

**NHS 24
AUDIT AND RISK COMMITTEE**

**3 JUNE 2021
FOR APPROVAL
ITEM NO. 3.0**

**Draft Minutes of the Audit and Risk Committee Meeting held on
Tuesday 16 February 2021 at 10am,
Microsoft Teams**

The Committee is asked to approve the Minutes of the Audit and Risk Committee held on 16 February 2021 as an accurate record of discussions.

1. WELCOME AND APOLOGIES

Committee Members

Mr Albert Tait	Non-Executive Director (Chair)
Mr Martin Togneri	Non-Executive Director
Mr Mike McCormick	Non-Executive Director
Ms Liz Mallinson	Non-Executive Director

In Attendance

Dr Martin Cheyne	Board Chair
Ms Angiolina Foster	Chief Executive
Ms Steph Phillips	Director of Service Delivery
Ms Ann-Marie Gallacher	Chief Information Officer
Mr John Gebbie	Director of Finance
Mr Nick Bennett	Scott-Moncrieff
Ms Joanne Brown	Grant Thornton
Dr Laura Ryan	Medical Director
Mr Damien Snedden	Deputy Director of Finance
Mr Kevin McMahon	Head of Risk Management & Resilience
Ms Paula Speirs	Interim Director of Service Development
Ms Yvonne Kerr	Executive Assistant (Minutes)
Mr Kenny Woods	Employee Director
Ms Maria Docherty	Director of Nursing & Care
Mr David Dougan	Senior Programme Manager (Item 7.1)
Dr Paul Perry	Interim Associate Medical Director

Apologies

Ms Linda Davidson	Interim Director of Workforce
Mr Graham Revie	Staff Side Representative

Observer

Mr Jim Miller	Chief Executive Designate
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Mr Tait welcomed members and attendees to the meeting. Mr Tait welcomed Mr Miller, the incoming Chief Executive to the meeting as an observer. Mr Tait also extended the Committees congratulations to Mr John Gebbie who has been appointed as Director of Finance.

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 19 November 2020 were approved as an accurate record of discussions.

4 INTERNAL AUDIT

4.1 Internal Audit Report Follow Up 2020/21

4.1.1 Ms Brown presented the Follow Up report to the Committee noting key highlights.

4.1.2 Ms Brown presented the Follow Up report noting actions are raised in accordance with recommendations from audit reports. Due to demand on management's time as a result of the COVID-19 pandemic, this Follow Up report is the first presented since November 2019. It was reported that all six overdue actions outstanding from the November 2019 report have now been completed. In relation to the 16 actions arising from the 2019/20 audit, four have been completed, nine are being progressed but not fully complete, and the remaining three actions are not yet due for competition.

4.1.3 Mr Tait suggested that progress on the outstanding actions should be reviewed more fully at the Committee meeting in August 2021.

4.1.4 The Committee noted the report for assurance.

4.2 Update of 2020/21 Audit Plan

4.2.1 Ms Brown presented the Update on the Audit Plan to the Committee.

4.2.2 Ms Brown advised that following the November 2019 meeting, discussions were ongoing in relation to the potential audit of Risk Management. This area has been audited in relatively recently, therefore it was decided not to progress a further audit at this time.

4.2.3 Further discussions with management continues to determine a suitable focus for the final internal audit in 2020/21. It has been agreed with management to conduct an audit on the procurement and distribution of IT hardware to facilitate remote working throughout the COVID-19 pandemic. It was noted an audit on Mental Health Services has also commenced and it is anticipated these will be completed and presented to the next meeting in June 2021.

4.2.4 Ms Brown noted that since the November 2019 Committee the Communications Audit and Follow Up Report have been completed.

4.2.5 The Committee noted the report for assurance.

4.3 Communications Audit

4.3.1 Ms Brown presented the Audit Report to the Committee noting key highlights.

4.3.2 Ms Brown advised reasonable assurance on this audit with one medium and two low rated recommendations. The audit objective was to consider the governance of the communications strategy and plan and the processes and controls in place to mitigate any risks. Winter Planning Campaign and communication with NHS 24 employees regarding estates planning was also considered.

4.3.3 Mr Togneri referred to questions that were circulated regarding the audit prior to the meeting. The Committee were content with the responses given and the consolidated responses will be shared with the Committee.

Action: Ms Kerr

4.3.4 The Committee noted this was a good report and were content with the proposed recommendations.

4.3.5 Mr Tait requested the report is shared with Staff Governance Committee Members for assurance.

Action: Ms Kerr

4.3.6 The Committee noted the report for assurance.

4.4 Draft 21/22 Audit Plan

4.4.1 Ms Brown presented the draft 21/22 Audit Plan to the Committee.

4.4.2 Ms Brown confirmed that due to the ongoing pandemic and new/emerging risks the need to be flexible and agile is paramount. The internal audit programme needs to consider, with sufficient coverage, NHS 24's internal control environment including governance and risk management.

