

2018/19 Risk Management Mid Year Update Report for the Health & Adult Care Scrutiny Committee

Report of the County Treasurer

Please note that the following recommendations are subject to confirmation by the Committee before taking effect.

Recommendations:

- i. that members note the current risk position within Devon County Council for Adult Care & Health Services as shown in this report.
- ii. that members note the highest scoring risks and consider these when creating future work plans.

The Council has been updating its Risk Management processes and this includes a revised reporting structures and timelines. This has resulted in the compilation of this midyear update report for this Scrutiny Committee.

As the process evolves it is our aim to work with Health colleagues to pride an update which coordinates both Council and Heath Risk Management Information.

The attached detailed report summarises the risk management position as a result of the work of council officers. Pages three shows the summary of the currently recorded risk position and, in addition, the report provides a detailed appendix (Appendix 1) which sets out the current risk information in more detail.

Mary Davis

Electoral Divisions: All
Local Government Act 1972

List of Background Papers

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<u>Background Paper</u>	<u>Date</u>	<u>File Ref</u>
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Nil

There are no equality issues associated with this report



devon**audit**partnership

Risk Management

Risk Management

Mid-Year Report 2018/19

November 2018



Health and Adult Care Scrutiny Committee

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Introduction

Devon Audit Partnership (DAP) continues to support and facilitate the development of the Councils risk management framework and processes. This support is designed to assist members, senior management and staff in identifying risks, recognising and recording the "true" risk, mitigation thereof and promote effective monitoring and reporting of those risks.

Background

Development of risk management across the council has included the clarification of oversight and responsibility. The Risk Management Policy includes the following under the heading of Roles and Responsibilities.

Scrutiny Committees should be aware of the objectives of the service areas they oversee. Service Managers should identify risks to the achievement of these objectives and provide to Scrutiny a summary of these risks and the mitigating action/s (controls) that are being taking to reduce the risk to an acceptable/agreed level. Specific risks to objectives, in particular those that remain "high", may be discussed in detail and risk owners and accountable officers asked to provide further information.

In practical terms this results in each of the Scrutiny Committees having oversight of the risks which are relevant to their areas, with the Audit Committee focusing on the process and effectiveness of risk management overall.

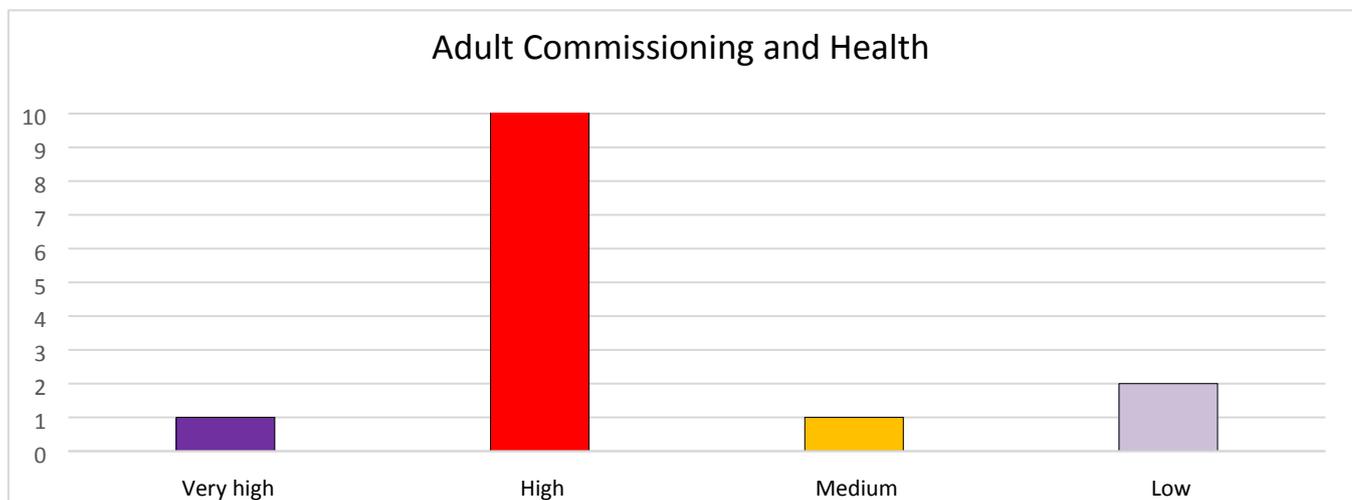
The system used to record risks helps to ensure that where a risk crosses over service areas all relevant Scrutiny Committees have visibility. The highest rated risks, strategic risks and those risks which cross service areas will also be noted within the Authority Risk Register to support wider oversight and management.

