

2018/19 Risk Management Annual Report

Report of the County Treasurer

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

Recommendations:

- i. that the committee notes the movement of risks during 2018/19.
- ii. that members note the summary risk position for current risks.
- iii. that members note the risks and mitigations currently ranked the highest.

The attached report sets out the changes to risk management during 2018/19 and confirms the role of the Scrutiny Committee as per the Risk Management Policy. It further summarises the existing risk position and links to visual reporting via power BI.

Appendix A shows the risks at the time of writing this report.

Appendix B shows the mitigating actions for the Risks whose Current Score was High.

Mary Davis

Electoral Divisions: All
Local Government Act 1972

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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

CIR Risk Management
AWARDS 2018
shortlisted

Risk Management

Annual Report for 2018/19

June 2019



**Health and Adult Care
Scrutiny Committee**

**CUSTOMER
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Support, Assurance & Innovation

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

The Risk Management Policy includes a description of the Roles and Responsibilities in relation to risk management. In respect of Scrutiny Committees, the wording is shown below.

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 overall processes and effectiveness of risk management.

The system used to record risks continues to be developed to ensure that risks can be recorded, reviewed and managed. Where risks cross over service areas these are also reported to the relevant Scrutiny Committees. The highest rated risks, strategic risks and those risks which cross service areas are regularly reported to the Leadership Group to support wider oversight and management.

Work continues across the council to 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.

Changes in 2018/19

The Adult Care and Health Management Team ended the year with six risks recording a Current Score of High, down from over 10 at the commencement of 2018/19. This was due to the ongoing application of management actions to reduce risks, in turn resulting in several risks being archived from the Risk Register during the year. The Management team also completed a comprehensive review of all risks resulting in detailed rewording and rescoreing. The table below shows the risks which were archived.

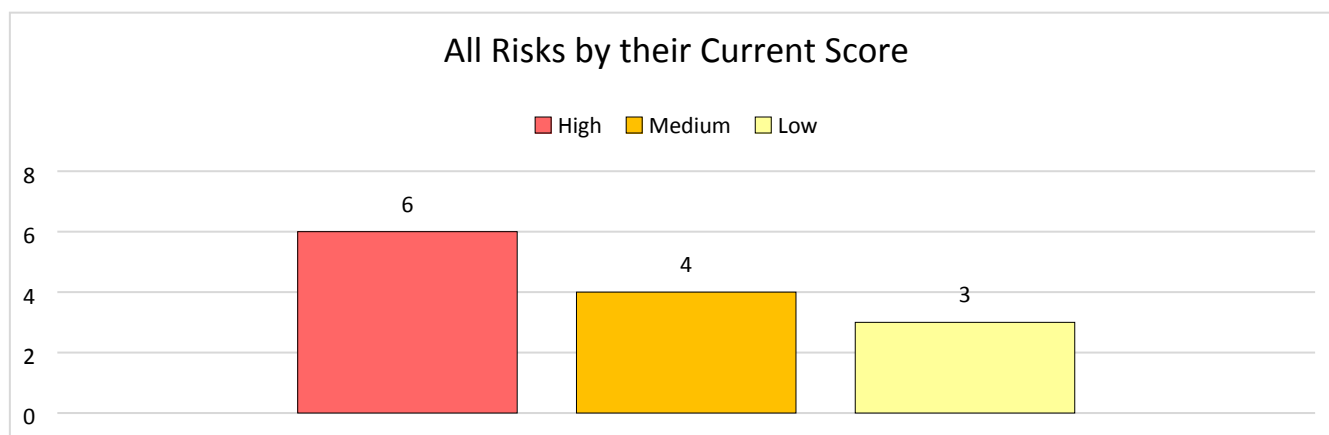
Archived Risk Title	Archived Date	Risk Owner	Accountable Officer
KS21: The Council does not meet its statutory requirement to have an agreed S117 policy agreement with its NHS partner.	21-Jun-18	Keri Storey	Sarah Aggett
TG30: Short term intervention.	30-Oct-18	Tim Golby	Jennie Stephens
TG26: Assistive Technology.	30-Oct-18	Tim Golby	Jennie Stephens
KS27: Inadequate systems controls in place regarding CareFirst access.	11-Jan-19	Keri Storey	Jennie Stephens
TG23: Workforce.	15-Jan-19	Tim Golby	Jennie Stephens
KS20: Care management capacity and effectiveness.	15-Jan-19	Keri Storey	Jennie Stephens
TG32 Social, Economic / Financial.	15-Jan-19	Tim Golby	Sarah Aggett
TG33: Lack of Business Continuity Planning.	15-Jan-19	Ian Hobbs	Sarah Aggett

