



To: Renfrewshire Integration Joint Board Audit, Risk and Scrutiny

Committee

On: 23 June 2023

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 March 2023.

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 Audit, Risk and Scrutiny Committee:

- Note the further work 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 preparation completed with services in advance of the internal audit of risk management arrangements which commenced 29 March 2023 (section 4); and
- 2. Approve the updates made to the existing 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 completed include:
  - Continued reviews to assist the Risk Network and services to follow risk management processes, supporting risk and issue reviews with service management teams.
  - Continued operational risk and issue reporting to SMT by exception.
  - Ongoing monitoring of staff completion of the online training module launched in August 2022. Takeup rates have been impacted by continued service pressures therefore we plan to issue reminders through the summer months to try and increase the completion rate.
  - Ongoing meetings of the cross HSCP and NHS GGC 'risk working group' continue to be held monthly where consistency of risks is discussed, and best practice shared. Particular focus and discussion this period has been on budgetary constraints and the risks that savings proposals present across the sector, and also on sustainability of providers.
  - Work continues to address resilience risks associated with any planned or unplanned power outages.
  - 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.'
  - The Internal audit of IJB Risk Framework commenced in late March 2023, led by Azets. Supporting materials were provided to the auditors in advance and a kick-off meeting held on 29 March. The audit report is expected late May and any identified recommendations will be reflected in the next review and update (as appropriate) of the risk management framework. This review will also ensure ongoing alignment with NHSGGC's recently approved risk management strategy. Renfrewshire HSCP have contributed to relevant discussions during the strategy's development.

### 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 one new issue incorporated 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 regarding completed and outstanding actions. This paper reflects the changes made to risks since the last update to the Committee.
- 5.2. It should be noted that the risk outlook remains highly challenging, with many of the risks now being rated within the category of high. The current financial and operating context remains difficult across the public sector, and this is reflected in the nature of risks being identified.
- 5.3. In summary, the key updates to existing risks include:

- The risk scores for 'Changing financial and demographic pressures' (RSK01) and 'Financial challenges causing financial instability for the IJB' (RSK02) remain at the highest rating available. It should however be again noted that as the ongoing financial context for the IJB remains highly challenging and uncertain, the risk has been further updated to reflect this extremely challenging position. A few points have been updated to reflect the declining position:
  - The Use of reserves to facilitate the budgetary balance in 2023/24 leaves the IJB a general reserve of c0.4% of its net budget; far below the 2% target outlined in the IJBs Reserves Policy. This represents a significant risk to the IJB and means the financial resilience of the IJB in future years will be severely compromised.
  - The use of reserves is a non-recurring option, and this will have an impact on our ability to deliver on our Strategic Plan, what can be delivered and when. As we go into 2023/24 and beyond this will require the IJB to prioritise decisions for investment and disinvestment in order to deliver on our priority of the most sustainable future.
- To reflect the full extent of the financial context facing the IJB identified above, a new issue (ISS02) has also been added. At the March IJB a balanced budget and a sustainable futures paper were both approved, however this requires:
  - As above, a considerable utilisation of our reserves leaving us with less than the required 2% of the overall budget for future years reserves.
  - Savings proposals to be delivered through this financial year. At the March IJB a range of options were outlined and a plan exists to share the programme delivery approach and scope at the June IJB, with more detailed proposals being presented in November's IJB.
- The risk 'Disruption from further waves of COVID' (RSK05) has remained open for continued monitoring. Following the receipt of new Scottish Government guidance removing the use of face masks and coverings in Health and Social Care settings we propose that we close this risk for the next report iteration.
- The risk 'National Care Service' (RSK06) has been updated to reflect the notification of the further delay till January 2024.
- The risk 'Delivery of the GP Contract / PCIP' (RSK11) has been reduced in rating due to the fact that we have now delivered all required treatment rooms (CTAC), VTP and Pharmacotherapy requirements by the required date of 31st March 2023, and we have created an affordable

- model which fits the provided Primary Care Improvement funding (PCIF) provided.
- The risk 'Failure to achieve targets and key performance indicators' (RSK12) has been increased to reflect the fact that continued intense focus on specific areas may risk the delivery of other elements of the strategic plan, e.g. Delayed Discharges as one example.

### 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 Autumn 2022. Reminders continue to be shared.
- 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**

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### Risk and Issue Register Executive Summary

This document reflects the status of the risks and issues in the IJB log at the middle of May 2023. 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.

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$\mathbf{r}$	15	N.5

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 Risks	High Risks	Moderate Risks	Low Risks	Very Low Risks	Proposed Closure
15	9	5	1	0	0
Likelihood		Coi	nsequence Imp	act	
Likelinood	1	2	3	4	5
	5	10	15	20	25
5				3	6
	4	8	12	16	20
4			1	1	
	3	6	9	12	15
3			1	1	2
	2	4	6	8	10
2					
	1	2	3	4	5
1					

# **Issue Profile**

Total Issues	2
Extreme Issues	2
Major Issues	
Moderate Issues	
Minor Issues	$\bigcirc$
Insignificant Issues	
Proposed Closure	

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	No Change
RSK02	Financial	Financial Challenges causing financial instability for the IJB	25 High	No Change
RSK03	Operational	Increase in physical and mental health inequalities	20 High	No Change
RSK05	Operational	Disruption from further waves of COVID	09 Low	Propose Closure
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	No Change
RSK11	Clinical	Delivery of the GP Contract / Primary Care Improvement Plan	16 Moderate	Decrease
RSK12	Strategic	Failure to achieve targets and key performance indicators	12 Moderate	Increase
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	25 High	No Change
RSK15	Operational	Compliance with Essential Training	20 High	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	No Change
ISS01	Operational	Issues regards attracting & retaining staff	05 Extreme	No Change
ISS02	Financial	IJB budgetary position	05 Extreme	New

