

REPORT

Integration Joint Board Risk Register

Edinburgh Integration Joint Board

15 December 2020

Executive Summary

The purpose of this report is to provide the Integration Joint Board (IJB) with a current version of the risk register for consideration and to update members on the risk management activity put in place to manage, mitigate and escalate risks.

Recommendations

- It is recommended that the Integration Joint Board:
- a. note the continued development of the IJB risk register;
 - b. note the introduction of 'risk profile cards' for 'very high', 'high' and 'medium' risks;
 - c. consider if the mitigating controls identified against these current risks are adequate; and
 - d. consider if further risks should be added to the register.

Directions

| | | |
|---|--|---|
| Direction to City of Edinburgh Council, NHS Lothian or both organisations | No direction required | ✓ |
| | Issue a direction to City of Edinburgh Council | |
| | Issue a direction to NHS Lothian | |
| | Issue a direction to City of Edinburgh Council and NHS Lothian | |

Main Report

Background

1. As a key part of its governance process, the risk register examines the risks that impact the IJB's ability to deliver its objectives. Members of the IJB Audit and Assurance Committee (AAC) are responsible for the oversight of risk management arrangements; this includes receipt, review and scrutiny of reports on strategic risks and escalation of any issues that require to be brought to the IJB's attention.
2. The risk register sets out the cornerstones of a comprehensive risk process that identifies and assesses risks, and also clearly associates their owners and controls to manage them. The AAC reviews the IJB risk register quarterly, and refers it to the IJB twice yearly.
3. Following a review of IJB risks in early 2018, strategic IJB risks were decoupled from operational EHSCP risks. The risk register was re-launched and approved by the IJB in June 2018. Whilst this progress was welcomed it was recognised that the approach required further development, in particular to more clearly articulate the actions being taken to mitigate and manage risks. The following section of this paper sets out a proposed methodology.
4. A copy of the IJB risk register is attached as [Appendix 1](#) to this report.

Risk Update

5. For September's AAC, we developed a new tool to help enhance and simplify the risk management process. A new 'risk profile card' format was introduced (see template guidance in [Appendix 2](#)) for risks scored as 'high' or 'very high'. This was well received by the AAC members, and the approach has now been expanded to include 'medium' scored risks.
6. We have taken steps this year to ensure that we are identifying a wider range of potential threats preventing us from achieving the IJB's strategic objectives and directly relaying their impact to the IJB and also in terms of outcomes for the people of Edinburgh. This new approach helps us better understand how the IJB is exposed to those risks and what controls we need to have in place to mitigate the risks.
7. Each IJB risk rated 'medium', 'high' and 'very high' has been given a risk profile card. These are included in [Appendix 3](#) and each profile card:
 - identifies the risk, states the objective (what the IJB is trying to achieve) and the source of that objective (key document or relevant legislation);
 - names a risk owner who is responsible for actions;
 - explains how the risk would happen and the potential outcomes;

- illustrates the historic and current risk score and how it relates on the risk assessment matrix;
 - provides a recent update on risk management activities;
 - identifies what we are currently doing to reduce the risk; and
 - summarises the planned actions to reduce the risk score.
8. This new approach was reviewed and discussed by the Executive Team in October 2020. Officers recognised the value of the more detailed and comprehensive risk register and will review the IJB risk on frequent basis – as a standing item of their Executive Team Governance Meeting.
9. This systematic risk management approach will support the more dynamic nature of the new risk register style and hopefully promote quality discussions at both the AAC and IJB.

Implications for Edinburgh Integration Joint Board

Financial

10. No direct financial implications.

Legal / risk implications

11. The risk register included in this report as Appendix 1 highlights current IJB risks. The register is a core component of the IJB's internal control system and is used a systematic ad structured method of recording all risks that threaten the IJB's strategic objectives/priorities.

Equality and integrated impact assessment

12. There are no equalities implications arising from this report.

Environment and sustainability impacts

13. There are no environment or sustainability implications arising from this report.

Quality of care

14. Not applicable.

Consultation

15. The IJB risks were developed following consultation with the EHSCP EMT, IJB AAC members, Chief Internal Auditor, representatives from the three Lothian IJBs and the Council's Risk Officer.

Report Author

Judith Proctor

Chief Officer, Edinburgh Integration Joint Board

Contact for further information:

Name: Cathy Wilson

Email: cathy.wilson@edinburgh.gov.uk Telephone: 0131 529 7153

Background Reports

None

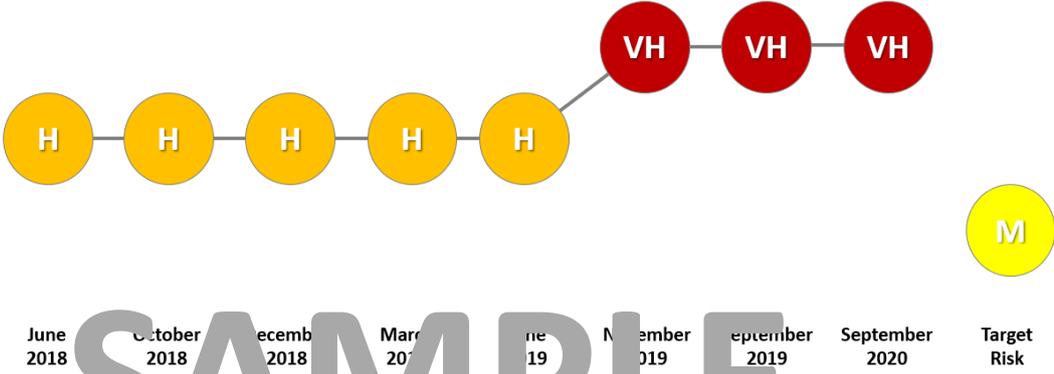
Appendices

| | |
|----------------------------|---|
| Appendix 1 | IJB Risk Register – November 2020 |
| Appendix 2 | Risk Profile Card Template - Guidance |
| Appendix 3 | IJB Risk Profile Cards for 'Medium', 'High' and 'Very High' Risks |

Appendix 1 – EIJB Risk Register – November 2020

| ID | Risk | Rating |
|---------------------|---|------------------|
| 1. | Strategic Planning and Commissioning | |
| 1.1 | Failure to deliver EIJB strategic objectives leading to a requirement to revise the strategic plan. | Very High |
| 1.2 | Failure to influence decision making over services that are not managed by the Partnership leading to the inability to review service delivery and drive strategy. | High |
| 1.3 | Failure to deliver delegated services within available budgets leading to a requirement to revise the Strategic Plan. | High |
| 1.4 | Insufficient asset planning arrangements leading to failure or delays in delivering the strategic plan. | High |
| 2. | Issuing of Directions | |
| 2.1 | Failure of NHS Lothian and the Council in delivering directions leading to confusion and inefficiency. | High |
| 2.2 | Failure of NHS Lothian and the Council to deliver directions leading to services not aligned to strategic intentions. | High |
| 3. | Management and Role of the EIJB | |
| 3.1 | Inability to operate effectively as a separate entity leading to a failure to deliver the principles of integration. | Medium |
| 3.2 | Failure to make best use of the expertise, experience and creativity of its partners leading to a negative impact on the delivery of the strategic outcomes and poor relationships. | Medium |
| 3.3 | EIJB infrastructure lacks the professional, administrative and technical infrastructure to operate effectively leading to failures in governance, scrutiny and performance arrangements. | High |
| 3.4 | Insufficient or poor-quality assurance from assurance providers to support effective delivery of their scrutiny responsibilities. | Medium |
| 3.5 | Non-compliance with applicable legislative and regulatory requirements leading to legal breaches, fines and/or prosecution. | Low |
| 3.6 | Officers with operational responsibilities are being asked to scrutinise performance in areas where they are not totally independent leading to inadequate oversight of delegated EIJB functions. | Low |
| 3.7 | Insufficient or poor-quality assurance from assurance providers to support effective delivery of their scrutiny responsibilities. | Low |

