

Item No: 13

Meeting Date: Friday 24th June 2016

Integration Joint Board

Report By: Allison Eccles, Head of Business Development

Contact: Allison Eccles, Head of Business Development

Tel: 0141 287 8751

RISK REGISTERS

Purpose of Report:	The purpose of this report is to: <ul style="list-style-type: none"> Update members on the risk registers maintained in respect of the Integration Joint Board, Social Work Services and Health Board
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Recommendations:	The Integration Joint Board is asked to: <ul style="list-style-type: none"> Consider and approve the content of this report and appendices, Note that future scrutiny of the Integration Joint Board and Glasgow City Health and Social Care Partnership Risk Registers will be undertaken by the Finance and Audit Committee
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Implications for IJB:

Financial:	Financial implications may arise for some individual risks if the mitigation actions/controls that are currently in place do not work as anticipated
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Personnel:	Staffing resource requirements to maintain and develop integrated risk register
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Legal:	The Integration Joint Board is required by statute and agreements made in the Integration Scheme to address potential and actual risks related to the planning and delivery of integrated health and social care services
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Risk Implications:	
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Sustainability:	None
Economic Impact:	None
Sustainable Procurement and Article 19:	None
Equalities:	None
Implications for Glasgow City Council:	Current risk reporting arrangements between Social Work Services and Glasgow City Council to be reviewed in development of integrated risk management strategy.
Implications for NHS Greater Glasgow & Clyde:	Current reporting arrangements between the former Glasgow City CHP and NHS Greater Glasgow and Clyde to be reviewed in development of integrated risk management strategy.

1. Purpose

- 1.1 The purpose of this report is to update members on the current risk registers for the Integration Joint Board, Council and Health Board.

2. Current Status of Partners' Risk Registers

- 2.1. An Integration Risk Register is maintained to show the risks specific to the Integration Joint Board and is attached as Appendix A.
- 2.2. Risk Registers are currently maintained for Glasgow City Health and Social Care Services in line with the relevant policies of their parent bodies. The most recently updated Risk Registers for both sides of the integrated arrangements are attached as Appendix B and C.
- 2.3. All risk registers presented were reviewed by the Glasgow City Health & Social Care Partnership Senior Management Team on 10th May 2016.
- 2.4. Future scrutiny of the Integration Joint Board and Glasgow City Health and Social Care Partnership Risk Registers will be undertaken by the Finance and Audit Committee. Outcomes of this scrutiny will be available via the minutes for this Committee at subsequent IJB meetings available on the Glasgow City Health and Social Care Partnership website.

3. Recommendations

3.1 The Integration Joint Board is asked to:

- Consider and approve the content of this report and appendices ; and,
- Note that future scrutiny of the Integration Joint Board and Glasgow City Health and Social Care Partnership Risk Registers will be undertaken by the Finance and Audit Committee.

