



Item No. 18

Meeting Date Wednesday 7th February 2018

Glasgow City Integration Joint Board Finance and Audit Committee

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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.
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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.
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Recommendations:	The IJB Finance and Audit Committee is asked to: a) review the content of this report, and; b) note the current highest risks on the Integration Joint Board, Social Work and Health risk registers.
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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 Health & Wellbeing Outcome:	The maintenance of a risk management framework within the Partnership aligns with Outcome 9 (Resources are used effectively and efficiently in the provision of health and social care services).
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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 corporate 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 **October 2017**.
- 2.3. There was **1** items added to or removed from the register since the last quarterly update report:
 - *Ref 15*: The Chief Finance & Resources Officer has advised that risk in relation to required level of savings in 2018/19 has begun to emerge, particularly in relation to the Health side of the HSCP due to the anticipated level of prescribing costs. This risk has been added with a current risk level of 'Very High'.
- 2.4. There were **no** items on the register where the initial and current risk increased since the last quarterly update report.
- 2.5. There was **1** item on the register where the current risk decreased since the last quarterly update report:
 - *Ref 5*: The Risk Owner has noted that the evidence of the effectiveness of HSCP communication programmes, in conjunction with the passage of time, has reduced the likelihood of a negative staff perception of integration. The current risk score has therefore reduced from 9 to 6 however current risk level remains at 'Medium'.
- 2.6. At the conclusion of the January 2018 review there were **13** 'live' risks on the register, with **3** 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'.
- 2.7. All items with a current risk level of 'High' or 'Very High' are reviewed every quarter, with the most recent updates to these shown in Appendix A.
- 2.8. Items with a current risk level of 'Medium' or 'Low' are reviewed less regularly in line with the risk management policy. **5** of these items were reviewed by the risk owners during this quarterly review, and their current risk level was assessed to be accurate.

2.9. The final quarterly review of the IJB Risk Register in 2017/18 is scheduled to be carried out in **April 2018**.

3. Social Work Risk Register

3.1. The HSCP's Corporate 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 **October 2017**.

3.3. There was **1** new risk items added to the register since the last quarterly update report:

- *Ref 33:* There is a risk that design issues identified after the defect liability period for new build capital projects could result in operational and financial impact on the HSCP and GCC. The risk owner has added this item with a current risk level of 'High'.

3.4. There was **1** item removed from the register since the last quarterly update report:

- *Ref 20:* The risk manager has noted that the risk in relation to the outstanding design issues on the Commonwealth Games Care Home can be closed as the project has no entered the 'post defects period'.

3.5. There were **no** items on the register where the initial or current risk increased since the last quarterly update report.

3.6. There was **1** items on the register where the initial or current risk decreased since the last quarterly update report:

- *Ref 2:* The risk manager has noted that the risk in relation to negative media publicity has reduced, specifically in terms of likelihood, due to the long term evidence that the control actions in place have been effective in making this risk unlikely to occur.

3.7. At the conclusion of the January 2018 review, there were **31** 'live' risks on the register, with **2** items having a current risk level of 'Very High', **16** 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 shown in Appendix A.

- 3.9. Items with a current risk level of 'Medium' or 'Low' are reviewed less regularly in line with the risk management policy. **2** 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 final quarterly review of the Social Work Risk Register in 2017/18 is scheduled to be carried out in **April 2018**.

4. Health Risk Register

- 4.1. The HSCP's Corporate 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 **October 2017**.
- 4.3. There was **1** item added to the register since the last quarterly update report:
- *Ref 2081*: The Partnership's Lead Associate Medical Director for Mental Health and Addictions has added an item to the register in respect of the risk of rapid system change, in particular staff turnover, compromising patient safety. This has been added with an initial and current risk level of High.
- 4.4. There were **no** items removed from the register since the last quarterly update report.
- 4.5. There were **no** items on the register where the initial or current risk either increased or decreased since the last quarterly report.
- 4.6. At the conclusion of the January 2018 review there were **19** 'live' risks on the register, with **1** items having a current risk level of 'Very High', **17** items having a current risk level of 'High' and **1** items with a risk level of 'Medium'.
- 4.7. All items with a current risk level of 'High' or 'Very High' are reviewed every quarter, with the most recent updates shown in Appendix A.
- 4.8. Items with a current risk level of 'Medium' or 'Low' are reviewed less regularly in line with the risk management policy. **1** of these items were reviewed by the risk manager during this quarterly review, and their current risk level was assessed to be accurate.
- 4.9. The final quarterly review of the Health Risk Register in 2017/18 is scheduled to be carried out in **April 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.

