Full Risk Register



Risk Register - Adult Social Care and Health

Current Risk Level Summary

Current Risk Level Changes

| Green | 0 | Amber | 6 | Red | 0 | Total | 6 |
|-------|---|-------|------------------|-----|---|-------|-----|
| | | 2 | -16 ³ | | | 2 | -16 |



Risk Ref AH0037 Risk Title and Event

Information Asset Management
Fit for purpose configuration of Adult Social Care systems to enable data quality, consistency and trust of data.

Owner Last Review da Next Review

10/02/2022 10/05/2022

Consequence Current **Previous Control / Action** Control / **Target Date** Target Cause Risk **Current Risk** Action Risk Systems failure resulting in either MOSAIC servers are being transferred to Α 28/02/2022 Medium Matt Medium

| temporary or permanent loss of information and functionality. Poor data quality resulting in poor decision making and errors Systems unfit for purpose Data breaches | 12 Significant (3) Likely (4) | Servelec in February 2022, this will provide Chatfield clarity on responsibility and resolution of issues more efficiently. • Following an audit of all manual Matt A 31/03/2022 Spreadsheets the performance team have enabled all safeguarding spreadsheet to be recorded and reported from MOSAIC. Work is underway to ensure all deprivation of liberty safeguards (DOLS) spreadsheets are moved across onto MOSAIC. | 9 Significant (3) Possible (3) |
|--|--|---|--------------------------------|
| | | Data is flowing from MOSAIC to the Kent and Medway Care Record (KMCR). The Chatfield installation of Graphnet to enable us to view data is due to go live in February 2022. Disaster recovery testing is in place with servelec, there are also penalties that are built into the contract should Servlec be | |
| | | responsible for any issues resulting in downtime. • Annual business continuity planning Matt Control process is in place to ensure that services Chatfield are consulted on their requirements should the system be down and relevant actions set in place. | |

| Risk Register - Adult Social Care and Health | | | |
|--|---|---------------------------------|---------|
| | Monthly contract management meetings are in place with Cantium and Servelec to improve performance of systems and resolve issues | Matt Chatfield | Control |
| | Mosaic Systems Group operates on a monthly basis as a user group forum to discuss and escalate any matters of concerns to the Adult Social Care Systems Board. | Matt Chatfield | Control |
| | A data quality strategy has been published including an action plan which will be monitored by a sub group to plan and resolve high priority data quality issues. | Matt Chatfield | Control |
| | Emergency client report is produced overnight every day and saved for restricted use should MOSAIC be down. | Matt Chatfield | Control |
| | A newly formed Adult Social Care System Board will be introduced in 2022 as part of revised governance to coordinate and oversee any systems activity. | Matt Chatfield | Control |
| | Internal processes and systems are in place as detailed in team business continuity plans for contact if telephone | ASCH Directorate Manageme | Control |
| | systems are down. | nt Team | |

Review Comments

Reviewed with Paula Parker 08/02/22 10/02/2022

Risk Register - Adult Social Care and Health

Risk Ref AH0005 Owner Last Review da **Next Review** Risk Title and Event Richard Smith 25/02/2022 25/05/2022

Continued pressures on public sector funding impacting on revenue and savings efficiencies

Levels of spending and growth pressure across the service outstrip spending power.

There is not only an increase in demand in adult social care but increased level of need post COVID, with an uncertainty on the longer term increased demand and how this will affect our services.

There are still areas of uncertainty in the operating environment relating to impacts of upcoming Government reforms.

There continues to be a need to achieve significant efficiencies year on year and the impact of resourcing pressures on the achievement of our objectives.

| Cause | Consequence | Current Risk | Previous Current Risk | Control / Action | | Control / Action | Target Date | Target Risk |
|-------|--|--------------------------------------|--------------------------|--|---------------------------------|---------------------|-------------|------------------------------------|
| | Failure to delivery statutory obligations and duties Potential for partner or provider failure – including sufficiency gaps in provision Reduction in resident satisfaction and reputation damage. Increased and unplanned | Medium 12 Serious (4) Possible (3) | 20 y -8 | Making a difference every day approach and supporting activity established to oversee the implementation and delivery of future improvements in a comprehensive programme of activity. All ASCH improvement activity is mapped, managed consistently and prioritised under this approach. | Paula Parker | A -Accepted | 31/03/2023 | Medium 12 Serious (4) Possible (3) |
| | pressure on resources. Decline in performance. | | | Assess impact of and respond to Government plans for the future of social care, including Health and Social Care Integration White Paper. To include assessing and quantifying the costs of social care reforms to analyse sufficiency of additional funding over the medium term to cover the cost of the reforms | Richard Smith | A -Accepted | 01/08/2022 | |
| | | | | Monthly performance assurance sessions have been set up to review demand with the Directors and Corporate Director. Recovery plans are under development to identify actions to manage demand within teams. | ASCH Divisional Directors | A -Accepted | 01/04/2022 | |
| | | | | Implementation of a locality way of working, reducing silo was of working in the the provision of care and support to people in Kent. Improving system benefits and a fit for purpose operating model | ASCH Divisional Directors | A -Accepted | 30/11/2022 | |
| | | | | A full range of options will be developed as potential solutions to any change activity with a full investment appraisal to ensure the cost benefits are acknowledged and approved by the appropriate governance. | Helen Gillivan | Control | | |

