



ANGUS HEALTH AND SOCIAL CARE

INTEGRATION JOINT BOARD – 21 JUNE 2023

CLINICAL CARE AND PROFESSIONAL GOVERNANCE ANNUAL REPORT

REPORT BY GAIL SMITH, CHIEF OFFICER

ABSTRACT

This report is being brought to the Integration Joint Board (IJB) to provide assurance on the clinical and care governance activities and arrangements across the Partnership as outlined in the Getting It Right For Everyone Framework in accordance with the Partnership integration scheme. Clinical Governance is a statutory requirement to report on, at Board level, from Scottish Government as per NHS MEL (1998) 75. The IJB is being asked to provide their view on the level of assurance this report provides and therefore the level of assurance regarding clinical and care governance within the Partnership.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board:-

- (i) Review and accept the level of assurance provided by NHS Tayside Care Governance Committee in relation to Clinical, Care and Professional Governance within Angus HSCP.
- (ii) Review and accept the level of assurance provided by NHS Tayside Care Governance Committee in relation to Clinical, Care and Professional Governance in the Acute Division of NHS Tayside which includes delegated, locally managed NHS and Angus Council functions.
- (iii) Supports the continuation of an integrated approach, the frequency of meetings, and the breadth of the business undertaken at meetings of Angus Clinical, Care & Professional Governance Group.
- (iv) Request an update in relation to Resilience Planning and Civil Contingencies for a future IJB meeting.

2. BACKGROUND

The role of the Angus HSCP Clinical Care and Professional Governance Group is to provide assurance to the Angus Integration Joint Board (IJB), NHS Tayside Board (through the Care Governance Committee) and Angus Council, that there are effective and embedded systems for Clinical, Care and Professional Governance in all services within Angus HSCP.

The GIRFE Framework is an agreed tool used by all three HSCPs to ensure consistency of approach between Local Authorities, Tayside NHS Board and the IJBs for the three HSCPs; quality assurance is assessed against an agreed, prioritised common data set for each of the governance domains as detailed below.

The six domains continue to evolve over time and must be adaptable and responsive to the changes in legislation and external support and monitoring. The domains reflect the principles set out in the Health and Social Care Standards, My support, My life; Scottish

Government, 2018 and the Quality of Care Approach, HIS and Care Inspectorate, September 2018. The domains are:

Information Governance
Professional Regulation and Workforce Development
Patient/Service user/Carer and Staff Safety
Patient/Service user/Carer and Staff Experience
Quality and effectiveness of care
Promotion of Equality and Social Justice

Objectives and responsibilities of the Angus Clinical Care and Professional Governance Group are to;

- Ensure there is a mechanism to measure quality, clinical and service effectiveness and improvement and sustainability within the 6 domains (incorporating the Health & Social Standards) for all Health and Social Care Partnership Services.
- Ensuring that partnership services provide evidence that care is delivered in the context of the 6 domains of Clinical, Care & Professional Governance incorporating the Health & Social Care Standards. This will be achieved through service level reports, presentation of data, and exception reporting within an agreed timetable, with a view to rationalising activity agreeing a series of measures and indicators which will support partnership services in providing assurances of high quality care provision.
- Ensuring that partnership services provide evidence that they proactively identify and monitor any operational risks within their service, and that any identified risks are actively managed.
- Ensure that the Angus IJB Strategic Risk Profile is being managed across the Angus HSCP and actions progressed to mitigate risk.
- Share and learn from best practice and innovative ways of working in relation to clinical, care and professional governance across the Health & Social Care Partnership.

3. CURRENT POSITION

The Angus HSCP Clinical, Care and Professional Governance (CCPG) Group provides assurance to the Angus Integration Joint Board (IJB), NHS Tayside Board (through the Care Governance Committee) and Angus Council, that there are effective and embedded systems for Clinical, Care and Professional Governance in all services within the Partnership.

