

## Adults & Communities Risk Register – March 2020

		Impact				
		1 Insignificant	2 Minor	3 Moderate	4 Major	5 Significant
Likelihood	5 Certain				AC.12, AC.20, AC.34	AC.22, AC.23
	4 Likely		AC.06	AC.04, AC.05	AC.01, AC.21, AC.30	
	3 Possible		AC.18	AC.03, AC.26, AC.27, AC.33	AC.02, AC.08, AC.13, AC.19	AC.24, AC.29, AC.31
	2 Unlikely		AC.10, AC.17	AC.14	AC.07, AC.28	
	1 Rare					

Ref	Risk Description	Corporate Risk
AC.01	<b>Market workforce economy</b> <b>IF:</b> the current limited capacity within the social care workforce continues <b>THEN:</b> will there will be an impact on availability of services - this is particularly true of Registered Managers and Nurses	Yes (CRR.02)
AC.02	<b>Deprivation of Liberty</b> <b>IF:</b> The authority does not meet the statutory requirements for Deprivation of Liberty Safeguards and individuals are unlawfully deprived of their liberty <b>THEN:</b> The authority faces a risk of being taken to the Court of protection, increasing the risk of Costs and Financial penalties for the Local Authority	Yes (CRR.07)
AC.03	<b>Demographic Pressures</b> <b>IF:</b> due to increasing financial and demographic pressures, the council is unable to meet it's statutory obligations and assess clients in a timely manner and annually review all long-term packages of care <b>THEN:</b> clients might not receive the timely interventions required and we might miss the opportunity to maximise independence	Yes (CRR.17)
AC.04	<b>Market viability</b> <b>IF:</b> Provider services fail, <b>THEN:</b> we will need to manage the transfer of a (large) number of service users in very short timescales, in an already difficult market, with limited capacity.	
AC.05	<b>Supported Housing for Care leavers with complex needs.</b> If the accommodation and support options are not increased, with improved quality and pricing, <b>Then;</b> young people will continue to become homeless, at risk and vulnerable to exploitation and the council will continue to pay too much for support placements with inconsistent outcomes for individuals	
AC.06	<b>Staffing &amp; Recruitment</b> <b>IF:</b> we are unable to recruit to crucial roles <b>THEN</b> there will be a risk to our services	
AC.07	<b>Contract &amp; Quality Management Capacity</b> <b>IF:</b> we have limited capacity in both contracts management and quality assurance teams, <b>THEN</b> there is a risk on pro-actively engaging with commissioned providers and focus is on providers subject to concerns	

AC.08	<b>Use of Temporary Accommodation</b> <b>IF:</b> the constraints on the supply of temporary accommodation continues at the same rate <b>THEN</b> this may mean that we are unable to meet our statutory duties under the Housing Act 1986 and Homelessness Reduction Act 2017	
AC.09	<b>Market Capacity</b> <b>IF:</b> providers withdraw or fail due to increased costs, reduced packages due to reablement through Home First, changes to CQC inspections and increase in quality concerns <b>THEN:</b> package costs are likely to increase for our clients and there will be further pressure on capacity in the market	
AC.10	<b>Nursing Capacity</b> <b>IF:</b> the current trends of difficulty in placing in nursing beds due to increased complexity continue <b>THEN</b> there will be a further increase in the spend in this area in order to make placements	
AC.11	<b>NHS Re-organisation</b> <b>IF:</b> there is a major NHS re-organisation <b>THEN</b> this might hinder effective joint working with social care	
AC.12	<b>Care Home Ratings</b> <b>IF:</b> the increasing trend of care homes with reduced ratings by CQC (to either Inadequate or RI) <b>THEN</b> placing people will be more challenging and these homes will require additional support from our staff	
AC.13	<b>Continuing budget pressures and future of ASC funding</b> <b>IF:</b> There continues to be uncertainty around the future and sustainability of adult social care funding, <b>THEN</b> the risk of not meeting statutory functions increases as does the risk of failure within the reliant social care economy in the county, such as care homes. In addition, the opportunity to re-model the way we provide services is limited	
AC.14	<b>SHYPP:</b> <b>IF:</b> The service improvements agreed and managed through the joint project with WM Housing and C&F do not address concerns about referrals, quality and property condition, <b>THEN</b> the SHYPP service will fail, leaving questions about demand among care leavers and delivery models, along with reputational risk.	
AC.15	<b>ICES: IF</b> prescriber engagement and budget mitigation measures do not continue to be effective and also when the re-procurement of ICES is launched <b>THEN</b> there could be a significant overspend of the budget of £1.5m (council share of £525k) and/or also there is significant risk of procurement challenge and associated litigation.	
AC.16	<b>Talk Community Hubs IF</b> there are delays in identifying and mobilising talk community hubs <b>THEN</b> strategic priorities for communities will be disrupted and there would be reputational harm to the Council	
AC.17	<b>Blue Badge: IF</b> the appropriate resources and processes are not in place to support implementation of the revised national scheme <b>THEN</b> Council would face delays to applications and an increased complaints and appeals	
AC.18	<b>Suicide Prevention Strategy IF</b> the new strategy does not seem to be associated with a reduction in local suicides <b>THEN</b> the council and its partners may be challenged by the public and by the media as failing in their objectives	
AC.19	<b>Integrated Sexual Health Service</b> The appointment of the new provider - Solutions for Health - as a non NHS provider and new to sexual health services has created a tremendous amount of interest and challenge from professional bodies. <b>IF</b> this challenge continues <b>THEN</b> it has a potential to	

