



To: Renfrewshire Integration Joint Board Audit, Risk and Scrutiny

Committee

On: 18 November 2022

Report by: Strategic Lead and Improvement Manager

Heading: Update on Risk Register

1. Summary

1.1. The paper provides an update on the continued implementation of the IJB's updated Risk Management Framework following the previous update to the Committee in September 2022.

1.2. This report also notes updates made to the IJB's risk and issues register, including any changes to risks/issues previously identified, and any new items added to the register during this period.

2. Recommendations

It is recommended that the IJB Audit, Risk and Scrutiny Committee:

- Note the further work which has been undertaken to implement the revised Risk Management Framework across operational services within the HSCP, including on the ongoing monitoring of the take-up of the online training module launched in August 2022 and the ongoing preparation with services for the planned internal audit of risk management arrangements (section 4); and
- Approve the updates that have been made to currently identified risks and issues, following further assessment and engagement within the HSCP and with partners (section 5).

3. Background

3.1. The IJB's risk management framework sets out the principles by which the HSCP and IJB identify and manage strategic and operational risks impacting upon the organisation. This framework forms a key strand of the IJB's overall governance mechanisms. It sets out how risks and issues should be identified, managed and reported and it informs the development of this report and supporting appendix.

4. Implementing the update framework: further activity

- 4.1. Previous updates to the Committee have outlined the progress made in implementing the IJB's revised Risk Management Framework within the HSCP. Work has continued to embed the framework within HSCP processes. The key activities which have been undertaken include:
 - Continued reviews to support the Risk Network and services to follow risk management processes, ensuring risk and issue reviews with service leadership teams occur, and also regards escalations and reporting.
 - Continued operational risk and issue reporting to SMT by exception with recovery and renewal risk reporting also continuing on a monthly basis.
 - Monitoring continues regards staff completion of the online training module launched in August.
 - Ongoing meetings of the cross HSCP and NHS GGC 'risk working group' held monthly where consistency of risks is discussed, and best practice shared.
 - Related and supporting activity focused on winter and civil contingencies
 planning to ensure that plans are developed and updated iteratively over
 coming months to proactively identify and mitigate against winter risks
 and issues (a more detailed update on the HSCP's Winter Plan will be
 considered by the IJB at its meeting on 25 November 2022).
 - Representation on, and participation in, the committee for the ALARM UK National Health and Social Care risk group, providing additional opportunity to identify and consider further examples of 'best practice'.

5. Updates to the IJB Risk Register

- 5.1. The HSCP's ongoing assessment and review of risks has identified necessary changes to existing risks and issues. In this period there has been the addition of one new risk requiring incorporation within the IJB's Risk Register, which is provided as Appendix 1 to this report. All risks and issues have been updated to reflect the latest position regards completed and outstanding actions. This paper reflects the changes made to risks since the last update to the Committee.
- 5.2. In summary, the key updates to existing risks include:
 - The risk score for 'Changing financial and demographic pressures' has been increased again this period due to the cost of living crisis and current financial status of the economy. Inflation at the time of writing continues to remain high, with forecasts predicting that it will remain high for the foreseeable future (RSK01).
 - In addition, linked to RSK01, the risk register has been updated to reflect the work the HSCP is participating in to support the work of the Fairer Renfrewshire Committee and to deliver the Winter Connections programme, recognising the relationship between the cost of living crisis and changes in physical and mental health inequalities (RSK03).
 - The risk score for 'Financial challenges causing financial instability for the IJB' has also increased again in this period to reflect the continued

- financial pressures faced by the partnership and the sector as a whole (RSK02).
- The risk 'Further waves of COVID' has remains in the report and log for ongoing monitoring to reflect the Committee's decision in March. However, the likelihood and impact of the risk was reduced in June and this will continue to be monitored. This position also recognises that IJB governance and operational management arrangements are well equipped with significant experience in managing the impact of COVID waves within the IJB, HSCP and partner organisations. The largest remaining aspect of this risk relates to staffing levels and workforce resilience which is incorporated within other risks and issues. (RSK05).
- The risk 'Failure or loss of major service provider' risk rating has been increased to reflect the current financial position and resource challenges for providers in Renfrewshire. In relation to the updated, reduced, provision of COVID sustainability payments, the Scottish Government has stated that a 'Cost improvement programme' will be implemented to help mitigate against expected impacts however this has not yet been published. This risk will also be exacerbated by the impacts of increasing payroll, energy and commodity costs, and inflation. Since the last report, instances of providers flagging sustainability concerns have occurred and the HSCP continues to engage closely with local providers (RSK10).
- The risk rating for 'Compliance with essential training' has been increased this period and the risk description and mitigations updated to reflect the evolution of this risk. At the time this risk was recorded it was primarily focused on the Covid-19 impact on the partnership's ability to ensure staff training was up to date. As services are now focused on recovery this risk remains due to high service demand and staffing levels constraining our ability to complete the required training. In addition, as noted in previous reports to the Committee, differences in recording systems between employing partner organisations have caused challenges in monitoring comparative compliance (RSK15).
- We have added one new 'moderate' risk regards the impact of potential power outages on our critical services. As widely reported in the media through October there is a risk that through the winter period 2022/23 some planned and unplanned power disruption may be experienced. The HSCP has undertaken considerable planning to develop mitigating plans to support a response in these circumstances and continued support to services users/patients across the HSCP's services. These plans continue to be iteratively developed with partners (RSK18).

Implications of the Report

- 1. Financial No direct implications from this report*
- 2. HR & Organisational Development Further guidance and training has been developed for staff to support them in understanding their contribution to risk management and rolled out from July 2022.
- 3. Community Planning No direct implications from this report*

- **4. Legal** Supports the implementation of the provisions of the Public Bodies (Joint Working) (Scotland) Act 2014.
- 5. **Property/Assets** No direct implications from this report*
- **6. Information Technology** No direct implications from this report*
- 7. Equality and Human Rights No direct implications from this report*
- 8. **Health & Safety –** No direct implications from this report*
- 9. **Procurement** No direct implications from this report*
- **10. Risk** This paper and attachments provide an update to the IJB's Risk Management Framework.
- 11. **Privacy Impact** No direct implications from this report*

*Although there are no direct implications from this report, specific risks are likely to impact on these areas and will have specific mitigations identified.