Appendix 2 – Risk Profile Card Template - Guidance

| 1. Thematic Risk Title | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|-------------|---|----------------|-----|-----|----|----|--------|---|---|---|---|----|----------|---|---|---|---|---|----------|---|---|---|---|---|------|---|---|---|---|---|--|-----|-----|-----|-----|-----|-------------|--|--|--|--|--|---|--|--|------------|----------------|---|---|---|----|----|--------|---|---|---|---|----|----------|---|---|---|---|---|----------|---|---|---|---|---|------|---|---|---|---|---|--|-----|-----|-----|-----|-----|-------------|--|--|--|--|--|
| Risk 1.2 (sub risk number) | Risk identify – What could happen and what would be the immediate consequence? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Objective: <i>What are we trying to achieve?</i> | Source of objective: <i>Where the objectives can be found in our range of strategic IJB documents or Scottish Governance Guidance link.</i> | | Risk Owner: <i>Responsible IJB Officer</i> Risk Contributor: <i>Contributing Officer</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Historical Risk Score  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Current Risk Score | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Current Risk Score | Likelihood | Consequence | Risk Rating | Date assessed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Almost Certain | Major | Very High | September 2020 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Current Risk Score <table border="1"> <tr> <td rowspan="6" style="writing-mode: vertical-rl; transform: rotate(180deg);">Likelihood</td> <td>Almost Certain</td> <td>M</td> <td>H</td> <td>H</td> <td style="background-color: #ff0000; color: white;">VH</td> <td style="background-color: #ff0000; color: white;">VH</td> </tr> <tr> <td>Likely</td> <td>M</td> <td>M</td> <td>H</td> <td>H</td> <td style="background-color: #ff0000; color: white;">VH</td> </tr> <tr> <td>Possible</td> <td>L</td> <td>M</td> <td>M</td> <td>H</td> <td>H</td> </tr> <tr> <td>Unlikely</td> <td>L</td> <td>M</td> <td>M</td> <td>M</td> <td>H</td> </tr> <tr> <td>Rare</td> <td>L</td> <td>L</td> <td>L</td> <td>M</td> <td>M</td> </tr> <tr> <td></td> <td>Neg</td> <td>Min</td> <td>Mod</td> <td>Maj</td> <td>Ext</td> </tr> <tr> <td colspan="6" style="text-align: center;">Consequence</td> </tr> </table> | | Likelihood | Almost Certain | M | H | H | VH | VH | Likely | M | M | H | H | VH | Possible | L | M | M | H | H | Unlikely | L | M | M | M | H | Rare | L | L | L | M | M | | Neg | Min | Mod | Maj | Ext | Consequence | | | | | | Current Risk Score <table border="1"> <tr> <td rowspan="6" style="writing-mode: vertical-rl; transform: rotate(180deg);">Likelihood</td> <td>Almost Certain</td> <td>M</td> <td>H</td> <td>H</td> <td style="background-color: #ff0000; color: white;">VH</td> <td style="background-color: #ff0000; color: white;">VH</td> </tr> <tr> <td>Likely</td> <td>M</td> <td>M</td> <td>H</td> <td>H</td> <td style="background-color: #ff0000; color: white;">VH</td> </tr> <tr> <td>Possible</td> <td>L</td> <td>M</td> <td>M</td> <td>H</td> <td>H</td> </tr> <tr> <td>Unlikely</td> <td>L</td> <td>M</td> <td>M</td> <td>M</td> <td>H</td> </tr> <tr> <td>Rare</td> <td>L</td> <td>L</td> <td>L</td> <td>M</td> <td>M</td> </tr> <tr> <td></td> <td>Neg</td> <td>Min</td> <td>Mod</td> <td>Maj</td> <td>Ext</td> </tr> <tr> <td colspan="6" style="text-align: center;">Consequence</td> </tr> </table> | | | Likelihood | Almost Certain | M | H | H | VH | VH | Likely | M | M | H | H | VH | Possible | L | M | M | H | H | Unlikely | L | M | M | M | H | Rare | L | L | L | M | M | | Neg | Min | Mod | Maj | Ext | Consequence | | | | | |
| Likelihood | Almost Certain | | M | H | H | VH | VH | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Likely | | M | M | H | H | VH | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Possible | | L | M | M | H | H | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Unlikely | | L | M | M | M | H | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Rare | | L | L | L | M | M | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Neg | Min | Mod | Maj | Ext | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Consequence | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Likelihood | Almost Certain | M | H | H | VH | VH | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Likely | M | M | H | H | VH | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Possible | L | M | M | H | H | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Unlikely | L | M | M | M | H | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Rare | L | L | L | M | M | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Neg | Min | Mod | Maj | Ext | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Consequence | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---|---|---|----------------------------|--------------------------|
| Risk Activity | | | | |
| <i>Recent activity, progress, threat, opportunity that have occurred since previous update that should be highlighted to AAC.</i> | | | | |
| Risk Assessment | | | | |
| <i>(Based on NHS Scotland's Core Risk Assessment Matrices)</i> | | | | |
| Rationale behind Likelihood and Consequence/Impacts. | | | | |
| How would this risk happen? | | What would the potential outcome be? | | |
| <ul style="list-style-type: none"> <i>Lists of potential causes or threats</i> | | <ul style="list-style-type: none"> <i>What would crystallise if the risk were to happen.</i> | | |
| What are we doing to currently manage the risk? | | | | |
| 1. | <i>List of mitigation Actions</i> | | | |
| 2. | | | | |
| 3. | | | | |
| Additional controls or actions needed to manage this risk | | | Action Owner | Delivery Date |
| 1. | <i>What additional control are needed to better manage the risk and/or minimise the risk?</i> | | <i>Responsible Officer</i> | <i>Action completion</i> |
| 2. | | | | |
| 3. | | | | |
| Proposed Risk Acceptance | | | Owner | Date |
| <i>If applicable – description of any risk acceptance.</i> | | | | |