Work is ongoing to further embed risk management across the council and ensure that the data within the risk registers is clear, accurate, relevant and importantly, linked to organisational objectives. Further details can be obtained from Devon Audit Partnership via Robert Hutchins (Head of Partnership) or Tony Rose, who will also be happy to receive your comments and thoughts on risk management within the Council.

Current Risk Position

There were 18 risks recorded in the Risk Register as at 02 November 2018 which link to the areas of responsibility for this Scrutiny Committee.

The Adult Care and Health Management Team reviewed their risks at the end of October. As per the chart below the risks are categorised within two areas, Adult Commissioning & Health, and Adult Care Operations & Health. Scoring is based on the Current Risk Score, i.e. the score after considering the controls and mitigation being applied to each risk.



The Risk Management process identifies those areas where risk is currently considered to be greatest. Management of awareness of such risks ensures that focus and attention is in the “right areas”; although the risk may not always be reduced (as yet) to a desired level, the fact that it is being monitored will help to prevent the risk occurring and also limit the impact of the risk if it does occur.

Of the 18 risks recorded, 13 were initially assessed at a risk rating of “Very High”; management action has reduced 11 of these to “High” and one to “Medium”, with one increasing at the most recent to review to “Very High”. The remaining five risks had an Inherent score of High, two of which are now Low and three remain as High.

Overall, 15 risks retain a Current score of “High” or above; two of these risks are categorised as Strategic, the remainder Operational. Details of these risks can be seen in the table in Appendix 1.

Members are asked to note that: -

- the risk score for three risks has reduced following review;
- 14 remain static; and
- one risk has increased to Very High from High, this being “*Market Capacity: Adult Social Care (Personal Care)*”. Comment from the AC&H Management Team on this increase is below.

The personal care market capacity remains under pressure across the county with levels of demand exceeding the supply. Where care cannot be sourced an interim contingency plan is always enacted that ensures the safety of any individual and may include temporary accommodation in a residential facility or drawing on other arrangements including informal networks of care and support. The risk is also heightened currently due to increased likelihood of provider failure. Members will be aware of a recent CQC formal notification to local authorities around Allied Healthcare of potential provider failure as an example of this.

Our mitigating actions in this area which are predicated on joint working across the health and care system include

1. *Support the recruitment and retention of staff (including promotion of our Proud to Care initiative).*
2. *Reduce demand on services by promoting and growing our short term offer that supports people back to independence in a timely way.*
3. *Achieve greater efficiency by working with our contractors to minimise travelling time and make best use of our existing workforce.*

The risk information within Appendix 1 is sorted by the Current Risk Score, i.e. the score following the application of management actions to reduce the level of risk. All key details are shown including the review dates which comply with the current policy expectations.

An online Risk Management *eLearning package* is now available for Councillors; should you wish to complete this please contact your Scrutiny Officer. If you would like more in depth training, please contact your Scrutiny Officer or Robert Hutchins/Tony Rose of Devon Audit Partnership.

Please note that the format of future *Risk Management Reporting* to both Officers and Members continues to evolve. The longer-term aim is to provide dashboards with as close to live data as possible for the risks recorded within each service area. This will be further supported by the capturing issues that are emerging in a slightly different format and linking them to all known sources of information and risk

