Report

Report to:	**Social Work Resources Committee**
Date of Meeting:	**11 December 2019**
Report by:	**Director, Health and Social Care**

Subject:	**Update of the Social Work Resources' Risk Register and Risk Control Plan**

1.   Purpose of Report

1.1.   The purpose of the report is to:-

   ♦ present an update on the Risk Register and Risk Control actions for Social Work Resources

2.   Recommendation(s)

2.1.   The Committee is asked to approve the following recommendation(s):-

   (1)   that the contents of the Resource Risk Register be noted.

3.   Background

3.1.   The Council's Risk Management Strategy promotes consideration of risk in service delivery, planning and decision making processes. The Strategy requires Resources to record and review risk and control actions regularly. Social Work Resources (SWR) follow the guidance in developing, monitoring and updating the Risk Register on an ongoing basis.

3.2.   The purpose of the Register is to ensure that the Resource is fully aware of its top risks; that these risks are prioritised; and that controls are in place to eliminate or minimise the impact of the risks.

3.3.   The Resource scores the risks in accordance with the Council scoring mechanism, based on likelihood and impact. This results in risks being scored between one and nine (low – high).

3.4.   Risks are scored on their inherent score (risk if we do nothing) and their residual risk (risk after applying controls).

3.5.   The last update of the SWR Risk Register was reported to the Social Work Resources Committee on 20 February 2019.

3.6.   The Council's top Risk Register and Risk Control Plan has been reviewed. This work was completed in September 2019.

3.7.   The Central Risk Management Team annually review Resource compliance with the Risk Management Strategy. The outcome of the 2018/2019 review identified that SWR achieved 100% compliance, scoring 42 out of a possible 42.

3.8 A separate Strategic Risk Register for South Lanarkshire Integration Joint Board (IJB) has been developed and reported to the IJB (Performance and Audit) Sub-Committee. This is now embedded as part of the overall IJB's Code of Corporate Governance.

4.   Resource Risk Management
4.1.   Each Resource has a Resource Risk Management Group (RRMG) which has responsibility for the promotion and management of risk.

4.2.   The SWRRMG reports to the Social Work Governance Group on a quarterly basis. The risk reporting agenda within SWR is co-ordinated through the Senior Management Team (SMT) and supported by the Service Development Manager who attends the Risk Sponsors Group.

4.3.   The work of the group over the last year has focused on the review and update of the Resource Risk Register, and ensuring that the Register reflected the Council's Plan and Individual Service Plans.

5.   Risk Register
5.1.   Work has been completed by the Resource Risk Group to finalise the review of the Resource Risk Register. The update gave consideration to risks at a service level, as well as strategic Council risks.

5.2.   The Resource Risk Register will be monitored on an ongoing basis to allow new risks to be added and for the control measures and scores of the existing risks to be reviewed in light of new information.

5.3.   Risks can result from internal or external influences, with examples being the impact of projected funding cuts or legislative changes or the impact of internal service changes.

5.4.   The development process for the Resource Plan requires a risk assessment process to be undertaken as appropriate resulting in some actions within the Resource Plan having a corresponding risk identified within the Risk Register.

5.5.   SWR Risk Register has been adapted to re-introduce and widen the scope of risks which has resulted in changes as summarised below:
♦ newly added risk - failure to evidence sufficient progress against Care Inspectorate requirements
♦ newly added risk - failure to prepare for the analogue to digital switchover
♦ new lower level risk - failure in multi-agency public protection procedures that result in harm to vulnerable children and adults

5.5.1. Some risk descriptions for Community Plan and Adverse Weather have been reworded.

5.6.   Risks scored seven to nine are considered to be high risks and these are monitored closely. The top risks identified for the Resource, which is those that are residually scored as being high, are attached at Appendix 1.

5.7.   A clear link has now been made to the Council's top risks. Top risk rankings and Resource specific risk implications are noted within the appendix.

5.8.   Risks evaluated residually as being medium or low risk will be monitored to ensure that they continue to be adequately managed.