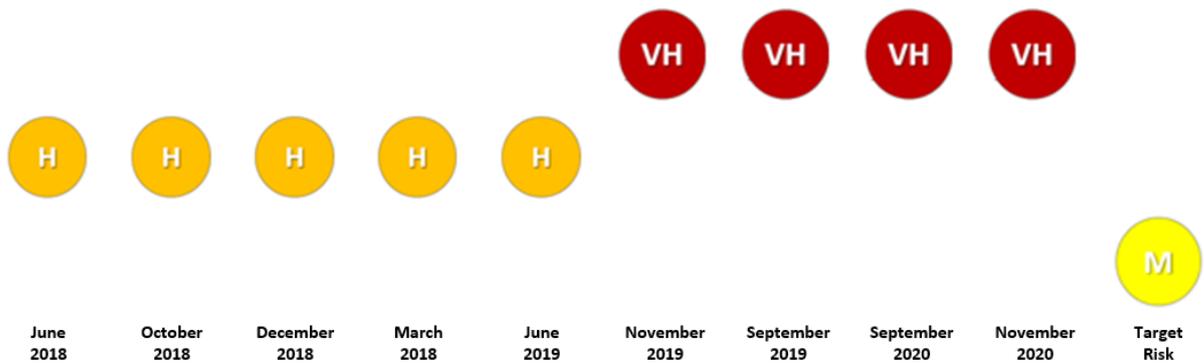
Appendix 3 – Risk Profile Cards for ‘Medium’, ‘High’ and ‘Very High’ Risks

1. Strategic Planning and Commissioning

Risk 1.1 Failure to deliver EIJB strategic objectives leading to a requirement to revise the strategic plan.

| | | |
|---|---|-------------------------------------|
| Objective: Delivery of EIJB strategic priorities designed to help achieve an affordable, sustainable and trusted health and social care system for Edinburgh. | Source of objective: EIJB Strategic Plan, Annual Plan, Financial reporting and engagement framework with stakeholders | Risk Owner: Chief Officer |
|---|---|-------------------------------------|

Historical Risk Score



Current Risk Score

| Current Risk Score | Likelihood | Consequence | Risk Rating | Date assessed |
|--------------------|----------------|-------------|------------------|---------------|
| | Almost Certain | Major | Very High | October 2020 |

Current Risk Score

| | | | | | | |
|------------|----------------|-----|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| | Consequence | | | | | |

Target Risk Score

| | | | | | | |
|------------|----------------|-----|-----|----------|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| | Consequence | | | | | |

Recent Activity

- Review of Strategic Plan (August 2019) completed in September 2020.
- Initial financial plan was presented to EIJB in October 2020.
- Review of extant directions was scrutinised by Performance and Delivery in September 2020 – this will be presented to EIJB in December 2020.
- Engagement and involvement approach with wider stakeholders has been developed.

Risk Assessment

Likelihood

- The EIJB is required to agree a savings and recovery programme because the income its been delegated by partners is less than the projected cost. This is a wider issue across many public sector organisations. The impact could mean that we are not able to improve outcomes as laid out in the strategic plan for all people in Edinburgh.

Consequence

- The Strategic Plan's four key elements (Edinburgh Offer, Three Conversations, Home First and Transformation Programme) are key parts of mitigating this risk. Their pace of their implementation has been compromised by COVID-19.

How would this risk happen?

- Insufficient resources (e.g. finances, workforce, infrastructure, etc.) delegated by the Council and/or NHS Lothian.
- Strategic priorities beyond current organisational experience.
- Lack of stakeholder support.
- Underestimated complexity of issues.
- Irregular assessment of objectives leading to unidentified impact of operational effectiveness.
- New regulations changing direction of travel
- External forces (major incidents) presenting unexpected threats /opportunities (e.g. Pandemic, EU Exit, etc.)

What would the potential outcome be?

- If strategic priorities (prevention and early intervention; tackling inequalities; person-centred care; managing resources effectively; best use of capacity; and right care, right place, right time) are not adequately managed, the planned improvements in health and wellbeing of people in Edinburgh would be negatively impacted.
- Reputational damage to the EIJB.

What are we doing to currently manage the risk?

| | |
|----|---|
| 1. | Published updated Strategic Plan 2019-2022 following wider consultation which included both NHS Lothian and Council partners. Partners are then fully aware of the EIJB's requirements. |
| 2. | Performance is regularly reported to the Performance and Delivery Committee and annually to the EIJB. Most of the Good Governance Institute recommendation have been implemented - we established a new committee structure including Strategic Planning Group, Performance and |

| | Delivery, Audit and Assurance, Clinical Care Governance, and Futures. | | | |
|--|--|--------------|---------------|-----------|
| 3. | Publication of Annual Performance Report 2019-2020 - captures areas of progress that the EIJB and EHSCP have made over the last year. It measures performance against the six strategic priorities set out in the EIJB Strategic Plan and against national indicators. Report is discussed annually at EIJB. | | | |
| 4. | Governance arrangement for Financial plan is place. Financial plan is approved annually by the EIJB following the annual due diligence process on the budget offers from NHS Lothian and the Council. | | | |
| 5. | Risks and potential approaches are highlighted to EIJB Chair at regular 1:1 with Chief Officer | | | |
| 6. | Budget Setting Protocol agreed by EIJB, NHS Lothian and the Council in place (move to 1.2) | | | |
| 7. | Timetable of engagement meetings with key stakeholders (EIJB, CEC Head of Finance, NHS Lothian Director of Finance, Chief Executives from both Council and NHS Lothian). Fostering good relationship and better understanding of other organisations' perspective. | | | |
| 8. | Covid-19- Mobilisation plan with an action plan in place to minimise impact of Covid-19. | | | |
| 9. | Revised transformation programme agreed and infrastructure now in place – first transformation portfolio board met in early September. | | | |
| Additional controls or actions needed to manage this risk | | Action Owner | Delivery Date | Update |
| 1. | Strategic Planning Group to give early consideration to next iteration of strategic plan | HoSP | Sept 20 | Completed |
| 2. | Financial strategy, aligned to the strategic plan, and building on the financial framework (presented to the EIJB in October 2019), is under development. Initial version to be taken to EIJB early 2021. | CFO | Jan 21 | |
| 3. | Financial plan, and associated savings and recovery programme, for 2021/22 is being progressed. Initial financial plan to be presented to EIJB in October 2020. | CFO | Oct 20 | Completed |
| 4. | Review of extant directions to be scrutinised by P&D | HoSP | Sept 20 | Completed |
| 5. | EIJB developing approach to engagement and involvement with wider stakeholders | HoSP | Dec 20 | Completed |
| 6. | First stakeholder 'event' to take place | HoSP | Nov 20 | |
| 7. | Ongoing reporting (via NHS Lothian) of financial impact of COVID-19 to Scottish Government | CFO | Ongoing | |
| 8. | Review of extant directions to be presented to EIJB. | HoSP | Dec 20 | New |
| 9. | Re-instatement of Strategic Operational Forum (paused during pandemic). Among the terms of reference is the translation of strategic priorities into operational delivery. | HoSP | Nov 20 | New |

1. Strategic Planning and Commissioning

Risk 1.2

Failure to influence decision making over services that are not managed by the Partnership leading to the inability to review service delivery and drive strategy.

Objective:

Ensure that the Edinburgh element of delegated Pan-Lothian services are delivered in line with EIJB's Directions.

