

## NHS GREATER GLASGOW AND CLYDE

**Minutes of the Meeting of the  
Audit and Risk Committee  
held on Tuesday, 17 September at 9.30am  
via Microsoft Teams**

**PRESENT**

Ms Michelle Wailes (in the Chair)

Cllr Jacqueline Cameron	Mr Colin Neil
Ms Margaret Kerr	Mr Charles Vincent
Dr Rebecca Metcalfe	

**IN ATTENDANCE**

Ms Denise Brown	Director of Digital Services
Ms Kim Donald	Corporate Services Manager (Governance)
Mr William Edwards	Chief Operating Officer (for item 9e)
Mrs Jane Grant	Chief Executive
Ms Katrina Heenan	Chief Risk Officer
Ms Anne MacPherson	Director of Human Resources & Organisational Development (for item 9d)
Ms Fiona McEwan	Assistant Director of Finance
Mr Iain Paterson	Corporate Services Manager (Compliance)(for item 4)
Ms Janet Richardson	Head of Financial Governance/Fraud Liaison Officer
Mr Michael Sheils	Head of Financial Services
Prof Angela Wallace	Nurse Director
Mr Scott Wilson	Senior Business and Delivery Manager
Ms Rachel King	Internal Auditor, Azets
Ms Rachel Wynne	External Auditor, Ernst and Young
Ms Elizabeth Young	Internal Auditor, Azets
Mr John Thomson	Assistant Director of Finance
Dr Lesley Thomson KC	NHSGGC Chair

			<b>ACTION BY</b>
<b>34.</b>	<b>Welcome and Apologies</b>		
	The Chair welcomed those present to the September meeting of the Audit and Risk Committee.		
	The Chair highlighted that there had been a change to the membership of the Committee and welcomed the new members; Cllr Jacqueline Cameron, Dr Becky Metcalfe and Mr Brian Auld.		

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			<b>ACTION BY</b>
	Apologies were noted on behalf of Mr Brian Auld.		
	<b><u>NOTED</u></b>		
<b>35.</b>	<b>Declaration(s) of Interest(s)</b>		
	The Chair invited members to declare any interests in any of the matters being discussed. There were no declarations of interest.		
	<b><u>NOTED</u></b>		
<b>36.</b>	<b>Minutes of Previous Meeting</b>		
	The Committee considered the minute of the Audit and Risk Committee meeting held on 18 June 2024 [Paper No. ARC(M)24/03] and were content to approve the minute as a complete and accurate record.		
	<b><u>APPROVED</u></b>		
<b>37.</b>	<b>Matters Arising</b>		
	<b>a) Rolling Action List</b>		
	The Committee considered the Rolling Action List [Paper No. 24/36] and were content to accept the recommendation that 7 items were closed and 1 item remained ongoing.		
	The following update was noted in relation to the item that remained ongoing:		
	<b><u>Item 29 - Freedom of Information Annual Report</u></b>		
	Mr Iain Paterson, Corporate Services Manager (Compliance), provided an update on the position in relation to Freedom of Information performance following the announcement that the Scottish Information Commissioner (SIC) had escalated NHSGGC to Level 3 in June 2024. An improvement action plan was developed and submitted to the SIC on 5 <sup>th</sup> July 2024 and formal feedback was awaited. Mr Paterson reported that three core elements of the plan had been implemented, this included an additional temporary resource allocated to the core team. This had strengthened business engagement and improved the case management system. Mr Paterson noted that as a result, the significant backlog had been cleared and 96% of cases had been issued within statutory timescales during Quarter 2. The Committee noted that a full report would be provided to the Committee in December.		
	In response to a question regarding the next steps, the Committee noted that Mrs Jane Grant, Chief Executive, would		

