



ANGUS INTEGRATION JOINT BOARD AUDIT COMMITTEE – 26 JUNE 2024

RISK AND RESILIENCE ANNUAL REPORT

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ABSTRACT

The purpose of this report is to provide an annual report to the Integration Joint Board on the risk and resilience activity within the Partnership from April 2023-March 2024.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board Audit Committee: -

- (i) Review and accept the strategic risk profile and risk rating matrix;
- (ii) Accepts the new and emerging strategic risks;
- (iii) Acknowledge the progress that has made in relation to resilience planning;
- (iv) Acknowledge the requirement to review the IJB Risk Appetite; and
- (v) Provide their view on the level of assurance this report provides and therefore the level of assurance regards Risk Management systems and processes within AHSCP.

2. BACKGROUND

The IJB Audit Committee's Terms of Reference states that the remit of committee includes an oversight function on behalf of the IJB regarding Risk Management activity through receipt of relevant reports. The IJB Audit Committee fulfil this role by:

- Having oversight of the IJB risk management arrangements.
- Receipt, review, and scrutiny of reports on corporate strategic risks and any key operational risks.
- Ensuring they are aware of any risks linked to recommendations from the Chief Officer covering new priorities/policies.

The Chief Officer, as Accountable Officer, has responsibility for maintaining a sound system of Internal Control and reviewing the effectiveness of the risk management system within the organisation, facilitating the preparation of an Annual Governance Statement. In addition, IJB's are subject to the requirements of the Scottish Public Finance Manual and must operate a risk management strategy.

Angus IJB has a Risk Management Strategy in place (see report 6/21, IJB April 2021). The IJB monitors a series of corporate strategic risks using agreed methodologies. The risks monitored include:

- Financial,
- Quality of care,
- Compliance/legislative/regulatory
- Workforce

The scrutiny and management of risks is devolved to Angus HSCP Clinical, Care and Professional Governance Group, chaired by Angus HSCP's Associate Medical Director / Clinical Director. The current risk management process within AHSCP ensures that effective risk management is integrated in the way AHSCP leads, directs, manages, and operates.

Ongoing and continuous monitoring of risks via operational groups ensures a better understanding of whether the risk profile is changing and if the current/planned controls are effectively reducing the risk. This provides a greater level of assurance and ensures that the management of the risk is embedded into day-to-day management activities rather than a separate standalone process. Individual Strategic Risks are reported to AHSCP CCPG twice a year using a Risk Assurance Report template and are subject to scrutiny by the group.

3. CURRENT POSITION

The IJB Strategic Risk Register is reported to Angus IJB Audit Committee twice a year. The Angus Integration Joint Board Strategic Risk Register (Appendix 1) is maintained, updated, and reported in line with the IJB Risk Management Strategy. Between the period of **April 2023 – March 2024**, the Angus Clinical, Care and Professional Governance Risk Group met on following dates to consider AIJB Strategic risks.

- 15 May 2023
- 10 July 2023
- 11 September 2023
- 13 November 2023
- 22 January 2024
- 18 March 2024

The highest risks on the IJB Strategic Risk Register during April 2023 – March 2024 were:

- SR01 Sustainability of Primary Care Services with a risk score of 20 (RED)
- SR03 Financial Management with a risk score of 20 (RED)

As a result of effective controls and planned mitigation the risk score for the following risks reduced during April 2023 – March 2024:

- SR11 Commissioned Service Provider Failure – the risk score reduced from 20 (RED) to 12 (AMBER) – following a further review in November 2023 this risk has increased from 12 (AMBER) to 16 (AMBER)
- SR24 Commissioned Services – Unmet Need – the risk score reduced from 25 (RED) to 9 (YELLOW)
- SR08 Workforce Optimisation – the risk score reduced from 25 (RED) to 16 (AMBER)
- SR14 Adult Support and Protection – the risk score reduced from 16 (AMBER) to 8 (YELLOW)
- SR21 Equalities – the risk score reduced from 20 (RED) to 9 (YELLOW)

