



Failure to deliver an effective Public Health function and secure benefits from wider integration with the Council resulting in adverse impact on citizen wellbeing

The risk is scoped around delivering the Public Health function and statutory responsibilities while securing benefits through implementing wider integration of the service/resources with the Council.

Threat Assessment Matrix

		Impact (I)				
		Negligible (1)	Minor (2)	Moderate (3)	Major (4)	Extreme (5)
Likelihood (L)	Remote (1)	1	2	3	4	5
	Unlikely (2)	2	4	6	8	10
	Possible (3)	3	6	9	12	15
	Likely (4)	4	8	12	16	20
	Almost certain (5)	5	10	15	20	25

Owner:	C. Kenny, Dir Public Health					Completed by:	C. Gavigan, Business, Governance & Quality Specialist					Date completed:	Mar 2014	Review date:	Jun 2014
RISK SUMMARY															
Opening (Mar 14)			Previous (N/A)			Current (Mar 2014)			Target (April 15)			Overall risk mitigation effectiveness (Adequate, Yet to secure improvement, Inadequate)			
Threat level (LxI=??)		DoT	Threat level (LxI=??)		DoT	Threat level (LxI=??)		DoT	Threat level (LxI=??)						
3	3	9	L	I	N/A	↓ Improving ↔ Stable ↑ Deteriorating	3	3	9	↓ Improving ↔ Stable ↑ Deteriorating	2	3	6	Yet to secure improvement	

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RISKS TO BE MANAGED																					
Risk Ref.	Risk Description (cause, risk & impact)	Date identified	Identified by	Risk owner	Proximity (date when could impact)	Opening Threat Level e.g. 2x4=8			Previous Threat Level e.g. 2x4=8			Latest Threat Level e.g. 2x4=8			DoT (↓ Improving ↔ Stable ↑ Deteriorating)	Target Threat Level e.g. 2x4=8			Proposed Mgt Action	Risk mitigation effectiveness (Adequate, Yet to secure improvement,	Status (Raised, Open, Closed)
1	Sexual Health - Contracts within Sexual Health are demand led/tariff based. Unanticipated uptake could increase costs impacting the PH budget and other services	24/03/14	SLT	AC		4	2	8	L	I		4	2	8	↔	4	2	8	Tolerate	Adequate	Open
2	Substance Misuse (Drugs and alcohol) - Contracts are demand led/tariff based. Unanticipated uptake could increase costs impacting the PH budget and other services	24/03/14	SLT	BB		3	3	9	L	I		3	3	9	↔	3	3	9	Tolerate	Adequate	Open
3	Health checks - The implementation of national 5 year rolling programme is a statutory requirement. Uncertainty exists around the level of uptake and the cost of the programme with the potential to impact PB budget and other services	24/03/14	SLT	JT		2	2	4	L	I		2	2	4	↔	2	2	4	Tolerate	Adequate	Open
4	Infection Control/Prevention - changes to service budgets to realign the PH grant could impact service delivery for infection control	24/03/14	SLT	JG		2	2	4	L	I		2	2	4	↔	2	2	4	Tolerate	Adequate	Open
5	Winter Warmth - changes to service budgets to realign the PH grant could impact service delivery for winter warmth	24/03/14	SLT	MC		2	2	4	L	I		2	2	4	↔	2	2	4	Tolerate	Adequate	Open
6	School Nursing Children 5-19 - The provider is currently recruiting to vacant posts and this could potentially impact on the school nursing service	24/03/14	SLT	LM		4	2	8	L	I		4	2	8	↔	4	2	8	Tolerate	Adequate	Open
7	Public Health Budget Realignment - the risk is the realignment of Public Health grant services could result in commissioned services which are not as effective in supporting the PH agenda as existing providers	24/03/14	SLT	JC/AC		3	3	9	L	I		3	3	9	↔	3	3	9	Tolerate	Adequate	Open
8	Public Health Efficiency Savings - Realignment of Public Health grant depends on securing money from existing services. Most of this will come from efficiencies within current services, or services coming to a natural end. The risk is not securing the money for reallocation impacting the PH budget and other services	24/03/14	SLT	JC/AC		2	3	6	L	I		2	3	6	↔	2	3	6	Tolerate	Adequate	Open

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9	Tobacco - number of smoking quitters has reduced over the last couple of years, possibly due to the introduction of e-cigs. Current service provider not able to offer these so risk is potential inability to achieve smoking quitter targets	24/03/14	SLT	JT		2	2	4	L	I		2	2	4	⇔	2	2	4	Tolerate	Adequate	Open
10	Dental - currently in discussion with Provider over new service specification; potential risk is the ability to implement the new service changes	24/03/14	SLT	LM		2	1	2	L	I		2	1	2	⇔	2	1	2	Tolerate	Adequate	Open
11	Clinical Governance - Failures in commissioning or contract management could leave the Council open to financial liability	24/03/14	SLT	JC		2	4	8	L	I		2	4	8	⇔	2	4	8	Tolerate	Adequate	Open

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EXISTING MANAGEMENT ACTIONS				ADDITIONAL MANAGEMENT ACTIONS			ALL
Risk Ref.	Issue Ref.	Description of actions already in place to mitigate the identified risks	Person accountable	Description of additional actions to put in place (mandatory where current risk mitigation effectiveness is "Inadequate")	Person accountable	Date action due to be completed	Review date
1		Proactive Contract Negotiations to reduce the cost basis	AC	Performance monitoring of contracts, to highlight any over/under performance	AC	On going	
2		Drug and alcohol commissioning undertaken by the CDP, who are actively involved in discussions about the PH grant	CDP				
3		Continual active contract management of the Health checks programme to assure costs come within budget	JT				
4		Continual active contract management of the service, to ensure all relevant outcomes are achieved	JG	A new service specification is being developed			
5		Continual active contract management of the service, to ensure all relevant outcomes are achieved	MC				
6		Public Health Consultant lead is working with Citycare to ensure school nursing jobs are actively recruited to and in line with the service specification	LM				
7				Public Health Consultants working closely with NCC departments to ensure Public Health is established across the authority; this includes a Consultant attending each of the DLTs to ensure appropriate PH integration	AC	On going	
8				Public Health Consultants working closely with providers to ensure efficiency savings are achieved, without affecting service delivery	AC	On going	

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9				Service Specification adjusted to reflect efficiency savings - work continuing with the provider to ensure as big an uptake as possible to maximise the achievement of smoking quitter numbers	JT	On going	
10				Work continuing with the provider to agree the specification	LM	On going	
11				Public Health working with Quality and Commissioning, the Legal team and Policy and Performance to ensure policies and agreements are put in place to cover the NCC if the form of Clinical Governance	JC	On going	