Internal Audit Report

Mental Health Services (Thrive)

8 May 2024

HSC2302

| Overall Assessment | Reasonable Assurance |

Contents

This Internal Audit review is conducted for the City of Edinburgh Council under the auspices of the 2023/24 internal audit plan approved by the Governance, Risk and Best Value Committee in March 2023. The review is designed to help the City of Edinburgh Council assess and refine its internal control environment. It is not designed or intended to be suitable for any other purpose and should not be relied upon for any other purpose. The City of Edinburgh Council accepts no responsibility for any such reliance and disclaims all liability in relation thereto.

The internal audit work and reporting has been performed in line with the requirements of the Public Sector Internal Audit Standards (PSIAS) and as a result is not designed or intended to comply with any other auditing standards.

Although there are specific recommendations included in this report to strengthen internal control, it is management's responsibility to design, implement and maintain an effective control framework, and for the prevention and detection of irregularities and fraud. This is an essential part of the efficient management of the City of Edinburgh Council. Communication of the issues and weaknesses arising from this audit does not absolve management of this responsibility. High and Critical risk findings will be raised with senior management and elected members as appropriate.

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Executive Summary

Overall opinion and summary of findings

Improvements are required in the design and operating effectiveness of the processes, procedures and controls established to support delivery of Mental Health Services strategy outcomes.

The following improvements have been identified to support effective management of Mental Health Strategy objectives and associated governance, strategic, financial, and service delivery risks:

- the Thrive Edinburgh strategy and Commissioning Plan should be formally mapped to the Scottish Government strategy
- governance and performance monitoring arrangements to evidence delivery of the strategy should be improved, including the use of SMART objectives
- an overall workforce plan for Thrive Edinburgh aligned to revised structures should be developed

- a quality assurance framework and plan should be introduced, including lessons learned
- risk management arrangements should be improved.

Areas of good practice identified

- newsletters are distributed to service users, carers, third sector, staff and on the Thrive website to update on the latest news and events
- Thrive on Thursdays are 1-hour sessions which provide insight into various topics
- annual conferences where presenters and participants find out what initiatives are happening as part of Thrive Edinburgh
- there is a significant amount of activity taking place over the city
- short learning films have been created based on real life experience
- iThrive provides an online space for Mental health and wellbeing information for staff and citizens.

Audit Assessment

Audit Area	Control Design	Control Operation	Findings	Priority Rating
1. Strategy for Mental Health	🟢	🟠	Finding 1 – Strategy and Commissioning Plan	Medium Priority
2. Performance	🟠	🟠	Finding 2 – Performance Reporting and Monitoring	Medium Priority
3. Resource and Capacity Planning	🟠	🟠	Finding 3 – Workforce Planning	Medium Priority
4. Quality Assurance	🟠	🟠	Finding 4 – Quality Assurance and Lessons Learned	Medium Priority
5. Governance and Oversight	🟠	🟠	See Finding 2	N/A
6. Risk Management	🟠	🟠	Finding 5 – Risk Management	Low Priority

See Appendix 1 for Control Assessment and Assurance Definitions

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Background and scope

In line with the [Scottish Government's Mental Health and Wellbeing Strategy](#) mental health is a cross-government priority, building on the partnership between the Scottish and Local Governments. The strategy sets out the shared vision of the Scottish Government and COSLA vision to improve mental health and wellbeing.

'Thrive Edinburgh' brings together the City of Edinburgh Council (the Council), NHS Lothian, third sector and academia to build upon the work of current providers of emotional and mental health services. Thrive's '[A Mental Health and Wellbeing Road Map for All 2019-2029](#)' is the strategy for Edinburgh for addressing health inequalities at a structural, community and individual level. The strategy includes elements to address prevention of illness, promotion of mental health, early detection of problems and treatment. This includes delivery of a [Edinburgh Adult Health and Social Care Commissioning Plan 2023-2026](#). A [progress update on Thrive Pillars and Workstreams](#) was published in February 2024. The Thrive strategy aims to develop new methods and measures to understand mental health needs and priorities.

