
Report To: Inverclyde Integration Joint Board Audit Committee **Date:** 11 September 2018

Report By: Louise Long
Corporate Director (Chief Officer)
Inverclyde Health & Social Care Partnership **Report No:**
IJBA/08/2018/LA

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Subject: IJB RISK MANAGEMENT UPDATE

1.0 PURPOSE

- 1.1 The purpose of this report is to provide an update to the Audit Committee on the status of the IJB Strategic Risk Register.

2.0 SUMMARY

- 2.1 The Risk Registers will be fully reviewed at least twice a year by the Inverclyde HSCP Senior Management Team with any recommended changes taken to this Committee for approval.
- 2.2 The IJB risk register was initially developed by the Board at a development session a few months after the IJB went live in 2016. It is proposed that this exercise is revisited again to refresh the risk register to reflect the current position of the IJB.

3.0 RECOMMENDATIONS

- 3.1 It is recommended that the Committee:
1. Reviews the content of this report;
 2. Notes any High/Red Risks contained on other HSCP Risk Registers;
 3. Agrees that a development session be arranged for the IJB to review the current risk register and that the updated register is reported to the IJB for approval by January 2019, and
 4. Agrees that going forward, the Audit Committee will review the IJB Strategic Risk Register annually with a six monthly update to the Committee reflecting all Red/Very High Risks.

Louise Long,
Corporate Director (Chief Officer)
Inverclyde HSCP

4.0 BACKGROUND

- 4.1 The Integration Joint Board (IJB) Strategic Risk Register covers the risks specific to the IJB and its operations. In addition, the Health and Social Care Partnership (HSCP) has an Operational Register for Social Care and Health Service operations and a Project Risk Register for the new Greenock Health Centre Capital Project.
- 4.2 The IJB Risk Register will be formally reviewed by the Inverclyde HSCP Senior Management Team at least twice a year. The IJB Risk Register and any changes will come to the IJB Audit Committee. This report details the current position in relation to the IJB Risk Register.

5.0 REVIEWING THE IJB RISK REGISTER

- 5.1 The IJB Risk Register was last reviewed and agreed by the IJB Audit Committee on 30 January 2018. The register was reviewed and last updated by officers in August 2018. None of the risk scores are proposed to be changed at this time but the controls and mitigating factors narrative on risks 4 and 6 have been updated to reflect the current position on each. An updated version of the register is enclosed at Appendix A.
- 5.2 The IJB risk register was initially developed by the Board at a development session a few months after the IJB went live in 2016. It is proposed that an IJB development session be arranged to give the IJB the opportunity to review and update their risk register to reflect the current position of the IJB. The updated register should be considered by the IJB for approval by the end of January 2019. Thereafter the Audit Committee will review the IJB Strategic Risk Register annually with a six monthly update to the Committee reflecting all Red/Very High Risks

6.0 SIGNIFICANT RISKS ON OTHER HEALTH AND SOCIAL CARE RISK REGISTERS

- 6.1 The HSCP Operational Risk Register and Greenock Health Centre Capital Project Risk Register have their own reporting lines.
- 6.2 All Very High or Red Rated risks on either the HSCP Operational Risk Register or the Project Risk Register for the New Greenock Health Centre are also reported to the IJB Audit Committee for noting.
- 6.3 HSCP Operational Risk Register – Very High/Red Risks

The SMT in July 2018 reviewed the current register and there is one risk currently classified as Very High/Red at this time.

- Ref 2 - Legal & Regulatory - risk around meeting statutory requirements in relation to rising demand and staff turnover. Inability to cover some duties. An action plan is in place to address this in the short term

6.4 New Greenock Health Centre Capital Project Risk Register – Very High/Red Risks

At the August meeting of the Project Board one risk on the register was ranked very high/red.

- Ref A5 - Decoupling of Projects - The Greenock Health Centre project is part of a bundle of 3 projects with Clydebank and Stobhill. The bundling reduces the overall costs of the 3 projects. It appears that there are some issues with the bundling which may increase the overall costs of the projects. Discussions are ongoing with NHSGG&C Capital Group and the providers to minimise any additional costs and mitigate this risk.

