



Item No. 12

Meeting Date: Wednesday 16th April 2025

**Glasgow City
Integration Joint Board
Finance, Audit and Scrutiny Committee**

Report By: Tracy Keenan, Assistant Chief Officer, Human Resources

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**Health and Safety Annual Report
January 2024 - December 2024**

Purpose of Report:

To provide the IJB Finance, Audit and Scrutiny Committee with an overview of the main Health & Safety challenges faced in 2024, performance and notable key issues, and the implications for the HSCP.

Background/Engagement:

This is the fifth Annual Report for Health & Safety provided to the IJB Finance, Audit and Scrutiny Committee.

Two Management Systems continue to be used in the governing of Health & Safety as part of the partnership: Glasgow City Council's and NHSGGC's. Both employers have a duty of care for the health and safety of all HSCP employees, service users and others who may be affected by their operations, acts, and omissions.

Governance Route:

The matters contained within this paper have been previously considered by the following group(s) as part of its development.

HSCP Senior Management Team ☐

Council Corporate Management Team ☐

Health Board Corporate Management Team ☐

Council Committee ☐

Update requested by IJB ☐

Other ☐

Not Applicable ☒

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Recommendations:	The IJB Finance, Audit and Scrutiny Committee is asked to: a) Note the findings made within this report and the data attached; and b) Note the main challenges faced throughout the year, and current service and future developments.
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Relevance to Integration Joint Board Strategic Plan:

Good Health & Safety management and improvement is key to the operation of the IJB/HSCP in meeting its relevant statutory requirements. GCHSCP strives to prevent employees from harm and injury whilst at work, as well as service users whilst engaging with services, and others whilst in our care, so far as is reasonably practicable.

GCC and NHSGGC have a duty to ensure that employees have the correct information, instruction, and training to enable them to carry out their work safely and that others are not impacted by our acts or omissions.

Accident and incident reduction, and subsequently minimising injury, lost time and attributable absence is crucial, as is the prevention of both civil and criminal prosecution.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	This report is relevant in supporting GCHSCP in achieving all nine health and wellbeing outcomes, however outcomes 7, 8 and 9 are directly related.
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Personnel:	All employees throughout GCHSCP have responsibilities for Health & Safety. All managers have a responsibility for contributing to the management and ongoing improvement of this.
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Carers:	N/A
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Provider Organisations:	N/A
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Equalities:	N/A
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Fairer Scotland Compliance:	N/A
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Financial:	The report contains potential financial implications for the Health and Social Care Partnership. Criminal and Civil proceedings which may be attributed to accidents and incidents at work may have financial costs associated.
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Legal:	Failure to adhere to Health & Safety law and comply with the requirements of GCC and NHS GGC Health & Safety Management systems have the potential to have criminal and civil legal implications to the organisations.
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Economic Impact:	N/A
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Sustainability:	N/A
Sustainable Procurement and Article 19:	N/A
Risk Implications:	The effective management of Health & Safety is pertinent in managing the risks associated with the operations and services operated by the HSCP. This includes ensuring that all those acting on behalf of the HSCP continue to have the relevant information, instruction and training to enable them to carry out their job safely, and ensuring all reasonably foreseeable hazards are assessed, with suitable and sufficient control measures in place. Failure to effectively manage health and safety may result in accidents, injury, ill-health, workplace fatalities, and both civil and criminal prosecutions. There are moral, legal, and financial obligations to manage health and safety, whilst continuing to maintain the reputation of GCHSCP.
Implications for Glasgow City Council:	Glasgow City Council have the legal responsibility to manage the health and safety of their employees as well as those who may be affected by their operations. Failure to manage this effectively may result in accident and incidents, potential legal and financial implications, in addition to having an impact on the reputation of Glasgow City Council.
Implications for NHS Greater Glasgow & Clyde:	NHSGGC have the same legal responsibility for the management of health and safety. Failure to manage this effectively may result in accidents and incidents, legal and financial implications, in addition to reputational impact.

1. Purpose of the report

- 1.1. The purpose of this annual report is to provide the IJB Finance, Audit and Scrutiny Committee with an overview of the main Health & Safety challenges faced in 2024, data on performance and future planning.
- 1.2. This report will provide overview from both the Glasgow City Council and NHS Health and Safety teams, outlining the functioning of their health and safety management systems throughout 2024. It will give an overview of the challenges, work completed, and the focus for the coming year.

2. GCC Social Work Services Activity

2.1. Management Standards

The review of all Health and Safety Management Standards (the policies and procedures outlining how the service complies with their legal Health and Safety duties), was completed in 2024. Significant review of infection control procedures was carried out, and these amendments now form part of the teams ongoing audit in key areas such as Older People Residential.

All Management Standards are now subject to a 3-yearly review or update in line with changes in process, regulation, or best practice guidelines.

2.2. Audit and Fire Risk Assessment Compliance

The team continued their annual Audit and Fire Safety Risk Assessment programme to ensure ongoing compliance was managed and monitored, particularly those premises with residential aspects. This remains a crucial to monitoring compliance with legislative requirements throughout the service and Social Work building estate.

As identified last year, roles and responsibilities changed across the service to ensure auditing remained impartial, with advisors aligned to new service areas.

2.3. Property and Construction

The team played a key role in supporting a number of building, construction, and refurbishment projects throughout 2024. This includes the refurbishment of Riverside Care Home, which required the implementation of new fire processes and risk assessment strategies to ensure the smooth management of the project alongside the operation of the care home. The team liaised with key stakeholders involved, including Scottish Fire and Rescue Service, and this will continue until project completion mid-2025.

2.4. Succession Planning

In January 2024, the team appointed a Trainee Health and Safety Advisor. This role is the first of its kind in order to support the succession planning needs of the team, with a pathway of work-related support and external qualification. The addition has helped support the team with low-level investigation, information gathering and statistical analysis. The team will continue to support the development of this post throughout 2025.

