





Meeting of East Renfrewshire Integration Joint Board	Performance and Audit Committee
Held on	25 September 2019
Agenda Item	9
Title	IJB Strategic Risk Register Update

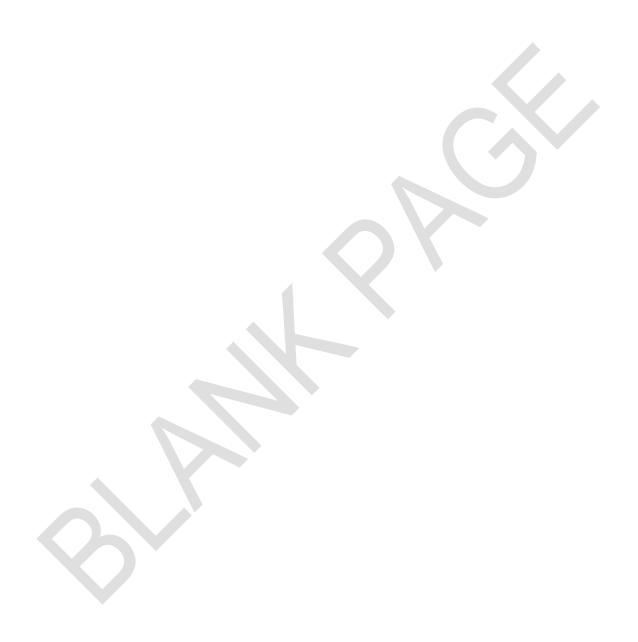
Summary

This report provides the Performance and Audit Committee with an update on the IJB Strategic Risk Register.

Presented by	Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)
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Action Required

Performance and Audit Committee is asked to note and comment on the IJB Strategic Risk Register.



EAST RENFREWSHIRE INTEGRATION JOINT BOARD

PERFORMANCE AND AUDIT COMMITTEE

25 September 2019

Report by Chief Financial Officer

IJB STRATEGIC RISK REGISTER UPDATE

PURPOSE OF REPORT

1. This report provides the Performance and Audit Committee with an update on the IJB Strategic Risk Register.

RECOMMENDATION

2. Performance and Audit Committee is asked to note and comment on the IJB Strategic Risk Register.

BACKGROUND

- 3. In accordance with the agreed monitoring policy this report provides the Performance and Audit Committee with an update on the strategic risk register.
- Good practice in the area of risk management suggest that a risk register should contain between six to eight of the most significant risk to make it a useful working document.
- 5. The risk register uses a simple, clear and effective 4 x 4 likelihood and severity risk matrix as shown below.

Risk levels considering Likelihood and Severity

Likelihood	Score								
Certain	4	Low (Gree	en)	Medium (Yell	ow)	High (Red)		High (Red)
Likely / probable	3	Low (Gree	en)	Medium (Yell	low)	Medium (Yellow)		High (Red)
Possible/could happen	2	Low (Gree	en)	Low (Green)		Medium (Yellow)		Medium (Yellow)	
Unlikely	1	Low (Gree	en)	Low (Green)		Low (Gree	n)	Low (Gree	en)
Impact		Minor	1	Significant	2	Serious	3	Major	4

6. In normal circumstances the policy states the tolerance for risk is as follows:

Risk Score	Overall rating
11-16	High/Red/Unacceptable
5-10	Medium/Yellow/Tolerable
1-4	Low/Green/Acceptable

