NHS 24 AUDIT AND RISK COMMITTEE

16 FEBRUARY 2021 APPROVED ITEM NO. 3.0

Approved Minutes of the Audit and Risk Committee Meeting held on Thursday 19 November 2020 at 10am, Committee Room 1, Cardonald

1. WELCOME AND APOLOGIES

Committee Members

Mr Albert Tait Mr Martin Togneri Mr Mike McCormick Ms Liz Mallinson

In Attendance

Dr Martin Cheyne Ms Angiolina Foster Ms Steph Phillips Ms Ann-Marie Gallacher Mr John Gebbie Mr Damien Snedden Mr Kevin McMahon Ms Paula Speirs Ms Yvonne Kerr Ms Julie Clarke Mr Graham Revie Mr Sanny Gibson Ms Maria Docherty Mr Lewis Wilson Ms Linda Davidson Mr David Dougan Mr Andy Robertson

Apologies

Mr Nick Bennett Ms Joanne Brown Dr Laura Ryan Non-Executive Director (Teams) Non-Executive Director (Teams)

Non-Executive Director (Chair) (Teams)

Non-Executive Director (Teams)

Board Chair (Teams) Chief Executive (Teams) Director of Service Delivery (Teams) Chief Information Officer Interim Director of Finance **Deputy Director of Finance** Head of Risk Management & Resilience (Teams) Associate Director Planning & Performance Executive Assistant (Minutes) Redpoll Group Ltd (Item 6.3) (Teams) Staff Side Representative (Teams) Head of Information Governance & Security (Item 10.1) Director of Nursing & Care (Teams) Grant Thornton Interim Director of Workforce (Teams) Senior Programme Manager (Item 6.3) (Teams) ABR Consulting Ltd (Item 6.4) (Teams)

Scott-Moncrieff Grant Thornton Medical Director

Mr Tait welcomed members and attendees to the meeting and introductions took place around the table. Mr Tait welcomed Mr Wilson from Grant Thornton advising he will now attend meetings with Ms Brown.

2. DECLARATION OF INTERESTS

2.1 Mr Togneri's standing declaration as a Non-Executive Board members at the Scottish Ambulance Service (SAS) was noted.

3. MINUTES OF PREVIOUS MEETING

3.1 The minutes of the meeting held on 13 August 2020 were approved as an accurate record of discussions.

4 INTERNAL AUDIT

4.1 Update on Internal Plan 2020/21

- 4.1.1 Mr Wilson presented the progress report to the Committee noting key highlights.
- 4.1.2 Mr Wilson presented the updated Audit Plan reflecting the guidance from the Audit Scotland's Publication for COVID 19. Since August, COVID 19 Response Associated Finance Controls and Revised Governance Arrangements audits have been completed. Through discussions with Management and relevant stakeholders audits for Communications, Mental Health Services and IT and Business Continuity are underway.
- 4.1.3 Further audits discussed for consideration in 2020/21 are the Estates Strategy and Risk Management. Further discussion is required to confirm.
- 4.1.4 The Committee noted the report for assurance.

4.2 COVID Response Audit: Financial Controls

- 4.2.1 Mr Wilson presented the Audit Report to the Committee.
- 4.2.2 Mr Wilson advised reasonable assurance on this audit, which is the highest level of Internal Audit assurance and confirmed Internal Audit are satisfied all approvals are appropriate.
- 4.2.3 The audit considered the design and effectiveness of controls relating to COVID 19 response expenditure and financial monitoring. This included reviewing the controls NHS 24 had established to ensure that reporting to Scottish Government was complete and accurate.
- 4.2.4 Mr Tait thanked the Executive Management Team, Incident Management Team and Finance Directorate for their efforts.
- 4.2.5 Mr Tait requested that this audit report be shared with Board Members for assurance. Action: Ms Kerr
- 4.2.6 The Committee noted the report for assurance.

