



Item No. 7

Meeting Date **Wednesday 6th December 2017**

Glasgow City Integration Joint Board Finance and Audit Committee

Report By: Allison Eccles, Head of Business Development
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Tel: 0141 287 6752

RISK MANAGEMENT POLICY AND REGISTERS REVIEW WORKING GROUP

Purpose of Report:

The purpose of this report is to inform the IJB Finance and Audit Committee of the work carried out by the Risk Management Policy and Registers Working Group and to make recommendations accordingly.

Background/Engagement:

A short-life Working Group was established following an IJB development session in June 2017 to:

- a) carry out a review of how the risk management framework maintained within the HSCP are reported to the IJB and IJB Finance and Audit Committee, and;
- b) review and update the IJB Risk Management Policy accordingly.

The Working Group included involvement of IJB members.

Recommendations:

The IJB Finance and Audit Committee is asked to:

- a) note the content of this report, and;
- b) review the recommendations of the working group.

Relevance to Integration Joint Board Strategic Plan:

The Glasgow City IJB Integration Scheme requires that its Risk Management framework and policy is reviewed annually.

A regularly reviewed and updated risk management framework provides the IJB with information to aid decision making in relation to the Strategic Plan.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	The maintenance of a risk management framework aligns with Outcome 9 (Resources are used effectively and efficiently in the provision of health and social care services).
Personnel:	N/A
Carers:	N/A
Provider Organisations:	N/A
Equalities:	N/A
Financial:	N/A
Legal:	The Glasgow City IJB Integration Scheme requires that its Risk Management framework and policy is reviewed annually.
Economic Impact:	N/A
Sustainability:	N/A
Sustainable Procurement and Article 19:	N/A
Risk Implications:	There are no risks for the Partnership arising from the recommendations of this report.
Implications for Glasgow City Council:	None. The Social Work Risk Register will continue to comply with the Glasgow City Council Risk Management Strategy and Policy.
Implications for NHS Greater Glasgow & Clyde:	None. The Health Risk Register will continue to comply with the NHS GGC Risk Management Policy.

1. Purpose

- 1.1. The purpose of this report is to inform the IJB Finance and Audit Committee of the work carried out by the Risk Management Policy and Registers Working Group and to make recommendations accordingly.

2. Background

- 2.1. As part of the programme of Development Sessions for Integration Joint Board (IJB) members, a session was led by the Head of Business Development in June 2017 to provide a summary of the risk management framework maintained within the Partnership.
- 2.2. It was agreed at this session that a short-life working group would be established, which would include representation from the IJB, to identify the IJB's needs in terms of the risk management framework and to make recommendations on any changes required in order to meet these.
- 2.3. A Risk Management Policy and Registers Working Group ('the Working Group') was therefore established to:
 - a) carry out a review of how the risk management framework maintained within the HSCP are reported to this Committee and the IJB, and;
 - b) review and update the IJB Risk Management Policy accordingly.

3. Issues reviewed by the Working Group

- 3.1. At its initial meeting the Working Group agreed the following specific issues for review:
 - The volume of risk information reported to the IJB can be counter-productive to effective scrutiny.
 - The differing terminology and format of the 3 risk registers reported to the IJB can be an obstacle to understanding the information reported.
 - The risk management framework is not completely in line with the current IJB Risk Management Policy (for example, risk items are not categorized as Operational or Strategic)
 - There is a need for any control actions stated in the risk registers (particularly those reported as mitigating High or Very High risks) to be SMART¹ and documented as such.
 - There needs to be a process to allow the IJB to carry out more detailed scrutiny of individual risks, and better understanding of how the IJB can input to the risk management framework if required.

¹ S.M.A.R.T is an acronym that stands for Specific, Measurable, Achievable, Realistic and Time bound (or Time Measured)

- The Risk Management Policy for NHS Greater Glasgow and Clyde is up-to-date; however, the Glasgow City Council policy has not been reviewed and updated for a number of years.