Ref	Status	Description of Risk	Risk Owner	Initial Risk Level				Control Actions	Current Risk Level				Latest Update
				Likelihood	Consequences	Risk Ranking	Risk Level		Likelihood	Consequences	Risk Ranking	Risk Level	
11	Live	There is a risk that the budget allocation from the GGC Health Board to the GHSCP will not be agreed before the end of the financial year (31/3/2016). This could lead to the IJB failing to comply with its statutory duties and being unable to direct financial resources pursuant to its Strategic Plan.	Chief Finance & Resources Officer	5	5	25	Very High	- Transformation Programme for the HSCP in place, with a range of programmes identified to support delivery of Strategic Plan within allocated budgets - Governance / reporting mechanism for Transformation Programme in development - Financial position monitored on ongoing basis by SMT, IJB Finance and Audit committee and full IJB	5	5	25	Very High	April 2016: Control Actions updated to reflect efficiencies activity undertaken to ensure delivery of Strategic Plan in light of reduced resources. Health Board allocation to IJB to be confirmed by end of June 2016, however an indicative budget has been identified.
1	Live	There is a risk that, as a result of the December 2015 budget, the settlement for both GCC and the NHS will be worse than had been previously included within respective planning assumptions. This could lead to budget allocations to the HSCP from both Partners requiring unprecedented levels of savings, resulting in an overspend within the HSCP and impact on ability to deliver the Strategic Plan.	Chief Finance & Resources Officer	5	4	20	Very High	- Transformation Programme for the HSCP in place, with a range of programmes identified to support delivery of Strategic Plan within allocated budgets - Governance / reporting mechanism for Transformation Programme in development - Financial position monitored on ongoing basis by SMT, IJB Finance and Audit committee and full IJB	5	4	20	Very High	April 2016: Control Actions updated to reflect ongoing activity to operate effectively within the constraints of reduced resources. Council allocation to IJB was agreed on 10.03.16. Health Board allocation to IJB to be confirmed end of June 2016, with indicative budget currently identified.
2	Live	There is a risk of the IJB being unable to budget within allocated resources which could lead to being unable to deliver on the Strategic Plan	Chief Finance & Resources Officer	5	4	20	Very High	- The Integration Scheme details the actions to be taken in the event of this and furthermore the contingency arrangements should parent bodies be unable/unwilling to provide additional funding - Transformation Programme for the HSCP in place, with a range of programmes identified to support delivery of Strategic Plan within allocated budgets - Governance / reporting mechanism for Transformation Programme in development - Financial position monitored on ongoing basis by SMT, IJB Finance and Audit committee and full IJB - Additional funding from Central Government has been made available in respect of HSCPs and the GCHSCP allocation of this has been identified.	5	4	20	Very High	April 2016: Control Actions updated to reflect ongoing activity to operate effectively within the constraints of reduced resources.
12	Live	There is a risk that differing employment terms could expose the Partnership to equal pay claims. This could lead to a detrimental impact on resources in order to investigate, defend and/or settle these.	Chief Finance & Resources Officer	3	5	15	High	- Staff continue to be employed by 2 separate organisations and do not have the same terms and conditions, however Equal Pay claims don't compare across different employers and no terms and conditions being changed. Head of Corporate Services to check with Legal.	3	5	15	High	April 2016: Control Actions updated by Head of Corporate Services to reflect current understanding of potential basis for Equal Pay claims.
3	Live	There is a risk that the volume of staff resource required to establish effective integrated arrangements while continuing to undertake existing roles / responsibilities / workload of key individuals may impact on organisational priorities and operational delivery	Chief Finance & Resources Officer	4	4	16	High	- workload and resource monitoring continues to be undertaken across the partnership (for example, through one-to-one supervision) - ongoing review of support (including work undertaken and resources being used) required for integrated arrangements	3	4	12	High	April 2016: Control Actions updated to reflect that review of support required by intergrated arrangements is ongoing, and that priorities continue to be managed via established supervision/workload management protocols.
5	Live	There is a risk that uncertainty around future service delivery models may lead to resistance, delay or compromise resulting in any necessary developments or potential opportunities for improvement not being fulfilled	Chief Officer	3	3	9	Medium	- High-level strategic vision articulated through the 2016-19 Strategic Plan. - Implementation actions for 2016/17 approved by IJB on 21/3/2016 provide some clarity and a framework for future service delivery. - Other proposed transformation projects will be notified to the IJB as a matter of routine. - Clear guidance on service development during interim period. - Acceptance that ongoing challenges of both organisations mean standstill is not a viable option	3	3	9	Medium	April 2016: Risk Owner title updated. Control actions updated by Risk Owner.
6	Live	There is a risk of Amendment of legislation or publication of further guidance from government which conflicts with Glasgow's planning assumptions, requiring decisions already made to be revisited which may lead to further slippage of previously agreed timescales	Chief Officer	3	3	9	Medium	- Chief Officer and all other joint senior officers have ongoing and routine engagement with civil servants and will become aware of any potential changes as they are being developed. - Any GCHSCP action in response to any proposed changes should be able to made proactively.	3	3	9	Medium	April 2016: Risk Owner title updated. Risk Owner amended the control actions in light of feedback provided at the Finance and Audit Committee.

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				Likelihood	Consequences	Risk Ranking	Risk Level		Likelihood	Consequences	Risk Ranking	Risk Level	
7	Live	There is a risk that negative staff perception of integration due to previous experience of CHCPs may lead to an adverse affect on engagement / buy-in to new partnership	Chief Officer	4	4	16	High	- Comms messages acknowledge previous experience and outline how new partnership is different - OD events to engage staff in development of integrated arrangements and build new culture - Workforce development and OD strategy to be developed within 1st year of establishment of IJB	3	3	9	Medium	April 2016: Risk Owner updated.
8	Live	There is a risk that the Partners put in place revised governance mechanisms between the IJB and themselves which could lead to increased bureaucracy in order to satisfy the alternative arrangements that require to be put in place.	Chief Officer	3	4	12	High	- Chief Officer to maintain a visible and influencing presence in the development of any future governance arrangements to ensure that such potential arrangements are lean and manageable.	3	3	9	Medium	April 2016: Risk Owner title updated. Risk Owner amended the control actions in light of feedback provided at the Finance and Audit Committee.
9	Live	There is a risk that the clinical and professional governance arrangements that are being established fail to discharge the duties incumbent upon them	Chief Officer	4	4	16	High	- Review of processes established - 'Double running' of existing arrangements while revised structures are established	2	4	8	Medium	April 2016: Risk Owner updated.
4	Closed	There is a risk of external bodies disagreeing with GHSCP approach or feel they have not been adequately consulted in development of the Strategic Plan which may lead to adverse political and/or reputational impact to both GCC and NHS GGC	Chief Officer	4	4	16	High	- ensure consultation around Integration Scheme and Strategic Plan is as comprehensive as practically possible and compliant with statutory requirements as a minimum - development of participation and engagement strategy which promotes wide stakeholder consultation and engagement throughout planning cycle - Early publication of Strategic Plan for consultation to mitigate shortened consultation period. Consultation closed on 31 Dec 2015, and analysis of feedback will be available to IJB when they are asked to approve the Strategic Plan in March 2016.	3	4	12	High	April 2016: This risk can be removed as no longer applicable. The Strategic Plan consultation has now concluded.
10	Closed	There is a risk that the Timescale for establishment of Integration Joint Board and guidance re role of IJB in development / approval of Strategic Plan may conflict with Glasgow's planned 'go-live' dates which may lead to a period where the IJB is unable to legally undertake its strategic role and objectives	Chief Officer	5	4	20	Very High	- Review instruction from Scottish Government and consider current planned timescales in this context - Early publication of Strategic Plan to mitigate shortened consultation period. The consultation closed on 31 Dec 2015 - The IJB was established on 8 Feb 2016. - The Strategic Plan will be presented to the established IJB on 21 Mar 2016	1	4	4	Medium	April 2016: This risk can be removed as no longer applicable.

