

Notice of Special Meeting and Agenda Renfrewshire Health and Social Care Integration Joint Board Audit, Risk and Scrutiny Committee

Date	Time	Venue
Wednesday, 26 October 2022	13:00	Remotely by MS teams,

MARK CONAGHAN
Clerk

Membership

Councillor Jacqueline Cameron: Councillor Fiona Airlie-Nicolson; Margaret Kerr: Ann Cameron Burns: Alan McNiven: Paul Higgins

Councillor Jacqueline Cameron (Chair): Margaret Kerr (Vice Chair):

Recording of Meeting

This meeting will be recorded for subsequent broadcast via the Council's internet site. If you have any queries regarding this please contact committee services on 0141 618 7111.

To find the recording please follow the link below to view the recording.

https://www.youtube.com/watch?v=ltaahO2zk_Y

Items of business

Apologies

Apologies from members.

Declarations of Interest

Members are asked to declare an interest in any item(s) on the agenda and to provide a brief explanation of the nature of the interest.

- | | | |
|----------|--|----------------|
| 1 | Minute | 3 - 8 |
| | Minute of meeting of the IJB Audit, Risk and Scrutiny Committee held on 18 March 2022. | |
| 2 | Internal Audit Plan 2022/23 - Progress | 9 - 12 |
| | Report by Chief Internal Auditor. | |
| 3 | Update on Risk Register | 13 - 38 |
| | Report by Strategic Lead and Improvement Manager. | |
| 4 | Health and Safety Update | 39 - 42 |
| | Report by Head of Health & Social Care. | |
| 5 | Public Interaction Report April 2021 to March 2022 | 43 - 56 |
| | Report by Planning & Performance Manager. | |
| 6 | Date of Next Meeting | |
| | Note that the next meeting of the IJB Audit, Risk and Scrutiny Committee will be held at 10.00 am on 18 November 2022. | |



Minute of Meeting

Renfrewshire Health and Social Care Integration Joint Board Audit, Risk and Scrutiny Committee

Date	Time	Venue
Friday, 18 March 2022	10:00	Remotely by MS Teams,

Present

Councillor Lisa-Marie Hughes (Renfrewshire Council); Margaret Kerr (Greater Glasgow & Clyde Health Board); and Alan McNiven (third sector representative).

Chair

Councillor Hughes, Chair, presided.

In Attendance

Sarah Lavers, Chief Finance Officer, Jackie Dougall, Head of Health and Social Care, Frances Burns, Head of Strategic Planning and Health Improvement, Clare Walker, Planning and Performance Manager, Karen Mitchell, Operational Support Officer, David Fogg, Service Improvement Officer, and James Higgins, Corporate Business Officer (all Renfrewshire Health and Social Care Partnership); Mark Conaghan, Head of Corporate Governance (Clerk), Karen Campbell, Assistant Chief Internal Auditor and Elaine Currie, Senior Committee Services Officer (all Renfrewshire Council); and John Cornett (Audit Director), Mark Ferris, Audit Manager and Karla Graham, Trainee Auditor (Audit Scotland).

Recording of Meeting

Prior to the commencement of the meeting the Chair intimated that this meeting of the Committee would be recorded and that the recording would be available to watch on both the Council and HSCP websites.

Apology

Councillor Jennifer Adam-McGregor (Renfrewshire Council).

Declarations of Interest

There were no declarations of interest intimated prior to the commencement of the meeting.

1 Minute

The Minute of the meeting of the Integration Joint Board (IJB) Audit, Risk and Scrutiny Committee held on 12 November 2021 was submitted.

DECIDED: That the Minute be approved.

2 Rolling Action Log

The rolling action log for the IJB Audit, Risk and Scrutiny Committee was submitted.

DECIDED:

(a) That the action in relation to HSCP Internal Care at Home Services Inspection (Update) be removed from the rolling action log as officers within the HSCP were not able to progress this matter until information was received from the Care Inspectorate; and

(b) That the action be added back to the rolling action log when the necessary information had been received from the Care Inspectorate.

3 Annual Audit Plan 2021/22

The Chief Finance Officer submitted a report relative to annual audit plan 2021/22 for the IJB which outlined Audit Scotland's planned audit activities for the financial year 2021/22, a copy of which was appended to the report.

The report intimated that, in terms of the Local Government (Scotland) Act 1973, the Accounts Commission was responsible for appointing the external auditors for local government bodies and had appointed Audit Scotland as the external auditor for the IJB for the five-year period from 2016 to 2021. Due to COVID-19, the Auditor General for Scotland and the Accounts Commission, announced the intention to extend the current audit appointments by one year in the first instance. The Accounts Commission had confirmed this extension would be through to the audit of the 2021/22 year, as detailed at point 10 within the appendix to the report, and as such, John Cornett of Audit Scotland would remain the auditor for the IJB throughout this period.

The report advised that the current Code of Audit Practice, due to be renewed this year, would apply to the extended appointments.

The report further advised that the audit fee for the 2021/22 audit was £27,960 and was consistent with the fees for all IJBs. In determining the audit fee, Audit Scotland had taken account of the risk exposure of the IJB, the planned management assurances in place and the level of reliance they planned to take from the work of internal audit. Further, that Audit Scotland's fee assumed receipt of the unaudited financial statements for 2021/22 by 30 June 2022 and covered the cost of planning, delivery, reporting and the auditor's attendance at committees.

John Cornett, Audit Director, Audit Scotland, referred to the significant risk of material misstatement to the financial statements highlighted in exhibit 2 of the audit plan around 'management override of controls'; the audit risk highlighted in exhibit 4 of the audit plan around financial sustainability; and exhibit 5 of the audit plan which outlined the target dates for audit outputs. It was noted that, due to pressures associated with the COVID-19 pandemic, Audit Scotland had agreed an audit timetable with the Chief Finance Officer consistent with the prior year, meaning that the audit planning guidance deadline of 31 October 2022 would not be met, as this Committee had no meetings scheduled in October 2022, with the meeting being held in November 2022.

John also made reference to the six-year appointment of Audit Scotland as the external auditor for the IJB and advised that arrangements were being finalised to identify the auditor for 2022/23 onwards and the associated engagement phase around this.

DECIDED: That Audit Scotland's 2021/22 annual audit plan, appended to the report, be noted.

4 **Internal Audit Plan 2021/22 - Progress**

The Assistant Chief Internal Auditor submitted a report providing progress on the internal audit plan 2021/22, a copy of which was appended to the report.

The report intimated that the audit plan set out a resource requirement of 35 days, including assurance work, reviewing the adequacy and compliance with the Local Code of Corporate Governance, time for follow-up of previous recommendations, ad-hoc advice and planning and reporting.

DECIDED: That the progress against the internal audit plan 2021/22 be noted.

5 **Annual Internal Audit Plan 2022/23**

The Assistant Chief Internal Auditor submitted a report relative to the annual internal audit plan 2022/23, a copy of which formed Appendix 1 to the report.

The report intimated that in line with the requirements of the Public Sector Internal Audit Standards, a risk based internal audit plan for 2022/23 had been developed. The plan set out a resource requirement of 55 days, including assurance and governance work, time for follow-up of previous recommendations, ad-hoc advice and planning and reporting.

The report advised that the allocation of internal audit resources was sufficient to allow emerging priorities and provide adequate coverage of governance, risk management and internal control to inform the annual assurance statement. It was noted that the plan might be subject to amendment during the course of the year due to the emergence of issues of greater priority, or for unforeseen circumstances which would be reported to the committee.

It was noted that the audit universe had been reviewed and updated during 2021/22 to ensure it covered all areas and reflected the maturity of the organisation and Appendix 2 to the report detailed the revised audit universe and the anticipated coverage over 2022/23 to 2026/27. It was intended that each engagement topic would be covered once the in five-year period.

It was noted that the date detailed in the title of Appendix 1 would be amended to read 2022/23.

DECIDED:

- (a) That the internal audit plan 2022/23 be approved; and
- (b) That it be noted that the internal audit plan would be shared with the local authority and health board.

6 Summary of Internal Audit Reports

The Assistant Chief Internal Auditor submitted a report providing a summary of internal audit reports issued.

The report advised that a risk-based Internal Audit Plan for 2021/22 had been approved by this Committee at its meeting on 12 March 2021 and, in line with the Public Sector Internal Audit Standards, Internal Audit must report the results of each engagement to this Committee.

The appendix to the report provided details of those audit engagements completed with the overall assurance rating and the number of recommendations in each risk category. The committee summaries for each report were also appended.

DECIDED: That the content of the report be noted.

7 Update on Risk Register

Under reference to item 7 of the Minute of the meeting of this Committee held on 12 November 2021, the Strategic Lead and Improvement Manager submitted a report providing an update on the continued implementation of the IJB's updated risk management framework and the updates made to the IJB's risk and issues register.

The report intimated that the risk management framework set out the principles by which the HSCP and IJB identified and managed strategic and operational risks impacting upon the organisation and formed a key strand of the IJB's overall governance mechanisms. The framework set out how risks and issues should be identified, managed and reported and it was noted that following further assessment and review with all services, no new risks or issues had been added this period.

The report noted that the risk 'further waves of covid', RSK05, had been closed as it was recognised that IJB governance and operational management arrangements were well-established with significant experience in managing the impact of covid waves within the IJB, HSCP and partner organisations. Members were advised that given the rise in cases in the community and hospitalisations, this risk would now remain 'open' in the risk register and would be reviewed prior to the next meeting of the Committee.

DECIDED:

- (a) That the further work which had been undertaken to implement the revised risk management framework across operational services within the HSCP and the inclusion of risk management arrangements within planned internal audits in 2022, as detailed in section 4 of the report, be noted;
- (b) That the updates that had been made to currently identified risks and issues, following further assessment and engagement with the HSCP and partners, as detailed in section 5 of the report, be noted; and

(c) That it be noted that RSK05 'further waves of covid' would remain open in the risk register.

8 Health and Safety Update

The Head of Health and Social Care submitted a report providing an update on the HSCP's incident report position for the period 1 January to 31 December 2021.

The report provided information in relation to incident reporting; serious adverse events; RIDDORs; fire safety; health and safety compliance; and mandatory health and safety training compiled from the information pulled from both systems operated within Renfrewshire Council and NHS GGC.

DECIDED: That the content of the report be noted.

9 Public Interactions Report for April to September 2021

The Planning and Performance Manager submitted a report providing an update on public interaction for the period 1 April to 30 September 2021.

The report provided detail on complaints; enquiries; freedom of information requests; subject access requests; as well as compliments and communications.

DECIDED: That the content of the report be noted.

10 Proposed Dates of Meetings of the Integration Joint Board Audit, Risk and Scrutiny Committee 2022/23

The Clerk submitted a report relative to proposed dates for meetings of the Committee in 2022/23.

DECIDED:

(a) That it be noted that a meeting of the Committee would be held at 10.00 am on 17 June 2022;

(b) That meetings of the Committee be held at 10.00 am on 9 September and 18 November 2022 and 24 March and 23 June 2023; and

(c) That members be advised of the venue for future meetings.

11 Date of Next Meeting

DECIDED: That it be noted that the next meeting of this Committee would be held at 10.00 am on 17 June 2022.

To: Renfrewshire Health and Social Care Integration Joint Board Audit, Risk and Scrutiny Committee

On: 26 October 2022

Report by: Chief Internal Auditor

Heading: Internal Audit Plan 2022/23 - Progress

1. Summary

- 1.1 In March 2022, the Audit, Risk and Scrutiny Committee approved the Internal Audit Plan for 2022/2023 as detailed at Appendix 1 of this report.
 - 1.2 The plan sets out a resource requirement of 55 days, including governance work, reviewing the adequacy and compliance with the Local Code of Corporate Governance, time for follow up of previous recommendations, ad-hoc advice and planning and reporting.
 - 1.3 This report provides an update on the progress of the internal audit plan for 2022/2023.
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2. Recommendations

- 2.1 That the Audit, Risk and Scrutiny Committee notes the progress against the Internal Audit Plan for 2022/23.
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3. Background

- 3.1 The priority for the first quarter of the year has been the preparation of the internal audit annual report for 2021/22, including the overall opinion on the adequacy and effectiveness of the IJB's internal control, governance and risk management arrangements and is included elsewhere on this agenda.
- 3.2 The Asst. Chief Internal Auditor has also provided input to the annual governance statement for 2021/22.

- 3.3 The information governance engagement is planned to commence in quarter 2 and the terms of reference are with management for consideration and approval. The governance engagement on risk management processes currently planned to commence in quarter 3 and the annual review of the Local Code of Corporate Governance is due to commence in quarter 4. The audit plan remains flexible and these planned dates, could change, in consultation with management.

Implications of the Report

1. **Financial** - none.
2. **HR & Organisational Development** - none.
3. **Community Planning** - none.
4. **Legal** - none.
5. **Property/Assets** - none.
6. **Information Technology** - none.
7. **Equality & Human Rights** – none
8. **Health & Safety** - none.
9. **Procurement** - none.
10. **Risk** - The subject matter of this report is the risk based Audit Plan for 2022 – 2023.
11. **Privacy Impact** - none.