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 the most vulnerable people in Renfrewshire.	No Change		pressures and cost of main significant
		This needs to be considered with regards to:	Risk Code	Category	Risk Management Approach
		Medium- and longer-term financial planning			Арргоасп
The changing financial and demographic pressures facing		Corporate and service review activities     Strategic commissioning approach and the strategic planning process	RSK01	Strategic	Treat
services poses a risk to the HSCP being		Service design ensuring the development of cost-effective care models and models which encourage prevention and self-management	Current Likelihood	Current Impact	Current Evaluation
able to successfully deliver services to the	HSCP SMT	<ul> <li>Increasing costs such as utilities, salaries, and supplies are also having an impact on budgets across the HSCP and our partners. Partners and providers are now seeking to</li> </ul>			
most vulnerable		manage additional costs faced which may lead to an increase in our costs and further budget constraints.	05	05	25High
people in Renfrewshire.		<ul> <li>Increasing impacts of cost-of-living crisis on some demographics has the potential to increase service demands and levels of need.</li> <li>Inflation remains high, and the overall financial outlook beyond this year remains</li> </ul>	Previous Likelihood	Previous Impact	Previous Evaluation
		<ul> <li>uncertain and challenging.</li> <li>Use of reserves to facilitate budgetary balance in 2023/24 leaves the IJB a general reserve of c0.4% of its net budget; far below the 2% target outlined in the IJBs Reserves Policy. This represents a significant risk to the IJB and means the financial resilience of the IJB in future years will be severely compromised.</li> </ul>	05	05	25 High
	Mit	igating / Preventing Actions Complete or Ongoing	Assigned to	Date	Status
A number of actions are	in place to help m	itigate this risk including:	HSCP Senior	Review August	Subject to ongoing
Regular risk reporting to	the Integration Jo	int Board and the IJB Audit, Risk and Scrutiny committee.	Management Team	2023	review
Financial Planning and		ng			
<ul> <li>Implementation of the I</li> </ul>	esses are in place JB's Strategic Pla	e and regularly reviewed and reported upon n 2022-25 and Medium-Term Financial Plan 2022-25 with Tier 1 rolling savings programme langes within the external economic and funding context			
	e-design opportun	ities to improve efficiency and effectiveness			
<ul> <li>Eligibility criteria under</li> <li>Ongoing focus on recordeliver efficiencies</li> </ul>		/ID-19 pandemic and assessment of transformational opportunities to reshape services and			
		Mitigating / Preventing Actions Planned	Assigned to	Date	Status

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:	No Change	N/	A
		Service Areas individually, or in combination, experience expenditure levels which exceed 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
		b) Prescribing c) Sickness & Absence cover	RSK02	Financial	Treat
There are a number of		d) Community equipment expenditure e) Impact arising from Resource Allocation Model f) Financial impact of any clinical failures	Current Likelihood	Current Impact	Current Evaluation
financial challenges facing the IJB and if not adequately		f) Financial impact of any clinical failures g) Compliance with new statutory requirements h) Increased service demand i) Increased supply chain costs due to Brexit, Ukraine and COVID impacts j) Additional costs incurred as a result of COVID-19	05	05	25 High
addressed, these could	HSCP SMT	K) Ongoing challenging financial outlook for IJB     Significant levels of non-recurring funding does not support longer term sustainability of services	Previous Likelihood	Previous Impact	Previous Evaluation
affect the financial		m) Additional uplifts requested arising from external providers	05	05	25 High
sustainability of the partnership with consequent impact to service delivery.		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. The sustainable futures paper which encompassed a range of savings proposals was approved at IJB in March 2023. An update on the programme approach and scope will be provided to IJB in June 2023, and a detailed set of proposals will be presented in November for approval.			
		3. As widely reported, Councils across Scotland all face significant financial challenges. Increasingly difficult choices about spending priorities will be required in this financial year and future years.			
		4. As at the March 2023 IJB a balanced budget was agreed which utilised a sum of circa £6m from reserves, subject to confirmation of the additional charges from the council.			
		Mitigating / Preventing Actions Complete or Ongoing	Assigned to	Date	Status
Medium Term Fir Reporting/monito	ement framewor ery and Renewa 122-2025 approv nancial Plan for oring at strateg	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:	HSCP Senior Management Team	Historic	Ongoing
<ul> <li>Financial perform</li> <li>Finance and Reso</li> </ul>	nance meetings urces.	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.			
<ul> <li>Ongoing discuss</li> <li>Ongoing reportin</li> </ul>	ion at GP forum g to Scottish Go	on importance of prescribing financial break even. vernment on COVID-19 expenditure and discussions on cost recovery. budget setting procedures including regular budget monitoring with budget holders.			

- Prudent use of our reserves policy			
Savings programme			
- Savings for FY21/22 agreed at IJB March 21 fully delivered by year end (circa £1.135M)			
- Sustainable futures paper and balanced budget signed off March 31st 2023 (proposal to use circa £6m of reserves)			
Mitigating / Preventing Actions Planned	Assigned to	Date	Status
<ul> <li>Implementation and ongoing monitoring of identified savings and transformation options to achieve desired budgetary outturn in this financial year. Presentation of sustainable futures programme approach and scope at June IJB, and detailed proposals at November IJB meetings respectively.</li> <li>Active vacancy management continues. All vacancies reviewed by Finance and approved by CFO prior to recruitment</li> </ul>	N/A	Review August 2023	Ongoing
- Ongoing negotiation with funding partners to maximise 23/24 budget			

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Move	ement if applicable
There are a risk that ohysical and mental health nequalities increase,		It is recognised that physical and mental health inequalities are highly likely to increase. This may result from long-term conditions, an ageing population, long term impacts of COVID on mental health and Long COVID itself, increasing poverty due to the cost-of-living crisis, increased deprivation or	No Change	in complexity of one Health, Care Home	asing and an increase cases within Mental es and Care at Home vices.
meaning that service users and patients present with	Head of Strategic	individual risk-taking behaviours resulting in a population with higher levels of need, lower levels of resilience and fewer opportunities to participate fully in	Risk Code	Category	Risk Management Approach
igher levels of need,	Planning & Health Improvement	their communities.	RSK03	Operational	Treat
ower levels of resilience nd fewer opportunities to	Improvement		Current	Current Impact	Current Evaluation
participate fully in their		This must be actively considered with regards to the creation of any Health Improvement plans and Partnership working agreements.	Likelihood 05	04	20 High
communities.		mprocessing agreement	Previous	Previous Impact	Previous
			Likelihood		Evaluation
			04	04	20 High
	Mitigating / Pi	reventing Actions Complete or Ongoing	Assigned to	Date	Status
maintain a focus or role appointed in John addition, followin community-led appointed in John Hard Hard Hard Hard Hard Hard Hard Hard	In this aspect are in place an 22 to focus solely on a review of our strategoroach to health and wellt performance within the Hisor population data and traced for 2021/22 to deliver, wellbeing, and inequalitism Communities Mental Hom announced by SG for secured as part of winter pic development plans to use the secured as part of winter pic development plans to use the secured with partners and the secured as part of winter pic development plans to use the secured as part of winter pic development plans to	ic plan priorities a number of activities are underway which includes delivery of a being with targeted approaches to raise awareness. ealth inequalities outcome (number 5 in National H&W Outcomes) and also ends.  projects which are aimed at reducing specific inequalities and promote health es within development of Strategic Plan 2022-25 ealth & Wellbeing fund - £500k allocated to Engage Renfrewshire to allocate to second year of fund (May 2022).	Strategic Planning & Health Improvement	Historic	Complete
	Mitigat	ing / Preventing Actions Planned	Assigned to	Date	Status
ctions underway:	SPG partners to further				

