

Item No. 10

Meeting Date Monday, 12th September 2016

Integration Joint Board Finance and Audit Committee

Report By: Chief Officer Finance and Resources
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RISK MANAGEMENT & REGISTERS UPDATE

Purpose of Report:	To summarise the most recent updates to the 3 corporate risk registers maintained by the Glasgow City Health & Social Care Partnership.
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Recommendations:	<p>The Finance and Audit Committee is asked to:</p> <ul style="list-style-type: none"> • Note the content of this report • Note the attached Integrated Joint Board Risk Register, Social Work Corporate Risk Register and Health Corporate Risk Register
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Implications for IJB:

Financial:	Financial risks are identified in the registers
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Personnel:	Human Resources risks are identified in the registers
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Legal:	Legal impacts of risks are identified in the registers
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Economic Impact:	Any economic impacts of risks are identified in the registers
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Sustainability:	Any impacts on sustainability are reflected in registers
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Sustainable Procurement	Not applicable
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and Article 19:	
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Equalities:	Any impacts on equalities identified in the registers
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Implications for Glasgow City Council:	Relevant implications for Glasgow City Council are identified in Social Work Corporate and Integration Joint Board Risk Registers
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Implications for NHS Greater Glasgow & Clyde:	Relevant implications for NHS Greater Glasgow & Clyde are identified in the Health Corporate and Integration Joint Board Risk Registers
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1. Purpose

- 1.1. To summarise the most recent updates to the 3 corporate risk registers maintained by the Glasgow City Health & Social Care Partnership.

2. Background

- 2.1. The risk registers were updated in July 2016, and reviewed by the Senior Management Team on 10 August 2016. They were subsequently amended on 26 August 2016.

3. Integrated Joint Board Risk Register

- 3.1. The Integrated Joint Board Risk Register is currently maintained, updated and reported in line with the Risk Management Policy developed for integration bodies.
- 3.2. All risks on the register were updated in July 2016.
- 3.3. The Risk Register was subsequently updated on 26 August 2016. The following updates were noted:
 - 3.3.1. There were 2 items added to the Register:
 - Item 14: 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.
 - Item 15: 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.
 - 3.3.2. No items had an increase or decrease in current risk ranking. The additional items carry an initial risk rating of "Very High" and a current risk rating of "Medium".
 - 3.3.3. There was an amendment to the risk description for 1 item on the Register:
 - The item in respect of the Health Board budget allocation was amended to reflect that the offer received in July 2016 would require savings in excess of the HSCP's current savings plan, and therefore there is a risk to the IJB's implementation of the Strategic Plan.
- 3.4. At 26 August 2016, there were **12** 'live' risks on the Integrated Joint Board Risk Register, with **3** items with a current risk level of 'Very High', **2** items with a current risk level of 'High' and **7** items with a risk level of 'Medium'.

3.5. The Integrated Joint Board Risk Register is attached as Appendix A, with the most recent updates highlighted in blue.

4. Social Work Service Corporate Risk Register

4.1 The SWS Corporate Risk Register is currently maintained, updated and reported in line with the Glasgow City Council Risk Management Policy and Guidance.

4.2 There were 23 risks on the register that required to be updated in July 2016. The next update is due in October 2016. 3 additional risks were added on 26 August 2016.

4.3 The following updates were noted:

4.3.1 There were 5 items added to the Register:

- The risk of reduced Social Work workforce resulting in the organisation not being able to carry out all of its statutory duties. This has been entered to the Register as a 'Very High' risk, with current control actions mitigating to a 'High' risk
- The risk of Glasgow City Council no longer having a connection to the Criminal History System maintained by Police Scotland. This was initially submitted as a 'High' risk, however work undertaken in the intervening period has reduced this to a 'Medium' risk, with work ongoing.
- The risk of Glasgow City Council facing legal challenge with respect to the method of payment of monies for the Scottish Living Wage for care workers. This has been entered to the Register as a 'High' risk, with current control actions mitigating to a 'Medium' risk.
- The risk of funding provided by the Scottish Government for the Scottish Living Wage being insufficient. This has been entered to the Register as a 'Very High' risk, with current control actions mitigating to a 'Medium' risk.
- The risk of the financial challenges faced by service provider organisations as a result of implementing the Scottish Living Wage being such that it will destabilise them significantly. This has been entered to the Register as a 'High' risk, with current control actions mitigating to a 'Medium' risk

4.3.2 There were 2 items removed from the Register:

- The risk of industrial action in response to GCC terms and conditions proposals resulting in withdrawal of life & limb cover. The industrial relations issue has now been resolved, therefore the 2 risk items in relation to this have been removed from the register.

