



Date	9 November 2021
Agenda Item	13

Report to West Lothian Integration Joint Board

Report Title: Risk Management

Report By: Chief Officer

Summary of Report and Implications	
Purpose	This report: (tick any that apply).
	- seeks a decision <input type="checkbox"/>
	- is to provide assurance <input checked="" type="checkbox"/>
	- is for information <input type="checkbox"/>
	- is for discussion <input checked="" type="checkbox"/>
	To advise the Integration Joint Board of the risks in the IJB's risk register.
Recommendations	It is recommended that the Board considers the risks identified, the control measures in place, and the risk actions in progress to mitigate their impact.
Directions to NHS Lothian and/or West Lothian Council	A direction is not required.
Resource/ Finance/ Staffing	None.
Policy/Legal	The IJB's Policy is to effectively mitigate risks to the achievement of its objectives by implementing robust risk management strategies, policies and procedures, which enable managers to effectively identify, assess, and mitigate risk.
Risk	This report is directly relevant as it sets out the IJB's risks.
Equality, Health Inequalities, Environmental and Sustainability Issues	The report has been assessed as having little or no relevance with regard to equality, health inequalities, environmental or sustainability issues. As a result, an integrated impact assessment has not been carried out.

Strategic Planning and Commissioning	Effective risk management is a pre-requisite for effective performance and outcomes.
Locality Planning	None.
Engagement	IJB Senior Management Team.

Terms of Report	
1.	Risk Management
1.1	In accordance with the Risk Management Strategy approved by the IJB on 26 June 2018, the IJB reviews the risk register annually. The IJB's risks are also reported regularly to the Audit, Risk and Governance Committee.
1.2	The IJB currently has eight risks and appendix one provides details of each risk.
1.3	Each risk has risk scores which are arrived at by multiplying the estimated likelihood of the risk by its estimated impact. Risks are assessed on the basis of a five by five grid, and therefore the lowest possible score is one and the highest possible score is 25.
1.4	<p>Risks which score 12 or more for current risk are considered to be high. There are two high risks as follows:</p> <p>IJB007 Sustainability of Primary Care (current risk score 12)</p> <p>IJB008 Delayed Discharge (current risk score 12).</p>
1.5	<p>In relation to appendix one:</p> <ul style="list-style-type: none"> • The traffic light icon represents the risk ranking based on the score; these are explained further in the table at the start of Appendix 1; • There is a code, title and description for each risk; • The original risk score represents the uncontrolled risk, that is to say the assessed risk without controls in place, and provides an appreciation of the potential impact if controls are absent or fail; • The current risk score represents the current risk, i.e. assuming that current controls are in place and effective; • The internal controls are those processes in place to reduce the risk from original risk score to current risk score; • The risk actions are those measures which are intended to further reduce the current risk. The report only includes those actions which are in progress. Once marked as complete, risk actions should be included as internal controls and taken account of when assessing the current risk score.

1.6	The standard risk assessment methodology is attached as Appendix 2.
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Appendices	<ol style="list-style-type: none"> 1. IJB Risks 2. Risk Assessment Methodology
References	Report to Integration Joint Board 26 June 2018: Risk Management Policy and Strategy
Contact	Kenneth Ribbons kenneth.ribbons@westlothian.gov.uk 015016 281573





Appendix 1 IJB Risks

Report Author: Kenneth Ribbons




Generated on: 29 October 2021 10:05


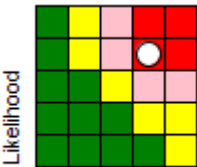
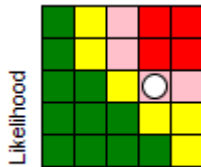
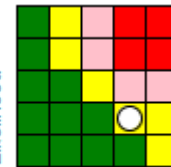


Report Layout: .. 12 (previously R09d) Original Score, Current Score, Target Score, Internal Controls with linked actions (outstanding only)


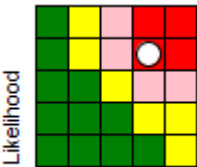
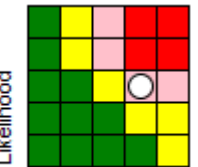
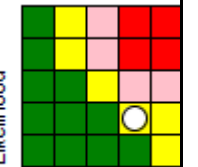