2.5. Communication Strategy

The team had an integral role in reviewing all health and safety communications provided on the intranet. This helped support the work of the wider HSCP to transition to the Goss platform. A 2025 communication plan was developed to ensure targeted messaging for those with specific roles and responsibilities, and this will be rolled out throughout 2025.

3. NHSGGC H&S Activity

3.1. The Safety Health and Wellbeing (SHaW) Task Calendar

The SHaW Task Calendar remained a priority in 2024, utilising the structured framework for Health and Safety Management Manual holders to work through four activities per month.

Compliance with the Task Calendar continues to remain a concern in Glasgow City HSCP, with only 107 (39%) of the 276 departments, as identified in eESS, using the tool. This is a 7% increase from last year's annual position, however the target for use of this is 90%.

One of the barriers to successful completion has been the formatting and structure of H&S data. Work has been carried out by services to cleanse the data to ensure calendars are reflective of the correct service and structure, however further work is required throughout 2025 to increase compliance.

3.2. Self-audits

Self-audits were promoted throughout services and departments to support them to measure their own compliance in advance of visits from the SHaW team.

Focus was placed on all Mental Health services to undertake Self Harm self-audits, with 14 audits completed scoring an average of 89%. The greatest risk impact remains with patients in Mental Health Wards for self-harm, and this will remain a focus throughout 2025.

3.3. Stress Guided Conversation Toolkit

Absence from work relating to stress continues to be one of the greatest causes of non-attendance. The SHaW team has continued to promote the 'Stress Guided Conversation Toolkit' in various meetings and forums to remind managers of its use in supporting colleagues in preventing absence from work relating to both workplace and/or non-workplace stress.

Ongoing promotion and support in Managing Stress in the Workplace will continue in 2025, with the use of the toolkit now mandatory for managers in supporting staff whose absence has been related to stress and in preventative conversations.

3.4. Self-Harm and Suicide Prevention

Fixed and Mobile Ligature reduction remains a great challenge for NHSGGC, particularly within our Mental Health and Acute settings. A significant focus has been placed on ensuring the safety of patients with suicidal ideation throughout 2024 and will continue to remain a key priority in 2025.

A dedicated decant ward is now in place called Nairn Ward and a programme of work continues to support the removal of a wide range of ligature points in highest risk wards.

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Phase one of the programme has commenced with large scale reduced ligature work underway on the Leverndale Hospital site within three adult Mental Health wards. Phase two (2025) and Phase three (2026) of the reduced ligature programme includes an additional four Mental Health wards on sites across NHSGCC, that will also have large scale reduced ligature work completed.

The programme will provide consistency in the physical environment across high-risk Mental Health areas within NHSGCC by removing known ligature points. As this work continues focus has now turned to our Acute settings starting in our Emergency Departments.

4. Accident and Incidents GCC (Jan – December 2024)

4.1. Location and causes of incidents

In 2024, 221 incidents were recorded where the injured or affected person was a GCC employee. This figure does not include incidences of violence (see 4.3). These figures demonstrate an overall 12% reduction in incidents from 2023, consistent with the level of reduction reported in the previous years' reports.

GCC Employee Incidents	2023	2024	Variance
Children's Residential	28	20	↓
Home Care	144	131	↓
Older People Residential	36	32	↓
Homelessness, CJ & Asylum	4	7	↑
Community Equipment Store	6	2	↓
TaSS	6	0	↓
Alarm Response Centre	2	5	↑
OP Day Care	9	8	↓
South Area Services	4	0	↓
North-West Area Services	2	5	↑
North-East Area Services	6	6	-
Centre Services	3	2	↓
Outdoor Resource Centre	1	3	↑
Totals	251	221	↓

Table 1

The top 3 causes of incidents remain consistent with previous years; slips, trips, and falls, injured whilst moving and handling people, and falls whilst ascending and descending.

Collision with object/fixture replaces incidents associated with animals as the 4th highest reported incident in 2024. Figure 1 shows the trend of these incidents over the past 3 years.

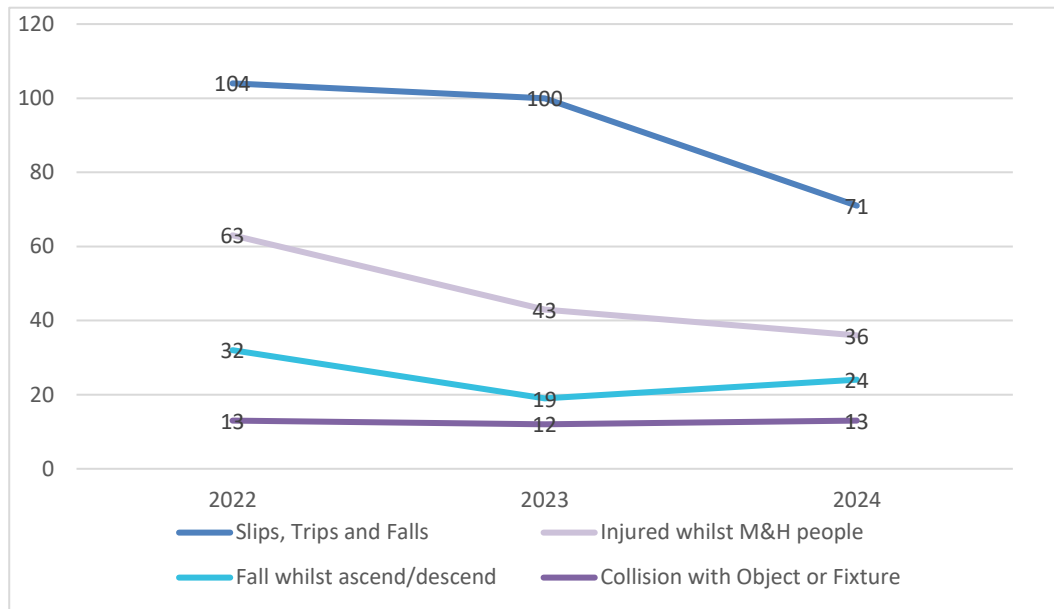


Figure 1

The size of the workforce working outdoors in diverse weather conditions greatly contributes to the risk of slips and trips leading to falls, which is reflected in our data. The majority of these are reported within our Home Care Service. Falls whilst ascending and descending are also mostly reported in Home Care, with many of these falls occurring when accessing and egressing Service Users' homes. Some of these incidents are slips and trips, however others are attributable to lost footing and missed steps, often as a result of a lapse in concentration.