IJB Risk Register (Page 1 of 2)													
Ref	Title	Description of Risk	Risk Owner	Initial Risk Level				Control Actions	Current Risk Level				Latest Update
				Likelihood	Consequence	Risk Rating	Risk Level		Likelihood	Consequence	Risk Rating	Risk Level	
2	<i>Delivery of Strategic Plan within budget</i>	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 Officer Finance & Resources	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	5	4	20	Very High	January 2018: No change
14	<i>Budget Settlement</i>	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 Officer Finance & Resources	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	January 2018: The Risk Owner has noted that this risk remains high until the implications of the budget settlement are fully understood (e.g. the impact of ringfencing of budgets for some services such as Mental Health). The Chief Finance & Resources Officer is continuing discussions with the Health Board and Council in relation to this.
15	<i>Level of savings required in 2018/19</i>	There is a risk that, due to the level of savings in 2018-19 that we need to achieve, any slippage in the year could present as a financial challenge to the budget being in balance at the end of the financial year	Chief Officer Finance & Resources	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 - Chief Finance & Resources Officer has visibility and awareness of budget setting processes and frameworks in place within council and Health Board.	5	4	20	Very High	NEW RISK ADDED JANUARY 2018: Risk Owner has noted the risk around the level of savings required in 2018/19 is beginning to emerge and that a contributory factor to this risk are the anticipated level of prescribing costs on the Health side of the HSCP.
6	<i>Partners' governance arrangements</i>	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	Update Jan 2018: No change
9	<i>Funding for Scottish Living Wage</i>	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 Officer Finance & Resources	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	January 2018: Report presented to IJB FAC in October 2017 was agreed (re: extension of framework rates and sleepover rates offer to providers that wish to uptake) subject to confirmation of funding from Council.
10	<i>Financial position of providers</i>	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.	Head of Business Development	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	January 2018: Risk Owner has been updated. External providers are continuing to report issues with staff turnover and recruitment.

IJB Risk Register (Page 2 of 2)													
Ref	Title	Description of Risk	Risk Owner	Initial Risk Level				Control Actions	Current Risk Level				Latest Update
				Likelihood	Consequence	Risk Rating	Risk Level		Likelihood	Consequence	Risk Rating	Risk Level	
8	<i>Differing terms and conditions</i>	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 Officer Finance & Resources	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	January 2018: Risk Owner reports that consultation with Legal by Heads of HR is provisionally scheduled to go ahead on 23 January 2018.
3	<i>Resources required for Integration</i>	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 Officer Finance & Resources	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 - Workforce Planning sub-group meets fortnightly to review workforce planning matters (including requests to fill vacancies)	3	4	12	High	January 2018: Additional information added to Control Actions. No change to the level of risk (either initial or current)

Social Work Risk Register (Page 1 of 6)													
Ref	Title	Description of Risk	Risk Owner	Initial Risk Level				Control Actions	Current Risk Level				Latest Update
				Likelihood	Consequence	Risk Rating	Risk Level		Likelihood	Consequence	Risk Rating	Risk Level	
18	<i>Impact of Welfare Reform on citizens</i>	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	5	5	25	Very High	<ul style="list-style-type: none"> - 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	<p>Update Jan 2018: All reforms/cuts are still ongoing even those that were due to be completed by now e.g. DLA to PIP so not possible to give end dates. Given the on-going uncertainty of timescales and changes, this risk remains on-going and high. Many welfare reforms have been commenced others are still in the process of implementation. UK Government has frequently revised implementation timetable (which makes it difficult to time training and information) and have also introduced further reforms. The Scottish Government has made funds available to mitigate certain aspects (e.g. Bedroom Tax and loss of Housing Costs for those aged under 21) but there are many aspects that are not. Some households feeling the impact of cumulative cuts. Significant current issues include the benefit cap affecting people on benefits with children, the impact of the 2 Child Policy, cuts to the work related activity component, DLA to PIP meaning people losing mobility entitlement (including cars), cut to housing costs in means tested benefit. Benefits are being devolved and these will emerge over next few years - responding to consultation on the new planned Scottish benefits.</p> <p>So far those provided a chargeable service by the HSCP have been able to maintain their benefit entitlement so have not yet seen a significant reduction in income from charging.</p>
28	<i>Impact of Abuse Inquiry</i>	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	4	20	Very High	<ul style="list-style-type: none"> - 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	4	20	Very High	<p>Update Jan 2018: No change.</p>

