Angus Integration Joint Board



Summary Annual Performance Report

2025/26

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Executive Summary

This Summary Annual Performance Report provides an overview of the performance, achievements and challenges of Angus Integration Joint Board (IJB) and Angus Health and Social Care Partnership (AHSCP) during 2025/26. It demonstrates progress in delivering the Strategic Commissioning Plan and improving outcomes for the people of Angus while operating within an increasingly challenging health and social care environment.

Throughout 2025/26, the AHSCP continued to experience significant and sustained pressures arising from increasing demand, growing complexity of need, workforce shortages and ongoing financial constraints. These challenges have required continued focus on prioritisation, service redesign and collaborative working across health, social work, social care, primary care, independent and third sector partners. Despite these pressures, AHSCP has continued to deliver safe, effective and person-centred services whilst progressing key transformation programmes designed to improve outcomes and support the long-term sustainability of health and social care services.

The year has seen continued progress in delivering AHSCP's strategic priorities of Prevention and Proactive Care, Care Closer to Home, and Mental Health, Learning Disabilities and Substance Use Recovery. Significant developments include further expansion of Home First services, strengthening anticipatory and preventative care, continued improvements in community mental health provision, enhanced governance arrangements, implementation of the Workforce Plan, and development of the Strategic Commissioning Framework 2026–2036 to provide a clear strategic direction for the next decade.

Performance against the National Health and Wellbeing Outcomes demonstrates that Angus continues to perform well across many nationally benchmarked indicators, particularly in relation to people's experiences of care, delayed discharge performance, support to remain at home and preventative approaches. While some indicators have deteriorated, reflecting national trends associated with increasing demand and complexity, the overall direction of travel remains positive, with improvement activity focused on areas where performance requires further strengthening.

AHSCP has continued to strengthen its governance arrangements throughout the year through enhanced clinical, care and professional governance, robust financial oversight, strategic performance reporting, risk management and internal audit. These arrangements have supported informed decision-making by the Integration Joint Board and provided assurance that services continue to operate safely, effectively and in accordance with statutory responsibilities.

Overall Assurance

Having considered the evidence presented throughout this report, including performance against strategic priorities, governance, quality and safety, workforce, finance, risk management and delivery of statutory responsibilities, the Chief Officer considers that **Angus Integration Joint Board maintained a Reasonable Level of Assurance during 2025/26**.

Despite operating within one of the most challenging periods experienced by health and social care services, governance arrangements have remained effective, financial stewardship has been maintained, strategic priorities have continued to progress, and AHSCP has demonstrated sustained commitment to improving outcomes through prevention, community-based care and integrated service delivery.

Whilst significant risks remain, including workforce sustainability, increasing complexity of demand, financial sustainability, care market resilience and the pace of whole-system transformation, AHSCP has appropriate governance, oversight and improvement arrangements in place to manage these risks. Delivery of the refreshed Strategic Commissioning Framework 2026–2036, alongside continued implementation of whole-system reform and shifting the balance of care, will be fundamental to ensuring services remain sustainable and responsive to the future needs of the population.

Key Messages

During 2025/26 AHSCP:

- Maintained a **Reasonable Level of Assurance** across governance, quality, performance and financial management despite significant system pressures.
- Continued to deliver the Strategic Commissioning Plan through measurable progress across Prevention and Proactive Care, Care Closer to Home, and Mental Health, Learning Disabilities and Substance Use Recovery.
- Strengthened governance, clinical and professional assurance, performance reporting and strategic risk management to support effective decision-making.
- Progressed major programmes of transformation, including Home First, prevention, community mental health services, primary care development and strategic commissioning.
- Maintained financial stability while recognising that long-term financial sustainability will require continued service redesign and transformation.
- Continued to invest in workforce planning, leadership and multidisciplinary models of care to support future service sustainability.

- Developed the Strategic Commissioning Framework 2026–2036, providing a clear framework for delivering whole-system transformation, reducing inequalities and improving population health outcomes over the next decade.

The year ahead will focus on implementing the refreshed Strategic Commissioning Framework 2026-2036, accelerating whole-system reform, strengthening community capacity, improving population health outcomes, reducing health inequalities and continuing to shift the balance of care towards prevention and care closer to home. AHSCP remains committed to working collaboratively with people, communities, staff and partners to deliver sustainable, high-quality health and social care services for the people of Angus.

The State of the System

What environment where we operating in during 2025/26?

Health and social care services across Angus continued to operate within a highly challenging environment throughout 2025/26. Increasing demand for services, a growing and ageing population, greater complexity of need, workforce shortages and sustained financial pressures continued to place significant strain on both health and social care services. These challenges were experienced across the whole system and reflected national trends affecting integration authorities throughout Scotland.

At the same time, AHSCP continued to respond to a changing policy landscape, including implementation of national priorities relating to prevention, population health improvement, urgent and unscheduled care, community-based service redesign and long-term reform of health and social care. These priorities required AHSCP not only to maintain safe and effective day-to-day services but also to transform how care is planned and delivered to ensure sustainability for the future.

Against this backdrop, AHSCP maintained a strong focus on delivering its Strategic Commissioning Plan through investment in prevention and proactive care, expansion of community-based services, strengthening multidisciplinary working and continuing to shift the balance of care towards supporting people to remain independent at home wherever possible.

Whilst the pressures facing AHSCP remain considerable, 2025/26 has demonstrated continued progress in strengthening governance, improving integration across organisational boundaries and delivering sustainable models of care that improve outcomes for people and communities. The achievements outlined throughout this report should therefore be viewed within the context of one of the most demanding operating environments experienced by health and social care services in recent years.

1. Foreword

On behalf of the Angus Integration Joint Board (IJB), we are pleased to present this summary report of our Annual Performance for 2025/26. This report highlights some of the key achievements, challenges and developments across health and social care services in Angus during the past year. A more detailed report, including further information on our strategic priorities and future planning, will be published later in 2026.

The past year has continued to present significant challenges for health and social care services, both locally and nationally. Like many integration authorities across Scotland, Angus Health and Social Care Partnership (AHSCP) has faced increasing demand for services, workforce pressures and ongoing financial constraints. These factors have required us to make difficult decisions to ensure services remain sustainable while continuing to meet the needs of the people and communities we serve.

Despite these challenges, we remain committed to delivering safe, high-quality and person-centred care within the resources available to us. Achieving this requires us to continually review how services are designed and delivered, ensuring that we make the best possible use of our resources while responding to changing needs and priorities. Our focus remains on maintaining essential services, improving outcomes and building a sustainable model of care for the future.

We recognise that periods of change can create uncertainty for the people who use our services, their families and carers, our communities and our workforce. Meaningful engagement and partnership working will therefore continue to be central to how we plan and deliver services. By working together, we can address current challenges and shape services that are responsive, effective and sustainable for the years ahead.

While acknowledging the pressures we face, we can also take pride in the significant achievements and positive progress made throughout the year. This report highlights some of the improvements delivered across Angus, made possible through the dedication, professionalism and commitment of our staff, partners, volunteers and communities. Every day, they make a positive difference to the lives of people across Angus, and we extend our sincere thanks for their continued hard work and dedication.

Stephen Whyte, Chair
Angus Integration Joint Board

Jillian Galloway, Chief Officer
Angus Integration Joint Board

2. Introduction

2.1 Overview of Angus Health and Social Care Partnership

Angus Health and Social Care Partnership (AHSCP) is overseen by the Angus Integration Joint Board (AIJB), which is responsible for the strategic planning and governance of integrated health and social care services across Angus. AIJB brings together elected members from Angus Council and non-executive members from NHS Tayside, supported by a range of non-voting members including senior officers, professional advisers, representatives of people who use services, carers, staff representatives, the third sector and independent sector partners.

AHSCP delivers a wide range of health and social care services to support the people of Angus at every stage of life. These services include care home provision, care at home, housing support, supported living services, respite care, community-based rehabilitation and support for older people, adults with physical disabilities, learning disabilities and complex care needs.

AHSCP also provides community mental health services, social work services, alcohol and drug recovery services, public protection services and support for unpaid carers. In addition, AHSCP is responsible for a range of community health services, including community nursing, community-based Allied Health Professional services such as physiotherapy, occupational therapy, dietetics, podiatry and speech and language therapy, together with functions that support primary care services across Angus.

Working closely with Angus Council, NHS Tayside, independent and third sector partners, communities and people who use services, AHSCP aims to improve health and wellbeing outcomes, reduce inequalities and support people to live independently for as long as possible in their own homes and communities.

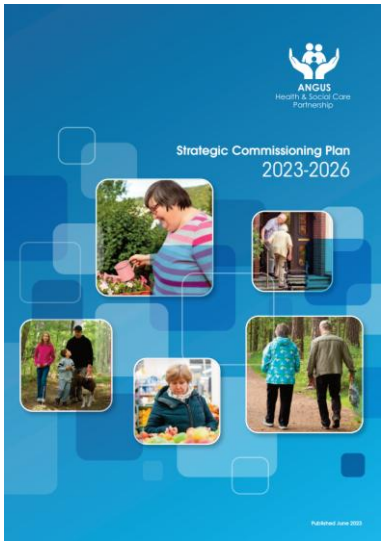
AHSCP delivers these services within an agreed annual budget and operates within a challenging environment characterised by increasing demand, workforce pressures and financial constraints. Despite these challenges, Angus IJB and AHSCP remain committed to delivering safe, effective, person-centred and sustainable services for the people of Angus.

2.2 Aims and Context of the Annual Performance Report

As laid out in the Public Bodies (Joint Working) (Scotland) Act 2014, the purpose of this report is to demonstrate the progress and performance of AHSCP in planning and delivering health and social care services to the people of Angus. AHSCP, like other Health and Social Care Partnerships nationally, continues to face significant financial challenges in addition to increasing demand for complex care and support. This report recognises the improvement activity undertaken this year, whilst acknowledging the need for continuous service improvement and innovation to meet the needs of our population within budget.

2.3 Strategic Commissioning Plan

In April 2023 the IJB approved the Strategic Commissioning Plan for 2023 - 2026 "Working Together to Improve Lives in Angus" which describes the vision for integrated health and social care services and sets out the IJB's objectives to use resources in pursuit of achieving the national health and wellbeing outcomes and local priorities.