All risks were reviewed throughout the year in line with the minimum requirements set out in the Council's Risk Management Policy and Strategy document.

Current Risk Position

There were 13 risks recorded in the Risk Register as at 22nd May 2019 which link to the areas of responsibility for this Scrutiny Committee. Of these, two were initially assessed to be Very High, both of which have been reduced to High. The highest of which is **KS9: Demand for adult social care and health for working aged adults (aged 18-64) exceeds financial provision**. Following the latest review by the Responsible Officer, Keri Storey - Head of Adult Care Operations and Health the risk score remains unchanged.

The remaining 11 were initially assessed as High, with all scores reducing as a result of the ongoing positive management actions. The Current risk scores can be seen in the chart below with further information for all risks in the supporting appendices.



It is recommended that Committee consider which if any of the risks shown in this report may be included in its future work plans.

Comment from the Adult Care and Health Management Team

The process of risk management remains well embedded at all levels within Adult Care and Health. Risks are reviewed monthly by the Heads of Service and their management teams with any additions and other changes referred to the Care and Health Leadership Team every six weeks.

Tight focus remains on those risks with the highest current risk scores. Market sufficiency, in both nursing care and personal care, remain significant challenges for both health and social care. Proactive work with providers across the whole system ensures that people are rigorously reviewed and prioritised when waiting for care to ensure that appropriate contingencies are in place to ensure they remain safe and are not inappropriately delayed in hospital.

There is a challenge in sustaining the professionally qualified workforce across the health and care system (STP footprint and Devon); regionally and nationally. For Devon County Council, this results in high levels of competition across organisations which often offer better remuneration and terms and conditions than Devon. Particular hotspots for the workforce include: ageing Approved Mental Health Professionals (AMHP) and a difficulty attracting professionals with high levels of post qualifying experience and skills in working with the most challenging behaviours.

Overall Social Work vacancies are currently running at approximately 8%. Generally, this is being managed through the recruitment of ASYEs (newly qualified) and some experienced Social Workers. This does however mean that any plans for growing capacity will take some time, e.g. 2 years to deliver. There is a continuing focus on an AMHP training programme and exploration of training/higher level support to specialist areas of practice.

There are increasing numbers of younger adults, particularly those aged 18-25 transitioning from children's services, being supported by adult services. This is resulting in significant cost and volume pressures being placed on the adult social care system. A major transformation programme is in place in order to manage the financial consequences of increasing numbers and costs. The programme focuses on promoting independence through employment opportunities, alternative housing and accommodation options, strengths-based social work practice and minimising health inequalities for people with disabilities.

Future Risk Reporting

Power Bi - Maximising access to new software is enabling risk reporting to become more interactive and live. Work has progressed to use PowerBI to provide an interactive visual presentation of current risk information. The link below can be used to see the current development of risk reporting for the Scrutiny Committee using PowerBI. [Adult Health and Care Scrutiny Power Bi Dashboard](#).

Health Risks – Work is ongoing to map the Councils risks against those of the Devon CCG. The longer-term goal of this undertaking is to ensure that both organisations have sight of risks for which joint mitigation may be possible, in turn increasing the ability to mitigate as well as the efficiency of mitigation. It should also help to ensure that the actions of Council Officers who are working with the CCG to mitigate risks are being recorded and monitored.

