

Renfrewshire Integration Joint Board

Renfrewshire  
Health and Social Care Partnership

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**Risk Management Policy and Strategy**

**Version 3: March 2021**

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# Policy – the risk management approach

## The IJB vision for risk management

Appropriate and effective risk management practice will be embraced throughout the Integration Joint Board as an enabler of success, whether delivering better outcomes for the people of Renfrewshire, protecting the health, safety and well-being of everyone who engages with the IJB or for maximising opportunity, delivering innovation and best value, and increasing performance.

- 1.1 The Integration Joint Board (IJB), through the following risk management strategy and policy, has established a Risk Management Framework, (which covers risk policy, procedures, process, systems, risk management roles and responsibilities). This framework seeks to deliver the IJB vision for risk management, set out above.
- 1.2 Renfrewshire IJB is committed to a culture where its workforce is encouraged to develop new initiatives, improve performance, and achieve goals safely, effectively and efficiently by appropriate application of good risk management practice.
- 1.3 In doing so, the IJB aims to provide safe and effective care and treatment for patients and clients. This includes the provision of a safe environment for everyone working within the Health and Social Care Partnership and others who interact with the services delivered under the direction of the IJB.
- 1.4 The services provided under the IJB's direction through Renfrewshire HSCP are delivered in a highly complex governance environment. This includes the necessity for the HSCP to embed and contribute to the risk governance arrangements set out by NHS Greater Glasgow and Clyde (NHS GGC) and Renfrewshire Council, as partner organisations, in addition to the IJB's own approach. Each partner organisation has its own, separate, risk governance approaches and differing levels of risk tolerance. Consequently, it is essential that these linkages and dependencies are robustly managed and that the IJB's risk framework appropriately blends aspects of these arrangements as it is appropriate to do so.
- 1.5 Recognising this complexity, the IJB believes that appropriate and proactive application of good risk management is essential in enabling the early identification, management and monitoring of risks which impact on the way in which integrated services are delivered and funded. In doing so, risk management will help to prevent or help to mitigate the effects of loss or harm and will increase success in the delivery of better clinical and financial outcomes, objectives, achievement of targets and fewer unexpected problems.
- 1.6 Taking this into consideration, the key benefits of effective risk management can include:
  - Appropriate, defensible, timeous and best value decisions are made.
  - Risk 'aware' not 'risk averse' decisions are based on a balanced appraisal of risk and enable acceptance of certain risks to reach a particular goal or reward.
  - More robust planning processes based on consideration of known and potential threats and opportunities.
  - Enhanced achievement of objectives and targets (through the reduction in the likelihood of risks becoming and issues and their resultant impact).
  - Higher levels of morale and productivity (by addressing those risks which impede effective service delivery and impact on staff experience)
  - Better use and prioritisation of resources.

- Higher levels of user experience and satisfaction with a consequent reduction in adverse incidents, claims and/or litigation (through the mitigation of events which could impact on the quality of service provision).
- The maintenance and strengthening of a positive reputation for the IJB.
- Strategic and operational risks are managed at the appropriate level within the IJB as part of a coherent approach to overseeing all strands of risk management activity (including operational, project-based and strategic risks).
- The effective management of risk-related dependencies and linkages with the IJB's partner organisations, NHS GGC and Renfrewshire Council.

1.6. The IJB purposely seeks to promote an environment that is risk 'aware' and strives to place risk management information at the heart of key decisions. This means that the IJB can take an effective approach to managing risk in a way that both addresses significant challenges and enables positive outcomes. This approach considers how risks will be responded to, enabling flexibility dependent on the nature of the risk to (i) **avoid or terminate** a risk by changing strategies or plans; (ii) **treat** the risk by taking action to reduce it; (iii) **transfer** the risk to a partner or third party; or (iv) **accept** the risk.

1.7. Risks are assessed on the basis of the likelihood that they will occur, and the expected scale of impact they would have should they materialise. This assessment is shown in the diagram below.