Social Work Risk Register (Page 2 of 6)													
Ref	Title	Description of Risk	Risk Owner	Initial Risk Level				Control Actions	Current Risk Level				Latest Update
				Likelihood	Consequence	Risk Rating	Risk Level		Likelihood	Consequence	Risk Rating	Risk Level	
6	ICT security failure or breach	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	5	5	25	Very High	<ul style="list-style-type: none"> - 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	4	16	High	Update Jan 2018: Compliance is at 94% for the 2017/18 Information Security Course. A communications campaign is being rolled out for the new data protection legislation being implemented in May 2018, including a mandatory GOLD course from January 2018 and a further Information Security course from August 2018 The. Information Sharing Protocol has been revised to reflect the Public Records Scotland Act and the Integration Joint Board.
10	Service reform and budget & service plan	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	5	4	20	Very High	<ul style="list-style-type: none"> - 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	Update Jan 2018: This risk is on-going, it is not possible to put a completion date on this risk given that the management and monitoring of the budget and associated service planning is constant and subject to fluctuations and responding management actions. The risk is considered as a crucial one and it is not anticipated that the on-going nature of it will change in the foreseeable future.
26	Financial position of External Providers Living Wage	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.	Sharon Wearing	3	5	15	High	<ul style="list-style-type: none"> - 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 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	4	16	High	Update Jan 2018: No change.

Social Work Risk Register (Page 3 of 6)													
Ref	Title	Description of Risk	Risk Owner	Initial Risk Level				Control Actions	Current Risk Level				Latest Update
				Likelihood	Consequence	Risk Rating	Risk Level		Likelihood	Consequence	Risk Rating	Risk Level	
27	Changes to VISOR	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	5	4	20	Very 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 employment policies - Sufficient staff currently vetted and able to make use of system in collaboration with MAPPA partners and responsible authorities	4	4	16	High	Update Jan 2018: No change
29	Impact of workforce planning on statutory duties	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're entitled to, and which leaves them at increased risk.	- David Williams - Alex Mackenzie	5	4	20	Very 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 arrangements 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	4	16	High	Update Jan 2018: Agreement has been reached to maintain the temporary Social Workers in the City until March 2018. In addition there has been agreement to recruit 8 extra Mental Health Officers to address demand in this area. All recruitment issues in respect to Social Staff are discussed regularly at the HSCP workforce planning subgroup.
31	Carefirst Disaster Recovery arrangements	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	4	4	16	High	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	4	16	High	Update Jan 2018: New hardware has been ordered and is expected to arrive in January 2018, and installed thereafter (timescales yet to be confirmed). There is still no confirmation of the current DR facilities.

Social Work Risk Register (Page 4 of 6)													
Ref	Title	Description of Risk	Risk Owner	Initial Risk Level				Control Actions	Current Risk Level				Latest Update
				Likelihood	Consequence	Risk Rating	Risk Level		Likelihood	Consequence	Risk Rating	Risk Level	
1	Health & Safety requirements	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	Very High	<ul style="list-style-type: none"> - 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	Update Jan 2018: No change.
11	MAPPA arrangements	There is a risk that the Glasgow MAPPA arrangements fail resulting in risk to Glasgow citizens from registered sex offenders	Susanne Millar	4	5	20	Very High	<ul style="list-style-type: none"> - 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	5	15	High	Update Jan 2018: No change
12	Child Protection arrangements	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	4	5	20	Very High	<ul style="list-style-type: none"> - 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	5	15	High	Update Jan 2018: No change