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	<p>formally write to the Information Commissioner to expedite a meeting.</p> <p>The Committee noted that there had been a 50% increase in Freedom of Information requests to NHSGGC over the last 2 years.</p> <p>In response to a question regarding the sustainability of the additional temporary resource, the Committee noted that consideration would have to be given to this as there was a focus to ensure that performance remained within target.</p> <p>There were no other matters arising noted.</p> <p><b><u>APPROVED</u></b></p>		Mrs Grant
<b>38.</b>	<b>Urgent Items of Business</b>		
	<p>Mr Colin Neil, Director of Finance, provided an update on an ongoing legal claim following a request received by Senior Council to settle the claim. The Committee, along with the Chief Executive, had delegated authority due to the limits imposed. The Committee were assured that the claim had been through the appropriate legal process and were content to allow the team to move to a resolution to ensure there were no delays to the process. It was agreed that a briefing note would be submitted to the December meeting.</p> <p>The Committee noted the update.</p> <p><b><u>NOTED</u></b></p>		Mr Neil
<b>39.</b>	<b>Committee Vice Chair</b>		
	<p>Ms Margaret Kerr was nominated as Vice Chair by the Committee Chair, Ms Michelle Wailes. This was approved by the Committee.</p> <p><b><u>APPROVED</u></b></p>		
<b>40.</b>	<b>Fraud Report and Counter Fraud Services Update</b>		
	<p>The Committee considered the paper 'Fraud Report and Counter Fraud Services Update' [Paper 24/37] presented by Ms Janet Richardson, Head of Financial Governance/Fraud Liaison Officer.</p> <p>The paper provided an update on current fraud cases and on the actions which had been undertaken to prevent, detect and investigate fraud in the period 1 April 2024 to 31 July 2024.</p>		

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	<p>Ms Richardson reported that there had been 1 new fraud case recorded during the reporting period relating to the payment of bank shifts that were not worked. The Counter Fraud Service were in the process of reviewing the case. There were 17 cases relating to staff related allegations, this included 4 cases relating to theft of desirable drugs.</p> <p>The Committee noted that there was a case in June 2024 that had been successfully taken to Court. The outcome included a sentence to a restriction of liberty order, an electronic monitoring order and a 12-month community payback order.</p> <p>The Annual Action Plan for 2024/25 had been developed and activities aligned to the NHS Scotland Counter Fraud Strategy. There was an ongoing action in relation to bribery, however, policies had now been provided and were under review. It was hoped that a final report would be provided to the Committee in March 2025.</p> <p>The Committee noted work was taking place to develop online Fraud Awareness training.</p> <p>In response to a question regarding raising the profile of the consequences of fraud within the organisation, the Committee noted that awareness is raised via communications, for example StaffNet.</p> <p>The report included detail in relation to an unsuccessful phishing scam reported in appendix 2 of the report. The Committee received assurance that protection levels were in place and processes were working.</p> <p>The Committee were content to note the update.</p> <p><b>NOTED</b></p>		Ms Richardson
41.	<b>External Audit Action Tracker</b>		
	<p>The Committee considered the paper 'External Audit Action Tracker' [Paper 24/38] presented by Mr John Thomson, Assistant Director of Finance.</p> <p>Mr Thomson provided an update on the progress to date in delivering the 15 audit recommendations made by Ernst Young in the 2022/23 Annual Audit Report and the 7 recommendations in the 2023/24 Annual Audit Report.</p> <p>Mr Thomson reported that all Non-Executive Directors of the Board had now been appointed.</p>		

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	<p>It had been agreed with Ernst Young that a meeting would take place in October to review the evidence required to complete the audit actions.</p> <p>The Committee were assured by the report provided.</p> <p><b><u>NOTED</u></b></p>	
<p><b>42.</b></p>	<p><b>Internal Audit Reports</b></p>	
	<p>The Committee considered the paper ‘Internal Audit Reports’ [Paper No. 24/39] presented by Ms Elizabeth Young, and Ms Rachel King, Azets.</p> <p>a) <u>Internal Audit Progress Report</u></p> <p>The paper provided a summary of internal audit activity and confirmed the reviews planned for the coming quarter, identifying any changes to the annual plan. The Committee noted that a review of hospital discharges was presented following further discussions and revisions after the Committee meeting in June. The Committee noted that work was on track to comply with the new Global Internal Audit Standards.</p> <p>b) <u>Property Transaction Monitoring Report</u></p> <p>The Committee noted the Property Transaction Monitoring Report. The report highlighted that there were robust and effective controls in place to ensure compliance with the Property Transaction Handbook and these were consistently applied for the property transactions completed during 2023/24.</p> <p>c) <u>Sustainability and Value Programme</u></p> <p>The Committee noted that the Sustainability and Value Programme was a well-designed framework that was supported by a clear governance structure with a high level of scrutiny and challenge. The respective roles and responsibilities of staff were clearly defined, and there was regular and detailed reporting at all levels of the organisation. The Committee were content that this was a good outcome. The Committee recognised there was still a large financial</p>	

