



Date	8 November 2022
Agenda Item	11

Report to West Lothian Integration Joint Board

Report Title: Risk Management

Report By: Chief Officer

Summary of Report and Implications	
Purpose	This report:
	- 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: 1. considers the risks identified, the control measures in place, and the risk actions in progress to mitigate their impact; 2. makes recommendations it thinks appropriate to the Chief Officer in relation to those risks, controls and actions.
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 to the Audit, Risk and Governance Committee which at alternate meetings reviews all IJB risks and IJB high risks.
1.2	The IJB's risk register is held on the Pentana risk system. The IJB currently has nine risks and details of each risk are set out in appendix one.
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	There are three risk scores for each risk: <ul style="list-style-type: none"> • 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 existing risk, assuming that controls are in place and effective; • The target risk score represents the risk score being worked towards.
1.5	Risks which score 12 or more for current risk are considered to be high. There are currently three high risks as follows: <ul style="list-style-type: none"> • SPCC002 Insufficient supply to meet service demands - care at home (score 16); • IJB004 Inadequate funding to deliver the Strategic Plan (score 12); • IJB008 Delayed Discharge (score 12).
1.6	Risk SPCC002 is a West Lothian Council risk attached to the IJB risk register. This was added at the request of the IJB following the risk management report to its meeting on 9 November 2021.

<p>1.7</p>	<p>In relation to the detail of appendix one:</p> <ul style="list-style-type: none"> • The traffic light icon represents the risk ranking based on the score; these are explained in the table at the start of Appendix 1; • There is a code, title and description for each risk; • 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.
<p>1.8</p>	<p>The standard risk assessment methodology is attached as Appendix 2.</p>

<p>Appendices</p>	<ol style="list-style-type: none"> 1. IJB Risks 2. Risk Assessment Methodology
<p>References</p>	<p>Report to Integration Joint Board 26 June 2018: Risk Management Policy and Strategy</p>
<p>Contact</p>	<p>Kenneth Ribbons</p> <p>kenneth.ribbons@westlothian.gov.uk</p> <p>015016 281573</p>





IJB Risks

Report Author: Kenneth Ribbons




Generated on: 26 October 2022 13:31


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

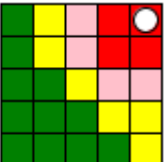
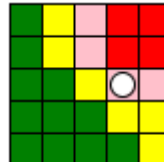
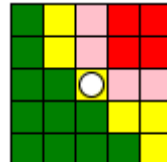
Key to Action Status


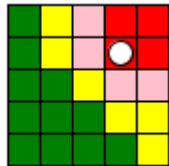
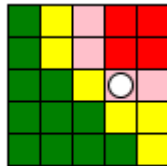
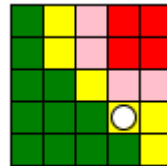
Icon	Status
	Overdue
	Approaching Due Date
	In progress


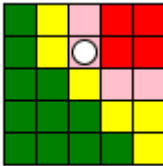
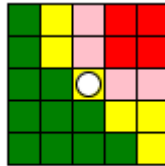
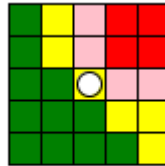

	SPCC002 Insufficient supply to meet service demands - care at home	<p>Insufficient supply of care at home to meet service demands arising from lack of availability of carers. This is a national and local issue. The challenges relate to recruitment and retention of care at home staff. This impacts on capacity to deliver care for existing and new service users and may also lead to an overreliance and an adverse impact on unpaid carers. Currently this risk is highest in respect of older peoples service. These capacity issues impact on people in the community needing care at home provision and also on capacity to discharge people from hospital where a care at home service is required. The risk is closely monitored by the Care at Home Oversight Group.</p>
	Internal Controls:	<ul style="list-style-type: none"> - Weekly care at home oversight group comprising senior staff with analysis of unmet need and additional data to monitor trends, rising demand. Update on the position of each care at home provider in relation to staffing levels and capacity to deliver - Close working with care at home commissioned providers to explore measures to improve the situation and regular provider forums in place; - Close links between integrated discharge hub, review team and commissioning team to ensure available resources are effectively managed and make best use of resources we have - Dedicated in box established for providers to allow for the geographic clustering of packages of care to enable providers to exchange packages that no longer fit their runs to create capacity and make them more efficient; - Targeted recruitment of health and social care staff to support internal resilience to support external providers where required; - Engagement with the Council's Access2Employment Team and arranged targeted meeting with the providers to ensure that the providers have access to national and local employment programmes and associated subsidies and support; - Development of plan to utilise additional funds provided by Scottish government to increase care at home capacity, including supportive role of TEC in this. - Benchmarking and connections with other local authorities, Scottish Care and Social Work Scotland to identify effective care at home capacity building elsewhere and apply learning where appropriate - Review current care at home framework arrangements to inform the future approach to the commissioning of care at home services;


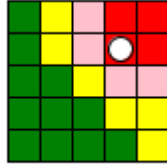
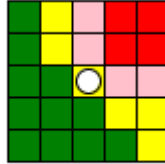
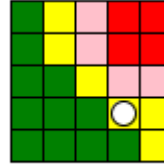
						- Arrangements in place to ensure regular contact with unpaid carers pending implementation of care packages.				
Risk Score	Original Risk Matrix	Risk Score	Current Risk Matrix	Risk Score	Target Risk Matrix	Linked Risk Actions	Original Due Date	Due Date	Progress	Description
16	<div> <div>Likelihood</div> <div>Impact</div> </div>	16	<div> <div>Likelihood</div> <div>Impact</div> </div>	6	<div> <div>Likelihood</div> <div>Impact</div> </div>					