Likelihood	Consequent Impact				
	1	2	3	4	5
5	5	10	15	20	25
4	4	8	12	16	20
3	3	6	9	12	15
2	2	4	6	8	10
1	1	2	3	4	5

1.8. In normal circumstances, the IJB's tolerance for risk is as follows:

- Any low risk is acceptable without any further action to prevent or mitigate the risk
- Any moderate risk is tolerable, and any control measures implemented or introduced to mitigate the must be cost effective
- Any high risk may be tolerable, providing the IJB is assured of the adequacy and effectiveness regarding the control measures in place to mitigate the risk. Any further control measures implemented must be cost effective in relation to the high risk

- Any very high risk is deemed unacceptable and measures should be taken to avoid/terminate, transfer or mitigate a very high risk to a more tolerable position.

- 1.9. A combination of factors may converge to produce a very high risk for which the IJB may have limited control (such as demographic change and financial pressures). Recognising this scenario and taking on board the inherent risk experienced in some service areas, the IJB recognises that it has the capacity to deal with some very high risks. The number of very high risks that the IJB wishes to tolerate may change over time, either increasing or reducing. This will depend on the IJB's ongoing assessment of identified risks.
- 1.10. However, experience throughout the COVID pandemic has shown that in exceptional circumstances or periods of crisis it is necessary to flex the above approach for risk management and for the IJB to increase its risk tolerance to manage a range of very high risks over a period of time. Any such requirements will be supported by the implementation of additional risk management processes to increase the regularity and nature of reporting received by the IJB. These additional processes will reflect and link with any further governance implemented by the IJB's partner organisations.
- 1.11. In addition to the management of risk set out above, the IJB also promotes the pursuit of opportunities that will benefit delivery of the Strategic Plan and associated Financial Plans. Opportunity-related risk must be carefully evaluated in the context of the anticipated benefits for patients, clients, staff and the IJB.
- 1.12. The responsibility for monitoring risk management arrangements for the IJB are within the remit of the IJB Audit, Risk and Scrutiny Committee. The Committee will receive assurance reports not only on the adequacy but also the effectiveness of its risk management arrangements and will consequently value the contribution that risk management makes to the wider governance arrangements of the IJB. As part of these monitoring arrangements, updates on identified risks and mitigating actions will be brought to the Committee and the full IJB on an agreed basis. This approach is set out in the Risk Management Strategy below.
- 1.13. The IJB, through the following risk management strategy, has established a Risk Management Framework (which covers risk policy, procedure, systems, risk management roles and responsibilities). This framework seeks to provide a robust approach for managing the complex risk environment in which the IJB operates (as set out above).
- 1.14. At the time of developing this updated framework, March 2021, the COVID-19 pandemic continues to impact on communities and services across Scotland and globally. The IJB will seek to move into recovery from and renewal after the pandemic at an appropriate point. Therefore, this framework is also intended to provide flexibility, and the approach to managing risk will be reviewed regularly to ensure that it supports agreed recovery and renewal activity.

# Risk Management Strategy

## 1. Introduction

1.1. The primary objectives of this updated strategy will be to:

- Continue to promote awareness of risk and define responsibility for managing risk within the IJB.
- Maintain communication and sharing of risk information through all areas of the IJB.
- Ensure measures continue to be taken to reduce the IJB's exposure to risk.
- Ensure mechanisms are in place for participation and engagement in partner organisations risk governance structure and the effective joint management of risk where this is appropriate.
- Continue to ensure standards and principles for the efficient management of risk, including regular monitoring, reporting and review are in place and continually developed as necessary to ensure good practice.
- Enable a proactive and flexible approach to managing risk, depending on prevailing circumstances and reflecting the need to manage risks emerging from a range of sources, including but not limited to project activity, operational service delivery and through joint activity with partners.

1.2. This strategy takes a positive and holistic approach to risk management. The scope applies to all risks, whether relating to the clinical and care environment, employee safety and wellbeing, business risk, opportunities or threats.

1.3. This document represents the risk management framework to be implemented across the IJB and contributes to the IJB's wider governance arrangements.

## 2. Realising the risk management vision and measuring its success

2.1. The vision for risk management is set out above in the Risk Management Policy. In working towards this vision, the IJB aims to demonstrate a level of maturity where risk management is embedded and integrated in the decision making and operations of the IJB.

