

# Item No. 8

Meeting Date Wednesday 6th December 2017

# Glasgow City Integration Joint Board Finance and Audit Committee

Report By: Allison Eccles, Head of Business Development

Contact: Steven Blair, Senior Officer, Business Development

Tel: 0141 287 6752

#### RISK MANAGEMENT QUARTERLY UPDATE REPORT

Purpose of Report:	To provide an update to the Finance and Audit Committee on the status of the risk registers being maintained within the Glasgow City Health and Social Care Partnership.
Dealers and Engagement	The viels registers registered within the Downwardin are

Background/Engagement:	The risk registers maintained within the Partnership are
	reviewed and updated by the relevant risk owners and risk
	managers, and reported on a quarterly basis.

Recommendations:	The IJB Finance and Audit Committee is asked to:
	<ul><li>a) review the content of this report, and;</li><li>b) note the current highest risks on the Integration Joint Board,</li><li>Social Work and Health risk registers.</li></ul>

## **Relevance to Integration Joint Board Strategic Plan:**

Risks to the delivery of the Strategic Plan are identified in the IJB Risk Register.

# Implications for Health and Social Care Partnership:

Reference to National	The maintenance of a risk management framework within the
Health & Wellbeing	Partnership aligns with Outcome 9 (Resources are used
Outcome:	effectively and efficiently in the provision of health and social
	care services).

Personnel:	Personnel risks are identified in the risk registers
Carers:	N/A
Provider Organisations:	Risks in relation to Provider Organisations are identified in the risk registers
Equalities:	N/A
Financial:	Financial risks are identified in the risk registers
Legal:	Legal impacts of risks are identified in the risk registers
Economic Impact:	Economic impact of risks are identified in the risk registers
Sustainability:	N/A
Sustainable Procurement and Article 19:	N/A
Risk Implications:	Risk implications are detailed in the risk registers
Implications for Glasgow City Council:	Risk implications to partner bodies are detailed in the risk registers
Implications for NHS Greater Glasgow & Clyde:	Risk implications to partner bodies are detailed in the risk registers

#### 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. This report covers the updates to the IJB Risk Register that were carried out in October 2017. The last quarterly update of this risk register was reported to the Finance and Audit Committee in August 2017.
- 2.3. There was **1** item added to the register since the last quarterly update report:
  - Ref 14: There is a risk that the December 2017 budget will impact on the settlement for the partner bodies which could lead to overspend in the Partnership impacting both reserves and delivery of the Strategic Plan. This has been added to the risk register with an initial and current risk of 'Very High'.
- 2.4. There were **2** items removed from the register since the last quarterly update report.
  - Ref 1: The risk of the December 2016 budget impacting on the partner bodies' settlement and subsequently on the Partnership has been closed as the 2017/18 budget has been agreed.
  - Ref 12: The risk of a delay in agreeing the IJB budget with Health has been closed as the 2017/18 budget has been agreed.
- 2.5. There was **1** item on the register where the initial and current risk increased since the last quarterly update report:
  - Ref 6: The risk of increased bureaucracy due to partners putting in revised governance mechanisms between the IJB and themselves has increased. This is due to the NHSGGC and regional Planning establishing their own governance processes and infrastructure for the 'transformation of health and social care'. The Initial likelihood has increased and Initial risk level remains 'High'. The Current likelihood and impact have both increased, meaning the Current risk level increases from 'Medium' to 'High'.

- 2.6. There was **1** item on the register where the current risk decreased since the last quarterly update report:
  - Ref 13: Due to the current financial position of the Partnership, the current probability of the level of savings required impacting on the budget being balanced at the end of financial year has reduced. The current risk has therefore reduced from 'High' to 'Medium'.
- 2.7. There are **12** 'live' risks on the IJB risk register, with **2** items having a current risk level of 'Very High', **5** items with a risk level of 'High' and **5** items with a risk level of 'Medium'.
- 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' were also reviewed by the relevant risk owner during this quarterly review, and their current risk level was assessed to be accurate.
- 2.10. The next quarterly review of the IJB Risk Register is scheduled to be carried out in January 2018.