Source of objective:

EIJB Directions, Integration Scheme, EIJB Strategic Plan, Financial Plan, Annual Performance Report, Review of Directions.

Risk Owner:

Chief Officer

Risk Contributor:
Head of Strategic Planning

Historical Risk Score



Current Risk Score: High

| Current Risk Score | Likelihood | Consequence | Risk Rating | Date assessed |
|--------------------|------------|-------------|-------------|----------------|
| | Likely | Moderate | High | September 2020 |

Current Risk Score

| Likelihood | Almost Certain | M | H | H | VH | VH |
|------------|----------------|-----|-----|-----|-----|----|
| | Likely | M | M | H | H | VH |
| Possible | L | M | M | H | H | |
| Unlikely | L | M | M | M | H | |
| Rare | L | L | L | M | M | |
| | Neg | Min | Mod | Maj | Ext | |

Consequence

Target Risk Score

| Likelihood | Almost Certain | M | H | H | VH | VH |
|------------|----------------|-----|-----|-----|-----|----|
| | Likely | M | M | H | H | VH |
| Possible | L | M | M | H | H | |
| Unlikely | L | M | M | M | H | |
| Rare | L | L | L | M | M | |
| | Neg | Min | Mod | Maj | Ext | |

Consequence

Recent Activity

- The EIJB Directions issued in 2019 have been formally reviewed and was presented to the Performance and Delivery Committee in September 2020.
- The Scottish Government has provided guidance on set aside and hosted budgets. The guidance is very clear that EIJBs should be provided with activity information to inform its strategic planning and performance mechanisms and this activity is mapped onto the financial information EIJBs are required to report on.
- New terms of reference has been agreed for the Lothian Chief Officer group which is attended by all four EIJB Chief Officers and Chief Finance Officers.

- Programme Recover Board for unscheduled care and Mental Health and Learning Disability Services has been established by NHS Lothian. These groups have cross cutting representation and are chaired by EIJB Chief Officers.
- Direction Policy has been agreed by the EIJB and annual review of Directions will be presented to the Performance and Delivery Committee in September 2020.
- Home First expansion following the closure of wards 71/Western General and 120 Royal Infirmary with associated transfer of resources.
- All four Chief Officers participated in NHS Gold Command meetings and discussions during the COVID-19 period.

Risk Assessment

Likelihood

- Gaps remain in how the EIJB plans for hosted and set aside services.

Consequence

- Hosted and set aside services represent a moderate proportion of overall delegated services.
- Elements of planning for hosted and set aside services are currently in place.

How would this risk happen?

- Conflicting priorities between managers of services and EIJB requirements/Directions.
- Conflicting priorities between the four EIJBs.
- Unclear communication between relevant parties.
- Lack of clarity in Directions.
- Impact of external forces such as new regulations; unexpected threats or opportunities; and major incidents (e.g Pandemic, EU Exit).

What would the potential outcome be?

- Outcome for people in Edinburgh are poorer.
- Resources are not the right place to deliver the EIJB's objectives.
- Pathways are confused due the different requirements of four EIJBs.

What are we doing to currently manage the risk?

| | |
|----|---|
| 1. | Pan-Lothian consultation carried out on Draft Strategic Plan in September 2019. |
| 2. | Regular (monthly) Chief Officer meetings attended by all four EIJBs and officers from NHS Lothian provide a forum to reach consensus and raise any relevant issues. |
| 3. | Specific service forums are established to consider and agree major service changes which impact on more than one EIJB. |
| 4. | The EIJB agreed and implemented a revised Directions Policy compliant with national guidelines in August 2019. |
| 5. | The EIJB Directions issued in 2019 have been formally reviewed (will be presented the Performance and Delivery Committee in September) |
| 6. | Financial reporting mechanisms in place for hosted and set aside services. |

Additional controls or actions needed to manage this risk

| | | Action Owner | Delivery Date | Update |
|----|---|--------------|---------------|--------|
| 1. | Implications for hosted and set aside services will be picked up through the Transformation Programme as required. | HoSP | Ongoing | |
| 2. | Structural gaps in hosted and set aside services planning to be addressed through the Partnership's new management structure. | CO | Dec 21 | |

| | | | | |
|----|--|------|---------|-----|
| 3. | Ongoing refinement of Directions – progress to be reported to Performance and Delivery Committee | HoSP | Ongoing | |
| 4. | Annual review of Directions will be presented to the EIJB. | HoSP | Dec 20 | New |

1. Strategic Planning and Commissioning

Risk 1.3

Failure to deliver delegated services within available budgets leading to a requirement to revise the Strategic Plan.

Objective:

Using available resources to maximise outcomes for the people of Edinburgh.

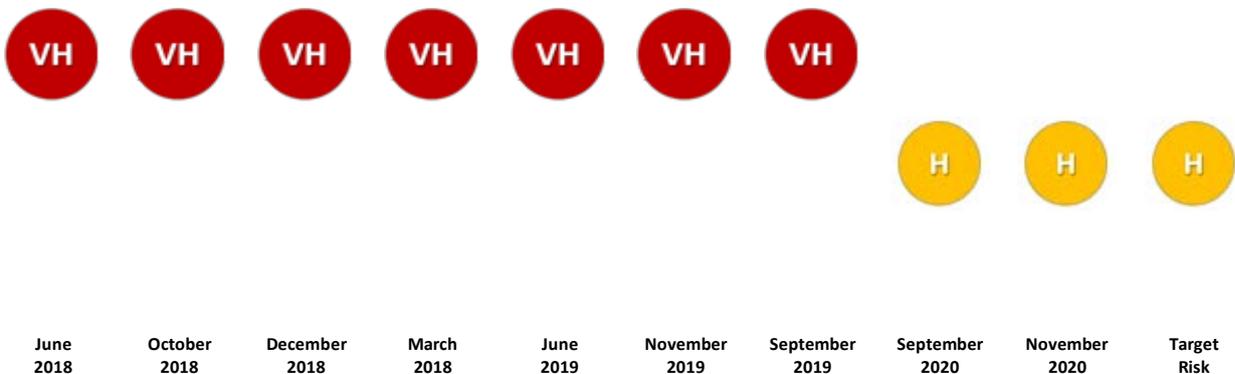
Source of objective:

IJB Strategic Plan, Financial Plans, Financial Updates, Annual Performance Report

Risk Owner:
Chief Officer

Risk Contributor:
Chief Finance Officer

Historical Risk Score



Current Risk Score: High

| Current Risk Score | Likelihood | Consequence | Risk Rating | Date assessed |
|--------------------|------------|-------------|-------------|---------------|
| | Likely | Major | High | October 2020 |

Current Risk Score

| | | | | | | |
|------------|----------------|-----|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| | Consequence | | | | | |

Target Risk Score

| | | | | | | |
|------------|----------------|-----|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| | Consequence | | | | | |

