



Aberdeen City Health & Social Care Partnership

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Strategic Risk Register 2018/19

Revision	Date
1.	March 2018
2.	September 2018



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Introduction & Background

This document is made publicly available on our website, in order to help stakeholders (including members of the public) understand the challenges currently facing health and social care in Aberdeen.

This is the strategic risk register for the Aberdeen City Integration Joint Board, which lays the foundation for the development of work to prevent, mitigate respond to and recover from the recorded risks against the delivery of its strategic plan.

Just because a risk is included in the Strategic Risk Register does not mean that it will happen, or that the impact would necessarily be as serious as the description provided.

More information can be found in the Board Assurance and Escalation Framework and the Risk Appetite Statement.

Risk Rating	Low	Medium	High	Very High
Risk Movement	Decrease	No Change	Increase	



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Level of Risk	Risk Tolerance
Low	<p>Acceptable level of risk. No additional controls are required but any existing risk controls or contingency plans should be documented.</p> <p>Chief Officers/Managers/Risk Owners should review these risks applying the minimum review table within the risk register process document to assess whether these continue to be effective.</p>
Medium	<p>Acceptable level of risk exposure subject to regular active monitoring measures by Managers/Risk Owners. Where appropriate further action shall be taken to reduce the risk but the cost of control will probably be modest. Managers/Risk Owners shall document that the risk controls or contingency plans are effective.</p> <p>Chief Officers/Managers/Risk Owners should review these risks applying the minimum review table within the risk register process document to assess whether these continue to be effective.</p> <p>Relevant Chief Officers/Managers/Directors/Assurance Committees will periodically seek assurance that these continue to be effective.</p>
High	<p>Further action should be taken to mitigate/reduce/control the risk, possibly urgently and possibly requiring significant resources. Chief Officers/Managers/Risk Owners must document that the risk controls or contingency plans are effective. Managers/Risk Owners should review these risks applying the minimum review table within the risk register process document to assess whether these continue to be effective.</p> <p>Relevant Chief Officers/Managers/Directors/Executive and Assurance Committees will periodically seek assurance that these continue to be effective and confirm that it is not reasonably practicable to do more. The IJB's may wish to seek assurance that risks of this level are being effectively managed.</p> <p>However the IJB's may wish to accept high risks that may result in reputation damage, financial loss or exposure, major breakdown in information system or information integrity, significant incidents(s) of regulatory non-compliance, potential risk of injury to staff and public</p>
Very High	<p>Unacceptable level of risk exposure that requires urgent and potentially immediate corrective action to be taken. Relevant Chief Officer/Managers/Directors/Executive and Assurance Committees should be informed explicitly by the relevant Managers/Risk Owners.</p> <p>Managers/Risk Owners should review these risks applying the minimum review table within the risk register process document to assess whether these continue to be effective.</p> <p>The IJB's will seek assurance that risks of this level are being effectively managed.</p> <p>However the IJB's may wish to accept opportunities that have an inherent very high risk that may result in reputation damage, financial loss or exposure, major breakdown in information system or information integrity, significant incidents(s) of regulatory non-compliance, potential risk of injury to staff and public</p>



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Risk Summary:

1	There is a risk of significant market failure in Aberdeen City: a. Adult Social Care b. General Practice Services	High
		High
2	There is a risk of financial failure, that demand outstrips budget and IJB cannot deliver on priorities, statutory work, and projects an overspend.	High
3	There is a risk that the outcomes expected from hosted services are not delivered and that the IJB does not identify non-performance in through its systems. This risk relates to services that Aberdeen IJB hosts on behalf of Moray and Aberdeenshire, and those hosted by those IJBs and delivered on behalf of Aberdeen City.	High
4	There is a risk that relationship arrangements between the IJB and its partner organisations (Aberdeen City Council & NHS Grampian) are not managed to maximise the full potentials of integrated & collaborative working. This risk covers the arrangements between partner organisations in areas such as governance; corporate service; and performance.	Medium
5	There is a risk that the IJB, and the services that it directs and has operational oversight of, fail to meet both performance standards/outcomes as set by regulatory bodies and those locally-determined performance standards as set by the board itself. This may result in harm or risk of harm to people.	Medium
6	There is a risk of reputational damage to the IJB and its partner organisations resulting from complexity of function, delegation and delivery of services across health and social care	Medium
7	Failure to deliver transformation at a pace or scale required by the demographic and financial pressures in the system	High
8	There is a risk that the IJB does not maximise the opportunities offered by locality working	High
9	There is a risk of failure to recruit and that workforce planning across the Partnership is not sophisticated enough to maintain future service deliver	High