List of Background Papers – N/A

Author: David Fogg, Strategic Lead & Improvement Manager

Any enquiries regarding this paper should be directed to David Fogg, Strategic Lead and Improvement Manager (david.fogg@renfrewshire.gov.uk)

Risk and Issue Register Executive Summary

Appendix 1

This document reflects the status of the risks and issues in the IJB log at the end of October 2022. This report also features issues as part of the agreed risk framework approach. The summaries reflect the changes to risks since the last report and items which have been identified as new or those proposed to close since the last report. For any proposed closures we have included summaries to detail the final position and the rationale for closure. If these are agreeable, they will be removed from the next report.

Introduction and Background

This document is prepared in advance of each IJB Audit, Risk and Scrutiny Committee meeting to support Renfrewshire Integration Joint Board (IJB), and members of the IJB's Audit, Risk and Scrutiny Committee, in the application of the IJB's Risk Management Policy and Strategy. It sets out those Strategic Risks and Issues currently identified which have the potential to prevent the IJB from achieving its desired outcomes and objectives, and the mitigating actions put in place to manage these risks. Further information on the IJB's approach can be found in Renfrewshire IJB's Risk Management Policy and Strategy.

Approach to assessing risks

All risks identified are assessed considering (i) the likelihood of the risk materialising; and (ii) the consequent impact of said risk should it materialise. To reflect the range of eventualities this assessment provides a score of between 1 and 5 for each of these criteria (where 1 is least likely and low impact, and 5 is very likely and very high impact). This enables each risk to have an overall score where the likelihood and impact ratings are multiplied together, and a RAG (Red, Amber, Green rating applied) as per the matrix below. Risk scores guide the IJB's response to risks identified.

Approach to assessing issues

The same applies regards impact, however for issues, the priority and the resolution is considered instead of likelihood. Issues are simply risks which have occurred and they have a rating of between 1 and 5 where 1 is low/no impact ranging to 5 extreme impacts.

Risks

Likelihood	Risk Consequence Impact Rating					
	1	2	3	4	5	
5	5	10	15	20	25	
4	4	8	12	16	20	
3	3	6	9	12	15	
2	2	4	6	8	10	
1	1	2	3	4	5	

Issues

Impact	Issue Rating
1	Insignificant
2	Minor
3	Moderate
4	Major
5	Extreme

Risk Profile

Total	High	Moderate	Low	Very Low	Proposed
Risks	Risks	Risks	Risks	Risks	Closure
15	8	5	2	0	

Likelihood	Consequence Impact						
Likelinood	1	2	3	4	5		
	5	10	15	20	25		
5				2	5		
	4	8	12	16	20		
4				2	1		
	3	6	9	12	15		
3			2	1	2		
	2	4	6	8	10		
2							
	1	2	3	4	5		
1							

Issue Profile

Total Issues	1
Extreme Issues	1
Major Issues	
Moderate Issues	
Minor Issues	
Insignificant Issues	

Renfrewshire IJB Risk and Issue Register Audit, Risk and Scrutiny Committee 18 November 2022

Risk or Issue Ref	Risk or Issue Type	Summary Description	Current Risk / Issue Score and ROYG Rating	Risk or Issue Movement
RSK01	Strategic	Changing financial and demographic pressures	25 High	Increase
RSK02	Financial	Financial Challenges causing financial instability for the IJB	25 High	Increase
RSK03	Operational	Increase in physical and mental health inequalities	16 Moderate	No Change
RSK05	Operational	Further waves of COVID	09 Low	Monitor
RSK06	Operational	National Care Service	25 High	No Change
RSK07	Operational	Workforce planning and service provision	25 High	No Change
RSK09	Strategic	National risk of litigation and reputational damage following future public inquiry into COVID response	15 Moderate	No Change
RSK10	Operational	Failure or loss of major service provider	25 High	Increase
RSK11	Clinical	Delivery of the GP Contract / Primary Care Improvement Plan	20 High	No Change
RSK12	Strategic	Failure to achieve targets and key performance indicators	09 Low	No Change
RSK13	Strategic	Cyber threats pose an increasing risk	20 High	No Change
RSK14	Strategic	Capital funding and complexities of property planning in an integrated setting	20 High	No Change
RSK15	Operational	Compliance with Essential Training	16 Moderate	Increase
RSK16	Strategic	Delivery of Addictions Support in Renfrewshire	12 Moderate	No Change
RSK18	Operational	Impact of potential power outages on critical services	15 Moderate	New
ISS01	Operational	Issues regards attracting & retaining staff	05 Extreme	No Change

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Move	ement if applicable
		There is a risk that if financial and demographic pressures of services are not effectively planned for and managed over the medium to longer term, there would be an impact on the ability of the HSCP to deliver services to	Increase	Increasing financial pressures and cost of living crisis	
		the most vulnerable people in Renfrewshire.	Risk Code	Category	Risk Management Approach
The changing financial and demographic pressures facing services poses a risk to the HSCP being able to successfully deliver services to the most vulnerable people in Renfrewshire.		This needs to be considered with regards to: Medium- and longer-term financial planning	RSK01	Strategic	Treat
	HSCP SMT	Corporate and service review activities Strategic commissioning approach and the strategic planning process Service design ensuring the development of cost-effective care models and models which encourage prevention and self-management	Current Likelihood	Current Impact	Current Evaluation
		 Increasing costs such as utilities, salaries, and supplies are also having an impact on budgets across the HSCP and our partners. 	05	05	25High
		Partners and providers are now seeking to manage additional costs faced which may lead to an increase in our costs and further budget constraints.	Previous Likelihood	Previous Impact	Previous Evaluation
		 Increasing impacts of cost-of-living crisis on some demographics has the potential to increase service demands and levels of need. Inflation remains high, and the overall financial outlook beyond this year remains uncertain and challenging. 	04	05	20 High
	Mitigating / Preve	enting Actions Complete or Ongoing	Assigned to	Date	Status
	lanning ses place and regularly c Plan 2022-25 and		HSCP Senior Management Team	Review Jan 2023	Subject to ongoing review
Corporate & service review activiti	es				
Investment in service re-design opp Eligibility criteria reviewed Ongoing focus on recovery from the	'	efficiency and effectiveness ic and assessment of transformational opportunities to reshape services			
	Mitigating	/ Preventing Actions Planned	Assigned to	Date	Status
Ongoing deployment of the above			N/A	N/A	N/A

