

AUDIT COMMITTEE

Tuesday 7 January 2003
(*Afternoon*)

Session 1

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AUDIT COMMITTEE

1st Meeting 2003, Session 1

CONVENER

*Mr Andrew Welsh (Angus) (SNP)

DEPUTY CONVENER

Mr David Davidson (North-East Scotland) (Con)

COMMITTEE MEMBERS

*Sarah Boyack (Edinburgh Central) (Lab)

*Rhona Brankin (Midlothian) (Lab)

*Margaret Jamieson (Kilmarnock and Loudoun) (Lab)

*Mr Lloyd Quinan (West of Scotland) (SNP)

*Mr Keith Raffan (Mid Scotland and Fife) (LD)

COMMITTEE SUBSTITUTES

Miss Annabel Goldie (West of Scotland) (Con)

Mr Duncan Hamilton (Highlands and Islands) (SNP)

Janis Hughes (Glasgow Rutherglen) (Lab)

Mr Jamie Stone (Caithness, Sutherland and Easter Ross) (LD)

*attended

THE FOLLOWING ALSO ATTENDED:

Mr Robert Black (Auditor General for Scotland)

Barbara Hurst (Audit Scotland)

CLERK TO THE COMMITTEE

Shelagh McKinlay

SENIOR ASSISTANT CLERK

Joanna Hardy

ASSISTANT CLERK

Seán Wixted

LOCATION

Committee Room 2

Scottish Parliament

Audit Committee

Tuesday 7 January 2003

(Afternoon)

[THE CONVENER *opened the meeting at 14:02*]

The Convener (Mr Andrew Welsh): Good afternoon. I welcome everybody to the first meeting of the Audit Committee in 2003. I wish everyone a very happy and prosperous new year.

I make the usual announcement about mobile phones and pagers—if you have them, turn them off, please.

I have received an apology. David Davidson will not be here today. Apparently, he fell and injured his arm and leg. It looks quite nasty. We send our best wishes to David for a quick recovery.

Items in Private

The Convener: Item 1 is to seek the agreement of the committee to take items 5, 6 and 7 in private. All those items are items of business that are usually conducted in private, in line with established practice. Of course, the results of our deliberations will become fully public in due course. Do members agree to consider those items in private?

Members *indicated agreement.*

“Overview of Further Education Colleges in Scotland 2000/2001”

The Convener: Item 2 concerns a response from the Scottish Executive to the Audit Committee’s seventh report of 2002, on the “Overview of Further Education Colleges in Scotland 2000/2001”. I am concerned about the nature and tone of the response that we have received to our clear recommendations for positive action. For example, we pointed out in paragraph 3 on page 2 of our report the fundamental weakness of a financial recovery plan that stretches out over 10 years for a college that doubts it can even reach that target date. However, we are told of the confidence that financial recovery can be achieved in five or six years, despite the fact that Inverness College doubts that it can be achieved over 10 years. Which version is correct, and on what is it based?

The response states that five or six years will be taken for recovery, despite the fact that many further education colleges are running annual deficits and accumulated deficits of more than £1 million. The response refers to embarking on campaigns shortly. I would like to know when the Scottish Further Education Funding Council will embark on its campaign. How many colleges will not achieve financial balance by 2006? I ask that because it is clear that some colleges, even the most prudent ones, are finding it difficult to balance their books.

The response does not address our recommendations. In paragraph 4 we sought action, but the response only gives guidance, when the reality of the situation is deficits.

I believe that paragraph 5 is a misinterpretation of what we proposed. We said:

“We call on the Funding Council to ... publish a step by step programme, with appropriate timescales, for the implementation of the mapping process”

which, as was pointed out, would form the basis for strategic planning by colleges. However, the Executive’s response states:

“The overall objective of the mapping processes is to encourage significant long-term strategic change. It is not in itself an implementation plan.”

In many ways that response is a misinterpretation of what we proposed. I would like to know more about who is monitoring overall and about the individual progress of those colleges.

Again, in paragraph 6, we called on the funding council to publish time scales for the new estates funding model. We asked for action and timetables and we are given circulars. That is a totally inadequate response to an on-going situation.

