



Item No. 21

Meeting Date Wednesday 4th September 2019

Glasgow City Integration Joint Board Finance, Audit and Scrutiny Committee

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RISK MANAGEMENT QUARTERLY UPDATE

Purpose of Report:	To provide an update to the IJB Finance, Audit and Scrutiny Committee on the status of the risk registers being maintained within the Glasgow City Health and Social Care Partnership. This report covers the review carried out in July 2019 in respect of changes to risk in the quarter ending June 2019.
Background/Engagement:	The risk registers maintained within the Partnership are required to be regularly reviewed and updated by the relevant risk owners and risk managers, and reported to this Committee on a quarterly basis.
Recommendations:	The IJB Finance, Audit and Scrutiny Committee is asked to: <ul style="list-style-type: none"> a) note this report, b) note the current highest risks on the Integration Joint Board, Social Care and Health Risk Registers, and; c) Advise the Partnership how the Committee would wish to proceed with the annual review of the IJB Risk Management Policy (para 2.3).

Relevance to Integration Joint Board Strategic Plan:

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

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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).
Personnel:	Risks with a potential impact on staff 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
Fairer Scotland Compliance:	N/A
Financial:	Risks with a potential financial impact are identified in the risk registers.
Legal:	Risks with a potential legal impact are identified in the risk registers.
Economic Impact:	Risks with a potential economic impact 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 Glasgow City Council are detailed in the Social Care risk register
Implications for NHS Greater Glasgow & Clyde:	Risk implications to NHS GGC are detailed in the Health risk register

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1. Purpose

- 1.1. The purpose of this report is to provide an update to the IJB Finance, Audit and Scrutiny Committee on the status of the risk registers being maintained within the Glasgow City Health and Social Care Partnership.
- 1.2. This report covers the review carried out in July 2019 in respect of changes to risk in the quarter from 1 April 2019 to 30 June 2019.

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 Integration Scheme between Glasgow City Council and NHS Greater Glasgow and Clyde requires that the IJB Risk Management Policy be reviewed annually. The last review was carried out in 2018, with members of the IJB participating in a working group to review and update the policy.
- 2.3. A further review is now required and the Committee is asked to consider if this should be a full review and update as carried out in 2018, or if the review should be carried out by Partnership officers with recommendations for any changes submitted to a future Committee for approval on behalf of the IJB.
- 2.4. The last quarterly review of this risk register was carried out in **March 2019**.
- 2.5. There were **2** risks recommended for closure since the last quarterly review:

Ref 0521: The risk of financial slippage during the year 2018/19 due to level of savings required has been closed as that financial year has concluded. The same risk for 2019/20 is already on the risk register (Ref 0524)

Ref 0525: The risk of being unable to forecast financial position due to lack of information about harmonisation of terms of conditions arising from transfer of services from Cordia has been closed. The cost of harmonisation is now known and funding has been provided from GCC Corporate.
- 2.6. There were **2** risks on the register where the current risk level decreased since the last quarterly review:

Ref 0522: The current risk of loss of resources due to the GCC equal pay settlement has reduced from Very High to Medium. This is due payments now being underway and the resulting impact on resources being more moderate than expected.

Ref 0523: The current risk of an impact on business support functions due to the transfer of services from Cordia has reduced from Very High to High. This is due to most transferred functions now being incorporated into existing business.
- 2.7. There were **no** risks added to the register since the last quarterly review.

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- 2.8. There were **no** risks on the register where the current risk levels increased since the last quarterly update review.
- 2.9. At the conclusion of the July 2019 review there were **12** 'live' risks on the register, with **1** risks having a current risk level of 'Very High', **5** risks with a risk level of 'High' and **6** risks with a risk level of 'Medium'.
- 2.10. All risks with a current risk level of 'Very High' or 'High' are reviewed every quarter, and these shown in Appendix A with any recent updates to these highlighted.
- 2.11. Items with a current risk level of 'Medium' or 'Low' can be reviewed less regularly in line with the risk management policy. All of these items were reviewed this quarter.
- 2.12. The next quarterly review of the IJB Risk Register in 2019/20 is scheduled to be carried out in **October 2019**.

