



<b>Meeting of East Renfrewshire Integration Joint Board</b>	Performance and Audit Committee
<b>Held on</b>	22 June 2022
<b>Agenda Item</b>	12
<b>Title</b>	IJB Strategic Risk Register Update
<p><b>Summary</b></p> <p>This report provides the Performance and Audit Committee with an update on the IJB Strategic Risk Register.</p>	
<b>Presented by</b>	Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)
<p><b>Action Required</b></p> <p>Performance and Audit Committee is asked to note and comment on the IJB Strategic Risk Register.</p>	

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**EAST RENFREWSHIRE INTEGRATION JOINT BOARD****PERFORMANCE AND AUDIT COMMITTEE****22 June 2022****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.
4. 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**

<b>Likelihood</b>	<b>Score</b>								
Certain	4	Low (Green)		Medium (Yellow)		High (Red)		High (Red)	
Likely / probable	3	Low (Green)		Medium (Yellow)		Medium (Yellow)		High (Red)	
Possible/could happen	2	Low (Green)		Low (Green)		Medium (Yellow)		Medium (Yellow)	
Unlikely	1	Low (Green)		Low (Green)		Low (Green)		Low (Green)	
<b>Impact</b>		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 a 'live' document; the latest version is attached at Appendix 1.
8. The Strategic Risk Register was reported to the last meeting of the Performance and Audit Committee which took place on 16 March 2022. Since last reported:-
  - No new risks have been added
  - No risks have been removed
  - One risk score has increased – *Workforce Planning and Change*
  - One risk score has been reduced – *In-house Care at Home Service*
9. Risk control measures have been reviewed and updated to reflect any proposed mitigation which has been completed, or where the expected date for completion has been extended.
10. Members are asked to note the following:-

### Financial Sustainability

11. Work to conclude the review of hosted services across all 6 partnerships within NHS Greater Glasgow and Clyde was paused during our Covid-19 response and has yet to recommence. March 2023 has been added as an indicative at present.
12. Updated risk description and mitigation to reflect the risk associated with the current economic climate, in particular, inflation, fuel and utilities. This will be addressed in revenue monitoring and the medium term financial plan throughout the year.

### Failure of a Provider

13. Our Commissioning and Contracts services have increased contract monitoring and we will review this in September 2022.

### Workforce Planning and Change

14. We are experiencing significant issues within Adult Mental Health due to retention of consultants. This is a board wide issue however East Renfrewshire are presently seeing the acute effect of the shortages and our 3 whole time equivalent Consultant posts will be vacant come August 2022. We have escalated the issue to the Associate Medical Director in Mental Health and are working with professional leads and Mental Health Clinical Director to explore solutions, both in the medium and longer term. A paper on psychiatry is due to be presented to NHSGGC CMT from the Mental Health Clinical Director at the end of June.

In-house Care at Home Service

15. The current risk score for care at home, prior to any further mitigation, has been reduced from 12 to 8 now that the new Senior Homecare Manager is in post and we have recruited additional frontline staff, meaning the likelihood of the service being impacted due to capacity has reduced. Our enhanced recruitment and advertising campaign remains ongoing. An engagement event as part of the remobilisation of service redesign is scheduled for August, therefore the due date for all proposed mitigation has also been extended.
16. A short life working group looking at professional registrations has been established and had its first meeting in March. The group is reviewing current processes and will make any necessary recommendations to strengthen reporting arrangements around all registrations including SSSC. It is hoped this work will be concluded by the end of the year.

Covid-19 and Recovery

17. Our recovery and renewal programme which was paused during our response to the Omicron variant has recommenced and recruitment of the project team is underway.
18. Scoping of accommodation and resource requirements is ongoing and we are developing proposals of how accommodation will be utilised to meet service needs and demands in line with the new policies on hybrid working; NHS GGC Blended Working Guidance and ERC The Way we Work.

Analogue to Digital Switchover

19. The go live date for the Alarm Receiving Centre unit has been postponed until 24 August 2022, mainly due to IT issues. A project manager has been recruited and will join the team shortly.

**Post Mitigation - Red and Significant Risks Exception Report**

20. 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'.