Performance and Risk – Linking Performance Information to Risk Management increases the value of both by providing a greater insight and ability to deliver effective services. It also helps to provide a base for the development of Key Risk Indicators which can sit alongside key performance indicators acting as an early warning system. There is a commitment from both the Social Care Management Information Team and the Councils Risk Management support function to progress this.

For questions related to the detail of existing risks either the Risk Owner, Accountable Officer or other service area representative will be in attendance at the Scrutiny Committee.

For questions related to Council Wide processes please contact Tony Rose (tony.d.rose@devon.gov.uk).

Supporting Appendices

- Appendix A – Adult Care & Health Risks
- Appendix B - Existing Risk Mitigations for risks with a Current rating of High

Risk Title	Description	Risk category	Inherent Score	Current Score	Risk Owner	Accountable Officer	Latest review	Change direction
KS9: Demand for adult social care and health for working aged adults (aged 18-64) exceeds financial provision	<p>Cause: Due to advances in medical practice more young people are surviving into adulthood with increasingly complex needs, living longer and out living their carers.</p> <p>Event: Significant cost and volume pressures are being placed on the adult social care system. In addition to the increasing numbers of young people transitioning from children's services there are additional and increasing pressures to support people with mental health needs, particularly in residential care settings.</p> <p>Impact: Significant demand and financial pressures are evident within the system. Overall more of the adult social care NET budget is now being spent on supporting working aged adults (aged 18-64). Based on 3-year retrospective modelling, additional cost pressures of c.a. £1m are anticipated in supporting young people transitioning into adult care services. There is also significant pressure within the mental health system for residential care placements with demand and cost outstripping budget capacity.</p>	Strategic	24: Very high	16: High	Keri Storey	Jennie Stephens	04 June 2019	↔
TG11: The council fails to meet its statutory market sufficiency requirement for personal care	<p>Cause: Lack of available service capacity due to inability to secure sufficiency of personal care supply in certain parts of the County.</p> <p>Event: Inability of Prime and other providers to recruit and retain appropriately qualified care workers to meet demand for personal care services in certain parts of the County.</p> <p>Impact: In certain circumstances people are at home with inappropriate levels of personal care support to meet their needs, which may include reliance on family and friends. People are delayed in hospital whilst care packages are sourced to support safe discharge contributing to whole system pressures. More costly alternatives are being secured, e.g. short-term residential placements, to support people safely.</p>	Strategic	20: High	16: High	Ian Hobbs	Tim Golby	04 June 2019	↑

Risk Title	Description	Risk category	Inherent Score	Current Score	Risk Owner	Accountable Officer	Latest review	Change direction
KS29: Inability to recruit appropriately qualified adult social care professionals	<p>Cause: Lack of suitable and appropriately qualified professionals available across the health and care system locally, regionally and nationally. High levels of competition across organisations which often offer better remuneration and terms and conditions than Devon County Council. Ageing internal workforce of Approved Mental Health Professionals (AMHP) and within the Emergency Duty Service.</p> <p>Event: That the numbers of professionally qualified staff fall below that required to offer a safe and secure service. Care management throughput, particularly with regard to the timeliness of assessment and review are impacted adversely putting services users at risk of harm.</p> <p>Impact: That referrals leading to assessment are not undertaken in a timely fashion leading to people waiting longer for the support they require, which could potential lead to heightened risk of harm. Reviews not undertaken in a timely manner leading to service users with possibly inappropriate packages of care (too high or too low) with associated financial consequences. Patients unnecessarily delayed in hospital longer due to inability to assess needs and procure services in a timely manner.</p>	Operational	20: High	16: High	Keri Storey	Jennie Stephens	04 June 2019	↑
KS30: Investment in workforce capacity and skills mix is insufficient to meet the changing nature and intensity of demand	<p>Cause: Increased acuity of need for people who require support and intervention from community health and care services. Only short-term investment and targeted initiatives, e.g. Invest to Save, have been used to grow the workforce in recent years.</p> <p>Event: That these initiatives increase the risk of destabilising teams required to deliver core care management functions.</p> <p>Impact: There is a significant risk that the workforce is unable to deliver safe services to the required standard. Without properly planning ahead to meet projected changes in demand the workforce will not be developed and built to meet future requirements.</p>	Operational	20: High	16: High	Keri Storey	Jennie Stephens	04 June 2019	↑