Recent Activity

- Reports on in year financial performance scrutinised by P&D and the IJB
- Phase 2 savings agreed by IJB in October
- Additional funding allocated for financial impact of COVID-19 following regular submissions to SG on

| | |
|--|---|
| <p>via the mobilisation planning process</p> <ul style="list-style-type: none"> • Approach to monitoring progress with savings and recovery plan agreed with P&D • Initial JB workshop on 21/22 budget • ‘Sustainability planning’ approach agreed and senior manager from the Partnership appointed to lead this work • EMT agreed to further develop approach for financial engagement and support | |
| <p>Risk Assessment</p> <p><i>Likelihood</i></p> <ul style="list-style-type: none"> • Due to delivery against the budget in 19-20, there is more confidence • Budget for 20-21 agreed <p><i>Consequence</i></p> <ul style="list-style-type: none"> • The IJB and its partners face a very significant financial challenge over the next few years. Driven by growing demand, higher costs, increasing expectations for the delivery of health and social care, and a reduction of financial resources available. | |
| <p>How would this risk happen?</p> <ul style="list-style-type: none"> • Unanticipated increase in costs of delegated services. • Failure to deliver agreed savings programmes. • Poor budget management • Full financial impact of COVID-19 not fully reimbursed by Scottish Government. • In year reduction in funding due to need of Council and/or NHS Lothian requirement to balance their overall budgets. • Unanticipated financial impacts other external forces such as new regulations; unexpected threats or opportunities; and major incidents (e.g Pandemic, EU Exit) | <p>What would the potential outcome be?</p> <ul style="list-style-type: none"> • Reprioritising spending • Strengthen budgetary control. • Identify additional savings and recovery schemes • Fail to maximise outcomes for people in Edinburgh. |
| <p>What are we doing to currently manage the risk?</p> | |
| 1. | Performance and Delivery Committee scrutinise financial performance. |
| 2. | Finance is a standing item on the IJB agenda. |
| 3. | Regular financial reports to IJB, partnership executive team and the various governance forums in the Council and NHS Lothian. |
| 4. | Operational financial monitoring undertaken monthly by both NHS Lothian and the Council. |
| 5. | Regular dialogue between operational budget holders and the finance teams in NHS Lothian and the Council. |
| 6. | Savings Governance Framework in place in line with requirements highlighted in recent Internal Audit Reports |
| 7. | Partnership Savings Governance Group chaired by Chief Officer meets monthly to scrutinise progress against the savings and recovery programme. |
| 8. | Regular tripartite meetings in place. Attended by: CO,CFO CEC Head of Finance, NHS Lothian Head of Finance) |

| Additional controls or actions needed to manage this risk | | Action Owner | Delivery Date |
|---|--|--------------|---------------|
| 1. | Performance and Delivery Committee refining formatting content of Financial reporting. | CFO | Mar 21 |
| 2. | Enhance support for CFO built into proposed new structural arrangements | CO | Dec 21 |
| 3. | Finalise position with Scottish Government for financial impact of COVID-19. | CFO | Mar 21 |

1. Strategic Planning and Commissioning

Risk 1.4 Insufficient asset planning arrangements leading to failure or delays in delivering the strategic plan.

Objective:

Comprehensive capital and asset strategy, aligned to the Strategic Plan agreed by the EIJB.

Source of objective:

Strategic Plan, transformation programme

Risk Owner:
Chief Officer

Risk Contributor:
Head of Strategic Planning

Historical Risk Score



Current Risk Score: High

| Current Risk Score | Likelihood | Consequence | Risk Rating | Date assessed |
|--------------------|------------|-------------|-------------|---------------|
| | Likely | Major | High | October 2020 |

Current Risk Rating

| | | | | | | |
|------------|----------------|-----|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| | Consequence | | | | | |

Target Risk Rating

| | | | | | | |
|------------|----------------|-----|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| | Consequence | | | | | |

Recent Activity

- Transformation programme launched and reset priorities agreed.
- Bed based review workstream underway which will articulate the size and nature of the bed base required to deliver delegated services. This in turn will influence the asset strategy which will be developed in phase 2 of the transformation programme.
- Bed numbers agreed for phase 2 of the Royal Edinburgh Hospital campus re-provision.
- Feasibility work underway for the proposed new facility in the South West to potentially replace 2 care

| | | | |
|---|--|---------------------|----------------------|
| <p>homes no longer fit for purpose.</p> <ul style="list-style-type: none"> Cases for new primary care facilities progressing through governance. | | | |
| <p>Risk Assessment</p> <p><i>Likelihood</i> Although several individual pieces of work are underway, some of which are well advanced, no overarching strategy is in place.</p> <p><i>Consequence</i> Lack of a cohesive strategy could result in missed opportunities to attract funding and, consequently, delay implementation of plans which are dependent on capital monies.</p> | | | |
| <p>How would this risk happen?</p> <ul style="list-style-type: none"> Lack of an overarching asset strategy Failure to develop business cases timeously and in line with partners' differing governance processes Insufficient capital resources available Negative impact of COVID-19 on infrastructure costs meaning fewer schemes can be delivered Under-developed links with infrastructure partners (eg housing) | <p>What would the potential outcome be?</p> <ul style="list-style-type: none"> Failure to deliver infrastructure required to fulfil strategic objectives Consequential impact on outcomes for the people of Edinburgh | | |
| <p>What are we doing to currently manage the risk?</p> | | | |
| 1. | Asset Management Group established with membership from the Council, NHS Lothian and the Partnership to agree on priorities. | | |
| 2. | Representation on the Council Asset Management Board and NHS Capital Investment Group. | | |
| 3. | Primary care developments progressing through the appropriate stages of the NHS Lothian and EIJB governance processes. | | |
| 4. | Housing contribution statement fundamental part of the Strategic Plan. | | |
| 5. | Bed based review underway with project board launched | | |
| 6. | Progressing provision to replace 2 care homes in South West Edinburgh. | | |
| <p>Additional controls or actions needed to manage this risk</p> | | <p>Action Owner</p> | <p>Delivery Date</p> |
| 1. | Overarching asset strategy agreed by the EIJB which pulls together the capital priorities. | HoSP | Mar 2022 |
| 2. | Primary care developments continue successfully through governance. | HoSP | Various |
| 3. | Business case for facility in the South West completed. | HoSP | Mar 2021 |
| 4. | Amended remit for Asset Management Group agreed to shift emphasis to the strategic. | HoSP | Dec 2020 |

2. Issuing of Directions

Risk 2.1 Failure of NHS Lothian and the Council to deliver directions leading to services not aligned to strategic intentions.

| | | |
|---|--|---|
| Objective: Clear, concise and measurable directions in place which cover all services and which are routinely monitored with corrective action taken where necessary. | Source of objective: EIJB directions policy, EIJB directions, directions tracker, Strategic Plan | Risk Owner: Chief Officer Risk Contributor: Head of Strategic Planning |
|---|--|---|

Historical Risk Score



Current Risk Score: High

| Current Risk Score | Likelihood | Consequence | Risk Rating | Date assessed |
|--------------------|------------|-------------|-------------|---------------|
| | Possible | Major | High | October 2020 |

Current Risk Rating

| | | | | | | |
|-------------|----------------|-----|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| Consequence | | | | | | |

Target Risk Rating

| | | | | | | |
|-------------|----------------|-----|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| Consequence | | | | | | |

Recent Activity

- New directions Policy approved in August 2019. The policy was developed to address the risk of non-delivery of directions by NHS Lothian and the City of Edinburgh Council. The policy follows Scottish Government best practice guidance and increases transparency and accountability between the EIJB and its partner organisations; NHS Lothian and the City of Edinburgh Council.
- Initially, the EIJB developed and approved nine directions linked to the Strategic Plan in October 2019. The EIJB has since developed and approved more directions in-year to account for service change and redesign.