	discredit the service and cause poor press which is a risk service performance.	
AC.20	<b>Community Hospital</b> IF the proposed redesign of community hospitals leads to beds reductions or closures <b>THEN</b> this could impact the Local Authority financially and on assessment and care capacity.	
AC.21	<b>Better Care Fund</b> the 19/20 guidance was issued in July 2019 which is significantly late for budget planning. Therefore the LA is spending BCF money without formal approval. IF the plan is not approved <b>THEN</b> the BCF Funding could be at risk to the LA	
AC.22	<b>Access to Health funding (CHC and joint funding)</b> Herefordshire remains in the bottom quartile of cases fully funded meeting CHC eligibility. IF CCG continue to not accept that there are any process or decision making irregularities influencing this trend <b>THEN</b> it remains the fact that ASC are funding above other Local Authorities per 1000 population. Meaning ultimately Herefordshire citizens and the Local Authority potentially are funding Healthcare which should be free to the individual at the point of delivery. Currently the CCG is disputing the Local Authority peer challenge feedback.	
AC.23	<b>Herefordshire and Worcestershire CCG merger.</b> Herefordshire and Worcestershire CCGs are expected to merge from April 2020. Primarily for back office functions only. However, IF services and budgets are merged with Worcestershire <b>THEN</b> the Herefordshire place provision could reduce, key decisions could be made from Worcester which could have a direct impact on Herefordshire population, Local Authority and services provided.	
AC.24	<b>Continuation of the PHRFG</b> IF the ring fence is removed from the grant or the grant is reduced <b>THEN</b> this will threaten the delivery of funded services and the ability of the Council to improve Health & Wellbeing	
AC.25	<b>No Deal Brexit</b> IF there is a no deal Brexit <b>THEN</b> there is a potential threat to medication supplies for commissioned services and staff, food security and fuel as a result. In addition potential impact on staff time in needing to respond to emerging issues	
AC.26	<b>Rising cost of buprenorphine</b> IF the cost of buprenorphine continues to rise <b>THEN</b> this will impact on Addaction's prescribing budget.	
AC.27	<b>NHS Health checks</b> There are performance concerns and concerns about targeting invites. IF these are not resolved <b>THEN</b> there is the potential of high risk individuals not accessing prevention and support at an early stage to reduce or resolve potential long term health issues	
AC.28	<b>Annual Fee Setting:</b> IF we fail to set sustainable transparent and appropriate fees for providers <b>THEN</b> this could lead to challenge and potentially judicial reviews or market failure	
AC.29	<b>Care4IT</b> IF the system fails to function in the expected electronic form <b>THEN</b> the service may need to revert to paper based scheduling which can lead to the potential for human error	
AC.30	<b>Discretionary Housing Payment</b> If the council continues to underspend Discretionary Housing Payment (DHP) by more than 30% annually, <u>then</u> ; housing solutions for the most vulnerable people (homeless, care leavers etc) will continue to be limited, pressure on council budgets will increase whilst government grant reduces <b>and</b> scrutiny will increase on the council's homelessness performance and use of resources.	
AC.31	<b>Social housing providers:</b> If social housing providers continue to be uncertain about whether supported housing schemes will attract housing	

	benefit funding <b>then</b> ; some stockholding providers will withdraw from existing or proposed new schemes <b>and</b> some providers will decline to bid for procurements of supported housing, <b>leading to</b> loss of accommodation and services to care leavers, ex-offenders and disabled people, <b>and</b> reputational, financial and regulatory damage to the council.	
AC.32	<b>Care Home sales:</b> IF there is an Increase number of care homes up for sale due to retirement of ageing local providers. <b>THEN</b> Due to size and other pressures such as workforce within the sector selling as a care home could be very problematic and therefore bed capacity could reduce over the coming year.	
AC.33	<b>Citizen Young People restructure</b> - IF the recruitment process currently underway fails then the reduced staff team will continue to offer core support within the foyers for an extended period of time from 6th January 2020 to beyond early February 2020.	