7.0 IMPLICATIONS

7.1 FINANCE

There are no direct financial implications within this report. Financial risks are identified in the Registers.

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs / (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From	Other Comments
N/A					

LEGAL

7.2 There are no specific legal implications arising from this report.

HUMAN RESOURCES

7.3 There are no specific human resources implications arising from this report.

EQUALITIES

7.4 There are no equality issues within this report.

Has an Equality Impact Assessment been carried out?

7.4.1

	YES (see attached appendix)
√	NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

7.4.2 How does this report address our Equality Outcomes?

There are no Equalities Outcomes implications within this report.

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	None
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	None

People with protected characteristics feel safe within their communities.	None
People with protected characteristics feel included in the planning and developing of services.	None
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	None
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	None
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	None

7.5 CLINICAL OR CARE GOVERNANCE IMPLICATIONS

There are no governance issues within this report.

7.6 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes?

There are no National Wellbeing Outcomes implications within this report.

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	None
People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community	None
People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	None
People using health and social care services are safe from harm.	None
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	None
Resources are used effectively in the provision of health and social care services.	None

8.0 CONSULTATION

8.1 This report has been prepared by the Chief Financial Officer of the IJB in consultation with Heads of Service and the Chief Officer.

DRAFT IJB RISK REGISTER/RISK MAP FORMAT

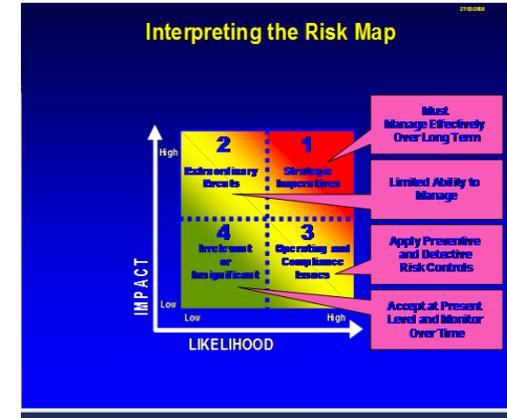
Organisation	Inverclyde Integration Joint Board
Date Last Reviewed by IJB/Audit Committee	30/01/2018
Date Last Reviewed by Officers	^^

Risk No	*Description of RISK Concern (x,y,z)	Risk Score pre Mitigations	Current Controls	IMPACT	L'HOOD	Quantile	Risk Score	Additional Controls/Mitigating Actions & Time Frames with End Dates	Who is Responsible? (name or title)
1	<p>Workforce Sustainability Risk due to changing workforce demographics & the type of skills required to deliver services in the future the workforce may not have the skill, experience or capacity to deliver the type & quality of services the community needs. This could be compounded by lack of resources available to invest in training our people.</p> <p>Potential Consequences: Don't attract or retain the right people, don't have an engaged & resilient workforce, service user needs not met, strategic plan not delivered, & reputational damage.</p>	16	<ol style="list-style-type: none"> 1. Strategic Plan 2. Workforce Planning 3. Individual development plans 4. Training budgets 5. People Plan 	4	2		8		Head of Strategy and Support Services
2	<p>Performance Management Information Risk due to lack of quality, timeous performance information systems to inform strategic & operational planning & decision making.</p> <p>Potential Consequences: Misallocate resources to non-priority areas, lack of focus, decisions based on anecdotal thinking or biased perspectives, & community needs not met.</p>	20	<ol style="list-style-type: none"> 1. Performance management infrastructure and reporting cycle 2. Regular financial monitoring reports showing performance against budget and projected outturns 3. Locality planning arrangements 4. Robust budget planning processes 5. Quarterly Performance Reviews 6. Data repository regularly updated 7. Quality strategy and self evaluation processes 8. Regular review of Performa reporting frameworks 	3	2		6		Head of Strategy and Support Services
3	<p>Complaints Process Risk of ineffective complaints process.</p> <p>Potential Consequences: Missed opportunities to learn from perceived & real errors or mistakes, missed opportunity to address perceived or real problems at earliest opportunity & possibly leading to more serious complaints & litigation later, services do not respond as they should to service user needs, & reputational damage.</p>	20	<ol style="list-style-type: none"> 1. Complaints process 2. Complaints reporting - including the Annual Complaints report which goes to the Health & Social Care Cttee and the Clinical and Care Governance Group 3. Performance management 4. Service user engagement & feedback processes 5. Complaints handling training 	2	2		4		Head of Strategy and Support Services
4	<p>Financial Sustainability / Constraints / Resource Allocation Risk due to increased demand for services, potentially not aligning budget to priorities, or anticipated future budget cuts to our funding partners which means that the level of funding provided by the funding partners to the IJB becomes insufficient to meet national & local outcomes & to deliver Strategic Plan Objectives</p> <p>Potential Consequences: IJB unable to deliver Strategic Plan objectives, reputational damage, dispute with Partners, needs not met, risk of overspend on Integrated Budget</p>	20	<ol style="list-style-type: none"> 1. Strategic Plan 2. Due Diligence work 3. Close working with Council & Health when preparing budget plans 4. Regular budget monitoring reporting to the IJB 5. Regular budget reports and meetings with budget holders 6. Regular Heads of Service Finance meetings 7. Close working with other HSCPs to deliver a whole system approach to financial planning and delivery 8. Medium Term Finance Plan agreed 	4	3		12		