The committee's recommendations have not been adequately addressed. I therefore suggest that we write to the Executive for further clarification and a more positive approach to our report and its recommendations.

Mr Keith Raffan (Mid Scotland and Fife) (LD): I share your concerns. The responses to each recommendation are extremely brief and laid back to the point of being complacent. We called for radical and necessary action in a sector that is in crisis. I do not say that to dramatise the situation but simply to point out the need for action.

Action is not just needed on the Government's mapping; members will remember that I was concerned about the state of the college estates. In at least two of the seven further education colleges that I have seen the conditions in the buildings in which staff and students work are quite unacceptable.

A number of questions have to be sent back to the minister and I hope for a more detailed response. I agree that we need much more detail about the mapping exercise and the college estates. I was looking for an implementation plan for the 43 colleges. In particular, where overlapping occurs, it may be possible to merge the administrative sides of colleges, as happened with Fife College of Further and Higher Education and Glenrothes College, which shared their financial administration so that more money could be put into the front line.

Again, on the college estates, the figure in the Auditor General's report is a basic figure, as we found out when we took evidence. It is just for making the buildings windproof and waterproof and not for improving the estate to the extent that it needs to be improved.

Margaret Jamieson (Kilmarnock and Loudoun) (Lab): The response is in a different format from that of responses that we have received in the past. Milestones were always built into the responses as an indication. From my conversation with the convener, I thought that this response had taken the standard format. It is not helpful that the Executive appears to have used a different format on this occasion.

It is as if we had never investigated the financing of further education colleges. There is no correlation with some of the recommendations that we have made in the past; there is no information about their progress and about how they impacted on some of the comments that we made this time. I feel that the Executive has missed the point and has, to some extent, ignored what the committee has attempted to do. We tried to set the Executive on the road of ensuring that colleges' funding streams are considered so that we can reduce the number of colleges that will have financial

difficulties in the next couple of years and in the long term. I share the view that we should reissue our recommendations and ask for proper responses. I do not think that we can accept what we have before us.

Mr Lloyd Quinan (West of Scotland) (SNP): I entirely agree with what Margaret Jamieson said, and I share her concerns. My specific concern relates to the clash of evidence. I refer to paragraph 3 of the Executive's response, on Inverness College. It was clear from the evidence that we took from the college's representatives that they did not believe that it could genuinely work through the issues, even within 10 years, yet we discover in the Executive's response that

"There is confidence that financial recovery can be achieved by the financial year 2008-09."

I want to know what information the Executive had in order to come to that conclusion, given that the evidence that we took from the people representing Inverness College flies in the face of that. We could be quite harsh about this. We could say that what we have been presented with by way of response to our report is insufficient, given the limited period that we have for continuing work. Furthermore, it strikes me that the response was issued with the attitude that the committee is not going to be sitting for much longer. I feel that we are being deliberately misled in certain areas.

The Convener: I would certainly like some clarification.

Rhona Brankin (Midlothian) (Lab): I do not share the views that have just been expressed, although we have nothing like enough information and we do not have examples. I would like the information to be fleshed out. If it is now believed that Inverness College and other colleges are able to recover on shorter time scales, that is great. I am not necessarily coming at this with the same approach as other members, but I thought that the Executive's response was rather light, and that there was not enough information in it.

The Convener: I concur with that. As well as seeking clarification, I would wish to reinforce the committee's clear views on the short-term, medium-term and long-term financial and organisational health of the whole further education sector. That is the purpose of our report. I would really like the Executive to address properly the positive recommendations that we made. Bearing in mind the fact that Audit Scotland will be returning to the issues in its next annual overview, I suggest that the clerk write to the Scottish Executive, making the committee's views known and seeking the clarification requested.

Rhona Brankin: It depends on what we think the committee's views are. It would be useful if you could summarise the committee's views.