Reference	Status	Description of Risk	Risk Owner	Position Held	Risk Manager(s)	Likelihood	Consequences	Risk Ranking	Risk Level	Control Actions	Likelihood	Consequences	Risk Ranking	Risk Level	Next update due	Most recent update
33	Live	There is a risk of industrial action in response to Glasgow City Council proposals to change terms & conditions. This could result in the withdrawal of life & limb cover to 24 hour services which would result in significant disruption to residential services for Children and Young People, Older People and Homeless Persons.	David Williams	Chief Officer	Susanne Millar	5	5	25	Very High	Ongoing monitoring of situation and contingency planning by senior management	5	5	25	Very High	Jul-16	NEW RISK ADDED MAY 2016
34	Live	There is a risk of industrial action in response to Glasgow City Council proposals to change terms & conditions. This could result in the necessity to purchase external placements (especially for Children & Young People) in addition to those already accounted for, which would severely impact on the financial position of the service.	David Williams	Chief Officer	Sharon Wearing	5	5	25	Very High	Ongoing monitoring of situation and contingency planning by senior management	5	5	25	Very High	Jul-16	NEW RISK ADDED MAY 2016
25	Live	There is a risk that the implementation of welfare reform will lead to increased deprivation for the most vulnerable citizens, thereby leading to an increased demand for social work services including emergency payments, homelessness, welfare rights and general social work support. This could affect the ability of the service to meet demand.	Susanne Millar	CSWO & Chief Officer - Planning, Strategy and Commissioning (GHSCP)	Allison Eccles	5	5	25	Very High	Contribution to the corporate welfare reform group; effective communications with service users and other stakeholders; information dissemination on rights to appeal; appeals packs for service users developed; Welfare Reform training delivered to 3rd sector. Key messages have been refreshed and disseminated again widely in line with the current stage of reform. Significant further training has been provided to voluntary sector organisations. Linkages with the Scottish Welfare Fund has resulted in a significant increase in the number of people appealing benefit sanctions.	5	4	20	Very High	Jul-16	Update April 2016: Continued provision of training on Welfare Reform to 3rd sector and other organisations. Welfare Reform event held on 18/04/16 with a wide range of stakeholder organisations to co-produce refreshed messages.
16	Live	There is a risk that the Department's service reform and Budget and Service Plan programmes fail to deliver the required outcomes in terms of delivery of statutory duties; service modernisation and financial savings. This would have the impact of necessitating potential drastic and unplanned cuts in order to realise the savings requirements thereby leaving services and service users vulnerable.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Allison Eccles/Colin Christie	5	4	20	Very High	Fortnightly Integration Transformation Board meetings Weekly Executive Group meetings to approve critical progress issues CSWO led SMT's in both Adult and Children and family Services review and progress Performance Management Framework incorporating City-wide, local and care group performance reporting Regular planned and structured liaison with providers re changes Service User engagement Trade Union liaison at strategic and local levels	4	4	16	High	Jul-16	Update April 2016 (Allison Eccles): Changes to control actions to reflect current senior management roles and meetings.
31	Live	There is a risk that the renewal of the OLM contract will not be concluded by the 31st of March and the current proposal for a standard one year extension will not meet the business needs and cost significantly more than a partnership contract resulting in a lack of support from the supplier, potentially affecting all areas of social work services if careFirst fails and cannot be fixed by ACCESS, and additional costs to the Council, and decreasing the ability to implement transformational change for the Health and Social Care Partnership	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Fiona Lockhart	4	4	16	High	ACCESS are dealing with the contract renewal, and the concerns around the implications of the current situation have been raised with Senior Management.	4	4	16	High	Oct-16	Update April 2016: The contract has now been extended for a further year, but there is a residual risk in relation to the work required in relation to the contract position for next year.
2	Live	There is a risk of failure to meet statutory Health & Safety requirements. This may result in major loss of service through establishment fire, major catastrophe or infections; or singular catastrophic incidents which could result in death or serious injury of service users and/or staff.	Christina Heuston	Head of Corporate Services (GHSCP)	Ralph Irvine	4	5	20	Very High	Service is a member of the Council's, Asbestos Strategic Management Group that monitors actions regarding the management of Asbestos. The Service has appointed a Health and Safety Co-ordinator who actively monitors the arrangements for the control of Asbestos, Service Control of Asbestos Management Standard issues June 2014 Departmental Health & Safety Policy & manuals Fire safety management system. H&S risk assessment processes, e.g. fire, legionella, alarms etc. Business Continuity Plans for functions being re-developed based on Business Impact Analysis exercise. Respond to all audit and inspection requirements. Emergency procedures in place for all accommodation Range of H&S training in place e.g. Fire Wardens, Manual Handling etc. Regular Fire and Alarms Equipment testing with contracts for maintenance and checks in place. Monitoring of claims. Managing Violence at Work Policy Document and monitoring of Violent Incident reports. Legionella risk managed by ACCESS.	3	5	15	High	Jul-16	Update April 2016: The Health & Safety Management Standards are currently being reviewed, these will be issued by the date of the next Risk Register Review therefore references in the control actions may change.
17	Live	There is a risk that the Glasgow MAPPA arrangements fail resulting in risk to Glasgow citizens from registered sex offenders	David Williams	Chief Officer (GHSCP)	Susanne Millar	4	5	20	Very High	Criminal Justice SMT is part of the agenda for the 4-weekly SWLT meeting. MAPPA Strategic Oversight Group meets every 3 months MAPPA Operational Group meets every 6 weeks MAPPA national guidance Multi agency Risk Register in place and standing item on the agenda of both meeting structures NASSO meeting every quarter with RSL providers Memorandum of Understanding in place between statutory agencies and reviewed annually Criminal Justice SMT monthly meeting to overview CJ practice Monthly CJ strategic/operational group chaired by Head of CJ	3	5	15	High	Jul-16	Update April 2016: No change