Risk No	*Description of RISK Concern (x,y,z)	Risk Score pre Mitigations	Current Controls	IMPACT Rating (A)	L'HOOD Rating (B)	Quantile	Risk Score (A*B)	Additional Controls/Mitigating Actions & Time Frames with End Dates	Who is Responsible? (name or title)
5	<p>Effective Governance Risk through partner organisational restructures causing additional governance complexity, not having the right skills mix on the IJB, lack of clarity of role & ability to make decisions, lack of effective horizon scanning, inability to review the performance of Board, poor communications, or perceived lack of accountability by the public.</p> <p>Potential Consequences: Poor decision making, lack of critical skills lead to 'blind spots' or unanticipated risks, partners disengage from the IJB, dysfunctional behaviours, fail to deliver the strategic plan.</p>	16	<ol style="list-style-type: none"> 1. IJB themed development sessions carried out throughout the year to update members on key issues 2. Code of Conduct for members 3. Standards Officer appointed 4. Chief Officer is a member of both Partner CMT's & has the opportunity to influence any further governance mechanism changes 5. Regularly planning/liaison meetings between Chief Officer and Chair/Vice Chair 6. Internal and External Audit reviews of governance arrangements 	4	2		8	<p>IJB members development/induction programme being developed.</p> <ul style="list-style-type: none"> •New Clinical Care Governance developed •Clinical care post developed 	Chief Officer
6	<p>Understanding Needs of the Community Risk due to lack of quality data about the needs of service users in order to inform decision making & allocation of resources to deliver the Strategic Plan</p> <p>Possible consequences: Poor quality decision making, don't address health inequalities or understand root causes of why they persist, lack of understanding about future needs & service demands, unable to allocate resources appropriately to deliver the strategic plan, high levels of disease, drug & alcohol misuse consume ever more resources.</p>	25	<ol style="list-style-type: none"> 1. Community Engagement led by 3rd sector partners 2. Health Education Programmes 3. Locality planning to enhance local targeting of services 4. Strategic Planning Group 5. Equalities Outcomes as part of the Strategic Plan 6. Strategic Needs Assessment Work which is advanced at a community and care group level 7. The above informs work across care groups and partnership working 	4	2		8	<p>Develop a Community Engagement Strategy for the HSCP - aligned with the CPP - Underway and being informed by the review of the Strategic Plan- work now due to be complete by Dec 2018</p>	Head of Strategy and Support Services
7	<p>Relationship with Acute Partners Risk due to partnership breakdown caused by different priorities & pressures from external stakeholders, lack of trust or effective communication.</p> <p>Potential Consequences: relationship breakdown, dysfunctional working relationships, cannot affect or influence change or priorities, resources skewed towards acute care away from preventative, unable to deliver strategic plan.</p>	16	<ol style="list-style-type: none"> 1. HSCP/Acute joint working groups 2. CO on HB CMT along with Acute Colleagues 3. Developing commissioning plans in partnership with Acute colleagues 4. Market Facilitation Statement 	4	3		12	<p>Development of Market Facilitation Plan which will include Acute Sector Provision.</p> <p>Transformational plan and unscheduled care supporting delayed discharge and bed day reduction.</p>	<p>Head of Strategy & Support Services</p> <p>Head of Adult and Community Care</p>
8	<p>Strategic Capacity Risk due to constrained resources within partner organisations, loss of key people, or lack of commitment to IJB priorities</p> <p>Potential Consequences: partners do not engage or consult with IJB, short term pressures mean long term strategic thinking & planning is neglected, poorer health outcomes for the community, do not address long term entrenched health problems, or deliver the strategic plan</p>	16	<ol style="list-style-type: none"> 1. Strategic Planning Process 2. Performance Monitoring 3. Workforce development plan 4. Close working of CO and SMT with Senior Officers of HB and Council 5. Staff Partnership Forum 6. IJB Oversight of performance 7. Planning framework 	4	2		8	<p>Review of Strategic Planning Group underway</p>	Head of Strategy and Support Services
9	<p>Legislative/Policy Developments A risk of further legislative or policy development or change which impacts the IJBs ability to deliver its strategic plan</p> <p>Potential Consequences: IJB unable to deliver Strategic Plan, additional unfunded cost pressures, reputational damage</p>	16	<ol style="list-style-type: none"> 1. Ongoing work of the Strategic Planning Group 2. Close working of the CO and SMT with Senior Officers of HB and Council 3. Horizon scanning through SMT network groups 4. Regular liaison of senior officers with Scottish Government 5. Childrens Services Plan 	4	2		8	<p>Regular analysis of new policies to ascertain possible impacts. Regular discussions at Chief Officers' Group and Strategic Leads Group. Reports will be brought to IJB as required.</p>	Chief Officer