4.3.3 There no items where the level of risk has either increased or decreased since the last quarter.

- 4.3.4 There were 5 items which had minor updates to their Control Actions, which did not affect the risk level of these items.
- 4.4 At 26 August 2016, there were **34** live items on the SWS Corporate Risk Register. There is **1** item on the register with a current risk of 'Very High', **17** items with a current risk of 'High', **15** items with a current risk of 'Medium' and **1** item with a current risk of 'Low'.
- 4.5 The highest risks on the SWS Corporate Risk Register are attached as Appendix B, with most recent updates to these highlighted in blue.

5. Health Board Corporate Risk Register

- 5.1 The Health Board Corporate Risk Register is currently maintained, updated and reported in line with the Health Board Risk Management Policy.
- 5.2 Risks are recorded in several service based risk registers which are reviewed locally on a quarterly basis.
- 5.3 The highest organisational risks are incorporated into a Health Board Corporate Risk Register which is reproduced as Appendix C. The Health Board Corporate Risk Register is reviewed in an organisational wide context with any changes made notified back to local services.
- 5.4 As compared with the previous version of the Register a number of items have changed. These include:-
- Addition of inadequate numbers of out of hours Junior Doctors. Number 1671.
 - Lack of Cover for Court Liaison Service Number 1672.
 - Lack of inpatient beds Number 1673.
 - Addition of two additional risks in relation to implementation of the Scottish Living Wage for care workers.

6. Recommendations

- 6.1 The Finance and Audit Committee are asked to:
- Note the content of this report
 - Note the attached Integrated Joint Board Risk Register, Social Work Corporate Risk Register and Health Corporate Risk Register

Appendix A: IJB Risk Register

Ref	Status	Description of Risk	Risk Owner	Initial Risk Level				Control Actions	Current Risk Level				Latest Update
				Likelihood	Consequences	Risk Ranking	Risk Level		Likelihood	Consequences	Risk Ranking	Risk Level	
11	Live	There is a risk that the budget allocation from the GGC Health Board to the GHSCP will not be agreed at level which allows the IJB to direct Sufficient financial resources pursuant to its Strategic Plan. The budget offer letter from the Health Board in July 2016 assumes a level of savings in excess of the HSCP's current savings plan and so there is a risk that there is shortfall in this plan, both in-year and on a recurring basis, or that the IJB will be unable to approve the budget allocation	Chief Finance & Resources Officer	5	5	25	Very High	- Transformation Programme for the HSCP in place, with a range of programmes identified to support delivery of Strategic Plan within allocated budgets - Governance / reporting mechanism for Transformation Programme in development - Financial position monitored on ongoing basis by SMT, IJB Finance and Audit committee and full IJB	5	5	25	Very High	July 2016: Risk Description updated
1	Live	There is a risk that, as a result of the December 2015 budget, the settlement for both GCC and the NHS will be worse than had been previously included within respective planning assumptions. This could lead to budget allocations to the HSCP from both Partners requiring unprecedented levels of savings, resulting in an overspend within the HSCP and impact on ability to deliver the Strategic Plan.	Chief Finance & Resources Officer	5	4	20	Very High	- Transformation Programme for the HSCP in place, with a range of programmes identified to support delivery of Strategic Plan within allocated budgets - Governance / reporting mechanism for Transformation Programme in development - Financial position monitored on ongoing basis by SMT, IJB Finance and Audit committee and full IJB	5	4	20	Very High	July 2016: No change
2	Live	There is a risk of the IJB being unable to budget within allocated resources which could lead to being unable to deliver on the Strategic Plan	Chief Finance & Resources Officer	5	4	20	Very High	- The Integration Scheme details the actions to be taken in the event of this and furthermore the contingency arrangements should parent bodies be unable/unwilling to provide additional funding - Transformation Programme for the HSCP in place, with a range of programmes identified to support delivery of Strategic Plan within allocated budgets - Governance / reporting mechanism for Transformation Programme in development - Financial position monitored on ongoing basis by SMT, IJB Finance and Audit committee and full IJB - Additional funding from Central Government has been made available in respect of HSCPs and the GCHSCP allocation of this has been identified.	5	4	20	Very High	July 2016: No change
12	Live	There is a risk that differing employment terms could expose the Partnership to equal pay claims. This could lead to a detrimental impact on resources in order to investigate, defend and/or settle these.	Chief Finance & Resources Officer	3	5	15	High	- Staff continue to be employed by 2 separate organisations and do not have the same terms and conditions, however Equal Pay claims don't compare across different employers and no terms and conditions being changed. Head of Corporate Services to check with Legal.	3	5	15	High	July 2016: 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	- workload and resource monitoring continues to be undertaken across the partnership (for example, through one-to-one supervision) - ongoing review of support (including work undertaken and resources being used) required for integrated arrangements	3	4	12	High	July 2016: No change
5	Live	There is a risk that uncertainty around future service delivery models may lead to resistance, delay or compromise resulting in any necessary developments or potential opportunities for improvement not being fulfilled	Chief Officer	3	3	9	Medium	- High-level strategic vision articulated through the 2016-19 Strategic Plan. - Implementation actions for 2016/17 approved by IJB on 21/3/2016 provide some clarity and a framework for future service delivery. - Other proposed transformation projects will be notified to the IJB as a matter of routine. - Clear guidance on service development during interim period. - Acceptance that ongoing challenges of both organisations mean standstill is not a viable option	3	3	9	Medium	July 2016: No change