Financial Sustainability

21. Financial Sustainability remains a high/red risk as last reported. Whilst the budget agreed by the IJB on 16 March 2022 recognised the significant investment by Scottish Government in health and social care we still have legacy savings of £2.6 million that we need to achieve on a recurring basis.
22. As noted above, the current economic climate, fuel and utilities, inflation in particular, combined with the unknown impact of Covid-19 in the longer term are also cause for concern. Therefore this risk is still considered red post mitigation.
23. There remains risk that the HSCP could become unsustainable due to one of the following causes:
  - Unable to deliver in full the existing savings on a recurring basis
  - Unable to influence future funding to recognise demographic and other pressures, or realise future efficiencies and savings

- Implications from hosted services should current arrangements change
- Prescribing volatility
- Any unfunded Covid-19 costs will add to our pressures

## RECOMMENDATIONS

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

## REPORT AUTHOR AND PERSON TO CONTACT

Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)

[lesley.bairden@eastrenfrewshire.gov.uk](mailto:lesley.bairden@eastrenfrewshire.gov.uk)

0141 451 0746

30 May 2022

Chief Officer, IJB: Julie Murray

## BACKGROUND PAPERS

PAC Paper: March 2022: IJB Strategic Risk Register Update

[https://www.eastrenfrewshire.gov.uk/media/7491/PAC-Item-09-16-March-2022/pdf/PAC\\_Item\\_09\\_-\\_16\\_March\\_2022.pdf?m=637825962402470000](https://www.eastrenfrewshire.gov.uk/media/7491/PAC-Item-09-16-March-2022/pdf/PAC_Item_09_-_16_March_2022.pdf?m=637825962402470000)

PAC Paper: November 2021: IJB Strategic Risk Register Update

[https://www.eastrenfrewshire.gov.uk/media/7155/PAC-Item-11-24-November-2021/pdf/PAC\\_Item\\_11\\_-\\_24\\_November\\_2021.pdf?m=637727683985700000](https://www.eastrenfrewshire.gov.uk/media/7155/PAC-Item-11-24-November-2021/pdf/PAC_Item_11_-_24_November_2021.pdf?m=637727683985700000)

PAC Paper: September 2021: IJB Strategic Risk Register Update

[https://www.eastrenfrewshire.gov.uk/media/6844/PAC-item-09-22-September-2021/pdf/PAC\\_item\\_09\\_-\\_22\\_September\\_2021.pdf?m=637673822316270000](https://www.eastrenfrewshire.gov.uk/media/6844/PAC-item-09-22-September-2021/pdf/PAC_item_09_-_22_September_2021.pdf?m=637673822316270000)

PAC Paper: June 2021: IJB Strategic Risk Register Update

[https://www.eastrenfrewshire.gov.uk/media/5750/PAC-Item-11-23-June-2021/pdf/PAC\\_Item\\_11\\_-\\_23\\_June\\_2021.pdf?m=637596213490230000](https://www.eastrenfrewshire.gov.uk/media/5750/PAC-Item-11-23-June-2021/pdf/PAC_Item_11_-_23_June_2021.pdf?m=637596213490230000)

PAC Paper: November 2020: IJB Strategic Risk Register Update

[https://www.eastrenfrewshire.gov.uk/media/4339/Performance-and-Audit-Committee-item-8-25-November-2020/pdf/Performance\\_and\\_Audit\\_Committee\\_item\\_8\\_-\\_25\\_November\\_2020.pdf?m=637413112993830000](https://www.eastrenfrewshire.gov.uk/media/4339/Performance-and-Audit-Committee-item-8-25-November-2020/pdf/Performance_and_Audit_Committee_item_8_-_25_November_2020.pdf?m=637413112993830000)

IJB Paper: January 2020: IJB Risk Management Policy and Strategy

[https://www.eastrenfrewshire.gov.uk/media/1436/Integration-Joint-Board-Item-14-29-January-2020/pdf/Integration\\_Joint\\_Board\\_Item\\_14\\_-\\_29\\_January\\_2020.pdf?m=637284294607930000](https://www.eastrenfrewshire.gov.uk/media/1436/Integration-Joint-Board-Item-14-29-January-2020/pdf/Integration_Joint_Board_Item_14_-_29_January_2020.pdf?m=637284294607930000)