2.2. The measures of success for this vision will be:

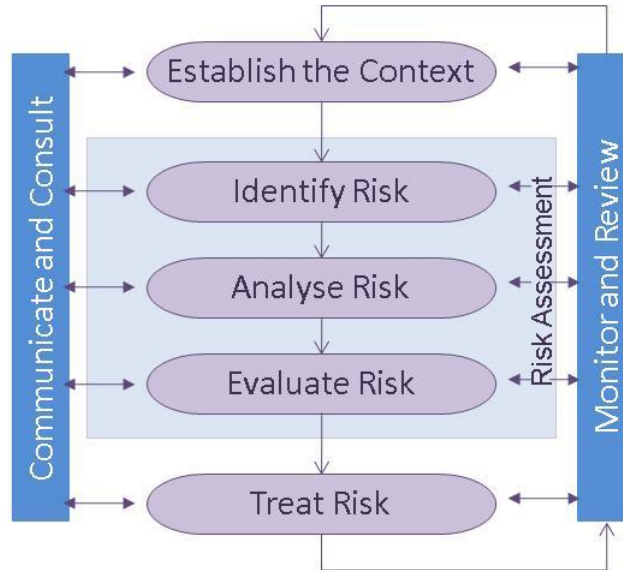
- Good financial outcomes for the IJB
- Successful delivery of the objectives within the strategic plan
- Positive feedback arising from external scrutiny processes
- Fewer unexpected or unanticipated problems
- Fewer incidents, accidents or complaints
- Fewer claims or less litigation

## 3. The risk management process

3.1. Risk Management is about the culture, processes and structures that are directed towards realising potential opportunities whilst also proactively identifying and managing adverse effects. It is proactive in understanding risk and uncertainty; it learns and builds upon

existing good practice and is a continually evolving process that has an important role in ensuring that defensible and beneficial decisions are made.

- 3.2. The IJB embeds risk management practice through consistent application of the risk management process shown in the diagram below, across all areas of service delivery and business activities. This process aligns with industry standards.



#### 4. Applying the risk management process effectively across IJB activities

- 4.1. The application of the IJB's risk management processes is based on standard procedures, implemented across all areas of activity under the direction of the IJB to achieve consistent and effective implementation of good risk management. Full application of the process will ensure that risk management information is used to guide major decisions where possible in the same way that cost benefit analysis is used.

- 4.2. The standard procedures are as follows:

4.2.1. Risks are identified using standard methodologies and involving subject experts who have knowledge and experience of the activity or process under consideration. This will be supported through the implementation of mechanisms for managing risks which arise through different avenues (for example through change projects or through operational delivery). These mechanisms are set out in Section 5, Risk Leadership and Accountability.

- 4.2.2. Risks are categorised under agreed and consistent headings:

- **IJB / Strategic Risks:** these are risks which represent the potential for the IJB to achieve (opportunity) or fail to achieve (threat) either financial sustainability or its desired outcomes and objectives as set out within the Strategic Plan. The nature of these risks will typically require strategic leadership in the development and application of activities and controls to manage the risk. This includes risks such as those that may arise from Political, Economic, Social, Technological, Legislative and Environmental factors. At the time of writing, such risks include:
  - Financial sustainability.

- The impact of the COVID-19 pandemic.
- The UK's Exit from the European Union.
- The impact of current and future legislation, such as that which could arise from the independent review of Adult Social Care.
- **Operational / Partnership Risks:** these are risks which represent the potential for impact (opportunity or threat) within or arising from the activities of an individual service area or team operating within the scope of the IJB's activities. The HSCP, along with partner bodies, will retain responsibility for managing operational risks as these are more 'front-line' in nature and controls and actions in response will typically be led by local managers and team leaders. However, where operational risks impact across multiple service areas or require more strategic leadership, then these can be proposed through risk governance processes to be escalated to the IJB risk register. This includes risks that may arise from or impact on:
  - Clinical Care and Treatment and Social Care and Treatment.
  - Patient and service user experience.
  - Employee Health, Safety & Well-being.
  - Workforce planning.
  - Business Continuity.
  - Supply Chain.
  - Information Management, Security and Governance and Asset Management.
  - Property and Accommodation.
  - Project-based change activity.

4.2.3. Risks have clear and appropriate ownership in place. Specific risks will be owned by / assigned to whoever is best placed to manage the risk and oversee the development and implementation of any new risk controls required. These individuals will be responsible for developing necessary mitigation plans and for reporting on the progress made in managing specific risks.