| Risk Register - Adu | It Social Care and Health | | Benefit realisation Board has been established to oversee and plan the delivery of: Savings, recovery, medium term financial plan, pressures and sustainability. Monthly forecasting is in place to look at activity, demand and trends and escalating | Helen Gillivan Michelle Goldsmith | Control | |
|---------------------|--|-----------------|---|--|---------|--|
| | | | areas of concern for the directorate. Continue to work innovatively with partners, including health services, districts and boroughs, and providers to identify any efficiencies across the wider sector. | ASCH Divisional Directors | Control | |
| Review Comments | Risk Reviewed at DMT and agreed with Rich 25/02/2022 | nard Smith to i | reduce likelihood to target. | | | |

Risk Register - Adult Social Care and Health

| Risk Ref | AH0040 | Risk Title and Event | Owner | Last Review da | Next Review |
|----------|-----------------------|---|---------------|----------------|-------------|
| Developm | ent of Integrated Car | e System / Integrated Care Partnerships in Kent and Medway NHS system | Richard Smith | 25/02/2022 | 25/05/2022 |

Failure to develop more partnership and aligned health & social care services and commissioning at both ICS and ICP level places pressure on system finances and hinders highest possible quality of care

Development of four ICP generates additional demand/work on strategic leadership of KCC, particularly in ASCH and Public Health which has significant opportunity costs, including impact on business-as-usual activity.

Multiple ICP's leads to differences in form, function and relationships between ICPs and the ICS and/or KCC which increases system complexity and leads to variation which increase costs/risks.

System complexity leads to failure to meet statutory duties around the sufficiency of the care market, care quality and safeguarding.

Lack of understanding within KCC of NHS policy and regulatory environment; and vice versa, lack of understanding of local authority legislative, policy and democratic environment in NHS.

| Cause | Consequence | Current Risk | Previous Current Risk | Control / Action | | Control / Action | Target Date | Target Risk |
|---------------------------------|--------------------------------------|-----------------|--------------------------|---|-------|---------------------|-------------|----------------|
| | Further deterioration in the | Medium | | Regular update reports on ICS are taken to | Karen | Control | | Medium |
| In response to the Government | financial and service | 12 | | CMT | Cook | | | 8 |
| White Paper 'Integration and | sustainability of health and social | Serious (4) | | Health Integration paper presented to | Karen | Control | | |
| Innovation: working together to | care services in Kent and | Octions (4) | | County Council in July 2021 – included | Cook | | | Serious (|
| improve health and social care | Medway. | Possible | | requirement to approve transition from Kent | | | | |
| for all, the NHS in Kent and | Additional budget pressures | (3) | | and Medway Health and Wellbeing Board | | | | Unlikely |
| Medway have formed an | transferred to social care as | (0) | | to the Health and Care Partnership Board | | | | (2) |
| Integrated Care System (ICS) | system monies are used to close | | | Public Health leadership representation for | Anjan | Control | | |
| with 8 CCGs merging to form | acute and primary care service | | | the STP prevention workstream | Ghosh | | | |
| the basis of the System | gaps. | | | Public Health consultant representation on | Anjan | Control | | |
| Commissioner, above four | Legal challenge/judicial review of | | | the East Kent, West, North and Medway & | Ghosh | | | |
| ICPs (Integrated Care | decisions and decision-making | | | Swale ICP Development Boards | | | | |
| Partnerships) and 42 PCN's | framework for joint decisions. | | | Senior KCC political and officer | Anjan | Control | | |
| (Primary Care Networks). | Social care and public health | | | representation on the System | Ghosh | | | |
| The policy intent of structural | priorities not sufficiently factored | | | Transformation Executive Board and | | | | |
| reform is to deliver better | into/shaping emerging ICS/ICP | | | System Commissioner Steering Group | | | | |
| strategic planning and delivery | plans and priorities, weakening | | | Working through KCC Public Health | Anjan | Control | | |
| of health and social care | integrated approach. | | | partnership with the Kent Community | Ghosh | | | |
| services at place-based | Focus on structural changes | | | Healthcare Foundation Trust (KCHFT) to | | | | |
| community level and shift from | workstreams prevents more agile | | | ensure Public Health improvement | | | | |
| acute to primary and | improvements/joint working being | | | programmes are linked and delivered | | | | |
| community level services. | undertaken. | | | alongside Local Care through Primary Care | | | | |
| Partnership framework and | Reputational damage to either | | | Networks and other primary care providers | | | | |
| principles for partnership | KCC or NHS or both in Kent. | | | (e.g. community pharmacy) | | | | |
| working have been agreed. | Adverse outcome from CQC local | | | | | | | |
| Further work is underway with | system review. | | | | | | | |