The Convener: We suggested positive action in some of our recommendations but have just been told that there will be circulars. I would like it to be mapped out clearly what the recovery plans for the colleges are, who is expected to be part of them and when they are expected to deliver. If we end up with a basis for all future planning for further education colleges, it must be clearly established how that is to be achieved. We cannot progress until we have a clear idea of the route ahead and of when the milestones that have been mentioned will be reached.

Mr Quinan: I return to the case of Inverness College, which has echoes for many of the other colleges in recovery. We took evidence from Inverness College only about three or four months ago. Where did the magic bullet come from? Inverness College told us a few months ago that it cannot necessarily get out of the situation in which it finds itself even within 10 years. Then, a few months later, and with no explanation, we are told that the college will get out of its situation within five or six years. That has a clear knock-on effect on any other colleges that are working according to 10-year recovery plans. Is there a magic bullet, or are we simply being given two different sets of information? Was our questioning of the people from Inverness College more rigorous than that of the Executive or vice versa?

Mr Raffan: Perhaps we could give the clerks particular questions that can be incorporated in our letter to the Executive. There are a number of specific issues before us, but my concern is that the buck is being passed to the funding council. That is clear from the opening paragraph of the Executive's response.

Point 4 of the response says:

"Specific action has been taken in giving guidance on improving performance in specialised areas, such as finance and estates."

We know that a limited amount of capital is available. Although the Minister for Enterprise, Transport and Lifelong Learning might be finding it difficult to make specific commitments about finance for estates because of the forthcoming elections, he cannot just pass the buck to the funding council, as it depends on the Executive for the capital. Such points must be addressed.

Point 5 makes a specific point. It says:

"The overall objective of the mapping processes is to encourage significant long-term strategic change. It is not in itself an implementation plan."

We sought much more immediate progress than that; or, at least, we sought something in the medium term rather than in the long term. The minister must respond in detail to such issues. Although I understand the difficulties that he faces, given that an election is in the offing, he could set

out a detailed response and could explain that the approaching election inhibits him from making specific commitments.

14:15

The Convener: I want to clarify that the response is from the accountable officer, not the minister. The Audit Committee does not deal with policy; we deal with the facts of the matter. That is as it should be. We understand the massive problems that are involved in further education. That is why we made positive recommendations, which have not been addressed in the response that we have received. If the committee wishes, the clerk will write to the accountable officer to point that out and to seek clarification on the response to our recommendations.

Mr Raffan: Although I accept your point, the accountable officer is ultimately responsible to the minister. The document makes constant reference to ministers and to the strategic guidance that is issued by ministers. For example, it says:

"Ministers have on several occasions also been able to supplement their funding plans for FE".

We know where funding decisions are made.

Mr Quinan: I have a couple of points on Inverness College, which is referred to in point 3. I would like us to ask what is meant by

"The Council is shortly to embark on a campaign for financial security in the FE sector. This will involve defining what is meant by financial security, establishing targets and taking steps to ensure that the vast majority of colleges achieve financial security by 2006."

We should ask for that definition of financial security. It is clear that a new concept of financial security is being considered. I also suggest that we write to Inverness College to ask what has changed since its representatives gave us the evidence that we used in our report.

The Convener: In the first instance, I suggest that we request a reply from the accountable officer. Our first contact should be with the accountable officer. Once the clerk has produced a draft of the letter, I would be happy to circulate it, if that would be of assistance to the committee. Members could let us know about any points that they feel we have missed out. In that way, we will all be clear about our response to the response that we received.

If we make serious recommendations, they should be addressed seriously and should not be treated inadequately. That is the purpose of our response. Do members agree that the clerk will draft a letter to the accountable officer to seek further clarification of the Executive's response? That draft will be circulated before it is sent.

Members indicated agreement.

“Overview of the 2001/02 water authority audits”

The Convener: Item 3 is consideration of the “Overview of the 2001/02 water authority audits”, which is a report by the Auditor General for Scotland. Members will recall that the Auditor General for Scotland briefed the committee on the report at its most recent meeting, on 10 December. At that meeting, members indicated that they wished certain issues—in particular, the outstanding debt—to be pursued through correspondence. I would be grateful if members would highlight the issues that they propose should be taken up with the Executive.