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Moven	nent if applicable
		There are a number of aspects contributing to this risk as follows: 1. Service Areas individually, or in combination, experience expenditure levels which exceed	Increase	Continued increases in costs contributes to the increased rating of this risk.	
There are a number of	nber of	funding allocations negatively impacting on the overall financial position of the partnership due to: a) Pay growth (inflation, annual pay award proposals)	Risk Code	Category	Risk Management
inancial challenges		b) Prescribing c) Sickness & Absence cover	RSK02	Financial	Treat
acing the IJB nd if not		d) Community equipment expenditure e) Impact arising from Resource Allocation Model f) Financial impact of any clinical failures	Current Likelihood	Current Impact	Current Evaluation
adequately addressed, hese could	HSCP SMT	g) Compliance with new statutory requirements h) Increased service demand	05 Previous	05 Previous Impact	25 High Previous
affect the financial sustainability of the partnership with consequent	11001 0	 i) Increased supply chain costs due to Brexit, Ukraine and COVID impacts j) Additional costs incurred as a result of COVID-19 k) Challenging financial outlook for IJB l) Significant levels of non-recurring funding does not support longer term sustainability of services 	Likelihood 04	05	Evaluation 20 High
mpact to service delivery.	npact to service	 m) Additional uplifts requested arising from external providers 2. The requirement for savings to be delivered as part of the medium-term financial plan could have an impact on the delivery of existing front-line services. The need for savings has been confirmed and a range of options are being progressed for consideration. These are expected to be submitted to the IJB for review and approval in March 2023 			
		Mitigating / Preventing Actions Complete or Ongoing	Assigned to	Date	Status
Medium Term Fir Reporting/monito Financial informa Financial perform Finance and Reson Regular meetings Ongoing discussi	ement frameworery and Renewa 122-2025 approving at Strategition is reported nance meetings urces. It of Medicines Me	k implemented. I activity. red by IJB March 2022 and Strategic Delivery Plan in June 2022 2022-2025 approved by IJB March 2022 ic fora: regularly to the Integration Joint Board and the Senior Management Team. in place with HSCP Chief Officer, Chief Finance Officer, NHS Director of Finance and Council Director of Management Group with a focus on prescribing year end out-turn. on importance of prescribing financial break even. evernment on COVID-19 expenditure and discussions on cost recovery. budget setting procedures including regular budget monitoring with budget holders.	HSCP Senior Management Team	Historic	Ongoing
 Robust financial r Prudent use of or Savings program Savings for FY21 Tier One savings 	me /22 agreed at IJ identified and a	JB March 21 fully delivered by year end (circa £1.135M) Igreed by IJB for delivery FY22/23 (circa £360k)			
Robust financial r Prudent use of ou Savings program Savings for FY21 Tier One savings	me /22 agreed at IJ identified and a) B March 21 fully delivered by year end (circa £1.135M)	Assigned to	Date	Status

	Risk Owner Risk Description	Risk Description	Movement	Reason for Move	ement if applicable
	It is recognised that physical and mental health	It is recognised that physical and mental health inequalities are highly likely to increase. This may result	No Change	N/A	
		from long-term conditions, an ageing population, long term impacts of COVID on mental health and Long	Risk Code	Category	Risk Managemen Approach
nere are a risk that physical and mental health equalities increase, meaning that service users and patients present with higher levels of need, wer levels of resilience and fewer opportunities	Head of Strategic	COVID itself, increasing poverty due to the cost-of-living crisis, increased deprivation or individual risk-taking	RSK03	Operational	Treat
	Planning & Health Improvement	behaviours resulting in a population with higher levels of need, lower levels of resilience and fewer opportunities to participate fully in their communities.	Current Likelihood	Current Impact	Current Evaluatio
o participate fully in their communities.		to paradipate rany in their communities.	04	04	16 Moderate
		This must be actively considered with regards to the creation of any Health Improvement plans and	Previous Likelihood	Previous Impact	Previous Evaluation
	Partnership working agreements.	04	04	16 Moderate	
Mitigating /	Preventing Actions C	omplete or Ongoing	Assigned to	Date	Status
maintain a focus on this aspect are in place role appointed in Jan 22 to focus solely of In addition, following a review of our strate Renewal activity; delivery of a community	ce, including the commun n equalities. egic plan priorities a nui	a range of HSCP initiatives. A number of teams which unity link and health improvement teams. There is a new mber of activities are underway within our Recovery and and wellbeing with targeted approaches to raise	Strategic Planning		
 continues to monitor population data and Funding was secured for 2021/22 to deliv and wellbeing. Inclusion of health, wellbeing, and inequal 	trends. The projects which are all lities within developmer Health & Wellbeing fund (Note that the project of t	d - £500k allocated to Engage Renfrewshire to allocate to May 2022). qualities projects; befriending.	& Health Improvement	Historic	Complete

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Moveme	nt if applicable	
There is a risk that further waves of COVID could have significant impacts on HSCP operational arrangements,	Chief Officer	The risk is that further disruption to the delivery of strategic and transformation plans, in addition to operational day to day commitments because of: • The HSCP needing to implement support measures to prevent the spread of COVID-19 • The impact of COVID-19 on services users and demand on services: (a) Provision of additional COVID services (b) Provider sustainability payments (c) Uncertainty over length of pandemic and additional funding available		Agreed at March IJB to reduce likelihood as appropriate and monitor as a lower scored risk as mitigating actions for other linked risks are managing the expected impact. Rationale is that IJB Governance and operational response arrangements are well tested and embedded. Other aspects of the risk regarding staffing impact, further outbreaks, and failure to deliver upon strategic and operational plans are covered by other risks and issues.		
particularly staffing, service provision, and		(d) Increased levels of care required due to long covid and increased mental health issues	Risk Code	Category	Risk Management Approach	
overarching IJB governance.		(e) The impact on staff; sickness, mental health, and utilisation to support services	RSK05 Current Likelihood	Operational Current Impact	Treat Current Evaluation	
		Impact of increasing levels of demand and client expectations	03	03	09 Low	
	 The suitability, affordability, and stakeholder support to achieve the NHS remobilisation plan, Renfrewshire Council's recovery plans and ultimately the HSCP's overall plan. 	Previous Likelihood	Previous Impact	Previous Evaluation		
		11001 3 Overall plan.	03	03	09 Low	
	Mit	igating / Preventing Actions Complete or Ongoing	Assigned to	Date	Status	
 Meetings will contain that will enable The risk manage flexibility neede Public health m 	Intinue to be con all members to p ement framewor d regards risk to	k and policy has been updated to reflect on learnings from COVID and provide the erance required within a pandemic. This is in the process of being rolled out. en implemented; including vaccinations in 2020/2021 and current planning for	N/A	Historic	Ongoing	
		Mitigating / Preventing Actions Planned	Assigned to	Date	Status	
If required in the revisited if deenDelivery of Recognidance adjust	future additionated appropriate. overy Plans, included locally acros	ID risks across services, with escalation measures implemented as necessary all meetings of the IJB can take place and / or delegations to the Chief Officer can be used to the UJB Remobilisation Plan as services in alignment with National Guidance. The necessary staffing response to manage increased levels of staff absence.	Chief Officer	December 2022	Ongoing	