4.2.4. Risks are managed through consistent application of a standard risk matrix (referenced in 1.7 in the Risk Policy). This matrix will be used to analyse risks in terms of likelihood of occurrence and potential impact at the point they are identified and at regular future intervals, considering the effectiveness of risk control measures in place. All risks will be assessed consistently using a scoring system of 1 to 5, enabling risks to be assessed as low, moderate, high, or very high.

4.2.5. Risk responses are proportionate to the assessed level of risk. This means that risks may be terminated; transferred to another partner or third party (examples of this typically include holding relevant insurance, or transferring responsibility to an external provider through existing or additional contractual arrangements or other

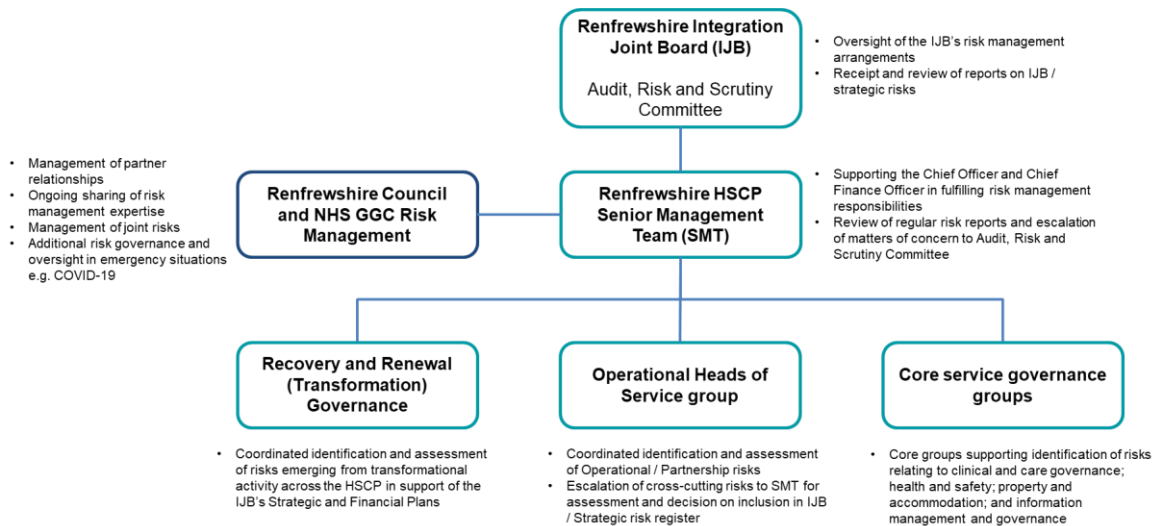


agreements); tolerated as it is; or treated with cost effective measures to bring it to a level where it is acceptable or tolerable for the IJB in keeping with its appetite/ tolerance for risk. In the case of opportunities, the IJB may 'take' an informed risk in terms of tolerating it if the opportunity is judged to be (i) worthwhile pursuing and (ii) the IJB is confident in its ability to achieve the benefits and manage/ contain the associated risk.

- 4.2.6. Risk registers are maintained as a means of collating risk information in a consistent format allowing comparison of risk evaluations, informed decision-making in relation to prioritising resources and ease of access to information for risk reporting. An updated IJB risk register template is provided in Appendix 1.
- 4.2.7. IJB / strategic risks and key operational risks are reported to the IJB on a six-monthly basis (at the beginning of the financial year and a mid-year update).
- 4.2.8. Clear procedures are in place for movement of risk between IJB / strategic and operational / partnership risk registers, facilitated by the Senior Management Team.
- 4.2.9. Clear procedures are in place for the participation and involvement of officers, where appropriate, in the risk planning and governance structures in place within NHS Greater Glasgow and Clyde and Renfrewshire Council.
- 4.2.10. Risk information is routinely reported within and across teams and a commitment to a 'lessons learned' culture is maintained, ensuring organisational learning from both good and poor experience in order to replicate good practice and reduce adverse events and associated complaints and claims.
- 4.2.11. In the event of exceptional circumstances which may increase the range and number of very high risks observed, due to a factor or several factors outwith the IJB's control (such as the COVID-19 pandemic), additional procedures will be put in place to ensure that the IJB has effective oversight of emerging risks. These additional procedures will be agreed between the Chief Officer, IJB Chair, Vice Chair and Chair of the Audit Risk and Scrutiny Committee and will determine the content and frequency of additional risk reporting as is deemed necessary as part of an effective response to the circumstances arising.

