





Meeting of East Renfrewshire Integration Joint Board	Performance and Audit Committee
Held on	26 June 2023
Agenda Item	12
Title	IJB Strategic Risk Register

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.



PERFORMANCE AND AUDIT COMMITTEE

26 June 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 (Ye	llow)	High (Red)		High (Red)	
Likely / probable	3	Low (Green))	Medium (Ye	llow)	Medium (Ye	ellow)	High (Red)	
Possible / could happen	2	Low (Green))	Low (Green)	Medium (Ye	ellow)	Medium (Ye	ellow)
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 29 March 2023. Since last reported:-
 - No new risks have been added, however the Covid-19 and Recovery risk has been changed to a wider Business Continuity risk.
 - No risks have been removed
 - 4 risk scores have changed (Workforce, Care at Home, Business Continuity, IT,)
 - 1 risk remains red post mitigation (Financial Sustainability)
- 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. There has also been some changes to wording throughout.
- 10. Members are asked to note the following:-

Death or significant harm to vulnerable individual (1)

- 11. Our Supporting People Framework was approved by the IJB in March and implementation began in April. The framework aims to minimise the need for formal support, by identifying the person's own strengths, assets, natural networks, technological supports and community resources and will allow the HSCP to support those who need services most, now and in the future.
- 12. We have developed an implementation action plan which takes account of the various pieces of work required with all stakeholders, and includes monitoring of operational delivery and risk.

Financial Sustainability

13. Whilst the scoring pre and post mitigation remains unchanged, the risks and mitigating actions have been updated following agreement of the 2023/24 budget and the refreshed medium term financial plan being presented to IJB in June.

Failure of a Provider

- 14. The current score for this risk continues to be high (12) given specific concerns with respect to local care homes. The HSCP is providing significant support to both care homes and continues to work closely with them to monitor and review risk and sustainability. The Care Inspectorate have served an improvement notice with respect to one care home, Establishment E, which sets out the improvement requirements to be made by the care home by 14 August 2023.
- 15. There are also uncertainties around the future of the National Care Home Contract and discussions remain ongoing. A national meeting has been convened for 20 June 2023 to consider the implications of a provider indicating withdrawal from the National Care Home Contract.

16. The Strategic Commissioning Plan which was shared with Performance and Audit Committee in March is currently under consultation and will be presented to the IJB in August.

Increase in frail/elderly Population

- 17. As noted above, as part of the implementation of the Supporting People Framework we have an action plan monitoring operational delivery and risk, including analysis of waiting lists, admissions and incidents.
- 18. Interim care winter planning funding has now ceased, however Care at Home and Enhancing Multi-Disciplinary Teams is recurring.

Workforce Planning and Change

- 19. Following interviews in June, we have been successful in appointing a Consultant within our Mental Health Team. We have therefore reduced the current score to 12 as we have reduced the likelihood from 'certain' to 'likely/probable'. The overall workforce risk does though remain high due to the ongoing capacity constraints and challenges within mental health services.
- 20. We will undertake a review of the mental health workforce by summer 2024.
- 21. We continue to offer a range of wellbeing activities for our staff and wider partners.

In-house Care at Home Service

- 22. The service is currently in a more stable position and is experiencing reduced levels of staff absence. Therefore we have reduced the score to 8 as the likelihood of service disruption has reduced.
- 23. Redesign work has been delayed due to service capacity issues, however the new proposal is due to be presented to the Senior Leadership Team in June.

Business Continuity, Covid-19 and Recovery

- 24. The accommodation group restarted in May with senior managers and key representation from our partners. We have also produced an Accommodation Strategy which will be presented to the IJB in June.
- 25. Given our current recovery position, we have stood down weekly HSCP resilience meetings and have reduced the current risk score to 9. Further work to review business continuity plans and undertake a desktop scenario is planned for the end of the year.
- 26. We continue to participate in partner resilience planning meetings.

Failures within IT System

27. The new ERC IT ticket system has improved the efficiency of logging and resolving ICT related issues and our Business Continuity plan details alternative methods of communication where necessary. There have been fewer incidents of critical information not being received in the last six months and as such we have reduced the current score to 4.