Risk Title	Description	Risk category	Inherent Score	Current Score	Risk Owner	Accountable Officer	Latest review	Change direction
TG20: The council fails to meet its statutory market sufficiency requirement for nursing care	<p>Cause: Insufficient availability of nursing care supply in certain parts of the County.</p> <p>Event: Inability to secure nursing home placements close to home.</p> <p>Impact: In certain circumstances people are being placed in nursing homes outside of their local communities away from family and friends. People are being delayed in hospital whilst nursing home placements are being sourced contributing to whole system pressures. Placements being procured at higher cost due to sufficiency and demand pressures.</p>	Operational	24: Very high	15: High	Tim Golby	Tim Golby	04 June 2019	↓
TG34: Additional one-off costs due to potential back payment resulting from retrospective application of the National Living Wage	<p>Cause: A recent Court case about paying the National Living Wage for sleep-ins has clarified the law in a way that the Government had not anticipated.</p> <p>Event: Local authorities, charities and individuals with personal budgets in the form of direct payments could be held liable for minimum wage violations going back for up to six years</p> <p>Impact: Significant one-off additional costs as a result of back payments to providers.</p>	Operational	20: High	15: High	Tim Golby	Jennie Stephens	04 June 2019	↑
KS28: Service users with high risk behaviours and diagnosis of enduring mental illness at potential risk of harm due to lack of appropriate clinical involvement with Autism and ADHD Team managing high level cases	<p>Cause: The Autism and ADHD Team are managing people with high levels of risk and complexities which need a higher level of clinical input and multidisciplinary working particularly for those individuals with high risk behaviours and diagnosis of enduring mental illness.</p> <p>Event: That staff are potentially operating outside the Local Authority legal limit. Also, that service users do not receive a timely and appropriate response to presenting needs.</p> <p>Impact: Potential of 'harm' for service users. Reputational damage as staff are potentially operating outside the scope of their knowledge/knowledge and outside of Local Authority legal limits. Risk to professional registration as staff are potentially operating outside the scope of their knowledge and skills.</p>	Operational	15: High	12: Medium	Keri Storey	Jennie Stephens	21 Mar 2019	↓

Risk Title	Description	Risk category	Inherent Score	Current Score	Risk Owner	Accountable Officer	Latest review	Change direction
KS22: 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	<p>Cause: Annually between 50 and 60 young people transition into adult social care services from children's services. The system is complex with case level information held across multiple systems by multiple agencies with no unique identifier to enable records to be matched with confidence. The two legal frameworks to are very different with different eligibility criteria and add to the communication problems across services and residents.</p> <p>Event: Failure to initiate early joint assessment and planning between the children's and adult services results in poor experience for young people and their parent-carers and unclear and often heightened expectations .In addition the transition process may not adequately promote independence meaning that services accessed are more costly in the medium term.</p> <p>Impact: Delayed or Poor experience of the transitions process for young people and their parent carers leading to dissatisfaction, disputes and complaints and heightened costs .Potential risk that young people will fall through the gap between children's and adult services leading to poor care and support and the potential for harm. Additional cost burdens due to poor transition planning.</p>	Operational	15: High	12: Medium	Keri Storey	Jennie Stephens	21 Mar 2019	↓
TG31: The way we deliver integrated working with health and other partners fails to deliver person centred care which promotes independence	<p>Cause: The Social Care Green paper continues to be delayed which impacts on funding decisions linked to the next Comprehensive Spending Review. The NHS five-year funding plan were published during 2018 ahead of the NHS Long Term Plan which was released early January 2019. Links between the future health and social care agendas have therefore still be clarified. This brings national challenges which are similar to those locally, e.g. agreeing a shared vision, strategy and plans for integrated services and delivery.</p> <p>Event: Planning for integration becomes disjointed.</p> <p>Impact: Lack of joined up services across health and social care resulting in delays and possible duplication with associated financial costs. Delays in the integration of care impacting adversely on the</p>	Strategic	20: High	12: Medium	Tim Golby	Jennie Stephens	15 Apr 2019	↓

