

Report To:	Inverclyde Integration Joint Board	Date: 14 March 2017
Report By:	Brian Moore, Corporate Director (Chief Officer) Inverclyde Health & Social Care Partnership	Report No: IJB/15/2017/LA
Contact Officer:	Lesley Aird	Contact No: 01475 715381
Subject:	STRATEGIC RISK REGISTER	

#### 1.0 PURPOSE

1.1 The purpose of this report is to seek Integration Joint Board (IJB) approval of the Strategic Risk Register.

#### 2.0 SUMMARY

- 2.1 The IJB approved the Risk Management Policy and Strategy at its meeting of 18 August 2016. The risks and risk scores detailed in the Strategic Risk Register attached as Appendix A were then developed during a facilitated IJB session held on 16 September 2016. The draft Register was then discussed and updated at the Audit Committee of 24 January 2017 and this updated Risk Register is enclosed for IJB consideration and approval.
- 2.2 The enclosed register relates to IJB strategic risks only, separate risk registers are held for all operational activities within the Council and Health Board.

#### 3.0 RECOMMENDATIONS

3.1 It is recommended that the Integration Joint Board:-

(1) discusses and approves the Integration Joint Board Strategic Risk Register in line with the content of this report; and

(2) notes that the register will be a standing item on the Audit Committee agenda and updated as required.

Brian Moore Chief Officer Lesley Aird Chief Financial Officer

## 4.0 BACKGROUND

4.1 It is essential that a robust risk monitoring framework is in place to identify, assess and prioritise risks related to the delivery of services under integration functions, particularly any which are likely to affect the delivery of the Strategic Plan.

## 5.0 STRATEGIC RISK REGISTER

- 5.1 The proposed IJB Strategic Risk Register enclosed at Appendix A sets out an assessment of the likelihood and potential impact of a range of different risks that may directly affect the IJB at a strategic level.
- 5.2 The risks were developed, discussed and initially scored by IJB members at a session facilitated by Zurich Municipal on 16 September 2016. The initial draft Risk Register was considered and refined by the Audit Committee on 24 January 2017.
- 5.3 Risk scores were based on the following risk matrix, agreed as part of the IJB Risk Management Policy and Strategy. Further information on the definition of each of the following is enclosed at Appendix B.

Risk Impact	Likelihood
1 – Insignificant	1 – Rare
2 – Minor	2 – Unlikely
3 – Moderate	3 – Possible
4 – Major	4 – Probable
5 – Catastrophic	5 – Almost Certain

- 5.4 This Strategic Risk Register aims to:
  - Identify risks that pose a threat to the business objectives of the IJB
  - Identify the potential consequences of each risk
  - Recognise the control measures that already exist to address these risks
  - Propose new controls to further mitigate each risk
- 5.5 The Strategic Risk Register is a live document that should be regularly reviewed and updated. As such the Strategic Risk Register, once agreed will be placed as a standing agenda item on the IJB Audit Committee Agenda.
- 5.6 Officers have developed a list of additional control mitigation actions aimed at further minimising the higher scoring IJBs Strategic Risks. The Register enclosed carries a note of the proposed actions, responsible officers and deadline for each action.
- 5.7 The IJB is asked to approve the proposed amended wording for the following risk descriptions.

<u>Risk 2 – Performance Management Information</u> Current Description: "Risk due to lack of quality, timeous performance information systems to inform strategic & operational planning & decision making."

Proposed Description: "Risk due to resource intensive, conflicting performance reporting demands which are inconsistent and can lead to seemingly conflicting data being produced."

Rationale for change: There is a large quantity of timeous, high quality data produced relating to performance information. Problems arise when there are numerous requests for similar data which are phrased in different ways or in different timeframes or contexts which leads to apparently inconsistent poor quality data eg if you analyse bed days over the past week that data is time sensitive and will have changed by the following week. There are numerous examples of this in relation to performance data. Time, context and specific wording of queries are all important, the risk is that these are not managed well and ad hoc queries or reports appear to contradict standing reports and data. This is why the current controls are so vital.