## 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. This report covers the updates to the Social Work Risk Register that were carried out in October 2017. The last quarterly update of this risk register was reported to the Finance and Audit Committee in August 2017.
- 3.3. There were **2** items added to the register since the last quarterly update report:
  - Ref 31: There is a risk that a disaster recovery solution will not be available for Carefirst resulting in lack of access and significant impact on delivery of social work business. This risk has been added to the risk register with a current risk level of 'High'.
  - Ref 32: There is a risk that failure to conclude contract negotiations for the
    delivery of emergency out-of-hours Social Work services could result in
    reputational and financial impact. This risk has been added to the risk
    register with a current risk level of 'Medium'.

- 3.4. There was **1** item removed from the register since the last quarterly update report:
  - Ref 16: The risk manager has noted that the risk in relation to the Commonwealth Games Care Home and the Older People's Residential Strategy meeting Care Inspectorate standards has concluded.
- 3.5. There were **2** items on the register where the initial or current risk increased since the last quarterly update report:
  - Ref 6: Due to the increase in external threats to ICT security (for example, the WannaCry ransomware attack in May 2017) the initial likelihood and impact of a data loss/breach have been assessed to have increased. The initial risk level has therefore increased from 'High' to 'Very High'.
  - Ref 26: Due to the increased likelihood of a decision about sleepover rates being set at Scottish Living Wage level, the current likelihood and impact of threat to provider organisations have been assessed to have increased. The current risk level has therefore increased from 'Medium' to 'High'.
- 3.6. There were **2** items on the register where the initial or current risk decreased since the last quarterly update report:
  - Ref 6: Due to the robust programme of control actions implemented by Glasgow City Council to mitigate the risk of data loss/breach the current likelihood has been assessed to have reduced. This has reduced the current risk level from 'Very High' to 'High'.
  - Ref 25: Due to providers accepting the rationale for the payment method to mitigate the Scottish Living Wage, the current likelihood has been assessed to have reduced. The current risk score has reduced however the risk level remains at 'Medium'.
- 3.7. There are **32** 'live' risks on the Social Work risk register, with **2** items having a current risk level of 'Very High', **17** items with a risk level of 'High', **12** items with a risk level of 'Medium' and **1** 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. **9** 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 January 2018.

#### 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 August 2017.
- 4.3. There was 1 item added to the register since the last quarterly update report:
  - (*Ref 2080*:) There is a risk identified in the HMP inspection that recruitment and retention of workforce issues could lead to a shortage of prison health care staff. This has been added as a 'High' risk.
- 4.4. There was **1** item removed from the register since the last quarterly update report.
  - (*Ref 1759*:) The risk around lone workers was assessed to suitable for closure as the system is now fully implemented and operational.
- 4.5. At the end of this review period there was **1** item on the Health Risk Register with a current risk level of 'Very High' and **16** items with a current risk level of 'High'.
- 4.6. All items with a current risk level of 'High' or 'Very High' are attached as Appendix C.
- 4.7. The next quarterly review of the Health Risk Register is scheduled to be carried out in January 2018.

#### 5. Recommendations

- 5.1. The IJB Finance and Audit Committee is asked to:
  - a) note this report, and;
  - b) note the current highest risks on the Integration Joint Board, Social Work and Health Risk Registers.

