

Why do we need to think about risk?

Working in a complex system exposes organisations to a higher degree of risk. Risk of failure inevitably accompanies experimentation and innovation. If there is no risk there is no possibility of significant learning

Traditional risk management provide assurance to partners (through Transformation and Oversight Committee/ Board) that delivery groups and the core team are mitigating against things likely to stop us realising the benefits of the partnership and achieving the objectives of the Sheffield Place Plan.

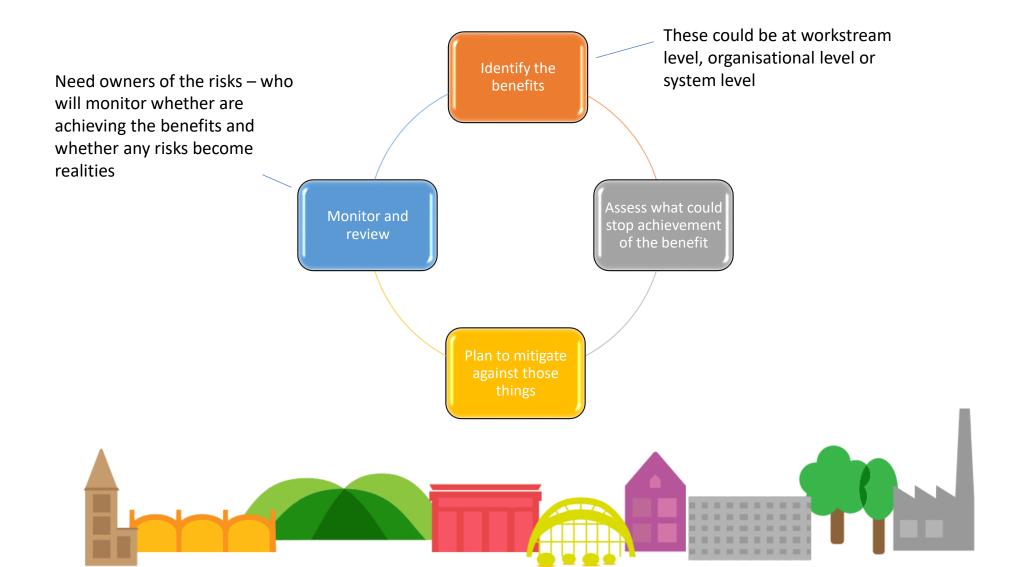
Need a mixed method of risk management

- 1. Identify the benefits (measurable improvements) we are trying to achieve and who will benefit from them (citizens or organisations):
 - Through Sheffield Plan Implementation
 - Through the HCP Priorities and Partnership Work
- 2. Develop a risk register to capture and ACTIVELY manage identified risks to the partnership and programme of work more traditional approach
- 3. Develop adaptive / agile risk management environment across the HCP





Traditional risk management methodologies - to mitigate against "simpler" risks





Example risk register

				tial F Scor					Residual Risk Score					
Risk Reference	Domain	Risk Description	Likelihood	Consequence	Score	Mitigation/ Treatment	Lead Owner of the risk	Source of Risk	Likelihood	Consequence	Score	Date Risk Assessed	Progress/ Update	Date for re- assessment
Discharge	Hor	ne First programme					L						1	
		Unavailability of staff due to Annual Leave and Absence especially in the summer period	4	4	16	Agree staff release with managers and consider revising project timeline			2	2	4			
		Lack of baseline data for benchmarking and monitoring	4	4	16	Manual collection of data and allocating resource to complete this			3	3	9			
		Slippage due to day to day operational pressures and industrial action(s)	4	4	16	Plan project timeline to include slippage. Agree triggers for cancelling meetings			3	3	9			
		Large scope of discharge programme involving all organisations	4	3	12	Review interdependencies and prioritise projects into different phases			2	2	4			
		Sustainability of resourcing for the short and long term duration of the programme	4	4	16	Review resource: operational and financial requirements including viability of continued support from			2	1	2			
		Transition to Cerner may cause operational pressures and delays in work flow	5	5	25	Assurance re transition plan and supportive measures to mitigate any disruption in place (link to STH programme)								
		Transfer to new homecare contract may affect service delivery	4	5	20	Assurance re transition plan and supportive measures to mitigate any disruption in place (link to SCC plan)								
		Demand for care capacity to support hospital discharges continue to outweigh demand	4	5	20	Undertake demand and capacity modelling across the system to provide commissioning intelligence Discharge event in September to identify blockages and help unblock them			2	1	2			





Adaptive risk management

Complex system lack predictability. Unlike in rational ordered systems (i.e. non complex/highly certain) a complex system is constrained by the unpredictability of its inter dependent relationships.

The nature of a complex system is that even subtle changes are bound to ripple and amplify from relationship to relationship until shifts are experienced further downstream.

This means that in a complex system we cannot effectively forecast or predict what will happen next with any level of consistency. There far too many variables and moving parts. Therefore traditional linear risk management methodologies are not enough.

Need our staff/team and organisations to proactively manage risks through their behaviours and attitudes:

- Accepting risk as a necessary part of transformation and change
- Developing resilience
- Promoting collaboration collaboration and communication across different departments and levels of an
 organization are vital in adaptive risk management. This ensures that information flows efficiently and that a
 coordinated response can be implemented when needed
- establishing agility
- integrating common effort





We will identify Place risks on three levels;





Next Steps

- 1. Support delivery groups to develop:
 - Benefits Maps
 - Risk logs
 - Assess for commonality across workstreams and trends
- 2. Develop regular reporting mechanisms and escalation processes to take account of the above
- 3. Link to workforce strategy and leadership development programme of work
- 4. Establish a feedback loop for continuous improvement. Solicit input from all stakeholders, including patients and staff, to refine your risk management processes over time