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18	Live	There is a risk of failure in the implementation of Child Protection procedures and arrangements resulting in increased and/or avoidable risk/harm to children and/or young people	David Williams	Chief Officer (GHSCP)	Susanne Millar	4	5	20	Very High	Children & Families SMT is part of the agenda for the 4-weekly SWLT meeting Child Protection Committee and sub groups Local area CP forums Quarterly meeting of Chief Officers group Management information produced and reviewed monthly at C&F SMT and area SMTs 1/2 yearly LMR process overseen and coordinated by CP team ASM structure providing QA, monitoring and objectivity to local practice Robust single agency and multi agency training programme in place	3	5	15	High	Jul-16	Update April 2016: No change
19	Live	There is a risk of failure in the implementation of Adult Protection procedures and arrangements resulting in increased or avoidable risk/harm to vulnerable adults	David Williams	Chief Officer (GHSCP)	Sheena Morrison	4	5	20	Very High	Adult Protection Committee and sub groups Local area ASP forums Quarterly meeting of Chief Officers group Management information produced and reviewed quarterly at SMT and area SMTs ASM structure providing QA, monitoring and objectivity to local practice Robust single agency and multi agency training programme in place SWS have employed a grade 9 service manager to oversee practice improvement	3	5	15	High	Jul-16	Update April 2016 (Raymond Bell): No change
28	Live	There is a risk that care home design provision for resilience in the event of a utility failure could result in design solutions that may attract unforeseen and additional revenue and capital expenditure.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Tom Sweeney	4	5	20	Very High	Capital Programme Governance arrangements. Corporate partners working to develop viable solutions which will be evaluated through the Governance Board.	3	5	15	High	Oct-16	Update April 2016: No change.
29	Live	There is a risk that resolution of outstanding design issues on the Commonwealth Games site could result in an operational and financial impact on SWS.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Tom Sweeney	3	5	15	High	Capital Programme Governance arrangements.	3	5	15	High	Oct-16	Update April 2016: No change.
1	Live	There is a risk that arrangements with ACCESS do not meet the ICT requirements for Social Work Services resulting in a failure of SWS to meet its business objectives and deliver services affecting vulnerable service users.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Fiona Lockhart	4	4	16	High	Carefirst and ICT Strategy Board (4 weekly) Carefirst Technical Board (4 weekly) (ACCESS and supplier both present at the above meetings) ICT Operational meeting now in place Improvement actions from job swap underway Development of maintenance of pipeline plan	3	4	12	High	Jul-16	Update April 2016: Replanning continues following the December incident, but many projects have now re-started.
3	Live	There is a risk of negative media publicity resulting in loss of public support and low staff morale affecting our ability to deliver services to vulnerable children and adults and the confidence of service users in the services upon which they rely.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Allison Eccles	4	5	20	Very High	<ul style="list-style-type: none"> • Glasgow City HSCP Joint Media Protocol for media enquiries and proactive communications in place • Links with Glasgow City Council and NHS Greater Glasgow and Clyde Corporate Communications Teams, including PR Teams • Glasgow City HSCP Joint Communications Strategy in place, with key communications channels for the corporate partner organisations and the Partnership (e.g., Health and Social Care Integration Newsletter and Bulletins, website presence, email announcements) • Regular communications survey in place • Glasgow City HSCP Brand Identity Guidelines in place • Communications guidelines developed as required; Twitter guidelines (completion June 2016) and email signature guidelines (June 2016) • Development of further communications channels for stakeholders; Twitter (completion June/July 2016) and external website (completion end of 2016) • Process in place to identify and publish 'Good News' stories to promote a positive image for the Glasgow City HSCP • Weekly joint meetings between Social Work and Health staff within the Glasgow City HSCP supporting communications to ensure a co-ordinated approach • Arrangements in place to disseminate joint communications in a consistent and timely manner across the Glasgow City HSCP • Individual communications strategies or plans for 	3	4	12	High	Jul-16	Update April 2016: Control actions all updated by Business Development Manager responsible for Communications.
4	Live	There is a risk of an inability to respond to needs for services on a 24 hour basis due to failure of or disruption to facilities or staff affecting mainstream and out-of-hours services. This is as a consequence of exceptional, one-off and unexpected events such as strike action, pandemic flu, extreme weather events. The impact of this is that service users in significant numbers across the city may not be able to receive a continuing service for a limited period of time.	Susanne Millar	CSWO & Chief Officer - Planning, Strategy and Commissioning (GHSCP)	Janette Cowan	4	4	16	High	Business Continuity Plans for SWS functions in place based on Business Impact Analysis exercise Industrial Relations Strategy in place. Monthly meetings at Director level with senior Trade Union officials. Business Continuity Reps identified in each service area Business Continuity Working Group chaired by the service Business Continuity Champion (Head of Business Development) and meets quarterly (to be increased to monthly until BCPs are updated to reflect HSCP)	3	4	12	High	Jul-16	Update April 2016: No change

