

**27TH SEPTEMBER 2010 AUDIT COMMITTEE
REPORT FOR INFORMATION**

TITLE: HEALTH AND SOCIAL CARE RISK REGISTER VERSION 11

REPORT AUTHOR: DENISE HUNT, BUSINESS PARTNER FINANCE


BACKGROUND:

The Health & Social Care Risk Register was last submitted to the Audit Committee for scrutiny on 25th September 2009.

RECENT CHANGES TO THE RISK REGISTER

The main changes to the register reflect the continuing forecast overspend for the department which has been significantly reduced. This is still a high risk for both the department and the Council as a whole but a robust Action Plan is in place which is closely monitored and reviewed.

The other change relates to the risk of an influenza epidemic which has been removed from the register.

	<p>Bristol City Council Health and Social Care - Risk Register</p> <p>VERSION NO. 11 September 2010</p>
---	--



Version	Reviewed By:	Review Date
1	Audit Committee	9/6/06
2	Audit Committee	25/6/07
3	Adult Community Care Senior Management Team	15/9/08
4	Cllr Derek Pickup, Exec. Member	17/9/08
5	Audit Committee	26/9/08
6	Cllr Derek Pickup, Exec. Member	21/1/09
7	Audit Committee	25/09/09
8	Cllr Bev Knott, Exec Member	30/09/09
9	HSC Management Team	14/12/2009
10	HSC Management Team	23/03/2010
11	Audit Committee	27/9/2010

FOR INFORMATION ONLY




HEALTH AND SOCIAL CARE - KEY RISKS SUMMARY

Date: September 2010





Version Number: 11/2010

Rank No	Risk No	Risk/Hazard	Inherent Risk * (Impact / Probability) (Red/Yellow/Green)	Current Mitigation Evaluation	Residual Risk (Impact/Probability) (Red/Yellow/Green)		
					Residual Risk previously reported to 26/9/09 Audit Committee	Current Residual Risk at 15/09/10	Direction of Travel
1	1	Potential revenue budget overspend for department	H/H	The revenue budget is currently forecasting an overspend of £1.0m. An action plan is in place to achieve budget and deliver departmental savings included in the MTFP. Appointment of Interim Director.	H/M	H/M	
2	2	Residential futures project does not deliver a modernised residential care service due to lack of capital investment	H/M	The residential futures project was approved by Cabinet and capital funding has been set aside for the project in the capital programme. Cabinet approval was not obtained in June 10 as a result of concerns about affordability and property values .	H/M	H/M	




FOR INFORMATION ONLY

Rank No	Risk No	Risk/Hazard	Inherent Risk * (Impact / Probability) (Red/Yellow/Green)	Current Mitigation Evaluation	Residual Risk (Impact/Probability) (Red/Yellow/Green)		
					Residual Risk previously reported to 26/9/09 Audit Committee	Current Residual Risk at 15/09/10	Direction of Travel
				Project now on hold.			
3	3	Provision of below standard services in service area covered by "star ratings" and inspection carried out by Care Quality Commission.	H/M	Upward trend in performance evident and improved management framework. Continual monitoring and review of standards applied necessary. Also need to continue follow up as necessary all CQC inspection recommendations - some of which will have resources implications. Futures Projects aim to modernise services to better meet assessed needs e.g. Residential, home and day care services	M/M	M/M	
4	7	Major I&CT project failure or non-delivery.	H/M	Satisfactory	M/M	M/M	
5	8	Risk of serious fraud.	H/M	Various controls, planning, inspection, audit, budgeting mechanisms. Delegations, code of conduct, IT systems, physical systems, access controls etc.	M/M	M/M	