Dof					Initial Ri	ak l ave				Current F	Diek Level				
(2017/18)	Status	Description of Risk	Risk Owner	Likelihood	Consequences	Risk Ranking	Risk Level	Control Actions	Likelihood	Consequences	Risk Level Risk Ranking				
2	Live	There is a risk of the LJB 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 Finance and Audit committee and full IJB	5	4	20	Very High	October 2017: No change		
14	Live	There is a risk that, as a result of the December 2017 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 the reserves of the IJB and ability to deliver the Strategic Plan.	Chief Finance & Resources Officer	4	5	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 - Chief Finance & Resources Officer has visibility and awareness of budget setting processes and frameworks in place within council and Health Board.	4	5	20	Very High	NEW RISK ADDED OCTOBER 2017: Indications are that there may be challenges around this risk, hence initial and current risk score are equalised at the current time. This will be reviewed once settlement abnnounced in December 2017		
6	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	4	4	16	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.	4	4	16	High	October 2017: The position has measurably changed since July in that Regional Planning and NHSGGC have established their own governance processes and infrastructures to address the 'transformation of health and social care' which has led to a significant increase in 'planning' activity by GCHSCP Officers and clinicians on activity outside of Glasgow City. At one level, engagement is required, but HSCP input is very significant with little tangible output to date and no outcomes identified or delivered. This combined activity has markedly increased the level of bureacracy in the system.  The Risk Owner has therefore assessed the the Initial Likelihood of this risk should increase from 3 (Possible) to 4 (Likely), and that the Current Likelihood should increase from 3 (Moderate) to 4 (Major). This increases both the Initial risk score from 12 to 16 and the Current risk score from 9 to 16. This increases the Current risk level from 'Medium' to 'High' until appropriate updated control actions can be developed and implemented to mitigate the risk level.		
9	Live	There is a risk that the funding provided by the Scottish Government to cover the Scottish Living Wage is not sufficient, creating a financial challenge which could lead to reputational issues to the Partnership	Chief Finance & Resources Officer	4	5	20	Very High	We are involved in a proof of concept with provider organisations around a different model of procurement, administration and modelling. The aim of this is to find different ways of working focussing on outcomes as opposed to inputs and make best overall use of resources whilst delivering efficiencies.	4	4	16	High	October 2017: No change		
10	Live	There is a risk that the financial challenges faced by some provider organisations (in particular those providing sleepovers) to pay the Scottish Living Wage could destabilise them significantly, resulting in a threat to the continuity of services. This could create issues in the availability of appropriate provision for our service users which could seriously impact on the delivery of the IJB's strategic plan.	Chief Finance & Resources Officer	4	5	20	Very High	- We are working closely with provider organisations to monitor impact and ensure continuity of services for our service users.  - Ensure timeous regular payment to provider organisations - Ensure that the payment of the additional funding for the Scottish Living Wage is made timeously - Proof of concept work with providers will enable us to ensure that as far as possible we have lean processes in our dealings with providers and that we can co-produce new ways of working to ensure efficiency.	4	4	16	High	October 2017: No change		
8	Live	There is a risk that differing employment terms could expose the Partnership to challenge. 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	October 2017: No change		
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	<ul> <li>workload and resource monitoring continues to be undertaken across the partnership (for example, through one-to-one supervision)</li> <li>ongoing review of support (including work undertaken and resources being used) required for integrated arrangements</li> </ul>	3	4	12	High	October 2017: No change		
12	Closed	There is a risk that a delay in agreeing the IJB budget with Health for 2017-18 will impact on the IJB's ability to achieve financial balance in 2017-18	Resources	5	4	20	Very High	Chief Officer (Finance & Resources) to continue discussions with the Health Board in regard to agreeing the IJB budget allocation for 2017-18	4	4	16	High	October 2017: Risk Owner reported that this risk is now closed as the 2017/18 budget has been agreed.		

Ref						isk Level				Current R			
(2017/18	) Statu	s Description of Risk	Risk Owner	Likelihood	Consequences	Risk Ranking	Risk Level	Control Actions	Likelihood	Consequences	Risk Ranking	Risk Level	Latest Update
1	Clos		Chief Finance &	5	4	20	Very High	- Transformation Programme for the HSCP in place, with a	3	4	12		October 2017: Risk Owner reports that this risk is now closed as
		December 2016 budget, the settlement for	Resources				, ,	range of programmes identified to support delivery of Strategic				•	2016/17 budget has been resolved. Risk Owner has requested that
		both GCC and the NHS will be worse than	Officer					Plan within allocated budgets					new risk be added to reflect risk arising from December 2017
		had been previously included within						- Governance / reporting mechanism for Transformation					budget.
		respective planning assumptions. This could						Programme in development					
		lead to budget allocations to the HSCP from						<ul> <li>Financial position monitored on ongoing basis by SMT, IJB</li> </ul>					
		both Partners requiring unprecedented levels						Finance and Audit committee and full IJB					
		of savings, resulting in an overspend within						- Chief Finance & Resources Officer has visibility and					
		the HSCP and impact on ability to deliver the						awareness of budget setting processes and frameworks in					
		Strategic Plan.						place within council and Health Board.					
		-											

