



Integrated Governance Committee
Monday 1 November 2021
1.30pm – 3.30pm, MS Teams meeting

Present Mrs Lesley Bowie (Chair)
Mr Bob Martin (Vice Chair)
Mr Michael Breen, Non-Executive Board Member
Ms Linda Semple, Non-Executive Board Member
Ms Jean Ford, Non-Executive Board Member

In Attendance Prof Hazel Borland, Interim Chief Executive
Dr Crawford McGuffie, Medical Director
Mr Derek Lindsay, Director of Finance
Mrs Jennifer Wilson, Interim Nurse Director
Mrs Kirsti Dickson, Director of Transformation and Sustainability
Mr Hugh Currie, Assistant Director for Occupational Health, Safety and Risk Management (For item 4)
Mrs Shona McCulloch, Head of Corporate Governance
Miss Ashleigh Kennedy, Corporate Secretary (Minutes)

Action

1. Apologies

Apologies were noted from Sarah Leslie and Margaret Anderson.

2. Declaration of Interests

There were no declarations of interest.

3. Caring for Ayrshire (CfA) update

The Director of Transformation and Sustainability, Kirsti Dickson, highlighted that a CfA Board workshop would take place later in November which will provide an opportunity to discuss a range of updates on the CfA programme with Board Members.

Mrs Dickson updated members on the progress of the submission of the programme initial agreement (PIA) to the Scottish Government Capital Investment Group (CIG). An agreed position had now been reached to procure healthcare planner support to the programme of work via an external procurement process. The healthcare planners would work with NHS Ayrshire & Arran over the next few years to support key elements of the programme, further define the model of care and link in with the capital processes. The key documentation was currently being re-drafted to fulfil the procurement piece and it was hoped that healthcare planners will join the CfA programme early in 2022.

Mrs Dickson updated members on the awareness raising and collaborative engagement work on designing services and buildings. This work had been paused due to the pandemic and was now being re-positioned to update the key messages and methodology to allow work to start in the new year.

In response to a question regarding the decision-making process for going to external healthcare planners rather than internal, Mrs Dickson advised that this decision was reached due to the skills, expertise, and availability of external healthcare workers however this will be combined with a wider variety of internal capacity across teams. Mrs Dickson also highlighted the importance of delivering services in the right place by using digital technology and distributed working for the whole service model whilst recognising that different kinds of spaces may be needed for staff moving forwards.

4. Strategic risk register

The Assistant Director for Occupational Health, Safety and Risk Management, Mr Hugh Currie, presented the six monthly Strategic risk register report and highlighted the following key points:

- Integrated Governance Committee have responsibility for scrutiny and monitoring of two strategic risks; the first relates to the delivery of CfA programme and the second relates to effective engagement and communication on health and care services. Mrs Dickson as the lead Director for these risks provided assurance that work continued to mitigate these risks
- Appendix 1 provided an update of current objectives. Regular progress updates are provided and discussed by the Risk and Resilience Scrutiny and Assurance Group (RARSAG) every 6 months.
- Appendix 2 provided the status of the strategic risk register and flow through to governance committees. The high-level summary now includes risks that were previously included on the separate Covid Risk Register. The risks have all been allocated a strategic objective.
- A separate Covid risk register was used during the pandemic to demonstrate through the Emergency Team Meetings (EMT) that these risks were actively identified. These risks have been incorporated into the strategic risk register where agreed by RARSAG. Mr Currie highlighted the differences between the position in early 2021 and the current position of October 2021 noting that the risks from the covid register had either been terminated, moved to an operational risk or a strategic risk
- Appendix 3 presented the detail for each Strategic Risk.

Members discussed the paper and were assured of the work being done to manage strategic risks.

Outcome: Members endorsed the approach and supported the paper to submit to Audit and Risk Committee and thereafter the NHS Board.

5. Minutes of the Meeting held on 19 April 2021

The minute of the meeting held on 19 April 2021 was approved as an accurate record.

6. Matters Arising

Paper 3a - The action log had previously been circulated to members and it was noted that there are 3 completed items.

Paper 3b - The Chair, Mrs Lesley Bowie, highlighted that the format of the workplan was clear and showed changes clearly.

The Head of Corporate Governance, Mrs Shona McCulloch, advised that a clash had been identified for the next Integrated governance committee date. A new date would be identified to tie in with a review of the draft internal audit plan and advised to members in due course.

