

***Integration Joint Board***

**Date of Meeting: 31/05/2023**

**Title of Report: Committee Annual Reporting**

**Presented by: Charlotte Craig**

**The Board is asked to:**

- Note that committees have concluded their annual reporting
- Note the participation and engagement with the assurance questionnaire and support a hybrid approach to this for 2023-24
- Note that committees have identified their own continuous improvement plan to be implemented.

**1. EXECUTIVE SUMMARY**

The Integration Joint Board require that each committee complete an annual report to provide assurance that the committee structure is functioning well and can provide the appropriate scrutiny that the IJB delegates through the terms of reference.

**2. INTRODUCTION**

Each committee provides a report from the chair and this is accompanied by completion of the assurance questionnaire.

The assurance questionnaire was transferred to an online questionnaire in 2022-23.

Full committee annual reports are available on request.

**3. DETAIL OF REPORT**

The Integration Joint Board does not delegate decision making powers to Committees but can delegate tasks/scrutiny and ask them to make a recommendation, this can be short term or updated in the Terms of Reference.

The terms of Reference at this stage have been updated to reflect this on at least an annual basis for example the delegation of scrutiny of performance to Clinical and Care Governance Committee.

**Audit and Risk**

The annual report reflects that overall the committee performed its governance role well and is pleased to provide assurance of its function to the Board.

The annual report notes a summary of the business of the committee, membership and attendance and remit with an evaluation by the Chair. The annual report contains internal and external Audit reports as appendices.

The committee has successfully identified and an improvement agenda for the committee including improvement in monitoring actions, timely reporting in relation to risk, strategy and policy.

A meeting was held with independent auditors without officers in line with good practice and this will be planned for the forthcoming year.

Some discussion was undertaken on the validity of response with the online assurance questionnaire. Feedback from members that instruction was a little ambiguous and due to the small number of members that it placed on an average response in the main. Hybrid reporting in future years was noted as an option.

The report concludes that the Audit and Risk Committee has performed its role effectively throughout 2022/23. The Committee has operated in line with its terms of reference and has received independent assurance from Internal and External Auditors throughout the year. It has scrutinised, in detail, the reports presented to the committee and has continued to seek to contribute to the development of the governance, assurance and risk framework of the HSCP.

### **Clinical and Care Governance Committee**

The committee provided two reports, the annual report of the chair and the committee assurance report.

The Clinical and Care Governance Committee is remitted by the Integration Joint Board to provide assurance that systems, processes and procedures are in place and delivering effective clinical and care governance throughout Argyll & Bute.

In the last financial year the committee has delivered a new Clinical and Care Governance Framework to the IJB for approval presented in October 2022. The new framework provided additional levels of scrutiny which are currently being embedded by operational heads of service and professional leads to support the safe and effective delivery of care and focusing on improvement actions.

It has also stimulated a partnership review of Acute Governance to ensure that a robust access to clinical expertise and leadership is available which will be concluded within the financial year.

Significant work has been undertaken in our Rural General Hospital to sustain the medical provision, revising the model to sustain provision and a positive training experience in line with recommendations.

The Clinical and Care Governance team was successfully recruited to with 2 new personnel including the manager, thanks is given to staff who provided continuity during the period of recruitment and handover

The Committee was asked to note the report and the key achievements of the committee which aim to support the continued challenges of delivering safe and person centred care across all settings.

In respect of assurance the committee had a fair response. Comments reflected the period of change in implementation of the new framework and

monitoring the subsequent impact of the flow of information and action through the three layers of governance.

The committee remains committed to continuous improvement and noted 7 development actions prior to a revisit of the assurance questionnaire.

1. Development session on Clinical and Care Governance principles, reporting and governance.
2. Assurance of the implementation of the lower tiers of the clinical and care governance framework
3. Refreshed topic planning for agenda's and organisation of regular reporting from Clinical and Care Governance Group and local groups if appropriate.
4. Monitor the implementation of the framework and ensure all areas are engaged
5. Ensure all members have the opportunity to identify training required to participate
6. Review the content of the minute
7. Extend summary update at IJB and recommendation of action to IJB based on business of the committee.

In conclusion while the committee notes some progress in its effectiveness it will continue to seek to present an integrated approach that provides the right level of operational and strategic assurance across its framework to the IJB.

A hybrid approach to assurance was also recommended.