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6	Live	There is a risk that contractor/partner arrangements fail. This may result in a failure to deliver services appropriately with a provider or other agencies leading to a failure to care/protect service users	Susanne Millar	CSWO & Chief Officer - Planning, Strategy and Commissioning (GHSCP)	Raymond Bell	5	4	20	Very High	Contract Management Framework. Contractor Risk Ratings Matrix. Data sharing & GHA/RSL protocols. Data Processing Agreements with Health/SCRA/Education. Procurement activity undertaken in accordance with written agreed procedures. All contractual arrangements over the approved thresholds referred to appropriate committee for approval. Business Continuity Plans for functions being re-developed based on Business Impact Analysis exercise. Ensuring providers/other agencies have health and safety procedures/arrangements in place Regular meetings with key providers and the Social Care Ideas Factory regarding strategic provider related issues	3	4	12	High	Jul-16	Update April 2016: No change
7	Live	There is a risk that ICT security fails resulting in loss/misuse of data, breach of confidentiality, a fine from the Information Commissioner, reputational damage, and potential harm to service users affecting public and service user confidence	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Fiona Lockhart	4	4	16	High	Information Security Governance via Information Security Board. Policies and guidance regularly updated and annual mandatory training provided via GOLD or leaflet. New screensavers being implemented for 2016. Information sharing protocol with NHSGG&C in place. All ICT developments progressed through project management methodology which includes risk logs and Privacy Impact Assessments are undertaken as required. The majority of devices are now encrypted and authorisation process in place for unencrypted devices. Disclosure process in place for PSN compliance. Secure email piloted and will be rolled out alongside protective marking.	3	4	12	High	Jul-16	Update April 2016: No change.
11	Live	There is a risk that ICT systems affecting statutory requirements fail resulting in a lack of access to relevant information affecting our ability to protect/care for vulnerable children and adults.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Fiona Lockhart	3	4	12	High	CareFirst is designated a Platinum system. I-World has been designated Top Gold. Service Level Agreements on availability for key systems with ACCESS. Ongoing training programme. Regular review and updating of systems and technologies to ensure compliance with technical strategy and supplier maintenance agreements.	3	4	12	High	Oct-16	Update April 2016: a careFirst fault resulting in staff losing data has been investigated for almost a year. This has been escalated. Risk Manager has changed residual risk rating from '6' to '12' to reflect this increased risk.
30	Live	There is a risk that resolution of outstanding design issues and adverse site conditions on the Leithland site could result in an operational and financial impact on SWS programme.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Tom Sweeney	5	4	20	Very High	Capital Programme Governance arrangements. Regular monitoring of contract by DRS Project Team. Reporting to Social Work Capital Board. Reporting to Council Capital Board. Corporate partners working to develop viable solutions which will be evaluated through the governance process.	3	4	12	High	Oct-16	Update April 2016: No change.
32	Live	There is a risk that the joint Health Centre and Social Care Daycentre development at Woodside is currently projected to be in excess of the allocated budget. This could resulting in a greater financial and operational impact on the Council	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Tom Sweeney	4	4	16	High	Capital Programme Governance arrangements. Corporate partners working to develop viable solutions which will be evaluated through the Governance Board..	3	3	12	High	Oct-16	NEW RISK ADDED APRIL 2016
27	Live	There is a risk that final confirmation of outstanding care home sites will affect the projected timescales associated with concluding the wider project objectives. This could result in a greater financial and operational impact on the Council.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Tom Sweeney	3	5	15	High	Capital Programme Governance arrangements. Corporate partners working to develop viable solutions which will be evaluated through the Governance Board.	2	5	10	High	Oct-16	Update April 2016: No change.
13	Live	There is a risk that the use of multiple systems may affect and impede the development of joint working and service delivery resulting in duplication, lack of coordination and inefficient use of scarce resources.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Fiona Lockhart	4	3	12	High	Health and Social Care Integration (HSCI) ICT Steering group is overseeing the development of an ICT strategy for the HSCP and a number of projects to take forward the strategy. The focus initially is to let staff access what they need wherever they need it. Subsequent phases will address application requirements.	3	3	9	Medium	Oct-16	Update April 2016: Technology to join the GCC and NHS networks has been proved and is moving to site testing. Work is underway to make applications available in a 'joint desktop' with initial focus on Senior Managers.
26	Live	There is a risk of reduced income from charging as service users experience a reduction in their income as a result of welfare reform. This could affect the ability of the service to meet demand.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Colin Christie	4	3	12	High	Review charging policies	3	3	9	Medium	Oct-16	Update April 2016: Creation of Finance Income Team will take responsibility for completion of financial assessments, with intention of timeous processing of assessments to both ensure service users are income maximised and proper levels of charge are implemented.
8	Live	There is a risk that internal financial management and control processes fail to operate effectively, resulting in avoidable budget pressures, poor use of resources, and unsound decisions, affecting all areas of the Service.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Colin Christie	3	4	12	High	Compliance with established framework and policies for financial management and control, including Financial Regulations, Management and Control - Code of Practice. Clearly defined roles and responsibilities. Regular financial monitoring and reporting at all appropriate levels of Service. Scheme of Delegation. Internal Financial Control Assurance Statement. Budget and Service Plan process.	2	4	8	Medium	Jul-16	
12	Live	There is a risk that external funding may be reduced, restricted or ceased, resulting in closure of services or budget pressures within services, affecting vulnerable client groups and service users.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Colin Christie	3	4	12	High	Continued engagement with providers of external funding. Development of financial framework around specific projects to provide certainty of timescale. Regular monitoring of external funding to ensure timeous reporting and ability to respond to budget pressures.	2	4	8	Medium	Oct-16	Update April 2016: 2015/16 Probable Outturn likely to be within anticipated position. Update Nov 2015: P7 Probable Outturn +£3.7m. Monitoring in line with that position.