This involves seeking assurances from all Partnership services that care provision is delivered safely and effectively within the context of the Healthcare Improvement Scotland Health and Social Care Standards and the six domains of Clinical, Care and Professional Governance contained within the Clinical, Care and Professional Governance Framework – Getting it Right for Everyone.

All services provide ongoing assurance to CCPG that there are robust processes in place for all six domains, and that there are ongoing efforts to further improve. This assurance includes both qualitative and quantitative information which is reported to the group on a regular basis throughout the year. This information is used to provide assurances to the Angus IJB, Tayside NHS Board and Angus Council of the provision of high quality, safe, effective and person-centred care.

Angus HSCP is a Lead Partner for a number of services, these services report to Angus CCPG. Systems and processes have been established to ensure that all three HSCPs receive copies of reports from other Lead Partner Services to support integration, and effective whole system working.

The CCPG Group also has a key responsibility in enabling learning across services, disciplines and agencies, as well as the sharing of good practice and innovative ways of working.

The Partnership brings together a wide range of services, each of which has a unique perspective and areas of operating excellence. By exploring and embracing these different perspectives, the CCPG Group strives to create a shared understanding of how we can deliver integrated, high quality, safe, effective and person-centred care within Angus.

The Business considered by Angus Clinical, Care & Professional Governance Group during 2022/23 has addressed the remit and function of the group; profiling national policy and local application of policy and guidance that affects practice.

The group met on six occasions during the period from 01 April 2022 to 30 March 2023 on the undernoted dates:

CCPG Assurance Meetings

- 25 April 2022
- 13 June 2022
- 22 August 2022
- 24 October 2022
- 12 December 2022
- 6 February 2023

CCPG Risk Management Meetings

- 23 May 2022
- 18 July 2022
- 26 September 2022
- 14 November 2022
- 23 January 2023
- 27 March 2023

The membership of the group is detailed in Appendix 1.

Standing Agenda Items and Schedule of Business are illustrated in Appendix 2.

Table 1 below demonstrates the level of assurance provided to Angus HSCP and NHS Tayside Acute Division over 2022. Level of Assurance Key is illustrated in Appendix 3.

Reports have been received positively by the Care Governance Committee of NHS Tayside.

Table 1

Assurance Report	7 April 2022	2 June 2022	4 August 2022	6 October 2022 *	1 December 2022	2 February 2023
Angus HSCP	Reasonable	Exception Report	Reasonable	Exception Report	Reasonable	Exception Report
NHS Tayside Acute Division	Reasonable	Reasonable	Exception Report	Reasonable	Exception Report	Reasonable

*(Combined papers can be accessed via the link within the date - *combined papers not available)*

The group is responsible for monitoring and reviewing strategic risks held by Angus Health and Social Care Partnership. The full assurance reports have a reasonable level of assurance. At alternative meetings, an exception report is brought to the meeting to provide any exceptions since the last Angus HSCP assurance Report to Care Governance Committee. The focused items remained to monitor further from the full assurance report are discussed further in the exception reports. Appendix 3 details the levels of assurance descriptors.

The CCPG also provides the following updates:

- Risk Management update to Tayside Strategic Risk Management Group
- Mid-Year and Annual Report to Angus Integrated Joint Board Audit Committee.

Annual Audit Report 2021/2022

Of the 6 recommendations from the 2021/2022 Annual Report, 3 have been fully addressed (Strategy, Directions Policy and Clinical Governance Assurance), progress has been made against 1 further recommendation (Category 1 responder), whilst the remaining two action points remain outstanding (assurance on risks and the Information Governance Strategy).

4. PROPOSALS

From April 2022 the Clinical Care and Professional Governance Group met on a monthly basis with the focus alternating between service quality assurance; and strategic risk and adverse event management.

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

[The Blueprint for Good Governance](#) advises that ‘Good governance requires an active approach that anticipates and responds to risks and opportunities which could have a significant impact on the delivery of corporate objectives...’