4. Recommendations of the Working Group

4.1. Following detailed discussion and review of the issues noted above, the Working Group recommends the following:

- The IJB Finance and Audit Committee is the most appropriate body to receive and review the quarterly risk management update report on behalf of the IJB, with an annual summary reported to the main IJB.
- Only those risks assessed as having a current risk level of 'High' or 'Very High' be reported regularly to this Committee.
- An assurance statement be included in the quarterly report to this Committee that Low and Medium risks have been reviewed and continue to be effectively managed by the relevant risk owner/manager. The Committee will retain the right to request additional evidence of this as required.
- A single appendix to the quarterly report be provided that contains the risk items from all 3 risk registers. This will be standardised in both terminology and format to facilitate improved understanding and scrutiny of the content.
- Risk items presented to this Committee are categorized as Operational or Strategic in order to comply with the IJB Risk Management Policy and to provide clear indication on those risks most likely to impact on delivery of the IJB's Strategic Plan.
- Detailed scrutiny of relevant risks is included in the quarterly Performance review currently undertaken by this Committee on behalf of the IJB with the responsible Head of Service. The Head of Business Development will establish the protocol for this and liaise with the appropriate officers in the Partnership as required.
- The Head of Business Development continues to engage with Glasgow City Council regarding the review and update of the Council's Risk Management Strategy and Policy.

4.2. In addition to the above recommendations, the Working Group agreed that further work will be undertaken to explore and scope the use of Datex² for risk management across the Partnership.

² Datex is an 'off the shelf' IT package used by NHS GGC that includes a risk management module which is currently only used by the NHS GGC resources within the Partnership.

5. Supporting Documentation

- 5.1. An example of the quarterly report to this Committee that incorporates the recommendations above is provided as Appendix A.
- 5.2. An example of the single list of risks to be reported to this Committee that incorporates the recommendations above is provided as Appendix B.
- 5.3. An updated IJB Risk Management Policy (indicating 'tracked' changes) that incorporates the recommendations above is provided as Appendix C. If agreed, the updated Policy will be submitted to the IJB for formal approval.

6. Recommendations

- 6.1. The IJB Finance and Audit Committee is asked to:
 - a) note the content of this report and supporting documentation, and;
 - b) consider the recommendations of the Working Group.

Appendix A: Example of Risk Management Quarterly Update Report

<IJB FINANCE AND AUDIT COMMITTEE STANDARD COVERSHEET>

1. Purpose

- 1.1. The purpose of this report is to provide an update to the IJB Finance and Audit Committee on the status of the risk registers currently maintained within the Glasgow City Health and Social Care Partnership.

2. Integration Joint Board Risk Register

- 2.1. The Integration Joint Board risk register is maintained, updated and reported in line with the Glasgow City IJB Risk Management Policy.
- 2.2. The last quarterly review of this risk register was carried out in **MONTH/YEAR**.
- 2.3. There were **X** items added to the register since the last quarterly update report:
- (Ref x:)
- 2.4. There were **X** items removed from the register since the last quarterly update report.
- (Ref x:)
- 2.5. There were **X** items on the register where the initial/current risk increased since the last quarterly update report:
- (Ref x:)
- 2.6. There were **X** items on the register where the initial/current risk decreased since the last quarterly update report:
- (Ref x:)
- 2.7. There are **X** 'live' risks on the IJB risk register, with **X** items having a current risk level of 'Very High', **X** items with a risk level of 'High', **X** items with a risk level of 'Medium' and **X** items with a risk level of 'Low'.
- 2.8. All items with a current risk level of 'High' or 'Very High' are reviewed every quarter, with the most recent updates to these attached as Appendix A.
- 2.9. Items with a current risk level of 'Medium' or 'Low' are reviewed less regularly in line with the risk management policy. **X** of these items were reviewed by the risk owner during this quarterly review, and their current risk level was assessed to be accurate.

Appendix A: Example of Risk Management Quarterly Update Report

2.10. The next quarterly review of the IJB risk register is scheduled to be carried out in **MONTH/YEAR**.

3. Social Work Risk Register

3.1. The Social Work risk register is maintained, updated and reported in line with the Glasgow City Council Risk Management Policy and Guidance.

3.2. The last quarterly review of this risk register was carried out in **MONTH/YEAR**.

3.3. There were **X** items added to the register since the last quarterly update report:

- (*Ref x:*)

3.4. There were **X** items removed from the register since the last quarterly update report.

- (*Ref x:*)

3.5. There were **X** items on the register where the initial/current risk increased since the last quarterly update report:

- (*Ref x:*)

3.6. There were **X** items on the register where the initial/current risk decreased since the last quarterly update report:

- (*Ref x:*)

3.7. There are **X** 'live' risks on the Social Work risk register, with **X** items having a current risk level of 'Very High', **X** items with a risk level of 'High', **X** items with a risk level of 'Medium' and **X** items with a risk level of 'Low'.