6.   Insurance Hotspots
6.1.   A review of claims carried out for the period 1 April 2018 to 31 March 2109 identified the following insurance hotspot areas for SWR:
   ♦   mobile phone security
   ♦   slips, trips and falls, including those in winter weather
   ♦   risks associated with vehicle incidents (reversing)

6.2.   The following progress has been made with actions included in the hotspot action plan:
   ♦   staff briefing undertaken regarding loss of mobile phones
   ♦   Corporate guidance awaited on 'footwear'
   ♦   driver instruction manual updates (reversing)

7.   Scope and Appetite for Risk
7.1.   South Lanarkshire Council (SLC) aims to be risk embracing, that is it will accept a tolerable level of risk in seeking service efficiencies and in agreeing control measures.

7.2.   The level of risk facing the Council is measured both before (inherent risk) and after (residual risk) consideration of controls. The Council should never carry a high residual risk exposure as this would indicate instability but a low residual risk exposure should also be avoided as this indicates lack of innovation.

7.3.   SLCs ideal risk exposure should be consistent with an acceptable tolerance of:
   ♦   no more than 20% of residual risks at a high level
   ♦   around 40% to 50% of residual risks at a medium level
   ♦   around 30% to 40%of residual risks at a low level

7.4.   SWR Risk Exposure is detailed in Table One below:

Table One – SWR Risk Exposure

Residual risk score	2018/2019		2019/20	
	Number of risks	Percentage of risks	Number of risks	Percentage of risks
High (7, 8 or 9)	6	35%	8	40%
Medium (4, 5, or 6)	8	47%	11	55%
Low (1, 2, or 3)	3	18%	1	5%
	17	100%	20	100%

7.5.   Despite the fact that the risk exposure is outwith the ideal risk exposure defined by the Risk Management Strategy, it has remained similar to the previous year with slight movement in risk scores. This risk exposure is to be expected as these are the highest level risks currently being faced by the Resource.

7.6.   SWR has ensured that all inherent risks scored at a high level have cost effective control measures in place. Where further control measures are required, these are included within the Resource Risk Control Plan.

8. **Risk Control Actions**

8.1. There were no Risk Control Actions due for delivery between April and September 2019.

8.2. Two actions due for completion during 2018/2019 have been completed. One hundred per cent (2/2) of these Risk Control Actions were completed on time against an overall Resource target of 75%.

8.3. Details of the completion of Risk Control Actions during 2018/2019 and 2019/2020 to date are contained in Table Two below.

Table Two

	2018/19	2019/20 (as at 30 September 2019)
Total number of actions due	2	0
Completed on time	2	0
Completed late	0	0
Due to be completed at a later date	0	0

8.4. Progress with completion of Resource Risk Control Actions is monitored on a monthly basis by the Central Risk Management Team. This is also reviewed by the Resource Risk Group.

8.5. There are currently no Risk Control Actions due for completion during the remainder of 2019/2020. The Committee is asked to note that the outstanding actions to mitigate risks within the Risk Control Plan will be progressed by the relevant officers.

9. **Major Projects, Partnerships or Change**

9.1. Within SWR, 12 partnerships have been identified. One of these is considered to be high risk, that is, the South Lanarkshire Health and Social Care Partnership.

9.2. Appropriate risk management arrangements are in place for the high level partnership as detailed at paragraph 3.8.

10. **Next steps**

10.1. The RRMG will continue to report on a quarterly basis to the Social Work Governance Group. The Risk Register will be reviewed on an ongoing basis by the group to ensure that risks remain valid for the appropriate Service areas and to identify new areas of risk that affect the Resource. An update report will be provided to Committee on an annual basis.

11. **Employee Implications**

11.1. Time will be required by the RRMG in the management of the Resource Risk Register and Risk Control Plan.

12. **Financial Implications**

12.1. During the year, if any new initiatives are identified which would help mitigate any particular risk faced by the Resource, some financial assistance may be available from the Risk Management Fund. This is managed through a bid being submitted and assessed against set criteria.

12.2. There were no bids made in the current financial year by SWR.

13. Other Implications (Including Environmental and Risk Issues)
13.1. Failure to demonstrate that risk is actively considered and managed cannot only lead to avoidable financial loss but could also affect delivery of services and could affect the Resources' reputation.