## **5. Risk Leadership and accountability**

- 5.1. Robust governance structures will be maintained to ensure the identification, management and oversight of IJB / strategic risks and Partnership / operational risks. This governance structure will incorporate the ongoing development of relationships with Renfrewshire Council and NHS Greater Glasgow and Clyde risk management colleagues. The current governance structure is set out in the diagram below:



5.2. Specific roles and responsibilities within the risk management governance structure set out above are detailed in the following table:

Stakeholder(s)	Roles and Responsibilities
Integration Joint Board (IJB) Audit, Risk and Scrutiny Committee	<p>On behalf of the Integration Joint Board, the Audit, Risk and Scrutiny Committee is responsible for:</p> <ul style="list-style-type: none"> <li>Oversight of the IJB's risk management arrangements.</li> <li>Receipt and review of reports on IJB / strategic risks and any key operational / partnership risks that require to be brought to their attention.</li> <li>Ensuring they are aware of any risks linked to recommendations from the Chief Officer concerning new priorities, policies and other relevant activities.</li> <li>Agreeing, with the IJB Chair and Vice Chair, any necessary changes to risk management arrangements in exceptional circumstances.</li> </ul>
Chief Officer	<p>The Chief Officer has overall accountability for the IJB's risk management framework, ensuring that suitable and effective arrangements are in place to manage the risks relating to the functions within the scope of the IJB. The Chief Officer will keep the Chief Executives of the IJB's partner bodies informed of any significant existing or emerging risk that could seriously impact the IJB's ability to deliver the outcomes of the Strategic Plan or upon the reputation of the IJB.</p>
Chief Finance Officer (CFO)	<p>The Chief Finance Officer (CFO) will be responsible for promoting arrangements to identify and management key business and financial risks, risk mitigation and insurance.</p> <p>The CFO will also be responsible for financial decisions relating to the IJB's risk management arrangements.</p>
Senior Management Team	<p>The Head of Strategic Planning and Health Improvement is responsible for:</p>

	<ul style="list-style-type: none"> <li>• Working with the Chief Officer and Chief Financial Officer in fulfilling their risk management responsibilities.</li> <li>• Arranging professional risk management support, guidance and training from partner bodies.</li> <li>• Supporting the Senior Management Team's receipt and review of regular risk reports on strategic, shared and key operational risks and escalating any matters of concern to the Audit, Risk and Scrutiny Committee.</li> <li>• Ensuring that the standard procedures set out in section four of this strategy are actively promoted across the services areas within the remit of the IJB.</li> </ul>
Operational Heads of Service	<p>In support of the above role of the Senior Management Team and the Head of Strategic Planning and Health Improvement, Operational Heads of Service are responsible for:</p> <ul style="list-style-type: none"> <li>• The identification of emerging partnership / operational risks and ongoing assessment and mitigation of these in line with assigned risk ownership.</li> <li>• Regular review of partnership / operational risks through the Operational Heads of Service group and core service governance groups, and provision of regular reports to the wider Senior Management team via agreed arrangements for reporting with the Head of Strategic Planning and Health Improvement.</li> <li>• Identification and escalation of partnership / operational risks to the wider Senior Management Team for consideration and inclusion within the IJB / strategic risk register as appropriate.</li> </ul>
Recovery and Renewal (Transformation) Governance	<p>The steering group(s) overseeing transformation activity are responsible for:</p> <ul style="list-style-type: none"> <li>• Ensuring risks identified at a project and programme level are consistently identified and monitored.</li> <li>• Enabling the identification of dependencies and overlap of risks between ongoing projects.</li> <li>• Providing overall risk management oversight and ensuring emerging strategic risks from transformational activity are escalated to the Audit, Risk and Scrutiny Committee.</li> </ul>
Core service governance groups	<p>Core groups are in place to ensure the safe and effective delivery of services within the remit of the IJB. They have responsibility for ensuring relevant risks are identified, managed and escalated as appropriate across the following areas:</p> <ul style="list-style-type: none"> <li>• Clinical and Care Governance</li> <li>• Health and Safety</li> <li>• Property and Accommodation</li> <li>• Information Management and Governance</li> </ul> <p>These groups liaise with the IJB's partner organisations on an ongoing basis to ensure the appropriate application of relevant</p>

