







Integration Joint Boards

Risk Management Policy and Strategy

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Appendix 1 Risk Matrix

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Policy - The Risk Management Approach and Vision

- 1.1 The Integration Joint Boards (IJBs) are committed to a culture where the workforce is encouraged to develop new initiatives, improve performance and achieve goals safely, effectively and efficiently by appropriate application of good risk management practice.
- 1.2 In doing so the aim is to provide safe and effective care and treatment for patients and clients, and a safe environment for everyone working within the IJBs and others who interact with the services delivered under their direction.
- 1.3 The IJBs believe that appropriate application of good risk management will prevent or mitigate the effects of loss or harm and will increase success in the delivery of objectives, better clinical and financial outcomes, achievement of targets and fewer unexpected problems.

Key benefits of effective risk management:

- appropriate, defensible, timeous and best value decisions are made;
- risk 'aware' not risk 'averse' decisions are based on a balanced appraisal of risk and enable acceptance of certain risks in order to achieve a particular goal or reward;
- high achievement of objectives and targets;
- high levels of morale and productivity;
- better use and prioritisation of resources;
- high levels of user experience/ satisfaction with a consequent reduction in adverse events, claims and/ or litigation; and
- a positive reputation established for the Integration Joint Boards.
- 1.4 They purposefully seek to promote an environment that is risk 'aware' and strive to place risk management information at the heart of key decisions. This means that the IJBs can take an effective approach to managing risk in a way that both address significant challenges and enable positive outcomes.
- 1.5 The IJBs promote the pursuit of opportunities that will benefit the delivery of the Strategic Plan. Opportunity-related risk must be carefully evaluated in the context of the anticipated benefits for patients, clients and the IJBs.
- 1.6 The IJBs will receive assurance reports (internal and external) not only on the adequacy but also the effectiveness of its risk management arrangements and will consequently value the contribution that risk management makes to their wider governance arrangements.
- 1.7 The IJBs, through the following risk management strategy, has established a Risk Management Framework, (which covers risk policy, procedure, process, systems, risk management roles and responsibilities).

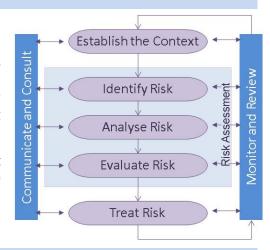
Strategy - Implementing the Policy

1. Introduction

- 1.1 The primary objectives of this strategy will be to:
 - promote awareness of risk and define responsibility for managing risk within the IJBs;
 - establish communication and sharing of risk information through all areas of the IJBs
 - initiate measures to reduce the IJBs exposure to risk and potential loss; and,
 - establish standards and principles for the efficient management of risk, including regular monitoring, reporting and review.
- 1.2 This strategy takes a positive and holistic approach to risk management. The scope applies to all risks, whether relating to the clinical and care environment, employee safety and wellbeing, business risk, opportunities or threats.
- 1.3 **Strategic risks** represent the potential for the IJBs to achieve (opportunity) or fail to meet (threat) its desired outcomes and objectives as set out within their Strategic Plans, and typically these risks require strategic leadership in the development of activities and application of controls to manage the risk.
- 1.4 Operational risks represent the potential for impact (opportunity or threat) within or arising from the activities of an individual service area or team operating within the scope of the IJBs activities. Parent bodies will retain responsibility for managing operational risks as operational or service risks which will be more 'front-line' in nature and the development of activities and controls to respond to these risks can be led by local managers and team leaders. Where a number of operational risks impact across multiple service areas or, because of interdependencies, require more strategic leadership, then these can be proposed for escalation to 'strategic risk' status for the IJB.
- 1.5 All risks will be analysed consistently with an evaluation of risk as being probability/likelihood x consequence/impact. Please refer to Appendix 1.
- 1.6 This document represents the risk management framework to be implemented across the Joint Boards and will contribute to their wider governance arrangements.

