ITEM No ...9......



REPORT TO: INTEGRATION JOINT BOARD - 27 OCTOBER 2020

REPORT ON: GOVERNANCE ACTION PLAN UPDATE REPORT – ESCALATION FROM

THE PERFORMANCE & AUDIT COMMITTEE

REPORT BY: CHIEF FINANCE OFFICER

REPORT NO: DIJB42-2020

1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to provide the Integration Joint Board with an overview of the delays in progressing a range of governance actions as set out in the Governance Action Plan and outlines how these will be addressed.

2.0 RECOMMENDATIONS

It is recommended that the Integration Joint Board (IJB)):

- 2.1 Notes the content of this report.
- 2.2 Notes the reasons why actions have not been completed within timescales initially proposed in the Governance Action Plan as outlined in Appendix 1.
- 2.3 Notes the tasks assigned to individuals in the Governance Action Plan and initiatives proposed as outlined in Appendix 2, in order to move these outstanding actions to a conclusion.
- 2.4 Instructs the Chief Officer and Chief Finance Officer to ensure these initiatives are implemented in order to strengthen the governance arrangements in place within the IJB's overall governance framework.

3.0 FINANCIAL IMPLICATIONS

3.1 None.

4.0 MAIN TEXT

- 4.1 The Governance Action Plan was presented and approved at the Performance and Audit Committee meeting of the 25th March 2019 (Article VIII of the minute of the meeting refers) in response to a recommendation within Dundee Integration Joint Board's Annual Internal Audit Report 2017/18. This action plan enables the PAC to regularly monitor progress in implementing a range of identified actions from internal and external audit reports or from other relevant reviews and understand the consequences of any non-achievement or slippage in strengthening its overall governance arrangements. The PAC remitted the Chief Finance Officer to present an update progress report to each PAC meeting. The currently outstanding actions, which have not been completed within the initially agreed timescale are noted in Appendix 1.
- 4.2 Members of the IJB will note a delay in progressing a range of actions as set out in the report. This includes actions to be addressed through the updated Workforce and Organisational Development Plan, progressing the actions identified through the Internal Audit Review of Risk Management Arrangements and other substantive internal and external audit reports. These and other delays have been due to challenges in meeting a range of priorities with limited resources available to progress within the Health and Social Care Partnership, reliance on partner bodies to take forward some actions and more recently compounded by limited working

arrangements and competing priorities in response to Covid-19. Progress is being made in strengthening the support structure and realign priorities to ensure these actions are completed over the course of this financial year. While the delay in progressing a number of improvement actions has been noted by both internal and external audit, this has not resulted in significant concerns as to the IJB's overall governance arrangements and systems of control.

4.3 Notwithstanding this, the Chief Internal Auditor has recommended within their Annual Internal Audit Report that the delay in implementing these actions is escalated from the Performance and Audit Committee to the Integration Joint Board through a report outlining the reasons for the delays and actions required to make progress with these:

"Alongside proper monitoring of agreed governance improvement actions, we would recommend that a clearer escalation route of such issues encountered is needed to prompt the IJB to determine any remedial actions to be taken. Barriers to achievement and solutions to address these should be clearly identified and the Chair's Assurance report should clearly identify these key governance issues so that the IJB understands their importance, impact and is able to take appropriate action The discussion should include how to address issues involving Partners, with further escalation to the Working Together Forum, where the Chairs, Council Leaders. Chief Executives and Chief Officers from all partner bodies meet"

4.4 The agreed Management Response & action to the Internal Audit recommendation was that:

"The issue of delays in completing agreed improvement actions is recognised and accepted as an area of improvement. A further review of progress of the Governance Action Plan and agreement of the escalation process will be brought to the meeting of the Performance and Audit Committee in September 2020 and reflected in the Chairs Assurance report to the IJB for further consideration by the wider IJB membership."

The range of high level areas where a number of issues outstanding and proposed action to draw these to a conclusion is shown in Appendix 2 to this report.

5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any policy implications in respect of Equality Impact Assessment and Risk Management. There are no major issues.

6.0 RISK ASSESSMENT

This report has not been subject to a risk assessment as it relates to the development of an action plan in line with the findings of the Annual Internal Audit Report.