Margaret Jamieson: In relation to reorganisation costs and efficiency targets, I want to find out how many employees there were in each of the categories in each of the three organisations prior to the formation of Scottish Water and I would like to know what the equivalent figures are now. We should find out whether we can extrapolate what costs were directly attributable to the merger. We should ask what action Scottish Water proposes to take to reduce the outstanding debt and whether it intends to take that action alone or in conjunction with local authorities.

Mr Raffan: I want to back up the point that Margaret Jamieson made, as I am particularly concerned about the reorganisation costs. I realise that front-line staff out in the field cannot be reduced, but a reduction should be made in headquarters staff so that the costs are recovered over time. The Auditor General has indicated that we should question Scottish Water about that.

The Convener: I thank members for their contributions. We will seek clarification on the accountability and regulatory arrangements, the costs of reorganisation and the level of outstanding debt. I suggest that we do that by means of written questions, as the issues would have been pursued in an oral evidence-taking session had circumstances been otherwise. I suggest that the clerk follows the matter through; members will receive a copy of the response. If members so desire, we can discuss the response at a future meeting. Are members agreed?

Members indicated agreement.

“Planning ward nursing - legacy or design?”

The Convener: Item 4 is a briefing from the Auditor General on his latest report, which is entitled “Planning ward nursing – legacy or design?” The report is a baseline report, which looks at the cost and utilisation of nurses on hospital wards. I invite the Auditor General to brief the committee on the report.

Mr Robert Black (Auditor General for Scotland): The report is the first piece of work to take a comprehensive look at nurse deployment costs and quality in the national health service in Scotland. Each year, more than £1 billion is spent on nursing in Scotland. More than 50,000 nurses are employed by Scottish NHS trusts. As nurses make up almost half of the staff complement, nursing expenditure is one of the biggest areas of expenditure in the NHS in Scotland.

The report attempts to highlight the need for better planning of the nursing work force and the need for that to be supported by much better information. As part of that improvement to the information base, the report suggests that the Executive might like to look more closely at measures of the quality of patient care. We need to have that information before we can ensure that we are getting value for money out of the £1 billion that is spent on the 50,000 nurses.

Some of the key issues that are identified in the report recognise the complexity and challenge that are involved in planning the nursing work force in Scotland. To plan the nursing resource well, managers need high-quality timely information on staffing and the quality of patient care. Such information is needed not only at board and hospital level but right down to ward level in individual hospitals. The report highlights a significant variation in the availability of planning information in the NHS. We believe that that information is required before the cost effectiveness of nursing staff levels can be determined.

One interesting and, I think, significant finding is that comparatively few staff are dedicated to the vital task of ensuring that the right number of nurses are in the right place at the right time. Clearly, there is always a concern to minimise the administrative overheads of the NHS, but the staff who are involved in planning the nursing work force at hospital and ward level are few in number. Indeed, in some parts of the NHS, they are almost absent.

The report highlights the wide and largely unexplained variation in the number and type of nurses who care for patients in comparable wards

across Scotland. The variation may be due to the absence of adequate forward planning of establishment levels. We also highlight the trend of increased expenditure on bank and agency nurses. There are a number of reasons for that trend, but we suggest that improved work force planning is one of the key ways in which high-cost bank and agency nurse expenditure could be contained.

As in almost all the work that we undertake in Scotland these days, the report represents a moving picture. In August, the Scottish Executive published its "Workforce Development Action Plan", which provides an opportunity to improve the management of nurse staffing levels throughout Scotland.

In summary, the first of the main recommendations that come out of the report for action by trusts, boards and the department is that the health boards, under the new unified structure, should consider taking on all the monitoring of the way in which the constituent trusts carry out work force planning. Secondly, the health boards should work closely with trusts to improve the management information that is available. Thirdly, the NHS in Scotland as a whole needs to develop and agree quality-of-care measures to enable the outcome of nursing care to be monitored. Through the boards working with trusts to improve the management information and through action to improve the quality-of-care measures, we will be able collectively to establish the extent to which we are getting value for money from this extremely important resource.