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,		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:	Propose Closure	Following the notification of wand coverings in Health and S 16 May 20  IJB Governance and operarrangements are well tested aspects of the risk regarding outbreaks, and failure to delicoperational plans are cover issues	social Care settings from 223.  erational response and embedded. Other staffing impact, further iver upon strategic and red by other risks and
particularly staffing, service provision, and overarching IJB	Chief Officer	<ul><li>(a) Increased levels of care required due to long covid and increased mental health issues</li><li>(b) The impact on staff; sickness, mental health, and utilisation to support services</li></ul>	Risk Code RSK05	Category  Operational	Risk Management Approach Treat
governance.		(c)Impact of increasing levels of demand and client expectations (d)The suitability, affordability, and stakeholder support to achieve the NHS remobilisation plan, Renfrewshire Council's recovery plans and ultimately the HSCP's overall plan.	Current Likelihood 03 Previous Likelihood	Current Impact  03  Previous Impact	On Low Previous Evaluation
			03	03	09 Low
	Mit	igating / Preventing Actions Complete or Ongoing	Assigned to	Date	Status
<ul> <li>that will enable</li> <li>The risk manag flexibility neede</li> <li>Public health movaccinations in second</li> </ul>	all members to pement framewor d regards risk toleasures have be Spring 2023 is usorporated the ne	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 inderway.	N/A	Historic	Ongoing
		Mitigating / Preventing Actions Planned	Assigned to	Date	Status
<ul><li>If required in the revisited if deen</li><li>Delivery of Record</li></ul>	e future additiona ned appropriate. overy Plans, incl	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 auding the NHS Remobilisation Plan ed locally across services in alignment with National Guidance.	Chief Officer	June 2023	Ongoing

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Move	ement if applicable
		The published analysis of NCS consultation responses showed support for the wide-ranging proposals made and the implementation of these is therefore	No Change	1	N/A
		likely to place significant demands on HSCP resources to deliver, alongside the delivery of ongoing operational and strategic plans. The Scottish Government have now published a high-level Bill to enable creation of the	Risk Code	Category	Risk Management Approach
There is a risk that the		NCS. This lacks detail but is expected to have significant impact on IJB role and governance through creation of Local Care Boards. Further impacts on	RSK06	Operational	Treat
creation of a National Care Service results in potentially significant structural, organisational and governance		staffing, finance, property, and technology will also occur.  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	Current Likelihood	Current Impact	Current Evaluation
change which could be challenging to resource	Chief Officer	are a significant number of questions which cannot be answered at the current stage of the process. Parliamentary Committees have also released reports	05	05	25 High
alongside operational commitments.		setting out their views on the current status of the Bill. The level of risk therefore remains high.	Previous Likelihood	Previous Impact	Previous Evaluation
		Next steps and timelines for the NCS Bill remain uncertain due to the nature of recommendations made by Parliamentary Committees, stakeholder feedback and the potential for policy changes to be made by a new First Minister of Scotland. In this context, stage 1 scrutiny of the Bill has been further postponed to January 2024.	05	05	25 High
	Mitigating / P	reventing Actions Complete or Ongoing	Assigned to	Date	Status
<ul> <li>prioritisation of resource.</li> <li>The HSCP has a Change and</li> <li>Continued review of the progrimplications.</li> <li>Implementation of Strategic F</li> </ul>	d Improvement team ress of recommenda Plan to consider the	e phased for delivery over the term of this Parliament, to enable some that can be directed to key areas of activity requiring delivery. ations progressing through parliament to assess potential resource and plan need for flexibility in delivery. consultation on proposals for National Care Service.	Chief Officer	Historic	Ongoing
		ing / Preventing Actions Planned	Assigned to	Date	Status
<ul><li>understand the impacts.</li><li>Draft Bill published by the Sc stakeholder registers.</li></ul>	ottish Government a rces and attendance reparation actions th		Chief Officer	Review June 2023	Ongoing

Risk Statement	Risk Owner	Risk Description	Movement	Reason for M	Movement if applicable	
There is a risk that a ange of factors may		A flexible, skilled, and suitably certified workforce is essential to service provision and delivery	No Change		N/A	
mpact on the ability o fully implement vorkforce plans and		of the IJB's strategic plan. Workforce risks can result in increased financial costs and include:	Risk Code	Category	Risk Management Approach	
ould lead to longer erm workforce		<ul> <li>Prolonged vacancies within services. Specific pressures exist around medical staffing (specific roles are in national shortage), District Nursing and Care at Home services</li> <li>Sufficient numbers of qualified staff with the correct registrations</li> </ul>	RSK07	Operational	Treat	
lifficulties, shortages n some skill sets, herefore potential mpact on service	HSCP	<ul> <li>Pressures resulting from additional planning structures which require managerial and clinical input.</li> <li>GP practice handing back their contract and the HSCP having to run the practice</li> </ul>	Current Likelihood	Current Impact	Current Evaluation	
elivery and the JB's ability to deliver	SMT	High levels of fatigue and unused annual leave from COVID resulting in increased absence     Additional risks to meeting service demand posed by sickness/absence levels and an	05	05	25 High	
pon the strategic lan.		<ul> <li>ageing workforce leading to increased levels of future retirements.</li> <li>Vacancies or absence within providers, and or providers making decisions to hand back care agreements or not accept new packages/residents.</li> <li>Timely access to the correct tools and accommodation for staff; laptops, mobiles, systems</li> </ul>	Previous Likelihood	Previous Impact	Previous Evaluatior	
Please also see sue ISS01: Issues tracting and etaining staff		Timely access to the correct tools and accommodation of stair, raptops, modiles, 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	
		Mitigating / Preventing Actions Complete or Ongoing	Assigned	Date	Status	
practice and daily/staffing dashboard HR & Recruitment absence manager revalidation and act two job fairs to attr Business Continuit Staffing review und Winter funding – sy Independent Contr delivery of the Prin Focused Developm Development of ar	weekly reviet to monitor s  - vacancy ritent process therence to a fact staff and y - winter placetaken to upecific group actors - collary Care Impent session interim one	risk and staff deployment through forward planning of rosters, quality assurance re shifts good ws of service staffing. Utilisation of bank/agency staff / overtime where required. Introduction of taffing levels in critical services. Sk assessment undertaken, reduced timescales from request to advert, robust application of es, regular review / refresh of statutory and essential training and professional registration / application checklists (e.g., disclosure), process for monitoring clinical references. Completion of service meetings established to manage recruitment and retention issues collaboratively. anning alignment with ongoing business continuity and risk management to identify issues early. Inderstand staff willingness to volunteer and deploy in other services should the need arise. established to track the progress regards spend / recruitment of additional and new roles. aborative working with Primary Care and cluster support for GP practices / services, through provement Plan held with IJB on workforce planning and challenges on 5th November 2021 - year workforce plan for 2021/22, and draft 2022 to 25 plan approved by IJB in June 22 2022 to 25 was submitted to SG in draft at the end of July and was approved by the IJB in	N/A	Historic	Ongoing	
NOVEITIDEI 2022		Mitigating / Preventing Actions Planned	Assigned	Date	Status	
		lan created and continues to be monitored by the HSCP's Workforce Planning Group	Head of	End July 2023	Ongoing	