4.4.3 The plan sets out the priorities for 2021/22. It is anticipated Property Transaction Monitoring and Digital audits will begin in Quarter one. Urgent Care, Governance, Risk Management, Estates, Financial Controls including Fraud controls, Contract Management and Recruitment Audits will complete 21/22, however, this will be discussed with Executive Management Team before being confirmed.

4.4.4 The Committee are assured that all actions on the Follow Up report are either complete or are being implemented. This report will be reviewed in more detail at the August 2021 meeting. The Committee noted and agreed, that the focus of Audits in Quarter 1 will be Property Transaction Monitoring and Digital audits. The remaining plan for Quarter 2 – Quarter 4 will be considered at the June meeting, although the Committee supported the early thinking from management as to what should be included.

4.4.5 The Committee noted the report for assurance.

5. EXTERNAL AUDIT

5.1 External Audit Plan 2021/22

5.1.1 Mr Bennett presented the External Audit Plan to the Committee.

5.1.2 The report summarises the work plan for the 2020/21 audit. Mr Bennett noted a few amendments since the report was compiled and agreed to continue the discussion on that basis.

5.1.3 Mr Tait confirmed NHS 24 would like to continue with the audit in the normal timetable although it was noted this would be kept under review.

5.1.4 The Committee noted the Plan for assurance.

6. RISK MANAGEMENT

6.1 Corporate Risk Register

6.1.1 Mr McMahon presented the Risk Register to the Committee.

6.1.2 Since the last meeting in November 2019 the risk profile has increased with risks relating to COVID-19 and winter in addition to the pre-existing operational risks.

6.1.3 Since the last meeting one new risk has been identified, two risks have increased in score, no risks have been reduced and two risks have been closed.

6.1.4 The Incident Management Team (IMT) continue to meet daily to manage the response to these areas, with an escalation process in place to the EMT.

6.1.5 It has been recognized, that NHS 24 are actively and effectively contributing towards a national system response to the pandemic with a further Remobilisation Plan due for submission to Scottish Government.

6.1.6 Mr Togneri referred to the questions submitted prior to the meeting asking for clarity on the first four risks on the register as they all seem to be similar. The Committee were satisfied with the responses given and the Q&A responses will be shared with the Committee.

Action: Ms Kerr

6.1.7 Mr McCormick expressed concern on employing staff on temporary contracts due to the uncertainty and with no confirmation of recurring funding for either Mental Health Hub or Redesign Urgent Care (RUC). Mr Gebbie confirmed a further meeting with Scottish Government will be held to confirm allocations.

6.1.8 The Committee noted there are two risks that are in the almost certain to happen category which, if they did would have a major impact and four risks that are classified as likely to happen, and if so, would also have a major impact. In noting

the actions that management has already put in place and continued to pursue, the committee took assurance from this.

6.1.9 The Committee noted the report for assurance.

6.2 Strategic Risk Register

6.2.1 Mr McMahon presented the Risk Register to the Committee.

6.2.2 The Committee is asked to review the strategic risks and note that further work will be undertaken to review the strategic risks in line with the Remobilisation Plan and strategy refresh work. A Board development session in May 2021 will allow Board members to contribute to the strategic risks.

6.2.3 The Committee noted the Risk Register for assurance.

7. Corporate Governance

7.1 Connect Programme: Phase 1c Update

Mr David Dougan joined the meeting for this item.

7.1.1 Mr Gebbie noted the Outline Business Case was approved at the December 2020 Board Meeting. Some elements were accelerated and these were approved in January 2021. Mr Gebbie asked Mr Dougan to provide an update on work to date.

7.1.2 The Committee is asked to recommend to the Board to approve the Full Business Case (FBC). Since the Outline Business Case was approved, detailed discussions have continued with our suppliers on the Phase 1c delivery proposals to ensure due diligence. Throughout this process, the requirements to meet the needs of the organisation have been reviewed to ensure this is achievable in the timeframe within the Business Case.

7.1.3 Mr Dougan outlined the key components of the Full Business Case to the Committee and Mr Snedden explained the financial elements. It was noted that the Connect Phase 1c FBC has taken account of NHS 24 Strategic alignment and overarching Scottish priorities and strategies such as:

- SG Remobilise, Recover and Redesign Framework
- Refresh of Scotland's Digital Health & Care Strategy
- Connect Programme; Phases 1a and 1b and the forthcoming Phase 2

7.1.4 The Committee noted the update for assurance subject to certain additional risks identified and discussed at the Committee, being highlighted and expanded upon within the Full Business Case.

7.2 Financial Assurance

7.2.1 Mr Gebbie presented the report to the Committee.

7.2.2 Mr Gebbie confirmed a breakeven position year to date and is forecasting that it is on target to breakeven this financial year. This is dependent on a number of anticipated allocations being received. The outstanding allocations total £2.7m.

NHS 24 are still in discussions with Scottish Government regarding these allocations. Scottish Government have confirmed these allocations are in their current plans. Redesign Urgent Care and COVID-19 costs have been less than originally anticipated so funding has been deducted accordingly.