FOR INFORMATION ONLY

Rank No	Risk No	Risk/Hazard	Inherent Risk * (Impact / Probability) (Red/Yellow/Green)	Current Mitigation Evaluation	Residual Risk (Impact/Probability) (Red/Yellow/Green)		
					Residual Risk previously reported to 26/9/09 Audit Committee	Current Residual Risk at 15/09/10	Direction of Travel
6	10	Insufficient care to meet needs of community e.g. Lack of choice and or availability of personalised care/ home care / care home placements	H/M	The Putting People first Programme in Bristol is up and running and has projects in place to deliver greater choice and control over personalised care services via the use of personalised budgets.	M/M	M/M	
7	11	Various risks identified in 2009/10 Service Delivery Plans	H/M	Various mitigation measures set out in SDPs	M/M	M/M	
8	19	Interim management team, possible loss of knowledge, skills gap during recruitment process. Joint service director posts (for PCT and BCC shared services) have work loads which are higher than planned, resulting in insufficient capacity to meet service needs.	H/M	Early recruitment of vacancies, handover between post holders, comprehensive training and induction for new staff . Close monitoring of performance against key service standards. Joint departmental service director arrangement no longer in place.	M/M	M/M	
9	4	Serious, systematic Health and Safety failure, leading to prosecution.	H/M	Generally satisfactory. However, the continuing attention being paid to Local Authority operations by the HSE requires continued vigilance arrangements.	M/L	M/L	

FOR INFORMATION ONLY

Rank No	Risk No	Risk/Hazard	Inherent Risk * (Impact / Probability) (Red/Yellow/Green)	Current Mitigation Evaluation	Residual Risk (Impact/Probability) (Red/Yellow/Green)		
					Residual Risk previously reported to 26/9/09 Audit Committee	Current Residual Risk at 15/09/10	Direction of Travel
10	5	Major failure of key supplier of a contracted service e.g. Residential care home advises it will cease operation	H/M	Satisfactory. Continual contract monitoring required.	M/L	M/L	
11	6	Serious breach of confidentiality/security of personal information	H/M	Satisfactory. PARIS policy and adherence to BCC Data Quality Policy.	M/L	M/L	
12	18	An adult older or vulnerable person suffers avoidable death, serious injury or abuse whilst under the care of the Council.	H/M	Generally satisfactory. Protection of Vulnerable Adults protocols and procedures are now embedded Target training levels achieved	M/L	M/L	

Rank No.	Risk No.	Risk	Direction of Travel
2	13	Pandemic Influenza resilience/business continuity.	deleted

Risk Response Form

FOR INFORMATION ONLY

				Impact/Probability	
Risk Rank No.	No. 1 Risk Owner: David Johnstone			Inherent Score (Red/Yellow/Green)	H/M
Risk 1	Significant revenue budget overspend for department as a whole Financial/business loss; Reputational loss			Residual Score (Red/Yellow/Green)	H/M
Consequences	Adverse publicity Impact of service in other areas (cuts etc) if budget overspent in another area. Vacancy management impacts on service provision in those areas. Forces unplanned service reductions to compensate for budgetary pressures.			Comments	
Risk Trigger	Current Mitigation	Responsibility	Further Action	Responsibility	
Unforeseen service pressures and/or shortfalls in external funding.	Effective budgeting for the year ahead is linked to service delivery and published business plans. Setting realistic budgets within known resources. Use of revised demand forecasting model	Business Partner Finance/ Service Directors/ Service Managers/ Budget Holders	Improved budget planning ie effective medium term financial planning linking service intentions and resource of availability. Implement demand modelling within Strategic Commissioning	Service/ Service Managers/ Budget Holders/ Head of Finance	
	Maintenance of financial controls and governance arrangements ie capacity to spend, cost guidelines, reports to budget holders and agreed actions to respond to forecast overspends and underspends.	Service Directors, Budget Holders	Closer links between budgets and performance to ensure that budget holder understands more clearly how spending tracks services ie trend analysis of costs/ services, placement panels to be convened to authorise packages of care	Service Directors/ Service Managers/ Budget Holders/ Business Partner Finance	
	In year monitoring of budget v actual income and expenditure together with identification of corrective action. Mid-year policy/practice changes to create offsetting savings (e.g. reviewing strategy, placement panels	Service Directors Service Manager, Business Partner Finance	More timely processing of financial transactions leading to more up to date monitoring information for budget holders - ie timely generation of management information and finance staff meetings with.	Service Director/ Service Managers/ Budget Holders/ Business Partner Finance	