The study is a baseline study; it is a snapshot of what the audit found at one point in time in the Scottish NHS in relation to nurse expenditure. We are considering how to follow the issues up. Our latest thinking is that we might review early next year how the health department and the boards are monitoring the success of the work force action plan and the extent to which they have been able to take on the report's recommendations. We also intend to undertake a further limited review of bank and agency nursing later next year. We have examined the subject in the past and it is a significant area of NHS expenditure.

Barbara Hurst, who directed the study, is sitting on my right, next to Arwel Roberts, and she is happy to assist me in answering questions.

The Convener: Thank you. The issues that you covered are at the heart of any successful national health service and Audit Scotland is to be congratulated on its report, which highlights major areas of required action. Much of what Audit Scotland does always strikes me as common sense. On page 3 of the report we are told:

"Little is known nationally however about how trusts plan their nursing workforce or set staffing levels at ward level."

On page 55, Audit Scotland recommends improved management information. It seems incredible to me that even fundamental information is not available to plan what is a major, core and essential NHS resource. Why has that situation arisen?

Mr Black: That question should be addressed to the Executive, rather than to Audit Scotland, but I am sure that Barbara Hurst can give you some insight.

The Convener: Okay.

Barbara Hurst (Audit Scotland): We certainly do not wish to imply that health trusts are not using any information, because that is patently not true. We have managed to collect a lot of information, so it is available and many trusts are using it. Through the report we were trying to pull together the information so that trusts could use comparative information. There is not a lot of sharing of practice between trusts. That would be a way forward and it would mean that there was more consistency. We do not want to leave the committee with the wrong impression that there is no information available, because there is.

The Convener: So it is about communication and the sharing of information.

Barbara Hurst: I think so. It is also about making better use of what is available.

Sarah Boyack (Edinburgh Central) (Lab): I find the report very useful. A few headline points stood out, one of which was the extent to which wards throughout Scotland are under their establishment and do not have the number of staff that they expected to have. The report revealed a huge variation in how trusts address that issue. It seems fundamental, because it leads to trusts having to bring staff in at short notice. Certain trusts are not budgeting for maternity leave.

There are basic issues that are bound to put pressure on staff and to exacerbate the problem of the retention of nurses and the big challenge of attracting people to nursing in the first place. Many practical issues need to be addressed and the statistic in the report that struck me was that only two fifths of hospitals are staffed in line with the establishment that the trust set up for the wards. That is an incredibly low level. There is an awful lot of work to be done to ensure that we tie that in with the comments that Mr Black made about the quality of staffing output. Huge pressure will be built into the system if it is consistently understaffed and if trusts are not reviewing what the appropriate establishment is.

Rhona Brankin: I sense that it is early days in terms of being able to measure the quality of

patient care. I agree that that aspect needs to be worked on and expanded—compared with the number crunching, that is difficult to do. Has that work been done in England and Wales? How far advanced is that body of research?

14:30

Barbara Hurst: The fair answer is that the research is not very advanced. The Audit Commission, our sister organisation in England and Wales, tried to do something similar and came up with similar findings.

We tried to use proxy indicators, which are okay as far as they go, but the problem is that they measure quality in terms of what does not happen to patients—for example whether a patient does not get a pressure sore—rather than a more positive aspect of quality. In some ways, we are handing the matter back to the nurses. This is a matter on which they need to get some agreed measures. It is not our place to do that.

Rhona Brankin: It might be a question not of the number of nurses but of the quality of care, the qualifications and experience of staff and such matters that are harder to quantify.

Barbara Hurst: That is exactly what we, I suppose in our naivety, thought that we could try to get some fix on.

You are right that we need more sophisticated information to make those correlations. We could not find any. We are not saying that that is because they are not there; it is because we do not have the right measures.

Margaret Jamieson: The Auditor General undertook an investigation into hospital-acquired infections. It would be interesting to see whether there is a correlation between the poor performance of some trusts in the number of staff who are on wards and instances of hospital-acquired infections. There might not be a correlation, but I ask Audit Scotland to examine that point and come back to me on it.

