

Kent Adult Social Services Directorate
RISK REGISTER 2010-11
DATE: December 2009

I= impact L=likelihood of the event occurring. Inherent rating is a measure of the risk before any controls are applied. Residual is the risk of the event happening after the controls are applied.

	Source	Event	Planned Outcome	Account able manager	Existing controls	New tasks / action plans	Date	Inherent rating	Residual risk
1	Citizen/Social/Economic Ordinary Residence Disproportionate numbers of people in need across the age ranges are being placed by other Local Authorities or have moved into Kent from other parts of the country	Financial impact of recent 'ordinary residence' judgements by Secretary of State, making KCC responsible for the cost of supporting individuals who came from outside Kent. Personal choice and control is at the heart of current Government policy.	Kent can continue to support individuals who want to live independently. Nationally agreed protocol between Local Authorities is put in place to address fairly the issues of funding in these circumstances.	SMT	<ul style="list-style-type: none"> Continuing representation to Government. Robust guidance in place for staff Partnerships with other agencies to plan and determine future demand Continued negotiation with other Local Authorities through such avenues as LGA & ADASS 	<ul style="list-style-type: none"> Influence national position through ADASS / LGA KASS Managing Director is the national lead for the ADASS response to Ordinary residence New policy and case law Discussions with CQC & DH 	Ongoing	I = 5 L = 5 R = 25	I = 5 L = 4 Score = 20 HIGH
2	Economic Financial risks: Recession and public sector funding (see also Risk 3)	<ul style="list-style-type: none"> Lack of certainty about government's intentions on funding from April 2011. Shortfall in funding leading to reduction in services. Longer-term issue of more 	Financial control, delivery of Medium term Plan and maintaining services for vulnerable adults in Kent.	SMT	<ul style="list-style-type: none"> Robust financial and activity monitoring regularly reported to SMT MTP and Business plans in place Good links with Health and others in place to maintain partnerships and plan more effective Strategic Review 	<ul style="list-style-type: none"> Continued drive to deliver efficient and effective services through modernisation agenda. Joint project group with NHS to plan for re- provision of people currently in NHS residential units. 	ongoing	I = 5 L = 5 R = 25	I = 4 L = 5 Score = 20 HIGH

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		<p>self funders needing support as a result of depleted funds (e.g. house sales at depressed prices, or failed investments).</p> <ul style="list-style-type: none"> • Increased demand on services due to recession causing stress, family breakdown etc • Partner organisations also experiencing similar funding challenges putting joint working at risk. (see also risk 6) • Transfer of responsibility of some clients with Learning disability from Health to KASS with uncertainty about amount of continuing funding 			<p>and Modernisation of Learning Disability Services</p> <ul style="list-style-type: none"> • SDS and Modernisation programme ensuring best use of available resources 				

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3	Social /financial Increasing demand in services and demographic changes	Demand outstrips available resources	Through modernisation we are able to offer efficient, effective and value for money services to vulnerable adults who need support.	SMT	<ul style="list-style-type: none"> Robust reporting to SMT Business plans More sophisticated tools – JSNA, MOSAIC etc to support longer term planning. Joint planning and commissioning with partners Contracting and Procurement Controls Modernisation agenda – SDS, KCAS Early intervention and Preventative services aimed at reducing demand-enablement, fast track minor equipment. Strategic Review and Modernisation of older people services 	<ul style="list-style-type: none"> Continue to explore streamlining of processes- FaCE, FAME, single assessments and self assessment Total place project Core monitoring now in place for Members 	ongoing	I = 5 L = 5 R = 25	I = 4 L = 5 Score = 20 HIGH
4	Political/ citizen Loss of Reputation Loss of trust and credibility with service users, members, partners and staff.	Increased internal and external scrutiny. More regulatory involvement leading to shift of resources to meet regulator's requirements.	Maintain quality of services.	SMT	<ul style="list-style-type: none"> Existing internal performance management processes/controls to monitor progress against national performance Regular business meetings with 	<ul style="list-style-type: none"> Action plan monitored regularly by SMT Safeguarding sub-group in place to take forward recommendations from action plan Carers action plan 	Dec 2010	I = 5 L = 5 R = 25	I = 4 L = 5 Score = 20 HIGH