3.8. All items with a current risk level of 'High' or 'Very High' are reviewed every quarter, with the most recent updates to these attached as Appendix B.

3.9. Items with a current risk level of 'Medium' or 'Low' are reviewed less regularly in line with the risk management policy. **X** of these items were reviewed by the risk manager during this quarterly review, and their current risk level was assessed to be accurate.

3.10. The next quarterly review of the Social Work risk register is scheduled to be carried out in **MONTH/YEAR**.

Appendix A: Example of Risk Management Quarterly Update Report

4. Health Risk Register

- 4.1. The Glasgow City HSCP Health risk register is currently maintained, updated and reported in line with the NHS Greater Glasgow and Clyde Risk Management Policy.
- 4.2. The last quarterly review of this risk register was carried out in **MONTH/YEAR**.
- 4.3. There were **X** items added to the register since the last quarterly update report:
 - (Ref x:)
- 4.4. There were **X** items removed from the register since the last quarterly update report.
 - (Ref x:)
- 4.5. There were **X** items on the register where the initial/current risk increased since the last quarterly update report:
 - (Ref x:)
- 4.6. There were **X** items on the register where the initial/current risk decreased since the last quarterly update report:
 - (Ref x:)
- 4.7. There are **X** 'live' risks on the Health risk register, with **X** items having a current risk level of 'Very High', **X** items with a risk level of 'High', **X** items with a risk level of 'Medium' and **X** items with a risk level of 'Low'.
- 4.8. All items with a current risk level of 'High' or 'Very High' are reviewed every quarter, with the most recent updates to these attached as Appendix C.
- 4.9. Items with a current risk level of 'Medium' or 'Low' are reviewed less regularly in line with the risk management policy. **X** of these items were reviewed by the risk manager during this quarterly review, and their current risk level was assessed to be accurate.
- 4.10. The next quarterly review of the Health risk register is scheduled to be carried out in **MONTH/YEAR**.

5. Recommendations

- 5.1. The IJB Finance and Audit Committee is asked to...

Please note the additional columns have been highlighted in yellow.

LJB Risk Register															
Ref	Title	Nature of Risk (Strategic or Operational)	Description of Risk	Risk Owner	Initial Risk Level			Proximity	Control Actions	Current Risk Level			Latest Update		
					Likelihood	Consequences	Risk Rating			Risk Level	Likelihood	Consequences		Risk Rating	Risk Level
1	Budget	Strategic	There is a risk that, as a result of the December 2016 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	2016-19	- 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, LJB Finance and Audit committee and full LJB - Chief Finance & Resources Officer has visibility and awareness of budget setting processes and frameworks in place within council and Health Board.	3	4	12	High	July 2017: GCC budget is confirmed and discussions taking place with NHS regarding finalising the 2016/2017 budget. Current risk likelihood has consequently changed from a 4 (likely) to a 3 (possible), reducing the current risk score from 16 to 12. Current risk level remains High. ITB meetings have been rescheduled fortnightly with alternate meetings focussing on tracking of the current transformation programmes and development of other transformation programmes.

Social Work Risk Register															
Ref	Title	Nature of Risk (Strategic or Operational)	Description of Risk	Risk Owner	Initial Risk Level			Proximity	Control Actions	Current Risk Level			Latest Update		
					Likelihood	Consequences	Risk Rating			Risk Level	Likelihood	Consequences		Risk Rating	Risk Level
1	Health & Safety	Operational	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	4	5	20	High	Ongoing	- 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. - H&S respond to all audit and inspection requirements. - Emergency procedures in place for all service user 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, this monitoring has identified the need to review the Violence training for Fieldwork staff, this review is currently underway with a target date of 6 weeks - Legionella risk managed with the assistance of ACCESS.	3	5	15	High	

Health Risk Register															
ID	Title	Nature of Risk (Strategic or Operational)	Description	Manager	Initial Risk Level			Proximity	Controls in place	Current Risk Level			Latest Update		
					Likelihood	Consequences	Risk Rating			Risk Level	Likelihood	Consequences		Risk Rating	Risk Level
1428	Prescribing costs- Financial	Operational	Prescribing costs exceeding the allocated budget threatening HSCP services	Richard Groden	5	4	20	Very high risk	2017/18	Budget performance monitoring - Prescribing monitoring, risk sharing across HSCP, prescribing plan to identify and generate savings if required	5	4	20	Very high risk	