Injured whilst Moving and Handling People injuries are often not necessarily single identifiable events which cause excessive trauma, but rather cumulative strain over time which can often lead to one incident causing pain and injury. It is also recognised that this is likely to be exacerbated by the aging workforce in Care Services.

4.2. RIDDOR Reportable Incidents

A total of 41 incidents were reported to the Health and Safety Executive (HSE) where the injured person was an employee under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR). These were reportable either through resulting in an absence over 7 days, or for a Specified Major Injury. Figure 2 demonstrates the trend over the last three years.

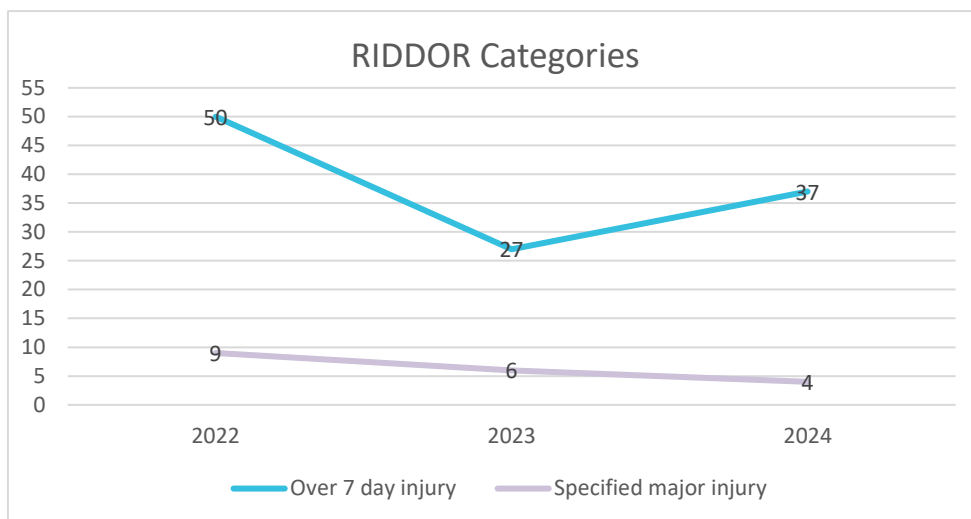


Figure 2

Figure 3 outlines the incident type which led to the RIDDOR reportable incidents. Physical Violence is the leading type of incident, with a notable increase in this from the previous year. These incidents were predominantly within the Children's Residential Service.

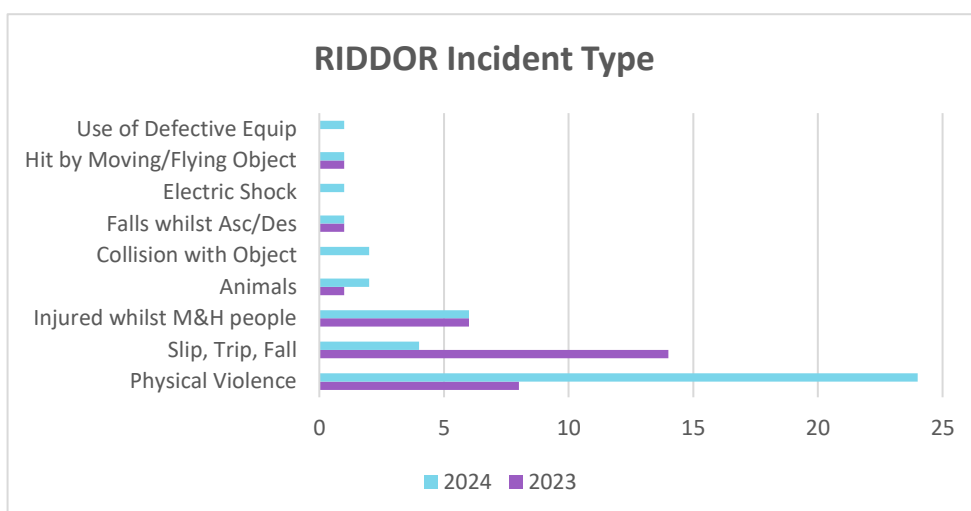


Figure 3

There was one incident report made to the HSE under RIDDOR where the injured person was a member of the public, following a slip in an Older People Day Care premises.

4.3. Violence

1478 Incidences of violence were recorded where the employee was the affected person - an increase in 15 from last year. Table 2 demonstrates the violent incidents by area, and the variance from 2023.

	2023	2024	Variance
Children's Residential	724	702	↓
Home Care	221	250	↑
Older People Residential	434	383	↓
Homelessness, CJ & Asylum	20	53	↑
Community Equip. Store	1	1	-
TaSS	3	1	↓
Alarm Response centre	4	9	↑
OP Day Care	13	14	↑
South Area Services	7	30	↑
North-West Services	16	13	↓
North-East Area Services	16	17	↑
Centre	4	3	↓
Outdoor Resource Centre	0	2	↑
Totals	1463	1478	↑

Table 2

Concerns were raised in December 2023 by Trade Unions and management regarding potential under-reporting in Homelessness Community Services as a whole, but also specifically a location within South Area Services where incidents had occurred.

Following this, targeted briefings were carried out on the importance of reporting violent incidents on the HandS system for all those working in Homelessness Community Services. The H&S team also liaised with business administration management to train administration and reception staff in Personal Safety to help inform them of action to take in the event of violent or threatening behaviour.