FOR INFORMATION ONLY

	"Futures" projects to modernise services and improve vfm.	Service Directors	Regular monitoring of unit costs and benchmarking comparisons with comparator authorities.	Business Partner Finance
	Identification of funding sources by Service Directors. Use of updated protocols and reports to Executive to authorise and monitor use of specific grants	Service Directors	Training of budget holders - to ensure compliance with grant conditions	Business Partner Finance and budget holding managers.
	All Managers keep up to speed with funding sources available by monitoring legislation/professional journals etc.	Service Directors/ Service Managers/ Budget Holders	Revised arrangements to encourage budget ownership including better information; early involvement in planning budgets for future years; delegation of budgets.	Business Partner Finance
	Creative use considered of other funding streams, and making bids as necessary for external capital and revenue funding.	Service Director / Service Managers	Business case training for project managers and those involved in projects to ensure cost benefit analysis of all projects/bids.	Business Partner Finance
	Reporting to line management, Executive and other elected members as necessary on the financial position	Service Director / Service Managers Budget Holders	Revised format reports and monthly reporting to Exec. Member	Business Partner Finance
	Use of provisions and reserves if necessary	Service Director	Creation and use of reserves and provisions consistent with accounting standards	Business Partner Finance advice to HSC DLT - approval as per Financial Regs

FOR INFORMATION ONLY

Risk Response Form

				Impact/Probability	
Risk Rank No.	No. 2 Risk Owner: David Johnstone			Inherent Score (Red/Yellow/Green)	H/M
Risk 2	Residential futures project does not deliver a modernised residential care service due to lack of capital investment and fails to divert more than 30% of users from long term care			Residual Score Red/Yellow/Green)	H/M
Consequences	Shortfall in capital receipts from sale of homes leading to under investment / strain on capital programme, leading to a lack of modernisation . Poor service quality and outcomes for residents. Less people are diverted from long term care than anticipated, leading to increased need for residential placements and budget pressures.			Comments Project now on hold.	
Risk Trigger	Current Mitigation	Responsibility	Further Action	Responsibility	
Decisions to close individual homes not taken	Regular meetings with Executive Member and regular briefings for all elected members. Newsletters and written briefings at regular intervals. Reports taken to Select committee and Scrutiny Commissions	Strategic Director, Health and Social Care	Further consultation on home closures to gain cross party support prior to Cabinet decisions	Residential Futures Project Manager	
Downturn in economy fall in property / land values	Independent and prudent assumptions on land values assumed in costing model. Timing of disposals regulated	Strategic Director, Health and Social Care	Consider a contingency in the event refurbishment costs either rise or property values fall	Business Partner Finance	
Resource centres unable to divert sufficient people from long term care	Eph beds blocked to new admissions to create capacity in the evolving resource centre model	Strategic Director, Health and Social Care	Taking stock review to determine sufficient number of resource centre beds are available	Residential Futures Project Manager	

FOR INFORMATION ONLY

Risk Response Form

				Impact/Probability	
Risk Rank No.	No. 3 Risk Owner: David Johnstone			Inherent Score (Red/Yellow/Green)	H/M
Risk 3	Provision of below standard services regulated by CQC			Residual Score Red/Yellow/Green)	M/M
Consequences	Loss of client confidence and reputation loss caused by adverse "star ratings" and/or inspection reports. Potential funding implications - reduced ability to attract certain funding schemes. Tighter controls implemented on external funding leading to resource implication re reporting requirements. Budget pressures as unable to make placement in zero rated homes creating voids and potential for homes to become financially unviable.			Comments	
Risk Trigger	Current Mitigation	Responsibility	Further Action	Responsibility	
Providing poor services with poor prospects of improvement	Identification of areas of potential poor performance through ongoing service monitoring, followed up by remedial action in relation to poor performance areas.	Service Managers/ Team Managers/ Senior Management Team	Continue to act to implement Action Plans following previous inspections.	Service Directors - operational services	
	Monitoring of Performance Assessment Framework indicators by Senior Management Team.	DLT - advised by Performance and Information Manager	Continue active provision of performance monitoring eg through Activity Briefings	Performance & Information Manager (P&IM)	
	Monitoring of casework practice and other areas known to be on CQC inspection agendas. Involvement of CSIP to drive faster improvement in care management	Service Managers /Team Managers	Appropriate response to CSCI inspection recommendations	SMs/ TMs	