7.0 CONSULTATIONS

7.1 The Chief Officer, Chief Internal Auditor and the Clerk were consulted in the preparation of this report.

8.0 BACKGROUND PAPERS

8.1 None.

Dave Berry Chief Finance Officer DATE: 2nd October 2020

Performance and Audit Committee Report	Audit Recommendation	Agreed Action	Original Action By / Date	Red: Not Started Amber: In Progress Green: Complete	Remedial Action/Comments	Revised Target Completion Date
Dundee Integration Joint Board Clinical, Care and Professional Governance Internal Audit Review (PAC9-2018) 13th February 2018	A review should be undertaken to establish or update the remits of the PAC, R2 and Forum in relation to clinical and care governance. The remits should set out reporting lines and be translated into annual work plans for each group. This should ensure reports, both for the purpose of assurance as well as for implementation or delivery, go to the most appropriate group.	Undertake review as outlined in the Audit Recommendations, setting out the remits of the PAC, R2 and Forum, and the reporting lines between all three. This process should also be followed for the Mental Health Governance Group to ensure appropriate lines of communication into the DHSCP governance processes.	Lead Allied Health Professional (Forum) Clinical Director (R2) Chief Finance Officer (PAC) Associate Nurse Director - Mental Health and Learning Disabilities 31 March 2018	AMBER	Review of the CCPG forum and the CCPG Group has led to the development of primary governance groups under each locality manager. Each Primary Governance Group is to report directly into the CCPG Group. Terms of reference are in development for the primary governance groups, which link directly through CCPG Group and Clinical Quality Forum ensuring assurance process from service level to CQF. CCPG Forum will continue to operate as an avenue for service managers to share good practice and have dedicated space to discuss	March 2021

				challenges across the Partnership.	
In addition to the 6 domains of clinical and care governance across delegated services, this review of remits needs to give consideration to: - Hosted services - Information Governance - Care Commission reports - Risk	Clarify and agree datasets and information to be presented at each group and associated timescales to ensure coordination of governance process.	Lead Allied Health Professional / Head of Service, Health and Community Care 30 June 2018	AMBER	A reporting table has been developed in the Dundee Partnership outlining the expectation and reporting detail across different groups. This reporting table has been adopted by all three Partnerships. The Getting it Right for Everyone – A CCPG Framework is currently under review with a cross Tayside working group. This group is building on work already completed on reporting datasets which includes inspections reports, risks, adverse events etc.	December 2019 December 2020
It is recommended that any new arrangements be considered and approved by the IJB or a nominated Committee/group.	The IJB will formally request that the Chair of the R1 Group advise the IJB of performance of R1 and any new arrangements to be implemented. Chief Officer of DIJB to clarify reporting arrangements between R1 and IJB.	Chief Officer Lead Allied Health Professional / Head of Service, Health and Community Care 31 July 2018 (To allow time for R1 meetings to run).	AMBER	Working group established at Tayside level which will support and clarify reporting arrangements. A regular report is provided to the CQF and the Head of Service and/or Lead	October 2019 March 2021

	Regular representation at the R1 and CQF will be provided from the R2 Group.			AHP attend to speak to the report at each meeting.	
Work undertaken to map out the assurance routes for the key domains should be further augmented by a mapping to the functions set out in the Appendix to the Integration Scheme, setting out all delegated functions, with priority given to the areas of highest importance/risk.	Integration scheme delegated functions will be mapped to ensure forum membership reflects the breadth of delegated functions. Service reports and performance data will reflect the breadth of the delegated functions ensuring that reports to the IJB also reflect the breadth of the delegated functions.	Lead Allied Health Professional / Head of Service, Health and Community Care 30 April 2018	AMBER	Programme reporting covering all services will all be completed by June 2019. Schedule of services confirmed and membership extended to ensure all areas are considered by the R2 group. The development of the Primary Governance Groups will ensure comprehensive reporting across all aspects of the Partnership. There are a number of anomalies with some teams sitting outwith Locality Manager structures and these teams will report directly to CCPG Group. Further work to identify core and service datasets is ongoing, locally for DHSCP and across Tayside via the	March 2021

					Getting it Right for Everyone Review Group. This work is nearing completion.	
	Agreed levels of reporting should be reviewed against the governance principles appended to this report.	Further work will be done with the reporting templates to refine areas of common risk across the HSCP to support identification and mitigation of identified risks.	Lead Allied Health Professional / Head of Service, Health and Community Care 30 June 2018	AMBER	Work continues to progress the reporting arrangements but not yet complete – revised timescale of end of December 2019.	March 2021
Dundee Integration Joint Board Workforce Internal Audit Review (PAC8-2018) 27th March 2018	Work to fully implement the actions in the Workforce and Organisational Development Strategy should continue with regular reporting on progress towards implementation being submitted to the IJB. In addition, Locality Managers should strive towards ensuring that the DH&SCP culture becomes fully embedded. Engaging staff in developing and maintaining the partnership culture as well as sharing and embedding the guiding principles should assist with this.	The DH&SCP management team fully recognises the need to ensure the vision and objectives of the Workforce and Organisational Development Strategy become embedded within the partnership and acknowledged that this is a fundamental element of the partnership's continued development. Implementing in full the actions in the Strategy has been identified by the operational management team as one of the key actions to be delivered over the next 6 months.	Head of Health and Community Care / Head of Finance and Strategic Planning August 2018	RED	Review of Workforce and Organisational development strategy as companion document to the review of Strategic Plan.	March 2021