Risk Statement	Risk Owner	Risk Owner Risk Description		Reason for Movement if applicable	
		The published analysis of NCS consultation responses	No Change	N/A	
		showed support for the wide-ranging proposals made and the implementation of these is therefore likely to place significant demands on HSCP resources to deliver, alongside the delivery of ongoing operational and	Risk Code	Category	Risk Management Approach
		strategic plans. The Scottish Government have now published a high-level Bill to enable creation of the NCS.	RSK06	Operational	Treat
There is a risk that the creation of a National Care Service results in potentially significant structural, organisational and governance change which	Chief Officer	This lacks detail but is expected to have significant impact on IJB role and governance through creation of Local Care Boards. Further impacts on staffing, finance, property, and technology will also occur.	Current Likelihood	Current Impact	Current Evaluation
could be challenging to resource alongside operational commitments.	A series of NCS bill Q&A sessions have been held and these have highlighted a commitment that the NCS will be shaped via Co-Design, but also that there are a significant number of questions which cannot be answered at the current stage of the process. The level of risk therefore remains high.		05	05	25 High
		Previous Likelihood	Previous Impact	Previous Evaluation	
			05	05	25 High
Mitigating / Preventing Actions Complete or Ongoing				Date	Status
 There are likely to be recommendations which are phased for delivery over the term of this Parliament, to enable some prioritisation of resource. The HSCP has a Change and Improvement team that can be directed to key areas of activity requiring delivery. Continued review of the progress of recommendations progressing through parliament to assess potential resource and plan implications. Implementation of Strategic Plan to consider the need for flexibility in delivery. 			Chief Officer	Historic	Ongoing
IJB response submitted to Scottish Government consultation on proposals for National Care Service. Mitigating / Preventing Actions Planned			Assigned to	Date	Status
 Scottish Government consultation results have been shared and these have been reviewed and discussed across the HSCP to understand the impacts. Draft Bill published by the Scottish Government and engagement sessions currently underway. Review of all published resources and attendance at all NCS briefings and seminars continues to ensure understanding of the breadth of change and any preparation actions that can be undertaken. 			Chief Officer	End December 2022	Ongoing

Risk Statement	Risk Owner	Risk Description	Movement	ovement Reason for Movemen	
		A flexible, skilled, and suitably certified workforce is essential to service provision and delivery of the IJB's strategic plan. Workforce risks can result in increased financial costs and include: • Prolonged vacancies within services. Specific pressures exist around medical	No Change		NA
There is a risk that a range of factors may impact on the ability to fully			Risk Code	Category	Risk Management Approach
nplement workforce plans nd could lead to longer	staffing (specific roles are in national shortage), District Nursing and Care at Home services	RSK07	Operational	Treat	
erm workforce difficulties, shortages in some skill sets, therefore potential		 Sufficient numbers of qualified staff with the correct registrations Pressures resulting from additional planning structures which require managerial and clinical input. 	Current Likelihood	Current Impact	Current Evaluation
mpact on service delivery and the IJB's ability to deliver upon the strategic	HSCP SMT	 GP practice handing back their contract and the HSCP having to run the practice High levels of fatigue and unused annual leave from COVID resulting in increased absence 	05	05	25 High
olan. Please also see Issue		 Additional risks to meeting service demand posed by sickness/absence levels and an ageing workforce leading to increased levels of future retirements. Vacancies or absence within providers, and or providers making decisions to hand 	Previous Likelihood	Previous Impact	Previous Evaluation
SS01: Issues attracting and retaining staff		 back care agreements or not accept new packages/residents. Timely access to the correct tools and accommodation for staff; laptops, mobiles, systems access, uniform, and sufficient space for services to undertake their roles. Utilisation of non-recurring funding for roles does not make the roles attractive due to their temporary nature. 	05	05	25 High
	Mitig	ating / Preventing Actions Complete or Ongoing	Assigned to	Date	Status
practice and daily/weekl staffing dashboard to me HR & Recruitment – vac absence management prevalidation and adherent two job fairs to attract st Business Continuity – w Staffing review undertak Winter funding – specific Independent Contractor delivery of the Primary C Focused Development s	y reviews of sen- onitor staffing leviancy risk assessing esses, regula- need to application affiliand service in inter planning alten to understand group establish is — collaborative care Improvements as in the collaborative ession held with	sment undertaken, reduced timescales from request to advert, robust application of ar review / refresh of statutory and essential training and professional registration / n checklists (e.g., disclosure); process for monitoring clinical references. Completion of neetings established to manage recruitment and retention issues collaboratively. Ignment with ongoing business continuity and risk management to identify issues early. It is staff willingness to volunteer and deploy in other services should the need arise. It is track the progress regards spend / recruitment of additional and new roles. It working with Primary Care and cluster support for GP practices / services, through	N/A	Historic	Ongoing
		Mitigating / Preventing Actions Planned	Assigned to	Date	Status
 Integrated workforce pla 	n for 2022 to 25	was submitted to SG in draft at the end of July and will be submitted to the IJB for final	Head of SP&HI	December 2022	Ongoing