	Risk Owner	Risk Description	Movement	Reason for M	ovement if applicable
here is a national risk of		There is a risk of litigation and reputational damage applicable across health and social care nationally and facing all integrated health and social care service providers, as a result of the UK-wide public inquiry	No Change		ring underway, hearings commence in 2023.
tigation and reputational amage across integrated		into the handling of the COVID pandemic. The Scottish Government has also committed to completing an inquiry in Scotland and the terms of	Risk Code	Category	Risk Management Approach
health and social care services following the UK-wide public enquiry into the handling of the COVID pandemic, commencing in		reference for this was updated on 9 June. There continues to be significant media interest nationally, following the recent resignation of the enquiry chair.	RSK09	Strategic	Treat
	HSCP SMT	There is no evidence that this risk is any higher for Renfrewshire than for	Current Likelihood	Current Impact	Current Evaluation
022. We are not aware of		any other integrated health and social care service.	03	05	15 Moderate
any increased comparative risk in Renfrewshire.	Responses to the UK and Scottish Government public enquiries are	Previous Likelihood	Previous Impact	Previous Evaluation	
		underway and the expectation is that hearings will commence later in 2023. The UK enquiry hearings will take place in June and July 2023. Dates for the Scottish public enquiry are still to be confirmed.	03	05	15 Moderate
	Mitigating / Preve	nting Actions Complete or Ongoing	Assigned to	Date	Status
home residents have been and service users.  Commissioning Teams & Care prepared for the care of Significant support also be Testing of all residents and Testing of all staff implemed Daily huddles and multi-age Clinical support and leader	lled out across Renfrew offered the vaccine and Community Services are of patients with possible ing provided by Public I distaff in care homes implemented as per National Guency assurance and surship through general purangements for infection ures such as reduced of	shire; in alignment with National Vaccination guidance; all staff and care d a third vaccination/booster. Programme also performing well for residents a supporting care homes to ensure that they remain open for admission and or confirmed COVID-19.  Health, Infection Control and Procurement. plemented and regularly re visited. Luidance prort for Care Homes in place. Procure actice and district nursing. In control, training, practice, supervision and for implementing social or no visiting policies.	HSCP Senior Manageme nt Team	Review early August 2023	Ongoing
<ul> <li>Regular reporting from Rei</li> </ul>	eveloped to allow identi nfrewshire Council, NHS	fication of any COVID 'hotspots' and trends S GGC and Renfrewshire HSCP to Scottish Government.			
PPE arrangements establic Dashboards and reports do Regular reporting from Re	eveloped to allow identi nfrewshire Council, NH3 responses to requests	fication of any COVID 'hotspots' and trends S GGC and Renfrewshire HSCP to Scottish Government.	Assigned to	Date	Status

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Mov	vement if applicable
Flores in a vial that we		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	No Change		N/A
There is a risk that we may experience failure, oss, or reduced quality		practices. There is financial instability within the sector due to COVID-19, the cost-of-living crisis, and additional impacts from Brexit.	Risk Code	Category	Risk Management Approach
(either permanent or temporary loss) of a		In October 21, independent contractors were to this risk as we are starting to see	RSK10	Operational	Treat
najor service provider, hich may impact on		pressure build within this area. For example, some providers have confirmed they are unable to take new commitments, cancelled all current outreach and or reduced other	Current Likelihood	Current Impact	Current Evaluatio
ur capacity to deliver ervices, protect	HSCP SMT	commitments.	05	05	25 High
ulnerable children and dults, and may impact n additional costs to		In February 22, a practice was managed as a 2c practice prior to its closure, after which patients were migrated to other local practices.	Previous Likelihood	Previous Impact	Previous Evaluation
cover key services.		From Q3 22/2023, providers and contractors have notified the HSCP of the financial challenges they are facing in trying to cover rising supply chain and operational costs. This continues to result in some providers considering the return of existing hours of service provision to the HSCP.	05	05	25 High
	Mitiç	pating / Preventing Actions Complete or Ongoing	Assigned to	Date	Status
Purchasing patterns Programme of review Contract compliance, provider Sustainability and financial support Main providers regist contingency arranger Inspectorate also incl Providers have also be ensuring links to their Enhanced governance Secretary in response include multi-disciplir Emergency legislatio COVID-19. The options for mana	monitored by Finants of all service properformance monitored by programme continuous programme continuous and monitored and monitored and monitored in discussion of the supply chains and the arrangements for the coordinate of the coordinate and the coordinate	toring and reviews for service providers and the two hospices nued until the end of June 22, with the Social Care Staff fund extended to September 2022 cinations extended until end March 2023.  If by Care Inspectorate, with reports accessible for review. Participation in local and national oviders facing financial uncertainty to ensure minimal impact on local service users. Care Social National and Scottish Government guidance which outlines these various actions including ensuring robust business continuity arrangements are in place. To care homes have been implemented across Health Boards at the direction of the Cabinet esse arrangements have significantly increased monitoring of commissioned services and	NA	Review August 2023	Ongoing
	ing transferred to o	itner practices.		Dete	Ctatus
2022 with patients be		Mitigating / Preventing Actions Planned	Assigned to	Date	Status
2022 with patients be Ongoing monitoring and t		Mitigating / Preventing Actions Planned	Assigned to N/A	N/A	N/A

