

Agenda Item 12

Annual Assurance Statement



Falkirk IJB Clinical and Care Governance Committee

26 June 2020

Annual Assurance Statement

For Decision

1. Executive Summary

- 1.1 The report presents the draft Clinical and Care Governance Annual Assurance Statement to the Committee for approval. This is the first Annual Assurance Statement prepared by the Committee. This is in response to the Internal Audit report of the IJB's Assurance Framework – Governance Mapping, Report No. FK05/19.
- 1.2 Subject to the Committee's approval, this will then be presented to the next IJB meeting for consideration.

2. Recommendations

The Clinical and Care Governance Committee is asked to:

- 2.1 approve the Clinical and Care Governance Committee Annual Assurance Statement
- 2.2 agree that this is presented to the next IJB meeting for consideration.

3. Background

- 3.1 Over 2019-20, Internal Audit completed a Governance Mapping exercise to assess the extent to which the IJB's committee structure supports the delivery of strategic objectives.
- 3.2 The scope of the review was to:
 - identify and map Falkirk HSCP's key committees and working groups
 - review the appropriateness of Terms of Reference (ToR) and interdependencies
 - assess working arrangements for key committees and working groups
 - determine whether the structure of these committees and groups best supports delivery of Falkirk HSCP's strategic objectives.

3.3 The audit supports Strategic Risk 2 – *There is a risk that the IJB fails to deliver its strategic objectives due to lack of clarity and/or agreement in respect of governance arrangements, for example:*

- a lack of clarity around the separate roles of the IJB, HSCP, Council, NHS Board and other partners, including Clackmannanshire and Stirling IJB
- an inability to influence decision making and/or a lack of agreement around where decisions should be made/decisions been taken out with appropriate governance process.

3.4 The Internal Audit report noted:

In our opinion, overall the committees and groups tested reviewed were discharging their ToR in an efficient and effective manner. However, some committees and working groups had not been in place for the full year, work plans had not yet been established and no annual assurance reports were provided to the IJB. Therefore, based on the information available, our work could not conclude on whether sufficient work had been carried out in year to provide the IJB with adequate assurance over management of risks or progress towards strategic objectives.

The IJB should ensure that it receives adequate and appropriate assurance from partner bodies, standing committees and key working groups regarding how operational and strategic risks are being managed. Assurance should include how each partner has ensured the safe, efficient delivery of health and care services throughout the year, and how services have been delivered in line with the strategic objectives of the IJB. As a minimum, the IJB should receive annual assurance reports from the appropriate committees / groups in its governance structure.

3.5 The Internal Audit report makes four recommendations and an action plan has been agreed with the Chief Officer. One of these recommendations was that Annual Assurance Statements are provided, effective from June 2020.

3.6 In line with normal practice, the IJB Audit Committee would have received the Internal Audit report and considered the action plan, with this being monitored and implemented as required. However the cancellation of meetings in response to the Covid-19 pandemic has impacted on the timescales and process.

3.7 The Internal Audit report will be presented to the IJB Audit Committee when it next meets.

3.8 If relevant, a statement providing any contextual information regarding the subject. This may include any underpinning national or local policy or strategy.

4. CCGC Annual Assurance Statement

- 4.1 In line with the Internal Audit report recommendation a draft Annual Assurance Statement has been prepared and is attached for consideration at Appendix 1.
- 4.2 This sets out the attendance, meeting dates and business of the CCGC over the reporting year April 2019 to March 2020.
- 4.3 Assurance and governance are provided to a large extent by having an oversight and adequate reporting mechanisms from the various NHS committees, Public Protection Groups and Health and Social Care groups within the IJB governance infrastructure.
- 4.4 These groups can demonstrate in-depth consideration of a broad range of agendas relevant to their specialities. While much of the CCGC business is a 'maintenance' agenda, there is also scrutiny of proposed changes to systems and processes that deliver improvement to the quality of care delivered by the Health and Social Care Partnership.
- 4.5 The CCGC is asked to approve the draft Annual Assurance Statement for presentation to the next IJB meeting.
- 4.6 It is recognised that further work is required over 2020 – 2021 to audit and develop these assurance arrangements. This is in response to the integration of health services in to the HSCP; the internal reorganisation of NHS FV Directorates and services; and the impact of Covid-19 which has required services to respond differently.
- 4.7 Further work will be done to review the CCGC terms of reference to meet the recommendations of the Internal Audit report. This has been impacted by the delay in the publication of national revised guidance on Clinical and Care Governance for IJBs and HSCPs which was expected in May 2020. It will also be informed by the collaborative working planned for 2020/21 with our wider health and social care partners. A report will be presented to a future CCGC meeting.

