BRISTOL CITY COUNCIL Audit Committee 29th September 2012

Report of: Interim Strategic Director Health & Social Care

Report Title: Departmental Risk Register (DRR)

Ward: Citywide

Officer presenting report: Simon Merrett, Finance Manager Health & Social Care.

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RECOMMENDATION

The Audit Committee review, and comment upon the Departmental Risk Register (DRR) to ensure that the register properly reflects Members current opinion.

SUMMARY

This report covers the first review in 2012/13 of the DRR, which is attached at Appendix A.

The significant issues in the report are:

The detailed content changes and variations to the risks since the previous quarter last reported are tabulated in the header to the DRR at Appendix A, and summarised in para. 2 below.

1. Policy

The annual review of the DRR at the Audit Committee is a stated aim of the Risk Management Policy. Historically, it has been presented as an information item, however, it was recently agreed by the Audit Committee for reports to be presented as a main agenda item.

Consultation:

Internal: Officers from all Directorates, including risk owners, mitigation owners,

risk champions and Strategic Directors were consulted.

External: None necessary

2. Principal amendments

2.1 Since previously reported at the 2011/12 final quarter review, the principal amendments are as follows:

- CRR025 Adult Care,. A person in the care of the Council suffers avoidable death, injury or abuse - implementation of the corporate Health & Safety management system (CHASMS) by all managers and Safeguarding training provided to Service Providers staff.
- DRR-HS001 Provision of below standard services delivering the care management review.
- DRR-HS004 Insufficient care to meet needs of community development of the Target Operating Model to drive service improvement and increased efficiency.
- DRR-HS007 Serious systemic Health & Safety failure action plan to be signed off and presented to H & S Consultation Committee.100% completion of CHASMS actions in 2011/12.
- DRR-HS011 HSC Transformation Programme fails to deliver objectives recruitment of project managers completed. Corporate resources finalised with Portfolio Management Group.
- DRR-HS002 Major IC&T project failure replacement of Paris social care system initialised. EMS implementation now complete.
- DRR-HS003 Risk of Serious Fraud fraud training complete.
- DRR-HS006 Interim Management Team risk deleted as permanent management team now in place.
- DRR-HS010 Inadequate response to an emergency all plans quality assured by corporate H&S.
- DRR-HS008 Failure of Key Supplier working with corporate procurement on managing business relationships.
- DRR-HS009 Breach of confidentiality all staff completing e-learning information security module.
- DRR-HS034 Health & Social Care overspend action plan to deliver MTFP savings in place along with transformation programme.

3. Risk Assessment

3.1 There are no risks arising directly from this report, although clearly the risk management process minimises the risk of failures in the Council's service provision, and supports the internal control environment and governance arrangements. The risk management process provides for Member involvement in ensuring that risks facing the Council are properly addressed and managed.

4. Equalities Impact Assessment

4.1 None necessary for this report

5. Legal and Resource Implications

- 5.1 **Legal -** N/A
- 5.2 Resource N/A

Appendices

Appendix A - Quarter 1 2012/13 Departmental Risk Register

LOCAL GOVERNMENT ACCESS TO INFORMATION

Background Papers Relevant background details held on SPAR.net

2012/13 - QUARTER 1

HEALTH & SOCIAL CARE RISK REGISTER

	No.	Day	Month	Year
VERSION	17	28th	Sept	2012

	١	/ERSION C	ONTRO	L HISTORY	
Version No.	Reviewed By:	Review Date	Version No	Reviewed By:	Review Date
7	Audit Committee	25/9/09	13	HSC Managemet Team	7/9/11
8	Cllr Bev Knott, Exec Member	30/9/09	14	HSC Managemet Team	14/1/12
9	HSC Management Team	14/12/09	15	HSC Management Team	10/4/12
10	HSC Management Team	23/3/10	16	HSC Management Team	9/8/12
11	Audit Committee	27/9/10	17	Audit Committee	28/9/12
12	Audit Committee	10/6/11	18		

SIGNIFICANT CHANGES

Mitigations reported are no longer contained in the body of this report but on the SPAR.net database with all current and deleted information.