As a result of discussions at briefings, a HandS system restructure in this area was completed to ensure they were properly reflected and represented. This includes adding teams which were not previously on the system, as well as ensuring the correct line management structure was in place. The corrected structure and enhanced awareness and knowledge of incident reporting will have been a factor in the increase in incidents in Homelessness and South. Another which is likely to have influenced the rise is the increase in service users presenting for a service at our HSCP buildings.

Figure 4 indicates the breakdown in the type of violent incidents across GCC for 2024.

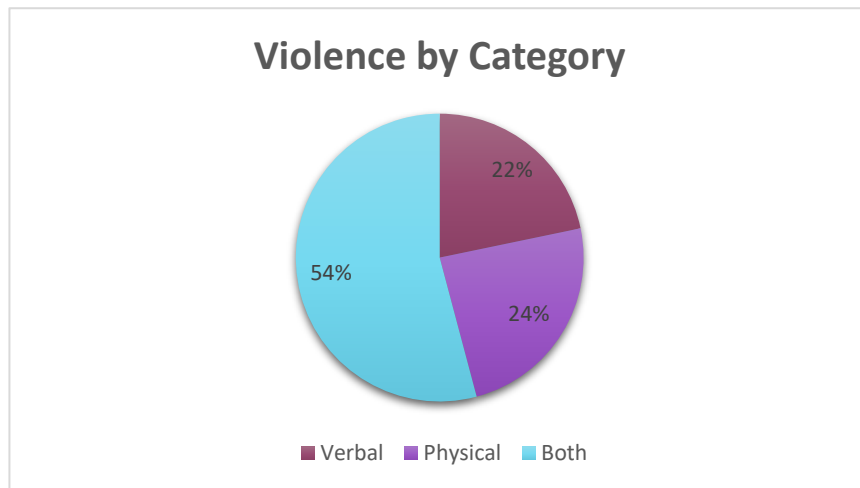


Figure 4

4.4. Fire and False Alarms

168 False Alarms and 45 Fire Events were recorded in 2024, in comparison to 143 false alarms and 51 fire events in 2023 (Figure 5).

False alarms were predominantly noted in Children's Residential premises and the leading causes of these were malicious or deliberate fire alarm raising or vape use within the houses. The reasons for false alarms and fire events remain consistent.

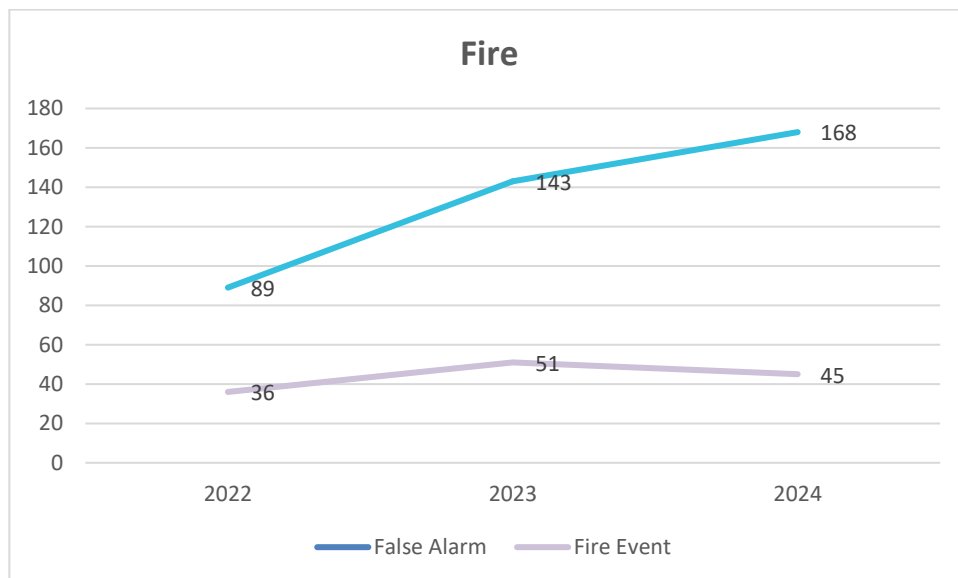


Figure 5

4.5. Incident Reporting System

HandS Incident Reporting System User briefings and Managers briefings have been hosted via Microsoft Teams, with 34 sessions carried out throughout the year.

This has allowed engagement with managers and staff on the importance of incident reporting in short 20-minute sessions, as well as the information which must be recorded and how to manage these incidents. 223 staff members have attended these sessions, and feedback has been extremely positive.

5. Accident and Incidents for NHS GGC (Jan-December 2024)

5.1. Incidents reported

The total number of recorded incidents for NHSGGC employees within Glasgow City HSCP was 2551. This is a 5% increase on the volume of incidents from the previous year and Table 3 highlights the year-on-year incidents per Glasgow City HSCP sectors.

	2023	2024	Variance
GCHSCP – Corporate	48	43	↓
GCHSCP – North-East Sector	668	741	↑
GCHSCP – North-West Sector	731	804	↑
GCHSCP – South Sector	973	963	↓
Totals	2420	2551	↑

Table 3

5.2. Violence and Aggression

Figure 5 demonstrates 2066 violent incidents recorded against employees in 2024 within Datix, making this the most common type of incident reported. This includes patient on patient violence. This is an increase of 103 incidents from 1963 reported in 2023.