13.2. There are no implications for sustainability in terms of the information contained in this report.

14. Equality Impact Assessment and Consultation Arrangements
14.1. This report does not introduce a new strategy, policy or function and as such does not require an Equality Impact Assessment to be completed.

14.2. From a consultation and engagement perspective, this report has been through a number of forums prior to being presented at the Social Work Resources Committee, for example the Social Work Governance Group and Senior Management Team.

Val de Souza
Director, Health and Social Care

12 November 2019

Link(s) to Council Values/Objectives/Ambitions
♦ accountable, effective, efficient and transparent

Previous References
♦ 2017/2018 Annual Risk Report – 20 February 2019

List of Background Papers
♦ none

Contact for Further Information
If you would like to inspect the background papers or want further information, please contact:-
Bernie Perrie, Planning and Performance Manager
Ext: 3749 (Phone: 01698 453749)
Email: bernie.perrie@southlanarkshire.gov.uk

SWR Ranking	Risk	Inherent score	Sample of Controls	Residual score
1	**Failure to evidence sufficient progress against Care Inspectorate requirements** (Care at Home Service) ♦ lack of evidence to show improvement and not meeting requirements specified in last inspection report ♦ Care Inspectorate follow up visit anticipated in next six weeks	9	♦ Chief Social Work Officer chairs a group tasked with remodelling service to achieve a positive outcome. Group meets weekly ♦ transfer Blantyre and Larkhall service users to East Kilbride and Clydesdale localities respectively ♦ ongoing regular meetings with Care Inspectorate ♦ multi-layered approach to providing evidence involving staff from a number of disciplines ♦ Elected Members briefed on issues and consequences ♦ External "Critical Friend" identified to review service and provide a report with recommendations ♦ additional funding to support capacity in the service	8
	Failure to prepare for the analogue to digital switchover ♦ there are currently approximately 9,000 community alarm users in South Lanarkshire ♦ the Council's Alarms Receiving Centre (ARC) is based at Pollock Avenue, Hamilton and is not digitally equipped	9	♦ ICT programme Board to co-ordinate future developments ♦ South Lanarkshire Health and Social Care Partnership agreed to part fund a post within IT to map out the issues and way forward ♦ Ofcom have been predicting that telecommunications providers will stop supporting the public switched telephone network (PSTN) and Integrated Services Digital Network by 2025	8

SWR Ranking	Risk	Inherent score	Sample of Controls	Residual score
	Reduction in Council funding resulting in difficulties in achieving savings and maintaining frontline services. (Top Council risk) ♦ Money Matters mitigating implications of the welfare reform agenda. ♦ failure to achieve Resource savings targets ♦ failure to collect care and grant income	9	♦ Money Matters service continues to income maximise ♦ active participation in the Efficiency agenda ♦ annual budget meetings ♦ service reviews and redesign ♦ assessment and care arrangements and income maximisation opportunities ♦ review grants to voluntary organisations ♦ review service user and carer prioritisation in terms of accessing service and support ♦ support carers in their caring role ♦ target resources on those with critical/substantial needs ♦ work in partnership with voluntary organisations to provide early intervention and preventative supports. ♦ service Reviews including IT solutions to deliver service models ♦ reassess 'waiving of charges' SDS in relation to carers Adults Carer Support Plans ♦ Procurement of Carers Services, Care at Home and Support Services to those with Learning disabilities ♦ Introduction of Eligibility Criteria	8