4.3 COVID Governance Audit

- 4.3.1 Mr Wilson presented the Audit Report to the Committee noting key highlights.
- 4.3.2 Mr Wilson advised reasonable assurance on this audit which is the highest level of Internal Audit assurance. The audit reviewed the design and operation of the temporary governance arrangements implemented by NHS 24 throughout the response to the COVID 19 pandemic.
- 4.3.3 It was noted NHS 24's governance arrangements were in line with other Boards however, confirmed NHS 24 were the only Board to maintain their full Committee governance structure during this time.
- 4.3.4 The key change in the governance structure was the formation of the Incident Management Team (IMT). The IMT is composed of all Directorate Leads that met on a daily basis. The group regularly reports to the EMT and benefits from members who sit on both IMT and EMT to assist accurate escalation and reporting of relevant matters.
- 4.3.5 Ms Foster advised that the EMT are committed to allowing the delegated authority given to IMT to continue after COVID to allow organisational growth. Ms Phillips confirmed the role of IMT has expanded to include Winter Planning and Redesign of Urgent Care, which is working well.
- 4.3.6 Mr Tait requested the report is shared with Board Members for assurance.

Action: Ms Kerr

- 4.3.7 Board Meetings are held virtually, however are not currently open to the public. Ms Speirs confirmed a Once for Scotland approach is being reviewed at National level and a progress update will be shared when available.
- 4.3.8 The Committee noted the report for assurance.

5. RISK MANAGEMENT

5.1 COVID 19 Update

- 5.1.1 Mr Gebbie presented the update to the Committee.
- 5.1.2 Mr Gebbie confirmed NHS 24 have received 100% of Quarter one funding requested. Scottish Government have agreed to fund 70% of agreed forecast spend for the rest of the year and review in January 2021, with an additional allocation received before year end. Written confirmation has been received that if costs are in line with the forecast submission we can phase in 100% of funding on a monthly basis.
- 5.1.3 NHS 24 have received £10m for the Redesign of Urgent Care costs this year. The original forecast was £10.1m, however there is some slippage and therefore are fully funded for this financial year.
- 5.1.4 The main risk identified was funding of COVID 19 costs. However, this risk has significantly reduced given the funding received to date.
- 5.1.5 The Committee noted the report for assurance.

5.2 **Corporate Risk Register**

- 5.2.1 Mr McMahon presented the Risk Register to the Committee.
- 5.2.2 Mr McMahon confirmed there are no new risks added since reporting to the Board meeting on 8 October 2020. It was noted that most of the current risks on the register are related to COVID 19. The full Risk Management process has been maintained throughout the pandemic and Mr McMahon confirmed that the concurrent impact of risk related to IT, estates, staff resource and recruitment, redesign of urgent care and winter pressures continue to be monitored and assessed within that process.
- 5.2.3 Mr Tait particular wanted to review the risks scored at 16 for assurance. The Committee are content that risks: RPND/036117, RPND/038259, RPND037063 and RPND/039309 are reviewed regularly within the responsible primary Committees.
- Responding to a guestion from Mr Tait on Active Governance, Ms Speirs confirmed 5.2.4 there is no need to include this on the Risk Register. It was agreed that Active Governance would be included on the agenda for discussion at the next meeting.

Action: Ms Kerr

5.2.5 The Committee noted the Risk Register for assurance.

5.3 **EU Exit Preparedness**

- 5.3.1 Mr McMahon presented the paper to the Committee.
- 5.3.2 The concurrent risks of COVID19, Winter and EU Exit are expected to increase regarding EU Exit. Financial and supply chain challenges due to COVID 19 are expected to increase as a result. NHS 24 are engaged with EU Exit at National Level.
- NHS 24 are in discussions with our own suppliers to ensure readiness in time for 5.3.3 EU Exit. Immediate impact within our own workforce is not anticipated.
- 5.3.4 Ms Gallacher confirmed all information for ICT status of readiness for suppliers has been captured and is available should any Committee Members require this level of assurance.
- 5.3.5 The Committee noted the report for assurance.

5.4 **Redesign Urgent Care**

- Ms Phillips presented the report to the Committee. 5.4.1
- 5.4.2 Mr Tait thanked Ms Phillips for the update and confirmed this Committee is seeking assurance in the process.
- 5.4.3 Ms Phillips advised the delivery and implementation of the Redesign Urgent Care pilot with Avrshire and Arran has been successful. This has enabled NHS 24 to test the pathway and the robustness as a whole process before national rollout. NHS

24 are reporting a readiness of Amber to the National Programme due to the challenges in workforce numbers and pressures for COVID related absence.