5. Conclusions

- 5.1 Through the CCGC meetings and reports presented, assurance is provided from respective partners on how services have ensured the safe, efficient delivery of health and care services throughout the year, and how services have been delivered in line with the strategic objectives of the IJB.

Resource Implications

There are no resource implications arising from this report.

Impact on IJB Outcomes and Priorities

Ensuring sound clinical and care governance arrangements are in place for

all services is in line with the Strategic Plan.

Legal & Risk Implications

The preparation of the Annual Assurance Statement will meet the requirements of the Strategic Risk Register and the Internal Audit report and ensure the IJB meets its statutory responsibilities.

Consultation

This report has involved consultation with key officers in the Council and NHS Forth Valley.

Equalities Assessment

This is not required for the report.

6. Report Author

Suzanne Thomson, Senior Service Manager

7. List of Background Papers

N/a

8. Appendices

Appendix 1: Falkirk CCGC Annual Assurance Statement

Annual Report of Falkirk Integration Joint Board Clinical & Care Governance Committee 2019-2020

1. PURPOSE

- 1.1. The report sets out an annual overview of the work of the Falkirk Integration Joint Board (IJB) Clinical and Care Governance Committee (CCGC). This is in addition to the IJB receiving minutes of the meeting and ensures effective scrutiny of the Committee.

2. BACKGROUND

- 2.1. The Clinical and Care Governance Committee (CCGC) provides assurance to the IJB on the systems for delivery of safe, effective, person-centred care in line with the IJB's statutory duty for quality of health and social care services.
- 2.2. An important element of clinical and care governance is to ensure there is a robust system for assuring the quality and safety of health and social care delivered and for the Committee to drive a culture of continuous improvement. This includes having systems in place to identify and respond when standards are not being met and issues of poor performance are identified and addressed.
- 2.3. The Committee has responsibility to oversee the processes within the Health and Social Care Partnership to ensure appropriate action is taken in response to adverse events, safety action notes, scrutiny body reports and complaints. Importantly, it ensures that examples of good practice and lessons learned are disseminated within the Partnership and beyond if appropriate. The Committee has agreed its meeting schedule for 2020; the agendas and forward planner are being developed to satisfy its key strategic objectives.
- 2.4. Over 2019- 2020, the Committee has discussed and noted the following reports in relation to Public Protection governance:
- Healthcare Associated Infection – Quarterly Report
 - Healthcare Associated Infection – Winter Performance Report
 - Quality and Safety of Care in Falkirk Community Hospital
 - Quality and Safety of Care in Bo'ness Community Hospital.
- 2.5. The Committee formally provides a copy of its minutes to the IJB a part of its assurance processes and are available publically. Regular reports go from the CCGC to the Falkirk Public Protection Chief Officers Group and the NHS Forth Valley Clinical Governance Working Group.

3. IJB CLINICAL AND CARE GOVERNANCE COMMITTEE

3.1. Composition

During the financial year ending 31 March 2020, membership of CCGC comprised:

IJB Members:

Mrs Julia Swan	Resigned from Chair - Jan 20
Cllr Fiona Collie	Vice Chair
Mrs Margo Biggs	Public Representative
Roger Ridley	Staff Representative
Jen Kerr	Third Sector Interface

Professional Advisors:

Patricia Cassidy	Chief Officer
Sara Lacey	Chief Social Work Officer
Andrew Murray	Medical Director
Angela Wallace	Nurse Director
Ellen Hudson	Deputy Nurse Director
Bette Locke	Assoc. Director of Allied Health
Dr David Herron	GP Representative
Colin Moodie	Chief Governance Officer
Laura Byrne	Assoc. Director of Pharmacy
Lorraine Paterson	Head of Integration
Lynda Bennie	Head of Clinical Governance
Martin Thom	Head of Integration

3.2. The attendance record for the CCGC meetings is attached at Appendix1.

3.3. Meetings

The Committee has met on 4 occasions during the period from 1 April 2019 to 31 March 2020

- 20 June 2019
- 22 August 2019
- 7 November 2019
- 28 February 2020

3.4. Business

The schedule of business is set out in Appendix 2. In addition to papers, the Committee has received presentations on:

- Public Health Profile of Falkirk IJB Population
- National Interim Framework for Adult Protection Committees for conducting a significant case review.

4. CONCLUSION

- 4.1. Assurance and governance are provided to a large extent by having an oversight and adequate reporting mechanisms from the various NHS committees, Public Protection Groups and Health and Social Care groups within the governance infrastructure. These groups demonstrate in-depth consideration of broad agendas. While much of this is a 'maintenance' agenda, there is also scrutiny of proposed changes to systems and processes that deliver improvement to the quality of care delivered by the Health and Social Care Partnership.