						Initial Risk Lev	el			Current Risk Level				
2017/18 Reference	Status	Description of Risk	Risk Owner	Risk Manager(s)	Likelihood	Consequences	Risk Ranking	Risk Level	Control Actions	Likelihood	Consequences	Risk Ranking	Risk Level	Most recent update
18	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	Allison Eccles	5 - Almost certain	5 - Catastrophic	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 - Almost certain	4 - Major	20	Very High	Update Oct 2017: No change
28	Live	There is a risk that the Scottish Child Abuse Inquiry could result in adverse legal, financial, reputational and operational impacts to the Service. These could arise from:  - being unable to provide historical information requested by the Inquiry being perceived as the Service being ineffective or deliberately obstructive - the level of resources required to provide an appropriate response to the Inquiry's initial information request not being available/sustainable without impact on business as usual activity - an increase in claims for compensation being made due to increased media coverage of the Inquiry's processes - staff and service users required to provide evidence experiencing an adverse emotional impact as a result of recalling experiences which were, or perceived to be, traumatic.		Susanne Millar	5 - Almost certain	4 - Major	20	Very High	Internal team established to manage our input to the Inquiry. This team will liaise with the PR office accordingly.     Internal team includes legal representatives in order that we manage any claims.     Ongoing monitoring and review of resources utilised to facilitate the Inquiry.     Existing employee support mechanisms through HR.     Existing health and social care support services for service users.	5 - Almost certain	4 - Major	20	Very High	Update Oct 2017: No change
6	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		Fiona Lockhart	5 - Almost certain	5 - Catastrophic	25	Very 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.     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.	4 - Likely	4 - Major	16	High	Update Oct 2017: Completion of the 2017 Information Security Course is 81% at 11/9/17. Full completion is being pursued through emails to Heads of Service and direct to staff. Screensavers are being deployed on a monthly basis with wallpaper for hybrid users. A plan is in place for the introduction of the new Data Protection law in May 2018, and a range of workstreams are underway. The Information Sharing Protocol has been updated to reflect the Partnership and the Public Records Scotland Act. Further revisions will be required to reflect the new Data Protection Act. Secure email is available and Objective Connect for Secure Data Sharing. The implementation of protective marking is being discussed with NHS colleagues at the end of September.
10	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	Allison Eccles	5 - Almost certain	4 - Major	20	Very High	- Fortnightly Integration Transformation Board meetings - Weekly Executive Group meetings to approve critical progress issues - CSWO led SMTs 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 - Likely	4 - Major	16	High	Update Oct 2017: No change
26	Live	There is a risk that the financial challenges faced by some provider organisations (in particular those providing sleepovers) to pay the Scottish Living Wage could destabilise them significantly, resulting in a threat to the continuity of services. This could create issues in the availability of appropriate provision for our service users and have a negative reputational impact on the Partnership.		Allison Eccles	3 - Possible	5 - Catastrophic	15	High	- We are working closely with provider organisations to monitor impact and ensure continuity of services for our service users Ensure timeous regular payment to provider organisations - Ensure that the payment of the additional funding for the Scottish Living Wage is made timeously - Proof of concept work with providers wil lenable us to ensure that as far as possible we have lean processs in our dealings with providers and that we can co-produce new ways of working to ensure efficiency.		4 - Major	16	High	Update Oct 2017: This risk has increased due to the increasing likelihood that a decision will be made confirming that sleepover rates should be paid at the rate of the Scottish Living Wage, or if not at the minimum wage. In either of those cases there will be significant risk to some of the 24 organisations providing sleepover services in Glasgow.