Risk Title	Description	Risk category	Inherent Score	Current Score	Risk Owner	Accountable Officer	Latest review	Change direction
	outcomes for people who use health and care services. Missed opportunities to reduce the gaps and inefficiencies in the current system leading to poor use of resources and additional costs.							
KS14: The Council fails to meet its statutory obligations with regard to Deprivation of Liberty Safeguards (DoLS) and individuals are put at unacceptable risk	<p>Cause: A 2014 Supreme Court judgement in the case of P v Cheshire West and Chester Council and Surrey County Council threw out previous judgements that defined deprivation of liberty more retrospectively. All people who lack capacity to make decisions about their care and residence, and under the responsibility of the State, are subject to continuous supervision and control and lack the option to leave their care setting are deprived of their liberty, ruled the Court.</p> <p>Event: The judgement meant that many people are likely to have been deprived of their liberty unlawfully and without safeguards in settings including care homes and supported living placements.</p> <p>Impact: Proper application of the judgement has seen a significant increase in DoLS case numbers and also applications to the Court of Protection to authorise deprivations of liberty. Limited capacity within the DoLS Team together with the significant increase in demand has resulted in extended waiting lists putting individuals at unacceptable risk. A recent health check/audit was undertaken in October 2018 and highlighted risks to individuals and the organisation from a gap in professional leadership in relation to the wider application of the Mental Capacity Act.</p>	Operational	18: High	10: Medium	Gary Patch	Jennie Stephens	21 Mar 2019	↓
KS26: Demand resulting from Transforming Care Partnerships (TCP) brings NHS funded out of area placements in hospitals to a Devon setting with the need for adult social care funded support	<p>Cause: The Transforming Care Partnership of the CCGs, NHSE specialist providers and the Local Authority are working to bring people who are currently in NHS funded hospital settings home to community settings so that they are not living away from their local communities, families and friends.</p> <p>Event: The transfer of people from hospital to community settings results in the need for adult social care funded support.</p> <p>Impact: Additional cost burden placed on adult social</p>	Operational	15: High	8: Low	Keri Storey	Jennie Stephens	21 Mar 2019	↔

Risk Title	Description	Risk category	Inherent Score	Current Score	Risk Owner	Accountable Officer	Latest review	Change direction
	care due to the need to provide care and support packages at home.							
TG27: The delivery model for social care in mental health (via Devon Partnership Trust) is not meeting the needs of Devon residents	<p>Cause: Adult social care for people with mental health needs is delivered through a s75 Partnership Agreement in Devon</p> <p>Event: The historical structure for the delivery of adult social care within the Trust has not been sufficient to ensure delivery of Care Act compliant care and support.</p> <p>Impact: Assessment of social care needs has not been in accordance with Care Act eligibility resulting in external challenge. Practice has not been sufficiently robust which has led to decisions being challenged with regard to eligibility and cost. Potential risk of harm to service users.</p>	Operational	15: High	9: Low	Tim Golby	Jennie Stephens	21 Mar 2019	↓
KS19: The Council fails to meet its statutory obligations to ensure Continuing Health Care CHC and Joint funding is appropriately assessed by the NHS	<p>Cause: Failure to provide the appropriate multi-disciplinary approach to the assessment and support planning for people with complex care needs. Particularly for people with complex needs in relation to learning disabilities.</p> <p>Event: Additional cost with regard to people's care as a result of the Local Authority picking up health related care costs. There is potential for clinical risk and reputational damage as social care staff undertake activities that they do not have the full competency set to deliver.</p> <p>Impact: If staff operate outside the scope of their knowledge and skills there are possible risks to professional registration. With regard to service users, needs are potentially not being met as clinical interventions are not being accessed which could lead to risk of harm. There are delays in the completion of CHC / joint funding assessment processes which delay the delivery of the appropriate care and support to individuals.</p>	Operational	20: High	9: Low	Keri Storey	Jennie Stephens	21 Mar 2019	↓

