



AGENDA ITEM NO 8

REPORT NO IJB 46/23

ANGUS HEALTH AND SOCIAL CARE

INTEGRATION JOINT BOARD AUDIT COMMITTEE – 21 JUNE 2023

RISK MANAGEMENT ANNUAL REPORT 2022/2023

GAIL SMITH, CHIEF OFFICER

ABSTRACT

The purpose of this report is to provide an annual summary to the Integration Joint Board on the risk management activity within the Partnership during 2022/2023.

1. RECOMMENDATIONS

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

- (i) Review and accept the strategic risk profile, risk rating matrix and strategic risk improvement action plan,
- (ii) Acknowledges progress made in relation to Internal Audit Review of Risk Management,
- (iii) Accepts the new and emerging strategic risks
- (iv) Acknowledge that IJB/Audit committee members have attended risk appetite development sessions and the IJB Risk Appetite was agreed on 26 April 2023.
- (v) Acknowledge that work is progressing in relation to the application of Risk Appetite.

2. BACKGROUND

Members of the IJB Audit Committee are responsible for:

- 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 Angus Integration Joint Board (IJB) Audit Committee has delegated responsibility from the IJB for ensuring all relevant strategic and operational risks are accurately identified, assessed, evaluated, recorded and monitored.

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 service, financial, clinical care and professional governance, performance management and workforce risks.

The scrutiny and management of risks is devolved to Angus HSCP Clinical, Care and Professional Governance Forum, chaired by Angus HSCP's Associate Medical Director / Clinical Director. Monitoring of risk performance is undertaken on a bi-monthly basis with an overview provided to Angus HSCP Executive Management Team and NHS Tayside Care Governance Committee.

The IJB Strategic Risk Register is to be reported to Angus IJB Audit Committee twice a year. The annual risk report will be considered at the Angus IJB Audit Committee Meeting in June 2023. A process has been established in order to exception report any new risks, scoring over 20, or where a risk has increased to >20 to the IJB Audit Committee, outwith the timetabled updates.

3. CURRENT POSITION

The Angus Integration Joint Board Strategic Risk Register (Appendix 1) is maintained, updated and reported in line with the IJB Risk Management Strategy.

The highest risks on the IJB Strategic Risk Register during 2022/2023 were:

- SR01 Sustainability of Primary Care Services with a risk score of 25 (red/extreme)
- SR03 Financial Management with a risk score of 20 (red/major)
- SR08 Workforce Optimisation with a risk score of 20 (red/major)

As a result of effective controls and planned mitigation the risk score for the following risks reduced during 2022/2023:

- SR11 Commissioned Service Provider Failure – the risk score reduced from 20 (red/major) to 12 (amber/moderate)
- SR14 Adult Support and Protection – the risk score reduced from 16 (amber/moderate) to 8 (yellow/minor)
- SR21 Equalities – the risk score reduced from 20 (red/major) to 16 (amber/moderate)

The following risk was added to the Angus IJB Strategic Risk Register during 2022/2023:

- SR21 Equalities – added in September 2022

SR01 Sustainability of Primary Care Services:

The Primary Care Board, on 8 December 2022, agreed a revised narrative and scope for the purposes of this risk.

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

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.

The scope was initially defined as General Practice and associated multidisciplinary teams. However, following feedback from Care Governance Committee on 2 February 2023, the description is being reviewed to encompass all Primary Care Services and reflect the associated risks.

One of key areas of this risk relates to the Primary Care Services provided through General Practices. This risk recognises that a failure to maintain sustainable Primary Care Services in localities and across Tayside will result in a failure to meet both the National Clinical Strategy and the existing Tayside Primary Care Strategy. This would result in patients being unable to access Primary Care Services across the geographical location and a failure to provide continuity of service.

The inability to provide an adequate 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.

This risk continues to be assessed as having a current risk exposure rating of 25. This exceeds NHS Tayside Risk Appetite for a Quality of Care Risk. As per the Risk Management Strategy and Framework, enhanced monitoring of this risk is required until the current risk exposure rating falls within acceptable limits.

This Sustainability of Primary Care Services Audit reviewed and provided constructive commentary on the adequacy of risk and performance management mechanisms. As management have already acknowledged, the need for an overhaul of the strategic risk, overt assurance will be provided on the fully reviewed and updated risk as part of a future internal audit.

Progress has been made in relation to the recommendations identified by Internal Audit.