3. Social Care Risk Register

- 3.1. The Social Care 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 **March 2019**.
- 3.3. There were **4** risks where the current risk level decreased since the last quarterly review:

Ref 0544: The current risk of failing to meet Health & Safety requirements has reduced from Very High to High. This is due to training and risk assessments for staff and functions transferred from Cordia now having been carried out.

Ref 0546: The current risk of disruption to HSCP services has reduced from Very High to High. This is due to business continuity plans being reviewed and updated.

Refs 0588 & 0590: The current risks of reduced capacity in Home Care and increased absence levels as a result of equal pay settlements have both reduced from Very High to Medium. This is due to ongoing monitoring noting that the actual impact is less than anticipated.

- 3.4. There were **no** risks added to or removed from the register since the last quarterly review.
- 3.5. There were **no** risks on the register the current risk level increased since the last quarterly review.

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- 3.6. At the conclusion of the **July 2019** review, there were **47** 'live' risks on the register, with **11** risks having a current risk level of 'Very High', **13** risks with a risk level of 'High', **16** risks with a risk level of 'Medium' and **7** risks with a risk level of 'Low'.
- 3.7. All risks 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.
- 3.8. Risks with a current risk level of 'Medium' or 'Low' are reviewed less regularly in line with the risk management policy. All of these were reviewed by the risk managers during this quarterly review, and their current risk level was assessed to be accurate.
- 3.9. The next quarterly review of the Social Care Risk Register is scheduled to be carried out in **October 2019**.

4. Health Risk Register

- 4.1. The Glasgow City Health Risk Register is currently maintained, updated and reported in line with the NHS GGC Risk Management Policy, and collates the most significant risks as identified in locality and service risk registers. The register was last reviewed in **March 2019**.
- 4.2. The review carried out in March 2019 identified a number of issues with the service level risks on Datix which were reported to the Committee at its meeting on [24 April 2019](#). Work is ongoing to address these issues.
- 4.3. The Very High and High risks on the Health Risk Register that were reviewed in July 2019 are included in Appendix A.
- 4.4. The next quarterly review of the Health Risk Register is scheduled to be carried out in **October 2019**.

5. Recommendations

- 5.1. The IJB Finance, Audit and Scrutiny Committee is asked to:
 - a) note this report,
 - b) note the current highest risks on the Integration Joint Board, Social Care and Health Risk Registers, and;
 - c) advise the Partnership how the Committee would wish to proceed with the annual review of the IJB Risk Management Policy (para 2.3).

