NHS Highland

Meeting:	Health and Social Care Committee
Meeting date:	11 January 2023
Title:	Community Risk Registers
Responsible Executive/Non-Executive:	Louise Bussell, Chief Officer, Community
Report Author:	Pamela Cremin, Deputy Chief Officer

1   Purpose

This is presented to the Board for:

- Assurance

This report relates to a:

- Local policy
- NHS Board/Integration Joint Board Strategy or Direction

This report will align to the following NHSScotland quality ambition(s):

Safe, Effective and Person Centred

This report relates to the following Strategic Outcome(s)

Start Well		Thrive Well		Stay Well		Anchor Well	
Grow Well		Listen Well		Nurture Well		Plan Well	
Care Well		Live Well		Respond Well		Treat Well	
Journey Well		Age Well		End Well		Value Well	
Perform well	X	Progress well					

2   Report summary

2.1   Situation

A summary of Community Directorate Risks is brought to the committee for assurance of action and mitigation being taken.

2.2   Background

The Community Directorate hold risk registers across the following operational areas:

- Community services
- primary care services (including independent health contractors - Optometry, Community Pharmacy, Dentistry)
- out of hours primary care services
- mental health and learning disabilities services; and
- adult care services.

A Community Risk Register Monitoring Meeting is held monthly to monitor all risks and ensure mitigation action is recorded and that risks are reviewed and updated.

A summary of Community Directorate Risks is brought to the committee for assurance of action and mitigation being taken.

Exception reporting is part of the governance of the meeting with escalation as necessary to Community Senior Leadership Team Meeting, Clinical & Care Governance Committee, Health and Safety Committee and this Committee.

Health and Social Care Committee is asked to consider the report and identify any matters that require further assurance or escalation to NHS Highland Board.

2.3   Assessment

There are 54 risks recorded on DATIX system for Community Directorate.

Out of hours assurance group holds its own risk register and has reviewed their risks and reduced them significantly. The remaining risks have been added to an issues log and will be reviewed under the out of hours redesign programme.

Key risks for the community directorate are in relation to:

Workforce availability - and the impact this has on the sustainability of services especially in remote and rural areas. There are a series of mitigation plans in place to address this risk, albeit this is a national workforce availability aspect that is impacting across many sectors.

Statutory and Mandatory Training compliance is an ongoing risk in that not all staff achieve compliance. There are robust plans in place to address this including targeted intervention to support teams and individuals who are facing challenges to complete online training. A short life working group is being set up to have more focus on positive outcomes in this area.

Financial risks are associated with reduced budget allocations from the centre and increasing demand across all services. A number of action plans and mitigation are in place and being regularly reviewed across a number of fora.

Sustainability of smaller care homes – an emerging risk due to staffing and other pressures such as compliance with accommodation and environmental standards. Regular assessment of care home sustainability is overseen via the care home oversight group and escalation of emerging issues to Joint Officer Group.

Winter Pressures – this year's Winter Ready Action Plan (WRAP) has been formulated within the context of a continuing increase in demand for unscheduled care. It reflects collaborative action between the North Highland Health and Social Care Partnership (HSCP) and the Acute Sector, building on the lessons learnt from last winter.

Premises and accommodation risks – there are a number of risks that affect people's access to services. This is mainly due to a backlog of maintenance required and/or buildings outgrowing their service. These issues are escalated and action taken to improve via the community accommodation group which is led jointly by community and estates and facilities staff working together to achieve joint accommodation solutions. The asset management group has a key role and is an escalation route for all accommodation risks.

Ligature risks at New Craigs Hospital - a steering group has been set up and via a validated assessment tool, 8,000 ligature points have been identified in New Craigs Hospital. A plan and a programme of work to remove ligature points are being undertaken and overseen by the mental health programme board and the ligature audit group.

Lack of low or medium secure beds in Scotland – there is a current issue at New Craigs which is currently being mitigated by the use of supplementary staff. A trigger plan has been agreed with Police Scotland to support the management of people who require medium security but are placed in mental health acute units. This issue has been escalated to Scottish Government via regular set meetings and communication structures that are in place.

2.4   Proposed level of Assurance

This report proposes the following level of assurance:

Substantial		Moderate	X
Limited		None	

Moderate assurance is provided in line with the actions being taken to record, review and escalate risks to care and service delivery.

3   Impact Analysis

3.1   Quality/ Patient Care

Describe any positive and negative impact on quality of care (and services).

3.2   Workforce

High use of locum and supplementary staffing to address staff shortages introduce some risks of inconsistent care, poor experience of care and reduced job satisfaction. Some risks may impact on the delivery of the culture programme and positive staff experience.

3.3   Financial

Funding required to mitigate against some risks for example, investment in IT solutions. Some difficult decisions need to be taken about some service delivery that needs to be temporarily suspended due to cost (unfunded posts and associated cost pressures).

3.4   Risk Assessment/Management

As outlined above at 2.3.

3.5   Data Protection

N/A

3.6   Equality and Diversity, including health inequalities

An impact assessment is not required to report on risk registers.

3.7   Other impacts

Describe other relevant impacts.

3.8.1   Communication, involvement, engagement and consultation

Community risk monitoring group meetings held monthly. Most recent meetings held on 14 November and 12 December 2022.

3.9   Route to the Meeting

4   Recommendation

Health and Social Care Committee is asked to consider the report and identify any matters that require further assurance or escalation to NHS Highland Board.

4.1   List of appendices

The following appendices are included with this report: None