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Description of Risk: There is a risk of significant market failure in Aberdeen City – Adult Social Care Services

The delivery of adult social care services in Aberdeen is almost 100% outsourced to third party providers operating in either the third or private/independent sector. The social care market is a difficult one to operate in. The business is demand led, the overheads are getting higher, and the main source of funding (i.e. the Partnership) is suffering reduced budgets yet constantly looking for providers to be innovative and to do more with less, or at least the same. For those providing residential services, property costs are high and every year there are more and more demands in relation to Care Inspectorate registration. For all providers, recruitment and retention of staff is an issue and this isn't just about pay. The introduction of the Scottish Living Wage has helped to some extent but delivering social care is not necessarily seen as a profession or vocation in the same way as health care and there are additional complications such as training and insurance requirements that seem to put more barriers up. Providers need staff to deliver the services, but they also need a degree of certainty over the business available to them in order to recruit and train the staff they need. All of this makes for, at best, a challenging environment, at worst, an uncertain commercial viability. This reliance on external provision combined with the difficult operating environment means there is a risk to the partnership should these fragile arrangements break down and result in significant market failure in Aberdeen. If we do not have sufficient capacity in the market or the appropriate infrastructure in-house then there is a risk that we fail to deliver on our statutory duty to provide adult social care services.

Strategic Priority: Outcomes, safety and transformation

Executive Team Owner: Head of Strategy and Transformation

Risk Rating: low/medium/high/very high

HIGH

Rationale for Risk Rating:

- While there has previous provider failure in City (and across Scotland), this has provided valuable experience and an opportunity for learning)
- Discussion with current providers and understanding of market conditions across the UK and in Aberdeen locally.
- Impact of Living Wage on profitability depending on some provider models.
- There is a risk that providers may have to backdate the payment for hourly rates for sleepovers. This is currently being considered through the legal system.



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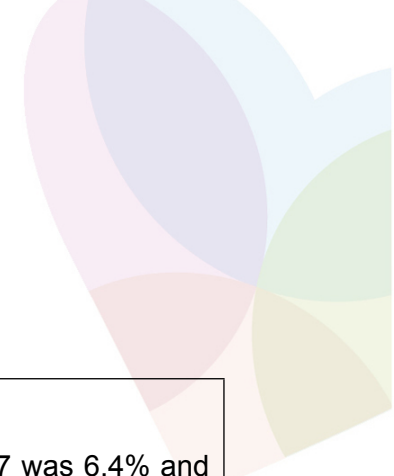
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<p>Risk Movement: increase/decrease/no change</p> <p style="text-align: center;">NO CHANGE 24.07.2018</p>	<p>Rationale for Risk Appetite:</p> <ul style="list-style-type: none"> As 3rd and independent sectors are key strategic partners in delivering transformation and improved care experience, we have a low tolerance of this risk
<p>Controls:</p> <p>Robust market and relationship management with the 3rd and independent sector and their representative groups. Market facilitation programme and robust contract monitoring process</p>	<p>Mitigating Actions:</p> <ul style="list-style-type: none"> The IJB's commissioning model has an influence on creating capacity and capability to manage and facilitate the market Development of provider forum and peer mentorship to support relationship and market management Risk fund set aside with transformation funding Additional Scottish Government funding toward the Living Wage and Fair Working Practices have been agreed and applied by the IJB Lessons learned during a recent experience of managing a residential home should market failure occur. Strategic Commissioning Implementation & Market Facilitation Plan was approved by the IJB in January 2018. Progress will be monitored and reported back to the IJB on an annual basis.
<p>Assurances:</p> <ul style="list-style-type: none"> Market management and facilitation Inspection reports from the Care Inspectorate Contract monitoring process 	<p>Gaps in assurance:</p> <ul style="list-style-type: none"> Market or provider failure can happen quickly despite good assurances being in place.