#### Risk 3 – Complaints Process

Current Description: "Risk of ineffective complaints process due to process complexity & the need to put complaints in writing."

Proposed Description: "Risk of ineffective complaints process due to process complexity."

Rationale for change: The revised complaints process allows for verbal complaints.

### 6.0 IMPLICATIONS

#### 6.1 FINANCE

There are no financial implications arising from this report.

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

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

#### HUMAN RESOURCES

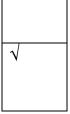
6.3 There are no specific human resources implications arising from this report.

#### EQUALITIES

6.4 There are no equality issues within this report.

Has an Equality Impact Assessment been carried out?

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.

6.5 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

# 6.6 CLINICAL OR CARE GOVERNANCE IMPLICATIONS

There are no clinical or care governance issues within this report.

## 6.7 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	None
health and wellbeing and live in good health for	
longer.	
People, including those with disabilities or long term	None
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	
People who use health and social care services	None
have positive experiences of those services, and	
have their dignity respected.	
Health and social care services are centred on	None
helping to maintain or improve the quality of life of	
people who use those services.	

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

# 7.0 CONSULTATION

7.1 This report has been prepared by the IJB Chief Financial Officer. The Chief Officer and Heads of Service have been consulted.

## 8.0 BACKGROUND PAPERS

8.1 None.

#### DRAFT IJB RISK REGISTER/RISK MAP FORMAT

Date: 24/01/2017	Organisation	Inverclyde Integration Joint Board
	Date:	24/01/2017

	isk √o	*Description of RISK Concern (x,y,z)	IMPAC T	D D	Quartile	Risk Score	Current Controls	Additional Controls/Mitigating Actions & Time Frames with End Dates	Who is Responsible? (name or title)
		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. 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.	4	3		12		Development of a People Plan - end July 2017	Head of Strategy and Support Services
:	2	Performance Management Information Risk due to lack of quality, timeous performance information systems to inform strategic & operational planning & decision making. Potential Consequences: Misallocate resources to non-priority areas, lack of focus, decisions based on anecdotal thinking or biased perspectives, & community needs not met.	3	2		6		Review of Performance reporting frameworks - end July 2017	Head of Strategy and Support Services
:	3	Complaints Process Risk of ineffective complaints process due to process complexity & the need to put complaints in writing. 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.	3	2		6	<ol> <li>Complaints process</li> <li>Complaints reporting - including the Annual Complaints report which goes to the Health &amp; Social Care Cttee and UB</li> <li>Performance management</li> <li>Service user engagement &amp; feedback processes</li> <li>Complaints handling training</li> <li>Complaints Officer</li> </ol>	Transition to new Complaints Processes due to be complete by April 2017	Head of Strategy and Support Services
	4	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 UB becomes insufficient to meet national & local outcomes & to deliver Strategic Plan Objectives Potential Consequences: UB unable to deliver Strategic Plan objectives, reputational damage, dispute with Partners, needs not met, risk of overspend on Integrated Budget	4	З		12		Development of Medium Term Financial Strategy/Plan - end Sept 2017	Chief Financial Officer