List of Background Papers – none.

Author: Andrea McMahon, Chief Internal Auditor

Revised Annual Audit Plan – 2022/23 Renfrewshire Integration Joint Board

Audit Category	Engagement Title	No. of days	Detailed work
Governance	Risk Management – Risk Management Processes	20	<ul style="list-style-type: none"> The purpose of the audit is to review the arrangements in place for identifying and managing risks.
Governance	Information Governance – Requests for Information	20	<ul style="list-style-type: none"> The aim of this review is to provide assurance that the various types of requests for information are being dealt with correctly.
Governance	Local Code of Corporate Governance	5	<ul style="list-style-type: none"> Annual review of the adequacy and compliance with the Local Code of Corporate Governance to inform the governance statement.
Planning & Reporting	Annual Plan, Annual Report and Audit Committee reporting & training	7	<ul style="list-style-type: none"> The Chief Internal Auditor is required to prepare an annual plan and annual report for the Audit Committee, summarising the work undertaken by Internal Audit during the year and using this to form an opinion on the adequacy of the control environment of the IJB.
Contingency	Ad-hoc advice and Consultancy	3	<ul style="list-style-type: none"> Time for advice and consultancy on relevant priorities and risks or change related projects and following up on the implementation of internal audit recommendations.



To: Renfrewshire Integration Joint Board Audit, Risk and Scrutiny Committee

On: 26 October 2022

Report by: Strategic Lead and Improvement Manager

Heading: Update on Risk Register

1. Summary

- 1.1. The paper provides an update on the continued implementation of the IJB's updated Risk Management Framework following the previous update to the Committee in March 2022. This report covers an extended period from March 2022 to September 2022 due to the cancellation of the Committee meeting scheduled in June due to the local elections.
- 1.2. This report also notes updates made to the IJB's risk and issues register, including any changes to risks/issues previously identified, and any new items added to the register during this period.
-

2. Recommendations

It is recommended that the Audit, Risk and Scrutiny Committee:

- Note the further work which has been undertaken to implement the revised Risk Management Framework across operational services within the HSCP, including the launch of a risk framework guide to all HSCP staff from July, and an online training module from August (section 4); and
 - Approve the updates that have been made to currently identified risks and issues, following further assessment and engagement within the HSCP and with partners (section 5).
-

3. Background

- 3.1. The IJB's risk management framework sets out the principles by which the HSCP and IJB identify and manage strategic and operational risks impacting upon the organisation. This framework forms a key strand of the IJB's overall governance mechanisms. It sets out how risks and issues should be identified, managed and reported and it informs the development of this report and supporting appendix.

4. Implementing the update framework: further activity

4.1. Previous updates to the Committee have outlined the progress made in implementing the IJB's revised Risk Management Framework within the HSCP. Work has continued to embed the framework within HSCP processes. The key activities which have been undertaken include:

- Continued work with the Risk Network and services to follow risk management processes, ensuring risk and issue reviews with service leadership teams occur, and also regards escalations and reporting.
- Continued operational risk and issue reporting to SMT by exception with recovery and renewal risk reporting also continuing on a monthly basis.
- A refresh of the risk framework guide and training module has been undertaken to include lessons learned and reflections since the risk network was launched in July 2021.
- An 'Importance of Risk' session held with the Leadership Network in June 2022 and the publication of a Risk Framework guide, first to this community and subsequently to all HSCP staff.
- The launch of a risk training module for all staff in August 2022.
- Ongoing meetings of the cross HSCP and NHS GGC 'risk working group' held monthly where consistency of risks is discussed and best practice shared.

5. Updates to IJB Risk Register

5.1. The HSCP's ongoing assessment and review of risks has identified necessary changes to existing risks and issues. In this period there have been no additional risks and issues identified requiring incorporation within the IJB's Risk Register, which is provided as Appendix 1 to this report. All risks and issues have been updated to reflect the latest position regards completed and outstanding actions. This paper reflects the changes made to risks since the last meeting in March 2022.

5.2. In summary, the key updates to existing risks include:

- The risk score for 'Changing financial and demographic pressures' has been increased this period due to the cost of living crisis and continued rising costs generally. Inflation at the time of writing is 10.1% with forecasts predicting further inflation rises through to January 2023. (RSK01)
- The risk score for 'Financial challenges causing financial instability for the IJB' was increased in June to reflect the additional financial pressure as a result COVID funding changes, supply chain impacts, potential pay awards and also increases in National Insurance costs impact staffing and care package costs. (RSK02).
- The description for the risk relating to an increase in physical and mental health inequalities has been updated to reflect the potential impact of the cost of living crisis on inequalities. The current scores for this risk will remain under review as the impact of the crisis, and the necessary response from partners, develops (RSK03).

- The risk 'Further waves of COVID' has remained in the report and log for ongoing monitoring to reflect the Committee's decision in March. However, the likelihood and impact of the risk was reduced in June and this will continue to be monitored. This position also recognises that IJB governance and operational management arrangements are well equipped with significant experience in managing the impact of COVID waves within the IJB, HSCP and partner organisations. The largest remaining aspect of this risk relates to staffing levels and workforce resilience which is incorporated within other risks and issues. All other aspects of the risk regards PPE, supplies, testing and guidance remain well understood and managed (RSK05).
- The risk 'Impact of 2022 local elections on Strategic Plan' has been proposed for closure following the meeting of the IJB in June, at which the IJB approved the Year 1 Strategic Delivery Plan which set out deliverables which will be achieved in line with the objectives set out in the Plan. Any such risk associated with the deliverability of the plan or the alignment with local and national plans is covered adequately within other risks (RSK08).
- The risk 'Failure or loss of major service provider' has been updated to reflect the current financial position and resource challenges for providers in Renfrewshire. In relation to the updated, reduced, provision of COVID sustainability payments, the Scottish Government has stated that a 'Cost improvement programme' will be implemented to help mitigate against expected impacts however this has not yet been published. (RSK10). This risk will also be exacerbated by the impacts of increasing payroll, energy and commodity costs, and inflation.
- The risk description for 'Failure to achieve targets and key performance indicators' has been updated to note the positive impact of ongoing actions and the robust alignment of the Strategic and Medium Term Financial Plans. This will be further supported through the consistent approach taken to developing the draft Workforce Plan for 2022-25 which was presented to the IJB for approval in June 2022. However, it is recognised that related risks covering financial and workforce challenges may impact on the ability of the HSCP to deliver agreed targets (RSK12).
- The risk rating for 'Cyber threats pose an increasing risk' was increased in June to reflect the increased national risk as a result of events in Ukraine and the advised increased likelihood of cyber attacks on national and local infrastructure. Since our last report one of the HSCP's contracted suppliers and NHS 24 have experienced a cyber attack. Under ongoing business continuity activity the HSCP continues to strengthen plans for a loss of system/data scenario across our critical services. (RSK13).

Implications of the Report

1. **Financial** – No direct implications from this report*

2. **HR & Organisational Development** – Further guidance and training has been developed for staff to support them in understanding their contribution to risk management and has been rolled out from July 2022.
3. **Community Planning** – No direct implications from this report*
4. **Legal** – Supports the implementation of the provisions of the Public Bodies (Joint Working) (Scotland) Act 2014.
5. **Property/Assets** – No direct implications from this report*
6. **Information Technology** – No direct implications from this report*
7. **Equality and Human Rights** – No direct implications from this report*
8. **Health & Safety** – No direct implications from this report*
9. **Procurement** – No direct implications from this report*
10. **Risk** – This paper and attachments provide an update to the IJB's Risk Management Framework.
11. **Privacy Impact** – No direct implications from this report*

**Although there are no direct implications from this report, specific risks are likely to impact on these areas and will have specific mitigations identified.*

List of Background Papers – N/A

Author: David Fogg, Strategic Lead & Improvement Manager

Any enquiries regarding this paper should be directed to David Fogg, Strategic Lead and Improvement Manager (david.fogg@renfrewshire.gov.uk)
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Risk and Issue Register Executive Summary

Appendix 1

This document reflects the status of the risks and issues in the IJB log as of August 2022. This report also features issues as part of the agreed risk framework approach. The summaries reflect the changes to risks since the last report and items which have been identified as new or those proposed to close since the last report. For proposed closures we have included summaries to detail the final position and the rationale for closure. If these are agreeable, they will be removed from the next report.

Introduction and Background

This document is prepared in advance of each IJB Audit, Risk and Scrutiny Committee meeting to support Renfrewshire Integration Joint Board (IJB), and members of the IJB's Audit, Risk and Scrutiny Committee, in the application of the IJB's Risk Management Policy and Strategy. It sets out those Strategic Risks and Issues currently identified which have the potential to prevent the IJB from achieving its desired outcomes and objectives, and the mitigating actions put in place to manage these risks. **Further information on the IJB's approach can be found in Renfrewshire IJB's Risk Management Policy and Strategy.**

Approach to assessing risks

All risks identified are assessed considering (i) the likelihood of the risk materialising; and (ii) the consequent impact of said risk should it materialise. To reflect the range of eventualities this assessment provides a score of between 1 and 5 for each of these criteria (where 1 is least likely and low impact, and 5 is very likely and very high impact). This enables each risk to have an overall score where the likelihood and impact ratings are multiplied together, and a RAG (Red, Amber, Green rating applied) as per the matrix below. Risk scores guide the IJB's response to risks identified.

Approach to assessing issues

The same applies regards impact, however for issues, the priority and the resolution is considered instead of likelihood. Issues are simply risks which have occurred and they have a rating of between 1 and 5 where 1 is low/no impact ranging to 5 extreme impacts.

Risks

Likelihood	Risk Consequence Impact Rating				
	1	2	3	4	5
5	5	10	15	20	25
4	4	8	12	16	20
3	3	6	9	12	15
2	2	4	6	8	10
1	1	2	3	4	5

Issues

Impact	Issue Rating
1	Insignificant
2	Minor
3	Moderate
4	Major
5	Extreme

Risk Profile

Total Risks	High Risks	Moderate Risks	Low Risks	Very Low Risks	Proposed Closure
15	8	4	3	0	1

Likelihood	Consequence Impact				
	1	2	3	4	5
5	5	10	15	20	25
				2	2
4	4	8	12	16	20
				1	4
3	3	6	9	12	15
			2	2	1
2	2	4	6	8	10
				1	
1	1	2	3	4	5

Issue Profile

Total Issues	1
Extreme Issues	1
Major Issues	
Moderate Issues	
Minor Issues	
Insignificant Issues	

Renfrewshire IJB Risk and Issue Register Audit, Risk and Scrutiny Committee 9 September 2022

Risk or Issue Ref	Risk or Issue Type	Summary Description	Current Risk / Issue Score and ROYG Rating	Risk or Issue Movement
RSK01	Strategic	Changing financial and demographic pressures	20 High	Increase
RSK02	Financial	Financial Challenges causing financial instability for the IJB	20 High	Increase
RSK03	Operational	Increase in physical and mental health inequalities	16 Moderate	No Change
RSK05	Operational	Further waves of COVID	09 Low	Monitor
RSK06	Operational	National Care Service	25 High	No Change
RSK07	Operational	Workforce planning and service provision	25 High	No Change
RSK08	Strategic	Impact of 2022 local elections on Strategic Plan	08 Low	Propose Closure
RSK09	Strategic	National risk of litigation and reputational damage following future public inquiry into COVID response	15 Moderate	No Change
RSK10	Operational	Failure or loss of major service provider	20 High	Increase
RSK11	Clinical	Delivery of the GP Contract / Primary Care Improvement Plan	20 High	No Change
RSK12	Strategic	Failure to achieve targets and key performance indicators	09 Low	No change
RSK13	Strategic	Cyber threats pose an increasing risk	20 High	Increase
RSK14	Strategic	Capital funding and complexities of property planning in an integrated setting	20 High	No Change
RSK15	Operational	COVID Impact on compliance with Mandatory Training	12 Moderate	No Change
RSK16	Strategic	Delivery of Addictions Support in Renfrewshire	12 Moderate	No Change
ISS01	Operational	Issues regards attracting & retaining staff	05 Extreme	No Change

RSK01 Changing financial and demographic pressures					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
The changing financial and demographic pressures facing services poses a risk to the HSCP being able to successfully deliver services to the most vulnerable people in Renfrewshire.	HSCP SMT	There is a risk that if financial and demographic pressures of services are not effectively planned for and managed over the medium to longer term, there would be an impact on the ability of the HSCP to deliver services to the most vulnerable people in Renfrewshire. This needs to be considered with regards to: <ul style="list-style-type: none">• Medium- and longer-term financial planning• Corporate and service review activities• Strategic commissioning approach and the strategic planning process• Service design ensuring the development of cost-effective care models and models which encourage prevention and self-management• Increasing costs such as utilities, salaries, National Insurance, and supplies are also having an impact on budgets across the HSCP and our partners. Partners are now seeking to manage additional costs faced which may lead to an increase in our costs and further budget constraints.• Inflation is currently at 10.1%, and the overall financial outlook beyond this year remains uncertain and challenging.	Increase	Increasing financial pressures and cost of living crisis	
			Risk Code	Category	Risk Management Approach
			RSK01	Strategic	Treat
			Current Likelihood	Current Impact	Current Evaluation
			04	05	20 High
			Previous Likelihood	Previous Impact	Previous Evaluation
			03	05	15 Moderate
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
A number of actions are in place to help mitigate this risk including: Financial Planning and Strategic Planning <ul style="list-style-type: none">- Long term financial planning processes- Budget monitoring processes are in place and regularly reviewed and reported upon- Implementation of the IJB’s Strategic Plan 2022-25 and Medium-Term Financial Plan 2022-25 with Tier 1 rolling savings programme Corporate & service review activities <ul style="list-style-type: none">- Investment in service re-design opportunities to improve efficiency and effectiveness- Eligibility criteria reviewed- Ongoing focus on recovery from the COVID-19 pandemic and assessment of transformational opportunities			HSCP Senior Management Team	Review Sept 2022	Subject to ongoing review
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
Ongoing deployment of the above			N/A	N/A	N/A