The national health and wellbeing outcomes provide the strategic framework for all HSCPs in Scotland when delivering health and social care services and support.

The AHSCP Strategic Plan 2023-2026 outlines 4 key priorities for health and social care services in Angus. These priorities are aligned to one or more of the National Health and Wellbeing Outcomes as summarised below:

AHSCP Strategic Priority	Alignment to National Health and Wellbeing Outcomes
1 - Prevention and Proactive Care	Outcomes 1, 4, 5 and 9
2 - Care Closer to Home	Outcomes 2, 3, 6 and 9
3 - Mental Health and Wellbeing & Substance Use Recovery	Outcomes 1, 2, 3, 5 and 7
4 - Equity of Access and Public Protection	Outcomes 3, 5, 6, 8 and 9

2.4 Review of Strategic Commissioning Plan

In February 2025, Angus IJB reviewed progress against its Strategic Commissioning Plan 2023-2026 through a Strategic Planning Update. The IJB found that delivery of the plan was generally

progressing well and endorsed a reasonable level of assurance regarding progress made during 2024. The review covered the plan's three main priorities: Prevention and Proactive Care, Care Closer to Home, and Mental Health, Learning Disability and Substance Use Recovery.

As part of its governance process, the IJB agreed that the current strategy should be formally reviewed and refreshed. The IJB requested a further update on the review process and later added a Strategic Commissioning Plan Review to its 2025/26 work programme, ensuring the work would be considered at IJB level as a key strategic priority.

By October 2025, the IJB confirmed that the existing Strategic Commissioning Plan continued to guide commissioning activity but that a refreshed plan was being developed. The review therefore led to the creation of a new Strategic Commissioning Framework for 2026-2036, alongside plans to refresh the Market Facilitation Statement. Rather than identifying major failures, the review concluded that the existing strategy remained broadly effective and should be updated to reflect future needs, priorities and service demands across Angus.

The refreshed Strategic Commissioning Framework 2026–2036 reflects a renewed focus on improving population health and wellbeing through a whole-system approach to health and social care. Recognising that the increasing demand for health and social care services cannot be met through traditional models of care alone, the Framework places greater emphasis on prevention, early intervention, reducing health inequalities and supporting people to remain independent within their own homes and communities for as long as possible. This approach aligns with national policy and the wider ambition to shift the balance of care from reactive, hospital-based services towards proactive, community-based models of support.

Delivery of the Strategic Commissioning Framework is intended to improve outcomes for individuals and communities by addressing the wider determinants of health, strengthening community capacity and targeting resources towards those with the greatest need. Through strategic commissioning, integrated planning and partnership working, AHSCP aims to reduce unwarranted variation, improve equity of access to services and ensure that people receive the right care, in the right place, at the right time.

The Framework also recognises that improving population health and reducing avoidable demand are fundamental to achieving long-term financial sustainability. By investing in prevention, anticipatory care, community-based services and integrated models of care, AHSCP seeks to reduce unnecessary hospital admissions, minimise delays in discharge, support timely recovery and reduce dependence on acute hospital services. This strategic shift will enable finite resources to be used more effectively while improving outcomes, enhancing people's experience of care and supporting a more sustainable health and social care system for the future.

3. Key Achievements in 2025/26

Throughout 2025/26, Angus IJB and AHSCP continued to make progress in delivering the Strategic Commissioning Plan despite significant financial, workforce and system pressures. AHSCP has focused on strengthening governance, improving population health, expanding community-based models of care, investing in its workforce and delivering sustainable transformation to improve outcomes for the people of Angus.

Stronger Governance

AHSCP continued to strengthen its governance and assurance arrangements to support effective strategic leadership and decision-making. Key achievements included:

- Strengthened clinical, care and professional governance through the Clinical, Care and Professional Governance Group (CCPG) and wider quality assurance arrangements.
- Continued development of strategic performance reporting through publication of the Annual Performance Dashboard, providing greater transparency and oversight of outcomes and performance.
- Enhanced risk management, internal control and governance assurance through annual governance reviews, internal audit follow-up and strategic risk reporting.
- The development of the Performance Dashboard has strengthened organisational assurance, enabling earlier identification of emerging risks and more informed decision making by the Integration Joint Board.
- Continued implementation and monitoring of the Strategic Commissioning Plan while progressing development of the Strategic Commissioning Framework 2026–2036.

Better Population Health

AHSCP continued to strengthen its focus on prevention, early intervention and reducing health inequalities through a range of initiatives designed to improve health and wellbeing and support people to live healthier, more independent lives. During the year this included:

- Continued implementation of Prevention and Proactive Care initiatives, including Future Care Planning, falls prevention and physical activity programmes.
- Progression of the Angus Carers Strategy, supporting unpaid carers to maintain their health and wellbeing.

- Publication of the Equality Mainstreaming Report and Equality Outcomes 2025–2029, reinforcing the Partnership's commitment to reducing inequalities and improving equitable access to services.
- Continued development of population health intelligence to inform strategic commissioning and service planning.

Care Closer to Home

Significant progress was made in strengthening integrated community-based services and supporting the strategic ambition to shift the balance of care away from hospital settings towards care delivered within local communities. Achievements included:

- Establishment of the Home First Hub provides a key building block in shifting the balance of care, reducing hospital admissions and improving flow across the whole health and social care system.
- Progression of strategic redesign work across primary care and wider community health services.
- Continued implementation of the Learning Disability Inpatient Transition Programme, supporting more people to receive care closer to home.
- Ongoing redesign of supported accommodation and community mental health services to improve community-based support.

Workforce

Recognising that the workforce is fundamental to delivering sustainable health and social care services, AHSCP continued to invest in workforce planning, leadership and service redesign. Progress during the year included:

- Development and implementation of the Workforce Plan 2025–2029.
- Continued workforce planning to support future service sustainability, succession planning and new models of care.
- Recruitment of key clinical roles to strengthen multidisciplinary community services.
- Continued focus on workforce wellbeing, leadership development and reducing workforce risks across health and social care services.

Financial Sustainability

AHSCP maintained effective financial stewardship throughout 2025/26 while continuing to invest in service transformation and long-term sustainability. Key achievements included:

- Maintaining overall financial stability throughout the year while operating within agreed financial resources.
- Development of an updated medium-term Strategic Financial Plan (2026/27–2028/29) to support sustainable service delivery.
- Continued alignment of financial planning with strategic commissioning and transformation priorities.
- Ongoing work to maximise value from available resources while maintaining safe and effective services.

Transformation

AHSCP continued to progress whole-system transformation to improve outcomes, enhance sustainability and respond to changing population needs. During the year this included:

- Continued development of the Strategic Commissioning Framework 2026–2036 to provide a long-term strategic framework for health and social care.
- Progression of integrated models of care supporting prevention, anticipatory care and care closer to home.
- Securing and planning deployment of additional Scottish Government investment to strengthen urgent and unscheduled care services.
- Continued delivery of programmes supporting digital innovation, emergency preparedness, climate change responsibilities and service redesign across health and social care.

Collectively, these achievements demonstrate continued progress towards delivering the AHSCP's strategic priorities while strengthening the foundations for future transformation. They also reflect AHSCP's commitment to improving population health, reducing inequalities, shifting the balance of care towards community-based services and ensuring the long-term sustainability of health and social care services across Angus.

4. Strategic Risks and Future Challenges

Whilst Angus IJB has continued to make good progress in delivering its strategic priorities during 2025/26, AHSCP continues to operate within a complex and challenging environment. Demand for health and social care services continues to increase, driven by demographic change, greater complexity of need and wider inequalities in health outcomes. At the same time, significant financial pressures, workforce challenges and increasing expectations require continued transformation of how services are delivered.

Angus IJB recognises that effective governance requires not only reporting on achievements but also maintaining clear oversight of the principal strategic risks that could affect delivery of its Strategic Commissioning Framework and the achievement of the National Health and Wellbeing Outcomes. Throughout the year these risks have been monitored through Angus IJB's governance, performance, quality and risk management arrangements, with assurance provided through regular reporting to the IJB and its committees.

AHSCP'S principal strategic risks are summarised below.

Strategic Risk	Strategic Response
Financial Sustainability	Delivering the Strategic Financial Plan, aligning investment with strategic priorities, improving productivity and progressing service transformation to ensure long-term sustainability.
Workforce Sustainability	Implementing the Workforce Plan 2025–2029, strengthening recruitment and retention, succession planning, leadership development and workforce redesign to support future models of care.
Increasing Demand and Complexity	Expanding prevention and proactive care, improving anticipatory care planning, strengthening community capacity and developing integrated neighbourhood models to better manage demand.
Care Market Sustainability	Working collaboratively with commissioned providers to improve resilience, market sustainability and continuity of high-quality care across the independent and third sectors.
Whole-System Reform and Shifting the Balance of Care	Delivering the Strategic Commissioning Framework 2026–2036, strengthening primary and community care, expanding Home First and integrated community services, and reducing reliance on hospital-based care wherever appropriate.
Quality, Safety and Professional Governance	Maintaining robust clinical, care and professional governance arrangements to ensure services remain safe, effective, person-centred and continuously improving.

While these risks remain significant, AHSCP has established comprehensive governance, performance and assurance arrangements to oversee delivery of mitigating actions and monitor progress. During 2025/26 the overall direction of travel has remained positive, with continued progress in prevention, integrated community services, workforce planning, governance and strategic transformation providing confidence that AHSCP is addressing these challenges in a planned and sustainable manner.

Angus IJB recognises that managing these risks will require continued partnership working with NHS Tayside, Angus Council, primary care, the independent and third sectors, communities and people with lived experience. Delivery of the Strategic Commissioning Framework 2026–2036 will remain the primary mechanism through which these strategic risks are addressed, ensuring AHSCP continues to improve outcomes, reduce inequalities, strengthen financial sustainability and accelerate the shift towards prevention and care closer to home.

5. Audit and Governance

Throughout 2025/26, the Angus IJB received regular reports on performance, finance, workforce, strategic planning, carers' services, delayed discharge, unmet need, mental health and learning disability services, and a range of national policy developments affecting health and social care.

The IJB also monitored progress against the Strategic Commissioning Plan and its key priorities of Prevention and Proactive Care, Care Closer to Home, and Mental Health, Learning Disabilities and Substance Use Recovery.