2017/18 Reference	Status	Description of Risk	Risk Owner	Risk Manager(s)	Likelihood	Consequences	Risk Ranking	Risk Level	Control Actions	Likelihood	Consequences	Risk Ranking	Risk Level	Most recent update
27	Live	There is a risk that changes to the vetting requirements for new and existing VISOR users at a national level, which are incompatible with the council's recruitment and employment policies will lead to the service losing access to the system. This could result in the service being less able to manage offenders who pose high risk of serious harm to the public, with subsequent legal and reputational on the service.	Susanne Millar	Sheena Morrison	5 - Almost certain	4 - Major	20	/ery High	Issue highlighted to Glasgow's Public Protection Chief Officers Group Impact report completed by Social Work Scotland and further national work under consideration Legal advice taken by HR advising no change to recruitment or smployment policies Sufficient staff currently vetted and able to make use of system in sollaboration with MAPPA partners and responsible authorities		4 - Major	16	High	Update Oct 2017: Control actions updated **- Issue highlighted to Glasgow's Public Protection Chief Officers Group - Impact report completed by Social Work Scotland and further national work under consideration - Legal advice taken by HR advising no change to recruitment or employment policies - Sufficient staff currently vetted and able to make use of system in collaboration with MAPPA partners and responsible authorities*
29	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 carry out its statutory duties, including: - Services to LA and LAAC children; - MHO duties; - Duties under S22 of the Children Scotland Act 1995; - Provision of children's hearings reports and reports to Court; - Duties in relation to Adults with Incapacity legislation; - Duties in relation to S12 of the Social Work Scotland Act 1968.  This could result in service users not receiving services they en entitled to, and which leaves them at increased risk.	- David Williams - Alex Mackenzie	- Sharon Wearing - Jackie Kerr - Ann Marie Rafferty - David Walker	5 - Almost certain	4 - Major	20 \	/ery 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 Leadership Team. It comprises Chief Officer (Planning, Strategy & Commissioning/CSWO), Chief Officer (Operations) and HR reps from SWS and NHS. Chief Officer (Planning, Strategy & Commissioning/CSWO) advises group of any potential risks in relation to staffing reductions Local performance management and supervision systems in place Workforce planning arrnagements for care groups being finalised Training and development programme for MHOs in place New AWI protocols agreed at HSCP and SWS Governance Groups - Regular updated workforce planning monitoring reports (by Locality) for all care groups in place.	4 - Likely	4 - Major	16	High	Update Oct 2017: No change
31	Live	The careFirst disaster recovery solution is in transition between the old solution and a new solution, and full implementation is dependent on new hardware which has not been ordered. IF careFirst fails THEN there is a risk that the disaster recovery solution may not be available at all, or may take a number of days to arrange, RESULTING in lack of full access to careFirst for staff and the significant business impacts that would have	Sharon Wearing	Fiona Lockhart	4 - Likely	4 - Major	16 F	-ligh	ACCESS have been asked to confirm the current DR arrangements and give detailed assurances that DR would be available if required. ACCESS have been asked to ensure that the necessary hardware is purchased as soon as possible, but this is a Corporate project, so requires agreement from Governance. This will be pursued as soon as relevant information is received.	4 - Likely	4 - Major	16	High	NEW RISK ADDED OCTOBER 2017
1	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	Ralph Irvine	4 - Likely	5 - Catastrophic	20	/ery High	- Service is a member of the Council's Asbestos Strategic Management Group that montors 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 Abestos 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 - Possible	5 - Catastrophic	15	High	Update Oct 2017: A revised Violence in the Work Place training course targeting Fieldworkers is currently being piloted and is planned to be built into next years training programme. A failure to apply design features of the Fire Safety arrangments in the new Elderly Care Homes have been discovered, resulting in a temporary managed workaround solution is in place, the cause of this failure in being investigated.
11	Live	There is a risk that the Glasgow MAPPA arrangements fail resulting in risk to Glasgow citizens from registered sex offenders	Susanne Millar	Sheena Morrison	4 - Likely	5 - Catastrophic	20	Very High	- City-wide Criminal Justice SMT continues to meet regularly to oversee CJ practice 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	3 - Possible	5 - Catastrophic	15	High	Update Oct 2017: No change