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Current performance:

- The Partnership/ACC had to step in and take control of a nursing home in Kingswells on 1st of April 2017. This has provided the Partnership with experience of how to take control and run a residential home should a provider fail. However, capacity only exists to deal with one residential home at a time and if two homes failed at the same time the resources would be stretched.
- We now have the policy decision that staff providing overnight care (sleepovers) should be paid at the Scottish Living Wage rate and we are currently investigating whether we can safely reduce the number of sleepovers required. Although any increased rate will be funded, this represents a further change for care providers and could result in them losing experienced staff. There is a risk of this needing to be back-dated for six years.
- We were recently made aware of the potential of a national care provider closing services due to financial pressures. The root of these pressures were south of the borders and although the closures did not materialise this is only as a result of a temporary re-financing arrangement and this situation further confirms the likelihood of market failure.

Comments:

- National Care Home Contract uplift for 2016/17 was 6.4% and 2.8% 2017/18. Negotiations with individual providers are currently taking place for uplifts specific to their needs of up to 3.8%.
- IJB agreed payment of living wage to Care at Home providers for 2016/17 2017/18 and 2018/19



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<p>Description of Risk: There is a risk of significant market failure in Aberdeen City – Primary Care Services</p> <p>Most General Practice (GP) Services are delivered via private contractors in the city via a General Medical Services (GMS) Contract. There are increasing challenges in attracting and retaining the GP workforce, and many GP practices are operating under a traditional GP heavy model. This is evidenced over recent years by contracts being handed back at relatively short notice. While there are mitigations in place and being developed, for example the new GMS Contract and developing Primary Care Improvement Plan, there is still a high risk of market failure in this area. Where independent practices close, this has implications for safe continuity of care for the practice population, as well as taking up significant partnership resources and there are significant reputational risks to the partnership.</p>	
<p>Strategic Priority: Outcomes, safety and transformation</p>	<p>Executive Team Owner: Clinical Director</p>
<p>Risk Rating: low/medium/high/very high</p> <div style="background-color: yellow; text-align: center; padding: 5px; font-weight: bold; font-size: 1.2em;">HIGH</div>	<p>Rationale for Risk Rating:</p> <ul style="list-style-type: none"> Considered a high risk due as several GP practices have required support from ACHSCP over the past 2 years, most recently Torry Medical Practice and Rosemount Medical Group. <p>Rationale for Risk Appetite:</p>
<p>Risk Movement: increase/decrease/no change</p> <div style="border: 1px solid black; padding: 5px; text-align: center; font-weight: bold;">NEW RISK 24.07.2018</div>	
<p>Controls:</p> <ul style="list-style-type: none"> Clinical & Care Governance Group GP Contracts and Contract Review visits GP Sustainability Risk Review 	<p>Mitigating Actions:</p> <ul style="list-style-type: none"> Developing Primary Care Improvement Plan Implementation of the new GMS Contract



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Assurances: <ul style="list-style-type: none">• Outputs from GP Contract Reviews• Clinical & Care Governance Committee	Gaps in assurance: <ul style="list-style-type: none">• Even with the best monitoring system, the closure of a practice can happen very quickly, with (in some cases) one partner retiring or becoming ill being the catalyst.
Current performance: <ul style="list-style-type: none">• Ongoing support to a GP Practice in the city to ensure continuation of GMS Services in the area after the practice hands back its contract in August.• Options appraisal relating to another GP practice in the City will be presented to the IJB in August.	Comments:



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<p>Description of Risk: There is a risk of IJB financial failure and projecting an overspend, due to demand outstripping available budget, which would impact on the IJB's ability to deliver on its strategic plan (including statutory work).</p>	
<p>Strategic Priority: Outcomes and transformation</p>	<p>Executive Team Owner: Chief Finance Officer</p>
<p>Risk Rating: low/medium/high/very high</p> <div style="background-color: yellow; text-align: center; padding: 5px;">HIGH</div>	<p>Rationale for Risk Rating: If the partnership fails financially then decisions will be required to stop services. In a health and social care environment this is difficult to do given the reliance service users place on these services. It could also impact on the delivery of the strategy plan as officer's time would be diverted from transformational activities to balance the budget.</p> <p>Rationale for Risk Appetite: The IJB has a low-moderate risk appetite to financial loss and understands its requirement to achieve a balanced budget. The IJB recognises the impacts of failing to achieve a balanced budget on Aberdeen City Council & its bond – an unmanaged overspend may have an impact on funding levels.</p> <p>However the IJB also recognises the significant range of statutory services it is required to meet within that finite budget and has a lower appetite for risk of harm to people (low or minimal).</p>
<p>Risk Movement: increase/decrease/no change:</p> <div style="background-color: yellow; text-align: center; padding: 5px;">NO CHANGE 24.07.2018</div>	



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<p>Controls: Budgets delegated to cost centre level and being managed by budget holders.</p>	<p>Mitigating Actions:</p> <ul style="list-style-type: none"> • Financial information is reported regularly to the Audit & Performance Systems Committee, the Integration Joint Board and the Executive Team. • Reserves strategy, including risk fund • Robust financial monitoring and budget setting procedures including regular budget monitoring & budget meeting with budget holders • Development of a Medium-Term Financial Strategy (approved by the IJB at its meeting on the 27th March 2018) • Audit & Performance Systems receives regular updates on transformation programme & spend.
<p>Assurances:</p> <ul style="list-style-type: none"> • Audit and Performance Systems Committee oversight and scrutiny of budget under the Chief Finance Officer. • Board Assurance and Escalation Framework. • Quarterly budget monitoring reports. • Regular budget monitoring meetings between finance and budget holders. 	<p>Gaps in assurance:</p> <ul style="list-style-type: none"> • None known – noting that the financial environment is challenging and requires regular monitoring. • Financial failure of hosted services may impact on ability to deliver strategic ambitions.
<p>Current performance:</p> <ul style="list-style-type: none"> • Year-end position for 2017/18 • Forecasted year end position 2018/19 (when available) • Projected overspend/underspend on mainstream budgets (when available) and whether can be accommodated from within total budget 	<p>Comments:</p> <ul style="list-style-type: none"> • Regular and ongoing budget reporting and tight management control in place. • Budget monitoring procedure now well established. • Budget holders understand their responsibility in relation to financial management.



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Description of Risk: There is a risk that hosted services do not deliver the expected outcomes, fail to deliver transformation of services, or face service failure and that the IJB fails to identify such non-performance through its own systems and pan-Grampian governance arrangements.

This risk relates to services that Aberdeen IJB hosts on behalf of Moray and Aberdeenshire, and those hosted by those IJBs and delivered on behalf of Aberdeen City.

Strategic Priority: Outcomes and transformation

Executive Team Owner: Chief Officer

Risk Rating: low/medium/high/very high

HIGH

Rationale for Risk Rating:

- Considered high risk due to the projected overspend in hosted services
- Hosted services are a risk of the set-up of Integration Joint Boards.

Risk Movement: (increase/decrease/no change):

NO CHANGE 24.07.2018

Rationale for Risk Appetite:

- The IJB has some tolerance of risk in relation to testing change.