The new Strategic Commissioning Plan provides an opportunity for reflection on whether the current strategic risk register reflects all issues with the potential to stop the organisation achieving its strategic objectives. Consideration will be given to creating a new strategic risk on implementation of the new Strategic Commissioning Plan to provide an anchor for articulating how the governance and operational structures will work together and provide control and assurance. Consideration will also be given to the implementation of a National Care Service and the potential for this to have a significant impact on the ability of the IJB to deliver its strategic objectives.

A ‘Learning from Inspections’ proposal was agreed at CCPG, this sets out the process for notifying the CCPG Team of pending inspections, their outcome and subsequent improvement plans. The CCPG Team will be responsible for monitoring actions and sharing learning. Further consideration in relation to triangulating external findings with the results of internal control systems is required to ensure assurance is provided at governance level.

An Assurance report will be submitted to IJB three times per year, this will provide assurance on the clinical and care governance activities and arrangements across the Partnership as outlined in the Getting It Right For Everyone Framework.

5. FINANCIAL IMPLICATIONS

There are no financial implications for the Integrated Joint Board to consider.

6. RISK

All risks will be considered at the CCPG Risk & Resilience meeting.

7. OTHER IMPLICATIONS

There are no other implications for the Integrated Joint Board to consider.

8. EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment is not required.

9. DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in Section 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Angus Council and NHS Tayside.

Direction Required to Angus Council, NHS Tayside or Both	Direction to:	
	No Direction Required	x
	Angus Council	
	NHS Tayside	
	Angus Council and NHS Tayside	

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List of Appendices:

- Appendix 1 Membership of Group
- Appendix 2 Standing Agenda Items for Assurance & Risk Meetings, Schedule of Business
- Appendix 3 Level of Assurance Key

Membership - Angus Clinical Care & Professional Governance Group

Chairperson and Vice-Chairperson

Job Title	Date Joined or Resigned (if during year)
Associate Medical Director (Chair)	
Lead Nurse (Vice Chair)	

Members

Job Title	Date Joined or Resigned (if during year)
Clinical Academic Nurse Consultant for Older People	
Head of Community Health & Care Services - Designated representative of Angus Chief Social Work Officer (Executive Lead for Planning and Commissioning)	
Senior Nurse, MIIU	
Justice Healthcare Service Manager	
Senior Nurse Justice Healthcare	
Senior Nurse, Medicine for the Elderly	
IJB Records Manager, Angus Council	
Service Manger, Accommodation and Home Care	
Head of Community Health & Care Services (Executive Lead for Audit, Improvement & Performance)	
Senior Nurse, Care Homes	
Physiotherapy Service Manager	
Specialist Nurse – Continence and Advisory Treatment Service	
Service Leader, Mental Health	
Service Manager, Disabilities Service	
Angus Lead Pharmacist	
Service Manager, Angus Integrated Drug & Alcohol Recovery Service/Homeless Support Service/Volunteers Service, Mental Health Supported Accommodation	
Head of Community Health & Care Services	
Angus AHP Lead	
Interim Lead Community Hospitals/ANP's/Discharge Co-ordinators	
Primary Care Manager	
Principal Planning Officer	
Service Manager, Care Management	
General Manager, Primary Care Services	
Senior Nurse Primary Care, Community Nursing	
Chief Officer, Angus HSCP	
AHP Service Manager	
Primary Care Team Manager – OOH and 2C Practices	
Senior Nurse, Psychiatry of Old Age	
Programme Manager & Data Protection Officer	
Third Sector Representative	