IJB Risk Register													
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	
524	Level of savings required in 2019/20 and beyond	RISK: Inability to deliver appropriate level of essential services due to required level of savings CAUSE: Required level of savings in the Budget Service Plan in 2019/20 and beyond EFFECT: Unable to meet demand for services, failing to ensure safety and prevent harm to service user, failing to meet statutory requirements, failing to deliver part or all of the Strategic Plan	Chief Officer, Finance & Resources	5	4	20	Very High	- Financial position monitored on ongoing basis by SMT, ITB, IJB Finance and Audit committee and full IJB - Transformation Programme for the HSCP in place, with a range of programmes identified to support delivery of Strategic Plan within allocated budgets - HSCP will actively engage with Partner Bodies in budget planning process for 2019-20 and beyond identifying dependencies and risks associated with any proposals.	5	4	20	Very High	July 2019: No change
512	Delivery of Strategic Plan within budget	RISK: The IJB is unable to budget within allocated resources CAUSE: Cost of delivery is higher than budgeted resources made available EFFECT: The IJB is 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	4	4	16	High	July 2019: No change
515	Partners' governance arrangements	RISK: Partners put in place revised governance mechanisms between the IJB and themselves EFFECT: Increased bureaucracy in order to satisfy IJB governance arrangements	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	July 2019: No change
517	Differing terms and conditions	RISK: Partnership exposed to challenge on employment terms CAUSE: Different employment terms and conditions of partner bodies EFFECT: Detrimental impact on resources in order to investigate, defend and/or settle claims	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.	3	5	15	High	July 2019: No change
523	Impact on business support functions due to Cordia transfer	RISK: Lack of appropriate level of business support staff in the HSCP to support corporate functions (HR, Finance, Comms, Governance) CAUSE: Inadequate levels of resource being transferred from Cordia to HSCP EFFECT: Reduced capacity to deliver full range of support, delay or compromise priority/critical activity, impact on IJB business, impact on frontline services, affect ability to deliver Strategic Plan	Chief Officer, Finance & Resources	5	4	20	Very High	• Engagement with GCC Corporate Workstreams for Cordia transfer including Steering Group, Operational Delivery, Governance and Compliance, Comms & Engagement, Legal, HR, Finance. • Comms and engagement with staff • Frontline visits to Cordia services by Chief Officer and Chief Officer Strategy & Operations	5	3	15	High	July 2019: Current risk reduced from Very High to High as most transferred functions have now been incorporated into existing business support functions.
513	Resources required for integration	RISK: The organisation cannot support the volume of resource required to establish effective integrated arrangements CAUSE: Staff and key individuals with existing operational roles and responsibilities are diverted to integration activities EFFECT: Existing organisational priorities and delivery are delayed or compromised, resulting in not delivering Strategic Plan	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	July 2019: No change

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				Likelihood	Consequence	Risk Rating		Risk Level	Likelihood	Consequence		Risk Rating	Risk Level
514	Service delivery model uncertainty	<p>RISK: Uncertainty around future service delivery models</p> <p>EFFECT: Resistance, delay or compromise resulting in necessary developments or potential improvement opportunities not being fulfilled</p>	Chief Officer	3	3	9	Medium	<ul style="list-style-type: none"> High-level strategic vision articulated through the 2019-22 Strategic Plan Implementation actions for 2016/17 approved by IJB on 21/3/2016 provide some clarity and a framework for future service delivery. Other proposed transformation projects will be notified to the IJB as a matter of routine. Clear guidance on service development during interim period. Acceptance that ongoing challenges of both organisations mean standstill is not a viable option 	3	3	9	Medium	July 2019: No change
519	IJB business continuity	<p>RISK: IJB unable to fulfill its functions due to a failure of or disruption to property, people and/or infrastructure</p> <p>CAUSE: Expected or unexpected events such as industrial action, pandemic flu, civil emergency etc</p> <p>EFFECT: Potential breach of statutory duties, negative impact on the HSCP and its partner bodies</p>	Chief Officer, Finance & Resources	3	3	9	Medium	<ul style="list-style-type: none"> Existing Business Continuity Planning framework for Glasgow City Council is in place in respect of crisis management and continuity of support services within the HSCP Business Continuity for the IJB is incorporated into the Business Continuity Plan for Business Development. Annual assurance statement to the IJB on business continuity arrangements within the HSCP is presented to the Finance, Audit and Scrutiny Committee (last presented on 24 April 2019). 	3	3	9	Medium	July 2019: No change