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Glasgow Integration Joint Board

Risk Management Policy and Strategy

<u>Document Title:</u>	<u>Risk Management Policy and Strategy</u>	<u>Owner:</u>	<u>Chief Officer</u>
<u>Version No.</u>	<u>Final Draft</u>	<u>Superseded Version:</u>	<u>N/A</u>
<u>Date Effective:</u>	<u>00/00/0000</u>	<u>Review Date:</u>	<u>00/00/0000</u>

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Document Title:	Risk Management Policy and Strategy	Owner:	Chief Officer
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Policy – the risk management approach

1.1 The **Glasgow City Integration Joint Board (IJB)** is committed to a culture where its workforce is encouraged to develop new initiatives, improve performance and achieve goals safely, effectively and efficiently by appropriate application of good risk management practice.

Key benefits of effective risk management:

- appropriate, defensible, timeous and best value decisions are made;
- risk 'aware' not risk 'averse' decisions are based on a balanced appraisal of risk and enable acceptance of certain risks in order to achieve a particular goal or reward;
- high achievement of objectives and targets;
- high levels of morale and productivity;
- better use and prioritisation of resources;
- high levels of user experience/ satisfaction with a consequent reduction in adverse incidents, claims and/ or litigation; and
- a positive reputation established for the Joint Board.

1.2 In doing so the **IJB** aims to provide safe and effective care and treatment for patients and clients, and a safe environment for everyone working within the Joint Board and others who interact with the services delivered under the direction of the Joint Board.

1.3 The **IJB** believes that appropriate application of good risk management will prevent or mitigate the effects of loss or harm and will increase success in the delivery of better clinical and financial outcomes, objectives, achievement of targets and fewer unexpected problems.

1.4 The **IJB** purposefully seeks to promote an environment that is risk 'aware' and strives to place risk management information at the heart of key decisions. This means that the **IJB** can take an effective approach to managing risk in a way that both address significant challenges and enable positive outcomes.

1.5 In normal circumstances the **IJB's** tolerance for risk is as follows:

The Joint Board will, in normal circumstances, tolerate risk up to a current risk score of 9. Above a current risk score of 9, risks will be subject to increased monitoring, scrutiny and the implementation of appropriate control actions to mitigate either the consequence or likelihood (or both) of the risk.

This can be seen clearly in the following matrix:

Likelihood	Consequence				
	1	2	3	4	5
5	5	10	15	20	25
4	4	8	12	16	20
3	3	6	9	12	15
2	2	4	6	8	10
1	1	2	3	4	5

1.6 The **IJB** promotes the pursuit of opportunities that will benefit the delivery of the Strategic Plan. Opportunity-related risk must be carefully evaluated in the context of the anticipated benefits for patients, **service users** and the **IJB**.

1.7 The **IJB** will receive assurance reports (internal and external) not only on the adequacy but also the effectiveness of its risk management arrangements and will consequently value the contribution that risk management makes to the wider governance arrangements of the **IJB**.

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1.8 The **JJB**, through the following risk management strategy, has established a Risk Management Framework, (which covers risk policy, procedure, systems, risk management roles and responsibilities).

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Strategy - Implementing the policy

1. Introduction

1.1 The primary objectives of this strategy will be to:

- promote awareness of risk and define responsibility for managing risk within the Integration Joint Board;
- establish communication and sharing of risk information through all areas of the Integration Joint Board;
- initiate measures to reduce the Integration Joint Board's exposure to risk and potential loss; and,
- establish standards and principles for the efficient management of risk, including regular monitoring, reporting and review.

1.2 This strategy takes a positive and holistic approach to risk management. The scope applies to all risks, whether relating to the clinical and care environment, employee safety and wellbeing, business risk, opportunities or threats.

1.3 **Strategic risks** represent the potential for the JJB to achieve ('opportunity') or fail to meet ('threat') its desired outcomes and objectives as set out within the Strategic Plan, and typically these risks require strategic leadership in the development of activities and application of controls to manage the risk.

