
Minute of Performance and Audit Committee

Date: 20th February 2024

Time: 2pm

Place: MS Teams

Present

Cllr Cameron Ramsay, Chairperson
Cllr Julie Dettbarn, Portfolio Holder- Elected Members, SAC
Cllr Hugh Hunter, Senior Councillor, SAC
Ewing Hope, Non-Executive Director, NHS

In Attendance

Tim Eltringham, Director of Health and Social Care, HSCP
Mark Inglis, Head of Children's Health, Care and Justice Services, HSCP
Gary Hoey, Chief Social Work Officer, HSCP
Sheila Tyeson, Senior Manager, Planning, Performance and Commissioning, HSCP
Lisa Duncan, Chief Finance Officer, HSCP
Phil White, Partnership Facilitator, HSCP
Rachael Graham, Planning and Performance Co – ordinator, HSCP
Louise Gibson, AHP Senior Manager South, HSCP
Billy McClean, Head of Community Health and Care Services, HSCP
Hanna Dearie, Planning and Performance Officer, HSCP
Rebecca Hunter, Planning and Performance Officer, HSCP
Frances Ewan, NHS Staff Side Representative, NHS
Julie Phair, Co – ordinator (Contracts and Commissioning), HSCP
Vicky Campbell, Business Intelligence Team Leader, HSCP
Fiona Mitchell-Knight, Audit Scotland (part attendance)
Christine Wallace, Service Manager, Musculoskeletal Physiotherapy (part attendance)
Lianne McNally, AHP Senior Manager (part attendance)
Angus Brown, Audit Scotland
Nadine McCall, Administrative Assistant (minutes)

C Ramsay in the Chair

Agenda	Discussion	Action
1.	<p>Welcome/ Apologies/ Membership updates</p> <p>Apologies received on behalf of Kirsty Pyper and Jean Ford.</p>	
2.	<p>Declarations of Interest</p> <p>There were no declarations of interest to note.</p>	
3.	<p>Minute of Previous Meeting</p> <p>The minute of the Performance & Audit Committee held on 5th December 2023 was approved as an accurate record of the meeting.</p>	
4.	<p>Matters Arising/ Action Log</p> <p>There were no matters arising to note.</p>	
Performance:		
5.	<p>Allied Health Professionals Performance and Audit Report (to date)</p> <p>L Gibson informed that the purpose of this report is to provide an update on the work Allied Health Professionals (AHPs) have undertaken on performance management and introduce the initial AHP Improvement Plan. L Gibson advised that further work is underway to update reporting systems for services, informing that the plans will be hosted on Pentana and future development around DCAQ will be in conjunction with the Health and Social Care Partnership's Policy and Planning Team.</p> <p>L Gibson explained that at the end of last year the PAC recognised that a lot of work was needed around data and performance data within AHPs.</p> <p>L Gibson advised that as a result of previous testing of the national common staffing method tools, the methods used have been applied to data collection and as part of the implementation of the Healthcare Staffing Bill, this is to be further developed.</p> <p>L Gibson shared the South AHP activity summary document on screen, which she advised is the start of how they hope things will potentially look like in the near future. L Gibson advised that further work is planned to review the content of this plan in line with the the HSCP Strategic Plan.</p> <p>L Gibson shared the AHP Strategic Plan Update January 2024 on screen (as circulated). L Gibson highlighted some key information</p>	