The Angus IJB is supported by an Audit Committee, which provides independent scrutiny and assurance regarding governance, risk management, financial performance, internal controls and audit activity. The Audit Committee includes representation from both voting and non-voting members and reports regularly to the IJB, helping to ensure transparency, accountability and effective stewardship of public resources.

The Clinical, Care and Professional Governance Group (CCPG) is the principal governance forum within AHSCP responsible for providing oversight and assurance regarding the quality, safety and effectiveness of health and social care services, including both directly delivered and commissioned services. The group supports continuous improvement, promotes learning from incidents and feedback, and ensures services uphold the principles of dignity, respect, human rights and person-centred care.

Assurance to the IJB is derived through a combination of clinical and professional governance, financial governance, performance reporting, risk management, internal audit, external scrutiny and partner governance arrangements across NHS Tayside and Angus Council.

The table below shows key Achievements and Assurance in 2025/26.

Area	2025/26 Position
Overall Assurance	Chief Officer assessed governance arrangements as providing **Reasonable Assurance**, with effective quality, risk and performance oversight arrangements in place.
Clinical Governance	Strong alignment with NHS Tayside's Clinical Governance Framework through the Clinical, Care and Professional Governance Group (CCPG) and Clinical Governance, Quality and Assurance Meeting (CGQAM).
Social Work Governance	New Social Work and Social Care Governance Framework developed to strengthen oversight, accountability and assurance across social work services.

Quality Assurance Reviews	Annual reviews completed across key services, including District Nursing, Allied Health Professional Services, Disabilities Services, Forensic & Custody Healthcare and AIDARS.
Learning and Improvement	Ongoing monitoring of adverse events, complaints, feedback and risks supports continuous learning and service improvement.
Medication Assisted Treatment (MAT) Standards	Continued improvements reported within Angus Integrated Drug and Alcohol Recovery Service (AIDARS).
Quality Management Systems	Development of a Quality and Performance Dashboard and wider Quality Management System to strengthen performance and quality monitoring.
District Nursing	Governance and workforce arrangements strengthened to support service quality and sustainability.

Strategic planning and service improvement continue to be informed through engagement with a broad range of stakeholders, including people who use services, unpaid carers, staff, partner organisations, the third sector and local communities. During 2025/26, AHSCP continued work to review and refresh its Strategic Commissioning Framework to ensure alignment with emerging national policy and local priorities, while maintaining a focus on improving outcomes, reducing inequalities and supporting sustainable health and social care services for the people of Angus.

During 2025/26, a total of 42 regulated health and social care services across Angus were inspected by the Care Inspectorate, spanning care homes, care at home and housing support services, learning disability services, mental health services and community-based support. The inspection programme provides independent assurance regarding the quality, safety and effectiveness of regulated services and forms an important component of AHSCP's wider quality and governance arrangements. Overall, the findings demonstrate that the majority of services continue to deliver good standards of care, with improvement requirements identified in 17 services. Where improvements were required, these have been incorporated into service improvement plans and continue to be monitored through established governance and quality assurance arrangements. AHSCP remains committed to working collaboratively with providers to share learning, support continuous improvement and ensure people across Angus receive safe, high-quality and person-centred care.

Details of individual Care Inspectorate inspection reports are publicly available through the Care Inspectorate's online care service register, where the latest inspection reports and quality evaluations for all regulated services can be accessed. Care Inspectorate – Find a Care Service

IJB scrutiny is delegated to the IJB Audit Committee, which has representation from Angus Councillors, NHS Board members and non-voting members. The committee provides updates to the IJB on audits, risk management, financial controls and performance.

The Strategic Planning Group (SPG) brings together a wide range of AHSCP colleagues, partners and stakeholders supporting an integrated strategic approach. Through the course of the year the SPG has monitored progress of priorities within the SCP and overseen the completion of a Joint Strategic Needs Assessment to support the development of the next Strategic Plan. The SPG have also had oversight of and contributed to the initial engagement undertaken to develop strategic priorities for the next iteration of the AHSCP's Strategic Framework.

6. Performance against National Health and Wellbeing Outcomes

The National Core Suite of Integration Indicators provides a nationally consistent framework for measuring performance across Health and Social Care Partnerships in Scotland. The indicators support assessment of progress against the nine National Health and Wellbeing Outcomes established under the Public Bodies (Joint Working) (Scotland) Act 2014.

Outcome indicators, experience measures and system performance indicators collectively provide evidence of how effectively health and social care services improve health and wellbeing, promote independence, support carers, reduce inequalities, protect vulnerable people, support the workforce and ensure resources are used efficiently and effectively. The framework enables local performance to be monitored over time and benchmarked against other partnerships across Scotland, supporting continuous improvement and accountability.

Collectively these indicators demonstrate that Angus continues to perform strongly across many nationally benchmarked measures despite increasing demand, although deterioration in some indicators reinforces the need to continue investment in prevention, community capacity and integrated models of care.

Below is how the national core suite of integration indicators links to the national health and wellbeing outcomes.

National Health & Wellbeing Outcome	Core Suite of Integration Indicators
Outcome 1: People improve their own health and wellbeing	NI1, NI11, NI12, NI16
Outcome 2: People live independently at home or in a homely setting	NI2, NI18, NI19
Outcome 3: Positive experience of services	NI3, NI4, NI5, NI6
Outcome 4: Services improve quality of life	NI5, NI7
Outcome 5: Services reduce health inequalities	NI11, NI12, NI15
Outcome 6: Unpaid carers are supported	NI8
Outcome 7: People are safe from harm	NI9, NI17
Outcome 8: Workforce is engaged and supported	Workforce measures reported locally alongside the Core Suite
Outcome 9: Resources are used effectively and efficiently	NI12, NI13, NI18, NI19, NI20

AHSCP uses the National Core Suite of Integration Indicators as a key component of its performance framework, alongside local indicators, to provide assurance regarding delivery of the Strategic Commissioning Plan and progress towards the National Health and Wellbeing Outcomes.

The indicators enable the IJB to understand areas of strong performance, identify emerging challenges and target improvement activity where required. These are presented bi-annually (February and June) to the IJB.

Qualitative Indicators

The qualitative national outcome indicators continue to demonstrate that Angus performs comparatively well against the national average across most measures relating to people's experiences of health and social care support. Angus performs better than the Scotland average across seven of the nine national experience indicators, including measures relating to independent living, involvement in decisions about care, quality of life, coordinated support, and support for carers.

Indicator	Area	2019/20	2021/22	2023/24	2025/26	Latest vs Previous
NI 1 - Percentage of adults able to look after their health very well or quite well	Angus	93.5%	92.4%	91.1%	92.0%	↓
	Scotland	92.9%	90.9%	90.7%	90.6%	↓
NI 2 - Percentage of adults supported at home who agree that they are supported to live as independently as possible	Angus	84.8%	72.6%	74.1%	71.9%	↓
	Scotland	80.8%	78.8%	72.4%	64.6%	↓
NI 3 - Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided	Angus	82.0%	76.8%	62.4%	56.8%	↓
	Scotland	75.4%	70.6%	59.6%	54.9%	↓
NI 4 - Percentage of adults supported at home who agree that their health and social care services seemed to be well co-ordinated	Angus	79.6%	78.5%	55.6%	62.1%	↑
	Scotland	73.5%	66.4%	61.4%	56.0%	↓

NI 5 - Percentage of adults receiving any care or support who rate it as excellent or good	Angus	85.3%	79.5%	65.2%	66.1%	↑
	Scotland	80.2%	75.3%	70.0%	63.9%	↓
NI 6 - Percentage of people with positive experience of care at their GP practice	Angus	75.8%	69.8%	62.1%	68.2%	↑
	Scotland	78.7%	66.5%	68.5%	70.7%	↑
NI 7 - Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life	Angus	85.6%	81.7%	70.1%	69.6%	↓
	Scotland	80.0%	78.1%	69.8%	62.2%	↓
NI 8 - Percentage of carers who feel supported to continue in their caring role	Angus	34.9%	29.5%	33.7%	33.1%	↓
	Scotland	34.3%	29.7%	31.2%	31.9%	↑
NI 9 - Percentage of adults supported at home who agree they felt safe	Angus	89.5%	84.9%	63.7%	65.5%	↑
	Scotland	82.8%	79.7%	72.7%	66.9%	↓

RAG Status

	Better than the national average
	Equal to or within 5% of the national average
	worse (more than 5%) than the national average

While some indicators have shown a reduction over time, this mirrors wider national trends and should be considered within the context of increasing complexity of need, sustained demand pressures and workforce challenges across health and social care services. Despite these pressures, Angus continues to demonstrate comparatively strong performance in relation to people's reported experiences and outcomes.

Quantitative Indicators

The quantitative indicators for 2025/26 show a mixed but generally positive picture for AHSCP. While emergency admissions and emergency readmissions increased slightly, Angus continues to perform more favourably than the wider Tayside position in a number of key areas. Significant improvements were recorded in delayed discharges, emergency bed days and Future Care Planning, reflecting the positive impact of initiatives focused on prevention, proactive care and supporting people to remain at home for longer.

Indicator	Area	2021/22	2022/23	2023/24	2024/25	2025/26	Latest vs Previous
NI 11 - Premature mortality rate (per 100,000 persons)	Angus	419	390	382	Not available	Not available	-
	Scotland	466	442	442	Not available	Not available	-
NI 12 - Emergency admission rate (per 100,000 population)	Angus	10,831	11,342	12,839	13,998	14,450	↑
	Scotland	11,639	11,273	11,859	11,333	11,470	↑
NI 13 - Emergency bed day rate (per 100,000 population)	Angus	92,657	102,826	108,976	105,017	96,334*	↓
	Scotland	115,135	119,806	120,407	113,627	108,988*	↓
NI 14 - Readmission to hospital within 28 days (per 1,000 population)	Angus	114	115	124	123.8	126	↑
	Scotland	107	102	104	103	104	↓
NI 15 - Proportion of last 6 months of life spent at home or in a community setting	Angus	92.9%	92.2%	91.9%	92.0%	91.5%*	↓
	Scotland	89.7%	88.9%	88.9%	89.2%	89.3%*	↑
NI 16 - Falls rate (per 1,000 population) aged 65+	Angus	23.7	26.5	24.6	24.8	26.6*	↑
	Scotland	22.6	22.5	22.7	22.5	22.2*	↓

NI 17 - Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections	Angus	75.7%	69.3%	71.3%	73.5%	68.0%	↓
	Scotland	75.8%	75.2%	77.0%	81.9%	83.1%	↑
NI 18 - Percentage of adults with intensive care needs receiving care at home	Angus	60.4%	61.7%	63.1%	62.7%	Not available	-
	Scotland	64.5%	64.6%	64.8%	64.5%	Not available	-
NI 19 - Number of days people aged 75+ spend in hospital when they are ready to be discharged (per 1,000 population)	Angus	220.9	222.4	166	208	164	↓
	Scotland	747.9	919.3	902	952	873	↓
NI 20 - Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency	Public Health Scotland have recommended that Integration Authorities do not report information for this indicator beyond 2019/20 within their Annual Performance Reports.						