Main variations to the risk register since the previous submission to the 30th March 2012 HSC Management Team (Version 15), and to the current review status, are as follows:

Risk	RISK			,	VARIATI	ON TO RISK
No.		Current Risk Ranking	Previous Risk Ranking	Direction	of travel	(inc. amended/new/deleted risk, additional mitigations/information)
		cg	cg	Current Status	Previous Status	
CRR25	Adult Care	1		4	4	This is a corporate risk.
HS034	Health & Adult Care Social overspend	2		4	1	
HS001	Provision of below standard services	3		4	4	
HS002	Information and Communications Technology (I&CT) project failure	4		4	2	
HS007	Serious, systematic Health & Safety failure	5		4	4	
HS011	HSC Transformation Programme fails to deliver	6		<mark>4</mark>	4	
HS003	Serious fraud	7		2	2	
HS006	Interim management team with insufficient capacity			N/A	2	Deleted Risk
HS004	Insufficient care to meet needs of the community	8		2	4	

Risk	RISK			VARIATION TO RISK				
No.		Current Risk Ranking		Previous Risk Ranking	Direction of travel		(inc. amended/new/deleted risk, additional mitigations/information)	
		3			Current Status	Previous Status		
HS010	Inadequate response to an emergency or continuity challenge	9			2	2		
HS008	Major failure of key supplier of an externally contracted service	11			2	2		
HS009	Serious breach of confidentiality/security of personal information	12			2	2		

Report for 2012-2013
For Health and Social Care
Not Including Child Projects records, Including Mitigation records

Key to Performance Status:

Behind Schedule On schedule Completed available

Risks: Review Overdue (0+)

Well behind

schedule

Mitigation:

High (6+)

Medium (3+)

Low (1+)

Health & Social Care - ALL RISKS (CRR and DRR)

	le person suffers a	voidable death, serious injury or abuse whils			Ris	k Code: CRR	025
Inherent Status: High (6)		Inherent Risk Severity: High		erent Risk Likelihood: Medium			
Date Identified: 01 Apr 2009			Ser	vice: Corporate Indicators (HSC)			
Mitigation records							
Mitigation Status	I	nfo			Responsible Person	Date Identified	Last Review Date
On Adherence to H&S requirements, schedule assessments with adequate mitig place.		Completion of corporate H&S management s	ystem (CHASMS) by all managers and re	viewed.	Netta Meadows	01/04/2009	29/06/2012
Adherence to professional standa supervision, pmds.	, A	Safeguarding adults board and joint working wall safeguarding concerns are carefully follow Additional resources allocated to safeguardin Service provider staff undertake training and control of the provider staff undertake training and control	ed up and reported to CQC where approp g service in order to ensure appropriate re	priate.	Mike Hennessey	01/04/2009	29/06/2012
On Ceasing admissions to care home concerns have been reported.		Ongoing monitoring visits by quality assurand he quality assurance framework.	Netta Meadows	01/04/2009	29/06/2012		
On Compliance with care management control con	ent policies /	eam manager authorisation and review of care plans and regular case sampling by Senior Manager.				01/04/2009	29/06/2012
Complaints Lessons learnt report on serious (national and local e.g. Cornwall complaints	enquiry) and	Lessons Learnt from recent safeguarding con assisted in improving practice. All new staff are CRB checked and robust risl		ers and reviewed by planning boards. This has CRB clearence.	Mike Hennessey	01/04/2009	29/06/2012
On Regular inspection and regulator schedule undertaken by CQC	y processes A	All regulated services managed by the City C	ouncil are quality monitored by CQC.		Vareta Bryan	01/04/2009	29/06/2012
On Safe recruitment processes / CRI schedule staff working with vulnerable adu		Staff employed by the Council are all CRB ch standards and regularly supervised. They also		ment. Care staff are QCF trained to appropriate	Vareta Bryan	01/04/2009	29/06/2012
We regularly monitor all services structured quality monitoring fram	nework			is allows for essential scrutiny of services and lity Assurance Framework is being currently	Netta Meadows	01/04/2009	29/06/2012
Current Status: Medium (4)	Previou	us Status: Medium (4)	Current Risk Severity: Medium	Current Risk Likel	ihood: Medium		
Risk Champion: Simon Merrett			Risk Owner: Alison Comley				
Review Note:							