Social Care Risk Register													
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	
559	Impact of Welfare Reform on demand for services	RISK: There is an increased demand for social work services due to Welfare Reform including emergency payments, homelessness, welfare rights and general social work support. CAUSE: Implementation of welfare reforms including benefit cap, universal credit, child tax credits and changes to housing benefits EFFECT: Increased deprivation for citizens, reduced ability to meet demands on our services	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 <ul style="list-style-type: none"> 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. <ul style="list-style-type: none"> Briefings on Universal Credit arranged 	5	4	20	Very High	July 2019: No change
567	Impact of National Abuse Inquiry	RISK: that the Scottish Child Abuse Inquiry could result in adverse legal, financial, reputational and operational impacts to the Service. CAUSE: 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. EFFECT: Reputational damage, financial/cost implications	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. <ul style="list-style-type: none"> 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	July 2019: No change
552	Failure to deliver Budget & Service Plan and service reform outcomes	RISK: 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. CAUSE: EFFECT: 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 <ul style="list-style-type: none"> Service User engagement Trade Union liaison at strategic and local levels 	4	4	16	High	July 2019: No change
566	Loss of access to VISOR	RISK: Service loses access to Visor CAUSE: changes to the vetting requirements for new and existing VISOR users at a national level which are incompatible with current recruitment and employment policies EFFECT: the service is 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	4	4	16	High	<ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> Sufficient staff currently vetted and able to make use of system in collaboration with MAPP partners and responsible authorities 	4	4	16	High	July 2019: No change

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				Likelihood	Consequence	Risk Rating	Risk Level		Likelihood	Consequence	Risk Rating	Risk Level	
568	Workforce planning/reduction	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. CAUSE: EFFECT: service users not receiving services they're entitled to, and which leaves them at increased risk.	Susanne Millar	5	4	20	Very High	<ul style="list-style-type: none"> 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. <ul style="list-style-type: none"> 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	July 2019: No change
553	Failure of MAPPA arrangements	RISK: Glasgow MAPPA arrangements fail CAUSE: Procedures not followed; staff not appropriately trained; information security breach EFFECT: risk of harm to Glasgow citizens from registered sex offenders; reputational/legal/financial impact to organisation.	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 <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> NASSO meeting every quarter with RSL providers Memorandum of Understanding in place between statutory agencies and reviewed annually 	3	5	15	High	July 2019: No change
554	Failure of Child Protection procedures	RISK: failure in the implementation of Child Protection procedures and arrangements CAUSE: Procedures are ineffective; procedures are not followed; staff not appropriately trained; information security breach; lack of/ineffective governance EFFECT: increased and/or avoidable risk/harm to children and/or young people	Susanne Millar	4	5	20	Very High	<ul style="list-style-type: none"> Child Protection Committee and sub groups meet regularly <ul style="list-style-type: none"> Local area CP forums in place Quarterly meeting of Chief Officers group Management information produced and reviewed monthly at CP Quality Assurance Sub-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	July 2019: No change
555	Failure of Adult Protection procedures	RISK: failure in the implementation of Adult Protection procedures and arrangements CAUSE: Procedures are ineffective; procedures are not followed; staff not appropriately trained; information security breach; lack of/ineffective governance EFFECT: increased or avoidable risk/harm to vulnerable adults; reputational/legal/financial implications	Susanne Millar	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 <ul style="list-style-type: none"> 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	July 2019: No change