2. Risk management process

- 2.1 Risk Management is about the culture, processes and structures that are directed towards realising potential opportunities whilst managing adverse effects¹ It is proactive in understanding risk and uncertainty, it learns and builds upon existing good practice and is a continually evolving process that has an important role in ensuring that defensible and beneficial decisions are made.
- 2.2 The IJBs embed risk management practice by consistent application of the risk management process shown in the diagram on the right, across all areas of service delivery and business activities.



3. Application of good risk management across the IJB activities

3.1 Standard procedures (3.1.1 – 3.1.9 will be implemented across all areas of activity that are under the direction of the IJBs in order to achieve consistent and effective implementation of good risk management.

¹ Australia/ New Zealand Risk Management Standard, AS/NZS 4360: 2004

- 3.1.1 Full implementation of the risk management process. This means that risk management information should (wherever possible) be used to guide major decisions in the same way that cost and benefit analysis is used.
- 3.1.2 Identification of risk using standard methodologies, and involving subject experts who have knowledge and experience of the activity or process under consideration.
- 3.1.3 Appropriate ownership of risk: Specific risks will be owned by/assigned to and managed by those individual/s who are best placed to oversee the risk and manage the development of any new risk controls required by the Chief Officer of the relevant IJB in conjunction with the Chief Executive from Health.
- 3.1.4 Consistent application of the agreed risk matrix to analyse risk in terms of likelihood of occurrence and potential impact, taking into account the effectiveness of risk control measures in place. The risk matrix to be used is attached in Appendix 1.
- 3.1.5 Consistent response to risk that is proportionate to the level of risk. This means that risk may be terminated; transferred elsewhere (ie to another partner or third party); tolerated as it is; or, treated with cost effective measures to bring it to a level where it is acceptable or tolerable for the IJBs. In the case of opportunities, the IJB may 'take' an informed risk in terms of tolerating it if the opportunity is judged to be (1) worthwhile pursuing and (2) the IJB is confident in its ability to achieve the benefits and manage/ contain the associated risk.
- 3.1.6 Implementation and maintenance of risk registers as a means of collating risk information in a consistent format allowing comparison of risk evaluations, informed decision-making in relation to prioritising resources and ease of access to information for risk reporting.
- 3.1.7 Reporting of strategic risks and key operational risks to the IJB on a quarterly basis.
- 3.1.8 Operation of a procedure for movement of risks between strategic and operational risk registers that will be facilitated by the IJB.
- 3.1.9 Routine reporting of risk information within and across teams and a commitment to a 'lessons learned' culture that seeks to learn from both good and poor experience in order to replicate good practice and reduce adverse events and associated complaints and claims.

Risk Leadership and Accountability

4. Governance, roles and responsibilities

4.1 Integration Joint Boards

Members of the Integration Joint Boards are responsible for:

- oversight of the IJBs risk management arrangements;
- receipt, review and scrutiny of reports on strategic risks and any key operational risks that require to be brought to the IJBs attention; and,
- ensuring they are aware of any risks linked to recommendations from the Chief Officer concerning new priorities/ policies and the like (A 'risk implications' section on relevant board papers could facilitate this).

4.2 Chief Officer

The Chief Officers have overall accountability for the IJBs risk management framework, ensuring that suitable and effective arrangements are in place to manage the risks relating to the functions within the scope of the IJB. The Chief Officers will keep the Chief Executives of the IJBs partner bodies (Council and Health) informed of any significant existing or emerging risks that could seriously impact the IJB's ability to deliver the outcomes of their Strategic Plans or the reputation of the IJB.

4.3 Senior Management Team

Members of the Senior Management Team are responsible (either collectively, or by nominating a specific member of the team) for:

- supporting the Chief Officer in fulfilling their risk management responsibilities;
- arranging professional risk management support, guidance and training from partner bodies;
- receipt and review of regular risk reports on strategic, shared key operational risks and escalating any matters of concern to the IJB; and,
- ensuring that the standard procedures set out in section three of this strategy are actively promoted across their teams and within their areas of responsibility.

