

REFERRAL REPORT

Committees Annual Assurance Report – Referral from the Audit and Assurance Committee

Edinburgh Integration Joint Board

Tuesday, 27 September 2022

Executive Summary	The purpose of this report is to refer the attached Committees
	Annual Assurance Report from the Audit and Assurance
	Committee to the Edinburgh Integration Joint Board (EIJB),
	with the Committee's recommendations detailed below.

Recommendations	The Board is asked to:
	 To note the moderate assurance following the review of the committee assurance statements which are stored in the teams' site for interest.
	b. To note a paper will be brought to the Audit and Assurance Committee, discussing how best to present an action plan on addressing the key outcomes of the assurance process.

Terms of Referral

- 1. All committee assurance statements were presented to the Audit and Assurance Committee (AAC) for scrutiny on 20 September 2022 (Clinical and Care Governance Committee, Performance and Delivery Committee and Strategic Planning Group and Audit and Assurance Committee).
- 2. During consideration of the report, the Committee discussed the following:



- Members discussed, how best to monitor the implementation of the suggested outcomes.
- A further reference was made to the action plan initially discussed as part of the Edinburgh Integration Joint Board Audited Annual Accounts 2021-22. Suggestions were made on how to format the action plan such as expected completion dates and a traffic light system on delivering effective outcomes to ensure actions can be checked at a glance to see which are making progress and which may need help.
- 3. The Committee agreed:
 - 3.1 To note the moderate assurance following the review of the committee assurance statements which are stored in the teams' site for interest.
 - 3.2 To refer this report to the EIJB.
 - 3.3 The Chief Finance Officer confirmed a paper will be brought back to Committee, discussing how best this action plan may be created and set out.

The Integration Joint Board is asked to consider the recommendations of the Audit and Assurance Committee.

Report Author

Peter Murray

Chair, Audit and Assurance Committee

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Appendices

Appendix 1 Annual Assurance Statement



REPORT

Committees Annual Assurance Report

Audit and Assurance Committee

20 September 2022

Executive Summary	This report provides the Audit and Assurance Committee with a condensed report on the annual assurance statements for the Edinburgh Integration Joint Board (EIJB) committees.
Recommendations	 The Audit and Assurance Committee is asked to: a) note the moderate assurance following the review of the committee assurance statements which are stored in the teams' site for interest. b) Refer this report to the EIJB.

Directions

Direction to City of Edinburgh Council, NHS Lothian or both organisations	No direction required	✓
	Issue a direction to City of Edinburgh Council	
	Issue a direction to NHS Lothian	
	Issue a direction to City of Edinburgh Council & NHS Lothian	

Report Circulation

1. All committee assurance statements were presented to the Audit and Assurance Committee (AAC) for scrutiny on 20 September 2022 (Clinical and Care Governance Committee, Performance and Delivery Committee and Strategic Planning Group and Audit and Assurance Committee).

Main Report

2. The Edinburgh Integration Joint Board (EIJB) endorsed the assurance process for 2021/22 at their meeting on 22 March 2022. All EIJB committees were



asked to submit an annual assurance statement which covers the business of all meetings held during 2021/22. The link to the full paper is **here**.

3. These statements were designed to support the assurance the committees were giving to the EIJB and identify and escalate any significant issues.

Assurance Process

4. Once all committees agreed their committee annual statements, they were scrutinised at AAC on the 20 September 2022. The purpose of the review by AAC is to provide the EIJB with assurance (or otherwise) on the effectiveness of the EIJB committee structure and how well the committees are fulfilling their duties. Due to the timing of the assurance process (running from March - June 2022), it should be noted that some of the assurance statements were completed by previous members of the EIJB. Copies of all assurance statements have been stored in the EIJB teams' site.

Actions arising from 2020/21 assurance cycle

- 5. The following themes were identified as part of the 2020/21 assurance statements:
 - capacity of officers adversely impacting the ability to fulfil the full range of duties specified within the committee terms of reference;
 - the lack of an independent Chief Risk Officer; and
 - availability and quality of data.
- 6. Actions have been taken to increase resource in a number of teams (e.g., performance and evaluation, innovation and sustainability, communications) to support the EIJB and its committees. However, it is recognised that, as these posts have been funded from the EIJB's budget, we are diverting funds from front line services. The Performance and Evaluation Manager, who was appointed towards the end of 20/21, is developing a EIJB performance framework. Although, this will go part way to addressing the availability and quality of data, some underlying issues will remain, particularly with social care data which is being worked through. Further discussions are ongoing regarding the Chief Risk Officer following the discussions at AAC in August 22.

Key themes for the 21/22 assurance cycle

- 7. For the 21/22 cycle, the main themes coming through all the assurance statements include:
 - The need to enhance the training and induction programme for committees. Also need to consider the development needs of the committee and EIJB, recognising the significant number of new Board Members.



- Some committees (Audit and Assurance Committee, Clinical and Care Governance) feel it would be beneficial to increase the membership to ensure committees are quorate and increase the scrutiny and debate.
- 8. There is also a reference within the Strategic Planning Group (SPG) assurance statement that consideration should be given to note assurance levels at committee meetings and not in retrospect and this will be taken forward alongside the actions specified at paragraph 7.
- 9. There are some specific themes identified that need to be taken forward by the individual committees and these are noted below:

Clinical and Care Governance Committee (C&CG)

- 1. Increase the number of members of the committee.
- 2. Continue to develop the Clinical and Care Governance Group.
- 3. Review and consider the induction and development of the C&CG Committee.
- 4. Consider the volume of C&CG meetings alongside the significant work. programme required to deliver on the terms of reference.

Performance and Delivery Committee (P&D)

- 1. Development and implementation of the performance framework.
- 2. Consideration of the length and detail contained within papers.
- 3. Consideration on how achieve deep dives in certain key areas.
- 4. The expected time commitment for non-voting members that sit on committees can be significant.
- 5. Need to look at committee succession planning.

Strategic Planning Group (SPG)

- 1. Consider whether sub-groups require to be established to support.
- 2. Review long terms horizon scanning role.
- 10. Based on the assurance statements submitted from the committees, the AAC can provide a moderate level of assurance which is the same assurance level as last year.

Next Steps

11. Where improvements or actions have been identified within the annual assurance statements, they will be collated together into an action plan, with proposed improvement actions developed (where possible) as part of the development of the EIJB committee structure.



Implications for Edinburgh Integration Joint Board

Financial

12. There are no specific financial implications arising from this report.

Legal/risk implications

13. The process agreed by the EIJB is designed to provide appropriate assurance to the board, thus reducing risk.

Equality and integrated impact assessment

14. There are no specific implications arising from this report.

Environment and sustainability impacts

15. There are no specific implications arising from this report.

Quality of care

16. There are no specific implications arising from this report.

Consultation

14. There are no specific implications arising from this report.

Report Author

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Appendices

None