- In line with the policy, an annual review of directions undertaken which will report to the Performance and Delivery Committee in September.

Risk Assessment

Likelihood

It is recognised that, despite having made progress with the directions policy and approach, that further work is required to refine the directions. Specifically, to include measurable and realistic performance metrics as well as ensuring wider coverage of the range of delegated services.

Impact

If services are not delivered as intended the consequences could be material. Risk relates mainly to services not delivered by the Partnership.

How would this risk happen?

- Because directions are not:
 - well-articulated
 - properly understood
 - realistic/achievable
 - non-SMART performance targets
 - issued timeously
- Failure of partners to implement directions as intended because of conflicting priorities.

What would the potential outcome be?

- Failure to deliver delegated services in line with strategic objectives
- Overspends against delegated budgets
- Consequential impact on outcomes for the people of Edinburgh

What are we doing to currently manage the risk?

1. EIJB approved new [directions Policy](#) in August 2019.
2. Directions emerge from the strategic plan which has been developed in collaboration with NHS Lothian, the Council and other partners.
3. Directions themselves are also developed in collaboration with NHS Lothian and the Council – this reduces the likelihood of misunderstanding.
4. Regular monitoring of directions via the Performance and Delivery Committee.
5. Directions can be withdrawn or amended at any time if they are no longer to be appropriate/realistic/achievable.
6. In line with the policy, directions are required for any service changes agreed by the EIJB.

Additional controls or actions needed to manage this risk

| | | Action Owner | Delivery Date | Update |
|----|--|--------------|---------------|-----------|
| 1. | Review of directions policy to ensure it remains aligned with Scottish Government guidance and emerging best practice. | HoSP | Mar 21 | |
| 2. | An annual review of directions which will report to the Performance and Delivery Committee in September. | HoSP | Sept 20 | Completed |
| 3. | Ongoing refinement of directions and expansion to cover wider range of delegated services. | HoSP | Ongoing | |

2. Issuing of Directions

Risk 2.2

Failure to deliver EIJB Directions leading to a mismatch between workforce requirements and availability.

Objective:

Matching future service demand with future workforce supply.

Source of objective:

EIJB Directions, Strategic Plan, National Integrated Health and Social Care Workforce Plan and Associated Guidance, Workforce Strategy

Risk Owner:

Chief Officer

Risk Contributor:

Chief Nurse (Workforce Plan)

Historical Risk Score



Current Risk Score: High

| Current Risk Score | Likelihood | Consequence | Risk Rating | Date assessed |
|--------------------|------------|-------------|-------------|----------------|
| | Likely | Moderate | High | September 2020 |

Current Score

| | | | | | | |
|------------|----------------|-----|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| | Consequence | | | | | |

Target Score

| | | | | | | |
|------------|----------------|-----|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| | Consequence | | | | | |

Recent Activity

- Previous Workforce Plan that was due to be submitted in March 2021, however COVID-19 implications led the Scottish Government to review the National integrated HSC Workforce Plan’s assumptions and guidance.
- The Workforce Plan is now due by March 2022

- The Scottish Government have commissioned a short life working group to develop a concise template that all Boards and Integrated Authorities will complete. The proposed deadlines for these concise templates is 31st March 2021. The template workforce plan document will allow NHS Boards and Integrated Authorities to produce consistent workforce planning documents that are shorter and more concise than the full 3 year workforce plans. We await receipt of the agreed template which is estimated to be agreed and circulated by December 2020.

Risk Assessment

Likelihood

With the Scottish Government's decision to further push back the due date, EHSCP has been given additional time to develop the Workforce Plan. The probability of achieving a comprehensive workforce plan has improved however further work is still needed to ensure that the right support arrangements are in place to deliver this piece of work.

Consequence

Not meeting the challenges of demographic changes (both population and staff) could lead to unbearable pressure on services. There's a need to attract or retain the right people and have an engaged and resilient workforce to ensure that the people of Edinburgh needs are met. Emergencies such like the pandemic put enormous pressure on our services, however it did provide an opportunity in revealing functional problems in the organisation that will be addressed through workforce planning.

How would this risk happen?

- Lack of a Workforce Plan
- Lack of a Workforce Strategy
- Lack of capacity and capability to lead on workforce and workforce planning (local level)
- Lack of consultation with key stakeholders
- Added complexities from unanticipated workforce impacts other external forces such as new regulations; unexpected threats or opportunities; and major incidents (e.g Pandemic, EU Exit)
- New workforce policies arising from EU Exit
- Poor horizon scanning

What would the potential outcome be?

- Inability to deliver against strategic priorities
- Additional pressures on financial budgets due to unanticipated increase in staffing pressures (e.g. costs, vacancies, agency costs, etc.)
- Poorer outcomes for people of Edinburgh
- Negative perception of EHSCP as an employer

What are we doing to currently manage the risk?

| | |
|----|---|
| 1. | The Transformation Programme Board / Programme 4 – “Cross cutting enablers” is leading on the development of the Workforce Strategy (First Programme Board 18 September 2020) |
| 2. | Workforce planning programme has begun on a series of workshops with professional and service groups to review their experience during Covid-19. |
| 3. | Bi-monthly Workforce Core group in place to lead on development of Workforce plan. |
| 4. | Workforce Core Group membership includes all key partners/stakeholders to support the development of the workforce plan. |
| 5. | Workforce Planning representative at EHSCP EU Exit Group (Chaired by Chief Nurse) – active contribution to EU exit preparations. Ongoing development of Monthly 'EU Exit' |

| | Impact Assessment reports that are escalated to NHS Lothian and the Council's Strategic EU Exit Group. | | |
|--|---|---------------------|----------------------|
| 6. | Workforce Planning representation at EHSCP COVID-19 Command Centre and Operational Coordination Group. | | |
| Additional controls or actions needed to manage this risk | | Action Owner | Delivery Date |
| 1. | Delivery of EHSCP Workforce Plan | Chief Nurse | Mar 2022 |
| 2. | Delivery of Workforce Strategy | CFO | Mar 2021 |
| 3. | Review into capacity for workforce planning | Chief Nurse | June 2021 |
| 4. | Workforce Planning Manager will be attending the National Weekly Short Life Working Group in November 2020 to agree design and content of the new short and concise workforce plan (unlike 3 year plan) | Chief Nurse | April 2021 |

