



Integration Joint Board  
Audit and Risk Management Committee

11<sup>th</sup> September 2018

This Report relates to  
Item 8 on the Agenda

# Risk Update Report

*(Paper presented by Maureen Stevenson)*

*For Discussion and Noting*

<b>Approved for Submission by</b>	Katy Lewis
<b>Author</b>	Maureen Stevenson
<b>List of Background Papers</b>	Not applicable
<b>Appendices</b>	Appendix 1

## SECTION 1: REPORT CONTENT

**Title/Subject:** Risk Management Update  
**Meeting:** IJB Audit and Risk Management Committee  
**Date:** 11<sup>th</sup> September 2018  
**Submitted By:** Maureen Stevenson  
**Action:** For Discussion and Noting

### **1 Introduction**

1.1. This report provides an update on Risk Management Activity.

### **2 Recommendations**

**2.1. The IJB Audit and Risk Management Committee is asked to:**

- **Note progress in implementing IJB Risk Management Strategy**

### **3 Background**

3.1. The IJB Risk Management Strategy was approved by the Joint Board in July 2016.

3.2. Progress has been made in implementing the IJB Risk management Strategy, which includes:

- Promoting awareness of risk and defining responsibility for managing risk within the IJB
- Sharing of risks between partners and Development of an IJB Risk Register
- Agreement to roll out DATIX adverse event system to social services teams working on behalf of the partnership
- Establishment of IJB Audit & Risk Committee
- Implementation of Duty of Candour

### **4 Main Body of the Report**

4.1. The Patient Safety & Improvement Team continues to work with Managers across the partnership to clarify and enhance risk management governance arrangements to ensure risks are identified, shared, reviewed and managed effectively.

Governance arrangements across IJB are currently being reviewed by the Chief Officer; this will include a review of Risk Management arrangements.

#### **4.2. Health & Social Care Risk Register**

The Health & Social Care Management Team (H&SCSMT) have had a further workshop to review and refine the Risk Register to reflect more of the Strategic risks faced by the IJB. A small subset of the Management Team have reviewed and disaggregated the strategic risks held by IJB, the Partnership Risks and those held by strategic partners. The subgroup will report back to H&SCSMT at its next meeting with a view to recommending the adoption of the revised IJB Risk Register to IJB Audit and Risk Management Committee.

#### **4.3 Risk Register Module Development**

This represents a significant piece of work where additional resources will be required; a business case is being prepared for consideration by the Risk Executive Group.

#### **4.4 Risk System Development**

A plan to roll out access to all social work teams has been agreed but further testing has been delayed due to other strategic priorities. System configuration has now commenced this will be further progressed during 2018/19.

#### **4.5 Risk Training Plan**

A risk training plan has been developed and agreed by Risk Steering Group. All training will be offered to health and social care staff delivering care and services on behalf of the Partnership.

#### **4.6 Duty of Candour Implementation**

A full implementation plan has been agreed. The Patient Safety & Improvement Team, the Complaints Team and Chief Social worker are working through the implementation plan to ensure staff, systems and processes are aligned and compliant with the act.

4.7 An update report was shared with the NHS Performance Committee and is attached for information at Appendix 1 in the form of an action plan.

#### **4.8 Internal Audit Recommendations Status update**

There are two outstanding audit recommendations that relate to IJB Risk Management:

- IJB Risk Register approved and monitoring arrangements established

- Evidence that the Risk Management monitoring arrangements as set out in IJB Risk Strategy are enacted and continue to be appropriate

Work is ongoing to address both of these issues as set out under Governance Arrangements and the revision of the IJB Risk Register.

A summary of the extent IJB Risk Register is summarised in Appendix 2. Each of the risks identified have undergone a full risk assessment with controls assessed and strengthened as required.

## **5 Conclusions**

Progress is being made in implementing IJB Risk Strategy. This has been slower than anticipated due to a lack of personnel in key posts, IM&T capacity to support system development, clarity around governance arrangements and the volume of development ongoing across the system.