As a result of effective controls, mitigation and the planned risk score being met the following risks were archived during April 2023 – March 2024:

- SR14 Adult Support & Protection
- SR21 Equalities

AIJB Strategic Risks

SR01 Sustainability of Primary Care Services

As a result of an inability to:

- Reliably recruit, train, and retain workforce,
- Have appropriate premises to deliver clinical and support services, and
- Have in place adequate digital systems to support clinical care and communication between teams, patients and across the services.
- Address inequalities of access to services in remote and rural areas.

There is a risk we will be unable to deliver safe, effective, high quality, person centred primary care services. This will result in inadequate care, reputational damage, and failure to meet legal requirements.

This risk encompasses all Primary Care Services:

- Dental
- Optometry
- General Practice
- Community Pharmacy

The inability to provide a reliable standard of healthcare to the population could result in subsequent pressures elsewhere in the healthcare system. In addition, there is a risk of significant adverse publicity, reputational damage, and unsatisfactory patient experience.

A risk assurance report was presented to NHS Tayside Care Governance Committee on 4 April 2024.

NHS Tayside Strategy

An update in relation to the development of the Tayside Primary Care Strategy was presented, an NHS Tayside Strategy is being produced, this will be a system-wide strategy identifying collective actions, including Primary Care. To avoid duplication, it is proposed that the Tayside Primary Care Strategy is incorporated into the NHS Tayside Strategy. This approach has been approved by Angus, Dundee, and Perth & Kinross Integration Joint Boards (IJB).

Premises

NHST Primary Care, Finance Department and Property Departments are continuing to meet to undertake the work to progress sustainability loans and lease assignments, with NHST Property Services dedicating specific support to this piece of work. This work is reported to the Primary Care Property and Infrastructure Group (PCPIG) who then report to the Primary Care Board.

GP Sustainability Survey

A survey was circulated to all Tayside Practices in January/February 2023 and the results shared with individual practices and HSCPs. A cumulative report for Tayside was also produced. The survey was repeated in February 2024.

This Sustainability of Primary Care Services Audit reviewed and provided constructive commentary on the adequacy of risk and performance management mechanisms. The Internal Audit identified several areas of good practice and a number of areas for improvement. An update on the actions identified by Sustainability of Primary Care Internal Audit was provided to the Chief Internal Auditor in March 2024. All actions have been completed and are awaiting review by the Chief Internal Auditor.

Action Point	Date of Expected Completion	Status
Facets of Primary Care Risk	March 2023	Complete
Owners and impact of Primary Care Risk	February 2024	Complete
Structures	February 2024	Complete
Assurance	March 2023	Complete
Sustainability of GP practices	January 2024	Complete
Primary Care Board	December 2023	Complete
Roles and Responsibilities (Operational Medical Director for Primary Care)	August 2023	Complete

A Strategic Sustainability of Primary Care Services risk has been developed by and being managed by each HSCP. Work remains ongoing to ensure the delivery of excellent, high quality, accessible and sustainable primary care services for the population of Tayside.

SR02 Prescribing Management

As a result of the increasing medicine costs and volumes of prescribing within Angus beyond the funded uplift, prescribing costs continue to exceed the available resource. This could impact on wider service provision by the Angus IJB.

In the Prescribing Report to the Integrated Joint Board on 21 February 2024 the Associate Clinical Director highlighted the trends in the current prescribing costs per item. Alongside this the stable volumes of usage, whilst reassuring they are not increasing in an older and frailer population, they are not reducing despite knowing we do have medicines waste to address.

The IJB supported the actions set out the Prescribing Report including the change ideas being progressed as part of the workplan. The Angus Prescribing Management QA Group continues to regularly meet to progress the workplan of improvements.