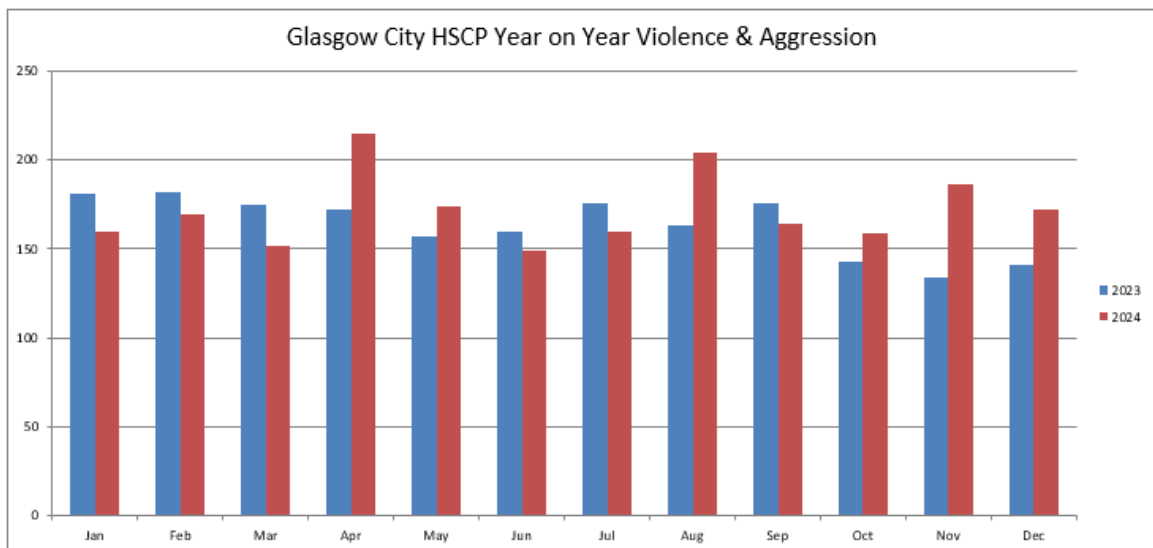


Figure 6

5.3. Sharps

'Sharps' describes equipment used to treat patients which have the risk of puncturing the skin. The main type of Sharps injuries are related to the storage, use and disposal of needlesticks.

Figure 7 highlights the 95 sharps incidents in 2024, an increase from 49 in 2023. It is noted that the average compliance score for the 210 sharps self-audits is carried out is 98% for 2024. Whilst this is a high score, it is recognised that not all areas have been completed and during this period sharps incidents were doubled that of the previous year. Focus should remain on services use and disposal of sharps devices.

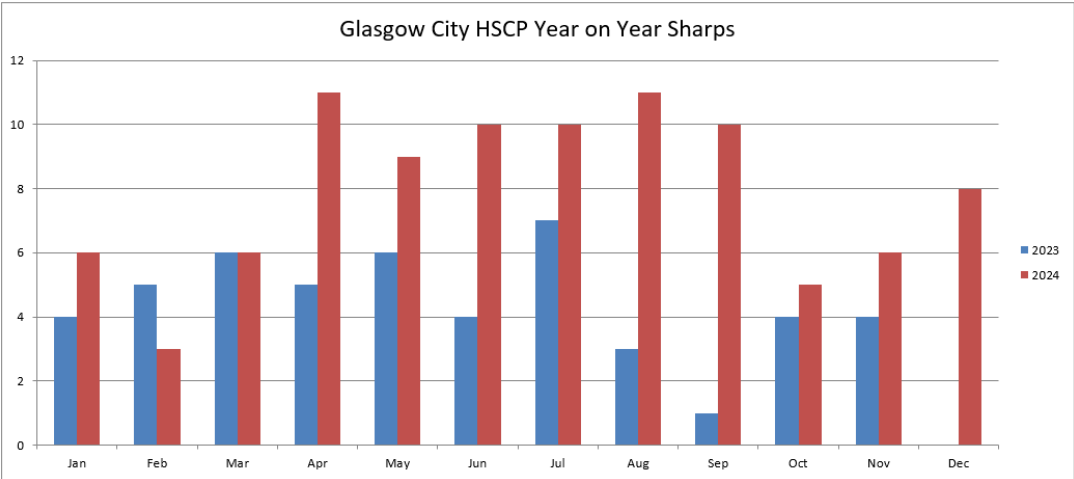


Figure 7

5.4. Falls
Falls incidents capture all patients and staff falls at work. In 2024 the total amount of employee and patient falls was 1400 and is a reduction of 90 from 2023.

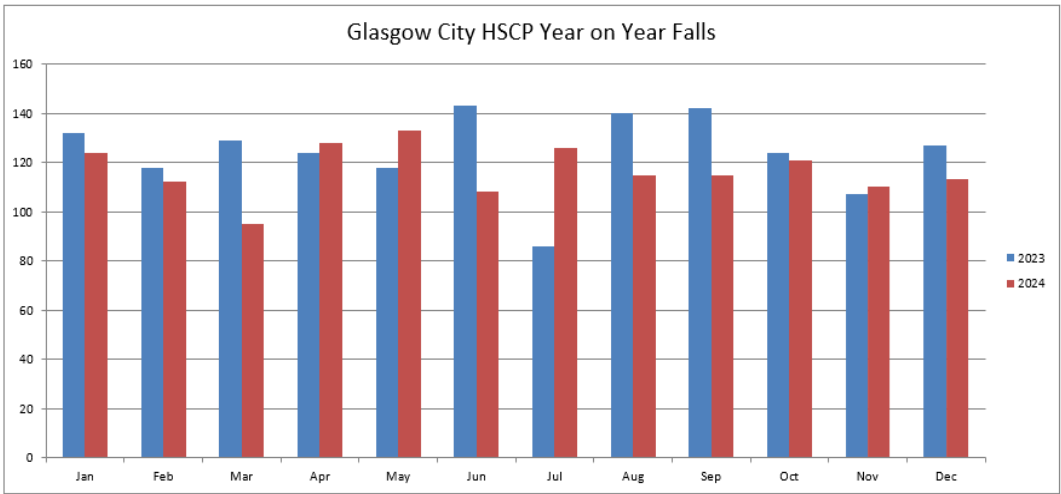


Figure 8

5.5. Moving and Handling
There have been 16 Moving and Handling incidents in 2024, a reduction of 2 incidents from 2023 (18).

