



AUDIT AND PERFORMANCE COMMITTEE

20 September 2018

RISK MANAGEMENT PROGRESS UPDATE

Report by Chief Financial Officer (Report No. G/18/123)

PURPOSE OF REPORT

The purpose of this paper is to update the Audit and Performance Committee on risk management and to note and agree the next steps in respect of finalising Health and Social Care Partnership (HSCP) Risk Profile.

1. BACKGROUND

On 6 March 2018 a report by the Chief Finance Officer was presented at the Audit and Performance Committee (G/18/28) in respect of Risk Management. This report set out a proposal to undertake a risk workshop with expert facilitation to ensure a full and clear understanding for officers and IJB members of the model of governance and implications for risk management:

- Back to basics review of strategic risks across directly delivered and hosted services.
- Process/arrangements for escalating operational risks which require strategic oversight due to potential impact on IJB objectives.
- Review reporting arrangements and line of accountability.

2. PROGRESS TO DATE

An initial risk management session was held in April 2018 with members of Perth & Kinross Health & Social Care Partnership's Executive Management Team / Integrated Management Team (EMT/IMT) which set out the context of risk management within the HSCP and challenged the existing set of strategic risks previously identified. This session identified the need for a further series of risk management workshops to complete the strategic risk profile for the HSCP.

A further risk workshop was held on 15 August 2018 with good progress made in achieving identification of strategic risks. However, further workshop sessions are required to complete.

A risk escalation process was also discussed and agreed at the 15 August 2018 workshop that would give clarity around risk escalation and ensure timely responses to allow risk mitigation. It was agreed that this should now be presented to EMT for consideration.

It was also agreed at the workshop that the Situation, Background, Assessment and Recommendation Template (SBAR) should only be used for the escalation of risk only.

As a result of the risk workshops it has been necessary to refresh the Risk Management Framework / Process and this will be presented to Audit and Performance Committee once finalised.

3. NEXT STEPS

A further four workshops will be held between now and October 2018 which will result in a complete set of Strategic Risks for HSCP.

A session on risk management to be held with the IJB in November 2018.

The risk management escalation process to be agreed by EMT 6 September 2018.

Risk Management Framework / Process refreshed and agreed by IMT/EMT September 2018.

4. CONCLUSION

This report sets out the progress and concluding next steps for the completion of the HSCP Strategic Risk Profile, refresh of the Risk Management Framework / Process and risk escalation process.

5. RECOMMENDATION(S)

The Audit and Performance Committee are asked to:

- (i) Note the progress made in respect of Risk Management including the further 4 risk management sessions and the session with IJB all to be held between now and end of October 2018 (Appendix 1);
- (ii) Approve the refreshed Risk Management Framework / Process and risk escalation process at the next Audit and Performance Committee meeting;
- (iii) Remit the Chief Finance Officer to present the Strategic Risk Profile to the Audit and Performance Committee at it's next meeting.

Author(s)

Name	Designation	Contact Details
Jane M Smith	Chief Financial Officer	janemsmith@nhs.net

NOTE: No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information), were relied on to any material extent in preparing this report.