4.4 Individual Risk Owners/Risk Managers

It is the responsibility of each risk owner/manager to ensure that:

- risks assigned to them are analysed in keeping with the agreed risk matrix both for probability / likelihood and consequence / impact taking into account exisitng controls and the potential likelihood and consequences after treatment of the risk
- data on which risk evaluations are based are robust and reliable;
- risks are defined clearly to make explicit the scope of the challenge, opportunity or hazard and the consequences that may arise;
- the whole risk is reviewed not only in terms of likelihood and impact of occurrence, but takes account of any changes in context that may affect the risk;
- controls that are in place to manage the risk or which are proposed are proportionate to the context and level of risk and are effective in practice
- risks are recorded using the framework in Appendix 2.

4.5 All persons working under the direction of the IJB

Risk management should be integrated into daily activities with everyone involved in identifying current and potential risks where they work. Individuals have a responsibility to make every effort to be aware of situations which place them or others at risk, report identified hazards and implement safe working practices developed within their service areas. This approach requires everyone to:

- understand the risks that relate to their roles and activities;
- understand how their actions relate to their own, their patient's, their services user's/ client's and public safety;
- understand their accountability for particular risks and how they can manage them;

- understand the importance of flagging up incidents and/ or near misses to allow lessons to be learned and contribute to ongoing improvement of risk management arrangements; and,
- understand that good risk management is a key part of the IJB's culture.

4.6 Partner Bodies

It is the responsibility of relevant specialists from the partner bodies, (such as internal audit, external audit, risk managers and health and safety advisers) to attend meetings as necessary to consider the implications of risks and provide relevant advice. It is the responsibility of the partner bodies to ensure they routinely seek to identify any residual risks and liabilities they retain in relation to the activities under the direction of the IJB.

Resourcing Risk Management

5. Resourcing the risk management framework

- 5.1 Much of the work on developing and leading the ongoing implementation of the risk management framework for the Joint Boards will be resourced through the Senior Management Team's arrangements (referred to in 4.3).
- 5.2 Wherever possible the IJBs will ensure that any related risk management training and education costs will be kept to a minimum, with the majority of risk-related courses/ training being delivered through resources already available to the IJB (the partner body risk managers/ risk management specialists).

6. Resourcing those responsible for managing specific risks

- 6.1 Where risks impact on a specific partner body and new risk control measures require to be developed and funded, it is expected that this will be taken forward by the partner organisation, within current resource where possible.
- 6.2 Financial decisions in respect of the IJBs risk management arrangements will rest with the Chief Financial Officer.

Training, Learning and Development

7. Risk management training and development opportunities

- 7.1 To implement effectively this policy and strategy, it is essential for people to have the competence and capacity for managing risk and handling risk judgements with confidence, to focus on learning from events and past experience in relation to what has worked well or could have been managed better, and to focus on identifying malfunctioning 'systems' rather than people.
- 7.2 Training is important and is essential in embedding a positive risk management culture across all activities under the direction of the IJBs and in developing risk management maturity. The Senior Management Teams will regularly review risk management training and development needs and source the relevant training and development opportunities required (referred to in 4.3).

Monitoring Activity and Performance

8. Monitoring risk management activity

- 8.1 The IJBs operate in a dynamic and challenging environment. A suitable system is required to ensure risks are monitored for change in context and scoring so that appropriate response is made.
- 8.2 Monitoring will include review of the IJBs risk profile at Senior Management Team level on a quarterly basis when all strategic, operational and shared risks will be considered.
- 8.3 It is expected that partner bodies will use IJBs risk reports to keep their own organisations updated on the management of the risks, highlighting any IJBs risks that might impact on the partner organisation.

9. Monitoring risk management performance

- 9.1 Measuring, managing and monitoring risk management performance is key to the effective delivery of key objectives.
- 9.2 The performance data linked to the Strategic Plans will also inform the identification of new risks or highlight where existing risks require more attention.
- 9.3 Reviewing the IJBs risk management arrangements on a regular basis will also constitute a 'Plan/Do/ Study/ Act review cycle that will shape future risk management priorities and activities of the IJB, inform subsequent revisions of this policy and strategy and drive continuous improvement in risk management across the IJB.