Optimising medicines is a priority which sits within the Prevention and Proactive Care Workstream.

The risk score remains at 16 (AMBER).

SR03 Financial Management

Failure to develop and implement a balanced financial plan will lead to a risk of unsustainable services.

A previous lack of progress with the delivery of planned interventions, progression of financial recovery actions and generation of proposals in the Strategic Delivery Plan to close out underlying gaps in the Strategic Financial Plan are a collective source of concern. These, and challenging funding agreements, all contribute to an expected financial shortfall of c£10m by 2026/27 with a significant list of unquantified financial risk beyond that.

The risk score remains at 20 (RED). Current circumstances (vacancies/reserves) resulted in a reduced short-term risk, but the longer term/ strategic risks remain. Opportunities to close out financial planning gaps were not identified during the development of the 2023 Strategic Commissioning Plan and Strategic Delivery Plan. Reinvigorated work is progressing to address this, and this continues to be described in Finance reports.

There remain a number of financial issues within the IJB that are not being resolved on anticipated timelines including issues such as Mental Health financial risk-sharing.

There are risks regarding approval of new drugs and the sustainability of GMS General Medical Services) and NCHC (National Care Home Contract) contracts.

The financial pressures the IJB's partners (Angus Council and NHS Tayside) are operating under have increased further and this will have an impact on the IJB's operating and planning environment.

SR08 Workforce Optimisation

As a result of changing demographics, national workforce issues, new duties affecting our staff and people who use our services, including the consequences of the COVID-19 Pandemic there is a risk that Angus HSCP will be unable to develop and sustain its workforce to meet its legal obligations under the Public Bodies (Joint Working) (Scotland) Act 2014 and any other relevant legislation.

The current risk score remains at 16 (AMBER), which is the planned risk score. The rationale for this includes strong oversight of the issues, regular meetings of the Workforce Steering Group, active workforce subgroups that are focussed on mitigating risk and addressing workforce challenges, an increase in new posts across the AHSCP and reasonable assurance being received from the Workforce Plan Internal Audit report (AN04/23) on 14 August 2023.

SR11 Commissioned Service Provider Failure

As a result of shortage of suitably qualified staff, a large-scale adult protection investigation leading to embargo and the increased cost of living, there is a risk that commissioned providers of personal care at home, residential care or supported housing, may be unable to continue to provide services. This could result in a shortage of care provision and unmet service user need.

There are a number of actions being taken forward to support the recruitment and retention of staff working within health and social care and there is an increasing focus on business continuity planning in the event that a provider becomes unsustainable. The current risk score remains at 12 (AMBER). Bronze Business Continuity Plans (BCP) are now in place for commissioned services. A review of Care Home and Care at Home providers BCPs has also taken place and support has been offered to providers looking to make improvements to their plans. A template has been developed and shared with Care at Home providers to support a consistent plan.

An internal audit of commissioned services took place in 2022. The scope of the review was to evaluate and report on the management of specific risks associated with the sustainability of services commissioned by AHSCP from the independent and third sectors. A number of improvement actions were identified which have been taken forward via the Third-Party Group. Three out of the four improvement actions are now complete including the review of provider BCP, the creation of commissioned services BCPs and the review of meeting remits for each

group linked to Commissioned Services. The final improvement action in relation to the development of KPIs for provider workforce data information is still in progress.

SR14 Adult Support & Protection

Ensuring that the quality of adult protection work within the AHSCP is of a good standard so that risk to the public, to individual services and to member organisations are averted.

The current risk score is 8 (YELLOW) which is lower than the planned risk score. The Joint Adult Support and Protection Inspection concluded that the partnership's strategic leadership for adult support and protection was effective with areas for improvement. There were clear strengths supporting positive experiences and outcomes for adults at risk of harm, which collectively outweighed the areas for improvement.