** Data used is for calendar year 2025*

RAG Status

	Better than the national average
	Equal to or within 5% of the national average
	worse (more than 5%) than the national average

The data highlights both the ongoing pressures associated with increasing demand and complexity of need, and the progress being made towards the strategic priorities of Prevention and Proactive Care and Care Closer to Home.

7. Performance against Strategic Priorities

Angus IJB continues to make positive progress against all three strategic priorities despite ongoing financial, workforce and service pressures. The IJB has previously received either reasonable or substantial assurance for each priority area, with further evidence of improvement, innovation and partnership working demonstrated throughout 2025/26. The table below shows key areas of progress within each of the priorities.

Strategic Priority	Key Areas of Progress	Performance Assessment
Priority 1: Prevention and Proactive Care	National recognition of Angus' prevention work through NHS Scotland and the Chief Medical Officer's Annual Report; 526 referrals to Be Active Live Well (BALW); 33 active Healthy Steps walking groups; Future Care Planning test of change established in Brechin; 437 falls referrals managed with 85% contacted within two working days; continued development of the Prevention and Proactive Care Dashboard.	**Good Progress**. Strong evidence of preventative approaches, early intervention, wellbeing initiatives and proactive support aimed at improving population health and reducing future demand on services.
Priority 2: Care Closer to Home	Angus Home First Hub and Single Point of Contact (SPOC) now fully established; integrated access to Frailty @ Home, Enablement, Community Meals and Community Alarms; new Advanced Nurse Practitioners in post; service expansion planned to include Allied Health Professionals; ongoing implementation of the Angus Carers Strategy and promotion of Carer Positive accreditation.	**Strong Progress**. Continued development of integrated community services is supporting people to remain at home, avoid unnecessary admissions and access coordinated support closer to home.
Priority 3: Mental Health, Learning Disabilities and Substance Use Recovery	New Neurodevelopmental Pathway established with over 200 people supported; The Beacon supported 595 individuals and delivered over 2,600 support sessions; Enhanced Community Support Hubs received over 11,000	**Strong Progress**. Substantial activity across mental health, learning disabilities and substance use recovery demonstrates a focus on improving access, prevention,

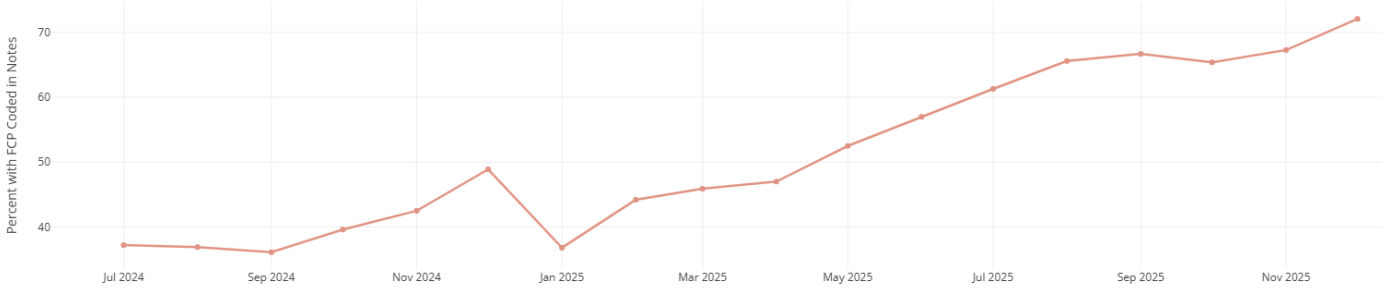
	referrals; positive progress in suicide prevention initiatives; continued development of Learning Disability community support models; progression of MAT Standards, recovery communities, Digital Lifelines and residential rehabilitation pathways.	recovery and community-based support.

Progress is particularly evident in the expansion of preventative services, the strengthening of community-based models of care through Home First, and the development of innovative approaches to mental health, neurodevelopmental support and substance use recovery. While challenges relating to finance, workforce and rising demand remain, the direction of travel across all three strategic priorities is positive.

7.1 Priority 1 - Prevention and Proactive Care

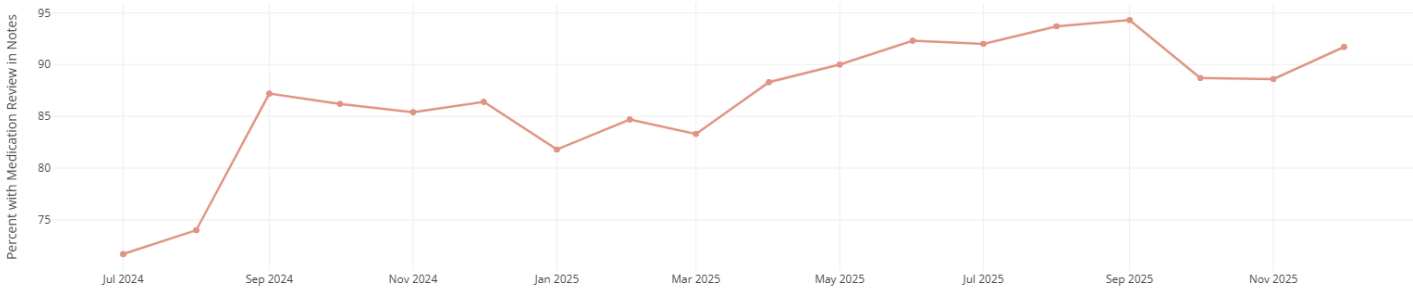
7.1.1 Percentage of care home patients coded with Future Care Plan (FCP) in notes in the last 56 weeks (Latest Data to Dec 2025).

Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25
			38%	38%	37%	40%	42%	48%	36.8%	44.2%	46%
Apr 25	**May 25**	**Jun 25**	**Jul 25**	**Aug 25**	**Sep 25**	**Oct 25**	**Nov 25**	**Dec 25**	**Jan 26**	**Feb 26**	**Mar 26**
47%	52.5%	57%	61.3%	65.6%	66.7%	65.4%	67.3%	72.1%			



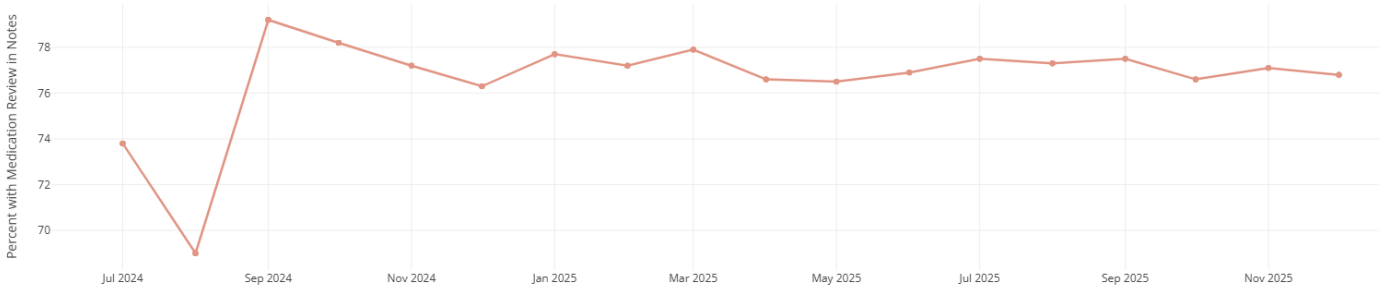
7.1.2 Percentage of people living in a care home who have had a medication review carried out within 56 weeks (Latest Data to Dec 2025).

Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25
			72%	75%	87%	86%	85%	86%	82%	85%	83%
Apr 25	**May 25**	**Jun 25**	**Jul 25**	**Aug 25**	**Sep 25**	**Oct 25**	**Nov 25**	**Dec 25**	**Jan 26**	**Feb 26**	**Mar 26**
88.3%	90%	92.3%	92%	93.7%	94.3%	88.7%	88.6%	91.7%			



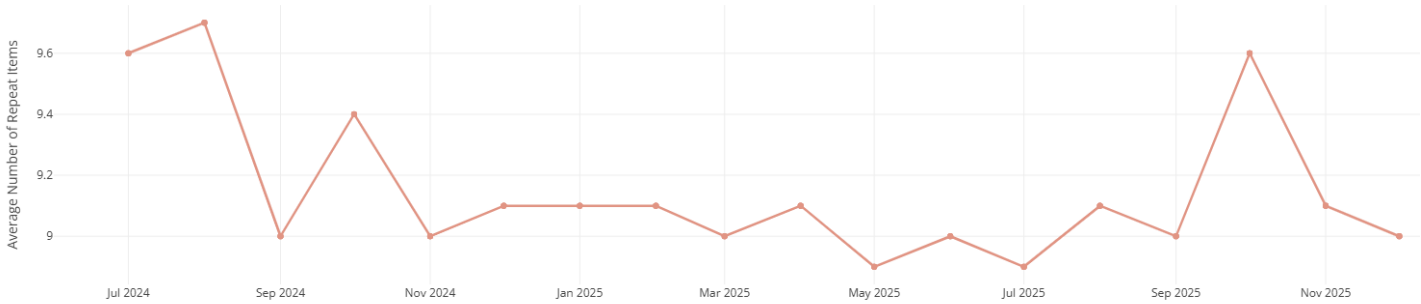
7.1.3 Percentage of people aged over 75 on 10 or more medicines who have had a polypharmacy review in the past 56 weeks (Latest Data to Dec 2025).

Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25
			74%	68%	79%	78%	77%	76%	78%	77%	78%
Apr 25	**May 25**	**Jun 25**	**Jul 25**	**Aug 25**	**Sep 25**	**Oct 25**	**Nov 25**	**Dec 25**	**Jan 26**	**Feb 26**	**Mar 26**
76.6%	76.5%	76.9%	77.5%	77.3%	77.5%	76.6%	77.1%	76.8%			



7.1.4 Average number of repeat items per care home patient (Latest Data to Dec 2025).

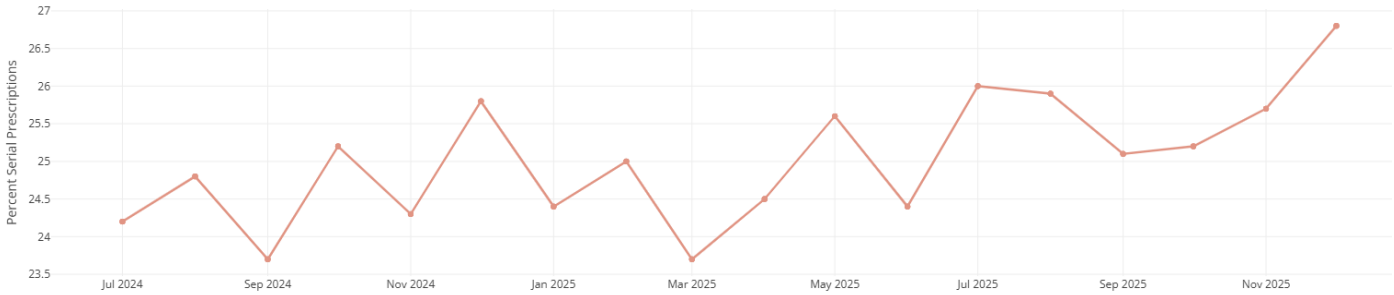
Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25
			9.6	9.7	9.5	9.6	9.3	9.4	9.1	9.1	9
Apr 25	**May 25**	**Jun 25**	**Jul 25**	**Aug 25**	**Sep 25**	**Oct 25**	**Nov 25**	**Dec 25**	**Jan 26**	**Feb 26**	**Mar 26**
9.1	8.9	9	8.9	9.1	9	9.6	9.1	9			



Note - Aim to reduce the average no. of repeat items per care home patient across Angus by 20%

7.1.5 Percentage of prescriptions that were serial prescriptions (Latest Data to Dec 2025).

Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25
			25.1%	25.7%	24.5%	25.9%	25.2%	26.6%	24.4%	25%	24%
Apr 25	**May 25**	**Jun 25**	**Jul 25**	**Aug 25**	**Sep 25**	**Oct 25**	**Nov 25**	**Dec 25**	**Jan 26**	**Feb 26**	**Mar 26**
24.5%	25.6%	24.4%	26%	25.9%	25.1%	25.2%	25.7%	26.8%			



Note - Aim is for 5% increase in serial prescriptions each year until 50% is reached.

7.1.6 Percentage increase in the number of people with a Power of Attorney

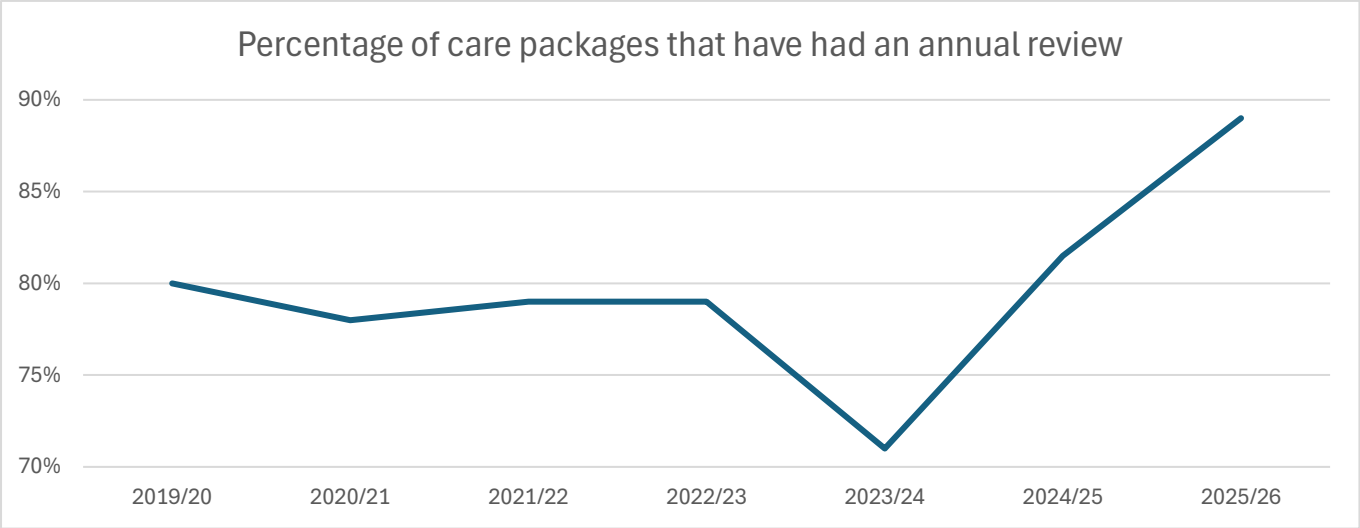
Q1 2024/25	Q2 2024/25	Q3 2024/25	Q4 2024/25
338	416	602	
Q1 2025/26	**Q2 2025/26**	**Q3 2025/26**	**Q4 2025/26**

7.1.7 Percentage increase in number of people with a long-term condition who access the ANGUSalive 'BE Active-Live Well' Programme

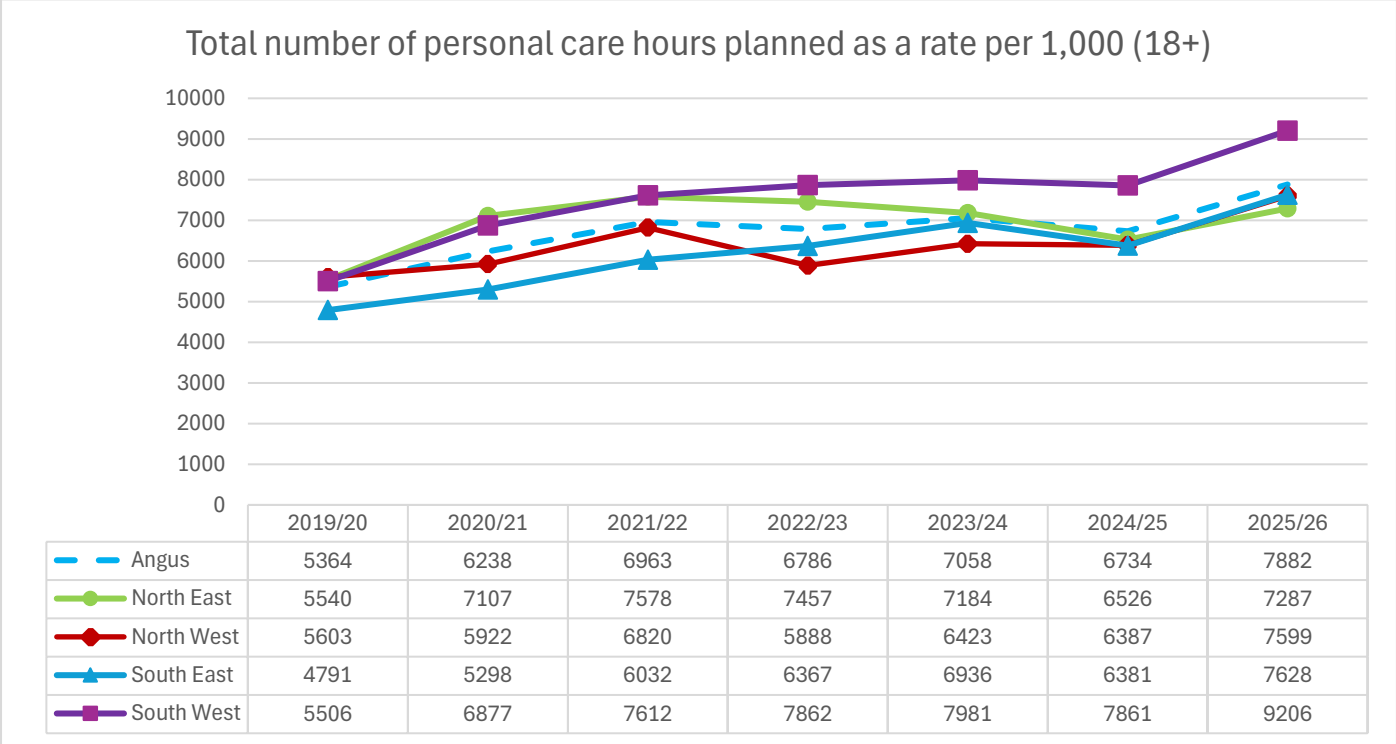
Between April 2024 and March 2025, a total of 957 referrals were received. Between 1 June and 31 December 2025, BALW received 526 referrals (183 selfreferrals and 343 health and care professional referrals), with 35% from people living in SIMD 1 and 2 areas. Demand remains steady following the re-launch April 2024 with approximately 70-75 referrals received each month (up from 25-30 per month pre-April 2024).