## EAST RENFREWSHIRE INTEGRATION JOINT BOARD

## STRATEGIC RISK REGISTER

DATE ORIGINATED: 09.11.2015

DATE REVIEWED: 01.06.2022

ERC Ref	No.	Risk Status S/C/N (Same, Changed, New)	Risk (Threat/Opportunity to achievement of business objective)- include the consequence of the risk in this description)	Risk Control Measures currently in Place (need to be SMART e.g. detail of what type of training took place with dates in evidence column)	Assessment of Risk (As it is now)			Proposed Risk Control Measures (should be SMART with detail included)	Completion date for proposed Risk Control Measure	Assessment of Residual Risk (with proposed control measures implemented)			Risk Owner
					Risk Score	Overall rating				Likelihood (probability)	Impact (Severity)	Risk Score (LxI)	
						11-16	HIGH						
						5-10	MEDIUM						
						1-4	LOW						
						L	I				L	I	LxI
n/a	1	S	<b>Death or significant harm to vulnerable individual</b>										
			Risk of death or significant harm to a service user/ patient as a result of HSCP actions or omissions.  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.	Professional leadership for social work practice strengthened  We continue to operate within Clinical and Care Governance Framework  ASP Quality Assurance Framework continues to be implemented and reported to APC  Quality assurance of Adult Service Improvement Plans  Senior Management rota for chairing ASP implemented  Continual audit against compliance of MHO standards  Professional supervision policy adopted for social work and social care staff.  Review of rising demands and pressure points across adult services.  Rolling training programme.				New Governance Framework providing assurance to CSWO being developed.  Review risk management frameworks as we move towards recovery.	31.08.2022  31.12.2022				Head of Adult Services / Chief Social Work Officer
						3	3	9			2	3	6

4.4	2	S	<b>Scottish Child Abuse Inquiry</b>									
			<p>Children accommodated by East Renfrewshire Council and legacy areas from 1930 may have been the victims of historical abuse whilst in foster care.</p> <p>Capacity to meet the demands of the S21 notice and the possibly increased demand of access to records and potential claims against the Council as Inquiry work progresses.</p>	<p>Adult Protection Committee and Child Protection Committee have been sighted on these issues.</p> <p>Final s21 submission made to the Inquiry in July 2020 in relation to the foster care case study. The Inquiry requested further information which was submitted in Jan-22. The Inquiry will begin to take evidence from Jun-22 onwards – it is unclear at this point whether ER will be cited to court</p> <p>Key learning from S21 work shared with managers</p> <p>Identified leads in HSCP working alongside legal services to manage the progress of any allegations/claims made.</p>	3	3	9				3	3
4.1	3	S	<b>Child Protection, Adult protection and Multi-Agency Public Protection Arrangements</b>									
			<p>Inconsistent assessment and application of the public protection agenda (Child Protection, Adult Protection and Multi-Agency Public Protection Arrangements- MAPPA) may result in risk of children or vulnerable adults being harmed and lead to non-compliance with legislative standards.</p>	<p>The operation of Child Protection Committee (CPC), Adult Protection Committee (APC) and MAPPA meetings deal with strategic and practice issues.</p> <p>"Safe Together" model implemented in HSCP.</p> <p>Regular reporting to COPP in place for adult, children and high risk offenders.</p>	2	4	8	<p>Introduce rolling review of PVGs on 3 yearly basis. Consistent with Care Inspectorate regulations.</p> <p>Strengthen reporting arrangements around SSSC registrations. (<i>Short-life working group established Mar-22 - progressing action plan</i>)</p> <p>Roll out "Safe Together" across Council</p>	30/06/2022	31/12/2022	31/12/2022	1