Consideration should be given to developing a formal Service Level Agreement (SLA) detailing all key corporate support services to be provided to the DH&SCP by Dundee City Council and NHS Tayside. The service provided should be regularly reviewed along with the SLA to ensure that the defined support is being provided and the SLA continues to be appropriate. Alternatively, in the absence of a SLA, specific details regarding the types and level of support expected should be clearly documented and formally agreed by senior management at the DH&SCP, Dundee City Council and NHS Tayside. In addition, regular reports on the support service requirements should be provided to the IJB.	The DHSCP Management Team continues to monitor the level of support being provided to the IJB from NHS Tayside and Dundee City Council on an informal basis and responds to the organisations in relation to shortfalls in service provision accordingly. Given the current stage in the partnership's development, with greater knowledge and awareness of what the partnership needs to support its business, the service will progress with its partners, a more formal statement of the expected level of support which can subsequently be monitored and report to the IJB.	Head of Finance and Strategic Planning August 2018	RED	Current level of resources have not enabled progress to be made. Proposals for enhanced IJB support functions being developed within the H&SCP to assist taking this and other governance issues forward. Review of Integration Scheme will take this area into consideration	March 2021
Future workforce plans for DH&SCP should include plans for all areas of delegated responsibility, tailored to deliver the relevant elements of the Strategic Plan.	As DH&SCP continues to evolve, with the continued development of integrated locality based services and redesign of services, the shape and mix of the workforce required to deliver on the IJB's strategic	Head of Health and Community Care / Head of Finance and Strategic Planning	AMBER	Updated Workforce and Organisational Development Plans, compatible with the revised Strategic and Commissioning Plan due to be presented to the IJB in June 2020	March 2021

	Plans should take account of demand for and availability of staff to maximise the use of resources within the DH&SCP.	objectives is becoming clearer and will be reflected in future integrated workforce plans. While acknowledging that further national guidance is awaited on this matter, the first integrated workforce plan will be developed over the next 6 months.				
Action Plan in Response to the Services for Older People (Edinburgh) Inspection Report (PAC 29-2018) 29th May 2018	Action Plan was requested by the PAC in relation to lessons learned from the Edinburgh inspection and what improvements would be required in Dundee.	A wide range of actions are reflected in this detailed action plan therefore it is not feasible to reflect in this plan – a separate update report will be provided at the May 2019 PAC.	Various with latest timescales for completed action identified as March 2019.	RED	Report to now be presented to the March 2020 PAC meeting Work on collating and rationalising improvement plans and action plans is underway in recognition that a number of issues have not been actioned.	March 2021
Risk Management Action Plan (PAC8-2019) 12 th February 2019	Action Plan was required to respond to the findings of the Risk Maturity Assessment presented to the PAC on the 25th September 2018.	A wide range of actions are reflected in this detailed action plan therefore it is not feasible to reflect in this plan. A separate update report will be provided to the September 2019 PAC meeting as agreed.	Chief Finance Officer September 2019	AMBER	Report DIJB37-2020 presented to the August 2020 IJB Discussions held between risk management functions of Dundee City Council and NHS Tayside to agree way forward for actions. Follow up meetings with partners across Tayside scheduled to	December 2020

					enable actions to be completed A separate report to the PAC has been presented September 2020	
2017/18 Annual Internal Audit Report – Action Plan Update (PAC7-2019) 12 th February 2019	Review of Action Plan developed to respond to the range of areas for improvement arising from the IJB's 2017/18 Annual Internal Audit Plan.	Wide range of actions detailed in the action plan. Chief Finance Officer to provide an update to the PAC by June 2019 outlining the status of the outstanding actions.	Not Applicable			
The following reflects the detail of this action plan.	Clarification of deputising arrangements for the Chief Officer to be presented to the IJB.	Agreement to be reached between Chief Executives of Dundee City Council and NHS Tayside.	Revised February 2019.	RED	Discussion to be held between Chief Executives	December 2020
	Consideration should be given to providing the IJB with reporting on workforce issues including the Workforce and Organisational Development Strategy as well as the partnership forum.	Complete review of Workforce and Organisational Development Strategy and provide update to IJB. Consider frequency and content of update report of activities of Staff Partnership Forum.	Revised April 2019	AMBER	Updated Workforce and Organisational Development Plans, compatible with the revised Strategic and Commissioning Plan due to be presented to the IJB in February 2020.	March 2021