Post Mitigation - Red and Significant Risks Exception Report

28. 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

- 29. As noted above, pre and post mitigation remains unchanged, the risks and mitigating actions have been updated following agreement of the 2023/24 budget and the refreshed medium term financial plan being presented to IJB in June.
- 30. 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

Failure of a Provider

31. As noted above, there are specific concerns at present in respect to 2 local care homes.

RECOMMENDATIONS

32. 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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June 2023

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

PAC Paper: March 2023: IJB Strategic Risk Register Update

https://www.eastrenfrewshire.gov.uk/media/8944/Performance-and-Audit-Committee-Item-10-29-March-2023/pdf/Performance and Audit Committee Item 10 - 29 March 2023.pdf?m=638149225277500000

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: 06.06.2023

Ref	C	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	(4	ssment of as it is nov e Overal HIGH MEDIU LOW Impact (Severity)	ry) I rating IM Risk Score	Proposed Risk Control Measures (should be SMART with detail included)	Completion date for proposed Risk Control Measure	(with	ment of R Risk proposed of res implem Impact (Severity)	control nented) Risk Score	Risk Owner
n/a 1	L	S	Death or significant har	 m to vulnerable individual	<u> </u>	<u> </u>	(LxI)			<u> </u>	<u> </u>	(LxI)	
			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.	Supporting People Framework (eligibility criteria) agreed. Social work and nursing professional leadership in place 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 health and care services. Rolling training programme.	3	3	9	Implementation of the Supporting People Framework action plan which takes account of the various work required with all stakeholders, and monitors operational delivery risk Implement any recommendations from the Joint Inspection of Adults at Risk of Harm (Report due 27.6.23)	30/09/2023	2	3	6	Head of Adult Services / Chief Social Work Officer

4.4	2	S	Scottish Child Abuse Inquiry								,		
4.4		5	Children accommodated by East Renfrewshire Council and legacy areas from 1930 may have been the victims of historical abuse whilst in foster care. Possible increase in demand of access to records and potential claims against the Council as Inquiry work progresses	Adult Protection Committee and Child Protection Committee have been sighted on these issues. 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 appear before the inquiry Key learning from S21 work shared with managers Identified leads in HSCP working alongside legal services to manage the progress of any allegations/claims made.	3	3	9			3	3	9	Chief Social Work Officer
4.1	3	S	Child Protection, Adult protection	। n and Multi-Agency Public Protectio।	n Arran	gemen	ts						
		J	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.	The operation of Child Protection Committee (CPC), Adult Protection Committee (APC) and MAPPA meetings deal with strategic and practice issues. "Safe Together" model implemented in HSCP and rolled out across Council Regular reporting to COPP in place for adult, children and high risk offenders.	2	4	8	Review programme of quality assurance and training Implement any recommendations from the Joint Inspection of Adults at Risk of Harm (Report due 27.6.23)	31/12/2023	1	4	4	Chief Social Work Officer

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4	С	Financial Sustainability										
		Risk of being unsustainable due to one of the following causes:	The CFO provides regular financial advice and reporting to IJB, including				Monitor hosted service arrangements – ongoing and	31/03/2025				
		_					arrangements – ongoing and longer. Refresh Medium Term Financial Plan for any significant changes during 2023/24 (including impact of fuel, utilities, pay award, prescribing short supply and other inflation costs) along with all other implications emerging or crystallising during the year. Continue to develop the tripartite financial planning discussions with partners as included in our Strategic Improvement Action Plan. Covid funding exit strategy is in	Ongoing Ongoing 31/03/2023				Chief
		including influence of GP prescribers, including demographic changes, economic and distribution factors. 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 5) Financial risks relating to Covid-19 following cessation of support funding, There remains financial implications to the IJB with costs such as staff cover in any service where an outbreak of the virus impacts on capacity.	A local network and the National CFO Section meeting provide a discussion and decision making forum for wider issues impacting on partnerships, including areas such as prescribing, hosted services, savings challenges and cost pressures from service delivery. The use of earmarked reserves allowed us to deal with prescribing and other costs volatility in any one year. This is diminished and we have limited reserves to support savings delivery over time. Review of hosted services is ongoing and this is a longer term review across all six HSCPs within NHSGGC.	3	4	12	place locally to manage the cessation of Covid support funding. Benchmark our local position with similar HSCP and / or national position and challenges		3	4	12	Financial Officer

