

**Strategic Risk – Action Log**

| <u>Risk</u>   | <u>Action required</u>  | <u>Lead</u>             | <u>Target</u>  | <u>Comment</u>   |
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| <b>1. The Integration Joint Board (IJB) does not function as set out within the Integration Scheme, Strategic Plan and Scheme of Administration and fails to deliver its objectives or expected outcomes.</b> | Develop to final approved Performance Management Framework, aligned to the new Strategic Plan will be a key focus.                        | Chief Financial Officer | Initial target<br>March 2019<br><br>Revised date<br><del>27 June 2019</del><br>31 Oct 2019 | Document to be presented as part of governance surrounding the new Strategic plan in October 2019  |
| <b>2. Inability to recruit and retain qualified and experienced staff whilst ensuring staff are fully able to manage change resulting from Integration</b>  | Update Organisational Development Plan (presented to MIJB in January 2018) and present to MIJB  | Heads of Service        | <del>30 June 2019</del>  | Initial intention was to have a dedicated resource however recruitment was not successful. External resource has been identified and initial focus is required on the management restructure with the OD and workforce plan thereafter |
|   | The Workforce plan will be developed and aligned with the strategic plan 2019- 2022   | Heads of Service        | <del>September</del><br>31Oct 2019   | As above   |
|   | Services experiencing staffing resource issues due to sickness absence or vacancies are escalating matters to Heads of Service for action | Heads of Services       | ongoing  | This is a complex problem and a more detailed analysis of the issue and the impacts across the system is being collated for System Leadership Group. This will facilitate a prioritised and targeted approach for action               |

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| <b>3. Inability to demonstrate effective governance and effective communication with stakeholders.</b>            | Programme of future reports for Clinical and Care Governance Committee to be developed   | Professional Lead for Clinical Governance / Heads of Service | June 2019  | Schedule of reports has been set for Clinical Governance Group with exception reporting to Clinical and Care Governance committee.  |
|   | Communications Strategy developed and approved by MIJB in June 2017 – to be reviewed and updated   | Chief Officer  | <del>June 2019</del><br>31 October 2019                              | As part of the Alliance funding a new communications officer started in April 2019. Revised strategy to go to MIJB in October 2019.   |
|   | Governance Frameworks documented and communicated for:- <ul style="list-style-type: none"> <li>• Clinical Governance</li> <li>• Health and Safety</li> <li>• Civil Contingencies</li> <li>• Risk management</li> <li>• Performance management</li> <li>• Staff Governance</li> </ul> | Corporate Manager  | 28/2/19<br>31/3/19<br>31/7/19<br>31/10/19<br><br>30/10/19<br>31/8/19 | <b>In Progress</b><br>Clinical Governance and Health and Safety frameworks are completed. Risk Management, Staff Governance and Civil Contingencies are progressing.<br><br>Civil Contingencies requires input from partner organisations and this is being progressed through a local resilience group with representation from Moray Council, Dr Grays, NHSG and HSCM |
| <b>4. Inability to deal with unforeseen external emergencies or incidents as a result of inadequate emergency</b> | Programme of implementation of table top exercises for business continuity to be established and implemented   | HSCM Civil Contingencies Group (CCG)                         | 31/7/19  |   |
|   | Identification of staff resource to  | SMT  | 31/3/19  | <b>completed</b>  |

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| <p><b>planning and resilience.</b></p>  | <p>progress outstanding BC arrangements</p>  |   |                 |  |
|   | <p>Completion of major infectious disease/pandemic plans</p>   | <p>Corporate Manager / HSCM CCG</p>                                   | <p>30/4/19</p>  | <p><b>In progress</b><br/>Discussion held with colleagues in Aberdeen City and Aberdeenshire to ensure consistent approach. NHSG to provide some further guidance and services are updating BC plans and this information is required to populate the critical functions list.</p> |
| <p><b>5. Risk to MIJB decisions resulting in litigation/judicial review. Expectations from external inspections are not met.</b></p>                        | <p>Process for sign off and monitoring actions arising from Internal and External audits is being set out as part of the HSCM governance arrangements.</p>               | <p>Corporate manager / Chief Internal Auditor</p>                     | <p>31/3/19</p>  | <p><b>Process completed and implemented</b></p>  |
| <p><b>6. Inability to achieve progress in relation to national Health and Wellbeing Outcomes. Performance of services falls below acceptable level.</b></p> | <p>Development work will be undertaken to establishing clear links to performance that describe the changes proposed by actions identified in the new Strategic Plan</p> | <p>Chief Financial Officer / Corporate manager / Service Managers</p> | <p>31/10/19</p> | <p><b>In progress</b></p>  |
| <p><b>7. Risk of major disruption in continuity of ICT operations, including data security, being compromised</b></p>                                       | <p>Protocol for access to systems by employees of partner bodies to be developed.</p>  |   |                 | <p>Staff are able to access systems where appropriate, the protocol requires to be documented</p>  |