Social Work Risk Register (Page 5 of 6)													
Ref	Title	Description of Risk	Risk Owner	Initial Risk Level				Control Actions	Current Risk Level				Latest Update
				Likelihood	Consequence	Risk Rating	Risk Level		Likelihood	Consequence	Risk Rating	Risk Level	
13	Adult Protection arrangements	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	4	5	20	Very High	<ul style="list-style-type: none"> - 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 training 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	5	15	High	Update Jan 2018: No change
33	Capital Projects - design issues	There is a risk that the resolution of design issues arising after the defect liability period has ended on capital project sites could result in an operational and health & safety impacts on the HSCP, as well as the potential for litigation with a contractor and/or a financial risk to GCC and the wider new build capital programme.	Sharon Wearing	3	4	12	High	<ul style="list-style-type: none"> - 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	NEW RISK ADDED JANUARY 2018
3	Business Continuity arrangements	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	4	4	16	High	<ul style="list-style-type: none"> - Business Continuity Plans for SWS functions in place based on Business Impact Analysis exercise completed in January 2017 - Industrial Relations Strategy in place. - Monthly meetings at Director level with senior Trade Union officials. - Business Continuity Reps identified in each service area require to be reviewed and updated following service reorganisation. To be completed by end of Jan 2018. - Business Continuity Working Group chaired by the service Business Continuity Champion (Head of Business Development) to be reconvened in Jan/Feb 2018 - Review of Council ICT Disaster Recovery priorities currently being undertaken by GCC Compliance. SWS has fed into this process. - A plan for the implementation of comprehensive BCM framework across the HSCP to be developed. Aim is to have all updated BC plans ready for end of March 2018. 	3	4	12	High	Update Jan 2018: Glasgow City Council ECMT approved a revised Business Continuity Planning framework in July 2017 following the completion of the council wide business continuity exercise ('Exercise Grapevine'). All GCC services were asked to transfer BCP arrangements to this updated framework by the end of 2017, with an internal audit to follow. The Internal Audit has now been tentatively scheduled for early 2018. Given the increased (and increasing) integration of operations within the HSCP, GCC Compliance have been approached with a proposal that the HSCP may need to develop and adopt its own framework which will comply with the requirements of both partner bodies. Compliance have tentatively accepted this approach and await detailed planning arrangements. Risk Manager updated to reflect change to Business Development management structure.

Social Work Risk Register (Page 6 of 6)													
Ref	Title	Description of Risk	Risk Owner	Initial Risk Level				Control Actions	Current Risk Level				Latest Update
				Likelihood	Consequence	Risk Rating	Risk Level		Likelihood	Consequence	Risk Rating	Risk Level	
5	Failure of External Providers	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	5	4	20	Very High	- 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	4	12	High	Update Jan 2018: As noted in control actions. Also, audit of commissioning team has been completed and an action plan to address findings is currently being developed.
21	Capital Programme - Leithland site	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	3	4	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	4	12	High	Update Jan 2018: No change, however Risk Manager notes that risk level may be subject to reduction in next quarter as building expected to be wind and water tight by then thus reducing potential threats.
22	Carefirst Contract Renewal	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	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.	3	4	12	High	Update Jan 2018: The Council signed the contract with CGI on 6/12/17 and transition will now take place, to come fully into effect on 1/4/18. Contract issues will be discussed with the Council Governance Team.
30	Effectiveness of ICT systems	There is a risk that ICT systems used by Social Work Services are not fit for purpose, or fail which would impact on our ability to undertake statutory duties and meet business objectives (including the protection of and care for vulnerable children and adults). One potential cause is that the Glasgow City Council arrangements with ACCESS for the provision of ICT don't meet the specific needs of Social Work Services.	Sharon Wearing	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 - 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	Update Jan 2018: Risk to be re-assessed in light of the change to the new ICT supplier from April 2018.
20	Capital Programme - Commonwealth Games site	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	3	5	15	High	- Capital Programme Governance arrangements.	3	5	15	High	Update Jan 2018: Risk Manager has recommended closure of this risk as the project is now in the post defects period.