Appendix A: IJB Risk Register

Ref	Status	Description of Risk	Risk Owner	Initial Risk Level				Control Actions	Current Risk Level				Latest Update
				Likelihood	Consequences	Risk Ranking	Risk Level		Likelihood	Consequences	Risk Ranking	Risk Level	
6	Live	There is a risk of Amendment of legislation or publication of further guidance from government which conflicts with Glasgow's planning assumptions, requiring decisions already made to be revisited which may lead to further slippage of previously agreed timescales	Chief Officer	3	3	9	Medium	- Chief Officer and all other joint senior officers have ongoing and routine engagement with civil servants and will become aware of any potential changes as they are being developed. - Any GCHSCP action in response to any proposed changes should be able to be made proactively.	3	3	9	Medium	July 2016: No change
7	Live	There is a risk that negative staff perception of integration due to previous experience of CHCPs may lead to an adverse affect on engagement / buy-in to new partnership	Chief Officer	4	4	16	High	- Comms messages acknowledge previous experience and outline how new partnership is different - OD events to engage staff in development of integrated arrangements and build new culture - Workforce development and OD strategy to be developed within 1st year of establishment of IJB	3	3	9	Medium	July 2016: No change
8	Live	There is a risk that the Partners put in place revised governance mechanisms between the IJB and themselves which could lead to increased bureaucracy in order to satisfy the alternative arrangements that require to be put in place.	Chief Officer	3	4	12	High	- Chief Officer to maintain a visible and influencing presence in the development of any future governance arrangements to ensure that such potential arrangements are lean and manageable.	3	3	9	Medium	July 2016: No change
9	Live	There is a risk that the clinical and professional governance arrangements that are being established fail to discharge the duties incumbent upon them	Chief Officer	4	4	16	High	- Review of processes established - 'Double running' of existing arrangements while revised structures are established	2	4	8	Medium	July 2016: No change