STANDING AGENDA ITEMS – ASSURANCE

Item
WELCOME & APOLOGIES
DECLARATIONS OF INTEREST
ACTION NOTE OF MEETING –
ACTION NOTE UPDATE –
URGENT BUSINESS NOT ON THE AGENDA
INFECTION PREVENTION AND CONTROL
COMPLAINTS AND FEEDBACK <ul style="list-style-type: none"> i. Health Annual Complaints Report ii. Social Work Annual Complaints Report iii. Shared Learning
REFLECT FRAMEWORK <ul style="list-style-type: none"> i. Progress Update from services ii. REFLECT Overview Summary Sheet
CLINICAL, CARE & PROFESSIONAL GOVERNANCE & PERFORMANCE QUALITY ASSURANCE & EXCEPTION REPORTS
INFORMATION GOVERNANCE
PAPERS FOR INFORMATION (including RS MINUTES)

SCHEDULE OF BUSINESS – CCPG ASSURANCE GROUP

Date of Meeting	SCHEDULE OF BUSINESS
25 April 2022	<p>HIS QUALITY MANAGEMENT SYSTEM Quality Management System Slides Moving from Quality Improvement to Quality Management Demonstrating Safety, Promoting Improvement – The Quality Management System</p> <p>COLLECTIVE LEADERSHIP AND CULTURE STRATEGIC FRAMEWORK Report to Staff Governance Committee</p> <p>INFECTION PREVENTION AND CONTROL Template Report required from Services</p> <p>COMPLAINTS AND FEEDBACK Health Annual Complaints Report Social Work Annual Complaints Report Shared Learning – Brechin HC SPSO Decision Report – A medical practice in NHS Tayside SPSO How to make a Good Apology</p> <p>REFLECT FRAMEWORK Progress Update from services REFLECT Workbook</p> <p>THE MENTAL WELFARE COMMISSION FOR SCOTLAND Authority To Discharge – Improvement Action Plan Care & Treatment for People with Alcohol Related Brain Damage in Scotland – Improvement Plan</p> <p>CLINICAL, CARE & PROFESSIONAL GOVERNANCE & PERFORMANCE</p> <p>Quality ASSURANCE & EXCEPTION REPORTS Continence Service Revised Quality Assurance Reporting Schedule 2022</p> <p>INFORMATION GOVERNANCE CCPG Terms of Reference Review SBAR Audit of Nursing Records Excellence in Care Measure Remobilisation Plan Update Service Risk Project A SBAR Service Risks and Standards B Appendix 1 Service Risks and Standards Update on BCPs and Emergency Planning A SBAR Business Continuity Planning Framework B SBAR BCP Framework Appendix 1 C SBAR BCP Framework Appendix 2</p>
13 June 2022	<p>CLINICAL, CARE & PROFESSIONAL GOVERNANCE QUALITY ASSURANCE REPORTING AHP Community Nursing OOH/MIU</p> <p>INFECTION PREVENTION AND CONTROL</p> <p>COMPLAINTS AND FEEDBACK Health Complaints Flash Report (April-May 2022) Social Work End of Year Flash Report Shared Learning Report SPSO</p> <p>INSPECTION /AUDIT REPORTS</p> <p>REFLECT FRAMEWORK Progress Update from services REFLECT Workbook</p> <p>THE MENTAL WELFARE COMMISSION FOR SCOTLAND Authority To Discharge – Improvement Action Plan Care & Treatment for People with Alcohol Related Brain Damage in Scotland – Improvement Plan</p> <p>INFORMATION GOVERNANCE</p>
22 August 2022	<p>CLINICAL, CARE & PROFESSIONAL GOVERNANCE & PERFORMANCE</p> <p>SERVICE EXCEPTION REPORTING Spiritual Care Community Mental Health Services</p> <p>INFECTION PREVENTION AND CONTROL Angus IPCC Report</p>