RSK02 Financial Challenges causing financial instability for the IJB					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
There are a number of financial challenges facing the IJB and if not adequately addressed, these could affect the financial sustainability of the partnership with consequent impact to service delivery.	HSCP SMT	<p>There are a number of aspects contributing to this risk as follows:</p> <p>1. Service Areas individually, or in combination, experience expenditure levels which exceed funding allocations negatively impacting on the overall financial position of the partnership due to:</p> <p>a) Pay growth (inflation, annual pay award proposals and increases to National Insurance)</p> <p>b) Prescribing</p> <p>c) Sickness & Absence cover</p> <p>d) Community equipment expenditure</p> <p>e) Impact arising from Resource Allocation Model</p> <p>f) Financial impact of any clinical failures</p> <p>g) Compliance with new statutory requirements</p> <p>h) Increased service demand</p> <p>i) Increased supply chain costs due to Brexit, Ukraine and COVID impacts</p> <p>j) Additional costs incurred as a result of COVID-19</p> <p>k) Challenging financial outlook for IJB</p> <p>l) Significant levels of non-recurring funding does not support longer term sustainability of services</p> <p>m) Additional uplifts requested arising from external providers</p> <p>2. The requirement for savings to be delivered as part of the medium-term financial plan could have an impact on the delivery of existing front-line services. The need for savings has been confirmed and a range of options are being progressed for consideration.</p>	Increase	A number of contributing factors; National Insurance increase, cessation of COVID funding from 31 st March and ongoing supply chain cost impacts.	
			Risk Code	Category	Risk Management Approach
			RSK02	Financial	Treat
			Current Likelihood	Current Impact	Current Evaluation
			04	05	20 High
			Previous Likelihood	Previous Impact	Previous Evaluation
			04	04	16 Moderate
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
<p>Supporting frameworks & strategies:</p> <ul style="list-style-type: none">- Financial management framework implemented.- Focus on Recovery and Renewal activity.- Strategic Plan 2022-2025 approved by IJB March 2022 and Strategic Delivery Plan in June 2022- Medium Term Financial Plan for 2022-2025 approved by IJB March 2022 <p>Reporting/monitoring at strategic fora:</p> <ul style="list-style-type: none">- Financial information is reported regularly to the Integration Joint Board and the Senior Management Team.- Financial performance meetings in place with HSCP Chief Officer, Chief Finance Officer, NHS Director of Finance and Council Director of Finance and Resources.- Regular meetings of Medicines Management Group with a focus on prescribing year end out-turn.- Ongoing discussion at GP forum on importance of prescribing financial break even.- Ongoing reporting to Scottish Government on COVID-19 expenditure and discussions on cost recovery.- Robust financial monitoring and budget setting procedures including regular budget monitoring with budget holders.- Prudent use of our reserves policy <p>Savings programme</p>			HSCP Senior Management Team	Historic	Ongoing

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<ul style="list-style-type: none"> - Savings for FY21/22 agreed at IJB March 21 fully delivered by year end (circa £1.135M) - Tier One savings identified and agreed by IJB for delivery FY22/23 (circa £360k) - Further savings & transformation options in development, to be brought forward to the IJB in 2022/23 			
Mitigating / Preventing Actions Planned	Assigned to	Date	Status
- Implementation and ongoing monitoring of identified savings and transformation options, as approved by IJB.	N/A	Sept 22	Ongoing

RSK03 Increase in physical and mental health inequalities

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
There are a risk that physical and mental health inequalities increase, meaning that service users and patients present with higher levels of need, lower levels of resilience and fewer opportunities to participate fully in their communities.	Head of Strategic Planning & Health Improvement	It is recognised that physical and mental health inequalities are highly likely to increase. This may result from long-term conditions, an ageing population, long term impacts of COVID on mental health and Long COVID itself, increasing poverty due to the cost-of-living crisis, increased deprivation or individual risk-taking behaviours resulting in a population with higher levels of need, lower levels of resilience and fewer opportunities to participate fully in their communities. This must be actively considered with regards to the creation of any Health Improvement plans and Partnership working agreements.	No Change	N/A	
			Risk Code	Category	Risk Management Approach
			RSK03	Operational	Treat
			Current Likelihood	Current Impact	Current Evaluation
			04	04	16 Moderate
			Previous Likelihood	Previous Impact	Previous Evaluation
			04	04	16 Moderate
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
Actions undertaken: <ul style="list-style-type: none">There has been a further increased focus on inequalities across a range of HSCP initiatives. A number of teams which maintain a focus on this aspect are in place, including the community link and health improvement teams. There is a new role appointed in Jan 22 to focus solely on equalities.In addition, following a review of our strategic plan priorities a number of activities are underway within our Recovery and Renewal activity; delivery of a community-led approach to health and wellbeing with targeted approaches to raise awareness.The HSCP tracks performance within the Health inequalities outcome (number 5 in National H&W Outcomes) and also continues to monitor population data and trends.Funding was secured for 2021/22 to deliver projects which are aimed at reducing specific inequalities and promote health and wellbeing.Inclusion of health, wellbeing, and inequalities within development of Strategic Plan 2022-25Scottish Govt £15m Communities Mental Health & Wellbeing fund - £500k allocated to Engage Renfrewshire to allocate to local projects. £15m announced by SG for second year of fund (May 2022).Strategic Plan 2022-25 approved by the IJB in March.Additional monies secured as part of winter funding directed to equalities projects; befriending.Supporting strategic development plans to underpin the Strategic Plan approved by IJB in June 2022.			Strategic Planning & Health Improvement	Historic	Complete
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
Actions underway: <ul style="list-style-type: none">Ongoing work with SPG partners to further develop approach to improving health and wellbeingHealth Improvement Team continue to progress local priorities			Head of SP & HI	Sept 2022	Ongoing

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RSK05 Further waves of COVID					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
There is a risk that further waves of COVID could have significant impacts on HSCP operational arrangements, particularly staffing, service provision, and overarching IJB governance.	Chief Officer	<p>The risk is that further disruption to the delivery of strategic and transformation plans, in addition to operational day to day commitments because of:</p> <ul style="list-style-type: none">• The HSCP needing to implement support measures to prevent the spread of COVID-19• The impact of COVID-19 on services users and demand on services:<ul style="list-style-type: none">(a) Provision of additional COVID services(b) Provider sustainability payments(c) Uncertainty over length of pandemic and additional funding available(d) Increased levels of care required due to long covid and increased mental health issues(e) The impact on staff; sickness, mental health, and utilisation to support services• Impact of increasing levels of demand and client expectations• The suitability, affordability, and stakeholder support to achieve the NHS remobilisation plan, Renfrewshire Council's recovery plans and ultimately the HSCP's overall plan.	No Change - Monitor	<p>Agreed at March IJB to reduce likelihood as appropriate and monitor as a lower scored risk as mitigating actions for other linked risks are managing the expected impact.</p> <p>Rationale is that IJB Governance and operational response arrangements are well tested and embedded. Other aspects of the risk regarding staffing impact, further outbreaks, and failure to deliver upon strategic and operational plans are covered by other risks and issues.</p>	
			Risk Code	Category	Risk Management Approach
			RSK05	Operational	Treat
			Current Likelihood	Current Impact	Current Evaluation
			03	03	09 Low
			Previous Likelihood	Previous Impact	Previous Evaluation
			03	04	12 Moderate
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
<ul style="list-style-type: none">• The IJB are now meeting within the normal regular cycle.• Meetings will continue to be conducted remotely using a video and/or audio service that will enable all members to participate.• The risk management framework and policy has been updated to reflect on learnings from COVID and provide the flexibility needed regards risk tolerance required within a pandemic. This is in the process of being rolled out.• Public health measures have been implemented; including vaccinations in 2020/2021 and current planning for vaccinations for 2022/2023 is underway.			N/A	Historic	Ongoing
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
<ul style="list-style-type: none">• Ongoing monthly review of COVID risks across services, with escalation measures implemented as necessary• If required in the future additional meetings of the IJB can take place and / or delegations to the Chief Officer can be revisited if deemed appropriate.• Delivery of Recovery Plans, including the NHS Remobilisation Plan			Chief Officer	September 2022	Ongoing

RSK06 National Care Service					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
There is a risk that the creation of a National Care Service results in potentially significant structural, organisational and governance change which could be challenging to resource alongside operational commitments.	Chief Officer	The published analysis of NCS consultation responses showed support for the wide-ranging proposals made and the implementation of these is therefore likely to place significant demands on HSCP resources to deliver, alongside the delivery of ongoing operational and strategic plans. The Scottish Government have now published a high-level Bill to enable creation of the NCS. This lacks detail but is expected to have significant impact on IJB role and governance through creation of Local Care Boards. Further impacts on staffing, finance, property and technology will also occur. A series of NCS bill Q&A sessions have been held and these have highlighted a commitment that the NCS will be shaped via Co-Design, but also that there are a significant number of questions which cannot be answered at the current stage of the process. The level of risk therefore remains high.	No Change	N/A	
			Risk Code	Category	Risk Management Approach
			RSK06	Operational	Treat
			Current Likelihood	Current Impact	Current Evaluation
			05	05	25 High
			Previous Likelihood	Previous Impact	Previous Evaluation
			05	05	25 High
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
<ul style="list-style-type: none">There are likely to be recommendations which are phased for delivery over the term of this Parliament, to enable some prioritisation of resource.The HSCP has a Change and Improvement team that can be directed to key areas of activity requiring delivery.Continued review of the progress of recommendations progressing through parliament to assess potential resource and plan implications.Implementation of Strategic Plan to consider the need for flexibility in delivery.IJB response submitted to Scottish Government consultation on proposals for National Care Service.			Chief Officer	Historic	Ongoing
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
<ul style="list-style-type: none">Scottish Government consultation results have been shared and these have been reviewed and discussed across the HSCP to understand the impacts.Draft Bill published by the Scottish Government and engagement sessions currently underway.Continue to review available resources to manage required change as expectations are clarified.			Chief Officer	End Sept 2022	Ongoing

RSK07 Workforce planning and service provision					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
<p>There is a risk that a range of factors may impact on the ability to fully implement workforce plans and could lead to longer term workforce difficulties, shortages in some skill sets, therefore potential impact on service delivery and the IJB's ability to deliver upon the strategic plan.</p> <p>*Please also see Issue ISS01: Issues attracting and retaining staff</p>	HSCP SMT	<p>A flexible, skilled, and suitably certified workforce is essential to service provision and delivery of the IJB's strategic plan. Workforce risks can result in increased financial costs and include:</p> <ul style="list-style-type: none">Prolonged vacancies within services. Specific pressures exist around medical staffing (specific roles are in national shortage), District Nursing and Care at Home servicesSufficient numbers of qualified staff with the correct registrationsPressures resulting from additional planning structures which require managerial and clinical input.GP practice handing back their contract and the HSCP having to run the practiceHigh levels of fatigue and unused annual leave from COVID resulting in increased absenceAdditional risks to meeting service demand posed by sickness/absence levels and an ageing workforce leading to increased levels of future retirements.Vacancies or absence within providers, and or providers making decisions to hand back care agreements or not accept new packages/residents.Timely access to the correct tools and accommodation for staff; laptops, mobiles, systems access, uniform, and sufficient space for the services to undertake their roles.Utilisation of non-recurring funding for roles does not make the roles attractive due to their temporary nature.	No Change	NA	
			Risk Code	Category	Risk Management Approach
			RSK07	Operational	Treat
			Current Likelihood	Current Impact	Current Evaluation
			05	05	25 High
			Previous Likelihood	Previous Impact	Previous Evaluation
			05	05	25 High
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
<ul style="list-style-type: none">Operational – management of risk and staff deployment through forward planning of rosters, quality assurance re shifts good practice and daily/weekly reviews of service staffing. Utilisation of bank/agency staff / overtime where required. Introduction of staffing dashboard to monitor staffing levels in critical services.HR & Recruitment – vacancy risk assessment undertaken, reduced timescales from request to advert, robust application of absence management processes, regular review / refresh of statutory and mandatory training and professional registration / revalidation and adherence to application checklists (e.g., disclosure); process for monitoring clinical references. Completion of two job fairs to attract staff and service meetings established to manage recruitment and retention issues collaboratively.Business Continuity – winter planning alignment with ongoing business continuity and risk management to identify issues early. Staffing review undertaken to understand staff willingness to volunteer and deploy in other services should the need arise.Winter funding – specific group established to track the progress regards spend / recruitment of additional and new roles.Independent Contractors – collaborative working with Primary Care and cluster support for GP practices / services, through delivery of the Primary Care Improvement PlanFocused Development session held with IJB on workforce planning and challenges on 5th November 2021Development of an interim one-year workforce plan for 2021/22, and draft 2022 to 25 plan approved by IJB in June 22			N/A	Historic	Ongoing
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
<ul style="list-style-type: none">Integrated workforce plan for 2022 to 25 was submitted to SG in draft at the end of July and will be submitted to the IJB for approval in November 2022 following reflection of any feedback from the Scottish Government.			Head of SP&HI	October 2022	Ongoing

