Agenda Item 5

IJB Strategic Risk Register and Clinical and Care Governance Committee



Falkirk IJB Clinical and Care Governance Committee

21 May 2021

IJB Strategic Risk Register and Clinical and Care Governance Committee For Noting

1. Executive Summary

1.1 The report summarises initial discussions to explore the alignment of relevant risks contained in the IJB Strategic Risk Register to the Clinical and Care Governance Committee and how assurance will be provided. This is building on work that is already ongoing and set out in the report.

2. Recommendations

The Clinical and Care Governance Committee is asked to:

2.1 note the content of the report.

3. Background

- 3.1 Effective risk management is a fundamental aspect of good corporate governance and plays a key role in supporting delivery of the IJB's strategic plan and associated priorities.
- 3.2 The IJB is responsible for implementing a governance framework and system of internal control which is designed to identify, respond to and manage risk. Material risks which cannot be mitigated to an acceptable level are included in and monitored as part of the IJB's Strategic Risk Register.
- 3.3 The IJB Strategic Risk Register is reviewed and updated by the HSCP Senior Leadership Team (SLT) and Audit Committee on a quarterly basis and is presented to the IJB biannually. The last report to the IJB was in March 2021.

4. Risk Management Arrangements

4.1 Review of the IJB's Strategic Risk Register

A comprehensive review of the Strategic Risk Register commenced via a workshop with the HSCP SLT on 21 April 2021. The purpose of the workshop was to re-scope the IJB Strategic Risk Register to ensure it contains true strategic risks to the delivery of the IJB's objectives and that all relevant risks are captured.

- 4.2 The workshop involved:
 - review of the detail and substance of each risk
 - consideration of the type of risks that should be captured in a Strategic Risk Register
 - risk owners
 - risk scores.
- 4.3 The workshop also considered risk reporting requirements for the Strategic Risk Register:
 - risk reports
 - content, layout, frequency
 - specific for IJB and SLT
 - sharing risk / interlock of IJB, Council and Health Board strategic risks.
- 4.4 Activity is scheduled to further review each risk with the relevant risk owner before reporting back to a future SLT meeting, and then the Audit Committee.

4.5 Internal Audit of the IJB Risk Strategy

An Internal Audit review of the IJB Risk Management arrangements was commissioned as part of the 2020/21 work plan. Fieldwork is currently underway (delayed due to COVID). The Internal Audit report will inform the review and refresh of the IJB Risk Management Strategy. As such a decision was taken by the Chief Finance Officer with agreement from the NHS Board and Falkirk Council Risk Managers to await the internal audit report prior to undertaking any fundamental change to the IJB Risk Management Strategy.

4.6 The Internal Audit and the workshop held in April is the first step in the process to foster improved integration and interlock arrangements for identifying, managing, sharing and tracking relevant risks between partner organisations. Early positive discussions have taken place between the Chief Finance Officer and Risk Management representatives from the NHS Board and Falkirk Council in this regard.

Clinical and Care Governance

- 4.7 As noted in the Overview of Local Oversight Arrangements at agenda item 8 (section 6.7) a draft Clinical Governance Structure paper was presented to the NHS FV Clinical Governance Working Group. This draft paper demonstrated the assurance and escalation flow through the Clinical Governance groups in NHS Forth Valley.
- 4.8 The Clinical Governance Structure mapping is continuing with collaboration between NHS FV and Health and Social Care partners and will be presented at a future meeting when completed. These discussions will include alignment of relevant risks contained in the IJB Strategic Risk Register to the Clinical and Care Governance Committee and how assurance will be provided.

- 4.9 This process will also include Assurance Mapping and Assessment of strategic risks facilitated with the Committee in order to:
 - assess what level of assurance is required
 - assess current risk controls:
 - what assurance activity is in place and which line of defence it sits with
 - o effectiveness assessment of controls
 - importance of risk controls to mitigating risk
 - provide an overall assurance assessment for the risk.

5. Conclusions

5.1 The report sets out ongoing work with clinical and care governance and risk management leads to align relevant risks in the IJB Strategic Risk Register to the Clinical and Care Governance Committee and consider how assurance will be provided.

Resource Implications

There are no resource implications arising from this report.

Impact on IJB Outcomes and Priorities

The ability to effectively respond to and manage risk is critical to the achievement of IJB outcomes and priorities.

Directions

A new Direction or amendment to an existing Direction is not required for this report.

Legal & Risk Implications

There are no legal and risk implications arising from this report. There are a number of legal and risk implications relating to:

- potential adverse impact on achievement of the IJB's Strategic Plan and associated priorities if an effective risk management strategy is not embedded across the organisation
- ability to meet the requirements of the Integration Scheme
- corporate assurance that risks are being managed effectively
- potential financial, operational and reputational risks to the IJB, Falkirk Council and NHS Forth Valley.

However the work being undertaken will ensure appropriate actions and oversight arrangements are in place.

Consultation

There are no consultation implications arising from this report.

Equalities Assessment

There are no equality implications arising from this report.

6. Report Author

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7. List of Background Papers

7.1 IJB Strategic Risk Register

8. Appendices

n/a