	<p>COMPLAINTS AND FEEDBACK Health Quarterly Flash Report 18-month Health Summary for 3 Services Social Work Quarterly Flash Report Shared Learning Report – Medicine for the Elderly* SPSO Final Decision (MfE)</p> <p>REFLECT FRAMEWORK Progress Update from services REFLECT Workbook (re-circulated) REFLECT Overview Summary Sheet</p> <p>THE MENTAL WELFARE COMMISSION FOR SCOTLAND Authority To Discharge – Improvement Action Plan A. Covering letter - Care & Treatment for People with Alcohol Related Brain Damage in Scotland Covering letter B Report - Care & Treatment for People with Alcohol Related Brain Damage in Scotland C Care & Treatment for People with Alcohol Related Brain Damage in Scotland – Improvement Plan</p> <p>AHP DOCUMENTATION Allied Health Profession (AHP) Patient Documentation Review Nutrition & Dietetics (excluding Weight Management)* Physiotherapy – POP Team Dundee Angus & Perth*</p> <p>INFORMATION GOVERNANCE CCPG Terms of Reference Review Operation and Governance of Working Groups & Other Forums</p>
24 October 2022	<p>CLINICAL, CARE & PROFESSIONAL GOVERNANCE & PERFORMANCE</p> <p>SERVICE EXCEPTION REPORTING OP Care management/MHO Services Accommodation and Home Care Services Independent Providers Forensic & Custody Healthcare Service Learning Disabilities/Physical Disabilities/Autism</p> <p>INFECTION PREVENTION AND CONTROL NHST IPC Scorecard</p> <p>COMPLAINTS AND FEEDBACK Health Quarterly Flash Report Social Work Quarterly Flash Report Shared Learning Report</p> <p>CELEBRATIONS BBC Positive News</p> <p>REFLECT FRAMEWORK Progress Update from services REFLECT Workbook REFLECT Overview Summary Sheet</p> <p>INFORMATION GOVERNANCE Vital Signs – Scottish COVID-19 Inquiry</p> <p>PAPERS FOR INFORMATION Protecting People Angus Newsletter Panorama – Patients At Risk SPSP Event Creating Conditions for Safe Care Getting It Right Newsletter</p>
12 December 2022	<p>CLINICAL, CARE & PROFESSIONAL GOVERNANCE & PERFORMANCE</p> <p>SERVICE EXCEPTION REPORTING 2C NHS Tayside Practice (Angus) Abbey Practice & Brechin Practice Primary Care (Anti Coagulation & Respiratory Services) Primary Care Independent Contractors Forensic & Custody Healthcare</p> <p>INFECTION PREVENTION AND CONTROL NHST IPC Scorecard</p> <p>COMPLAINTS AND FEEDBACK Health Quarterly Flash Report Social Work Quarterly Flash Report Shared Learning Report</p> <p>REFLECT FRAMEWORK Progress Update from services REFLECT Workbook REFLECT Overview Summary Sheet</p>

	<p>Timetable for Year 2</p> <p>MENTAL WELFARE COMMISSION FOR SCOTLAND Unannounced Visit To Willow Unit, Susan Carnegie Centre Ending The Exclusion</p> <p>SHARED LEARNING SUMMARIES (PSYCHIATRY OF OLD AGE – SUSAN CARNEGIE CENTRE) Airway Management - Summary Of Learning Assault – Summary of Learning Unwitnessed Falls – Summary of Learning</p> <p>GETTING IT RIGHT FOR EVERYONE (GIRFE) PATHFINDER JOINT INSPECTOR OF ADULT SUPPORT AND PROTECTION (ASP) IN ANGUS – INFORMATION BRIEFING EMT/IJB/IMT LETTER TO BOARDS Re SDoC INSPECTION FINDINGS</p> <p>INFORMATION GOVERNANCE PAPERS FOR INFORMATION CCPG Report Midyear Report CCPG Report to CGC</p>
<p>6 February 2023</p>	<p>CLINICAL, CARE & PROFESSIONAL GOVERNANCE & PERFORMANCE SERVICE EXCEPTION REPORTING Spiritual Care Continence Advisory & Treatment Services</p> <p>INFECTION PREVENTION AND CONTROL Infection Prevention and Control Report</p> <p>COMPLAINTS AND FEEDBACK Health Quarterly Flash Report Shared Learning Report – Bullying and Harassment</p> <p>SHARING LOCAL ADVERSE EVENT REVIEW LEARNING SUMMARY Pressure Ulcer Grade 3</p> <p>REFLECT FRAMEWORK Progress Update from services REFLECT Overview Summary Sheet</p> <p>HIS – HEALTHCARE PROVISION POLICY CUSTODY INFORMATION GOVERNANCE PAPERS FOR INFORMATION</p>