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Move	ement if applicable
		No Change	•	Awaiting the conclusion of the Scottish enquiry	
There is a national risk of litigation and reputational		health and social care nationally and facing all integrated health and social care service providers, as a result of the UK-wide public inquiry into the handling of the COVID pandemic. The Scottish Government	Risk Code	Category	Risk Management Approach
lamage across integrated health and social care services bllowing the UK-wide public		has also committed to completing an inquiry in Scotland and the terms of reference for this was updated on 9 June. There continues to be	RSK09	Strategic	Treat
enquiry into the handling of the COVID pandemic, commencing	nto the handling of the andemic, commencing HSCP SMT significant media interest nationally, following the recent resignation of the enquiry chair.	Current Likelihood	Current Impact	Current Evaluation	
n 2022. We are not aware of any increased comparative risk		There is no evidence that this risk is any higher for Renfrewshire than for any other integrated health and social care service. Previous Likelihood	03	05	15 Moderate
n Renfrewshire.				Previous Impact	Previous Evaluation
		03	05	15 Moderate	
	Mitigating / Prevent	ng Actions Complete or Ongoing	Assigned to	Date	Status
 Implementation of Local Response Management Team and Recovery and Renewal governance during pandemic, and ongoing input into NHS GGC and Renfrewshire Council governance. Vaccination programme rolled out across Renfrewshire; in alignment with National Vaccination guidance; all staff and care home residents have been offered the vaccine and a third vaccination/booster. Programme also performing well for residents and service users. Commissioning Teams & Community Services are supporting care homes to ensure that they remain open for admission and are prepared for the care of patients with possible or confirmed COVID-19. Significant support also being provided by Public Health, Infection Control and Procurement. Testing of all residents and staff in care homes implemented and regularly re visited. Testing of all staff implemented as per National Guidance Daily huddles and multi-agency assurance and support for Care Homes in place. Clinical support and leadership through general practice and district nursing. Local proactive support arrangements for infection control, training, practice, supervision and for implementing social distancing and other measures such as reduced or no visiting policies. PPE arrangements established and monitored locally Dashboards and reports developed to allow identification of any COVID 'hotspots' and trends Regular reporting from Renfrewshire Council, NHS GGC and Renfrewshire HSCP to Scottish Government. 				Review Dec 2022	Ongoing
		reventing Actions Planned	Assigned to	Date	Status
Continuation of the above and servi pdated in June 2022. The enguiry	-	odated Scottish Government framework published in February and	N/A	N/A	N/A

Risk Statement	Risk Owner	Risk Description	Movement	ovement Reason for Movement	
		The context of this risk is with regards to the failure or reduced quality of provision by independent providers of care homes, care services, mental health provision or GP practices. There is financial instability within the sector due to COVID-19, the cost-of-	Increase	Continued pressures and approaches regard sustainability of providers	
here is a risk that we may		living crisis, and additional impacts from Brexit.	Risk Code	Category	Risk Managemen
xperience failure, loss, or reduced uality (either permanent or		In October 21, independent contractors were to this risk as we are starting to see pressure build within this area. For example, some providers have confirmed they are	RSK10	Operational	Treat
emporary loss) of a major service provider, which may impact on our capacity to deliver services, protect	HSCP SMT	unable to take new commitments, cancelled all current outreach and or reduced other commitments.	Current Likelihood	Current Impact	Current Evaluation
ulnerable children and adults, and nay impact on additional costs to	11001 01111	In February 22, a practice was managed as a 2c practice prior to its closure, after which	05	05	2 High
cover key services.		patients were migrated to other local practices.	Previous Likelihood	Previous Impact	Previous Evaluation
	In recent months some providers have notified the HSCP of the financial challenges they are now facing in trying to cover rising supply chain and operational costs. This is resulting some providers considering the return of existing hours of service provision to the HSCP.	04	05	20 High	
	Mitigating	/ Preventing Actions Complete or Ongoing	Assigned to	Date	Status
Purchasing patterns monitored by Programme of reviews of all servi Contract compliance, performanc Support arrangements	endent contractors r Finance Team ar ce providers. e monitoring and r e continued until th	eviews for service providers and the two hospices ne end of June 22, with the Social Care Staff fund extended to September 2022 and led until end March 2023.			
 Main providers registered and mo contingency arrangements relatin also included in discussions. Providers have also been directed links to their supply chains and er Enhanced governance arrangemersponse to COVID-19. These are daily huddles and assurance visits. Emergency legislation enacted to The options for managing disrupting also included. 	g to providers facility to the National and suring robust busing the state of the National and suring robust busing the National American State of the Nati	spectorate, with reports accessible for review. Participation in local and national ng financial uncertainty to ensure minimal impact on local service users. Care Inspectorate and Scottish Government guidance which outlines these various actions including ensuring iness continuity arrangements are in place. In shave been implemented across Health Boards at the direction of the Cabinet Secretary in significantly increased monitoring of commissioned services and include multi-disciplinary lards and local authorities to step in to manage failing care homes during the COVID-19. In shave been documented and clear processes discussed and established should any un as a 2c practice by the HSCP, this subsequently closed in March 2022 with patients	NA	Review Dec 2022	Ongoing
 Main providers registered and mo contingency arrangements relatin also included in discussions. Providers have also been directed links to their supply chains and er Enhanced governance arrangemeresponse to COVID-19. These are daily huddles and assurance visits. Emergency legislation enacted to The options for managing disruptisituation arise. As at Feb 22 we have 	g to providers facility of to the National ansuring robust busing the form of the National ansuring robust busing the National American generate health Board on to GP practices and one practice ruses.	In grinancial uncertainty to ensure minimal impact on local service users. Care Inspectorate and Scottish Government guidance which outlines these various actions including ensuring iness continuity arrangements are in place. It is have been implemented across Health Boards at the direction of the Cabinet Secretary in significantly increased monitoring of commissioned services and include multi-disciplinary ards and local authorities to step in to manage failing care homes during the COVID-19. In the shape been documented and clear processes discussed and established should any	NA Assigned to	Review Dec 2022 Date	Ongoing