Controls:

- Integration scheme agreement on cross-reporting
- North East Strategic Partnership Group
- Operational risk register

Mitigating Actions:

- This is discussed regularly by the three North East Chief Officers
- Regular discussion regarding budget with relevant finance colleagues



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<p>Assurances:</p> <ul style="list-style-type: none">• These largely come from the systems, process and procedures put in place by NHS Grampian, which are still being operated, along with any new processes which are put in place by the lead IJB.	<p>Gaps in assurance:</p> <ul style="list-style-type: none">• There is a need to develop comprehensive governance framework for hosted services, including the roles of the IJB's sub-committees.• Pan-Grampian meetings between IJBs are not happening with sufficient regularity to resolve hosted services issues.
<p>Current performance:</p> <ul style="list-style-type: none">• The projected overspend on hosted services is a factor in the IJB's overspend position. This may in future impact on the outcomes expected by the hosted services.	<p>Comments:</p> <ul style="list-style-type: none">• It is noted that NHS Grampian intend to undertake an internal audit on the governance of hosted services.



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Description of Risk: There is a risk that relationship arrangements between the IJB and its partner organisations (Aberdeen City Council & NHS Grampian) are not managed in order to maximise the full potential of integrated & collaborative working to deliver the strategic plan. This risk covers the arrangements between partner organisations in areas such as governance arrangements, human resources; and performance.

Strategic Priority: Outcomes and service transformation

Executive Team Owner: Chief Officer

Risk Rating: low/medium/high/very high

MEDIUM

Rationale for Risk Rating:

- Considered medium given the experience of two years' operations since 'go-live' in April 2016.
- However, given the wide range and variety of services that support the IJB from NHS Grampian and Aberdeen City Council there is a possibility of services not performing to the required level.

Risk Movement: *(increase/decrease/no change)*

NO CHANGE 24.07.2018

Rationale for Risk Appetite:

There is a zero tolerance in relation to not meeting legal and statutory requirements.

Controls:

- IJB Strategic Plan
- IJB Integration Scheme
- IJB Governance Scheme including 'Scheme of Governance: Roles & Responsibilities'
- Agreed risk appetite statement
- Role and remit of the North East Strategic Partnership Group in relation to shared services
- Current governance committees within IJB & NHS.

Mitigating Actions:

- Regular consultation & engagement between bodies.
- Regular and ongoing Chief Officer membership of Aberdeen City Council's Corporate Management Team and NHS Grampian's Senior Leadership Team
- Regular performance meetings between ACHSCP Chief Officer, Aberdeen City Council and NHS Grampian Chief Executives.



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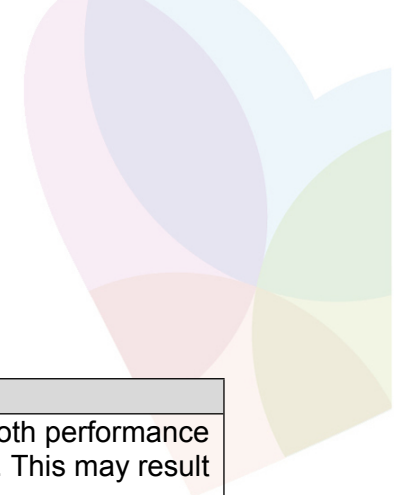


	<ul style="list-style-type: none"> Additional mitigating actions which could be undertaken are including this area within the audit programme and doing bench-marking activity with other IJBs.
<p>Assurances:</p> <ul style="list-style-type: none"> Regular review of governance documents by IJB and where necessary Aberdeen City Council & NHS Grampian. 	<p>Gaps in assurance:</p> <ul style="list-style-type: none"> None currently significant though note consideration relating to possible future Service Level Agreements.
<p>Current performance:</p> <ul style="list-style-type: none"> Most of the major processes and arrangements between the partner organisations have been tested for over two years of operation and no major issues have been identified. A review of the Integration Scheme has been undertaken and the revised scheme has been approved by NHSG, Aberdeen City Council & Scottish Government. However this does not remove the risk as processes within the IJB and partner organisations will continue to evolve and improve. 	<p>Comments:</p> <ul style="list-style-type: none"> Nothing to update on this risk.