	<p>within this.</p> <p>E Hope expressed in terms of the action within the Strategic Plan in respect of recruiting to admin resource to release clinical time and improve pathways, he would be keen to understand the impact of this.</p> <p>L Gibson advised that she did not have an exact percentage of time that clinicians spend doing paperwork, appointment scheduling, receiving calls etc but is aware that it does take up a significant amount of their time.</p> <p>L Gibson explained that there was a test of change done in respect of more administrative resource within Physiotherapy, which she will seek some feedback on in terms of the impact.</p> <p>L Gibson continued to advise that they now have Occupational Therapist and Speech and Language Therapist in post at the moment which has been working really well. L Gibson advised that they are expecting a Dietician to be in post as of next week aswell as a Physiotherapist. L Gibson stated that she will look at the impact data around these posts again in April and feedback at a future PAC meeting.</p> <p>A discussion ensued in relation to the recent announcement on pause in National Treatment Centre and how this many impact on services. It was agreed that there would be little to no impact on services.</p> <p>S Tyeson highlighted that some of the target dates within the plan had expired and advised that these would be updated.</p> <p>The Committee noted the content of the report.</p>	
<p>6.</p>	<p>Musculoskeletal (MSK) Service Waiting Times</p> <p>L McNally, AHP Senior Manager for East Ayrshire introduced herself to the committee and advised of her responsibility for Musculoskeletal (MSK) Service.</p> <p>L McNally advised that herself and C Wallace, Service Manager, MSK Service were in attendance today to highlight what is currently happening around MSK Performance.</p> <p>L McNally explained that the report submitted provides Performance and Audit Committee with an update on Musculoskeletal Service waiting times. East Ayrshire is lead partnership for MSK services. The report highlights current challenges, improvements and opportunities to address the waiting times for MSK Physiotherapy, Occupational Therapy, Podiatry and Orthotics.</p> <p>L McNally informed that the report was presented to East Ayrshire</p>	

	<p>Performance and Audit Committee on 30th January 2024 and is being brought to South Ayrshire's Performance and Audit Committee for their awareness and further commentary.</p> <p>It was suggested that a further updated be provided to Performance and Audit Committee in 6 months' time when more progress has been made in terms of the improvement plan. C Wallace explained that COVID-19 Pandemic had a significant impact and also ongoing issues in terms of recruitment and retention of staff.</p> <p>T Eltringham thanked L McNally and C Wallace for their input and welcomed a further update in due course.</p>	
7.	<p>Summary of Inspection Findings for Adult Services</p> <p>B McClean advised that this report has also been presented to South Ayrshire Cabinet informing of the outcome of a range of inspections throughout 2023.</p> <p>B McClean advised that in 2022 – 2023, the Care Inspectorate undertook and published eight separate inspections during 2023 across Adult Services.</p> <p>Grades across all eight of the service areas inspected in South Ayrshire ranged from 4 (good) to 5 (very good). B McClean explained that the Care Inspectorate use a 6-point scale to evaluate quality where 1 is unsatisfactory and 6 is excellent.</p> <p>B McClean informed that overall, the inspection outcomes were positive and benchmark positively against other Partnerships, providing further evidence that Adult Services within South Ayrshire are providing broadly positive outcomes for people and are on an improving trajectory.</p> <p>The Committee noted the content of the report and commended B McClean and his team for all of the hard work they have put in, which has led to such positive inspection grades.</p>	
8.	<p>Community Health and Care Services 6 Monthly Performance Report</p> <p>B McClean advised that the purpose of this report is to submit for consideration the Partnership Performance Report for Community Health and Care Services, comprising of both baseline information and where available, information for the period up to end of December 2023.</p> <p>B McClean informed that this is a revised version of the previous 6 monthly report following a review of the existing measures and a</p>	

	<p>realignment of the measures against the SAHSCP Strategic Plan Objectives.</p> <p>B McClean explained that the report no longer includes Public Health Measures, ADP Measures and Adult Support and Protection Measures as these are already reported to other governance panels and committees as part of existing reporting mechanisms. B McClean noted the measures as fully detailed within the circulated report.</p> <p>B McClean shared the South Ayrshire Health and Social Care Partnership Performance Report on screen (as circulated) and advised that this was the first draft and welcomed views on this.</p> <p>Cllr Hunter expressed his disappointment in respect of the PDR figures, highlighting that only 5.4 % of staff had completed Annual PDR's. Cllr Hunter also indicated his disappointment in respect of staff absence figures.</p> <p>B McClean advised that he shared Cllr Hunter's disappointment around this and offered to bring a report specific to these issues to a future meeting.</p> <p>Cllr J Dettbarn expressed that notwithstanding the issues around PDR and sickness figures, it is mostly an improving picture and welcomed a report focusing on this specifically at a future meeting.</p> <p>Cllr J Dettbarn noted that she would also be keen for the Performance and Audit Committee to understand the difference between delayed discharge and period of time before then that is causing length of stay in hospitals.</p> <p>E Hope expressed that nationally absence rates are increasing and welcomed more detail around the numbers and facts behind staff absence.</p> <p>The Committee noted content of the performance data detailed within the report.</p>	
<p>9.</p>	<p>Quality Assurance Annual Report for Commissioned Services – January to December 2023</p> <p>S Tyeson informed that the purpose of this report is to provide a summative overview in relation to Quality Assurance for Commissioned Services from January – December 2023 to the Performance and Audit Committee.</p> <p>S Tyeson advised that the Partnership introduced their Quality Assurance Framework for Commissioned Services in year 2021 which was a revamp of what was previously contract monitoring that was</p>	