	NHS Greater Glasgow and Clyde and Renfrewshire Council policies.
Individual Risk Owners	<p>It is the responsibility of each risk owner to ensure that:</p> <ul style="list-style-type: none"> <li>• Risks assigned to the them are analysed in keeping with the agreed risk matrix.</li> <li>• Data on which risk evaluations are based are robust and reliable so far as possible.</li> <li>• Risks are defined clearly to make explicit the scope of the challenge, opportunity or hazard and the consequences that may arise.</li> <li>• Risk is reviewed not only in terms of likelihood and impact of occurrence but takes account of any changes in context that may affect the risk.</li> <li>• Controls that are in place to manage the risk are proportionate to the context and level of risk.</li> <li>• Wider risks are regularly reviewed to ensure linkages are identified and managed from an early stage.</li> </ul>
All persons working under the direction of the IJB	<p>Risk management should be integrated into daily activities with everyone involved in identifying current and potential risks where they work. Individuals have a responsibility to make every effort to be aware of situations which place them or others at risk, report identified hazards and implement and maintain safe working practices within their service areas. This approach requires everyone to understand:</p> <ul style="list-style-type: none"> <li>• The risks that relate to their roles and activities.</li> <li>• How their actions relate to their own safety and that of their patients, service users, clients and the public.</li> <li>• Their accountability for particular risks and how they can manage them.</li> <li>• The importance of flagging up incidents and/or near misses to allow lessons to be learned and contribute to ongoing improvement of risk management arrangements.</li> <li>• That good risk management is a key part of the IJB's culture.</li> </ul>
Partner Bodies	<p>It is the responsibility of relevant specialists from the partner bodies (such as internal audit, clinical and non-clinical risk managers and health and safety advisers) to attend meetings as necessary to consider the implications of risks and provide relevant advice. It is the responsibility of the partner bodies to ensure they routinely seek to identify any residual risks and liabilities they retain in relation to the activities under the direction of the IJB.</p> <p>There is a joint responsibility on the IJB, Renfrewshire Council and NHS Greater Glasgow and Clyde to ensure partnership working as part of risk management. This includes engagement with the relevant risk officers and participation within current and future risk governance structures:</p>

	<ul style="list-style-type: none"> <li>• For Renfrewshire Council, this will be the Council's identified Risk Manager and the Corporate Risk Management Group.</li> <li>• For NHS Greater Glasgow and Clyde, this will be through Civil Contingencies governance structures.</li> </ul>
Senior Information Risk Owner	Responsibility for this specific role will remain with the individual partner bodies.

## 6. Risk management resourcing and capability

- 6.1. Much of the work on developing and leading the ongoing implementation of the risk management framework for the IJB will be resourced through the governance arrangements set out in 5.1 above.
- 6.2. Financial decisions in respect of the IJB's risk management arrangements will rest with the Chief Finance Officer.
- 6.3. Where risks impact on a specific partner body and new risk control measures require to be developed and funded, it is expected that the costs will be borne by that partner organisation.
- 6.4. To effectively implement this policy and strategy, it is essential for people to have the competence and capacity for managing risk and handling risk judgements with confidence, to focus on learning from events and past experience in relation to what has worked well or could have been managed better, and to focus on identifying malfunctioning 'systems' rather than people.
- 6.5. Training is an important element of this and is essential in embedding a positive risk management culture across all activities under the direction of the IJB and in developing risk management maturity. The Senior Management Team will regularly review risk management training and development needs and source the relevant training and development opportunities required.
- 6.6. Notwithstanding the above, wherever possible the IJB will ensure that any related risk management training and education costs will be kept to a minimum, recognising that the majority of risk-related courses/ training can be delivered through resources already available to the IJB (the partner body risk managers/ risk management specialists).

## 7. Monitoring activity and performance

- 7.1. The IJB operates in a dynamic and challenging environment. This has been reinforced by the COVID-19 pandemic and its resultant impact on service delivery models across health and social care. A suitable system is required to ensure risks are monitored for change in context and scoring so that appropriate response is made. This system also needs to be flexible to enable a robust and effective response to exceptional circumstances.
- 7.2. Oversight of risk management activity will be undertaken through regular review of the IJB's risk profile at Senior Management Team level. Monitoring of the risk profile will be undertaken on a quarterly basis unless additional risk management measures have been implemented to increase this frequency within certain circumstances.