- The Chief Officer, Angus IJB as lead partner initiated a Tayside wide discussion comprising the three Chief Officers and the AMD for Primary Care, with input for NHS Tayside, with regards to premises and finance, to review responsibilities regarding primary care management and risks within that (19 January 2023).
- A co-ordinated approach (GP sustainability survey) was implemented to identify GP practice at risk, 61/61 practices responded. Outputs from the survey will be reported back to the Primary Care Board on a twice yearly basis, with the associated local delivery plan.
- Primary Care Services and the Property Department of NHS Tayside have met to develop and agree a working group and work plan to take forward the strategy around the national code of practice for GP premises. This work will take in to consideration the information on property from the national survey, that considers engineering and statutory compliance, to facilitate the migration of leases to board responsibility, or the requirement to provide suitable alternative premises in line with the national code of practice. Primary Care Services have prepared an accurate record of timelines for lease expiry together with maintaining a summary of practices that have intimated a desire for the board to take on their lease.
- The Primary Care Strategy is currently being drafted, further work is required to ensure the Strategy accurately captures the Strategic Vision; this will be presented to IJB in June 2023.
- The Primary Care Board membership and terms of reference are being reviewed which will support with this process. This was presented to the Primary Care Board on 25 May 2023.

- The Primary Care Internal Audit Report recommended that the role of the interim Associate Medical Director for Primary Care should be reviewed and consideration given to a substantive permanent appointment to ensure the post has the organisational status and profile required. The Associate Medical Director role is currently being reviewed with a view to a permanent recruitment with an updated job description. An agreement has been reached to change the title to Operational Medical Director and a timeline for advertisement of this post is being agreed.

SR03 Financial Management

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

The risk continues a residual risk score of 20 (5x4) as, while the Angus Integrated Joint Board did not overspend in 2022/23, the board's 2022/23 to 2024/25 Strategic Financial Plan describes a significant long-term financial risk.

While the IJB has continued to tackle challenging issues during 2022, increasingly funding pressures (as demonstrated by Scottish Government funding adjustments and the pressures being experienced by the IJB's partners) will have a cumulative negative impact on the IJB. This will exacerbate challenges linked to the inflationary environment on top of underlying demographic pressure. In addition there are a number of unresolved financial issues at the interface of IJB and NHST financial planning.

COVID-19 did exacerbate previous slippage on delivery of planned interventions in the Strategic Financial Plan but much of the previous capacity is now reinstated. Commissioning and associated financial plans are being developed through the IJB's Strategic Planning Group and other forums.

There remain a number of long-standing improvement actions in the finance domain with limited capacity from early 2020 - to mid 2022 to resolve these (partly due to COVID-19 impacts, but partly due to capacity of finance support). In 2022/23, recent recruitment and a reduction in the COVID impact has allowed some initial progress with improvement actions.

SR08 Workforce Optimisation

There is a risk that Angus HSCP will be unable to develop and sustain its workforce to meet its legal obligations.

Scottish Government required AHSCP to have a 3 year workforce plan commencing July 2022. This plan was developed and submitted to Scottish Government. Feedback from Scottish Government was very positive with only one recommendation to reflect further staff feedback and ongoing work in relation to Equalities. Suggestions for improvement included:

- Align workforce considerations with the organisations strategic direction linking with service and financial planning commitments.
- Identify the key priority service areas across the medium term.
- Clearly identify the workforce risks and capacity requirements across these priority areas providing, in some detail, the anticipated whole time equivalent need that has been identified through your workforce modelling exercises.

The workforce plan will support the AHSCP to have the right people, with the right skills, in the right places, at the right time. The plan provides an analysis and forecast of workforce supply and demand informed by local and national workforce challenges and demographic changes. It is accompanied by an action plan on how we will attract, retain and develop our workforce in order to meet current and future workforce requirements. The [Workforce Plan](#) is available on Angus HSPC website.

Four work streams have been identified to address the priorities highlighted with the workforce plan:

- Recruitment and Retention.
- Workforce Learning and Development.
- Staff Health and Wellbeing.
- Data.

Each work stream has a focused action plan and reports to the Workforce Steering Group every 6 weeks.

