

## **Agenda Item 12**

### **IJB Risk Management Arrangements and Clinical and Care Governance Committee**



## Falkirk IJB Clinical and Care Governance Committee

26 November 2021

### IJB Risk Management Arrangements and Clinical and Care Governance Committee

For Consideration and Comment

#### 1. Executive Summary

- 1.1 The report summarises ongoing risk management discussions to align relevant risks contained in the IJB Strategic Risk Register to the Clinical and Care Governance Committee and how assurance will be provided on the quality of care delivered.
- 1.2 The report also sets out the work being done by the Public Protection Chief Officers Group (COG) to review their Risk Register and how this aligns with this Committee.

#### 2. Recommendations

The Clinical and Care Governance Committee is asked to:

- 2.1 consider and comment on 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 controls 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 Risk register was presented to the IJB in March 2021 and Audit Committee in September 2021. A report will be presented to the Audit Committee in December 2021.

## 4. Risk Management Arrangements

### 4.1 Public Protection Chief Officers Group (COG) Risk Register

In June 2021, the Falkirk COG agreed the first version of their risk register and agreed to review this at each meeting. Chief Officers are named responsible owners of relevant parts of the register and will be responsible for updates and ensuring the risks and mitigations are proportionate and suitably responsive.

### 4.2 In December 2021, the Falkirk COG will consider an updated risk register; and the risk details are being refined / updated by Lead Officers to include clear:

- Risk Statements
- Risk Scoring (likelihood and impact)
- Mitigations, additional actions, and sources of assurance are updated to reflect, e.g. recent audits, performance, and assurance reports.

### 4.3 The COG have a clear governance structure and a high-level 'Assurance Map' which sets out key sources of assurance for each COG Sub-Committee. Further work will be undertaken to map out the governance and escalation processes between the COG, IJB Clinical and Care Governance Committee, Community Planning Groups, and NHS Forth Valley Groups. This is important to ensure there is alignment and minimal duplication with wider risk registers, plans, and governance reports. A report relating to this will be presented to a future Committee meeting.

### 4.4 The COG Risk register contains a strategic risk relating to the IJB Clinical and Care Governance arrangements. This risk is described as follows:

*There is a risk that the IJB does not receive assurance in respect of performance and quality control. This could be the result of:*

- *the mechanisms to provide assurance are not effective*
- *lack of quality control arrangements*
- *lack of capacity to effectively monitor performance*
- *Partnership risks are not escalated appropriately*
- *Partnerships risks are not appropriately responded to when escalated*
- *failure to adequately share information about service performance and quality concerns*
- *lack of clarity around governance, decision-making and accountability for services at a strategic level*
- *lack of clarity around roles and responsibilities across all partners for in-scope IJB functions and services at an operational level.*

- 4.5 The Chief Social Work Officer reviews the Public Protection risk details on the Council and IJB Risk Registers regularly – including a summary of the COG risks – and this feeds into relevant Committees and Boards.
- 4.6 The updated COG Risk Register will be presented to the COG meeting for consideration and approval. A report relating to this will be presented to a future Committee meeting.
- 4.7 **Review of the IJB's Strategic Risk Register**  
Committee received an update in May 2021 about a workshop held to begin work to review the Strategic Risk Register and ensure it contains all strategic risks to the delivery of the IJB's objectives. The workshop also considered the appropriate risk owners and risk scores.
- 4.8 Further work was planned to review each risk with the relevant risk owner before reporting back to a future SLT meeting, and then the Audit Committee. This work has been delayed as it involves a number of officers who are supporting the delivery of essential services in response to the pandemic.
- 4.9 **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. The findings and associated action plan from the review will be presented to IJB Audit Committee in December. This will inform the development of the IJB's strategic risk register going forward.
- 4.10 **Clinical and Care Governance Structure mapping**  
As noted at section 4.3 of the report, work to map out the governance and escalation processes across HSCP services is underway. NHS FV Clinical Governance Working Group has considered a draft Clinical Governance Structure paper for NHS Forth Valley and we are building on this to include HSCP arrangements.
- 4.11 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
    - 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. It also provides an update on work to review the COG Risk Register.

### 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