



## Audit & Performance Systems Committee

<b>Date of Meeting</b>	28.05.2019
<b>Report Title</b>	NHSG Internal Audit Reports
<b>Report Number</b>	HSCP.19.018
<b>Lead Officer</b>	Alex Stephen, Chief Finance Officer
<b>Report Author Details</b>	PWC (NHSG Internal Auditors)
<b>Consultation Checklist Completed</b>	Yes
<b>Appendices</b>	a. Health & Social Care Governance b. Unscheduled Care Discharges c. Health & Safety Governance

### 1. Purpose of the Report

- 1.1. This report presents the Audit & Performance Systems (APS) Committee with a summary of recent NHSG Internal Audit reports prepared by PwC.

### 2. Recommendations

- 2.1. It is recommended that the Audit & Performance Systems Committee:

- a) Note the content of the NHSG Internal Audit Reports, as attached at Appendix A, B & C.
- b) Note the actions and timescales for Aberdeen City, as outlined in the action plan of the NHSG Internal Audit report attached at Appendix A and C.



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### **3. Summary of Key Information**

#### Health & Social Care Governance Structure (incl. hosted services)

- 3.1.** The scope of our review was to assess the design and operating effectiveness of the key controls within the Health and Social Care Integration governance structures. In general, PwC found that the current arrangements for health and social care integration governance structures are generally well designed and operating effectively.
- 3.2.** The report highlights a medium risk relating to the lack of formal oversight and reporting framework for all 3 IJBs and agreed an action that all relevant parties will reach agreement on forming a formal management reporting framework for IJB hosted services. There was an additional low risk found, however Aberdeen City IJB does not have an action arising from this.

#### Unscheduled Care Discharges

- 3.3.** The scope of this audit review was to assess the discharge process in NHS Grampian following the creation of the Integration Joint Boards (IJBs) in Scotland. In general, PwC found that the current processes and controls in place are designed with a focus on patient rather than bed management and the provision of excellent patient care, recognising that there are areas for improvement but noting the current context for health and social care integration.
- 3.4.** The report highlights two medium risks, related to control improvement opportunities:
  - NHSG 'Patient Discharge from Hospital Protocol' prepared in September 2016 as a draft document has not been finalised or updated.
  - Variances in recording and interpreting Estimated Dates of Discharge (EDDs).
- 3.5.** The APS Committee should be aware of the findings of this report as they relate to ACHSCP's delayed discharge performance.



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### Health & Safety Governance

- 3.6. The internal audit report assesses the control design and effectiveness of the Health and Safety governance and oversight structures established by NHS Grampian ('NHSG') and the Health and Social Care Partnerships (HSCPs) and looks to confirm that the issues identified by the HSE Improvement Notices served on NHSG have been, or are being, effectively managed through to resolution. The report highlights one medium and one low risk finding in relation to control improvement opportunities.
- 3.7. The agreed action plan for the medium risk relating to the Health & Safety Committee commits the City IJB to the achieving the following:
- All draft Terms of Reference will be reviewed, updated where necessary, approved and published as final.
  - All terms of reference that are overdue for review will be reviewed updated as necessary, approved and published as final.
  - Arrangements will be put in place to ensure that all Terms of Reference are reviewed in accordance with document control requirements set out in the ToRs. Management notes that it is best practice to schedule a ToR review at least once a year.

### 4. Implications for IJB

- 4.1. **Equalities** – there are no direct implications arising from this report.
- 4.2. **Fairer Scotland Duty** – there are no direct implications arising from this report.
- 4.3. **Financial** – there are no direct implications arising from this report.
- 4.4. **Workforce** - there are no direct implications arising from this report.
- 4.5. **Legal** – there are no direct implications arising from this report.
- 4.6. Other - NA

### 5. Links to ACHSCP Strategic Plan

- 5.1. NA



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### 6. Management of Risk

- 6.1. **Identified risks(s):** identified throughout the report
- 6.2. **Link to risks on strategic risk register: # 7** *There is a risk that the IJB, and the services that it directs and has operational oversight, of fail to meet performance standards or outcomes as set by regulatory bodies*
- 6.3. **How might the content of this report impact or mitigate these risks:** implementing the actions from the internal audit reports will help to mitigate the identified risks.