

Minutes of an Extraordinary Meeting of **Borders NHS Board Audit Committee** held on Tuesday, 30<sup>th</sup> January 2018 at 11.30 a.m. in the Committee Room, BGH.

**Present:** Mr D Davidson (Chair)  
Mr M Dickson  
Mrs K Hamilton  
Dr S Mather

**In Attendance:** Mr G Bell, Audit Manager, PWC (Left meeting at 1.20 p.m.)  
Mrs J Davidson, Chief Executive  
Mrs B Everitt, Personal Assistant to Director of Finance  
Mrs C Gillie, Director of Finance (from 11.45 a.m.)  
Mrs R Gray, Head of Clinical Governance & Quality (Item 4.2)  
Mrs M Kerr, Director, PWC (Left meeting at 1.20 p.m.)  
Cllr D Parker, Non Executive Director (Item 3)  
Mrs C Pearce, Director of Nursing, Midwifery and Acute Services  
Mr R Robinson, Audit Scotland (Item 3)  
Dr C Sharp, Medical Director (Item 3)  
Mrs J Smyth, Director of Strategic Change and Performance  
Mr J Steen, Senior Auditor, Audit Scotland  
Ms C Sweeney, Audit Scotland (Item 3)  
Ms K Whyte, Audit Scotland (Item 3)  
Mrs A Wilson, Director of Pharmacy/Non Executive Director (Item 3)

1. **Introduction, Apologies and Welcome**

David Davidson welcomed those present to the meeting. Apologies were received from Gillian Woolman, Asif Haseeb and Susan Swan.

2. **Declaration of Interest**

There were no declarations of interest.

3. **External Audit**

- 3.1 *Audit Scotland Report: NHS Workforce Planning*
- 3.2 *Audit Scotland Report: NHS in Scotland 2017*

Claire Sweeney introduced Richard Robinson and Kirsty Whyte who would be presenting on the NHS Workforce Planning and NHS in Scotland 2017 reports respectively. The Committee received a presentation which looked at the key messages within the reports and highlighted challenges faced by Boards. Carol Gillie agreed to circulate the checklist for Non Executive Directors to complete and consolidate responses.

**The Committee noted the presentation.**

#### 4. Internal Audit

##### 4.1 *Internal Audit Progress Report 2017/18*

George Bell spoke to this item. George advised that one report, Clinical Governance (Acute Services), had been issued since the last meeting and was being presented at today's meeting. It was noted that the Business Continuity report had been due to come to today's meeting, however this was still being finalised and would be presented to the March meeting along with the reports on Financial Efficiency Savings and Health and Social Care Integration Risk Management.

**The Committee noted the update.**

##### 4.2 *Internal Audit Report – Clinical Governance*

George Bell introduced this report which was a review undertaken within Acute Services and had an overall medium risk rating. George advised that there had been five medium rated findings. George referred to the first finding whereby the Clinical Governance Strategy had not been reviewed or updated for seven years and this required to be undertaken particularly in relation to Health & Social Care Integration. It was noted that management had agreed to review this by July 2018. For the second finding relating to compliance with clinical standards requirements it was noted that four out of ten standards reviewed were found to be generally below the target of 95%. It was noted that action plans will be developed under the Back to Basics programme and its five workstreams to address compliance rate failures. George referred to finding 3 regarding clinical audit plans as they were unable to find any evidence of an overall Clinical Audit Plan. It was noted that management have agreed to develop an annual plan which will be formally approved by the Clinical Governance Committee. For finding 4 relating to clinical governance guidance George advised that there are approximately 12,000 items on the intranet relating to medical issues, however it was not clear what percentage related to policy documents that should have been known to / quality assured by the Clinical Governance and Quality Team before being published. George advised that for finding 5 there was a lack of summary assurance reporting being provided to the Clinical Governance Committee which may undermine the assurance being given to NHS Borders Board on standards of clinical governance and associated compliance. Stephen Mather felt that this was a fair report and accepted that policies were out of date and assured that these would now be updated. Stephen referred to page 10 of the report where it stated that the Chair of the Clinical Governance Committee is a medical professional and advised that he no longer practices medicine and suggested that this statement be removed. George agreed to do this. Stephen also referred to finding 3 regarding the lack of a Clinical Audit Plan and in particular about the audits undertaken by junior doctors as part of their training not being mandated with the subject matter for these being optional. Stephen was not unduly concerned with this as the current system did not restrict junior doctor's activity. Margaret Kerr stressed that the emphasis was on the priority issues that require to be addressed and there was no intention of causing any restrictions. Stephen was surprised that there appeared to be a lack of control on what is uploaded onto the Intranet and felt that there required to be a managed process for adding clinical items. Jane Davidson agreed that it was a fair audit with management responses and felt it would be beneficial to have a separate section on the Intranet for medical policies. Jane referred to the Back to Basics programme and advised that this is across the whole organisation and will have gone through all Clinical Governance Forums and not just the Borders General

Hospital. David Davidson asked who would have overall responsibility for delivery of recommended actions. Jane confirmed that this would be the Medical Director.