Risk Statement	Sk Statement Risk Owner Risk Description		Movement	Reason for Mov	ement if applicable
		Current proposed funding will not cover the full cost implementation of the contract.	No Change		N/A
There is a risk that the HSCP will not		Staffing remains under pressure due to retention challenges and turnover of staff.	Risk Code	Category	Risk Management Approach
oe able to deliver services as outlined within the	Clinical Director	Initial scope included 6 MOU areas. There is now greater priority on 3 of these: pharmacotherapy, VTP and CTAC which need to be delivered by 2022/23. The remaining 3 require to be delivered by	RSK11	Clinical	Treat
GP Contract / PCIP by the required timelines, due to the scale of work required, workforce availability and allocated funding.	and	2023/24. In order to be able to deliver the GP Contract additional property accommodation is required for treatment rooms / pharmacy hubs and also to support the growth in the sizes of the teams created for the purpose of multi-disciplinary service delivery.	Current Likelihood	Current Impact	Current Evaluation
	Chief Officer The financial implications of non-delivery of practices to treatment rooms, pharmacotherapy and VTP by March 23 remain unknown.	05	04	20 High	
		Within the Primary Care Improvement Fund: Annual Funding Letter 2022-23 (11 August 2022) the Scottish Government advised that HSCPs PCIP reserves should be utilised in year prior to pulling down 2022/23 allocations. 2022-23 allocations are therefore inclusive of reserves. This will have		Previous Impact	Previous Evaluation
		implications where improvement works, and additional Multi-Disciplinary Team actions were earmarked against these reserves. Discussions with the Scottish Government are ongoing.	05	04	20 High
		Mitigating / Preventing Actions Complete or Ongoing	Assigned to	Date	Status
 Clinical Direct Regular repor government to Property audit has supported Issue regardir Board and als Additional fun Care Improve We have now Responsibility 	or providing ting to the S to look at the has identified feasibility sugar funding a sugar funding a sugar funding of £550 ments. This delivered 14 for vaccinar	support and guidance to GP services reporting challenges in recruitment and capacity scottish Government regards progress and to inform National direction. Deep dives are planned with the needs within some of the key MOU areas. ed suitable space to accommodate teams and services; treatment rooms and pharmacotherapy which studies regards delivery of service. vailable to support delivery of the GP Contract / PCIP has been escalated to the NHS GGC Primary Care of the secured in a Scottish Government bid as part of 'Winter Funding' which will help to fund the Primary is recurring funding. 8 practices out of 28 into treatment rooms. tions that were previously delivered in GP practices have now transferred from GPs to the HSCP, this redelivery under the contract by March 2022.	Clinical Director	Review end Dec 2022	Ongoing
		Mitigating / Preventing Actions Planned	Assigned to	Date	Status
	th the above	e			

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Mover	ement if applicable	
There is a risk that failure to deliver upon the required Strategic Plan targets and		This risk is fourfold: • The IJB and HSCP's ability to define appropriate local strategic plan • The IJB and HSCP's ability to deliver upon said strategic plan • The IJB and HSCP's ability to evidence that we have achieved the	No change	Strong alignment between our strategic medium term financial and workforce plan National policy changes pose a risk bu mitigated by annual review of strategic pl. However, related financial and workforc impacts remain which may impact on deliv		
standards, and other key performance indicators.		 The bB and ASCF's ability to evidence that we have achieved the outcomes required within the strategic plan. There is also a risk that the dependencies between our strategic plan and 	Risk Code	Category	Risk Manageme Approach	
could result in a	HSCP SMT	national planning, and partner strategies are not aligned.	RSK12	Strategic	Treat	
decreased level of service for patients and service users.		 The dependencies between the delivery of targets and wider risks relating to financial and workforce challenges (Risks 1, 2 7 and Issue 1) 	Current Likelihood	Current Impact	Current Evaluati	
			03	03	09 Low	
			Previous Likelihood	Previous Impact	Previous Evaluation	
			03	03	09 Low	
	Mitigating	/ Preventing Actions Complete or Ongoing	Assigned to	Date	Status	
to support monitorin Organisational Perfe National, NHSGGC Regular review of ke Review of systems planning. Needs Assessment Review of integratio Undertaking equalit Ongoing budget mo Staffing resources a Quality care and pre Ongoing work devel Ongoing maintenan	g and planning. promance Reviews w Ministerial Steering ey performance indi- used to record, extra carried out n scheme in line wit y impact assessmer nitoring and manag- ure flexed to meet professional governan- oping a culture of p ce of performance re- etween our strategic		SMT	Review Oct 2022	Ongoing	
There remains a risk						
Strong alignment be	igate against this ris Mit		Assigned to	Date	Status	

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Move	ement if applicable	
			No Change	N	/A	
		Cyber threats are a dynamic and growing threat to the HSCP and our partner organisations; NHS GGC and Renfrewshire Council. Until recently, much of the focus of such threats was the theft of financial data, not personal or	Risk Code	Category	Risk Management Approach	
Cyber threats are an increasing risk to the HSCP and our	patient/service user information. However, there is now a growing risk that we will be targeted in order to disrupt a key component of critical national or local	patient/service user information. However, there is now a growing risk that we will be targeted in order to disrupt a key component of critical national or local infrastructure. This risk has heightened during the COVID-19 pandemic as we	RSK13	Strategic	Treat via Partners (Transfer)	
respective partner organisations and there is a risk that either partner could be targeted to disrupt key infrastructure.	of eHealth	have seen a 40% increase in attempts. As the HSCP's ICT infrastructure is provided by NHS GGC and Renfrewshire Council, the responsibility for addressing this risk site with our portract against this play and the site with our portract against the provided by the site with our portract against the provided by the site with our portract against the provided by the site with our portract against the provided by the site with our portract against the provided by the site with	Current Likelihood	Current Impact	Current Evaluation	
	Council - Head of IT addressing this risk sits with our partner organisations however shall be maintained in this log for monitoring. Since the last report the HSCP has been focusing our Business Continuity Review on how the Partnership would operate in the event of a data or systems breach.	05	04	20 High		
		Previous Likelihood	Previous Impact	Previous Evaluation		
			05	04	20 High	
	Mitigating	/ Preventing Actions Complete or Ongoing	Assigned to	Date	Status	
organisation. Renfrewshire Coun comms to staff regawide phishing scam NHS GGC operates Both NHS GGC and structures to monito The eHealth Directo Further implementa	cil have recently (Q2 arding security of dat at the state to raise awarents a multi layered secut Renfrewshire Court and manage risks. Orate and Renfrewsh	elevant GDPR and Information Security policies for their employment and Q4 2021) reinforced their Information Security Policy and released several a and data protection generally. The Council have also conducted a Council- less of the practice and inform lessons learned. urity model to defend against cyber threat. noil maintain appropriate information governance controls and governance ire Council continue to build upon cyber defences with controls in place. over security prevention in alignment with National guidance by both partner kraine risk.	NHS - Director of eHealth Council – Head of IT	Historic	Ongoing	
o.gamoanono m ng.		gating / Preventing Actions Planned	Assigned to	Date	Status	
	above	nd Council regards the availability of key systems and data in the event of a cyber	NA	Review Dec 2022	Ongoing	