RSK08 Impact of 2022 local elections on Strategic Plan					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
There is uncertainty arising from the 2022 local elections which may result in new members of the IJB who have a different perspective on the direction set out in the Strategic Plan which is scheduled for approval by the IJB in March 22.	Chief Officer	There is uncertainty relating to the 2022 local elections as these may result in new members of the IJB, who may have a different perspective on the priorities and direction set out in the Strategic Plan which is scheduled to be approved by the IJB in March 2022.	Proposed Closure	Strategic Delivery Plan approved by IJB, including new members, in June 2022	
			Risk Code	Category	Risk Management Approach
			RSK08	Strategic	Treat
			Current Likelihood	Current Impact	Current Evaluation
			02	04	08 Low
			Previous Likelihood	Previous Impact	Previous Evaluation
			02	04	08 Low
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
<ul style="list-style-type: none">Focused session held with Strategic Planning Group to discuss and agree the approach to developing the Strategic Plan, and associated consultation requirements.The IJB approved the strategic planning approach in June 2021 with continued engagement internally, with the SPG, voluntary sector and partners (Council and NHS GGC) to further develop the approach.Care Planning Groups implemented throughout August 21, with high-level plan approved by IJB in November 2021Formal consultation completed in alignment with the agreed plan at the end January 2022Strategic Plan approved by IJB in March 2022Supporting Strategic Delivery Plan approved by IJB in June 2022			Head of Strategic Planning and Health Improvement	N/A	N/A
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
<ul style="list-style-type: none">Care Planning Groups continue to meet in 2022, with consolidated annual development plans being created and monitored collaboratively.			Head of SP & HI	Sept 2022	Ongoing

RSK09 National risk of litigation and reputational damage following future public inquiry into COVID response					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
There is a national risk of litigation and reputational damage across integrated health and social care services following the UK-wide public enquiry into the handling of the COVID pandemic, commencing in 2022. We are not aware of any increased comparative risk in Renfrewshire.	HSCP SMT	There is a risk of litigation and reputational damage applicable across health and social care nationally and facing all integrated health and social care service providers, as a result of the UK-wide public inquiry into the handling of the COVID pandemic. The Scottish Government has also committed to completing an inquiry in Scotland and the terms of reference for this was updated on 9 June. There continues to be significant media interest nationally. There is no evidence that this risk is any higher for Renfrewshire than for any other integrated health and social care service.	No Change	Awaiting the conclusion of the Scottish enquiry	
			Risk Code	Category	Risk Management Approach
			RSK09	Strategic	Treat
			Current Likelihood	Current Impact	Current Evaluation
			03	05	15 Moderate
			Previous Likelihood	Previous Impact	Previous Evaluation
			03	05	15 Moderate
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
<ul style="list-style-type: none">Implementation of Local Response Management Team and Recovery and Renewal governance during pandemic, and ongoing input into NHS GGC and Renfrewshire Council governance.Vaccination programme rolled out across Renfrewshire; in alignment with National Vaccination guidance; all staff and care home residents have been offered the vaccine and a third vaccination/booster. Programme also performing well for residents and service users.Commissioning Teams & Community Services are supporting care homes to ensure that they remain open for admission and are prepared for the care of patients with possible or confirmed COVID-19.Significant support also being provided by Public Health, Infection Control and Procurement.Testing of all residents and staff in care homes implemented and regularly re visited.Testing of all staff implemented as per National GuidanceDaily huddles and multi-agency assurance and support for Care Homes in place.Clinical support and leadership through general practice and district nursing.Local proactive support arrangements for infection control, training, practice, supervision and for implementing social distancing and other measures such as reduced or no visiting policies.PPE arrangements established and monitored locallyDashboards and reports developed to allow identification of any COVID 'hotspots' and trendsRegular reporting from Renfrewshire Council, NHS GGC and Renfrewshire HSCP to Scottish Government.			HSCP Senior Management Team	Review Oct 2022	Ongoing
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
Continuation of the above and service recovery in line with updated Scottish Government framework published in February 2022			N/A	N/A	N/A

RSK10 Failure or loss of major service provider or independent contractors					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
There is a risk that we may experience failure, loss, or reduced quality (either permanent or temporary loss) of a major service provider, which may impact on our capacity to deliver services, protect vulnerable children and adults, and may impact on additional costs to cover key services.	HSCP SMT	<p>The context of this risk is with regards to the failure or reduced quality of provision by independent providers of care homes, care services, mental health provision or GP practices. There is financial instability within the sector due to COVID-19, the cost-of-living crisis and additional impacts from Brexit.</p> <p>In October 21, independent contractors were to this risk as we are starting to see pressure build within this area. For example, some providers have confirmed they are unable to take new commitments, cancelled all current outreach and or reduced other commitments.</p> <p>In February 22, a practice was managed as a 2c practice prior to its closure, after which patients were migrated to other local practices.</p> <p>The likelihood of the IJB being asked to cover additional costs from providers, as they attempt to cover rising supply chain and operational costs, is increasing.</p>	Increase	Continued demand and financial pressures in this area	
			Risk Code	Category	Risk Management
			RSK10	Operational	Treat
			Current Likelihood	Current Impact	Current Evaluation
			04	05	20 High
			Previous Likelihood	Previous Impact	Previous Evaluation
			04	04	16 Moderate
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
<p>Procurement and commercial processes</p> <ul style="list-style-type: none">Appraisal of providers and independent contractors conducted as part of procurement process.Purchasing patterns monitored by Finance Team and senior managers.Programme of reviews of all service providers.Contract compliance, performance monitoring and reviews for service providers and the two hospices <p>Support arrangements</p> <ul style="list-style-type: none">Provider Sustainability programme will continue until the end of June 22, with the Social Care Staff fund extended to September 2022 and financial support for testing and vaccinations extended until end March 2023.Main providers registered and monitored by Care Inspectorate, with reports accessible for review. Participation in local and national contingency arrangements relating to providers facing financial uncertainty to ensure minimal impact on local service users. Care Inspectorate also included in discussions.Providers have also been directed to the National and Scottish Government guidance which outlines these various actions including ensuring links to their supply chains and ensuring robust business continuity arrangements are in place.Enhanced governance arrangements for care homes have been implemented across Health Boards at the direction of the Cabinet Secretary in response to COVID-19. These arrangements have significantly increased monitoring of commissioned services and include multi-disciplinary daily huddles and assurance visits.Emergency legislation enacted to enable Health Boards and local authorities to step in to manage failing care homes during the COVID-19.The options for managing disruption to GP practices have been documented and clear processes discussed and established should any situation arise. As at Feb 22 we had one practice run as a 2c practice by the HSCP, this subsequently closed in March 2022 with patients being transferred to other practices.			NA	Review Sept 2022	Ongoing
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
Ongoing monitoring and the above			N/A	N/A	N/A

RSK11 Delivery of the GP Contract / PCIP					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
There is a risk that the HSCP will not be able to deliver services as outlined within the GP Contract / PCIP by the required timelines, due to the scale of work required, workforce availability and allocated funding.	Clinical Director and Chief Officer	Current proposed funding will not cover the full cost implementation of the contract.	No Change	N/A	
		Staffing is under pressure due to the pandemic, high turnover, and recruitment issues (availability of specific staff).	Risk Code	Category	Risk Management Approach
			RSK11	Clinical	Treat
		Initial scope included 6 MOU areas. There is now greater priority on 3 of these: pharmacotherapy, VTP and CTAC which need to be delivered by 2022/23. The remaining 3 require to be delivered by 2023/24.	Current Likelihood	Current Impact	Current Evaluation
			05	04	20 High
		In order to be able to deliver the GP Contract additional property accommodation is required for treatment rooms / pharmacy hubs and also to support the growth in the sizes of the teams created for the purpose of multi-disciplinary service delivery.	Previous Likelihood	Previous Impact	Previous Evaluation
			05	04	20 High
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
<ul style="list-style-type: none">Updated MoU published on 2nd August 2021.Clinical Director providing support and guidance to GP services reporting challenges in recruitment and capacity Regular reporting to the Scottish Government regards progress and to inform National direction. Deep dives are planned with the government to look at the needs within some of the key MOU areas.Property audit has identified suitable space to accommodate teams and services; treatment rooms and pharmacotherapy which has supported feasibility studies regards delivery of service.Issue regarding funding available to support delivery of the GP Contract / PCIP has been escalated to the NHS GGC Primary Care Board and also SMT.Additional funding of £550K secured in a Scottish Government bid as part of 'Winter Funding' which will help to fund the Primary Care Improvements. This is recurring funding.We have now delivered 14 practices out of 28 into treatment rooms.Responsibility for vaccinations that were previously delivered in GP practices have now transferred from GPs to the HSCP, this was a key requirement for delivery under the contract by March 2022.			Clinical Director	Review end Oct2022	Ongoing
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
<ul style="list-style-type: none">Continuation with the aboveProjects underway to complete feasibility studies via NHS capital planning to identify suitable accommodation.Work is underway to rollout pharmacy hub model across Renfrewshire, the anticipated go live is autumn 2022.			N/A	N/A	N/A

RSK12 Failure to achieve targets and key performance indicators					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
There is a risk that failure to deliver upon the required Strategic Plan targets and standards, and other key performance indicators, could result in a decreased level of service for patients and service users.	HSCP SMT	This risk is fourfold: <ul style="list-style-type: none">• The IJB and HSCP's ability to define appropriate local strategic plan• The IJB and HSCP's ability to deliver upon said strategic plan• The IJB and HSCP's ability to evidence that we have achieved the outcomes required within the strategic plan.• There is also a risk that the dependencies between our strategic plan and national planning, and partner strategies are not aligned.• The dependencies between the delivery of targets and wider risks relating to financial and workforce challenges (Risks 1, 2 7 and Issue 1)	No change	Strong alignment between our strategic, medium term financial and workforce plans. National policy changes pose a risk but mitigated by annual review of strategic plan. However, related financial and workforce impacts remain which may impact on delivery.	
			Risk Code	Category	Risk Management
			RSK12	Strategic	Treat
			Current Likelihood	Current Impact	Current Evaluation
			03	03	09 Low
			Previous Likelihood	Previous Impact	Previous Evaluation
			03	03	09 Low
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
<ul style="list-style-type: none">• Performance reports presented to all IJB meetings with full scorecard presented 6-monthly and annual reports produced to support monitoring and planning.• Organisational Performance Reviews with Chief Executives of NHSGGC and Renfrewshire Council• National, NHSGGC, Ministerial Steering Group and local performance measures• Regular review of key performance indicators with performance support available to all service areas• Review of systems used to record, extract and report data and development of data capture systems to inform local planning.• Needs Assessment carried out• Review of integration scheme in line with legislation and development of strategies in line with statutory guidance• Undertaking equality impact assessments to evidence how plans and strategies will support those in need• Ongoing budget monitoring and management to meet service demands• Staffing resources are flexed to meet priorities/demand• Quality care and professional governance arrangements• Ongoing work developing a culture of performance management and link to Recovery and Renewal Programme• Ongoing maintenance of performance management framework agreed by IJB September 2021, next update due November 2022• Strong alignment between our strategic plan, medium term financial plans and our workforce plan• There remains a risk of national policy changes which could affect our alignment, but our review of strategic plan progress should mitigate against this risk.			SMT	Review Oct 2022	Ongoing
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
<ul style="list-style-type: none">• Continuation of the above• Alignment of new Strategic Plan within performance monitoring processes			Head of SP&HI	Review Oct 2022	Ongoing

