



**REPORT TO: PERFORMANCE AND AUDIT COMMITTEE – 12 FEBRUARY 2019**  
**REPORT ON: RISK MANAGEMENT ACTION PLAN**  
**REPORT BY: CHIEF FINANCE OFFICER**  
**REPORT NO: PAC8-2019**

**1.0 PURPOSE OF REPORT**

To seek approval from the Performance and Audit Committee to implement the Risk Management Action Plan which has been developed in response to the outcome of the Internal Audit assessment of the Risk Maturity of the IJB.

**2.0 RECOMMENDATIONS**

It is recommended that the Performance and Audit Committee (PAC):

- 2.1 Approves the Action Plan at Appendix 1 in response to the Internal Audit Assessment of the Risk Maturity of the IJB that was presented to the PAC on 25 September 2018 (Article IX of the minute of the PAC held on 25 September 2018 refers).
- 2.2 Instruct the Chief Finance Officer to provide an update on the Action Plan in September 2019.

**3.0 FINANCIAL IMPLICATIONS**

None.

**4.0 MAIN TEXT**

- 4.1 The PAC received the Risk Management Internal Audit Report on 25 September 2018 (Article IX of the minute of the PAC held on 25 September 2018 refers). The Chief Internal Auditor commended the IJB for the progress made, however a number of recommendations for improvement were made.
- 4.2 An action plan has been created in response to these improvements and is attached at Appendix 1 for approval.

**5.0 POLICY IMPLICATIONS**

This report has been screened for any policy implications in respect of Equality Impact Assessment. There are no major issues.

**6.0 RISK ASSESSMENT**

This report has not been subject to a risk assessment as it relates to the development of an action plan in line with the findings of the Annual Internal Audit Report.

**7.0 CONSULTATIONS**

The Chief Officer and the Clerk were consulted in the preparation of this report.

**8.0 BACKGROUND PAPERS**

None.

Dave Berry  
Chief Finance Officer

DATE: 4 February 2019

**Appendix 1**

<b>Audit Recommendations</b>	<b>Actions Proposed</b>	<b>Responsible Officer</b>	<b>Timescales</b>
<b>Update and Review Risk Management Strategies</b>			
Work be undertaken by the Council, NHS and DHSCP Partnership to ensure that Risk Management Strategies are updated within a common set of agreed Risk Management principles to ensure consistency and congruence.	Tayside wide meetings proposed between NHS Tayside, IJBs and Local Authorities to discuss and agree on common set of principles and procedures that work across multiple systems	Risk Managers in DCC and NHS Tayside	June 2019
Include a Governance, Roles and Responsibilities section in the DHSCP Risk Management Strategies to include the IJB to consider the Risk Register bi-annually	Update the Risk Management Strategy to include timescales for presenting the risk register to the IJB bi-annually in April and November.	Senior Officer (Business Planning and Information Governance) DHSCP	June 2019
Reflect the role of the Performance and Audit Committee to review the overall system of risk management	Update the Risk Management Strategy to include the role of the Performance and Audit Committee to review the overall system of risk management	Chief Finance Officer and Senior Officer (Business Planning and Information Governance), DHSCP	June 2019
Enhance the section in relation to the role of the Senior Management team in reviewing risks and considering current scores, controls and tolerance. To include an escalation process of risks to the IJB strategic risk register and to parent bodies. To also make reference to the role of the groups below the Senior Management Team	Work to be undertaken to ensure that the Risk Management Strategies reflect the escalation process across the DHSCP and parent bodies.	Chief Finance Officer and Senior Officer (Business Planning and Information Governance), DHSCP	June 2019
Include an appropriate mechanism for formal escalation of risks to parent bodies and vice versa	To be agreed as part of the Tayside wide meeting	Risk Managers in DCC and NHS Tayside	April 2019

**Appendix 1**

<b>Audit Recommendations</b>	<b>Actions Proposed</b>	<b>Responsible Officer</b>	<b>Timescales</b>
<b>Update and Review Risk Management Strategies</b>			
Agreement of parent bodies of Risk Registers to prevent duplication of or recording of similar risks	Risk is recorded on Datix and Pentanta.  Work to be undertaken to agree on appropriate place for recording risk and monitoring of risk registers. To be agreed as part of the Tayside wide meeting	Risk Managers in DCC and NHS Tayside	June 2019
As systems develop, creation of operational procedures and policies to provide guidance to managers	Create operational procedures and policies	Senior Officer (Business Planning and Information Governance) DHSCP	December 2019
Include a judgement of the adequacy and effectiveness of Risk management arrangements	Involve a recognised methodology to form the basis for judging the adequacy and effectiveness of the risk management arrangements.	Risk Managers in DCC and NHS Tayside	June 2019
Prioritisation of the Partnership Risk management system	Support agreed from Risk Managers in DCC and NHS Tayside to support the DHSCP in the embedding of a consistent risk management strategy that supports the needs of Senior Management team and Operational managers to manage risk within their service areas	Risk Managers in DCC and NHS Tayside Chief Finance Officer, DHSCP Head of Service, Health and Community Care, DHSCP	June 2019 and ongoing
Horizon Scanning	Annual event to be held to look at the risks to the delivery of the strategic plan, informed by the Risk Register of the Council and NHS  In addition work is underway to develop a Resilience Group for operational services which will bring together Emergency Planning, Business Continuity and Risk Management within the remit of one specific group. This will ensure that emergent issues will be captured across all areas. This will enable them to be prioritised and mitigating factors identified.	Senior Officer (Business Planning and Information Governance) DHSCP, Chief Finance Officer, DHSCP, Head of Service, Health and Community Care, DHSCP	December 2019

<b>Risk Management System</b>			
Include information on assurances in place over the controls mitigating each risk, and timescales.	<p>The Pentana Risk section has a control section that allows the control to be scored. All individual high level and operational risks recorded on Pentana will be updated and scored in the control section.</p> <p>The risk template section and associated guidance will be updated to include a scored control section</p>	Senior Officer (Business Planning and Information Governance) DHSCP	April 2019
Explicitly link objectives, risks, controls/actions and assurances/performance reporting within the IJB governance structure	<p>The Pentana system allows for links to be made between risks, performance indicators and actions.</p> <p>Following the review of the Strategic and Commissioning Plan work will be undertaken to link the identified risks with the appropriate actions and performance indicators.</p>	Senior Officer (Business Planning and Information Governance) DHSCP	September 2019
Establish the regular review of the Risks registers and frequency of high scoring risks	Development of Locality Risk Registers and escalation processes.	Risk Managers in DCC and NHS Tayside	June 2019
Reporting from Risk Register on Pentana	These will be produced regularly from Pentana, once it is adequately populated with risks / controls / assessments	Senior Officer (Business Planning and Information Governance) DHSCP	September 2019