Risk: Health and Adult Social Care overspend. Failure to implement budget containment measures or do not predict growth in demand leading to budget overspend. Disruption to Authority Services as unplanned Risk Code: DRR -**HS034** budget cuts are made elsewhere to balance budget. This would mean reputational damage, drop in CAA performance, failure to achieve VFM. Inherent Status: High (9) **Inherent Risk Severity: High** Inherent Risk Likelihood: High Date Identified: 01 Apr 2009 Service: Corporate Indicators (HSC) Mitigation records Mitigation Mitigation **Last Review** Info Responsible Date Identified Status Person Date Alison Comley Action Plan prepared by HSC DLT with Cabinet Action plan to deliver MTFP savings agreed by Cabinet in July. 01/04/2011 29/06/2012 schedule endorsement Transformation Programme is continuing to develop demand modelling to predict future needs and demographic changes in Additional resources examining demand model Netta Meadows 01/04/2009 29/06/2012 schedule order to inform the MTFP and commissioning strategies. This development is ongoing. 22/03/2011 29/06/2012 Create and use of reserves and provisions Alison Comley schedule consistent with accounting standards On Identify sources of additional funding Collaboration with external funders e.g. PCT, DoH. 22/03/2011 29/06/2012 Alison Comley schedule Report to budget holders and agree actions to respond to forecast overspends and underspends. 22/03/2011 29/06/2012 Maintain financial controls and governance Alison Comley schedule arrangements Regular monthly monitoring Monitor in year budget v forecast, income and expenditure together with identification of corrective action. Peter Robinson 01/04/2009 29/06/2012 schedule 29/06/2012 Report to line management Executive and other elected members as necessary on the financial position. Alison Comley 22/03/2011 schedule **Current Risk Likelihood: Medium Current Status: Medium (4) Previous Status: Low (1) Current Risk Severity: Medium Risk Champion: Simon Merrett Risk Owner: Alison Comley Review Note:**

herent Status: High (6)	Inherent Risk Severity	ity: High Inherent Risk Likelihood: Medium			dium		
ate Identified: 31 Dec 2010		<u>. </u>		s (HSC)			
litigation records							
itigation Mitigation tatus	lı	nfo			Responsible Person	Date Identified	Last Review Date
Follow up remedial action in relation to poor		As part of all quality monitoring issues of concern are raised with providers and addressed itimely fashion.			ed in a Netta Meadow	s 31/12/2010	29/06/2012
ldentify of areas of potential poor performan monitoring.	ce through ongoing service	Quality assurance undertak	ken as part of quality monitoring	ng framework.	Netta Meadow	s 31/12/2010	29/06/2012
Involvement of Continuous Service Improve	ment Plan T	To deliver the care manage	ement review.		Mike Henness	ey 31/12/2010	29/06/2012
Monitor casework practice and other areas agenda.	known to be on CQC inspection	Appropriate response to CC	QC inspection recommendation	ns.	Netta Meadow	s 31/12/2010	29/06/2012
urrent Status: Medium (4)	Previous Status: Medium (4)	Cu	rrent Risk Severity: Medium	1	Current Risk Likelihood:	Medium	

Risk: Major Information & Communications	Technology (I&CT) project failure_M	ajor Information & Co	ommunications Technology (I&CT) project failu	ire or non-delivery.		Risk Code: DRR - HS002		
Inherent Status: High (6)	Inherent Risk Seve	erity: High	Inherei	nt Risk Likelihood: Medium				
Date Identified: 31 Dec 2010			Service	e: Corporate Indicators (HSC)				
Mitigation records								
Mitigation Status		Info			Responsible Person	Date Identified	Last Review Date	
Completed Provide adequate resources					Alison Comley	31/12/2010	29/06/2012	
Completed Regularly monitor project progress		Monitoring of results	s from EMS to continue. Implementation now	complete, monitoring ongoing.	Netta Meadows	31/12/2010	29/06/2012	
On Replacement of Paris social care sy schedule	stem and ancilliary finance systems.	Project at initial stag	ge.		Mike Hennessey	29/06/2012	29/06/2012	
Current Status: Medium (4)	Previous Status: Low (2)		Current Risk Severity: Medium	Current F	Risk Likelihood: Mediu	ım		
Risk Champion: Simon Merrett			Risk Owner: Alison Comley					
Review Note:								

	bus, systemic Health and Safety failure Serious, systemic Health and Safety failure. Serious, systemic Health and Safety failure.				ril or criminal	Risk Code: DRR - HS007
•	<u> </u>	nt Risk Severity: High		k Likelihood: High		
Date Ident	ified: 31 Dec 2010		Service: Cor	porate Indicators (HSC)		
Mitigation	records					
Mitigation Status	Mitigation	Info		Responsible Pe	erson Date Identified	Last Review Date
On schedule	Audit of H&S compliance by corporate H&S Advisors	8 out of 10 H&S audits complete	ed in 2011/12. 10 programmed for 2012/13.	Netta Meadows	31/12/2010	29/06/2012
Completed	Full implementation of H&S Annual Action Plan 2011/12			Netta Meadows	31/12/2010	29/06/2012
On schedule	Full implementation of H&S Annual Action Plan 2012/13	Action plan to be signed off and	d presented at Corporate Employee H&S Consulta	tion Committee. Netta Meadows	21/06/2011	29/06/2012
Completed	Identify management role to lead on H&S issues within HSC			Alison Comley	31/12/2010	29/06/2012
Completed	Implement Corporate H&S Management System (CHASMS)			Netta Meadows	31/03/2010	29/06/2012
On schedule	Review CHASMS and Health & Safety action plan.	Target is to maintain 100% con	npletion of CHASMS rate for 2011/12 in 2012/13.	Netta Meadows	31/12/2010	29/06/2012
Current St	atus: Medium (4) Previous Status:	Medium (4)	Current Risk Severity: Medium	Current Risk Likeliho	od: Medium	
Risk Chan	npion: Simon Merrett		Risk Owner: Alison Comley			
Review No	ote:					