RSK13 Cyber threats pose an increasing risk					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
Cyber threats are an increasing risk to the HSCP and our respective partner organisations and there is a risk that either partner could be targeted to disrupt key infrastructure.	NHS - Director of eHealth Council - Head of IT	Cyber threats are a dynamic and growing threat to the HSCP and our partner organisations; NHS and Renfrewshire Council. Until recently, much of the focus of such threats was the theft of financial data, not personal or patient/service user information. However, there is now a growing risk that we will be targeted in order to disrupt a key component of critical national or local infrastructure. This risk has heightened during the COVID-19 pandemic as we have seen a 40% increase in attempts. As the HSCP's ICT infrastructure is provided by NHS GGC and Renfrewshire Council, the responsibility for addressing this risk sits with our partner organisations however shall be maintained in this log for monitoring. Since the last report the HSCP has been notified of a contracted provider and NHS24 cyber breaches and has been focusing our Business Continuity Review on how the Partnership would operate in the event of a data or systems breach.	Increase	Civil contingencies advise that the Ukraine situation has increased the potential of cyber-attack with recent external examples of such issues.	
			Risk Code	Category	Risk Management Approach
			RSK13	Strategic	Treat via Partners (Transfer)
			Current Likelihood	Current Impact	Current Evaluation
			05	04	20 High
			Previous Likelihood	Previous Impact	Previous Evaluation
			04	04	16 Moderate
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
<ul style="list-style-type: none">HSCP staff are reminded to follow the relevant GDPR and Information Security policies for their employment organisation.Renfrewshire Council have recently (Q2 and Q4 2021) reinforced their Information Security Policy and released several comms to staff regarding security of data and data protection generally. The Council have also conducted a Council-wide phishing scam test to raise awareness of the practice and inform lessons learned.NHS GGC operates a multi layered security model to defend against cyber threat.Both NHS GGC and Renfrewshire Council maintain appropriate information governance controls and governance structures to monitor and manage risks.The eHealth Directorate and Renfrewshire Council continue to build upon cyber defences with controls in place.Further implementation of additional cyber security prevention in alignment with National guidance by both partner organisations in light of the additional Ukraine risk.			NHS - Director of eHealth Council – Head of IT	Historic	Ongoing
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
<ul style="list-style-type: none">Continuation of the aboveFurther discussion with NHS and Council regards ongoing work in this space and also regards Business Continuity Planning review elements to ensure we have robust plans to access critical service data in the event of a data/systems breach.			NA	Review Oct 2022	Ongoing

RSK14 Capital funding and complexities of property planning in an integrated setting					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
There is a risk that limited capital funding and the complexities of co-ordinating relevant property strategies and planning between partner organisations could create additional challenges in delivering the IJB's strategic plan in the medium- to long-term.	Chief Officer and CFO	<ul style="list-style-type: none">There is a risk that limited capital funding, and the complexities of coordinating a property strategy consistently across both NHS and Council properties, could create additional challenges in delivering the IJB's strategic aims in the medium to long term.Capital planning is reserved to the IJB's partner organisations. As such the ability to influence property strategies on an ongoing basis is required.Ongoing maintenance requirements across the estate.An increase in staff to support service recovery is also adding accommodation pressure.	No Change	NA	
			Risk Code	Category	Risk Management Approach
			RSK14	Strategic	Treat via Partners (Transfer)
			Current Likelihood	Current Impact	Current Evaluation
			04	05	20 High
			Previous Likelihood	Previous Impact	Previous Evaluation
			04	05	20 High
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
<ul style="list-style-type: none">Property Strategy workstream established within the HSCP to gather key data to understand the current position across all our services including the challenges faced. Working directly with Renfrewshire Council to determine staff workplace requirements and NHS Estates team regards the property actions required.Primary Care Property Strategy submitted to IJB 25 June 2021.A property data gathering exercise completed to support the determination of property priorities.Funding secured for a 2-year temporary property manager in Q3 2021, post started in December 2021.Refreshed HSCP Property Strategy Group commenced 11th May 2022.Ongoing attendance at the NHS Board/HSCP Capital Planning Group			Chief Finance Officer	Review Oct 2022	Ongoing
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
<ul style="list-style-type: none">Refreshed assessment of service and team needs as HSCP transitions in line with Scottish Government Strategic FrameworkDraft Property Strategy to be brought to IJB in November 2022.			Chief Finance Officer	Review Oct 2022	Ongoing

RSK15 COVID Impact on compliance with Mandatory Training					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
There is a risk that the pressures on staffing caused by the demands of the COVID-19 pandemic, subsequent waves, and recovery needs, will impact on timeous completion of mandatory training. This could impact on the provision of a safe working environment for staff and patients / service users.	SMT	Staff within the HSCP are required to undertake a range of mandatory training as part of their duties and responsibilities. However, the demands of the COVID-19 pandemic on staff time in response to the pandemic, on staff absence and current increased levels of annual leave where staff have previously been unable to take this, limits the time staff may have available to undertake mandatory training.	No Change	N/A	
			Risk Code	Category	Risk Management Approach
			RSK15	Operational	Treat with Partners (Transfer)
			Current Likelihood	Current Impact	Current Evaluation
			03	04	12 Moderate
			Previous Likelihood	Previous Impact	Previous Evaluation
			03	04	12 Moderate
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
<ul style="list-style-type: none">Continued compliance with Staff Governance standardsCreation of a dashboard underway to present consolidated view of Health and Safety information for the HSCP in a single view. This will enable trends and areas of concern to be easily identified and action taken.Collaborative working between the NHS and Council regards to Health and Safety, via a network of advisors ensures that the partnership correctly applies the required H&S standards.Recording of incidents, including violent incidents are reviewed by Service Managers with data presented on a regular basis prior to them being reviewed via the Joint Health and Safety Committee (includes trade unions)Workforce planning activity will reinforce Health and Safety as a core objectiveCompletion of individual risk assessments for clients and warning flag system in place on electronic care records.Guidance for safe clinical and care environments is regularly reviewed and maintainedOngoing programme of staff training, including mandatory and statutory training, on health and safety issues (sharps, manual handling, and fire)Appropriate processes have been created and are invoked in cases of adverse weather for community-based servicesFollowing investigations of significant adverse events (including RIDDOR reportable), process improvements are identified and implemented, being overseen via the most appropriate governance structure.Occupational Health services and staff support services are available and regularly communicated to staff.Renfrewshire Council policies and procedures regards DSE assessments are regularly monitored			Head of Health and Social Care	Historic	Ongoing
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
<ul style="list-style-type: none">Monthly review of training compliance continues.			SMT	Review Oct 2022	Ongoing

RSK16 Delivery of Addictions Support in Renfrewshire					
Risk Statement	Risk Owner	Risk Description	Movement	Reason for Movement if applicable	
There is a risk that the support provided to those with Addictions in Renfrewshire by the range of partners within the ADP, and the recommendations being implemented from the Alcohol and Drug Commission, may not prevent future increases in the number of drug and alcohol related deaths within the area.	SMT	<p>The National Records of Scotland published drug related death figures for 2020 and in Renfrewshire 67 people sadly lost their lives. For 2021, recent figures show 50 people died. Every life lost because of drug or alcohol harm is a tragedy.</p> <p>Statistics show that around 66% drug deaths are individuals not known to services or in treatment at time of death. Partners across Renfrewshire continue to work closely and collaboratively to develop services to support to those with addictions, and a range of actions are outlined in the mitigating / preventing actions below. However, in response to the latest figures on drug deaths, it is important that the HSCP and ADP partners review existing strategy and plans to ensure that those at risk can be reached and supported as early as possible to prevent drug related deaths in future</p> <p>Figures published by NRS have also shown that between 2017 and 2021 a total of 227 deaths were caused by Alcohol in Renfrewshire. This is the eighth highest figure across the 32 Scottish Local Authorities.</p>	No Change	N/A	
			Risk Code	Category	Risk Management Approach
			RSK16	Strategic	Treat with ADP
			Current Likelihood	Current Impact	Current Evaluation
			03	04	12 Moderate
			Previous Likelihood	Previous Impact	Previous Evaluation
			03	04	12 Moderate
Mitigating / Preventing Actions Complete or Ongoing			Assigned to	Date	Status
<ul style="list-style-type: none">The review of 2019 and 2020 drug deaths within Renfrewshire has been completedRecovery hub refurbishment complete and services established in November 2021Extended distribution of NaloxoneWorking with Peer NavigatorsUse of Near Me to encourage engagementExtended access to residential rehabilitation services.Close collaboration with colleagues from the emergency department at the RAH following near fatal overdoses.Ensure that rapid restart of treatment is available following relapse.Adopted an assertive outreach approach for service users.Have a clear pathway in place for those who are released from prison.Developing and implementing the Drug Deaths Prevention Action PlanContinuing to implement the recommendations of the Alcohol and Drug CommissionHarm reduction unit established in December 2021 (HaRRT - Harm and reduction response team)Drug death prevention officer role recruited to the ADPOngoing review of plans alongside the ADP with continued updates from all parties.Multiagency review and discussions required regards further actions capturedSpecialist Alcohol Outreach Team in place - the aim of their work is to provide care in the community for frequent attenders at the RAH who do not engage with other services.A dedicated post was created to increase the number of Alcohol Brief Interventions delivered across Renfrewshire.			ADP	Review Oct 2022	Ongoing
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
<ul style="list-style-type: none">Updated figures on drug deaths to be received quarterly rather than annually to support quick review and identification of learningAn enhanced multi-agency approach to the review of drug-related deaths that occur in Renfrewshire is current under development which includes the implementation of a multi-agency drug death review group (DDRG) which will commence in H2 2022.Regular meetings with partners to discuss and learn from non-fatal overdosesA Preventing Drug Deaths Action Plan for Renfrewshire is currently being created.			ADP	Review Oct 2022	Ongoing

Renfrewshire IJB Risk and Issue Register Audit, Risk and Scrutiny Committee 9 September 2022

<ul style="list-style-type: none"> Ongoing planning continues around alcohol and drug services to address the requirements of the wider Renfrewshire community. This work will address any requirements aligned to the delivery of the National MAT standards and alcohol quality principles. A dedicated post to review Alcohol Related Deaths will be recruited in 2022 for one year and will embed process going forward. 	Head of MH, LD, and Addictions		
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ISS01 Issues regards attracting & retaining staff					
Issue Statement	Issue Owner	Issue Description	Movement	Reason for Movement if applicable	
Challenges in attracting and retaining staff across a range of roles within HSCP services, because of a range of factors, is contributing to constraints in service delivery.	SMT	It has become increasingly difficult to attract and retain the right staff for various roles across the HSCP. A number of services are now experiencing significant challenges with recruitment due to the following: <ul style="list-style-type: none">• Changes due to the Scottish Government nursing agenda has resulted in some posts more attractive than others and also altering the role requirements (specified nursing degrees). District and School nursing are particularly affected.• Varying rates of pay and conditions across HSCPs• A general shortage locally and nationally for specific roles.• A perceived reduction in number of applicants for frontline roles such as Care at Home in light of the impact of the pandemic and its associated challenges.• The NCS Bill is also adding uncertainty for the future of social care roles.	No Change	NA	
			Issue Code	Category	Issue Management Approach
			ISS01	Operational	Treat
			Current Impact	Current Evaluation	
			05	Extreme	
			Previous Likelihood	Previous Evaluation	
			05	Extreme	
Mitigating and Recovery Actions Complete or Ongoing			Assigned to	Date	Status
<ul style="list-style-type: none">• HR & Recruitment – risk assessment undertaken re vacancies, reduced timescales from request to advert, robust application of absence management processes, regular review / refresh of statutory and mandatory training and professional registration / revalidation and adherence to application checklists (e.g., disclosure)• Implementation of alternative recruitment routes where possible in agreement with HR & OD• Development of interim workforce plan 2021-22, and a workforce plan for 2022 to 25 which was reviewed in draft at IJB June 2022 and submitted to SG for comment at the end of July 2022.• Winter planning – 3-month forward plan completed to ensure adequate staffing and contingency. Scenario planning completed with services – to identify any possible additional staffing mitigations.• Contingency exercise completed to identify staff who are willing to volunteer to support other services should the situation arise.• Implementation of workforce status dashboard, and daily situational reporting established for critical services regards staffing			HSCP SMT	Review Sept2022	Ongoing
Mitigating / Recovery Actions Planned			Assigned to	Date	Status
<ul style="list-style-type: none">• Work continues with services to work collaboratively to identify and complete actions to improve staff retention and recruitment, define innovative approaches to recruitment. Completion of two job fairs to attract staff.• Independent Providers – collaborative working with Primary Care and cluster support for GP practices / services.			HSCP SMT	Review Sept 2022	Ongoing

[This concludes the RHSCP Risk and Issue Report for 09 September 2022 IJB Audit, Risk & Scrutiny Committee]



To: Renfrewshire Integration Joint Board Audit, Risk and Scrutiny Committee

On: 26 October 2022

Report by: Head of Health & Social Care

Heading: Health & Safety Update

1. Purpose

- 1.1. The purpose of this paper is provide the IJB Audit, Risk and Scrutiny Committee with an update on our incident report position from 1st January 2022 to 31st June 2022.
-

2. Recommendations

It is recommended that the IJB Audit, Risk and Scrutiny Committee:

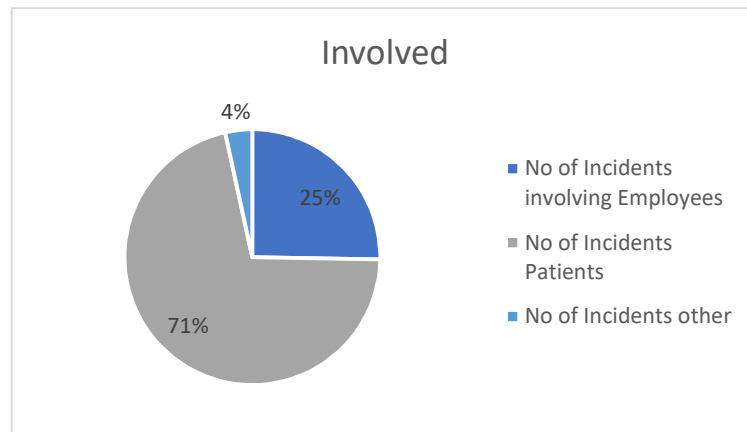
- Note the content of this paper.
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3. Reporting Systems

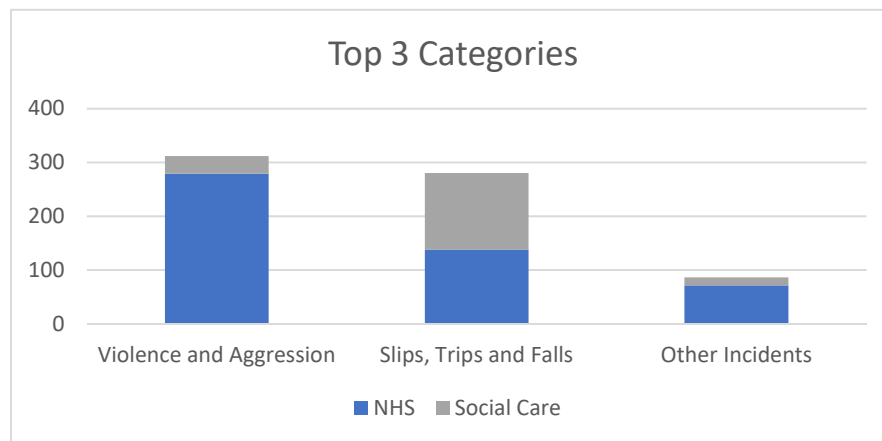
- 3.1 There are different reporting systems in place across NHS and Local Authority services. Incident reporting within NHS is captured in DATIX and within Local Authority this is captured in Business World. Business World is currently undergoing a redesign to allow for better recording and reporting of safety incidents. The initial relaunch of Business World has been delayed from April 2022 to August 2022.
-

4. Incident Reporting

- 4.1 The first 6 months of 2022 saw **1,084** incidents raised within the HSCP, **840** of these were raised via Datix and **244** from Business World.
- 4.2 The breakdown of incidents raised were 71.2% involving patients, 25.3% involving staff and 3.4% other.



4.3 Most occurring incidents remains Violence & Aggression **312**, Slips, Trips & Falls **280** and Other Incidents **86**.



4.3.1 The undernoted actions remain in place to help address the highest rates of incidents

- Violence and Aggression:** Training and refresher training are in place for staff and an e-learning module is available. The Violence Reduction service is also available for staff to provide advice and support around violence reduction and de-escalation strategies.
 Following a recent incident enquiries are being made to the possibility of all staff receiving an element of violence & aggression training in relation to break away techniques.
 Additional personal alarms are now available for distribution to all staff while working within Mental Health wards. Following the increased number of alarms available an audit on the use of these alarms is being undertaken.
- Slips/Trips and Falls:** All accidents/incidents are investigated locally. Follow up actions are identified, risk assessments are reviewed and care plans updated.
- Other incidents:** Categorisation of “other incidents” will become a focus for Health & Safety as we move to reduce the use of other incidents ensuring accurate reporting. Analysis is underway and recommendations will be made where incidents could have been categorised more appropriately. This will be shared with Service Managers.
- Incidents categorised as “Other” will be shared with managers on a monthly basis to aid exploration of these incidents for more accurate categorisation.

5. **Serious Adverse Events (SAEs)**

5.1 Systems are in place across both Health & Social Care to record Significant Adverse Events with a Briefing Note completed in all cases. All incidents reported are investigated to reduce the risk of recurrence with learning shared.

5.2 The first 6 months of 2022 has saw **2** SAEs commissioned within Renfrewshire HSCP this is a reduction of 1 on the previous 6 months. The position is in keeping with the annual position where we saw a 50% reduction overall. Both SAEs commissioned were in relation to suicide or suspected suicided. These SAEs remain active at the present date.

6. **RIDDOR**

6.1 There have been **9** RIDDOR incidents in the first 6 months of 2022 this is an increase of **1** from the 6 months prior. Of these incidents **7** were raised within NHS and **2** within Social Care.

Breakdown:

Area	Categories	Number of incidents investigated as RIDDOR
Mental Health Services	Violence & Aggression	5
Administration Services	Moving & Handling	1
District Nursing	Slips, Trips & Falls	1
Learning & Disability Services	Struck Against	1
Care @ Home Services	Slips, Trips & Falls	1

7. **Fire Safety**

7.1 A small number of premises across Renfrewshire remain closed since the pandemic and taking this in to account our Fire Safety Audit is currently 78% which is a 40% increase on where we were at the beginning of 2022.

7.2 Following the implementation of the new Fire Risk Assessment for residential care homes and audit of same, further revisions are taking place and matters raised within the audit are being addressed including staff training.

8. **Health & Safety Compliance**

Monthly monitoring and reporting continues across NHS services for training and incident reporting. Following the short life working group, essential training requirements have been outlined for social care staff and steps are being taken to obtain the current position for staff training across services to support future training plans. The revised business world reporting system is expected to go live by the 31st August 2022.

NHS Services within Renfrewshire HSCP will undergo a Health & Safety Audit before March 2023 as part of an NHSGGC-wide audit schedule. Service Managers continue to monitor and update local risk assessments for their service areas.

Implications of the Report

1. **Financial** – No direct implications from this report
2. **HR & Organisational Development** – No direct implications from this report
3. **Community Planning** – No direct implications from this report
4. **Legal** – No direct implications from this report
5. **Property/Assets** – No direct implications from this report
6. **Information Technology** – Managing information and making information available may require ICT input.
7. **Equality & Human Rights** – No direct implications from this report
8. **Health & Safety** – No direct implications from this report
9. **Procurement** – No direct implications from this report
10. **Risk** – No direct implications from this report
11. **Privacy Impact** – None.

List of Background Papers – None.

Author: Karen Mitchell, Operational Support Officer

Any enquiries regarding this paper should be directed to Jackie Dougall, Head of Health & Social Care (jackie.dougall@ggc.scot.nhs.uk /Tel: 0141 618 7898)



To: Renfrewshire Integration Joint Board Audit, Risk and Scrutiny Committee

On: 26 October 2022

Report by: Planning and Performance Manager

Heading: Public Interaction Report for April 2021 – March 2022

1. Summary

The purpose of this report is to provide an update on public interactions from 1 April 2021 to 31 March 2022 which includes Complaints; Enquiries; Freedom of Information (Fols); Subject Access Requests (SARs); as well as Compliments and Communications.

2. Recommendation

It is recommended that the IJB Audit, Risk and Scrutiny Committee:

- Note the content of this report.
-

3. Background

- 3.1 Public Interaction Reports are presented to the Audit, Risk and Scrutiny Committee twice per year, in March (mid-year report) and September (full year report). This is the full year report for 1 April 2021 – 31 March 2022.

4. Complaints

- 4.1 Between 1 April 2021 and 31 March 2022 there were a total of 173 complaints received for the HSCP.

This section of the report details performance in reference to each of the nine key performance indicators which were introduced by the Scottish Public Services Ombudsman (SPSO) Model Complaints Handling Procedure.

4.1.1 Indicator One: Learning from Complaints

a. Actions and Improvements

For all upheld or partly upheld complaints, actions are recorded and progressed. All ongoing action plans are tracked by the Complaints Team and reviewed at Locality Governance meetings.

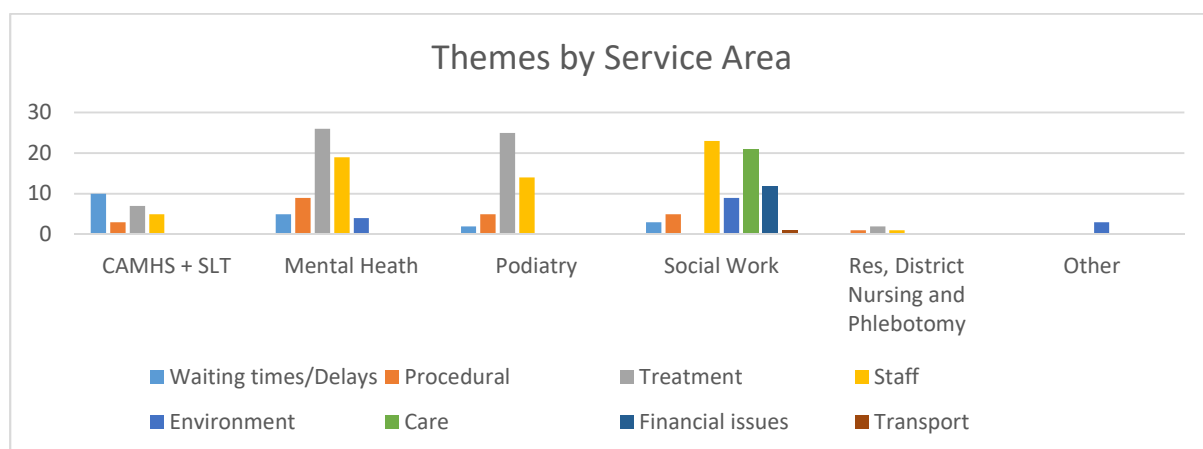
In the year 2021 - 2022, 76 complaints were upheld or partly upheld and actions were taken.

Examples:

Area	Summary of Complaint	Action
Social Work	Poor communication in relation to Direct Payment Financial Review.	Process changed to ensure that a care manager is allocated and involved with every Direct Payment Financial Review to improve understanding and communication of the process.
NHS – Podiatry Services	Appointment information leaflet had incorrect complaints contact information. This caused a delay for the client when trying to complain.	Appointment leaflet updated with correct complaints information – signposting the Renfrewshire HSCP Complaints Team as Podiatry Services are hosted by Renfrewshire HSCP.

b. Issues and Themes

Issues and themes are recorded for each service area and discussed at Service and Locality meetings to highlight areas of concern.



CAMHS + SLT - Child and Adolescent Mental Health Services + Speech & Language Therapy
 DN - District Nursing + RES - Rehabilitation and Enablement Services

c. Scottish Public Services Ombudsman – Investigation Reports and Decision Letters

Where a complainant remains dissatisfied with the final response provided by the HSCP, the complainant may write to the Scottish Public Services Ombudsman (SPSO).

During the period 1 April 2021 – 31 March 2022 Renfrewshire HSCP received requests for information from the SPSO relating to 3 complaints. All 3 complaints were not investigated further by the SPSO.

4.1.2 **Indicator Two: Complaint Process Experience**

We recognise that if a person has taken the time to contact us about their or a loved one's negative experience of our services, we have a duty and responsibility to respond. Effective, efficient and compassionate complaints handling is therefore vitally important.

The Complaint Process Experience Feedback form has been added to the Complaints webpage and is referenced in our final response letters to encourage feedback.

4.1.3 **Indicator Three: Staff Awareness and Training**

As well as supporting service users and complainants, Renfrewshire HSCP also aims to ensure staff involved with a complaint feel supported and empowered throughout the process.

A recorded training presentation was created and was sent out to all complaint investigators and is available to all new investigators. Microsoft Teams training was also carried out with senior managers across the HSCP between September and December 2021. Communications training has also been delivered at the February and March 2022 Leadership Network Meetings.