H	Development of Large Hospital Set Aside arrangements in conjunction with the Scottish Government, NHS Tayside and Angus and Perth and Kinross Integration Joint Boards.	Work progressing with NHS Tayside in association with the 3 Tayside IJB Chief Finance Officers and Scottish Government to conclude the methodology or determining and monitoring the Large Hospital Set Aside to inform commissioning decisions as set out within the legislation.	Revised - March 2019	AMBER	Value of Large Hospital Set Aside agreed for inclusion in 2020/21 budget including recognition of improvements made by Dundee HSCP in reducing emergency bed days resulting in the release of £1m of funding from NHS Tayside to Dundee IJB's delegated budget. Further work required to ensure robust commissioning arrangements in place for future budgets.	March 2021
	Development of improved Hosted Services arrangements around risk and performance management for hosted services.	Current hosted services arrangements subject to discussion across the 3 Tayside Chief Officers and Chief Finance Officers. Proposal to be brought forward to IJB and PAC before the end of the financial year.	Revised June 2019	AMBER	Discussions ongoing with neighbouring IJB's re responsibilities around hosting arrangements.	March 2021
	Further develop the Integration Joint Board's local Code of Governance.	To be developed as suggested.	Revised April 2019	AMBER	Clerk to the Board developing arrangements in conjunction with Chief Finance Officer. Actions postponed as a result of pandemic working restrictions	December 2020

Further develop performance report information into a delivery plan framework to ensure IJB fulfils its remit in delivering the direction of travel within the Strategic Commissioning Plan.	To be taken forward by the Strategy and Performance Team, aligned with the review of the Strategic and Commissioning Plan.	Revised July 2019	AMBER	Will form part of revised performance monitoring reporting into 2019/20 following approval of revised Strategic and Commissioning Plan. Work has started on performance against 4 high level indicators in plan. Needs further development in line with any revisions to the SPG structure.	March 2021

Audit Scotland Annual Audit Report 2018/19	A long-term financial strategy (5 years or more) supported by clear and detailed financial plans (3 years or more) should be prepared.	Build on the three year financial framework developed during 18/19, which sets out the estimated resources and anticipated increase in expenditure from rising demand and costs of providing services. Continue to work with partner bodies to align longer term financial planning processes and the development of long-term financial strategy on how to close the gap between funding and service provision.	Chief Finance Officer March 2020	AMBER	Work continues to develop the longer term financial framework as part of the budget setting process.	December 2020
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Tayside and co arrangements attendance by appointed as tl	for regular role of registered med practitioner providing	nting the dical December 2019 primary issue le IJB Board he Chair		Clerk has written to NHS Tayside and awaits a formal response. 23-01-20 NHS have not confirmed a replacement for Registered Medical Practitioner as yet. (NHS have also to confirm replacement for one voting member on Dundee IJB.	November 2020
The IJB should partner organisensure an agreapproved prior the year.	sations to was provided at the Loed budget is budget meeting of 30th	JB Officer oth al budget as dicative or partner	AMBER	Continues to be discussed at budget meetings with the parties. Timescale impacted by Covid-19 response for 2020/21 budget	March 2021
The IJB should combine finance reperformance repensure that me clear sight of the variances againg terms of services.	on how to combine fir and performance reporting to a format which provid information to users.	nancial Officer orting in	AMBER	Progressing slower than as planned as a result of Covid-19 required changes to working arrangements /pressures	March 2021

	The IJB should review its reserves to ensure they are adequate	Reserves can only be accumulated through year end surpluses of funding. Ensure robust budgeting, monitoring of identified savings and financial monitoring processes in place to identify opportunities to enhance reserves position.	Chief Finance Officer March 2020	AMBER	Levels of uncommitted reserves are anticipated to reduce in response to the anticipated overspend. Reserves have been reviewed and are inadequate in terms of the Reserves Policy. IJB unlikely to be in a position of increasing reserves given current budget pressures	March 2021
	The IJB should: • review its processes for minute taking.	Further development of the IJB and PAC minutes and papers to ensure full transparency and accurate recording of the discussions, questions asked and assurances provided.	Chief Officer/ CFO/ Clerk to the Board September 2019	AMBER	Format of minutes reflects that of parent organisation providing this support service function. Further discussions to be held with Audit Scotland and Clerk to the Board	December 2020
	Mechanisms and reporting arrangements should be implemented to provide assurance to the Chief Officer and the Board that the IJB has arrangements in place to demonstrate that services are delivering Best Value.	Further learning from other IJB's reporting with regards to Best Value to be gained and considered for reflection in the 2019/20 Annual Performance Report.	Chief Finance Officer June 2020	GREEN	Progressing as planned.	September 2020
2019/20	Implementation of and reporting on all outstanding recommendations arising from the Ministerial Steering Group		Chief officer/ Chief Finance Officer	AMBER		December 2020