Key to Risk Scores


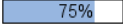
Icon	Score	Meaning
	16-25	High
	12-15	Medium High
	5-10	Medium
	1-6	Low


Key to Action Status

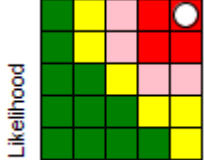
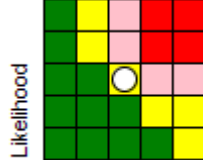
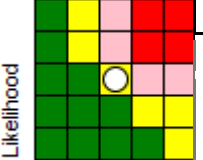
Icon	Status
	Overdue
	Approaching Due Date
	In progress


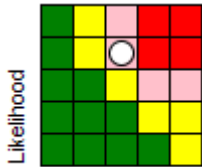
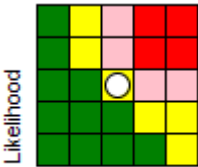
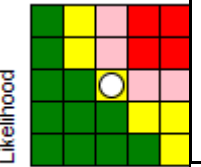

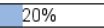
	IJB007 Sustainability of Primary Care					There is a risk that GP service provision will be disrupted, restricted or unavailable because of increasing capacity and demand issues as a result of population growth and/or GP practices experiencing difficulties in recruitment, retention or absence of medical staffing leading to significant capacity issues and inadequate and insufficient service provision.				
Internal Controls:						Risk register at HSCP level of all practices identifying vulnerability rating Programme of support measures developed and available to be tailored to each practices individual circumstances to increase their resilience and maintain service provision Additional investment to support practices through LEGUP, primary care investment fund Buddy practice arrangements in place across all practices; Cluster working arrangements established Primary Care Implementation and Improvement Plan prepared and submitted to the IJB on 26/6/18.				
Risk Score	Original Risk Matrix	Risk Score	Current Risk Matrix	Risk Score	Target Risk Matrix	Linked Risk Actions	Original Due Date	Due Date	Progress	Description
16		12		8		 IJB18011_Ar Implementation of Primary Care Improvement Plan 2018-2021	30-Sep-2021	31-Mar-2022	 95%	Phased investment and improvement plan to support implementation of the new 2018 GMS contract with focus on development of new roles and professionals within the wider Primary Health Care Team, transfer of vaccination services and development of community treatment and care centres, development of mental well-being hubs, use of technology and support of leadership development of GP and practice teams.


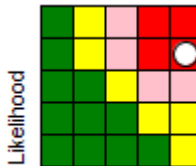
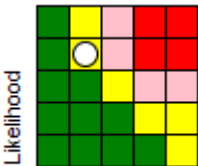
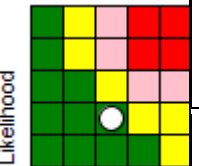

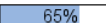

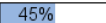
	IJB008 Delayed Discharge	There is a risk that patients are not being discharged in a timely manner resulting in suboptimal patient flow, impacting on poor patient and staff experience and poorer outcomes of care.									
Internal Controls:						Community health and social care teams working with discharge hub to facilitate timely discharge; daily MDT meetings Frail Elderly Programme to take forward key actions designed to improve performance Care at Home contract in respect of adequate supply and responsiveness of provision. National Care Home Contract in respect of adequate supply of provision Contract monitoring procedure Regular reports to Contracts Advisory Group Regular meetings with providers and Scottish Care Escalation of high cost packages to Depute CEO and Head of Finance Review of contract rates Joint Commissioning Plans Close partnership working with St John's hospital and other NHS Lothian colleagues. Strategic Commissioning Plan for Older People. Quarterly performance reports to Community Care Management Group Monthly performance reports to SMT Performance reports to IJB Single point of access for acute care Changes in eligibility criteria for social care Integrated discharge hub now operational					
Risk Score	Original Risk Matrix	Risk Score	Current Risk Matrix	Risk Score	Target Risk Matrix	Linked Risk Actions		Original Due Date	Due Date	Progress	Description
16		12		8			IJB19008_Ar Adults with Incapacity	31-Oct-2020	31-Mar-2022		Whilst fewer in number the length of delay can be significant for those requiring guardianship. Review the policy and procedures for Adults with Incapacity to ensure effective decision making supporting use of least restrictive options and




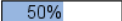


								coordinate guardianship process where required
				IJB18014_Ar Intermediate Care	31-Dec- 2020	30-Nov- 2021		Review intermediate care provision and determine future requirements to establish the type and capacity of intermediate care to be commissioned to meet the population needs.