Audit Scotland undertook a [review of Mental Health Services](#) in 2023, which included recommendations for Councils, HSCPs, and IJBs. In addition, the [Mental Welfare Commission (MWC)](#) carry out local and national visits to gather views from citizens on the care they have received and check on the care. Investigations are carried out where the MWC believe care or treatment has gone wrong.

Statistics on data on mental health is collated by various bodies including [Public Health Scotland,](#) the [Scottish Social Services Council](#) and [the Scottish Government](#). In addition, the EHSCP has a [Performance Monitoring Framework](#) (PMF) which collects, reports and scrutinises performance of services delivered.

The EHSCP is due to carry out a management structure review which is going out to consultation in May 2024, which includes the aim of having a Head of Service for Mental Health in post by July 2024.

On 18 March 2024, the Edinburgh Integrated Joint Board approved a Medium-Term Savings Plan of £60m which will have a significant impact on service delivery and likely to impact core statutory duties and areas requiring improvement.

Scope

The objective of this review was to assess the adequacy of design and operating effectiveness of the key controls established to ensure the delivery of outcomes for provision of mental health and wellbeing services across Edinburgh.

Risks and Business Plan Outcomes

The review also provided assurance in relation to the following Corporate Leadership Team (CLT) risks:

- Governance and Decision Making
- Regulatory and Legislative Compliance
- Workforce
- Financial and Budget Management
- Service Delivery.

[Business Plan Outcomes:](#)

- Core services for people in need of care and support are improved.

Reporting Date

Testing was undertaken between 12 March 2024 and 3 April 2024.

Our audit work concluded on 3 April 2024 and our findings and opinion are based on the conclusion of our work as at that date.

Findings and Management Action Plan

Finding 1 – Strategy and Commissioning Plan

Finding Rating	Medium Priority

Thrive Edinburgh produced the City of Edinburgh's mental health strategy 'A Mental Health and Wellbeing Roadmap for all 2019-2029', which outlines how Edinburgh will address mental health inequalities. In line with Scottish Government (SG)requirements, this roadmap should have been aligned to the Scottish Government Mental Health Strategy 2017-2027 (which was revised in 2023).

Comparison of the roadmap with the SG strategy found that outcomes were aligned. Management advised that a mapping exercise based on the previous SG strategy was performed by the EHSCP to ensure that all Government objectives had been included in Thrive Edinburgh's roadmap, however a mapping exercise on the revised SG strategy has not yet been done.

To support implementation of the roadmap, the Thrive Adult Health and Social Care Commissioning Plan 2019-2022 has been created. The Commissioning Plan outlines priorities and outcomes and has 6 workstreams.

However, this only covers the period up to 2022 so a revised plan aligned to the life of the roadmap is required.

Management have advised that development of a revised Commissioning Plan has been on hold, awaiting the creation of the new EIJB Strategic Plan, which has been delayed since 2023.

Risks

- **Service Delivery** – without an up-to-date commissioning plan, the EHSCP may not deliver services which meet the needs of citizens
- **Regulatory and Legislative Compliance** – the EHSCP may not meet regulatory and legislative requirements.

Recommendations and Management Action Plan: Strategy and Commissioning Plan

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
1.1	A mapping exercise should be undertaken and documented to confirm that the Thrive Edinburgh 2019-29 Strategy 'Roadmap' continues to align to the current Scottish Government Mental Health and Wellbeing Strategy.	Undertake a mapping exercise to ensure that the current thrive roadmap aligns with the SG mental health and wellbeing strategy.	Chief Officer, EHSCP	Strategic Programme Manager (Thrive Edinburgh)	30/12/2024
1.2	Following publication of the EIJB Strategic Plan, the Commissioning Plan should be updated, and mapped to ensure it aligns with the current Scottish Government Mental Health and Wellbeing Strategy.	Produce updated Thrive Commissioning Plan which reflects the priorities of new EIJB Strategic Plan and the Scottish Government Mental Health and Wellbeing Strategy.	Chief Officer, EHSCP	Strategic Programme Manager (Thrive Edinburgh)	30/06/2025

Finding 2 – Performance Reporting and Monitoring

Finding Rating	Medium Priority

A performance monitoring framework sets out what information is reported, to which officers and groups, and at what frequency. It helps to provide assurance that there is effective oversight of activities and performance, and that outcomes will be achieved on time. In addition, the use of SMART (Specific, Measurable, Achievable, Relevant, and Time-bound) objectives helps to ensure the achievement of measurable objectives within agreed timeframes.

