



Meeting of East Renfrewshire Integration Joint Board	Performance and Audit Committee
Held on	29 March 2023
Agenda Item	10
Title	IJB Strategic Risk Register
<p>Summary</p> <p>This report provides the Performance and Audit Committee with an update on the IJB Strategic Risk Register.</p>	
Presented by	Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)
<p>Action Required</p> <p>Performance and Audit Committee is asked to note and comment on the IJB Strategic Risk Register.</p>	

BLANK PAGE

EAST RENFREWSHIRE INTEGRATION JOINT BOARD**PERFORMANCE AND AUDIT COMMITTEE****29 March 2023****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.

Likelihood	Score								
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)	
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 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 23 November 2022. Since last reported:-
 - No new risks have been added
 - No risks have been removed
 - 2 risk scores have changed (Risks 10 and 11)
 - 1 risk remains red post mitigation (Risk 4)
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:-

Death or significant harm to vulnerable individual (1)

11. It was previously noted that we would review our risk management frameworks as we move towards recovery. As part of this we have developed a prioritisation framework, which sets out our criteria for providing social care. Our Supporting People Framework is included on the March IJB agenda for agreement.

Failure of a Provider (5)

12. A draft strategic commissioning plan has been developed and is included on the March IJB agenda. A final plan is expected by June 2023.

Access to Primary Care (6)

13. The wording of this risk has been updated to reflect the increased GP Practice workload due to increasing population and demand post pandemic along with capacity shortfall within GP accommodation.
14. We are participating in NHSGGC Property Strategy Group and developing a local strategy as well as working with the planning department to mitigate impact and seek developer contributions for new housing.

Increase in frail/elderly Population (7)

15. Although proposed mitigation has been completed in that we have reviewed the Talking Points approach and our Care at Home design is progressing, the required budget savings will have a significant impact on our ability to meet the demand for social care therefore there is no change to the score at present. Our prioritisation framework is required to ensure we continue to meet our statutory duties.
16. Our new front door model which launched last summer has been making positive impact on waiting list for assessments however some long term absence within the team may impact on our continued progress and we are considering realignment of social workers.

Workforce Planning and Change (8)

18. The overall workforce risk remains high due to the ongoing capacity constraints within mental health services. The challenges within medical staffing continue but more recently we are experiencing difficulty in recruiting nursing posts to our older adults mental health team
19. We continue to offer a range of wellbeing activities for our staff and wider partners.

Increase in children & adults with additional support needs (10)

1. The wording of this risk has been revised to more accurately reflect that any increase impacts not only demand but our ability to provide services.
2. Our transitions service is now fully recruited and the new strategy implemented which has reduced the current score from 12 to 9. Further mitigation will be provided through the implementation of our prioritisation framework.

In-house Care at Home Service (11)

3. Although the risk score was higher over the winter period, the service remains more stable at present as has been reduced to a 12. The Total Mobile scheduling system has now been implemented and we are starting to see the benefits of this, however until more staff have returned from absence we are unable to maximise its full potential.
4. Redesign work has recommenced and a proposed model will be presented to our Senior Leadership Team towards the end of April 2023.

Covid-19 and Recovery (13)

5. Work on the NHS Greater Glasgow and Clyde property strategy has concluded. Our local Accommodation Strategy Group will recommence in April 2023
6. The current score remains unchanged whilst we still have our resilience Management Structure in place however we are considering stepping this down to a more business as usual approach and we will review this action in more detail for the next report.

Post Mitigation - Red and Significant Risks Exception Report

7. 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 (4)

8. 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 £2.4 million that we need to achieve on a recurring basis. In addition the challenges that are set out as part of the 2023/24 budget position further add to this risk.
9. The current economic climate, fuel and utilities, pay and inflation in particular, combined with the unknown impact of Covid-19 in the longer term also remain cause for concern. Therefore this risk is still considered red post mitigation.

10. 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

11. 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

0141 451 0746

12 March 2023

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

PAC Paper: November 2022: IJB Strategic Risk Register Update

https://www.eastrenfrewshire.gov.uk/media/8447/Performance-and-Audit-Committee-Item-12-23-November-2022/pdf/Performance_and_Audit_Committee_Item_12_-_23_November_2022.pdf?m=638037783595400000

PAC Paper: September 2022: IJB Strategic Risk Register Update

https://www.eastrenfrewshire.gov.uk/media/8183/Performance-and-Audit-Committee-Item-11-21-September-2022/pdf/Performance_and_Audit_Committee_Item_11_-_21_September_2022.pdf?m=637987495064500000

PAC Paper: June 2022: IJB Strategic Risk Register Update

https://www.eastrenfrewshire.gov.uk/media/7784/Performance-and-Audit-Committee-item-12-22-June-2022/pdf/Performance_and_Audit_Committee_item_12_-_22_June_2022.pdf?m=637909081010470000

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

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

STRATEGIC RISK REGISTER

DATE ORIGINATED: 09.11.2015

DATE LAST REVIEWED: 16.03.2023

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	Death or significant harm to vulnerable individual										
			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 - Agree and implement Supporting People Framework.	30/06/2023 31/04/2023				Head of Adult Services / Chief Social Work Officer
					3	3	9				2	3	6