The main area that I have concerns about is the way in which nursing work force planning is currently undertaken. It appears to be somewhat disjointed in that each trust does its own thing. The missing cog is further education and higher education. Colleges and universities seem to determine in isolation how many people they are going to allow to start the degree course, or the pre-degree course in further education. There does not seem to be an in-built mechanism to take into account dropout rates in first and second year. I notice that the Auditor General's report does not make too much play of that aspect. It is part and parcel of the joined-up aspect of the service, which does not seem to be there and working. It is all

right for the health service to consider its work force planning, but it cannot do that in isolation.

It is nearly four years since I was involved in the health service. An awful lot of changes appear to have taken effect in that period. We seem to have lost our way in respect of the grade of staff who are used within the wards. I notice that the Auditor General's report makes no reference back to the national grading structure. It appears that most trusts have now binned that and have created their own structures, for all sorts of reasons.

I do not know whether you have evidence of it, but the report comments that

"less trained nurses may carry out duties above their level of training".

If that is the case, I would certainly expect that someone would have brought it to the attention of the accountable nurse. If it continues, the Nursing and Midwifery Council might want to investigate the matter because the individual nurse would be operating without the necessary qualification and if anything were to happen the nurse could be struck off rather than the superior who has instructed the action.

Those are some of my comments on the report, which made very good reading over the break.

The Convener: I detect that we are sailing towards very deep but important waters.

Barbara Hurst: I will respond to a couple of those points because they are all very valid.

We tried to collect some information about hospital-acquired infections through the figures for the incidence of clinical risk. At the time, several trusts were putting those systems in place so we could not get comprehensive information. We could certainly revisit that issue.

The education of nurses coming into the work force was outside the scope of the report. If we return to consider how the action plan is implemented, we could pick up on some of the issues raised. Education would be a very valid issue for us to pursue.

Mr Raffan: I echo the Auditor General's concern about bank and agency nurses. As page 41 of the report indicates, it is difficult to measure the quality of care. However, it is difficult to maintain quality of care if an increasing number of bank and agency nurses are being used and patients are seeing different nurses all the time.

My recent experience was not in Scotland so I cannot blame Scotland. Nurses were coming in all the time and asking patients what was wrong with them. Patients were seeing different faces all the time. I might be able to cope with that, but older people and people in psychiatric care might find that very disturbing.

My second point is about clinical nurse specialists. You made the point that there is a huge variation in acute trusts. I realise that the report shows a snapshot of a particular point in time and we are embarking on a process of having more nurse specialists. I notice that you refer to nurse specialists directly involved in in-patient care. Are you considering looking at nurse specialists working in primary care and in out-patient care. For example, Forth Valley NHS Board has appointed two specialist diabetic nurses, which has led to a huge reduction in admissions to hospital of diabetic patients. Those nurses can see and monitor patients at home and the patients do not have to be brought into the hospital. That also has an impact on costs.

The number of specialist nurses in an area such as diabetes—and there are numerous other medical areas one could think of—can have a significant impact on hospital admissions, particularly short-term admissions.

Barbara Hurst: A significant amount of money—£33 million—is spent on bank and agency nurses, but that is relatively small in terms of the £1 billion that is spent in total. Nevertheless, we felt that the way in which we collected the information did not allow us to start unpicking how trusts were still using bank and agency nurses. As the Auditor General said, we would like to revisit that issue in its own right and consider what is going on in more detail.

We did not do very much on nurse specialists in the acute sector for this report. I am interested in Keith Raffan's point about how they could be used in the primary care sector and we will take that point on board because we are considering out-patient care.

Mr Raffan: I take your point about agency staff forming a small proportion of the whole, but I am concerned about the rate of increase.

Barbara Hurst: Yes. I am not belittling your point.

The Convener: I thank Audit Scotland for the report and for its trailer for forthcoming attractions. Members should note the report and also note the fact that Audit Scotland will revisit the issues raised and report against progress. That follow-up work will be progressed in about two years. Does the committee agree to note the report?

Members *indicated agreement.*

14:38

Meeting continued in private until 15:31.

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