7. Corporate Governance learning and improvement plan

Mrs McCulloch presented the Corporate Governance learning and improvement plan and highlighted the following key points:

- Progress has been limited due to workforce pressures and additional unplanned priorities.
- There are three actions where deadline extensions have been requested, highlighted in red on the plan for clarity.
- Mrs McCulloch is working closely with the Information Governance team in terms of progressing the protocol and policy guideline as this ties in closely with the email security guidelines.
- Work has paused on the Internal audit recommendation on the controlled documents policy due to system pressures leading to a delay in convening a Short life working group due to the required input from operational colleagues. Mrs McCulloch assured members that background work would continue.
- Advice had been sought from Internal Audit on governance flow mapping and expectations from the internal audit recommendation.
- Reassurance was given that Non-Executive Induction information was updated from feedback received from new non-executive members.

The Chair commented that NHS Ayrshire & Arran had strong governance in place, and she was content that slight delays would not cause a detriment.

Outcome: Members supported the plan and approved revised deadline dates.

8. Internal audit reports

The interim Chief Executive, Professor Hazel Borland presented an approach to strengthen scrutiny and assurance of Internal Audit Reports.

The process had been put in place following discussion between the prior Chief Executive, John Burns and the Chair of Audit and Risk Committee.

Professor Borland acknowledged the limitations on completing actions agreed pre-pandemic and during the pandemic and welcomed governance committees understanding in terms of the ability to take these actions forward during the last 20 months. The proposal highlighted the clear structure and path in terms of outlining the responsibility of the appropriate directors and the timelines of when the report is required to be tabled at the Audit and Risk committee and through appropriate governance committees. The corporate management team (CMT) have been sighted on this work and Mr Derek Lindsay has taken leadership of this.

Members welcomed this strengthened scrutiny and discussed the importance of accurate and realistic timescales and the focus of internal audit. Members were reassured that experienced internal auditors look at all aspects of the report and link this with the Strategic risk register.

Outcome: Members endorsed the approach to strengthen scrutiny and assurance of Internal Audit Reports.

9. Corporate governance arrangements

Professor Borland presented a proposal agreed with the Board Chair to adopt flexible corporate governance arrangements across Governance committees. This would support operational colleagues at a time when the organisation is under significant pressure across the whole health and care system.

Professor Borland reminded members that at Integrated Governance Committee on 19 April 2021 Members supported a planned step down of EMT arrangements as we moved forward with remobilisation and recovery. She referred to the update at the NHS Board meeting on 4 October and briefings provided to Board Members over recent months regarding reinstated EMT arrangements and ongoing system pressures.

The proposal set out a flexible approach to lighten governance committee agendas to minimise the impact on operational and clinical colleagues in supporting these meetings.

The Board Chair and Chief Executive would keep these arrangements under review. The proposal will be submitted to the NHS Board on 29 November 2021.

Prof Borland gave assurance that Board would be kept updated on system pressures and that she and the Board Chair would keep these arrangements under review. Any further changes to corporate governance would be advised to Members. A letter from Richard McCallum, Scottish Government was shared with Members and this advised that Chairs were able to be flexible whilst keeping Scottish Government sighted of any changes.

Prof Borland updated Committee on current system pressures across the health and care system and referred to the recent briefing regarding capacity within acute services. She gave assurance to members that staff were working tirelessly to improve the situation however significant pressures remain. The Cabinet Secretary and Scottish Government colleagues have been made aware of the position.

Members discussed the flexible approach proposed and agreed that lighter agendas with focused papers would be beneficial. The Chair reminded members to read papers prior to meetings to allow for short and sharp meetings.

Outcome: Committee members endorsed the flexible arrangements as described for Governance committees and that this will remain under review.

10. Risk appetite statement

Prof Borland presented a recommendation from Corporate Management Team to defer the two-yearly review of the Board's Risk Appetite Statement to May 2022. This has been agreed by the RARSAG and supported by CMT. This had been due in May 2021 but delayed due to the impact from the pandemic and system pressures.

Integrated Governance Committee, representing the Board governance structure, supported this approach.

In response to a question, Prof Borland advised that the bi-annual review of the Risk Appetite Statement is agreed local policy and reassured members that the organisation has a strong risk appetite statement.

The Chair added that a review in 2022 would be beneficial as a number of new Board Members had been appointed since the statement was last reviewed and a risk management Board workshop would be arranged.

Outcome: Members agreed the proposal to defer review of the Risk Appetite for a year to May 2022.

11. Key issues to report to the NHS Board

Members agreed the following key issues to report to the NHS Board on 29 November 2021:

- Caring for Ayrshire update
- Internal audit report assurance process
- Strategic risk register
- Corporate governance arrangements

12. Risk issues to report to the Risk and Resilience Scrutiny and Assurance Group


There were no risk issues to report.

13. Any Other Competent Business

There was no other business.

16. Date and Time of Next Meeting

Post meeting: Date agreed of Monday 7 February 2022

Signed (Chair): 

Date: 07/02/2022