	Risk Owner	Risk Description	Movement	Reason fo	r Movement if applicable
There is a risk that the HSCP			Decrease		N/A
will not be able to deliver services as	Oliviaal	Current proposed funding will not cover the full cost implementation of the contract and therefore we have created a model which is affordable against the Primary Care Improvement funding (PCIF) provided.	Risk Code	Category	Risk Management Approac
outlined within he GP Contract	Clinical Director	Initial scope included 6 MOU areas. There remains a greater priority on 3 of these:	RSK11	Clinical	Treat
/ PCIP by the required timelines, due to	and	pharmacotherapy, VTP and CTAC which need to have been delivered by end of March 2023. The 3 remain but with no firm timeline for full transfer of responsibility.	Current Likelihood	Current Impact	Current Evaluation
imelines, due to he scale of work required,	Chief Officer	In order to deliver the GP Contract additional fit for purpose property accommodation is required and also to support the growth in the sizes of the teams created for the purpose of multi-disciplinary service delivery.	04	04	16 Moderate
workforce availability and		There is an ongoing risk that transitional payments may need to be applied. Work is ongoing	Previous Likelihood	Previous Impact	Previous Evaluation
allocated unding.		to determine this.	05	04	20 High
		Mitigating / Preventing Actions Complete or Ongoing	Assigned to	Date	Status
<ul> <li>Clinical Dire Regular rep planned with</li> <li>Property au pharmacoth</li> </ul>	ector providing orting to the orting to the orting to the orting the distribution of the control	50K secured in a Scottish Government bid as part of 'Winter Funding' which will help to fund the nents. This is recurring funding.  all 28 practices out of 28 into treatment rooms.	Clinical Director	Review end August 2023	Ongoing
<ul> <li>Primary Car</li> <li>Additional functional fun</li></ul>	w delivered ity for vaccir was a key re wshire pharr	nations that were previously delivered in GP practices have now transferred from GPs to the equirement for delivery under the contract by March 2022.  macy hubs went live from August 2022, with plans for longer-term accommodation needs ped.			
Primary Car  Additional fu Primary Car  We have no	w delivered	nations that were previously delivered in GP practices have now transferred from GPs to the	1		

	Risk Owner	Risk Description	Movement	Reason for Moven	nent if applicable
There is a risk that		There are multiple components to this risk:  • 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 outcomes	Increase	Increased focus on key from other activities pos achieve some targets I e.g., delayed	sing a risk that we dor but exceed on others
ailure to deliver upon he required Strategic		required within the strategic plan.  There is also a risk that the dependencies between our strategic plan and	Risk Code	Category	Risk Managemen Approach
Plan targets and tandards, and other key performance indicators,	HSCP SMT	national planning, and partner strategies are not aligned.  • Continued intense focus on specific areas such as delayed discharges reduces	RSK12	Strategic	Treat
could result in a decreased level of	TISCF SWIT	our ability to complete work on other activities and therefore may impact our performance in other areas of the strategic plan.	Current Likelihood	Current Impact	Current Evaluation
service for patients and service users.		The dependencies between the delivery of targets and wider risks relating to financial and workforce challenges remain (Risks 1, 2 7 and Issue 1)	04	03	12 Moderate
		We continue to have Strong alignment between our strategic, medium term financial and workforce plans. National policy changes pose a risk but mitigated by annual review of strategic plan. However, related financial and workforce impacts	Previous Likelihood	Previous Impact	Previous Evaluation
		remain which may impact on delivery.	03	03	09 Low
		ng / Preventing Actions Complete or Ongoing	Assigned to	Date	Status
support monitoring Organisational Perf National, NHSGGC Regular review of k Review of systems planning. Needs Assessment Review of integratio Undertaking equalit Ongoing budget mo Staffing resources a Quality care and pro Ongoing work deve Ongoing maintenar Strong alignment bo There remains a ris	and planning. ormance Reviews w, Ministerial Steering ey performance indi- used to record, extra carried out on scheme in line wit y impact assessmer pritoring and manag- are flexed to meet pritofessional governan loping a culture of pice of performance retween our strategic k of national policy of		SMT	Review August 2023	Ongoing
should mitigate aga			Assigned to		

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Moven	nent if applicable	
			No Change	N/	I/A	
		Cyber threats are a dynamic and growing threat to the HSCP and our partner	Risk Code	Category	Risk Management Approach	
Cyber threats are an ncreasing risk to the HSCP and our	NHS - Director	organisations; NHS GGC and Renfrewshire Council. Until recently, much of the focus of such threats was the theft of financial data, not personal or 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. As the	RSK13	Strategic	Treat via Partners (Transfer)	
respective partner organisations and there is a risk that either partner could be	of eHealth  Council - Head	HSCP's ICT infrastructure is provided by NHS GGC and Renfrewshire Council, the responsibility for addressing this risk sits with our partner organisations however shall be maintained in this log for monitoring.	Current Likelihood	Current Impact	Current Evaluation	
argeted to disrupt key nfrastructure.	of IT	Since the last report the HSCP has continued to focus our Business Continuity	05	04	20 High	
		Review on how the Partnership would operate in the event of a data or systems breach and work with partners is ongoing.	Previous Likelihood	Previous Impact	Previous Evaluation	
			05	04	20 High	
	Mitigatin	g / Preventing Actions Complete or Ongoing	Assigned to	Date	Status	
<ul> <li>Renfrewshire Councomms to staff regaphishing scam test</li> <li>NHS GGC operates</li> <li>Both NHS GGC and to monitor and man</li> <li>The eHealth Director</li> <li>Further implementations in light</li> </ul>	cil have recently (Q2 rding security of dat to raise awareness of a multi layered secut Renfrewshire Courage risks.  To and Renfrewshite and Renfrewshit to f the additional Ultic deep dive performes	ed against the Council infrastructure and processes although assured as controlled,	NHS - Director of eHealth Council – Head of IT	Historic	Ongoing	
		itigating / Preventing Actions Planned	Assigned to	Date	Status	
event of a cyber event	with NHS e-Heath arent.	nd Council regards the availability of key systems and alternative data access in the	NA	Review September 2023	Ongoing	

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Mov	ement if applicable	
		There is a risk that limited capital funding, and the	No Change		Budget challenges requiring ongoing assessment of property portfolio.	
		complexities of coordinating a property strategy consistently across both NHS and Council properties, could create additional challenges in	Risk Code	Category	Risk Managemer Approach	
There is a risk that limited capital funding and the complexities of co-ordinating relevant property		delivering the IJB's strategic aims in the medium to long term.  Capital planning is reserved to the IJB's partner	RSK14	Strategic	Treat via Partners (Transfer)	
strategies and planning between partner organisations could create additional challenges n delivering the IJB's strategic plan in the nedium- to long-term.	te additional challenges ategic plan in the CFO CFO property strategies on an ongoing bas required.  Ongoing maintenance requirements a estate.	property strategies on an ongoing basis is required.	Current Likelihood	Current Impact	Current Evaluation	
<b>.</b>		estate.	05	05	25 High	
		<ul> <li>also adding accommodation pressure.</li> <li>Budget challenges will require ongoing assessment of the property portfolio currently in</li> </ul>	Previous Likelihood	Previous Impact	Previous Evaluation	
	use.	05	05	25 High		
Mitigating /	Preventing Actions Co	mplete or Ongoing	Assigned to	Date	Status	
<ul> <li>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.</li> <li>Primary Care Property Strategy submitted to IJB 25 June 2021.</li> <li>A property data gathering exercise completed to support the determination of property priorities.</li> <li>Refreshed HSCP Property Strategy Group commenced 11th May 2022.</li> </ul>				Review August 2023	Ongoing	
<ul> <li>Ongoing attendance at the NHS Board/HSCF Mitig</li> </ul>	ating / Preventing Action		Assigned to	Date	Status	
Refreshed assessment of service and team ne	eds as HSCP transitions	in line with Scottish Government Strategic Framework	Chief Finance	Review August	Ongoing	