Emerging Risks

The following emerging risks were discussed at AHSCP CCPG in 2022/2023:

- Advanced Clinical Practitioners/Advanced Nurse Practitioners
- Equalities
- IJB Category 1 Responder
- Primary Care Premises Strategic Risk
- National Care Service
- Cost of Living Crisis
- Community Compulsory Treatment Orders (SBAR)
- Detention Order Process
- Non-medical prescribing Admin Support
- Rota Disconnect
- Industrial action
- Business Continuity Plans

Resilience Planning

It was agreed at Angus CCPG that future Risk meetings will be inclusive of resilience planning and civil contingencies. This will ensure that AHSCP has robust arrangements in place to provide an integrated response in the event of a major incident or internal emergency, in order to protect the health of and ensure continued provision of health and social care to the population. The CCPG Terms of Reference has been updated to reflect this change.

The following items will be standing agenda items for Risk & Resilience meetings:

- Business Continuity Plans (BCPs)
- Emergency Planning
- Category 1 Responder
- Prevent Duty

Risk Appetite

The second Angus IJB Risk Appetite Development Session was held on Wednesday 26 October 2022. 14 IJB/Audit Committee members attended the session which included four IJB voting members. Information was circulated to all members following the session.

A risk appetite for the following categories was agreed by those present at this session:

- Compliance/Legislative/Regulatory
- Quality (of care) Clinical
- Reputational
- Resource (Financial)
- Resource (Workforce)

Scoring was undertaken using a five-point scale of Avoid, Minimal, Cautious, Open or willing. The draft Risk Appetite Statement was shared with all members of Angus IJB for agreement prior to being endorsed at AHSCP CCPG on 9 January 2023 and approved by Angus Audit Committee on 19 April 2023.

Guidance on the application of the Angus IJB risk appetite is being developed. The current score of the strategic risks will be compared to the expressed appetite for the assigned

category of risk. Where the current score exceeds the risk appetite, additional mitigating actions, will be identified. Increased reporting of a risk will be required until the risk is mitigated to within/below the risk appetite.

Risk Training

Angus HSCP Improvement and Development Service oversee the collation of risk training Register to ensure all relevant staff and IJB/Audit Committee members have received training.

All future Risk Management Updates to the Audit Committee will confirm the relevant risk training delivered in the 12-month period. As this is the first time this information has been included in the Risk Management Update, all recent training has been noted below:

October 2022 – Risk Appetite Session (All Board members and advisors)

February 2023 - Improved understanding of Risk Management and Risk Scoring.

4. FINANCIAL IMPLICATIONS

There are no financial implications arising directly from this report however Angus IJB's strategic risk register identifies Finance as a red risk. This is particularly challenging with regard to longer term financial plans. This is described in detail in the IJB's financial plan where it 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.

5. RISK

No new risk other than the ones described in this report.

6. OTHER IMPLICATIONS (IF APPLICABLE)

N/A

7. EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment is not required.

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List of Appendices:

Appendix 1: Angus IJB Strategic Risk Profile and Risk Matrix Template

STRATEGIC RISK PROFILE

Appendix 1

Datix ID	Title & Description	Risk Owner/ Manager	Current Assessment			Status	Adequacy of Controls (mitigation)	Risk Appetite	Risk Reviewed
			Inherent	Residual	Planned				
353	SR01. Sustainability of Primary Care Services To maintain sustainable Primary Care Services both in and out of hours due to national recruitment issues.	Chief Officer (GS)	25	25	12	→	Incomplete	Above Appetite	15/05/2023
574	SR02. Prescribing The prescribing overspend remains the single most significant cost pressure within the IJB.	Associate Medical Director (AC)	25	16	9	→	Incomplete	Within Appetite	15/05/2023
578	SR03. Financial Management Noting long term financial forecasts, to maintain good quality financial management and to ensure the best use of all available resources.	Chief Officer and Chief Finance Officer (GS, SB)	25	20	16	→	Incomplete	Within Appetite	09/01/2023
1082	SR08. Workforce Optimisation Bringing together partnership staffing to improve outcomes, efficiency and reduce duplication.	Head of Service (EM)	25	20	16	→	Incomplete	Above Appetite	14/11/2022
1074	SR11. Commissioned Service Provider Failure To monitor and provide assurance that mechanisms for identifying early warning signs that providers operating locally are failing or in difficulty.	Head of Service (EM)	20	12	9	↓	Adequate	Below Appetite	27/03/2023
1077	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.	Head of Service (EM)	20	8	12	↓	Adequate	Below Appetite	27/03/2023
1320	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 understand, 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.	Head of Service (JG) Lead of Equalities	25	16	9	↓	Adequate	Above Appetite	15/05/2023
	SR24 Commissioned Services – 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. 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.	Head of Service (EM)	25	15	9	New Risk	Incomplete	Below Appetite	15/05/2023