Risk Register - Adult Social Care and Health

| Health leaders to identify | 23.2 2.74 (100.01 | | Senior KCC political and officer | Clare | Control |
|-------------------------------|-------------------|--|--|----------|---------|
| shared ambition and | | | representation on the System | Maynard | |
| opportunities for new ways of | | | Transformation Executive Board and | , | |
| working. Regulators (CQC / | | | System Commissioner Steering Group | | |
| Ofsted) increasing review | | | A joint KCC and Medway Health and | David | Control |
| health and care services and | | | Wellbeing Board for STP related | Whittle | |
| the | | | matters/issues has been established. | | |
| commissioning/performance of | | | Making A Difference Everyday way of | Richard | Control |
| those services and 'system' | | | working considers a 'bottom up' people first | Smith | |
| level. | | | and great practice approach which dovetails | | |
| | | | with the 'top down' public health strategy | | |
| | | | and will help to ensure that public health | | |
| | | | improvement programmes are delivered | | |
| | | | alongside Local Care through Primary Care | | |
| | | | Networks and other primary care providers | | |
| | | | (e.g., community pharmacy). | | |
| | | | County Council agreed framework for KCC | Richard | Control |
| | | | engagement within the STP | Smith | |
| | | | Senior KCC political and officer | Richard | Control |
| | | | representation on the System | Smith | |
| | | | Transformation Executive Board and | | |
| | | | System Commissioner Steering Group | | |
| | | | Senior KCC level officer representation on | Richard | Control |
| | | | the East Kent, West, North and Medway & | Smith | |
| | | | Swale ICP Development Boards | | |
| | | | Health Reform and Public Health Cabinet | Benjamin | Control |
| | | | Committee provides non-executive member | Watts | |
| | | | oversight and input of KCC involvement in | | |
| | | | the STP | | |

Review Comments

Reviewed at DMT 23/02/22

25/02/2022

Report produced by JCAD CORE © 2001-2022 JC Applications Development

Risk Register - Adult Social Care and Health

| Risk Ref AH0038 | Risk Title and Event | Owner | Last Review da | Next Review |
|------------------------|----------------------|---------------|----------------|-------------|
| Information governance | | Richard Smith | 09/02/2022 | 09/05/2022 |

Responsibility of GDPR and Data Protection (2018) obligations are the responsibility of all ASCH staff and staff need to have a strong understanding of obligations, consequences and processes and working arrangements to ensure social care clients' data is looked after throughout their whole journey. It is paramount that strong Information Governance arrangements and working practices are in place to ensure social care clients' data is looked after throughout their whole journey. Adult Social Care & Health (ASCH) directorate are responsible for ensuring continued compliance with GDPR and Data Protection (2018) obligations. Failure to comply could lead to losses of information and data breaches which would have an impact on social care clients and cause reputational consequences. It could also mean a loss of access to data (e.g., health) and the success of this directorate is dependent on sharing information with multiple organisations to provide the best possible care and support to an individual. In significant circumstances failure to comply could also lead to fines or sanctions

| Cause | Consequence | Current Risk | Previous Control / Action Current Risk | Control / Action | Target Date | Target Risk |
|-------|---|------------------------------------|--|---------------------|--------------------------|---------------------------------------|
| | Failure to comply with GDPR and Data Protection (2018) obligations could cause reputational damage to ASCH, impact negatively on a social care clients' support and care, lead to loss of access to data and ultimately lead to fines or sanctions. | Medium 12 Serious (4) Possible (3) | Staff briefing sessions took place during 2021 on a variety of topics led by the Information Governance lead. Positive attendance and feedback was received. Awareness and guidance planned for 2022 will include attendance at Team meetings, internal guidance and development of standardised templates by Information Governance Lead. | A -Accepted | 31/12/2022 | Medium 9 Significant (3) Possible (3) |
| | | | Following an internal audit at the end of 2021 a management action plan has been developed to cover the 7 issues identified that relate to: Mandatory training, Data protection Impact Assessments, Data Breaches and Subject Access Requests. The resolution focuses on Guidance and training with ASCH actions to be completed within the first half of 2022. | A -Accepted | 30/06/2022 | |
| | | | Meeting scheduled to review the progression of an escalation process for non completion of mandatory training. To have clarity on the Data protection Matt | A -Accepted A | 18/03/2022 31/12/2022 | |
| | | | Impact Assessment process and help Chatfield streamline process and support completion in the directorate. | -Accepted | | |

