



REPORT TO: MORAY INTEGRATION JOINT BOARD CLINICAL AND CARE GOVERNANCE COMMITTEE ON 24 FEBRUARY 2022

SUBJECT: STRATEGIC RISK REGISTER – JANUARY 2022

BY: CHIEF OFFICER

1. REASON FOR REPORT

1.1 To provide an overview of the current strategic risks, along with a summary of actions which are in place to mitigate those risks, updated February 2022.

2. RECOMMENDATION

2.1 It is recommended that the Clinical and Care Governance Committee (CCG) agree to:

- i) consider and note the updated Strategic Risk Register included in APPENDIX 1; and**
- ii) note the Strategic Risk Register will be further refined to align with the transformation and redesign plans as they evolve**

3. BACKGROUND

3.1 The strategic risk register is reviewed regularly by the Senior Management Team as part of a robust risk monitoring framework, to identify, assess and prioritise risks related to the delivery of services in relation to delegated functions, particularly any which are likely to affect the delivery of the Strategic Plan.

3.2 The Moray Integration Joint Board (MIJB) Strategic Risk Register is attached to this report at **APPENDIX 1** and sets out the inherent risks being faced by the MIJB, together with a current assessment on the level of the risks and mitigating actions being taken to reduce the impact of the risks. This report is presented to Audit Performance and Risk committee for their oversight and comment.

3.3 Risk scores are weighted, based on assessment according to their likelihood and corresponding impact, as per Section 5 of the MIJB Risk Policy.

- 3.4 The Strategic Risks received an initial review to ensure they align to the Moray Partners in Care 2019-2029 strategic plan which was agreed at MIJB on 28 November 2019 (para 13 of the minute refers).

4. KEY MATTERS RELEVANT TO RECOMMENDATION

- 4.1 The Risk Management Framework review was completed and outcome was approved by the Board on 25 June 2020 (para 9 of the minute refers). The approved Risk Appetite Statements have been included in **APPENDIX 1**.
- 4.2 Work overseen by North East Partnership on Home First programme continues to progress, in line with our Strategic Plan objectives. Hospital without Walls and Hospital at Home themes are being developed and will be progressed through the Home First programme. These workstreams are required to progress a new approach to delivering person-focussed clinical services to people, for the benefit of individuals through a person centred approach and to maximise best use of available staff resources which continue to be stretched.
- 4.3 As anticipated the numbers of Covid-19 cases in the community continued to increase during December and January due to uncontrolled community transmission and there was a subsequent impact in staff absences and staff requiring to self-isolate. The rates of other respiratory infections are rising and it is anticipated that these will peak during the months of January and February 2022. This impact has been felt across all services and is of particular concern in areas where there is a limitation on options for cover for staff, such as in specialist residential care e.g. Woodview as an example. Contingency plans are in place but there continues to be significant pressure on safe staffing levels in this area. Managers continue to reiterate the necessity for correct use of PPE, ventilation, hand hygiene and lateral flow testing for all staff.
- 4.4 There continues to be a significant impact on progression of development work as there continue to be increases in demand for services across our system. Scottish Government and NHS Grampian issued communications to try to discourage people from attending Emergency Departments at hospitals unless life threatening and redirecting them to other service that can provide appropriate advice and assistance. There continues to be a significant demand for social work assessments from the community and there are high levels of unmet need for care provision in the community. Managers are working with teams daily to try to meet the greatest needs through a variety of means but there are still those who are not receiving a service. There continues to be requests for Occupational Therapy services that are not being met. These increases in demands for service are being faced by staffing resource that is reduced due to increasing sickness absence, staff vacancies, annual leave and the continued need for some staff redeployment.
- 4.5 The continued safe delivery of services is a priority and as such a considerable amount of management time is being directed to support oversight of operational risks to ensure they are managed and prioritised across the whole system. This is being managed on a daily basis across Grampian through Operation Iris, developed by NHSG Chief Executive Team for the whole health and social care system. Work is currently underway to develop the approach for recovery.

- 4.6 There continues to be significant financial risk in the system. As we transition from the additional supports provided as part of the Covid response. We are monitoring the position closely and assessing the impact on both short and longer term. Additional funding has been made available by Scottish Government to support the increased pressures in the system, including those presented by the winter period. The senior management team have, and continue to, assess where the funds should be applied for greatest benefit and approvals will be sought as appropriate.
- 4.7 Recruitment and selection to staff vacancies continues to prove challenging across several services. These challenges remain as previously reported regarding lack of appropriate applications for some posts and also the time taken to for the recruitment process in employing organisations to be followed. There have been significant efforts and collaborative working to streamline processes and align timescales for care at home appointments with the establishment of a recruitment cell through reallocation of staff resource. This has facilitated a rolling advert, weekly interviews and alignment of training schedules to make the process as efficient as possible and releasing management time to focus on service delivery. In addition there has been an efficient and effective recruitment process for the Discharge to Assess posts which again will assist to relieve specific pressures in the system. There remain some staff redeployments and acting up arrangements in place, such as for some of the vaccination team members, and there will be a period of time before services and staff return to “business as normal” or alternative arrangements are put in place. Staff wellbeing continues to be a key priority and a significant emphasis is being placed on ensuring that everyone is provided with the support that is readily available, where it is required.
- 4.8 The adoption of the outcome based commissioning approach and collaborative working with Allied as the partner for care at home are fundamental changes in the approach for social care services and as such forms a core element of supporting the strategic aims for Home First and supports choice and control for service users. The timing of this change was determined by the requirement for the new contract, which commenced 1 November 2021. It is recognised by all involved that it will be challenging to deliver in the context of the continued impact of the pandemic.
- 4.9 As plans evolve, the Strategic Risk Register will be updated to ensure that it reflects any barriers to realising the ambitions we are not enacting, to achieve the vision set out in our Strategic Plan.

5. SUMMARY OF IMPLICATIONS

(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Plan “Moray Partners in Care 2019-2029”

The MIJB requires effective governance arrangements for those services and functions delegated to it and Risk Management systems are integral to this.

(b) Policy and Legal

As set out in the terms of reference, the Board has responsibility to provide assurance of the adequacy of the risk management framework.

There are no legal implications arising from this report.

(c) Financial implications

There are no direct financial implications arising from this report however the Board should note the failure to manage risks effectively could have a financial impact for the MIJB.

(d) Risk Implications and Mitigation

This report forms part of the governance arrangements for identifying and managing strategic risks of the MIJB.

(e) Staffing Implications

There are no additional staffing implications arising from this report. Senior Management Team have considered areas of high risk and are seeking to redeploy staff to address these as a matter of urgency.

(f) Property

There are no property implications arising from this report.

(g) Equalities/Socio Economic Impact

An Equalities Impact Assessment is not required because there are no service, policy or organisational changes being proposed.

(h) Climate Change and Biodiversity Impacts

There are no impacts arising from this report.

(i) Consultations

Consultations have been undertaken with the Senior Management Team, Chief Internal Auditor and Tracey Sutherland, Committee Services Officer and comments have been incorporated in this report.

6. CONCLUSION

6.1 This report and appendices contains proposed risk appetite statements that, when approved, will underpin the MIJB approach to strategic decision making.

6.2 The report also outlines the current position in relation to the impact of COVID-19 on progress with transformation plans, and recommends the Board note the revised and updated version of the Strategic Risk Register.

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Background Papers: held by author
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