Appendix B: Social Work Risk Register

Ref	Description of Risk	Risk Owner	Position Held	Likelihood	Consequences	Risk Ranking	Risk Level (HSCP)	Control Actions	Likelihood	Consequences	Risk Ranking	Risk Level (HSCP)	Review Period	Most recent update
25	There is a risk that the implementation of welfare reform will lead to increased deprivation for the most vulnerable citizens, thereby leading to an increased demand for social work services including emergency payments, homelessness, welfare rights and general social work support. This could affect the ability of the service to meet demand.	Susanne Millar	CSWO & Chief Officer - Planning, Strategy and Commissioning (GHSCP)	5	5	25	Very High	Contribution to the corporate welfare reform group; effective communications with service users and other stakeholders; information dissemination on rights to appeal; appeals packs for service users developed; Welfare Reform training delivered to 3rd sector. Key messages have been refreshed and disseminated again widely in line with the current stage of reform. Significant further training has been provided to voluntary sector organisations. Linkages with the Scottish Welfare Fund has resulted in a significant increase in the number of people appealing benefit sanctions.	5	4	20	Very High	Quarterly	Update July 2016: No change
16	There is a risk that the Department's service reform and Budget and Service Plan programmes fail to deliver the required outcomes in terms of delivery of statutory duties; service modernisation and financial savings. This would have the impact of necessitating potential drastic and unplanned cuts in order to realise the savings requirements thereby leaving services and service users vulnerable.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	5	4	20	Very High	Fortnightly Integration Transformation Board meetings Weekly Executive Group meetings to approve critical progress issues CSWO led SMT's in both Adult and Children and family Services review and progress Performance Management Framework incorporating City-wide, local and care group performance reporting Regular planned and structured liaison with providers re changes Service User engagement Trade Union liaison at strategic and local levels	4	4	16	High	Quarterly	Update July 2016 (CC): No change Update July 2016 (AE): In addition to the above the new management structure of the HSCP adds in a new layer of scrutiny e.g. through the Operational Executive Group, Core Leadership Groups etc. In particular there is a direct link with operational risks to this corporate risk register as part of these management arrangements.
31	There is a risk that the renewal of the OLM contract will not be concluded by the 31st of March and the current proposal for a standard one year extension will not meet the business needs and cost significantly more than a partnership contract resulting in a lack of support from the supplier, potentially affecting all areas of social work services if careFirst fails and cannot be fixed by ACCESS, and additional costs to the Council, and decreasing the ability to implement transformational change for the Health and Social Care Partnership	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	4	4	16	High	ACCESS are dealing with the contract renewal, and the concerns around the implications of the current situation have been raised with Senior Management.	4	4	16	High	Quarterly	Update July 2016: No change
36	There is a risk that the reduction in the Social Work workforce will result in the organisation being unable to carry out its statutory duties including: - Services to LA and LAAC children - MHO duties - Duties under Section 22 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 Section 12 of the Social Work Scotland Act 1968	Alex Mackenzie	Chief Officer (Operations)	5	5	25	Very High	- Local performance management and supervision systems in place - Workforce planning arrangement for care groups being finalised - Training and development programme for MHOs in place - New AWI protocols agreed at HSCP and SWS Governance Groups.	4	4	16	High	Quarterly	NEW RISK ADDED JULY 2016
2	There is a risk of failure to meet statutory Health & Safety requirements. This may result in major loss of service through establishment fire, major catastrophe or infections; or singular catastrophic incidents which could result in death or serious injury of service users and/or staff.	Christina Heuston	Head of Corporate Services (GHSCP)	4	5	20	Very High	Service is a member of the Council's Asbestos Strategic Management Group that monitors actions regarding the management of Asbestos. The Service has appointed a Health and Safety Co-ordinator who actively monitors the arrangements for the control of Asbestos, Service Control of Asbestos Management Standard issues June 2014 Departmental Health & Safety Policy & manuals Fire safety management system. H&S risk assessment processes, e.g. fire, legionella, alarms etc. Business Continuity Plans for functions being re-developed based on Business Impact Analysis exercise. Respond to all audit and inspection requirements. Emergency procedures in place for all accommodation Range of H&S training in place e.g. Fire Wardens, Manual Handling etc. Regular Fire and Alarms Equipment testing with contracts for maintenance and checks in place. Monitoring of claims. Managing Violence at Work Policy Document and monitoring of Violent Incident reports. Legionella risk managed by ACCESS.	3	5	15	High	Quarterly	Update July 2016: No Change. The revised Safety Management Standards have been completed but not yet issued. A programme of Abestos Management surveys has been drafted however Risk Manager unable to report current status of the programme.