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Description of Risk: There is a risk that the IJB, and the services that it directs and has operational oversight of, fail to meet both performance standards/outcomes as set by regulatory bodies and those locally-determined performance standards as set by the board itself. This may result in harm or risk of harm to people.

Strategic Priority: Outcomes, safety, transformation of services

Executive Team Owner: Head of Strategy & Transformation (Lead Strategy & Performance Manager)

Risk Rating: low/medium/high/very high

MEDIUM

Rationale for Risk Rating: changes to service delivery due to workforce recruitment issues in Aberdeen may impact on service performance.

Risk Movement: *(increase/decrease/no change)*

NO CHANGE 24.07.2018

Rationale for Risk Appetite:

The IJB has no to minimal tolerance of harm happening to people as a result of its actions, recognising that in some cases there may be a balance between the risk of doing nothing and the risk of action or intervention.

Controls:

- Clinical and Care Governance Committee and Group
- Audit and Performance Systems Committee
- Performance Management and Evaluation Group
- Performance Framework
- Risk-assessed plans with actions and performance measures
- Linkage with ACC and NHSG performance reporting
- Annual Report
- Chief Social Work Officer's Report
- Internal Audit Reports
- Complaints

Mitigating Actions:

- Fundamental review of key performance indicators reported
- Review of systems used to record, extract and report data
- Review of and where and how often performance information is reported on how learning is fed back into processes and procedures.
- On-going work developing a culture of performance management and evaluation throughout the transformation programme



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<p>Assurances:</p> <ul style="list-style-type: none">• Joint meeting of IJB Chief Officer with two Partner Body Chief Executives.• Reports to Clinical and Care Governance Committee.• Care Inspectorate Inspection reports• Contract review meetings.• External reviews of performance.• Benchmarking with other IJBs.	<p>Gaps in assurance:</p> <ul style="list-style-type: none">• Formal performance reporting process is evolving.• Audit & Performance Systems Committee meets regularly and is establishing reporting mechanisms• Intelligent Board performance model has been agreed and is being populated
<p>Current performance:</p> <ul style="list-style-type: none">• Performance reports submitted to IJB and Audit and Performance Systems Committee.• Performance Management and Evaluation Group meeting regularly.• Various Steering Groups for strategy implementation established and reviewing performance regularly.• Performance data discussed at team meetings.	<p>Comments:</p> <ul style="list-style-type: none">• Clinical and Care Governance Committee and Group have been established and are meeting regularly• Establishing reporting and assurance mechanisms for hosted and commissioned services



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Description of Risk: There is a risk of reputational damage to the IJB and its partner organisations resulting from complexity of function, decision making, delegation and delivery of services across health and social care.

Strategic Priority: All

Executive Team Owner: Chief Officer

Risk Rating: low/medium/high/very high

Medium

Rationale for Risk Rating:

- Governance processes are in place and have been tested since go live in April 2017.
- Budget processes tested during approval of 2nd budget, which was approved.

Risk Movement: *(increase/decrease/no change)*

No Change 24.07.2018

Rationale for Risk Appetite:

Willing to risk certain reputational damage if rationale for decision is sound.

Controls:

- Executive Management Team
- IJB and its Committees
- Operational management processes and reporting
- Board escalation process

Mitigating Actions:

- Clarity of roles
- Staff and customer engagement – recent results from iMatter survey alongside a well-established Joint Staff Forum indicate high levels of staff engagement.
- Effective performance and risk management
- To ensure that ACHSCP have a clear communication & engagement strategy, and a clear policy for social media use, in order to mitigate the risk of reputational damage.