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Move	ement if applicable
			No Change		NA
		There is a risk that limited capital funding, and the complexities of coordinating a property strategy	Risk Code	Category	Risk Managemen Approach
There is a risk that limited capital funding and the complexities of co-ordinating relevant property strategies and planning between partner organisations could create additional challenges in delivering the IJB's strategic plan in the medium- to long-term.		consistently across both NHS and Council properties, could create additional challenges in delivering the IJB's strategic aims in the medium to	RSK14	Strategic	Treat via Partners (Transfer)
	Chief Officer and CFO		Current Likelihood	Current Impact	Current Evaluatio
			04	05	20 High
		I 17 17 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Previous Likelihood	Previous Impact	Previous Evaluation
			04	05	20 High
Mitigating /	Preventing Actions Co	mplete or Ongoing	Assigned to	Date	Status
 Property Strategy workstream established within the HSCP to gather key data to understand the current position across all our services including the challenges faced. Working directly with Renfrewshire Council to determine staff workplace requirements and NHS Estates team regards the property actions required. Primary Care Property Strategy submitted to IJB 25 June 2021. A property data gathering exercise completed to support the determination of property priorities. Funding secured for a 2-year temporary property manager in Q3 2021, post started in December 2021. Refreshed HSCP Property Strategy Group commenced 11th May 2022. 				Review Dec 2022	Ongoing
 Ongoing attendance at the NHS Board/HSCP Capital Planning Group, last meeting 7th September 2022. Mitigating / Preventing Actions Planned 			Assigned to	Date	Status
Refreshed assessment of service and team needs as HSCP transitions in line with Scottish Government Strategic Framework				Review Dec 2022	Ongoing

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Mov	vement if applicable	
There is a risk that the pressures on staffing caused		Staff within the HSCP are required to undertake a range of essential training as part of their duties and responsibilities.	Increase		isk has been reviewed ar anded.	
by service demands and workforce constraints following the pandemic, and		Initially when recorded this risk was in relation to the pressures introduced by the pandemic, however it has now been updated to reflect:	Risk Code	Category	Risk Management Approach	
differences in reporting systems, will impact on the imeous completion of and	SMT	Recruitment and retention issues and the subsequent increased demands on staff which make it very challenging for appropriate	RSK15	Operational	Treat with Partners (Transfer)	
occurate reporting of nandatory training. This		time to be allocated to undertake training; and	Current Likelihood	Current Impact	Current Evaluation	
ould impact on the		2. Differences in our reporting systems which can make recording	04	04	16 Moderate	
rovision of a safe working nvironment for staff and		and comparison between employing organisations difficult	Previous Likelihood	Previous Impact	Previous Evaluation	
atients / service users.			03	04	12 Moderate	
	Mitigating	/ Preventing Actions Complete or Ongoing	Assigned to	Date	Status	
single view. This will ena Collaborative working bet that the partnership corre Recording of incidents, in basis prior to them being Workforce planning activi Completion of individual r	underway to p ble trends and ween the NHS ctly applies the cluding violen reviewed via the ty will reinforce isk assessme and care env	present consolidated view of Health and Safety information for the HSCP in a dareas of concern to be easily identified and action taken. So and Council regards to Health and Safety, via a network of advisors ensures the required H&S standards. It incidents are reviewed by Service Managers with data presented on a regular the Joint Health and Safety Committee (includes trade unions) the Health and Safety as a core objective the Health and Safety as a core objective the sor clients and warning flag system in place on electronic care records. It incomments is regularly reviewed and maintained including essential and statutory training, on health and safety issues (sharps,	Head of Health and Social Care	Historic	Ongoing	
Ongoing programme of st manual handling, and fire Appropriate processes ha services Following investigations of identified and implemente Occupational Health serv	e) ave been created of significant a sed, being oversices and staff	dverse events (including RIDDOR reportable), process improvements are seen via the most appropriate governance structure. support services are available and regularly communicated to staff.				
Ongoing programme of st manual handling, and fire Appropriate processes ha services Following investigations of identified and implemente Occupational Health serv	e) ave been created significant a led, being oversices and stafficies and proc	dverse events (including RIDDOR reportable), process improvements are seen via the most appropriate governance structure.	Assigned to	Date	Status	

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Move	ment if applicable
There is a risk that the support provided to		The National Records of Scotland published drug related death figures for 2020 and in Renfrewshire 67 people sadly lost their lives. For 2021, recent figures show 50 people died. Every	No Change	N	/A
hose with Addictions in Renfrewshire by the		life lost because of drug or alcohol harm is a tragedy.	Risk Code	Category	Risk Management
ange of partners within ne ADP, and the		Statistics show that around 66% drug deaths are individuals not known to services or in treatment at time of death. Partners across Renfrewshire continue to work closely and collaboratively to develop services to support to those with addictions, and a range of actions are outlined in the mitigating / preventing actions below. However, in response to the latest figures on drug deaths, it	RSK16	Strategic	Treat with ADP
ecommendations being mplemented from the	SMT		Current Likelihood	Current Impact	Current Evaluation
Alcohol and Drug Commission, may not		is important that the HSCP and ADP partners continue to review existing strategy and plans to ensure that those at risk can be reached and supported as early as possible to prevent drug	03	04	12 Moderate
orevent future increases in the number of drug and alcohol related		related deaths in future Figures published by NRS have also shown that between 2017 and 2021 a total of 227 deaths	Previous Likelihood	Previous Impact	Previous Evaluation
deaths within the area.		were caused by Alcohol in Renfrewshire. This is the eighth highest figure across the 32 Scottish Local Authorities.	03	04	12 Moderate
		Mitigating / Preventing Actions Complete or Ongoing	Assigned to	Date	Status
 Ensure that rapid res Adopted an assertive Have a clear pathwa Developing and imple Continuing to implem Harm reduction unit e Drug death prevention Multiagency review a Specialist Alcohol Ouwho do not engage w 	avigators avigators acourage enga esidential reh with colleagues tart of treatme coutreach app y in place for tementing the ent the recom established in n officer role and discussion atreach Team with other serv	abilitation services. Is from the emergency department at the RAH following near fatal overdoses. Is from the emergency department at the RAH following near fatal overdoses. It is available following relapse. It is available f	ADP Head of MH, LD, and Addictions	Review Dec 2022	Ongoing
A dedicated post was	s created to in	Mitigating / Preventing Actions Planned	Assigned to	Date	Status
Updated figures on d An enhanced multi-a group established to	gency approa	ADP Head of MH, LD,	Review Dec 2022	Ongoing	