There is extensive reporting on the 35 Change Programmes contained within Thrive Edinburgh's Commissioning Plan to relevant officers. This includes quarterly and 6-monthly activity reports, annual reports on individual change programmes, and a Living Well summary report (which included statistics for the period 2019-2022, including personal goals attainment scoring, quality of life measures, and user feedback).

In addition, annual summary reports on the change programme work have been provided to EIJB's Performance and Delivery Committee. However, there is no regular and detailed reporting on individual change programmes to committee.

Although there is a Performance Monitoring Framework in place for the EHSCP, a formal framework for monitoring delivery of overall outcomes has not yet been established for the Thrive Edinburgh roadmap.

In addition, review of the Commissioning Plan notes that while it states key activities to perform, it did not include measurable targets or timeframes and, as such, objectives are not SMART.

Management advised that, in the initial stages of the roadmap and commissioning plan, performance baselines and targets were unclear but as delivery has progressed, they will be able to set baselines and targets to support monitoring of key indicators.

A governance structure for Thrive Edinburgh was stated in the Thrive Progress Update in February 2024. This includes committees such as the Clinical and Care Governance (CCG) Committee which last received a report on Thrive in 2020. It is noted the CCG Committee has not met since December 2023.

Risks

- **Strategic Delivery –** senior officers and members may not be aware of key performance issues and decisions required resulting in delays to service delivery
- **Financial and Budget Management** - the Council / EHSCP may not achieve best value from contracted services
- **Regulatory and Legislative compliance** - limited assurance that service providers meet regulatory and legislative requirements
- **Service Delivery** - service providers may not provide contracted and required levels of service.

Recommendations and Management Action Plan: Performance Reporting and Monitoring

Ref.	Recommendation	Agreed Management Action	Acton Owner	Lead Officers	Timeframe
2.1	A performance monitoring framework should be developed for the Thrive Roadmap and Commissioning Plan, which sets out what measures will be reported, to where and what	Finalise the Performance Monitoring Framework reflecting the refreshed Thrive Commissioning Plan and associated roadmap and sign off from the Strategic	Chief Officer, EHSCP	Strategic Programme Manager (Thrive Edinburgh), and	01/10/2025

				Head of Service (Mental Health)	
	frequency. This should include SMART (specific, measurable, achievable, relevant and timebound) performance measures and outcomes to demonstrate progress with baselines and targets to enable comparison against actual and planned performance. The framework should be approved by a relevant governance forum who will be responsible for oversight of performance.	Planning Group and Performance and Delivery Committee.		Head of Service (Mental Health)	
2.2	The governance structure for Thrive should be reviewed and updated. Specifically, the committees which should have oversight of the work should be documented as well as lead officers.	Review and update the governance arrangements for the current commissioning plan for thrive.

Review the governance arrangements once the refreshed commission plan for thrive is agreed. | Chief Officer, EHSCP | Head of Service (Mental Health) and Strategic Programme Manager (Thrive Edinburgh) | 31/12/2024

01/10/2025 |

Finding 3 – Workforce Planning

Finding Rating	Medium Priority

Workforce planning is essential to ensure the EHSCP has a skilled and capable workforce to deliver strategic priorities and to meet changing needs. The EIJB has a 2022-2025 Workforce Strategy which outlines the 'vision, intent and strategic objectives for health and social care in Edinburgh'.

There are the 35 change programmes contained within Thrive Edinburgh's Commissioning Plan, and at the time of audit fieldwork a workforce plan for mental health services had not been developed. Management advised that a review of the structure of services is currently underway which is inclusive of the EIJB Medium Term Financial Savings Plan and following this workforce planning aligned to the 35 change programmes will be developed. More recently EHSCP have been advised by the Scottish Government that additional money available to support the recruitment of Mental Health Officers will cease at the end of March 2024 placing further pressure on our capacity to improve and develop services.