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Assurances: <ul style="list-style-type: none">• Role of the Chief Officer and Executive Team• Role of the Chief Finance Officer• Performance relationship with NHS and ACC Chief Executives• Communications plan / communications manager	Gaps in assurance: <p>None known at this time</p>
Current performance: <ul style="list-style-type: none">• Communications officer in place to lead reputation management	Comments: <ul style="list-style-type: none">• Communications strategy and action plan in place and being led by the HSCP's Communications Manager• Communication and Engagement Group in place comprising of staff across the partnership supporting us in getting the message right and appropriate• Locality leadership groups being established to build our relationship with communities and stakeholders• Regular Chief Officer (CO) and Chief Executives (CEs) meeting supports good communication flow across partners as does CO's membership of the Corporate Management Teams of both ACC and NHSG



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Description of Risk: Failure of the transformation to delivery sustainable systems change, which helps the IJB deliver its strategic priorities, in the face of demographic & financial pressures.	
Strategic Priority: All	Executive Team Owner: Head of Strategy & Transformation
Risk Rating: low/medium/high/very high <div style="background-color: yellow; text-align: center; padding: 5px;">HIGH</div>	Rationale for Risk Rating: <ul style="list-style-type: none"> • Recognition of the known demographic curve & financial challenges, which mean existing capacity may struggle • This is the overall risk – each of our transformation programme work streams will also be risk assessed with some programmes being a higher risk than others.
Risk Movement: <i>(increase/decrease/no change)</i> <div style="background-color: yellow; text-align: center; padding: 5px;">NO CHANGE 24.07.2018</div>	
Rationale for Risk Appetite: <ul style="list-style-type: none"> • The IJB has some appetite for risk relating to testing change and being innovative. • The IJB has no to minimal appetite for harm happening to people – however this is balanced with a recognition of the risk of harm happening to people in the future if no action or transformation is taken. 	
Controls: <ul style="list-style-type: none"> • Strategic Transformation and Commissioning programme management and governance • Audit and Performance Systems Committee – quarterly reports to provide assurance of progress 	Mitigating Actions: <ul style="list-style-type: none"> • Programme management approach being taken in terms of the transformation programme • Transformation team in place and all trained in Managing Successful Programmes methodology



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<ul style="list-style-type: none"> • Programme Board structure and Executive Programme board in place • Transformation Plan 	<ul style="list-style-type: none"> • Regular reporting to Executive Programme Board and Portfolio Programme Boards • Regular reporting to Audit and Performance Systems Committee and Integration Joint Board • Service Review process developed and being utilised in operational services to support transformation and continuous improvement on a service by service basis • Evaluation process in place to track delivery of change and efficiencies • A review of the full transformation programme and governance arrangements has taken place and improved governance arrangements are now in place. • A number of plans and frameworks have been developed to underpin our transformation activity across our wider system including: Reimagining Primary and Community Care Vision, Transformation Plan, Primary Care Improvement Plan, Action 15 Plan.
<p>Assurances:</p> <ul style="list-style-type: none"> • Executive Management and Committee Reporting • Robust Programme Management approach supporting by an evaluation framework • IJB oversight • Board escalation process • Internal Audit has undertaken a detailed audit of our transformation programme. All recommendations from this audit have now been actioned. 	<p>Gaps in assurance:</p> <ul style="list-style-type: none"> • There is a gap in terms of the impact of transformation on our budgets. Many of the benefits of our project relate to early intervention and reducing hospital admissions, neither of which provide earlier cashable savings. A range of financial workstreams have been established to deliver tangible cashable savings, however these are at an early stage and have yet to deliver, and there is therefore a gap in assurance in this area.



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**Current performance:**

- Demographic financial pressure is starting to materialise in some of the IJB budgets.
- The Strategy and Transformation Team is now established and reviewing/supporting the transformation projects

Comments:

- Several projects are now in the deliver phase
- Initial evaluation report is now available for West Visiting Service and scaling plan is being developed