REPORT

7. The Strategic Risk Register is attached as Appendix 1.

New Risks

8. No new risks have been added since the risk register was last reported to Performance and Audit Committee in June.

Updated / Removed Risks

- 9. Four risks have been updated, a summary of changes is noted below:
 - No. 1. Death or significant harm to service user / patient: The Adult Support & Protection (ASP) Improvement Plan has been finalised and was agreed at the APC committee on 16 September 2019. We have recruited to the post of Lead Officer Policy and Practice Development which is a newly created post and will provide a dedicated training resource for adult services.
 - No 3. Child Protection, Adult Protection and Multi-Agency Public Protection Arrangements: Advice from PVG Scotland to the Council has been that rolling PVG checks are not required, however, the Care Inspectorate advised that registered services should be undertaking this. We have therefore revised the proposed risk control measure from three to five yearly rolling checks and have asked that the corporate HR team build this into their work plan.
 - No. 6 Access to Primary Care: Following the discussion at the last Performance and Audit Committee, the wording of this risk has been updated to more accurately reflect that increased service demand was not exclusively due to high numbers of elderly people in retirement and care homes but was also affected by increasing numbers of young people.
 - No. 11. In-house Care at Home: Additional care at home staff have been recruited and the HSCP will continue to recruit in line with service demand. The new medication policy has been adopted and training will commence in September. Policy implementation will be tested in a small scale pilot. This risk will be updated following receipt of the Care Inspectorate report on the most recent inspection of the service.
- 10. Risks scores have been reviewed, however no changes have been made to the scores.

Post Mitigation - Red and Significant Risks Exception Report

11. Risks which score between 11-16 and rated as High/Red/Unacceptable and those which the Health and Social Care Partnership Management Team considers significant, following mitigation, should be brought to attention of the Performance and Audit Committee by an 'exception report'.

- 12. Financial Sustainability remains a high/red risk as last reported. This is still considered red post mitigation reflecting the current economy and unknown Brexit implications. There remains the future year risk that the HSCP could become unsustainable due to one of the following causes:
 - Unable to deliver in full the existing savings and achieve new savings to deliver a balanced budget
 - Unable to influence future funding to recognise demographic & other pressures, or realise future efficiencies & savings
 - Implications from hosted services
 - Prescribing volatility
- 13. The In House Care at Home Service and Failure of a Provider risks are scored at 9 after mitigation is taken into account. However these are considered significant given the potential impact on service delivery.

CONCLUSIONS

14. The IJB Strategic Risk register has been reviewed and changes made to four risks.

RECOMMENDATIONS

15. Performance and Audit Committee is asked to note and comment on the IJB Strategic Risk Register.

REPORT AUTHOR AND PERSON TO CONTACT

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September 2019

Chief Officer, IJB: Julie Murray

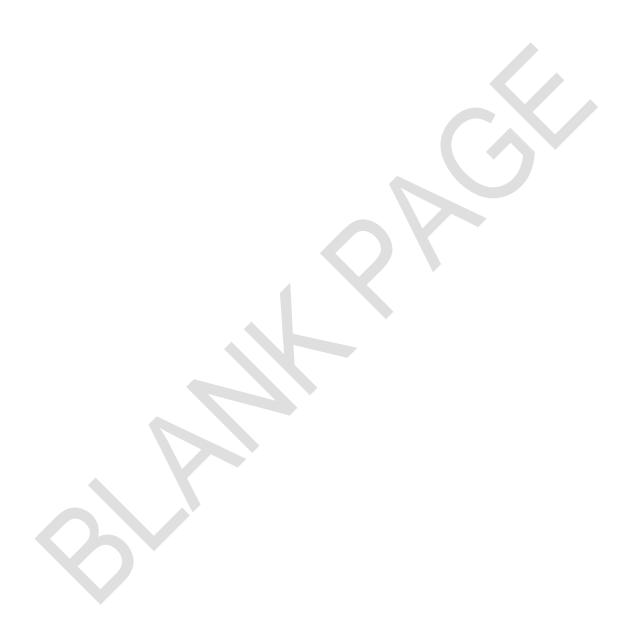
BACKGROUND PAPERS

PAC Paper: June 2019: IJB Strategic Risk Register Update https://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=24703&p=0

PAC Paper: March 2019: IJB Strategic Risk Register Update https://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=24115&p=0

PAC Paper: November 2018 IJB Strategic Risk Register Update https://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=23475&p=0

IJB Paper: August 2016: Risk Management Policy and Strategic Risk Register http://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=17355&p=0