Appendix B: Social Work Risk Register

Ref	Description of Risk	Risk Owner	Position Held	Likelihood	Consequences	Risk Ranking	Risk Level (HSCP)	Control Actions	Likelihood	Consequences	Risk Ranking	Risk Level (HSCP)	Review Period	Most recent update
17	There is a risk that the Glasgow MAPPA arrangements fail resulting in risk to Glasgow citizens from registered sex offenders	David Williams	Chief Officer (GHSCP)	4	5	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	5	15	High	Quarterly	Update July 2016: Minor changes to meeting structure
18	There is a risk of failure in the implementation of Child Protection procedures and arrangements resulting in increased and/or avoidable risk/harm to children and/or young people	David Williams	Chief Officer (GHSCP)	4	5	20	Very High	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 Leadership Group and area SMTs 1/2 yearly LMR process overseen and coordinated by CP team ASM structure providing QA, monitoring and objectivity to local practice Robust single agency and multi agency training programme in place	3	5	15	High	Quarterly	Update July 2016: Minor changes to meeting structure
19	There is a risk of failure in the implementation of Adult Protection procedures and arrangements resulting in increased or avoidable risk/harm to vulnerable adults	David Williams	Chief Officer (GHSCP)	4	5	20	Very High	- 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 - City-wide multi-agency learning event held (June 2016)	3	5	15	High	Quarterly	Update July 2016: Control actions reviewed and updated by Risk Manager
28	There is a risk that care home design provision for resilience in the event of a utility failure could result in design solutions that may attract unforeseen and additional revenue and capital expenditure.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	4	5	20	Very High	Capital Programme Governance arrangements. Corporate partners working to develop viable solutions which will be evaluated through the Governance Board.	3	5	15	High	Quarterly	Update July 2016: No update received
29	There is a risk that resolution of outstanding design issues on the Commonwealth Games site could result in an operational and financial impact on SWS.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	3	5	15	High	Capital Programme Governance arrangements.	3	5	15	High	Quarterly	Update July 2016: No update received
1	There is a risk that arrangements with ACCESS do not meet the ICT requirements for Social Work Services resulting in a failure of SWS to meet its business objectives and deliver services affecting vulnerable service users.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	4	4	16	High	Carefirst and ICT Strategy Board (4 weekly) Carefirst Technical Board (4 weekly) (ACCESS and supplier both present at the above meetings) ICT Operational meeting now in place Improvement actions from job swap underway Development of maintenance of pipeline plan	3	4	12	High	Quarterly	Update July 2016: All projects impacted by the December incident have been rebaselined.

