integration Joint Board. He referred to sections 3, 4 and 5 of the report which outlined the arrangements of where each report would go for visibility. He continued that governance arrangements were continuing to be developed and that there was still work to do.

Following a query from Rona Gold regarding partner forums coming together to solve problems prior to it coming to committee for assurance, Stephen Brown gave an example in relation to Children Services, that there was a Children Services Strategic Partnership which involved all of the key partners and below that group there were a number of Sub Groups, which had representatives from education, children services, police services and the third sector, which was where issues were collectively addressed. He gave further assurance that all the sub groups were in place and fed into the Strategic Partnership which ultimately fed into the Community Planning Partnership and the Orkney Partnership Board.

Not knowing the background request for the report, Rona Gold was happy to note its contents but, noting from what Stephen Brown had said, felt there was something missing. She continued that she was not assured that there were innovation groups or similar for creating ideas to make change that were joined up in the system and queried whether a report could come back that could answer this. To clarify her query she asked how could the Committee get a better understanding of the governance system so the Committee could hold that to account in terms of the assurance rather than the action reports themselves.

Stephen Brown confirmed the background for the report was very specific and was about the Integration Joint Board and where the Performance and Audit Committee sat in connection with all the inspections that took place. The report was not extended beyond that as he felt there were decisions still to be taken on how to manage some of what was described in terms of the governance arrangements. He did not think that the Community Planning Partnership was used to its full advantage giving an example of when developing the Children's Services Strategic Plan it was developed by 6 or 7 different Committees and Boards and it was very often the same 6 or 7 people sitting round the table.

He continued that perhaps it was time to be bold and if, for example, it was a plan that required all community planning partners to play a part in, the sign off should be entrusted to the Community Planning Partnership. He concluded that there was still a lot of discussion and work that needed to be done before a report answering the query raised by Rona Gold could be brought back to Committee but gave assurance that discussions were ongoing, particularly around the wider community planning sphere.

Rona Gold informed members that she was a Community Planning Manager for a local authority in Scotland and stated that it was not necessarily within the legislative remit of the Community Planning Partnership to deliver some of what was being seen here as that would need to be agreed. She continued that from her understanding of what had been said there was wider partner input that was required to support the development of actions in order to support the improvement of inspections results in future. She was very conscious that when things go to a Joint Clinical and Care Governance Committee as was stated in the report, that was not an operational space in which people could give their ideas for improvements and while going into a wider partner space was important, she also understood that from the Council and NHS Orkney there would be operational groups to look at matters such as efficiency and innovation that supported either improvements to the organisation or financial efficiencies and wondered if those strands of important improvements could be outlined so that it was clear that all spheres had been explored before it came into an assurance space.

Darron Morrow responded that he had Chaired the Social Work and Social Care Governance Board recently and had raised the same point. There had been a real acknowledgement that it would be helpful to bring to the next meeting of the Social Work and Social Care Governance Board clarity on all the different forums and Sub-committees that were in place, to review the Terms of Reference to enable clarity of where the accountability for certain matters belonged, and to avoid duplication by aligning strategic plans that had similar priorities. This in turn would then help when it came to higher assurance levels, such as the Performance and Audit Committee, by having information that was mapped and tracked and therefore perhaps providing more confidence in the information presented.

Joanna Kenny stated that she thought a map type document would be really useful and stated that she would be interested to hear more about the report after it had been discussed at the Social Work and Social Care Governance Board.

Councillor Jean E Stevenson commented that an organogram to see where all the different threads came together would be very useful and it would be good to get an overall view of what exactly was feeding into what.

Stephen Brown confirmed that he would take on board the comments made and take it away to think how best to illustrate the governance, on what would be a large document.

The Performance and Audit Committee thereafter noted:

**9.1.** That national regulatory and/or external scrutiny agencies, such as the Care Inspectorate and the Mental Welfare Commission, regularly inspected services to ensure a focus was maintained on continuous improvement.

**9.2.** The governance arrangements for all inspection reports for services delegated to the Integration Joint Board as details in sections 4 to 6 of the report by the Chief Officer.

## **10. Internal Audit of External Communications and Engagement**

There had previously been circulated a report presenting the External Communications and Engagement Audit Report, for scrutiny.

Andrew Paterson, Chief Internal Auditor, highlighted that this was an audit contained in the internal audit plan and advised members:

- That communication and engagement work was undertaken on behalf of the IJB by the relevant communications team within NHS Orkney and the Council.
- That generally the NHS Orkney team dealt with communications around health and the Council team handled communications around social care.
- That the objective of the audit was to review the procedure and controls around external communications, including planning, delivery and monitoring.
- That the Audit provided substantial assurance that the processes and procedures relating to external communications were well controlled and managed.
- That several areas of good practice had been identified which were detailed in the executive summary of the Internal Audit, attached as Appendix 1.
- That the report included one medium priority recommendation relating to quality checks and authorisation of communications and one low priority recommendation which related to the use of social media platforms.
- That both recommendations related to the work of the Council's communication team.
- That there were no high-level recommendations made as a result of the audit.