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	<p>gap, however noted that there were more areas that could be considered and work to be carried out.</p> <p>d) <u>Succession Planning</u></p> <p>The Committee noted that conclusions of the audit work evidenced a proactive approach. It was recognised this is a relatively recent process, therefore some advisory recommendations had been made to strengthen the controls in place as the process became more embedded in the months ahead. The Committee noted some significant risks included workforce capacity, vacancies and turnover rates. The Committee noted that in the absence of national guidance, the Board had been proactive in implementing Succession Planning guidance documents that had been designed across all areas.</p> <p>e) <u>Hospital Discharges Update</u></p> <p>The report acknowledged that performance in respect of Delayed Discharges remained challenged across Acute NHSGGC sites. The referral arrangements were reviewed as part of the audit and, following sample testing, it was noted that the majority were referred within 7 days. The Committee noted that overall, the key findings highlighted good practice, however the report detailed some areas for improvement.</p> <p>The Committee noted that some work could be considered in relation to updating Planned Date of Discharges (PDD), however, the Committee were assured there had been some improvement in PDD accuracy following the report. In response to a question regarding whether staff were clear in their responsibility, the Committee noted that processes were in place, however, recommendations had been made in the report to ensure there was consistency. The Committee recognised that this would continue to be a challenging area for the Board.</p> <p>f) <u>Management Action Follow Up Q2 2024/25</u></p> <p>Ms Young provided a brief summary of the Follow Up Review for Quarter 2. She noted that overall management had continued to make good progress. There was a total of 16</p>		

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	<p>actions brought forward and 5 actions added to the tracker. There were 11 actions closed and 1 action remained open as evidence was awaited. The Committee received assurance that none of the overdue actions were high-risk and noted that there were some external factors impacting the ability to complete the actions.</p> <p>The Committee were assured by the reports provided.</p> <p><b><u>ASSURED</u></b></p>		
<b>43.</b>	<b>Corporate Risk Register</b>		
	<p>The Committee considered the paper ‘Corporate Risk Register [Paper No. 24/40] presented by Ms Katrina Heenan, Chief Risk Officer.</p> <p>Ms Heenan highlighted that there had been an increase in the Cyber Risk Score from 6 to 12. The Committee received assurance that controls were in place and that they remained effective.</p> <p>Ms Heenan reported that five Corporate Risk detailed reviews had been completed over the last quarter. Following this, four risks had resulted in a decrease to the risk score, and one remained unchanged. The Committee noted the action status associated with the revised risks which was included in the paper.</p> <p>The Committee received assurance that the processes in place were robust and the Risk Register fully aligned to the risks reported to the Corporate Management Team.</p> <p>The Committee noted that there had been a PDF issue with the appendices and not all data was displayed, therefore the PDF would be recirculated to members.</p> <p>The Committee were content to approve the paper.</p> <p><b><u>APPROVED</u></b></p>		Secretary
<b>44.</b>	<b>Risk Management Annual Report</b>		
	<p>The Committee considered the paper ‘Risk Management Annual Report’ [Paper No. 24/41] presented by Ms Katrina Heenan, Chief Risk Officer.</p> <p>The report provided an overview of annual performance for Risk Management in NHSGGC for the period between January 2023 and December 2023. Ms Hennan provided a summary of the key</p>		