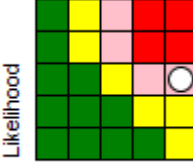
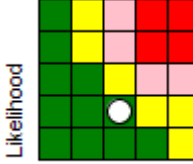
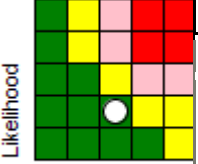
	IJB004 Inadequate Funding to Deliver the Strategic Plan	<p>Financial implications of Covid-19 are not met by additional funding provided by the Scottish Government. Core funding provided by partner bodies is inadequate, or is not effectively prioritised, including through the development of financial recovery plans, leading to failure to achieve a sustainable budget position and meet strategic objectives.</p>
	<p>Internal Controls:</p>	<p>Covid-19 Pandemic Lothian Covid-19 Finance Group set up and meeting regularly to ensure there is a joined up approach to identifying the financial implications arising from the pandemic. Regular updates to Scottish Government and IJB on Local Mobilisation Plan costs associated with the pandemic and additional funding received</p> <p>Failure to effectively manage the financial plan Chief Finance Officer (S95 officer) Due diligence by S95 officer on budget contributions from partner bodies each year as part of annual budget process Approval of resource allocations by IJB Monitoring / reporting of progress regarding outturn and delivery of savings reported regularly to IJB Financial reports to IJB include updates to key risks and uncertainties Scrutiny by Audit, Risk and Governance Committee Internal audit and external audit oversight. Financial Regulations in place WL Integration Scheme – agreed financial and budgetary responsibilities including for overspends against delegated IJB functions Ongoing development of medium term financial plan 2019/20 to 2022/23 submitted to the IJB on 23 April 2019 with latest update provided to the IJB board on 29 June 2021 Reserves policy in place Regular updates to IJB Chief Officer group on key financial and budget matters relating to delivery of health and social care services Adoption of CIPFA Financial Management Code by IJB</p> <p>Unbudgeted and emergency budgeted pressures Financial reports to IJB include updates to key risks and uncertainties</p>


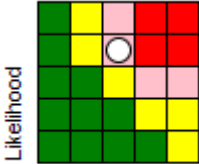
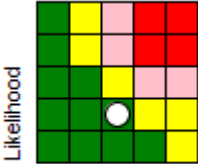
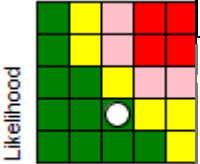
						WL Integration Scheme – agreed financial and budgetary responsibilities including for overspends against delegated IJB functions Reserves policy in place Regular updates to IJB Chief Officer group on key financial and budget matters relating to delivery of health and social care services				
Risk Score	Original Risk Matrix	Risk Score	Current Risk Matrix	Risk Score	Target Risk Matrix	Linked Risk Actions	Original Due Date	Due Date	Progress	Description
25		9		9						