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Ref	Title	Description	Manager	Initial Risk Level				Controls in place	Current Risk Level				Latest Update
				Likelihood	S	Risk Rating	Risk level		Likelihood	S	Risk Rating	Risk level	
1428	Prescribing costs-Financial	Prescribing costs exceeding the allocated budget threatening HSCP services	Richard Groden	5	4	20	Very High	Budget performance monitoring Prescribing monitoring, risk sharing across HSCP, prescribing plan to identify and generate savings if required	5	4	20	Very High	Update Jan 2018: No change
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	4	20	Very High	New Forensic Contract. Recent service review recommends further development of service model. To agree extending existing contract. Engaging procurement	4	4	16	High	Update Jan 2018: No change
1418	Financial HSCP Wide	Failure to deliver transformation programmes in 2017/18 which may result in not meeting financial targets.	Alex MacKenzie	5	4	20	Very High	Regular financial monitoring at Sector and HSCP level. Reviewing and reforming of services as part of savings plans to meet targets.	4	4	16	High	Update Jan 2018: No change
1417	Shortage of Staff	Future Shortage of appropriate/competent staff e.g. retirement compromising the ability to deliver service.	Sybil Canavan	4	4	16	High	Recruitment arrangements. Succession and workforce planning.	4	4	16	High	Update Jan 2018: No change
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	4	16	High	Reviewing and strengthening the current service. Unscheduled Care Review will consider service changes to address this issue.	4	4	16	High	Update Jan 2018: No change
2080	Shortage of Staff Prison Health care	Recruitment and retention of workforce within prison health care as identified in HMP Inspection	Alex MacKenzie	4	4	16	High	Action plan in place monitored by managers in preparation of reinspection in January 2018	4	4	16	High	Update Jan 2018: No change
2081	System Change	Rapid system change and in particular staff turnover is a recognised factor potentially compromising patient safety.	Michael Smith	4	4	16	High	Local governance arrangements and clinical networks created as part of the patient safety programme will help monitor and manage change, sharing findings with local managers and HSCP systems as appropriate	4	4	16	High	NEW RISK ADDED JANUARY 2018
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	4	20	Very High	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 resources whilst delivering efficiencies.	3	4	12	High	Update Jan 2018: No change
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	4	20	Very High	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 pro-actively identify/support practices that might be approaching a vulnerable state, including mechanisms and possible responses	3	4	12	High	Update Jan 2018: No change
1429	Failure to meet Access/Discharge Targets	Failure to meet Access/discharge targets	Jackie Kerr	4	4	16	High	Working group established, Links with Social work, Funding, Continue to monitor/audit delayed discharges with acute	3	4	12	High	Update Jan 2018: No change

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Ref	Title	Description	Manager	Initial Risk Level				Controls in place	Current Risk Level				Latest Update
				Likelihood	Severity	Risk Rating	Risk level		Likelihood	Severity	Risk Rating	Risk level	
1431	External providers	External care providers not recognising health needs/ not seeking appropriate advice Impact of personalisation on staffing levels	David Walker	4	4	16	High	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	4	12	High	Update Jan 2018: No change
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	4	16	High	Guidelines and protocols in place. Audits of practice by clinical teams. awareness of Data Protection Principles. Review in progress of current arrangements	3	4	12	High	Update Jan 2018: No change
1435	Capital Developments - financial	Capital Developments- Insufficient revenue to cover on-going costs of projects	Alex MacKenzie	4	4	16	High	Project governance structures in place to minimise risk Risk register within project areas identified costs associated with risk at regular intervals Risks escalated through capital governance structure On-going discussions with social work	4	3	12	High	Update Jan 2018: No change
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	4	16	High	Information sharing protocols have been developed with relevant agencies and the directorate regularly remind staff of their responsibilities	4	3	12	High	Update Jan 2018: No change
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	4	16	High	Business continuity plans , pandemic flu plans. Use of buddy system for staff.	3	4	12	High	Update Jan 2018: No change
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	4	16	High	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	4	12	High	Update Jan 2018: No change
1705	Mental Health Inpatient Beds	Lack of beds (especially IPCU) in Greater Glasgow and neighbouring Boards impairs patient access to appropriate care	Michael Smith	4	4	16	High	Using robust bed management system to highlight problems in time to resolve. Key issue for the Core leadership and other for a to manage.	3	4	12	High	Update Jan 2018: No change
1423	Critical Failure of care	Critical failure of care leading to harm to service user (including suicide, child protection, adult support and protection, clinical standards and inspections)	Alex MacKenzie	3	5	15	High	Referral process, Staff supervision, Existing policies, procedures and guidelines. Inspection regimes- child protection	3	4	12	High	Update Jan 2018: No change