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15	Live	There is a risk that workforce planning/reduction in staffing levels and loss of skilled staff might compromise the Service's ability to deliver services and fulfil our statutory duties. This could have the impact of service users not receiving services they're entitled to and which leaves them at risk.	David Williams	Chief Officer (GHSCP)	Sharon Wearing	3	4	12	High	Trade Union liaison at strategic and local levels. HSCP Workforce Planning Sub Group and Board chaired by Chief Officer (Finance & Resources) which feeds directly into the Executive Group and the Leadership Team. It comprises CSWO, CO (Ops) and SWS and NHS HR reps. CSWO advises group of any potential risks in relation to staffing reductions.	2	4	8	Medium	Oct-16	Update April 2016: Risk Manager amended from CSWO to CO (F&R). Control Actions updated to show that there is an HSCP Workforce Planning Sub Group and Board
21	Live	There is a risk that the Older Peoples Residential Strategy will fail to deliver the planned new care homes and day care facilities within planned timescales resulting in pressures to expend resources to repair and maintain existing facilities affecting the Social Work budget generally.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Tom Sweeney	3	5	15	High	Capital Programme Governance arrangements. Regular monitoring of contract by DRS Project Team. Reporting to Social Work Capital Board. Reporting to Council Capital Board.	2	4	8	Medium	Oct-16	Update April 2016: No change.
22	Live	There is a risk that the Older Peoples Residential Strategy will fail to deliver the planned new care homes and day care facilities within approved capital and revenue budgets resulting in need to apply additional resources affecting the Council budget.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Colin Christie	3	4	12	High	Capital Programme Governance arrangements. Regular monitoring of contractor by DRS Project Team. Reporting to Council Capital Board.	2	4	8	Medium	Oct-16	Update April 2016: SWS will realign budgets to address areas of pressure within OP Residential Strategy
23	Live	For the Commonwealth Games Care Home, there is a risk that the Older Peoples Residential Strategy will fail to meet required Care Inspectorate standards resulting in adverse reporting and poor levels of service to vulnerable clients affecting the Council's reputation within the market.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Tom Sweeney	3	5	15	High	Capital Programme Governance arrangements.	2	4	8	Medium	Oct-16	Update April 2016: No change.
24	Live	There is a risk that the transition between current and new care homes is not managed effectively resulting in an impact on levels of care provided affecting vulnerable service users.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	Clare Hughes	3	5	15	High	Capital Programme Governance arrangements. Development of transition strategy. Establishment of city-wide reference group for service users.	2	4	8	Medium	Oct-16	Update April 2016: An operational plan is in place to ensure the commissioning of Loancroft, Fulton Lodge and Peter MacEachran Care Homes and residents located to new build at Commonwealth Games site.
5	Live	There is a risk of failure to translate Strategic Objectives into operational arrangements. This may result in a failure to fulfil statutory duties or to protect vulnerable service users.	Susanne Millar	CSWO & Chief Officer - Planning, Strategy and Commissioning (GHSCP)	Allison Eccles	3	3	9	Medium	ASPIR process. Performance Management Framework. Budget Pressures & Impact Analysis reports. Progress actions jointly agreed with Health and Partners. Commissioning Strategy. Joint protocols. Child Protection and Adult Protection structures. Complaints procedures. External Inspections by SWIA and HMle Child Protection Procedures. Practice Audit. Professional Governance Board. Internal Audit activity.	2	3	6	Medium	Oct-16	Update April 2016: No change
9	Live	There is a risk of failure to respond/inadequate response to emerging changes in legislation, or improvements in services in light of HMIE, Care Inspectorate or other regulatory bodies' inspections. This could have the impact of service users not receiving services they're entitled to and which leaves them at risk.	David Williams	Chief Officer (GHSCP)	Susanne Millar	2	3	6	Medium	Liaison with UK/Scottish Government departments. Budget monitoring and adjustment as required. Discussion of new legislation at weekly Business Meeting/monthly Leadership Team. Training in place to support staff. Governance Board and sub group to support Chief Social Worker role. Management reporting systems. Variety of protocols in place. Corporate protocol to SG Consultations responses.	1	3	3	Low	Dec-16	
14	Closed	There is a risk that the service will not be able to meet the future registration requirements of the Scottish Social Service Council as new parts of the SSSC's register open resulting in a failure to meet all regulatory requirements.	Susanne Millar	CSWO & Chief Officer - Planning, Strategy and Commissioning (GHSCP)	Christina Heuston/Clare Hughes	3	4	12	High	Audit of all registration requirements and status of all staff who are registered with different regulatory bodies. Training needs identified and staff supported to access appropriate qualifications. Programmes developed and delivered as required.	2	4	8	Medium	Oct-16	Update April 2016 (Clare Hughes): Registration is now complete. Request removal from register