Appendix B: Social Work Risk Register

Ref	Description of Risk	Risk Owner	Position Held	Likelihood	Consequences	Risk Ranking	Risk Level (HSCP)	Control Actions	Likelihood	Consequences	Risk Ranking	Risk Level (HSCP)	Review Period	Most recent update
3	There is a risk of negative media publicity resulting in loss of public support and low staff morale affecting our ability to deliver services to vulnerable children and adults and the confidence of service users in the services upon which they rely.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	4	5	20	Very High	Glasgow City HSCP Joint Media Protocol for media enquiries and proactive communications in place Links with Glasgow City Council and NHS Greater Glasgow and Clyde Corporate Communications Teams, including PR Teams Glasgow City HSCP Joint Communications Strategy in place, with key communications channels for the corporate partner organisations and the Partnership (e.g., Health and Social Care Integration Newsletter and Bulletins, website presence, email announcements) Regular communications survey in place Glasgow City HSCP Brand Identity Guidelines in place Communications guidelines developed as required; Twitter guidelines (completion June 2016) and email signature guidelines (June 2016) Development of further communications channels for stakeholders; Twitter (completion June/July 2016) and external website (completion end of 2016) Process in place to identify and publish 'Good News' stories to promote a positive image for the Glasgow City HSCP Weekly joint meetings between Social Work and Health staff within the Glasgow City HSCP supporting communications to ensure a co-ordinated approach Arrangements in place to disseminate joint communications in a consistent and timely manner across the Glasgow City HSCP Individual communications strategies or plans for projects/change programmes in place as required	3	4	12	High	Quarterly	Update July 2016: No change
4	There is a risk of an inability to respond to needs for services on a 24 hour basis due to failure of or disruption to facilities or staff affecting mainstream and out-of-hours services. This is as a consequence of exceptional, one-off and unexpected events such as strike action, pandemic flu, extreme weather events. The impact of this is that service users in significant numbers across the city may not be able to receive a continuing service for a limited period of time.	Susanne Millar	CSWO & Chief Officer - Planning, Strategy and Commissioning (GHSCP)	4	4	16	High	Business Continuity Plans for SWS functions in place based on Business Impact Analysis exercise Industrial Relations Strategy in place. Monthly meetings at Director level with senior Trade Union officials. Business Continuity Reps identified in each service area Business Continuity Working Group chaired by the service Business Continuity Champion (Head of Business Development) and meets quarterly (to be increased to monthly until BCPs are updated to reflect HSCP) - Target completion of update to BCPs is September 2016 in line with agreement at HSCP Civil Contingencies Group Review of Council ICT Disaster Recovery priorities currently being undertaken - Business Development meeting with Council Compliance on 27 July 2016 to review existing arrangements.	3	4	12	High	Quarterly	Update July 2016: Target date for completion of Business Continuity Plan review added to Control Actions. Review of Council ICT Disaster Recovery priority levels added to Control Actions.
6	There is a risk that contractor/partner arrangements fail. This may result in a failure to deliver services appropriately with a provider or other agencies leading to a failure to care/protect service users	Susanne Millar	CSWO & Chief Officer - Planning, Strategy and Commissioning (GHSCP)	5	4	20	Very High	Contract Management Framework. Contractor Risk Ratings Matrix. Data sharing & GHA/RSL protocols. Data Processing Agreements with Health/SCRA/Education. Procurement activity undertaken in accordance with written agreed procedures. All contractual arrangements over the approved thresholds referred to appropriate committee for approval. Business Continuity Plans for functions being re-developed based on Business Impact Analysis exercise. Ensuring providers/other agencies have health and safety procedures/arrangements in place Regular meetings with key providers and the Social Care Ideas Factory regarding strategic provider related issues	3	4	12	High	Quarterly	Update July 2016: No change. Risk manager notes that a meeting will be held on 15/07/16 to review contingency plans
7	There is a risk that ICT security fails resulting in loss/misuse of data, breach of confidentiality, a fine from the Information Commissioner, reputational damage, and potential harm to service users affecting public and service user confidence	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	4	4	16	High	Information Security Governance via Information Security Board. Policies and guidance regularly updated and annual mandatory training provided via GOLD or leaflet. New screensavers being implemented for 2016. Information sharing protocol with NHS GGC in place. All ICT developments progressed through project management methodology which includes risk logs and Privacy Impact Assessments are undertaken as required. The majority of devices are now encrypted and authorisation process in place for unencrypted devices. Disclosure process in place for PSN compliance. Secure email piloted and will be rolled out alongside protective marking.	3	4	12	High	Quarterly	Update July 2016: New screen savers have been implemented. Staff have been advised to completed the revised IT Security Course on GOLD - completion rates to date indicate we are on target for completion within the 12 week deadline set for this.