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impact is unclear 6) Complexity of funding sources with some allocations late in the year and some instability from non-recurring funding. Regular monitoring and planning combined with our reserves strategy, albeit diminishing, allows us to maximise funding streams.	The longer term financial	Ongoing monitoring of wider				
6) Complexity of funding sources with some allocations late in the year and some instability from non-recurring abeit diminishing, allows us to	impact is unclear	economic factors and inflation				
sources with some allocations late in the year and some instability from non-recurring Regular monitoring and planning combined with our reserves strategy, albeit diminishing, allows us to		impacts				
	sources with some allocations late in the year and some instability from non-recurring	combined with our reserves strategy, albeit diminishing, allows us to				

5.2	5	 Failure of a Provider										
		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, contractual status, staff recruitment and retention difficulties. Consequences could include: - disruption to service delivery - requirement to implement contingency plans - impact on individuals and families with potential disruption to care arrangements	Care Home assurance group meets weekly. Care homes reporting key information which is reviewed by the care home assurance group to allow management of risk and support. We work with the Care Inspectorate and third sector to ensure robust action plans for improvement are in place. We have robust internal processes under ASP/Contract Monitoring and multi-agency procedures to focus on improvement and recovery. Where unavoidable we work with providers at risk to agree phased and managed approach to supporting service users, residents to access alternative safe care. Work with Scottish Government, Scotland Excel and Cosla on care home market. National Care Home Contract under negotiation We will work with the Scottish Government as part of national contingency planning in the event that providers indicate intention to	3	4	12	Reshape strategic commissioning plan based on outcome of the work exploring models of service delivery. Annual progress will inform our longer term approach. Increased monitoring by Commissioning and Contracts service (reviewed jun-23) Review outcome of Care Inspectorate improvement notice and tailor HSCP support accordingly (Establishment E)	30/08/2023 Ongoing (Review- 30.09.2023) 14/08/2023	3	3	9	Chief Financial Officer / Heads of Service

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withdraw from the national care

	home contract Scotland Excel framework provides larger provider base to mitigate risk. Care Home Collaborative provides range of support to care homes within Greater Glasgow and Clyde e.g. nursing, infection control support. Daily safeguarding as part of LSI into Establishment E									
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.	Primary Care Improvement Plan agreed by IJB. Support Practices to amend catchment areas where appropriate Work with practices to maximise premises capacity to enable them to extend primary care team. Support Practices through use of GGC Escalation framework.	3	3	9	Work with planning department to consider impact and seek developer contributions to mitigate for new housing and care home developments. 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. Signpost new residents to Practices registering patients for postcode area. Scoping ways to increase capacity for PCIP staff at existing sites, and exploring potential other sites Exploring revenue funded solutions around GP space in Newton Mearns and Neilston Working with NHSGGC to support GP practice sustainability Participating in NHSGGC Property Strategy Group and developing	Ongoing (reviewed Mar 23) Ongoing (reviewed Mar 23)	3	2	6	Clinical Director

5.1 7	S	Increase in frail older populat	ion							•		
		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.	Outcome Delivery Plan (ODP) and HSCP strategic plans build on foundation of wider council prevention and early intervention strategy for older people. Unscheduled Care Delivery Plan approved by IJB in March-22. Annual budget setting takes account of demographic pressures, however any increase in demand need to be funded within existing resources. New front door model manages level of demand launched Summer 22 making significant positive impact on waiting list for assessment Talking Points diverting people to community resources and building own assets. Project to support Care at Home redesign now live Supporting people framework implemented April 23 Monitoring includes analysis of waiting lists, admissions and incidents.	3	3	9	Implementation of the Supporting People Framework action plan which takes account of the various work required with all stakeholders, and monitors operational delivery risk	30/09/2023	3	2	6	Chief Officer HSCP
8	C			1	ı					1	1	
		Lack of appropriately skilled workforce due to combination of turnover recruitment market, funding and resilience. Risk of further reduction in workforce capacity due to industrial action Risk to staffing availability due to covid	Workforce planning group in place and includes 3 rd / independent sector reps HSCP management team actively review all requests to recruit in line with our workforce plan Overarching workforce workstream in our recovery plan (as we have had some capacity issues resulting from Covid-19 and our response to the emergency). Savings, Recovery and Renewal Programme monitors spend and	3	4	12	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 associate medical director. Strengthen reporting arrangements around SSSC registrations. (Recommendations from the short-life working group established Mar-22 – to be implemented)	31/08/23	2	4	8	Chief Officer HSCP