FOR INFORMATION ONLY

	processes.			
--	------------	--	--	--

Risk Response Form

				Impact/Probability	
Risk Rank No.	No. 4		Risk Owner: David Johnstone		Inherent Score (Red/Yellow/Green) H/M
Risk 7	Major Information & Communications Technology (I&CT) project failure or non-delivery			Residual Score (Red/Yellow/Green) M/M	
Consequences	Possible financial loss; Reputational loss Service delivery failure; inability to make statutory reports			Comments	
Risk Trigger	Current Mitigation	Responsibility	Further Action	Responsibility	
Project failure or I&CT systems failure	Provision of adequate planned staff support	Performance & Information Manager	Progress reports on all projects	Service Director - Strategic Commissioning & Performance (SCP)	
	Provision/contingency arrangements to cope with possible adverse short-term effects of I&CT re-organisation	Service Director and Performance & Information Manager	Project Management to be extended to other projects	Performance & Information Manager	
	PRINCE project management of remainder of PARIS project	Performance & Information Manager	Regular reports to Board re timetable and progress with PARIS	Performance & Information Manager	
	Securing adequate funding streams for support costs	Service Director	Regular reports on funding issues	Performance & Information Manager	

FOR INFORMATION ONLY

Risk Response Form

				Impact/Probability	
Risk Rank No.	No. 5 Risk Owner: Business Partner Finance			Inherent Score (Red/Yellow/Green)	H/M
Risk 8	Risk of Serious Fraud			Residual Score (Red/Yellow/Green)	M/M
Consequences	Financial loss; adverse publicity; reputational loss; loss of public confidence			Comments	
Risk Trigger	Current Mitigation	Responsibility	Further Action	Responsibility	
Financial Loss	Various controls are in place, as specified in the annual assurance statement	Various managers – see annual assurance statement		Business Partner Finance	
	Financial controls - arrangements for authorising spend, ordering goods and services		Ongoing training of cost centre managers, financial guidance, revised Financial Regulations reissued	Business Partner Finance	
	Budget holding and cost centre management procedures		Sign -off of financial management competencies - ongoing. Cost centre manager training by CCFS and Financial Planning staff.	CCMs	
	Arrangements for approving expenditure - certification of payments, segregation of duties				
	Regular audits				

FOR INFORMATION ONLY

Risk Response Form

				Impact/Probability	
Risk Rank No.	No. 6 Risk Owner: David Johnstone			Inherent Score (Red/Yellow/Green)	H/M
Risk 10	Insufficient care to meet needs of community. e.g. Lack of choice and availability of personalised care / home care / care home placements Failure in statutory/legal obligations; reputational			Residual Score (Red/Yellow/Green)	M/M
Consequences	Vulnerable people will not receive the services they need resulting in hardship for clients. Reputation loss if harm to or neglect of customers. Potential for complaints and judicial review.			Comments	
Risk Trigger	Current Mitigation	Responsibility	Further Action	Responsibility	
Failure in recruitment and retention of staff in the in-house service.	Maintenance of service levels through recruitment and service changes	Home Care /Residential Care Management	Ongoing	Managers in the Care at Home service and Residential Service	
Care not available when needed e.g. To facilitate hospital discharge	Publish purchasing intentions / commissioning strategies to signal to market and in house services the increases in capacity required.	Planning & Commission Team			
	Demand modelling to predict future need, demographic changes in order inform MTFP / commissioning strategies	Performance and Information team / Finance and Planning and Commissioning team			
	Creation of home care short term assessment and reablement service. Residential futures project to create			Manager of Care at Home Service	