Communicating Risk Management

10 Communicating, consulting on and reviewing the risk management framework

- 10.1 Effective communication of risk management information across the IJBs is essential to developing a consistent and effective approach to risk management.
- 10.2 Copies of this policy and strategy will be widely circulated via the Senior Management Teams and will form the basis of any risk management training arranged by the IJBs.
- 10.3 The Policy and Strategy (version 1.0) was approved by the Integration Joint Boards at its meeting of [00/00/0000].
- 10.4 This policy and strategy will be reviewed annually by the Risk Managers from NHS Tayside and the Local Authorities to ensure that it reflects current standards and best practice in risk management and fully reflects the Integration Joint Boards business environment.

Appendix 1 Risk Matrix

	Critical/Extreme (5)	5	10	15	20	25
relices	Major (4)	4	8	12	16	20
	Significant/Moderate (3)	3	6	9	12	15
IIIpacu	Marginal/Minor (2)	2	4	6	8	10
	Negligible (1)	1	2	3	4	5
		Very Low/Rare	Low/ Unlikely	Low to High/ Possible	High/ Likely	Very High/ Almost Certain
		(1)	(2)	(3)	(4)	(5)

Likelihood/Probability

Impact/Consequences

Appendix 2 Risk Framework

RISK FRAMEWORK

Risk Description: Set out which events could impact on the achievement of the objective and their potential consequences		Risk Owner:		
This should be structured which separates cause, risk and effect e.g. "As a result of (1 – Existing Condition), (2 – occur, which would lead to (3 – effect on objectives).	Risk Manager:			
	IJB: Insert the name of the Integration Joint Board to which this risk is reported into			
Objective: Identify which relevant objective this risk relates/links to.		Date last reviewed: Insert the date the risk was last reviewed and updated even if no changes are made		
		Date of next review: If due for review	nsert the date when	the risk is next
Risk Rating:	Rationale for currer			
(Likelihood x consequence):	This should explain the nature of the risk in more detail but also set out why the score is currently as it is; wherever possibly using the descriptors from the risk management matrix			
Current (risk grade at time of risk review): (IXC)				
Planned (anticipated risk grading after all mitigating actions have been implemented): (IXC)	Rationale for planned score: This should set out why the planned score is both desirable and achievable.			
Current Controls (what are we currently doing about the risk?) Ongoing actions designed to mitigate the risk that are already in place and working effectively: Whilst difficult to judge with precision, the key controls are those that mitigate the risk from its inherent level to its current level. If a control does not have that level of impact then it should be recorded on an operational risk (below) but not necessarily included here.	do?) These are the futurisk down from its current action is not likely to have be necessary to include it focused on the most impo If the list of actions will not down to the required level with a clear statement of v to identify the actions required actions which will take	this impact, then it may not so that attention can be rtant controls. It in themselves bring the risk then this should be identified, what future work will be done lired. If conversely, there are the risk down to its planned is unachievable and should	Responsible Person	Timescale

Assurances (How do we know controls are in place and functioning as expected?) Please provide details of Reports to Committee which provide information on how the key controls above are operating in practice or direct data on the status of the risk e.g. performance data. A review of the reports which do go to the Committee will identify assurances. However, there must be consideration of whether the reports as they are currently constituted actually provide direct assurance on the operation of the key controls and whether they are constructed in such a way as to ensure that this is	Independent Assurances Please provide details of independent scrutiny e.g. Internal and External Reports etc.			
highlighted. Where a control is being operated within a sub-group, it is not enough for minutes to be presented. The areas where assurance on key controls is being provided should be overt and unequivocal	Gaps in assurance (what additional assurances should we seek?)			
Current performance (with these actions taken, how serious is the problem?) Set out an assessment of how well the risk is currently being mitigated and controls being applied effectively. If possible, very high level performance and other data which outline current status and provide a judgement on whether this is in line with expectations would reinforce the conclusion.	Additional Comments: Any other information that might provide a useful insight or without which the picture presented by the risk framework is incomplete			