3. Management and Role of the EIJB

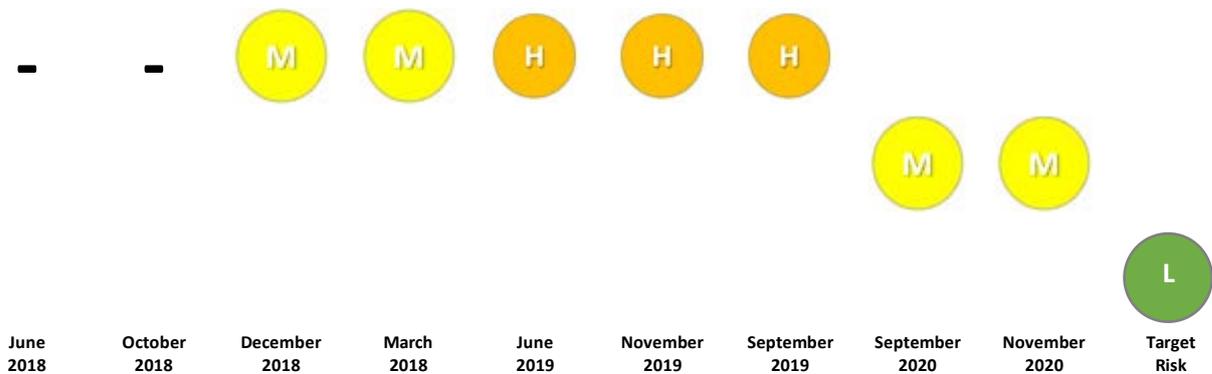
Risk 3.1 Inability to operate effectively as a separate entity leading to a failure to deliver the benefits of integration.

Objective:
EIJB is recognised as the sole body responsible for the strategic oversight and planning of delegated services.

Source of objective:
Public Bodies (Joint Working) (Scotland) Act 2014, Scheme of Integration, Strategic Plan, Engagement Framework with Stakeholders

Risk Owner:
Chief Officer

Historical Risk Score



Current Risk Score: High

| Current Risk Score | Likelihood | Consequence | Risk Rating | Date assessed |
|--------------------|------------|-------------|-------------|---------------|
| | Possible | Moderate | Medium | October 2020 |

Current Risk Score

| | | | | | | |
|-------------|----------------|-----|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| Consequence | | | | | | |

Target Risk Score

| | | | | | | |
|-------------|----------------|-----|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| Consequence | | | | | | |

Recent Activity

- The Scheme of Integration was reviewed in October with Standards Officer, Chief Officer and Chief Finance Officer.
- “Your Health – Your Care” working groups with EIJB Members.
- Chief Officer and Chair agreed a series of development sessions board members for 2021.

Risk Assessment

Likelihood

Although the EIJB has had to mature in the last five years, there are still issues that need to be teased out in

terms of the role and management of the EIJB.

Consequence

Risk relates mainly to services not delivered by the Partnership. There could be delays in implementing Strategic decisions.

How would this risk happen?

- There is a lack of clarity about the separate roles of the EIJB, Partnership, Council and NHS Lothian
- Lack of buy-in from partners into the benefits of integration
- Board Members lack the necessary skills, knowledge and experience to undertake their role.
- Lack of public identity/understanding of the EIJB

What would the potential outcome be?

- Duplication of decision making.
- Gaps in decision making.
- Contradictory decision making.
- Poorer outcomes for the people of Edinburgh.

What are we doing to currently manage the risk?

| | |
|----|--|
| 1. | Regular development sessions for EIJB members |
| 2. | Induction session for new EIJB members |
| 3. | Members are encouraged to actively engage with the Executive Team. |
| 4. | Members are advised that they can meet with Partnership Officers/ report owners prior to meetings to discuss the report content. Board members chair subgroups and reference boards which aids to broaden members knowledge, understanding, and decision making. |
| 5. | EIJB Standing Order / Code of Conduct |
| 6. | 'Declaration of Interest' - members are responsible for declaring certain interest in EIJB proceedings. |
| 7. | The EIJB Chair monitors the quality of the debates and if necessary, will ask the Partnership Chief Officer for additional information if the subject matter requires further clarification for members. |
| 8. | Regular IJB Newsletter to Board Members from IJB Chair |

| Additional controls or actions needed to manage this risk | | Action Owner | Delivery Date |
|--|--|--------------|---------------|
| 1. | Further review of into the Scheme of Integration | CO | TBC |

3. Management and Role of the IJB

Risk 3.2 Failure to make best use of the expertise, experience and creativity of its partners leading to poor relationships and a negative impact on the delivery of the strategic outcomes.

Objective:
Effective engagement and collaboration with IJB partners.

Source of objective:
Strategic Plan, transformation programme

Risk Owner:
Chief Officer

Historical Risk Score



Current Risk Score: High

| Current Risk Score | Likelihood | Consequence | Risk Rating | Date assessed |
|--------------------|------------|-------------|-------------|---------------|
| | Possible | Moderate | Medium | October 2020 |

Current Risk Score

| | | | | | | |
|------------|----------------|-------------|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| | | Consequence | | | | |

Target Risk Score

| | | | | | | |
|------------|----------------|-------------|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| | | Consequence | | | | |

Recent Activity

- IJB members involved in shaping public events to be held in November

- Transformation programme underway with appropriate stakeholders involved in programme boards
- Weekly themed provider meetings held during COVID-19 pandemic
- Relaunched recruitment for additional carer/service user representatives

Risk Assessment

Likelihood

- The IJB has a wide range of stakeholders with differing objectives, which can pose problems in ensuring appropriate/adequate representation

Consequence

- Would be a factor of the scale of the service(s) impacted

How would this risk happen?

- Failure to engage and collaborate appropriately with third, independent and housing sectors and other parties.
- Not involving appropriate stakeholders in strategy/policy development.
- Insufficient or ineffective representation from stakeholders on the IJB and its committees.
- Poor relationships with providers in either the private or 3rd sectors.

What would the potential outcome be?

- Failure to maximise outcomes for the people of Edinburgh

What are we doing to currently manage the risk?

- | | |
|----|---|
| 1. | Carers and service users represented on the IJB and its committees. |
| 2. | The third, independent and housing sectors represented on IJB committees and transformation programme boards. |
| 3. | EVOC acts as an interface between the 3 rd sector and the IJB. |
| 4. | Significant engagement undertaken as integral part of developing the strategic plan. |
| 5. | The third, independent and housing sectors involved in the development of the strategic plan and all will have an integral role as the plan is implemented. |
| 6. | Ongoing engagement with providers through a variety of fora. |
| 7. | Regular communication from Chief Officer via newsletter and vlogs. |

Additional controls or actions needed to manage this risk

| | | Action Owner | Delivery Date |
|----|--|--------------|---------------|
| 1. | Engagement strategy to be developed | HoSP | TBC |
| 2. | Carer/service user representatives to be recruited | HoSP | Jan 2021 |
| 3. | Service level agreement with EVOC to be refreshed | CFO | Mar 2021 |

3. Management and Role of the EIJB

Risk 3.3

EIJB infrastructure lacks the professional, administrative and technical infrastructure to operate effectively leading to failures in governance, scrutiny and performance arrangements.

Objective:

Sufficient and appropriate infrastructure in place to support the EIJB to develop and achieve its strategic objectives.