EAST RENFREWSHIRE INTEGRATION JOINT BOARD

STRATEGIC RISK REGISTER

DATE ORIGINATED: 09.11.2015

DATE REVIEWED: 17.09.2019

	No.	Risk	Risk	Risk Control Measures		ssment of		Proposed Risk Control	Completion	Assessi	ment of R	esidual	Risk
Ref		Status S/C/N	(Threat/Opportunity to achievement of business	currently in Place (need to be SMART e.g. detail of	Risk Scor	As it is nov e Overall		Measures (should be SMART with detail	date for proposed	•	Risk proposed co		Owner
		(Same, Changed, New)	objective)- include the consequence of the risk in this description)	what type of training took place with dates in evidence column	11-16 5-10 1-4	HIGH MEDIU LOW	M	included)	Risk Control Measure		res implem	ented)	
					Likelihood (probability) L	Impact (Severity) I	Risk Score (LxI)			Likelihood (probability) L	Impact (Severity) I	Risk Score (LxI)	
	1	S	Death or significant har	m to service user / patient									
			Risk of death or significant harm to a service user/patient as a result of HSCP actions. Consequences could include: - loss of life or long term damage and impact on service user & family - possible perception of failure of care - poor workforce morale - reputational damage	Quality assurance of adult support and protection has identified a number of issues for improvement. Improvement Plan in place and new pathway to manage ASP referrals and investigations implemented. Refresher training for Council Officers and frontline managers delivered. Risk assessments for service users are carried out by staff as and when required Statutory inspection reports Senior Manager ASP responsibility for chairing Case Conferences and leading on self-evaluation and audit activity. Some refresher	3	4	12	Introduction of new practice standards and new programme of single agency audit commencing September 2019	31/09/2019	2	4	8	Head of Adult Health and Social Care Localities / Chief Social Work Officer

				training delivered									
				Council officer and managers									
				forums established									
				Risk assessment is now an									
				integral part of assessment									
				process									
				Appointment of new Chair of APC (Apr'19)									
				Priorities and proposal for									
				new structure and increased									
				frequency of APC meetings agreed (06.06.19)									
				ASP improvement plan –									
				finalised at APC committee									
				16.7.19									
				Dedicated trainer for adult									
				services appointed									
				(05.09.2019)									
4.4	2	S	Historical Sexual Abuse										
				Adult Protection Committee and Child Protection				Identified leads in HSCP will	Ongoing				
				Committee have been sighted				work alongside legal services to manage the progress of any					
				on these issues.				allegations/claims made					
				Clear process for managing				Public Protection sub group to	31/03/2020				Chief Social
				historical cases and protocol	2	4	8	quality assure training and	31/03/2020	1	4	4	Work
				in place with Legal Services.				awareness raising for staff					Officer
				Risk although low may be									
				difficult to determine due to									
				historical nature									

4.1	3	S	Child Protection, Adult	protection and Multi-Agency Publ	ic Protec	tion Arran	gements						
			Inconsistent	The operation of Child				Introduction of new practice	31/09/2019				
			assessment and	Protection, Adult Protection				standards and new					
			application of the	committees and MAPPA's				programme of single agency					
			public protection	meetings to deal with the				audit commencing September					
			agenda (Child	strategic and practice issues.				2019					
			Protection, Adult										
			protection and Multi-	Senior Manager ASP				Engagement with 4 social	31/12/2019				
			Agency Public	responsibility for chairing Case				workers not yet vetted to					
			Protection	Conferences and leading on				NPPV status					
			Arrangements-	self-evaluation and audit									
			MAPPA) may result in	activity.				Introduce rolling review of	31/03/2020				
			risk of children or					PVGs on 5 yearly basis					
			vulnerable adults	Council officer and managers									
			being harmed and lead	forums established									
			to non-compliance										
			with legislative	Risk assessment is an integral									
			standards.	part of assessment process									
				Now Chair of ADC appointed									
				New Chair of APC appointed Apr '19									Chief Social
				Αρι 19	2	4	8			1	1	4	Work
				PVG scheme in place	2	4	0			1	4	*	Officer
				1 vd scheme in place									Officer
				Partnership working at									
				advanced stage with Police									
				Scotland, NHS, Scottish Prison									
				Service and other statutory									
				partners.									
				The extension of MAPPA to									
				include Category 3 violent									
				offenders - Risk of Serious									
				Harm training completed.									
				Job descriptions for statutory									
				criminal justice social work									
				posts in East Renfrewshire									
				have been amended &									
				candidates are required to be									
				eligible to achieve NPPV level									
				2 vetting status.		<u> </u>							