Initially when recorded this risk was in relation to the pressures introduced by following the pandemic, and differences in reporting of systems, will impact on the timeous completion of and accurate reporting of mandatory training. This could impact on the provision of a safe working environment for staff and patients / service users.  1. Recruitment and retention issues and the subsequent increased demands on staff which make it very challenging for appropriate accurate reporting of mandatory training. This could impact on the provision of a safe working environment for staff and patients / service users.  2. Differences in our reporting systems which can make recording and comparison between employing organisations difficult complete the required number of hours required.  3. The availability of appropriate courses, trainers and venues to complete the required number of hours required.  4. Continued compliance with Staff Governance standards  5. Creation of a dashboard underway to present consolidated view of Health and Safety information for the HSCP in a single view. This will enable trends and areas of concern to be easily identified and action taken.  5. Collaborative working between the NHS and Council regards to Health and Safety, via a network of advisors ensures that the partnership correctly applies the required H&S standards.  6. Recording of incidents, including violent incidents are reviewed by Service Managers with data presented on a regular basis prior to them being reviewed via the Joint Health and Safety as a core objective.  6. Completion of individual relations for clients and action taken and safety.  8. Recording of incidents, including violent incidents are reviewed by Service Managers with data presented on a regular basis prior to them being reviewed via the Joint Health and Safety was a core objective.  9. Completion of individual relations for clients and cated and action taken and safety committee (includes trade unions).  9. Workforce planning activity will reinforce Health and Sa	Risk Statement	Risk Owner	Risk Description	Movement	Reason for Move	Novement if applicable	
by service demands and workforce constraints following the pandemic, and differences in reporting systems, will impact on the timeous completion of and accurate reporting of mandatory training. This could impact on the pandemic, however it has now been updated to reflect:  1. Recruitment and retention issues and the subsequent increased demands on staff which make it very challenging for appropriate and accurate reporting of mandatory training. This could impact on the provision of a safe working environment for staff and patients / service users.  2. Differences in our reporting systems which can make recording and comparison between employing organisations difficult and carried number of hours required.  3. The availability of appropriate courses, trainers and venues to complete the required number of hours required.  Mitigating / Preventing Actions Complete or Ongoing  Assigned to  Date  Status  Continued compliance with Staff Governance standards  Creation of a dashboard underway to present consolidated view of Health and Safety information for the HSCP in a single view. This will enable trends and areas of concern to be easily identified and action taken.  Collaborative working between the NHS and Council regards to Health and Safety, via a network of advisors ensures that the partnership correctly applies the required HAS standards.  Recording of incidents, including violent incidents are reviewed and warning flag system in place on electronic care records.  Guidance for safe clinical and care environment is regularly reviewed and maintained  Ongoin of individual risks assessments for clients and warning flag system in place on electronic care records.  Guidance for safe clinical and care environments is regularly reviewed and maintained  Ongoin of individual risks assessments for clients and warn				Increase			
differences in reporting systems, will impact on the timeous completion of and accurate reporting of mandatory training. This could impact on the provision of a safe working environment for staff and patients / service users.  1. Recruitment and retention issues and the subsequent increased demands on staff which make it very challenging for appropriate time to be allocated to undertake training; and mandatory training. This could impact on the provision of a safe working environment for staff and patients / service users.  2. Differences in our reporting systems which can make recording and comparison between employing organisations difficult  3. The availability of appropriate courses, trainers and venues to complete the required number of hours required.  4. Continued compliance with Staff Governance standards  • Continued to miple the standard underway to present consolidated view of Health and Safety information for the HSCP in a single view. This will enable trends and areas of concern to be easily identified and action taken.  • Collaborative working between the NHS and Council regards to Health and Safety, via a network of advisors ensures that the partnership correctly applies the required H&S standards.  • Recording of incidents, including violent incidents are reviewed by Service Managers with data presented on a regular basis prior to them being reviewed via the Joint Health and Safety sa cone objective  • Quidance for safe clinical and care environments is regularly reviewed and maintained  • Ongoing programme of staff training, including essential and statutory training, on health and safety issues (sharps, manual handing, and fire)  • Appropriate processes have been	by service demands and workforce constraints	d Initially when recorded this risk was in relation to the pressures introduced by	Risk Code	Category	Risk Management Approach		
time to be allocated to undertake training; and mandatory training. This could impact on the provision of a safe working and comparison between employing organisations difficult and patients / service users.  2. Differences in our reporting systems which can make recording and comparison between employing organisations difficult or staff and patients / service users.  3. The availability of appropriate courses, trainers and venues to complete the required number of hours required.  4. Continued compliance with Staff Governance standards  5. Creation of a dashboard underway to present consolidated view of Health and Safety information for the HSCP in a single view. This will enable trends and areas of concern to be easily identified and action taken.  6. Collaborative working between the NHS and Council regards to Health and Safety, via a network of advisors ensures that the partnership correctly applies the required H&S standards.  7. Recording of incidents, including violent incidents are reviewed by Service Managers with data presented on a regular basis prior to them being reviewed via the Joint Health and Safety, via a network of advisors ensures that the partnership correctly applies the required H&S standards.  8. Completion of individual risk assessments for clients and warning flag system in place on electronic care records.  9. Guidance for sade clinical and care enviewed by Service Managers with data presented on a regular basis prior to them being reviewed via the Joint Health and Safety as a core objective.  9. Ongoing programme of staff training, including essential and statutory training, on health and safety issues (sharps, manual handling, and fire)  9. Appropriate processes have been created and are invoked in cases of adverse weather for community-based services  9. Following investigations of significant adverse events (including RIDDOR reportable), process improvements are identified and implemented, being overseen via the most appropriate governance structure.  9. Occupational Health servic	differences in reporting systems, will impact on the timeous completion of and accurate reporting of mandatory training. This could impact on the provision of a safe working environment for staff and patients / service users.	CMT	Recruitment and retention issues and the subsequent increased	RSK15	Operational	Treat with Partners (Transfer)	
continued compliance with Staff Governance standards  Creation of a dashboard underway to present consolidated view of Health and Safety information for the HSCP in a single view. This will enable trends and areas of concern to be easily identified and action taken.  Continued compliance with Staff Governance standards  Creation of a dashboard underway to present consolidated view of Health and Safety information for the HSCP in a single view. This will enable trends and areas of concern to be easily identified and action taken.  Collaborative working between the NHS and Council regards to Health and Safety, via a network of advisors ensures that the partnership correctly applies the required H&S standards.  Recording of incidents, including violent incidents are reviewed by Service Managers with data presented on a regular basis prior to them being reviewed via the Joint Health and Safety Committee (includes trade unions)  Workforce planning activity will reinforce Health and Safety as a core objective  Completion of individual risk assessments for clients and warning flag system in place on electronic care records.  Guidance for safe clinical and care environments is regularly reviewed and maintained Ongoing programme of staff training, including essential and statutory training, on health and safety issues (sharps, manual handling, and fire)  Appropriate processes have been created and are invoked in cases of adverse weather for community-based services Following investigations of significant adverse events (including RIDDOR reportable), process improvements are identified and implemented, being overseen via the most appropriate governance structure.  Occupational Health services and staff support services are available and regularly communicated to staff.  Renfrewshire Council policies and procedures regards DSE assessments are regularly monitored  Mittgatting / Preventing Actions Planned  2. Differences in eventures, trainers and venues to 04 over 16 Ment 18 over 16 Ment 18 over 16 Ment 18 over 16 Ment 18		SIVII	time to be allocated to undertake training; and	Current Likelihood	Current Impact	Current Evaluation	
3. The availability of appropriate courses, trainers and venues to complete the required number of hours required.  Mitigating / Preventing Actions Complete or Ongoing  Continued compliance with Staff Governance standards Creation of a dashboard underway to present consolidated view of Health and Safety information for the HSCP in a single view. This will enable trends and areas of concern to be easily identified and action taken. Collaborative working between the NHS and Council regards to Health and Safety, via a network of advisors ensures that the partnership correctly applies the required H&S standards. Recording of incidents, including violent incidents are reviewed by Service Managers with data presented on a regular basis prior to them being reviewed via the Joint Health and Safety committee (includes trade unions) Workforce planning activity will reinforce Health and Safety as a core objective Completion of individual risk assessments for clients and warning flag system in place on electronic care records. Guidance for safe clinical and care environments is regularly reviewed and maintained Ongoing programme of staff training, including essential and statutory training, on health and safety issues (sharps, manual handling, and fire) Appropriate processes have been created and are invoked in cases of adverse weather for community-based services Following investigations of significant adverse events (including RIDDOR reportable), process improvements are identified and implemented, being overseen via the most appropriate governance structure. Coccupational Health services and saffs support services are available and regularly communicated to staff. Renfrewshire Council policies and procedures regards DSE assessments are regularly monitored  Mitigating / Preventing Actions Planned  Assigned to  Date  Status				05	04	20 High	
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Creation of a dashboard underway to present consolidated view of Health and Safety information for the HSCP in a single view. This will enable trends and areas of concern to be easily identified and action taken.  Collaborative working between the NHS and Council regards to Health and Safety, via a network of advisors ensures that the partnership correctly applies the required H&S standards.  Recording of incidents, including violent incidents are reviewed by Service Managers with data presented on a regular basis prior to them being reviewed via the Joint Health and Safety as a core objective  Completion of individual risk assessments for clients and warning flag system in place on electronic care records.  Guidance for safe clinical and care environments is regularly reviewed and maintained  Ongoing programme of staff training, including essential and statutory training, on health and safety issues (sharps, manual handling, and fire)  Appropriate processes have been created and are invoked in cases of adverse weather for community-based services  Following investigations of significant adverse events (including RIDDOR reportable), process improvements are identified and implemented, being overseen via the most appropriate governance structure.  Occupational Health services and staff support services are available and regularly communicated to staff.  Renfrewshire Council policies and procedures regards DSE assessments are regularly monitored  Mitigating / Preventing Actions Planned  Assigned to  Date  Status		Mitigating	/ Preventing Actions Complete or Ongoing	Assigned to	Date	Status	
Mitigating / Preventing Actions Planned Assigned to Date Status	Creation of a dashboard usingle view. This will enable Collaborative working betwithat the partnership correct Recording of incidents, included by the completion of individual rice Completion of individual rice Guidance for safe clinical Ongoing programme of stamanual handling, and fire) Appropriate processes has services Following investigations of identified and implemented Occupational Health services	nderway to pole trends an ween the NH titly applies the cluding violer eviewed via y will reinforces and care envaff training, in the been created, being over ces and staff	oresent consolidated view of Health and Safety information for the HSCP in a dareas of concern to be easily identified and action taken. S and Council regards to Health and Safety, via a network of advisors ensures are required H&S standards. In incidents are reviewed by Service Managers with data presented on a regular the Joint Health and Safety Committee (includes trade unions) are Health and Safety as a core objective ents for clients and warning flag system in place on electronic care records. Vironments is regularly reviewed and maintained including essential and statutory training, on health and safety issues (sharps, atted and are invoked in cases of adverse weather for community-based adverse events (including RIDDOR reportable), process improvements are seen via the most appropriate governance structure.		Historic	Ongoing	
Monthly review of training compliance continues.  SMT Review July 2023 Ongoin				Assigned to	Date	Status	
	Monthly review of training	compliance	continues.	SMT	Review July 2023	Ongoing	