Renfrewshire IJB Risk and Issue Register Audit, Risk and Scrutiny Committee 18 November 2022

•	Regular meetings with partners to discuss and learn from non-fatal overdoses. ADRS, including HaRRT attend the Daily Tasking		
	meetings to discuss risks and support to individuals affected by alcohol/drug use. An enhanced process for the review of non-fatal		
	overdose will take place following the embedding of the DDRG, and development of an enhanced access team for Renfrewshire.		
•	The DDPG continue to progress activity outlined within the Renfrewshire Preventing Drug Deaths Action Plan, which covers the period		
	2021 – 2024. Following a development day session with DDPG members, and the release of the Drug Death Task Force Final Report –		
	Changing Lives, additional actions for the group will be identified and added to the plan. The DDPG has been fundamental in the		
	implementation of a multiagency Naloxone Delivery Group and work plan, and the development of an enhanced drug death review		
	process for Renfrewshire.		
•	Ongoing planning continues around alcohol and drug services to address the requirements of the wider Renfrewshire community. This		
	work will address any requirements aligned to the delivery of the National MAT standards and alcohol quality principles. The expectation		
	from the Scottish Government is that all 10 MAT Standards are be implemented throughout Scotland by April 2023. An Improvement		
	Plan which outlines the specific actions required within Renfrewshire to achieve implementation of the standards is now in place. A		
	multi-disciplinary MAT Response Team will be established to ensure rapid, responsive support, with no barriers to accessing treatment.		
	This will also include the recruitment of a Pharmacy Independent Prescriber which will enable ADRS to significantly enhance the		
	opportunity to prescribe flexibly and consistently. The recruitment of a MAT Project Manager and a dedicated Information Analyst		
	will assist the ADP to drive forward the embedding and evaluation of the MAT standards.		
•	Renfrewshire ADRS recently completed the impact assessment for the implementation of the alcohol recovery pathway as requested by		
	ADRS Care Governance Committee. This benchmarking assessment will inform the Alcohol Specific Deaths Action Plan when the		
	dedicated post recruited.		

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Move	ement if applicable
		The Scottish Government have requested that Category	NEW	New to rep	ort this month
		One Responders prepare plans to ensure, as far as possible, the delivery of critical services during instances of power outage.	Risk Code	Category	Risk Management Approach
The Constitute Constitute of the constitute of t		This risk arises from two potential scenarios:	RSK18	Operational	Treat
The Scottish Government have equested that Category One Responders create plans to cater for the mpacts of potential power outage on our	Chief Officer	Planned power outages being possible over the winter period due to energy shortages (in a	Current Likelihood	Current Impact	Current Evaluation
critical services. This should reflect both	reasonable worst-case scenario)	03	05	15 Moderate	
planned and unplanned power outages.		Unplanned power outages due to a network failure or sever weather event e.g., Similar to Storm Arwen.	Previous Likelihood	Previous Impact	Previous Evaluation
		This has been widely reported within the media through October.	New	New	New
Mitigat	ing / Preventing Actions	Complete or Ongoing	Assigned to	Date	Status
 Planning activity has been undertaken across the partners and services to look at the potential impacts of a power outage on our operational service delivery. Services have undertaken a RAG process to understand the level of service user needs and service provision within a power outage event. An approach to data management has been signed off to support service management and maintenance in such events. 			Chief Officer	Historic	Ongoing
Mitigating / Preventing Actions Planned			Assigned to	Date	Status
 Work remains underway to develop communications and robust plans for staff to support in the event of such an event. Additional planning includes but is not limited to: Identification of buildings with back-up generators Identification of back-up power, cooking, and lighting options Working with the council and other partners regards any humanitarian responses required. Working with independent providers to support them with their planning. 			Chief Officer	End Dec 2022	Ongoing

Issue Statement	Issue Owner	Issue Description	Movement	Reason for Mo	vement if applicable
		It has become increasingly difficult to attract and retain the right staff for various roles across the HSCP.	No Change		NA
Challenges in attracting and retaining staff across a range of roles within HSCP services, because of a range of factors, is contributing to constraints in		A number of services are now experiencing significant challenges with recruitment due to the following:	Issue Code	Category	Issue Management Approach
		Changes due to the Scottish Government nursing agenda has resulted in some posts more attractive than others and also attracts the release them.	ISS01	Operational	Treat
	SMT	than others and also altering the role requirements (specified nursing degrees). District and School nursing are particularly affected.	Current Impact	Curren	t Evaluation
service delivery.		 Varying rates of pay and conditions across HSCPs A general shortage locally and nationally for specific 	05	E	extreme
	A perceived reduction in number of applicants for	Previous Likelihood	Previous Evaluation		
	frontline roles such as Care at Home in light of the impact of the pandemic and its associated challenges. The NCS Bill is also adding uncertainty for the future of social care roles.		05	Extreme	
Mitigating an	d Recovery Actions C	omplete or Ongoing	Assigned to	Date	Status
 HR & Recruitment – risk assessment undertaken re vacancies, reduced timescales from request to advert, robust application of absence management processes, regular review / refresh of statutory and mandatory training and professional registration / revalidation and adherence to application checklists (e.g., disclosure) Implementation of alternative recruitment routes where possible in agreement with HR & OD Development of interim workforce plan 2021-22, and a workforce plan for 2022 to 25 which was reviewed in draft at IJB June 2022 and submitted to SG for comment at the end of July 2022. Winter planning – 3-month forward plan completed to ensure adequate staffing and contingency. Scenario planning completed with services – to identify any possible additional staffing mitigations. This has been revisited for Winter Plan 2022/23. Contingency exercise completed to identify staff who are willing to volunteer to support other services should the situation arise. 				Review Dec 2022	Ongoing
	and daily situational reparting / Recovery Action	porting established for critical services regards staffing. Ins Planned	Assigned to	Date	Status
 Work continues with services to work collaboral define innovative approaches to recruitment. Independent Providers – collaborative working 	HSCP SMT	Review Dec 2022	Ongoing		