

ARGYLL AND BUTE HEALTH AND SOCIAL CARE PARTNERSHIP - FINANCIAL RISKS 2020/21
INTEGRATION JOINT BOARD - SEPTEMBER 2020 UPDATE

HEALTH OR SOCIAL WORK	SERVICE AREA	DESCRIPTION OF RISK	CURRENT MITIGATIONS	2020-21		Quantified Risk £000s	Comments on change since last update
				LIKELIHOOD	FINANCIAL IMPACT £000		
Health	Commissioned Services - NHS GG&C	NHS GG&C SLA ask may be higher than budget	Letter sent to GG&C on 5th December 2019 re-stating A&B's offer and challenging basis of GG&C's claim. GG&C indicated draft SLA value by end of Sept - issues in updating the model have prevented a draft being issued.	4	500-1,500	500	
Health	Action 15, ADP, waiting times and PCIF funding and related costs	Employees hired on understanding that grant funding will continue. Risk of funding being realigned to Covid	SG being asked to confirm policy intentions	4	500-1,500	500	
Health	Commissioned Services - NHS GG&C	New cystic fibrosis drugs costs higher than budgeted for.	This will be monitored but it is an area where there is limited control.	4	300-500	200	Triple therapy drug being made available by SG, likely start date of 1 Sept. Contract price & patient numbers for triple therapy as yet unknown.
Health	Service wide	High volume of grievances received from health care assistants band 2s who believe they should be re-graded to AfC band 3	Short life working group being established to agree generic job descriptions for band 3 role of Health Care Support Worker	5	100-300	150	
Health / Council	All HSCP - additional PPE costs	expect to need PPE on an ongoing basis beyond that funded through SG. SG funding community hubs to end October at least and funding GP practices, dentists and opticians.	review of when PPE is required	5	100-300	150	
Health	Adult Services	Continued use of agency medical staff in psychiatry	Continuation of attempts to recruit permanent staff. Where this is not possible then the service will be required to contain locum costs within budget but it has to be appreciated that this might not always be possible if it affects service delivery.	3	300-500	100	Costs currently contained within budget. Recruitment of Clinical Fellows and Clinical Development Fellows has assisted. Also, fewer doctors going abroad due to Covid.
Health	Adult Services	Continued use of locum GPs in Kintyre Medical Group	Practice to be re-advertised in different way post Covid	4	100-300	100	
Health	Commissioned Services - Other	Continued high level of eating disorder patient referrals to the Priory (Huntercombe no longer used)	Development of local CAMHS service. Limited mitigations for adult services possible at present	4	100-300	100	
Health	Commissioned Services - Other	Potential for growth in the number of high cost individual patient treatments (joint care packages)	This will be monitored but it is an area where there is limited control.	4	100-300	100	
Council	Looked After Children	Potential increase in the number of children and young people who need to be taken into care and supported/accommodated by the HSCP.	Practitioners are working hard to avoid admissions to care and the service is developing lower cost models of support for young people who become looked after.	4	100-300	100	little change in current cases. Takes into account possible post Covid cases
Council	All Social Work	Difficulties in recruiting and retaining qualified staff as well as increased demand/complexity in terms of the services required and/or increased sickness absence which result in the use of locum/supplemental staffing.	Work is ongoing with HR and the Communications team to look at how we can encourage people to come and work in Argyll and Bute. Review of spend by agency staff for adults undertaken by the CSWO. Review of the effectiveness of the SW Training Board. Attendance management processes in place.	4	100-300	100	numbers of agency social workers is reducing. Close management review from CSWO. Aim to reduce to zero by end of September
Council	Social Work - adult services	Potential loss of income following re-mobilisation of services post Covid	Working closely with stakeholders in service redesign and review of charging policies. May consider reducing cost of services in line with loss of income	4	100-300	100	