IJB Clinical and Care Governance Attendance Record April 2019 – March 2020
Appendix 1

Members		20-Jun-19	22-Aug-19	7-Nov-19	28-Feb-20
Julia Swan	Chair (resigned January 2020)	P	P	P	x
Fiona Collie	Vice Chair	P	P	P	P
Jen Kerr	Third Sector Interface Representative (effective from September 2019)	x	x	A	P
Margo Biggs (non-voting)	Service User Representative	P	P	P	A
Roger Ridley (non-voting)	FC Staff Representative	A	P	P	P
Professional Advisors					
Andrew Murray	Medical Director	P	P	A	P
Angela Wallace	Nurse Director	A	P	P	A
Bette Locke	Assoc. Director Allied Health Professions	A	P	P	A
Colin Moodie	FC Chief Governance Officer	P	P	A	A
Ellen Hudson	Depute Nurse Director	A	P	P	P
Joe McElholm	Head of Service SWAS (retired July 2020)	P	x	x	x
Laura Byrne	Assoc. Director of Pharmacy	P	A	A	A
Lorraine Paterson	Head of Integration(effective from July 2020)	x	P	A	A
Lynda Bennie	Head of Clinical Governance (effective from October 2020)	x	x	P	P
Martin Thom	Head of Integration (effective from July 2020)	x	P	P	P
Patricia Cassidy	Chief Officer	A	P	P	P
Sara Lacey	Chief Social Work Officer	P	P	P	P
In attendance for agenda reports					
Jack Frawley	Committee Services Officer	P	P	P	P
Elaine Kettings	Head of Person Centred Care	x	x	x	P
Gemma Ritchie	Lead Officer Adult Support & Protection	x	x	x	P
James Foley	Service Manager	x	x	x	P
Kirsten Hainey	Speciality Registrar Public Health	x	x	P	x
Louise McKay	Nurse Consultant - Older People	x	x	x	P
Oliver Harding	Consultant in Public Health	x	x	P	x
Patricia Miller	Lead Nurse Infection Control	x	P	x	P
Suzanne Thomson	HSCP Senior Service Manager	P	A	A	P
Stuart Irwin	Graduate Committee Services	x	x	P	x

Key: P Present
A Absent

Schedule of Business Considered April 2019 – March 2020

Appendix 2

Date	Title of Business Discussed	Noting / Decision
20 June 2019	Minute of previous meeting 7 February 2019	Decision
	Action Log	Noting
	Terms of Reference – relationship between NHS Clinical Governance Committee and the Integration Joint Board's Clinical and Care Governance Committee	Decision
	Work-plan	Decision
	IJB Strategic Plan 2019 -2022	Decision
	Summerford Care Inspectorate Report	Noting
	Home Care Services Care Inspectorate Report	Noting
	Gabapentinoid Prescribing within NHS Forth Valley 2017 – 2019	Noting
	Risk Register	Noting
22 August 2019	Minute of previous meeting 20 June 2019	Decision
	Action Log	Noting
	Presentation on Public Health Profile of Falkirk IJB Population (carried forward to November 2019)	Noting
	Terms of Reference	Decision
	Falkirk Community Hospital Assurance Update	Noting
	National Health and Social Care Standards	Noting
	Healthcare Associated Infection Control Quarterly Report April – June 2019	Noting
	Minute of previous meeting 22 August 2019	Decision
	Action Log	Noting
7 November 2019	Presentation on Public Health Profile of Falkirk IJB Population	Noting
	Programme of Meetings and Membership	Decision
	Referral from Clinical Governance Committee: Adverse Events Management: NHS Self-Evaluation Report	Noting
	Unannounced Healthcare Environment Inspection Report	Noting
	HSCP Complaints Performance April – August 2019	Noting
	Quality & Safety of Care in Falkirk Community Hospital	Noting
	Exclusion of Public: Outcome of Complaint	
	Minute of previous meeting 7 November 2019	Decision
	Action Log	Noting
28 February 2020	Presentation and Report on National Interim Framework for Adult Protection Committees for conducting a Significant Case Review	Noting
	Mental Welfare Commission Visits	Noting
	Quality and Safety of Care in Bo'ness Community Hospital	Noting
	Reducing the Risk of Falls and Falls with Harm	Noting
	Healthcare Associated Infection – Winter Performance Report	Noting
	Complaints, How they are dealt with and experiences	Noting
	The Mental Welfare Commission – Themed visit report to people with autism and complex needs	Noting
	Mental Welfare Commission Scotland Investigation	Noting