Angus Clinical, Care & Professional Governance - Risk Group





Item
WELCOME & APOLOGIES
DECLARATION OF INTERESTS
URGENT BUSINESS NOT ON THE AGENDA
ACTION NOTE OF MEETING OF –
ACTION NOTE UPDATE –
RISK MATRIX and BOARD ASSURANCE FRAMEWORK
STRATEGIC RISKS
i. Angus HSCP Strategic Risk Profile & Risk Matrix
SR01 Sustainability of Primary Care Service
SR02 Prescribing Risk
SR03 Financial Management
SR08 Workforce Optimisation
SR11 Commissioned Service Provider Failure
SR14 Adult Support & Protection
SR16 Non-integration of Adverse Event, Risk Management and Complaints Handling
SR18 Implementation of Strategic Planning Priorities
SR20 Withdrawal of Roche Glucose Nano Meter
EMERGING RISKS
SERVICE RISKS
i. Mental Health Tayside Wide Service Risks
ii. Angus HSCP Service Risk Register
ADVERSE EVENT MANAGEMENT
i. Adverse Events:-- Quarterly Flash Report
ii. Being Reviewed Breaches
iii. SAER/LAERs
iv. Shared Learning
INFORMATION GOVERNANCE
PAPERS FOR INFORMATION ONLY:-

SCHEDULE OF BUSINESS – RISK

Date of Meeting	SCHEDULE OF BUSINESS
23 May 2022	<p>RISK MATRIX and BOARD ASSURANCE FRAMEWORK STRATEGIC RISKS Angus HSCP Strategic Risk Profile & Risk Matrix</p> <p>EMERGING RISKS Advanced Clinical Practitioners/Advanced Nurse Practitioners</p> <p>SERVICE RISKS Mental Health Tayside Wide Service Risks Angus HSCP Service Risk Register</p> <p>ADVERSE EVENT MANAGEMENT Adverse Events:-- Quarterly Flash Report Being Reviewed Breaches SAER/LAERs Shared Learning POA AIDARS Newsletter</p> <p>INFORMATION GOVERNANCE</p>
18 July 2022	<p>RISK MATRIX and BOARD ASSURANCE FRAMEWORK STRATEGIC RISKS Angus HSCP Strategic Risk Profile & Risk Matrix</p> <p>EMERGING RISKS Advanced Clinical Practitioners/ ANP Strategic Risk Resilience Planning Ukraine – Potential for Cyber Attacks</p> <p>SERVICE RISKS Mental Health Tayside Wide Service Risks SBAR - Angus HSCP Service Risk Register</p> <p>ADVERSE EVENT MANAGEMENT Adverse Events:-- Quarterly Flash Report Being Reviewed Breaches SAER/LAERs Shared Learning POA</p> <p>INFORMATION GOVERNANCE Operation and Governance of Working Groups & Other Forums.</p> <p>PAPERS FOR INFORMATION ONLY:- Safety Alerts</p>
26 September 2022	<p>RISK MATRIX and BOARD ASSURANCE FRAMEWORK STRATEGIC RISKS Angus HSCP Strategic Risk Profile & Risk Matrix</p> <p>EMERGING RISKS Draft Advance Practice Risk IJB Category 1 Responder Primary Care Premises Strategic Risk National Care Service Cost of Living Crisis</p> <p>SERVICE RISKS Mental Health Tayside Wide Service Risks Risk Management Training</p> <p>ADVERSE EVENT MANAGEMENT Adverse Events:-Flash Report Shared Learning</p> <p>TRAINING & EDUCATION Falls Spotlight Session HIS QI Connect with Dorothy Armstrong 'Transforming the negativity of errors, concerns and complaints to a culture of learning and improvement'</p> <p>INFORMATION GOVERNANCE Data Breach Report</p> <p>LEAD AGENCY SERVICES – FOR INFORMATION Acute Urgent Care Exception Report NDS Exception Report RVH Primary CCG Forum Report</p> <p>PAPERS FOR INFORMATION ONLY:- Getting it Right Newsletter NHS Tayside Duty Of Candour Report</p>
14 November 2022	<p>RISK MATRIX and BOARD ASSURANCE FRAMEWORK STRATEGIC RISKS Angus HSCP Strategic Risk Profile & Risk Matrix</p> <p>EMERGING RISKS Community Compulsory Treatment Orders</p>