Appendix B: Social Work Risk Register

Ref	Description of Risk	Risk Owner	Position Held	Likelihood	Consequences	Risk Ranking	Risk Level (HSCP)	Control Actions	Likelihood	Consequences	Risk Ranking	Risk Level (HSCP)	Review Period	Most recent update
11	There is a risk that ICT systems affecting statutory requirements fail resulting in a lack of access to relevant information affecting our ability to protect/care for vulnerable children and adults.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	3	4	12	High	CareFirst is designated a Platinum system. I-World has been designated Top Gold. Service Level Agreements on availability for key systems with ACCESS. Ongoing training programme. Regular review and updating of systems and technologies to ensure compliance with technical strategy and supplier maintenance agreements.	3	4	12	High	Quarterly	Update July 2016: the careFirst fault previously reported where staff lose data and where residual risk rating was increased from '6' to '12' has had some remedial work carried out w/b 4th July. A change has been applied to servers used for the app and results will be monitored from w/b 11th July. A further measure to address the issue is being developed and should be in test this month.
30	There is a risk that resolution of outstanding design issues and adverse site conditions on the Leithland site could result in an operational and financial impact on SWS programme.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	5	4	20	Very High	Capital Programme Governance arrangements. Regular monitoring of contract by DRS Project Team. Reporting to Social Work Capital Board. Reporting to Council Capital Board. Corporate partners working to develop viable solutions which will be evaluated through the governance process.	3	4	12	High	Quarterly	Update July 2016: No update received
27	There is a risk that final confirmation of outstanding care home sites will affect the projected timescales associated with concluding the wider project objectives. This could result in a greater financial and operational impact on the Council.	Sharon Wearing	Chief Officer - Finance and Resources (GHSCP)	3	5	15	High	Capital Programme Governance arrangements. Corporate partners working to develop viable solutions which will be evaluated through the Governance Board.	2	5	10	High	Quarterly	Update July 2016: No update received

Glasgow City Health Risk Register April 2016

Division	ID	Title	Description	Manager	Likelihood (initial)	Consequence (initial)	Rating (initial)	Risk level (initial)	Controls in place	Likelihood (current)	Consequence (current)	Rating (current)	Risk level (current)	Review date
GCHSCP	1417	Shortage of Staff	Shortage of appropriate/competent staff e.g. increase in vacancies within District Nursing, Health Visiting compromising the ability to deliver service.	Sybil Canavan	5 - Will undoubtedly recur, possibly frequently	5 - Extreme	25	V HIGH	Recruitment arrangements. Succession and workforce planning. Contingency arrangements as for poor weather and other circumstances.	5 - Will undoubtedly recur, possibly frequently	4 - Major	20	VHIGH	12/10/2016
GCHSCP	1418	Financial CHP Wide	Failure to deliver savings plan in 2016/17 which may result in overspend which will need to be met in future years from increased savings.	Alex MacKenzie	5 - Will undoubtedly recur, possibly frequently	5 - Extreme	25	V HIGH	Regular financial monitoring at Sector and CHP level. Development of savings plans to meet Board targets.	5 - Will undoubtedly recur, possibly frequently	4 - Major	20	VHIGH	12/10/2016
GCHSCP	1511	GP practices	Glasgow City HSCP may experience a local GMS practice terminating its contract, such that the HSCP will have to directly provide GMS services this may happen with relatively little notice	Richard Groden	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Developing a response "toolkit" for practices "in distress" and seeking support in terms of an initial assessment and what might be offered by way of further in depth assessment and identifying a suitable starter for ten range of responses. □ Developing an approach to pro-actively identify/support practices that might be approaching an "in distress" state, including mechanisms and possible responses	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	12/10/2016
GCHSCP	1423	Critical Failure of care	Critical failure of care leading to harm to service user (including suicide, child protection, adult support and protection)	Alex MacKenzie	3 - May recur occasionally	5 - Extreme	15	High risk	Referral process, Staff supervision, Existing policies, procedures and guidelines Inspection regimes- child protection	3 - May recur occasionally	4 - Major	12	High risk	12/10/2016
GCHSCP	1425	Clinical communications	Clinical Communications-delays or errors in clinical information being transferred between services, leading to errors in medication or failings in care or treatment of an individual	Dr Paul Ryan	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Guidelines and protocols	3 - May recur occasionally	4 - Major	12	High risk	12/10/2016
GCHSCP	1428	Prescribing costs-Financial	Prescribing costs exceeding the allocated budget threatening CHP services	Richard Groden	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Budget performance monitoring □ Prescribing monitoring, Risk sharing across CHP/CHCP , prescribing plan to identify and generate savings if required	3 - May recur occasionally	4 - Major	12	High risk	12/10/2016
GCHSCP	1429	Failure to meet Access/ Discharge Targets	Failure to meet Access/discharge targets	Lorna Dunipace	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Working group established, Links with Social work, Funding, Continue to monitor/audit delayed discharges with acute	3 - May recur occasionally	4 - Major	12	High risk	12/10/2016
GCHSCP	1431	External providers	External care providers not recognising health needs/ not seeking appropriate advice □ Impact of personalisation on staffing levels	Paul Adams	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Provider training professional specific advice medication protocols, clear transfer of information into provider care plans, monitoring via Care Commission Inspectorate □ NHS input into personalisation process More robust use of service concerns	3 - May recur occasionally	4 - Major	12	High risk	12/10/2016