4	C	Financial Sustainability												
		<p>Risk of being unsustainable due to one of the following causes:</p> <p>1) Unable to deliver in full the existing savings and achieve new savings to deliver a balanced budget.</p> <p>2) Unable to influence future funding to recognise demographic and other pressures, or realise future efficiencies &amp; savings.</p> <p>3) Implications of cessation of prescribing risk share and changes from hosted services funding structure.</p> <p>4) Financial Impacts relating to Brexit and other wider economic issues. Financial risks relate to staffing, purchase of care, drugs, equipment, consumables and food and utilities/other inflation</p> <p>5) Financial risks relating to Covid-19 There is a significant financial implication to the IJB if the costs of the response to the crisis are not fully funded. There are likely to be longer term implications with associated financial impact. The post Covid landscape is unclear</p> <p>6) Complexity of funding sources with some allocations late in the year and some instability from non-recurring funding.</p>	<p>The CFO provides regular financial advice and reporting to IJB, including savings progress.</p> <p>Detailed financial planning and monitoring for COVID 19 is in place and costs are considered by the Scottish Government as part of the NHSGCC response.</p> <p>Budget seminars are held with IJB Members.</p> <p>The regular budget updates and medium term financial plan set out funding pressures and scenarios. The HSCP is involved in the budget setting process with each of our partners.</p> <p>Medium Term Financial Plan latest revision Mar-22</p> <p>A local network and the National CFO Section meeting provide a discussion and decision making forum for wider issues impacting on partnerships, including prescribing and hosted services.</p> <p>The use of earmarked reserves allows us to deal with prescribing volatility in any one year.</p> <p>Review of hosted services is ongoing and this is a longer term review across all six HSCPs within NHSGCC.</p> <p>Ongoing monitoring of wider economic factors and inflation impacts</p> <p>Regular monitoring and planning combined with our reserves strategy allows us to maximise funding streams.</p>	3	4	12	<p>Conclude review of hosted service arrangements (indicative date)</p> <p>Refresh Medium Term Financial Plan for any significant changes during 2022/23 (including impact of fuel, utilities and other inflation costs)</p> <p>Develop the tri-partite financial planning discussions with partners as included in Strategic Improvement Action Plan.</p>	31/03/2023	Ongoing (review 31/03/2023)	Ongoing (review 31/03/2023)	3	4	12	Chief Financial Officer

5.2	5	C	Failure of a Provider											
			<p>Risk of failure of a key care provider, including care home, care at home and other care providers due to significant care concerns financial instability, staff recruitment and retention difficulties.</p> <p>Consequences could include:</p> <ul style="list-style-type: none"> <li>- disruption to service delivery</li> <li>- requirement to implement contingency plans</li> <li>- impact on individuals and families with potential disruption to care arrangements</li> </ul>	<p>We work with the Care Inspectorate to ensure robust action plans for improvement are in place.</p> <p>We work with providers at risk to agree phased and managed approach to closure if required. Escalation process in place.</p> <p>Work with Scottish Government, Scotland Excel and Cosla on care home market.</p> <p>Scotland Excel framework provides larger provider base to mitigate risk.</p> <p>Care Home assurance group established May 2020 (meets twice weekly).</p> <p>Care homes reporting key information which is reviewed by the care home assurance group to allow management of risk and support.</p> <p>Two community hubs established to provide range of support to care homes within Greater Glasgow and Clyde e.g. nursing, infection control support.</p>	4	3	12	<p>Reshape strategic commissioning plan based on outcome of the work exploring models of service delivery. Annual progress will inform our longer term approach.</p> <p>Increased monitoring by Commissioning and Contracts service</p>	30/09/2022	Ongoing (Review-Sep22)	3	3	9	Chief Financial Officer / Heads of Service