	<p>undertaken by the Commissioning Team.</p> <p>S Tyeson explained that the Quality Assurance Framework sets out both the framework encompassing intelligence and evidence-based approach that SAHSCP implements to provide assurance that our commissioned services are providing high quality care and support on a consistent basis.</p> <p>S Tyeson explained that in order to assess the providers, they implemented a RAG status which mirrored what was discussed through the Community Services Oversight Group (CSOG) meetings.</p> <p>S Tyeson highlighted that 94% of services who were provided with quality assurance visits received a green status. None of the services following initial quality assurance checks were rated as red status.</p> <p>S Tyeson informed that they have heavily engaged with some services throughout the year, generally through concerns that were highlighted through CSOG meetings or also as a result of Large-Scale Investigations. Where any concerns were identified at a QA visit, these would be reported in through CSOG. All services would have a follow up visit where any services moved to a red rag status.</p> <p>S Tyeson advised that they would continue to work with Performance Team to ensure the data being shared reflects the landscape. Also reviewing the current framework to ensure it is fit for purpose and is reflective of quality assurance expectations and captures the correct performance management information.</p> <p>S Tyeson continued to inform that audit colleagues are interested to understand how we can seek assurance around financials and sustainability with providers. S Tyeson explained that they are currently doing work on this to effectively be assured providers are financially stable.</p> <p>S Tyeson highlighted that the quality assurance framework had been circulated within the papers for today's meeting for those who may not have been previously sighted on it.</p> <p>Cllr Hunter advised that it would be helpful to understand for each question within 4.2 (Care inspection information) in the report, how many service providers were assessed, noting that this would give an idea of percentage which could be measured against leadership figures.</p> <p>Cllr Hunter expressed that the fact they are not all assessed on everything is a significant gap and feels this should be feedback to the Care Inspectorate.</p> <p>The Committee noted the content of the report.</p>	
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<p>10.</p>	<p>Integration Joint Board Strategic Plan Update</p> <p>R Graham advised that the purpose of this report is to provide an update to the Performance and Audit Committee on the implementation of the Integrated Joint Boards' Strategic Plan 2021, focusing on the 18-month 'bridging' operational plan, as agreed at the IJB.</p> <p>R Graham noted the recommendations as detailed within the circulated report.</p> <p>R Graham informed that in 2020 the IJB agreed that a Strategic Plan should be drafted that has a ten-year horizon with a shorter term bridging operational plan, with this approach allowing the HSCP to set long-term and ambitious strategic objectives at a crucial moment for the IJB while also maintaining stability and an ability to adapt to a fast-moving landscape at an operational level.</p> <p>R Graham advised that at the IJB Meeting on 24th March 2021, it was agreed for a revised Strategic Plan for the HSCP to be developed.</p> <p>R Graham stated that the Performance and Audit Committee may wish to note the highlights under the broad themes of corporate/HSCP wide services which are detailed within the circulated report.</p> <p>R Graham informed that the Partnership have a statutory duty to refresh the Strategic Plan every 3 years to ensure its fit for purpose and review the action plan. R Graham explained that this will be done during 2024 with the initial report being taken to SPAG next month.</p> <p>R Graham advised that as part of this work a new action plan will be drafted during 2024 to reflect the current landscape. The initial report will be presented to Strategic Planning Advisory Group (SPAG) next month and as part of this work the new action plan will be drafted to reflect current landscape.</p> <p>R Graham advised that any updates taken to SPAG and once agreed at IJB potentially in August, will then report into PAC 6 monthly as is with all our other performance reports. All actions and updates will be held on Pentana.</p> <p>The Committee noted the content of the report and agreed the recommendations.</p>	
<p>11.</p>	<p>Progress report on the Social Isolation and Loneliness Strategy 2018 - 2027</p> <p>P White advised that the purpose of this report is to provide the</p>	