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Description of Risk There is a risk that the IJB does not maximise the opportunities offered by locality working	
Strategic Priority: All	Executive Team Owner: Chief Officer
Risk Rating: low/medium/high/very high HIGH	Rationale for Risk Rating: <ul style="list-style-type: none"> All Head of Locality posts have now been recruited to and are in post. Localities are in an early, developmental stage and currently require strategic oversight so are included in this risk register. Once they are operational, they will be removed from the strategic risk register as a stand-alone item and will be included in the wider risk relating to transformation (risk 7). Rationale for Risk Appetite: The IJB has some appetite to risk in relation to testing innovation and change. There is zero risk of financial failure or working out with statutory requirements of a public body.
Risk Movement: <i>(increase/decrease/no change)</i> INCREASE 24.07.2018	
Controls: <ul style="list-style-type: none"> Audit and Performance Systems Committee Action plans as derived from the locality plans. Locality Leadership Groups Strategic Planning Group Previous professional management structure maintaining safe delivery of services. 	Mitigating Actions: <ul style="list-style-type: none"> Heads of Locality recruited. Continued broad engagement on locality working and requested development of comprehensive communication plan



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Assurances: <ul style="list-style-type: none">• Strategic Planning Group• Locality plans performance monitoring and review.	Gaps in assurance <ul style="list-style-type: none">• Progress of delivering locality plans.
Current performance: <ul style="list-style-type: none">• All Heads of Locality now in post• Recruitment to further posts has been paused until the arrival of the new Chief Officer. As such, recruitment to the Locality Teams has been delayed.	Comments: <ul style="list-style-type: none">• Locality Leadership Groups meetings are being attended by Heads of Locality• It was previously reported that the next level of the locality structure was due to 'go live' in April 2018. However, there are no longer clear timelines agreed.• Locality plans & profiles have been created for each of the localities, approved by the IJB & published on the website.



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<p>Description of Risk: There is a risk of failing to recruit and that workforce planning across the Partnership is not sophisticated enough to maintain future service delivery.</p>	
<p>Strategic Priority: All</p>	<p>Executive Team Owner: Chief Officer</p>
<p>Risk Rating: low/medium/high/very high</p> <div style="text-align: center; background-color: yellow; border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p>HIGH</p> </div>	<p>Rationale for Risk Rating:</p> <ul style="list-style-type: none"> • The current staffing complement profile changes on an incremental basis over time. • However the number of over 50s employed within the partnership (by NHSG and ACC) is increasing. • Current vacancy levels and delays in recruitment across ACHSCP services. <p>Rationale for Risk Appetite:</p> <ul style="list-style-type: none"> • Risk should be able to be managed with the adoption of workforce planning structures and processes
<p>Risk Movement: <i>(increase/decrease/no change)</i></p> <div style="text-align: center; background-color: yellow; border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p>NO CHANGE 24.07.2018</p> </div>	
<p>Controls:</p> <ul style="list-style-type: none"> • Clinical & Care Governance committee reviews operational risk around staffing numbers 	<p>Mitigating Actions:</p> <ul style="list-style-type: none"> • Requested reference to regional approaches • Consideration of engaging with schools/college/universities • Use commissioning to encourage training of staff • Development of a workforce plan



Aberdeen City Health & Social Care Partnership

A caring partnership



	<ul style="list-style-type: none"> Agreed to establish a working group to lead on further development on workforce planning
<p>Assurances:</p> <ul style="list-style-type: none"> Workforce plan once developed for the whole Partnership. 	<p>Gaps in assurance</p> <ul style="list-style-type: none"> Need more information on social care staffing Information on social care providers would be useful to determine trends in wider sector
<p>Current performance:</p> <ul style="list-style-type: none"> Workforce planned developed, but only covers health staff and not the social care staff. Information expected from Scottish Government during over the next few months which should help improve workforce planning across all partnerships. High levels of locum use and nursing vacancies in the psychiatry service 	<p>Comments:</p> <ul style="list-style-type: none"> The Executive Team has considered several work-force initiatives including 'Career Ready' and 'Developing the Young Workforce' initiatives. The business manager will be developing these further before bringing a proposal to the IJB for approval. Consultation responses provided to the Scottish Government relating to the Health & Care (Staffing) (Scotland) Bill.