| | agreed in December 2020 following an | Chatfield | |
|--|---|-----------|--|
| | in-depth analysis of our current working | | |
| | arrangements and practices. This action | | |
| | plan initially set in place 22 actions to | | |
| | improve our compliance and working | | |
| | practices, the action plan is a live | | |
| | document and is reviewed at regular | | |
| | intervals throughout the year to monitor | | |
| | progress. | | |

Risk Register - Adult Social Care and Health

Risk Ref AH0033 Risk Title and Event Owner Last Review da Next Review

Adult Social Care Workforce Chris McKenzie 24/02/2022 24/05/2022

The recruitment and retention of staff continues to be a challenge for Adult Social Care ,there is a need to ensure that a suitably

qualified, skilled and experienced workforce is in place to deliver services. This includes making sure critical roles are filled with

staff who have the right skill sets and support in place.

| Cause | Consequence | Current Risk | Previous Current Risk | Control / Action | | Control / Action | Target Date | Target Risk |
|-------|---|---------------------------------------|--------------------------|--|----------------------------------|---------------------|-------------|-------------------------------|
| | Without the right workforce in place there is a risk that statutory services will not be delivered and there will be gaps in care provision. Ability to attract staff to work in social care and provide a competitive employment offer. | Medium 12 Significant (3) Likely (4) | 20 3 -8 | A review of market premiums to support recruitment and retention will be undertaken. Exploration of options will be undertaken, milestones agreed and presented to the OD group for approval. Work is underway with a recruitment specialist to develop a marketing approach and materials to support recruitment in to | Sydney Hill Sydney Hill | A -Accepted | 30/06/2022 | 9 Significat (3) Possible (3) |
| | Lack of experienced staff with specialist skills such as Best Interest assessors, Approved | | | adult social care in Kent. Internal engagement activity is planned for early 2022. | Sydnov | | 24/02/2022 | |
| | Mental Health Professionals. Gaps in training and career pathways for staff to support growth and retention. Disenchanted staff due to change, affecting motivation and productivity. | | | The resourcing sub group was reinstated to oversee the recruitment activity and develop a coordinated programme of activity to support recruitment and retention. The development of a prioritised action plan for the group is under development alongside the strategic priorities. | Sydney Hill | A -Accepted | 31/03/2022 | |
| | | | | Culture audits are underway during December across a 15% workforce. Following the workshops the outputs will form an action plan to work towards achieving our desired culture across ASCH. This will be presented to the OD group in February and actions agreed. | Janet Hawkes | A -Accepted | 31/03/2022 | |
| | | | | The development of a practice Framework which will be clearly defined and will be able to support the development of high quality practice by providing clear expectations and a framework within which a consistent approach can be applied. | Sarah Denson | A -Accepted | 31/05/2022 | |

| tisk Register - Adult Social Care and Health | | | | |
|--|--|--------------------|----------------|------------|
| | A communication plan for the work and outputs of the Strategic workforce Plan, OD group and sub groups is under development to ensure regular messaging and updates are shared across the workforce. This will be developed alongside the Strategic workforce plan to be launched in the new financial year. | Jade Caccavone | A -Accepted | 01/04/2022 |
| | Improved methods for recording and reporting changes in vacancy position are being investigated to provide better oversight across the operational workforce. | Jade Caccavone | A -Accepted | 30/04/2022 |
| | The ASCH Organisational Development group will lead the development of a Strategic workforce plan which aligns to our future ways of working and our future workforce requirements. The principles and Priority areas have been endorsed and delivery plans are in development with an intended launch date of 31/03/22. | Jade Caccavone | A -Accepted | 31/03/2022 |
| | A Skills dashboard has been created and hosted on the KCC Delta platform to identify the skills mix within teams, the data is being checked with a launch planned for early 2022. | Maureen Stirrup | A -Accepted | 31/03/2022 |
| | • A communications plan is in place for the workforce to support increased engagement with teams on relevant matters and change activity. Internal team roadshows are underway. Regular all-staff virtual live briefing events are in place across the year which are based on themed activity. Open door sessions with the corporate director are held regularly and staff questions and answers are posted on the intranet and circulated. Communications channels include monthly Adult Social Care staff bulletins, intranet content and Making a difference every day bulletins | Lisa Clinton | Control | |
| | | | | |