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Division	ID	Title	Description	Manager	Likelihood (initial)	Consequence (initial)	Rating (initial)	Risk level (initial)	Controls in place	Likelihood (current)	Consequence (current)	Rating (current)	Risk level (current)	Review date
GCHSCP	1434	Clinical Records	Delays or errors in clinical information being transferred leading to medication errors or failings in care and treatment of an individual. Potential for complaints, litigation and adverse publicity. Sensitive personal information being inappropriately disclosed in error. This risk is evident in mental health as they move towards EMIS. Lack of consistent and documented procedure for the storage and destruction of community health records	Mari Brannigan	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Guidelines and protocols in place. Audits of practice by clinical teams. awareness of Data Protection Principles. Review in progress of current arrangements	3 - May recur occasionally	4 - Major	12	High risk	12/10/2016
GCHSCP	1435	Capital Developments - financial	Capital Developments- Insufficient revenue to cover on-going costs of projects	Alex MacKenzie	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Project governance structures in place to minimise risk Risk register within project areas identified costs associated with risk at regular intervals Risks escalated through capital governance structure On-going discussions with social work	4 - Will probably recur, but is not a persistent issue	3 - Moderate	12	High risk	12/10/2016
GCHSCP	1436	Business continuity/ Major Incidents	Business continuity Service interruption due to unavoidable incidents, damage to facilities, loss of power of IT services, staffing shortages caused by industrial action	David Walker	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Business continuity plans in place across services, with coordination via partnerships business Continuity group and Board wide Civil Contingencies Group	3 - May recur occasionally	4 - Major	12	High risk	12/10/2016
GCHSCP	1437	Prison prescribing costs	Prescribing costs in prison healthcare exceeding the allocated budget threatening CHP services Prison Population numbers rising placing increased demands on pharmacy budget	Mrs Fiona McNeill	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Budget monitoring/prescribing plan to identify and generate savings if required. NHSGGC to be included in national discussions with SPS in the management of prison population. national contract monitoring by national procurement Local scrutiny by CHP pharmacy on invoicing	3 - May recur occasionally	4 - Major	12	High risk	12/10/2016
GCHSCP	1439	Information Governance MAPPA information sharing	Sensitive or confidential information is inappropriately shared resulting in adverse media impact and loss of public confidence	Alex MacKenzie	4 - Will probably recur, but is not a persistent issue	4 - Major	16	High risk	Information sharing protocols have been developed with relevant agencies and the directorate regularly remind staff of their responsibilities	4 - Will probably recur, but is not a persistent issue	3 - Moderate	12	High risk	12/10/2016

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Division	ID	Title	Description	Manager	Likelihood (initial)	Consequence (initial)	Rating (initial)	Risk level (initial)	Controls in place	Likelihood (current)	Consequence (current)	Rating (current)	Risk level (current)	Review date
GCHSCP	1669	NMC Revalidation/ Annual fees	There is a risk if the registrant does not submit the relevant Revalidation documentation or NMC fees before their due date as their registration will automatically lapse and they will be unable to practice	Mari Brannigan	4 - Will probably recur, but is not a persistent issue	4-Major	16	High Risk	Regular updates on Revalidation awareness sessions available Information on NMC web site Standing item on staff meetings Local NMC databases. SSTS database in development which will link staff pay number to date of revalidation	3 - May recur occasionally	4 - Major	12	High risk	12/10/2016
GCHSCP	1670	Medical and Nursing cover	There is a risk that there is not enough medical and nursing cover for Sexual Assault Examinations provided by Archway and that contracted Forensic Physicians are unable to fill the gap	Rhoda MacLeod	5-Will undoubtedly recur, possibly frequently	4-Major	20	High risk	New Forensic Contract. Recent service review recommends further development of service model	4- Will probably recur, bit is not a persistent issue	4- Major	16	High risk	12/10/2016