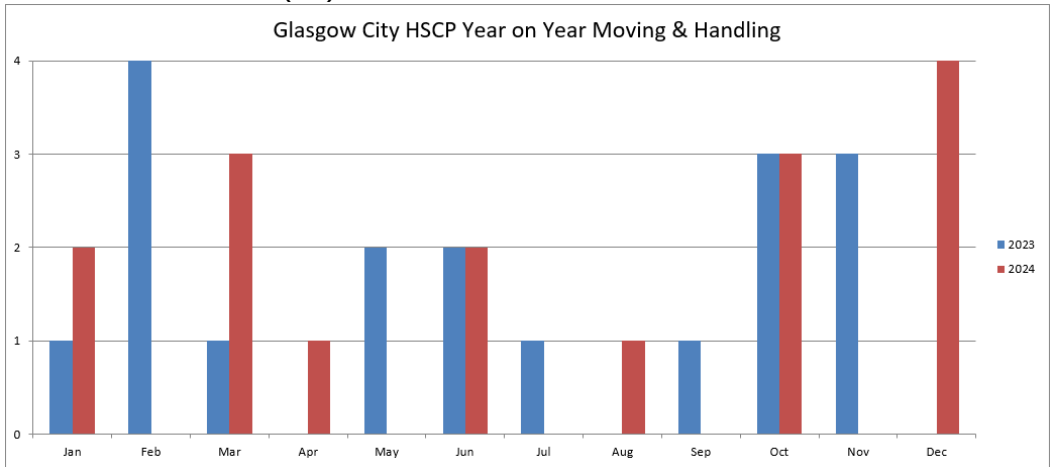


Figure 9

5.6. RIDDOR

Figure 10 illustrates the 29 RIDDOR reportable incidents that were reported to the HSE in 2024, which is a reduction from 48 in 2023.

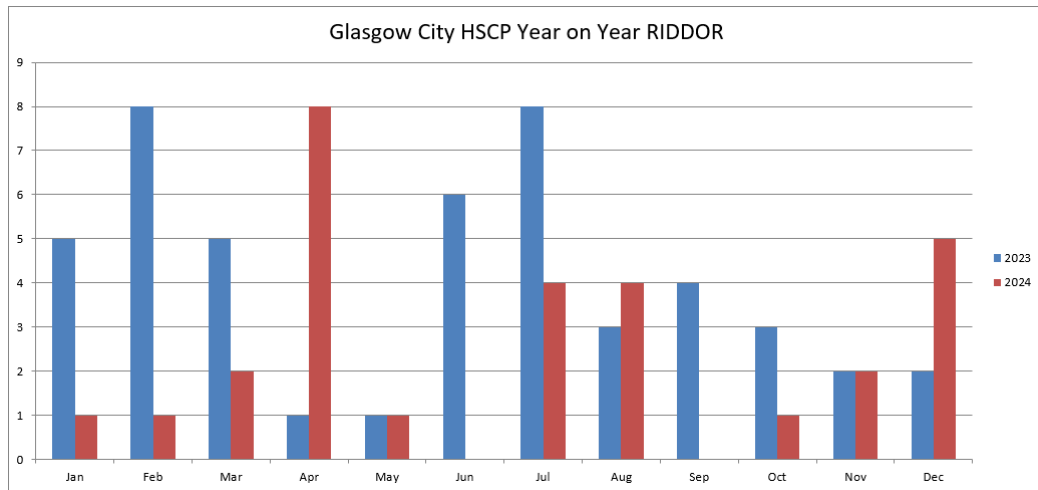


Figure 10

6. **Notable Incidents & Enforcing Authority Involvement GCC**

6.1 There have been no notable incidents which have involved any investigations by the HSE in 2024.

7. **Notable incidents & Enforcing Authority Involvement NHS GG&C**

7.1 In November 2023, a patient in an NHSGGC hospital took their life through suicide. The Health and Safety Executive investigated the incident and issued NHSGGC with an Improvement Notice on 15th August 2024.

7.2 The NHSGGC Health and Safety team with the Mental Health team worked together to meet the aspects of the schedule of the Improvement Notice, and the HSE later informed NHSGGC that they were satisfied with the action being taken and closed off the Improvement Notice.

8. **Audits GCC**

8.1 In 2024, 34 audits were carried out by the Health and Safety Team. All residential premises were subject to audit in 2024.

8.2 All audits were scored, and targeted improvement areas have been established for each service sector. The average scores before manager's response, and after manager's response are outlined in the table below.

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	Audit compliance 2024		2023
	Before Managers Response	After Managers Response	After Managers Response
Children's Residential	79%	88%	82%
Homelessness Residential	91%	95%	94%
Older People's Residential	70%	76%	93%
Older People Day Care	81%	89%	83%
North-East Area Services	75%	93%	92%
Average Score	79%	88%	90%

Table 4

- 8.3 The figures in Table 4 demonstrate an overall slight reduction in the average scores from audits. Small improvements in Children's Residential and Older People daycare are noted from the previous year, however a reduction in scores in areas such as Older Peoples Residential are noted.
- 8.4 Focus for 2025 will be placed on supporting services in audit preparedness including readiness of documentation for inspection, understanding the importance of engagement with auditing Advisors at time of audit and responding to audit recommendations, and regular self-auditing.

9. Audits NHSGGC

9.1. SHaW Team Audits

The SHaW Audits are carried out by NHSGGC Health and Safety professionals with their focus based on the highest risks NHSGGC faces. This includes Self Harm/Suicides due to the potential for severe consequences and Violence Reduction due to the volume of incidents in relation to this.

Table 5 demonstrates the number of SHaW audits completed and the average scores throughout the year. In addition to this, the Health and Safety team works with local Health and Safety Committees to determine the focus for other audits and self-audits, based on the priorities in that locality. These audits include PPE, First Aid, Young Persons, and Skin Health.

Legend <60% 60% - 89.9% >90% Summary of SHaW Audits											
Falls		Sharps		Violence Reduction		Self-Harm		DSE		Moving & Handling	
No.	Ave%	No.	Ave%	No.	Ave%	No.	Ave%	No.	Ave%	No.	Ave%
14	78%	2	86%	22	77%	27	81%	1	100%	10	92%

Table 5

9.2 Self-audits

Self-audits allow services and departments to measure their own compliance in advance of a visit from the SHaW team. Significant focus has been placed on all Mental Health services to undertake Self Harm self-audits in 2024 with 14 audits completed scoring an average of 89%.