FOR INFORMATION ONLY

	resource centre provision			
	Budget secured for delivery of the service. Increase in budget for intensive home care in MTFP 08-11	Budget Holder/ Business Partner Finance	Ongoing monitoring of spend against budget	Managers in Care at Home Service
	Support of in-house service through maintenance of staffing levels and reduction in sickness levels (by rigorous use of sickness absence procedure and improved training in manual handling).))) HR/ Home Care Management	Continued rigorous use of sickness absence policy and procedures	HR Managers in Care at Home Service
Business failure in the independent sector of residential market providers	Continued annual discussion on fees / service issues and continuation of contract agreement on inflationary uplift	Service Managers/ Team Managers Planning & Commissioning	Further exploration of block purchasing of EMI beds and encouraging suppliers to provide more EMI places.	Head of Service Older People/PSI.
	Continuing negotiations with providers over spot purchases.	Service Managers/ Team Managers	Preventive strategy for non-EMI service users to provide intermediate care, rehabilitation and other relevant services.	
	Tight control of budgets to avoid overspend (higher cost placements may result if homes close). ARG and placement panel to scrutinise spend	Service Managers/ Team Managers	Process to secure more price stability in nursing homes by block contracting has begun	Service Directors
	Maintenance of good market knowledge/awareness of available placements and fair pricing .	Service Managers/ Team Managers		

FOR INFORMATION ONLY

	Effective medium term planning to ensure resources are available	Service Managers/ Team Managers	Further development of community based services to prevent the need for residential nursing care	Service Managers/ Team Managers/ Providers Forum
		Planning & Commissioning Team	Increase in Intensive Home Care budget 08-11.Increased use of Intermediate Care Services	Team Managers Team Managers

FOR INFORMATION ONLY

Risk Response Form

				Impact/Probability	
Risk Rank No.	No. 7 Risk Owner: David Johnstone			Inherent Score (Red/Yellow/Green)	H/M
Risk 11	Various risks identified in 2009/10 Service Delivery Plans			Residual Score (Red/Yellow/Green)	M/M
Consequences	Various - eg service disruption during service change; delays in planning and making changes; delays in negotiations; I&CT software and hardware problems; resources and funding streams; legal challenge; HR constraints; public opposition to changes			Comments	
Risk Trigger	Current Mitigation	Responsibility	Further Action	Responsibility	
Various - wide range of risks	Use of standard processes for project planning and project management - in order to identify; log and actively manage risks as they arise. Effective financial planning to secure funding streams. Effective Service Delivery Planning. Clear decision making processes. Efficient consultation with stakeholders to explain changes and try to seek acceptance. Involvement of stakeholders in planning work. Communications strategies with major projects.	Service Director and All 3 rd tier managers - as applicable to specific plans and projects	Ongoing skills development; extended numbers of managers to become PRINCE2 accredited	Service Director and All 3 rd tier managers - as applicable to specific plans and projects	

FOR INFORMATION ONLY

Risk Response Form

				Impact/Probability	
Risk Rank No.	No. 8 Risk Owner: David Johnstone			Inherent Score (Red/Yellow/Green)	H/M
Risk 19	Departmental restructuring leads to vacancies, skills gaps during recruitment process which causes a drop in performance and failure to impliment MTFP savings. New joint service director posts (for PCT and BCC shared services) have work loads which are higher than planned, resulting in insufficient capacity to meet service needs.			Residual Score (Red/Yellow/Green)	M/M
Consequences	Skills shortages, worsening of performance on key service indicators, potential for vulnerable adults to be placed at greater risk, HSC work priorities are not progressed.			Comments	
Risk Trigger	Current Mitigation	Responsibility	Further Action	Responsibility	
Vacant posts / skills gaps	Acting up arrangements are put in place to ensure key posts are filled, recruitment to vacant posts is actively progressed to minimise service disruption	Service Directors	Work is prioritised to ensure key tasks continue	Service Directors	
Performance dips	Performance indicators are rigorously monitored and assigned to named lead officers, action plans are put in place to improve performance as needed e.g. reviews. Progress is reported monthly to DLT as part of monthly performance focus meetings	Service Directors			
Budget overspend caused by failure to implement MTFP savings	MTFP savings are allocated to lead officers to implement	Strategic Director and Service Directors	Action plan put in place to achieve further savings, weekly reporting to DLT on progress, interim additional management capacity introduced to support the	Strategic Director and Service Directors	