7.2 Priority 2 - Care Closer to Home

7.2.1 Percentage of care packages that have had an annual review

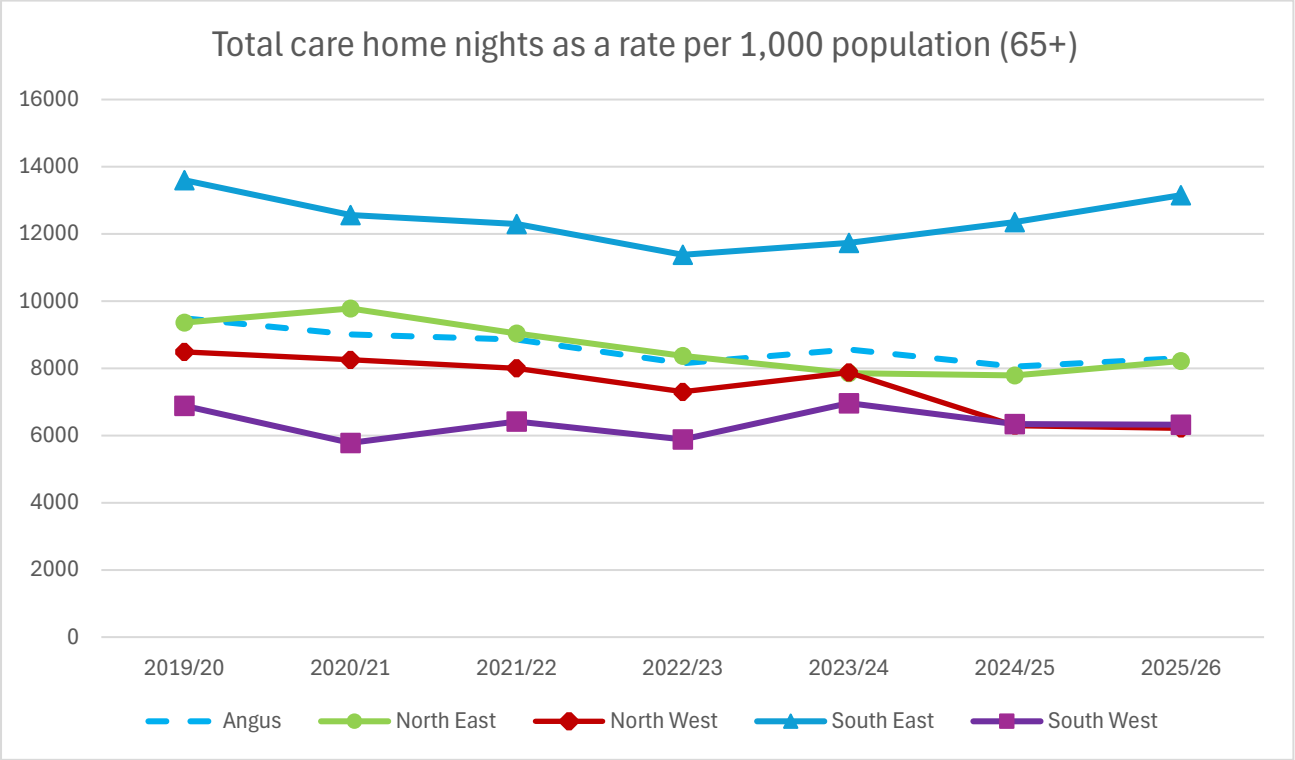


7.2.2 Total number of personal care hours planned as a rate per 1,000 adult population

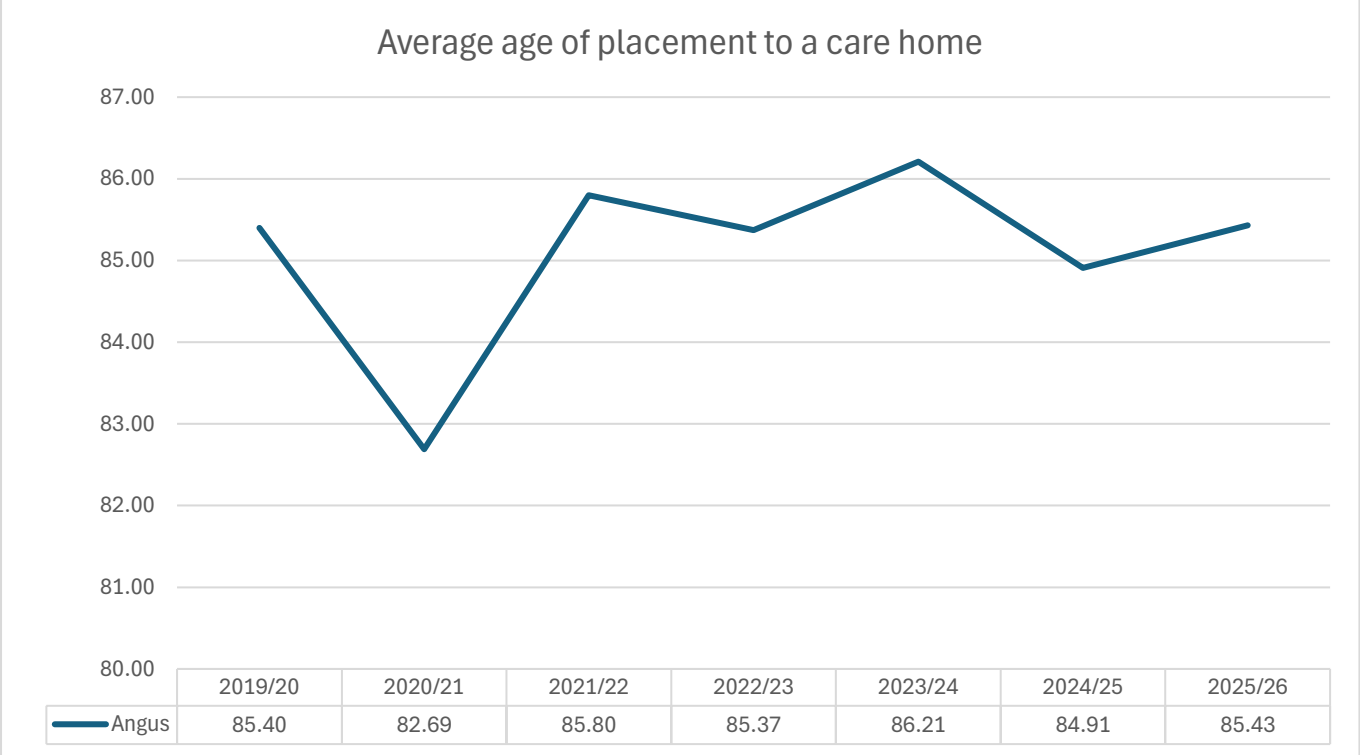


	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26
Angus	5364	6238	6963	6786	7058	6734	7882
North East	5540	7107	7578	7457	7184	6526	7287
North West	5603	5922	6820	5888	6423	6387	7599
South East	4791	5298	6032	6367	6936	6381	7628
South West	5506	6877	7612	7862	7981	7861	9206