Risk: HSC Transformation Programme fails to o	leliver objectives HSC Transformation Progra	mme fails to deliver objectives.		Risk Code	: DRR - HS011	
Inherent Status: High (6)	Inherent Risk Severity: High		Inherent Risk Likelihood: Medium			
Date Identified: 31 Dec 2010			Service: Corporate Indicators (HSC)			
Mitigation records						
Mitigation Status	Info			Responsible Person	Date Identified	Last Review Date
Completed Adequate capability of the organisation to deliver the programme.	Recruitment and retention of skilled and comp	petent Operational and Project Managers.		Alison Comley	25/03/2011	29/06/2012
Completed Appoint Programme Managers to lead projects.	Appoint Programme Manager to lead program					29/06/2012
Completed Corporate resources are available to deliver Business Case.	Work with business partners and Portfolio Ma	ork with business partners and Portfolio Management Group to identify resource needs.				29/06/2012
On Culture of organisation is not resistant to change.		on and strategy informed by evidence. Workford of changes needed. Introduction of Bristol Mana	e development programme to incorporate culture agement Development Proramme.	Alison Comley	25/03/2011	29/06/2012
On Development of Target Operating Schedule Model		ovement and increase effiency. Review of the part of the part all care packages are equitable and represent		Denise Hunt	09/08/2012	
Completed Monitor projects within the Programme and progress reports	Programme Board in place with monthly repo	rting to Portfolio Management Group.		Denise Hunt	31/12/2010	29/06/2012
Current Status: Medium (4)	Previous Status: Medium (4)	Current Risk Severity: Medium	Current Risk Lik	elihood: Medium		
Risk Champion: Simon Merrett		Risk Owner: Alison Comley				
Review Note:						

Risk: Serie	ous Fraud Risk of Serious Fraud. Financial loss; adve	erse publicity; loss of reputation and public	c confidence		Risk Code	: DRR - HS003	
Inherent S	tatus: High (6)	Inherent Risk Severity: High		Inherent Risk Likelihood: Medium			
Date Ident	ified: 31 Dec 2010			Service: Corporate Indicators (HSC)			
Mitigation	records						
Mitigation Status	Mitigation	Info			Responsible Person	Date Identified	Last Review Date
On schedule	Complete Fraud Assessment Workbook	All identified third tier managers to arrange	ge completion of workbook. Behind so	hedule, reminders sent to individuals.	Alison Comley	31/12/2010	29/06/2012
	Maintain controls, inspection, audit, budgeting and delegated limits.				Rob Murphy	31/12/2010	29/06/2012
Completed	Raise fraud awareness in managers	All 1 - 4th tier managers to complete E-T staff to complete Risk Management train		s. Majority now completed. Priority now for	Alison Comley	31/12/2010	29/06/2012
On schedule	Regular internal audits as per agreed audit plan.				Rob Murphy	31/12/2010	29/06/2012
Current St	atus: Low (2) Previous S	tatus: Low (2)	Current Risk Severity: Medium	Current Ri	sk Likelihood: Lov	1	
Risk Cham	npion: Simon Merrett		Risk Owner: Alison Comley				
Review No	ote:						