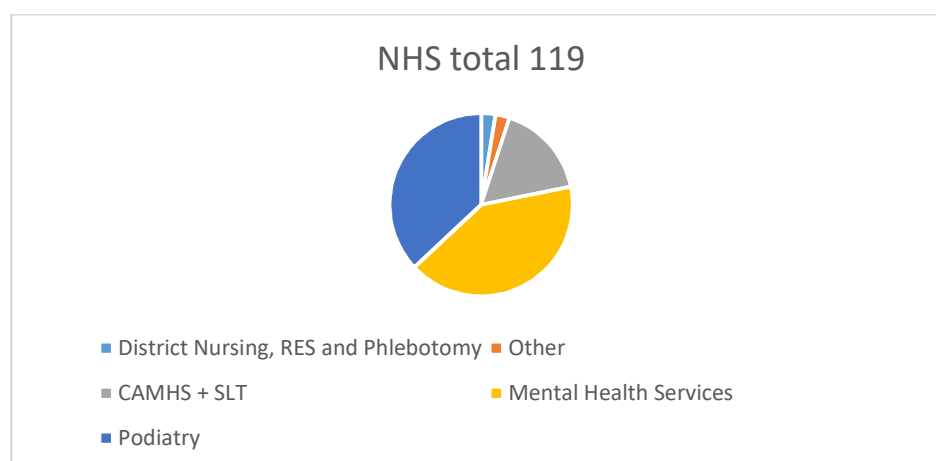
4.1.4 **Indicator Four: Total Number of Complaints Received**

Total complaints received from April to March 2021 - 22; 2020 - 21 and 2019 - 20

2021-22	2020-21	2019-20
173	113	148

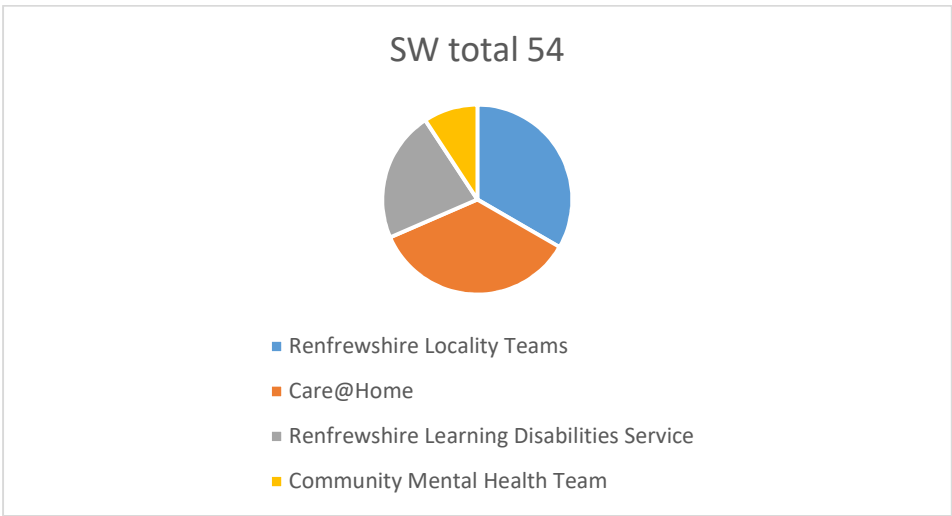
There was a drop in complaint numbers during 2020-21 due to COVID however numbers for 2021-22 show a 16.9% increase in complaints received compared to pre-pandemic numbers in 2019-20.

119 NHS Complaints April 21 – March 22



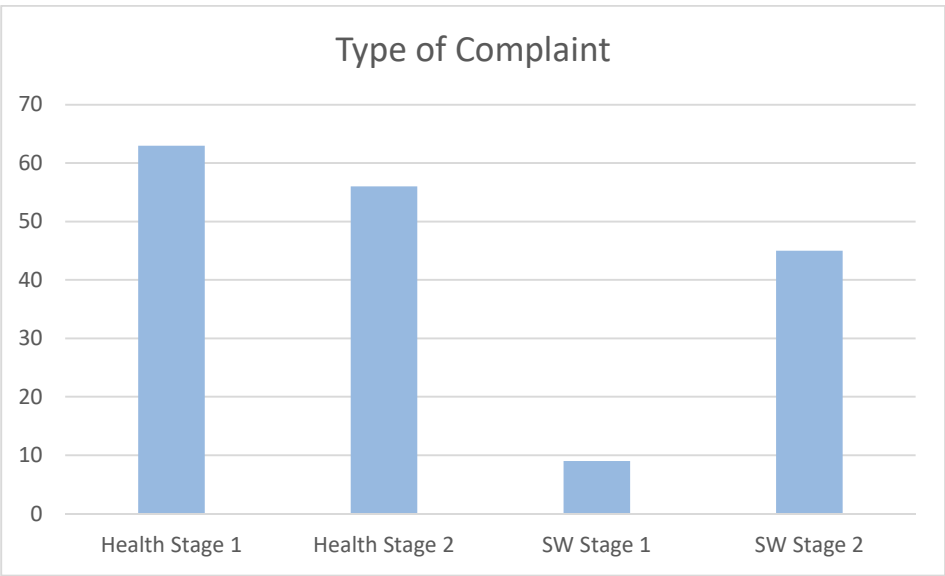
Please note: Podiatry is a hosted service for the whole of NHSGGC

54 Social Work Complaints April 21 – March 22



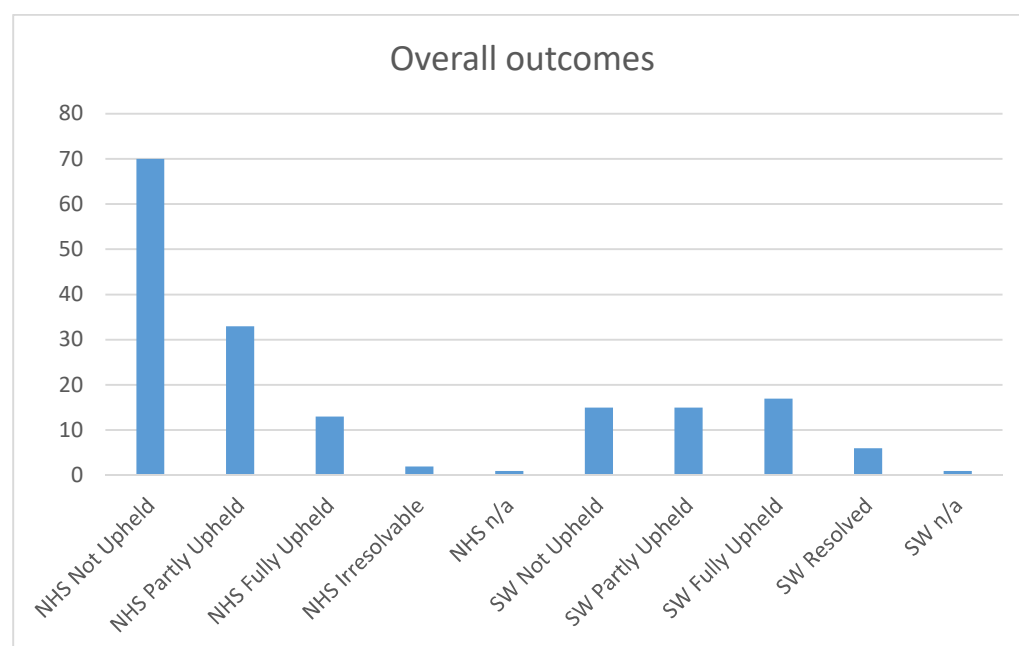
4.1.5

Indicator Five: Complaints Closed at Each Stage



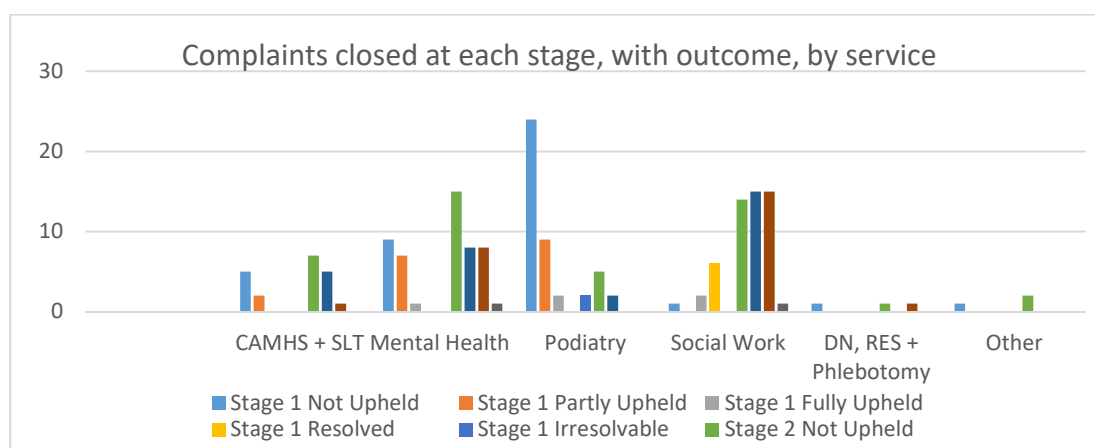
4.1.6

Indicator Six: Complaints Upheld, Partly Upheld and Not Upheld



4.1.7

Further Analysis



The complaints marked as n/a: SW - HR process not finished yet. NHS – progressed to a Significant Adverse Event Review but the family did not have consent therefore the outcome could not be shared.

4.1.8

Indicator Seven: Average Times

The average time for all complaints being completed was 13.4 working days against the SPSO requirement of 20 working days.

4.1.9

Indicator Eight: Complaints Closed in Full within the Timescales

All complaints closed within the target of 20 days was 90% against a 70% target. This equates to 155 complaints closed on time and 18 out with the 20 day target.

4.1.10 **Indicator Nine: Number of cases where an extension was authorised**

Of the 18 complaints that were out with the 20 day target, 10 were authorised with a holding letter. Of the 8 complaints where an extension was not authorised, this was due to: consent not being received; staff annual leave and delays in scheduling meeting(s) with the complainant.

5. **Enquiries**

5.1 **Background**

Renfrewshire Health and Social Care Partnership receives a large number of enquiries which can include requests for information about the services we provide or elected member casework carried out on behalf of their constituents.

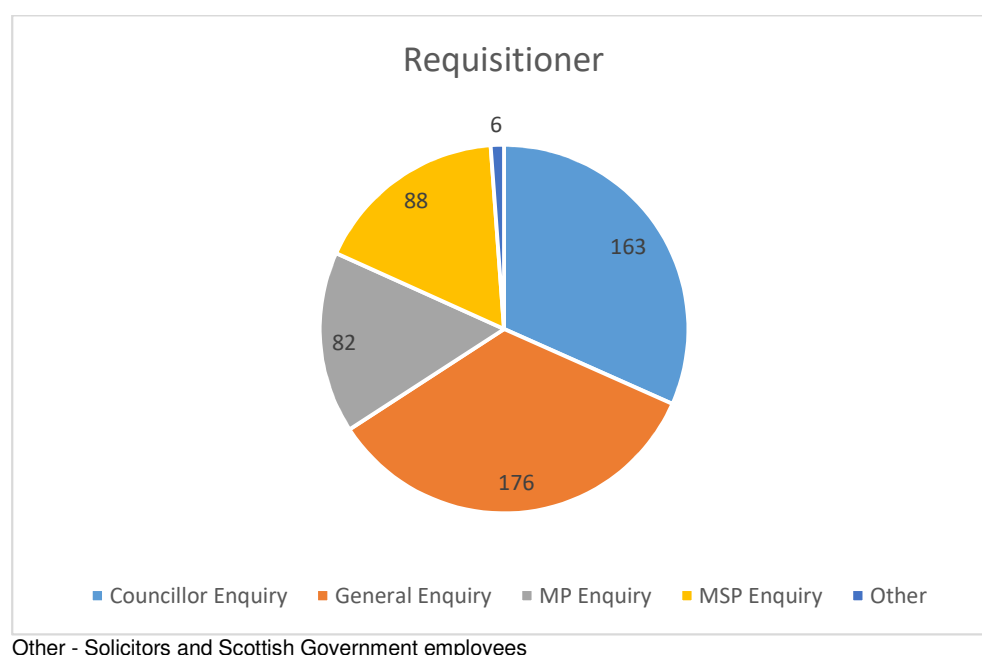
We strive to provide a flexible and responsive enquiry service, which supports a positive relationship with elected members and the general public.

5.2 **Total Enquiries received from April to March 2021 - 22; 2020 - 21 and 2019 - 20**

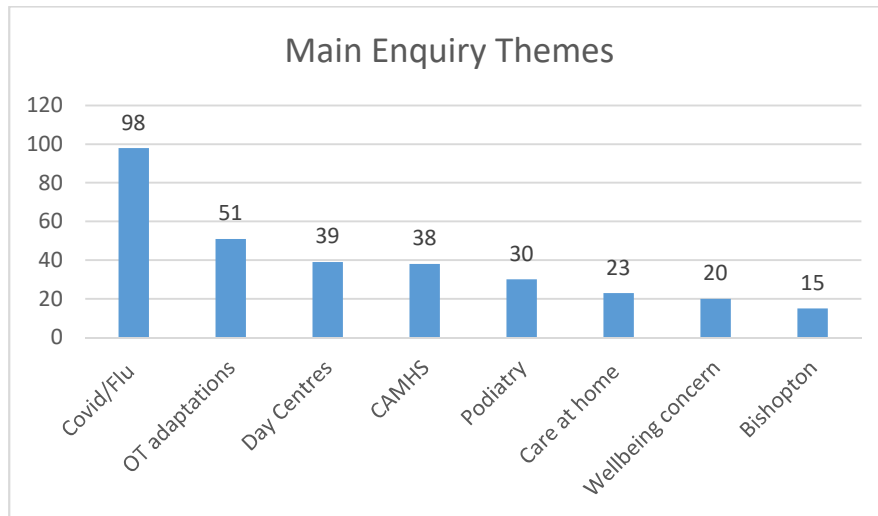
2021 - 22	2020 - 21	2019 - 20
515	491	203

There has been a substantial increase in the number of enquiries in 2020 - 21 and 2021 - 22 compared to the year 2019 - 20.