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				Likelihood	Consequence	Risk Rating	Risk Level		Likelihood	Consequence	Risk Rating	Risk Level	
589	Failure of Care Services staff to register with SSSC	RISK: Failure of relevant staff to register with SSSC prior to summer 2020 CAUSE: Legislation requires that all relevant staff within Care Services must be registered by this date EFFECT: Inadequate staffing numbers which will impact on service provision	Frances McMeeking	5	5	25	Very High	<ul style="list-style-type: none"> Project Group has been established to co-ordinate response to this risk which will include communications plan and process in place for enabling in-scope staff to submit applications Currently engaging with SSSC and trade Union representatives to take a proactive approach to support staff/potential staff throughout the registration process. 	3	5	15	High	July 2019: No change
544	Failure to meet Health & Safety statutory requirements	RISK: Failure to meet statutory Health & Safety requirements CAUSE: Personnel fail to follow procedures; personal are not appropriately trained EFFECT: 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 The Service has replaced a number of older buildings containing Asbestos with new buildings (asbestos banned from use in new buildings) reducing the possible exposure. <ul style="list-style-type: none"> 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. <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> Legionella risk managed with the assistance of CGI. 	3	4	12	High	July 2019: Residual risk reduced from Very High to High due to completion of H&S training for managers transferred from Cordia
546	Disruption to HSCP services	RISK: Failure of, or disruption to, facilities, infrastructure or staff affecting delivery of mainstream and out-of-hours services. CAUSE: Exceptional, one-off and unexpected events leading to loss of staff, loss of building, loss of access to building, loss of supplier or loss of infrastructure. EFFECT: service users across the city don't receive a service for a period of time that leads to reputational, financial, legal and/or public protection impact.	Susanne Millar	4	4	16	High	<ul style="list-style-type: none"> Industrial Relations Strategy in place Monthly meetings at Director level with senior Trade Union officials Business Continuity Reps identified in each service area The quarterly Business Continuity Working Group chaired by the service Business Continuity Champion is on hiatus. BCP is currently being overseen by the HSCP EU Exit Readiness Group Review of Council ICT Disaster Recovery priorities currently being undertaken by GCC SIT (SWS has fed into this process). 2019 Business Continuity lifecycle is being actioned by the Heads of Planning <ul style="list-style-type: none"> Business Impact Analyses have been reviewed and completed across the HSCP Business Continuity Plans for localities have been reviewed and completed across the HSCP 	3	4	12	High	July 2019: Residual risk reduced from Very High to High due to completion of Business Impact Assessments and Business Continuity Plans by Locality Planning Teams,

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				Likelihood	Consequence	Risk Rating	Risk Level		Likelihood	Consequence	Risk Rating	Risk Level	
547	Impact of failure of third parties and partners	RISK: contractor/partner arrangements fail CAUSE: political and socio-economic factors; providers' financial position; failure to comply with regulatory/legislative changes EFFECT: failure to deliver services appropriately with a provider or other agencies leading to a failure to care/protect service users; increased demand on resources; financial implications.	Susanne Millar	5	4	20	Very High	<ul style="list-style-type: none"> 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	July 2019: No change
548	Failure of ICT security	RISK: Loss/misuse/breach of health and social care data within our responsibility CAUSE: IT system security failure, human error, hostile actor (internal or external) EFFECT: breach of confidentiality, a fine from the Information Commissioner, reputational damage, and potential harm to service users affecting public and service user confidence	Allison Eccles	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. Information sharing protocol with NHS GG&C has been updated and circulated for sign-off All ICT developments progressed through project management methodology which includes risk logs and Data Protection Impact Assessments are undertaken as required. The majority of devices are now encrypted and authorisation process in place for unencrypted devices. Secure email and Objective Connect available for secure data sharing Secure email blueprint (including TLS) now implemented Protective Marking to be rolled out in SWS in 2019 Site and Information Security Audit programme in place for SWS establishments and services Containment process in place for accidental email breach Staff briefings on data protection (GDPR) and information security briefings issued regularly Use of is2a and/or is2b procedure and forms for staff removing data from offices 	3	4	12	High	July 2019: No change
558	Failure of Older People Residential Strategy Transition arrangements	RISK: Failure to effectively make transition between current and new care homes CAUSE: Transition arrangements between current and new care homes are not managed effectively EFFECT: impact on levels of care provided affecting vulnerable service users; risk of harm; reputational/financial/legal implications.	Stephen Fitzpatrick	3	5	15	High	<ul style="list-style-type: none"> Capital Programme Governance arrangements. Development of transition strategy. Establishment of city-wide reference group for service users. 	3	4	12	High	July 2019: No change
561	Unexpected costs arising from Leithland site	RISK: Risk of costs outwith original agreed tender agreement arising from resolution of outstanding design issues and adverse site conditions on the Leithland site CAUSE: unforeseen design issues, ground conditions, building defects, lack of design coordination, budget limitations, inflation, rising building costs EFFECT: impact on Social Work Services budget	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	July 2019: No change