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			HSCP 3 year Workforce Plan developed				Undertake redesign of mental health workforce	30/06/2024				
			Working with professional leads and MH Clinical Directors to explore medium and longer term cover. In addition readvertising vacant posts and close monitoring.									
			HSCP Staff Wellbeing programme in place									
			Business Continuity plans support critical service prioritisation where required and cover a range of events including possible industrial action.									
2.2 10	S	Increase in children & adults	 with additional support needs									
2.2 10		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	Advanced Practitioner post to improve practice across adult and children services in preparing young people with additional support needs for adulthood. Analysis of demographic changes and increased financial forecasting. Education Resource Group manage specialist resources and admission to specialist provision. Resource Allocation Group (RAG) strengthened membership to include educational psychologist and occupational therapist. The new Transitions service is fully recruited and strategy implemented. Transitions is also included in R&R Programme	3	3	9	Implementation of Supporting People Framework action plan	30/07/2023	3	2	6	Chief Officer HSCP

5.3	11	С	In-House Care at Home	Service	•		•					•	
	12	S	Ongoing pressures and limited service capacity impacts on service delivery and quality standards Impact on service users and carers	Increased resource to support robust absence management. Due to significant absence numbers Single base operating for Care at Home Ongoing quality assurance and monitoring activity. Frontline recruitment ongoing Increased OT resource to maximise outcomes and reduce supports required New scheduling system (Total Mobile) in place Project to support Care at Home redesign went live in December 2022 Use of intermediate care beds to allow discharge from hospital Enhanced management oversight of hospital discharge	2	4	8	service model for presentation to the Senior Leadership Team	30/06/2023 30/06/2023 Ongoing	2	3	6	Chief Officer HSCP
		J	Critical information not been received due to failures in IT system Emails from outside the East Renfrewshire domain have been blocked or receipt failed due to ERC and 3rd party technical system issues.	Specific email addresses can be added to whitelist if required. 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. New ICT ticket system which has made it easier and improved the speed of releasing blocked emails. 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	2	2	4	Conclusion of ICT Clearswift Review (Phase 2) on the Clearswift Gateway infrastructure.	ТВС	2	1	2	IT Business Partner

	some of the technical complexity with				
	regards to email blocking.				
	HSCP continue to work with ICT BRMs				
	for both partner organisations to				
	highlight and address both intermittent				
	and known ICT issues				
	Business Continuity Plans outline				
	alternative arrangements should there				
	be an issue in relation to IT network.				

13 C	BUSINESS CONTINUITY,	COVID19 & RECOVERY									
	The significant impact	Business Continuity and Operational Recovery				Undertake annual review of	31/12/2023				
	of an emergency crisis on our workforce, supply chain, demand for and availability of services, delayed discharge targets, IT, accommodation, and resultant impact on financial and service planning.	Plans are in place and are reviewed by senior management regularly. HSCP represented at local and national groups as well as integral part of our partners (ERC & NHSGGC) response and recovery. Increased communication and intelligence sharing with partners other statutory bodies implemented.				Business Continuity Plans Review and identify additional staff to be trained to ensure sufficient trained Incident Officers and Loggists Undertake emergency scenario desktop exercise.	31/12/2023				
		Ongoing engagement and reporting with partner providers including Care Homes. Accommodation group oversees strategy and demand, both planned and unplanned ensuring continued service delivery, both day to day and in the event of an emergency. Annual assurance statement to IJB as Category 1 responder. Well established covid procedures are in place and can be escalated if necessary.	3	3	9			2	3	6	

14	С	ANALOGUE TO DIGITAL	SWITCHOVER									
		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.	Programme board established and full project team in place to take forward the transition from analogue to digital. HSCP representation on programme board. Analogue to digital implementation plan. ARC (Alarm Receiving Centre) system procured Nov 21 Decision made re first tranche of dispersed alarm units Recruited HSCP Senior User Digital ARC went live October 2022.	3	3	9	There is a Capital Project with our partner East Renfrewshire Council to manage replacement of analogue devices and peripherals within people's houses. Monitoring global supply issues in relation to chip shortages	Ongoing	2	3	6	