From: Graham Gibbens, Cabinet Member for Adult Social

Care

Anu Singh, Corporate Director of Adult Social Care

and Health

To: Adult Social Care Cabinet Committee – 9 March

2018

Subject: RISK MANAGEMENT - ADULT SOCIAL CARE

Classification: Unrestricted

Past Pathway of Paper: Adult Social Care and Health Core Directorate

Management Team – 21 February 2018

Future Pathway of Paper: None

Electoral Division: All

Summary: This paper presents the strategic risks relating to the Adult Social Care and Health Directorate.

Recommendation(s): The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **COMMENT** on the Directorate Risk Register.

1. Introduction

- 1.1 The draft Directorate Business Plan is reported separately to this Cabinet Committee as part of the Authority's business planning process. The plan includes a high-level section relating to key Directorate risks, which are set out in more detail in this paper.
- 1.2 Risk management is a key element of the Council's Internal Control Framework and the requirement to maintain risk registers ensures that potential risks that may prevent the Authority from achieving its objectives are identified and controlled. The process of developing the register is therefore important in underpinning business planning, performance management and service procedures. Risks outlined in risk registers are taken into account in the development of the Internal Audit programme for the year and findings from Audits can inform the Risk Register.
- 1.3 The Adult Social Care and Health Risk Register is reported to the Cabinet Committee annually. It contains strategic or cross-cutting risks that potentially affect several functions across the Directorate, and often have wider potential interdependencies with other services across the Council and external parties.

1.4 The Directorate's "red risks" are also logged in the Council's Corporate Risk Register.

2. Risks relating to the Adult Social Care and Health Directorate

- 2.1 It continues to be a time of significant risk for the Adult Social Care and Health Directorate. Specific concerns include the on-going financial pressures affecting the Directorate; the fragility of the wider social care market and the need to manage capacity and demand particularly during the winter pressures where health trusts are under pressure which impacts on social care.
- 2.2 The Directorate continues to modernise its services and is currently revising its operating model. Similarly, in mental health services it is intended to revise the way social work services are delivered whilst sustaining effective partnership working. As with any major change programme there are risks associated with the change process itself which need to be managed.
- 2.3 An associated risk for the Directorate is the system replacement project for the change to the Client Information system. This is a major project for the Directorate with its own risks including the need to ensure the system meets business need in a changing operating environment and the need to ensure data is successfully transferred from one system to another.
- 2.4 Another potential risk is the need for commissioning activity to retain close links with the social care assessment and care planning functions in managing and sustaining the wider social care market. The vast majority of social care provision (for example residential care and home care) is commissioned and the social care market needs to be sufficiently sustainable and flexible to meet the individual needs of vulnerable people assessed as requiring care and support.
- 2.5 There have been some concerns at a national level regarding the wider health and social care workforce. A report by the National Audit Office on 9 February 2018 identified high turnover and vacancy rates across the social care sector. The report called for a robust national workforce strategy to address the challenges. Consideration will also need to be given to the possible impact of Brexit on the health and social care sectors. The risk is currently in the Older People/Physical Disability (OPPD) Divisional Risk Register and mitigating controls are in place but may need to be escalated to the Directorate Risk Register.
- 2.6 Some risks by their very nature are on-going notwithstanding the fact that controls and actions are put in place to mitigate the risk. One example is Adult Safeguarding of adults at risk of abuse or neglect. This is a key activity for Adult Social Care but continues to be a significant risk.
- 2.7 The Adult Social Care and Health Risk Register is attached in Appendix 1, however a summary risk profile as at February 2018 is as follows:

Risk No.	Risk Title	Current Risk Rating	Target Risk Rating
AH0001	New operating model for Adult Social Care	20	9
AH0004	Safeguarding – protecting adults at risk of abuse or neglect.	25	15
AH0005	Pressures on public sector funding	25	16
AH0006	Working with health, integration, STP (Sustainability and Transformation Programme) and BCF (Better Care Fund)	16	O
AH0007	Increasing demand for social care services	20	16
AH0008	Managing and working with the social care market	25	9
AH0009	ICT and System Replacement.	16	6
AH0010	Information governance	9	6
AH0011	Business disruption	9	9
AH0012	KCC/KMPT* partnership agreement	9	6
AH0015	Mental Capacity Act and Deprivation of Liberty Assessments	20	8
AH0016	Prevent Duties	12	4
AH0017	Facilities Management	16	4

^{*}Kent and Medway NHS Partnership Trust (KMPT)

3. Risk Scores

- 3.1 A standard reporting format is used to facilitate the gathering of consistent risk information and a 5x5 matrix is used to rank the scale of risk in terms of likelihood of occurrence and impact. Firstly, the current level of risk is assessed, taking into account any controls already in place to mitigate the risk. If the current level of risk is deemed unacceptable, a 'target' risk level is set and further mitigating actions introduced with the aim of reducing the risk to a tolerable and realistic level. If the current level of risk is acceptable, the target risk level will match the current rating.
- 3.2 The numeric score is less significant than its importance in enabling categorisation of risks and prioritisation of any management action. Further information on KCC risk management methodologies can be found in the risk management guide on the 'KNet' intranet site.

4. Managing the Risk Register

4.1 The risk registers should be regarded as 'living' documents to reflect the dynamic nature of risk management. The Directorate Management Team formally reviews the risk registers, including progress against mitigating actions, on a quarterly basis, although individual risks can be identified and added to the register at any time. The Divisional Risk Registers are reviewed at Divisional

Management Teams and any high-level risks are escalated to the Directorate Risk Register.

5. Recommendation

5.1 Recommendation: The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **COMMENT** on the Directorate Risk Register.

6. Background Documents

None

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