FOR INFORMATION ONLY

			implementation of the action plan	
Increased workload for DLT arising from joint work with the PCT e.g. 2 new joint service director posts working 50% HSC and 50% PCT	Work is prioritised and jointly agreed between HSC and the PCT for the joint posts where accountability and governance arrangements are clearly set out	Strategic Director		

FOR INFORMATION ONLY

				Impact/Probability	
Risk Rank No.	No. 9 Risk Owner: David Johnstone			Inherent Score (Red/Yellow/Green)	H/M
Risk 4	Serious, systemic Health and Safety failure, leading to prosecution			Residual Score Red/Yellow/Green)	M/L
Consequences	Serious injury/death of member of staff, service user or member of public Civil or criminal prosecution by HSE , or Improvement Notice. Financial losses if found guilty in prosecution. Reputation losses of health and safety failures. High cost of corrective action to ensure failures do not recur.			Comments	
Risk Trigger	Current Mitigation	Responsibility	Further Action	Responsibility	
Health and safety system failure	Corporate and department H&S policies and procedures	Service Managers/ / Team Managers	Full implementation of H&S Annual Action Plan 2008/09	Service Director supported by Workforce & Organisational Development Manager (WODM)	
	Auditing of H&S compliance by the H&S advisors, including possible threatened use of internal notice system	H&S Advisors (CSS)	Continued programme of audits - detailed and 'light touch' as necessary	H&S Advisors (CSS)	
	Strict adherence to published H&S policies and procedures across all areas of activity	SMs/TMs		Heads of Service	
	H&S training for management		Refresher training for managers	Workforce and Development Manager	
	Assessment of high risk areas and specific training in these areas (eg manual handling, violence and kitchen	H&S Advisors/ SMs			

FOR INFORMATION ONLY

	safety)			
	Framework of risk assessment in place for each risk activity and follow-up action taken where necessary	TMs/ Unit Managers	Implementing a proper regime of audits by advisors and manage	Service Director
Non compliance with HSE improvement notice	Application of corporate action plan for reaction to notices from H&S	Service Director	Continued implementation of action plan for improvement notices received	Service Director
	100% compliance with any HSE Improvement Notice that is received	As applicable		Operational Heads of Service/Service Managers as necessary
	Nominated officer within the department to co-ordinate management of H&S issues (Departmental Safety co-ordinator)	Service Director	Full implementation of any required corporate or HSE advice/instructions.	Service Director
	Reporting of improvement notice, action taken and proposed action plan to Executive Member and the H&S team	Service Director	As necessary	
	Consulting with legal services to ensure appropriate response to Improvement Notice	Service Director	As necessary	
	Monitoring incidents and health matters at Departmental Health and Safety Committee	Service Director	To continue	Service Director

FOR INFORMATION ONLY

Risk Response Form

				Impact/Probability	
Risk Rank No.	No. 10 Risk Owner: David Johnstone			Inherent Score (Red/Yellow/Green)	H/M
Risk 5	Major failure of key supplier of a contracted service e.g. residential care home, advises it will cease operation.			Residual Score (Red/Yellow/Green)	M/L
Consequences	Clients disrupted and have to move to new service provider, at short notice. Impact on health and well being. Increased costs arising from emergency placements Social work resources diverted to carry out emergency reviews and to move people Adverse publicity if services not re-provided efficiently and effectively			Comments	
Risk Trigger	Current Mitigation	Responsibility	Further Action	Responsibility	
Poor performance by key contractor, incl service failure	Planning in place for contracting in of services and Planning & Commissioning Managers in place to a smooth running of contracted in services.	Planning and Commission Managers Service Managers/ Team Managers	Ongoing regular and effective contract monitoring.	Planning and Commissioning Managers	
High cost of key contractor (ie they continually request more money from Bristol City Council)	Clear specification of service levels and standards expected at contract award stage.	as above	Continued coherent service development. Strategies with providers so that they move in directions relevant to ACC service goals.	as above	
	Effective contract negotiation and management. (Staff properly trained in this area and contract funding correctly identified.)	as above		as above	
	Pro-active performance monitoring of the provider once service contract has been awarded.	as above		as above	