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Council	Older People	Potential increase in the number of older people requiring support.	Scrutiny by local and senior management of care packages and funding requests. Short life working group on older adult services being established to mobilise services and monitor risks.	3	300-500	100	drop in number in care homes (partially due to covid). Concern about increase in demand for care at home, but capacity is fairly fixed
Council	Physical Disability	Increased demand for service, both for new clients and from increases in the needs of existing service users exceeds the demand pressure built into the budget.	Regular review of services and tracking of changes in service demand. Scrutiny by local and senior management of care packages and funding requests.	3	300-500	100	likelihood increased. New MND patient notified today not in forecast 24/7 support anticipated. Unsure of health requirement
Council	Learning Disability	Increased demand for service, both for new clients and from increases in the needs of existing service users exceeds the demand pressure built into the budget.	Regular review of services and tracking of changes in service demand. Scrutiny by local and senior management of care packages and funding requests.	3	300-500	100	SIO about to start and will increase scrutiny
Health	Adult Services	Overspending on GP prescribing budgets for several potential reasons causing short supply of drugs resulting in price increases	Prescribing advisors advise GPs on good prescribing practice to contain costs.	3	100-300	50	
Health	Adult Services	Potential for consultant vacancies at Lorn & Islands Hospital resulting in increased use of locums	Most consultant roles are currently filled by employed staff and there would be an attempt to recruit to vacancies rather than use locums.	3	100-300	50	
Health	Commissioned Services - NHS GG&C	Potential for further growth in the cost of oncology drugs beyond provision in the budget	A cost pressure has been build into the 2020-21 budget. This should assist in minimising this risk, however, it is a risk that there is limited control over.	3	100-300	50	some delays in screening delaying new numbers of patients, reducing our risks slightly
Health	Management and Corporate Services	Potential for the cost of migration to Windows 10 and Office 365 exceeding budgetary provision and move to increased remote working	Head of IT has an implementation plan. Risk reflects potential for slippage. Mix of licences will determine final value for o365 licensing costs. Increases from more laptops and mobile phones in use.	5	<100	38	
Health	Adult Services	Continued reliance on locum medical staff to cover shifts on the Oban out of hours rota	As part of grip and control, regular review of workforce undertaken by the Strategic Leadership Team to minimise excess staffing and use of locums.	4	<100	25	
Health	Commissioned Services - NHS GG&C & Other Scottish Boards	Potential for growth in the number of high cost individual patient treatments. High volume being experienced for new TAVI cardiac procedure	This will be monitored but it is an area where there is limited control.	4	<100	25	budget for 6, already done 4 in YTD, did 9 last year. Value reduced in line with costs to date
Health	General Medical Services	Potential for high cost of reimbursements to GP practices for maternity and sickness absence cover. Covid has increased risk.	This will be monitored but it is an area where there is limited control.	4	<100	25	
Council	Chief Officer	Increased building maintenance and repairs costs arising as the buildings we use get older and their condition deteriorates.	Regular monitoring of the fabric of the buildings and assessment for asset sustainability works funded via the capital budget. Reduction in the number of buildings in use through the co-location of staff into fewer buildings.	4	<100	25	
Health	Adult Services	Continued use of agency nursing staff in Lorn & Islands Hospital	Continuation of attempts to minimise the use of agency staff.	2	100-300	20	Minimal use this year to date. Strong focus on minimising usage.

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Health	Adult Services	Continued use of agency staff in Lorn & Islands Hospital Laboratory	Continuation of attempts to recruit permanent staff. Where this is not possible then the service will be required to contain locum costs within budget but it has to be appreciated that this might not always be possible if it affects service delivery. Raigmore considering what they could do to assist	3	<100	13	
Health	Adult Services	Continuation of excess community nurse staffing on Mull	As part of grip and control, regular review of workforce. Nursing workforce tools being applied.	3	<100	13	
Health / Council	Estates	Costs of colocation may exceed budget.	A small allocation has been made in the Investment Fund for these costs.	3	<100	13	
Health / Council	Commissioned Services - Other	Third sector commissioned services cannot be delivered within the current budgets	Negotiations with third sector providers seek for such costs to be covered through efficiencies year on year	3	<100	13	
Council	Children with a Disability	Potential increase in the number of children and young people requiring support/families requiring support as well as the potential for increased levels of support required by existing service users.	The weekly Children's Resource Panel is scrutinising requests for service. Consideration is being given to how SDS and other service models could be developed to provide support in the future.	3	<100	13	
Council	Social Work - adult services	Job Evaluation of Social Work Assistants	Evaluation has to be worked through in line with Job Evaluation principles.	2	<100	5	New risk: Approach expected from staff.
Health	Adult Services	Continuation of excess nurse staffing in Rothesay Victoria Hospital	As part of grip and control, regular review of workforce undertaken by the Strategic Leadership Team to minimise excess staffing and use of locums. Additional staff for dialysis unit has reduced risk as they can be used on main ward. Dialysis unit not likely to open till December / January	1	<100	0	got 2 extra staff for dialysis unit - used on main ward; and staff returned from long term sick

Grand Total						2,875	
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TOTAL						2,875	
Split	Health					0	
	Council					0	

Yellow = new risk since last report to IJB
Amber = updated