Robust governance arrangements are in place in relation to the following:

- Multi Agency Inspection of Adult Support and Protection Improvement Plan
- SCR P19 Improvement Plan
- ASP Oversight Action Plan
- Self-evaluation and Continuous Improvement subgroup
- AHSCP Specific Actions
- AHSCP Audit Activity
- AHSCP ASP Operational Instructions for Staff
- ASP Mandatory Staff Training
- Management Oversight

As the risk score has been sustained for 6 months and robust reporting arrangements are in place, this risk was archived in January 2024.

SR21 Equalities

There is a risk that Angus HSCP will be unable to evidence that it has paid due regard to the need to foster good relations within communities by tackling prejudice and promoting understanding, advance equality of opportunity, eliminate discrimination, harassment and victimisation and will not meet its legal obligations under the Equality Act (2010) and other relevant legislation.

The current risk score is 9 (YELLOW) which matches the planned risk score. The Equality and Human Rights Commission (EHRC) have confirmed that the partnership is compliant with Public Sector Equality Duty (PSED), and further improvements have been made to ensure that equalities are mainstreamed within the Partnership.

Ongoing improvement work will continue in relation to the following:

- Equalities training
- EQIA template & Equalities Consideration Form
- Equalities Mainstreaming Report and Equality Outcomes Progress Report

As the risk score has been sustained for 6 months and robust governance arrangements are in place, this risk was archived in January 2024.

SR24 Commissioned Service Provider – Unmet Need

Unmet need for care at home services occurs when assessed services required by a service user as needed to help them remain at home are not being received due to providers lack of available hours or lack of providers in particular localities across Angus. The unavailability of services in the community, particularly for critical priorities, can lead to delayed hospital discharges; admission to respite care home placements; and vulnerable people being left unsupported in the community.

Whilst there has been a significant reduction in the number of unmet need hours within AHSCP, there are still concerns in respect of our ability to 'capture' unmet need and report accurately on the levels.

The following current controls are in place to manage the risk:

Eligibility Criteria – available services prioritised to critical and substantial service users.

Low Level Services – establishing a network of unregistered providers (i.e., not care at home) who deliver low level support and whom service users can be signposted. This would hopefully take the pressure off care at home providers.

Framework – new framework in operation since April 2023. Although providers are committed to their contractual commitment, there are still ongoing challenges within the sector which may inhibit immediate growth i.e., recruitment.

Option 2 capacity – utilising Option 2 providers' capacity for Option 3 critical and/or substantial services.

New providers – one provider has come into Angus and began delivering services from January 2024. This has created capacity in the South localities. There are also discussions ongoing with another provider who is currently going through the registration process to become a care at home provider in the North-East of Angus.

Recruitment – significant work has been deployed to support recruitment for care at home provider.

Practical issues remain in respect of overall capacity within commissioned services to meet the level of need in the community, particularly with the growth of the elderly population.

The current risk score remains at 9 (YELLOW), which is the planned risk score, however due to the volatility of this risk it was agreed that it should remain on the risk register.

SR28 Eclipse System

The migration to Eclipse from CareFirst and the upgrade to Eclipse Finance module is having a significant impact on AHSCPs ability to implement efficient and effective processes.

Current system limitations impact our ability to develop robust and efficient financial processes. Delays with current workstreams are impacting future developments and improvement for AHSCP and there is a continual burden on existing resource and support and deliver on this project. There is significant risk for AHSCP that we will be unable to evidence compliance with audit requirements.

This risk score remains at 20 (RED).

New, Emerging Risks

The following risks are in draft and will be approved at CCPG Risk Meeting in July 2024:

- **SR25 AHSCP Mental Health** - As a result of the changing and growing needs of the Angus population, whole system workforce and financial constraints there is a risk that the current model of care will be unable to deliver high quality, proactive, safe, and person-centred mental health, and well-being services.
- **SR26 Sustainability of AHSCP Primary Care Services** - As a result of inability to:
 - Reliably recruit, train, and retain GP workforce (due to national workforce shortage)
 - Reliably recruit and train enough multi-disciplinary teams
 - Have appropriate premises to deliver general practice effectively.
 - Have reliable and adequate digital systems to support clinical care.