Key: see diagram

- Requires active management.**
High impact/high likelihood: risk requires active management to manage down and maintain exposure at an acceptable level. Very High
- Contingency plans.**
A robust contingency plan may suffice together with early warning mechanisms to detect any deviation from plan. High
- Good Housekeeping.**
May require some risk mitigation to reduce likelihood if this can be done cost effectively, but good housekeeping to ensure the impact remains low should be adequate. Reassess frequently to ensure conditions remain the same. Medium (5-9)
- Review periodically.**
Risks are unlikely to require mitigating actions but status should be reviewed frequently to ensure conditions have not changed. Low



Risk Impact	1	2	3	4	5
	Insignificant	Minor	Moderate	Major	Catastrophic
Financial	<£100k	£100k-£250k	£250k-£500k	£500k-£1,000k	£1,000k>
Reputation	Individual negative perception	Local negative perception	Intra industry or regional negative perception	National negative perception	Sustained national negative perception
Legal and Regulatory	Minor regulatory or contractual breach resulting in no compensation or loss	Breach of legislation or code resulting in a compensation award	Regulatory censure or action, significant contractual breach	Breach of regulation or legislation with severe costs/fine	Public fines and censure, regulatory veto on projects/ withdrawal of funding. Major adverse corporate litigation
Operational/ Continuity	An individual service or process failure	Minor problems in specific areas of service delivery	Impact on specific customer group or process	Widespread problems in business operations	Major service of process failure impacting majority or major customer groups
Likelihood	1	2	3	4	5
	Rare	Unlikely	Possible	Probable	Almost Certain
Definition	Not likely to happen in the next 3 years	Unlikely to happen in the next 3 years	Possible to occur in the next 3 years	Likely to occur in the next year	Very likely to occur in the next 6 months