7.2.3 Scottish Government have requested a draft of the Financial Plan by the end of February.

7.2.4 The Committee took assurance from the contents and actions set up within the report.

7.3 Corporate Governance Activity Report

7.3.1 Mr Snedden presented the report to the Committee.

7.3.2 It was noted since the last Audit Committee there have been two new waiver of tenders. One was secured to support the Connect Full Business Case. The other waiver is an extension to an existing waiver approved by the Board in December 2020. 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. There were no Service Level Agreements since the last meeting.

7.3.3 Mr Snedden also highlighted the outcomes arising from the annual review of the ongoing work with Counter Fraud Services and noted successful investigations.

7.3.4 The Committee noted the report for assurance.

7.4 Remobilisation Summary

7.4.1 Ms Speirs presented the summary to the Committee.

7.4.2 The Remobilisation Plan sets out an update on NHS 24 key priorities and outcomes for 2021/22. It is proposed the plan will form the basis of key areas of work for the next 12 months, supported by an updated Change Portfolio. The Remobilisation Plan is an extension of the earlier COVID-19 Continuation and Remobilisation Plan August 2020-March 2021, outline key COVID-19 continuation activities, alongside other key strategic priorities.

7.4.3 Ms Speirs confirmed a wide variety of engagement across the organisation in preparation of this plan which will ultimately, be key as actions for next year are implemented.

7.4.4 The Committee noted for assurance, the processes being carried out to update and finalise the draft Remobilisation Plan.

7.5 Information Governance and Security Report

7.5.1 Mr Tait noted a helpful report. Due to time constraints this report was not discussed in detail, however it was suggested to complete a deep dive at another meeting. This will be discussed in more detail at the Planning and Performance Committee or the Audit and Risk Committee. This has yet to be confirmed.

Action: Mr Tait

7.5.2 This report provides assurance on the effectiveness and completeness of Information Governance and Security activity for the period 1 October 2020 to 31 December 2020.

7.5.3 It was noted there is an increase in Data Subject Access Requests (DSARs) from the same quarter last year, although it was noted there has been a reduction in Quarter three compared to Quarter two earlier this year. To facilitate these requests staff are required to access call records which is very time consuming.

7.5.4 A number of Information Security activities have taken place during the period of this report, these included:

- The upgrade of the badge access system has continued across NHS 24 sites.
- A campaign approved by the Executive Management Team to raise awareness of Information Classification and the procurement of a hosted Data Loss Prevention solution will be progressed during Quarter four.

7.5.5 There were no Data Protection of NIS reportable incidents, however there were two incidents relating to one of our sites that were reported to Police Scotland.

7.5.6 The Committee noted the report for assurance

7.6 Integrated Governance: Key Points Arising

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

7.7 Audit and Risk Committee Workplan

The Committee approved the work plan for 2021/22.

8. FOR NOTING

8.1 Redesign Urgent Care

8.1.1 The paper was for noting and was not discussed at the meeting.

8.2 Financial Assurance

8.2.1 The paper was for noting and was not discussed at the meeting.

8.3 Remobilisation Plan: Draft 21/22 Organisational Priorities

8.3.1 The plan was for noting and was not discussed at the meeting.

9. MATTERS ARISING FROM PREVIOUS MEETINGS

9.1 Review of Action Log

- 9.1.1 After discussion the Committee agreed actions 677, 678 and 680 recommended for closure can be removed for the action list.

The Committee agreed actions 591, 629, 655, 668, 672 and 679 should remain on action list with an update for the next meeting.

- 9.1.2 Ms Foster provided a verbal update to Action 591. Central Legal Office (CLO) have advised they have had no response as yet to the letters sent over the last few months. They have advised NHS 24 move to the next stage in the process. The committee agreed that Ms Foster should instruct CLO accordingly when it is felt appropriate to do so.

- 9.1.3 Ms Foster referred to the Governance Audit from the last meeting specifically noting that NHS 24 maintained full governance throughout the response to the pandemic. However, due to time pressures NHS 24 are now using a governance light approach. All Governance meetings are continuing although with a lighter touch. Dr Cheyne confirmed the arrangements as per guidance received from Scottish Government.

It was requested the guidance letter received from Scottish Government be shared with Committee members.

Action: Ms Kerr

10. AGREED COMMITTEE HIGHLIGHTS TO THE BOARD

- 10.1 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 25 February 2021.

Action: Ms Kerr

11. ANY OTHER BUSINESS

- 11.1 There was no other business noted.

12. DATE & LOCATION OF NEXT MEETING

The date of the next meeting of the Committee is Thursday 3 June 2021 at 10am, Teams/Committee Room, Cardonald.

13. PRIVATE MEETING OF THE AUDIT AND RISK COMMITTEE

- 13.1 A private meeting with External Auditors was held with members of the Committee at 9.30am.
- 13.2 A private meeting with the Chief Executive was held with members of the Committee following the meeting.