Risk: Insu	fficient care to meet needs of community e.g. lack of	f choice and availability of personalised care,	, home care, care home placements.		Risk (ode: DRR - H	S004
Inherent S	tatus: High (6)	Inherent Risk Severity: High	Inherent Risk L	ikelihood: Medium			
Date Ident	ified: 31 Dec 2010		Service: Corpor	rate Indicators (HSC)			
Mitigation	records						
Mitigation Status	Mitigation	Info			Responsible Person	Date Identified	Last Review Date
On schedule	Maintain market knowledge and awareness of available placements and fair pricing.	e Use of the Enabling Commissioning Fra analysed.	amework to ensure that all commissioning is needs	led and demand is appropriatly	Netta Meadows	31/12/2010	29/06/2012
Completed	Publish purchasing intentions and commissioning strategies	Publish purchasing intentions and com- required.	missioning strategies to signal to market and in hou	se services the capacity	Netta Meadows	31/12/2010	29/06/2012
On schedule	Support of in-house service through maintenance of staffing levels and reduction in sickness levels	SART Project			Vareta Bryan	31/12/2010	29/06/2012
On schedule	Transformation Programme		uture needs, demographic changes in order to information in the contraction of the contra		Alison Comley	31/12/2010	29/06/2012
Current St	tatus: Low (2) Previous Statu	ıs: Medium (4)	Current Risk Severity: Medium	Current Risk	Likelihood: Low		
Risk Chan	npion: Simon Merrett		Risk Owner: Alison Comley				
Review No	ote:						

D'al last		-11		and the second of the second o	and the Paragraph of the LaP and	Contract and the con-	D'-L O-	L. DDD 110040			
	<u>equate response to an emergency or continuity ch</u>					of critical services	RISK Co	de: DRR - HS010			
Inherent S	tatus: High (6)	Inherent Risk Severity: H	igh	Inheren	t Risk Likelihood: Medium						
Date Ident	ified: 31 Dec 2010			Service: Corporate Indicators (HSC)							
Mitigation	records										
Mitigation Status	Mitigation		Info			Responsible Person	Date Identified	Last Review Date			
	Attend mandatory business continuity training. To be Managers PMDS.		To assist ma	anagers in the completion of their continuity pla	ns. All plans quality assured by	Netta Meadows	31/12/2010	29/06/2012			
On schedule	Identify Directorate and Critical Services		Identify Dire exercised re	ectorate and Critical Services, risk assessment a egularly.	and continuity plans reviewed and	Netta Meadows	31/12/2010	29/06/2012			
Completed	Identify senior management role to lead on Business	Continuity	Appointed S	Service Director, Stategic Planning & Commission	oning.	Alison Comley	22/03/2011	29/06/2012			
On schedule	Regular Audits by internal audit					Netta Meadows	22/03/2011	29/06/2012			
Current St	atus: Low (2) Previous St	atus: Low (2)		Current Risk Severity: Medium	Current R	isk Likelihood: Lov	W				
Risk Cham	pion: Simon Merrett			Risk Owner: Alison Comley							
Review No	te:										

Health & Social Care - ALL RISKS	(CRR and DRR)
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Risk: Major failure of key supplier of an externally contracted service. Major failure of key supplier of an externally contracted service.						Risk Code: DRR - HS008			
Inherent S	Status: High (6)	nherent Risk Severity: High	Inherent Risk Likelihood: Medium						
Date Identified: 31 Dec 2010				Service: Corporate Indicators (HSC)					
Mitigation records									
Mitigation Mitigation Status		Info			Responsible Person	Date Identified	Last Review Date		
	Ongoing market management and communication with providers.	Regular communication events held with market providers as part of the development of the Target Operating Model.			Netta Meadows	22/03/2011	29/06/2012		
On schedule	Ongoing regular and effective contract monitoring	New model of working with corporate procurement now in place. Corporate procurement undertaking business relationship management meetings.				31/12/2010	29/06/2012		
Current Status: Low (2) Previous Status: Low (2)			Current Risk Severity: Low	Current Risk Li	ikelihood: Medium				
Risk Champion: Simon Merrett			Risk Owner: Alison Comley						
Review Note:									

Risk: Serious breach of confidentiality/security of personal information personal privacy infringement; financial loss							ode: DRR - HS009		
Inherent Status: High (6) Inherent Risk Severity: High			Inherent Risk Likelihood: Medium						
Date Identified: 31 Dec 2010			Service: Corporate Indicators (HSC)						
Mitigation records									
Mitigation Status	Mitigation			Info		Responsible Person	Date Identified	Last Review Date	
On schedule	Monitor compliance with established guidance.			All staff to complete e-learning Information Security	module.	Netta Meadows	31/12/2010	29/06/2012	
Completed Nominate officer within the department to co-ordinate management of Information Security issues.			Member of Information Assurance Board.		Alison Comley	22/03/2011	29/06/2012		
Current Sta	atus: Low (2) Previous S	Status: Low (2)	Current	Risk Severity: Low	Current Ris	k Likelihood: Medium			
Risk Champion: Simon Merrett Risk Owner: Alison Comley									
Review No	te:								