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	<p>highlights in the report; this included analysis of the changes in risk scores across the NHSGGC Corporate Risk Register, an update on the 2023 Risk Management Work Plan and the 2024 Objectives and an overview of the activity of the Risk Management Steering Group.</p> <p>Ms Heenan noted that one of the objectives to support the delivery of NHSGGC Risk Management Strategy for 2024 was training. A review of the Risk Training Material had been carried out and a number of training sessions had been held. In addition, targeted training guides would be developed to support the review and update of risks. Ms Heenan reported that KPI reporting was well established and actions were being tracked. The Committee noted that an annual review of the Risk Appetite Statement would be carried out and options were being considered to streamline risk reporting. It was agreed that the annual reporting timeline would be reviewed.</p> <p>The Committee were assured by the report provided.</p> <p><b><u>NOTED</u></b></p>		Ms Heenan/Mr Neil
<b>45.</b>	<b>Whistleblowing Quarter 1</b>		
	<p>The Committee considered the paper 'Whistleblowing Quarter 1 Report' [Paper No. 24/42] introduced by Ms Sandra Bustillo, Director of Communications and Public Engagement, and presented by Ms Kim Donald, Corporate Services Manager - Governance.</p> <p>Ms Donald highlighted that the performance in relation Stage 1 cases remained consistent at 100%. However, meeting the 20 day target for Stage 2 cases remained a challenge due to the complex nature of the cases. Ms Donald also reported that any upheld Stage 3 cases would be shared with the Corporate Management Team and the Audit and Risk Committee. Ms Donald highlighted that Independent National Whistleblowing Officer (INWO) embargo their reports, and as such the timing of the reports would be dependent on when the information was released. The information would also be available on the NHSGGC website.</p> <p>A Whistleblowing Practitioners Forum had been introduced for all Health Boards to allow for cross system learning. The Forum would be chaired by Ms Donald.</p> <p>The new Whistleblowing Champion, Mr Brian Auld, was carrying out a piece of work with colleagues in HR and Communications to highlight how colleagues could contribute and raise concerns.</p>		

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	<p>In response to a question regarding inclusion of Doctors and Opticians in the report, the Committee noted that the statistics were not always available, however would be included in reports when available. The Committee were assured that work was underway with Primary Care to standardise reporting.</p> <p>The Committee were content to note the report.</p> <p><b>NOTED</b></p>	
<b>46.</b>	<b>Information Governance Steering Group Minutes</b>	
	<p>The Committee considered the paper 'Information Governance Steering Group Minutes [Paper No. 24/43] presented by Mr Colin Neil, Director of Finance.</p> <p>Mr Neil provided a summary of the key discussions and decisions at the meeting held on Wednesday 4<sup>th</sup> September 2024.</p> <p>Mr Neil noted that a robust set of standard monitoring reports continued to be submitted to the Steering Group for consideration. Other business discussed included Staff Communications on Cyber Security and Data Protection, withdrawal of WhatsApp as a communication tool within NHSGGC and a proposal to move the existing specialist Cyber Security LearnPro Module to mandatory completion; this would be considered through the Corporate Management Team in due course.</p> <p>The Steering Group received an update on the recent Phishing Scam and the work that had been carried out to develop digital processing of Subject Access Requests. An update was also provided on the new Scottish Government Records Management Health and Social Care Code of Practice 2024. Mr Neil reported that an update on the 2024 NIS review was provided. A formal report was awaited and would be submitted to the Committee in due course. The Committee commended Ms Denise Brown, Director of Digital Services, and the team for the exceptional outcome and outstanding work that had been carried out.</p> <p>The Committee discussed monitoring use of WhatsApp and how there could be assurance that the app wasn't being used as a method of communication, particularly on personal devices. It was noted that WhatsApp had mainly been used for communication regarding covering shifts or absence. The challenges around monitoring usage was acknowledged, however the Committee received assurance that communications had been issued and further controls had been placed board wide on organisational devices. A check would also be carried out to confirm if there had been any Freedom of Information request into WhatsApp usage.</p>	<p>Ms Brown</p>

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	The Committee were content to note the report. <b><u>NOTED</u></b>		
<b>47.</b>	<b>Committee Annual Cycle of Business 2024/25</b>		
	The Committee considered the paper 'Committee Annual Cycle of Business 2024/25 [Paper No. 24/44] presented by Ms Sandra Bustillo, Director of Communications and Public Engagement.  The Committee were content to approve the Annual Cycle of Business. <b><u>APPROVED</u></b>		
<b>48.</b>	<b>Closing Remarks and Key Messages for the Board</b>		
	The Chair thanked those present for attending the meeting and for the interesting discussion. <b><u>NOTED</u></b>		
<b>49.</b>	<b>Date and Time of Next Scheduled Meeting</b>		
	The next meeting would be held on Tuesday 3 December 2024 at 9.30 am via MS Teams.		