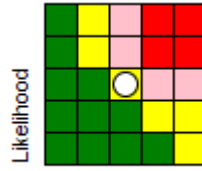
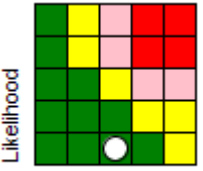
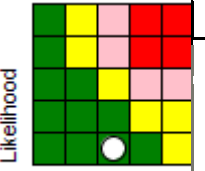
 IJB006 Workforce Planning		Failure to deliver workforce plan leading to a failure to develop a sustainable workforce which has an adverse impact on performance and the ability of the IJB to achieve its strategic objectives.									
Internal Controls:						NHS and WLC workforce plans NHS and WLC recruitment policies IJB Interim Workforce Plan 2021/22 Monitoring via review of performance in relation to staff absence, recruitment / turnover Training and development Performance review Strategic workforce planning framework approved by the IJB on 21 November 2018. Workforce planning group					
Risk Score	Original Risk Matrix	Risk Score	Current Risk Matrix	Risk Score	Target Risk Matrix	Linked Risk Actions		Original Due Date	Due Date	Progress	Description
12		9		9			IJB19019_Ari Employee Communication and Engagement Plan	30-Jun-2020	31-Dec-2021		To develop and present to the IJB for approval an Employee Communication and Engagement Strategy/Plan.

	IJB002 Failure to effectively implement the Strategic Plan					The Strategic Plan sets out how the IJB intends to deliver the nine national health and well-being outcomes through our strategic priorities and transformational change programmes. Failure to effectively develop and implement strategic commissioning plans for specific care groups within the medium term financial planning framework may lead to key objectives not being achieved. The Covid-19 pandemic is likely to impact on full delivery of the plan and is likely to delay the timeframe of some actions outlined in supporting strategic commissioning plans.					
Internal Controls:						Extensive consultation on the strategic plan Strategic plan based on national and local policy Review of the strategic plan by IJB SMT Revised strategic plan approved by the IJB on 23/4/19 Associated strategic directions Revised strategic planning structure Strategic Planning group Health Care Governance group Revised monthly management performance report Covid reflections SPG workshops Commissioning plans reviewed and revised to reflect impact of Covid-19					
Risk Score	Original Risk Matrix	Risk Score	Current Risk Matrix	Risk Score	Target Risk Matrix	Linked Risk Actions		Original Due Date	Due Date	Progress	Description
20		8		6			IJB19010_Ar Strategic Commissioning Plan Mental Health	31-Mar-2023	31-Mar-2023		Ensure implementation of 3 year Strategic Commissioning Plans for Mental Health as approved by IJB on 21 January 2020
							IJB19011_Ar Strategic Commissioning Plan Older People	31-Mar-2023	31-Mar-2023		Further develop and implement the Strategic Commissioning Plan for Older People as approved by IJB on 21 January 2020

				IJB19012_Ar Strategic Commissioning Plan Physical Disability	31-Mar- 2023	31-Mar- 2023		Implement Strategic Commissioning Plan for Physical Disability as approved by IJB on 21 January 2020
				IJB19013_Ar Strategic Commissioning Plan Learning Disability	31-Mar- 2023	31-Mar- 2023		Develop and implement Strategic Commissioning Plan for Learning Disability as approved by IJB on 21 January 2020
				IJB19014_Ari Strategic Plan Progress Reporting	30-Jun- 2020	30-Dec- 2021		<p>Review of arrangement for reporting on progress of the Strategic Plan 2019-2023:</p> <p>- cycle of reports for the IJB to be reviewed and will include a commitment to formally updating the IJB on progress in relation to strategic commissioning plans twice per year. Strategic commissioning plans are the mechanism through which the strategic objectives of the IJB will be delivered. Revised cycle of reports to be submitted to IJB in January 2020.</p> <p>- a performance management framework will be developed to underpin commissioning plans and to provide a mechanism for monitoring impact and progress in relation to strategic objectives.</p>

	IJB001 Governance Failure					Appropriate internal processes and procedures are either not in place or are ineffective, leading to a lack of leadership, accountability or scrutiny, resulting in a failure to meet key objectives, financial overspends or reputational damage.				
Internal Controls:						Chief Officer Chief Finance Officer (S95 officer) Standing orders Scheme of administration Standards Officer Local code of corporate governance Code of conduct Audit, Risk and Governance Committee Internal auditor and annual audit plan Procedures for assessing disputes re resource allocations Risk management policy and strategy Annual risk management report by IJB risk manager Development sessions / training for IJB members				
Risk Score	Original Risk Matrix	Risk Score	Current Risk Matrix	Risk Score	Target Risk Matrix	Linked Risk Actions	Original Due Date	Due Date	Progress	Description
15		6		6						