	<p>Performance and Audit Committee with an update on the progress of the implementation plan of the Social Isolation and Loneliness Strategy which covers the period 2018 – 2027.</p> <p>P White shared the Local Outcome Improvement Plan (LOIP) summary on screen and explained that one of the LOIP priorities is social isolation and older people, however when they move to the new LOIP there will be some reframing around the priorities.</p> <p>P White advised that they recognised that social isolation, although initially focused on older people, can actually affect people of all ages including children and young people and when they looked at the planning for where social isolation fits, they identified that it falls within a number of other strategies.</p> <p>P White continued to inform that there are new priority areas and many areas of good existing work that they still have to understand and coordinate. There also remains the need for leadership to understand the full picture and address more structural and systemic issues. P White advised that he has asked the Local Health Improvement Lead to convene a group to look at this and will report into Community Planning structures.</p> <p>P White explained that due to the changes in landscape they have agreed to develop a new Terms of Reference.</p> <p>Cllr H Hunter asked in relation to the consultation around this and forming of the Strategic Plan, to what extent Third sector and other organisations will be consulted. Cllr Hunter advised that there are various groups who will have members who are socially isolated, simply because of responsibilities they have due to situations they are in and expressed the importance of these groups being incorporated into the strategic thinking.</p> <p>P White advised that social isolation is implicit in a number of strategies and informed that the locality plans will also include social isolation. P White explained that the function of the co-ordinating group is to recognise the fact it's an extensive landscape that requires someone to take leadership.</p> <p>The Committee noted the content of the report and the progress of implementing the Strategy.</p>	
<p>12.</p>	<p>HSCP Communications Strategy Update</p> <p>R Graham informed that she would present this report on behalf of K Pyper, Communications Officer.</p>	

	<p>R Graham advised that the purpose of this report is to provide an update to the Performance and Audit Committee of the intention to close the existing “HSCP Communications Strategy” to allow for a new Pentana item to be created in line with the new “SA HSCP Communications Strategy 2024- 27”.</p> <p>R Graham explained that this will reflect the current landscape of communications within the HSCP and allow for this to be regularly updated in line with progress of the newly developed strategy.</p> <p>R Graham noted that this Communications Strategy was drafted in 2018 and since then work has continued to progress on actions linked to the Communications Strategy including the appointment of K Pyper, dedicated Communications Officer in March 2021. This appointment has provided an opportunity to update any actions.</p> <p>R Graham advised in terms of audit purposes through Pentana, they are looking for agreement from Performance and Audit Committee to agree all actions can be closed and old Pentana records closed/ archived and to agree for the introduction of a new Pentana records for the HSCP Communications Strategy 2024 – 2027.</p> <p>The Committee noted content of the report and agreed with the recommendations.</p>	
Audit:		
13.	<p>Annual Audit Plan 2023 – 2024</p> <p>A Brown, Audit Scotland advised that this report summarises the work plan for 2023/24 external audit of South Ayrshire Integration Joint Board. A Brown highlighted the main elements (as fully detailed within the report) in which their work will include.</p> <p>A Brown informed that Fiona Mitchell-Knight, Audit Scotland has been appointed by the Accounts Commission as external auditor of the IJB, for the period from 2022/23 until 2026/27. The 2023/24 financial year is therefore the second of the five-year audit appointment.</p>	
Items for noting:		
14.		
Any Other Business/ Actions for follow up to IJB		
15.		

Date of Next Meeting – Tuesday 28th May 2024