7.2.3 Total number of nights in a Care Home as a rate per 1,000 population 65+

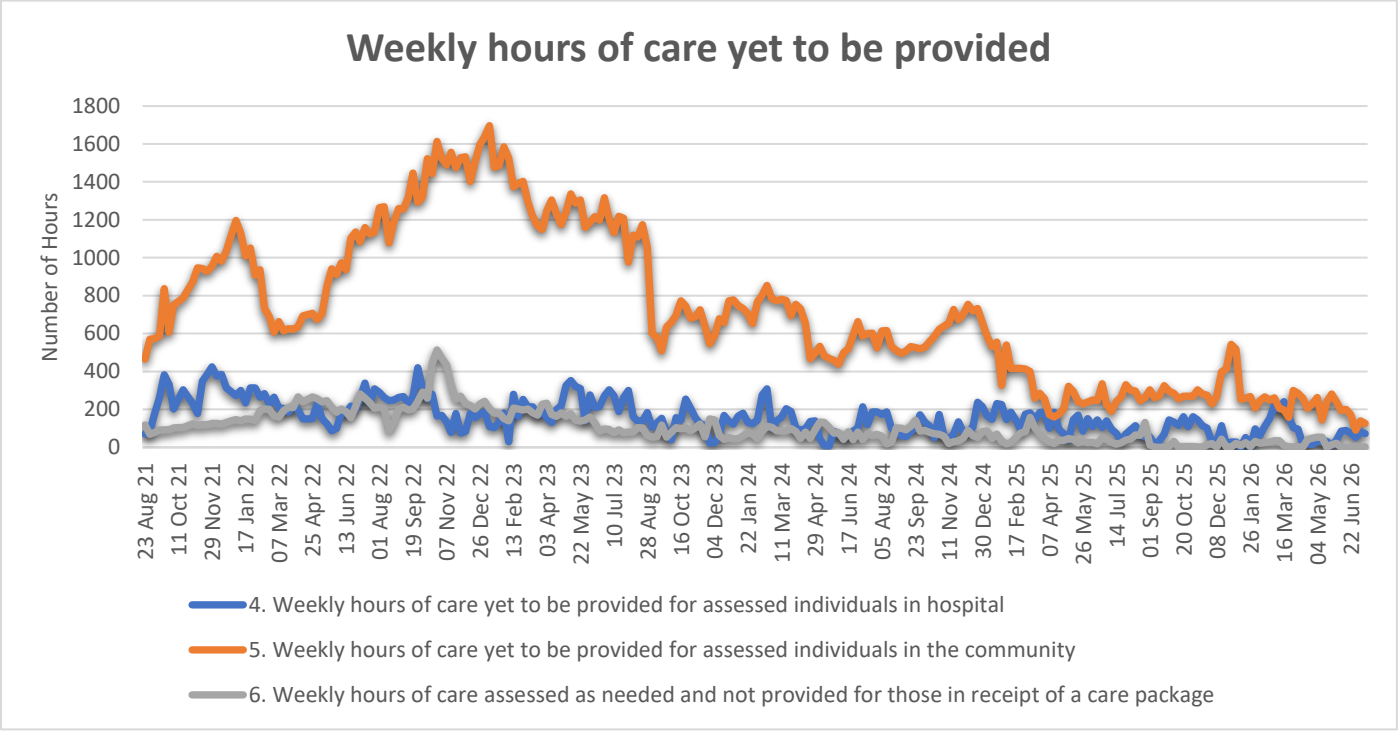


7.2.4 Average age of placement to a care home



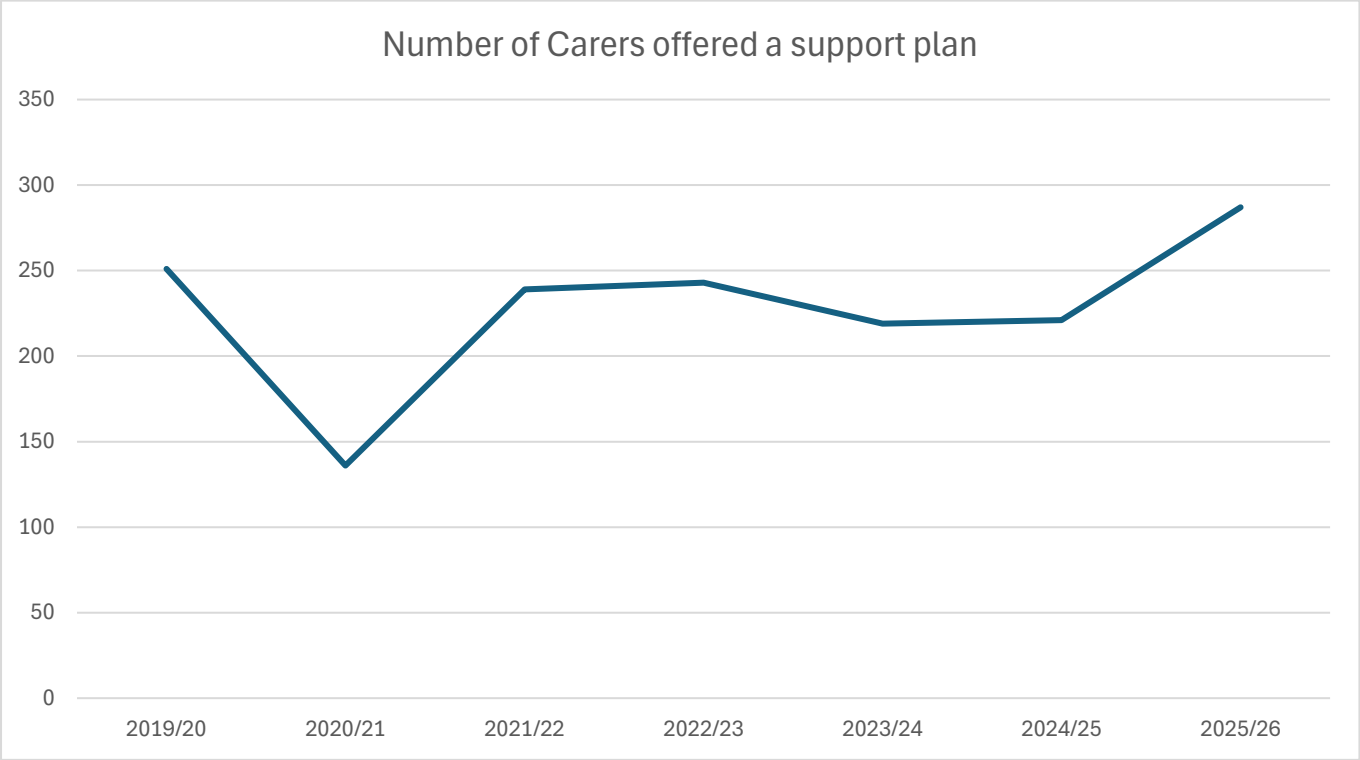
	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26
Angus	85.40	82.69	85.80	85.37	86.21	84.91	85.43

7.2.5 Weekly hours of care yet to be provided (unmet need)



Number of hours of unmet need was 654 for Week commencing 23 August 2021 and is now 318 for week commencing 20 July 2026.

7.2.6 Number of carers offered a support plan



7.3 Priority 3 - Mental Health, Learning Disabilities and Substance Use Recovery

The IJB previously receiving substantial assurance regarding delivery of actions in October 2025 for Priority 3. Progress has focused on improving access to mental health support, strengthening community-based services, enhancing suicide prevention activity, developing learning disability services, and supporting recovery from substance use

Area	Performance and Progress
Neurodevelopmental Pathway	The new pathway was fully implemented in October 2025, moving towards a stepped-care model. More than **200 people** were contacted between October and December 2025, with positive feedback from participants.
The Beacon Community Wellbeing Centre	Between April and December 2025, **595 individuals** received support through The Beacon, with over **2,600 support sessions** delivered. The most common reasons for referral were emotional distress and suicidal thoughts.
Enhanced Community Support (ECS) Hubs	All four locality hubs continue to operate successfully. From March 2024 to December 2025, the hubs received over **11,000 referrals**, including nearly **3,500 self-referrals**, demonstrating good accessibility and effective signposting to appropriate support.
Suicide Prevention	Year 2 of the local Suicide Prevention Action Plan reported positive progress. New Children and Young People's and Bereaved by Suicide working groups have been established, alongside development of a more comprehensive suicide prevention training programme.
Mental Health Peer Support	Between July and September 2025, **696 referrals** were received and **100% were contacted within three days**. The main reasons for referral were low mood, anxiety and stress.
Learning Disabilities	Collaborative work continues across Tayside to develop community-based models of care. Plans for step-down provision supporting transitions from hospital to community are progressing, with implementation planned by December 2026.
Substance Use Recovery	Progress has been made in implementing the Alcohol and Drug Partnership (ADP) Delivery Plan, embedding Medication Assisted Treatment (MAT) standards, developing recovery communities, and strengthening lived-experience approaches.

Digital Lifelines	The programme continues to provide digital access and support to people in recovery, with positive feedback from service users and national recognition of Angus's work.
Residential Rehabilitation	Angus is working with Healthcare Improvement Scotland to test and develop improved pre-care, through-care and aftercare pathways for people accessing residential rehabilitation services.

8. Locality Working

Locality working is fundamental to delivering integrated, person-centred health and social care and improving population health outcomes. By understanding the specific needs, strengths and challenges of individual communities, AHSCP is able to plan and deliver services that are responsive to local circumstances while contributing to the strategic priorities of the IJB. Locality intelligence, including population health data, service performance, demographic trends, community insight and feedback from people with lived experience, informs strategic commissioning by identifying areas of greatest need, reducing unwarranted variation and supporting the effective targeting of resources. This intelligence enables tAHSCP to move beyond responding to demand and instead focus on prevention, early intervention and reducing health inequalities.

Locality planning also provides the mechanism through which strategic priorities are translated into action within communities. By working collaboratively with primary care, local authority services, the third and independent sectors, community organisations and local people, locality planning supports the development of integrated models of care that strengthen community capacity, promote wellbeing and enable more people to live independently at home. In doing so, locality working plays a critical role in delivering AHSCP's ambitions for prevention and proactive care, care closer to home and whole-system transformation, ensuring that improvements in population health are shaped by the needs and assets of local communities.

The table below shows a summary of locality-based service delivery and activity across Angus, rather than a formal performance table showing comparisons between localities.

Area	Locality Performance Evidence	Commentary
Enhanced Community Support (ECS) Hubs	All four locality hubs have been operational for more than one year.	Demonstrates consistent access to mental health and wellbeing support across all Angus localities.
Neurodevelopmental Pathway	The new pathway allocates support equally across localities, with referrals split between North and South Angus localities. More than 200 people had been contacted by December 2025.	Supports equitable access to neurodevelopmental services across Angus.
The Beacon Community Wellbeing Centre	Service users access support from all areas of Angus, with the highest activity reported from Arbroath, Forfar,	Indicates strong utilisation of community mental health and

	Montrose, Carnoustie and Kirriemuir. Between April and December 2025, 595 individuals received support and over 2,600 support sessions were delivered.	wellbeing support across multiple localities.
Healthy Steps Angus	33 active walking groups operate across Angus, with a pilot lunchtime health walk introduced in Forfar in January 2026.	Supports locality-based prevention and wellbeing activity.
Future Care Planning	A place-based test of change has been established within Brechin Health Centre to support people aged 75+ through improved anticipatory care planning.	Learning from the Brechin locality is intended to inform wider implementation across Angus.
Falls Prevention Service	Between June and December 2025, 437 referrals were managed across Angus, with 85% of referred individuals contacted within two working days.	Demonstrates responsive community-based support available across all localities.
Mental Health Peer Support	Activity is delivered through Penumbra in the South and Hillcrest Futures in the North, with 696 referrals received between July and September 2025. All referrals were contacted within three days.	Performance indicates good accessibility and responsiveness across both North and South localities.

As part of the SCP 2023-2026 each locality has a detailed improvement plan. These are available on Angus HSCP website at this link. These improvement plans detail improvement actions and how these link to the national health and wellbeing outcomes.

Locality-level information is available throughout this report and demonstrates evidence of service activity and access across Angus.

9. Finances and Best Value

Angus IJB reported a positive financial outturn for 2025/26, achieving an overall surplus of £1.013 million against total income of £255.011 million.

Throughout the year, AHSCP continued to operate within a challenging environment characterised by increasing demand for health and social care services, workforce pressures, inflationary cost increases and ongoing financial uncertainty across the public sector. Despite these pressures, the IJB maintained financial stability through a combination of careful financial management, operational underspends, and the effective use of resources. Operational service underspends of £1.958 million were partially offset by the planned use of earmarked reserves, resulting in the reported year-end surplus.

The IJB ended the financial year with reserves of £20.817 million, an increase from £19.804 million at the start of the year, providing short-term resilience to support future financial pressures while recognising that longer-term financial sustainability remains a significant challenge.

The IJB's medium-term financial planning highlights ongoing structural funding gaps, and work will continue through the Strategic Commissioning Framework 2026-2036 and associated financial plans to ensure services remain affordable, sustainable and focused on achieving the best outcomes for the people of Angus within the resources available.

Angus IJB considers that the scale of change being progressed through AHSCP means that the vast majority of resources and services are subject to some form of service review and continuous improvement, including significant improvement and change work such as the redesign of local Urgent Care Services and the development of Minor Injury Services and the Home First Service. Together with the use of corporate systems provided by Angus Council and NHS Tayside, this supports the IJB in demonstrating its commitment to delivering Best Value from the resources available.

The IJB believes that the refreshed Strategic Commissioning Framework (2026-2036), supported by Strategic Plans and annual work plans, continues to provide a framework that underlines this commitment to delivering Best Value and will support delivery and provide a basis for monitoring progress, subject to approval at the June.

The IJB Unaudited Annual Accounts for 2025/26 also provide a comprehensive overview of the 2024/25 financial situation and year end budget position as presented to the IJB Audit Committee on 25 June 2025. The final Audited Account Accounts and associated action plan will be presented to the IJB Audit Committee later this year following audit by the IJB's external auditors.

Although a surplus was achieved, this should not be interpreted as reducing the long-term financial challenge. The medium-term financial outlook continues to require fundamental redesign of services and delivery of the Strategic Commissioning Framework.