### **Finance and Policy Committee**

The Finance and Policy committee is remitted within the terms of reference to be the point of financial reporting scrutiny on behalf of the IJB, oversee the management and allocation of resources to supported delivery and transformation and develop policy to support strategic objectives. The committee may make recommendation to the IJB based on work undertaken.

The Committee has met on eight occasions throughout the 2022-23 financial year with strong levels of attendance and quoracy. A summary of business is provided and notes the following of the financial timeline provided annually by the Head of Finance and Transformation. A typically standard agenda and first point of contact in respect of budget proposal development, this committee also support a board level point of accountability for transformation.

The Committee Assurance report is at present pending some information and will be presented at a later date. The assurance data reflects data from other committees with some query on how the 1-5 scale has been interpreted not reflected in the positive comments. Preliminary indicators would suggest that a recommendation for a hybrid model for the following year would be the preferable option.

The overall conclusion from members was that the Finance and Policy Committee has fulfilled its remit on behalf of the IJB in the financial year 2022-23 and would seek to note this with the Board for assurance.

### **Strategic Planning Group**

The Strategic Planning Group has a function within the Integration Scheme and supports the delivery of the Strategic plan, the Joint Commissioning Plan and the Annual Performance Report.

A new three year Joint Strategic Plan was approved by the IJB and launched in May 2022. Over the course of the financial year a refresh exercise was planned for early 2023 to ensure that post pandemic it tested the strategic objectives were still fit for purpose. This will be reported to the IJB in August 2023.

The Strategic Planning Group has completed the assurance questionnaire in respect of the functioning of the group but has a specific task within the Integration Scheme which is reported directly to the Board and Communicated with the Strategic Planning Group.

In respect of its assurance response the group had in the main an average response for each question. The group has a number of new members and this is reflected by request for strengthening induction and performance of the group as a group, being clear on its remit and who reports to it. A clear workplan for the group was a clear ask from a number of respondents and ensuring it has feedback from the IJB.

This group is the IJB's largest multi-agency formal governance group. Two respondents noted they would like to see the group meet more frequently and have better use of sub groups.

Responses were as with the committees lacking in the depth that the discussion brought in the previous annual review.

The Group now has regular reporting from the Locality Planning Groups and Strategic information being fed into the groups is strong in some operational areas of the HSCP.

#### **4. RELEVANT DATA AND INDICATORS**

Committee and group minutes, online questionnaire.

#### **5. CONTRIBUTION TO STRATEGIC PRIORITIES**

Good governance supports the delivery of all strategic priorities.

#### **6. GOVERNANCE IMPLICATIONS**

**6.1 Financial Impact** Committee offers financial oversight reducing risk in financial impact

**6.2 Staff Governance** this is reported directly to the IJB

**6.2 Clinical and Care Governance** Committee is developing both assurance, improvement and oversight functions reducing risk and supporting person centred positive care experiences.

#### **7. PROFESSIONAL ADVISORY**

As per respondents

**8. EQUALITY & DIVERSITY IMPLICATIONS** nothing specific for this report

#### **9. GENERAL DATA PROTECTION PRINCIPLES COMPLIANCE**

Minutes of Committee and Group are stored according the approved IJB Records Management Plan

#### **10. RISK ASSESSMENT**

The HSCP as the operational function of the Integration Joint Board requires the support of an effective IJB and the scrutiny of an effective committee and group structure. Clarity of purpose, attendance and engagement are key to supporting well informed decision making for the people of Argyll & Bute. This also offers a supportive environment for staff to innovate and thrive.

**11. PUBLIC & USER INVOLVEMENT & ENGAGEMENT**

Respondents as per their representative roles.

**12. CONCLUSIONS**

The Committees and Strategic Planning Group have been given an opportunity to self-assess and self-reflect on their own ability to support the business of the Integration Joint Board effectively. The annual report is an effective summary to review the work of the committee and ensure it is meeting the terms of reference, it has good attendance and participation. The assurance questionnaire online was rather less successful than fully in person and a hybrid approach would be recommended for next year.

Each committee has identified areas of improvement which will be implemented over the course of the year.

**13. DIRECTIONS**

Directions required to Council, NHS Board or both.	<b>Directions to:</b>	tick
	No Directions required	x
	Argyll & Bute Council	
	NHS Highland Health Board	
	Argyll & Bute Council and NHS Highland Health Board	

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