		'Safe Together' model implemented.					
		All front line managers provided with refresher training concerning statutory compliance.					Ī
		Multi Agency Risk Assessment Conference (MARAC) fully operational (05.03.2019)					ļ
		ASP priorities for 2019/20 improvement and proposal for new structure and increased frequency of APC meetings agreed (06.06.19)					

4	S	Financial Sustainability										
		Risk of being										
		unsustainable due to	1) The CFO provides regular				1) The CFO will provide advice	Ongoing				
		one of the following	reporting to IJB and savings				on corrective action required	(with				
		causes:	progress reviewed as part of				in year to manage the budget.	2019 /20				
			budget seminars and revenue				The use of reserves supports	budget				
		1) Unable to deliver in	monitoring report as well as				longer term change and allows	agreed).				
		full the existing savings	periodically at DMT				for phased implementation of					
		and achieve new					savings delivery and					
		savings to deliver a	2) The regular budget updates				management of prescribing					
		balanced budget.	and medium term financial				volatility.					
		The timing of the NHS	plan set out funding pressures									
		GGC budget	and scenarios are taken to IJB				2) Continue partner	Ongoing –				
		contribution continues	seminars. The HSCP is				engagement with budget	regular				
		to be a challenge	involved in the budget setting				setting and financial plan and	meetings				
			process with each of our				processes.					
		2) Unable to influence	partners. We need to develop									
		future funding to	a process for a more pro-				3) An earmarked reserve	Ongoing				
		recognise	active approach with earlier				allows us to deal with					Chief
		demographic and	discussions on financial				prescribing volatility in any					Financial
		other pressures, or	planning.	3	4	12	one year. Hosted		3	4	12	Officer
		realise future					arrangements will be					C cc.
		efficiencies & savings	3) A local network and CFO				reviewed to coincide with					
			section meeting is a discussion				review of the integration					
		3) Implications of	and decision making forum for				schemes during 2020 and					
		cessation of	wider issues impacting on				preparatory work has					
		prescribing risk share	partnerships, with these two				commenced.					
		and changes from	areas included. The previous									
		hosted services	NHSGGC prescribing risk share				4) The potential Brexit					
		funding structure.	ceased in March 2018 and				implications and contingency					
			prescribing volatility impacts				planning is taking place at					
		4) Financial Impacts	directly on the HSCP revenue				both national and local levels.					
		relating to Brexit and	budget.									
		other wider economic	A) This is a making all with and in									
		issues.	4) This is a national risk and is									
			reported in detail elsewhere. The financial risks will relate									
			to staffing, purchased of care,									
			drugs, equipment, consumables and food.									
			consumables and tood.									

5.2	5	S	Failure of a Provider										
			Risk of failure of a key care provider, including care home, care at home and other care providers due to financial instability or significant care concerns. Consequences could include: - disruption to service delivery - requirement to implement contingency plans - impact on individuals and families with potential disruption to care arrangements	We work with the Care Inspectorate to ensure robust action plans for improvement are in place Work with Scottish Government, Scotland Excel and Cosla on care home market. Consideration of balance of market share across external market providers Company Credit Health Checks undertaken	4	3	12	Implement learning from independent review of recent provider failure, due to be completed summer 2019. Work with providers at risk to agree phased and managed approach to closure if required	31/12/2019 Ongoing	3	3	9	Head of Adult Health and Social Care Localities
	6	C	Insufficient primary care practice list capacity due to increased population size. This is a result of new housing developments which include family housing, increasing the number of children in the area and specific developments for older people. Inability to recruit/cover posts resulting in poor access for local residents.	Primary Care Improvement Plan agreed by IJB Local practices are supported to manage list size by encouraging patients from out with the practice's contracted catchment area to register with a GP more local to them. Work with practices to maximise premises capacity to enable them to extend primary care team Back scanning completed for practices to ensure all East Renfrewshire practices notes are scanned to free up space.	3	3	9	Work with planning department to consider impact and mitigation for new housing developments Meet regularly with GPs in practices most likely to be impacted by rise in new registrations due to new housing development to agree short term measures and discuss and longer term options to increase capacity. Within clusters explore space availability within practices to support the extending Primary Care team as outlined in the PCIP. Scoping paper to be developed for IJB	Ongoing Ongoing Ongoing	3	2	6	Clinical Director