10. Workforce

The workforce is AHSCP's most important asset and is fundamental to delivering high-quality, safe and sustainable health and social care services. Achieving the ambitions of the Strategic Commissioning Framework 2026-2036 depends not only on maintaining workforce capacity but also on developing new roles, new skills and new ways of working that support integrated, person-centred models of care. As services continue to evolve, workforce planning is increasingly focused on ensuring the right people, with the right skills, are available in the right place at the right time to meet the changing needs of the population.

Alongside recruitment and retention, AHSCP continues to strengthen succession planning, leadership development and workforce redesign to build resilience for the future. Particular attention is being given to recruiting and retaining staff within professions experiencing national workforce shortages, supporting the wellbeing of colleagues, reducing reliance on temporary staffing where appropriate, and expanding multidisciplinary approaches that make best use of the skills and expertise available across health and social care. By investing in its workforce and creating opportunities for innovation, learning and professional development, AHSCP is strengthening its ability to deliver transformational change while ensuring services remain safe, effective and sustainable for the people of Angus.

During 2025/26 AHSCP published a new Workforce Plan 2025-2029 (Report IJB 81/25), which provided assurance on delivery of the previous Workforce Plan (2022-2025) and set out priorities for the future workforce.

The report highlights that workforce remains a critical strategic enabler for delivering the Angus IJB Strategic Commissioning Framework priorities. However, like many health and social care systems across Scotland, Angus faces continued challenges associated with:

- Recruitment and retention pressures.
- An ageing workforce.
- Workforce availability within health and social care services.
- Increasing service demand linked to demographic change and complexity of need.
- Sustainability of commissioned care providers

Key Workforce Developments During 2025/26

Area	Progress and Position
Workforce Planning	A new Workforce Plan 2025-2029 was approved to support delivery of the Strategic Commissioning Plan and future Strategic Framework.
Governance	Workforce oversight continued through the Workforce Steering Group, bringing together Angus Council, NHS Tayside and partner organisations to improve workforce planning and forecasting.
Recruitment and Retention	Ongoing monitoring of turnover, vacancies and workforce supply across both Angus Council and NHS Tayside employed services. Recruitment challenges remain a key risk across the sector.
Absence Management	Workforce data continues to monitor sickness absence across both Angus Council and NHS-employed staff, supporting targeted management action and wellbeing initiatives.
Commissioned Services	Continued focus on workforce sustainability within commissioned care-at-home and care home sectors, recognising ongoing national recruitment pressures.
Future Workforce Risks	Workforce modelling and projected turnover analysis have been incorporated into the new Workforce Plan to support longer-term service sustainability.

Workforce Contributions to Strategic Priorities

Several workforce developments during 2025/26 directly supported service transformation:

- Three new **Advanced Nurse Practitioners** were recruited to support the Angus Home First model and Care Closer to Home agenda.
- Further expansion of multidisciplinary working was planned through the introduction of **Allied Health Professionals into Home First Services**.
- Workforce development continued across prevention, mental health, substance use recovery, community support and anticipatory care services.

Workforce Governance Assurance

The 2025/26 Clinical, Care and Professional Governance Assurance Report identified workforce sustainability as one of the IJB's Strategic risks. Despite these pressures, governance arrangements

were assessed as providing **Reasonable Assurance**, with workforce risks actively monitored through strategic and operational groups and supported through delivery of the Workforce Plan.

Summary Statement

During 2025/26, AHSCP maintained a strong focus on workforce sustainability through implementation of its new Workforce Plan 2025-2029. Progress included strengthened workforce governance, recruitment of key clinical roles to support service redesign, continued monitoring of workforce capacity and absence, and development of longer-term workforce planning arrangements. While workforce pressures remain one of the IJB's most significant strategic risks, the workforce is also recognised as one of its greatest strategic enablers. Continued investment in leadership, succession planning, workforce wellbeing, multidisciplinary working and innovative workforce models will be essential to delivering the transformation required to improve population health, shift the balance of care and ensure the long-term sustainability of health and social care services.

11. Communication and Engagement

During 2025/26, Angus IJB and AHSCP undertook a wide range of communication and engagement activities to involve staff, service users, carers, partners and the public in shaping health and social care services. This work was guided by the Communication and Engagement Strategic Framework 2023-2026, which was designed to support co-design, improve awareness of services, and ensure stakeholders had opportunities to influence decisions. AHSCP worked closely with Angus Council, NHS Tayside, Healthcare Improvement Scotland, Community Planning Partners and Voluntary Action Angus to maximise engagement opportunities.

AHSCP reported that communication and engagement activities supported a range of service developments and strategic priorities, including Prevention and Proactive Care, Care Closer to Home, and Mental Health, Learning Disability and Substance Use Recovery. Engagement took place with staff, unpaid carers, people using services and the wider community to ensure people were informed about developments and able to share their views. By October 2025, the IJB reported that most actions within the Communication and Engagement Framework were either completed or on track, and the IJB was asked to recognise the significant efforts made by AHSCP to involve stakeholders in decision-making.

Communication activity also included proactive use of the AHSCP website, IJB briefings, media releases, social media, podcasts, animations, feedback mechanisms such as Care Opinion, and public consultation platforms. The organisation continued to publish summaries of IJB meetings, promote opportunities for public participation through its “Get Involved” and engagement platforms, and support a culture of kindness, compassion and person-centred engagement across services. The IJB concluded that there was a reasonable level of assurance that communication and engagement commitments were being delivered during 2025/26.

12. Equalities

Equality is considered throughout commissioning, service redesign and decision making through routine Equality Impact Assessments, ensuring services are designed to reduce inequalities rather than inadvertently widen them.

Angus IJB undertook a comprehensive review of equality performance and approved both an Equalities Mainstreaming Report 2025-2027 and new Equality Outcomes 2025-2029. The IJB concluded that there had been sufficient progress to provide a “substantial level of assurance" regarding equalities mainstreaming across AHSCP. The Equalities Mainstreaming Report examined how equality had been embedded into the planning, commissioning and delivery of health and social care services across Angus. The review included:

- Demographic analysis of Angus and its protected characteristic groups.
- Health inequalities and socio-economic disadvantage.
- Support provided to unpaid carers.
- Partnership working with Angus Council, NHS Tayside and other organisations.
- Engagement and consultation activity.
- Equality Impact Assessments (EIAs).
- Staff training, development and organisational culture.
- Service monitoring and access to information.
- Key findings

AHSCP Strategic Commissioning Plan 2023-2026 places equality at the centre of service planning and recognises major challenges including:

- An ageing population
- Persistent health inequalities
- Growing numbers of people with long-term conditions
- Increasing complexity of care needs

AHSCP has continued to mainstream equality through day-to-day operations, ensuring that consideration of protected characteristics becomes part of routine decision-making rather than a separate activity. It also notes that the organisation had responded to recommendations arising from a 2022 Equality and Human Rights Commission review of Health and Social Care Partnerships.

Following engagement with service users, staff and partners, Angus IJB approved two strategic equality outcomes:

- Services will be accessible, inclusive and responsive to the needs of people with protected characteristics.

- The organisation will promote an equality-driven and inclusive culture, actively challenging discrimination and supporting fairness.

13. Conclusion

During 2025/26 AHSCP continued to operate within one of the most challenging environments experienced since integration. Despite sustained financial pressures, increasing complexity of need, workforce shortages and growing demand, AHSCP maintained safe services, strengthened governance, delivered financial stability and continued to progress its strategic priorities. Significant progress has been made in prevention, Home First, community mental health, strategic planning and governance. Nevertheless, considerable challenges remain around workforce sustainability, care market resilience, financial sustainability and shifting the balance of care at sufficient pace. Overall, the Chief Officer is satisfied that AHSCP has maintained a reasonable level of assurance during 2025/26 while laying stronger foundations for long-term transformation through the Strategic Commissioning Framework 2026–2036.

14. Looking Ahead

The challenges facing health and social care are expected to continue over the coming years, with increasing demand, demographic change, workforce pressures and financial constraints requiring continued transformation of how services are planned, commissioned and delivered. Angus IJB recognises that maintaining high-quality, sustainable services will require ongoing collaboration across organisational boundaries, with a continued focus on prevention, early intervention and supporting people to live independently within their own homes and communities.

The approval of the Strategic Commissioning Framework 2026 - 2036 provides a clear long-term framework for transforming health and social care services across Angus. The refreshed Framework sets out an ambitious vision centred on improving population health, reducing inequalities, strengthening community capacity and delivering integrated, person-centred care that is sustainable for future generations. Delivery will continue to be underpinned by evidence, engagement with communities and partners, and a robust approach to governance, performance and financial stewardship.

During 2026/27 AHSCP will focus on delivering the priorities set out within the Strategic Commissioning Framework 2026-2036 and supporting the wider programme of whole-system reform across Tayside. Key areas of focus will include:

- Accelerating the shift towards prevention and proactive care to improve population health and reduce avoidable demand on health and social care services.
- Expanding integrated community-based models of care, including Home First and multidisciplinary neighbourhood services, to support more people to remain independent at home.
- Strengthening primary and community care as the foundation of a sustainable health and social care system.
- Improving outcomes for people experiencing mental ill health, learning disabilities and substance use through integrated, recovery-focused and person-centred services.
- Continuing to develop workforce capacity, capability and leadership to support new models of care and improve organisational resilience.
- Delivering financially sustainable services through strategic commissioning, service redesign and effective use of resources.
- Further strengthening governance, quality assurance, performance management and partnership working to provide robust assurance to the IJB and the people of Angus.

AHSCP also recognises that delivering sustainable improvement requires a whole-system approach. Working collaboratively with NHS Tayside, Angus Council, primary care, the independent and third sectors, communities and people with lived experience will remain fundamental to achieving lasting change. By continuing to shift the balance of care towards prevention, early intervention and community-based support, AHSCP aims to improve outcomes, reduce inequalities and ensure that health and social care services remain responsive, resilient and sustainable.

While the scale of the challenge remains significant, Angus IJB enters the next phase of its strategic journey with a clear vision, strengthened governance arrangements and a commitment to continuous improvement. Building on the progress achieved during 2025/26, AHSCP will continue to work with its staff, partners and communities to deliver high-quality, person-centred health and social care services that meet the changing needs of the population, now and into the future.