



ANGUS HEALTH AND SOCIAL CARE
INTEGRATION JOINT BOARD AUDIT COMMITTEE – 18 DECEMBER 2024
RISK & RESILIENCE MID-YEAR REPORT
JILLIAN GALLOWAY, CHIEF OFFICER

ABSTRACT

The purpose of this report is to provide a mid-year 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) Scrutinise and discuss the content of the report;
- ii) Acknowledge the progress that has made in relation to resilience planning;
- iii) Acknowledge the approval of Angus IJB Risk Appetite on 30 October 2024; and
- iv) Consider and agree a reasonable 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
- Reputation

The scrutiny and management of risks is devolved to Angus HSCP Clinical, Care and Professional Governance Group. 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 is maintained, updated, and reported in line with the IJB Risk Management Strategy.

The IJB Risk Management Strategy will be updated by the Tayside Risk Management group in 2025.

With the introduction of additional risk reporting to the IJB—via the CCPG assurance report, provided three times per year, and the CCPG Chair's Assurance reporting initiated in 2023—some overlap and duplication in the reporting of Strategic Risks to the IJB and the IJB Audit Committee has been identified. Recognising the importance of efficient and streamlined reporting, we plan to undertake a review of the current risk reporting arrangements in early 2025 and share feedback on this review with the IJB. This review will involve collaboration with Internal Audit colleagues to ensure that the reporting structure is efficient, avoids duplication, and continues to meet the needs of both the IJB and IJB Audit Committee.

Between the period of **April 2024 –November 2024**, the Angus Clinical, Care and Professional Governance Risk Group met on following dates to consider AIJB Strategic risks.

- 27 May 2024
- 29 July 2024
- 23 September 2024
- 18 November 2024

The risks with the highest Current Risk Score on the IJB Strategic Risk Register during April 2024 – November 2024 were:

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

- SR03 Financial Sustainability with a risk score of 20 (RED)
- SR26 AHSCP Sustainability of General Practice Services 20 (RED) – *added July 2024*
- SR28 Eclipse System 20 (RED)
- SR29 Delivery of the Strategic Commissioning Plan 20 (RED)

The Current Risk Score of the following risk increased during the period April 2024 – November 2024:

- SR24 Commissioned Services – Unmet Need – the current risk score increased from 9 (YELLOW) TO 16 (AMBER)

AIJB Strategic Risks

SR02 Prescribing Management

- **Risk Level – 16 (AMBER)**
- **Level of Assurance – Reasonable**

Optimising medicines is part of the Prevention and Proactive Care strategic priority of Angus HSCP. The Angus Prescribing Management Quality Assurance Group (APMQAG) closely monitors spending on prescriptions alongside quality prescribing indicators such as the national therapeutic indicators. There is regular review of the prescribing risk with its associated extensive prescribing workplan. Updates are regularly given to the Angus HSCP Executive Management Team, Angus CCPG and Angus IJB (due February 2025).

SR03 Financial Sustainability

- **Risk Level – 20 (RED)**
- **Level of Assurance – Limited**

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

- While current positions (workforce issues / reserves) reduce short-term risks, the longer-term, strategic risks remain.
- Financial planning gaps were not addressed during the creation of the 2023 Strategic Commissioning and Delivery Plans. However, renewed efforts have been made to tackle this.
- Some financial planning issues within the Integration Joint Board (IJB) are still unresolved and are taking longer than expected.
- Funding from the Scottish Government for 2024/25 is approximately £1 million less than expected.
- There are potential risks related to the approval of new drugs and the sustainability of contracts for General Medical Services (GMS) and the National Care Home Contract (NCHC).
- The financial pressures the IJB's partners, Angus Council and NHS Tayside, are operating under remain considerable.

The controls available to the IJB are not currently solving the financial planning issues it faces.

SR08 Workforce Optimisation

- **Risk Level – 16 (AMBER)**
- **Level of Assurance – Reasonable**

The AHSCP Annual Workforce Plan Update Report 2024 was approved by Angus IJB on 30 October 2024. This report provided an overview of progress made with workforce priority actions over the last 12 months and what impact, if any, these have had. It illustrates that a range of improvement activity has taken place, reflecting a shift in how AHSCP traditionally deliver services towards new, innovative ways of working for the workforce. Much of the improvement activity has a focus on redesigning to mitigate hard to fill posts, up skilling staff to respond to changing demographics, developing career pathways that will aid retention of our workforce and introducing innovative new roles to enhance the capacity and capabilities of our workforce.