	IJB003 Inadequate Performance Management					Processes for the review and scrutiny of health and council performance are either not in place or are ineffective, leading to less than robust scrutiny arrangements, and resulting in failure to identify, challenge, or rectify poor performance. Ultimately will have an adverse impact on ability to achieve key objectives.				
Internal Controls:						Agreed outcomes / performance measures Robust performance management within WLC / NHS Regular monitoring by IJB SMT Regular reporting of performance to IJB including local indicators and balanced scorecard Annual performance report				
Risk Score	Original Risk Matrix	Risk Score	Current Risk Matrix	Risk Score	Target Risk Matrix	Linked Risk Actions	Original Due Date	Due Date	Progress	Description
12		6		6						

	IJB005 Community Planning Failure					Inability to work effectively with partners leading to poorer outcomes. Community Planning officers from the council are represented on the Locality Groups to ensure a partnership approach to working and prevent duplication of effort where possible.				
Internal Controls:						Participation in Community Planning arrangements - Chief Officer is a member of the CPP Board. Strategic Plan. Community Planning officers from the council are represented on the Locality Groups to ensure a partnership approach to working and prevent duplication of effort where possible.				
Risk Score	Original Risk Matrix	Risk Score	Current Risk Matrix	Risk Score	Target Risk Matrix	Linked Risk Actions	Original Due Date	Due Date	Progress	Description
9		3		3						

APPENDIX 2

RISK ASSESSMENT METHODOLOGY

RISK MATRIX

LIKELIHOOD	Almost Certain 5	5 Low	10 Medium	15 High	20 High	25 High
	Very Likely 4	4 Low	8 Medium	12 High	16 High	20 High
	Likely 3	3 Low	6 Low	9 Medium	12 High	15 High
	Possible 2	2 Low	4 Low	6 Low	8 Medium	10 Medium
	Unlikely 1	1 Low	2 Low	3 Low	4 Low	5 Medium
		Insignificant 1	Minor 2	Significant 3	Major 4	Catastrophic 5
		IMPACT				

LIKELIHOOD TABLE

Score	Description	Estimated Percentage Chance
1	Unlikely	0-10
2	Possible	10-50
3	Likely	50-70
4	Very Likely	70-90
5	Almost Certain	90-100

Each risk is scored 1-5 for likelihood.

In assessing likelihood consider a three year time horizon and use your knowledge and experience of previous issues.

IMPACT TABLE

Each risk is scored 1-5 for impact. In assessing impact each column is independent. Use the highest score.

<u>Hazard / Impact of Risk</u>	Personal safety	Property loss or damage	Regulatory / statutory / contractual	Financial loss or increased cost of working	Impact on service delivery	Personal privacy infringement	Community / environmental	Impact on Reputation
Insignificant 1	Minor injury or discomfort to an individual	Negligible property damage	None	<£10k	No noticeable impact	None	Inconvenience to an individual or small group	Contained within service unit
Minor 2	Minor injury or discomfort to several people	Minor damage to one property	Litigation, claim or fine up to £50k	£10k to £100k	Minor disruption to services	Non sensitive personal information for one individual revealed / lost	Impact on an individual or small group	Contained within service
Significant 3	Major injury to an individual	Significant damage to small building or minor damage to several properties from one source	Litigation, claim or fine £50k to £250k.	>£100k to £500k	Noticeable impact on service performance.	Non sensitive personal information for several individuals revealed / lost	Impact on a local community	Local public or press interested
Major 4	Major injury to several people	Major damage to critical building or serious damage to several properties from one source	Litigation, claim or fines £250k to £1m	>£500k to £2m	Serious disruption to service performance	Sensitive personal information for one individual revealed / lost	Impact on several communities	National public or press interest
Catastrophic 5	Death of an individual or several people	Total loss of critical building	Litigation, claim or fines above £1m or custodial sentence imposed	>£2m	Non achievement of key corporate objectives	Sensitive personal information for several individuals revealed / lost	Impact on the whole of West Lothian or permanent damage to site of special scientific interest	Officer(s) and/or members dismissed or forced to resign