Glasgow City Health Risk Register April 2016

Division	ID	Title	Description	Manager	Likelihood (initial)	Consequence (initial)	Rating (initial)	Risk level (initial)	Controls in place	Likelihood (current)	Consequence (current)	Rating (current)	Risk level (current)	Review date
GCHSCP	1417	Shortage of Staff	Shortage of appropriate/competent staff e.g. increase in vacancies within District Nursing, Health Visiting compromising the ability to deliver service.	Sybil Canavan	5 - Will undoubtedly recur, possibly frequently	5 - Extreme	25	V HIGH	Recruitment arrangements. Succession and workforce planning. Contingency arrangements as for poor weather and other circumstances.	5 - Will undoubtedly recur, possibly frequently	4 - Major	20	VHIGH	24/06/2016
GCHSCP	1418	Financial CHP Wide	Failure to deliver savings plan in 2016/17 which may result in overspend which will need to be met in future years from increased savings.	Alex MacKenzie	5 - Will undoubtedly recur, possibly frequently	5 - Extreme	25	V HIGH	Regular financial monitoring at Sector and CHP level. Development of savings plans to meet Board targets.	5 - Will undoubtedly recur, possibly frequently	4 - Major	20	VHIGH	24/06/2016
GCHSCP	1511	GP practices	Glasgow City HSCP may experience a local GMS practice terminating its contract, such that the HSCP will have to directly provide GMS services this may happen with relatively little notice	Richard Groden	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Developing a response "toolkit" for practices "in distress" and seeking support in terms of an initial assessment and what might be offered by way of further in depth assessment and identifying a suitable starter for ten range of responses. □ Developing an approach to pro-actively identify/support practices that might be approaching an "in distress" state, including mechanisms and possible responses	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	24/06/2016
GCHSCP	1423	Critical Failure of care	Critical failure of care leading to harm to service user (including suicide, child protection, adult support and protection)	Alex MacKenzie	3 - May recur occasionally	5 - Extreme	15	High risk	Referral process, Staff supervision, Existing policies, procedures and guidelines Inspection regimes- child protection	3 - May recur occasionally	4 - Major	12	High risk	24/06/2016
GCHSCP	1425	Clinical communications	Clinical Communications-delays or errors in clinical information being transferred between services, leading to errors in medication or failings in care or treatment of an individual	Dr Paul Ryan	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Guidelines and protocols	3 - May recur occasionally	4 - Major	12	High risk	24/06/2016
GCHSCP	1428	Prescribing costs-Financial	Prescribing costs exceeding the allocated budget threatening CHP services	Richard Groden	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Budget performance monitoring □ Prescribing monitoring, Risk sharing across CHP/CHCP , prescribing plan to identify and generate savings if required	3 - May recur occasionally	4 - Major	12	High risk	24/06/2016
GCHSCP	1429	Failure to meet Access/ Discharge Targets	Failure to meet Access/discharge targets	Lorna Dunipace	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Working group established, Links with Social work, Funding, Continue to monitor/audit delayed discharges with acute	3 - May recur occasionally	4 - Major	12	High risk	24/06/2016