Summary of Self Audits															
Legend															
<60%				60% - 89.9%				>90%							
Falls		Sharps		Violence Reduction		Self-Harm		DSE		Moving & Handling		First Aid		PPE	
No.	Ave%	No.	Ave%	No.	Ave%	No.	Ave%	No.	Ave%	No.	Ave%	No.	Ave%	No.	Ave%
5	76%	8	98%	61	96%	14	89%	42	89%	14	83%	7	77%	55	98%

Table 6

10. Training GCC

10.1. Course attendance

70 Training Courses were delivered by the Health and Safety Team in 2024. 760 people were trained as part of this, an average of 11 people per course. This is a further improvement of the successes reported in 2023, where course attendance had increased to 9 people per course.

It should be noted that training courses throughout November and December were subject to cancellation due to a move to the Parkhead Hub, with some training courses also impacted in early January.

10.2. Course non-attendance

Non-attendance has been a significant longstanding challenge for the service with previous reports provided to FASC highlighting this.

In 2023, 611 attendees failed to attend training courses: an average of 6 delegates per course. In 2024 this has reduced to 210 non-attendees, and whilst fewer courses were delivered within the year, this equates to a non-attendance figure of 3 delegates per course.

This improvement can be attributed to reinforced commitment to attendance by services, in conjunction with the introduction of the new Bookwhen system which helps better communicate pre-course information and reminders and gives staff and management autonomy to book onto courses which better suit their schedules.

11. Training NHS GG&C

11.1. Sharps

Figure 10 shows sharps training compliance at 69% in December 2024, in comparison to 60% compliance in January 2024.

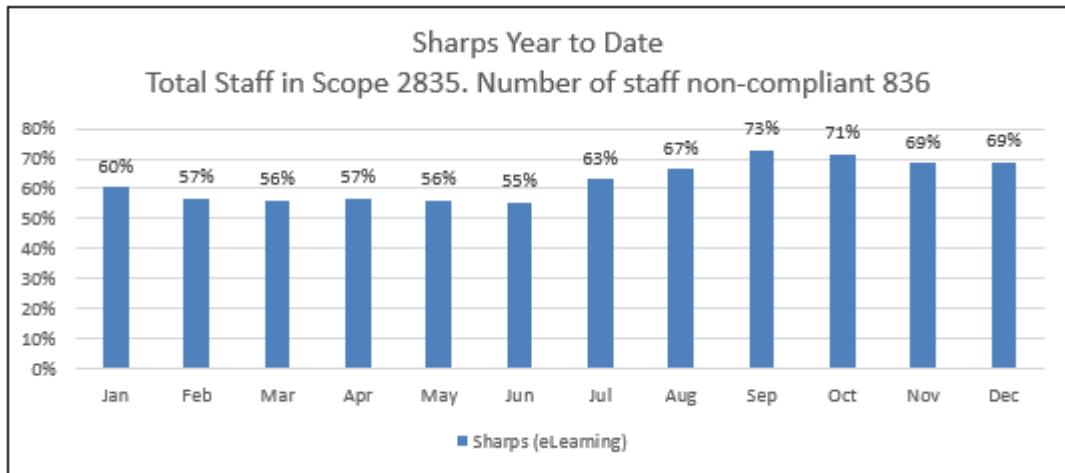


Figure 10

11.2. Falls

With only 850 employees identified as being in scope Figure 11 demonstrates the compliance for Falls training at 68% in January 2024, falling to 64% at December 2024.

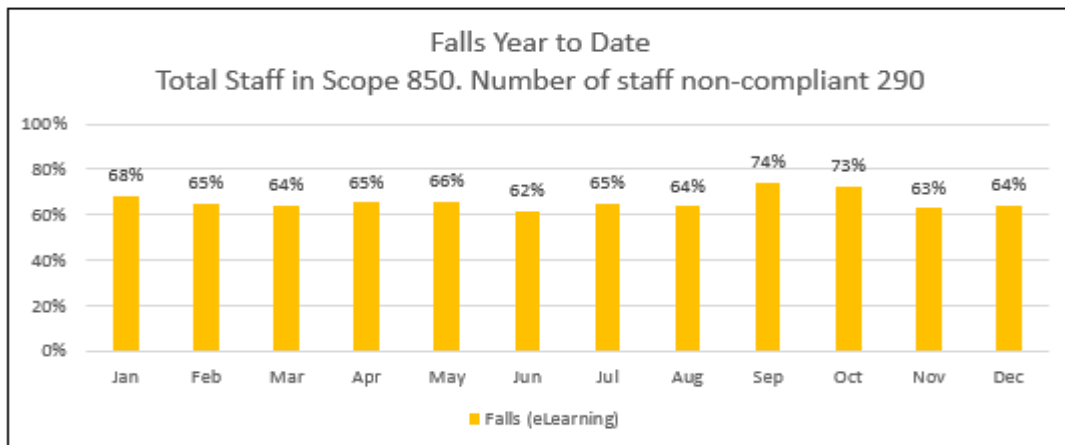


Figure 11

11.3 Moving and Handling (Assessment)

Training compliance ranges between 69% in January 2024, peaking at 74% from April to July 2024, finishing the year in December 2024 at 70%.