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	N/A	
those with Addictions in Renfrewshire by the		life lost because of drug or alcohol harm is a tragedy.	Risk Code	Category	Risk Management	
range of partners within the 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	RSK16	Strategic	Treat with ADP	
recommendations being implemented from the	SMT	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	Current Likelihood	Current Impact	Current Evaluation	
Alcohol and Drug Commission, may not prevent future increases in the number of drug and alcohol related	<b>U</b>	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	
	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	
<ul> <li>Ensure that rapid res</li> <li>Adopted an assertive</li> <li>Have a clear pathway</li> <li>Developing and imple</li> <li>Continuing to implem</li> <li>Harm reduction unit of Drug death prevention</li> <li>Multiagency review a</li> </ul>	avigators avigators avigators esidential reh with colleagues tart of treatme outreach app in place for te menting the I ent the recom established in n officer role in nd discussion treach Team with other serv	abilitation services. Is from the emergency department at the RAH following near fatal overdoses. In the savailable following relapse. In the service users. In the service users users. In the service users us	ADP Head of MH, LD, and Addictions	Review July 2023	Ongoing	
who do not engage w	created to in					
who do not engage w	created to in	crease the number of Alcohol Brief Interventions delivered across Renfrewshire.  Mitigating / Preventing Actions Planned	Assigned to	Date	Status	

	held in November 2022 to agree processes. An Information Sharing Agreement remains underway. On completion, the group will be able to meet monthly to review drug-related deaths that have occurred in Renfrewshire.		
	, c		
•	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.		
•	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.		
	<b>'</b>		
•	There is now an Alcohol Provision SOP in place which addresses some of the deficits we have e.g., alcohol home detox is now a		
	routine treatment option. Now considering the next steps for the alcohol transition team.		