Risk Title	Description	Service Area	Risk Category	Current Risk Score	Risk Owner	Accountable Officer	Latest Review	Change Direction
Market Capacity: Adult Social Care (Personal Care)	The council fails to meet its statutory market sufficiency requirement for personal care.	Adult Commissioning and Health	Strategic	25: Very high	Tim Golby	Ian Hobbs	30 Oct 2018	↑
Additional one-off costs	Additional one-off costs due to potential back payment resulting from retrospective application of National Living Wage.	Adult Commissioning and Health	Operational	20: High	Tim Golby	Sarah Aggett	30 Oct 2018	↔
Demand resulting from Transforming Care Partnerships	Demand resulting from Transforming Care Partnerships brings NHS funded Out of Area placements in hospitals to a Devon setting with the need for adult social care funded support.	Adult Care Operations and Health	Operational	16: High	Keri Storey	Sarah Aggett	10 Sep 2018	↓
Obligations for the timeliness of annual reviews for adults	The Council fails to meet its obligations for the timeliness of annual reviews for adults identified eligible needs.	Adult Care Operations and Health	Operational	16: High	Keri Storey	Sarah Aggett	10 Sep 2018	↔
Transitions	Capacity challenges and systems complexity in the preparing for adulthood process results in poor experiences for vulnerable young people and financial consequences to the Council.	Adult Care Operations and Health	Operational	16: High	Keri Storey	Sarah Aggett	10 Sep 2018	↔
NHS Reconfiguration	The pace and direction of travel of whole system changes in Devon fails to meet the needs of Devon's residents	Adult Commissioning and Health	Strategic	20: High	Tim Golby	Jennie Stephens	10 Sep 2018	↔
Deprivation of Liberties (DoLS) and Court of Protection (CoP)	The Council fails to meet its statutory obligations with regard to Deprivation of Liberty Safeguards (DoLS) and individuals are put at unacceptable risk	Adult Care Operations and Health	Operational	16: High	Sarah MacKereth	Jennie Stephens	30 Oct 2018	↓
Workforce	External Adult Social Care market recruitment and retention issues result in market failure and statutory non-compliance with Care Act duties.	Adult Commissioning and Health	Operational	16: High	Tim Golby	Jennie Stephens	10 Sep 2018	↔
Market capacity adult social care (Nursing Care)	The council fails to meet its statutory market sufficiency requirement for nursing care	Adult Commissioning and Health	Operational	20: High	Tim Golby	Ian Hobbs	10 Sep 2018	↔
Care management capacity and effectiveness	The Council fails to meet its statutory obligations for the timeliness of assessment for adults. The Care Act 2014 gives Local Authorities a duty to carry out a needs assessment in order to determine whether an adult has needs for care and support.	Adult Care Operations and Health	Operational	16: High	Keri Storey	Jennie Stephens	10 Sep 2018	↔
Continuing Health Care (CHC)	The Council fails to meet its statutory obligations to ensure Continuing Health Care (CHC) is appropriately assessed by the NHS	Adult Care Operations and Health	Operational	16: High	Keri Storey	Jennie Stephens	10 Sep 2018	↓
Budget pressures and management	Demand for Adult Social Care and Health for working aged adults (aged 18-64) exceeds financial provision putting the Council at risk	Adult Care Operations and Health	Strategic	16: High	Keri Storey	Keri Storey	30 Oct 2018	↔
Inadequate systems control in place regarding CareFirst access	Inadequate systems control in place regarding CareFirst access resulting in inappropriate access to client level data.	Adult Care Operations and Health	Operational	20: High	Keri Storey	Keri Storey	10 Sep 2018	↔
Lack of integrated data	Lack of integrated data due to multiple systems fails to support timely and early Adult Social Care input into the transitions process resulting in poor experiences for vulnerable young people	Adult Care Operations and Health	Operational	16: High	Keri Storey	Sarah Aggett	10 Sep 2018	↔
Social, Economic / Financial	The council fails to meet its statutory market sufficiency requirement for residential care	Adult Commissioning and Health	Operational	15: High	Tim Golby	Sarah Aggett	10 Sep 2018	↔
Mental Health Services redesign with Devon Partnership Trust	The delivery model for social care in health (via Devon Partnership Trust) is not meeting the needs of Devon residents	Adult Commissioning and Health	Operational	12: Medium	Sarah Aggett	Tim Golby	10 Sep 2018	↔
Lack of Business Continuity Planning	Lack of Business Continuity Planning around systemic market failure results in market capacity and sustainability issues	Adult Commissioning and Health	Strategic	9: Low	Ian Hobbs	Sarah Aggett	16 May 2018	↔
Recruitment challenges	Unable to recruit Adult Social Care professionally registered staff to deliver Care Management	Adult Care Operations and Health	Operational	9: Low	Keri Storey	Jennie Stephens	18 May 2018	↔