- 7.3. It is expected that partner bodies will use IJB risk reports to keep their own organisations updated on the management of identified risks, highlighting and IJB risks that might impact on the partner organisation.
- 7.4. Measuring, managing and monitoring risk management performance is also key to the effective delivery of objectives. This will include regular monitoring of (i) the number of risks which materialise (become issues); (ii) the number of risks closed; and (iii) the actual severity of the risks against previous assessments.
- 7.5. Key risk indicators (KRIs) will be linked where appropriate to specific risks to provide assurance of the performance of certain control measures. For example, specific clinical incident data can provide assurance that risks associated with the delivery of clinical care are controlled, or, budget monitoring performance indicators can provide assurance that key financial risks are under control.
- 7.6. Performance data linked to the Strategic Plan will also inform the identification of new risks or highlight where existing risks require more attention.
- 7.7. The IJB's risk management arrangements will be reviewed on a regular basis as part of a 'Plan, Do, Study, Act' review cycle to ensure the IJB's risk management priorities and activities are robust. This will inform subsequent revisions of this policy and strategy and drive continuous improvement in risk management across the IJB.

## **8. Communicating risk management**

- 8.1. Effective communication of risk management information is essential to developing a consistent and effective approach to risk management.
- 8.2. Copies of this policy and strategy will be widely circulated via the Senior Management Team to service managers and will form the basis of any risk management training arranged by the IJB.
- 8.3. Implementation of this policy and strategy will be supported by the development of additional guidance for staff within the HSCP, setting out their roles and responsibilities in supporting the management of risk across the organisation, and providing clear guidance on how they can raise risks through their service management arrangements.
- 8.4. The communication of this policy and strategy will be included within existing and future iterations of the partnership's Communication and Engagement Strategy.
- 8.5. The Policy and Strategy (version 3.0) will be submitted to the Integration Joint Board Audit, Risk and Scrutiny Committee for approval at its meeting of 12 March 2021.
- 8.6. This policy and strategy will be reviewed regularly to ensure that it reflects current standards and best practice in risk management and fully reflects the IJB's business environment.

**Appendix 1**  
**Renfrewshire Integration Joint Board**  
**Risk Register**

**Introduction and Background**

This document has been prepared to support Renfrewshire Integration Joint Board (IJB), and members of the IJB’s Audit, Risk and Scrutiny Committee, in the application of the IJB’s Risk Management Policy and Strategy. It sets out those Strategic Risks currently identified which have the potential to prevent the IJB from achieving its desired outcomes and objectives, and the mitigating actions put in place to manage these risks. **Further information on the IJB’s approach can be found in Renfrewshire IJB’s Risk Management Policy and Strategy.**

**Approach to assessing risks**

All risks identified are assessed considering (i) the likelihood of the risk materialising; and (ii) the consequent impact of said risk should it materialise. To reflect the range of eventualities this assessment provides a score of between 1 and 5 for each of these criteria (where 1 is least likely and low impact, and 5 is very likely and very high impact). This enables each risk to be provided an overall score where the likelihood and impact ratings are multiplied together, and a RAG (Red, Amber, Green rating applied) as per the matrix below. Risk scores guide the IJB’s response to particular risks identified.

Likelihood	Consequent Impact				
	1	2	3	4	5
5	5	10	15	20	25
4	4	8	12	16	20
3	3	6	9	12	15
2	2	4	6	8	10
1	1	2	3	4	5

**Renfrewshire IJB**  
**Current Risk Summary**

Risk Ref	Risk Type	Summary Description	Current Risk Score and RAG Rating	Movement



## Renfrewshire IJB Risk Register

### 01. e.g. Financial Sustainability

Risk Code and Title	Risk Statement	Owned by	Current Risk Control Measures	Previous Likelihood Score	Previous Impact score	Previous Evaluation
				04	04	16
Context				Current Likelihood	Current Impact	Current Evaluation
				02	04	08
Movement						
Increase / Decrease / No change						
Risk Management Approach						
Terminate / Treat / Transfer / Accept						
Action codes	New Actions			Assigned to	Date	Status
Action codes	Existing actions	Update		Assigned to	Date	Status