4.4	2	S	Scottish Child Abuse Inquiry										
			<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	9
4.1	3	S	Child Protection, Adult protection and Multi-Agency Public Protection Arrangements										
			<p>Inconsistent assessment and application of the public protection agenda (Child Protection, Adult Protection and Multi-Agency Public Protection Arrangements- MAPP) 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 MAPP meetings deal with strategic and practice issues.</p> <p>"Safe Together" model implemented in HSCP and rolled out across Council</p> <p>Regular reporting to COPP in place for adult, children and high risk offenders.</p>	2	4	8	Strengthen reporting arrangements around SSSC registrations. <i>(Recommendations from the short-life working group established Mar-22 – to be implemented)</i>	30/06/2023				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 & 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 March 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>				<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, pay award, prescribing short supply and other inflation costs) along with all other implications resulting from the 2023/24 budget</p> <p>Develop the tri-partite financial planning discussions with partners as included in Strategic Improvement Action Plan.</p> <p>Covid funding exit strategy is in place locally to manage the cessation of Covid support funding. The clawback of the Covid reserve balance has been actioned locally and nationally.</p>	<p>31/03/2024</p> <p>Ongoing</p> <p>Ongoing</p> <p>31/03/2023</p>				<p>Chief Financial Officer</p>	
3	4	12	3	4	12						

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"> - disruption to service delivery - requirement to implement contingency plans - impact on individuals and families with potential disruption to care arrangements 	<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 (reviewed Mar-23)</p>	30/06/2023	Ongoing (Review-30.06.2023)	3	3	9	Chief Financial Officer / Heads of Service

6	S	Access to Primary Care										
		<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 posts and shortage of locums resulting in poor access for local residents.</p> <p>GP Practice accommodation capacity shortfall to provide care to increased list sizes and accommodate PCIP staff</p> <p>Increased GP Practice workload due to increasing population and increased demand post pandemic</p>	<p>Primary Care Improvement Plan agreed by IJB.</p> <p>Support Practices to amend catchment areas where appropriate</p> <p>Work with practices to maximise premises capacity to enable them to extend primary care team.</p> <p>Support Practices through use of GGC Escalation framework.</p>	3	3	9	<p>Work with planning department to consider impact and seek developer contributions to mitigate for new housing and care home 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>Working with NHSGGC to support GP practice sustainability</p> <p>Participating in NHSGGC Property Strategy Group and developing local strategy</p>	<p>Ongoing (reviewed Mar 23)</p> <p>Ongoing (reviewed Mar 23)</p> <p>Ongoing (reviewed Mar 23)</p> <p>Ongoing (reviewed Mar 23)</p> <p>Ongoing (reviewed Mar 23)</p> <p>Ongoing (reviewed Mar 23)</p>	3	2	6	Clinical Director

5.1	7	S	Increase in frail older population									
			<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>Monthly reporting to Scottish Government on winter planning funding.</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>Annual budget setting takes account of demographic projections.</p> <p>New front door model launched Summer 22 making significant positive impact on waiting list for assessment</p> <p>Talking Points diverting people to community resources and building own assets.</p> <p>Project to support Care at Home redesign now live</p>	3	3	9	Implement prioritisation framework to ensure we continue to meet our statutory duties	30/04/2023	3	2	6
	8	C	Workforce Planning and Change									
			<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.</p>	<p>Workforce planning group in place and includes 3rd / independent sector reps</p> <p>HSCP management team actively review all requests 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>	4	4	16	Medium term cover arrangements in place for MH, however longer term recruitment plan to be developed board wide and we continue to work closely with the associated medical director.	31/03/23	2	4	8

			<p>Use of temporary contracts as mitigation for financial uncertainty impacts on ability to recruit and retain staff.</p> <p>Risk of further reduction in workforce capacity due to industrial action</p>	<p>Recovery and Renewal Programme established (Jun 21)</p> <p>HSCP 3 year Workforce Plan developed</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. In addition re-advertising vacant posts and close monitoring.</p> <p>HSCP Staff Wellbeing Group chaired by HoS meets bi-monthly to co-ordinate a range of wellbeing supports for staff. This includes bespoke 1-1 and team supports.</p> <p>Our Business Continuity plans support prioritisation where required and cover a range of events including possible industrial action.</p>									
2.2	10	S	Increase in children & adults with additional support needs										
			<p>Increase in the number of children and adults with additional support requirements leading to a rise in demand which impacts on our ability to provide 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>The new Transitions service is fully recruited and strategy implemented. Transitions is also included in R&R Programme</p>	3	3	9	<p>Continued monitoring and Covid support to partly offset increased demand to March 2023</p> <p>Implementation of Supporting People Framework</p>	<p>Ongoing (review Mar 23)</p> <p>30/04/2023</p>	3	2	6	<p>Chief Officer HSCP</p>

5.3	11	C	In-House Care at Home Service										
			<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. Due to significant absence numbers</p> <p>Single base operating for Care at Home</p> <p>Ongoing quality assurance and monitoring activity.</p> <p>Frontline recruitment ongoing</p> <p>Increased OT resource to maximise outcomes and reduce supports required</p> <p>New scheduling system (Total Mobile) in place</p> <p>Project to support Care at Home redesign went live in December 2022</p> <p>Enhanced management oversight of hospital discharge</p>	3	4	12	<p>Finalise proposed future service model for presentation to the Senior Leadership Team Conclude work to realign staff work patters in order to maximise resource</p> <p>Continuation of Total Mobile implementation</p>	<p>30/04/2023</p> <p>30/04/2023</p> <p>Ongoing</p>	2	3	9	Chief Officer HSCP
	12	S	Failures within IT System										
			<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 & 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>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 – new team now in place.</p> <p>Removal of social distancing restrictions at the end of August is allowing more staff to adopt hybrid approach to working</p>	4	3	12	<p>Restart accommodation strategy group (responsible for monitoring demand and capacity across HSCP buildings)</p> <p>We will contribute to the development of our local HSCP property strategy with our partners. This should help support strong future service planning.</p>	30/04/2023	31/03/2023	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> <p>Digital ARC went live October 2022.</p>	3	3	9	<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>Ongoing</p> <p>Ongoing</p>	2	3	6	