Source of objective:

Scheme of Integration

Risk Owner:

Chief Officer

Historical Risk Score



Current Risk Score: High

| Current Risk Score | Likelihood | Consequence | Risk Rating | Date assessed |
|--------------------|------------|-------------|-------------|---------------|
| | Likely | Moderate | High | October 2020 |

Current Risk Rating

| | | | | | | |
|------------|----------------|-------------|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| | | Consequence | | | | |

Target Risk Rating

| | | | | | | |
|------------|----------------|-------------|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| | | Consequence | | | | |

Recent Activity

- Conflict of Interest noted in with the EIJB’s MoUs when the EIJB received legal advice from the Council.
- EIJB agreement to invest in transformation
- Chief Officer discussions with Council Leadership team on potential transfer of administration staff and resource.

- Head of Strategic Planning working with colleagues in Council and NHS performance teams.

Risk Assessment

Likelihood

The EIJB does not physical own any assets or have direct managerial responsibilities for staff through a pre-determined budget. It is reliant on the resources allocated to it for both NHS Lothian and the City of Edinburgh Council – as detailed in the Integration Scheme. Partners, who each have their own resourcing issues, are not consistently able to provide an appropriate calibre and level of resource.

Risk has occurred due to legal advice sought from one of its partners for MoUs. This risk has been accepted.

Impact

Without adequate resource the EIJB will be unable to develop and deliver against its strategic objectives.

How would this risk happen?

- Failure by NHS Lothian and the Council to meet their obligations under the integration scheme to provide adequate professional, administrative and technical support.
- Lack of sufficient independent professional, administrative and technical infrastructure.
- Lack of clarity over EIJB requirements
- Conflict between partner and EIJB priorities
- Inefficiencies in delivery

What would the potential outcome be?

- Compromised efficiency of the EIJB.
- Ability to deliver change at desired pace.
- Ultimately poorer outcomes for the people of Edinburgh.
- Conflict of interest for one or more partner organisation within its governance, scrutiny and performance arrangements.

What are we doing to currently manage the risk?

| | |
|----|---|
| 1. | The Chief Officer is a member of the senior management teams in both NHS Lothian and the Council, thus in a position to influence decision making. |
| 2. | Through regular 1:1 with each respective Chief Executive, the Chief Officer is able to directly raise any issues and seek solutions. |
| 3. | Comprehensive audit plan in place to understand the quantum of the risk. |
| 4. | Transformation team established. |
| 5. | GGI governance review agreed by the EIJB. |
| 6. | For legal conflicts of interest: <ul style="list-style-type: none"> • Partner Legal Team made aware of potential risk of conflict of interest. • When a conflict has been identified, discussion with Chief Officer/Executive Team on best approach which may result in obtaining external advisers or formal risk acceptance (noted in risk register). • Legal team must be clear when they are advising the EIJB as opposed to the Council/NHSL side of EHSCP. |

Additional controls or actions needed to manage this risk

| | | Action Owner | Delivery Date |
|----|--|--------------|---------------|
| 1. | Lobby partners as they review integration scheme to ensure appropriate account is taken of EIJB requirements | CO | Ongoing |

| | | | |
|--|--|--------------|-------------|
| 2. | Remaining vacancies in transformation team to be filled. | HoSP | Oct 2020 |
| 3. | Work with partners to formalise levels of support | CO | Ongoing |
| 4. | Resolve outstanding issue of EIJB Chief Risk Officer | CO | Nov 2020 |
| <i>Proposed Risk Acceptance</i> | | Owner | Date |
| 1. | <i>Risk acceptance for MoU between EIJB, NHS Lothian and Council that were drafted by Council Legal team – given that they are not a commercial agreement. (See Mitigating control item 6. for other legal conflicts of interest.)</i> | CO | TBC |

3. Management and Role of the EIJB

Risk 3.4 Insufficient or poor-quality assurance from assurance providers to support effective delivery of their scrutiny responsibilities.

Objective:
Reliable and effective assurance quality from assurance providers.

Source of objective:
Annual Audit Opinion

Risk Owner:
Chief Officer

Historical Risk Score



Current Risk Score: High

| Current Risk Score | Likelihood | Consequence | Risk Rating | Date assessed |
|--------------------|------------|-------------|-------------|---------------|
| | Possible | Moderate | Medium | October 2020 |

Current Risk Score

| | | | | | | |
|-------------|----------------|-----|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| Consequence | | | | | | |

Target Risk Score

| | | | | | | |
|-------------|----------------|-----|-----|-----|-----|-----|
| Likelihood | Almost Certain | M | H | H | VH | VH |
| | Likely | M | M | H | H | VH |
| | Possible | L | M | M | H | H |
| | Unlikely | L | M | M | M | H |
| | Rare | L | L | L | M | M |
| | | Neg | Min | Mod | Maj | Ext |
| Consequence | | | | | | |

How would this risk happen?

- Sole reliance of assurance provision from partner organisation's Internal Audit Teams
- Gaps between IJB risks and Annual Internal Audit Plan
- Lack of review and follow-up process for IJB & EHSCP Internal Audits
- Lack of Independent external review of Internal Audits
- Lack of IJB oversight of Internal Audits activities
-

What would the potential outcome be?

- Poor quality assurance that would compromise effective EIJB governance.
- Inadequate risk management, internal controls – increase in risk exposure.
- Limited growth and improvement of EIJB processes

| What are we doing to currently manage the risk? | | | |
|--|--|---------------------|----------------------|
| 1. | The IJB has both internal and external audit assurance providers: Internal - NHS Lothian & Council; External - Scott-Moncrieff. | | |
| 2. | Internal Audit (IA) delivers four IJB Audits per year – one from NHS Lothian IA and three from the Council IA. | | |
| 3. | The IJB risks in the risk register are mapped to the annual IA plan to ensure that all key risks are covered. | | |
| 4. | Annual IA plans of NHS Lothian and the Council are subject to review and scrutiny by the EIJB Audit and Assurance Committee. | | |
| 5. | Clear internal review process for all audits completed on behalf of the IJB and the Partnership | | |
| 6. | Independent external review of IA is performed every 5 years in line with Public Sector Internal Audit Standards (PSIAS) requirements (last review was performed 2016/17). | | |
| 7. | Annual Internal Audit opinion for the EIJB is required to highlight any instance of non-compliance with the PSIAS. | | |
| 8. | The governance statement (incorporated in the annual accounts) and the annual IA opinion is subject to review and scrutiny by the EIJB Audit and Assurance Committee. | | |
| 9. | A clearly established follow-up process to ensure that all IA findings raised are appropriately closed and risks mitigated – an area of non PSIAS compliance for 2017/18. | | |
| 10. | IA progress reports provided to the Audit and Assurance Committee quarterly, updating progress on the audit plan and also the status of open and overdue IA findings. | | |
| 11. | Established IA system that records and retains the audit work performed by the IA team. Also includes 'layered' levels of review and sign off that are linked to the roles in the team. | | |
| 12. | Each year, external audit will perform a sample-based review of IA work to determine whether they can rely on the outcomes in relation to best value. A comment will be included in the annual accounts to reflect this. | | |
| Additional controls or actions needed to manage this risk | | Action Owner | Delivery Date |
| 1. | <i>Under Review</i> | | |