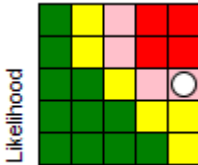
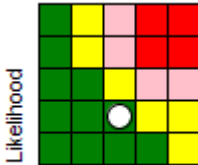
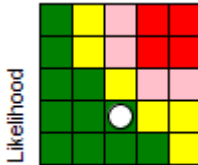
	IJB004 Inadequate funding to deliver the Strategic Plan	<p>Financial implications of Covid-19 are not met by additional funding provided by the Scottish Government. Core funding provided by partner bodies is inadequate, or is not effectively prioritised, including through the development of financial 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 monitoring of 2022/23 budget and key risk areas regularly reported to the Board 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 WL Integration Scheme – agreed financial and budgetary responsibilities including for overspends against delegated IJB functions</p>


						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	<div>Likelihood</div> <div></div> <div>Impact</div>	12	<div>Likelihood</div> <div></div> <div>Impact</div>	9	<div>Likelihood</div> <div></div> <div>Impact</div>						

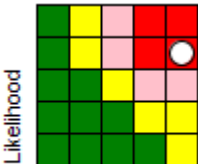
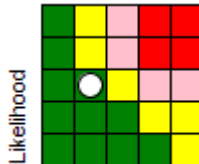
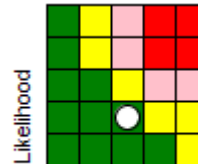



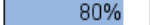

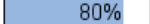


	IJB008 Delayed discharge	There is a risk that patients are not being discharged in a timely manner resulting in suboptimal patient flow, impacting on poor patient and staff experience and poorer outcomes of care.									
Internal Controls:						Community health and social care teams working with discharge 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 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 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							


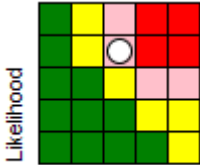
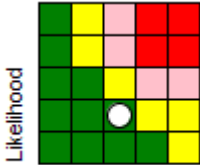
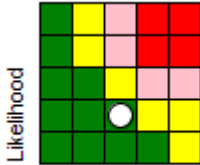
<div></div> IJB006 Workforce planning						Failure to deliver workforce plan leading to a failure to develop a sustainable workforce which has an adverse impact on performance and the ability of the IJB to achieve its strategic objectives.				
Internal Controls:						NHS and WLC workforce plans NHS and 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 Workforce Planning Group and Task Log New longer term workforce plan under development				
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	<div><div>Likelihood</div><div>Impact</div></div>	9	<div><div>Likelihood</div><div>Impact</div></div>	9	<div><div>Likelihood</div><div>Impact</div></div>	<div><div></div></div> IJB19019_Ari Employee Communication and Engagement Plan	30-Jun-2020	30-Nov-2022	<div><div></div><div>20%</div></div>	To develop and present to the IJB for approval an Employee Communication and Engagement Strategy/Plan.


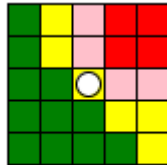
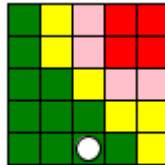
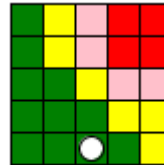
	IJB007 Sustainability of Primary Care					There is a risk that GP service provision will be disrupted, restricted or unavailable because of increasing capacity and demand issues as a result of population growth and/or GP practices experiencing difficulties in recruitment, retention or absence of medical 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		9		8							

	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 Refreshed Health and Care Governance 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
15		6		6							

	IJB002 Failure to effectively implement the Strategic Plan	<p>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.</p>
Internal Controls:		<p>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 Business support workplans aligned to strategic plan/commissioning plans Carers Strategy Implementation Group Forums for commissioned service providers Senior People and Learning Disability Forums Project Managers/business support in place to support Commissioning Plan Progress updates to the IJB on commissioning plans Community Planning and Regeneration representation on SPG, and supported people representation on IJB and SPG</p>

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		6		6		 IJB19010_Ar Strategic Commissioning Plan Mental Health	31-Mar-2023	31-Mar-2023	 80%	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	 80%	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	 80%	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	 80%	Develop and implement Strategic Commissioning Plan for Learning Disability as approved by IJB on 21 January 2020

	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 Performance Reporting, including weekly performance meetings and quarterly Reporting to the IJB					
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 and Regeneration representation on SPG, and supported people representation on IJB and SPG								
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, both within the council and elsewhere.

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 or contractual	Financial loss, penalties, or costs	Impact on service delivery	Personal privacy infringement	Community / environmental	Impact on Reputation
Insignificant 1	Minor injury or discomfort to an individual	Negligible property damage	Breaches contained within the service	Less than £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 in one incident	Minor damage to one property	Breaches reported within the council no external action	£10k to £100k	Minimal disruption to services	Non special category personal information for one individual revealed or lost	Impact on an individual or small group	Contained within service
Significant 3	Major injury or harm to an individual	Significant damage to small building or minor damage to several properties from one source	Adverse comment or censure by government, courts, auditors, or regulators	More than £100k to £500k	Noticeable impact on service performance.	Non special category personal information for several individuals revealed or lost	Impact on a local community	Local social media or press interest
Major 4	Major injury or harm to several people in one incident	Major damage to critical building or serious damage to several properties from one source	Government, court or regulator sanction, including action which impairs our ability to deliver a service	More than £500k to £2m	Serious disruption to service performance	Special category personal information for one individual revealed or lost	Impact on several communities	National social media or press interest
Catastrophic 5	Death of one or more people	Total loss of critical building	Government, court or regulator action resulting in an inability to deliver key services	More than £2m	Non achievement of key corporate objectives	Special category personal information for several individuals revealed or lost	Impact on the whole of West Lothian or permanent damage to site of special scientific interest	Officers and/or members dismissed, sent to prison or forced to resign