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GCHSCP	1431	External providers	External care providers not recognising health needs/ not seeking appropriate advice Impact of personalisation on staffing levels	Paul Adams	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Provider training professional specific advice medication protocols, clear transfer of information into provider care plans, monitoring via Care Commission Inspectorate NHS input into personalisation process More robust use of service concerns	3 - May recur occasionally	4 - Major	12	High risk	24/06/2016
GCHSCP	1434	Clinical Records	Delays or errors in clinical information being transferred leading to medication errors or failings in care and treatment of an individual. Potential for complaints, litigation and adverse publicity. Sensitive personal information being inappropriately disclosed in error. This risk is evident in mental health as they move towards EMIS. Lack of consistent and documented procedure for the storage and destruction of community health records	Mari Brannigan	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Guidelines and protocols in place. Audits of practice by clinical teams. awareness of Data Protection Principles. Review in progress of current arrangements	3 - May recur occasionally	4 - Major	12	High risk	24/06/2016
GCHSCP	1435	Capital Developments - financial	Capital Developments- Insufficient revenue to cover on-going costs of projects	Alex MacKenzie	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Project governance structures in place to minimise risk Risk register within project areas identified costs associated with risk at regular intervals Risks escalated though capital governance structure On-going discussions with social work	4 - Will probably recur, but is not a persistent issue	3 - Moderate	12	High risk	24/06/2016
GCHSCP	1436	Business continuity/ Major Incidents	Business continuity Service interruption due to unavoidable incidents, damage to facilities, loss of power of IT services, staffing shortages caused by industrial action	David Walker	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Business continuity plans in place across services, with coordination via partnerships business Continuity group and Board wide Civil Contingencies Group	3 - May recur occasionally	4 - Major	12	High risk	24/06/2016
GCHSCP	1437	Prison prescribing costs	Prescribing costs in prison healthcare exceeding the allocated budget threatening CHP services Prison Population numbers rising placing increased demands on pharmacy budget	Mrs Fiona McNeill	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Budget monitoring/prescribing plan to identify and generate savings if required. NHSGGC to be included in national discussions with SPS in the management of prison population. national contract monitoring by national procurement Local scrutiny by CHP pharmacy on invoicing	3 - May recur occasionally	4 - Major	12	High risk	24/06/2016

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GCHSCP	1439	Information Governance MAPPA information sharing	Sensitive or confidential information is inappropriately shared resulting in adverse media impact and loss of public confidence	Alex MacKenzie	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Information sharing protocols have been developed with relevant agencies and the directorate regularly remind staff of their responsibilities	4 - Will probably recur, but is not a persistent issue	3 - Moderate	12	High risk	24/06/2016
GCHSCP	1669	NMC Revalidation/ Annual fees	There is a risk if the registrant does not submit the relevant Revalidation documentation or NMC fees before their due date as their registration will automatically lapse and they will be unable to practice	Mari Brannigan	4 - Will probably recur, but is not a persistent issue	4-Major	16	High Risk	Regular updates on Revalidation awareness sessions available Information on NMC web site Standing item on staff meetings Local NMC databases. SSTS database in development which will link staff pay number to date of revalidation	3 - May recur occasionally	4 - Major	12	High risk	24/06/2016
GCHSCP	1670	Medical and Nursing cover	There is a risk that there is not enough medical and nursing cover for Sexual Assault Examinations provided by Archway and that contracted Forensic Physicians are unable to fill the gap	Rhoda MacLeod	5-Will undoubtedly recur, possibly frequently	4-Major	20	High risk	New Forensic Contract. Recent service review recommends further development of service model	4- Will probably recur, bit is not a persistent issue	4- Major	16	High risk	24/06/2016