Risks

- **Strategic Delivery –** strategic outcomes may not be achieved if there are insufficient resources to deliver services
- **Regulatory and Legislative compliance** – lack of resources could result in breaching regulatory and legislative compliance
- **Workforce** – given the projected growth and demand within Edinburgh, existing financial challenges will not allow for an increase in resource and will place additional pressures on the workforce.

Recommendations and Management Action Plan: Workforce Planning

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
3.1	Following completion of the structure review, a workforce plan for Thrive Edinburgh should be developed which reflects the roadmap and change programmes. The workforce plan should be approved by senior management and a relevant governance forum with progress towards delivery of the plan monitored periodically.	Develop workforce plan reflecting the priorities of the refreshed Commissioning Plan / roadmap and present to the relevant governance forum.	Chief Officer, EHSCP	Head of Service (Mental Health)	01/10/2025

Finding 4 – Quality Assurance and Lessons Learned

A Quality Assurance (QA) Framework reflects a strong commitment to evidence-based decision making and continuous improvement. The EHSCP currently uses the Clinical and Care Governance Framework for QA reviews of mental health. Management have advised that this is currently under review to develop a consistent approach to QA and practice audits across localities.

Management have also advised that targeted audits have been performed to determine whether the change programmes have been effective. However, a QA plan to ensure that the effectiveness of all relevant change programmes has not yet been developed.

There are groups within the EHSCP that meet to discuss progress on improvement activities, including within Mental Health Services. However, there is currently no process to communicate lessons learned more widely or to provide details of complaint resolution consistently across localities. Management acknowledges improvements are needed on how information is cascaded to staff to ensure improve practice and provide consistent and clear messaging.

Management advised that they contribute to briefings provided to COSLA, but they do not receive feedback in response to this and so are unaware if the feedback influences recommendations or decisions made.

Risks

- **Financial and Budget Management** – lack of financial oversight may result in overspend
- **Regulatory and Legislative compliance** – the Council / EHSCP may not meet the statutory requirements
- **Governance and Decision Making** – senior management and members may not have oversight of the delivery of the service
- **Reputational Risk** – reputational damage if services do not provide the required service to citizens.

Recommendations and Management Action Plan: Quality Assurance and Lessons Learned

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
4.1	The revised EHSCP Quality Assurance Framework should be utilised to review the effectiveness of Thrive Edinburgh services. A quality assurance plan should be developed which sets out what areas will be reviewed, when they will be reviewed, and which governance forum will receive reporting on results of QA activity and at what frequency.	A quarterly professional governance and operational performance/assurance plan for Thrive will be developed.	Chief Officer, EHSCP	Head of Service (Mental Health)	31/06/2025

	Actions from QA activity should be recorded and progress in addressing any required actions monitored.				
4.2	A lessons learned process and a supporting communications approach should be developed, for example, through use of template emails with bullet points or through provision of briefings so the information cascaded is consistent.	A lesson learned process and communications plan will be developed and implemented to ensure consistent information is cascaded.	Chief Officer, EHSCP	Strategic Programme Manager (Thrive Edinburgh)	31/12/2024
4.3	The EHSCP should request feedback on information briefings provided by Thrive Edinburgh to COSLA to understand key decisions made and to support service delivery and improvement.	The Chief Officer / Operations Manager will engage with Strategy and Insight and Vice Chair of the EIJB to seek feedback on the discussion held at COSLA.	Chief Officer, EHSCP	Strategic Programme Manager (Thrive Edinburgh)	31/10/2024

Finding 5 – Risk Management Arrangements

Finding Rating	Low Priority

Risk management enables risks to EHSCP or service objectives to be identified, recorded, and managed. This provides greater assurance that objectives are achieved on an ongoing basis.

Although the EHSCP and the four localities have risk registers in place, none of them include risks relating to Thrive Edinburgh as a whole or its change programmes.

Management have advised that they are aware risk registers need to be developed further and that further guidance for staff inputting to the risk registers would be beneficial.