5.3 **Enquiries from April 2021 - March 2022**



5.4 Enquiry Themes (with over 10 enquiries each)

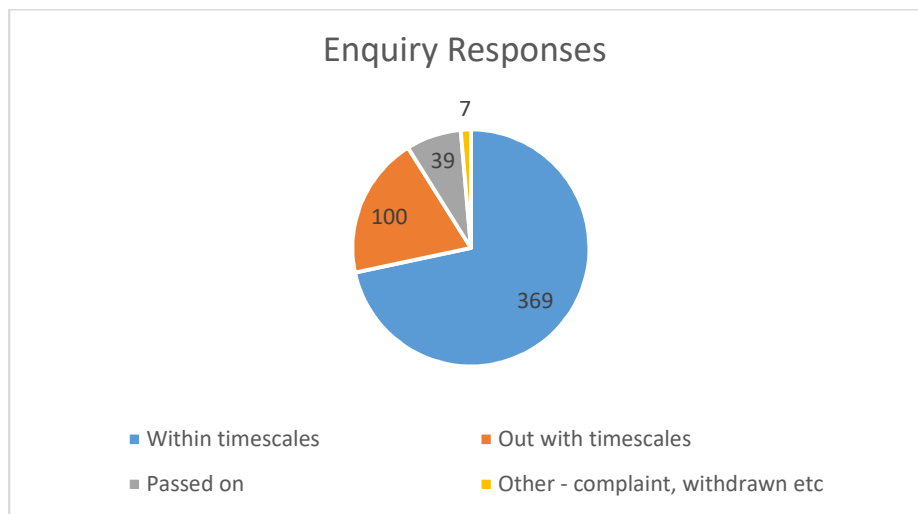


Note: Bishopton enquiries have been about the building expansion and the satellite site.

5.5 Total Number Completed within Timescales

The HSCP target timescale for handling enquiries is 5 working days.

The average time for all enquiry responses was 4.3 days.



6. Freedom of Information (Fol)

6.1 Background

6.1.1 The Freedom of Information (Scotland) Act 2002 (FoISA) came into force on 1 January 2005 and created a general right to obtain information from a public authority subject to limited exemptions. The IJB is therefore subject to the Act as a public authority within its own right, however, receives very few Fol requests.

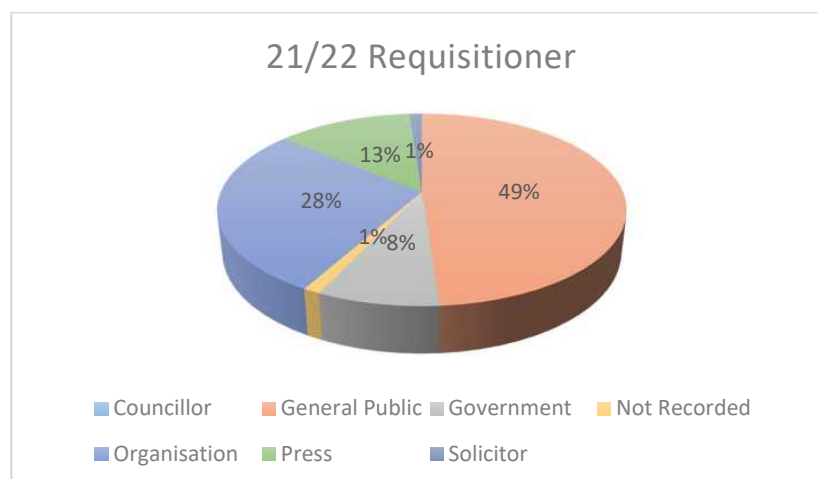
6.1.2 Any Fol relating to the operational delivery of Health and Adult Social Care Services received by the Local Authority or NHS Greater Glasgow & Clyde is also shared with the Health & Social Care Partnership.

6.2 **Total Fols received from April to March 2021 - 22; 2020 - 21 and 2019 - 20.**

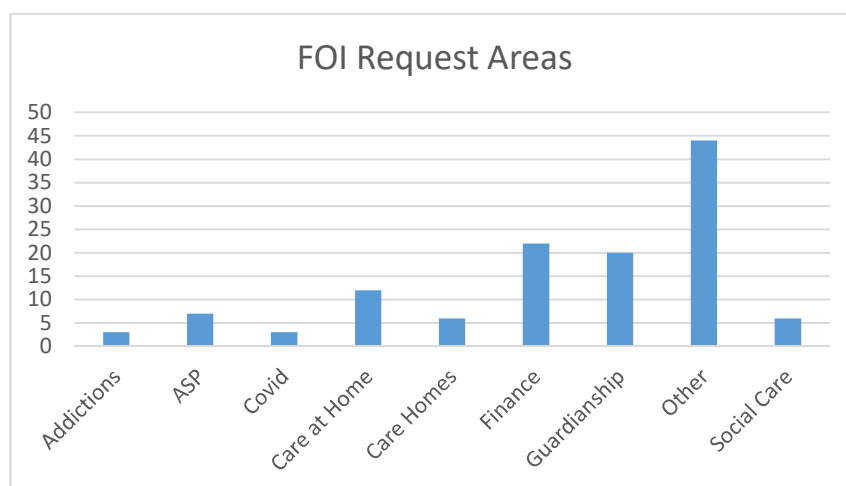
2021 - 2022	2020 - 2021	2019 - 2020
123	109	141

The number of Fols received for the period April 2021 to March 2022 was 12.8% higher compared to the same period in April 2020 to March 2021 and 12.8% less than April 2019 to March 2020. There were no Fol requests for the IJB from April 2021 to March 2022.

6.3 **Freedom of Information requests in April – March 2022**



6.4 **Fol Request Areas**



6.5 Fols Completed within Timescales

The timescale for complying with Fol requests is 20 working days.

Statutory responsibility for Health and Social Work Fol requests lies with the NHS and Council respectively although Renfrewshire HSCP provides the information.

Of the 123 Fols received, 107 were completed on time (87%). When a response to a Fol is expected to be late, an email is sent to the requester advising the reason for delay.

7. Subject Access Requests

7.1 Background

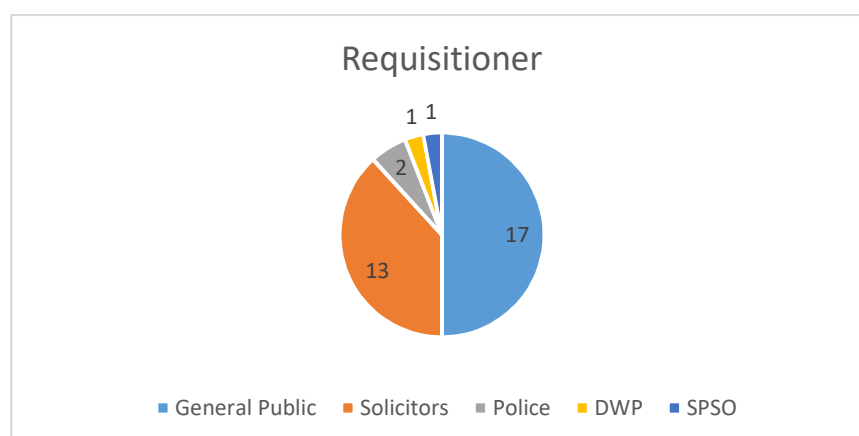
Individuals have the right to access and receive a copy of their personal data, and other supplementary information. This is commonly referred to as a Subject Access Request (SAR). Individuals can make SARs verbally or in writing, including via social media. A third party can also make a SAR on behalf of another person.

7.2 Total SARs received from April to March 2021 - 22; 2020 - 21 and 2019 - 20

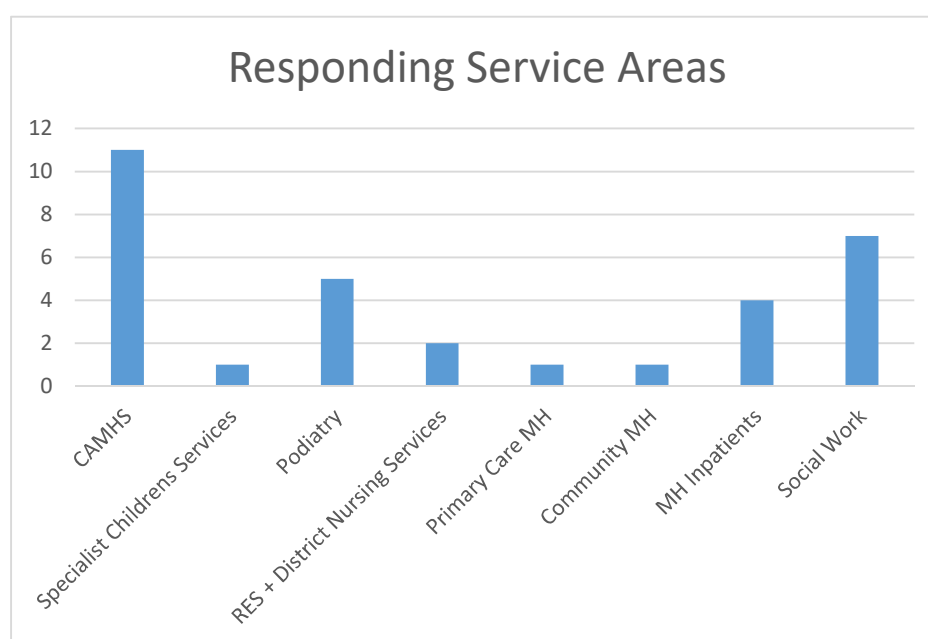
2021 – 2022	2020 – 2021	2019 –2020
34 (27* Health & 7 Council) *Two Health SARs received were later withdrawn	30 (24 Health & 6 Council)	41 (29 Health & 12 Council)

The table above shows the number of SARs received for the period April 2021 - March 2022 has increased by 4 compared to the same period in the previous year.

7.3 Subject Access Requests (SARs): April 2021 - March 2022



Subject Access Requests per Service Area



CAMHS = Child and Adolescent Mental Health Services

Total Number of SARs Completed within Timescales

A SAR should be responded to within one calendar month although a SAR which is requested by a court order should be responded to within 7 days.

During 2021/22:

24 of the 25* SARs (Health) responded to were completed on time (96.0%).

6 of the total 7 SARs (Council) were completed on time (85.7%).

30 of the total 32 SARs (Combined) were completed on time (93.8%)

* Two SARs received were later withdrawn

Compliments

District Nursing

To Whom It May Concern

I am writing to express my gratitude for the excellent care and attention I received from the District Nurse Team in Renfrewshire, based at Dykebar Hospital in Paisley. For the past month, I have had different members of the team visiting me to change dressings following a cellulitis infection on my lower right leg. Without exception, each member of the team was very caring, took time to address any concerns I had and offered good advice and support. I found this group of health care staff to be entirely patient focused, professional, yet warm and friendly. That they are able to deliver such a first class service in these trying times is testimony to their dedication to their work and to the patients that they have in their care.

I would be pleased if you could bring this feedback to the attention of the director of district nursing services and to the team themselves.

Speech and Language

I have been undergoing speech and language therapy since October 2021 after suffering a stroke. My therapist has come to my house to work through a course of speech and language therapy which I have found very helpful. I think my progress is very good.

COVID Vaccine

Just wanted to let you know about the great effort this week. We have a boy at Riverbrae with autism, learning difficulty and visual impairment. Mum contacted me really concerned that he would not be able to attend a vaccine centre.

Within a few days, Irene agreed to support us, Kirsty helped, Mel swapped her clinic room timings and we secured a late appointment at Aranthrue and Margaret came to immunise.

He was in and out in no time, stress free. His parents are very appreciative.

9. Communications

Communications Evaluation: April 2021 – March 2022

Website

www.renfrewshire.hscp.scot



55,742 (87% new)
Users ↑ 32%*



243,907
Page Views ↑ 38%*



41% ↑ 1%*
Desktop Views



59% ↓ 1%*
Mobile/Tablet Views

Top visited pages



Social Media



2,281 Followers
194,300 Engagement



↑ 12%*



↓ 61%*



2,572 Followers
77,038 Engagement



↑ 23%*



↓ 30.5%*

Engagement rate decrease expected as previous year during peak of pandemic with multiple service and guidance changes

Successful Campaigns

Care at Home recruitment

Staff Awards

COVID vaccinations

Job adverts

Strategic Plan Consultation

*2021 comparison – % change

Implications of the Report

1. **Financial** – Sound financial governance arrangements are in place to support the work of the Partnership.
 2. **HR & Organisational Development** - There are no HR and OD implications arising from the submission of this paper
 3. **Community Planning** - There are no Community Planning implications arising from the submission of this paper
 4. **Legal** – The governance arrangements support the implementation of the provisions of the Public Bodies (Joint Working) (Scotland) Act 2014.
 5. **Property/Assets** - There are no property/ asset implications arising from the submission of this paper.
 6. **Information Technology** - There are no ICT implications arising from the submission of this paper.
 7. **Equality and Human Rights** – No EQIA has been carried out as this report does not represent a new policy, plan, service or strategy.
 8. **Procurement Implications** - There are no procurement implications arising from the submission of this paper.
 9. **Privacy Impact** - There are no privacy implications arising from the submission of this paper.
 10. **Risk** – none.
-

List of Background Papers – None

Author: Clare Walker, Planning and Performance Manager

Any enquiries regarding this paper should be directed to Frances Burns, Head of Strategic Planning and Health Improvement (Frances.Burns@renfrewshire.gov.uk)