6	S	<b>Access to Primary Care</b>										
		<p>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.</p> <p>Inability to recruit/cover posts resulting in poor access for local residents.</p>	<p>Primary Care Improvement Plan agreed by IJB.</p> <p>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.</p> <p>Work with practices to maximise premises capacity to enable them to extend primary care team.</p> <p>Back scanning completed for practices to ensure all East Renfrewshire practices notes are scanned to free up space.</p>	3	3	9	<p>Work with planning department to consider impact and mitigation for new housing developments.</p> <p>Support 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.</p> <p>Signpost new residents to Practices registering patients for postcode area.</p> <p>Scoping ways to increase capacity for PCIP staff at existing sites, and exploring potential other sites</p> <p>Exploring revenue funded solutions around GP space in Newton Mearns and Neilston</p>	<p>Ongoing (review Sep 22)</p> <p>Ongoing (review Sep 22)</p> <p>Ongoing (review Sep 22)</p> <p>Ongoing (review Sep 22)</p>	3	2	6	Clinical Director
5.1	7	<b>Increase in frail older population</b>										
		<p>Increase in frail 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.</p>	<p>Scottish Government provides additional resources (winter planning) for Health and Social Care with emphasis on managing demographic pressures.</p> <p>Outcome Delivery Plan (ODP) and HSCP strategic plans build on foundation of wider council prevention and early intervention strategy for older people.</p> <p>UCC Delivery Plan approved by IJB in March-22.</p> <p>Concluded redesign work focusing on rehabilitation</p> <p>Annual budget setting takes account of demographic projections.</p>	3	3	9	<p>Reopen and further rollout of Talking Points as part of Community Led Support programme diverting people to community resources and building own assets. (Reviewed Mar-22)</p> <p>Reviewed front door arrangements to ensure fit for purpose in terms of recovery – new model launching Summer</p>	<p>Ongoing (review Aug 22)</p> <p>31/07/2022</p>	3	2	6	Chief Officer HSCP

8	C	<b>Workforce Planning and Change</b>										
		<p>Lack of appropriately skilled workforce due to combination of loss of experience from retirement of ageing workforce and changes to registration and job requirements leads to a reduction in service levels and inability to deliver redesigns in line with Strategic Plan requirements. Use of temporary contracts as mitigation for financial uncertainty impacts on ability to recruit and retain staff.</p>	<p>Workforce planning group restarted and includes 3<sup>rd</sup> / independent sector reps</p> <p>HSCP management team actively review of all request to recruit and the number of temporary contracts have been minimised.</p> <p>Overarching workforce workstream in our recovery plan (as we have had some capacity issues resulting from Covid-19 and our response to the emergency).</p> <p>Recovery and Renewal Programme established (Jun'21)</p> <p>Interim HSCP workforce plan developed and work commenced on 3-Year Plan</p> <p>Trauma Steering Group continues to meet regularly</p> <p>Working with professional leads and MH Clinical Directors to explore medium and longer term cover.</p>	4	4	16	<p>Submit draft 3-Year HSCP Workforce Plan to Scottish Government by 31 July 2022</p> <p>Develop workforce information to include data on staff with long term health conditions to better understand the impact of covid-19 on service delivery. Continue to monitor covid and long covid absence to help inform service delivery (Reviewed Mar-22)</p> <p>Continue providing personalised supports to workforce in relation to trauma experienced during covid. (Reviewed Mar-22)</p> <p>Medium term cover arrangements to be agree and put in place</p> <p>Longer term recruitment plan to be developed board wide (position paper on psychiatry to be presented to NHSGGC Board-June)</p>	<p>31/07/2022</p> <p>Ongoing (review Aug22)</p> <p>Ongoing (review Aug22)</p> <p>31/07/22</p> <p>30/09/22</p>	2	4	8	Chief Officer HSCP
2.2	10	<b>S Increase in children &amp; adults with additional support needs</b>										
		<p>Increase in the number of children and adults with additional support requirements leading to a rise in demand on services.</p>	<p>Advanced Practitioner post to improve practice across adult and children services in preparing young people with additional support needs for adulthood.</p> <p>Analysis of demographic changes and increased financial forecasting.</p> <p>Education Resource Group manage specialist resources and admission to specialist provision.</p> <p>Resource Allocation Group (RAG) strengthened membership to include educational psychologist and occupational therapist.</p> <p>Concluded work to review transitions and new strategy developed</p>	4	3	12	<p>Present Transitions Strategy to Children Services Partnership Group for sign off</p> <p>Implement Transitions Strategy - transition team to be developed to lead delivery of strategy</p> <p>Continued monitoring and Covid support to partly offset increased demand.</p>	<p>30/04/2022</p> <p>30/09/2022</p> <p>Ongoing (review Sep 22)</p>	4	2	8	Chief Officer HSCP