2017/18 Reference		Description of Risk	Risk Owner	Risk Manager(s)	Likelihood	Consequences	Risk Ranking	Risk Level	Control Actions	Likelihood	Consequences	Risk Ranking	Risk Leve	f Most recent update
12		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	Susanne Millar	4 - Likely	5 - Catastrophic	20	Very Hig	Child Protection Committee and sub groups meet regularly     Local area CP forums in place     Quarterly meeting of Chief Officers group     Management information produced and reviewed monthly at C&F Core     Leadership Group     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 - Possible	5 - Catastrophic	15	High	Update Oct 2017: No change
13		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	Sheena Morrison	4 - Likely	5 - Catastrophic	20	Very Hig	Adult Protection Committee and sub groups in place     Local Area Adult Protection Forums and multi-agency Local Management Reviews embedded     Quarterly meeting of Chief Officers Group     ASP management information produced and reviewed quarterly at Adult Services Core leadership and Older People's clinical and care governance meetings     ASM structure and multi-agency trailing programme in place     Quality Assurance sub group of Adult Support and Protection Committee now in place, which monitors the work plan and highlights areas for further consideration.	3 - Possible	5 - Catastrophic	15	High	Update Oct 2017: Control actions updated "Quality Assurance sub group of Adult Support and Protection Committee now in place, which monitors the work plan and highlights areas for further consideration"
20		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	Tom Sweeney	3 - Possible	5 - Catastrophic	15	High	- Capital Programme Governance arrangements.	3 - Possible	5 - Catastrophic	15	High	Update Oct 2017: No change
2	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	Allison Eccles	4 - Likely	5 - Catastrophic	20	Very Hig	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, external public facing website, Twitter profile, email announcements)  Regular communications survey in place  Glasgow City HSCP Brand Identity Guidelines in place  Communications guidelines developed as required; Twitter guidelines (completed June 2016) and email signature guidelines (June 2016)  Development of further communications channels for stakeholders; Twitter profile (completed June 2016) and external website (completed June/July 2017)  Process in place to identify and publish 'Good News' stories to promote a positive image for the Glasgow City HSCP  Joint team with weekly meetings of Social Work and Health staff within the Glasgow City HSCP supporting communications to ensure a coordinated 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 projects/change programmes in place as required	3 - Possible	4 - Major	12	High	Update Oct 2017: Changed the following control actions: -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, external public facing website, Twitter profile, email announcements) - Communications guidelines developed as required; Twitter guidelines (completed June 2016) and email signature guidelines (completed June 2016) - Development of further communications channels for stakeholders; Twitter profile (completed June/July 2017) - Joint team with weekly meetings of Social Work and Health staff within the Glasgow City HSCP supporting communications to ensure a co- ordinated approach
3		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.		Stuart Donald	4 - Likely	4 - Major	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)     Review of Council ICT Disaster Recovery priorities currently being undertaken by GCC Compliance. SWS has fed into this process.	3 - Possible	4 - Major	12	High	Update Oct 2017: Removed '- Revised approach to monitoring / visibility of Business Continuity developed - quarterly reporting to SMT proposed' from Control Actions as SMT report currently on hold awaiting BCC feedback. Revised GCC Business Continuity Policy Framework and BCM templates have been issued to all Council departments for completion.
5		There is a risk that contractor/partner arrangements fall. 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	TBC	5 - Almost certain	4 - Major	20	Very Hig	Contract Management Framework.     Contractor Risk Ratings Matrix.     Procurement activity undertaken in accordance with written agreed procedures.     All contractual arrangements over the approved thresholds referred to appropriate committee for approval.     Ensuring providers/other agencies have health and safety procedures/arrangements in place     Regular meetings with key providers regarding strategic provider related issues	3 - Possible	4 - Major	12	High	Update Oct 2017: No change

2017/18 Reference	Status	Description of Risk	Risk Owner	Risk Manager(s)	Likelihood	Consequences	Risk Ranking	Risk Level	Control Actions	Likelihood	Consequences	Risk Ranking	Risk Level	Most recent update
21	Live	There is a risk that resolution of outstanding design issues and adverse site conditions on the Leithland site <b>could result in</b> an operational and financial impact on SWS programme.	Sharon Wearing	Tom Sweeney	3 - Possible	4 - Major	12	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 - Possible	4 - Major	12	High	Update Oct 2017: No change
22	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	Fiona Lockhart	4 - Likely	4 - Major	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.	3 - Possible	4 - Major	12		Update Oct 2017: The contract was renewed for 1 year - until 1/4/18, which is the expected start of the Council's new ICT contract. This contract is not finalised, so there is further uncertainly in relation to the OLM contract, which will need to be discussed with Governance.
30	Live	There is a risk that ICT systems used by Social	Sharon Wearing	Fiona Lockhart	4 - Likely	4 - Major	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 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 - Possible	4 - Major	12	J	Update Oct 2017: The risk in relation to disaster recovery which has been added increases the potential impact of any careFirst system failure, as the disaster recovery might be unavailable or take considerably longer than it would have previously to be made available.
16	Closed		Wearing	Tom Sweeney	3 - Possible	5 - Catastrophic	15	High	- Capital Programme Governance arrangements.	2 - Unlikely	3 - Moderate	6		Update Oct 2017: The risk owner and risk manager have confirmed that this issue no longer affects the Commonwealth Games care home site therefore the risk can be closed.

