



**ANGUS HEALTH AND SOCIAL CARE
INTEGRATION JOINT BOARD – 18 APRIL 2018
RISK REGISTER UPDATE – MARCH 2018
REPORT BY VICKY IRONS, CHIEF OFFICER**

ABSTRACT

To provide Integration Joint Board (IJB) members with an update on the reporting of strategic and key operational risks to the IJB to March 2018.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board approves:-

- (i) a review of systems of risk management and assurance mechanisms for key controls.
- (ii) monitoring and review of the IJBs Risk Rating Matrix at the Executive Management Team (EMT) on a quarterly basis.
- (iii) strategic risks are reviewed within the Strategic Planning Group at a frequency to be agreed.
- (iv) operational risks are reviewed within the Senior Leadership Team at a frequency to be agreed.
- (v) Clinical, Care and Professional Governance (CCPG) risks are reviewed within the CCPG Forum on a bi-monthly basis.
- (vi) Financial risks are reviewed within the appropriate Finance Group at a frequency to be agreed.
- (vii) an annual report will be submitted to the Angus HSCP IJB Audit Committee.

2. BACKGROUND

Members of the IJB 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

Angus Health and Social Partnership, and other Partnerships in Tayside will be audited with regard to its Risk Management Policy and Strategy Implementation this year.

Risks to the implementation of the Risk Management Policy and Strategy have been identified within scope for this audit:

- The organisation may not be managing risks appropriately because it does not have a comprehensive risk management framework, congruent with those of its partner organisations in place comprising appropriate strategy, structures, policies and procedures based on sound risk management principles appropriate to integrated working;
- Risk are not considered and addressed as part of all decision making activities;
- All relevant strategic and operational risks may not be accurately identified, assessed, evaluated, recorded and monitored;
- The quality of data including risks, controls and assurance may not be to the required standard;
- Risk responses may not be appropriate and aligned with an appropriately defined and approved risk appetite;
- Relevant risk information may not be captured and communicated in a timely manner across the organisation, enabling staff, management and the board to carry out their responsibilities;
- Users may not have appropriate knowledge of, and access to, robust risk management systems which are structured to allow partnership working;
- Training and awareness for all stakeholders of the risk management process may be insufficient;
- Adequate resources may not available to support the risk management process;
- Risks with partner organisations may not be appropriately managed:
 - Responsibility for managing operational risks is clearly assigned
 - Effective assurance and reporting arrangements are in place over all risks relating to delegated functions
 - Appropriate assurances are provided to all relevant bodies and their Audit Committees on the operation of risk management and the integrity of systems

AUDIT OBJECTIVE: The audit work will be designed to evaluate whether appropriate systems are in place and operating effectively to mitigate the risks identified above.

3. CURRENT POSITION

The current Risk Management Policy and Strategy outlines the governance roles and responsibilities for risk leadership within the Health and Social Care Partnership.

The Chief Officer has overall accountability for the IJB's risk management framework and reporting to the IJB. Members of the Senior Management team are responsible for supporting the Chief Officer in fulfilling their risk management responsibility. Individual risk owners and risk managers are responsible for analysing, evaluating, defining, reviewing, controlling and recording the risks.

Currently the entire risk management register is monitored at the Clinical, Care and Professional Governance Group on a bi-monthly basis. Red risks are discussed and all other risks are regularly reviewed. It is recommended the review of systems of risk management assessment and assurance mechanisms are undertaken by the Angus HSCP IJB Audit Committee.

Measuring, managing and monitoring risk management performance is key to the effective delivery of key objectives.

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Appendix 1 – Angus Health & Social Care Partnership – Risk Management Register