APPENDIX A

lisk No	*Description of RISK Concern (x,y,z)	IMPAC T	D L'HOO	Quartile	Risk Score	Current Controls	Additional Controls/Mitigating Actions & Time Frames with End Dates	Who is Responsible? (name or title)
5	Effective Governance Risk through partner organisational restructures causing additional governance complexity, not having the right skills mix on the UB, 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. Potential Consequences: Poor decision making, lack of critical skills lead to 'blind spots' or unanticipated risks, partners disengage from the UB, dysfunctional behaviours, fail to deliver the strategic plan.	4	2			<ol> <li>IJB themed development sessions carried out throughout the year to update members on key issues</li> <li>Code of Conduct for members</li> <li>Standards Officer appointed</li> <li>Chief Officer is a member of both Partner CMT's &amp; has the opportunity to influence any further governance mechanism changes</li> <li>Regularly planning/liaison meetings between Chief Officer and Chair/Vice Chair</li> <li>Internal and External Audit reviews of governance arrangements</li> </ol>		Chief Officer
6	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 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.	4	2			<ol> <li>Community Engagement</li> <li>Health Education Programmes</li> <li>Locality planning to enhance local targeting of services</li> <li>Strategic Planning Group</li> <li>Equalities Outcomes as part of the Strategic Plan</li> <li>Strategic Needs Assessment Work which is advanced at a community and care group level</li> <li>The above informs work across care groups and partnership working</li> </ol>	Develop a Community Engagement Strategy for the HSCP - aligned with the CPP - end Dec 2017	Head of Strategy and Support Services
7	Relationship with Acute Partners Risk due to partnership breakdown caused by different priorities & pressures from external stakeholders, lack of trust or effective communication. 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.	4	3			<ol> <li>CO on HB CMT along with Acute Colleagues</li> <li>Developing commissioning plans in partnership with Acute colleagues</li> </ol>	Development of Market Facilitation Plan - Sept 2017 Development of Commissioning Plan for Acute - Sept 2017	Head of Strategy & Support Services Head of Adult and Community Care
8	Strategic Capacity Risk due to constrained resources within partner organisations, loss of key people, or lack of commitment to UB priorities Potential Consequences: partners do not engage or consult with UB, 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	4	2		8	<ol> <li>Strategic Planning Process</li> <li>Performance Monitoring</li> <li>Workforce development plan</li> <li>Close working of CO and SMT with Senior Officers of HB and Council</li> <li>Staff Partnership Forum</li> <li>IJB Oversight of performance</li> <li>Planning framework</li> </ol>		Head of Strategy and Support Services
9	Legislative/Policy Developments A risk of further legislative or policy development or change which impacts the JBs ability to deliver its strategic plan Potential Consequences: JB unable to deliver Strategic Plan, additional unfunded cost pressures, reputational damage	4	2		8	<ol> <li>Ongoing work of the Strategic Planning Group</li> <li>Close working of the CO and SMT with Senior Officers of HB and Council</li> <li>Horizon scanning through SMT network groups</li> <li>Regular liaison of senior officers with Scottish Government</li> <li>Childrens Services Plan</li> </ol>		Chief Officer

## Unacceptable/Requires active management.

High impact/high likelihood: risk requires active management to Very High manage down and maintain exposure at an acceptable level. (16-25)

## Issue/Contingency plans.

A robust contingency plan may suffice together with early warning High mechanisms to detect any deviation from plan. (10-15)

## Adequate/Good Housekeeping.

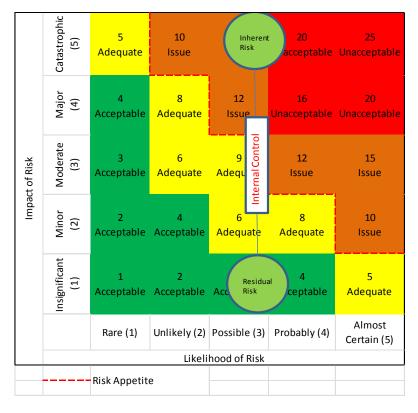
May require some risk mitigation to reduce likelihood if this can be done cost effectively, but good housekeeping to ensure the impact remains low should be adequate. Reassess frequently to ensure conditions remain the same.

## Acceptable/Review periodically.

Risks are unlikely to require mitigating actions but status should be Low reviewed frequently to ensure conditions have not changed. (1-4)

#### Interpreting the Risk Map Must Manage Effectively **Over Long Term** Extraordinary Strategic Limited Ability to Events Imperatives Manage 3 Apply Preventive **Irrelevant Operating and** and Detective **IMPACT** Compliance **Risk Controls** Insignific ant Issues Accept at Present Low High Level and Monitor **Over Time** LIKELIHOOD

## APPENDIX B



# Inverclyde Integration Joint Board Risk Scoring Guide

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	regulation or legislation with	Public fines and censure, regulatory veto on projects/ withdrawal of funding. Major adverse corporate litigation
Opertional/ 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	, , ,,	Possible to occur in the next 3 years	Likely to occur in the next year	Very likely to occur in the next 6 months