.1 7 S	Increase in Older popul	lation									
.1 7 S	Increase in Older popul Increase in older people, particularly very old, due to demographic changes leads to an over demand on certain services and failure to meet legislation, overspend and negative publicity.	Scottish Government providing additional resources for Health and Social Care with emphasis on managing demographic pressures. Outcome Delivery Plan (ODP) and HSCP strategic plans build on foundation of wider council prevention and early intervention strategy for older people. Agile working for HSCP employees improved efficiency. Annual budget setting takes account of demographic projections. Partnership with various professional agencies and community/public to support hospital admission avoidance and safe hospital discharge for older people.	4	4	16	Next phase of HSCP Fit for the Future redesign to focus on rehabilitation and frailty pathways Further rollout of Talking Points as part of Community Led Support programme diverting people to community resources and building own assets. Continue Council funding for demographic cost pressures	31/12/2019 Ongoing Ongoing	4	2	8	Chief Office HSCP

	8	S	Workforce Planning and	d Change									
			Lack of appropriately skilled workforce due to the combination of loss of experience from retirement of ageing workforce and changes to registration	Reduction in the number of temporary contracts for social work and nursing staff as part of Fit for the Future redesign.				Workforce Plan for 2019-21 to be developed Active review of all request to recruit by HSCP senior management team	30/09/2019 Ongoing				
			and job requirements leads to a reduction in service levels and inability to deliver redesigns in line with Strategic Plan		3	4	12	Improve partnership workforce planning working with providers in line with developing strategic commissioning plan	30/09/2019	2	4	8	Chief Officer HSCP
			requirements. Use of temporary contracts as mitigation for financial uncertainty impacts on ability to recruit and retain staff.					Reduce the remaining temporary contracts in social care and business support	31/03/2020				
2.2	10	S	Increase in children & a	dults with additional support nee	ds								
			Increase in the number of children and adults with additional support requirements leading to a rise in demand on services.	Analysis of demographic changes. Increased financial forecasting. Children's Services redesign implemented Inclusive Support redesign completed and implemented (April 2019) Education Resource Group to manage specialist resources and admission to specialist provision	4	3	12	Review transition arrangements - child to adult services Completion of Fit for the Future Phase 2 Council continues to contribute to funding to demographic cost pressures	31/10/2019 31/03/2020 Ongoing	4	2	8	Chief Officer HSCP
				Phase 1 Fit for the Future Redesign implemented									

5	5 1	11	S	In-House Care at Home Service											
				Significant pressures	Movement of some packages				Improvement Task Force	30/9/2019					
				and lack of service	to external providers				overseeing implementation of						
				capacity (vacancies					improvement activity						
				and absence) impacts	Increased resource to support				supported by additional						
				on service delivery and	robust absence management				funding including revised care						
				quality standards					planning and risk						
				Impact on service	We have recruited additional				documentation						
				users and carers	care at home staff and				- 1 11 - 2- 111 11	Ongoing 3		3			
				Reputational risk to				16	The HSCP will continue to				9	Chief Officer HSCP	
				HSCP and Council	New medication policy	4			recruit in line with service						
					adopted		4		demands						
									Ensure all Care at Home	30/11/2019					
									clients have an up to date	30/11/2013					
									review						
									. eview						
									Commence medication	30/09/2019					
									management training	' '					
									Start testing of policy						
									implementation in small scale	30/9/2019					
									pilot						