Challenges remain in relation to difficulties recruiting to specific posts, the significant growth in care at home demand, vacancies in care homes, timescales for recruitment processes, staff retention in specific areas such as care at home, shortages of GP's and pharmacists and increasing demand and complexity of need.

At the current time existing controls are not fully operating effectively.

SR11 Commissioned Service Provider Failure

- **Risk Level – 16 (AMBER)**
- **Level of Assurance – Reasonable**

The current risk level is 16 which has increased from 12 since the last report in May 24. Due to the recent closure of a care home, increasing winter pressures, delayed discharges from hospital and ongoing destabilisation in the care home market due to LSIs and lack of capacity within the care home/care at home markets, the risk score has been increased to reflect these challenges. This risk score may also increase as we come into winter and face increased demand for care at home and care home services.

There are many external local and national factors which contribute to this risk which are out with our control. Care Homes and Care at Home providers are facing increased risk as a result of workforce shortages and rising costs. There is reduced capacity within the Care Home sector in Angus currently which has led to the risk score increasing. The current controls support the reduction of the risk however it is not possible to mitigate against this risk entirely due to these external factors.

SR24 Commissioned Service Provider – Unmet Need

- **Risk Level – 16 (AMBER)**
- **Level of Assurance – Reasonable**

The key risk is the increasing issue of unmet care needs in specific areas, with financial shortfalls expected to grow. Despite efforts to gather data and coordinate resources, unmet needs remain a concern in Angus.

There is a need for further discussions and planning, including national dialogue with the Scottish Government, to address the risk and ensure appropriate care is provided, while financial gaps are managed.

To address the requirement for care provision to manage people in the community this winter, a winter plan is being developed with plans to recruit care staff alongside

refreshing the enhanced community support model. This refreshed approach will include monitoring of data around the sustainability of general practice to respond to any emerging gaps in care on a timely basis, with prioritisation of health and social care resources according to greatest need. Following recent review with IJB members this risk level has increased to 16.

SR25 AHSCP Mental Health

- **Risk Level – 16 (AMBER)**
- **Level of Assurance – *next report to CCPG January 2025 – level of assurance introduced following the last report to CCPG***

The most recent revision of the mental health and learning disabilities risk provides assurance that the mitigation actions in place are having an impact. Since the review, medical and nursing staffing shortages within the psychiatry of old age service, alongside increasing difficulty recruiting general adult psychiatrist locums across Tayside, has resulted in a greater level of concern. An action plan following an adverse event within the psychiatry of old age service will address the current risks. Work is required across Tayside to implement the model of care for mental health as a priority. There is a move to consider medical staffing shortages as a risk across all mental health specialities. This will be reflected in future risk scoring.

SR26 Sustainability of AHSCP Primary Care Services

- **Risk Level – 20 (RED)**
- **Level of Assurance – *next report to CCPG January 2025***

Due to several significant challenges, General Practice faces sustainability issues, including:

- The inability to reliably recruit, train, and retain the GP workforce, largely due to a national workforce shortage.
- Difficulties in recruiting and training sufficient numbers of multi-disciplinary teams.
- Lack of appropriate premises to deliver general practice services effectively.
- Inadequate and unreliable digital systems to support clinical care.

These challenges may lead to General Practices handing back their GMS contracts, resulting in an inability to deliver safe, effective, high-quality, person-centred care. Consequently, this could cause reputational damage to the practice and increase pressures on neighbouring practices and other parts of the healthcare system.

SR27 Category 1 Responder Duties

- **Risk Level – 12 (AMBER)**
- **Level of Assurance – *next report to CCPG March 2025 - level of assurance introduced following the last report to CCPG***

The AHSCP Resilience Framework was approved by the IJB on 30 October 2024. Operational guidance is being developed to ensure a consistent approach across all services.

As part of preparedness efforts, a winter planning tabletop exercise will be held with the Senior Management Team on 13 December 2024. This exercise will provide an opportunity to test Business Continuity Plans and ensure a readiness to address potential winter challenges by fostering effective coordination across teams.