| Risk Register - Adult | Social Care and Health | | | | |
|-----------------------|--|----------------------------|---|-------------------|---------|
| Risk Register - Adult | Social Care and Health | | The Kent Academy was launched on 3rd July 2020, this is a dedicated space where social care staff will be thoroughly supported and encouraged to better their knowledge, skills and practice, no matter what role they hold in the service. This will be a focal point in the approach towards social care development, making sure our staff have the resources available and feel | Sarah Denson | Control |
| | | | supported in terms of both professional development and career progression. • A process and guidance for managers and staff has been developed to support in application of the legislation that all staff coming into CQC registered care homes and those undertaking CQC regulated activity must have 2 doses of COVID-19 vaccination unless they are exempt. Area | Kerena Hunter | Control |
| | | | processes are in place to manage the impact this may have within the existing workforce. • A reformed ASCH Organisational Development (OD) Group was established in Autumn 2020 to have oversight of all workforce issues affecting the Directorate. | Chris McKenzie | Control |
| Review Comments | Risk Impact and Likelihood reduced due to 24/02/2022 | movement in Workforce plan | ning . Agreed following DMT and with Chris McKer | nzie 24/02/22 | |

Risk Register - Adult Social Care and Health

Risk Ref AH0035 Risk Title and Event Owner Last Review da Next Review

Making a Difference Every Day Approach

Helen Gillivan 10/02/2022 10/05/2022

Delivery of large scale change activity across both KCC and Adult Social Care and Health ensuring alignment of priorities and proportionality.

Risk that teams are facing large amounts of change at once.

Risk that Adult Social Care and Health work in silo and miss joint working opportunities.

Risk that initial timescales may not be met.

| Cause | Consequence | Current Risk | Previous Current Risk | Control / Action | | Control / Action | Target Date | Target Risk |
|-------|--|--|--------------------------|---|--|---------------------|-------------|--|
| | This could result in lack of staff engagement due to staff experiencing change fatigue and conflicting priorities. There is a risk that silo working will develop between workstreams, services, adult social care and the strategic reset programme within KCC. There is a risk that if any emerging areas of pressure impact the system resource from existing project and Senior Responsible Officer's would need | Medium 9 Significant (3) Possible (3) | | A revised governance has been established for the programme during January 2022 as it enters its delivery phase. Revised responsible officers, lead operational staff and programme and project staff are being reallocated to ensure the appropriate oversight is in place. Programme governance will ensure priorities are aligned across the whole piece and silo working is avoided. Programme resource has been allocated to the future ways of working activity to ensure a planned and consistent programme of | Helen Gillivan Helen Gillivan | A -Accepted | 31/03/2022 | Low 6 Significar (3) Unlikely (2) |
| | to be diverted and could reduce the overall availability of staff to deliver elements of the making a difference every day activity. | | | activity is delivered. Following the feedback on the staff survey to Directorate management teams in January 2022, the management team will set in place a series of appropriate actions to respond to the gaps identified. A full communications plan has been developed and deployed. Ensuring that staff, partners and the people we support can shape the future of services. Team engagement roadshows are underway, collecting staff feedback to support our messaging and areas of activity as well as via the online form and through live staff events. Regular Making a difference every day bulletins are sent out and information is shared and promoted on the intranet, encouraging staff to get involved and give feedback on upcoming work areas. | ASCH Directorate Manageme nt Team Lisa Clinton | A -Accepted Control | 31/03/2022 | |

| Risk Register - Adul | t Social Care and Health | | | | |
|----------------------|--|---|----------|---------|--|
| | | Fortnightly dependency workshop in place | Paula | Control | |
| | | to help clarify these major | Parker | | |
| | | inter-dependencies and manage shared | | | |
| | | resources; using them efficiently across the | | | |
| | | programme. Individual projects are working | | | |
| | | collaboratively across the programme | | | |
| | | where dependencies are known. | | | |
| | | Joint working with children and young | Helen | Control | |
| | | people teams and growth environment and | Gillivan | | |
| | | transport Directorates to avoid silo working. | | | |
| | | Regular Reporting to Strategic Reset | Helen | Control | |
| | | Programme Board | Gillivan | | |
| Review Comments | Reviewed with Helen Gillivan 01/02/22 10/02/2022 | | | | |