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1.4 **Operational risks** represent the potential for impact (opportunity or threat) within or arising from the activities of an individual service area or team operating within the scope of the JJB's activities. The partner bodies will retain responsibility for managing operational risks as operational risks will be more 'front-line' in nature and the development of activities and controls to respond to these risks can be led by local managers and team leaders. Where a number of operational risks impact across multiple service areas or, because of interdependencies, require more strategic leadership, then these can be proposed for escalation to 'strategic risk' status for the JJB.

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1.5 All risks will be analysed consistently with an evaluation of risk as being:

- 1 – 3 = LOW
- 4 – 9 = MEDIUM
- 10 – 16 = HIGH
- > 16 = VERY HIGH

Any risk with a current risk score above 9 would be deemed to be 'significant' and therefore subject to quarterly review and scrutiny by the JJB through its Finance and Audit Committee through agreed processes.

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1.6 This document represents the risk management framework to be implemented across the JJB and will contribute to its wider governance arrangements.

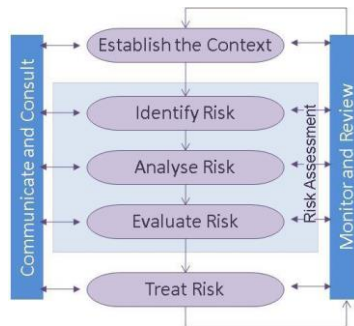
2. Risk management process

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2.1 Risk Management is about the culture, processes and structures that are directed towards realising potential opportunities whilst managing adverse effects¹. It is pro-active in understanding risk and uncertainty, it learns and builds upon existing good practice and is a continually evolving process that has an important role in ensuring that defensible and beneficial decisions are made.

2.2 The IJB embeds risk management practice by consistent application of the risk management process shown in the diagram on the right, across all areas of service delivery and business activities.



3. Application of good risk management across the IJB activities

3.1 Standard procedures (3.1.1 – 3.1.10) will be implemented across all areas of activity that are under the direction of the IJB in order to achieve consistent and effective implementation of good risk management.

3.1.1 Full implementation of the risk management process. This means that risk management information should (wherever possible) be used to guide major decisions in the same way that cost and benefit analysis is used.

3.1.2 Identification of risk using standard methodologies, and involving subject experts who have knowledge and experience of the activity or process under consideration.

3.1.3 Categorisation of risk under the headings below:

- Strategic Risks: such as risks that may arise from Political, Economic, Social, Technological, Legislative and Environmental factors that impact on the delivery of the Strategic Plan outcomes.
- Operational Risks: such as risks that may arise from or impact on Clinical Care and Treatment, Social Care and Treatment, Customer Service, Employee Health, Safety & Well-being, Business Continuity, Supply Chain, Information Security and Asset Management.

3.1.4 Appropriate ownership of risk. Specific risks will be owned by whoever is best placed to manage the risk and oversee the development of any new risk controls required.

3.1.5 Consistent application of the agreed risk matrix to analyse risk in terms of likelihood of occurrence and potential impact, taking into account the effectiveness of risk control measures in place. The risk matrix to be used is attached in Appendix 1.

3.1.6 Consistent response to risk that is proportionate to the level of risk. This means that risk may be terminated; transferred elsewhere (i.e. to another partner or third party); tolerated as it is; or, treated with cost effective measures to bring it to a level where it is acceptable or tolerable for the IJB in keeping with its tolerance for risk. In the case of opportunities, the IJB may 'take' an informed decision in terms of tolerating a risk if the opportunity is judged to be (1) worthwhile pursuing and (2) the IJB is confident in its ability to achieve the benefits and manage/contain the associated risk.

3.1.7 Implementation and maintenance of risk registers as a means of collating risk information in a consistent format allowing comparison of risk evaluations, informed decision-making in relation to prioritising resources and ease of access to information for risk reporting.

3.1.8 Reporting of strategic risks and key operational risks to the IJB's Finance and Audit Committee will take place on a quarterly basis with an annual summary of the risk management framework to the IJB.

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¹ Australia/ New Zealand Risk Management Standard, AS/NZS 4360: 2004

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- 3.1.9 Operation of a procedure for movement of risks between risk registers maintained within the Partnership that will be facilitated by regular review of the risk registers by the City Wide Operational Management Group and the Senior Management Team.
- 3.1.10 Routine reporting of risk information within and across teams and a commitment to a 'lessons learned' culture that seeks to learn from both good and poor experience in order to replicate good practice and reduce adverse events and associated complaints and claims.