**The Committee noted the report.**

5. **Update on Mandatory Training**

June Smyth spoke to this item and highlighted that there had not been much change to the data since the last meeting, however the report provided a detailed update on work undertaken which will significantly enhance the organisation's reporting capability. June advised that the number of managers trained has risen since the report was circulated and a total of 80 have now been trained. June explained that the system is set up for the year to allow managers to fully utilise this after they receive their training. June referred to the Learnpro Course Booking System (CBS) scorecard and advised that this will be rolled out across all staff by April 2018 with the data gathered from this being included within the Training Needs Analysis (TNA) report. It was noted that this will provide accurate information which can be used to ensure the training needs are met in the most efficient way. Stephen Mather asked for assurance that the system is set up to prevent anything from being added. June confirmed that there is a specific process in place should anything require to be added. Stephen referred to paragraph 2 on page 3 of the report as he was concerned that clinical skills training had been reduced to a two hour session which had previously been four hours. June assured that the core elements had been scrutinised to ensure that this is fit for purpose. Malcolm Dickson felt that this was a positive report and referred to the paragraph on page 3 regarding TNA reporting which would highlight the level of risk across the organisation. Malcolm enquired if the Clinical Executive Operational Group is able to provide a top down view from management on what training is required. Clare Pearce confirmed that they can. June also advised that the Statutory and Mandatory Training Working Group have added scrutiny. Jane Davidson felt that the report set out the issues and solutions clearly and appreciated that there is still further work to be done. Jane referred to fire training and noted that eLearning is available for this, however they are looking at optimal classroom based fire training and will be targeting high risk areas. David Davidson asked if there was a Fire Officer in post. Carol Gillie advised they are due to take up post in May and that temporary measures are currently in place. Margaret Kerr felt that there had been positive progress made as a Board.

**The Committee noted the report.**

**Margaret Kerr and George Bell left the meeting.**

6. **Internal Audit Arrangements**

Carol Gillie spoke to this item. As a point of clarity Carol advised that the current national framework contract with PWC ceases on 31<sup>st</sup> May 2018 and not 31<sup>st</sup> March 2018 as stated within the report, however NHS Borders' contract with PWC within the framework contract ceases on 31<sup>st</sup> March 2018. Carol advised that as per the Code of Corporate Governance a tendering exercise should be undertaken due to the value of the contract with at least three tenders being sought, however due to ongoing regional conversations which might result in a regional Internal Audit arrangement Carol proposed entering into a contract with PWC for Internal Audit services for a further 12 months. This would allow continuity of service and minimal disruption. PWC had also indicated that there would be no increase in price. It was also noted that a tendering exercise is being undertaken by Greater Glasgow and Clyde and a number of other Boards which when complete would allow any other Health Boards, including NHS Borders, to enter into a contract for Internal Audit services with the successful

bid. Malcolm Dickson enquired on the likelihood of either the regional or national solutions coming to fruition within the timescale. In regard to the regional option, Carol was unable to say if a solution could be found due to there being very different models across the three Boards. Failing that the tendering process being led by Greater Glasgow and Clyde would be an option and it seemed likely that this exercise would be completed within the 12 months of our proposed contract extension. Jane Davidson advised that the position on regional development should be clearer around September. Jane felt that in the current financial climate it would be reasonable to ask for a cost reduction of 20%. Carol advised that she had been given a commitment that there would be no increase in cost but was happy to go back and ask for a reduction. Jonny Steen asked if the Board were aware of the non compliance with the Code of Corporate Governance and suggested seeking approval if not. Carol confirmed that the Audit Committee have the authority to do this on behalf of the Board. Jonny also asked if the extension would be a separate contract to the one currently in place. Carol advised that it would. Jonny felt it would be helpful to note that Audit Scotland have carried out an annual review of PWC and confirmed that there were no significant issues and that they comply with current standards.

**The Audit Committee agreed to a 12 month extension contract with PWC with effect from 1<sup>st</sup> April 2018 with the cost either remaining the same or less.**

7. **Any Other Competent Business**

David Davidson enquired about progress with the Governance review. Jane Davidson advised that she had asked Carol Gillie and John Cowie to take this forward. It was noted that this had tentatively been put on the agenda for the Board Development Session on 1<sup>st</sup> March 2018.

8. **Date of Next Meeting**

Wednesday, 21<sup>st</sup> March 2018 @ 2 p.m., Board Room, Newstead

BE  
06.02.18