FOR INFORMATION ONLY

	Robust preparation prior to contract award to ensure the stability of potential providers	as above		as above
Provider financial difficulties	Financial vetting of contractors	PCM/Finance		

FOR INFORMATION ONLY

Risk Response Form

				Impact/Probability	
Risk Rank No.	No. 11 Risk Owner: David Johnstone			Inherent Score (Red/Yellow/Green)	H/M
Risk 6	Serious breach of confidentiality/security of personal information - personal privacy infringement; financial loss			Residual Score Red/Yellow/Green)	M/L
Consequences	Sensitive information getting into the wrong hands on the most vulnerable members of society Loss of confidence in services Adverse publicity Possible compensation claims/litigation Failure to achieve required standard as part of Caldicott Guardian audit			Comments	
Risk Trigger	Current Mitigation	Responsibility	Further Action	Responsibility	
Confidential information transferred inappropriately	Various:- Policies are clear, logged on the intranet for easy access and known to staff and managers Implementation of policies and procedures on:- - access to data/authorisation - security of electronic and paper based systems - office security - data protection - data security - recording of client information - information sharing protocols	Strategic Director, Service Directors, Service Manager Performance & . Information Manager; Service Managers; Team Managers	Monitoring compliance with established guidance. Complete re-drafting of Information Security Policy and Standards and other action arising from Risk Management Workshop. New Information Sharing Protocol has been drafted.	Performance & Information Manager Service Managers	

FOR INFORMATION ONLY

Risk Response Form

				Impact/Probability	
Risk Rank No.	No. 12 Risk Owner: David Johnstone			Inherent Score (Red/Yellow/Green)	H/M
Risk 9	An adult older or vulnerable person suffers avoidable death, serious injury or abuse whilst under the care of the Council.			Residual Score (Red/Yellow/Green)	M/L
Consequences	Loss of confidence in services Large scale adverse publicity Investigation by external body/public enquiry and associated resource costs etc. Litigation. Internal investigation and associated costs including staff resources.			Comments	
Risk Trigger	Current Mitigation	Responsibility	Further Action	Responsibility	
Breakdown of or inadequate support arrangements in place.	Effective care planning in place: everyone who is receiving services has a plan which sets out the required level of support with all needs addressed.	Service Managers/ Team Managers.	Ongoing	SMs/ TMs	
	Care plan is put together ensuring all risks to the individual are addressed.	as above			
	Appropriately qualified staff put together the care plan.	as above			
	Maintenance of staffing levels, training and supervision to secure effective and reliable service delivery.	as above			
	Protection of Vulnerable Adults Policy No Secrets in Bristol - established and in operation with partners	as above	Continued monitoring of POVA policy to ensure procedures are correctly followed.		
	Inspections of services are completed by external agencies and internal staff to ensure standards of care are	Service Managers/ Team Managers	Ongoing	SMs/ TMs	

FOR INFORMATION ONLY

	adequate.			
	Regular inspection and regulatory processes undertaken by CQC eg homes, home care, review of safeguarding systems/ procedures. Recommendations for improvement actioned.	RL/AH/ JM	CSCI recently completed a Safeguarding / Learning Difficulties Review. The review rated Bristol's safeguarding service as adequate with promising capacity for improvement. The learning difficulty service needed some improvements – action plans are in place for both areas.	ES/JM
	Compliance with care management policies / procedures – team manager authorisation and review of care plans and regular case sampling by senior management team.	RL/AH/ JM	All negotiated services managed by the City Council are re-inspected by CSCI on an annual basis. There are 24 services which include Residential, Home Care and Intermediate Care. All services are now rated adequate or good.	ES/JM
	Adherence to professional standards, supervision, pmds.	RL/AH/ JM	All safeguarding concerns are carefully followed up, reported to CSCI and dealt with in line with local and national policy.	ES/JM
	Safeguarding adults board and joint working with partner agencies – Police, probation, NHS, shared protocols / joint working.	RL/AH/ JM	Staff employed by the Council are all CRB and POVA checked prior to commencement of employment. Care staff are NVQ assessed to at least level 2 standards, are regularly supervised and receive an annual PMDS.	ES/JM
	Safe recruitment processes / CRB checks for staff working with vulnerable	RL/AH/ JM	We have had 6 residential services awarded a poor rating	ES/JM