5.3	11	C	<b>In-House Care at Home Service</b>										
			<p>Ongoing pressures and limited service capacity impacts on service delivery and quality standards Impact on service users and carers</p>	<p>Increased resource to support robust absence management.</p> <p>Single base operating for Care at Home</p> <p>Ongoing quality assurance and monitoring activity.</p> <p>Significant frontline recruitment progressing</p> <p>Increased OT resource to maximise outcomes and reduce supports required</p> <p>Payment of carried over annual leave made to increase staff availability</p> <p>Enhanced recruitment and advertising arrangements continuing</p>	2	4	8	<p>Re-mobilise the service redesign activity – engagement event schedule for august</p> <p>Conclude work to realign staff work patters in order to maximise resource</p> <p>Enhance data availability and reporting capability of hospital referrals</p>	31/08/2022	2	3	6	Chief Officer HSCP
	12	S	<b>Failures within IT System</b>										
			<p>Critical information not been received due to failures in IT system</p> <p>Emails from outside the East Renfrewshire domain have been blocked or receipt failed due to ERC and 3rd party technical system issues.</p>	<p>Specific email addresses can be added to whitelist if required.</p> <p>Emails can be manually released. Analysis completed of referral source and destination mapping, to ensure information can be shared with ICT mailboxes and specific senders / emails prioritised, should an issue arise.</p> <p>Phase 1 of ICT Clearswift Review (looking at setup of rules and configuration within the email gateway solution) concluded 14.4.20 with changes to rules that should reduce some of the technical complexity with regards to email blocking.</p> <p>HSCP continue to work with ICT BRMs for both partner organisations to highlight and address both intermittent and known ICT issues</p>	3	2	6	<p>Conclusion of ICT Clearswift Review (Phase 2) on the Clearswift Gateway infrastructure.</p>	TBC	2	2	4	IT Business Partner

13	C	COVID19 & RECOVERY										
		<p>The significant impact of the pandemic on our workforce, supply chain, demand for and availability of services, delayed discharge targets, IT, accommodation, and resultant impact on financial and service planning.</p>	<p>Business Continuity and Operational Recovery Plans are in place and are reviewed by senior management regularly. Resilience Management Team continues to meet fortnightly.</p> <p>HSCP represented at local and national groups as well as integral part of our partners (ERC &amp; NHSGGC) response and recovery.</p> <p>Testing regimes remain in place for care homes and health and social care staff Majority of staff fully vaccinated</p> <p>Use of intermediate care beds to allow discharge from hospital for those awaiting care at home service.</p> <p>Increased communication and intelligence sharing with partners other statutory bodies implemented.</p> <p>Ongoing engagement and reporting with partner providers including Care Homes.</p> <p>Revised Initial Contact Team procedures to alleviate pressures at 'front door' with further review underway</p> <p>Redeployment of staff to support critical functions.</p> <p>Infection control procedures and arrangements for PPE in place.</p> <p>Regular Covid-19 cost monitoring informs our revenue reporting as well as reporting to the Scottish Government through NHSGGC.</p> <p>Recommended Recovery and Renewal Programme (paused during response phase) with funding in place for project roles.</p>	4	3	12	<p>Following scoping of accommodation and resource requirements develop proposals of how accommodation will be utilised to meet service needs and demands in line with NHSGGC Hybrid working and ERC The Way we Work</p>	30/06/22	3	3	9	

	14	C	ANALOGUE TO DIGITAL SWITCHOVER									
			<p>Vulnerable adults left without access to Telecare as a means of support due to accelerated switch from analogue to digital phone lines and associated financial implications.</p>	<p>Programme board established and full project team in place to take forward the transition to analogue to digital.</p> <p>HSCP representation on programme board.</p> <p>Analogue to digital implementation plan.</p> <p>ARC (Alarm Receiving Centre) system procured Nov 21</p> <p>Decision made re first tranche of dispersed alarm units</p> <p>Recruited HSCP Senior User</p>	3	3	9	<p>ARC Go Live date</p> <p>There is a Capital Project with our partner East Renfrewshire Council to manage replacement of analogue devices and peripherals within people's houses.</p> <p>Monitoring global supply issues in relation to chip shortages</p>	<p>24/08/22</p> <p>Ongoing</p> <p>Ongoing</p>	2	3	6

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