SR28 Eclipse System

- **Risk Level** – 20 (RED)
- **Level of Assurance** – *next report to CCPG February 2025 - level of assurance introduced following the last report to CCPG*

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.

SR29 Strategic Commissioning Plan

- **Risk Level** – 20 (RED)
- **Level of Assurance** – *next report to CCPG January 2025*

This strategic planning approach continues to centre on the ‘quadruple aim’ of improving the experience for service users, improving the experience for staff, better health outcomes and lower the cost of care.

New, Emerging Risks

The following emerging risks are discussed at CCPG, and an update is provided at each Risk and Resilience meeting:

- **National Care Service** - CCPG are monitoring the developments in relation to the National Care Service, to identify potential emerging risks.

Risk Appetite

Angus IJB agreed their Risk Appetite for 2024-2026 on 30 October 2024.

Internal Audit

The remaining outstanding internal audit action points are now classed as complete.

AN05/20 Risk Management	Complete
AN03/21 Annual Internal Audit Report 2020/21	This item is now essentially complete as a Chairs assurance report is submitted to every IJB from IJB Audit Committee, Strategic Planning Group and AHSCP CCPG and these reference risks etc as appropriate.

	This Audit action overlaps with an outstanding Audit Committee from June 2024, now also marked as “complete”.
AN46/22 Annual Internal Audit Report 2021/22	AHSCP Resilience Framework approved at IJB on 30 October 2024

The Chief Officer for Angus suggests 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 from this report.

5. RISK

All Strategic Risks are detailed within the report.

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

APPENDIX 1

RISK	RISK TITLE	PLANNED RISK LEVEL	RISK LEVEL NO CONTROLS											
				MAR 23	MAY 23	JULY 23	SEPT 23	NOV 23	JAN 24	MAR 24	MAY 24	JULY 24	SEPT 24	NOV 24
SR01	Sustainability of Primary Care Services	12 (4X3) AMBER	25 (5X5) RED	25 (5X5) RED	25 (5X5) RED	25 (5X5) RED	20 (4X5) RED	20 (4X5) RED	20 (4X5) RED	20 (4X5) RED	20 (4X5) RED	20 (4X5) RED	20 (4X5) RED	Under review by NHST
SR02	Prescribing Management	9 (3X3) YELLOW	25 (5X5) RED	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER
SR03	Effective Financial Management	16 (4X4) AMBER	25 (5X5) RED	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED
SR08	Workforce Optimisation	16 (4X4) AMBER	25 (5X5) RED	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER	16 (4X4) AMBER
SR11	Commissioned Service Provider Failure	9 (3X3) YELLOW	20 (5X4) RED	12 (3X4) AMBER	12 (3X4) AMBER	12 (3X4) AMBER	12 (3X4) AMBER	12 (3X4) AMBER	12 (3X4) AMBER	12 (3X4) AMBER	12 (3X4) AMBER	12 (3X4) AMBER	12 (3X4) AMBER	16 (4X4) AMBER
SR24	Commissioned Services Unmet Need	9 (3X3) YELLOW	25 (5X5) RED		15 (3X5) AMBER	9 (3X3) YELLOW	9 (3X3) YELLOW	9 (3X3) YELLOW	9 (3X3) YELLOW	9 (3X3) YELLOW	9 (3X3) YELLOW	9 (3X3) YELLOW	16 (4X4) AMBER	16 (4X4) AMBER
SR25	AHSCP Mental Health	8 (2X4) YELLOW	25 (5X5) RED									15 (3X5) AMBER	15 (3X5) AMBER	15 (3X5) AMBER
SR26	AHSCP Sustainability of General Practice Services	12 (3X4) AMBER	25 (5X5) RED									20 (5X4) RED	20 (5X4) RED	20 (5X4) RED
SR27	Category 1 Responder Duties	3 (1X3) GREEN	15 (5X3) AMBER								12 (4X3) AMBER	12 (4X3) AMBER	12 (4X3) AMBER	12 (4X3) AMBER
SR28	Eclipse System	12 (3X4) AMBER	20 (5X4) RED							20 (5X4) RED	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED
SR29	Strategic Commissioning Plan	12 (3X4) AMBER	25 (5X5) RED									20 (5X4) RED	20 (5X4) RED	20 (5X4) RED