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Realising the risk management vision

4. Risk management vision and measures of success

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Appropriate and effective risk management practice will be embraced throughout the Integration Joint Board as an enabler of success, whether delivering better outcomes for the people of Glasgow protecting the health, safety and well-being of everyone who engages with the IJB and Glasgow City Health & Social Care Partnership or for maximising opportunity, delivering innovation and best value, and increasing performance.

4.1 In working towards this risk management vision the IJB aims to achieve and demonstrate a level of maturity where risk management is embedded and integrated in the decision making and operations of the IJB.

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4.2 The measures of success for this vision will be:

- good financial outcomes for the IJB
- successful delivery of the strategic plan, objectives and targets
- successful outcomes from external scrutiny
- fewer unexpected/ unanticipated problems
- fewer incidents/ accidents/ complaints
- fewer claims/ less litigation

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Risk leadership and accountability

5. Governance, roles and responsibilities

5.1 Integration Joint board

Members of the IJB are responsible for:

- oversight of the IJB's risk management arrangements;
- receipt and review of an annual summary report on the risk management framework;
- consideration of strategic risks and any key operational risks that require to be brought to the IJB's attention; and,
- ensuring they are aware of any risks linked to recommendations from the Chief Officer concerning new priorities/ policies and the like. This will be facilitated by a 'Risk Implications' section on all reports to the IJB.

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5.2 Finance and Audit Committee

The Finance and Audit Committee, on behalf of the IJB, are responsible for:

- Receipt of a quarterly report on the current status of the risk registers maintained within the Partnership, including the IJB risk register.
- Review and scrutiny of the risk management arrangements for strategic and key operational risks within the Partnership on behalf of the IJB.
- Providing assurance to the IJB as required on the risk management arrangements within the IJB.

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5.3 Chief Officer

The Chief Officer has overall accountability for the IJB's risk management framework, ensuring that suitable and effective arrangements are in place to manage the risks relating to the functions within the scope of the IJB. The Chief Officer will keep the Chief Executives of the partner bodies informed of any significant existing or emerging risks that could seriously impact the IJB's ability to deliver the outcomes of the Strategic Plan or the reputation of the IJB.

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5.4 Chief Financial Officer

The Chief Financial Officer will be responsible for promoting arrangements to identify and manage key business risks, risk mitigation and insurance.

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5.5 Senior Management Team

The Senior Management Team are responsible for:

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- supporting the Chief Officer and Chief Financial Officer in fulfilling their risk management responsibilities;
- arranging professional risk management support, guidance and training from partner bodies;
- receipt and review of regular risk reports on strategic, shared and key operational risks and escalating any matters of concern to the IJB; and,
- ensuring that the standard procedures set out in section three of this strategy are actively promoted across their teams and within their areas of responsibility.

5.6 Individual Risk Owners

It is the responsibility of each risk owner to ensure that:

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- risks assigned to them are analysed **and assessed** in keeping with the agreed risk matrix;
- data on which risk evaluations are based are robust and reliable so far as possible;
- risks are defined clearly to make explicit the scope of the challenge, opportunity or hazard and the consequences that may arise;
- risk is reviewed not only in terms of likelihood and impact of occurrence, but takes account of any changes in context that may affect the risk;
- controls that are in place to manage the risk are proportionate to the context and level of risk,
- **Risks assigned to them are reviewed and updated in line with the reporting and monitoring arrangements of the IJB.**

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5.7 All persons working under the direction of the IJB

Risk management should be integrated into daily activities with everyone involved in identifying current and potential risks where they work. Individuals have a responsibility to make every effort to be aware of situations which place them or others at risk, report identified hazards and implement safe working practices developed within their service areas. This approach requires everyone to:

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- understand the risks that relate to their roles and activities;
- understand how their actions relate to their own, their patient's, their services user's/ client's and public safety;
- understand their accountability for particular risks and how they can manage them;
- understand the importance of flagging up incidents and/ or near misses to allow lessons to be learned and contribute to ongoing improvement of risk management arrangements; and,
- understand that good risk management is a key part of the IJB's culture.