## **SECTION 2: COMPLIANCE WITH GOVERNANCE STANDARDS**

### **6 Resource Implications**

- 6.1. No additional resources have been identified to support IJB Risk Management Activity.

### **7 Impact on Integration Joint Board Outcomes, Priorities and Policy**

- 7.1. Managing Risk and protecting the safety of our staff, patients and communities are core to delivering the IJB Vision and the 9 national outcomes, in particular:
- People using health and social care services are free from harm
  - People who work in health and care services feel engaged with the work that they do and are supported to continuously improve the information, support, care and treatment they provide
  - Resources are used effectively and efficiently in the provision of health and care services

### **8 Legal & Risk Implications**

None identified

### **9 Consultation**

- 9.1 H&SCSMT sub group (Julie White, Maureen Stevenson, Vicky Freeman, Alice Wilson).

### **10 Equality and Human Rights Impact Assessment**

Impact Assessment not required.

### **11 Glossary**

HSCSMT	Health and Social Care Senior Management
IJB	Integration Joint Board

Duty of Candour Implementation Plan

APPENDIX 1

Issue	Action	By Who	By When	Status	Notes
Raise Awareness of Duty Of Candour	1. GM Briefing	Maureen	January	COMPLETE	
	2. HR Bulletin	Maureen	February	COMPLETE	
	3. QI Hub News	Maureen	March	COMPLETE	
	4. Board Paper	Maureen Emma M	May	COMPLETE	As per Ken's request. Board Management May, Board June (?).
	5. Core Briefing	Maureen	April	COMPLETE	<a href="#">Promote Learn Pro Module</a>
	6. All Users Email	Maureen	April	COMPLETE	<a href="#">Promote Learn Pro Module</a>  <i>Incorporated in to SAER Framework</i>
	7. Management team briefings	Maureen	April	COMPLETE	Ask managers to promote <a href="#">Learn Pro Module</a>
	8. Social Media (staff) update	Project Officers	September	In Progress	Maureen to delegate to officers
	9. Leaflet circulation	Maureen Michelle	April	COMPLETE	GMs, HSC Locality Managers, Risk and Feedback key contacts, QPLSG, Board Management
	10. Update Public Website	Emma M	June	In Progress	

Issue	Action	By Who	By When	Status	Notes
		Emma McG			
	1. Information Sessions	Emma M Emma McG	June	COMPLETE	Initial sessions complete. Awareness raising incorporated in to existing training going forward
Policy, Procedure and Process	1. Datix Update	Michaela Jean	September	In Progress	'Tick box' to be added to both the adverse events and complaints modules re DoC.
	2. Introduce daily case triage	Emma M Emma McG	April	COMPLETE	Testing has begun. Amended to 'as required' as more appropriate.
	3. Develop and introduce 'checklist' for coordinators and key contacts to aid identification of complaints, adverse events and DoC	Emma M Emma McG	December	In Progress	
	4. Review/update existing policies	Emma M Maureen Caroline S	December	In Progress	Complaints, adverse events and whistle blowing
	5. Develop DoC Policy (?)	Emma M Maureen Emma McG	December	In Progress	<a href="#">Sample policy</a> shared by SG
	6. Develop toolkit and information hub	Emma M	December	In Progress	Add all DoC info and associated

Issue	Action	By Who	By When	Status	Notes
		Emma McG			links to area on Beacon
	7. Agree reporting format, audience and frequency	Emma M Maureen Emma McG	December	In Progress	Should we include DoC performance info in an existing report or do an additional one? Who to? Frequency? How will we report to QPSLG?
Skills Development	1. Promote <a href="#">LearnPro Module</a>	Maureen Emma M Emma McG	Ongoing	COMPLETE	Initial promotion complete. Ongoing promotion will continue.
	2. Schedule Datix data entry training	Jean Michaela	December	In Progress	Improve quality of Datix records.
	3. Develop 'good apologies' toolkit and promote	Emma M	December	In Progress	Toolkit, blog and guidance links
Support System for staff	1. Embed support options in to relevant policies/procedures to ensure staff are aware of and offered relevant support.	Maureen Emma M Emma McG	December	In Progress	<i>Incorporated in to SAER Framework</i>
Support System for families	1. Embed support options in to relevant policies/procedures to ensure families are aware of and offered relevant support.	Maureen Emma M Emma McG	December	In Progress	<i>Incorporated in to SAER Framework</i>