	<p>Detention Order Process Non-medical prescribing Admin Support Rota Disconnect Industrial Action</p> <p>SERVICE RISKS Mental Health Tayside Wide Service Risks Risk Management Training</p> <p>ADVERSE EVENT MANAGEMENT Adverse Events:-Flash Report Shared Learning Discharge Themes</p> <p>TRAINING & EDUCATION Falls Spotlight Session Feedback Mandatory Training</p> <p>INFORMATION GOVERNANCE Data Breach Report</p> <p>LEAD AGENCY SERVICES – FOR INFORMATION</p> <p>PAPERS FOR INFORMATION ONLY:- Supporting People With A Learning Disability And Advancing Dementia Risk and Resilience Planning</p>
<p>23 January 2023</p>	<p>RISK MATRIX and BOARD ASSURANCE FRAMEWORK STRATEGIC RISKS Angus HSCP Strategic Risk Profile & Risk Matrix</p> <p>EMERGING RISKS Community Compulsory Treatment Orders Detention Order Process Non-medical prescribing Admin Support Rota Disconnect Industrial Action</p> <p>SERVICE RISKS Mental Health Tayside Wide Service Risks</p> <p>ADVERSE EVENT MANAGEMENT Adverse Events Dashboard Adverse Events – Assure Data</p> <p>MENTAL WELFARE COMMISSION FOR SCOTLAND: ENDING THE EXCLUSION</p> <p>INFORMATION GOVERNANCE</p> <p>LEAD AGENCY SERVICES – FOR INFORMATION</p> <p>PAPERS FOR INFORMATION ONLY:-</p>
<p>27 March 2023</p>	<p>RISK MATRIX and BOARD ASSURANCE FRAMEWORK STRATEGIC RISKS Angus HSCP Strategic Risk Profile & Risk Matrix</p> <p>EMERGING RISKS Community Compulsory Treatment Orders Detention Order Process Non-medical prescribing Admin Support Rota Disconnect</p> <p>MENTAL HEALTH TAYSIDE WIDE KPIs</p> <p>ADVERSE EVENT MANAGEMENT Adverse Events Dashboard</p> <p>INFORMATION GOVERNANCE</p> <p>GROUP GOVERNANCE</p> <p>GUIDANCE ON MANAGEMENT OF BLOCKED CATHETERS AND USE OF CATHETER MAINTENANCE SOLUTIONS</p> <p>PAPERS FOR INFORMATION ONLY:-</p>

Level of Assurance Key

Level of Assurance		System Adequacy	Controls	✓
Substantial Assurance		A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited	Controls are applied continuously or with only minor lapses.	
Reasonable Assurance		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.	✓
Limited Assurance		Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.	Controls are applied but with some significant lapses.	
No Assurance		Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.	Significant breakdown in the application of controls.	