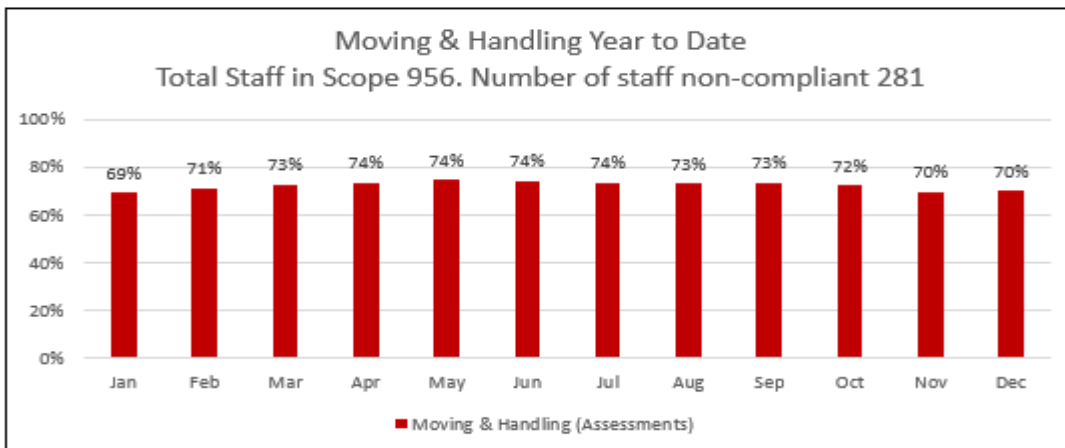


Figure 12

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11.4 Compliance overview

The expectation by NHSGGC Board is that all staff who are in scope must complete all training. The completion of training has also been captured as part of the SHaW Roles and Responsibilities documents with the requirement to achieve 100% compliance and performance is reflected in the dedicated monthly Safety Health and Wellbeing Performance Storyboards.

Table 7 shows the annual average compliance score against all 9 training modules throughout the year and all modules continue to have compliance scores above 80%. Fire Safety Statutory/Mandatory training is the lowest scoring at 84.1% and Violence Aggression the highest at 91.1%.

Glasgow City HSCP
Statutory Mandatory Compliance 2024

Month	Equality & Diversity	Fire Safety	Health & Safety	Infection Control	Information Governance	Manual Handling	Public Protection	Security & Threat	Violence & Aggression
Jan-24	90.5%	81.8%	91.1%	89.8%	84.3%	90.4%	89.5%	89.5%	91.2%
Feb-24	90.3%	83.4%	90.4%	89.4%	85.4%	90.1%	89.2%	89.7%	90.8%
Mar-24	90.1%	83.2%	90.3%	89.3%	85.8%	90.0%	89.1%	89.7%	90.4%
Apr-24	91.0%	85.1%	91.2%	90.4%	87.6%	91.0%	89.6%	90.5%	91.4%
May-24	89.5%	85.2%	89.9%	88.5%	87.6%	89.3%	87.9%	88.5%	89.9%
Jun-24	89.6%	83.7%	90.0%	88.4%	87.8%	89.3%	87.7%	88.2%	90.2%
Jul-24	90.4%	84.9%	91.1%	89.5%	89.2%	90.4%	88.8%	89.1%	91.2%
Aug-24	90.9%	84.9%	91.3%	89.9%	90.3%	90.7%	88.9%	89.3%	91.3%
Sep-24	89.8%	84.3%	90.3%	88.9%	89.7%	89.7%	87.9%	88.3%	90.4%
Oct-24	89.5%	84.2%	90.3%	88.9%	90.1%	89.6%	88.0%	90.8%	90.5%
Nov-24	90.1%	84.7%	90.8%	89.3%	90.7%	90.2%	88.3%	90.4%	90.9%
Dec-24	90.4%	83.5%	91.1%	90.1%	91.0%	90.7%	88.8%	90.3%	91.1%
Average	90.20%	84.10%	91%	89.40%	88.30%	90.10%	89%	90%	91.10%

Table 7

11.5 Performance Improvement Groups

Moving forward into 2025, GCHSCP have established Performance Improvement Groups (PIGs) chaired by ACOs and a Performance Review Group (PRG) chaired by Chief Officer, Pat Togher to allow ACOs and Heads of Service to have direct oversight and to ensure there is continued focus on improving compliance rates in relation to HSE training (Sharps, Falls and Moving and Handling) within Directorates.

12. **Priorities for GCC in 2024**

- 12.1. The team will continue to work with the Commissioning team in supporting the H&S vetting of bidders. This includes attending and supporting the service at Meet the Buyer events to help suppliers and services gain a better understanding of safety requirements and responsibilities of bidders.
- 12.2 The Communication Strategy will be prioritised to ensure the workforce remain informed on key Health and Safety topics relevant to their role.
- 12.3 A review of all training courses delivered by the H&S team will be completed in 2025. The review will seek to ensure that pertinent information is shared in all courses, with focus placed on areas of known routine non-compliance. Alongside the Communication Strategy, this will help improve the competence of the workforce.

13. Priorities for NHS GGC in 2025

- 13.1. The Health and Safety team will continue to promote the growth of the H&S culture by increasing the levels of compliance through the completion of the tasks within the SHaW Task Calendar, HSE Training (Sharps, Falls and Moving and Handling) and increase the awareness and use of the self-audits. Embedding all of those work-related initiatives and cultural programmes is a key priority if we are expecting to meet the aspects of the SHaW Roadmap.
- 13.2. There remains a continued focus on supporting and upskilling managers in the use of the Stress Guided Conversation toolkit, which is aimed at proactive and reactive engagement, supporting colleagues prior to a period of sickness absence commencing and/or returning to work at the earliest opportunity with supports in place.
- 13.3. The SHaW team have been aligned to deliver training in line with an annual training plan. The training products range from key areas such as Accident Investigation, COSHH and Risk Assessment to quick upskilling session on the Task Calendar or Self Audits. The delivery format has been designed to suit people's preferred learning style and is either face to face or on MS Teams and to test competence a knowledge test will be built in to measure success.
- 13.4. The Head of Health and Safety continues to explore opportunities and utilise digital opportunities to streamline and simplify access to performance data, with the intention of providing a SHaW Performance platform which can be a self-service approach. In addition, this approach will provide a risk compass allowing services to focus on their own greatest levels of risk.

14. Recommendations

- 14.1 The IJB Finance, Audit and Scrutiny Committee is asked to:
 - a) Note the findings made within this report and the data attached; and
 - b) Note the main challenges faced throughout the year, and current service and future developments.