Social Care Risk Register													
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	
569	Unsuitability or failure of ICT systems	RISK: ICT systems used by SWS (including Home Care Services) for the delivery of statutory duties are not fit for purpose or are not maintained CAUSE:Glasgow City Council arrangements with CGI for the provision of ICT don't meet the specific needs of Social Work Services, ex-Cordia IT staff now in CGI are moved to non-Cordia system work or leave the organisation resulting in loss of expertise and system knowledge. EFFECT: impact on delivery of statutory duties, service users/public/vulnerable people come to harm, significant reputational, financial and operational harm to the organisation, efficiency savings become more difficult to achieve.	Allison Eccles	4	4	16	High	<ul style="list-style-type: none"> The Strategic Innovation and Technology Team (SIT) has been established by GCC to oversee the contract with CGI. An HSCP Business Partner to SIT has been appointed. The contract is based on Output Based Specifications (OBSs) and there are OBSs for key systems (including careFirst, iWorld and LS/CMI) and all other ICT provision. There is a transformation programme to significantly improve a number of technologies. The Governance structures for ICT and Digital are being reviewed in light of the change in ICT contract and HSCP requirements. 	3	4	12	High	July 2019: No change
570	Litigation and/or contractor disputes arising from building defects	RISK: Capital project design issues arise after the defect liability period has ended on capital project sites CAUSE: Construction deficiencies, possible sub contractor failures and poor work standards. EFFECT: could result in 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. <ul style="list-style-type: none"> 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	July 2019: No change
572	Failure of Carefirst Disaster Recovery arrangements	RISK: Interim DR solution for Carefirst may not operate as expected CAUSE: Interim DR solution cannot be tested without either extended downtime or considerable cost EFFECT: Major disruption to operations, essential information not available possibly leading to harm for service users, staff or the public and/or failure to carry out statutory duties	Allison Eccles	3	4	12	High	<ul style="list-style-type: none"> Continuing to liaise with SIT regarding implementation of a more robust and tested solution 	3	4	12	High	July 2019: No change
571	Community Alarms affected by telephone provider(s)	RISK: Service user(s) community alarms do not function as required due to telephone line being switched from analogue to digital CAUSE: Telephone providers such as BT/Virgin switching customer line from analogue to digital, Provider not having information about which customers have community alarms that rely on telephone line being analogue EFFECT: service user unable to activate alarm, service user comes to serious harm or fatality, significant reputational, legal and financial harm to the organisation, loss of trust from public on the effectiveness of community alarms, may impact on delivery strategic priorities of the organisation.	Frances McMeeking	3	5	15	High	<ul style="list-style-type: none"> Service has shared telephone numbers of all community alarm service users with the telephone providers (BT, Virgin etc) to ensure their records are correct and up to date. Service has written to all Community Alarm service users to advise that if they are changing their telephone provider they must let them know that there is an alarm dependant on the line and it cannot be converted to a digital line otherwise their alarm will not function properly 	2	5	10	High	July 2019: No change

Extract of HSCP/Health risks from Datix (28 March 2019)