- 5.4.4 In response to a question regarding the employment of staff to support the national rollout, Ms Phillips confirmed temporary contracts are being offered at the moment as there in no confirmed funding beyond March 2021.
- 5.4.5 In advance of the National rollout, final readiness assessments are expected from all Boards by Monday 23 November. The Board Chief Executive's will discuss at their meeting on 24 November to reach a collective formal view of readiness. Feedback will also be provided by Sir Lewis Ritchie shortly afterwards with the final decision to be made by the Cabinet Secretary.
- 5.4.6 Mr McCormick commented on the working relationship with Ayrshire & Arran and asked if a phased approach to rollout would be an option. Ms Phillips advised there would be challenges with a phased approach as this would have an impact on clinical supervision and would not be recommended.
- 5.4.7 The Committee are content with the risk assessment and management actions that are in place to progress the Redesign of Urgent Care pilot underway with NHS Ayrshire and Arran.
- 5.4.8 The Committee noted the report for assurance.

6. Corporate Governance

6.1 Financial Assurance

- 6.1.1 Mr Gebbie presented the report to the Committee.
- 6.1.2 Mr Gebbie confirmed a breakeven position as at September 2020. This is reliant on anticipated allocations of £3.3m being received. £2.7m is the net effect of allocations still to be received for the year, however this includes £4.6m for Mental Health, £1.8m for COVID 19 and £0.6m for MSK being offset by £4.3m of brokerage repayment. Work is continuing with Scottish Government to receive these funds.
- 6.1.3 The 2020/21 SPRA process has started. In year forecasts have been produced and will be monitored. Future plans are being prepared using a template to capture potential investments and saving opportunities. The Committee welcomed the template and content that risks will be identified early.
- 6.1.4 Notification has been received from Audit Scotland confirming a one year extension to our current External Audit Providers.
- 6.1.5 The Committee noted the report for assurance.

6.2 Corporate Governance Activity Report

6.2.1 Mr Gebbie presented the report to the Committee.

- 6.2.2 Mr Gebbie confirmed since the last Audit Committee there have been two new waiver of tenders. One was secured as an emergency response from a specialist cleaning contractor to maintain hygiene standards within our main centre's. The other waiver is an extension to an existing waiver signed in June 2020. This is to ensure the correct skillsets are in place within our ICT Directorate. One new contract was awarded to ensure GP Website provision. This initiated the development and delivery of GP.Scot which aims to contribute to the national digital objectives. One Service Level Agreement relating to the national helpline has been extended due to COVID 19 pandemic and is currently with procurement for review of requirements to year end.
- 6.2.3 The Committee noted the report for assurance.

6.3 Connect Programme: Phase 1c Update

Ms Julie Clarke and Mr David Dougan joined the meeting for this item.

- 6.3.1 Ms Clark advised this update is to provide assurance on the progress of Phase 1c Outline Business Case. The update provided an outline of the current scope of Phase 1c approved by the Connect Strategic Advisory Group. High level options have been identified however further discussion is required to agree on a preferred option that demonstrates value for money.
- 6.3.2 The Committee noted both the level and quality of the risk assessments and the attention given to governance within the management case, relating to the Connect phase 1c business case. They also recognised that the business case would be discussed in more detail at the Planning & Performance Committee and the Board Reserved session once the financial information had been received from the suppliers.
- 6.3.3 The Committee noted the update for assurance.

6.4 ICT Digital Business Case

Mr Andy Robertson joined the Committee for this item.

- 6.4.1 Mr Robertson provided an overview of the Business Case for assurance.
- 6.4.2 The Committee is asked to endorse the content of the Business Case and agree to it progressing to the Board meeting on 10 December. The Committee is content with this approach.
- 6.4.3 The Business Case has been developed from the recent review of ICT and Digital Capability and Capacity. The Business Case has been developed to deliver proposals for organisational change in response to the content of the review.
- 6.4.4 The Business Case has been considered by the Executive Management Team and is currently being considered at the relevant governance Committees before final consideration by the Board.
- 6.4.5 The Committee noted the update of the Business Case for assurance.

6.5 Change Portfolio Board

- 6.5.1 Ms Speirs presented the report to the Committee.
- 6.5.2 Ms Speirs noted the COVID 19 pandemic response and the Redesign of Urgent Care (RUC) is continuing to impact significantly on the workload and resources across NHS 24, in particular the Change Portfolio Programme. The projects to support RUC are Estates Programme, Mental Health Programme and Connect Programme. All other programmes have been reschedule until early 2021 to ensure appropriate focus on RUC.
- 6.5.3 With reference to the Estates Strategy, Mr Gebbie advised the first Estates Workshop is scheduled for next week and this will discuss the demand and capacity of our estate exploring physical distancing/non-physical distancing capacity and what the office of the future looks like.
- 6.5.4 Ms Foster confirmed, even in the course of the pandemic, this is the right time to start preparations as the lease for Cardonald expires in 2022.
- 6.5.5 The Committee noted the report for assurance.