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		Less likely to attract external funding-reducing resources.			Inspectorate <ul style="list-style-type: none"> Regular briefings to Chief officers and cabinet member Implementation of CQC Action Plan External judgement through 2009 Annual Review assessed Kent as performing well. 	in place <ul style="list-style-type: none"> Robust preparation for 2010 annual review. 			
5	Political/Social/financial/professional Health Service Economy	Risk to Social Services and investment in community based preventative services as a result of challenges in the Health Economy.	Continued joint working delivering more effective, efficient and seamless services that improve outcomes for individuals	SMT	<ul style="list-style-type: none"> Engagement of Members through Cabinet, Overview Committees, Local Boards. Lead arrangements with PCTs. Effective joint initiatives in place eg telecare, POPPS Kent Health Watch Partnership working with PCTs which is leading to shared improvements and efficiencies Joint Strategic Needs Assessments in place Formal joint agreements in place Robust Debt Monitoring Lobbying of Government 	<ul style="list-style-type: none"> Appointment of shared commissioning post in both areas. CQC are the shared regulator with NHS Review of all formal joint agreements 	ongoing	I = 5 L = 5 R = 25	I = 4 L = 5 Score = 20 HIGH

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6	Human resources Workforce: impact of restructuring Failure to recruit, retain and develop the social care workforce necessary to deliver the modernisation agenda.	Reduction in quality of services due to: <ul style="list-style-type: none"> • Period of uncertainty following reorganisation leading to greater turnover of staff. • Reduction of 32 management posts could create gaps in leadership and decision making at the right levels to embed the modernisation agenda. • Ageing workforce and limited succession planning leads to loss of experienced staff and gaps at key positions in the Directorate. 	Workforce planning in place to ensure that we have motivated workforce equipped with the right skills and experience to flexibly meet challenge of delivering Active Lives.	SMT	<ul style="list-style-type: none"> • Robust line management processes with Heads of Service posts in place to lead teams. Robust area and locality management. • Full programme of training and support available to staff relating to reorganisation and modernisation. • Training4Care Contract • Regular meetings between SMT and Union 	<ul style="list-style-type: none"> • Social Care Workforce strategy group now in place chaired by Managing Director • SMT considerations on succession planning • Establishment of Kent and Medway Care Alliance 	ongoing	I = 5 L = 5 R = 25	I = 5 L = 4 Score = 20 HIGH
7	Political/social /citizen Market place	KASS commissions about 85% of services from outside the Directorate. Many of them from the Private and Voluntary Sector. Although this offers efficiencies and	Supporting the development of a range of services- the “Market place”- so that there is variety and flexibility so that individuals can	SMT	<ul style="list-style-type: none"> • A strong Contracting / Procurement Arm which ensures KCC gets value for money – whilst maintaining productive relationships with providers. 	<ul style="list-style-type: none"> • Positive Risk Management Policy • Reviewing relationships with Voluntary organisations • Brokerage Pilot • Working with the Market to prepare 	ongoing	I = 5 L = 5 R = 25	I = 5 L = 4 Score = 20 HIGH