Risk Statement	Risk Owner	Risk Description	Movement	Reason for Mov	ement if applicable
		The Scottish Government have requested that Category One	No Change	!	N/A
	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 Scottish Government have		This risk arises from two potential scenarios:	RSK18	Operational	Treat
requested that Category One Responders create plans to cater for the impacts of potential power	Chief Officer	Planned power outages being possible over the winter period due to energy shortages (in a reasonable worst-case scenario)	Current Likelihood	Current Impact	Current Evaluation
outage on our critical services. This should reflect both planned and	Office Officer	Unplanned power outages due to a network failure or sever	03	05	15 Moderate
unplanned power outages.	weather event e.g., Similar to Storm Arwen.  This has been widely reported within the media. The UK Government recently completed the testing of a UK alert sys via the mobile network and a test exercise in readiness for Winter 2023-24.	veather event e.g., Similar to Storm Arwen.	Previous Likelihood	Previous Impact	Previous Evaluation
		via the mobile network and a test exercise in readiness for	03	05	15 Moderate
	Mitigating / Preventing Acti	ons Complete or Ongoing	Assigned to	Date	Status
<ul> <li>operational service delivery.</li> <li>Services have undertaken a RAC outage event.</li> </ul>	G process to understand the le	d services to look at the potential impacts of a power outage on our evel of service user needs and service provision within a power port service management and maintenance in such events.	Chief Officer	Historic	Ongoing
7 in approach to data managemen	Mitigating / Preventi		Assigned to	Date	Status
Additional planning includes o Identification of but o Identification of bat o Working with the c o Working with indep o Training for staff of	but is not limited to: ildings with back-up generato ck-up power, cooking, and lig ouncil and other partners reg	hting options ards any humanitarian responses required. ctors to support them with their planning. cident response	Chief Officer	End July 2023	Ongoing

ISS01 Issues regards a	attracting & reta	aining staff			
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
Obella a see Seettee discount		A number of services are now experiencing significant challenges with recruitment due to the following:	Issue Code	Category	Issue Management Approach
Challenges in attracting and retaining staff across a range of roles within HSCP services.		Changes due to the Scottish Government nursing agenda has resulted in some posts more attractive than others and also altering	ISS01	Operational	Treat
because of a range of factors, is contributing to constraints in	SMT	the role requirements (specified nursing degrees). District and School nursing are particularly affected.	Current Impact	Curren	t Evaluation
service delivery.		<ul> <li>Varying rates of pay and conditions across HSCPs</li> <li>A general shortage locally and nationally for specific roles.</li> </ul>	05	Е	extreme
		<ul> <li>A perceived reduction in number of applicants for frontline roles such as Care at Home in light of the impact of the pandemic and its associated challenges.</li> </ul>	Previous Likelihood	Previou	s Evaluation
		The NCS Bill is also adding uncertainty for the future of social care roles.	05	E	xtreme
	Mitigating and Reco	very Actions Complete or Ongoing	Assigned to	Date	Status
<ul> <li>absence management process revalidation and adherence to a Implementation of alternative re</li> <li>Development of interim workfor 2022</li> <li>Winter planning – 3-month forw with services – to identify any p</li> <li>Contingency exercise complete</li> </ul>	es, regular review / refres application checklists (e ceruitment routes where ce plan 2021-22, and a vard plan completed to cossible additional staffind to identify staff who a atus dashboard, and da	possible in agreement with HR & OD workforce plan for 2022 to 25 which approved by the IJB in November ensure adequate staffing and contingency. Scenario planning completed an mitigations. This has been revisited for Winter Plan 2022/23. The willing to volunteer to support other services should the situation arise. The situation arise illy situational reporting established for critical services regards staffing.	HSCP SMT	Review August 2023	Ongoing
		Recovery Actions Planned	Assigned to	Date	Status
<ul><li>defining innovative approaches</li><li>NHS GGC work to 'grow our ov</li></ul>	to recruitment. vn' professionals undervorative working continue	identify and complete actions to improve staff retention and recruitment, way allowing candidates to earn whilst they train. es with Primary Care and cluster support for GP practices / services. e plan for 2022-25	HSCP SMT	Review August 2023	Ongoing

ISS02 IJB Financia	al Resilience				
Issue Statement	Issue Owner	Issue Description	Movement	Reason for Movement if applicable	
Budgetary position represents a real challenge for this and future financial years. Significant sums of funding from our reserves are having to be utilised in this financial year, alongside the delivery of a programme of financial savings which will have a direct impact on front line services.	SMT	The March IJB agreed the proposed budget and the sustainable futures paper which outlined some high-level savings proposals for delivery in this financial year.  To achieve the proposed balanced budget significant sums from our reserves are being utilised, circa £6m subject to some confirmation of some additional partner charges for 22-23 financial year.  Use of reserves to facilitate budgetary balance in 2023/24 leaves the IJB a general reserve of c0.4% of its net budget; far below the 2% target outlined in the IJBs Reserves Policy. This represents a significant risk to the IJB and means the financial resilience of the IJB in future years will be severely comprised. The use of non-recurring support to balance the 2023/24 budget also means the IJBs budget is no longer in recurring balance.  This will have an impact on our ability to deliver on our Strategic Plan, what can be delivered and when. As we go into 2023/24 and beyond this will require the IJB to prioritise decisions for investment and disinvestment in order to deliver on our priority of a sustainable future.	New	New to log following March IJB	
			Issue Code	Category	Issue Management Approach
			ISS02	Financial	Accept
			Current Impact	Current Evaluation	
			05	Extreme	
			Previous Likelihood	Previous Evaluation	
			NA	NA	
Mitigating and Recovery Actions Complete or Ongoing			Assigned to	Date	Status
Ongoing work to review partner costs and to identify potential savings areas for consideration.			HSCP SMT	Review August 2023	Ongoing
Mitigating / Recovery Actions Planned			Assigned to	Date	Status
<ul> <li>A new market facilitation plan is being created for Renfrewshire to provide some guidance on future direction of travel</li> <li>A programme of activity to identify, scope and implement a range of savings proposals is underway. Approach and scope will be shared with IJB in June 2023, and fu</li> </ul>			HSCP SMT	Review August 2023	Ongoing

[This concludes the RHSCP Risk and Issue Report for 23 June 2023 IJB Audit, Risk & Scrutiny Committee]