	report on Health & social care Integration			
2019/20	Further development of governance arrangements considering agreed governance principles and updated advice from the Scottish Government Health & Social care Division	Chief officer/ Chief Finance Officer	AMBER	December 2020

The following table indicates actions delegated to individuals and initiatives required to help achieve completion dates for the outstanding actions set out in the Governance Action Plan:

Each x represents a specific action required by this person

Review with Outstanding Actions	Report No.	Lead Health Professional (Forum)	Clinical Director (R2)	Chief Finance Officer (PAC)	Assoc Nurse Director - MH&LD	Head of Service, Health & Community Care	Chief Officer	Partner body Chief Exec's	3 Tayside IJB's & NHS Tayside	3 Tayside IJB's	Clerk to the IJB	Initiative required to allow progress
DIJB Clinical, Care and Professional Governance Internal Audit Review	PAC9- 2018	xxxxx	х	х	x	xxxx	x					The ongoing review of the GIRFE framework means that some of these actions cannot be signed off until this is completed. The lead for signing off the actions will remain as is, and outstanding actions will be followed up as part of the Governance Action Plan updating process.
DIJB Workforce Internal Audit review	PAC8- 2018			xxx		xx						Establish small short-term working group of key officers from operational and support services, staff side/trade union reps and HR with specific deadline to be set in order to develop a Workforce Strategy for the IJB. Outstanding actions in

Review with Outstanding Actions	Report No.	Lead Health Professional (Forum)	Clinical Director (R2)	Chief Finance Officer (PAC)	Assoc Nurse Director - MH&LD	Head of Service, Health & Community Care	Chief Officer	Partner body Chief Exec's	3 Tayside IJB's & NHS Tayside	3 Tayside IJB's	Clerk to the IJB	Initiative required to allow progress
												relation to the development of a form of agreement with the partner bodies for the provision of adequate support functions, this will be taken forward through the review of the Integration Scheme for which preparations are underway.
Action Plan in Response to Older people (Edinburgh) Inspection report	PAC29- 2018					X						Action plan covers 28 actions involving 15 senior managers, some of whom are no longer in the same role. The action plan needs actions updated for current relevance, individual target dates and responsible persons agreed as well as considering the implications of subsequent inspection reports. This will be taken forward by the Head of Service for

Review with Outstanding Actions	Report No.	Lead Health Professional (Forum)	Clinical Director (R2)	Chief Finance Officer (PAC)	Assoc Nurse Director - MH&LD	Head of Service, Health & Community Care	Chief Officer	Partner body Chief Exec's	3 Tayside IJB's & NHS Tayside	3 Tayside IJB's	Clerk to the IJB	Initiative required to allow progress
												Health and Community Care
Risk Management Action Plan	PAC8- 2019			х								An update report was presented to the PAC in September 2020. Actions are now on track to be delivered following formation of a Tayside Risk Management Group chaired by DHSCP Chief Finance Officer.
2017/18 Annual Internal Audit Report	PAC7- 2019			х		х		x	x	x	х	A number of agreements external to the IJB need to be achieved, such as review of hosting arrangements and large hospital set aside. These will be progressed by the HSCP Senior Management Team with the relevant parties

Review with Outstanding Actions	Report No.	Lead Health Professional (Forum)	Clinical Director (R2)	Chief Finance Officer (PAC)	Assoc Nurse Director - MH&LD	Head of Service, Health & Community Care	Chief Officer	Partner body Chief Exec's	3 Tayside IJB's & NHS Tayside	IJB's	Clerk to the IJB	Initiative required to allow progress
Audit Scotland Annual Report 2018/19				XXXXXX			xxx				xx	A number of issues are ongoing targets, which have been partly developed but circumstances this year have prevented finalisation e.g to align budget setting processes, develop a longer term financial planning process, enhance reserves position, combine financial and performance reporting in a different format. The Chief Finance Officer will take these forward with assistance from the newly created Partnership Finance Manager Post.