SWR Ranking	Risk	Inherent score	Sample of Controls	Residual score
	The Council is significantly affected by the impact of the UK leaving the European Union (Top Council risk) ♦ there will be a shortage of highly skilled workers in certain professions which currently rely on migrant workers – for example education and healthcare ♦ there will be a shortage of entry level workers, including those with lower skills, those who gain their qualifications largely through work based training, and those in less highly-paid sectors	9	♦ the Council's Economic Development Service provides support to businesses within the South Lanarkshire area ♦ advice published by the Government and other economic development agencies shared via partners and business networks ♦ financial strategy addresses potential changes in funding ♦ there is potentially new EU funding that the Council could apply for in the period 2019-2023 totalling £6.5m (ESF Employability Phase 2 bid). This is currently on hold with the SG. ♦ the HM Treasury has provided assurances around the current EU funded programme for all projects with a signed agreement in place prior to the UK leaving the EU ♦ various reports to Executive Committee highlights implications for Council Services ♦ report presented to the CMT on "Brexit and the Implications for the Council's European Funded Projects" ♦ UK and Scottish Government Reasonable Worst Case Scenario Planning Assessments in planning updates to CMT ♦ Resources have familiarised themselves with the content of the no-deal technical papers ♦ brief guide for businesses which signposts the support and guidance that is available and to consider the six areas under which Brexit may affect their business has been published ♦ risk workshop held with the Community Planning Partnership (CPP) to examine the potential implications for partners and to identify areas where a joined up approach to Brexit planning can be developed ♦ officers have attended various seminars ♦ project management structures in place, with lead officers identified ♦ Resource Risk Registers reflect Brexit risks ♦ Brexit Statement in the Annual Accounts	8

SWR Ranking	Risk	Inherent score	Sample of Controls	Residual score
	Potential liability arising from claims of historic abuse (Top Council risk) ♦ perceived failure on the authority and predecessor authority to fulfil its obligations in relation to looked after children ♦ potential disclosures to the inquiry which result in the Council as the successor authority being liable ♦ claims for compensation ♦ damage to the reputation of the Council ♦ potential periods of the inquiry uninsured ♦ current public consultation (November 2019) inviting views on aspect of the design of the redress scheme, and how those responsible could make a financial contribution	7	♦ Cross Council Steering Group established ♦ review of historical records pertaining to current Section 21 notices completed ♦ timescales met for Section 21 notices received ♦ level of insurance cover exists in relation to predecessor authorities	7
2	**Information Management not subject to adequate control** (Top Council risk) ♦ ineffective records management practices could lead to data breaches ♦ poor information recording within client index systems ♦ systems not geared towards sharing relevant information across partners ♦ impact of GDPR	9	♦ regular audits of case file activity undertaken ♦ data sharing protocols are in place with partners to ensure appropriate sharing of information about service users ♦ Electronic Documents Records Management System (EDRMS) is embedded in case file practice in all localities ♦ Resource preparing for Corporate file structure Objective ♦ SWiSplus training team dedicated to training staff in use of client index system ♦ contract monitoring in place with external providers ensuring their data protection obligation followed ♦ annual audit checklists ♦ Information Governance Board GDPR action plan	7

SWR Ranking	Risk	Inherent score	Sample of Controls	Residual score
	Fraud, theft, organised crime and cyber-attacks (Top Council risk) ♦ employee fraud/theft ♦ Resource employs over 3000 staff ♦ procurement processes fail to identify suppliers with links to serious organised crime ♦ breach in internet security	9	♦ Code of Conduct for all Social Work Staff ♦ Scottish Social Services Council accreditation ♦ disciplinary procedures in place ♦ core clauses in standard model contract with external providers ♦ contract monitoring arrangements in place ♦ IT systems in place to combat breaches	7
	The Council fails to deliver the objectives set out in the IJB Strategic Commissioning Plan (Top Council risk) • Implications for children and justice services • Governance and accountability arrangements • Locality Planning models • Locality Service delivery models • Budgets and finance • Reputation	9	♦ Chief Officer and Senior Management Team in post ♦ Committee structure in place ♦ Reports presented to CMT and Executive Committee ♦ Integration Board links to the Community Planning Partnership SLC representation on the Integration Board ♦ Chief Officer representation on Group ♦ SOLAR Guidance ♦ Strategic Commissioning Plan 2019-22 approved ♦ IJB Directions issued to Council and NHS Board annually ♦ National Audit Activity ♦ Locality Management Teams approved by the Senior Management Team ♦ SMT Work plan re the transformation/change agenda ♦ Chief Officers Network facilitated by the Scottish Government ♦ Code of Corporate Governance ♦ Performance reporting framework ♦ Tripartite Joint Chief Executive meetings ♦ Chief Officer 1-2-1 meetings with Chief Executives	7