Stephen Brown thanked Andrew Paterson and his team for the report which was very helpful and acknowledged the work of both organisation's communications teams and thanked them for the work that they did. He continued that it was satisfying to receive an audit report that gave substantial assurance.

Commenting on the influence that social media had, Joanna Kenny acknowledged the importance of the quality work from both communications teams.

The Performance and Audit Committee thereafter scrutinised the findings contained in the internal audit report, attached as Appendix 1 to the report by the Chief Internal Auditor, reviewing the procedures and controls around external communication and engagement for the Integration Joint Board and obtained assurance that action had been taken or agreed where necessary.

## **11. Internal Audit Annual Report and Opinion**

There had previously been circulated a report presenting the Internal Audit Report and Opinion for 2023/24, for scrutiny and assurance.

Andrew Paterson, Chief Internal Auditor, advised members:

- That, in order to comply with the Public Sector Internal Audit Standards, internal audit had a duty to provide an annual assurance report on the overall adequacies and effectiveness of the framework of governance, risk management and internal control.

- That the Chief Internal Auditor was required to provide an annual internal audit report including an audit opinion on risk management, governance and control.
- That the Annual Audit Report and Opinion detailed the level of completion of work achieved in respect of the 2023/24 audit plan.
- That, on the basis of the audit work performed in 2023/24, the Chief Internal Auditor's opinion was that the IJB had a framework of controls in place that provided Adequate assurance regarding the organisation's governance framework, related internal controls and the management of key risks.
- That the actions identified during the audit work did not impact on the overall governance arrangements of the IJB.
- That there were no instances of fraud identified from the audit work conducted.
- That section 7 of the report detailed the planned work performed for the year, with the table on page 4 showing the auditable areas considered as part of the annual planning process.
- That section 8 of the report gave a summary of the audits, together with the recommendations and progress with completing the resulting actions.
- That there were no outstanding audit recommendations from previous years, as detailed on pages 6 and 7 of the report.

Joanna Kenny commented that the document was an easy read and a very useful way to convey very complex information.

Following a query from Rona Gold, Andrew Paterson confirmed that audits were marked as complete once the service had said they had implemented the action(s), which Internal Audit then reviewed and asked for evidence to ensure the work had been completed before closing the action(s).

The Performance and Audit Committee thereafter noted:

**11.1.** That, in order to comply with the Public Sector Internal Audit Standards, Internal Audit had a duty to provide an annual assurance report on the overall adequacy and effectiveness of the framework of governance, risk management and control.

**11.2.** That the annual report provided the Chief Internal Auditor's opinion on the Integration Joint Board's framework of governance, risk management and control for financial year 2023/24.

The Performance and Audit Committee thereafter scrutinised:

**11.3.** The Internal Audit Annual Report and Opinion, attached as Appendix 1 to the report by the Chief Internal Auditor, and obtained assurance.

## 12. Internal Audit Charter

There had previously been circulated a report presenting the Internal Audit Charter, for scrutiny and assurance.

Andrew Paterson, Chief Internal Auditor, advised members:

- That, in order to comply with the Public Sector Internal Audit Standards, there was a requirement to have an Internal Audit Charter which should be subject to periodic review.
- That the current Charter was reviewed and approved by the Performance and Audit Committee in July 2022.
- That the Charter detailed the purpose, authority and responsibility of Internal Audit and described the nature of services Internal Audit could provide, the access Internal Audit had and the reporting procedures in place. It also detailed Internal Audit's role in cases of fraud, bribery or irregularity.
- That the Charter had been reviewed to ensure it continued to comply with the Public Sector Internal Audit Standards and to ensure that Internal Audit could provide a service that was both relevant and continued to add value to the Integration Joint Board.
- That there were no significant changes to the previous version of the Charter.
- That, although the Charter would normally be reviewed every two years, it was proposed that, as the Public Sector Internal Audit Standards were currently being reviewed, the Charter should be reviewed and updated to ensure it complied with the revised standards, prior to the next scheduled update.

The Performance and Audit Committee noted:

**12.1.** That, in order to comply with the Public Sector Internal Audit Standards, an Internal Audit Charter, which defined the purpose, authority and responsibility of the Board's internal audit activity, required to be prepared and that the Charter should be periodically reviewed.

The Performance and Audit Committee **resolved:**

**12.2.** That the Internal Audit Charter for 2024/25, attached as Appendix 1 to the report by the Chief Internal Auditor, be approved.

## 13. Date and Time of Next Meeting

The Chair queried whether it was possible for the schedule of meetings for next year, particularly in June, could be reviewed to try to ensure that NHS Orkney and the Council's meetings did not fall on the same week.

It was thereafter agreed that the next meeting be held on Wednesday, 26 September 2024 at 10:30.

## 14. Conclusion of Meeting

There being no further business, the Chair declared the meeting concluded at 12:46.