There is a risk that this may lead to GP Practices handing back their GMS contracts resulting in an inability to deliver safe effective, high quality person-centred care. This could lead to reputational damage and increasing pressures elsewhere in the system including neighbouring practices.

- **SR29 Strategic Commissioning Plan** - As a result of significant financial and workforce pressures there is a risk that Angus Integration Joint Board (IJB) will fail to meet the ambitions outlined within the Strategic Commissioning Plan 2023 - 2026 and deliver on the priorities outlined in the SCP. This would result in a failure to improve the health and wellbeing outcomes of the population of Angus.
- AHSCP CCPG are monitoring the developments in relation to the **National Care Service**, to identify potential emerging risks.

Risk Appetite

The Risk Appetite Statement was endorsed at AHSCP CCPG in January 2023 and approved by Angus IJB Audit Committee in February 2023. Risk Appetite will be reviewed and updated in July 2024.

Progress continues to be made in relation to the application of Risk Appetite. A Risk Appetite Guidance document is currently being developed with support from colleagues across NHS Tayside and neighbouring HSCP's.

An updated Strategic Risk Profile and Risk Rating Matrix is included in Appendix 1.

Internal Audit

Responses to the remaining outstanding internal audit action points from Internal Audit report AN05/20 are being finalised. This will be reported to the Audit Committee separately.

Resilience Planning

Angus HSCP, under Angus Integration Joint Board (AIJB), is responsible as a Category 1 Responder within the Civil Contingencies Act 2004. Five main areas of responsibility have been identified and progress is being made to ensure the appropriate systems and processes are in place. Areas of responsibility identified are:

1. Risk Assessment
2. Business Continuity Planning
3. Emergency Planning
4. Engaging with the public
5. Collaboration

These areas of responsibility are coordinated and managed through the AHSCP Resilience Planning Group (ARPG), who oversee the development of the AHSCP IJB Category 1 Responder function. This group has established a Resilience Planning Working Group (RPWG) that will:

- Develop a systematic **risk assessment** process for threats and hazards within the local area.
- Develop and implement a **Resilience Framework** for Angus IJB.
- Develop and implement an **emergency planning framework** for health and social care functions in Angus.
- Plan and coordinate a **multi-agency response** to any incident to ensure that the needs of those affected by the incident are met.
- **Engage with the public** through consultation, publication of risk assessments and emergency plans (where required) and providing advice and information.
- Ensure **collaboration** with other Category 1 and Category 2 responders at a local, regional, and national level.
- Seek assurance that the Angus IJBs partners (NHST and Angus Council) have suitable resilience arrangements in place for lead partner services.

As Chief Officer, I would suggest that the level of assurance in relation to AHSCP's Risk Management systems and processes is: **Reasonable** due to the following factors:

- There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
- Controls are applied frequently but with evidence of non-compliance.

4. FINANCIAL IMPLICATIONS

There are no direct financial implications arising directly from this report however Angus IJB's strategic risk register identifies Finance as a red risk. This is particularly challenging regarding longer term financial plans. This is described in detail in the IJB's Strategic Financial Plan which highlights short term risks can be managed due to IJB reserves but longer-term risks remain considerable and place at risk the delivery of the strategic objectives in the Strategic Commissioning Plan (SCP).

5. RISK

All Strategic Risks are detailed in Appendix 1.

6. OTHER IMPLICATIONS (IF APPLICABLE)

N/A

7. EQUALITY IMPACT ASSESSMENT

A screening assessment has been undertaken and a full combined Equality Impact Assessment, is not required for the following reasons: -

- This is an update report only.

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List of Appendices:

Appendix 1: Angus IJB Strategic Risk Profile