Ref	Title	Description of Risk	Risk Owner	Initial Risk Level				Control Actions	Current Risk Level				Latest Update
				Likelihood	Consequences	Risk Rating	Risk Level		Likelihood	Consequences	Risk Rating	Risk Level	
2462	First Aid at Work Certification	Due to lack of refresher training, pageholders First Aid at Work Certificates are expiring.	Phillips, Katrina	5	5	25	Very High	NHS GGC H&S procuring training provider	5	5	25	Very High	July 2019: There has been a number of training dates offered citywide. No further dates provided and number of staff outstanding have still to attend. Requirement for further dates to be provided and rotational programme of dates across the city.
2464	Shortage of Appropriate / Competent Staff Compromising Ability to Deliver Service - Admin	Recruitment arrangements delay process of appointing staff Fixed Term contracts due to admin review making posts difficult to fill No Bank staff available	Buchanan, Alasdair	5	5	25	Very High	2 sessions per week from ADRS ARBD to cover staff breaks New Admin TL covering duties with support from Band 4 where grade appropriate Senior admin meeting every 2 weeks to monitor work and risk areas	5	5	25	Very High	July 2019: No change
1428	Prescribing costs	Prescribing costs exceeding the allocated budget threatening HSCP services	Groden, Richard	5	4	20	Very High	Budget performance monitoring HSCP Prescribing Monitoring Group supports budget monitoring	5	4	20	Very High	July 2019: No change
2414	Shortage of Health Visiting Staff	Shortage of appropriate / competent staff compromising ability to deliver service	Forsyth, Ann	5	4	20	Very High	FORMAL CONTINGENCY PLAN WITH MAINSTREAM C&F SERVICE MANAGERS, INTRUIM CHIEF NURSE AND HoS ADULT. HFHCT PROVIDING CO-ORDINATION ROLE I.E. SCREEN NOTIFICATIONS AND LINK TO MAINSTREAM SERVICE. UPDATES VIA C&F, HOMELESSNESS MANAGERS AND LEAD NURSE. IN EVENT FAILED CONTACT THEN TIME LIMITED ON CASELAD TO BRIDGE TO MAINSTREAM C&F SERVICE, SWS AND EDUCATION. USE OF BANK COVER UNSUCCESSFUL AND USING SESSIONS B5 FROM AHBT. REQUEST TO REVIEW FAMILY RESPONSE NOT SUPPORTED IN AT ASPB AND TO BE LINKED TO WIDER HAHS DEVELOPMENTS. 1 x HV on Induction and preferred candidate awaiting checks	5	4	20	Very High	July 2019: No change
2456	Psychological Therapies	Risk of deterioration of clients health due to lack of psychology services	McNeill, Fiona	5	4	20	Very High	clients are seen by CMHT / Crisis Team , but may result in admission	5	4	20	Very High	July 2019: No change
2458	Perinatal Mental Health Access to Badgernet	Perinatal Mental Health staff cannot access Badgernet, impacting on information available when undertaking liaison or ward visits.	McNeill, Fiona	5	4	20	Very High	Pregnancy plan can be uploaded to badgernet so available to other professionals Letters can be uploaded to Clinical Portal Discussion with Supplier nationally re Perinatal Module for system Explore EDT link to Badgernet	5	4	20	Very High	July 2019: No change
1048	Psychological Therapies	Risk of targets not continuing to be met because of increase in workload.	McNeill, Fiona	4	4	16	High	Psychological Therapies Project Group Finance requires approval needed by CHP.	4	4	16	High	July 2019: No change
2457	Adult Admissions	Risk of demand exceeding capacity for adult admission beds	McNeill, Fiona	4	4	16	High	local contingency plans use of beds across system when required escalation process	4	4	16	High	July 2019: No change
2463	Supply of Enteral Feeding Products	Shortage of supply of enteral feeding products, may be exacerbated due to Brexit	Mitchell, Anne	4	4	16	High	Escalated to NHS GGC Brexit Group.	4	4	16	High	July 2019: The situation regarding Nutricia is that they have confirmed they will have a 6 week stockpile of sundries in UK.
2459	CMHT Staff Shortage	Due to shortage of nursing and OT staff within the CMHT unable to meet the demands of clinical activity	Phillips, Katrina	5	3	15	High	caseload management	5	3	15	High	July 2019: No change
2460	MHO Pressures	Pressure on MHO activity due to on-going vacancies and staff turnover	Phillips, Katrina	5	3	15	High	workload prioritisation	5	3	15	High	July 2019: No change
1511	GP practices	Glasgow City HSCP may experience local GMS practice unable to fulfil its contractual obligations requiring intervention and support sometimes at short notice	Groden, Richard	5	4	20	Very High	Developing a response "toolkit" for practices "in distress" and seeking support in terms of an initial assessment and what might be offered by way of further in depth assessment and identifying a suitable range of responses. Developing an approach to pro-actively identify/support practices that might be approaching an "in distress" state, including mechanisms and possible responses	3	4	12	High	July 2019: No change