FOR INFORMATION ONLY

	adults.		this year and on each occasion a dedicated PCM has worked with providers and CSCI to ensure that service users are safe guarded and that an action plan is in place to improve the quality of services delivered. There is continued involvement and support until the quality of service improves to an adequate level. To date, there have been no home care, nursing or adult placements schemes that have been awarded a zero rating this year.	
	Adherence to H&S requirements, risk assessments with adequate mitigations for risk in place, staff training and refreshers.	RL/AH/ JM		ES/JM
	Commissioned services, service standards specified and compliance monitored e.g. Health safety, quality, compliance with safe guarding .		In addition to the reactive measures we also, as a core part of our work, regularly monitor all services against a structured quality monitoring framework which involves an annual visit to providers irrespective of their rating. This allows for essential scrutiny of services and gives an additional opportunity to talk to staff and users regarding the services they receive.	
	Lessons learnt report on serious incidents (national and local e.g. Cornwall enquiry) and from complaints		Recent sampling by DLT of safeguarding cases has highlighted good practice and	

FOR INFORMATION ONLY

	circulated to managers and discussed at team meetings, including completing serious case reviews where appropriate.		recommendations to practitioners regarding further improvements and higher standards.	
			Recent monitoring “inspections” by Commissioning staff have assisted in raising the standards with Care Homes.	
			Lessons Learnt from recent safeguarding complaints have been shared with practitioners and assisted in improving practice.	
			All new staff are CRB checked and robust risk assessments in place whilst waiting for results. (RL)	

FOR INFORMATION ONLY

Risks which have been removed which were in the previous risk register

Risk Response Form

				Impact/Probability	
Risk Rank No.	No. 2 Risk Owner: Cathy Morgan			Inherent Score (Red/Yellow/Green)	H/M
Risk 12	Delay in achieving strategic commissioning objectives causing failure to achieve MTFP commitment			Residual Score (Red/Yellow/Green)	M/M
Consequences	Strategic objectives were set to achieve national and local priorities, against which the department will be inspected and judged. Failure to achieve the objectives would result in failure to service most people well. Further the objectives drive efficiencies and vfm, so failure to achieve savings and vfm will reduce the volume of service that can be delivered			Comments	
Risk Trigger	Current Mitigation	Responsibility	Further Action	Responsibility	
Personal budgets are more successful than anticipated leading to under utilisation of in house services and commissioned services.	Demand modelling is being refined to take into account the personalisation agenda, in order to anticipate new service patterns, numbers, and costs. This will inform commissioning strategies/ MTFP	Head of Service and Project manager	Resource allocation system will need to be developed and robustly tested to ensure that forecast demand does not exceed resources available.	Head of Service / head of Finance	
Negative campaigning by groups of stakeholders influencing the political process	Major projects e.g. Residential Futures have a Communication plan to manage press, stakeholder communications involving corporate communications	Head of Service and Project manager			

FOR INFORMATION ONLY

<p>Assumptions underpinning business cases are subject to change e.g. Residential futures, expected capital receipts are not realised, revenue and capital costs are higher than anticipated</p>	<p>A contingency for refurbishment costs has been established. Properties will only be released on to the market for sale when appropriate. MTFP and capital programme to be kept under close review.</p>	<p>Head of Service and Project manager</p>		
<p>Home care STAR and residential resource centres do not prevent sufficient people from long term care resulting in budget pressures</p>	<p>Monthly monitoring of HCBU performance against business case model cost, sickness, downtime. Diversion rate to be closely monitored for both home care and resource centres</p>	<p>Head of Service and Project manager</p>	<p>Taking stock review of effectiveness of resource centres after 2 years. Activity data on patterns of care delivered are carefully monitored and compared with expected demand modelling. Budgets and activity monitored monthly.</p>	<p>Head of Service and Project manager</p>