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		value for money it does mean the Directorate needs the market to be buoyant to achieve best value and to give service users real choice and control.	choose their own support		<ul style="list-style-type: none"> Regular market mapping and price increase pressure tracking. Drive to help providers reduce direct costs via access to Commercial Services purchases and other initiatives. Procurement and Contracting Controls. Strong Commissioning Strategies in partnership with key agencies (Health) subsidised training under the Training4Care contract 	<ul style="list-style-type: none"> for the increase in personalisation Ensuring market is able to offer Choice in the new market conditions opened up by personalization Social Care Workforce Strategy 			
8	Citizen/ Social/Financial/Professional Personalisation: Implementation of personal budgets and self directed support. Control is transferred to the individual who decides what form	Personalisation necessitates more risk taking as more control & choice is passed to the individual Risk of misuse of public funds, money not being spent on services and vulnerable service users not receiving support	Individuals have real choice and control over their services and enjoy better personal outcomes. KCC is able to protect public funds and service users and ensure vulnerable users	SMT	<ul style="list-style-type: none"> Regular financial monitoring in place Audit reports-irregular happenings Regular reviews with service users Self Directed Support project and action plan in place Safeguarding Board Extensive training to staff PDRB ensures lessons are learned 	<ul style="list-style-type: none"> Implementation of Positive Risk Policy Continued focus on Safeguarding arrangements Staff training and awareness Strengthen links with audit Regular monitoring to SMT highlighting this issue Improved financial risk matrix for 	ongoing	I = 5 L = 5 R = 25	I = 4 L = 4 Score = 16 HIGH

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	their support will take, when it will take place and who will provide that support. This means much less reliance on standardised block contracts.		are not open to financial abuse		and good practice agreed and disseminated <ul style="list-style-type: none"> Positive Risk Management Policy in place Member and senior management support for personalisation 	<ul style="list-style-type: none"> Reshaping of Complaints procedures to enable a statutory complaint to be made if using a personalised budget. This is shortly to come into place following lobbying from KCC and other Local Authorities 			
9	Professional/citizen Emergency and continuity planning	Impact of emergency on service users and KASS' ability to maintain services following a disaster.	Systems in place to offset event and / or mitigate impacts of an emergency and maintain core business. KASS able to support corporate colleagues in response to an emergency.	SMT	<ul style="list-style-type: none"> Continuity Plans for all units. Good partnership working arrangements at all levels. Crisis / Emergency training. Dedicated Emergency Planning officer within Directorate 	<ul style="list-style-type: none"> Working group set up to explore the plan for pandemic flu impacts in greater depth Updated emergency plan in place.(Oct 2009) Negotiate with contact centre about having emergency report and using the online Kent Directory to alert providers 		I = 5 L = 4 Score = 20 HIGH	I = 4 L = 4 Score = 16 HIGH
10	Professional/Social Safeguarding-protecting vulnerable adults	<ul style="list-style-type: none"> Potential for vulnerable adults to be at risk of harm Managing Director fails in his statutory 	Vulnerable adults have a level of protection without stifling independence.	SMT	<ul style="list-style-type: none"> Safeguarding Board- Multi-Agency Public Protection Arrangements Advocacy Complaints process /Kent Health Watch 	<ul style="list-style-type: none"> CQC action plan Safeguarding Subgroup in place supporting Action Plan 		I = 5 L = 4 Score = 20 HIGH	I = 4 L = 4 Score = 16 HIGH

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		responsibility to promote welfare of all adults, including safeguarding them and keeping them from harm.			<ul style="list-style-type: none"> • Mental Capacity Act Arrangements • Positive Risk Management Policy • Implementing of safeguarding stream for independence in place • Extensive staff training 				
11	Technological Information Technology	Complete overhaul of our IT systems leads to network failure and incorrect or untimely data collection affecting performance.	Robust system with high reliance on quality of data Capacity for further development to meet future needs	SMT	<ul style="list-style-type: none"> • SMT monitoring closely and have taken on the role of programme board. • Major implementation programme. Involving front line staff / managers etc. • Steering Group. • Prince 2 Project methodology. • Experienced project team focusing solely on the renewal project. • Working closely with other SWIFT user Councils – e.g. Hampshire, Essex. 	<ul style="list-style-type: none"> • Encryption for individuals • Information sharing protocols for sharing outside of KASS • Meetings with staff to determine reporting requirements 		I = 5 L = 4 Score = 20 HIGH	I = 4 L = 4 Score = 16 HIGH