Issue	Action	By Who	By When	Status	Notes
Adapt Current Training	1. Complaints Training	Emma M	December	In Progress	
	2. Investigation Skills Training	Emma M Emma McG	December	In Progress	
	3. Adverse Event Training	Emma McG	December	In Progress	
	4. Compassionate Connections	Karen	December	Not Started	
	5. Induction	Emma M	December	Not Started	Explore with Natalie whether can be included in updated induction
	6. Conflict Training	Emma M	December	Not Started	Liaise with Joe McGinley
Sharing Lessons Learned	1. PROJECT	Emma M Emma McG	April 2019 <i>Complete</i> <i>By</i>	In Progress	Charter to Maureen and Joan by May 2018 and work to begin shortly after

**Integration Joint Board Risk Register**

**APPENDIX 2**

<b>Risk Title / Description</b>	<b>Risk Lead / Assessor</b>	<b>Current Risk Level</b>	<b>Target Risk Level</b>
<b>Vulnerable Individuals</b> – A person dies or comes to significant harm as a result of failure to protect vulnerable individuals / support families.	Eddie Docherty / Lillian Cringles / Ken Donaldson	Possible x Major = High (12)	Unlikely x Major = Medium (8)
<b>Quality of Care</b> – Failure to assure and improve quality of care and services.	Eddie Docherty / Lillian Cringles / Ken Donaldson	Possible x Moderate = Medium (9)	Unlikely x Moderate = Medium (6)
<b>Health Inequalities</b> – Failure to address health inequalities resulting in poorer health outcomes for certain groups or parts of the population.	Valerie White	Possible x Moderate = Medium	Possible x Moderate = Medium
<b>Prevention</b> – Failure to take action on prevention and early intervention which impacts on future health and wellbeing of our population in medium to long term.	Valerie White	Possible x Moderate = Medium	Possible x Moderate = Medium
<b>Failure to establish and sustain a three yearly cycle of strategic commissioning impacting negatively on the organisations ability to transform, achieve desired outcomes or effectively engage stakeholders in planning.</b>	Vicky Freeman	Likely x Moderate = High (12)	Possible x Moderate = Medium (9)
<b>Business Continuity and Contingency Planning</b>	David Irving / Martin Ogilvie / Mark Thomson	Possible x Major = High	Rare x Major = Medium
<b>Transformation</b> – Failure to deliver transformation at a pace or scale required by the demographic and financial pressures in the system.	Julie White	Possible x Major = High	Possible x Major = High
<b>Lack of Clarity around governance arrangements (for Children’s Services)</b>	Julie White	Possible x Minor = Medium	Possible x Minor = Medium
<b>Risk that IJB fails to deliver anticipated cultural change resulting in fragmentation / disjointed service</b>	Caroline Sharp	Possible x Major = High	Unlikely x Minor = Medium
<b>Lack of availability of suitably qualified and competent staff/carers resulting in inability for partners to provide services as set out in the IJB Strategic Plan</b>	Caroline Sharp	Almost Certain x Major = Very High	Likely x Major = High
<b>Failure of the IJB to meet Financial Target</b>	Katy Lewis	Possible x Major = High (12)	Likely x Major = High
<b>Board breaches compliance with standards on Corporate Governance including risk of best value not being obtained</b>	Katy Lewis	Possible x Major = High (12)	Possible x Moderate = Medium