6.6 Estates Update

- 6.6.1 Mr Gebbie provided an update to the Committee.
- 6.6.2 **Lightyear:** The building has been utilised since early October and feedback from staff has been positive.
- 6.6.3 **Cardonald:** Configuration of Rooms 4, 5 and 6 is now complete.
- 6.6.4 **Lumina:** This building was expected to be operational in early November, however due to COVID 19 restrictions, work has been delayed. One floor is expected to be available for use in early December although the other space will be slightly later.
- 6.6.5 **Clydebank:** Discussions are ongoing with West Dunbartonshire Council to locate an appropriate building in Clydebank in time for our exit from the Golden Jubilee National Hospital (GJNH) in October 2021. Property searches are underway and one to one meetings with staff will begin in January 2021. The Estates Business Case for Clydebank will be ready by the end of the financial year.

In partnership with GJNH, NHS 24 have be able to retain some meeting room space in the out of hours period.

- 6.6.6 **Lanarkshire:** NHS 24 have been asked to vacate their office at Hairmyres Hospital. Staff working there will be required to be relocated and discussions are underway with Service Delivery to facilitate the move.
- 6.6.7 **Aberdeen:** NHS 24 have been asked to vacate the office in Aberdeen. This is now complete as there were currently no staff at this location.
- 6.6.8 The Committee noted the update for assurance.

6.7 Annual Review Update 2019/20

- 6.7.1 Ms Speirs provided the update to the Committee.
- 6.7.2 The Annual Review feedback letter from Scottish Government has recently been received. This will be reviewed although it was noted this is a positive response with recognition for NHS 24's efforts during COVID 19. Ms Speirs advised there were no specific actions identified for NHS 24.
- 6.7.3 The Committee noted the update for assurance.
- 6.8 Information Governance and Security Report Mr Sanny Gibson joined for this item.
- 6.8.1 Mr Gibson presented the report to the Committee.
- 6.8.2 This report provides assurance on the effectiveness and completeness of Information Governance and Security activity for the period 1 July 2020 to 30 September 2020.
- 6.8.3 It was noted there is an increase in Data Subject Access Requests (DSARs) from the same quarter last year. To facilitate these requests staff are required to access call records which is very time consuming.
- 6.8.4 Both a website vulnerability and external vulnerability assessment across the NHS 24 estate is now complete. The results are being considered and any recommended remediation will be undertaken. There is a requirement for NHS 24 to undertake an annual test which will aid with the security of the environment and compliance to audit actions and legislative requirements.
- 6.8.5 The Web Development Team now have access to the National Cyber Security Centre WebCheck Service. This allows them to work directly with the web site suppliers on remedial action(s) to any WebCheck reported findings.
- 6.8.6 The Committee noted the report for assurance.

6.9 Integrated Governance: Key Points Arising

6.9.1 The Committee is assured that key points discussed at this meeting are already being discussed at other Committees.

6.10 Audit and Risk Committee Workplan

The Committee approved the work plan for 2020/21 noting that the External Audit Plan will now be scheduled for the February Committee.

Action: Ms Kerr

7. MATTERS ARISING FROM PREVIOUS MEETINGS

7.1 Review of Action Log

7.1.1 After discussion the Committee agreed actions 592, 615, 664, 665, 666, 667, 669, 670, 671, 673, 674, 675 and 676 recommended for closure can be removed for the action list.

The Committee agreed actions 591, 629, 655 and 668 should remain on action list with an update for the next meeting.

8 AGREED COMMITTEE HIGHLIGHTS TO THE BOARD

8.1 The Committee highlights to the Board report will be produced after the meeting and sent to the Chair for approval prior to the Board Meeting due to be held on 10 December 2020.

Action: Ms Kerr

9. ANY OTHER BUSINESS

9.1 The Chair noted that the Audit and Risk Committee Annual Effectiveness Review has been rescheduled to 16 February 2021

10. DATE & LOCATION OF NEXT MEETING

The date of the next meeting of the Committee is Tuesday 16 February 2021 at 10am, Teams/Committee Room, Cardonald.

11. PRIVATE MEETING OF THE AUDIT AND RISK COMMITTEE

11.1 A private meeting was held with Interim Director of Finance and members of the Committee.