5.8 Partner Bodies

It is the responsibility of relevant specialists from the partner bodies, (such as internal audit, external audit, clinical and non-clinical risk managers and health and safety advisers) to attend meetings as necessary to consider the implications of risks and provide relevant advice. It is the responsibility of the partner bodies to ensure they routinely seek to identify any residual risks and liabilities they retain in relation to the activities under the direction of the IJB.

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5.9 Senior Information Risk Owner

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Responsibility for this specific role will remain with the individual partner bodies.

Resourcing risk management

6. Resourcing the risk management framework

- 6.1 Much of the work on developing and leading the risk management framework for the JJB will be resourced through the Senior Management Team's arrangements (referred to in 5.5) and led by the Head of Business Development.
- 6.2 Wherever possible the IJB will ensure that any related risk management training and education costs will be kept to a minimum, with the majority of risk-related courses/ training being delivered through resources already available to the IJB.

7. Resourcing those responsible for managing specific risks

- 7.1 Where risks impact on a specific partner body and new risk control measures require to be developed and funded, it is expected that the costs will be borne by that partner organisation.
- 7.2 Financial decisions in respect of the IJB's risk management arrangements will rest with the Chief Financial Officer.

Training, learning and development

8. Risk management training and development opportunities

- 8.1 To implement effectively this policy and strategy, it is essential for people to have the competence and capacity for managing risk and handling risk judgements with confidence, to focus on learning from events and past experience in relation to what has worked well or could have been managed better, and to focus on identifying malfunctioning 'systems' rather than people.
- 8.2 Training is important and is essential in embedding a positive risk management culture across all activities under the direction of the IJB and in developing risk management maturity. The Head of Business Development will, on behalf of the Senior Management Team, regularly review risk management training and development needs and source the relevant training and development opportunities required (referred to in 5.5).

Monitoring activity and performance

9. Monitoring risk management activity

- 9.1 The JJB operates in a dynamic and challenging environment. A suitable system is required to ensure risks are monitored for change in context and scoring so that appropriate response is made.
- 9.2 Monitoring will include review of the IJB's risk profile at City Wide Operational Management and Senior Management Team level.
- 9.3 Review of IJB's risk profile will occur on a quarterly basis at Senior Management Team level and by the Finance and Audit Committee, with annual summary report to the IJB.

9.4

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9.4 It is expected that partner bodies will use Finance and Audit Committee and IJB risk reports to keep their own organisations updated on the management of the risks, highlighting any IJB risks that might impact on the partner organisation.

10. Monitoring risk management performance

10.1 Measuring, managing and monitoring risk management performance is key to the effective delivery of key objectives.

10.2 The Finance and Audit Committee, as part of its quarterly scrutiny of performance in service areas, will scrutinise the arrangements for the risks associated with that service area. This additional scrutiny will include, but not be limited to, activity within the service area to assess and mitigate the level of risk to it.

10.3 The Finance and Audit Committee will be supported to carry out this focused scrutiny of specific risk items by existing IJB governance arrangements.

10.4 Reviewing the IJB's risk management arrangements on a regular basis will also constitute a 'Plan/ Do/ Study/ Act' review cycle that will shape future risk management priorities and activities of the IJB, inform subsequent revisions of this policy and strategy and drive continuous improvement in risk management across the IJB.

Communicating risk management

11. Communicating, consulting on and reviewing the risk management framework

11.1 Effective communication of risk management information across the IJB is essential to developing a consistent and effective approach to risk management.

11.2 Copies of this policy and strategy will be widely circulated via the Senior Management Team and will form the basis of any risk management training arranged by the IJB.

11.3 The Policy and Strategy (version 1 ~~x~~) was approved by the Integration Joint Board at its meeting of ~~[xx/xx/xxxx]~~.

11.4 This policy and strategy will be reviewed annually to ensure that it reflects current standards and best practice in risk management and fully reflects the IJB's business environment.

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Appendix 1 Risk Matrix

Likelihood	Consequence/Impact				
	1	2	3	4	5
5	5	10	15	20	25
4	4	8	12	16	20
3	3	6	9	12	15
2	2	4	6	8	10
1	1	2	3	4	5

>16	Very High
10-16	High
4-9	Medium
1-3	Low
-----	Normal Risk Tolerance

	1	2	3	4	5
Likelihood	Extremely Unlikely/ Rare	Unlikely	Possible	Likely	Almost certain
Consequence/ Impact	Negligible/ Insignificant	Minor	Moderate	Major	Extreme/fundamental

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