Risk Mitigations (RAG rated as per the Risk Register Entry)

The table below outlines the mitigations recorded against the risks shown in Appendix A with a **Current** risk rating of High. Each mitigation has been rated as Red, Amber or Green by the owner of the action, with those actions which are Completed shown in a darker green as per the Key below.

Key to Colours		Completed	Red	Amber	Green				
Risk Title	Current Risk Score	Controls and Mitigations							
KS9: Demand for adult social care and health for working aged adults (aged 18-64) exceeds financial provision	16: High	Green	Regular closer working with commissioners and development of a critical path across operations and commissioning	Amber	<ul style="list-style-type: none"> Increased capacity within Autism Team and establishment of Disability County Team to complete reviews. Detailed programme of reviews and work to be completed to deliver savings. 	Completed	<ul style="list-style-type: none"> Establishment of disability practice lead post and workforce plan through iBCF funding to improve practice and upskill workforce. Implemented revised in-house enabling offer 'reaching for independence' with closer joint working with community teams for enabling intervention to be considered at all reviews. 		
TG11: The council fails to meet its statutory market sufficiency requirement for personal care	16: High	Green	<ul style="list-style-type: none"> Weekly whole system escalation call. manages risk and agrees actions Rigorous review and prioritisation of people waiting for care ensures appropriate contingencies are in place to ensure safety. 	Amber	<ul style="list-style-type: none"> New Living Well at Home Contract let jointly with NHS has largely secured sufficiency in Northern/Mid Devon and parts of West Devon. Performance monitoring of contract maintains high vigilance and actions. Strength based approach to reduce demand. Work with providers to address capacity issues. 				
KS29: Inability to recruit appropriately qualified adult social care professionals	16: High	Green	<ul style="list-style-type: none"> Investment for staff to complete required qualifications, e.g. social workers, AMPHs and team managers. Piloting aspiring team manager development programme within the ACOH service 	Amber	<ul style="list-style-type: none"> Centrally supported attraction and recruitment for social worker and team manager roles. Social worker career structure being reviewed in parallel with children's services. 	Red	Ongoing review of pay and conditions and attrition and retention strategies for above named posts	Completed	<ul style="list-style-type: none"> Investment to support newly qualified social workers through AYSE (DCC has a nationally acclaimed AYSE Programme). Preceptorship Programme to support newly qualified occupational therapists.

Risk Title	Current Risk Score	Controls and Mitigations			
KS30: Investment in workforce capacity and skills mix is insufficient to meet the changing nature and intensity of demand	16: High	Amber	<ul style="list-style-type: none"> Review the nature and intensity of demand. Establish methodology and data for ongoing workforce profile review. Review workforce profile annually taking account of anticipated demand five years into the future. 	Red	<ul style="list-style-type: none"> Review the skill mix across all team types and locations to determine the level of investment required to meet known demand.
TG20: The council fails to meet its statutory market sufficiency requirement for nursing care	15: High	Green	<ul style="list-style-type: none"> Improving relationship with the market via sector lead to increase market engagement. New fee model based on the costs of care, including inflationary factors, e.g. National Living Wage, food and fuel increases, is better received by the market than the former banded rates. Joint quality assurance with NHS. 	Amber	<ul style="list-style-type: none"> Nursing homes sufficiency and needs analysis underway to ensure we fully understand the gaps. Workforce development programme being extended to private sector focussed on recruitment and retention of registered nurses.
TG34: Additional one-off costs due to potential back payment resulting from retrospective application of the National Living Wage	15: High	Green	<ul style="list-style-type: none"> Awaiting clarification from the judicial system. Scenario modelling to assess possible extent of financial exposure. Legal view sought. 		