An operational risk was identified in relation to key-person dependency, as all 6 workstreams are chaired by one officer, the Strategic Programme Manager (Thrive Edinburgh).

Risks

- **Governance and Decision Making -** risks are not effectively identified, recorded, and managed which could affect the achievement of objectives and ineffective oversight

- **Service Delivery -** colleagues are unaware of risks impacting service delivery, reducing the likelihood that service objectives are achieved.

Recommendations and Management Action Plan: Risk Management Arrangements

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
5.1	A review of risks related to Thrive Edinburgh should be undertaken, and risks identified should be recorded within the EHSCP and locality risk registers. This should include statements on the risks, the impact and likelihood, mitigating actions, timescales, and responsible officers. Specifically, the responsibility for chairing each of the 6 workstreams should be reviewed to reduce key-person dependency. The risk register should be regularly provided to relevant committees and groups for review.	Risk register for the current Thrive commissioning plan will be implemented and reported to the appropriate governance groups.	Chief Officer, EHSCP	Head of Service (Mental Health) and Strategic Programme Manager (Thrive Edinburgh)	31/12/2024
5.2	The EHSCP should engage with the Council's Corporate risk management team to arrange training for officers who complete and update risk registers.	There will be engagement with appropriate teams to ensure that officers have received risk management training.		Head of Service (Mental Health) and Strategic Programme Manager (Thrive Edinburgh)	31/12/2024

Appendix 1 – Control Assessment and Assurance Definitions

Control Assessment Rating		Control Design Adequacy	Control Operation Effectiveness
Well managed	🟢	Well-structured design efficiently achieves fit-for purpose control objectives	Controls consistently applied and operating at optimum level of effectiveness.
Generally Satisfactory	🟢	Sound design achieves control objectives	Controls consistently applied
Some Improvement Opportunity	🟠	Design is generally sound, with some opportunity to introduce control improvements	Conformance generally sound, with some opportunity to enhance level of conformance
Major Improvement Opportunity	🔴	Design is not optimum and may put control objectives at risk	Non-conformance may put control objectives at risk
Control Not Tested	**N/A**	Not applicable for control design assessments	Control not tested, either due to ineffective design or due to design only audit

Overall Assurance Ratings	
Substantial Assurance	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.
Reasonable Assurance	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
Limited Assurance	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
No Assurance	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.

Finding Priority Ratings	
Advisory	A finding that does not have a risk impact but has been raised to highlight areas of inefficiencies or good practice.
Low Priority	An issue that results in a small impact to the achievement of objectives in the area audited.
Medium Priority	An issue that results in a moderate impact to the achievement of objectives in the area audited.
High Priority	An issue that results in a severe impact to the achievement of objectives in the area audited.
Critical Priority	An issue that results in a critical impact to the achievement of objectives in the area audited. The issue needs to be resolved as a matter of urgency.

Appendix 2 – Audit Areas and Control Objectives

Audit Area	Control Objectives
Strategy for Mental Health	The EHSCP has a clearly established strategy for delivery of mental health services which is aligned with the priorities set out in the Scottish Government Mental Health and Wellbeing Strategy.
Performance	There are clearly established mechanisms for monitoring and reporting on mental health performance data and outcomes to support service delivery and development, and for accurate and timely reporting to national bodies as required.
Resource and Capacity Planning	Resourcing requirements to deliver effective mental health services are regularly evaluated and action taken to ensure adequate capacity to meet needs.
Quality Assurance	A clearly established quality assurance framework is in place to assess quality of mental health services delivered, which includes an embedded approach to lessons learned from both practice reviews and inspection reports from the Mental Welfare Commission and other relevant national bodies such as Audit Scotland.
Governance and Oversight	There are clearly established and robust governance and oversight arrangements in place for mental health services, including a governance forum responsible for review and scrutiny of delivery of overall strategy aims and service delivery, with regular reporting on performance, resources, quality assurance and external body reviews.
Risk Management	Risks related to Mental Health Services are identified, recorded, and managed within a service risk register, and regularly reviewed to ensure appropriate mitigating actions are in place and remain effective, with escalation to divisional and directorate level risk committees where required.