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)
1428	Prescribing costs- Financial	Prescribing costs exceeding the allocated budget threatening HSCP services	Richard Groden	5-Will undoubtedly recur, possibly frequently	4 - Major	20	Very high risk	Budget performance monitoring  Prescribing monitoring, risk sharing across HSCP, prescribing plan to identify and generate savings if required	5 - Will undoubtedly recur, possibly frequently	4 - Major	20	Very high risk
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	Very high risk	New Forensic Contract. Recent service review recommends further development of service model. To agree extending existing contract. Engaging procurement	4- Will probably recur, but is not a persistent issue	4- Major	16	High risk
1418	Financial HSCP Wide	Failure to deliver transformation programmes in 2017/18 which may result in not meeting financial targets.	Alex MacKenzie	5-Will undoubtedly recur, possibly frequently	4-Major	20	Very high risk	Regular financial monitoring at Sector and HSCP level. Reviewing and reforming of services as part of savings plans to meet targets.	4- Will probably recur, but is not a persistent issue	4 - Major	16	High risk
1417	Shortage of Staff	Future Shortage of appropriate/competent staff e.g. retirement compromising the ability to deliver service.	Sybil Canavan	4 - Will probably recur, but is not a persistent issue	4- Major	16	High risk	Recruitment arrangements. Succession and workforce planning.	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk
1704	Court Liaison	Lack of cover for the Court Liaison services cause delay in assessing with apparent MH problems in the system. This may lead to complaints from the Court System	Michael Smith	4 - Will probably recur, but is not a persistent issue	4-Major	16	High risk	Reviewing and strengthening the current service. Unscheduled Care Review will consider service changes to address this issue.	4- Will probably recur, but is not a persistent issue	4- Major	16	High risk
1706	Financial risk - implementation of Scottish Living Wage	There is a risk that the funding provided by the Scottish Government to cover the Scottish Living Wage is not sufficient, creating a financial challenge which could lead to reputational issues to the Partnership.	Sharon Wearing	5-Will undoubtedly recur, possibly frequently	4-Major	20	Very high risk	Different model of procurement, administration and modelling in development in consultation with provider organisations. Aims to find different ways of working focussing on outcomes as opposed to inputs and make best overall use of	3- May recur Occasionally	4- Major	12	High risk

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)
1511	GP practices	Glasgow City HSCP may experience a local GMS practice unable to fulfil its contractual obligations, requiring intervention and support sometimes at short notice	Richard Groden	5-Will undoubtedly recur, possibly frequently	4 - Major	20	Very high risk	Developing a response "toolkit" for vulnerable practices 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 range of responses.   Developing an approach to proactively identify/support practices that might be approaching a vulnerable	3- May recur Occasionally	4 - Major	12	High risk
1429	Failure to meet Access/ Discharge Targets	Failure to meet Access/discharge targets	Jackie Kerr	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
1431	External providers	External care providers not recognising health needs/ not seeking appropriate advice Impact of personalisation on staffing levels	David Walker	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 Inspectorate□ Provider services to be monitored and reviewed by the Contract and Management and Commissioning Teams	3 - May recur occasionally	4 - Major	12	High risk
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	Elaine Love	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

ID	Title	Description	Manager	Likelihood (initial)		Rating (initial)	Risk level (initial)	Controls in place	Likelihood (current)	Consequence (current)	Rating (current)	Risk level (current)
1435	Capital Developments - financial	Capital Developments-□ Insufficient revenue to cover ongoing 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	recur, but is not a persistent	3-Moderate	12	High risk
1439	Information Governance MAPPA information sharing	Sensitive or confidential information is inappropriately shared resulting in adverse media impact and loss of public confidence		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
1708	Winter planning Primary Care	Seasonal difficulties for GP practices which may occur due to severe weather conditions, staff shortages and increased demands	Richard Groden	4- Will probably recur, but it is not a persistent issue	4-Major	16	High Risk	Business continuity plans , pandemic flu plans. Use of buddy system for staff.	3- May recur occasionally	4-Major	12	High Risk
1703	Junior Doctors Cover	Junior doctors out of hours rotas are stretched due to relatively low numbers on the rotas. Their viability may be impaired by vacancies or sickness absence	Michael Smith	4 - Will probably recur, but is not a persistent issue	4-Major	16	High risk	Liaison with NES regarding recruitment, reviewing service configuration and employing locum staff when necessary. Unscheduled Care Review will consider service changes to address this issue	3 - May recur occasionally	4- Major	12	High risk